

2015

West Virginia University & Greater Morgantown Safe Communities Application





April 14, 2014

Safe Communities America
National Safety Council
Attention: Donna Stein-Harris
1121 Spring Lake Drive
Itasca, IL 60143

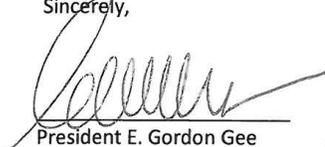
Dear Ms. Stein-Harris,

Please accept this letter of intent on behalf of West Virginia University, the City of Morgantown, and Monongalia County to become a designated National Safety Council Safe Community. Our designated community name is West Virginia University and Greater Morgantown. In addition to reducing injuries and enhancing wellbeing, we view the process as one that is beneficial to enhancing relationships, maximizing shared resources and helping to establish WVU and Greater Morgantown as recognized leaders in collaboration, safety, wellbeing and prevention.

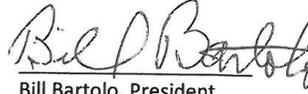
We particularly value the process of becoming a Safe Community and recognize the value in our relationship with Safe Communities America as we work together to identify areas of potential risk and programs to address those areas. We have already begun to establish a working committee of professionals that represent the breadth of prevention areas called for in the application. We look forward to your assistance and to creating lasting systems and coalitions that will serve the wellbeing of our students and community members.

If additional information is required please contact Colleen Harshbarger, Director of WELLWVU Office of Wellness & Health Promotion at 304-293-554 or colleen.harshbarger@mail.wvu.edu. PO Box 6507, West Virginia University, Morgantown, WV 26506. Tax #: 55-6000842004

Sincerely,


President E. Gordon Gee
West Virginia University


Mayor Jennifer Selin
City of Morgantown


Bill Bartolo, President
Monongalia County Commission

**Division of Student Affairs
Wellness and Health Promotion**

Phone: 304-293-WELL (9247)
Fax: 304-293-5044
<http://well.wvu.edu>

PO Box 6507
Morgantown, WV 26506-6507

Equal Opportunity/Affirmative Action Institution

ACKNOWLEDGEMENTS

The West Virginia University and Greater Morgantown Safe Communities application could not have been completed without the support of many significant contributors. Michael Ibekwe and Megan Villers, both candidates for the Master in Public Health degree have spent countless hours collecting information and sorting through data to compile this application. Dr. Keith Weber, Professor in Communication Studies has contributed leadership of graduate students in his program on the communication plan and administration of the School of Public Health's Dean's Community Engagement Grant. Herb Linn with the Injury Control Research Center has been an instrumental member of the executive committee, served as facilitator at many meetings, and edited this application. Mayor Jenny Selin and House of Delegates member Barbara Evans Fleischauer have provided guidance on policy and community issues. A full partner list can be found in Appendix A. Many people have worked collaboratively to make this application a reality and we are extremely grateful to all for our continued work towards a safer community.

TABLE OF CONTENTS

Letter of Intent	ii
Acknowledgments	iii
Section 1: Contact Information	1
Section 2: Community Description	2
Section 3: Criteria to Be a Safe Community	4
<i>I. Sustained collaboration</i>	4
<i>II. Data collection and application</i>	6
<i>III. Effective strategies to address unintentional and intentional injury</i>	18
<i>IV. Evaluation methods</i>	19
Section 4: Community Inventory of Safety and Injury Initiatives	23
Appendix A: Community Coalition Member List	26
Appendix B: Organizational Chart	28
Appendix C: Letters of Support	29
Appendix D: Meeting Minutes	32
Appendix E: Detailed Community Inventory of Safety and Injury Initiatives	35



Section 1: Contact Information



1. Co-Principal Investigator

Colleen Harshbarger M.S.

Director, WELLWVU Office of Wellness and Health Promotion

P.O. Box 6507 Morgantown, WV 26506

colleen.harshbarger@mail.wvu.edu

(304)216-6346



2. Co-Principal Investigator

Marti Shamberger

Deputy Mayor 5th Ward, Morgantown City Council

812 Ridgeway Ave, Morgantown, WV 26505

Citycouncilward5@cityofmorgantown.org

(304)296-2090

Section 2: Community Description

Morgantown, West Virginia, is widely recognized as one of the best places in the U.S. to live, work, and study.



With only about 31,000 permanent residents, the city is a friendly place where people know and care about their neighbors. The presence of the main campus of West Virginia University adds 30,000-plus students to the community, creating a vibrant environment with near-constant activity and hundreds of cultural, recreational, and educational events throughout the year.

The city is tightly packed on a series of steep hills along the banks of the Monongahela River. In Greater Morgantown, town and gown are inextricably intertwined through economy, transportation, culture and entertainment and the university and municipality work together to foster community. The city's commercial hub, High Street, is just a few yards from the

University's main campus, and supports a mix of restaurants, shops, theaters, and music venues that attracts crowds day and night.

The region is crisscrossed with walking, biking, and hiking trails – including a popular riverfront trail that starts at the Pennsylvania state line and winds for many miles through the entire county. The region's location in the foothills of Appalachian Mountains gives residents easy access to a wide range of outdoor activities, including snow and water skiing, whitewater rafting, camping, hunting, and fishing.

Morgantown is approximately 75 miles south of Pittsburgh, 200 miles west of Washington, D.C., and within a 500 miles of half of the U.S. population. This location has allowed both the University to attract a diverse mix of students and faculty. The community is home to wide variety of civic and community organizations, religious communities, and amateur sports and cultural groups.

Recognition

- Morgantown was rated “No. 1 Small City in America” by BizJournals.com.
- Business Insider named Morgantown the ninth “Best College Town in America.”
- Kiplinger.com included Morgantown in their “10 Great Places to Live” list.
- Sporting News calls Morgantown one of “Best Sports Cities.”
- Listed as the second-ranking “Best College Town for Jobs” and fifth “Best Small Metro” by Forbes
- Ranked 12th overall “Hottest Small City” by Inc.
- Named one of “50 Smartest Places to Live” by Kiplinger’s

Economy

Monongalia County is a prosperous and growing area located in north central West Virginia. Greater Morgantown thrives not only from the presence of WVU, but also from the presence of other large organizations which influence the region's economy, including Mylan Pharmaceuticals (one of the world's largest pharmaceutical companies), WVU Medicine - Ruby Memorial Hospital (the only transplant hospital in the country with a rural designation), the Centers for Disease Control and Prevention's National Institute for Occupational Safety and Health, and the U.S. Department of Energy's National Energy Technology Laboratory.

Economic growth in this region is evidenced by Monongalia's median household income, which grew from \$30,500 in 2000 to over \$44,000 in 2010. This growth rate of 44% far surpasses the growth rate of the West Virginia economy (32%) and the broader U.S. economy (26%). Similarly, median house values in the county increased by a staggering 66% (from \$95,500 in 2000 to 159,000 in 2010). Again, this growth rate is higher than experienced throughout the state (33%) as well as throughout the United States in general (51%).

Monongalia County's economic growth has also been influenced by its population growth. Between the 2000 and 2014, the population of Monongalia County grew from approximately 81,000 residents to more than 103,000 residents, which represents a growth rate of 17.5%. This is almost double the national population growth rate (9.7%) and more than seven times the state population growth rate during this same time period.

Based on these facts, it is easy to see why Greater Morgantown is considered by many in this state as an "economic engine" for West Virginia. Without the prosperity and growth experienced in Monongalia County, many of the positive economic indicators for the state would likely fall below national averages. As such a booming part of West Virginia's expansion, Greater Morgantown is an area ripe with opportunity, but also with challenges.

Origin of the Safe Communities Initiative

Interest in forming a Safe Communities Initiative originated with West Virginia University's WELLWVU Office of Wellness & Health Promotion (OWHP), whose vision is to lead the way to a culture that embraces wellbeing. OWHP is charged with identifying impediments to student wellbeing and applying the socio-ecological model to create solutions that promote better health in students.

The leadership involved in this project is looking for ways to create environments that promote safety and wellbeing, making our community an even better place to live, work and attend school. The result of such an effort will allow policy makers and public health officials to take stock of policies, services and programs in order to make more informed decisions regarding the safety needs of Monongalia's growing population.

Existing data from both the National Collegiate Health Assessment II and Alcohol Edu[®] highlight the negative consequences students experience from high risk drinking and violence. A review of environmental factors contributing to the problem identified state laws and alcohol outlet density as deterrents to an improved culture, and we quickly reached out to City of Morgantown officials Mayor Jenny Selin and Deputy Mayor Marti Shamberger and West Virginia House of Delegate's member Barbara Fleischauer to form a committee. The WVU Injury Control Research Center's Herb Linn proved to be an invaluable early addition to the executive group as the scope of the project broadened to include all areas affecting safety and wellbeing in our community. This group sees value in achieving the Safe Communities accreditation for many reasons. First, we value the data driven principles behind it, knowing that an objective understanding will best help us in addressing safety impediments in our community. Second, this project brings together the strength of resources in our community, from researchers at the University, to policy makers at the city and state level, to intervention specialists that we know will yield the best outcome for improving safety in our community. Finally, the project lays the groundwork for a measurable, systematic, community based approach to injury prevention for students and all community members that will serve as a guiding framework for work in years to come.

Section 3: Criteria to Be a Safe Community

I. Sustained collaboration

The **West Virginia University (WVU) and Greater Morgantown Safe Communities Initiative** represents a collaboration of individuals representing numerous WVU schools, departments and offices; municipal and county government officials, including the mayor, deputy mayor, and police and fire department chiefs; a member of the WV House of Delegates representing Monongalia County; and many other community partners representing business, nongovernment organizations, advocates, federal agencies, and others. A full listing of university and community partners participating in the Initiative, along with their organizational affiliations and roles, is provided in **Appendix A**.

The organization of the Initiative is headed by representatives of WVU and the City of Morgantown as co-chairs heading the steering committee. The steering committee also includes a communications leader and a secretary/facilitator. The full initiative is further organized by tasks associated with injury topic areas, and also includes an overarching data committee, which oversees the gathering and analysis of data from multiple sources. An organizational chart for the Initiative is provided in **Appendix B**.

The WVU and Greater Morgantown Safe Communities Initiative was formally endorsed by West Virginia University, the City of Morgantown, and Monongalia County by means of a letter of intent dated April 14, 2014, and signed by WVU President E. Gordon Gee, Morgantown Mayor Jenny Selin, and Monongalia County Commission President Bill Bartolo. Letters of organizational support were provided by WV House of Delegates Representative from Monongalia County, Barbara Evans Fleischauer, the WVU Injury Control Research Center, and the Monongalia County Health Department (**Appendix C**).

The WVU and Greater Morgantown Safe Communities Initiative officially formed on September 10, 2013. Key stakeholder meetings have been held approximately every quarter since then, and have been held either on WVU's campus, and the off-campus site of the WVU Injury Control Research Center, or at the Monongalia County Department of Health. Notes from the key stakeholder meetings are provided in **Appendix D**.

The mission of the West Virginia University and Greater Morgantown Safe Communities Initiative is to create a safe and healthy environment by utilizing a collaborative, data-driven approach to promote safety, health, and injury prevention.

The West Virginia University and Greater Morgantown Safe Communities Initiative communicates with key stakeholder members internally primarily by email. Additionally, the Initiative communicates with community partners and potential partners via our Website ([http:// www.safemorgantownwvu.org](http://www.safemorgantownwvu.org)). When recruiting new business community partners, the Initiative requires that each business complete an application for Safe Community membership (see below).



West Virginia University and Greater Morgantown Safe Community Partner Application

Applicant Name: <small>first</small>		<small>Last</small>		Date:	___ / ___ / ___
Address:					
City:			State:		Zip:
Telephone: (____) _____			E-mail:		
Name of Business:					
How long have you been an established business in Morgantown?					
Why do you want to be a Safe Community partner?					
Has your business ever received a citation from ABCA?				Yes:	No :
If yes, reason:					
Has your business ever received a citation from the Fire Marshall?				Yes:	No:
If yes, reason:					
Is your work staff TIPS trained?				Yes:	No:
What is the raw number of injuries to patrons at your place of business for 2014?					
What is the raw number of injuries to work staff at your place of business for 2014?					
What steps do you take to ensure safety of your staff?					
Please indicate which you are already doing:					
Promoting DubV Safe Ride				Yes:	No:
TIPS training				Yes:	No:
Promoting LiveSafe mobile application				Yes:	No:

A community partner application allows for us to ensure that the potential business partners' objectives align with our mission, and to make sure that they will represent the Safe Communities brand in a positive light. There is a 6-month probationary period for all new partners. After that time has passed and there aren't any citations or violations against the business, they receive full Safe Community membership and receive a sticker as well as promotional material. The West Virginia University and Greater Morgantown Safe Communities Initiative requires partners to promote DubV Safe Ride, LiveSafe, and TIPS Training (see Section 4 below: Community Inventory of Safety and Injury Initiatives.)

II. Data Collection and Application

1. Community demographics

The United States Census Bureau estimates the population of Monongalia County to be 103,463 as of July 1, 2014. This reflects a 7.6% increase from the 2010 Census count of 96,189 (April 1, 2010). During the same period, the population of the United States increased only 3.3%, and the population of West Virginia actually declined by 0.1%. (See Chart 1 below.)

The population of Monongalia County is slightly more diverse racially than West Virginia overall, substantially younger, and has a higher median household income, higher percentage of high school graduates, and lower percentage of females.

Chart 1: Population of Monongalia County, West Virginia and the U.S., 2000-2014

	2000	2010	2014	% Change '10-'14
Monongalia County	81,866	96,189	103,463	7.6%
West Virginia	1,808,344	1,852,994	1,850,326	-0.1%
United States	281,421,906	308,745,538	318,857,056	3.3%

(U.S. Bureau of the Census, 2010 population estimates)

Chart 2: Demographics of Monongalia County, and WV

Race	Monongalia	WV
White	91.0%	94.0%
Black	3.9%	3.5%
Other	5.1%	2.5%
Age		
Median	29.7	41.7
Under 5 years	5.0%	5.5%
Under 18 years	15.9%	20.6%
65 and over	10.6%	17.3%
Labor Force*	58.6%	54.9%
Median household income*	\$44,173	\$41,043
Income below poverty level*	22.4%	17.9%
High school grad or higher	90.7%	83.9%
Female persons	48.5%	50.6%

U.S. Bureau of the Census, 2013 population estimates)

Monongalia County fares better than the State of West Virginia in many social and economic indicators, as seen below in Chart 3. However, the county has a higher level of income inequality, and slightly higher incidence of violent crime than the state overall.

Chart 3: Social & Economic Factors in Monongalia County and WV

	Monongalia	Error Margin	Top U.S. Performers	WV
High School graduation	81%			79%
Unemployment	4.1%		4.0%	6.5%
Children in poverty	17%	13-21%	13%	26%
Income Inequality	7.5	6.7-8.3	3.7	4.9
Violent Crime	345		59	311
Injury Deaths	55	48-62	50	91

(County Health Rankings & Roadmaps, 2015)

2. Injury data

Injury data for WVU, Morgantown, and Monongalia County are provided below for each of the six Safe Communities key areas: motor-vehicle related injury, older adult falls, poisoning by prescription drug overdoses, workplace safety, violence and suicide prevention, and emergency preparedness. The WVU & Greater Morgantown Safe Communities Initiative team has added a separate injury category—alcohol-related injury—due to the high prevalence of binge drinking and alcohol-related morbidity, and the apparent contribution of alcohol consumption to other key areas, including motor-vehicle injury, overdose deaths, and violence.

Alcohol-related injury

- According to the WV Behavioral Health Epidemiological County Profiles, Monongalia County adults reported the highest prevalence of binge drinking (23.7%) among all counties in West Virginia in 2014. The state average is 10.0%.¹
- According to binge drinking data for 2010-2014, Monongalia County binge drinking prevalence is higher than the state for the following age groups: 18-24 (42.6MC/201.WV); 25-34 (30.8MC/15.7 WV); 35-44 (17.8MC / 12.7 WV). For older age groups rates are comparable.²
- Monongalia County also leads the state in alcohol morbidity and dependence, with hospital discharge records showing 677 of every 10,000 hospital discharges included an alcohol-related diagnosis, and 471/10,000 indicated alcohol dependency.¹

- Monongalia County showed a DUI arrest rate of 66.5/10,000, up from 54.5/10,000 in 2010. (Although these rates are significantly higher than rates for the entire state, comparisons cannot reliably be made because approximately 200 agencies in WV do not report DUI arrests.)¹
- Alcohol poisoning was the next leading cause of deaths, at 14.5% of all drug related deaths.³
- Research using the self-report Campus Crime Victimization Survey (CCVS) has found that alcohol is heavily involved in Morgantown violence, with 55% of fights occurring when the victim is intoxicated and 79% of fights involving a drunk or high offender.⁴
- WVU freshman have remained significantly higher than the national average in sexual assaults, perpetration of sexual assault, and for physical altercations while intoxicated according to AlcoholEdu® data from 2010 through 2014.⁵
- A study of 81 sexual assault victims between 19 and 25 years of age who treated in the Ruby Memorial Emergency Department between 2012 and 2014, found that 70% were under 21, and that alcohol was more commonly involved when victims were under 21 (70.4% reported alcohol consumption around the time of the assault, compared to 48% of victims 21 and older).⁶
- The study also found that involvement of alcohol commonly delayed the seeking of treatment, with 60.7% of the victims who had not been drinking seeking same-day treatment, compared to 36% of victims who had consumed alcohol.⁶
- The number of liquor violations (i.e., underage drinking, public intoxication, underage DUI, etc.) investigated by the WVU Police increased from 2011 (4117 violations) to 2012 (4856 violations) and were the lowest in 2013 (3810 violations).⁷
- Of 3393 individuals who were referred to the Student Assistance Program drug and alcohol programs due to student conduct violations during the 2013-2014 school year, 74% were male, with freshman (31%) and sophomore (33%) students representing the leading referral groups.⁸

Motor-vehicle-related injury

- In 2013, Monongalia County experienced the second highest number of highway traffic crashes in West Virginia (676 crashes with 5 fatalities), trailing only Berkeley County (712 crashes with 10 fatalities). This equates to 9% of the highway traffic crashes in West Virginia.⁹
- The Morgantown Police Department investigated nearly 1,000 motor-vehicle-related incidents per year from 2010 through 2014, with investigations decreasing steadily from 2010 (1,166) to 2013 (949), then increasing slightly in 2014 (991).¹⁰
- From 2010 to 2014, 105 pedestrians were struck by motor vehicles; the majority (58, or 55.2%) between the ages of 19 and 30.¹¹
- A survey of 472 Morgantown pedestrians found that 96.7% had nearly been hit by a car.¹²
- According to the Morgantown Pedestrian Safety Board, 31% of all pedestrian-motor vehicle collisions, occurred in downtown Morgantown; 12 different intersections in downtown Morgantown were sites of 4 or more incidents each.¹³

Older adult falls

- For the 5-year period from 2010 to 2014, 1,864 adults over 70 years old were treated for fall-related injuries at Ruby Memorial Hospital—an average of 373 per year.¹¹

Poisoning by prescription drug overdoses

- During the period from 2005 through 2011, there were 146 drug overdose deaths in Monongalia County.³
- Of the 146 overdose deaths, 115 were determined to be unintentional, 18 were intentional, 11 were of undetermined intent, and 2 were homicides.³
- Prescription opioids were involved in 88 (60.3%) of the deaths, but only 30 of the victims had prescriptions for these painkillers.³
- Heroin was involved in 18 deaths (12.3%).³
- 272 patients who suffered unintentional drug poisoning reported to Ruby Memorial Hospital between 2010 and 2014.¹¹
- Children under 18 had the highest number of accidental poisonings for all types of drugs from 2010 to 2014, at 76 poisonings.¹¹

Workplace safety

- From 2010 through 2014, there were 2 mining fatalities in Monongalia County, both due to rock falls.¹⁴
- According to the Census of Fatal Occupational Injuries (CFOI), the Morgantown Metropolitan Statistical Area (MSA), which is comprised of Monongalia and Preston Counties in WV, experienced 31 work-related fatal injuries during the period from 2005 through 2013.¹⁵
- Although West Virginia University, one of the largest employers in the greater Morgantown area (approximately 20,200 employees), experienced a dramatic increase in work-related injuries from 2012 to 2013 (66 to 105), the number decreased to 72 in 2014.¹⁶
- There was an increase in the number of days away from work resulting from these injuries to WVU employees, from 137 in 2012 to 465 in 2014. The number of cases with days away from work in 2014 was among the lowest (37) indicating that much more serious injuries likely occurred during this year.¹⁶
- The National Institute for Occupational Safety and Health (NIOSH), another major Morgantown employer, experienced only 12 OSHA reportable injuries between 2010 and 2013, and had no reportable injuries in 2014.¹⁷

Violence and suicide

Violence

- Simple assault was the most common violent crime in the Greater Morgantown community, with 245 cases reported in 2012.¹⁸

- Aggravated assault was next most common, with 144 cases reported in 2012.¹⁸
- Criminal Cases in Morgantown and victimization rates have both steadily declined between 2009-2010 and 2014-2015.¹⁸
- Between 2010 and 2014, 1,430 individuals presented to Ruby Memorial Hospital with assault injuries—nearly half (672, or 47%) were treated for either simple or sexual assault, with the rest of the injuries involving a weapon, or not specified.¹¹

Suicide

- The suicide rate in Monongalia County (4.2 deaths per 100,000 residents) is well below the rate for all of West Virginia (13.7 per 100,000 residents).¹⁹
- The number of completed suicides in Monongalia County has risen from 2008 to 2012; of the 11 suicides that occurred during that time frame, 5 were in 2012 alone.¹⁹
- On average, 2 to 3 WVU students completed suicide between fall 2010 and summer 2013.²⁰

Emergency preparedness

- Morgantown has experienced 2 riots since 2010: one occurred in 2012,²¹ another in 2014²² (the latter resulting in injuries to two Morgantown Police Department officers).
- In June 2012, a plane crashed near Cooper’s Rock in Monongalia County after striking a communications tower.²³

3. Data summary table

Topic	Trend
Alcohol-related Injury	Morgantown/ Monongalia County Residents
	Monongalia County has experienced the highest prevalence of binge drinking among adults (19.5% in 2013) among all counties of West Virginia for the period from 2008 through 2013, as well as the highest rate of alcohol-related morbidity and alcohol dependence diagnoses.
	As a whole, Monongalia County has had a higher DUI arrest rate than the state since 2009 and the rate has been increasing since 2010, to 66.5 DUI arrests per 10,000 residents in 2012.
	Alcohol poisoning was the next leading cause of deaths, at 14.5% of all drug related deaths.

	<p>Alcohol use has been linked to assault, including sexual assault; drug overdose; motor-vehicle crash deaths; and sporting event-related rioting.</p>
	<p>West Virginia University Students</p> <p>Of 3,393 individuals that were referred to the Student Assistance Program drug and alcohol programs due to student conduct violations during the 2013-2014 school year, WVU freshman and sophomores accounted for 64%. The participants in these programs were predominately (74%) male.</p> <p>AlcoholEdu® showed that The number of WVU freshman that engaged in binge drinking 4-6 times in the previous 2 weeks decreased from 2012 to 2013, but then peaked in 2014.</p>
Motor Vehicle-related Injury	<p>In 2013, Monongalia County experienced the second highest number of highway traffic crashes (676 crashes with 5 fatalities) among WV counties, second only to Berkeley County (712 crashes, 10 fatalities). Monongalia County also accounted for 4.2% of all fatal motor vehicle accidents in West Virginia, which is the 4th highest county in the state.</p> <p>Pedestrians Struck By Motor Vehicles: In the previous 5 years, 105 pedestrians, with the majority (58) being 30 years old or younger, have been struck by motor vehicles. The Morgantown Pedestrian Safety Board found that 31% of all pedestrian versus motor vehicle accidents from 1998-2008 occurred in the downtown area of Morgantown that is frequented by students and adjacent to the WVU campus. There were 12 intersections in this area that had 4 or more accidents during this time.</p> <p>A survey of 472 Morgantown pedestrians found that 96.7% of pedestrians had nearly been hit by a car and 9% of respondents reported that they walked less than they wanted to in their neighborhood due to fear of being hit.</p>
Older Adult Falls	<p>In Morgantown residents over 70 years old, there were 1,864 fall related injuries treated at Ruby Memorial Hospital between 2010 and 2014. This equates to approximately 373 injuries annually during this time.</p>
Poisoning by Prescription Drug Overdoses	<p>There were 73 drug related deaths between 2005 and 2011, with opioids most commonly involved (26% of deaths).³ Cocaine and heroin combined for 18.2% of the drug related deaths.</p> <p>A total of 272 patients reported to Ruby Memorial Hospital between 2010 and 2014 for accidental poisoning. 113 patients reported for poisoning due to over-the-counter pain killers (i.e. Aspirin and Acetaminophen), opioids, and heroin; 159 reported for poisonings due to tranquilizers, antidepressants, and psychostimulants (including LSD, amphetamine, caffeine, cannabis derivatives, antidepressants, etc.). Of the patients treated at Ruby, children under 18 had the highest number of accidental poisonings for all types of drugs from 2010 to 2014, at 76 poisonings.</p>
Suicide	<p>Although the suicide rate for this county (4.2 deaths per 100,000 residents) is well below the state rate (13.7 per 100,000), the number of suicide deaths in 15-24 year old Monongalia County residents rose from 2008 to 2012.</p> <p>There were a total of 11 suicides in the county during this time with 1 in 2010, 2 in 2011, and 5 in 2012.</p> <p>Also, seven WVU students committed suicide between fall 2010 and summer 2013. This number remained constant with 2 to 3 students committing suicide each school year during this time.</p>

Violence	<p>Morgantown Residents</p> <p>In 2012, simple assault and aggravated assault were the most common violent crimes in the Greater Morgantown community, with 245 and 144 incidents respectively, according to data from NIBRS.</p> <p>The number of sexual assaults reported to the Morgantown Police Department decreased from 36 in 2013 to approximately 20 in 2014. Five sexual assaults have been reported in the first 3 months of 2015.</p>
	<p>West Virginia University Students</p> <p>The National Collegiate Health Association (NCHA II) reports from 2010-2014 indicated that the number of students involved in physical fights was at a peak in 2010 and decreased from there, but started rising again in 2014. The number of students that reported being physically assaulted decreased from 2010 through 2011, then remained consistent through 2014.</p> <p>Unwanted sexual contact is also very prevalent among WVU students with 93% of females surveyed reporting that they experienced unwanted sexual contact while on campus. The number of WVU students that reported experiencing unwanted sexual penetration remained constant from 2010 until it doubled in 2014.</p> <p>WVU police investigated 24 forcible sexual assaults on campus from 2010 to 2013, with the highest number, 13, occurring in 2013.</p> <p>WVU freshman have remained significantly higher than the national average in sexual assaults, perpetration of sexual assault, and for physical altercations while intoxicated according to AlcoholEdu® data from 2010 through 2014.</p>
Workplace Injuries	<p>Although West Virginia University, one of the largest employers in the greater Morgantown area (approximately 20,200 employees), experienced a dramatic increase in work-related injuries from 2012 to 2013 (66 to 105), the number decreased to 72 in 2014.</p> <p>There was an increase in the number of days away from work resulting from these injuries, from 137 in 2012 to 465 in 2014. The number of cases with days away from work in 2014 was among the lowest (37) indicating that much more serious injuries likely occurred during this year. With 105 injuries in 2013, there was still a lower number of days away from work (298) than in 2014.</p> <p>The National Institute for Occupational Safety and Health (NIOSH), another major Morgantown employer, experienced only 12 OSHA reportable injuries between 2010 and 2013, and had no reportable injuries in 2014.</p>
Emergency Preparedness	<p>In 2012 and 2014, Morgantown experienced riots following WVU Mountaineer sporting events. In the 2014 incident, two Morgantown Police Department officers were injured.</p>

4. Data sources

These data have been compiled from a number of data sources (listed below). Additional data sources will continue to be actively sought by the Safe Communities Data Committee.

1. WV State Department of Public Health, DHHR Behavioral Health Epidemiological County Profile for Monongalia County. Report from February 2014 uses data through 2012. It provides information on alcohol use, drug use, and mental health in Monongalia County and compares it to West Virginia state data. This report provides rankings, allows for us to see definitively how we compare to all of the other counties in the state.

2. West Virginia Behavioral Risk Factor Surveillance System Report for 2012, DHHR. These reports presents state survey results for the year as well as county data combined for the latest available five years (for example, the 2012 report also contains state survey results typically 2008 through 2012).

3. West Virginia Office of the Chief Medical Examiner- Information about drug-related deaths from 2005 to 2011, separated by zip code for the greater Morgantown area. Illustrates which area of Morgantown has the highest number of deaths and what drugs are heavily involved in the area. The data includes a ranking of the substances leading to the most deaths in this area, the number of deaths caused by each substance in a given zip code, and the proportion of people that had a prescription for overdoses by a controlled substance. This also shows us the breakdown of deaths by age, gender, and intent (i.e. accident, suicide, or homicide).

4. WVU Department of Sociology & Anthropology. Weiss, Karen G. 2013. Party School: Crime, Campus and Community. Boston, MA: Northeastern University Press. - Self-reported violent victimization survey data from WVU students in 2009-2010. It surveyed students about whether they had ever been physically or sexually assaulted while at WVU. It then went in to whether they had reported the incident to police, had to go to the hospital for treatment of injuries, and the number of times they had been assaulted.

5. AlcoholEdu® Assessments - AlcoholEdu® is a pre-matriculation requirement for all incoming students under age 21. The performance assessments embedded into the curriculum include pre- and post-exams and behavioral surveys and are repeated 6 weeks after arrival on campus. Questions related to alcohol consumption patterns, whether they have been physically or sexually assaulted while under the influence, have physically or sexually assaulted someone while under the influence, or have driven after drinking. Data for this application was from 2010 to 2014.

6. WVU School of Medicine, Emergency Medicine. Tadros A, Layman S, and Davidov D. 2015. ED visits for Sexual Assault by College-Aged Women: Is Alcohol a Factor? – Abstract submitted to the American College of Emergency Physician (ACEP) 2015 Research Forum. The study looked at the relationship between alcohol use and sexual assault examination through a retrospective review of emergency department records from 2012 through 2014. A total of 81 cases were reviewed, 70% of which were in those under age 21. Findings showed alcohol use occurred more frequently with patients who were under 21 and if alcohol was involved, ED presentation was more likely to be delayed. The majority of patients (88.6%) received a SANE kit.

Awareness and primary prevention programs on college campuses should include information on the associations between rates of sexual assault and alcohol use as well as the importance of receiving prompt medical attention after sexual assault.

7. Annual Cleary Report- West Virginia University Police Department Annual Campus Security and Fire Safety Report of 2013 provided information on the activities performed by the WVU police department. It included the number of arrests and citations that occurred on campus from 2011 to 2013, in addition to the prevention policies/regulations that are in place. It also confirmed that there were no fire issues on campus between 2011 and 2013.

8. Drug Free Schools and Campuses Regulations Biennial Review- Report from 2013-2014 on the utilization and effectiveness of health related programs at WVU. It included the number of clients seen at the counseling center, the number of appointments per client during the time frame, and the number of participants in each program of the Student Assistance Program (SAP). This report also outlines whether the participants were self-referred or referrals from alcohol citations.

9. West Virginia State Police Annual Report- Annual report from 2013 provides the number of arrests (felony and misdemeanor), citations issued, motorists they have assisted, DUI issued, and number of crashes the Morgantown detachment has investigated during the year. It also allowed for the comparison of Morgantown to surrounding areas. Provides the number of traffic crashes that occurred on the highway in Monongalia County and the number of fatalities resulting from those crashes.

10. Morgantown Police Department - Reports from the MPD of all the traffic accidents investigated from 2010 to 2014. This data includes the age of the driver, whether they had passengers (their ages if they did), the date of the accident, the location of the accident, and what occurred (i.e. hit another vehicle, hit a pedestrian, overturned, or hit a stationary object). A DUI incident report including the person's age, the date, and the location at which they were stopped was also received. Monthly arrest record reports from 2012 through 2014 were analyzed for violence related and alcohol related offenses.

11. Ruby Memorial Hospital and Emergency Department Discharge Data- Search of the Ruby Memorial electronic medical record system from 2010 through 2014 for e-codes that are part of the Safe Communities application topics, in the charts for individuals from zip codes in the greater Morgantown area. This data was retrieved for 6 different age categories, under 18, 19-24, 25-30, 31-50, 51-70, and over 70. This data included the number of cases for each category during the 5 year span.

12. WVU School of Public Health- Dr. Christian Abildso, an assistant professor and part of the Injury Control Research Center, and several of his students completed surveys on pedestrian safety opinions in Morgantown in 2014. The assessment process included online surveys of WVU students through an announcement on the school email site, surveys of individuals using particular crosswalks in town, and behavioral observation at 3 heavily used crosswalks in Morgantown. Questions from the Neighborhood Environment Walkability Scale (NEWS) were utilized.

13. Morgantown Pedestrian Safety Plan- Report from 2010 includes information on the pedestrians that have been struck from 1998 to 2008, including when and where (down to the

street names). It also includes analysis of the walkability of neighborhoods, quality of sidewalks, and plans for future sidewalk development.

14. Data from the Mine Safety and Health Administration, compiled by the West Virginia Office of Miners' Health Safety and Training at: <http://www.wvminesafety.org/fatal97.htm>.

15. Census of Fatal Occupational Injuries, U.S. Bureau of Labor Statistics. Fatal Occupational Injuries by U.S. Metropolitan Statistical Areas (MSAs) for years from 2005 through 2013 includes data for the Morgantown MSA, which is comprised of Monongalia and Preston Counties in WV.

16. WVU Facilities Management- Data on OSHA reportable injuries that have occurred in WVU employees on campus between 2010 and 2014. This data included the number of injuries and other conditions that occurred in WVU employees, as well as the number of injuries that resulted in days away from work. It also included the total number of days away from work that resulted from all injuries combined and the number of days that the injured were forced to limit their tasks or transfer to a different job.

17. National Institute for Occupational Safety and Health (NIOSH). These data include the number of OSHA reportable injuries that occurred among NIOSH employees between 2010 and 2014, separated by age, gender, and type of injury.

18. Crime in West Virginia- A 2012 report from the office of the West Virginia Governor that outlines the types and number of crimes investigated by the various police departments in each county. It uses NIBRS data. The Monongalia County Sheriff's Office, Morgantown Police Department, WVU Police Department, Star City Police Department, and Westover Police Department (Reported less than 6 months of data) had all reported to NIBRS. The Granville Police Department was the only local organization that had not reported any data.

19. Bureau for Behavioral Health and Health Facilities (BBHF) – Suicide data broken down by county in West Virginia for 2002- 2011.

20. WVU Office of Student Life- Information about student deaths between 2010 and 2013, including the date of their passing, hometown, school rank, and cause of death, if known.

21. News report from Mountaineer News Service, WVU Reed College of Media. "How WVU's couch-burning tradition spawned riots." Posted online November 8, 2012. Accessible at: <http://mountaineernewsservice.com/wvus-couch-burning-tradition-spawned-riots/>

22. News report from USA Today online. "West Virginia fans riot in Morgantown after beating Baylor." Accessible at: <http://ftw.usatoday.com/2014/10/west-virginia-baylor-fans-riot-tear-gas>

23. News report from WSAZ News Channel 3 (Charleston WV). "Plane Crashes into Radio Tower; One Dead." Accessible at: http://www.wsaz.com/home/headlines/BREAKING_NEWS_Plane_Crash_Reported_in_Morgantown_160009445.html

Additional data sources consulted:

CDC Web-based Injury Statistics Query and Reporting System (WISQARS)- Fatal and non-fatal injury reports were used to determine the numbers of injury-related deaths and injuries in the United States within defined age categories. This system was used to find information about motor vehicle traffic crashes and accidental poisonings.

Morgantown Fire Marshall- Overcrowding citations issued by the fire marshal's office in the area including and surrounding the WVU campus from 2010 through the end of March 2015. These were sorted by type of facility, dormitories/fraternity houses, bars/nightclubs, and residential areas (Apartments, hotels, and houses).

National Collegiate Health Assessment (NCHA II) - The ACHA-National College Health Assessment (NCHA II) is a nationally recognized research survey that collects precise data about students' health habits, behaviors, and perceptions. Health issues assessed include: alcohol, tobacco, and other drug use; sexual health; weight, nutrition, and exercise; and mental health. The NCHA II was conducted annually at WVU from 2010 through 2014.

National Highway Traffic Safety Administration, Analysis of Fatal Crash Data: Report on West Virginia from 2006-2010 produced by the National Highway Traffic Safety Administration. This report includes information on different types of crashes and their fatality rate during this time, including pedestrian-involved, speeding related, alcohol related, and those involving young drivers.

Sexual Assault Nurse Examiner (SANE) at Ruby Memorial Hospital- Received the number of SANE kits completed annually from January 2010 to March 2015 at Ruby Memorial Hospital.

West Virginia Department of Public Health DHHR, The Burden of Injury in West Virginia Report. This report from 2012 provided the age-adjusted injury related death and hospitalization rates for West Virginia from a variety of causes, including motor vehicle traffic crashes, falls, accidental poisonings, and many others.

West Virginia Health Statistics Center- Number of suicides in Monongalia County for the 15- to 24-year-old age category from 2008 to 2012.

West Virginia University College of Physical Activity and Sports Sciences, liveWELL Impact Assessment. Dr. Sam Zizzi. Assessment of the impact of WELLWVU's liveWELL social marketing campaigns were analyzed across a representative sample of WVU students freshmen through graduate students. With respect to drinkWELL, 30.5% of respondents stated the campaign had a positive impact on their drinking behaviors. With respect to GreenDot (violence prevention) 22.8% said the campaign had a positive impact.

United States Census Bureau- Quick Facts provided the population breakdown for Monongalia County. American Fact Finder provided us with a breakdown of the population within each zip code that makes up the greater Morgantown area.

5. Project goals

Based on the data gathered and assessed through this collaboration, the WVU/Greater Morgantown Safe Communities Initiative has identified the following initial project goals:

- Reduce high-risk drinking among WVU students and Greater Morgantown population and thereby reduce associated negative outcomes by informing and influencing the adoption of preventive state and community policies.
- Increase prescription drug overdose education and naloxone distribution (OEND) within the West Virginia University and Greater Morgantown communities.
- Reduce prescription opioid overdoses in Monongalia County through the administration of naloxone to overdose victims by first responders including police officers; clients and patients of day report centers and substance abuse treatment programs, and drug users' family members, caregivers, and friends.
- Increase the adoption of advanced computerized adaptive diagnostic screening testing for major depressive disorder and suicidality for students and emergency department and urgent care patients.
- Reduce suicides among WVU student population and the general population of Greater Morgantown by identifying individuals at high-risk through increased screening, referrals and treatment.

6. How will the data be used in the development of new strategies

Identified data characterizing the fatal and nonfatal injury experience for the WVU, Greater Morgantown, and Monongalia County communities will be monitored and used to evaluate the impact of the coalition-led initiatives outlined below.

Additional data sources will be sought to further characterize fatal and nonfatal injuries in the area. All WVU, Greater Morgantown, and Monongalia County related data will be assessed routinely in order to facilitate the evaluation of current coalition-led initiatives and the selective evaluation of other current injury initiatives such as those compiled below in Section 4 (Community Inventory of Safety and Injury Initiatives). As priorities are reevaluated, opportunities for developing new initiatives should emerge. The Safe Communities Initiative for WVU/Greater Morgantown is poised to continually improve the surveillance, assessment, prevention and evaluation activities currently underway as the result of the past 21 months' effort.

III. Effective Strategies to Address Unintentional and Intentional Injuries

Injury Area: Alcohol-related injury						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
<i>Coalition-led Initiative:</i> Alcohol Advocacy	Reduce high-risk drinking among WVU students and Greater Morgantown population.	Inform and influence the adoption of institutional practices and state and community policies aimed at reducing high-risk drinking, and thereby preventing associated negative consequences.	Promising	Local and state policymakers , prevention practitioners,	Ongoing	WellWVU; Morgantown City Council; WV State Legislator; State, county and local prevention practitioners

Injury Area: Poisoning by prescription drug overdoses						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
<i>Coalition-led Initiative</i> First Responders' and Take-Home Naloxone Programs	Prevent drug overdose related deaths	Naloxone is a drug that counteracts effects of an opioid overdose. A program is under development to get this medication into the community, including by prescribing to law enforcement first responders, and drug users and their family members, caregivers, and friends in the Monongalia County day report center, in selected substance abuse treatment programs, and in comprehensive local community-level program modeled on Project Lazarus (NC)	Evidence-based	The Greater Morgantown Community	In Development	Morgantown Police Departments; Monogalia County Sheriff's Department; School of Medicine STEPS program; WVU ICRC

Injury Area: Violence and suicide prevention						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
<i>Coalition-led Initiative:</i> Screening for depression and suicide among emergency department, urgent care, and student populations	Identify patients and students at high risk of suicide, and refer to treatment to prevent completed suicides among WVU students and Greater Morgantown population.	Facilitate the adoption of advanced screening tool (computerized adaptive diagnostic testing for major depressive disorder, or CAD-MDD) in WVU student health and urgent care programs, and evaluate the the adoption and implementation.	Evidence-based	WVU students	Ongoing	WVU Student Health, WVU Ruby Hospital Emergency Department, WVU Injury Control Research Center

IV. Evaluation methods

Injury Area: Alcohol-related injury					
Activities	Outcomes	Length	Indicators	Method	Result
Create white paper on impact of high risk alcohol use for state and community law makers (summarizing data obtained from Safe Communities Initiative)	Number of community and state policy changes that can be applied locally	Intermediate term	Number of institutional, policy or state or community legislative changes	Monitor local community and state policymaking (legislative) processes.	
Facilitate the implementation of Screening, Brief Intervention, Referral, Treatment (SBIRT) tool in hospital ED's,	Increased screening for substance abuse (including alcohol) among student and Greater Morgantown population	Intermediate term	Number of practitioners using SBIRT	Pre and post survey of practitioners	

Urgent Care facilities and Student Health					
Host town hall meeting with Safe Communities coalition research members presenting impact data	Number of community and state policy changes that could be applied locally	Intermediate term	Number of institutional, policy or state or community legislative changes	Monitor local community and state policymaking (legislative) processes.	
Monitor local community motor-vehicle crash data, opioid overdose data, violence data, as well as police arrest data, and student substance abuse referral data	Reductions in injuries, arrests, and referrals attributable to high-risk alcohol consumption	Long term	Number of injuries, deaths, arrests and referrals	Monitor current databases identified by Safe Communities Initiative	

Injury Area: Poisoning by prescription drug overdoses					
Activities	Outcomes	Length	Indicators	Method	Result
Link WVU and state Overdose Education and Naloxone Distribution (OEND) trainiers to local police departments to indure police training needs are met.	Train all officers of police departments within Monongalia County on overdose recognition and response, including administration of naloxone.	Short term	Number of police officers trained	Poll the Police Department Chiefs (Morgantown, Star City, Westover) and the County Sheriff	
Facilitate discussion of funding sources for naloxone, and preparation of proposals for internal (WVU, Morgantown, and Monongalia County local government)	Obtain funding for equipping all officers of police departments within Monongalia County with naloxone kits.	Intermediate	Number of police officers equipped.	Percentage of all police officers in Monongalia County equipped by funding obtained (e.g., number of kits that can be purchased).	

funding and external grant funding.					
Contact Monongalia County Day Report Center director to discuss development of an OEND program within the DRC.	Recruit clients of DRC to participate in take-home naloxone program.	Long term	Number of clients recruited/kits supplied.	Percentage of all qualifying clients who enroll in take-home naloxone program	
Work with the Monongalia County Substance Abuse Prevention Coalition to determine WVU/Greater Morgantown readiness to develop a county-wide OEND Program.	Establishment of OEND Program in Monongalia County (based on Project Lazarus model)	Long term			
Promote the Safe Communities OEND project as a community approach to developing OEND programs, and disseminate to other WV communities and counties	Direct communication with first responders, day report centers, county coalitions, etc. in other WV Counties where OEND programs are needed.	Long term	Number of police and other responders trained and equipped statewide; number of DRC's implementing OENDs; number of substance abuse treatment programs implementing take-home naloxone; number of communities initiating community level OEND Programs.	Follow up direct communications.	
Monitor county overdose data and reports of overdose reversals	Document reductions in number and rate of opioid overdose	Long term	Reductions in number and rate of opioid overdoses; and documented	Overdose data assessment; and self-reporting of overdose reversals by	

through naloxone administration	reversals attributable to OEND program.		number of overdose reversals through naloxone administration.	police, DRC clients, patients of substance abuse treatment programs, and other community users and their family members, caregivers, and peers.	
--	---	--	---	---	--

Injury Area: Violence and Suicide Prevention					
Activities	Outcomes	Length	Indicators	Method	Result
Contact officials in WVU Trauma Center, WVU Urgent Care, and WVU Student Health to discuss findings from recent pilot in WVU Emergency Department.	Decision to pilot or implement CADD-MDD tool in WVU Student Health, Urgent Care, and Trauma Center.	Short term	Number of WVU healthcare facilities implementing CAD-MDD to screen patients.	Direct communication	
Work with WVU healthcare officials to Implement CADD-MDD and suicidality tool in WVU facilities.	All students and patients in selected WVU healthcare facilities are administered CAD-MDD/ suicidality tool.	Intermediate	Number, and percentage of total, of students and patients who are administered the tool; number, and percentage of total of students and patients diagnosed with MDD, and identified with high suicide risk.	Screening data from health care facilities	
Contact officials in non-WVU healthcare facilities in Greater Morgantown to discuss findings from recent pilot of CAD-MDD and suicidality tool in WVU ED.	Decision to pilot or implement CADD-MDD tool in non-WVU healthcare facilities in Greater Morgantown.	Intermediate	Number of WVU healthcare facilities implementing CAD-MDD to screen patients.	Direct communication	

Work with non-WVU healthcare officials in Greater Morgantown to Implement CADD-MDD and suicidality tool in WVU facilities.	All patients in selected Greater Morgantown healthcare facilities are administered CAD-MDD/ suicidality tool.	Intermediate	Number, and percentage of total, of patients who are administered the tool; number, and percentage of total patients diagnosed with MDD, and identified with high suicide risk.	Screening data from health care facilities	
Monitor Monongalia County Suicide Data	Gather and assess data annually to document the number and rate of completed suicides among Greater Morgantown and WVU populations.	Long term	Reductions in number and rate of suicide completions among Greater Morgantown and WVU populations.	Suicide data for Monongalia County.	

Section 4: Community Inventory of Safety and Injury Initiatives*

Injury Area: Suicide Prevention	
Name of Initiative	Target Group
HelpWell	WVU faculty/staff and students
Kognito Training	WVU faculty/staff and students
Prevent Suicide WV	Morgantown community
Depression and Bipolar Support Alliance	Morgantown community
Second Step	Youth (4-14)
Mental Health First Aid	Adults

Injury Area: Violence Prevention	
Name of Initiative	Target Group
GreenDot Program	WVU faculty/staff and students
loveWELL	WVU students
West Virginia Coalition Against Domestic Violence	WV residents
WV Foundation for Rape Information Services (FRIS)	WV residents

Rape and Domestic Violence Information Center (RDVIC)	Morgantown community
Peer Advocates	WVU students
PROTECT/R.A.D	Morgantown community (women)
LiveSafe Application	WVU students
Respect Program & Healthy Relationships	High school students

Injury Area: High Risk and Underage Drinking	
Name of Initiative	Target Group
AlcoholEdu	WVU students
drinkWELL	WVU students
CHOICES Toolkit	WVU students
leadWELL	WVU students
Student Assistance Program (SAP)	WVU students
Faculty and Staff Assistance Program (FSAP)	WVU faculty/staff
Basics (Brief Alcohol Screening and Intervention of College Students)	WVU students
21 st Birthday Card Program	WVU students
Alcoholics Anonymous	Morgantown community
Recovery Community	WVU students
The West Virginia Collegiate Initiative to Address High Risk Alcohol Use (WVCIA)	WVU faculty/staff and students
Alcohol Free Events	WVU students
4-H Health Rocks	Morgantown community
Narcotics Anonymous	Morgantown community
Alcohol and Drug Overdose Clemency Act	WV residents
Zero Tolerance Driving Initiative	Morgantown community
Too Good For Drugs	K-12
Alcohol Literacy Challenge	High school & WVU

Injury Area: Motor Vehicle Traffic Accident Prevention	
Name of Initiative	Target Group
Car Fit	Older Adults
DubV Safe Ride	Morgantown community

Injury Area: Older Adult Fall Prevention	
Name of Initiative	Target Group
In Touch and Concerned (ITAC)	Older adults 65+
Senior Monongalian's	Older adults 65+
Amedisys Home Health	Homebound individuals
Visiting Angels	Older adults 65+

Injury Area: Workplace Injury Prevention	
Name of Initiative	Target Group
OSHA Voluntary Protection Program (VPP)	Employees

Injury Area: Emergency Preparedness	
Name of Initiative	Target Group
CERT (Community emergency response team)	Morgantown community
Amateur/ Ham Radio Groups	Morgantown community
Practice Drills	Morgantown community
MUB Taskforce	Morgantown community
WV REDI	WV residents
Mountaineer Area Rescue Group	Monongalia county residents
North Central WV Red Cross Chapter	Morgantown Community
WVU Emergency Alert System	WVU faculty/staff and students

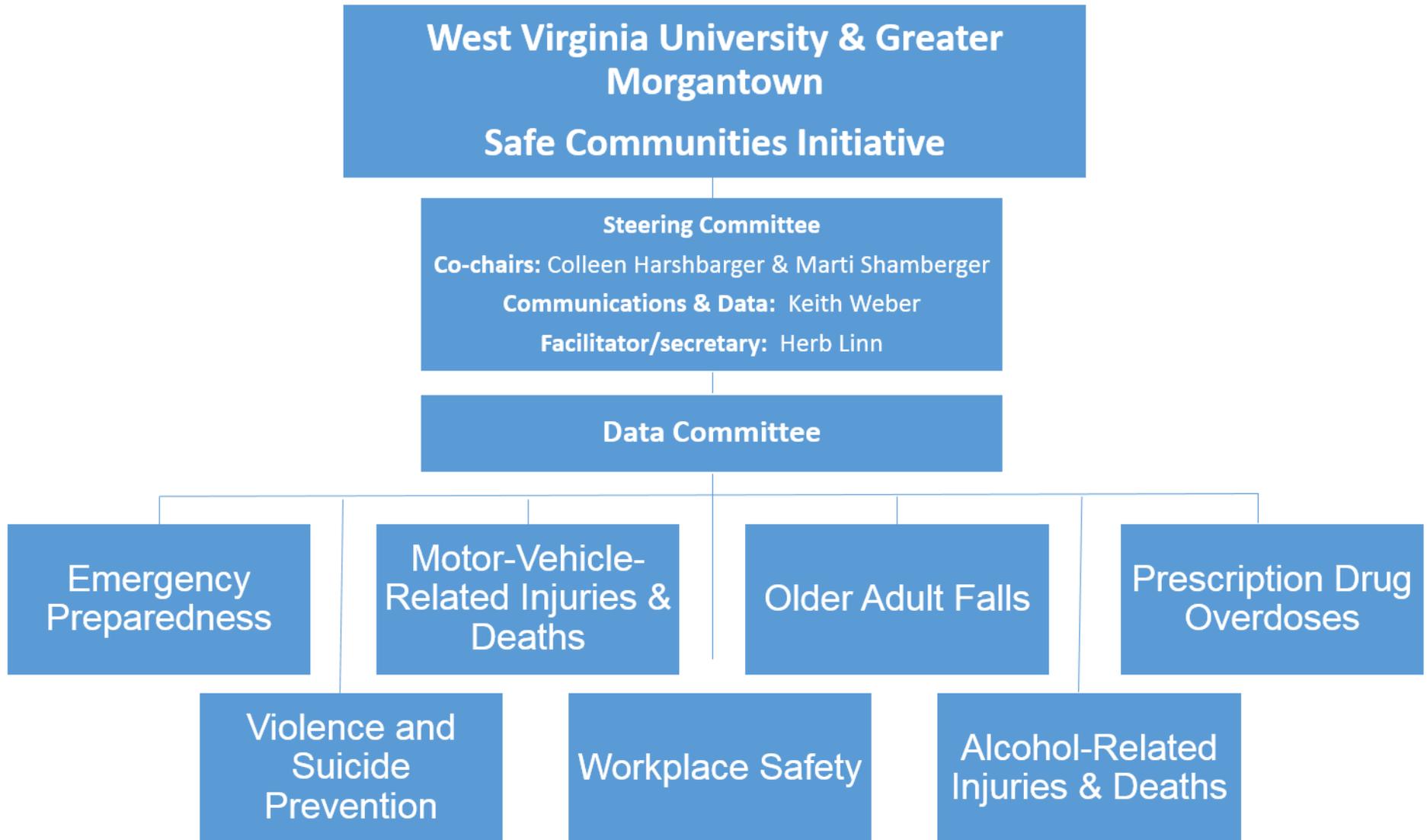
*A more detailed list can be found in Appendix E

Appendix A: Community Coalition Member List

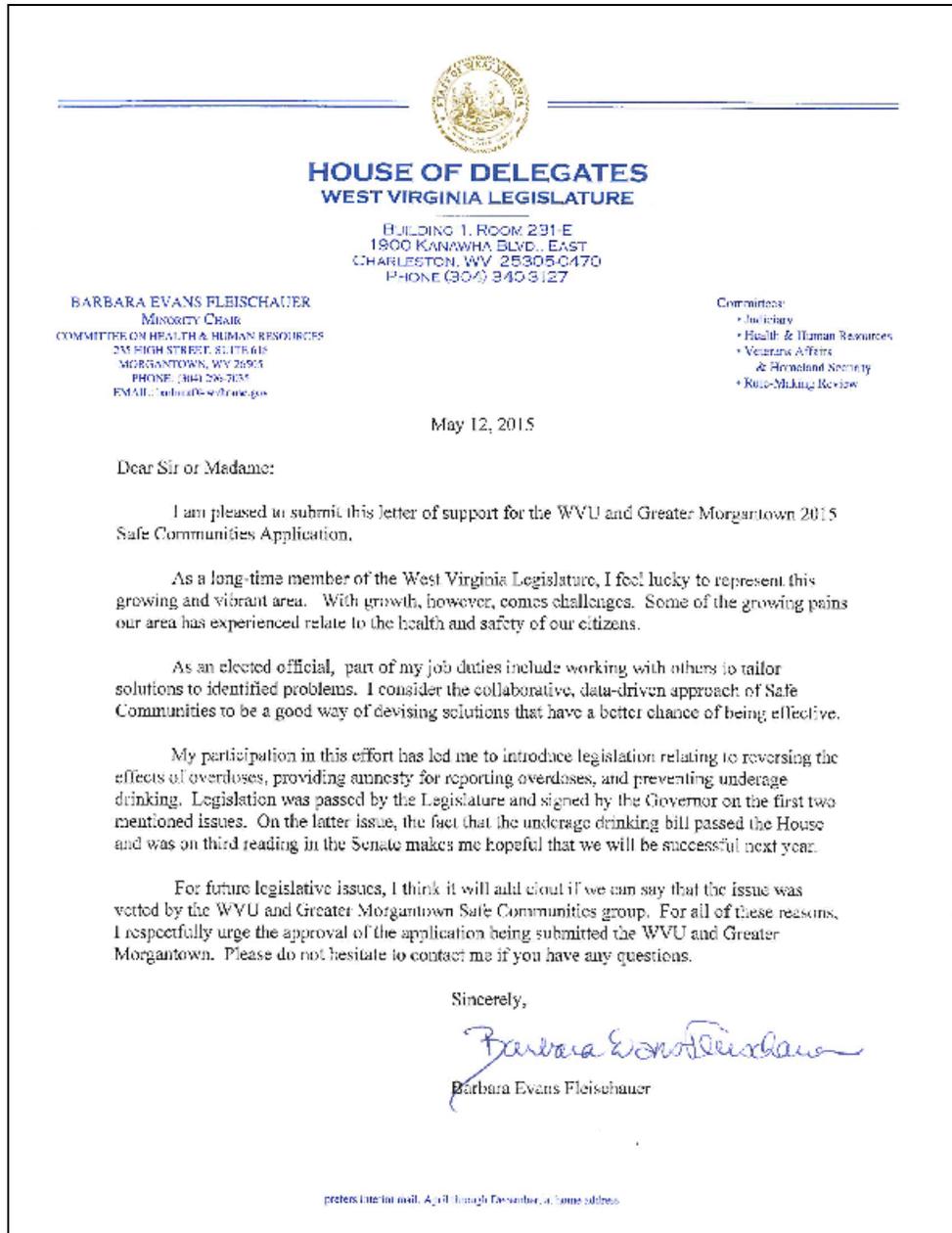
Name	Organization/Affiliation	Email	Date Joined	Member Role
Marie Abate	WVU School of Pharmacy	mabate@hsc.wvu.edu	2014	WVU partner
Christiaan Abildso	SPH Pedestrian Safety	cgabildso@hsc.wvu.edu	2014	Data provider
Saba Ashfaq	interested MPH student (SWAT member)	sashfaq@mix.wvu.edu	2014	WVU partner
Bill Austen	Morgantown MPO	baustin@labyrinth.net	2014	Community partner
Chad Barker	University Police Department (UPD)	chad.barker@mail.wvu.edu	2014	WVU partner
Scott Benson	Mon EMS, Medical Director	bensons@monhealthsys.org	2014	Community partner
Ruchi Bhandari	NIOSH	ygn8@cdc.gov	2014	Data group
Mark Caravazos	Morgantown Fire Dept	macaravazos@morgantownfd.org	2014	Community partner
Danielle Davidov	Emergency Med & SPH	ddavidov@hsc.wvu.edu	2014	Data group
Steve Davis	Director of Emergency Medicine/Research	sdavis@hsc.wvu.edu	2014	Data group
Gypsy Denzine	Associate Provost	Gypsy.Denzine@mail.wvu.edu	2014	WVU partner
Jake Evans	Student Government Association	jrevans@mix.wvu.edu	2014	WVU partner
Amy Fiske	WVU Psychology	amy.fiske@mail.wvu.edu	2014	WVU partner
Barbara Evans Fleischauer	WV Legislature	friendsofbarbara@gmail.com	2014	Community leader
Michael Fortney	Emergency preparedness	mfortney@mecca911.org	2014	Community partner
Mark Fullen	Extension, Safety & Health	M.Fullen@mail.wvu.edu	2014	WVU partner
Amy Gentzler	WVU Psychology	amy.gentzler@mail.wvu.edu	2014	Data group
Kelly Gurka	WVU School of Public Health	kgurka@hsc.wvu.edu	2014	Data group
Colleen Harshbarger	WELLWVU	colleen.harshbarger@mail.wvu.edu	2013	Steering committee
Kim Hartsell	WVU Parking	Kim.Hartsell@mail.wvu.edu	2015	WVU partner
Ed Hawkins	Monongalia County Commission	votehawkins@outlook.com	2015	Community partner
Teresa Hefferin	WVU Environmental Health and Safety	teresa.makins@mail.wvu.edu	2014	WVU partner
Mary Huntley	Clinical & Translational Science Institute	mjhuntley@hsc.wvu.edu	2014	WVU partner
Michael Ibekwe	WVU School of Public Health	mibekwe@mix.wvu.edu	2014	Steering committee
Lova Jarros	(SPH researcher/alcohol/vehicle)	ljaros@hsc.wvu.edu	2014	WVU partner
Dina Jones	HSC Orthopedics	djones@hsc.wvu.edu	2014	Data provider
Dan Kimble	Morgantown Area Chamber of Commerce	daniel@morgantownchamber.org	2014	Community partner

Name	Organization/Affiliation	Email	Date Joined	Member Role
Herb Linn	WVU Injury Control Research Center	hlinn2@hsc.wvu.edu	2014	Steering committee
Sam Maki	United Way	frn@unitedwaympc.org	2014	Community partner
Christopher Morlock	WVU MPA student	cmorlock@mix.wvu.edu	2014	WVU partner
Bob Musick	WV Council for the Prevention of Suicide	bmusick@psimedinc.com	2014	Community partner
Christopher Nyden	Student Government Association	cnyden1@mix.wvu.edu	2014	WVU partner
Chris Plein	Public Administration, WVU Town/Gown	chris.plein@mail.wvu.edu	2014	WVU partner
Ed Preston	Morgantown Police Department (MPD)	epreston@cityofmorgantown.org	2014	Community partner
Bob Roberts	University Police Department (UPD)	bob.roberts@mail.wvu.edu	2014	WVU partner
Linda Rudy	WVU School of Public Health	ljrudy@hsc.wvu.edu	2014	WVU partner
Jenny Selin	Morgantown Mayor	jselin@hotmail.com	2013	Community leader
Marti Shamberger	Morgantown City Council	martishamberger@comcast.net	2013	Community leader
Harold Sperringer	Morgantown Police Department (MPD)	hsperringer@cityofmorgantown.org	2014	Community partner
Allison Tartaglia	WELLWVU	alison.tartaglia@mail.wvu.edu	2014	Data group
Wesley Thomas	WELLWVU	wthomas2@mail.wvu.edu	2014	WVU partner
Emily Vasile	WVU School of Public Health	eavasile@hsc.wvu.edu	2015	WVU partner
Laura Walls	Valley HealthCare System	lwalls@valleyhealthcare.org	2015	Community partner
Keith Weber	WVU Communications	kweber@wvu.edu	2014	Steering committee
Karen Weiss	WVU Sociology & Anthropology	karen.weiss@mail.wvu.edu	2014	Data group
Michael Wolfe	Director of MECCA	mwolfe@mecca911.org	2014	Community partner
Kristi Wood-Turner	Center for Service and Learning	kwood@wvu.edu	2014	WVU partner
Cathy Yura	WELLWVU	cathy.yura@mail.wvu.edu	2013	WVU partner
Motao Zhu	WVU School of Public Health	mozhu@hsc.wvu.edu	2014	Data group

Appendix B: Safe Communities Coalition Organizational Chart



Appendix C: Letters of Support: Barbara Evans Fleischauer, WV House of Delegates



Appendix C: Letters of Support: West Virginia University Injury Control Research Center



May 26, 2015

Carrie Nie
Director, Safe Communities America
National Safety Council
1121 Spring Lake Drive
Itasca, Illinois 60143

Re: Letter of Support for West Virginia University and Greater Morgantown Safe Communities Initiative/Application

Dear Ms. Nie:

The West Virginia University Injury Control Research Center (WVU-ICRC) is pleased to support the West Virginia University/Greater Morgantown Safe Communities Initiative and its application to become one of the locales across the United States that are accredited by Safe Communities America.

The WVU-ICRC—one of 10 U.S. centers of excellence in injury prevention research, education and outreach funded by the Centers for Disease Control and Prevention—fully supports the Safe Communities America model of data-driven prevention and evaluation. The Center has worked closely with the WVU-Morgantown community coalition over the past year, providing data, technical assistance, and facilitation support during the planning, data gathering, and preparation of the application package.

The Center will continue to work collaboratively in partnership with the many university, city, county, business, and individual partners who have transformed the Safe Communities America model into a local reality. We are committed to following through with the initiative, working toward the demonstrable reduction of injuries and injury risks in the University and Greater Morgantown communities.

Best wishes,

A handwritten signature in black ink, appearing to read 'J. Coben'.

Jeffrey H. Coben, MD
Associate Vice President for Innovations, Planning, and Operations;
Health Sciences Center
Professor of Emergency Medicine; School of Medicine
Professor of Health Policy, Management and Leadership; School of Public Health
Director, Injury Control Research Center
West Virginia University

Phone: 304-293-6682
Fax: 304-293-0265

PO Box 9151
Morgantown, WV 26506-9151

Equal Opportunity/Affirmative Action Institution

Appendix C: Letters of Support: Monongalia County Health Department



Monongalia County Health Department

453 Van Voorhis Road Morgantown, WV 26505-3408

Phone 304-598-5100 Fax 304-598-5199

www.monchd.org

May 29, 2015

Colleen Harshbarger
Director, WVI/WVU Office of Wellness & Health Promotion
West Virginia University
P.O. Box 6507
Morgantown, WV 26506

Dear Ms. Harshbarger,

It gives me great pleasure to write this letter of support of West Virginia University's and Greater Morgantown's (WVU/Greater Morgantown) application to become a designated National Safety Council Safe Community. Achieving such a designation aligns with Monongalia County Health Department's mission to achieve a healthy community by protecting and promoting public health. We fully support partnerships with the aim to prevent injury and look forward to participating in the WVU/Greater Morgantown Safe Communities coalition.

Our efforts in meeting our mission occur via education, training, advocacy and provision of health services. Some services we provide include: Disaster Sanitation; Disease Surveillance & Control; Emergency Preparedness & Response; Environmental Health; Infectious Diseases & Epidemiology; Nutrition Counseling & Education; Permitting & Inspection of Body Piercing Studios, Campgrounds, Child Care Centers, Manufactured Homes, Schools, Septic Systems, Swimming Pools, and Well Water; Public Health Nursing Clinics; Rabies Control; Sexually Transmitted Diseases; Tuberculosis; and, Vaccinable Preventable Diseases. As subject matter experts in these and other fields we look forward to assisting achievement of safe community designation.

Therefore, we give our full supporting to this application and important accreditation. If further information is required please do not hesitate contacting me. Thank you and good luck with your application.

Sincerely,

A handwritten signature in blue ink, appearing to read "Lee B. Smith", with a date "5/29/15" written to the right.

Lee B. Smith, MD, JD, FACEP
Executive Director / County Health Officer
Monongalia County Health Department

Appendix D: Meeting Minutes

MEETING MINUTES

WVU & Greater Morgantown Safe Communities Initiative			
Date	November 22, 2013		
Type of Meeting	<input checked="" type="checkbox"/> General Meeting <input type="checkbox"/> Steering Committee <input type="checkbox"/> Work Group Meeting		
Attendees	Chris Plein, Barbara Fleischauer, Jenny Selin, Marti Shamberger, Herb Lin, Coleen Harshbarger, Cathy Yura		
Recorder	N/A		
TOPIC	DISCUSSION	ACTION or F/U	WHO
1.	<ul style="list-style-type: none"> Safe Communities process and timeline, alignment with state laws, county and other WV municipalities, Criteria for US Designation 		
2.	<ul style="list-style-type: none"> Discussed value of using the process to address real needs of our community and the value of this being a project that could position WVU in good light 		
3.			
4.			
5.			
Announcements	Presentation by Colleen to county group – December 12th 6:30 p.m		
Adjourn	December 20th 7:45 a.m. Zenclay		

MEETING MINUTES

WVU & Greater Morgantown Safe Communities Initiative			
Date	December 20, 2013		
Type of Meeting	<input checked="" type="checkbox"/> General Meeting <input type="checkbox"/> Steering Committee <input type="checkbox"/> Work Group Meeting		
Attendees	Jenny Selin, Marti Shamberger, Barbara Evans Fleischauer, Colleen Harshbarger, Cathy Yura, Alison Tartaglia, Steve Davis, Mary Huntley, Dawn Castillo, Bill Austen		
Recorder	N/A		
TOPIC	DISCUSSION	ACTION or F/U	WHO
1.	<ul style="list-style-type: none"> Group discussed and decided to broaden the scope of the Safe Communities proposal to include Greater Morgantown and WVU and need to reach out to County Commissioners 	Colleen garnered support from county commission and city council reached out to President Gee	
2.	<ul style="list-style-type: none"> Group consensus was that Marti Shamberger and Colleen Harshbarger will serve as co-chairs 		
3.	<ul style="list-style-type: none"> Discussion occurred around resources for the project – need for dedicated personnel - possibly a graduate assistant to work on data collection. 	evaluate sources for funding	
4.	<ul style="list-style-type: none"> Discussed possibility of shared funding – city, state and WVU, need \$30K - \$60K depending on program/tuition waiver, etc. 	looked in to applying for exploratory research grant	
5.			
Goals	<ul style="list-style-type: none"> Letter of Intent Submitted, identify resources 		
Adjourn	Doodle poll sent out, based on group consensus		

MEETING MINUTES

WVU & Greater Morgantown Safe Communities Initiative			
Date	June 6, 2014 Monongalia County Health Department, Training Center		
Type of Meeting	<input checked="" type="checkbox"/> General Meeting <input type="checkbox"/> Steering Committee <input type="checkbox"/> Work Group Meeting		
Attendees	Colleen Harshbarger, Marti Shamberger, Herb Linn, Cathy Yura, Jim Strosnider, Kelly Nix, Ruchi Bandhari, Amy Gentzler, Steve Davis, Karen Weiss, Mark Caravasos, Philip Scott, Gypsy Denzine, Bob Roberts, Alison Tartaglia, Ed Preston		
Recorder	Herb Linn		
TOPIC	DISCUSSION	ACTION or F/U	WHO
1. Safe Comm. process	<ul style="list-style-type: none"> Colleen points out this initiative would be the first municipality-county-university collaboration in the US. Colleen explained requirements of Safe Comm. process. 		Colleen H.
2. Benefits	<ul style="list-style-type: none"> Marti Shamberger pointed out the benefits of the Safe Communities Initiative to the City of Morgantown 		Marti S.
3.	<ul style="list-style-type: none"> When looking at community data, one challenge will be looking at underlying threads, such as high-risk drinking; having good data will give support to those looking at policy issues involving such underlying issues 		
4.	<ul style="list-style-type: none"> A mobile app called Live Safe is being implemented; it allows peer to peer tracking for safety purposes, as well as anonymous reporting 		
5.	<ul style="list-style-type: none"> Opportunity to apply for WVU School of Public Health Community Engagement Grant 	Draft of proposal	Herb L.
Announcements	Meetings of the larger group will be quarterly to start.		
Adjourn	Doodle poll sent out, based on group consensus		

MEETING MINUTES

WVU & Greater Morgantown Safe Communities Initiative			
Date	September 25, 2014		
Type of Meeting	<input checked="" type="checkbox"/> General Meeting <input type="checkbox"/> Steering Committee <input type="checkbox"/> Work Group Meeting		
Attendees	Colleen Harshbarger, Marti Shamberger; Herb Linn; Michael Ibekwe, Karen Weiss; Gypsy Denzine; Alison Tartaglia; Ruchi Bhandari; Dawn Castillo; Bob Musick; Steve Davis; Danielle Davidov; Keith Weber, Kristi Wood-Turner; Jeff Wright; Bob Roberts; Jenny Selin; Barbara Fleischauer, Cathy Yura		
Recorder	Herb Linn		
TOPIC	DISCUSSION	ACTION or F/U	WHO
1. SPH grant	<ul style="list-style-type: none"> The School of Public Health Community Engagement grant was submitted for the Safe Communities Initiative and awarded (\$4,947.50) 		
2. Com. engagement objectives	<ul style="list-style-type: none"> Partner with DubV SafeRide and downtown bars, promote the LiveSafe app through community business partners, develop social media presence and website Colleen proposed servers go through TIPS® training 		Keith W.
3. LiveSafe	<ul style="list-style-type: none"> LiveSafe mobile App update 		Bob R.
4. Data Group update	<ul style="list-style-type: none"> Meets monthly, 6 program areas with people serving as central point of contact person for each area 		Keith W.
5.			
Announcements			
Adjourn	Doodle poll sent out, based on group consensus		

MEETING MINUTES

WVU & Greater Morgantown Safe Communities Initiative			
Date	January 22, 2015		
Type of Meeting	<input checked="" type="checkbox"/> General Meeting <input type="checkbox"/> Steering Committee <input type="checkbox"/> Work Group Meeting		
Attendees	Colleen Harshbarger, Marti Shamberger, Dawn Castillo, Karen Weiss, Gypsy Denzine, Bob Musick, Herb Linn, Michael bekwe, Ruchi Bhandari, Cathy Yura, Alex Shy, Alison Tartaglia, Chad Barker, Megan Villers, Justin Stone, Wesley Thomas, Keith Weber, Laura Walls, Emily Vasile, Jeff Wright		
Recorder	Herb Linn		
TOPIC	DISCUSSION	ACTION or F/U	WHO
1. Safe Comm. application	Introduced new application process		Carrie Nie
2. Lighting RailTrail project	Lighting the rail trail project, Phase 1- hotel- amphitheater, Phase 2- power plant Seneca center, Phase 3- Decker's creek- dog park Phase 4- extension into Star City		Alex Shy, Justin Stone
3. Data	Data from 3-5 years summarized to begin with by basic community demographics Preliminary data sources for submitting the application can be hospital discharge data, medical examiner data, and police data		
4. Communication & Media	Introduced logo and website design, proposed a do a safe community partner spotlight page on website, Discussed IMC strategies, for now focusing on promoting DubV Safe Rides and LiveSafe App		Keith W.
5.	Community partners to date: Jamison's, Bent Willeys, 1 2 3 Pleasant St., Vice Versa, the Apothecary, Mario's Fishbowl, Tin 202, the Vintage Room, Vandalia apartments, the Ridge, College Park, the Domain		
Announcements	National Occupational Injury Research Symposium		
Adjourn	doodle will be sent out to secure date for next meeting		

MEETING MINUTES

WVU & Greater Morgantown Safe Communities Initiative			
May 4, 2015			
Type of Meeting	<input checked="" type="checkbox"/> General Meeting <input type="checkbox"/> Steering Committee <input type="checkbox"/> Work Group Meeting		
Attendees	Michael Ibekwe, Megan Villers, Kim Hartsell, Sam Maki, Karen Weiss, Marie Abate, Marti Shamberger, Bob Musick, Herb Linn, Colleen Harshberger, Wesley Thomas, Harold Sperringer, Jeff Wright, Allison Tartaglia		
Recorder	Herb Linn		
TOPIC	DISCUSSION	ACTION or F/U	WHO
1. Approve January Meeting Minutes	<ul style="list-style-type: none"> Key discussion points Decisions made: Approved 	N/A	
2. Comments on Draft Application	<ul style="list-style-type: none"> Key discussion points: need review/input on data for all injury topics: data & programs Decisions made: Review and comment offline 	Provide comments	All participants
3. Missing Data for Violence	<ul style="list-style-type: none"> Key discussion points: Other police: Westover, Granville, Star City; NIBRS Decisions made: Try to pull more data for balance between WVU & Grear Mgmt. 	Provide data	All participants
4. Discrepancies in Rx Poisoning Data	<ul style="list-style-type: none"> Key discussion points Decisions made: adjusted the zip code areas 		
5. Weaker Sections; NIOSH Particip.	<ul style="list-style-type: none"> Key discussion points: older adult falls, emergency preparedness, workplace injuries Decisions made: NIOSH collaboration needs to be removed, not data 		
Announcements	Also need input on programs/interventions	Provide suggestions	All participants
Adjourn			

Appendix E: Detailed Community Inventory of Safety and Injury Initiatives

Injury Area: Alcohol-related Injury and Poisoning by Prescription Drug Overdoses <i>(Combined areas)</i>						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group	Length of Project	Partners
AlcoholEdu®	To educate students that are starting college about safe alcohol practices	With nine published studies documenting its efficacy, <i>AlcoholEdu</i> is the only program proven to reduce alcohol-related negative consequences among college students.	Evidence Based- Gives statistics on student drinking practices and how they change due to the program	Students under 21 just entering college. Also used with students who receive alcohol citations	Annual/Ongoing	EverFi WELLWVU
drinkWELL	To increase students' knowledge, influence behavior, and reduce the number of negative consequences experienced due to alcohol misuse	Part of the liveWELL campaign with WELLWVU that incorporates social marketing messages to help students develop discrepancy between choices made around alcohol use and consequences. Partially funded by the NCAA.	Evidence Based 30.5% of students surveyed by external department reported positive impact on behavior	All WVU Students	Ongoing	WELLWVU Wellness & Health Promotion
CHOICES Toolkit	Have students consider social norms, protective factors, choices and decision making around drinking	Experiential game that incorporates motivational enhancement and multi-component skill development to encourage students to evaluate choices that they make around alcohol use. Used with students, in residence halls, academic classrooms, student	Promising-developed on evidence based strategies with evaluations showing increased knowledge and impact on choices related to drinking behaviors	All WVU Students	Ongoing	WELLWVU Wellness & Health Promotion

		organizations, and athletic teams.				
leadWELL	Train students to engage their peers in health related discussions, including alcohol use	150-200 mentors are trained through this WELLWVU program annually to have health related conversations with fellow students and make referrals when appropriate	Evidence Based Internal research shows that students who engage with a peer and learn of a resource are four times more likely to report positive behavior change.	All WVU Students	Ongoing	WELLWVU Wellness & Health Promotion
Student Assistance Program	Provide a wide array of services for students with alcohol or drug issues	A program that offers services including individual assessment, individual and group counseling, and educational activities. Students may obtain services on their own or referral from Office of Student Conduct.	Evidence Based and Promising – Uses CHOICES toolkit and BASICS	All WVU Students	Ongoing	WELLWVU Carruth Counseling Center
Faculty and Staff Assistance Program (FSAP)	Provide a wide array of confidential services for faculty, staff, and their family members, including drug and alcohol.	This program offers confidential counseling for numerous issues including, but not limited to, relationship concerns, parenting/family concerns, depression/grief, job stress, and more. It also offers referrals to other services that are appropriate for the given issue	Evidence Based	WVU Faculty, Staff, and their Families	Ongoing	Employee Assistance Programs (WVU, WVUH, NIOSH,)
21st Birthday Card Program	Prevent excessive drinking in	Cards are sent to WVU Students turning 21 to	Promising	WVU Students	Ongoing	WELLWVU

	college students that are turning 21 years old	provide alternatives to drinking and alcohol prevention resources				
Alcoholics Anonymous	To assist people in overcoming their addiction to alcohol with help from others that have gone through or are in the same situation	There are several meetings held on and near the WVU campus weekly.	Evidence Based- Long Standing National Program	The Greater Morgantown Community	Ongoing	
Recovery Community	To give students a place that will support their sobriety without judgment	WELLWVU is in the process of trying to develop this community on the WVU campus	Evidence Based- Recovery communities are present on campuses around the country	WVU Students that are recovering from and addiction	Ongoing development	
The West Virginia Collegiate Initiative to Address High Risk Alcohol Use (WVCIA)	Aims to promote a healthy campus environment by reducing alcohol, other drug use, and the associated violence on college campuses	WVCIA funds the administration of the National Collegiate Health Assessment II (NCHA II) to gauge student behaviors and see how they are changing over time	Evidence Based- Group funds ACHA-NCHA II for state institutions	All WVU Students, Faculty, Staff, and Visitors to the Campus	Ongoing	WELLWVU Wellness & Health Promotion – (Policy Committee Chair)
Alcohol Free Events	Provide fun, free alternatives to activities that include alcohol consumption	WVU Student Affairs hosts “Up All Night” every Thursday, Friday, and Saturday night in the student union and the “Student Lot” is an alcohol free tailgate at every home football game	Promising	All WVU Students	Ongoing	WVU Office of Student Life
4-H Health Rocks	To educate children about the healthy	Health Rocks is a national 4-H program that is	Evidence Based-	The Greater Morgantown	Ongoing	WVU Extension

	living and bring communities together to reduce tobacco, alcohol, and other drug use	aimed at engaging children between 8 and 14 years old with adults to promote healthy lifestyles	Results show increases in knowledge and skills	n Community		
Narcotics Anonymous	Assist and support people that are recovering from drug addiction	There are meetings around Morgantown and on the WVU campus throughout the week to provide fellowship and support through the 12 step program for any recovering drug addict.	This program has been around since the 1940s and can be found in many countries around the world	The Greater Morgantown Community	Ongoing	
Monongalia County Drug Courts	To ensure that both juveniles and adults with drug abuse issues receive the assistance that they need in getting clean	Program ensures those that enter the judicial system for a drug offense are receive rehabilitation assistance and monitoring.	Promising	The Greater Morgantown Community	Ongoing	Morgantown Police Department
Alcohol and Drug Overdose Clemency Act	To ensure that anyone who is experiencing or witnessing an overdose will feel comfortable calling for assistance	It allows anyone that is experiencing an overdose or is helping someone that has overdosed to receive medical assistance without facing prosecution.	Evidence Based-	West Virginia Residents	Law Just Passed	
Zero Tolerance Driving Initiative	To reduce the incidence of drunk driving and underage drinking in Morgantown, WV	Program increased the number and frequency of sobriety checkpoints around Morgantown as well as brought the “buzzkill flashlight” with alcohol sensor to a level of 0.01-0.02.	Promising	The Greater Morgantown Area	2010-2014	Morgantown Police Department WVU School of Public Health

DARE (Drug Abuse Resistance Education)	Help elementary and middle school students understand the risks of drug/alcohol abuse, as well as how to stay safe on the internet and to prevent violence in schools	Program is predominantly in local elementary schools. Monongalia County Sheriff's Deputies lead fun educational programs to teach how to prevent bullying in school, stay safe on the internet, and prevent drug abuse	Evidence Based-long standing national program	Monongalia County Children	Ongoing	Morgantown Sheriff's Office
Naloxone Program	Prevent drug overdose related deaths	Naloxone is a drug that counteracts effects of an opioid overdose. A program is under development to get this medication into the community. Policy, procedure, training, and acquisition recommendations are currently being evaluated.	Promising	The Greater Morgantown Community	In Development	Morgantown Police Department
Too Good For Drugs	Provide education in Social & emotional Competencies by teaching them how to be socially competent and autonomous problem solvers	School-based prevention program for K-12 that builds On students resiliency by reducing risk factors and building protective factors	Research Based-SEARCH Institute	K-12	Ongoing	Mon County Prevention Coalition
Alcohol Literacy Challenge	To correct erroneous beliefs about the effects of alcohol, decreasing positive & increasing	Classroom based program designed to alter alcohol expectancies & reduce the quantity & frequency of alcohol use among	Evidence Based	High-school & College	Ongoing	Mon County Prevention Coalition

	negative expectancies	high school & college students				
--	-----------------------	--------------------------------	--	--	--	--

Injury Area: Motor Vehicle Traffic Accident Prevention						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
Car Fit	Ensure that everyone is driving a vehicle that is appropriate and safe for them	WVU Occupational Therapy students are hosting this event, particularly geared toward seniors, to make sure that everyone has a vehicle that fits their needs and physical condition. It aims to identify issues, such as too low of a seat, pedals set too far away, or just all around too large of a vehicle for someone with a poor eye site	Evidence Based- Risk of Accident is increased in those over 75 years old	Senior Citizens/ Entire greater Morgantown Community	2015	AAA AARP The American Occupational Therapy Association Inc.
DubV Safe Ride	Prevent driving under the influence by providing a safe ride home for community members that have been drinking	Organization that charges fee for transportation to get individuals and their vehicles home safely.	Promising	The Greater Morgantown Community	Ongoing	DubV Safe Rides

Injury Area: Older Adult Falls						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners

In Touch and Concerned (ITAC)	Support and ensure the safety of Morgantown residents that are over 60 years old or have disabilities	This program is primarily geared towards providing transportation services to older adults, veterans, blind, and disabled residents who would be homebound without it.	Promising- The number of residents accessing this service has doubled from 600 to 1230 in the past year.	Older or Disabled Adults with Limited Mobility or Transportation Means	Ongoing	
Senior Monongalians	Provide assistance to senior citizens through free or low cost programs	They provide in-home assistance to older adults including falls prevention.	Promising-	Older Adults, particularly those with limited mobility	Ongoing	
Amedisys Home Health	Provide skilled nursing and needed therapies to homebound individuals	They educate their clients that are homebound how to care for themselves after being in a facility with around the clock assistance and provide therapy services (speech, occupational, or physical) that they are not able to access otherwise.	Evidence Based	Homebound individuals	Ongoing	
Visiting Angels	Provide assistance with daily tasks and companionship	This is a program that allows a family to choose their elder care giver that is specially trained for fall injuries and mobility issues.	Evidence Based	Older Adults	Ongoing	
HealthSouth	Provide prevention education to older adults that have already experienced injuries due to a fall	This rehabilitation hospital offers educational programs to its patrons to help them prevent future injuries due to falls	Promising	Older Adults that have already been injured in a fall	Ongoing	

Injury Area: Suicide Prevention						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
HelpWell	Increase collaboration among campus and community partners through the development of a multidisciplinary team charged with developing and implementing suicide prevention and related mental health policies and procedures	General clinical services for all students on the WVU campus include individual, group, and substance abuse counseling, psychiatry, learning disability/ADHD assessment, and MindFit Clinic (cognitive training and neurofeedback).	Awarded National Substance Abuse and Mental Health Services Administration (SAMHSA) grant	WVU faculty, staff, and students	3 years	WELLWVU Carruth Center
Kognito Training	Increase the amount of suicide prevention and mental health promotion training and informational materials, for students, faculty and staff who are in key positions to interact with at-risk students	Online, interactive Kognito training modules (<i>At Risk, Veterans on Campus, and LGBTQ on Campus</i>) Participants learn and practice motivational interviewing to broach the topic of psychological distress, encourage students in need to seek help, and avoid common pitfalls during the virtual interaction	This web-based training is on the SAMHSA Best practices registry and utilizes avatars to interact with student participants regarding mental health issues, suicide, & depression	WVU faculty, staff, and students	Ongoing/ As Needed	WELLWVU Carruth Center

Prevent Suicide WV	provides training, technical assistance, and evidence based adolescent suicide prevention curriculum to those in the community	through Prevent Suicide WV there will be an intervention specialist who will be used to help facilitate treatment for those at risk, as well as provide follow up services	Evidence based	The Greater Morgantown Community	Ongoing	Valley HealthCare System United Summit Center
Depression and Bipolar Support Alliance	Provide hope, help, support, and education to those dealing with mood disorders to help improve their lives.	Uses peer-to-peer approach to create a community that will help engage and educate those with mood disorders while advocating for their right to choose their own paths to mental, emotional, and physical wellness	Evidence Based	The Entire Community	Ongoing	Spruce Street United Methodist Church National Institute of Mental Health
Second Step	Teaches children to identify And understand their own Emotions, choose positive Goals and manage their Emotional reactions and Decision-making process when Emotionally aroused	A classroom-based social skills program for children ages 4-14 that teaches skills and at reducing impulsive & aggressive behavior while increasing social competence	Evidence based	Youth 4-14	Ongoing	Mon Co. Prevention Coalition
Mental Health First Aid	To help anyone who wants to learn how to provide initial help to someone who may be experiencing symptoms of a mental illness or in crisis	Course covers a range of common disorders and potential crises such as helping someone who is having a panic attack, is contemplating suicide or is struggling with substance abuse.	Evidence Based	Adults	Ongoing	Valley Health Care System

Injury Area: Violence Prevention						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
Green Dot Program	To reduce the amount of personal power based violence occurring in the community by creating a cultural shift that is enabled by people standing up when they witness a situation and/or enlist others to assist	Aims to use social media to increase awareness of the campaign with the goal of influencing the social norm of violence and having everyone in the community attend an overview speech to teach bystanders what to do when they want to assist in a violence situation. It also offers a 6 to 8 hour experienced based bystander training that teaches the warning signs of personal power based violence, strategies for intervention, skill building and communication, and bystander dynamics.	Evidence Based	Then WVU Community	Ongoing	Green Dot WELLWVU Wellness & Health Promotion
LoveWELL	To teach WVU students to maintain healthy relationships	Provides students with information about how to maintain healthy relationships and solve issues through communication rather than violence	Promising	The WVU Community	Ongoing	WELLWVU Wellness & Health Promotion
West Virginia Coalition Against Domestic Violence	Promote values of respect, mutuality, accountability, and non-violence	They are trying to transform social, cultural, and political attitudes through public awareness, policy development, community organizing, training and technical assistance, advocacy,	Evidence Based	All West Virginia Residents	Ongoing	Morgantown Police Department

		and collaborative projects.				
WV Foundation for Rape Information Services (FRIS)	To eliminate sexual violence and stalking, as well as alleviate the suffering of those that have been victimized.	This organization is comprised of West Virginia's 9 rape crisis centers. It aims to strengthen the available services and develop intervention and prevention programs addressing sexual violence, stalking, and dating violence. It organizes Sexual Assault Nurse Examiners (SANE) trainings and Sexual Assault Response Teams (SARTs).	Promising	West Virginia Residents	Ongoing	
Rape and Domestic Violence Information Center (RDVIC)	To educate the public and intervene in cases of Rape and Domestic Violence	RDVIC is part of the West Virginia Coalition against Domestic Violence (WVCADV). They are the rape crisis center through FRIS for Morgantown and the surrounding area. They offer support and assistance services to men, women, and children that have survived assault, abuse, domestic violence, or harassment. This organizations offered services include a crisis hotline, group and individual counseling, community education, advocacy, support services, and an emergency shelter.	Promising	Children, Elderly Adults, and any others who may be in a personal violence situation.	Ongoing	Morgantown Police Department
Batterer's Intervention and Prevention Program	To provide batterers with educational components to intervene in	This program aims to end abusive behavior and stop victim blaming by dealing with domestic	Promising	The Greater Morgantown Community	Ongoing	RDVIC Morgantown Police Department

	the cycle of violence, power and control.	violence as an issue of power and control. They aim to challenge offender's beliefs and values, while teaching them constructive emotional expression, listening skills, and help them to develop a personal support system by decreasing their isolation.				
Peer Advocates	Help students become immediate crisis intervention advocates for student sexual assault survivors through developing leadership skills and knowledge in finding resources available to them on the WVU campus	Help students to develop skills in leadership, advocacy, community responsibility, and collaboration, as well federal, state, and local WVU policy. This program trains the students in everything from the confidentiality process both on and off-campus to peer-crisis intervention and navigating Title IX, in order for them to be effective resources on campus. They also explore gender and role issues to effective communication and listening skills.	Evidence Based-Students respond better to interactions with students than administrators	WVU Students	Ongoing	<p>WELLWVU Wellness & Health Promotion</p> <p>RDVIC</p> <p>Title IX</p> <p>Ruby Memorial Hospital</p> <p>Morgantown Police Department</p> <p>WVU Police Department</p> <p>WVU Student Conduct Board</p> <p>Morgantown Prosecutor's Office</p> <p>WVU Housing Carruth Counseling Center</p> <p>WVU Student Health</p> <p>And other local authorities involved in</p>

						sexual assault cases
P.R.O.T.E.C.T.	Women only self defense classes	Teaches self-defense techniques and preventive strategies	Evidence Based	Women	Ongoing	University Police Department
LiveSafe Application	Help to keep WVU students and other community members safe and give them a feeling of security	Application allows users to anonymously text in crime tips to police, contact WVU police, track their friends to ensure that they make it home safely, or contact DubV Safe Ride to come pick them up	Promising- Other schools have been able to catch criminals through the application	WVU Students	Ongoing	University Police Department
SafeTown Application	Allow Morgantown Community members to know when, where, and what types of emergency incidents are occurring in the area	Mobile Application allows users to report an incident, as well as see in real time where law enforcement, fire, emergency medical services, or other emergency response agencies are working. It also includes the type of incident that occurred, allowing users to avoid those areas or to be more cautious.	Promising	Greater Morgantown Community	Ongoing	MECCA911 Morgantown Police Department Start City Police Department Granville Police Department Westover Police Department Monongalia County Sheriff's Office WV State Police Morgantown Fire Department Monongalia County EMS
High School Resource Officers	To reassure the students, faculty, and staff of their safety, while helping to prevent violence from	The school resource officer offers immediate assistance in an emergency, as well as with other issues that may arise, such as fights or drugs. They also offer	Evidence Based	High School Students, Faculty, and Staff	Ongoing- Started in 2012	Morgantown Police Dept.- MHS Monongalia County Sherriff's Office - UHS

	occurring at the school	daily reassurance that those in the school are safe.				
Respect Program and Healthy Relationships	Designed to encourage positive action on the part of adolescents reports being a victim of physical dating violence	Choose respect is an initiative to help adolescents from relationships to prevent dating abuse before it starts to motivate adolescents to challenge harmful beliefs about dating abuse & take steps to form respectful relationships	WVU Extension Service	High School	Ongoing	Mon county Prevention Coalition
Children and Family Leadership Committee Events/Training	Strives to prevent child abuse and neglect, with focus on early development, public and private collaborations	Focus on building: Parental resilience; Social connections; Knowledge of parenting and child development; Concrete support in times of need; Social and emotional competence of children; Nurturing and attachment	Promising	Families and children	ongoing	United Way Family Resource Network

Injury Area: Emergency Preparedness						
Project Name	Project Goal	Project Description	Is this Promising or Evidence Based?	Target Group (Age, gender, vulnerable population)	Length of Project	Partners
CERT (community emergency response team)	Educate community members to ensure that they are prepared for an emergency and	2 day-long trainings that teach basic disaster preparedness skills to allow them to respond in an emergency in their	Evidence Based- A national program sponsored by FEMA	The Greater Morgantown Community	Ongoing- 2 Days of Training	

	assisting when necessary	neighborhood or workplace				
Amateur/Ham Radio Groups	Provide communication methods should others be lost	Trained, federally-certified individuals offer their communication devices in emergencies. Mon County Amateur Radio Club has an emergency communication trailer that can be moved to an area that has lost communication abilities	Evidence Based-Federally certified program	The entire Morgantown community, but primarily outlying areas that will be isolated when they lose communication	Ongoing/As Needed	
Practice Drills	Be prepared/ Have a plan During an Emergency	Hospitals and other organizations hold practice drills for everything from an active shooter to an outbreak or weather event	Evidence Based-People respond better in an emergency when they have practiced	People affected by issue and those responding to the given issue	Ongoing	Local Fire Departments EMS Local Police Departments
MUB Taskforce	Formulate a strategy should the city water supply be contaminated	The Morgantown Utility Board is forming a taskforce to plan for a contaminated water supply	Promising	Greater Morgantown Area	Just Starting	
West Virginia REDI	Know who would be willing to help, if able, in the event of an emergency	A database of individuals willing to help in an emergency, their location, and skill sets. They are called out to work a medical tent at every home WVU football game.	Promising	All West Virginia Residents	Ongoing	

Mountaineer Area Rescue Group	Provide assistance with search and rescue	Provide a trained search and rescue team with a wide variety of skill sets when someone has been lost in the woods. They have been around since 1997 and completed over 320 missions (http://www.sargroup.info/home)	Evidence Based	All Monongalia county residents	Ongoing	Law Enforcement Agencies
North Central West Virginia Red Cross Chapter	Ensure that the Morgantown community is prepared in case of an emergency	Provide classes for certification in first aid, CPR, and AED. Sell emergency preparedness kits that can be kept in your home or car. The kits contains the nationally recommended supplies and the classes are nationally recognized	Evidence Based- A national organization that responds to all major disasters.	The Greater Morgantown Community	Ongoing	
WVU Emergency Alert System	To inform the WVU community of events on and around campus that could pose a threat to their safety	This system can be used by WVU police to send out mass alerts through email and text messages to anyone who has signed up to receive them.	Evidence Based- Many campuses around the country have similar systems (http://transition.fcc.gov/pshs/emergency-information/campusemergency.html)	WVU students, faculty, and staff	Ongoing	West Virginia University WVU Police