
Jersey Child Unintentional Injury Statistics 2013



"working together to reduce the incidence and impact of accidental injuries to children, 0-16 years of age, in the community"

Data collation: Child Accident Prevention Jersey
Data source: Jersey Emergency Department



www.cap.je

2013 Jersey unintentional injury data

Rationale

Recommendations for injury surveillance have been made by the National Institute of Clinical Excellence as 'Preventing unintentional injuries to children among under 15s', public health guidance 29. Surveillance of any health issue is defined as the: 'systematic, ongoing collection, collation and analysis of health-related information that is communicated in a timely manner to all who need to know which health problems require action in their community' (Last JM (2007) A dictionary of public health. Oxford: Oxford University Press).

Injury 'surveillance' is needed to monitor unintentional injuries among children and young people locally, regionally and nationwide. The data gathered could be used as the basis to plan preventive initiatives. Such initiatives may need to take a particular type of injury into account locally or regionally – even though it may not be a major problem nationwide.

The importance of accurate emergency department statistics has been highlighted with hospital admissions caused by unintentional and deliberate injuries in under 18s being confirmed as one of the public health indicators as part of the new Public Health Outcomes Framework for England, 2013 – 2016.

The framework focuses on two high level outcomes for the public health system:

- Increased healthy life expectancy
- Reduced differences in life expectancy and healthy life expectancy between communities.

The hospital admissions indicator for under 18s is one of the key health improvement outcome measures. It aims to help people to live healthy lifestyles, make healthy choices and reduce health inequalities.

"Injuries are a leading cause of hospitalisation and represent a major cause of premature mortality for children and young people. They are also a source of long-term health issues, including mental health related to experience(s). The inclusion of this indicator is key for cross-sectoral and partnership working to reduce injuries, including child safeguarding."

Data source

The source of the child unintentional injury data is from attendances at the Jersey Hospital Emergency Department.

The data includes every child's first attendance, aged up to 16 years, due to an unintentional injury and is checked for inconsistencies at source to ensure it is as accurate as possible.

Since June 2011 the way of recording Emergency Data changed, TrakCare was introduced producing an altered data set which resulted in an increased attendance number recorded. This is because follow up attendances are now not linked to the original and are included as new attendance numbers. The other alteration was all children now have their follow up wound dressings undertaken in an emergency department clinic and this data is excluded from these statistics.

2013 Jersey unintentional injury data

Summary

When small statistical numbers are used it is easy for minor variation to appear and have a big impact in the overall trend of data. In saying that, trends can be seen over time and localised 'hot spots' of concern identified. Value has long been recognised in studying unintentional injury data at a local, regional and nation wide level.

Just over 10% of all attendances at the Emergency Department in 2013 were child unintentional injuries, the lowest recorded since 2004. Falls continued to be the main reason for Emergency Department (ED) attendance and hospital admission, and has been for the last 10 years.

The number of infants attending ED aged under 1 year had reduced by 1/3rd when compared to the previous year, and out of this number a decrease of over 20% was seen in under ones who fell from a raised surface because of where an adult had put their child.

The number of children who attended because of poisoning or unintentional overdose reduced slightly. It should be noted even though the attending number had diminished, 17% of those were admitted into hospital because of ingesting child or adult medication.

A significant reduction was seen in the number of children presenting because of a dog bite. The previous 4 year average had been 21.5 ED visits and in 2013 there were 8 attendances.

There has been a significant reduction in many identified mechanisms of unintentional injuries when compared to the previous year. Trampoline and ice skating related ED attendances have reduced by nearly 1/3rd and scooter and micro scooter attendances halved. It should be noted that 16% of children attending because of a trampoline related attendance were admitted into hospital because of falling from and landing awkwardly on to the trampoline. Bicycle related incidents had marginally increased but were still lower than the 10 year average by 14%.

Road traffic collisions resulting in ED attendances had also reduced in 2013 and were the lowest level recorded over the past 10 years. Motorcycle and pedestrian attendances nearly halved and admissions into hospital because of a road traffic collision dropped from 13 down to 9.

When looking at the child unintentional injury statistical data gathered over the past 10 years you can see an encouraging trend develop. As ED attendances have increased year on year, attendances for child unintentional injury has reduced by 14%. Many organisations in Jersey have dedicated their work to reducing unintentional child injury, including Child Accident Prevention Jersey. The work of the group should be celebrated for its valuable contribution to making a difference in children's lives.

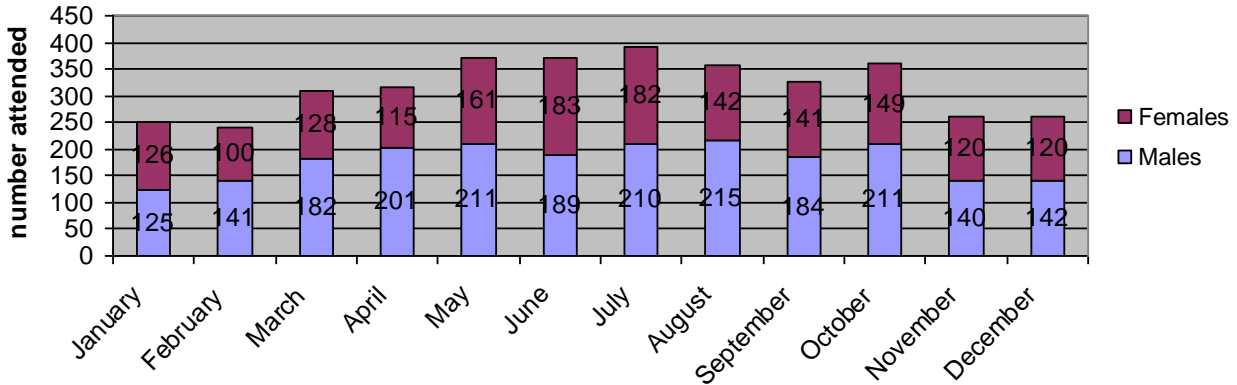
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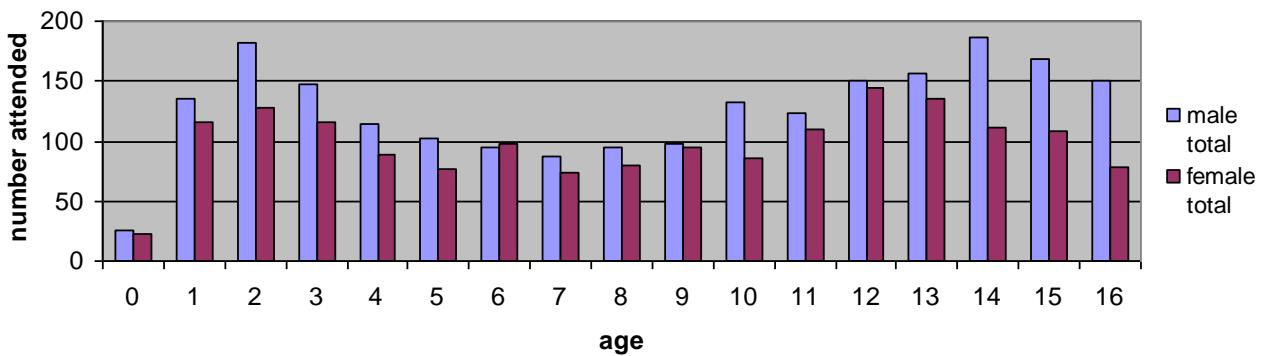
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1. Attendance as per month, age and gender

2013 ED attendance by month and gender



2013 ED attendance by age & gender

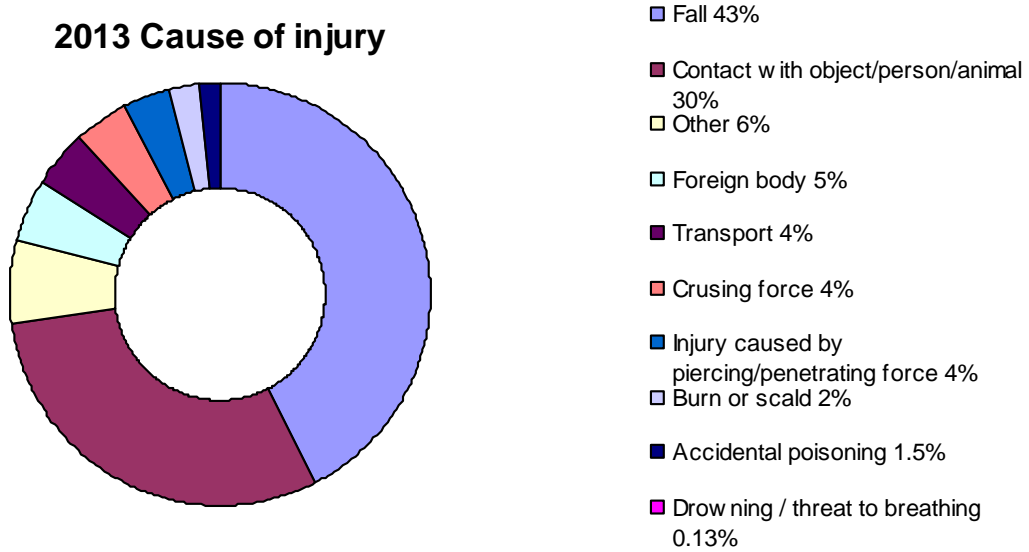


Total Number	Island Population* (estimate excluding seasonal workers <1yr)	ED attendances (all ages/gender)	0-16 years ED unintentional injury attendances	0-16 years attendance ~ related to population	0-16 years attendance ~ related to total ED attendance
2004	87,700	32,427	4,431	5.05%	13.66%
2005	88,400	33,260	4,253	4.81%	12.79%
2006	89,400	33,389	4,034	4.51%	12.08%
2007	90,900	33,729	4,039	4.44%	11.97%
2008	91,800	33,627	3,752	4.09%	11.16%
2009	92,500	32,751	4,225	4.57%	12.90%
2010	x	33,222	4,069	x	12.25%
2011	97,857	38,333	4,253	4.35%	11.09%
2012	99,000	38,439	3,998	4.04%	10.40%
2013		37,554	3,818		10.17%

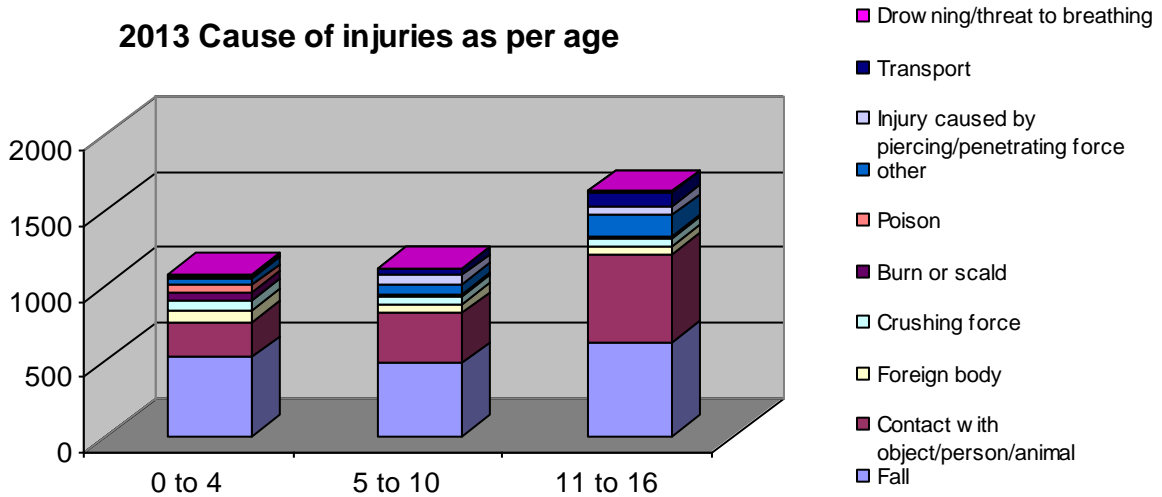
2013 Jersey unintentional injury data

- Total Emergency Department (ED) attendances have decreased by 885 from the previous year.
- Out of the above number there were 3,818 child unintentional injury attendances in 2013, a reduction of 180.
- The average yearly attendance for child unintentional injury since 2004 is 4,087.
- 10.17% of all ED attendances were child unintentional injuries, the lowest recorded over the past 10 years.
- As in previous years males had more accidents than females (2,151:1,667)
- Gender and age hot spots were seen in 1 to 3 year olds, particularly 2 year old males and 12 to 16 year old males, as well as 12 year old females.
- May, June and July were the months with the highest attendance.

2. Cause description of injuries



- The most common cause of injury was falls, followed by contact with an object, person or animal.
- Falls have been the leading cause of injury for the past 10 years.



- For under fives the highest cause of injury was falls. Out of all age groups this sector had the highest number of identified injuries caused by;
 - Foreign bodies
 - Burns or scalds
 - Poisons
 - Unintentional injuries sustained by a crushing force e.g. door crush injuries

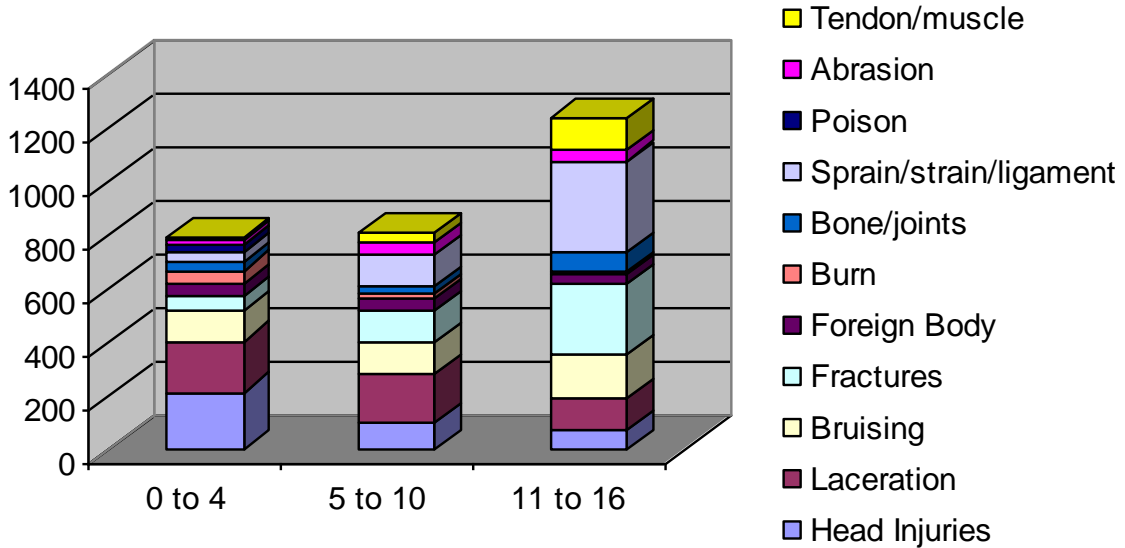
2013 Jersey unintentional injury data

- Five to ten's leading causes of injury were falls and contact with an object, person or animal.
- Out of all age groups those aged eleven and over had the highest number of unintentional injuries caused by;
 - Falls
 - Contact with an object, person or animal
 - Transport related injuries e.g. bicycle and pedestrian accidents

3. Leading types of diagnosed unintentional injuries

Due to the type of data available it was not possible to identify the exact cause of every injury. However, looking at the type of injury sustained could give insight into possible causes and assist in identifying areas of concern.

2013 Presenting Leading Injuries



- In under fives, the most common unintentional injury was lacerations and head injuries, as seen in the previous 3 years.
- A child was more likely to sustain a laceration, head injury, burn, or poisoning if they were aged under five.
- Children aged 11 years and above were more likely to sustain a fracture, bruising, sprain/strain/ligament injury or tendon/muscle injury.

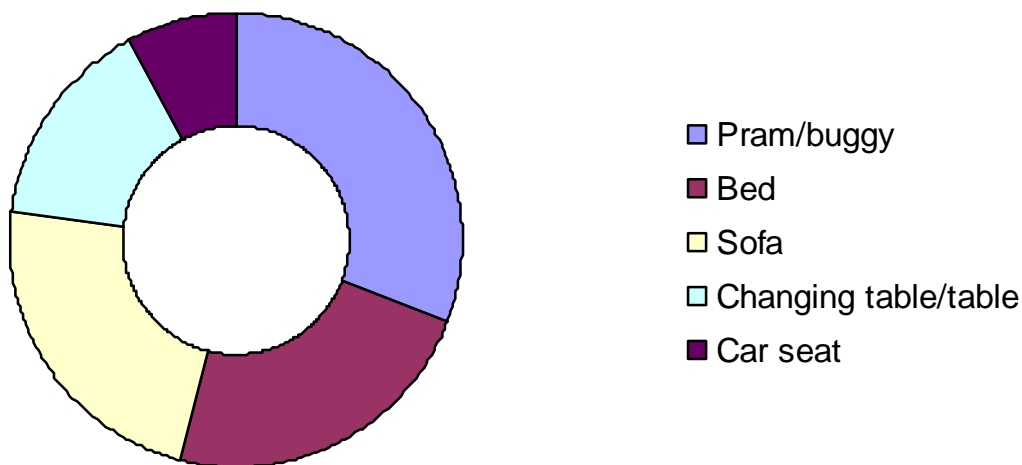
4. Falls in under ones

	Under ones seen in ED	Injury caused by a fall (% of total attendance)	Dropped whilst carried	Fall from standing/sitting	Fall from raised surface (% of total falls)
2013	49	28 (57%)	4	11	13 (46%)
2012	75	43 (57%)	7	7	29 (67%)
2011	93	66 (71%)		34	32 (48%)
2010	112	60 (54%)		30	30 (50%)
2009	127	87 (68.5%)		53	34 (39%)
2008	124	94 (76%)		48	46 (48%)

- There has been a steady decline in the number of under ones attending ED with an unintentional injury.
- The average attendance percentage for those attending;
 - due to falls is 64% with the last 2 years being below average
 - due to falling from a raised surface when compared to the total falls number is 50%, indicating 2013 data is below the average

The most common location for an infant to fall from when left alone is identified in the chart below;

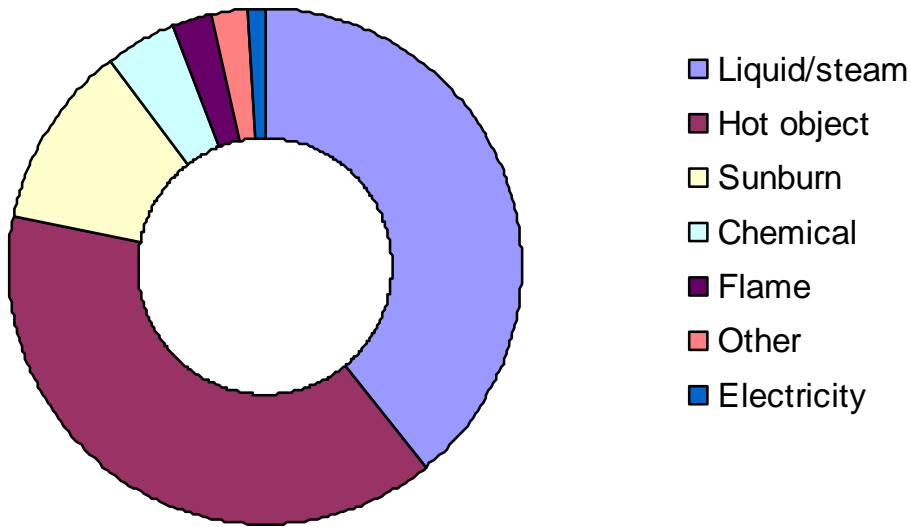
2013 Location of raised surface fall



- The main location for falling from a height was identified as fall out of a pram or buggy followed by falling from an adult bed.
- There was 1 hospital admission due to a fall from a raised surface for a child aged under 1 year.

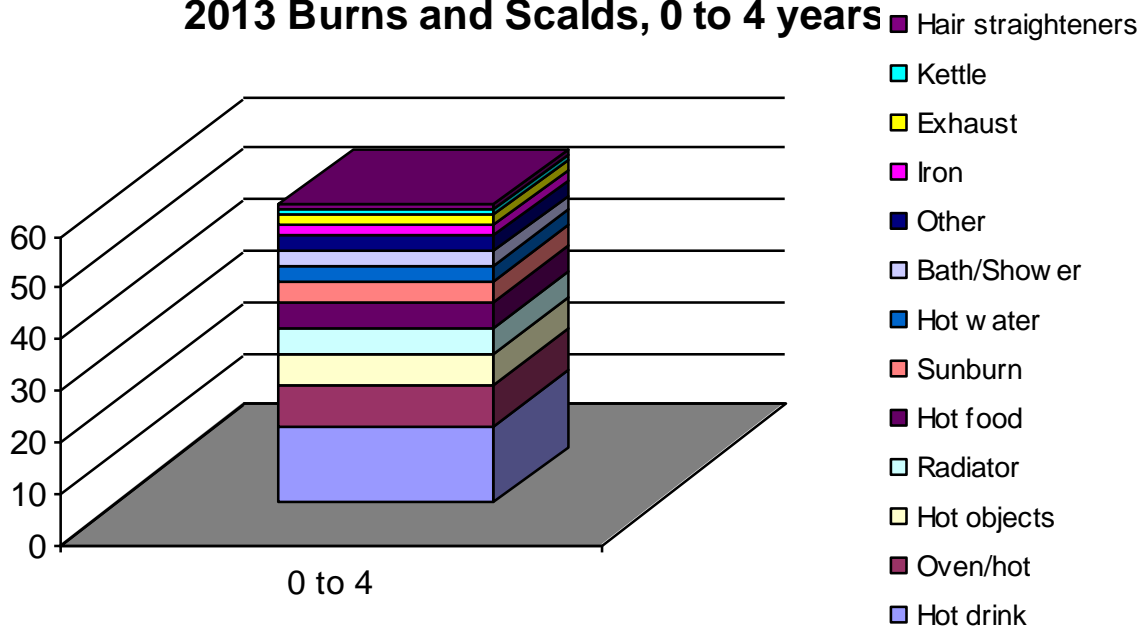
5. Burns

2013 Cause of burns



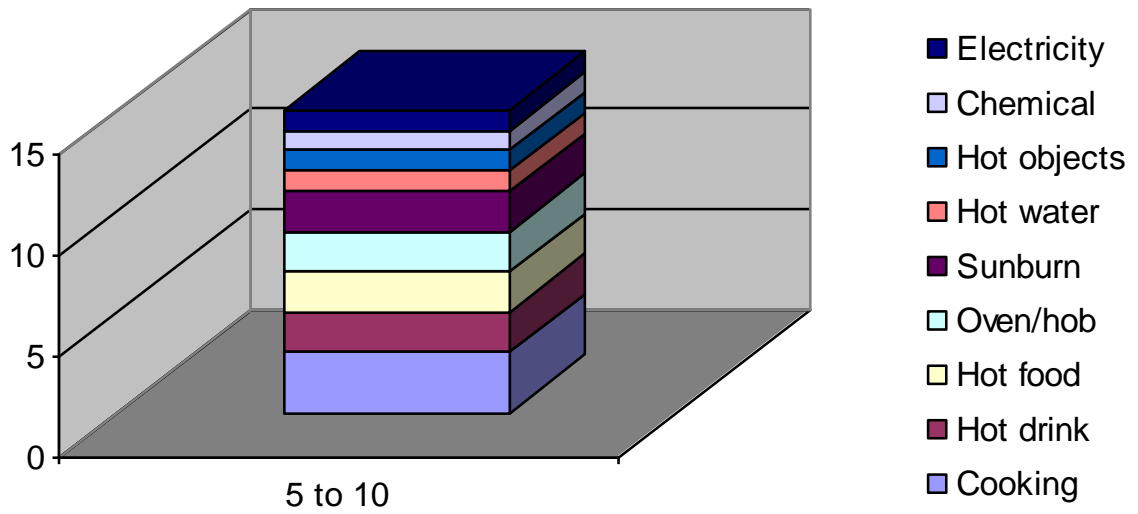
- 87 children attended because of a burn or scald, a decrease of 1 from the previous year.
- Within liquid and steam causes of burns, spilt hot drinks remain the most common cause (17), followed by hot objects (10, specifically ovens/oven hobs) and sunburn (10).
- 3% (3) of children attending ED because of a burn were admitted into hospital.

2013 Burns and Scalds, 0 to 4 years



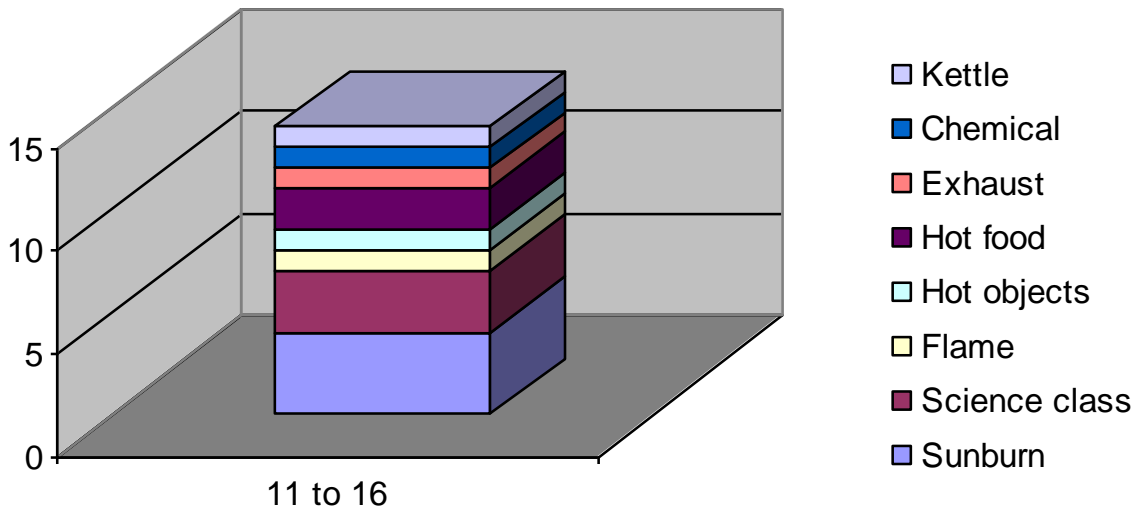
- 67% (58) of burns occurred in children aged between 0 and 4 years.
- The main cause of burns and scalds in under fives was hot drinks, predominately caused by the child pulling the drink onto themselves, followed by touching a hot oven or oven hob.

2013 Burns and Scalds, 5 to 10 years



- 15 children aged between 5 and 10 sustained a burn.
- The most common cause was cooking and preparing or moving hot food and drinks.

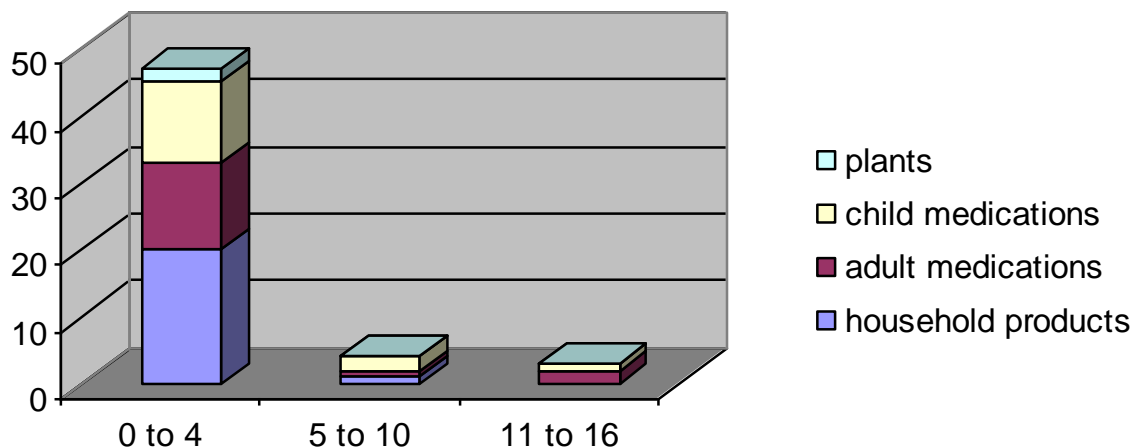
2013 Burns and Scalds 11 to 16 years



- 14 children aged between 11 and 16 sustained a burn.

6. Poisoning / unintentional overdose

2013 types of poisoning or unintentional overdose



- 54 children ingested potentially harmful substances, a reduction of 14 from the previous year.
- 47 (87%) were under the age of 5 years.
- Household products were the most commonly ingested type for those aged under 5 years. Examples of ingested products included; liquid washing pods, toilet cleaner and bleach.
- Child medications unintentionally ingested were predominantly liquid paracetamol when the child was independently able to get access to the bottle.
- Adult medications included those stored in blister packs.
- 17% (9) of children who attended the emergency department with poisoning or unintentional overdose were admitted into hospital. 3 ingested adult medications, 4 child medications and 2 household products.
- 8 of these children were aged under 5 years.

Year	Number admitted due to poisoning / unintentional ingestion
2013	9
2012	7
2011	3
2010	5
2009	6
2008	0
2007	0

7. Near drowning

- There were no children admitted because of near drowning from 2013 to 2010.
- 4 children were admitted into hospital for near drowning in 2009.

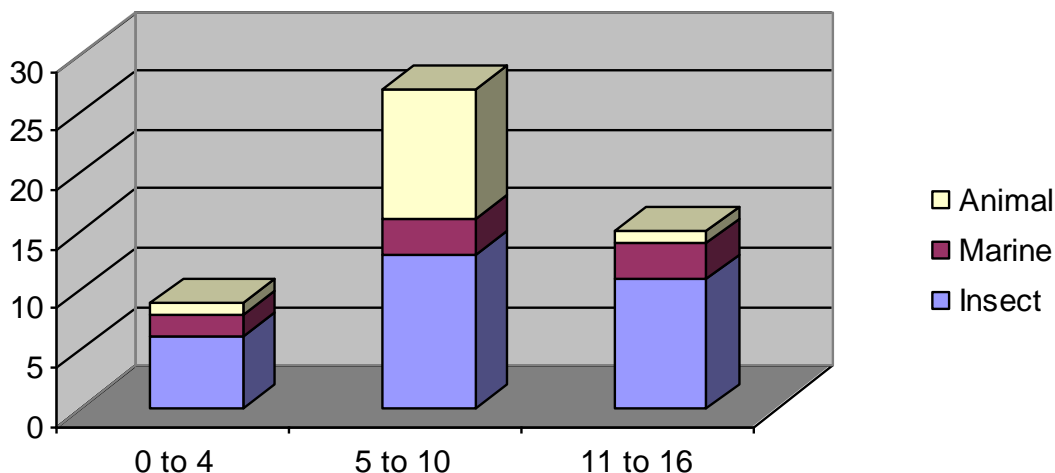
8. Door crush injuries

Year	Number of admissions due to digit door crush injuries
2013	2
2012	2
2011	2
2010	2
2009	2
2008	5
2007	10

- 2 children were admitted because of a digit door crush injury in 2013, both under the age of 6 years.
- As previously stated children attending ED due to a crush injury were most likely to be under the age of 5 years (40%)

9. Bites

2013 Causes of bites and stings



- Children most likely to be bitten or stung were aged 5 to 10 years.
- The most common cause for attending ED due to a bite or sting was an insect bite, with 30 children attending during 2013, 13 animal bites and 8 marine.
- Insect bites causes included;
 - Ticks – 8 attendances
 - Wasps – 7 attendances
 - Bees – 3 attendances
 - Unknown -12 attendances
- Animal bites causes included; cats, dogs, pony, rabbit and rodents.
- Marine bites or stings were not identified.

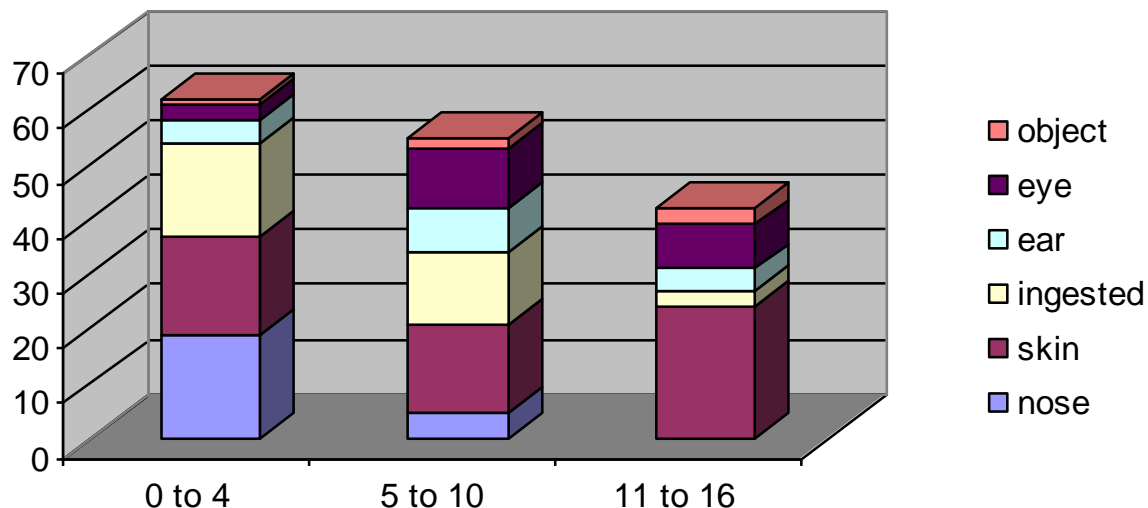
Year	Number of children attending due to a dog bite
2013	8
2012	20
2011	22
2010	15
2009	29

Age	Site of dog bite injury on child			
	Upper limb	Lower limb	Face	Total
0-4	0	0	0	0
5-10	6	0	1	7
11-16	1	0	0	1

- A marked reduction was seen in children attending due to a dog bites.
- 7 children were bitten on their arms and legs, 1 to the face.
- 4 % (2) of children attending ED with a bite were admitted into hospital, 1 due to a dog bite.

10. Foreign bodies

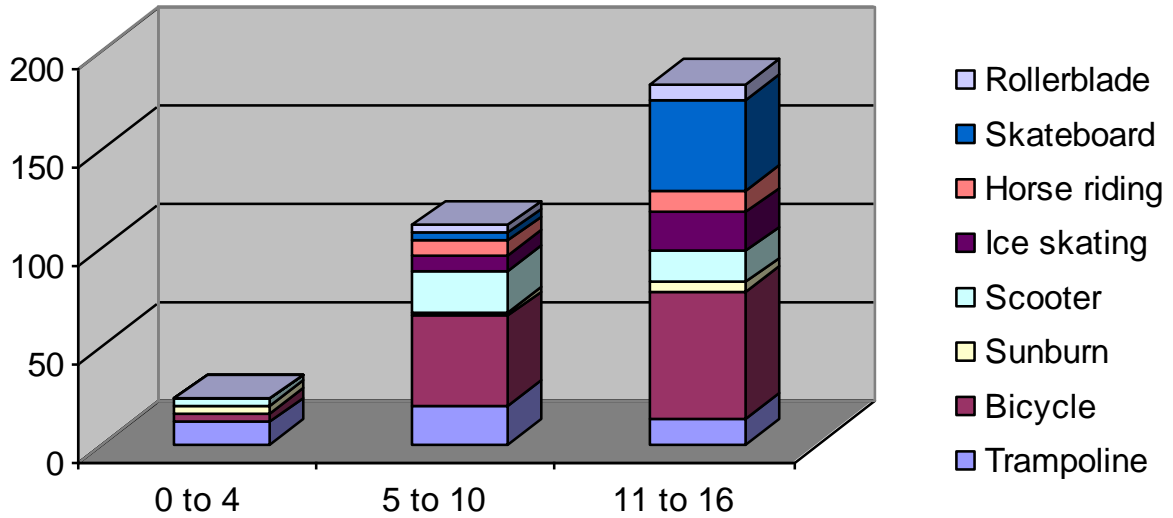
2013 Foreign body location data



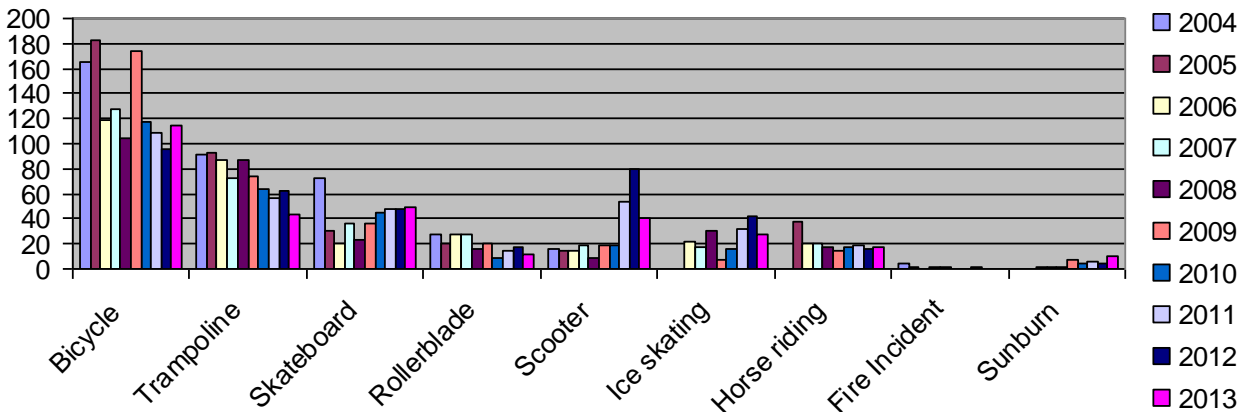
- 159 children attended ED due to an unintentional injury involving a foreign body.
- 33 children attended due to ingesting a foreign body, 52% aged under 5 years.
 - Objects ingested included; coins x 12, button battery x 2, magnet x 2
- 24 children inserted objects into their nose, 79% under the age of 5 years.
 - Objects inserted included; beads x 7, toys x 7 food x 5
- 16 children inserted objects into their ears, 50% were aged 5 to 10 years.
 - Objects inserted included; cotton bud x 2, beads x 4
- 0.6% (1) of children attending with a foreign body was admitted into hospital.

11. Identified mechanism of injury

2013 Identified mechanism of injury



Identified mechanisms of injury trends



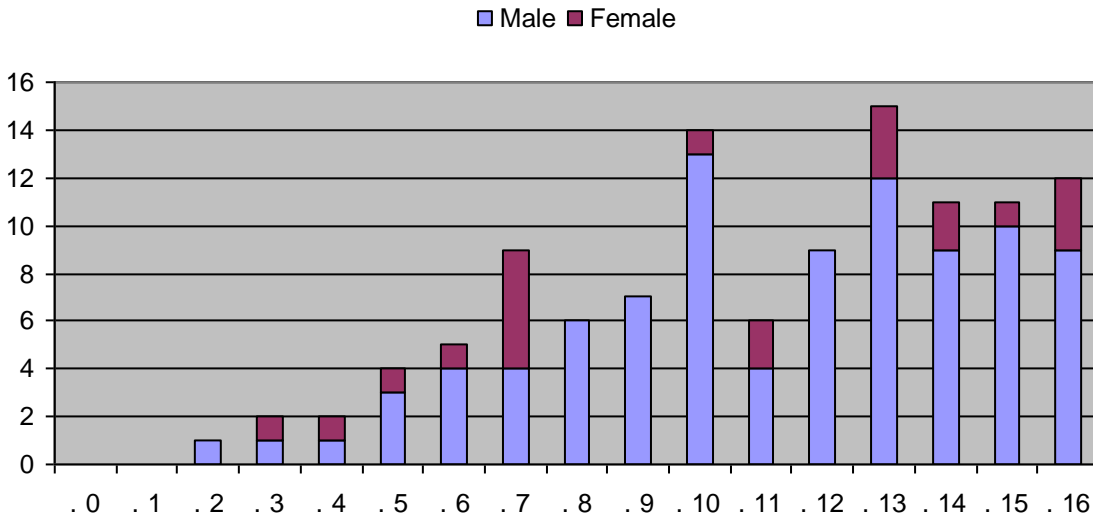
- An increase of 19 bicycle related unintentional injuries was seen in 2013.
- Trampoline related attendances were the lowest recorded in the past 10 years.
- Skateboard related injuries have been relatively consistent over the last 4 years.
- Scooter related injuries has halved from the previous year.
- Ice skating injuries has reduced from a 2012 peak.
- Sunburn attendances was the highest recorded in the past 10 years.

2013 Jersey unintentional injury data

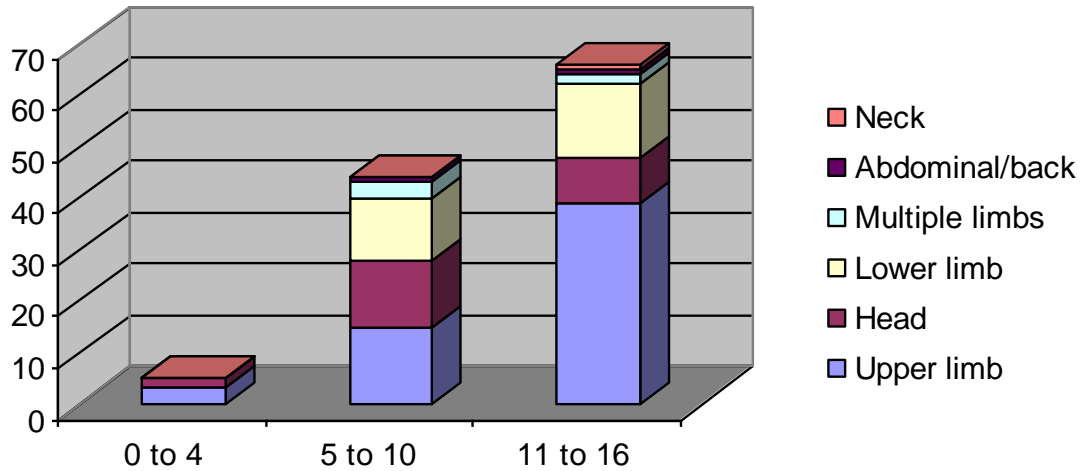
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Bicycle	165	183	119	128	105	174	117	108	96	115
Trampoline	91	93	87	73	87	74	64	57	63	44
Skateboard	73	31	20	36	23	36	45	48	48	50
Rollerblade	28	20	27	28	16	21	8	15	18	12
Scooter	16	15	15	19	8	19	19	53	80	40
Ice skating	0	0	22	18	31	7	16	32	42	28
Horse riding	-	38	20	21	18	14	18	19	16	18
Fire Incident	5	1	0	1	1	0	0	1	1	0
Sunburn		-	2	2	2	7	5	6	5	10

11.1 Bicycle unintentional injuries

2013 Bicycle incidents, age and gender



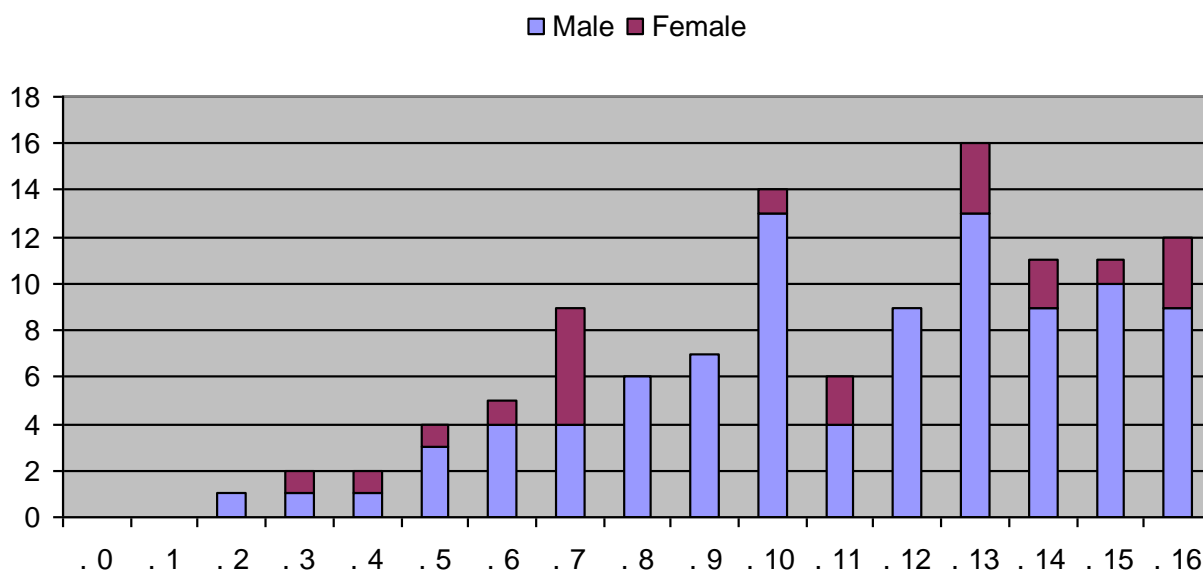
2013 Bicycle site of unintentional injury and age



- There were 115 bicycle related unintentional injuries, the annual average since 2004 being 131.
- The most common injury location was to the upper and lower limbs and head/face.
- Injuries to the head were seen more in children aged between 5 and 10 years.

Injury Site	2013	2012	2011	2010
Head / face injury	22%	19%	21%	31%
Upper limb	50%	47%	43%	43%
Lower limb	22%	23%	24%	20%
Abdominal/back	2%	3%	4%	0%
Multiple injury excluding head	4%	8%	8%	6%

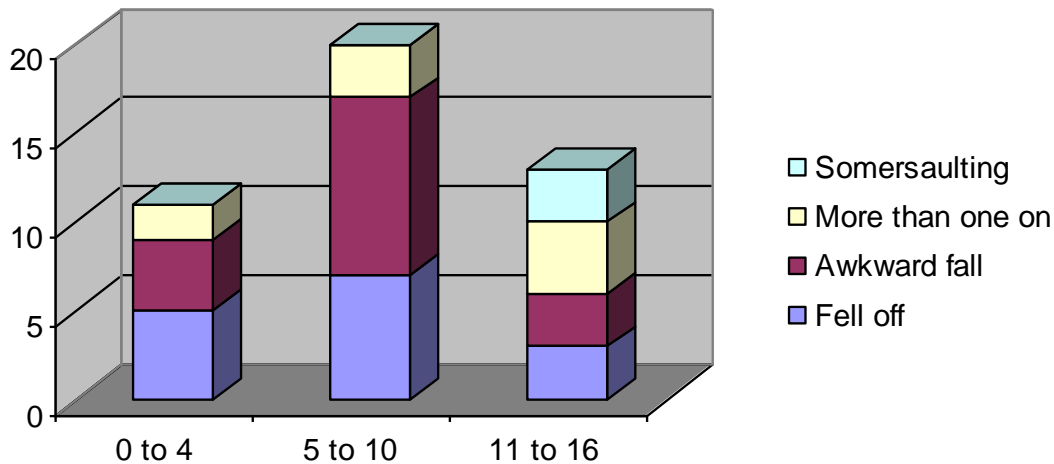
2013 Bicycle incidents, age and gender



- Children attending the ED with a bicycle related injury were more likely to be aged 10 or 12 years and above.
- Boys attended with more bicycle related unintentional injuries than girls (93:21).
- 23% of children seen because of a bicycle related unintentional injury required further hospital treatment after their first ED attendance.
- Of the 115 children attending because of a bicycle related unintentional injury;
 - 18% (21/115) stated they had not worn a helmet
 - 55%(63/115) had no helmet status recorded
 - 27% (31/115) stated they had worn a helmet
- 5% (6) of children attending with a bicycle related unintentional injury were admitted into hospital; 1 limb injury, 4 head injuries and 1 laceration.

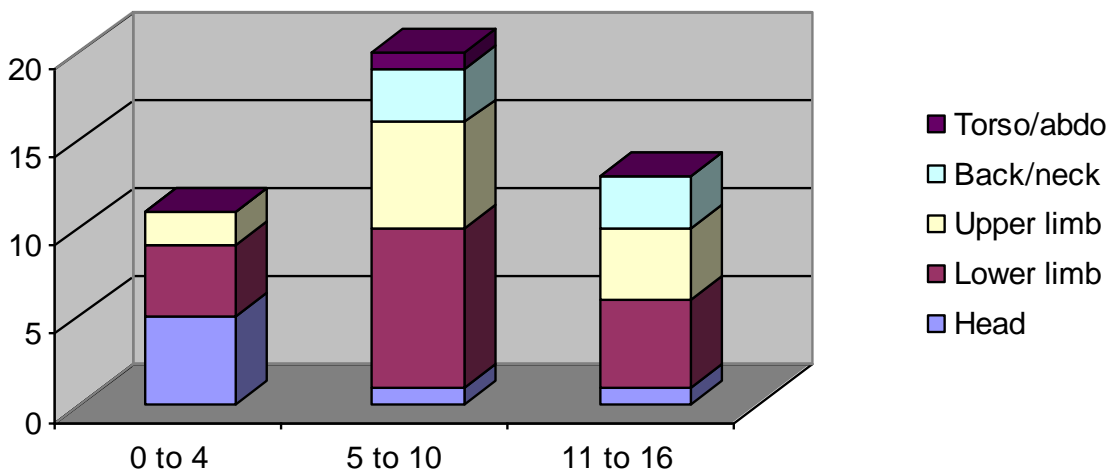
11.2 Trampoline unintentional injuries

2013 Mechanism of trampoline injury and age



- There were 44 trampoline unintentional injuries, a reduction of 19 from the previous year.
- The rate trend over the last 10 years has shown a reduction of over 50% since 2004 recordings.
- The most common month for injury was August.
- There were more girls attending due to trampoline unintentional injuries than boys (28:16).
- The average age for a trampoline unintentional injury was 8 years.

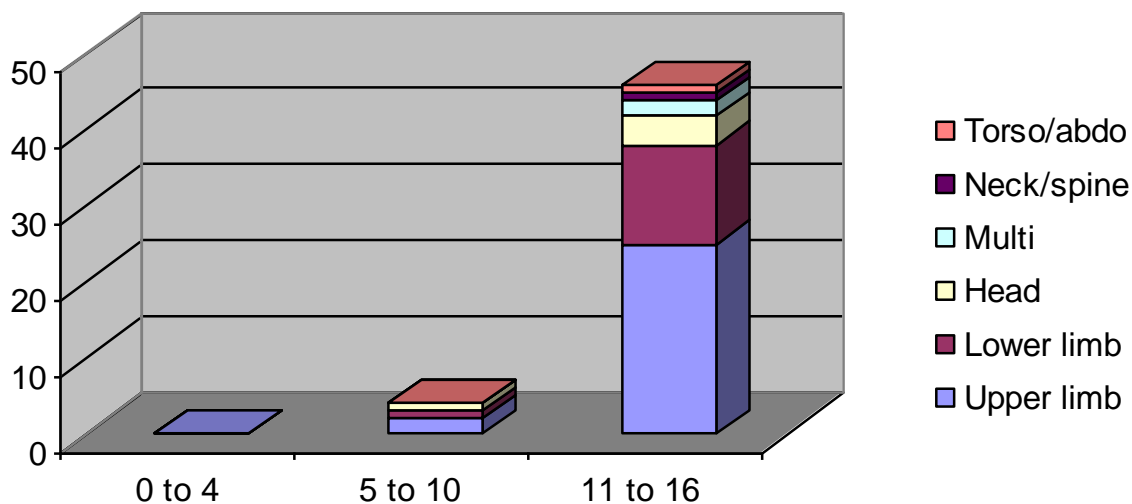
2013 Trampoline site of injury



- The most common injury location was lower limbs in 5 to 10 year olds.
- 27% of children required further hospital treatment or assessment after their initial ED attendance.
- 16% (7) of children with a trampoline related injury were admitted into hospital, 4 from falling from the trampoline and 3 from landing awkwardly when playing on the trampoline.

11.3 Skateboarding unintentional injuries

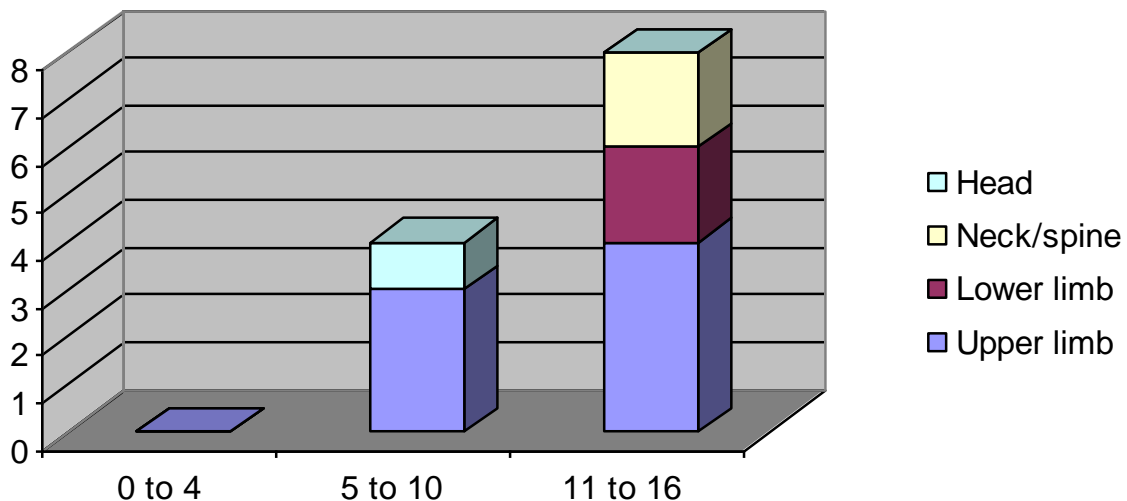
2013 Skateboard attendances location of injury



- There were 50 skateboarding related unintentional injuries, a fairly constant figure over the past 4 years.
- Predominately boys attended with skateboarding related unintentional injuries (37:13).
- The average age for a skateboard related unintentional injury was 13 years.
- The most common type of injury was to the; upper limb (27/50), lower limb (28/50), head (5/50), multi (2/50), torso/abdomen (1/50), neck/spine (1/50).
- 34% of children required further hospital treatment or assessment after their initial ED attendance.
- 1 child was involved in a road traffic collision whilst riding a skateboard.
- 4% (2) of children with a skateboarding unintentional injury were admitted into hospital, head injury and limb injury.

11.4 Rollerblading / heelys unintentional injuries

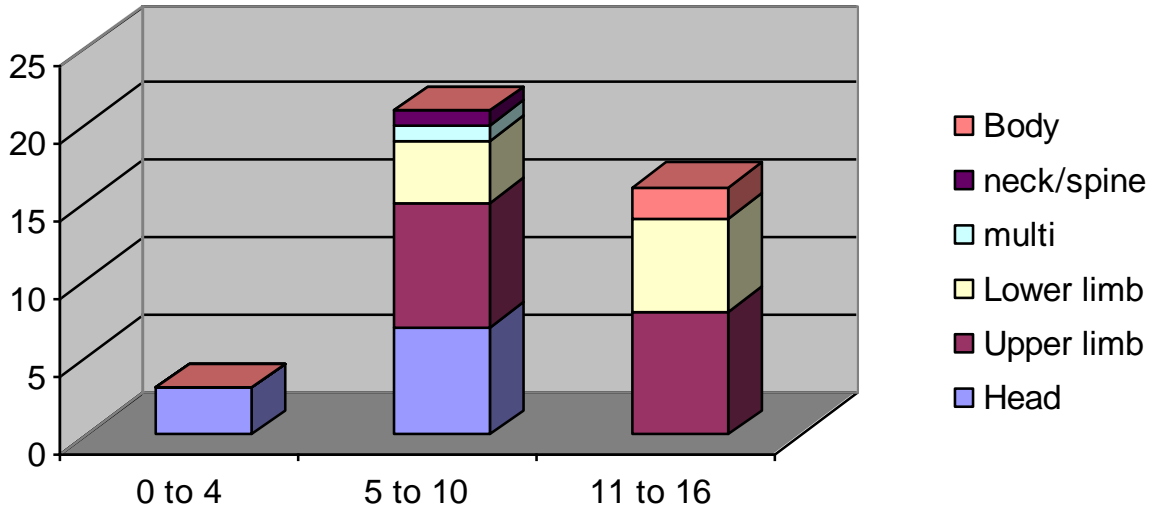
2013 Rollerblade/Heely attendances site of injury



- There were 12 related accidents in 2012, a reduction of 6 from the previous year.
- All attendances were female
- No children were admitted into hospital following a rollerblade/heelys accident.

11.5 Micro scooter unintentional injuries

2013 Micro scooter site of injury



- There were 40 micro scooter related unintentional injuries, a decrease of 40 from the previous year.
- There were more boys than girl's attendances (26:14).
- The average age for an incident was 9 years.
- The most common type of injury was to the; upper limbs (16/40), head (10/40), lower limbs (10/40), body (1/40), multiple (1/40) and neck/spine (1/40)
- 2.5% (1) of children with a micro scooter related attendances were admitted into hospital.

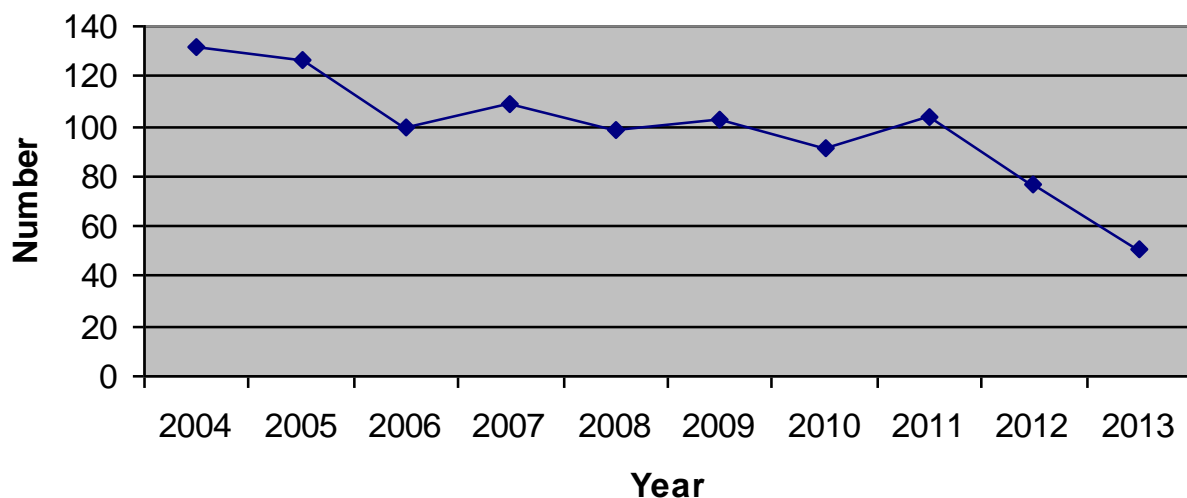
12. Road Traffic Collisions (RTC's)

The law defines a reportable road traffic collision as an accident involving a mechanically-propelled vehicle on a road or other public area which causes:

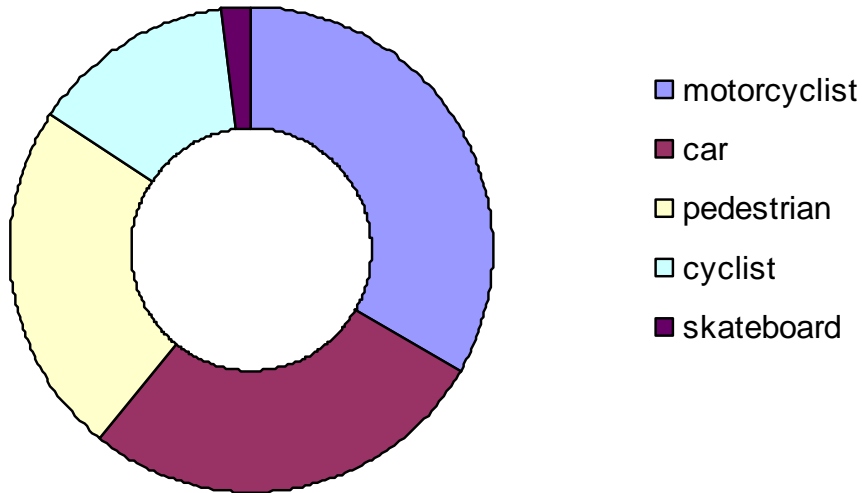
- Injury or damage to anybody - other than the driver of that vehicle,
- Injury or damage to an animal- other than one being carried on that vehicle (an animal is classes as a horse, cattle, ass, mule, sheep, pig, goat or dog).
- Damage to a vehicle - other than the vehicle which caused the accident.
- Damage to property constructed on, affixed to, growing in, or otherwise forming part of the land where the road is.

RTC	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Car front	10	13	16	5	5	11	9	12	3	5
Car rear	12	16	20	5	13	20	23	19	12	9
Car driver/ unknown							1	1	1	0
Motorcycle	43	38	40	39	46	36	24	35	30	17
Pillion	0	0	4	1	3	0	2	0	0	0
Pedestrian	25	34	19	31	21	21	16	21	21	12
Bus passenger	2	2	1	1	1	0	0	1	0	0
Bicycle			8	17	13	15	15	15	9	7
Micro scooter									1	0
Skateboard										1

Road Traffic Collisions

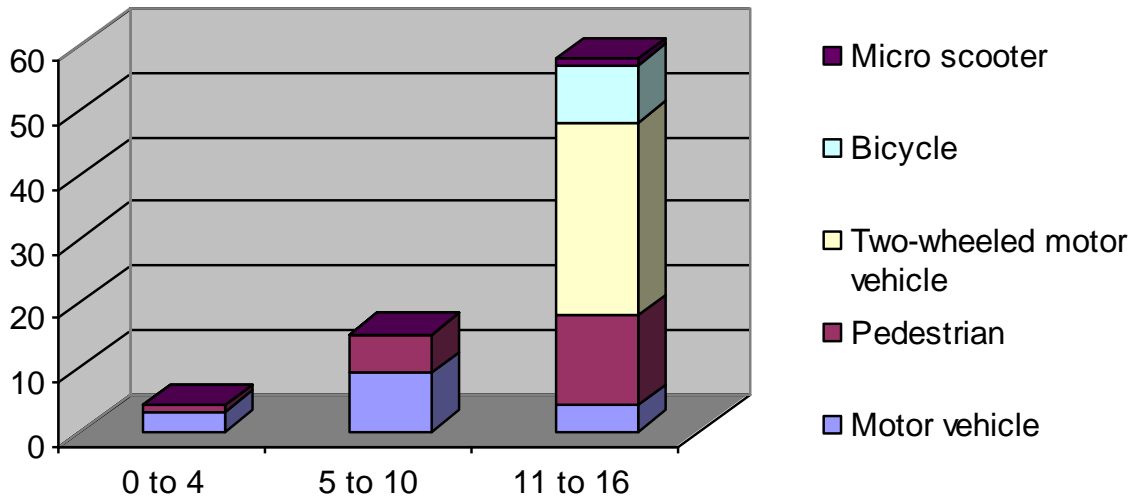


2013 Road traffic collision (RTC)



- There were 51 RTC's, a decrease of 25 on the previous year, the lowest recorded number in the last 10 years
- Since 2004 the yearly average is 99 incidences.
- The ratio between male and females was 27:24.

2013 RTC attendances by age & road user



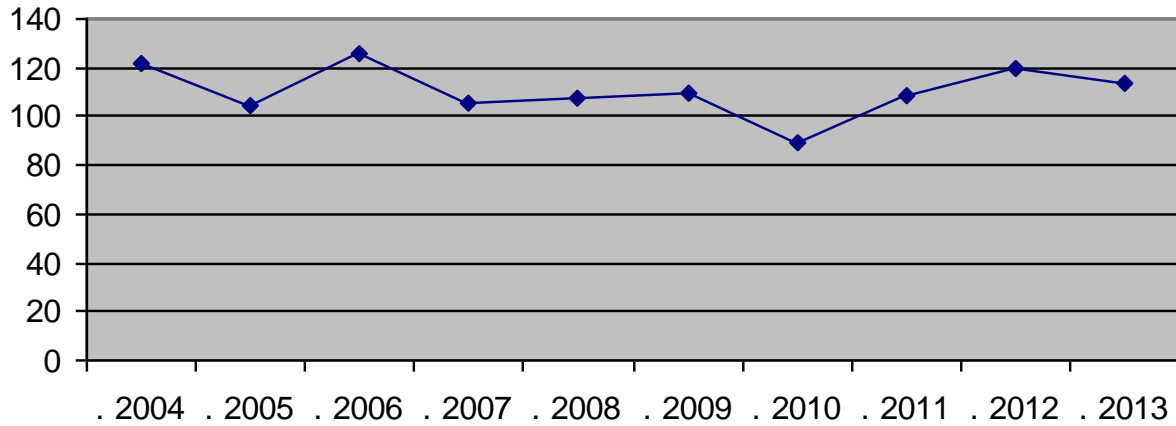
- There were 12 **pedestrian** related unintentional injuries, the lowest recorded number in the last 10 years. The annual average since 2004 is 22.
- A child was more likely injured as a pedestrian if they were aged 12 or above.

2013 Jersey unintentional injury data

- There were 14 **car passenger** related unintentional injuries, a reduction of 11 from the previous year and with an annual average since 2004 of 24.
- There were 17 **motorcycle** related unintentional injuries, a decrease of 13 from the previous year and the lowest recorded number in the last 10 years. The annual average since 2004 is 35.
- There were 7 **bicycle** related unintentional injuries classed as road traffic collisions, a decrease of 2 from the previous year and the lowest recorded number in the last 8 years. The annual average since 2004 is 12.
- 16% of RTC attendee's required further treatment or assessment follow up after their initial emergency department attendance.
- There were 4 hospital admissions related to RTC's, a reduction of 9 from the previous year.
 - 2 **pedestrian** (17% of pedestrian related attendances)
 - 0 **motorcycle**
 - 1 **car** passenger's (7% of car passenger related attendances)
 - 1 **bicycle** RTC's (14% of bicycle road traffic collision related attendances)

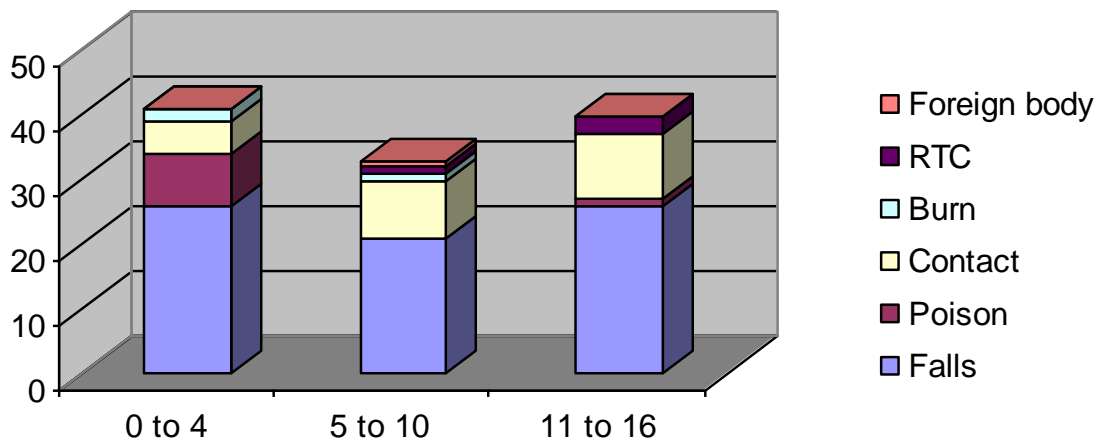
13. Severity of unintentional injury

Number of first attendance unintentional injury hospital admissions via ED



- There were 114 inpatient admissions into hospital via ED because of an unintentional injury at their first ED attendance, 6 less than in 2012.
- The 114 admissions equal 3% of child unintentional injury first ED attendances.
- July had the most hospital admissions.
- More boys than girls were admitted into hospital because of their injuries (68:46).
- The most common age for an ED unintentional injury related admission was 15 year old males.

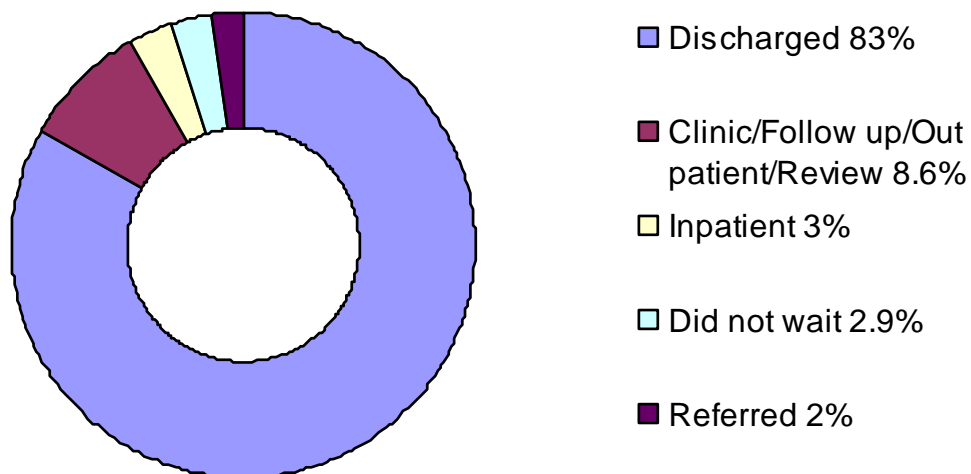
2013 Causes of admission via ED following first attendance due to unintentional injury



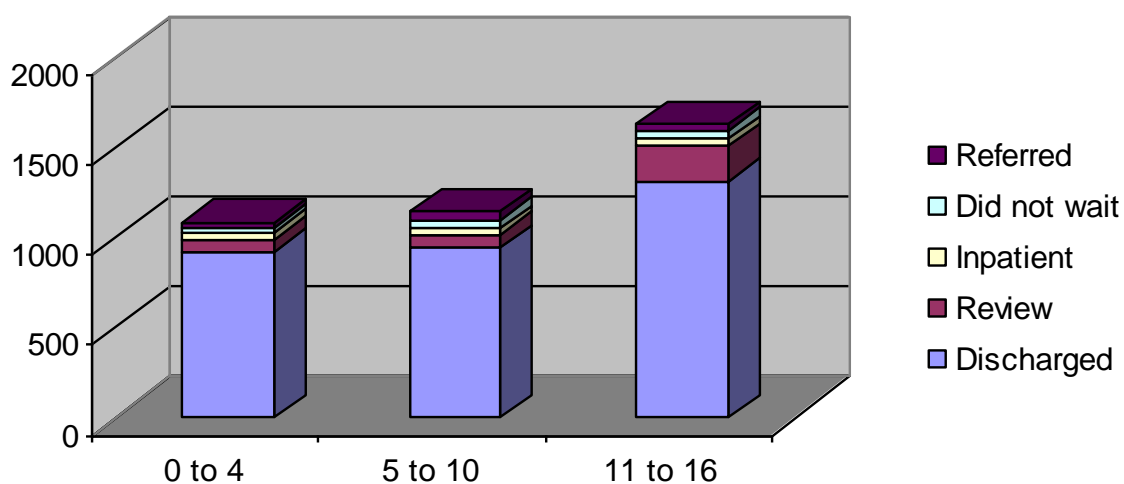
2013 Jersey unintentional injury data

- 64% of children were admitted into hospital because of a fall.
- There were 10 admissions related to sport including; rugby, football, motorbike racing and martial arts.

2013 Discharge summary



2013 Discharge summary as per age



- There were no unintentional injury child fatalities between 2009 and 2013, 2 in 2008.
- 14% of children attended ED with a first attendance related unintentional injury required further hospital treatment or follow up after their initial attendance and treatment.