

Pediatric Trauma Our Major Focus



To develop local projects, which will reduce the number of children in our District who are killed or injured by trauma.



What Will We Cover Today?

1. What is Pediatric Trauma?
2. How Do We Address the Need?
3. Project Ideas
4. Grants
5. Fundraising



First, the good news . . .

From 1987 – 2004 the
unintentional injury death rate
among children ages 14 and under
has dropped by 43%



And now, the bad news . . .

Unintentional injury remains the #1 killer of children age 14 and under in the U.S.

Unintentional injury kills more kids every year than any other cause – including disease, homicide and suicide!



More bad news . .

These injuries cost society \$157 billion¹ annually!

90% of these injuries could be prevented!

¹ Includes direct medical costs, future earnings lost and lost quality of life



Injuries are No Accident

Injuries are not
inevitable;

they are *preventable*.



How Do We Address These Needs?

Children's Hospital & Research Center Oakland (1994)



Loma Linda University Children's Hospital (1994)

Rady Children's Hospital San Diego (1994)



How Do We Address These Needs?

Children's Hospital Central
California (2000)



Kapi'olani Medical Center for
Women and Children (2003)

Renown Children's
Hospital (2004)
Formerly Washoe Medical Center



Working Together . . .

Providing First
Responder
Training

*APLS, PEPP,
PALS, ENPC and
BTLS*

*Photo Courtesy of Kapi'olani
Medical Center*



Working Together . . .

Purchasing Pediatric Medical Equipment



Working Together . . .

Expanding Community Outreach Programs



CHILDREN'S HOSPITAL
& RESEARCH CENTER OAKLAND

INJURY PREVENTION PROGRAM

[www.childrenshospitaloakland.org/
healthcare/depts/injury_car-seats.asp](http://www.childrenshospitaloakland.org/healthcare/depts/injury_car-seats.asp)

With support from:



KIWANIS
**Cal-Nev-Ha
Foundation**

Kiwanis

California-Nevada-Hawaii District

Kiwanis Pediatric Emergency Medicine Fellowship Program



"The Kiwanis Doctor"



What is Pediatric Emergency Medicine?

Developed in 1992

1,446 PEM physicians (*as of 2008*)

One qualified PEM physician for every 22,000
children visiting the ER!



PEM Physicians . . .

Specialize in the care of acutely ill or injured children and teens

Treat a wide range of medical emergencies that require immediate attention and are often life threatening

Meet the unique medical needs of children, including giving medications and using equipment in specific ways

Diagnose problems in distressed, uncooperative children



Why is This Important?

One third of the approximately 99 million ER visits each year is for a child

Many not receiving appropriate or timely care due to the staff's lack of pediatric training and experience



Why is This Important?

Immediate access to quality pediatric emergency medical care is critical!

“The Golden Hour” or the “Silver Seconds”

Babies and children are not “little people” - Their needs are vastly different than an adult’s need



Our Kiwanis Doctors



Dr. Sarah
Christian-Kopp



Dr. Andrea Thorp



Dr. Tim Young



PTP Service Project Ideas



Where do we Begin?

Do your homework; Contact local agencies for data (*i.e., Public Health Department, Child Death Review Team*)

EPICenter - California Injury Data Online
(www.applications.dhs.ca.gov/epicdata)

More important that “what” is “how”

Consider timing

The “4 E’s” of Injury Prevention



The 4 "E's" of Injury Prevention

- Education
- Environment
- Enactment & Enforcement
- Evaluation



Education

Create a short play on a child safety issue
and perform / role play for students

Make it FUN

Make it memorable

Make it relevant



Environment

Always be on the lookout for the next
“accident”

Fall Hazards

Unsafe Equipment / Toys

Unsafe Behavior



Enactment & Enforcement

Enact safety “laws” for the home or classroom

Seek child’s input

Keep “laws” simple, age-appropriate

Reward for safe behavior



Evaluation

Conduct safety audits -

Determine hazard(s) - data collection

Find solution(s)

Evaluate success / failure



Interpreting the Data



Leading Causes of Non-Fatal Injuries for Alameda County 2006

Ages 14 and under

- Falls (211)
- Poisoning (52)
- MVT, Occupant (46)
- Struck by Object (39)
- Suffocation (32)



Falls

Falls from 1 ft. onto concrete could cause a concussion

Falls from a height of 8 ft. onto dirt is the same as a child hitting a brick wall traveling at 30mph



Project Ideas

Injury -

Falls (211) - *over half 5-12 yrs.*

Possible
Causes -

Stairs, windows, furniture, beds,
playgrounds

Possible Solutions
-

Gates at top and bottom of stairs

Window guards or locks

Furniture straps

Safe surfacing/equipment

“Active” supervision



Poisoning

1.2 million unintentional poisonings among children ages 5 years and under were reported to U.S. poison control centers in 2004

Among children under 5 years of age, more than half of poisoning exposures are by products such as cosmetics, cleaning substances, plants, toys, pesticides, art supplies, and alcohol



Project Ideas

Injury - Poison Prevention (52)

(over 60% under 4)

Possible
Causes -

Children are curious! They will eat or drink almost anything - even if it doesn't taste good!

Possible
Solutions -

Hands-on demonstration

Pills or Candy poster

Distribute prevention tips
and safety check lists



Motor Vehicle Traffic

Motor vehicle injuries are the leading cause of death among children in the U.S. ¹

In 2005, 1,335 U.S. children ages 14 years and younger died as occupants in motor vehicle crashes, and approximately 184,000 were injured. That's an average of 4 deaths and 504 injuries each day! ²

Among children under age 5, in 2006, an estimated 425 lives were saved by car and booster seat use. ²



Project Ideas

Injury -

Motor Vehicle Traffic:
Occupant (46) - nearly half 5-12 yrs.

Possible
Causes -

Not restrained properly, completely
unrestrained

Possible Solutions
-

Booster Awareness Event: Boosters
are for “Big Kids” campaign

Safety Belt Fit Test

Distribute “vouchers” to
parents



PTP Project Ideas

For more ideas and a list of PTP related websites, visit the Foundation's webpage:

www.cnhfoundation.org



Kiwanis

California-Nevada-Hawaii District

Pediatric Trauma Grants



PTP Grants for SLP

Established to assist SLP clubs in financing PTP service projects on a start up basis

PTP grants are for new PTP projects only

Grant funding is limited to 50% of the total project cost, up to \$250 per grant



How to Apply for a Grant

Complete the appropriate PTP grant application

Include the following:

An estimate of service hours committed to the project

Date when funds are required

A copy of the club's current year *Community Service Budget (if available)*

A project budget including club funds committed, "in-kind" donations, and any other sources of outside funding



Kiwanis

California-Nevada-Hawaii District

Pediatric Trauma Fundraising



How are PTP Fundraising \$\$\$ Spent?

1. Grants to our Partner Hospitals
2. Grants to our Kiwanis and SLP clubs
3. PTP Safety Items



Kiwanis

California-Nevada-Hawaii District

Foundation
Support

More
Grants

Increased
Membership

Greater
Service

Help Us, Help You, Help Others



Help Others . . . Baby Nicolas



“I was so very afraid. Nicolas was little; too little. I didn’t know if he could survive. But I did not want to worry my wife. To her, I said the baby looked wonderful. In my own heart and mind, I did not know if he would live.”

*- Alfredo Alvarado,
Nicolas’ father*

Help Others . . . Alexis Hoekstra

Doctors at LLUCH discovered Alexis had a life-threatening allergy to iodine, which almost cost Alexis her life.

Alexis was also diagnosed with a rare allergy to the proteins found in milk.



Help Others . . . Bryan Perea



“The staff at LLUCH made me feel like everything was going to be okay, and that I would recover. They were very serious about my care, but at the same time, they would make me laugh and kept my spirits up.”

- Bryan Perea, two-time patient at Loma Linda University Children’s Hospital

Help Others . . . Emma Jennings

“Had we not been at Renown, Emma and I might not have made it. The surgeon said that if we had been 60 minutes later, I would have bled out and both Emma and I would have died. I credit Renown and their amazing staff, with saving our lives.”

-Sara Jennings, Emma's mother



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