BSCB
Child Injury Prevention Strategy

Preventing Unintentional Injury to Children in the Bradford District 2011-2014
Why does Injury Prevention matter?

- More children are admitted to hospital as a result of injuries than any other cause, leading to possible long term or permanent disability and in some cases even death.
- Children in the Bradford District are 17% more likely to be admitted to hospital due to Unintentional injury than the National Average (YHPHO, 2010).

Strategy Mission Statement:

Many of these injuries are largely preventable. It is the duty and responsibility of everyone to promote the safety of children in the District. It is hoped that this strategy will be a useful tool to help deliver that as well as serving as a driver for change in the District, pulling together all those agencies currently working to prevent childhood injuries and supporting parents to strike the right balance between protecting their children whilst allowing them to have fun. It is anticipated that by working together we will create a safer District for our children.

Burden on Society

Unintentional injuries to children are a leading cause of morbidity and mortality and present a significant burden to public services nationally (Towner and Dowswell, 2001, Audit commission, 2007 and CAPT 2011). Children from disadvantaged backgrounds are disproportionately affected (Task Force 2002, Edwards et al 2006). In the Bradford District the incidence of unintentional injury and death is higher than the National Average.

“...illness and injury can have a long lasting impact on a young person’s life and ultimately on their life chances and therefore on our economy and society. In turn this can impact significantly on their family’s life. So this matters for all of us.” (DoH, 2010)

According to CAPT, (2011) every day that a child spends in hospital costs the NHS £233, This rises to £750 per day for a bed in a specialist burns unit, £1770 per day for an intensive care bed and £2500 a day for an intensive care bed in a specialist burns unit. It can cost as much as £250,000 to treat one severe bathwater scald. Based on national research, CAPT (2004) estimated that the cost of children’s unintentional injuries to Bradford as a whole was £136 million and that a 10% reduction in injuries to children could potentially save the district £30 million. This is a substantial saving and presents a strong case for local investment in injury prevention, particularly in light of the current financial pressures on services.

Evaluation from Previous Strategy 2008 – 2011

The previous strategy document aimed for a reduction of 5 % from the 2005 -2007 baseline. This was taken as a rolling three year average due to the small numbers of deaths and serious injuries due to unintentional injury on an annual basis to make it more representative. The following table shows the trend data for deaths and serious injury in the Bradford District and shows an overall reduction of 7.61%.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Deaths</td>
<td>22</td>
<td>20</td>
<td>2</td>
<td>&lt;1% (0.36%)</td>
</tr>
<tr>
<td>Serious injury hospital admission &gt; 3 days</td>
<td>543</td>
<td>502</td>
<td>41</td>
<td>7.25%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>565</td>
<td>522</td>
<td>43</td>
<td>7.61%</td>
</tr>
</tbody>
</table>
Accidental Deaths:
In order to determine any trends in accident data it is more appropriate to calculate three year rolling averages. This shows that the rate of deaths from accidents in 0 – 17 year olds in 2008/10 was 3.9 per 10,000 population and this rate has reduced slightly since 2005. This analysis is based on ICD 10 codes for unintentional injuries only (excludes deliberate injuries).

Hospital Admissions
- Leading causes of injuries include: being crushed or caught between objects, burns & scalds, falls and road traffic collisions.
- Injuries to children under five most commonly occur within the home.
- More boys than girls are admitted to hospital across all age groups.
- The under fives age group has the highest number of admissions overall (however data is inconsistently recorded).

What Works?
There are a number of evidence based interventions which have been shown to reduce unintentional injuries to children (NICE, 2010 and CAPT 2011):
1. The provision and installation of home safety equipment
2. Fit thermostatic mixing valves to hot taps in housing stock
3. Help families to develop fire escape plans
4. Targeting fire safety prevention on high risk groups (children, older people in privately rented accommodation and temporary accommodation, households with people who smoke and young parents).
5. Fitting child car seats which are right for a child’s age, height and weight
6. Pedestrian training scheme for all children
7. Injury Minimisation Programme for Schools (IMPS)

Target
The target the strategy is working towards is to reduce, by 5 %, the number of children killed and seriously injured due to unintentional injury in the Bradford District by 2014 from the 2011 baseline of 0.39 per 10,000 (deaths 2008 -2010) and 11.9 per 10, 000 (serious injury rate 2008/09 – 2010/11) respectively.
Priorities and future plans

The strategy document includes strategic and operational priorities. The strategic priorities include improving **Data Collection** (in particular A and E attendances) to provide a more detailed understanding of the local injury picture, the provision of **Injury Prevention Training** to practitioners and **Multi Agency Collaboration**. Operational priorities are to use targeted interventions to **Reduce Inequalities** (we know that unintentional injury disproportionately affects children from disadvantaged backgrounds so we are working together to try to reduce this inequality) to achieve this links are made with the Bradford Child Poverty Strategy 2012-2014. The prevention of **Road Traffic Injuries** is a key operational priority and this includes those injuries from cycling, vehicles and those to pedestrians. To achieve this links are made with the Bradford Road Safety Plan 2012-2014. A further operational priority is the reduction of **Home and Leisure Injuries** which includes focussing on thermal injuries (burns and scalds, smoke, fire and flames), falls, poisoning and water based injury.

References

- CAPT (2004), Coming of Age, winning recognition and shared strategic commitment to reduce children’s accidents in Bradford.
- NICE (2010) NICE public health guidance 29, 30 and 31 Preventing unintentional injuries among under 15’s www.nice.org.uk
- Yorkshire and Humber public health observatory (YHPHO) www.yhpho.org.uk