Jersey Child Unintentional Injury Statistics 2011

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

www.cap.je

The source of the child accident data is Jersey's 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.

In June 2011 the way of recording Emergency Data was changed and TrakCare was introduced producing a different data set. Two types of data have been combined to produce this report.

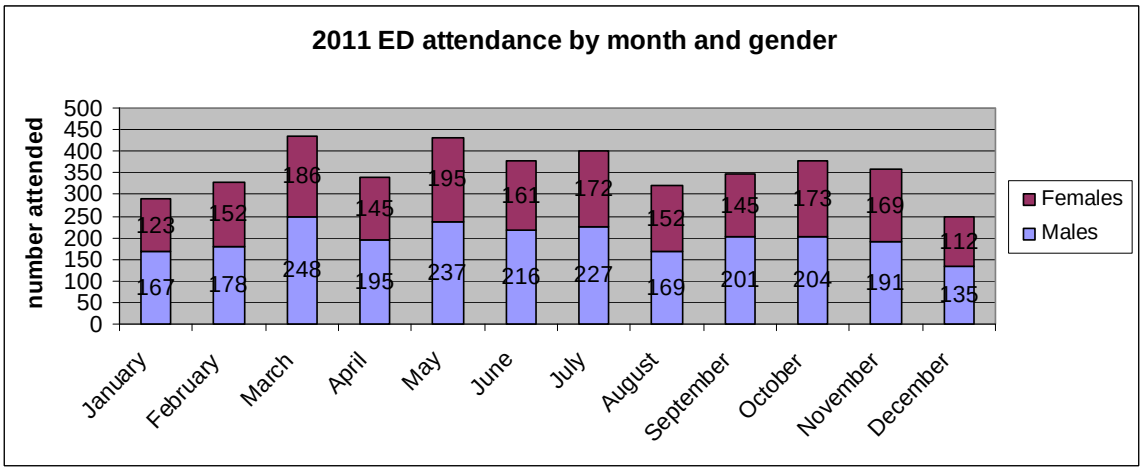
Pre 11th June 2011 detailed unintentional injury data was hand written in broad text and broad groups of data obtained by medical coding, all documented on an Emergency Department (ED) card. First attendances were identified separately from follow ups and once each child had been seen in ED the attending doctor documented the codes relating to their attendance for computer inputting – a different code for each diagnosis. This created subjective data and human error with incorrect numbers documented resulting in not every child's injury being categorised as an unintentional injury. To improve the data in 2009, a wider search was undertaken which identified patients that would otherwise have been missed.

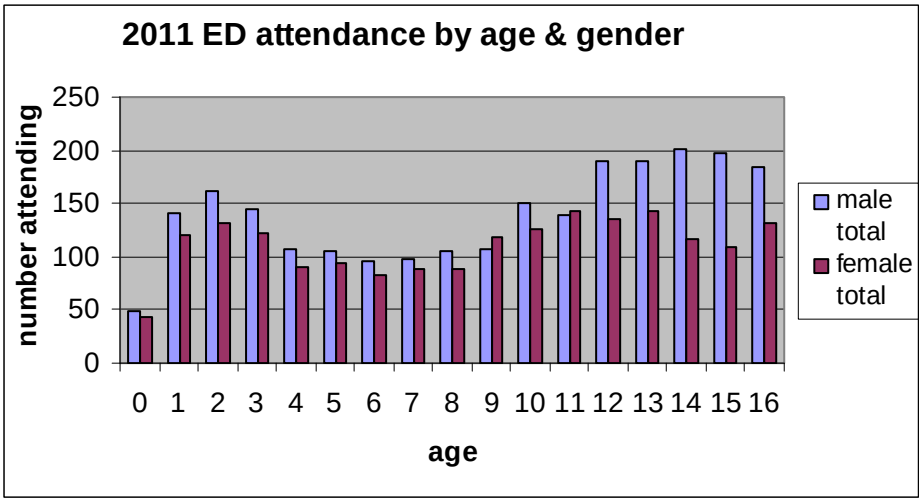
Post 11th June 2011 all information was documented directly onto the computer without a third party inputting the data. Numbered codes were removed, although could still be accessed as a short cut, and replaced by data sets written out in full. This has resulted in more accurate data from the person delivering the care. TrakCare is continuing to be fine tuned and changes have been seen in the data available. Not all fields are mandatory and previously recorded information appears to be no longer captured. Unplanned follow up visits are no longer recorded as being linked to the original attendance but as a separate attendance. This will show as a marked increase in ED attendances in comparison to the previous format of data collection.

Index

1.	Attendance as per month, age and gender	page 4
2.	Place of child unintentional injuries	page 5
3.	Leading types of unintentional injuries	page 6
4.	Cause description of unintentional injuries	page 7
5.	Falls in under ones	page 7
6.	Burns	page 8
7.	Poisoning	page 9
8.	Near drowning	Page 9
9.	Door crush injuries	page 10
10.	Dog bites	page 10
11.	Foreign bodies	page 10
12.	Identified mechanisms of injury	page 11
12.1	Bicycle unintentional injuries	page 12
12.2	Trampoline unintentional injuries	Page 13
12.3	Skateboarding unintentional injuries	page 13
12.4	Rollerblades/Heely unintentional injuries	page 14
12.5	Micro scooter unintentional injuries	page 14
13.	Road Traffic Collisions	page 15
14.	Severity of unintentional injury	page 17

1. Attendance as per month, age and gender





Island population (estimate excluding seasonal workers <1yr)	Total 04	Total 05	Total 06	Total 07	Total 08	Total 09	Total 10	Total 11
	87,700	88,400	89,400	90,900	91,800	92,500		census 97,857

Total ED attendance (all ages/genders)	Total 04	Total 05	Total 06	Total 07	Total 08	Total 09	Total 10	Total 11
	32,427	33,260	33,389	33,729	33,627	32,751	33,222	38,333

0-16 yrs unintentional injury ED attendance	Total 04	Total 05	Total 06	Total 07	Total 08	Total 09	Total 10	Total 11
	4431	4253	4034	4039	3752	4225	4069	4253

0-16 unintentional injury attendance related to population	2004	2005	2006	2007	2008	2009	2010	2011
	5.05%	4.81%	4.51%	4.44%	4.09%	4.57%		4.35%

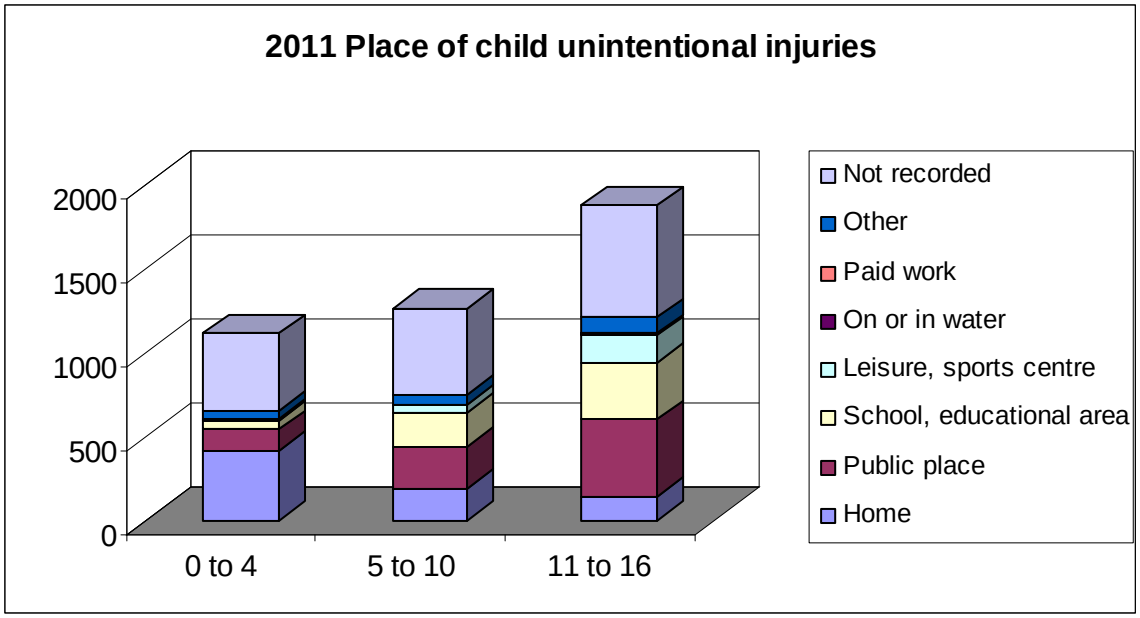
0-16 unintentional injury attendance related to total attendance	2004	2005	2006	2007	2008	2009	2010	2011
	13.66%	12.79%	12.08%	11.97%	11.16%	12.90%	12.25%	11.09%

- Total Emergency Department attendances have increased by 5,111. The way attendances were recorded changed from June 2011 onwards. Patients who return with a problem relating to their original ED attendance and have no booked appointment are booked in as new attendances for their repeat visit. (Represented as 2 or more ED attendances). Prior to June 2011, unannounced returns were recorded as follow ups related to the original attendance (Represented as one attendance on the data).
- Out of the above number there were 4,253 child unintentional injury attendances in 2011, an increase of 184.

- The average yearly attendance since 2004 is 4,132.
- 11.09% of all ED attendances were child unintentional injuries.

- As in previous years boys had more accidents than girls (2368:1885)
- Gender and age hot spots were seen in boys aged over 12 years.
- March and May were the highest attendance month for boys and girls.

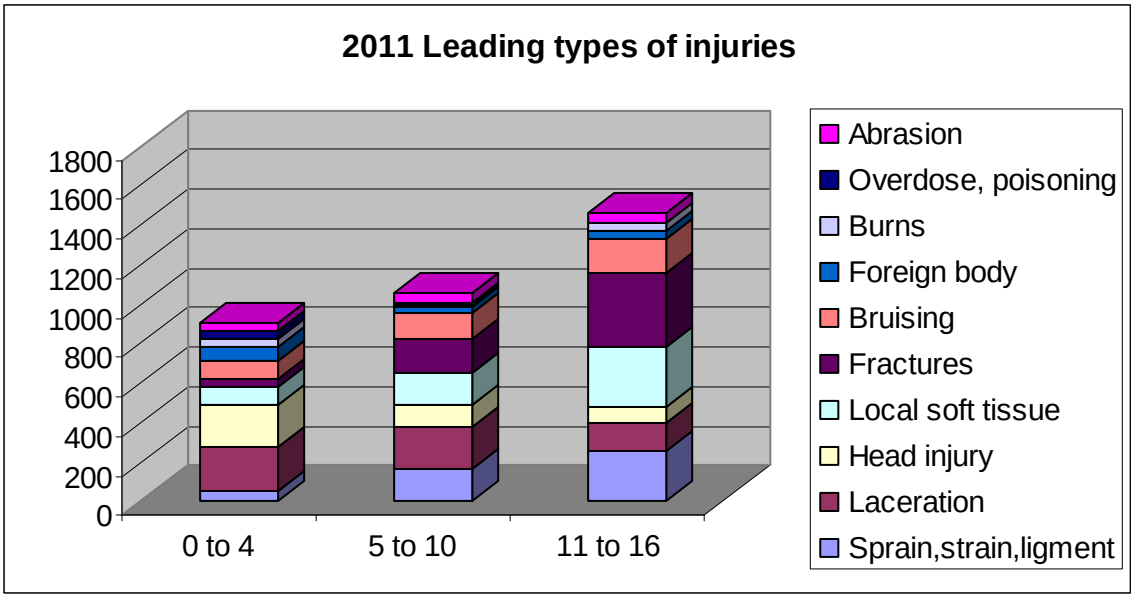
2. Place of child unintentional injuries



- As seen in previous years, children aged under 5 years were most likely to have an unintentional injury at home. As they reached secondary education and became more independent more unintentional injuries were seen in public places and educational areas.

3. Leading types of injuries

Due to the type of data available it was not possible to identify the cause of every injury. However, looking at the type of injury sustained could give insight into possible causes and identify hot spots.



- In under fives, the most common unintentional injury was lacerations and head injuries, as seen in the previous 2 years.

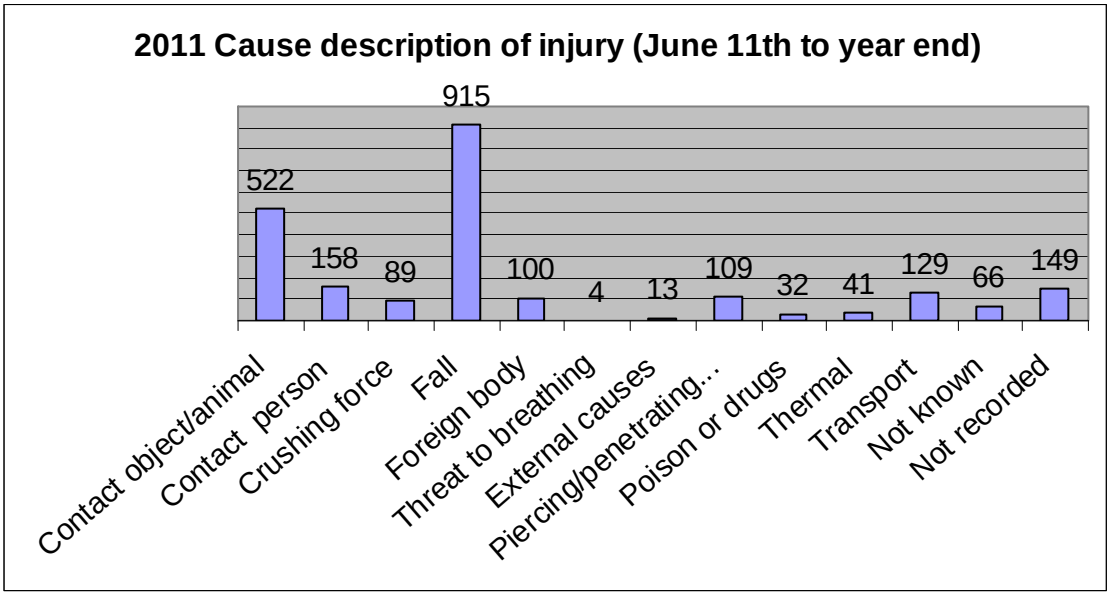
- A child was more likely to sustain a head injury, burn, accidental overdose or poisoning if they were aged under five.

- Children aged over 5 were more likely to sustain a fracture, bruising, sprain or local soft tissue injury.

4. Cause description of injuries

Changes in the type of data collected post June 2011 has enabled the capture of a description of the injury cause.

The below data relates to the children attending Jersey's Emergency Department on and after 11th June 2011.



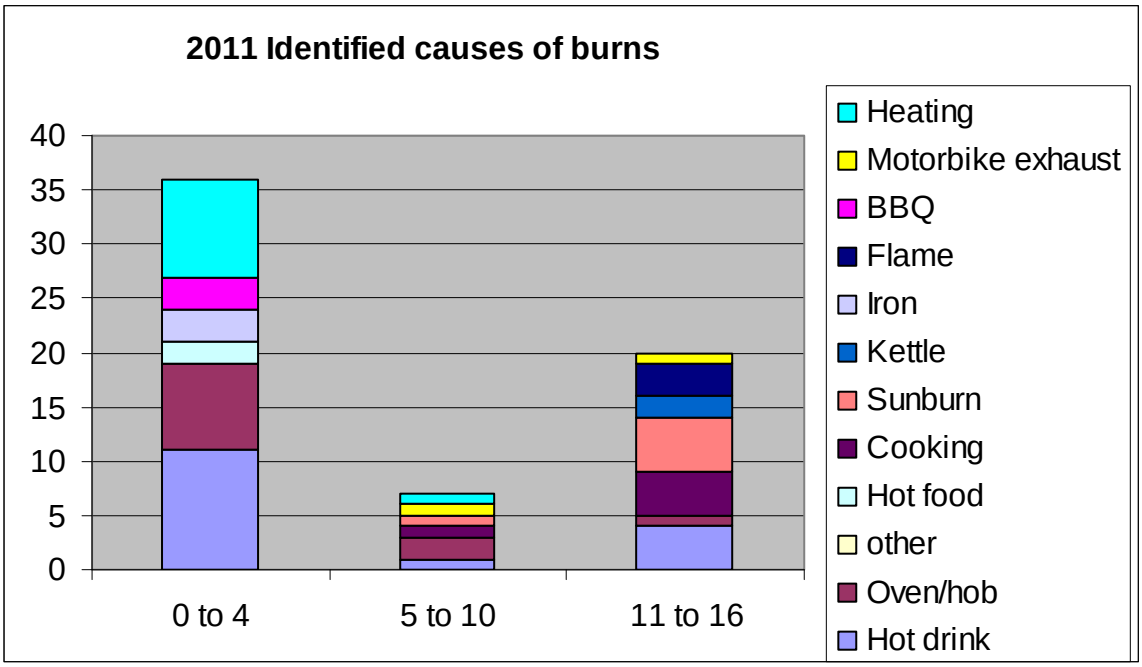
- 2,327 children attended from June 11th to end of the year.
- Out of this number the most common cause of injury was falls, followed by contact with an object or animal.

5. Falls in under ones

	Under ones seen in ED	Injury caused by a fall	Fell from standing/sitting	Fall from raised surface
2011	93	66	34	32
2010	112	60	30	30
2009	127	87	53	34
2008	124	94	48	46

- The most common height for an infant to fall from when left alone, in order of frequency, was;
  - adult's bed
  - sofa
  - changing table or table

6. Burns



- Children under the age of 5 were most likely to sustain a burn.
- Spilt hot drinks remained the most common cause of burns to all children.

- 42 children aged under 5 sustained a burn - top 3 causes of burns in priority;
    - Spilt hot drinks
    - Oven/oven hob
    - Heating; radiator/electric fire/wood stove

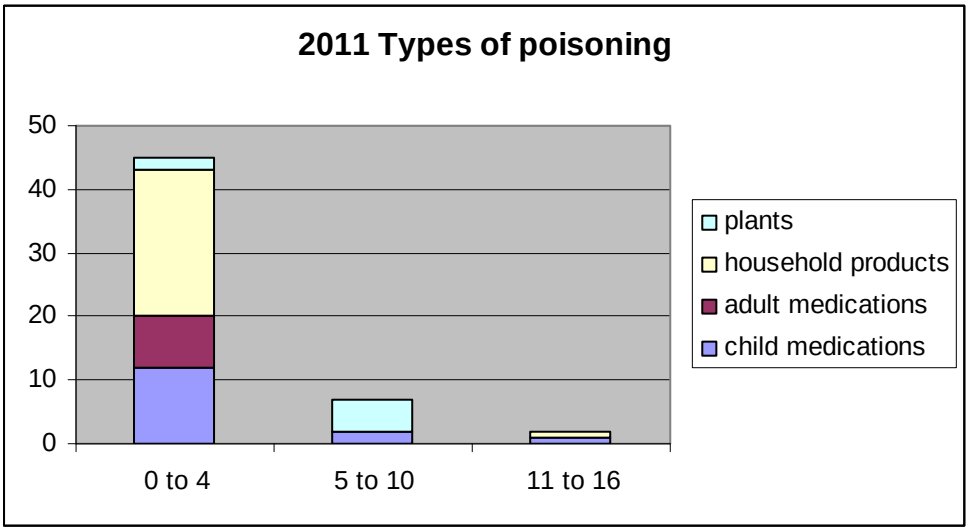
- 12 children aged between 5 and 10 sustained a burn - top 3 causes of burns in priority;
    - Oven/oven hob
    - Numbers to low to equate

- 29 children aged between 11 and 16 sustained a burn - top 3 causes of burns in priority;
    - Sunburn
    - Cooking
    - Spilt hot drinks

- 'Other' burn causes included; curling tongs, hair straightener, BBQ, iron, kettle, hot light bulb, sparkler, motorbike exhaust.

- 83 children attended because of a burn – a reduction of 3 from 2010.
- 58% of children attending with burns required further hospital treatment and follow up
- 2 children were admitted into hospital because of their burn unintentional injury.

7. Poisoning



- 54 children ingested potentially harmful substances
- 45 were under the age of 5 years

- Household products included;
  Dishwasher tablets, washing powder, washing up liquid, bubble bath, Dettol, Milton, toilet block, vanish stain remover, Olbas oil, Karvol, nail polish, nail polish remover, Lighter fuel, white spirit, mercury, poster pain, glow stick, rat poison, silica gel
- Child medications included;
  Calpol, Ibuprofen, antibiotics, Tixylix, child prescriptive medicines, all in suspension.
- Plants included;
  Seed, berries, Arum Lilly

- 3 children were admitted into hospital because of ingesting child medication, adult medication and household products - all under the age of 5 years.

Number admitted due to poisoning	
2011	3
2010	5
2009	6
2008	0
2007	0

8. Near drowning

- There were no children admitted because of near drowning in 2011 or 2010.
- 4 children were admitted into hospital for near drownings in 2009.

- ## 9. Door crush injuries

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

2 children were admitted because of a digit door crush injury.

10. Bites

- 22 children attended because of a dog bite, (15 children in 2010, 29 children in 2009).
- The average age for children to be bitten by a dog was 7 years.
- 14 children were bitten on their arms and legs, 8 to the face.

Site of injury on child				
	Upper limb	Lower limb	Face	Total
0-4	2	1	4	7
5-10	1	1	1	3
11-16	7	2	3	12

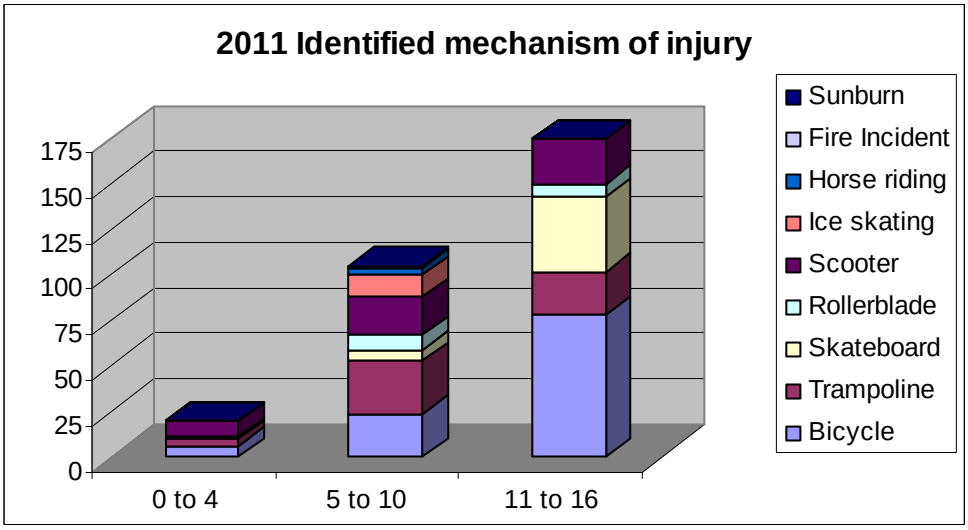
11. Foreign bodies

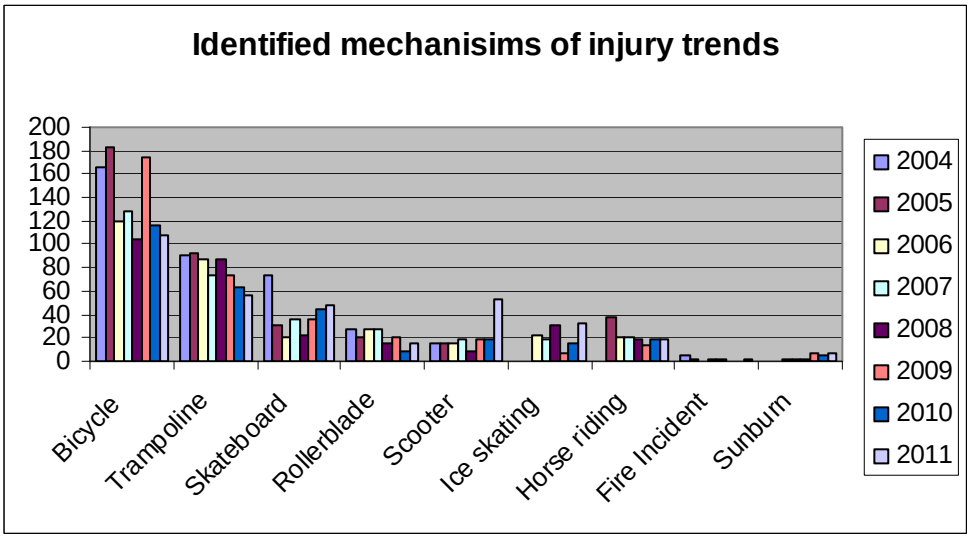
- 28 children attended due to ingesting a foreign body, 64% aged under 5 years.
- Objects ingested included; fish bone, sea shell, screw, button, pencil/pen parts, coins, stones, pin, button battery

- 24 children inserted objects into their nose, all under the age of 5 years bar 2.
- Objects inserted included; button, foam, tic tac, wood, toy, toy stuffing, ribbon, spring, bread, play dough, sticker, peanut, ball, stone, Lego, blue tack

- 15 children inserted objects into their ears, predominately aged 13 and below.
- Objects inserted included; cotton buds, paper, sticker, bead, magnetic earring, tissue, fly, stone, butterfly earring back

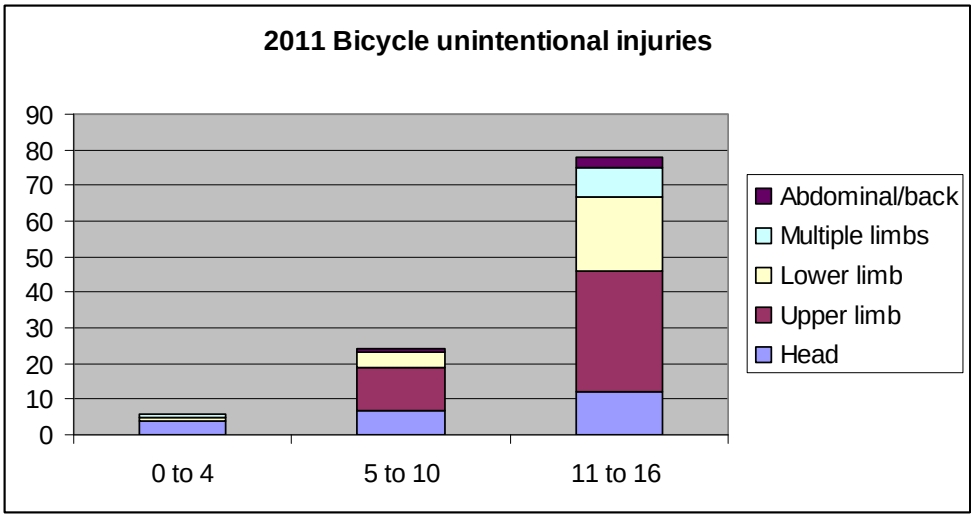
12. Identified mechanism of injury





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

12.1 Bicycle unintentional injuries



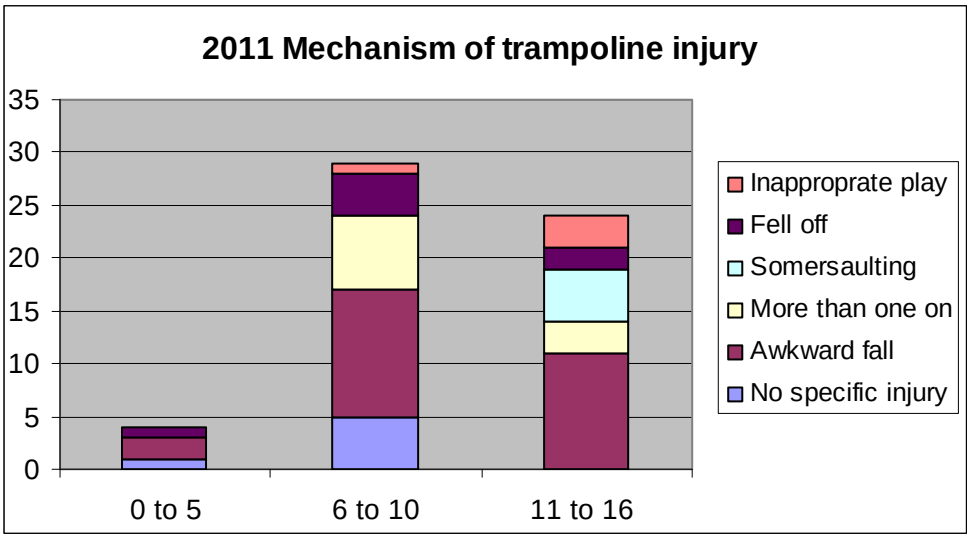
- There were 108 bicycle related unintentional injuries; this was 29 incidents below the annual average of 137.

- Boys attended more than girls (75:33).
- Cycle related injuries were seen in;
    - upper limbs (42.59%)
    - head injuries (21.29%)
    - lower limbs (24.07%)
    - multiple limbs (8.33%)
    - abdominal/back (3.7%).

- 29.62% of children seen because of a bicycle related unintentional injury required further hospital treatment after their first ED attendance.
- Of the 108 children attending because of a bicycle related unintentional injury;
    - 65.74% (71/108) did not have their helmet wearing status recorded.
    - 13.89% (15/108) stated they had worn a helmet
    - 20.37% (22/108) stated they were not wearing a helmet.

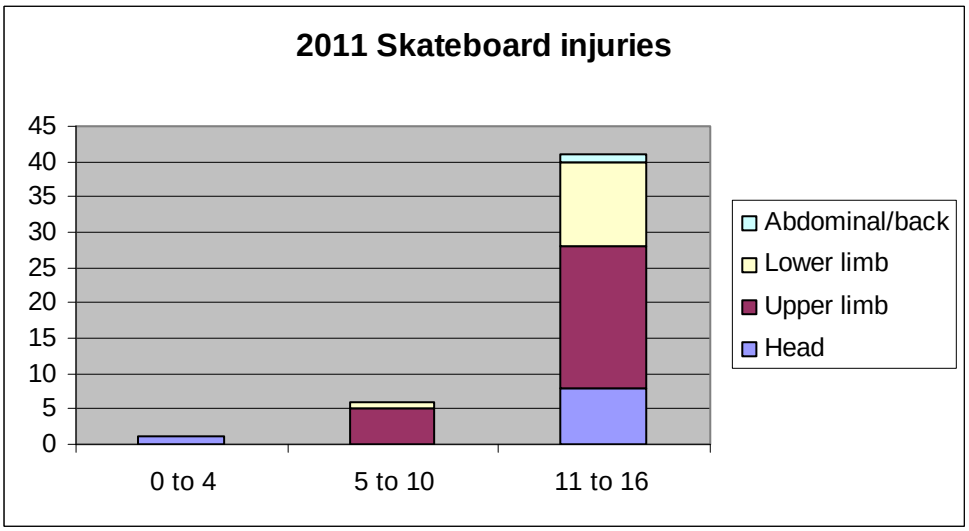
- 4 children were admitted because of a bicycle related unintentional injury, 3 limb injuries and 1 head injury.

12.2 Trampoline unintentional injuries



- There were 57 trampoline unintentional injuries.
- The rate trend over the last 8 years has shown a reduction of 37.36% since 2004 recordings.
- The most common month for injury was April and July.
- There were more girls attending due to trampoline unintentional injuries than boys (34:23).
- The most common age of trampoline unintentional injury was 9 years.
- 15.79% of children required further hospital treatment.
- 1 child was admitted into hospital because of a trampoline related injury.

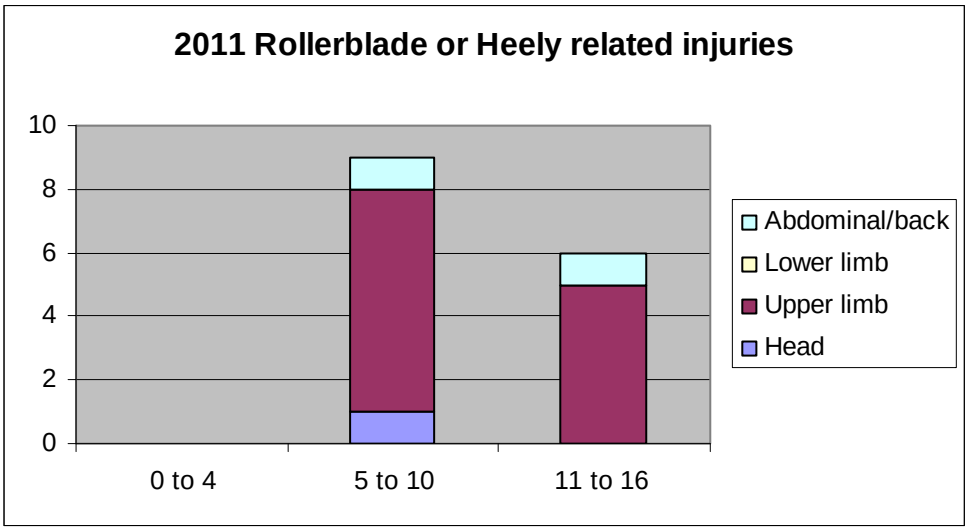
12.3 Skateboarding unintentional injuries



- There were 48 skateboarding related unintentional injuries, a 140% increase since 2006.

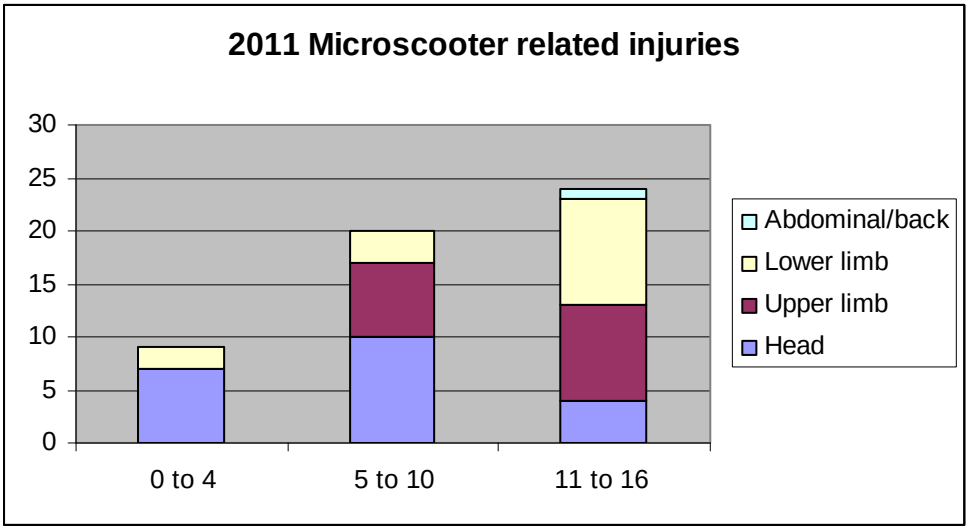
- Predominately boys attended with skateboarding related unintentional injuries (42:6).
- The most common age for a skateboard related unintentional injury was 12 years.
- The most common type of injury was to the; upper limb (25/48) , lower limb (13/48), head (9/48) , torso (1/48)
- 43.75% of children required further hospital treatment.
- There were 6 hospital admissions due to a skateboarding unintentional injury; 4 wrist injuries, 1 abdominal and 1 head injury.
- Please note, a public skateboarding park in St Helier opened in 2009 and in St John 2010

12.4 Rollerblading / heelys unintentional injuries



- There were 15 related accidents in 2011, an increase of 7 from the previous year.
- No children were admitted into hospital following a rollerblade/heelys accident.

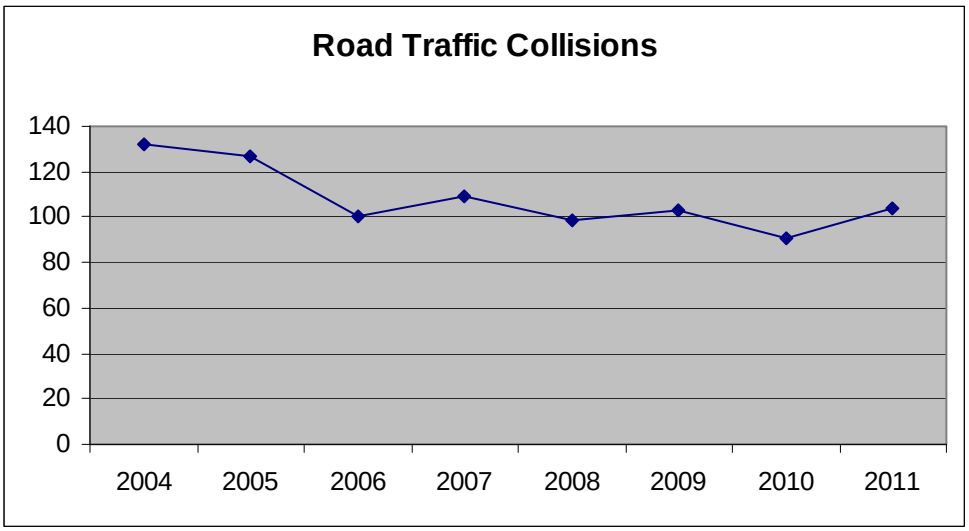
12.5 Micro scooter unintentional injuries

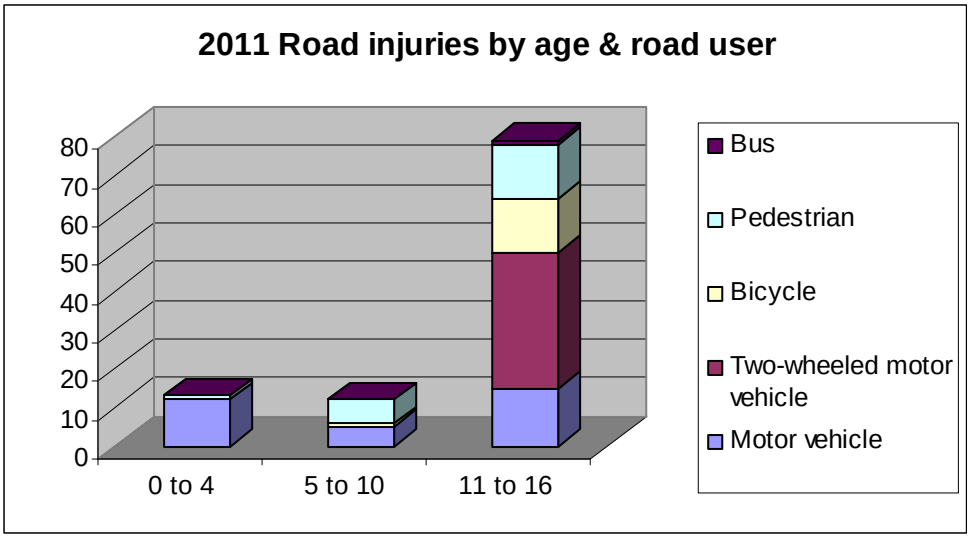


- There were 53 micro scooter related unintentional injuries, an increase of 34 from the previous year.
- Over the previous 7 years the average number attending because of a scooter unintentional injury was 16.
- There were more boys than girls attendances (42:11).
- The most common age for an incident was 9 years.
- The most common type of injury was to the; head (40%), upper limb (30%), lower limb (28%).
- 3 children were admitted into hospital; 2 with unintentional injuries to their head and 1 to a lower limb.

13. Road Traffic Collisions (RTC's)

RTC	2004	2005	2006	2007	2008	2009	2010	2011
car front	10	13	16	5	5	11	9	12
car rear	12	16	20	5	13	20	23	19
car driver							1	1
motorcycle	43	38	40	39	46	36	24	35
pillion	0	0	4	1	3	0	2	0
pedestrian	25	34	19	31	21	21	16	21
bus passenger	2	2	1	1	1	0	0	1
bicycle			8	17	13	15	15	15





- There were 104 RTC's, an increase of 14 on the previous year.
- Since 2004 the yearly average was 108 incidences.
- The ratio between male and females was 66:38

- There were 21 **pedestrian** related unintentional injuries with an annual average since 2004 of 23.
- A child was more likely injured as a pedestrian if they were aged 11 or above.

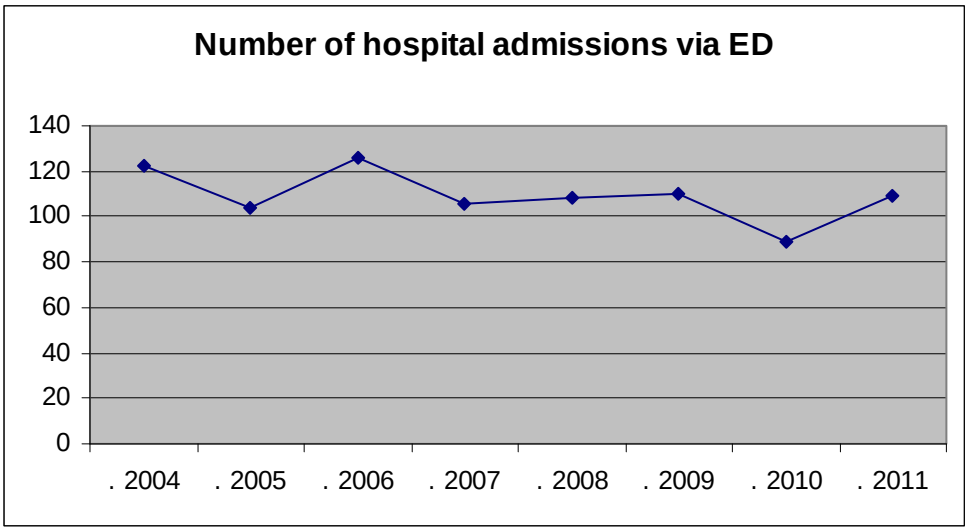
- There were 31 **car** related unintentional injuries with an annual average since 2004 of 26.25.

- There were 35 **motorcycle** related unintentional injuries, an increase of 11 from the previous year. The annual average since 2004 is 37.6.

- There were 15 **bicycle** related unintentional injuries classes as road traffic collisions. The annual average since 2004 is 13.83.

- 29.8% of RTC attendees required further treatment or follow up.
- There were 9 hospital admissions related to RTC's, 2 less than the previous year.
    - 1 **pedestrian**
    - 3 **motorcycle**
    - 5 **car**, 3 from the rear of the car and 2 from the front. Out of this number 2 wore their seatbelt and 3 had an unknown seatbelt status.
    - 0 **bicycle** RTC's

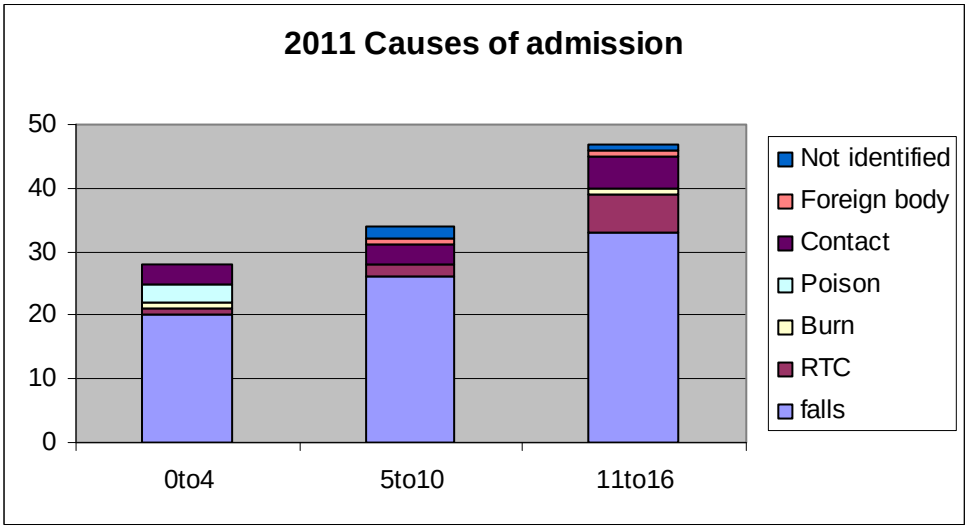
14. Severity of unintentional injury



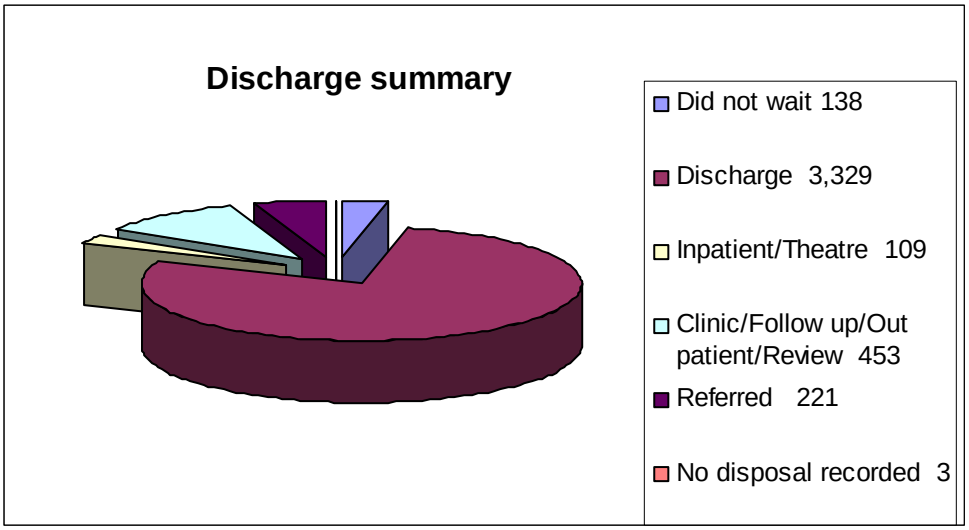
- There were 109 inpatient admissions into hospital via ED because of an unintentional injury, 20 more than in 2010.
- The 109 admissions equal 2.56% of child ED attendances.

- June and October had the most hospital admissions.

- More boys than girls were admitted into hospital because of their injuries (69:40).
- The most common age for an ED accident related admission was 15 and 16 years old.



- 72% of children were admitted into hospital because of a fall.
- There were 14 admissions related to sport including; football (6), rugby (5), hockey (1)
- There were no Motocross related admissions compared to 5 in 2010.

- There were no unintentional injury child fatalities between 2009 and 2011, 2 in 2008.

- 18.41% of children attended ED with an unintentional injury that required further hospital treatment or follow up.