



NPM 7: Injury Hospitalization (Child Safety). This accelerator summarizes the latest strategies and practices that have emerged as potential approaches for decreasing the rate of hospitalization for non-fatal injury per 100,000 children and adolescents, ages 0 through 19. It summarizes and updates the NPM 7 Evidence Analysis Reports: [Ages 0-9](#) | [Ages 10-19](#) and provides a framework to identify, understand, and implement “what works” in creating new or strengthening current Evidence-based/informed Strategy Measures (ESMs).

Evidence-Based/Informed Strategies. 41 strategies have emerged from studies in the scientific literature as being effective in advancing the NPM. They can be adopted or adapted to meet your program needs. More information on these strategies can be found in the MCH Evidence Center’s [MCHbest](#) database.

	Evidenced-Informed EMERGING EVIDENCE	EXPERT OPINION	Evidenced-Based MODERATE EVIDENCE	SCIENTIFICALLY RIGOROUS
All Children/Adolescents Ages 0-9 and 10-19		<ul style="list-style-type: none"> • Collaboration and Partnerships: Child Safety (2019) 	<ul style="list-style-type: none"> • Clinic/Hospital Initiatives: Car Seats Child Maltreatment Child Safety Firearm Safety Safe Sleep (see also NPM 5) (2023) • Home Visiting: Child Maltreatment Child Safety Child Well-Being Injury Prevention Safe Behaviors (2023) • Peer Support Program: Child Maltreatment (2017) • Policies: Child Safety Drowning Prevention Firearm Safety Playground Safety (2022) • School-Based Initiatives: Child Safety Pedestrian Safety Playground Safety (2020) 	<ul style="list-style-type: none"> • Community-Based Initiatives: Car Seat Safety Child Passenger Safety Cribs/Info (see also NPM 5) (2016) • Educational Initiatives: Car Seat Safety Home Water Temperature Safety (2016)
Focus on Ages 10-19	<ul style="list-style-type: none"> • Legislation on Teen Driver/Passenger/Bicycle Safety (2020) • School-Based Educational Programs to Promote Road Safety (2011) 		<ul style="list-style-type: none"> • Clinic/Hospital Initiatives: Suicide Prevention (2022) • Collaboration and Partnerships: Suicide Prevention (2013) • Community-Based Initiatives: Sports Safety Youth Violence (2023) • Peer Support Programs: Injury Prevention (2012) • School-Based Initiatives (2020): • Alcohol/Drug Use Prevention: Personality-Targeted Multicomponent • Bullying Prevention: Multicomponent see also NPM 9 • Dating Violence/Sexual Assault Prevention: College Campus Secondary School • Suicide Prevention: Prevention Programs Multicomponent Education 	<ul style="list-style-type: none"> • Bicycle Helmet Laws (2018) • Child Bicycle Helmet Promotion Programs (2017) • Regulation of Local Alcohol Sales (2019)

Field-Based Practices. 11 practices from state-/community-based programs have emerged as potential approaches for advancing the NPM for specific communities or populations. They can be used as models to meet your program needs. More information can be found in the Association of Maternal and Child Health Program’s (AMCHP’s) [Innovation Hub](#).

	Cutting-Edge	Emerging	Promising	Best
All Ages 0-19	<ul style="list-style-type: none"> • Crying/Infant Development (Oklahoma) • MCH and Child Welfare Partnerships (Connecticut) 	<ul style="list-style-type: none"> • Parenting While in Recovery (Massachusetts) 	<ul style="list-style-type: none"> • Young Parent-Centered Case Management (Massachusetts) 	<ul style="list-style-type: none"> • Family Foundation (California) • Nurse-Family Partnership (National)
Focus on 10-19	<ul style="list-style-type: none"> • Health Screening Services (Minnesota) • Graduated Driver License Education (Nebraska) • Youth Sports Safety (Tennessee) 	<ul style="list-style-type: none"> • Teen Driving Safety Task Force (Utah) 	<ul style="list-style-type: none"> • Rapid Adolescent Prevention Screening (Michigan) 	

A Framework to Advance What Works

Use this accelerator to begin a quality improvement process to strengthen current or new programs, starting with understanding the evidence, linking your program to that evidence, and developing an effective way to measure progress.

As new peer-reviewed and field-generated evidence is compiled, it will be added to databases links in this accelerator, keeping it current with the science and practice. You can also sign up for the [MCHAlert](#) newsletter to receive quarterly updates on emerging evidence. [Read more about “Keeping Current: How We Update the Evidence.”](#)

1. Identify What Works. As of April 2023, 41 evidence-based/informed strategies and 11 field-based programs have emerged as potential approaches for decreasing the rate of hospitalization for non-fatal injury per 100,000 children, ages 0 through 19. Use the links on page 1 to access strategies, approaches, supporting evidence, outcomes, and examples of how states and jurisdictions are either using these strategies directly or adopting components of the intervention that address this NPM. [Read more about the evidence and how it is rated.](#)

2. Understand What Works. Once the evidence has been considered for what works generally, it is important to understand if a strategy is **meaningful** and will work for targeted populations, especially those most affected by health disparities. [Read more about how to adopt or adapt strategies to address the needs of your populations.](#)

3. Implement What Works. To ensure that strategies are **moveable** and have potential to affect desired change, it is important that they are unbiased, significant to public health, and rooted in science, experience, and policy. They should show results that are statistically significant and lead to decisions that bring about change for all population groups, especially those most effected by health inequities. [Read more about implementation tools to use in this process.](#)



4. Measure What Works. To ensure that strategies are **measurable** in addressing issues early and advancing NPMs, a system of translating the evidence into practice is needed. The **Results-Based Accountability (RBA)** framework is one way to strengthen ESMs through a quality improvement process. Title V agencies can strengthen ESMs from measuring “what did we do?” (Quadrant 1) to measuring program outputs that address “how well did we do it?” (Quadrant 2) and eventually to short-term outcomes that answer “how are people better off?” (Quadrants 3 and 4). [Read more about measurement through the RBA process.](#)

5. Report What Works. Use this accelerator to assist completing the ESM Detail Sheet (Form 10E). [Read more tips for filling out Form 10E.](#)

- **Evidence-Based/Informed Strategy Section.** Indicate the strategy that the ESM measures and where you accessed the corresponding evidence (e.g., resources from this accelerator, [MCHbest](#) database, [AMCHP’s Innovation Hub](#), or other source). Briefly describe the evidence for how the strategy advances the NPM.
- **Significance Section.** Describe what aspect of the strategy the ESM measures and why measuring it is important to show progress.

Need More Help?

We are eager to talk with you further about your ESMs. [We provide technical assistance](#) that is customized to your needs and the time you have.