

# **Accidents and injuries in under 18 year olds:**

## **Hospital admissions and A&E attendances**

**East Sussex Public Health Directorate, July 2012**

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## **Summary of key findings**

The following have been identified in the report:

### **0 to 17 year olds**

- Most accidents occur in children under 2 years old and over 10 years olds
- For the three year period 2009/10 to 2011/12, the most deprived communities in East Sussex experienced the highest rates of admissions
- Hastings has had a significant decrease in the rate of admissions from 2010/11 to 2011/12
- Falls are the main cause for admissions
- In 2010, Rother had a significantly higher rate of children (aged under 16 years) injured on roads compared to England
- In 2011/12, Hastings and Eastbourne had the highest rates of A & E attendance due to road traffic accidents

### **0 to 4 year olds**

- For the three year period 2009/10 to 2011/12, 56% of admissions were due to falls
- In 2011/12, head injuries were the main cause of A & E attendance
- The largest proportion of accidents occur at home
- For the three year period 2009/10 to 2011/12, admissions were the highest in Hastings and Rother, and significantly higher than for England
- For the three year period 2009/10 to 2011/12, Hastings contributed the most admissions to the overall East Sussex rate
- For the three year period 2009/10 to 2011/12, there were 5 electoral wards that had significantly higher admission rates than East Sussex:  
Tressell

Baird  
West St Leonards  
Hollington  
Devonshire

- For the five year period 2007/08 to 2011/12 the A & E attendance rate in East Sussex has increased. The greatest increases have been in Lewes and Wealden. Hastings is the only area that has not had a significant increase in 2010/11 or 2011/12 from 2007/08

### **5 to 17 year olds**

- For the three year period 2009/10 to 2011/12, 41% of admissions were due to falls
- In 2011/12, dislocation / fracture / joint injury / amputation were the main cause of A & E attendance
- For 5 – 9 year olds the largest proportion of accidents occur in the home
- For 10 – 17 year olds the largest proportion of accidents occur in a public place
- Hastings has had a significant decrease in the rate of admissions from 2010/11 to 2011/12
- For the three year period 2009/10 to 2011/12, Wealden contributed the most admissions to the overall East Sussex rate
- For the three year period 2009/10 to 2011/12, there were 6 electoral wards that had significantly higher admission rates than East Sussex:  
Tressell, Baird, Gensing, St Stephens, West St Leonards and Sidley
- For the three year period 2009/10 to 2011/12, Rother and Wealden had the highest number of admissions for transport accidents
- In East Sussex from 2009/10 to 2011/12, admissions caused by cycling accidents have decreased from 71 to 48

- For the three year period 2009/10 to 2011/12, Hastings and Eastbourne had the highest cycling accident admission rates
- For the five year period 2007/08 to 2011/12 A & E attendance rates across East Sussex have remained stable
- Between 2008/09 and 2011/12 the number of A&E attendances due to road traffic accidents has decreased for 15-17 year olds, with a reduction in attendances in 2010/11 and 2011/12 for 5-14 year olds
- In 2011/12, 70% of attendances due to assaults were for males, with the highest number of attendances for those aged 15-17 years
- In 2011/12, Eastbourne had a significantly higher rate of A&E attendances due to assaults compared to East Sussex
- In 2011/12, 74% of attendances at A & E were due to deliberate self-harm for females
- In 2011/12, Eastbourne has the highest rate of A&E attendances due to self harm, and a significantly higher rate than all East Sussex local authorities except for Hastings

## **Introduction**

This report reviews available data on accidents and injuries for children and young people (under 18 years) in East Sussex. It is based on local data as well as data available nationally. Previous reports have focussed on 'emergency admissions to hospital caused by unintentional and deliberate injuries to children and young people', as per the (now redundant) National Indicator 70 (NI70). An update on that indicator is included within this report, as well as by age breakdown which is how the indicator will be reported on from 2012/13 onwards as part of the Public Health Outcomes Framework. More detailed analysis into the reasons for hospital admissions and attendances at A&E are also presented to help gain a better understanding of the causes of accidents and to inform the commissioning and delivery of services that prevent and reduce accidents to children and young people in East Sussex.

### **Definition: Hospital admissions**

The data covers emergency admissions with injuries selected based on relevant external cause coding (ICD10 codes). External cause relates to the reason for the injury not necessarily the actual injury e.g. 'Car occupant injured in transport accident' could be the external cause of a 'head injury'. Unintentional injuries relate to causes such as falls and traffic accidents whereas deliberate injuries relate to causes such as assault and self harm. The age covered is 0-17 years inclusive and the indicator is based on the postcode of residence of the admitted person, not necessarily the location where the injury took place.



**Definition: A&E attendances**

Information on attendances at A&E is available via local hospital activity data sets. Within the A&E dataset there is a field called 'patient group', which is used to identify the reason for an A&E episode. There are also broad diagnosis codes available. Patient group codes 10-60 have been used to identify attendances relating to injuries (road traffic accidents, assaults, self-harm, sports injuries, firework injuries and other accidents). Data presented by geographies relates to where patients live, not where incidents occurred.

**Data quality**

The source of A&E attendance data used in this report is of poorer data quality than hospital admissions, as it is not the official source of A&E data that is used for monitoring purposes. Nationally it is recognised that the A&E data source used in this report has continuing issues regarding the quality and coverage of data, for example missing diagnosis codes. The official source of data used to monitor key standards of care in A&E is overall numbers only, by A&E department. It therefore cannot be used for detailed analyses of any kind.

It is important to note that A&E attendance data does not include the East Sussex Minor Injury Units (MIUs) (Lewes, Crowborough and Uckfield) as MIU data is not included in local hospital activity datasets. MIU data is not captured in a way that allows robust analysis of attendances at the units.

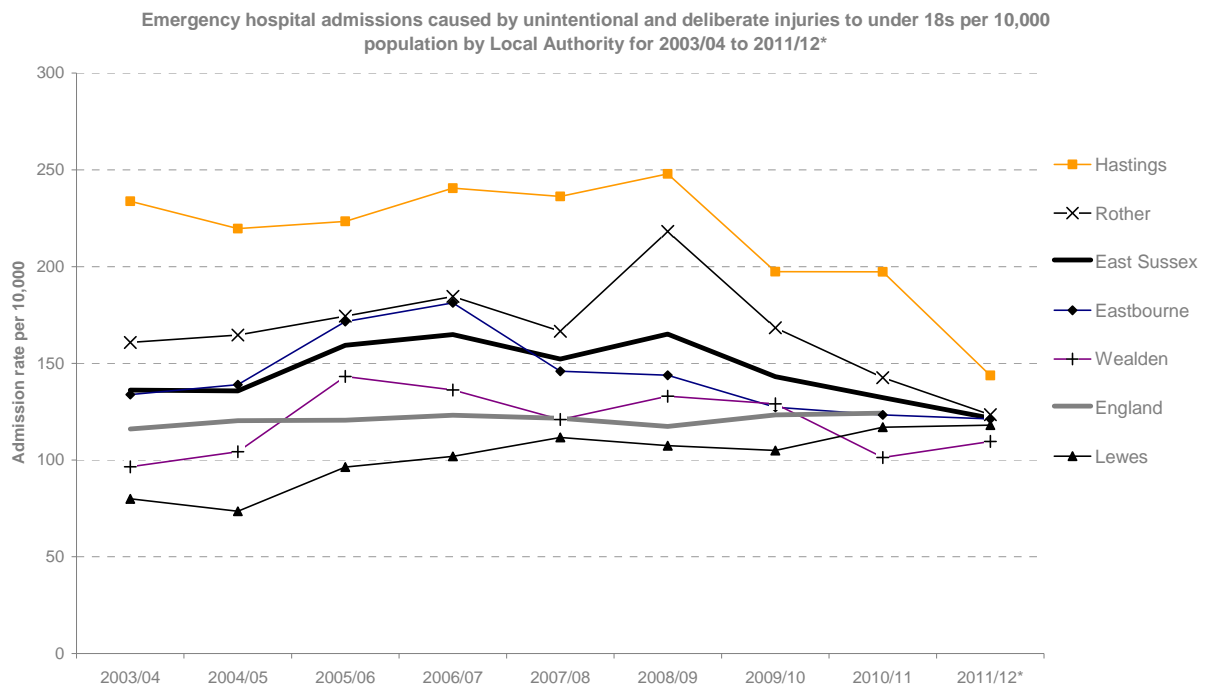
The walk-in centres at Eastbourne and Hastings are also not included.

## **Overall performance for 2011/12 for under 18s of admissions to hospital as a result of an accident or deliberate injury**

As can be seen from Figure 1 and Table 1, East Sussex has had a higher rate of admissions (Under 18s) than for England as a whole over the last nine years (national data for 2011/12 is currently not available). Hastings has consistently had the highest rate of any District/Borough in England between 2003/04 to 2008/09, and was the sixth highest in 2010/11 (data not yet available for other areas for 2011/12).

Previous East Sussex Public Health analysis of admissions data highlighted that there had been a different process for paediatric patients passing through Accident and Emergency (A&E) at the Conquest hospital than for the Eastbourne District General Hospital (EDGH) site. From January 2009 East Sussex Healthcare Trust has ensured that the pathway for children attending A&E at the Conquest matches the pathway at EDGH, and therefore this should not be reflected in the data for Hastings and Rother from 2009/10 onwards.

Figure 1: trend in admissions



Source: Hospital Episode Statistics (HES), The Information Centre for Health & Social Care  
\*based on local SUS data and ONS Mid Year Estimates 2010

Local data suggests that there has been a significant decrease in the rate for Hastings from 2010/11 to 2011/12 (Figure 2). Rother has also had a decrease in the rate, but not significantly so.

Figure 2: admissions by district/borough

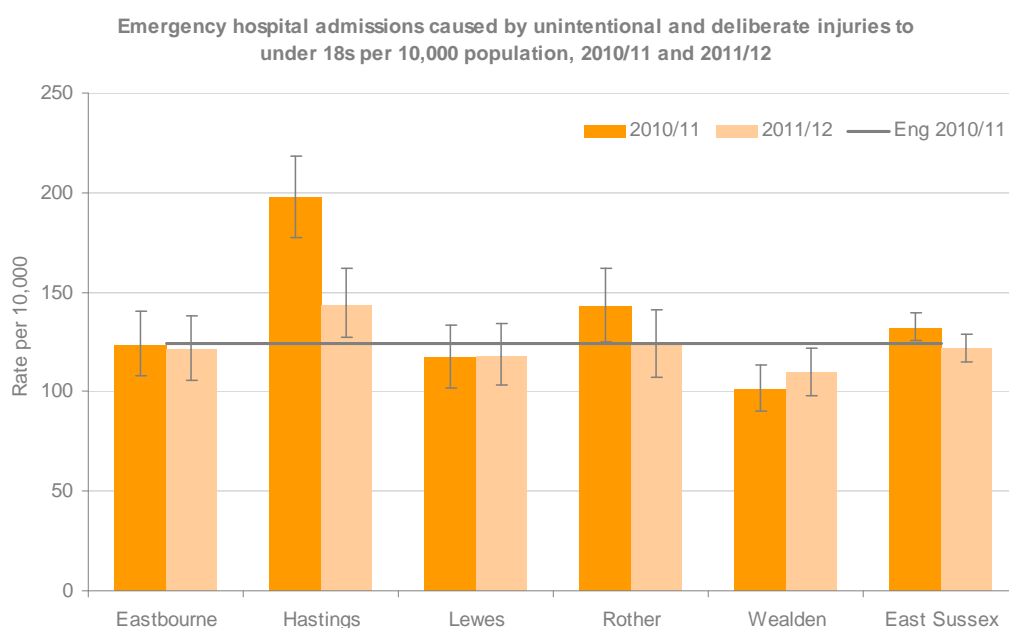


Table 1: admission rates by District and Borough in East Sussex by year

<b>Number</b>									
	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12*
Eastbourne	249	258	320	337	275	271	240	232	228
Hastings	466	432	433	462	452	474	376	372	271
Lewes	156	144	187	196	213	204	200	226	228
Rother	265	273	289	306	278	365	282	239	207
Wealden	298	323	443	419	370	403	388	305	330
East Sussex	1,434	1,430	1,672	1,720	1,588	1,717	1,485	1,374	1,264
South East	19,126	19,727	21,491	21,326	21,353	21,365	21,857	20,919	
England	128,725	128,581	133,136	135,411	133,630	129,231	135,750	137,264	

<b>Rate per 10,000</b>									
	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12*
Eastbourne	134	139	172	181	146	144	127	123	121
Hastings	234	220	223	240	236	248	197	197	144
Lewes	80	74	96	102	112	107	105	117	118
Rother	161	165	174	185	167	218	168	143	123
Wealden	97	104	143	136	121	133	129	101	110
East Sussex	136	136	159	165	152	165	143	132	122
South East	107	110	120	119	118	118	120	115	
England	116	120	121	123	122	117	123	124	

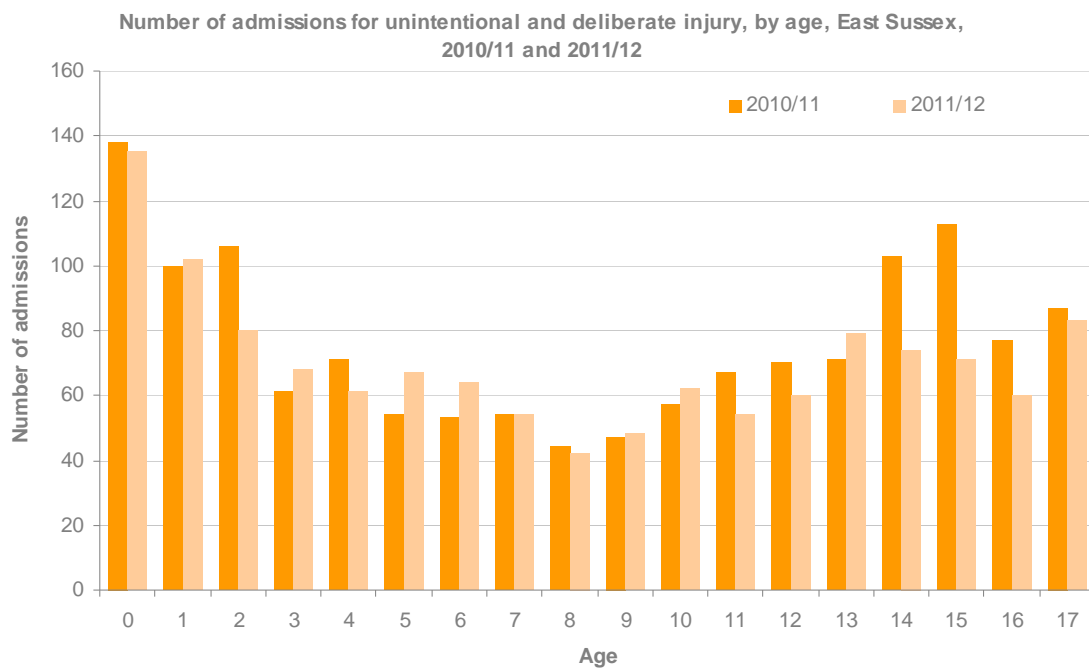
  

<b>Rank of rate nationally (1=worst, 354=best. In 2009/10 onwards out of 324)</b>									
	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12
Eastbourne	78	68	12	11	61	48	111	127	
Hastings	1	1	1	1	1	1	3	6	
Lewes	331	345	284	257	193	178	224	150	
Rother	27	19	10	7	23	2	18	66	
Wealden	261	213	74	99	148	74	104	241	

\*2011/12 based on local data for East Sussex and ONS Mid Year Estimates 2010

Figure 3 shows the age breakdown of the admissions for 2010/11 and 2011/12. There has been a decrease in admissions for those aged 2 years old (26 fewer admissions in 2011/12) and 14-16 years (88 fewer admissions in 2011/12). The decrease in admissions for those aged 14-16 years is 33 fewer in Hastings, 22 fewer in Lewes, 22 fewer in Rother, 8 fewer in Wealden and 3 fewer in Eastbourne. There have been slight increases for those aged 3, 5 and 6, but they are small numbers.

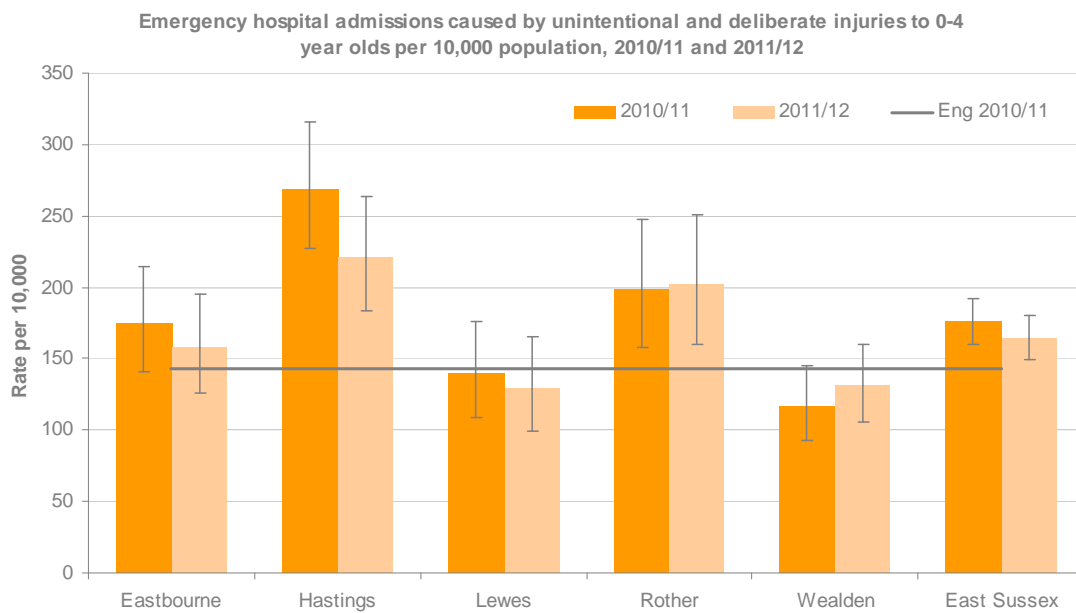
Figure 3: Breakdown of admissions by age, 2010/11 and 2011/12



### Public Health Outcomes Framework (PHOF) indicators

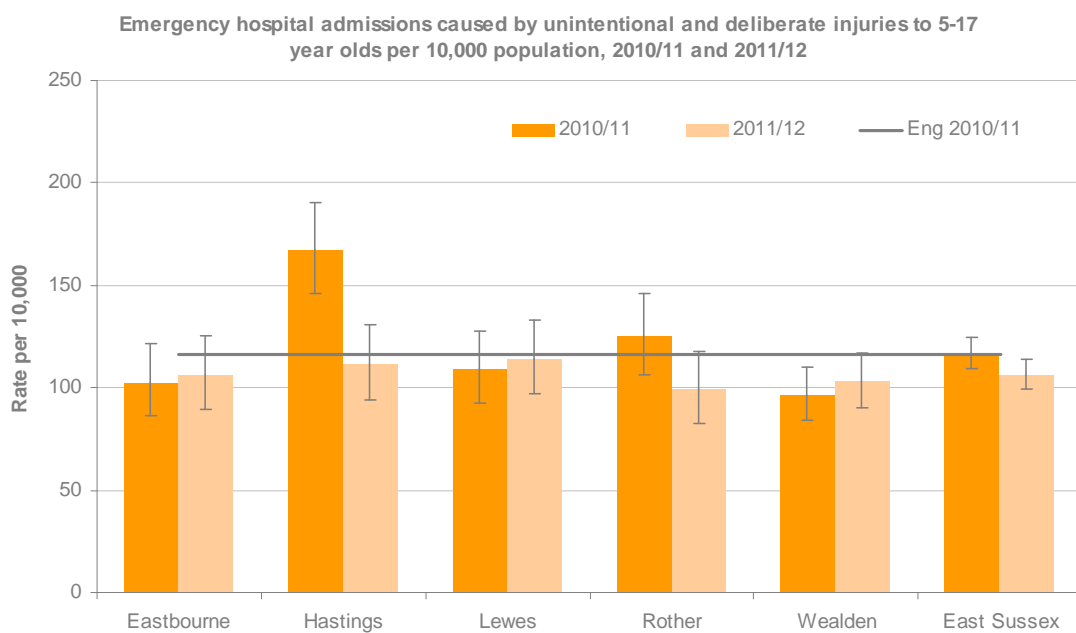
The PHOF indicators use the same definition as previously with NI70, but use two age breakdowns, 0-4s and 5-17 year olds. Data has only been published for these age breakdowns for 2010/11, with local data also available for 2011/12.

Figure 4: admissions for 0-4 years



Admissions for children aged 0-4 years are highest in Hastings and Rother, and significantly higher than for England (Figure 4). Although rates have changed from 2010/11 to 2011/12, there are no significant differences in the rate between the two time periods for any East Sussex local authority.

Figure 5: admissions for 5-17 years



For persons aged 5-17 years, Hastings has seen a significant decrease in the rate from 2010/11 to 2011/12. There were 74 fewer admissions in 2011/12. The main reduction in admissions were 17 fewer for complications of medical and surgical care, 20 fewer for self harm and 29 fewer for 'other external causes of accidental injury'.

Table 2: number of admissions by age group and district/borough, 2010/11 and 2011/12

Number	0-4 years		5-17 years	
	2010/11	2011/12*	2010/11	2011/12*
Eastbourne	94	85	138	143
Hastings	150	123	222	148
Lewes	69	64	157	164
Rother	79	80	160	127
Wealden	84	94	221	236
East Sussex	476	446	898	818

\*2011/12 based on local data for East Sussex and ONS Mid Year Estimates 2010

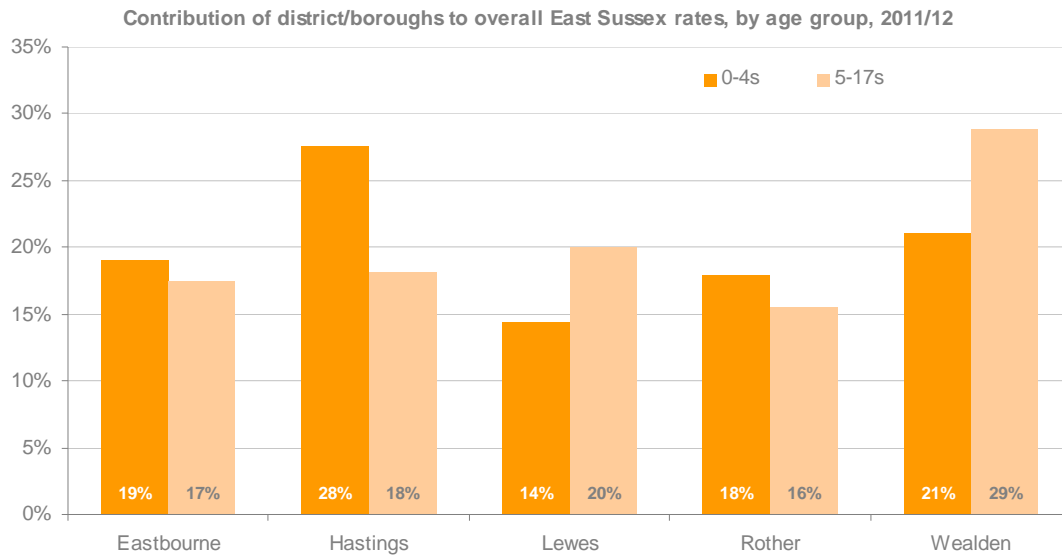
Relative to other local authorities, East Sussex performs worse for persons aged 0-4 years than 5-17 years. This is reflected in where the local authorities rank nationally, for example, Eastbourne is ranked 65th for 0-4 years (ranked out of 324, 1=worse), and ranked 198 for 5-17 year olds. (Table 3)

Table 3: district/borough rank, 2010/11

Rank of rate nationally (1=worst, 324=best), 2010/11	Rank of rate nationally (1=worst, 324=best), 2010/11	
	0-4 years	5-17 years
Eastbourne	65	198
Hastings	4	11
Lewes	142	162
Rother	34	88
Wealden	217	234

For admissions relating to those aged 0-4 years for 2011/12, Hastings contributes the most to the overall East Sussex rate. For those aged 5-17 years, Wealden contributes the most. (Figure 6)

Figure 6: breakdown of East Sussex admissions by district/borough



### Length of stay of admissions, 2009/10 to 2011/12

The following sections will analyse the headline PHOF indicators to help to identify key issues within East Sussex.

60% of the admissions for persons aged 0-4 years have a zero length of stay (admitted and discharged on the same day), for those aged 5-17 years 39% have a zero length of stay. 7% of admissions for 0-4 year olds and 10% of admissions for 5-17 year olds have a length of stay of 3 days or more. (Figures 7 and 8)



Figure 7: length of stay analysis, 0-4 years

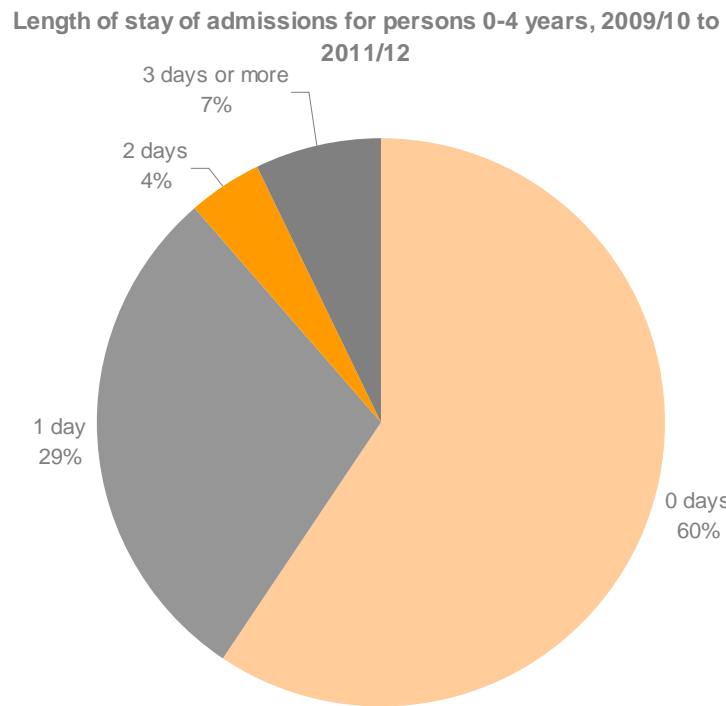
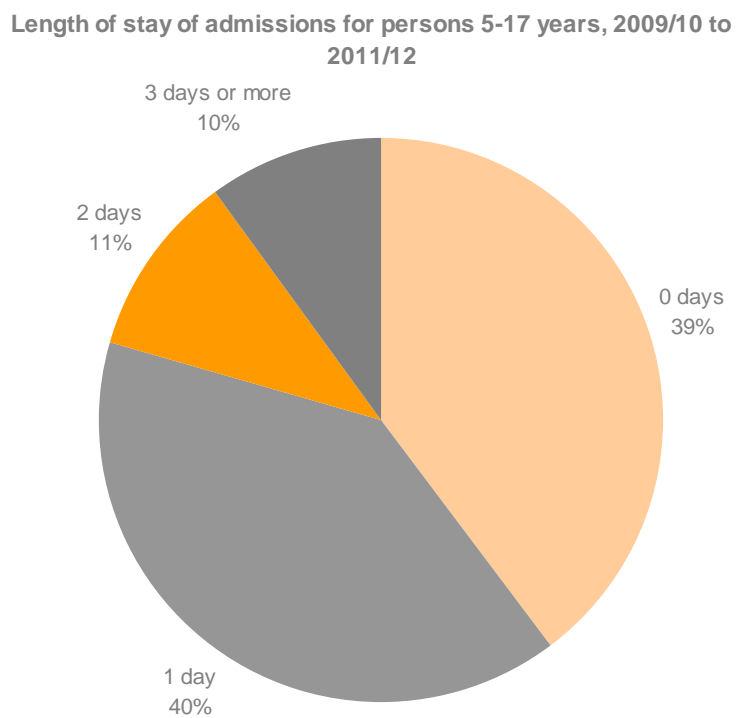


Figure 8: length of stay analysis, 5-17 years



# Ward analysis, 2009/10 to 2011/12

Figure 9: ward analysis, 0-4 years (excluding complications of medical and surgical care)

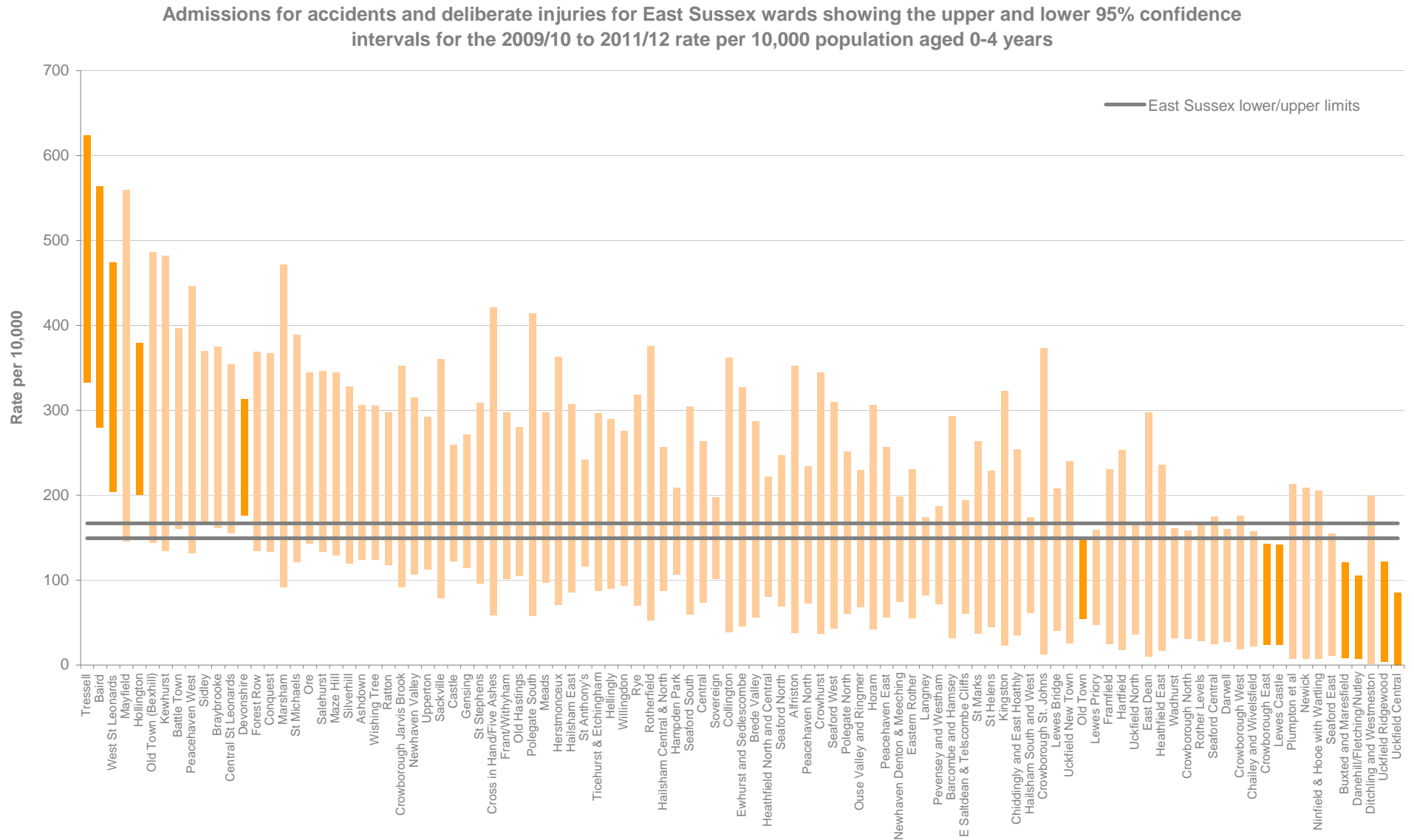
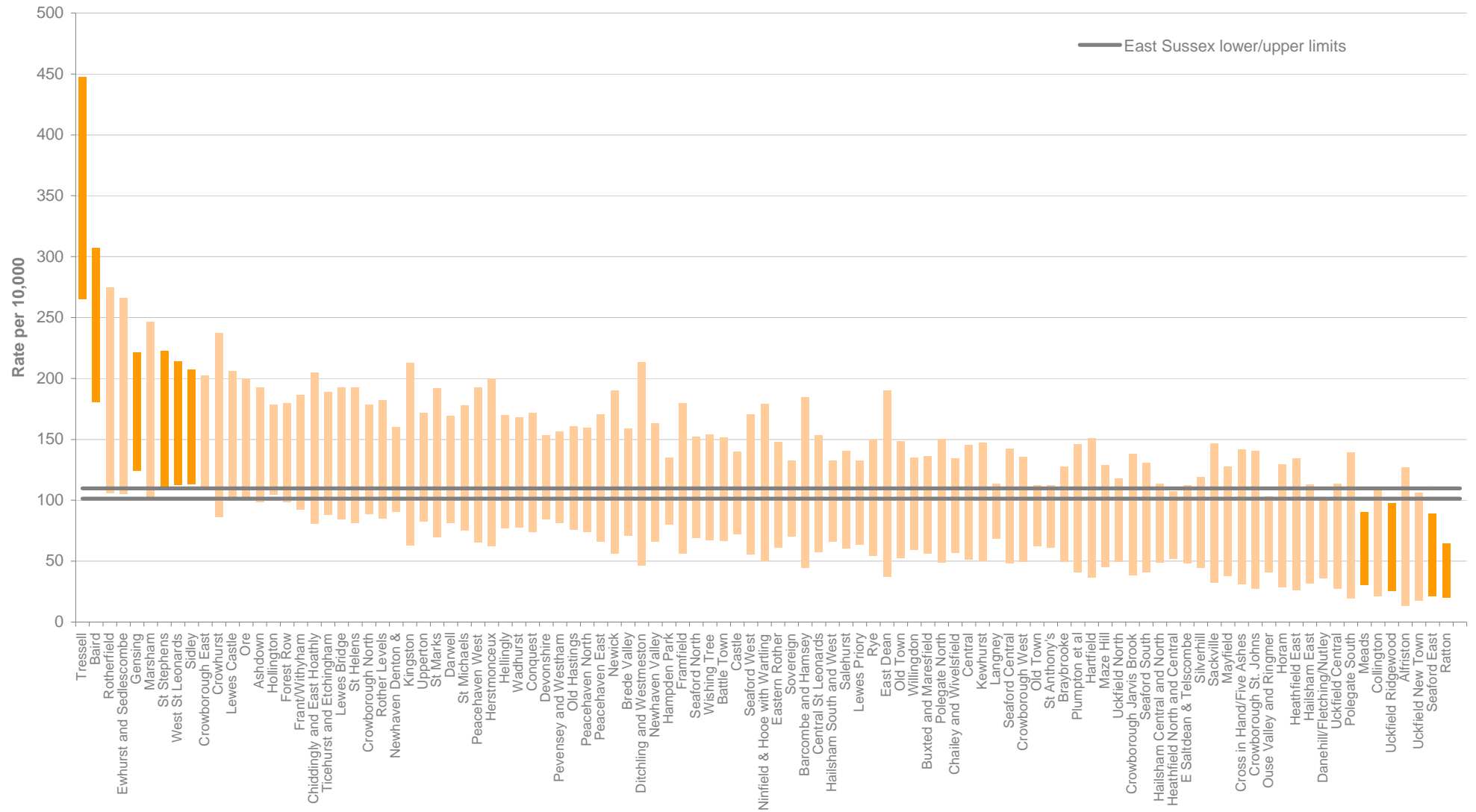


Figure 10: ward analysis, 5-17 years (excluding complications of medical and surgical care)

Admissions for accidents and deliberate injuries for East Sussex wards showing the upper and lower 95% confidence intervals for the 2009/10 to 2011/12 rate per 10,000 population aged 5-17 years



There are 5 wards that have significantly higher rates than East Sussex for those aged 0-4 years, and 6 wards that have significantly higher rates than East Sussex for those aged 5-17 years (Table 4). Tressell and Baird have the highest rates for both age groups. (Note – admissions due to complications for medical and surgical care have been excluded from ward analysis as most of these are for children with underlying health conditions, which could skew rates at a ward level. Self harm admissions from the Priory at Ticehurst have also been excluded from the ward analysis for the same reason).

Four of the five wards with significantly higher rates than East Sussex for persons aged 0-4 years are in Hastings, and one in Eastbourne. Four of the six wards with significantly higher rates than East Sussex for persons aged 5-17 years are in Hastings, with the other two in Bexhill (Rother).

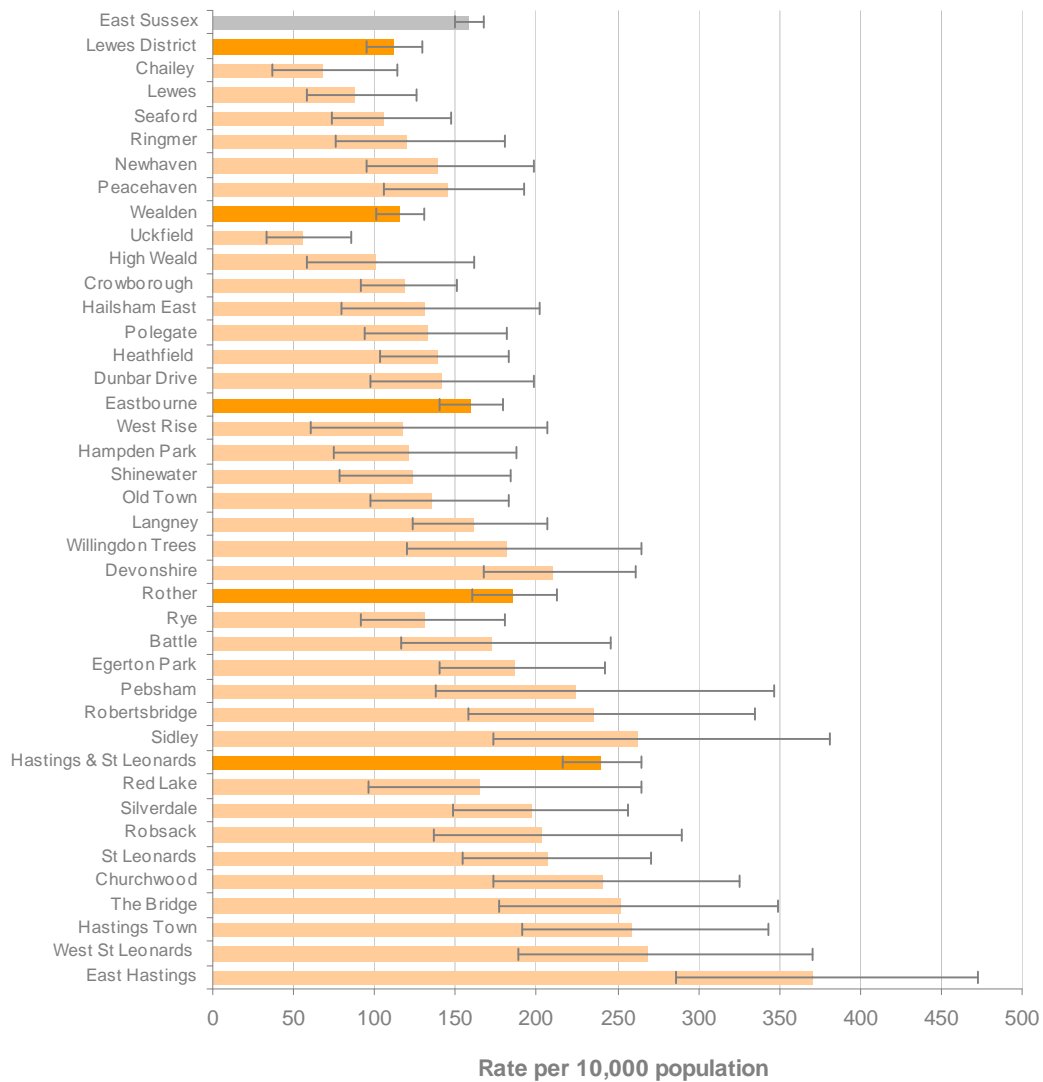
Table 4: wards with significantly higher rates than East Sussex, 2009/10 to 2011/12

0-4 years	5-17 years
Tressell	Tressell
Baird	Baird
West St Leonards	Gensing
Hollington	St Stephens
Devonshire	West St Leonards
	Sidley

## Children’s Centre and Local Partnership for Children (LPC) analysis

Figure 11: Children centre analysis, 0-4 years (excluding admissions due to complications of medical and surgical care)

Rate of emergency admissions due to accidents and deliberate injury, per 10,000 population aged 0-4 years, East Sussex Childrens Centre and programme area, 2009/10 to 2011/12

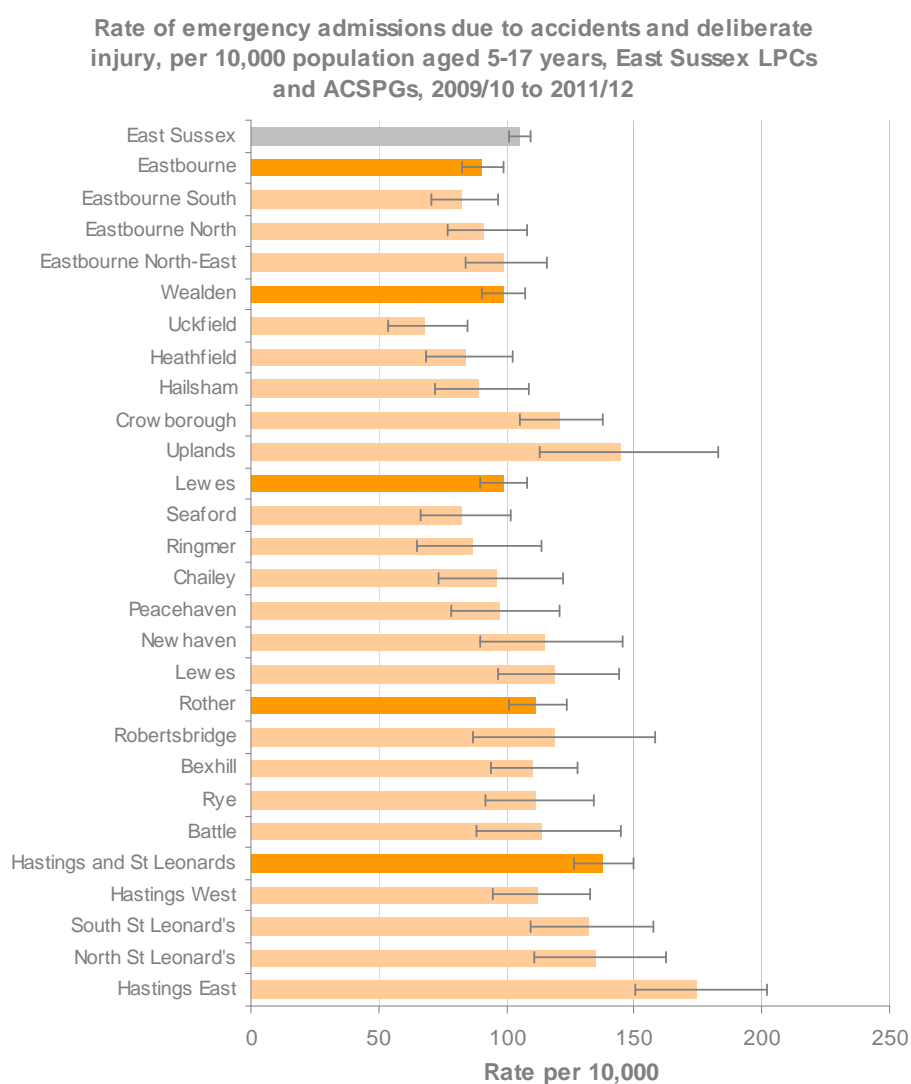


There are seven children’s centres that have significantly higher rates than East Sussex for hospital admissions due to accidents and deliberate injury for persons aged 0-4 years (Table 5).

Table 5: Childrens Centres with significantly higher rates than East Sussex, 2009/10 to 2011/12 (excluding admissions due to medical complications and surgical care)

Childrens Centre	Programme Area	Rate per 10,000 aged 0-4 years
East Hastings	Hastings & St Leonards	371
West St Leonards	Hastings & St Leonards	268
Sidley	Rother	262
Hastings Town	Hastings & St Leonards	259
The Bridge	Hastings & St Leonards	252
Churchwood	Hastings & St Leonards	241
Devonshire	Eastbourne	211

Figure 12: LPC analysis, 5-17 years (excluding admissions due to complications of medical and surgical care)

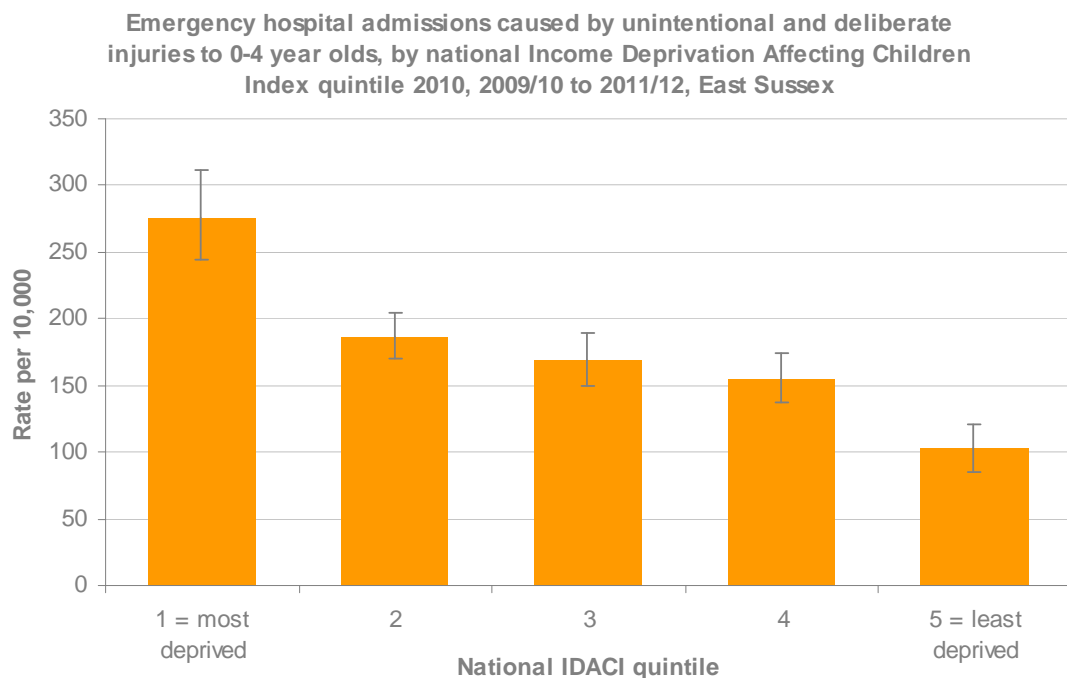


There are three LPCs that have significantly higher rates than East Sussex for hospital admissions due to accidents and deliberate injury for persons aged 5-17 years. They are all in Hastings and St Leonards: Hastings East, North St Leonards and South St Leonards.

### **Admissions by income deprivation affecting children (IDACI), 2009/10 to 2011/12**

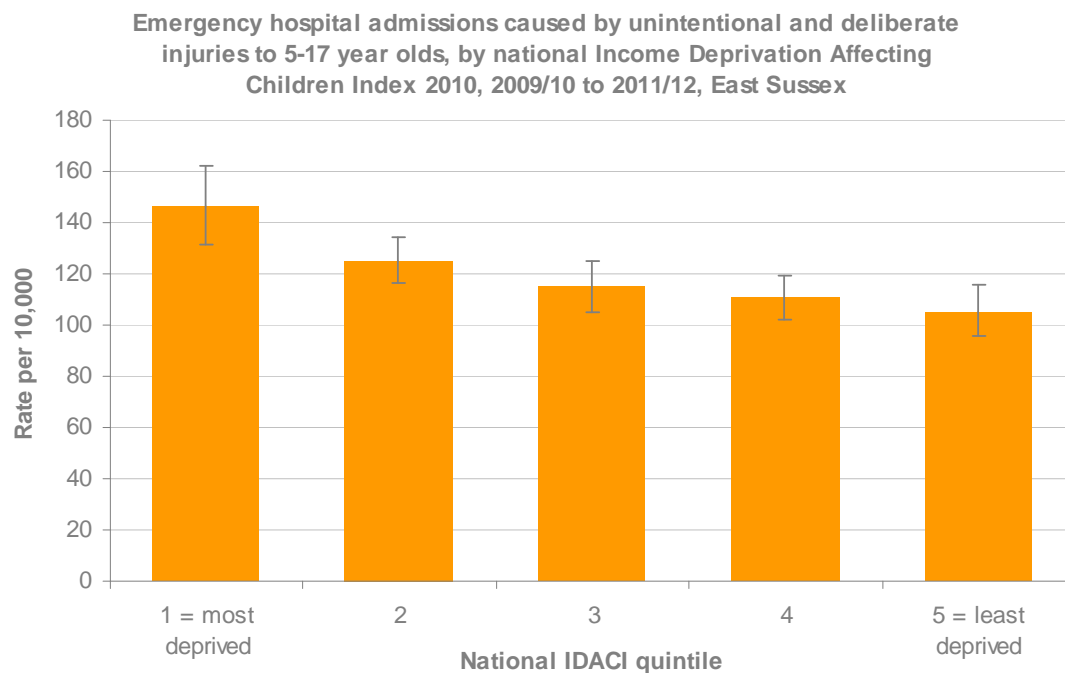
There is a clear association between the admission rates and income deprivation affecting children across both age groups, although more markedly for the under 5s. In both age groups the rates are significantly higher for children who live in the most income deprived areas compared to those in the least income deprived areas. (Figures 13 and 14)

Figure 13: admissions for 0-4 years by income deprivation



Source: IMD 2010 and CACI LSOA populations 2009 & 2010

Figure 14: admissions for 5-17 years by income deprivation



Source: IMD 2010 and CACI LSOA populations 2009 & 2010

### **Place of occurrence, 2009/10 to 2011/12**

For unintentional injuries for those aged 0-4 years (excluding transport accidents, complications of medical care, sequelae of external causes of morbidity and mortality and supplementary factors related to causes of morbidity and mortality classified elsewhere), 70% occurred in the home.

For unintentional injuries for those aged 5-17 years (excluding transport accidents, complications of medical care, sequelae of external causes of morbidity and mortality and supplementary factors related to causes of morbidity and mortality classified elsewhere), 24% occurred in the home, 15% in a school (or public administration area), 14% at a sports/athletics area, and 4% on the



street/highway. The remaining 43% occurred at other places (which are not specified).

### **Repeat Admissions, 2009/10 to 2011/12**

Using patient's NHS numbers it is possible to look at repeat admissions (95% of admissions for 0-17 year olds have a valid NHS number). During 2009/10 to 2011/12 there were 3,923 admissions that relate to 3,564 individuals, so 256 children had more than one admission during the 3 year period. 21 individuals had 4 or more admissions during the period, 11 of whom admissions related to self harm and 8 had underlying health conditions (included due to complications of medical or surgical care within the indicator).

### **Causes of admissions, 2009/10 to 2011/12**

Looking at the causes for admissions, for those aged 0-4 years, 99% are for unintentional accidents. For those aged 5-17 years, 85% of admissions are for unintentional accidents with 15% for deliberate causes.

Complications of medical and surgical care are 9% of unintentional injury admissions for 0-4 year olds, and 10% for 5-17 year olds (includes things such as abnormal reactions or adverse effects of medication). These admissions tend to be for children with underlying health conditions.

In both age groups, falls are by far the largest cause of accidental injury. The distribution of causes across the districts and boroughs is shown in tables 6 and 7 (note complications of medical and surgical care have been excluded). Exposure to inanimate mechanical forces includes causes such as crushing, contact with sharp glass and being struck by other non-living objects. Exposure to animate mechanical forces includes causes such as animal bites or striking against or bumped into by another person. 'Other' accidental injuries include burns and scalds.

Table 6: Admissions by cause for persons aged 0-4 years due to unintentional injury, 2009/10 to 2011/12

<b>Number of admissions due to unintentional injury</b>	<b>Eastbourne</b>	<b>Hastings</b>	<b>Lewes</b>	<b>Rother</b>	<b>Wealden</b>	<b>East Sussex</b>
Falls	137	223	107	102	138	707
Exposure to inanimate mechanical forces	37	58	24	36	50	205
Exposure to animate mechanical forces	11	12	4	7	14	48
Accidental poisoning by and exposure to noxious substances	29	41	5	32	19	126
Transport accidents	9	12	6	5	11	43
Others	29	37	16	22	30	134
<b>Grand Total</b>	<b>252</b>	<b>383</b>	<b>162</b>	<b>204</b>	<b>262</b>	<b>1,263</b>

<b>Distribution within each district</b>	<b>Eastbourne</b>	<b>Hastings</b>	<b>Lewes</b>	<b>Rother</b>	<b>Wealden</b>	<b>East Sussex</b>
Falls	54%	58%	66%	50%	53%	56%
Exposure to inanimate mechanical forces	15%	15%	15%	18%	19%	16%
Exposure to animate mechanical forces	4%	3%	2%	3%	5%	4%
Accidental poisoning by and exposure to noxious substances	12%	11%	3%	16%	7%	10%
Transport accidents	4%	3%	4%	2%	4%	3%
Others	12%	10%	10%	11%	11%	11%
<b>Grand Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

For 0-4 year olds, Lewes (66%) has the highest percentage of falls over the three year period. Rother has the lowest with half (50%) of accidents due to falls.

Table 7: Admissions by cause for persons aged 5-17 years due to unintentional injury or deliberate injury, 2009/10 to 2011/12

Number		Eastbourne	Hastings	Lewes	Rother	Wealden	East Sussex
<b>Unintentional</b>	<b>of which</b>	<b>298</b>	<b>439</b>	<b>345</b>	<b>376</b>	<b>573</b>	<b>2,031</b>
	Falls	154	234	179	175	264	1,006
	Exposure to inanimate mechanical forces	27	58	44	51	77	257
	Exposure to animate mechanical forces	33	24	27	22	58	164
	Accidental poisoning by and exposure to noxious substances	4	10	9	7	6	36
	Transport accidents	52	80	63	89	128	412
	Others	28	33	23	32	40	156
<b>Deliberate</b>	<b>of which</b>	<b>66</b>	<b>112</b>	<b>77</b>	<b>80</b>	<b>76</b>	<b>411</b>
	Intentional self-harm	54	95	70	70	69	358
	Assault	12	17	7	10	7	53
<b>Grand Total</b>		<b>364</b>	<b>551</b>	<b>422</b>	<b>456</b>	<b>649</b>	<b>2,442</b>

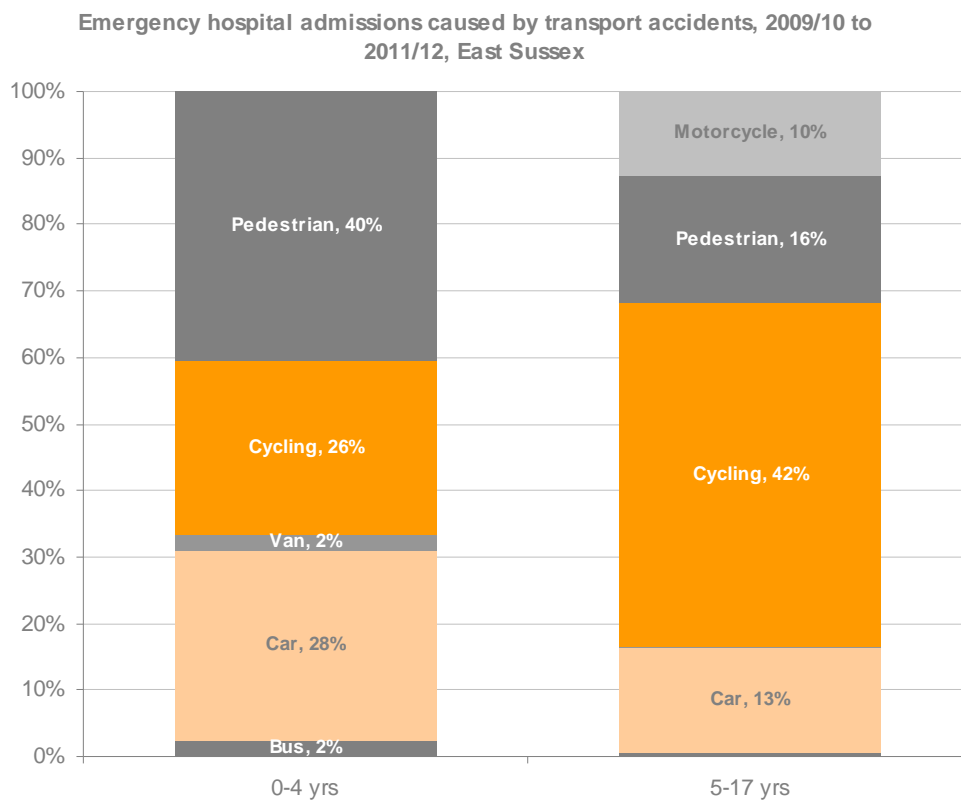
Distribution within each district		Eastbourne	Hastings	Lewes	Rother	Wealden	East Sussex
<b>Unintentional</b>	<b>of which</b>	<b>82%</b>	<b>80%</b>	<b>82%</b>	<b>82%</b>	<b>88%</b>	<b>83%</b>
	Falls	42%	42%	42%	38%	41%	41%
	Exposure to inanimate mechanical forces	7%	11%	10%	11%	12%	11%
	Exposure to animate mechanical forces	9%	4%	6%	5%	9%	7%
	Accidental poisoning by and exposure to noxious substances	1%	2%	2%	2%	1%	1%
	Transport accidents	14%	15%	15%	20%	20%	17%
	Others	8%	6%	5%	7%	6%	6%
<b>Deliberate</b>	<b>of which</b>	<b>18%</b>	<b>20%</b>	<b>18%</b>	<b>18%</b>	<b>12%</b>	<b>17%</b>
	Intentional self-harm	15%	17%	17%	15%	11%	15%
	Assault	3%	3%	2%	2%	1%	2%
<b>Grand Total</b>		<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

For 5-17 year olds, Rother and Wealden (both 20%) have the highest percentages of transport accidents over the three year period.

### Transport accidents, 2009/10 to 2011/12

Figure 15 shows the type of transport accident resulting in hospital admissions for the two age groups. For persons aged 0-4 years, the largest cause of transport accidents resulting in admission are children injured as pedestrians (40%). For persons aged 5-17 years, cycling accidents are the largest cause (42%). 1 in 10 admissions for those aged 5-17 years are caused by motorcycles.

Figure 15: breakdown of transport injury admissions



Admissions caused by cycling accidents have been decreasing over the past 3 years. (Table 8)

Table 8: number of pedal cycle accident admissions, 5-17 years

	2009/10	2010/11	2011/12
Number of cycle accident admissions	71	56	48

The highest cycling accident admission rates for persons aged 5-17 years are in Hastings and Eastbourne. (Table 9)

Table 9: pedal cycle admissions for persons aged 5-17 years, 2009/10 to 2011/12

	Number of cycle admission	Rate of cycle admissions per 10,000 population
Eastbourne	19	4.6
Hastings	19	4.7
Lewes	6	1.4
Rother	6	1.6
Wealden	15	2.2

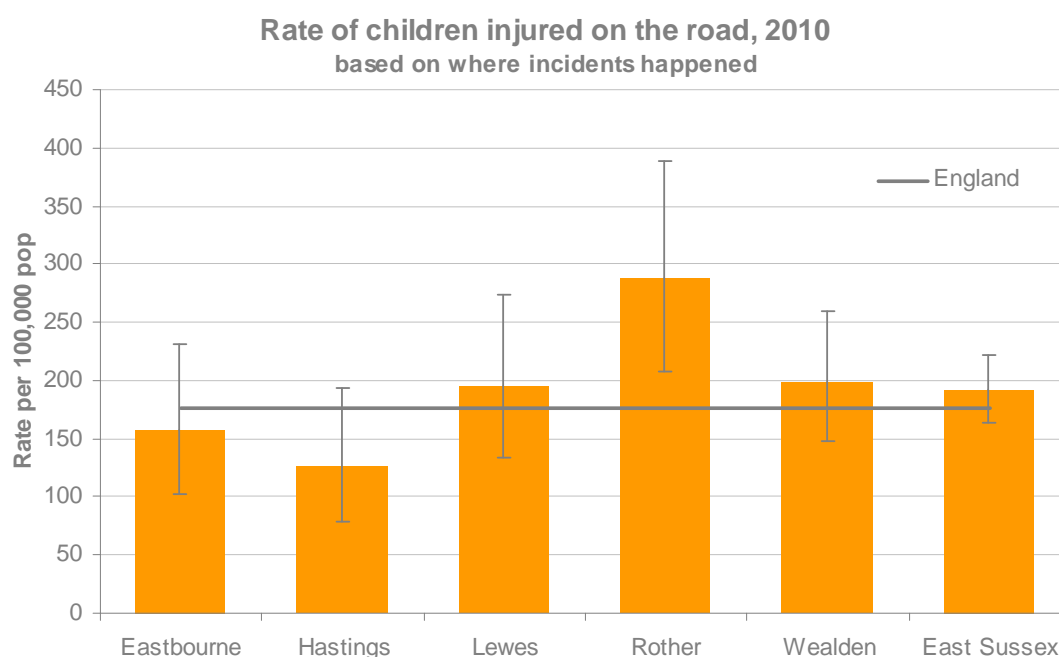
### Children (U16) injured on the road, 2010

Source: Injury profiles, APHO (accessed 31/05/12)

[http://www.apho.org.uk/default.aspx?ON=INJURY\\_DEFAULT](http://www.apho.org.uk/default.aspx?ON=INJURY_DEFAULT)

Rother has a significantly higher rate of children (aged under 16 years) injured on roads compared to nationally. (Figure 16)

Figure 16: children injured on the road by district/borough



Note – this data is collected by Police, and data quality, collection and procedures can vary between police forces. Also, not all road injuries will be reported to the Police.

## A&E attendances due to injuries (deliberate and unintentional) to 2011/12

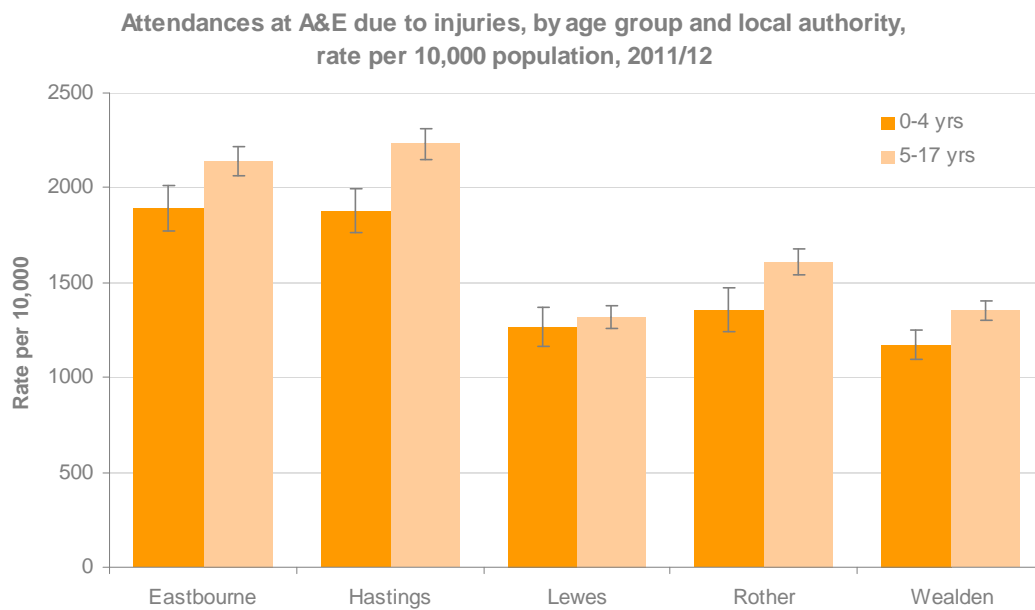
During April 2010 to March 2012, 61% of all attendances at A&E for persons aged under 18 years were as a result of injuries (deliberate and unintentional). Table 10 shows the reason for attendance, based on the national A&E codes. 'Other accident' has the highest percentage of attendances (84%).

Table 10: A&E attendances due to injuries, East Sussex U18s, 2011/12

Reason for attendance	Number	Percentage
Other accident	14188	84%
Sports injury	1902	11%
Road traffic accident	348	2%
Deliberate self-harm	256	2%
Assault	249	1%
Firework injury	9	0%
Total	16952	100%

The rate of A&E attendances due to injuries is higher for those aged 5-17 years than 0-4 year olds (Figure 17). For both age groups, rates are highest for children living in Eastbourne and Hastings. Rates based on where children live may be affected by the location of A&E and Minor Injury Units (MIUs). There are 2 A&E units in East Sussex (Hastings and Eastbourne), and 3 MIUs (Lewes, Crowborough and Uckfield). Attendances at MIUs are **not** included in the A&E attendance data.

Figure 17: A&E attendances by district/borough



Injury attendance rates over the five year period 2007/08 to 2011/12 for 0-4 year olds show a general upward trend, though more markedly in Lewes and Wealden, with relatively stable rates for Hastings (Hastings is the only district/borough where there is no significant difference in the rate for either 2010/11 or 2011/12 and 2007/08). (Figure 18)

Figure 18: A&E attendances by district/borough by year, 0-4 years

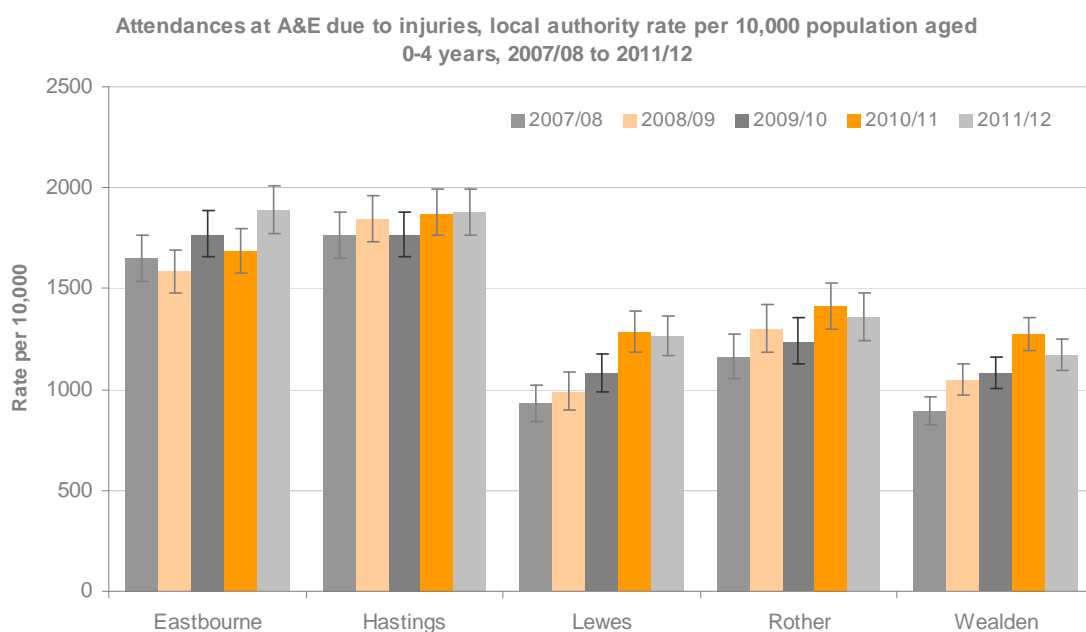
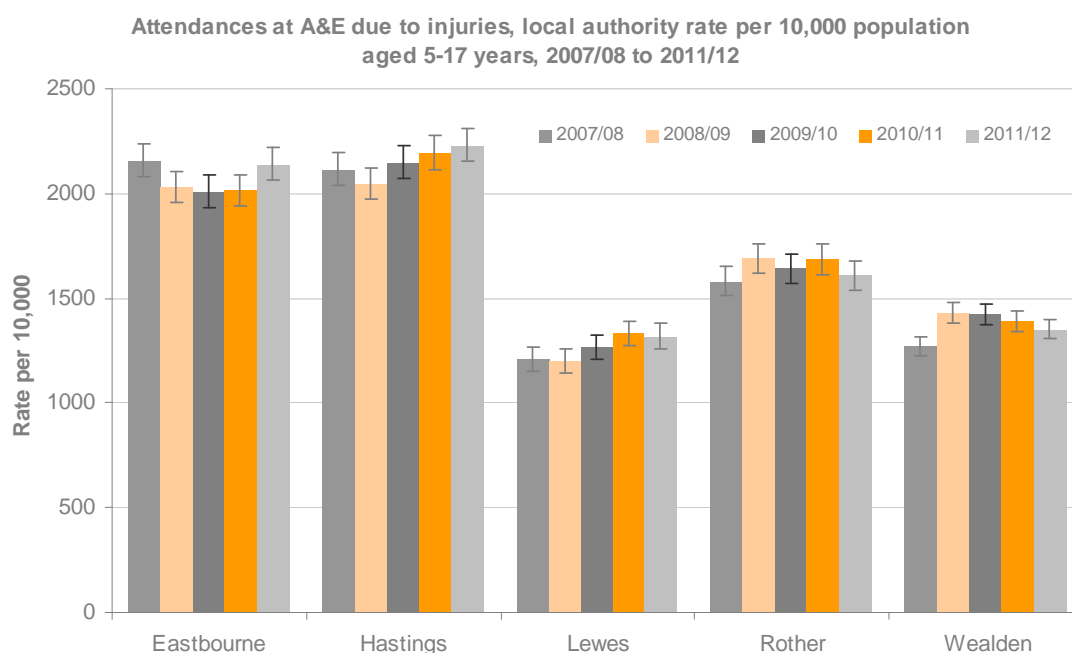


Figure 19: A&E attendances by district/borough by year, 5-17 years



The rest of the analyses of A&E attendance data focus on attendances by reason for attendance, as per table 10 (excluding firework injuries due to small numbers). Note that data presented by geographies relates to where patients live, not where incidents occurred.

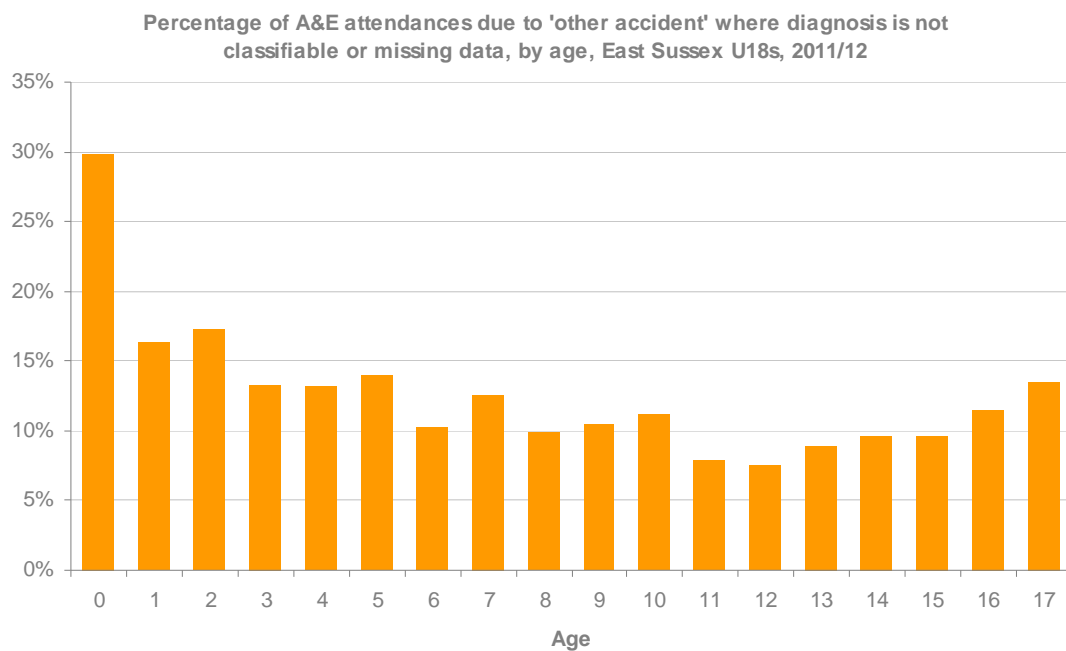
### **A&E attendances due to 'other accidents', 2011/12**

84% of A&E attendances for injuries are due to 'other accidents' (Table 10), based on the national A&E coding for reason for attendance. To further understand these accident attendances, the diagnosis code has been used (using national A&E dataset diagnosis codes). It is important to note that a number of these attendances don't have a classifiable diagnosis or have missing diagnosis data.



Figure 20 shows that 30% of 'other accident' attendances for babies aged under 1 year don't have a classifiable diagnosis or have missing diagnosis data, with attendances for 11 and 12 years olds having the lowest percentages (8% with diagnosis not classifiable or missing).

Figure 20: Percentage of 'other accident' attendances with diagnosis not classifiable or missing diagnosis data



Figures 21-25 show the diagnoses for A&E attendances due to 'other accidents' by age group. Head injuries are the main diagnosis for children under the age of 5 years, and dislocation/fracture/joint injury/amputation is the main diagnosis for those aged 5-17 years.

Figure 21: 'other accident' attendances by diagnosis, babies under 1 year, 2011/12

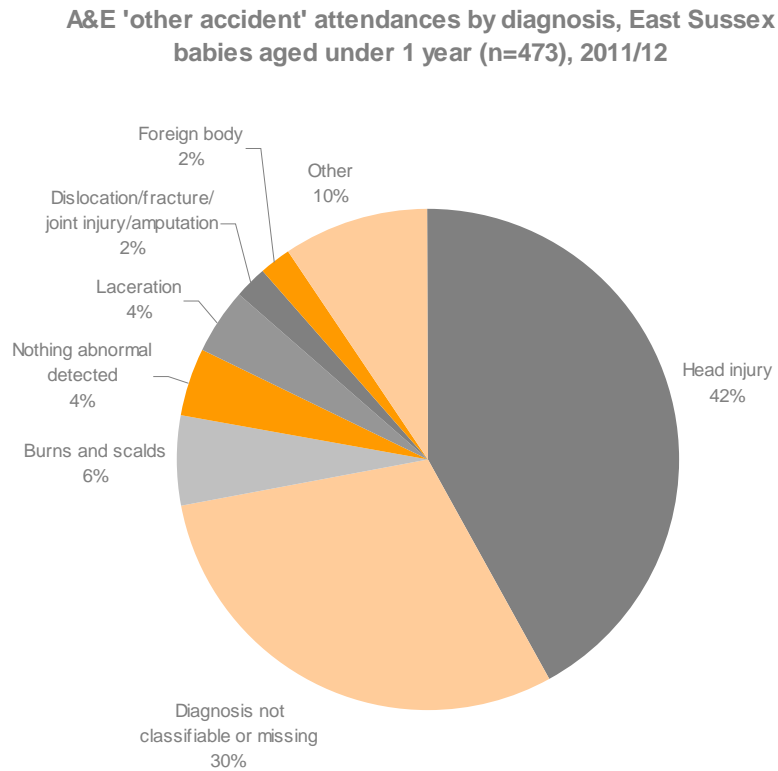


Figure 22: 'other accident' attendances by diagnosis, persons 1-4 years, 2011/12

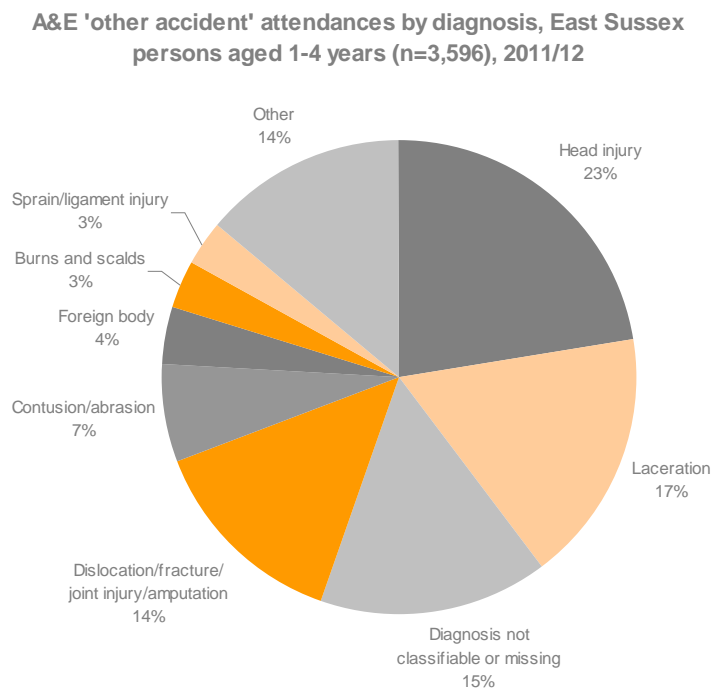


Figure 23: 'other accident' attendances by diagnosis, persons 5-9 years, 2011/12

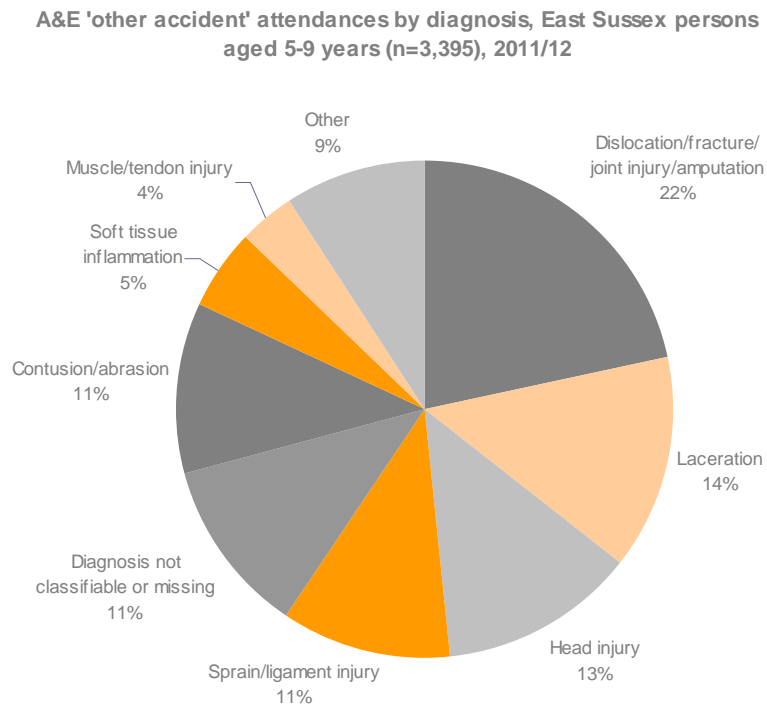


Figure 24: 'other accident' attendances by diagnosis, persons 10-14 years, 2011/12

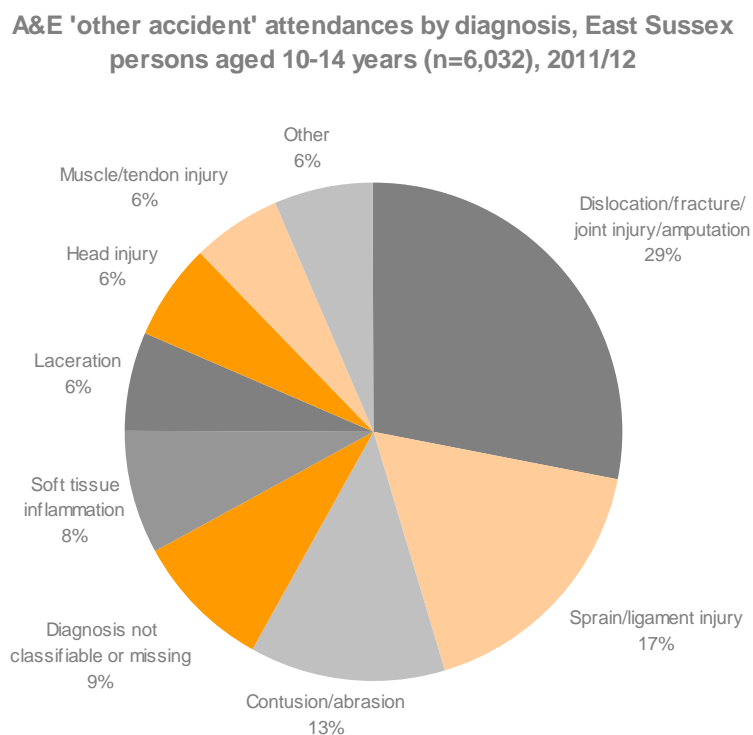
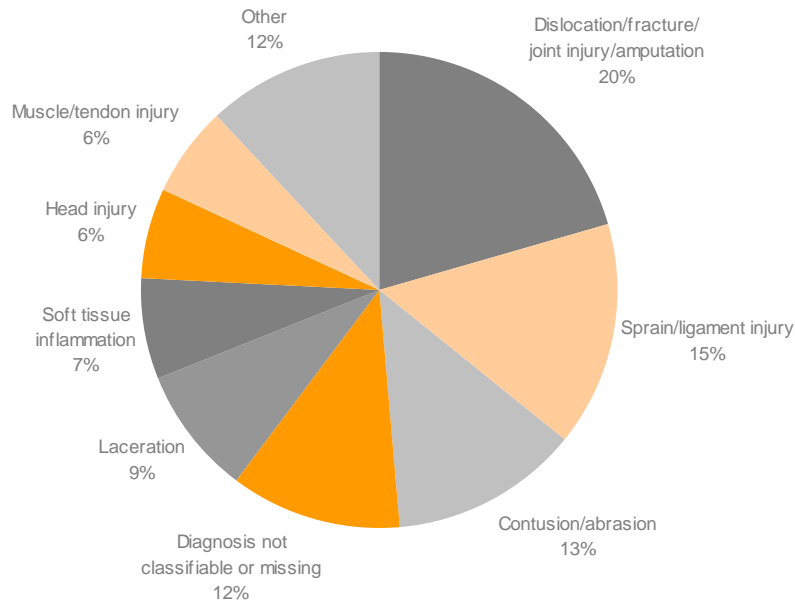


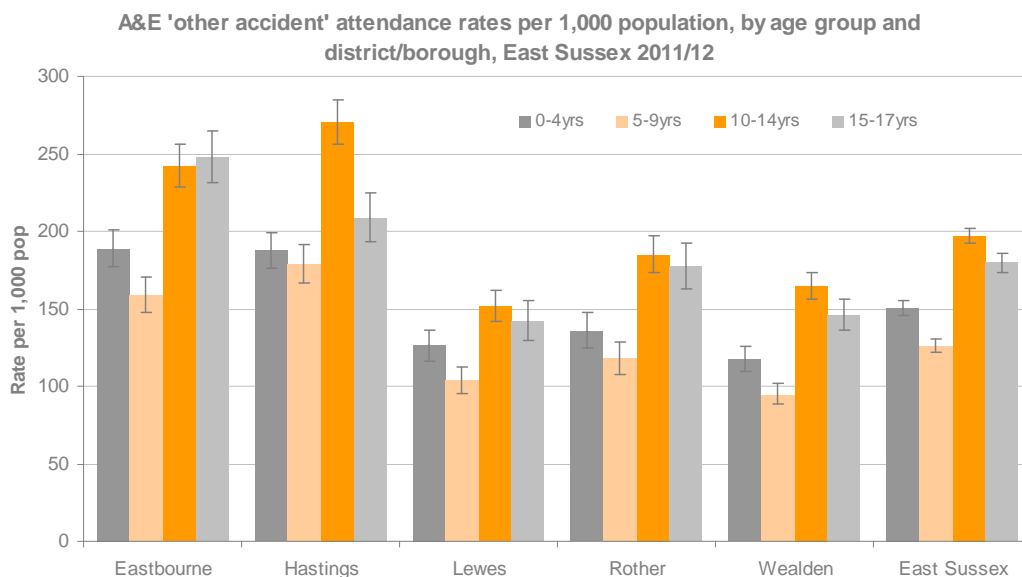
Figure 25: 'other accident' attendances by diagnosis, persons 15-17 years, 2011/12

A&E 'other accident' attendances by diagnosis, East Sussex persons aged 15-17 years (n=3,456), 2011/12



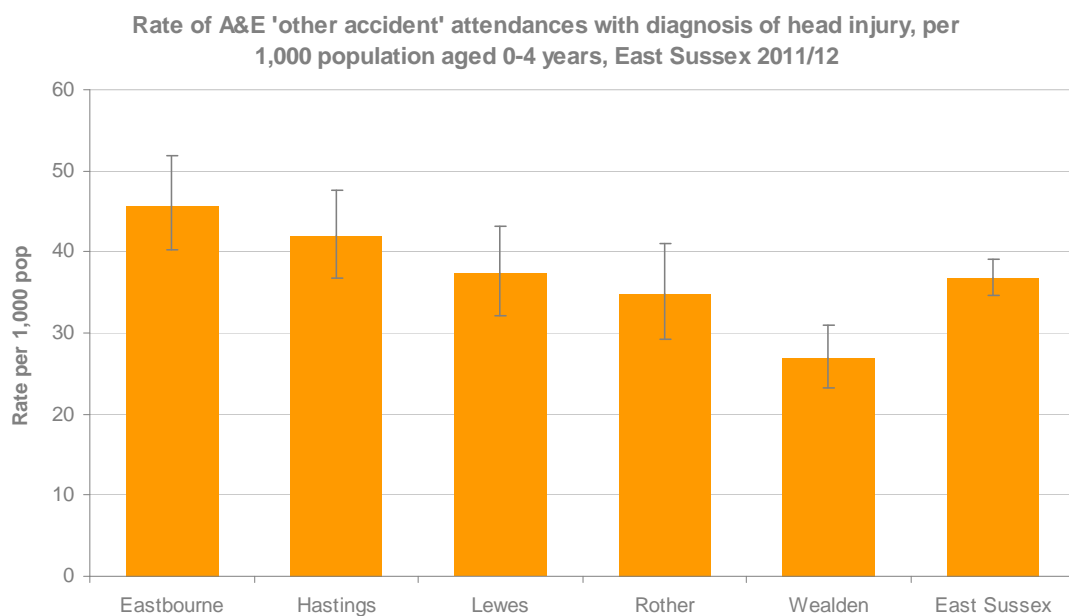
Eastbourne has the highest rate of 'other accident' A&E attendances for those aged 0-4 years and 15-17 years, Hastings has the highest rate for persons aged 5-9 years and 10-14 years. (Figure 26)

Figure 26: 'other accident' attendances by age group and district/borough, 2011/12



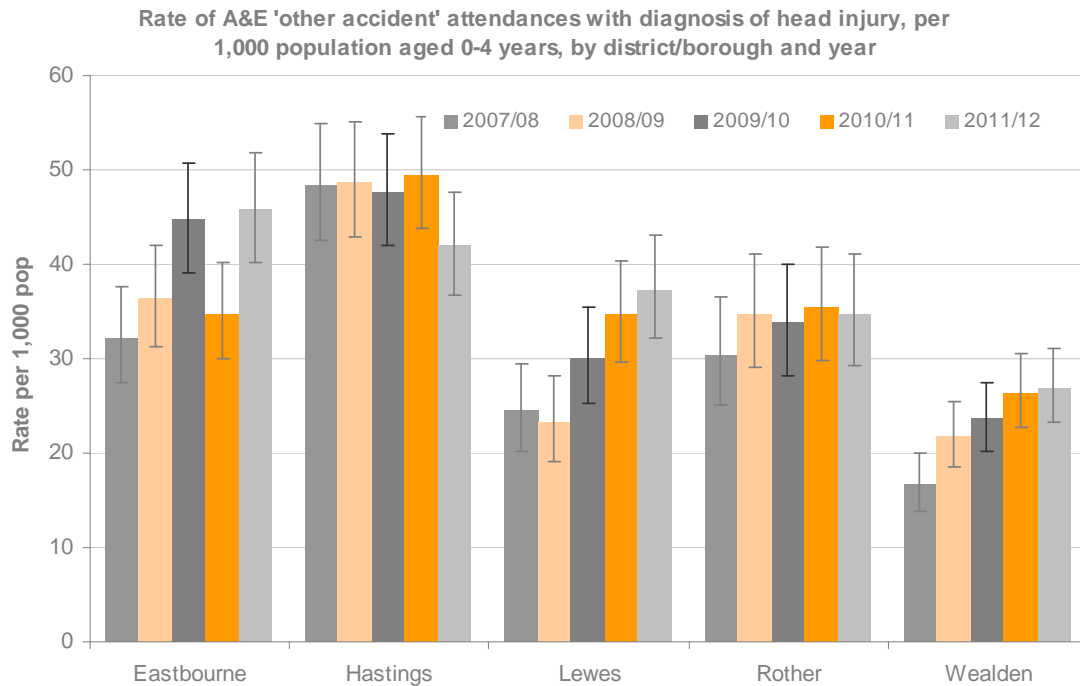
Eastbourne has the highest rate of head injuries for those aged 0-4 years, and a significantly higher rate than for East Sussex. Wealden has a significantly lower rate of head injuries for those aged 0-4 years than East Sussex. (Figure 27)

Figure 27: 'other accident' attendances with head injury diagnosis, by district/borough, persons 0-4 years, 2011/12



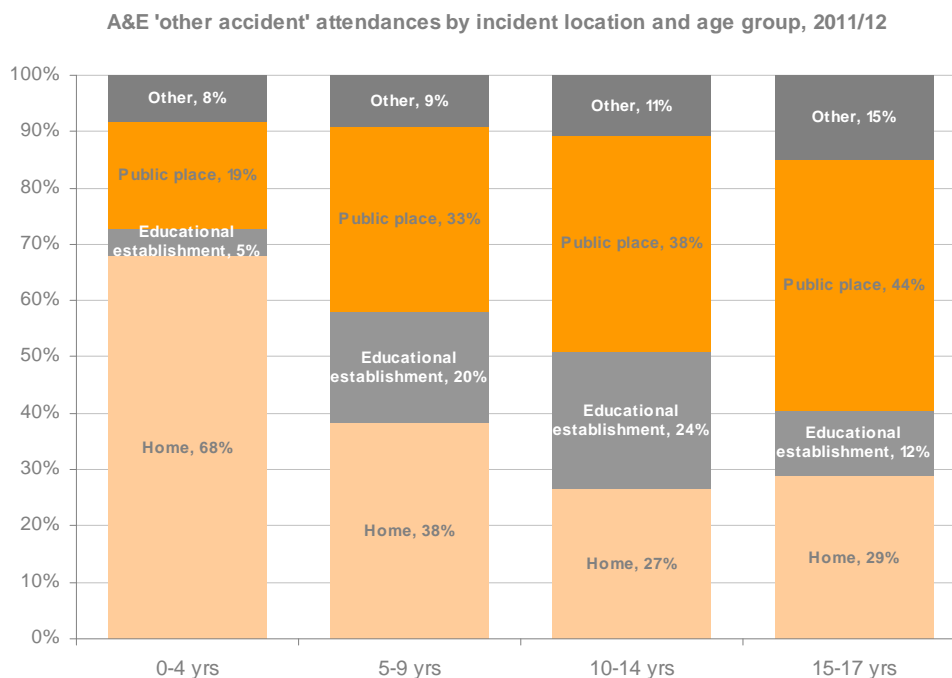
Wealden and Lewes have had an increasing rate of attendances at A&E due to 'other accident' that resulted in head injuries during the five year period 2007/08 to 2011/12. Hastings has seen a drop in the rate for 2011/12 (but not a significant decrease). (Figure 28)

Figure 28: 'other accident' attendances with head injury diagnosis, by district/borough and year, persons 0-4 years



For persons aged under 5 years, more than two-thirds (68%) of 'other accidents' occurred at home. For those aged 10-17 years, a public place is where the largest percentage of accidents occurred.

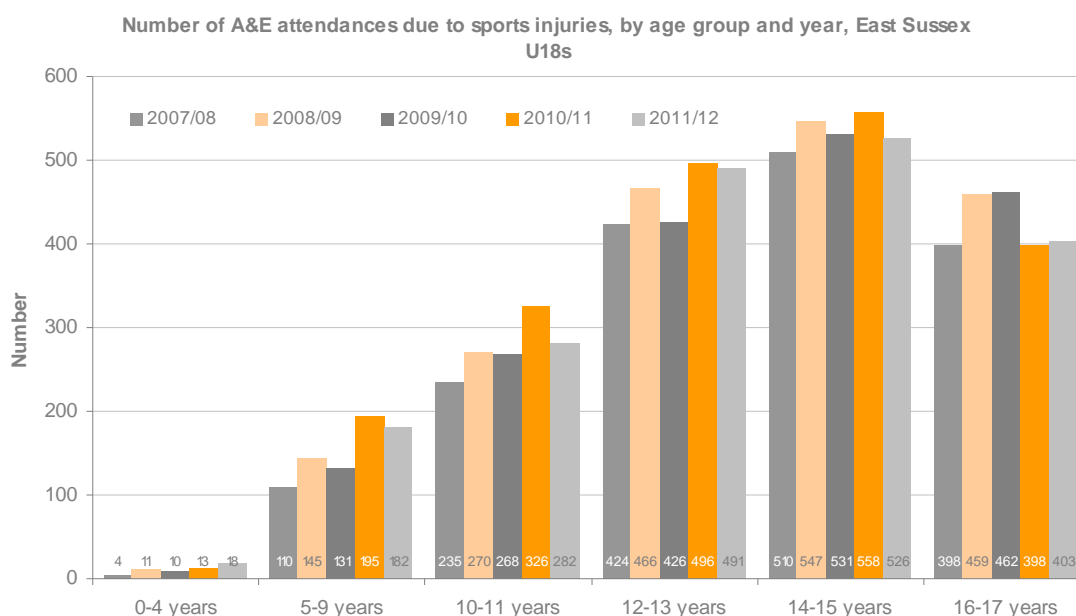
Figure 29: 'other accident' attendances by incident location



## A&E attendances due to sports injuries

Attendances due to sports injuries are highest for persons aged 14-15 years (Figure 30). During 2011/12, 59% of attendances due to sports injuries were for incidents occurring in a public place, 34% occurred in an educational establishment, 5% at home and 3% elsewhere.

Figure 30: A&E sports injury attendances by age



## A&E attendances due to RTAs

Between 2008/09 and 2011/12 the number of A&E attendances due to RTAs has decreased for persons aged 15-17 years, with a reduction in attendances in 2010/11 and 2011/12 for persons aged 5-14 years. There has been a slight increase in RTA A&E attendances for those aged 0-2 years (Figure 31). Rates of attendances are highest in Hastings and Eastbourne. (Table 11)

Figure 31: A&E RTA attendances by age group and year

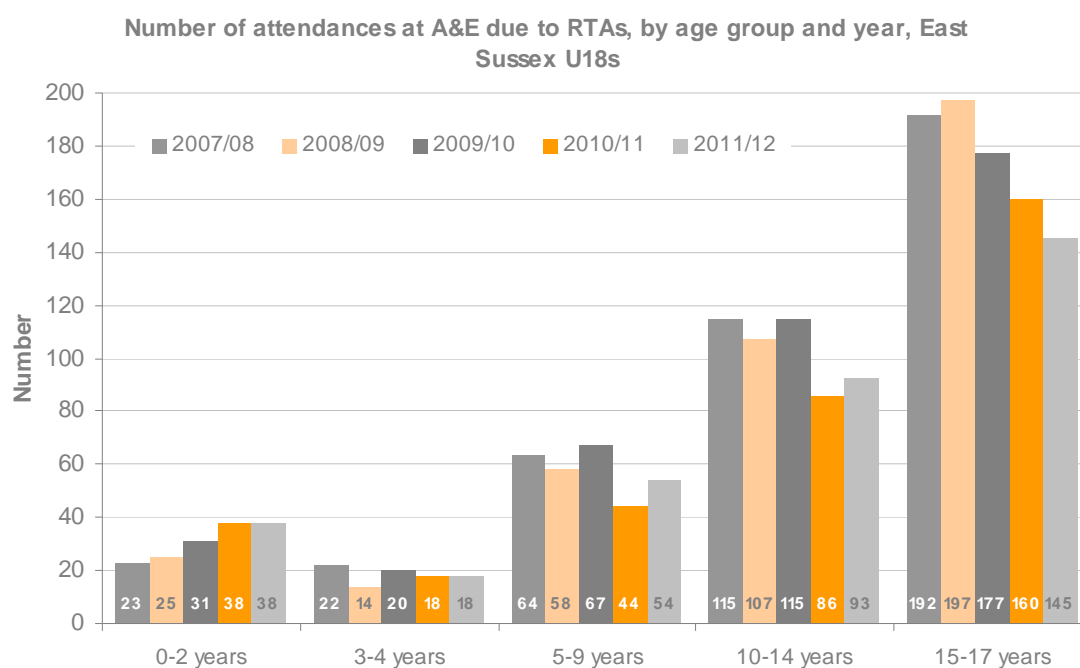


Table 11: Number and rate of A&E attendances due to RTAs, East Sussex residents aged under 18 years, 2011/12

	Number	Rate per 10,000
Eastbourne	82	43.6
Hastings	85	45.1
Lewes	37	19.1
Rother	65	38.8
Wealden	79	26.2
East Sussex	348	33.5

### A&E attendances due to assaults in 2011/12

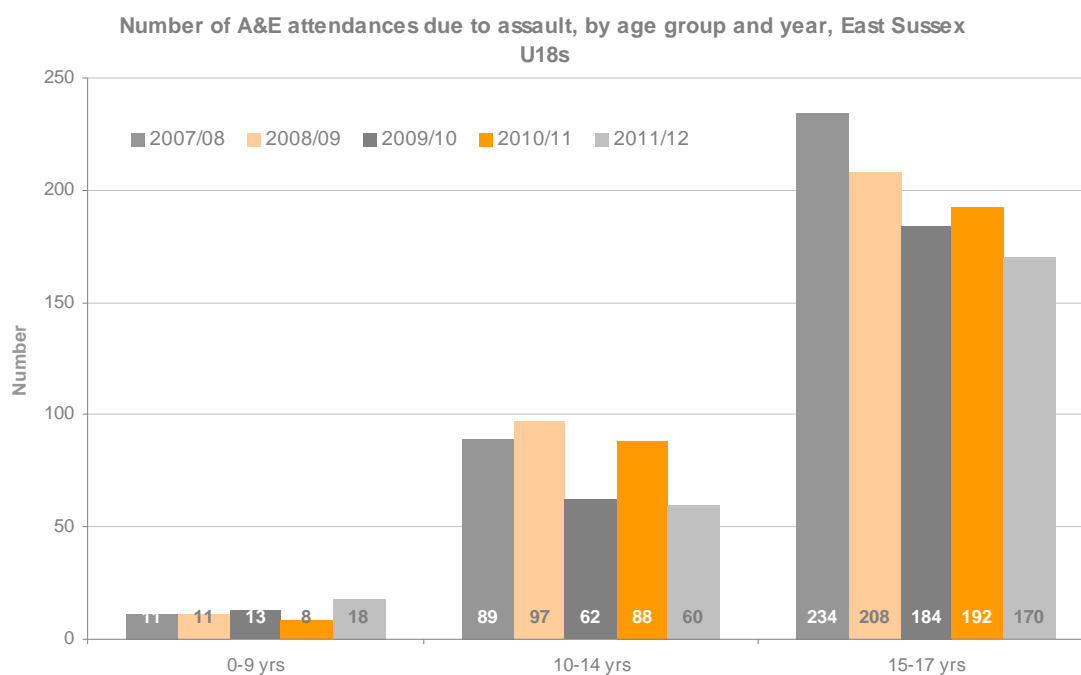
The majority (70%) of attendances due to assaults are for males, with the highest number of attendances for those aged 15-17 years. (Table 12)



Table 12: age and sex breakdown of attendances due to assaults, 2011/12

	0-9 yrs	10-14 yrs	15-17 yrs
Males	12	44	117
Females	6	16	53
Total	18	60	170

Figure 32: A&E assault attendances by age



Eastbourne has a significantly higher rate of A&E attendances due to assaults compared to East Sussex, and Wealden has a significantly lower rate. (Figure 33)

Figure 33: A&E assault attendances by district/borough

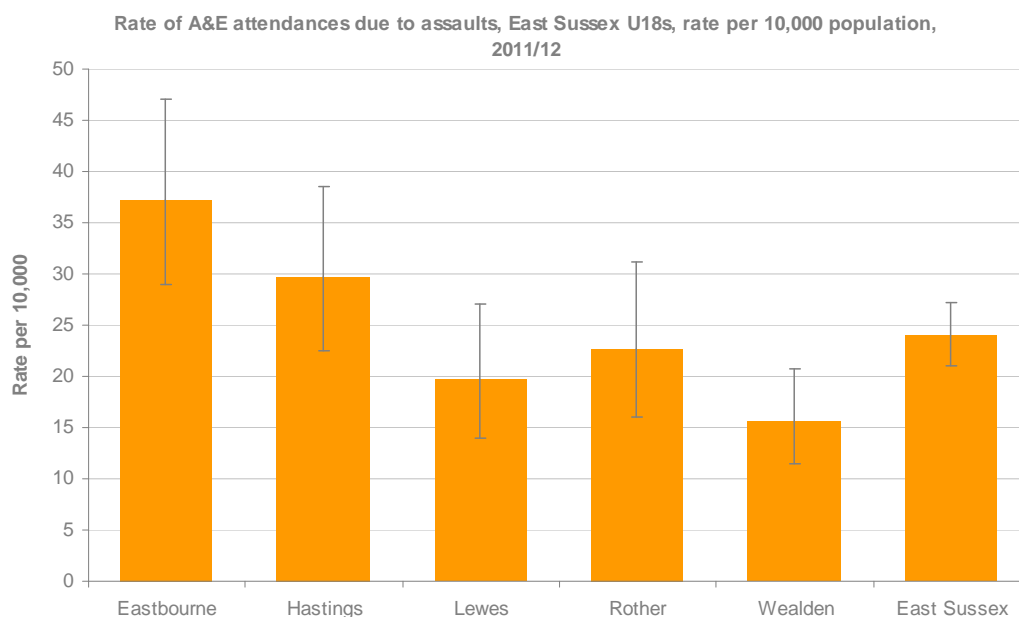
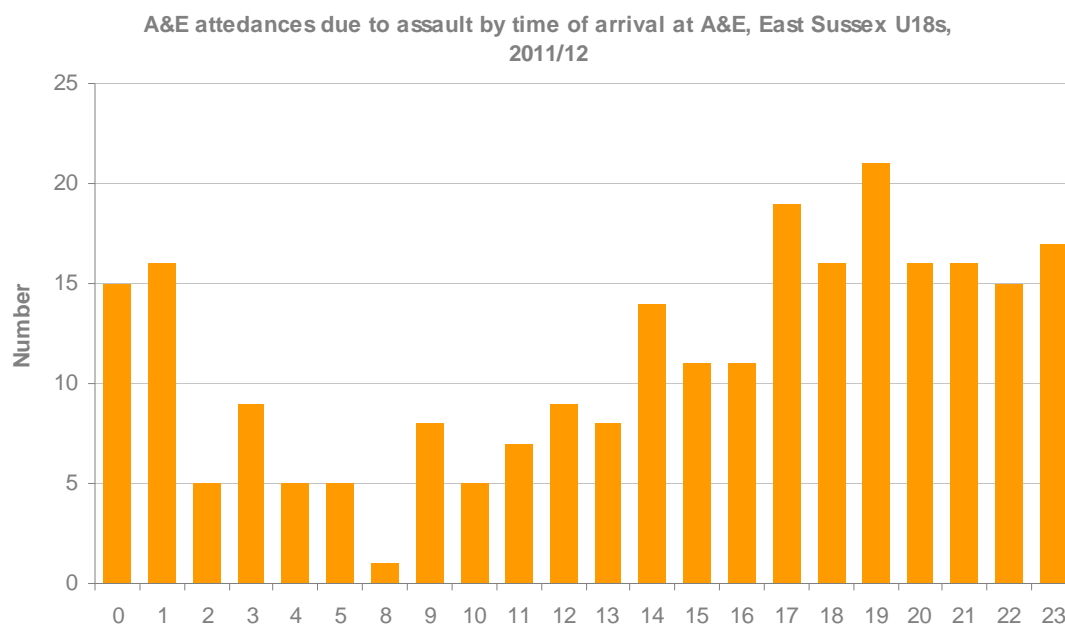


Table 13: Number and rate of A&E attendances due to assaults for East Sussex U18s, 2011/12

	Number	Rate per 10,000
Eastbourne	70	37
Hastings	56	30
Lewes	38	20
Rother	38	23
Wealden	47	16
East Sussex	249	24

Attendances due to assaults tend to be higher from early evening up to 2am. (Figure 34)

Figure 34: A&E assault attendances by time of arrival at A&E



63% of assault attendances related to incidents occurring in a public place, 16% in educational establishments, 12% at home and 8% elsewhere.

### A&E attendances due to self-harm, 2011/12

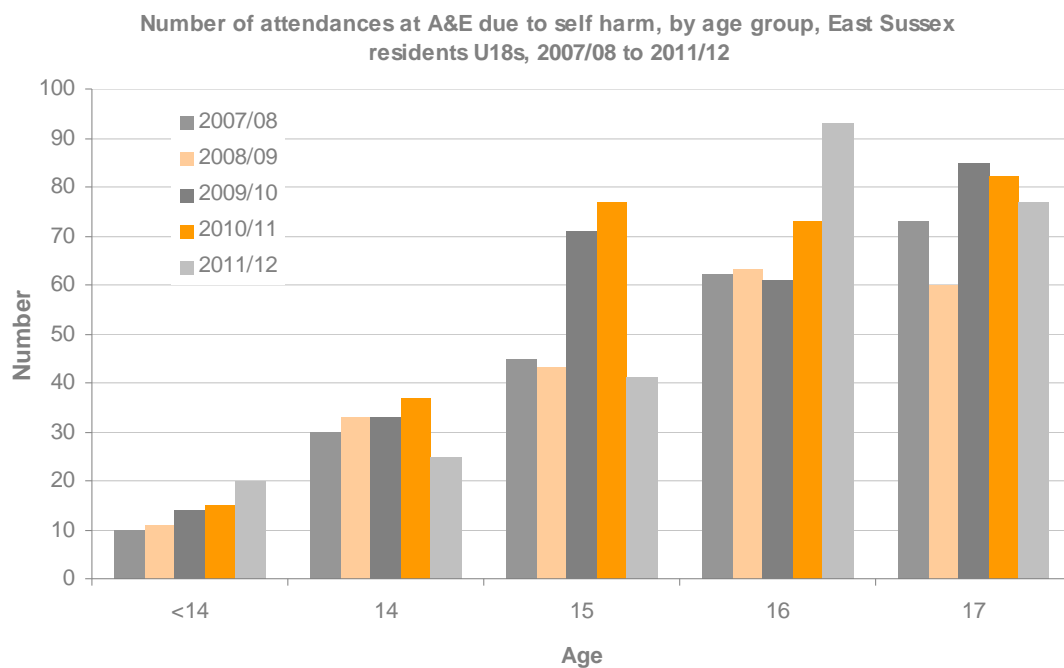
Around three-quarters (74%) of attendances at A&E due to deliberate self-harm are for females.

Table 14: age and sex breakdown of A&E attendances due to self-harm, 2011/12

	Under 14s	14	15	16	17	Total
Males	10	6	12	18	21	67
Females	10	19	29	75	56	189
Total	20	25	41	93	77	256

Although based on small numbers, the number of self harm A&E attendances for those aged under 14 years has increased over the last 5 years, with twice as many attendances in 2011/12 compared to 2007/08. The largest increase in number of attendances in 2011/12 is for those aged 16 years. (Figure 35)

Figure 35: A&E self harm attendances by age



During 2011/12 there were 256 attendances that related to 197 individuals.

57% of deliberate self-harming incidents occurred at home, 24% in a public place and 6% in an educational establishment (2011/12).

For 2011/12, about a quarter of attendances (23%) did not have a classifiable diagnosis; 43% had a diagnosis of poisoning, 16% psychiatric conditions and 7% lacerations.

Attendances that were due to poisonings (including overdoses), around a third (34%) were prescriptive drugs, 34% proprietary drugs, 28% other (including alcohol) and 4% controlled drugs.

Eastbourne has the highest rate of A&E attendances due to self harm, and a significantly higher rate than all East Sussex local authorities except Hastings.

Figure 36: A&E self harm attendances by district/borough

