The Integrated Multi-Agency Injury Data Systems (IMIDS) describes an integrated data system that has web-based software applications that are easily accessible by a certified computer or electronic device that has basic Internet access. Multi-level data streams can be captured, processed and analyzed by researchers in real-time on a 24/7 basis. Once a case has been entered into the database in real-time, there is no additional or having to later transcribe into another database. The database is also encrypted that meets above and beyond HIPAA regulations.

**Current Systems:** Currently injury cases are entered on a paper chart or electronic chart then later transcribed into another database. These repetitive tasks impact employee workload, financial staffing resources, as well as physiological and musculoskeletal effects of the worker. When injury case data is entered by law enforcement or paramedic, this information is later transcribed into a hospital database either paper form or electronic. Later this information is again transcribed for reporting purposes to the state or other agencies and organizations, state personnel later transcribes this data from each hospital or county, etc.

**Integrated Multi-Agency Injury Data System (IMIDS):** With the use of the integrated IMIDS system, when law enforcement or paramedic enters an injury case, it is processed in real-time. This case is immediately available for retrieval at the hospital, state or other certified partner. In addition, healthcare practitioners can also access the injury case to add recommendations for preventive services for example that improves integrate case management. Overall, as a result, injury case data is expedited on a 24/7 basis as a standardized practice without the workload and/or financial impact. Individual injury cases can be effortlessly transmitted to various service providers such as other public health agencies as well as to a social workers or law enforcement. Consequently, this "shared" data amongst specific agencies can be used for research, development of health education, prevention and integration of services.

The IMIDS includes four specific aims that will integrate public health services of both intentional and unintentional injury:

1. Improve timeliness and effectiveness of data collection  
   a. Primary: Service provider/intake  
   b. Secondary: Research/epidemiology
2. Integrate multidisciplinary public health and health services/referrals for injury prevention (improve coordination of services from one agency to other agencies that have similar target population and risk factors)  
3. Integrate prevention programs/risk reduction (improve coordination of prevention efforts by linking agencies to other agencies that have similar target population and risk factors)
4. Improve program and strategic planning efforts (Providers and researchers will have the ability to pool non-descript elements to observe for injury trends in child abuse, fatality, unintentional and intentional injuries and other related health and safety concerns)

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