

# NYVDRS: Together we can save a life

Attention: Medical Examiners, Coroners and Law Enforcement

Imagine how many lives could be saved if we could cross reference individual violent death incident reports in one secure, confidential, and anonymous database.

- Violence is a major public health problem that affects individuals, families, and communities.
- Tragically, more than 2,700 violent deaths occurred in New York State in 2012.
- Violent deaths include suicides, homicides, unintentional firearm discharges, deaths by legal intervention, and terrorism.

## Linking violent death records is now possible in New York

- New York was funded by CDC's National Violent Death Reporting System (NVDRS) to collect information on violent deaths starting in 2015.
- NYVDRS will allow us to combine data on violent deaths from various data providers (vital records, law enforcement and coroners/medical examiners) in one database.
- NYVDRS will enable us to cross reference reports and piece together more complete pictures of violent death trends in communities across New York.



## Your reports hold the answers that can save lives

Public health, law enforcement officials, coroners and medical examiners all collect valuable information about violent deaths, but data remain in a variety of different systems. By integrating our reports, we can provide policymakers with better information to develop more effective violence prevention policies.

## NYVDRS success depends on your reports

To help prevent violent deaths, we must understand all the facts. This statewide system will enable law enforcement and public health officials to share information and develop a better understanding of the causes of violent deaths. Without this knowledge, our violence prevention policies and programs are not being informed by the full spectrum of information available.

### VITAL RECORDS: DEATH CERTIFICATE

- Demographic information
- Cause/manner of death
- Work-related status
- Education level
- Pregnancy status
- Veteran status

### MEDICAL EXAMINER/CORONER

- Brief narrative of incident
- Circumstances of injury
- Toxicology reports
- Medical history
- Wound location
- Recent medical treatment
- Weapon information

### LAW ENFORCEMENT

- Perpetrator data
- Weapon information
- Risk factors
- Past criminal history
- Narrative of circumstance of death
- Interviews
- Potential evidence
- Suicide note
- Critical stressors in victim's life

Data elements come from multiple sources and overlapping data are cross referenced to match records.

## What do we need from you and what should you expect from us?

- The biggest contribution we need from you is to provide us with the incident reports that you already have in your records. We will be requesting incident reports based on death certificates that indicate violent deaths.
- Our goal is to make reporting quick and easy.
- The schedule for reporting is flexible; we can request reports monthly, quarterly, or annually. We will work with you to find the best way to collect the data from your office.

## What kind of questions could be answered by NYVDRS data?

- How many women were killed by intimate partner violence?
- What are the scenarios that lead to accidental gun deaths among children?
- What life crises are most common in victims of suicide?
- How often are drugs involved in homicides or suicides?
- How many suicides were committed by first responders or military personnel?
- What is the rate of murder-suicides?

**NEW YORK STATE OF OPPORTUNITY. Department of Health**  
ANDREW M. CUOMO Governor    HOWARD A. ZUCKER, M.D., J.D. Health Commissioner    SALLY DRESLIN, M.S., R.N. Executive Deputy Commissioner

**REQUEST**  
Name of decedent: John Doe  
DOB: 01/03/1959  
DOD: 03/01/2015  
Location of incident:

**NEW YORK STATE OF OPPORTUNITY. Department of Health**  
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**REQUEST**  
Name of decedent: Jane Doe  
DOB: 03/05/1965  
DOD: 07/26/2015  
Location of incident: 12 Elm Street  
Please include the following information if available  
 Description of the incident  
 Narrative of summary written  
 Sexual Assault Examination information  
 Toxicology report  
 Suicide note  
 Any additional information regarding the incident

## Spotlight on other states: What are other NVDRS state programs doing?

- **Oregon draws on NVDRS data to create elder/youth suicide prevention plans.** Oregon VDRS was used to connect the dots between mental illness, depression, and suicide. As a result, the program identified populations at risk, and information was used to engage community and faith-based organizations and the medical community in a multi-pronged outreach and prevention effort to help reduce suicide in older adults and young people.
- **Alaska tackles the highest suicide rate in the nation.** Epidemiologic information from the Alaska VDRS helped to target improvements in Alaska's forensic toxicological capabilities and to strengthen public health and law enforcement communications and infrastructure.
- **South Carolina integrates suicide prevention planning and mental health care.** South Carolina's Mental Health Association used data from South Carolina's VDRS to strengthen an application to secure more than \$1 million in funding for suicide prevention. The grant allowed implementation of Project SAFE, which provides evidenced-based training to schools, institutions of higher education, faith-based and community organizations, and foster and adoptive parents.

## Violence can be prevented if we work together

The good news is that violence can be prevented. Accurate information about violence is the first step. As we expand NYVDRS, we can all access this data to monitor, track trends and inform local and state prevention efforts.

## More Information

[www.PreventViolence.net](http://www.PreventViolence.net) or [www.cdc.gov/ViolencePrevention/NVDRS/index.html](http://www.cdc.gov/ViolencePrevention/NVDRS/index.html)

## Contact us

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