

Date last modification documentation sheet: 21-06-2012

Compared to previous version documentation sheet (02-12-2011) the following issues were adapted:

- New section on relevant policy areas added to the documentation sheet

Compared to previous version documentation sheet (25-05-2010) the following issue was adapted:

- Link to IDB database (integrated in HEIDI wiki) added

<i>ECHIM Indicator name</i>	<b>B) Health status</b> 29(b). Injuries: home, leisure, school: register-based incidence
<i>Relevant policy areas</i>	<ul style="list-style-type: none"> <li>- Healthy ageing, ageing population</li> <li>- (Preventable) Burden of Disease (BoD)</li> <li>- Preventable health risks</li> <li>- Child health (including young adults)</li> <li>- (Planning of) health care resources</li> <li>- Health in All Policies (HiAP)</li> </ul>
<i>Definition</i>	Number of accidents at home and/or during leisure activities during the past 12 months, resulting in an injury that required treatment in a hospital, expressed per 100,000.
<i>Calculation</i>	Crude incidence rate according to the Injury Database (IDB) methodology (see remarks for more information on IDB). Numerator: occurrence of hospital treated home/leisure injuries (inpatient and outpatient-treatments, excluding “deceased”) in a given calendar year, projected to the resident population based on national Hospital Discharge (HD) register. Denominator: Resident population. If there is no national HD register available, the projection is done based on the HD statistics of the IDB hospital with the aggregated catchment population of this hospital as provided by the national IDB data administrator. In IDB the incidence rates are expressed per 1,000 inhabitants; ECHIM expresses them per 100,000 to enhance comparability with other morbidity and mortality indicators in the ECHI shortlist.
<i>Relevant dimensions and subgroups</i>	<ul style="list-style-type: none"> <li>- Country.</li> <li>- Calendar year.</li> <li>- Sex.</li> <li>- Age group (Data are collected in IDB by 5 year age groups (see data availability). For data presentation purposes, ECHIM recommends the use of the following aggregated age groups: 0-14, 15-24; 25-64; 65+).</li> <li>- SES (see data availability).</li> <li>- Region (according to ISARE recommendations; see data availability)</li> </ul>
<i>Preferred data type and data source</i>	Preferred data type: Special hospital discharge records (see IDB methodology) Preferred source: Injury Database (IDB)
<i>Data availability</i>	In April 2010 the publicly accessible part of IDB holds data for AT, DK, FR, NL, PT, SE and UK, for the period 2002-2007. However, in 2010 15 MS are collecting IDB data (AT, CY, CZ, DK, FR, GE, IT, LV, MT, NL, NO, PT, SE, SI, UK), and updates of the database are expected soon. Data in IDB are available by sex, age group (0-4, 5-9, etc., 85+), not by SES and region. The ISARE project on regional indicators does not collect data on home/leisure and school accidents. It is expected that the geographical coverage of IDB (i.e. number of countries participating) will be expanded in a future Joint Action on injury data (see remarks).
<i>Data periodicity</i>	In April 2010 IDB holds annual estimates for the years 2002-2007. The data are uploaded annually, but with a delay of 1-2 years
<i>Rationale</i>	Annually, in the EU more than 60 million people receive medical treatment for an injury, from which an estimated 7 million are admitted to hospital. Two-thirds of all injuries occur in home and leisure environments - a trend that is on the increase across Europe. Detailed injury data (in particular on external circumstances as activities, settings, products involved) makes it possible to develop prevention measures, monitor injury trends, prioritise issues, guide policies and evaluate the success of interventions designed to reduce injuries.
<i>Remarks</i>	<ul style="list-style-type: none"> <li>- The development of the IDB methodology as well as the implementation in new countries has been co-funded by DG SANCO (since 1999). SANCO also hosts the IDB database.</li> <li>- Expenditures for national data collection are covered by Member State organizations. IDB is</li> </ul>

	<p>based on Accident and Emergency department data from selected Member State hospitals (sentinel network).</p> <ul style="list-style-type: none"> <li>- A call for a joint action on injury data was launched in the SANCO work plan 2010. This may result in an expansion of geographical coverage of IDB. Also representativeness and comparability of the IDB estimates may be enhanced, as it is foreseen that during the Joint Action the methodology will be adapted in such a way that the data from the IDB reference hospital(s) will be linked with hospital discharge figures.</li> <li>- IDB collects data according to the ICE-CI WHO standard (International Classification of External Causes of Injuries) that is compatible to the ICD-10 classification of injuries (see WHO ICD-10 and WHO ICD-11).</li> <li>- In IDB methodology, all accidents, except for road traffic and occupational accidents, are considered as home and leisure accidents and as such fall into the scope of the HLA system. IDB allows for detailed analyses by providing the following breakdowns: circumstances of injury (home, school, leisure, sport, road, workplace, self-harm, interpersonal violence) and severity of injury (inpatient, outpatient). Please note that the European Health Interview Survey (EHIS) applies a somewhat different taxonomy; EHIS distinguishes road traffic accidents, accidents at work, accidents at school, home and leisure accidents (see indicator 29(a)).</li> <li>- Hospital discharges (severely) underestimate the number of accidents occurring at home and during leisure activities. Therefore ECHIM has also defined a Health Interview Survey based incidence estimate (see indicator 29(a)).</li> </ul>
<i>References</i>	<ul style="list-style-type: none"> <li>- IDB database (integrated in HEIDI wiki): <a href="https://webgate.ec.europa.eu/sanco/heidi/index.php/IDB">https://webgate.ec.europa.eu/sanco/heidi/index.php/IDB</a></li> <li>- IDB coding manual : <a href="https://webgate.ec.europa.eu/idbpa/documents/IDB_V2K_CODING_MANUAL.pdf">https://webgate.ec.europa.eu/idbpa/documents/IDB_V2K_CODING_MANUAL.pdf</a></li> <li>- IDB report on Calculation of IDB Incidence Rates: <a href="https://webgate.ec.europa.eu/idb/documents/App.VI_Task_Force_Incidence_Rates_Report.pdf">https://webgate.ec.europa.eu/idb/documents/App.VI_Task_Force_Incidence_Rates_Report.pdf</a></li> <li>- Health Indicators in the European Regions (ISARE) project: <a href="http://www.isare.org/">http://www.isare.org/</a></li> </ul>
<i>Work to do</i>	<ul style="list-style-type: none"> <li>- Monitor organizational and methodological developments IDB and their consequences for ECHI</li> </ul>