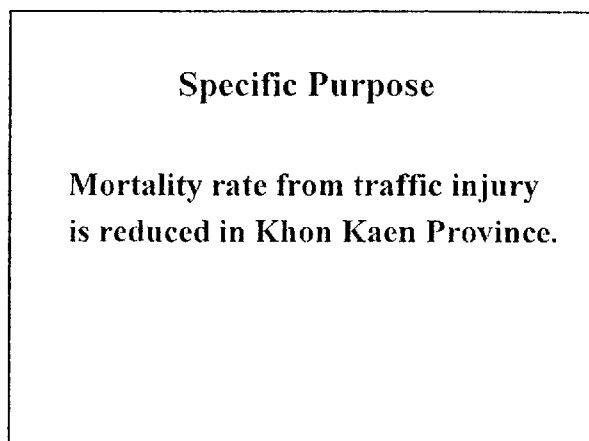
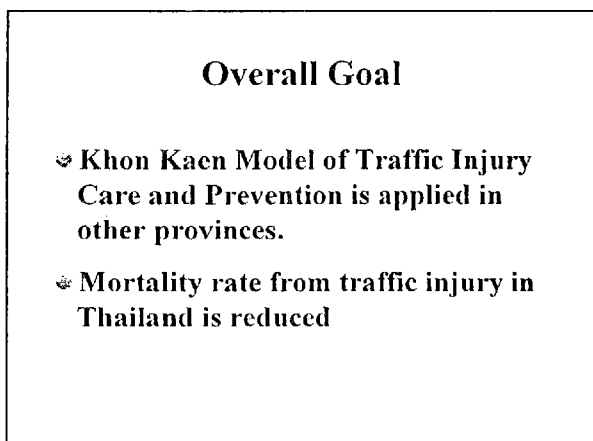
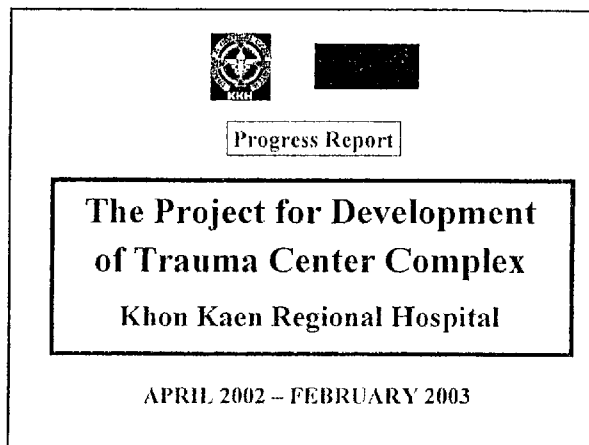
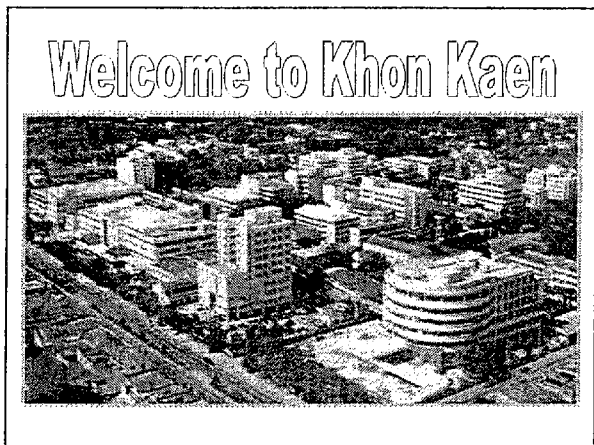


4. 成果別活動実績2 (タイ側プレゼンテーション資料)



Scope of the Project

- Subproject 1 Trauma Service
- Subproject 2 Pre-hospital Care
- Subproject 3 Injury Prevention
- Subproject 4 Injury Training Center
- Subproject 5 Injury Research Center
- Subproject 6 Model Generalization

Subproject 1 (Trauma Service)

Activities in 2000 - 2001

- Set up risk management system
- Set up monitoring system
- Set up performance indicators
- Set up communication system
- Set up MIS
- revise CPG
- revise mass casualty preparedness plan

Subproject 1 (Trauma Service)

Activities in 2000 - 2001

- Quality improvement in ER
- Auditing activities in resuscitation unit in ER
- Mass casualty practice
 - before annual academic conference of MOPH
- Rehearsal for patient transported by helicopter

Subproject 2 Pre hospital care

Activities in 2000 - 2001

- PR on 1669 – 1st aid
- set CCC
- set up substation
- improve quality of personnel
- produce guideline for function of EMS

Subproject 2 Pre hospital care

Activities in 2000 - 2001

- Improvement of substation's performance
- Total coverage of EMS in Khon Kaen province
- Improvement of personnel in district level

Subproject 3 Traffic injury prevention

Activities in 2000 - 2001

- carry out PR program
- maintain activities of provincial safety committee
- training drivers, community leaders
- injury prevention program in 12 schools
- safety campaign during new year and SongKran
- Drunk driving campaign

Subproject 3 Traffic injury prevention

Activities in 2000 - 2001

- **Education**
 - expand campaign via PR
 - training student, boy scout, community leaders
 - traffic injury prevention activities in school

Subproject 3 Traffic injury prevention

Activities in 2000 - 2001

- **Environment improvement**
 - hazardous location improvement
 - enhancing activities of provincial traffic control committee
- **Enforcement**
 - Helmet – seat belt campaign
 - Drink driving campaign

Subproject 4-1 Training center

Activities in 2000 - 2001

- set up training center
- 90 course, 2464 trainees

Subproject 4-1 Training center

Progress activities in 2002

- 36 course, 920 trainees
- International training program for injury surveillance for WHO – SEARO
- Research on effect of CPR training on outcome of CPR

Subproject 4-2 Research center

Activities in 2000-2001

- set up research supporting system
- Human resource development
- Annotate bibliography

Activities in 2002

- Research on community perception of KK-EMS
- Injury Research bulletin

Subproject 5

Activities in 2000 - 2001

	2000	2001	2002
Speaker	14	17	24
Consultant	4	2	3
Visitation	20	13	11
Reports	9	14	20
PR printing materials (type)	19	-	2
VDO	-	4	-
Radio program	-	2	1
Cut out	-	2	4
Traffic signs	-	91	114
National seminar	1	1	1
Task force meeting	1	1	1
Directorate board meeting	1	1	1

Progress Report

Subproject 1 : Trauma service 2002

Activities 2000 - 2001

- Set up RM
- Set up the project evaluating system
- Set up the communication system
- Set up MIS
 - Trauma registry
 - Emergency registry
 - Mapping
- Revise CPG in ER and the referral
- Revise mass casualty preparedness plan

Activities 2002

- Quality improvement in ER
- Process audit in resuscitation unit in ER
- Mass casualty guideline at scene
- Mass casualty practice
- Practice in patients transported by helicopter
- KKU cooperation

1. Quality Improvement in ER

Time spent in ER more than 2 hours for the admitted case

2001	Apr	May	Jun	Jul	Aug	Sep	Oct
%	5.7	7.1	6.0	9.0	7.3	8.1	7.3

Mean = 8.4 %



1. Quality Improvement in ER

Situation Analysis

- delayed in registration
- delayed in triage
- delayed in initial treatment
- delayed in consultation
- delayed during meal break
- delayed during investigation
- delayed during admission

1. Quality Improvement in ER

System Modification

- Changing system in registration
- Set up the triage nurse
- Provide medical staff at ER
- Revise the consultation system
- Revise the guideline for investigation
- Revise the system for admission

Outcome

Before (2001)

	Apr	May	Jun	Jul	Aug	Sep	Oct
%	5.7	7.1	6.0	9.0	7.3	8.1	7.3

Mean = 8.4%

After

	2001		2002					
	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
%	5.5	5.5	4.3	4.6	4.1	5.0	5.2	5.3

Mean = 5.6%

2. Process Audit in Resuscitation Unit in ER

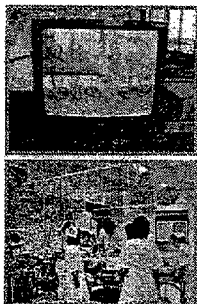
Objective

- To improve the quality of resuscitation in resuscitation unit in ER

2. Process Audit in Resuscitation Unit in ER

Method

- Set up the VDO monitor
- Set up the protocol to assess the activities in resuscitation unit
- Auditing
- Analysis



3. Mass Casualty Guideline at Scene

Main Point

- Commander
- Communication System
- Job of team
- Traffic control



Mass casualty Practice
9 August 2002

4. Practice in patients transported by helicopter (2 December 2002)



5 KKU cooperation in Trauma care and Referral

- 1 Aug 2002 Meeting with Dean of Faculty of Medicine and Director of KKU hospital
- 30 Jan 2003 Group seminar with Staff of Department of surgery ; Faculty of Medicine

Outcome

Dead rate by severity

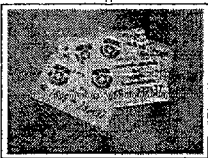
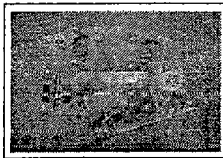
Ps \ year	1998	1999	2000	2001	2002
0 - 0.25 (%)	80.3	72.7	73.0	67.6	70.0
0.25 - 0.5 (%)	71.7	61.1	65.8	59.8	58.1
0.5 - 0.75 (%)	49.1	41.5	49.2	43.9	35.5
0.75 - 1 (%)	3.1	1.9	2.6	2.6	2.6


Output 2

Pre-hospital care

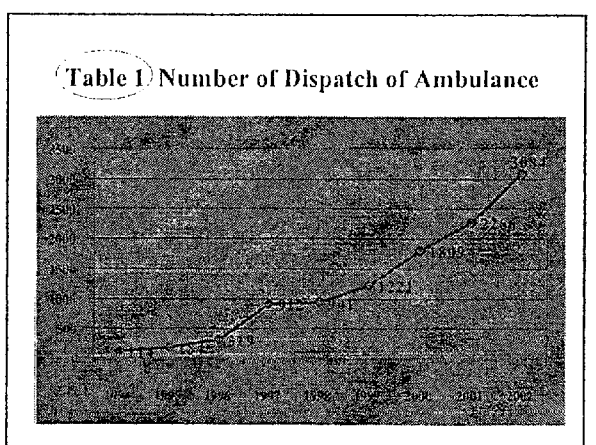
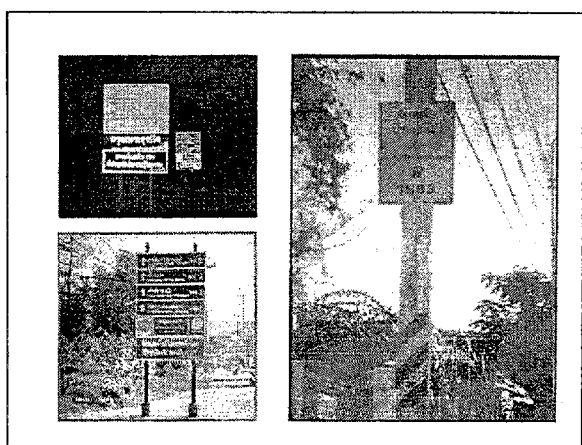
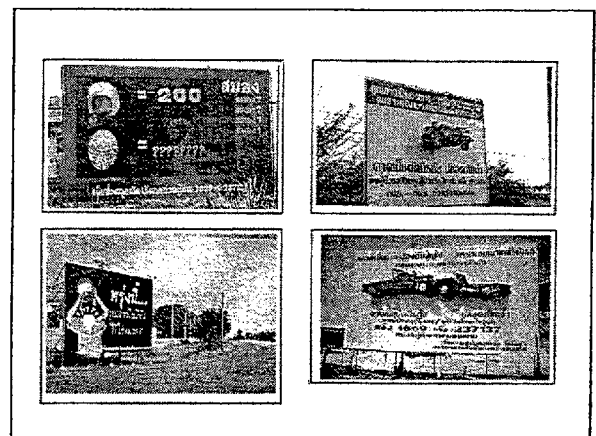
Pre-hospital care




- Public Relation
- Command Control Center
- Substation
- Training
- EMS & Volunteer guideline
- District-level Pre-hospital care



Input	Process	Output	Outcome	Impact
(1) Public relation Activity in 2000				
(2) Public relation committee	(1) Committee meeting	(4) 4 meeting		
	(2) Making media	(50,000) EMS cards		
		(10,000) EMS folder		
				

Input	Process	Output	Outcome	Impact
	(1) Implement	(1) Inside hospital PR		
		(2) Outside hospital PR (132 place)	(1) 43% know EMS net work	(1) 90% want to be EMS
		-17 schools	-16 hotels	98% want to be trained
		-31 public sector	-32 Private sector	27% Full time nurse
		-21 restaurant	-5 shopping malls	43% First aid room
		-3 BANKS	-6 PR Station	
		-1 temple		

Input	Process	Output	Outcome	Impact
Activity in 2001	Include into the part of PR in Output 3			



Input	Process	Output	Outcome	Impact
CCC Activity in 2001	<ul style="list-style-type: none"> ☐ Set up Command Control room ☐ Survey highway NO. 2 (From Pon TO Kausankhwang district) 	 <p>Map of public station beside the highway</p> <ul style="list-style-type: none"> -11 Police station -4 hospital -10 public health station 	 	

Input	Process	Output	Outcome	Impact
	<ul style="list-style-type: none"> ☐ Committee meeting To prepare the Highway Pre-hospital 	<ul style="list-style-type: none"> ☐ 1 meeting ☐ 200 boards to Promote 1669 beside The highway No.2 	 	

Input	Process	Output	Outcome	Impact
Activity in 2002	<ul style="list-style-type: none"> ☐ Meeting with director Of every district hospital ☐ Prepare for survey Highway No.12 (from Chumpae to Chingyea) 	<ul style="list-style-type: none"> ☐ 2 meeting ☐ Assign KKH As CCC of KK provice ☐ Start on october, 2002 		






Input	Process	Output	Outcome	Impact
3. Substation Activity in 2001	<ul style="list-style-type: none"> ☐ Committee meeting ☐ Set up substation at Samaran Public Health Center ☐ Implementation 	<ul style="list-style-type: none"> ☐ 1 meeting ☐ Set up Communication system ☐ 1 Ambulance 1 EMT ☐ Start on Dec. 2001 	 	



Table 2) Number of Dispatch of Ambulance of Samran substation

NO of dispatch	01					02							
	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Sep	Dec
	28	34	36	55	38	35	43	35	37	31	30	32	25

Table 3) Number of total Ambulance dispatch 2002

	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Sep	Dec
KKH Station	210	186	209	223	200	208	256	226	215	219	216	258
Samran Station	34	36	55	38	35	43	35	37	31	30	32	25
Total	244	222	264	261	235	251	291	263	246	249	248	283
Per day	8.1	7.4	8.8	8.7	7.8	8.4	9.7	8.8	8.2	8.3	8.3	9.4

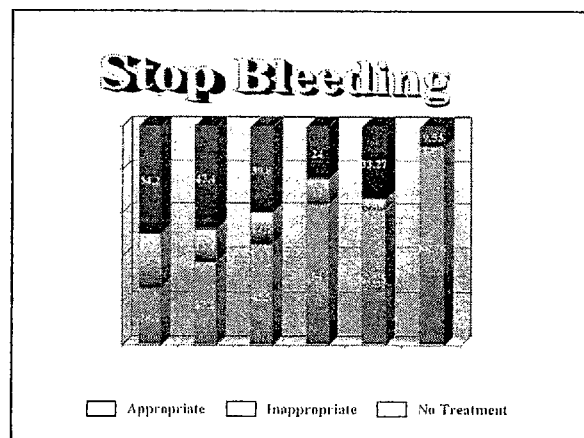
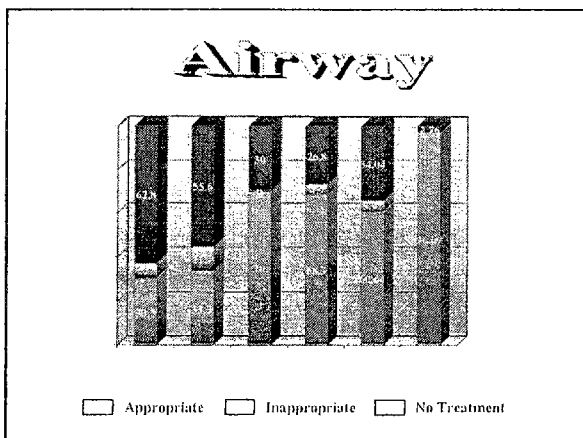
Input	Process	Output	Outcome	Impact
④ Training Activity in 2000 	③ Training course for EMT by Expert from JAPAN 	③ 3. Training course 		

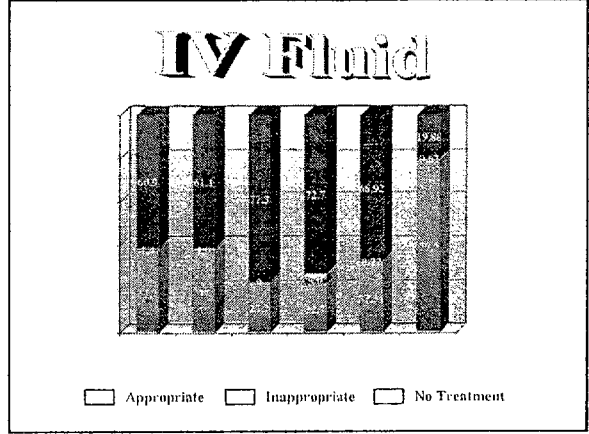
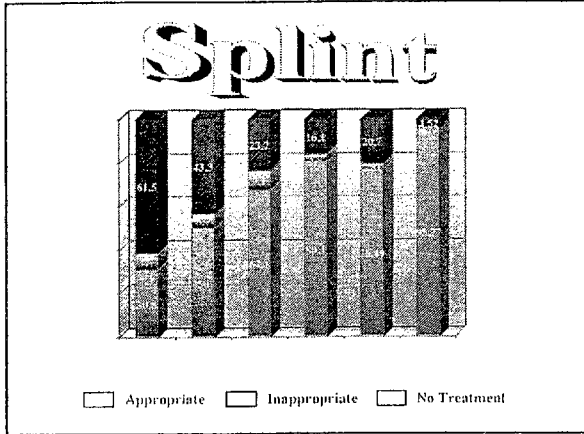
Input	Process	Output	Outcome	Impact
	③ Training course for Emergency Nurse  ③ Training course for Volunteer 	③ 2. Training Course (38 participants) ③ 4. Training Course (108 participants)		


Input	Process	Output	Outcome	Impact
Activity in 2001				
	<p>☐ Include into the part of Training in output 4</p>			

Table 5 Results of evaluation of treatment by EMT

	Appropriate					Inappropriate					No Treatment				
	98	99	00	01	02*	98	99	00	01	02*	98	99	00	01	02*
Air way	33.33	70.0	68.29	61.29	96.69	11.11	0	4.88	5.38	0.55	55.56	30	26.83	33.33	2.76
Stop bleeding	37.23	45.54	63.95	61.48	88.76	15.43	14.33	2.02	5.5	1.69	47.34	39.73	24.03	33.02	9.85
Splint	30.0	67.18	80.45	76.41	95.27	6.67	9.16	3.38	2.82	0.22	43.33	23.66	16.17	20.77	4.52
IVF	37.04	32.73	32.73	32.31	79.50	1.85	0	4.55	0.77	0.62	61.11	77.27	72.73	66.93	19.80





Input	Process	Output	Outcome
5. EMS & Volunteer guideline Activity in 2000 ☐ Committee	☐ Evaluation of pre-hospital Care of the volunteer ☐ Making guideline for Pre-hospital care in KK province ☐ Provincial EMS committee meeting	 ☐ 1 meeting	


Input	Process	Output	Outcome
Activity in 2001 ☐ Implementation ☐ It will be started together with the pilot project of EMS development on October, 2002	Activity in 2002 ☐ Making guideline for EMT in Disaster		

Table 6 Results of evaluation of treatment by Volunteer

Air way	0	0	0	0	13.04	0	0	0	5.41	13.04	100	100	100	94.59	73.91
Stop bleeding	2.58	5.55	3.16	6.28	41.00	6.96	7.41	9.65	7.87	6.33	90.46	87.0	77.19	75.85	52.67
Splint	9.46	9.35	34.75	27.45	52.25	9.00	14.39	7.19	2.42	7.21	61.53	76.26	65.36	60.13	40.54
IV	0	0	0	0	0	0	0	0	0	0	100	100	100	100	100

6. District-level pre-hospital care Activity in 2002			
⊗ Provincial EMS committee	⊗ Committee meeting	⊗ 3 meeting	⊗ Marking rule and regulation
		⊗ Assign KKH as CCC of kk province	⊗ Set up training course for personal of district hospital

District level Pre-hospital care

National policy : Pilot project of EMS development

Start on October, 2002



Subproject 3

Traffic Injury Prevention

Objectives

- ◆ Rise the general awareness for injury prevention
- ◆ Promote helmet and seat belt use
- ◆ Minimize traffic injury problem

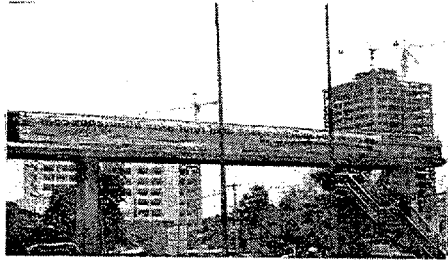
Activities

1. Education
2. Environment Improvement
3. Law Enforcement

EDUCATION

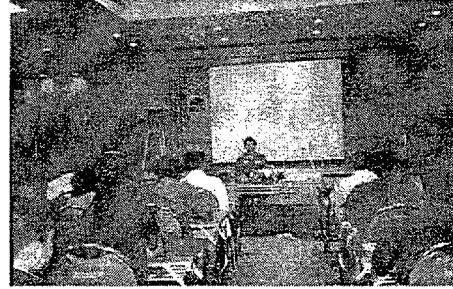
- Public Relation
- Education and Training

1. Produce Media for Traffic Injury Prevention



Public relation board for traffic injury prevention

Training for member of safety network



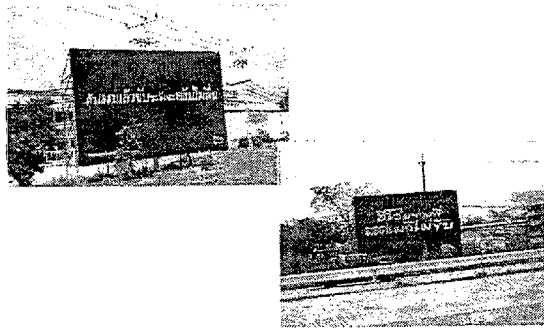
**Training
for announcer of village news distributing tower**



2. Press conference



3. Public relation board on the main road



4. Traffic Injury Prevention Campaign during Festival

- Public relation and education
- Law enforcement by alcohol checkpoint

4.2 Traffic Injury Prevention Campaign during Festival

Injury and Death Rate from Traffic Injury During Festival 12 – 16 April 2002

	2001	2002
Injury Rate	51.3	53.8
Death Rate	1.37	0.63

(per 100,000 population)

4.1 Traffic Injury Prevention Campaign during New Year Festival

Injury and Death Rate from Traffic Injury During New Year Festival 28 December 2001- 2 January 2002

	2001	2002	2003
Injury Rate	61.7	50.7	57.1
Death Rate	1.2	1.3	0.9

(per 100,000 population)

Education and Training

for

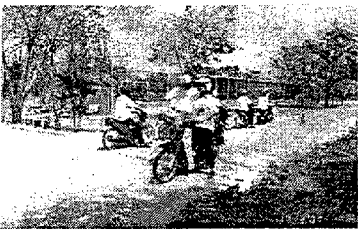
Student and Community Volunteers

Injury Prevention Training at Khon Kaen Hospital

4100 students attended
the training.



Riding Training



2000 students
attended
the training

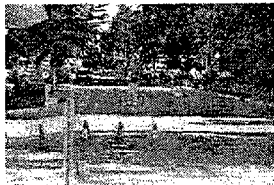
Boy Scout Training

1,000 boy scouts from 12 schools attended the training



Traffic Injury Prevention in School

Traffic management
in school



Exhibition in school

Evaluation

Injury Rate from Traffic Accident in Students 2000-2001

School	2000		2001	
	Total No. of Student	No. of Injured Student	Total No. of Student	No. of Injured Student
Northeastern Technology College	8,700	75 (0.9%)	8,200	51 (0.6%)
Khon Kaen Business College	1,514	12 (0.8%)	1,950	7 (0.4%)
Kaennakorn Witayalai	3,678	70 (1.9%)	3,979	51 (1.3%)

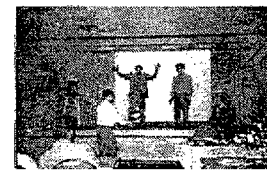
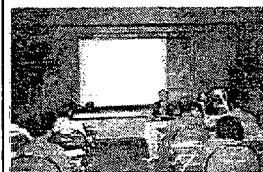
Training for Community Volunteer

Objective

- Motivate volunteer to be aware of the seriousness of traffic injury
- Create the cooperation of community volunteer for the injury prevention

Safe Community

Injury Prevention Training for Volunteer



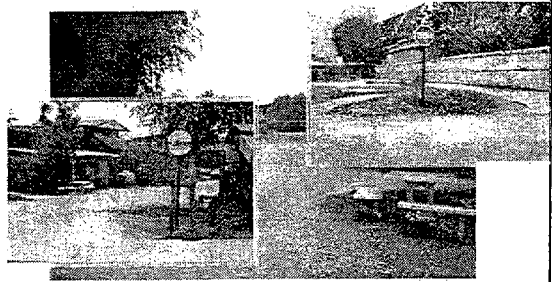
Safe Community

Brain storming
for improving hazardous location by villager



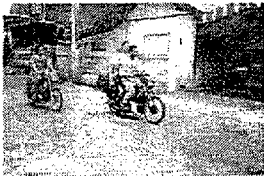
Safe Community

Hazardous Location Improvement



Safe Community

Survey behavior of road user in the villages by
recording video and interviewing villagers in
1,738 households in January 2002



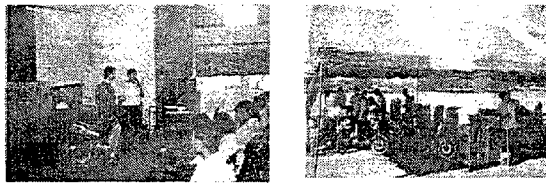
Safe Community

Present the outcome of survey to the villagers
and brainstorm for solving problem



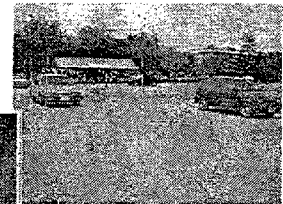
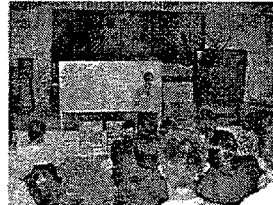
Safe Community

- Riding training at Ban Tum on 13 July 2002 and Samran on 12 Aug 2002
- 200 villagers attended the training.



Safe Community

272 people attended the training and examination for driving license



Injury prevention campaign during Festival



Evaluation

The villagers' behavior was observed by recording the VDO tape. The evaluation was done by comparing the risk behavior of the villagers before after implementation. The results revealed that the rate of risk behavior reduced.

- 1 Ban Samran Village
- 2 Ban Tum Village

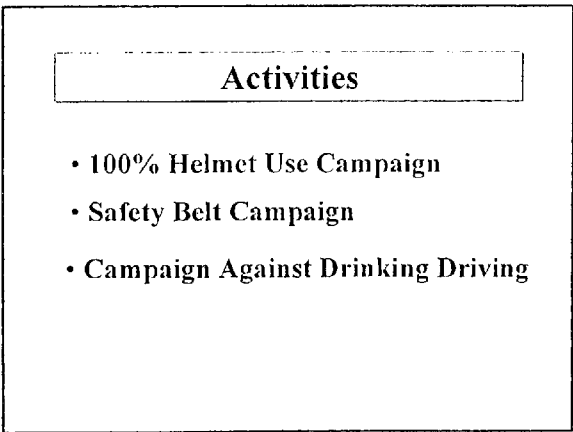
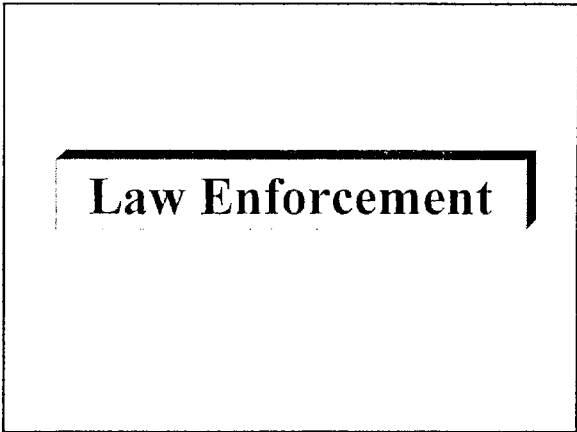
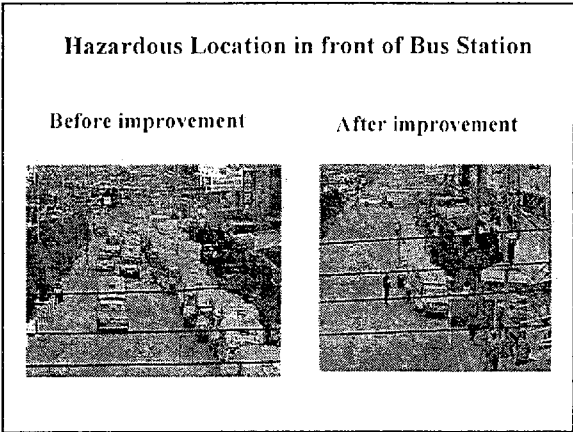
Risk Behavior	Before implementation January 2002 (%)	After implementation January 2003 (%)
Without wearing helmet (MC Rider)	73.3	69.8
Without wearing helmet (MC Passenger)	88.7	83.3
Without using seat belt (Driver)	78.9	70.3
Without using seat belt (Front seat passenger)	88.6	80
Without having the turn indicator light on while making a turn (Motor vehicle driver)	22.1	13
Without having the turn indicator light on while making a turn (MC rider)	37.5	29.3
Drive against the traffic (Motor vehicle driver)	1	0.8
Drive against the traffic (MC rider)	83.4	71.5

Risk Behavior	Before implementation January 2002 (%)	After implementation January 2003 (%)
Without wearing helmet (MC Rider)	77.4	74.1
Without wearing helmet (MC Passenger)	78.3	75.4
Without using seat belt (Driver)	76.5	69.8
Without using seat belt (Front seat passenger)	71.9	70
Without having the turn indicator light on while making a turn (Motor vehicle driver)	7.8	5.3
Without having the turn indicator light on while making a turn (MC rider)	41.7	39.7
Drive against the traffic (Motor vehicle driver)	1	0.8
Drive against the traffic (MC rider)	3.5	2

The injury and death rate of Ban Samram and Ban Tum in 2001 and 2002 was shown in Table. The injury rate of both villages in 2002 increased when comparing with in 2001 but in 2002 there was no villager died from traffic injury.

Village	Injury Rate		Death Rate	
	2001 (%)	2002 (%)	2001 per 1,000 Population	2002 per 1,000 Population
Ban Samram	2.5	1.3	0	0
Ban Tum	1.5	1.1	0.5 (3 people)	0

**Environment
Improvement**



Survey of Helmet & Seat Belt Use in 2001

Safety Helmet Use	
Rider	58.3 %
Passenger	41.4 %

Safety Belt Use	
Driver	42.6 %
Front Seat Passenger	31.2 %

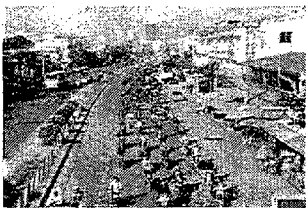
Survey of Helmet & Seat Belt Use in 2001

Cause of not wearing helmet

Interview with 100 without helmet rider in December 2001

- Riding to the nearby place 53%
- No police at night 26%

Helmet Use Campaign by Police on Valentine Day



Helmet Use Campaign

Strict law enforcement
of helmet and seatbelt use
in Khon Kaen Municipality



Number and percentage of MC user by year and time interval

Time interval	2001			2002		
	Total No.	Use Helmet	%	Total No.	Use Helmet	%
Rush hour	6,319	3,984	63.0	4,527	2,976	65.7
NoN rush hour	6,504	3,382	51.9	4,345	2,929	67.4
Day time	6,283	3,182	50.6	5,579	2,992	53.6
Night time	3,860	810	20.9	4,015	853	21.2
Total	22,966	11,358	49.5	18,466	9,750	52.8

Number and percentage of driver and front seat passenger who used seat belt

Year	2001			2002		
	Total No.	Use Seat Belt	%	Total No.	Use Seat Belt	%
Rush hour	5,139	2,355	45.8	4,831	2,134	44.2
Non rush hour	5,189	2,317	44.7	4,819	2,155	44.7
Day time	5,989	2,100	35.1	5,977	2,492	41.7
Night time	3,614	951	26.3	3,989	1,269	31.8
Total	19,931	7,723	38.7	19,616	8,050	41.0

Drink don't Drive Campaign

The Provincial Safety Committee has launched the Drink don't Drive Campaign since 2000.

Objectives

1. To bring about the participation of people in the drink don't drive campaign
2. To change the behavior of the drunk driver

Result of Implementation (Jan – Dec 2002)

Number and percentage of drunk by year

Year	Number of driver suspected of drinking alcohol	Number of driver who drank alcohol		Driving with BAC above 0.05%	
		Number (person)	%	Number (person)	%
2001	755	517	68.4	199	38.5
2002	572	461	80.4	287	62.3

Number and percentage of drunk drivers by vehicle

Type of Vehicle	2001			2002		
	Number by Driver who drank alcohol (person)	Driving with BAC above 0.05%		Number by Driver who drank alcohol (person)	Driving with BAC above 0.05%	
		Number (person)	%		Number (person)	%
Sedan	94	29	30.9	65	29	44.6
Pick up	243	82	33.7	218	127	58.3
Truck	35	6	17.1	12	5	41.7
Bus	10	8	80	11	6	51.6
Motorcycle	135	74	54.8	155	120	77.4
Total	517	199	38.5	461	287	62.3

Number and percentage of patient injured and died from traffic injury in Municipality attending to Khon Kaen and Srinakarin Hospital

Year	Injured		Dead	
	No.	% (per 100,000 population)	No.	% (per 100,000 population)
2000	5,192	4,357.2	56	47
2001	5,265	4,280.4	46	37.4
2002	5,427	4,197.5	36	27.6

Number and Percentage of Injury and Death due to Traffic Injury in Municipality Attending to Khon Kaen Hospital and Srinakarin Hospital

Year	Number of Injury (in Municipality)	Drunk patient	
		Number	%
2000	5,192	1,411	27.2
2001	5,265	1,292	24.5
2002	5,427	1,244	22.9

Number and Percentage of Drunk Driver Injured from Traffic Injury in Municipality Attending to Khon Kaen Hospital and Srinakarin Hospital

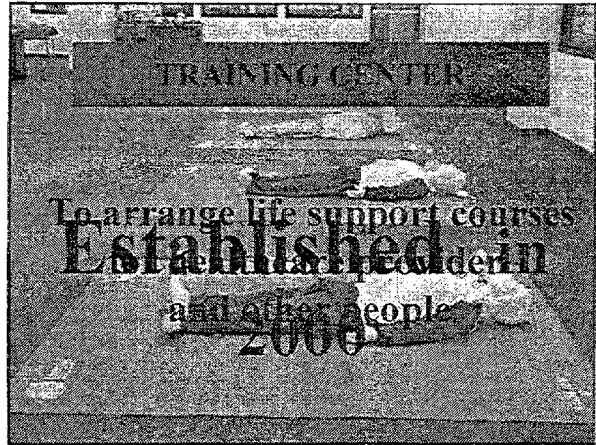
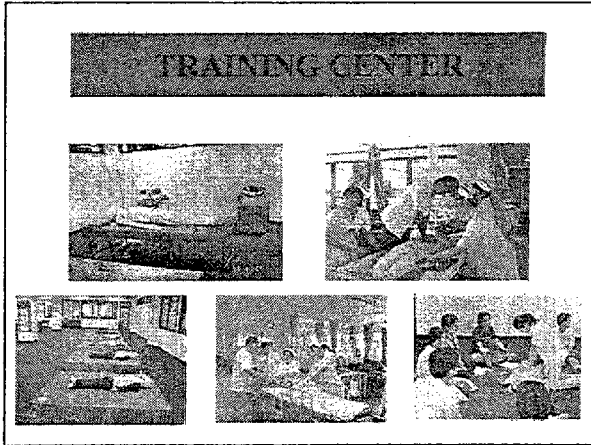
Year	Injured Driver	Drunk Driver	%
2000	3,053	1,121	36.7
2001	2,933	926	31.6
2002	3,537	1,006	28.4

Number and Percentage of Injury and Death due to Traffic Injury in Municipality Attending to Khon Kaen Hospital and Srinakarin Hospital

Year	Number of Injury	Number of Death	Dead Rate
2000	5,192	56	1.1
2001	5,265	46	0.8
2002	5,427	36	0.7

**Number and percentage of Death due to Traffic Injury
Municipality Attending to Khon Kaen Hospital and
Srinakarin Hospital**

Year	Number of Death	Number of Death (Drunk Driver)	%
2000	56	23	41.1
2001	46	4	8.7
2002	36	3	8.3



TRAINING CENTER			
Year	Courses	No. of Courses	No. of Participants
2000	BLS	39	1,043
	ACLS	5	114

TRAINING CENTER			
Year	Courses	No. of Courses	No. of Participants
2000			
&2001	Total	90	2,454

Problems in first two years

1. Shortage of trainers

2. Few media in Thai

Third year (2002)

BLS Training system improvement

BLS for trainer →
Set up training courses regularly on Tuesday and Thursday.
Thai BLS video set & trainer tool's kit were made

Third year (2002)

	Courses	No. of courses	No. of participants
2002	BLS for trainer	4	89
	BLS	24	501
	ACLS	2	62
	BLS for 1 st responder	12	376
	EMT	2	84
	EMS nurse	3	90
	First Aid for trainer	2	60
	First Aid	1	50

Third year (2002)

TRAINING



CPR Performance !!!



OUTCOME ???

Third year (2002)

CPR outcome research (phase I)

Data collected from June to August 2002
84 events from 73 pts were included

Result

ROSC → 38 cases (45%)

Third year (2002)

CPR performance evaluation

set up scenario at ward
during Dec 4th-22nd, 2002
at 24 wards



scenario : 7 steps of CPR performance
emergency/doctor call system
resuscitation equipment

Third year (2002)

CPR performance evaluation

Result

CPR were not performed correctly
Future training course will be modified

Third Year (2002)

CPR activity on Dec,25

Result

More than 150 participants in CPR seminar, update in CPR and 18 BLS and 13 ACLS teams .

Plan for fourth year (2003)

2003 Courses

2003	BLS for trainer	2	60
	BLS	30	900
	ACLS	5	100
	ACLS for trainer	1	20
	ATLS	2	40
	Critical care conference	2	100
	Emergency care	2	40

Plan for fourth year (2003)

Course	No. of courses / month							
	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
BLS	4	6	8	6	4	2		
BLS (trainer)	2							
ACLS	2		2		1			
ACLS (trainer		1						
ATLS				1				1
Critical Care					1		1	
Emergency care		1		1				

Plan for fourth year (2003)

**CPR outcome research (phase II)
February -April 2003**

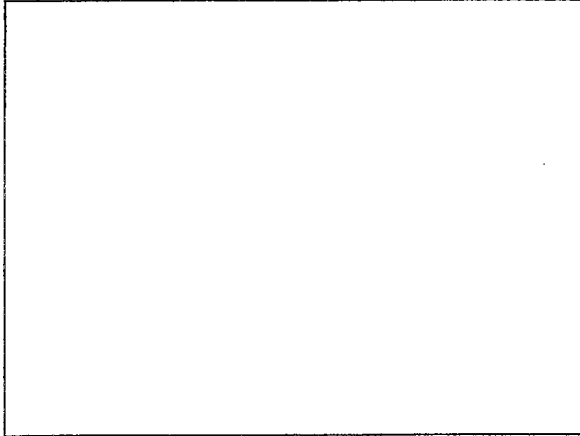
**CPR performance evaluation
July & December 2003**

Fourth year (2003) plan

CPR day in December

- seminar
- contest BLS
ACLS

THANK YOU



Khon Kaen Hospital
Injury Research Center



DR. SURACHAI SARANRITTICHAI AND TEAM

Scope :

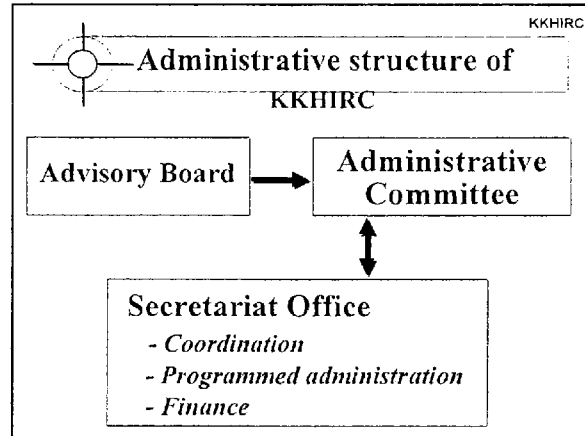
- about IRC.
- activities and outcomes.
- obstacles and advisory solution.

KKHIRC
MISSION STATEMENT

“ To provide quality research
for improvement of
patient injury service,
injury prevention and control.
To reduce the loss due to injury.
Also to be the source of
information on different injuries ”

Objectives

- ▷ To be a source of injury information.
- ▷ To be a center cooperating with other injury research centers both national and international level.
- ▷ To produce quality injury research.
- ▷ To produce new knowledge and advance knowledge on injury prevention.
- ▷ To be a injury research training center.



KKHIRC

Working plan 2000 (April 2000-March 2001)

Activity	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Administrative research committee	←————→											
Job vision mission plan				←————→								
Lecture (knowledge) from experts						◆		◆		◆		
Annotated bibliography project							←————→					

KKHIRC

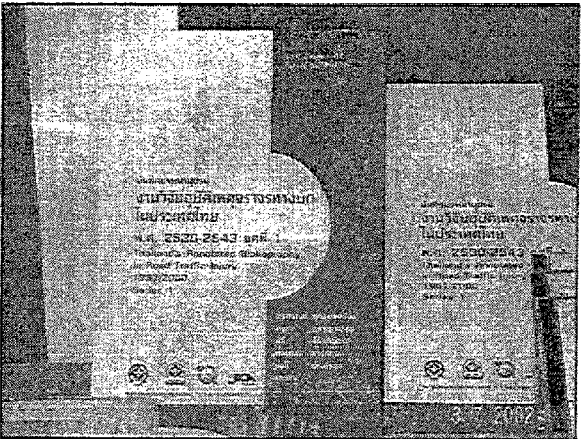
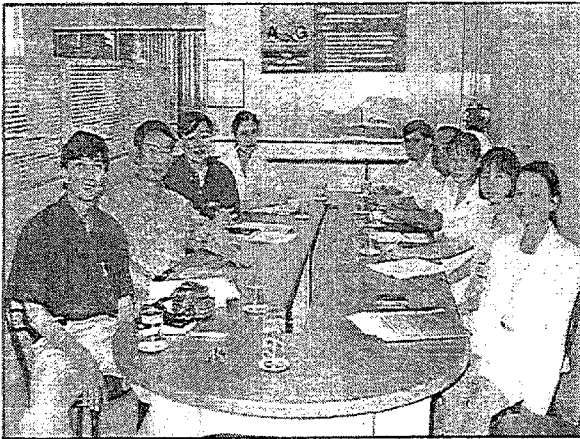
Working plan 2001 (April 2001-March 2002)

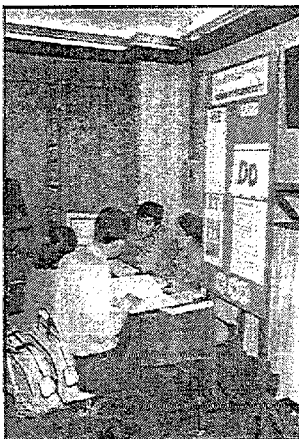
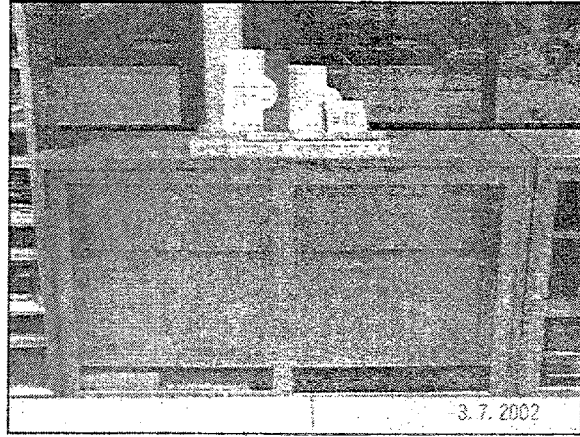
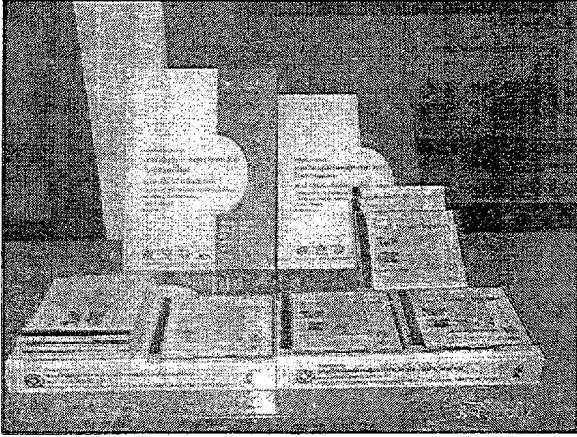
Activity	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Annotate Bibliography Project	←————→											
Lecture (knowledge) From expert						◆		◆		◆		◆
Computerize Research Supporting System							←————→					
Prepare for new projects										←————→		

KKHIRC

Evaluation for 2000-2001
 (April 2000 – March 2002)

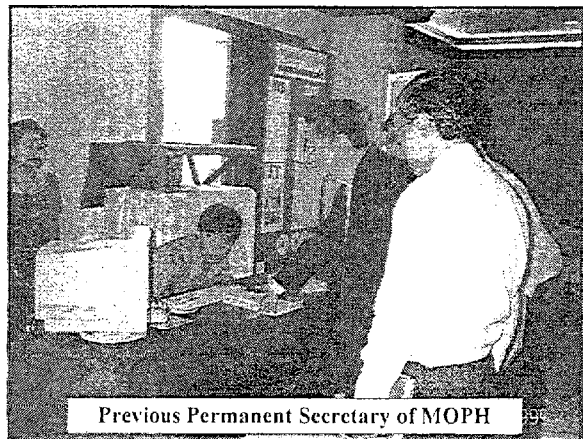
- Committee
- Mission, purpose
- Activity
 - lectures for knowledge.
 - Thailand's annotated bibliography in road traffic injury .
- Office
- Equipment





☐ 10th Ministry of Public Health Anniversary Academic Meeting

☐ August 14-16, 2002
Khon Kaen.



Previous Permanent Secretary of MOPH

Evaluation of Pre Hospital Care Project

This project has 4 aspects

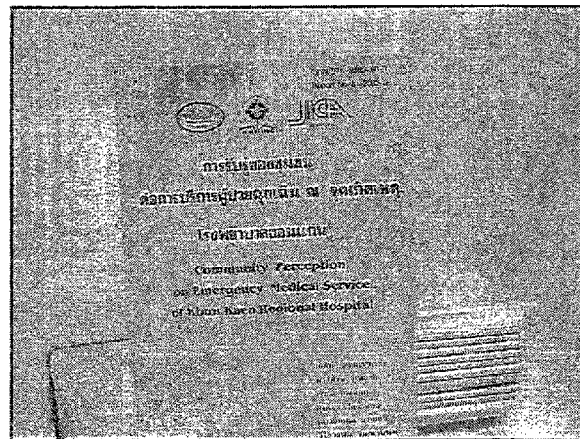
- Cost components
- Comparison of management process and clinical outcome between EMT and volunteer
- Satisfaction
- Community perception about EMS service

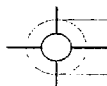
Khon Kaen Hospital Injury Research Bulletin

- 3 volumes a year.
- injury research, news, activities and knowledge in injury research.

Evaluation Plan 2002 (April – February 2003)

- Evaluation of Pre - hospital Care Project
 - Community perception about EMS service
 - Cost evaluation project of EMS
- Injury Research Bulletin = 2 issues
- Research knowledge workshops
 - Nov. 2002 “Biostatistics in Health Research”
 - Feb. 2002 “Qualitative Research for Clinician”





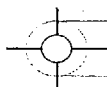
Research project (2003)

- Crash project (Corticosteroid randomized control after severe head injury)
- Behavior changing in the injured patients in Khon Kaen Hospital
- Factors influencing the outcome of organ injury according to severity.
- Violence prevention
- Child injury
- Occupational injury



Human Resource Development

- Cooperation with Khon Kaen Hospital research committee to set up the activities for research knowledge improvement throughout the fiscal year.



Research Supporting System

- Include books , software , Injury Prevention Journal.
- Create injury research center website in Thai and English version.



Indicator for Evaluation

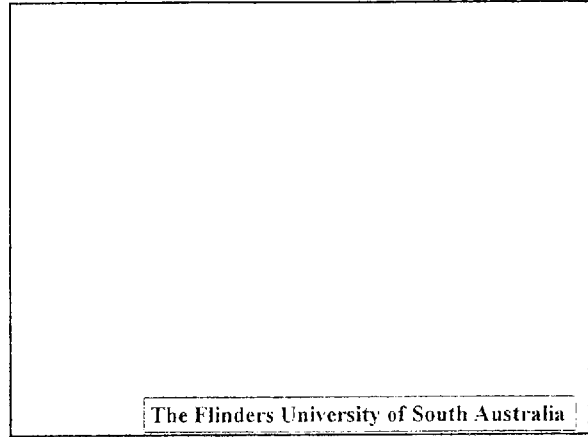
KKHIRC

Activity 4.2 Khon Kaen Hospital Injury research center (KKHIRC)

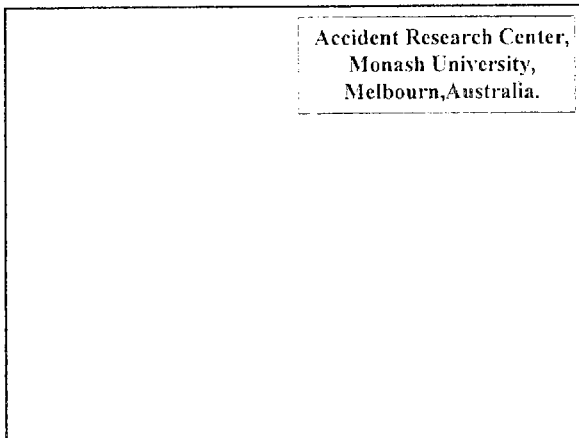
Input (process)	Output	Effect (outcome)	Impact
Training	- No. of trainees - No. of trainers	No. of qualified staff	
Research project	- No. of Researches - No. Of presentations - No. of publications		- Improvement of injury service - Reduction of loss from injury



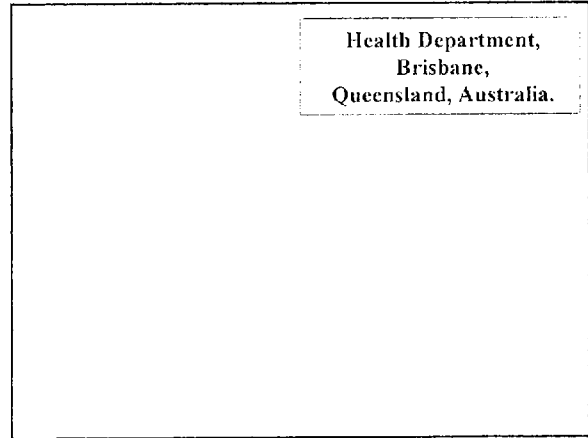
Professor Leif Svanstrom
Korolinska Institute, Stockholm, Sweden.



The Flinders University of South Australia



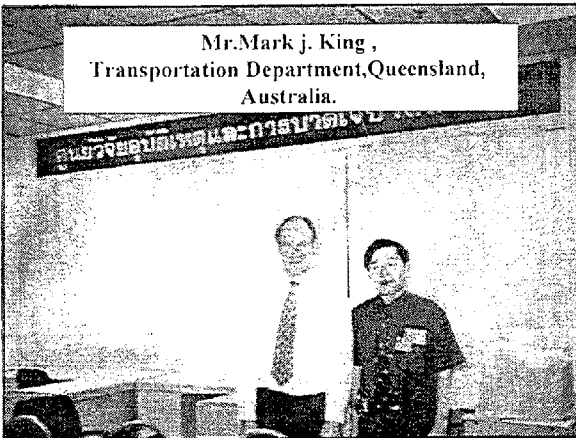
Accident Research Center,
Monash University,
Melbourn,Australia.



Health Department,
Brisbane,
Queensland, Australia.

Injury Prevention Research Center,
Queensland University, Australia.

Queensland Injury Surveillance Unit



Obstacles

Personnel :

- No full time, part time personnel, just spare time.
- It is very difficult to find someone who is interested in specific research, particularly the field of injury research.
- Most injury research committee members have services overload.
- No secretary or anybody to work the IRC office so that it is difficult to communicate with members and do paper work.

Advisory Solution

Personnel

□ Short term :

*a full time personnel quality in computer using

- *collecting data and information*
- *communication, coordination*
- *paper work*

*a full time personnel who has research knowledge, management and interested in injury research.

□ Long term :

*Set up the permanent structure [position] of IRC and prepare personnel for that structure [position] .

Obstacles

Budget :

We have budget support from JICA.

We use according to the policy of JICA that we understand but sometimes research projects need some budgets for KKH personnel to do research work overtime for incentive.

Advisory Solution

Budget :

- To have a budget for IRC in the fiscal budget plan of KKH.
- To apply research proposal for other budget sources .



Obstacles

Management system :

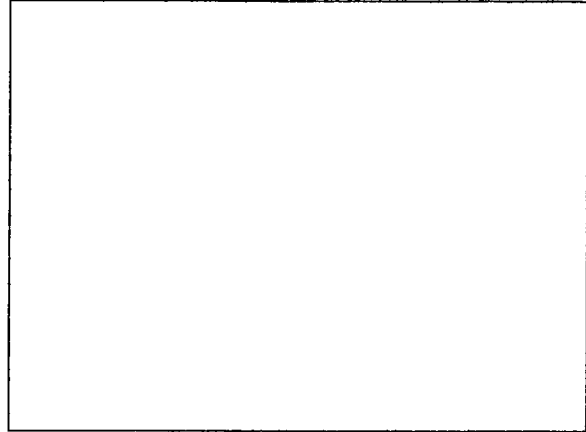
- Lake of knowledge and experience for management.
- Lake of resource.



Khon Kaen Hospital
Injury Research Center



THANK YOU



Progress Report

Subproject 5 : Model generalization

5.1 Speaker, Consultant and Visitation

21 May 2002

Speaker :- topic "Traffic Injury Prevention" in Scientific seminar on National Disaster Prevention held by National Safety Council and Burapa University, 21-22 March 2002, Ambassador City Hotel, Pataya

3 April 2002

Speaker :- topic "Method for setting EMS at Provincial Level" for health personnel and volunteers in Nakorn Rajsrima Province

5.1 Speaker, Consultant and Visitation

17 April 2002

Dr.Surapong Suebwonglee, Deputy Minister of Public Health visited Trauma Center.

18 April 2002

Speaker :- topic "Method for setting EMS at Provincial Level" in workshop for development of EMS in 31 pilot provinces held by MoPH

5.1 Speaker, Consultant and Visitation

17 May 2002

Dr.Winai Wiriyakijja, Permanent Secretary visited Trauma Center.

23 – 24 May 2002

Consultant in workshop for setting work plan for injury prevention and control program in regional hospital held by Health Development Bureau, MoPH, Maruay Hotel

5.1 Speaker, Consultant and Visitation

6 June 2002

Dr.Gyannandra Sharma, WHO-SEARO visited Trauma Center.

6 - 7 June 2002

Workshop for making training curriculum on injury surveillance for SEARO

5.1 Speaker, Consultant and Visitation

12 June 2002

Speaker :- topic "Human Factors in Road Safety, Experienced in Thailand" in Inter Traffic Asia Seminar 2002, International Seminar in Management of Road Safety held by Thailand Highway Association and PIARC 12-13 June 2002, BITEC

5.1 Speaker, Consultant and Visitation

1 July 2002

Mr.Eiryō Sumida, Vice President of JICA, Tokyo, visited trauma center.

10 - 20 July 2002

Mr.Tomoaki Tomita, JICA short term expert on traffic injury prevention, visited trauma center.

5.1 Speaker, Consultant and Visitation

17 July 2002

Presentation : topic "Traffic Injury Prevention" to Task Force Committee on Traffic Injury Prevention of senate

25 July 2002

Speaker : topic "Inclusive Trauma Care System" in 27th Scientific Conference – Critical Care in Surgery, Royal College of Surgeon of Thailand, Pattaya

5.1 Speaker, Consultant and Visitation

2 August 2002

Speaker : topic "Road Accident Management" in "Sustainable Road Development" course for ASEAN country held by Highway Department, Ministry of Communication, Chonburi

5 August 2002

Member in brainstorming meeting for "research for Planning of Traffic Injury Management" by Thai Health Promotion Foundation, Siam City, Bangkok

5.1 Speaker, Consultant and Visitation

6 – 30 August 2002

Mr. Yasushi Sasaki, JICA short time expert in EMS, visited trauma center.

12 – 24 August 2002

Dr. Hiroyuki Nakano, JICA short term expert in emergency medicine, visited trauma center.

5.1 Speaker, Consultant and Visitation

14 August 2002

- Ms. Sudarat Keyurapan, Minister of Public Health, visited Khon Kaen Hospital.
- Presentation : topic "The EMS System in Khon Kaen Province" to the Minister of Public Health and high level administrators of MoPH, KKH

5.1 Speaker, Consultant and Visitation

15 August 2002

Presentation

1. Method of reducing traffic accident from drink driving in Khon Kaen municipality
2. The result of the campaign against drunk driving in Khon Kaen province
3. Development of GIS based traffic accident database through trauma management system
4. Trauma care development in ER based on HA

in the 10th Annual Academic Conference, MoPH, Sofitel Hotel, KK

* the 1th and 3rd paper won the outstanding award

5.1 Speaker, Consultant and Visitation

18 August 2002

Mr. Shinya I wayanaki, new coordinator came to TC

23 August 2002

3rd year Task Force Committee Meeting

5.1 Speaker, Consultant and Visitation

7-9 October 2002

Present "Child injury and Child injury prevention in KK" in International conference on capacity building for Child injury prevention by The Alliance for Safe Children , Bangkok

5.1 Speaker, Consultant and Visitation

20 October 2002

Speaker :- "Injury prevention and control in Thailand", workshop for establishing regional plan for injury prevention and control by Department of Disease control, MOPH;

25 October 2002

Speaker :- "Knowledge management in injury prevention" Annual scientific conference, National Health Foundation Bangkok

5.1 Speaker, Consultant and Visitation

2 – 5 December 2002

International Training program on injury surveillance, WHO – SEARO

16 December 2002

Ms. Noriko Abe, New Chief Advisor came to KK.

5.1 Speaker, Consultant and Visitation

15 January 2002

Dr. Bjorn Melgard WR-Thailand visited TC

21 January 2002

Speaker :- "WHO global campaign for violence and Health" in National roundtable discussion on violence and Health held by WHO.

5.1 Speaker, Consultant and Visitation

19 February 2003

3rd year Directorate board meeting

20 – 21 February 2003

4th National seminar on Traffic injury

17 – 19 March 2003

GRSP meeting

5.1 Speaker, Consultant and Visitation (2000 – 2002)

	2000	2001	2002
Speaker	14	17	24
Consultant	4	2	3
Visitation	20	13	11

5.2 Report, Publication and Media

	2000	2001	2002
Reports	9	14	20
Pamphlet (type)	4	4	2
Stickers	6	-	-
Guidelines	1	-	-
Poster	4	-	-
Card	-	1	-
VDO	-	4	-
Radio Program	-	2	1
Cutout	-	-	4
Traffic Signs	-	91	114