

This bulletin provides a breakdown of all traumaⁱ attendances at the Royal Liverpool Accident and Emergency department (AED) between August 2008 and June 2009.

Figure I illustrates the number of trauma attendances by month of attendance. Trauma attendances peaked in May (3,200), with March (2,550) having the least number of trauma attendances.

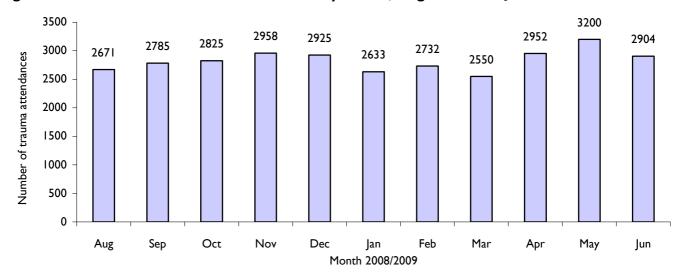




Figure 2 gives a breakdown of monthly trauma attendances by gender, illustrating that for all months there were more male (55%) trauma attendances than female presenting at the Royal Liverpool AED.

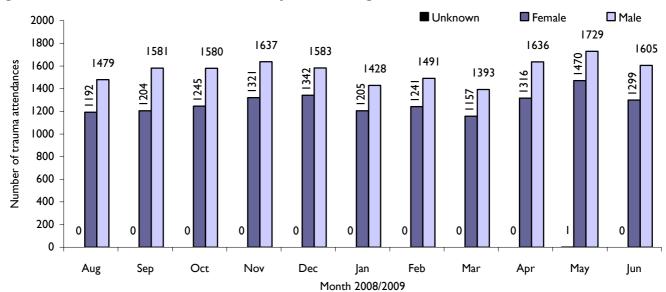




Figure 3 illustrates age group of trauma attendances. For all months, the vast majority of trauma attendances were made by people over the age of 14 years. The low number of trauma attendances under the age of 15 presenting at the Royal Liverpool AED could possibly be due to the close proximity of a local children's AED (Alder Hey).

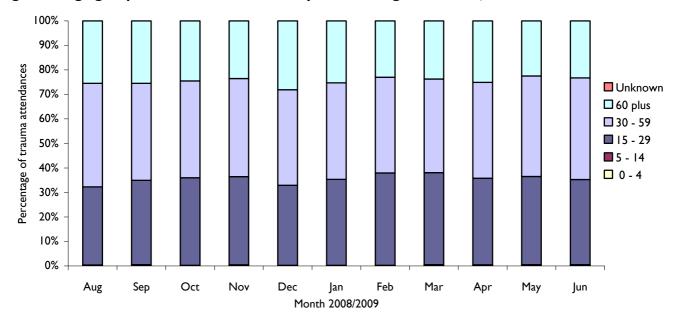




Table one details the injury group of trauma attendances. The most common form of injury leading to AED attendance was other accident, representing 69% of trauma attendances. This category includes injuries such as head injuries and arm injuries, for example.

Injury group	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Other accident	1862	1931	2003	2005	1949	1699	1901	1570	2197	2338	2157	21612	69
Fall	322	326	324	364	411	367	296	355	292	288	264	3609	12
Assault	187	249	212	249	271	240	197	253	213	253	186	2510	8
Overdose	99	96	83	88	102	103	124	101	72	89	94	1051	3
RTA	108	83	80	106	89	106	95	94	61	103	105	1030	3
Sport injury	44	58	86	94	70	77	78	144	78	97	69	895	3
Burn	20	23	21	28	15	22	27	14	19	15	24	228	I
Self-harm	29	19	16	24	18	18	13	19	20	17	5	198	I
Firework	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	0
Total	2671	2785	2825	2958	2925	2633	2732	2550	2952	3200	2904	31135	100

Table I: Trauma attendances by injury group and month, August 2008 to June 2009ⁱⁱ

Assault questionnaire

Between July 2008 and February 2009 the extra assault questions asked at the Royal Liverpool AED were not collected due to a change in the AED IT system. This data is now available again as of March 2009, a summary of this data is contained within this report and further, more detailed information collected by staff at the Royal Liverpool AED on issues such as the specific location of assault, for example street/club name, is provided by TIIG to local agencies such as Citysafe, in a separate report to the one produced here. For further information on this report please contact the authors, whose details can be found at the end of this report.

Assault attendees presenting at the Royal Liverpool AED between August 2008 and June 2009 were mainly male (75%) and the majority (62%) were aged between 15 and 29 years of age. Table two shows that of those knownⁱⁱⁱ, 30% of assault attendances had no intention of informing the police of their attack.

Table 2: Assault attendances that have informed the	police by month	Δugust 2008 to lune 2009
Table 2. Assault attenuances that have informed the	police by month,	August 2000 to june 2007

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Informed the police?	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Unknown	-	-	-	-	-	-	-	163	153	192	165	673	74
No	-	-	-	-	-	-	-	25	24	16	<5	69	8
Yes	-	-	-	-	-	-	-	65	36	45	17	163	18
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Table three shows that where data was collected, 58% of assault attendances had consumed alcohol within three hours prior to their attack.

Table 3: Assault attendances who had consumed alcohol within three hours prior to their attack by month, August 2008 to June 2009

Alcohol consumption	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Unknown	-	-	-	-	-	-	-	163	153	192	165	673	74
No	-	-	-	-	-	-	-	28	27	19	12	86	10
Refused to answer	-	-	-	-	-	-	-	5	<5	<5	<5	13	I
Unable to answer	-	-	-	-	-	-	-	3	6	<5	<5	14	2
Yes	-	-	-	-	-	-	-	54	25	36	<5	119	13
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Table four illustrates the location where assaults occurred for patients presenting with assault-related injuries. Four in five (71%) of all assault locations were unknown during August 2008 to June 2009. Of those known, over half (52%) occurred on the street.

Table 4: Assault attendances by location of incident and month, August 2008 to June 2009

Assault location	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Unknown	-	-	-	-	-	-	-	164	153	193	165	675	75
Street	-	-	-	-	-	-	-	43	34	30	9	116	13
Your home	-	-	-	-	-	-	-	13	10	5	9	37	4
Bar/pub	-	-	-	-	-	-	-	16	5	10	<5	32	4
Other	-	-	-	-	-	-	-	8	<5	<5	<5	13	I
Club	-	-	-	-	-	-	-	<5	<5	7	<5	11	I
Someone else's home	-	-	-	-	-	-	-	<5	<5	<5	<5	9	I
Refused to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	6	I
Unable to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	3	0
Workplace	-	-	-	-	-	-	-	<5	<5	<5	<5	3	0
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Table five illustrates the number of individuals/attackers involved in the assault. During August 2008 to June 2009 information on number of attackers was not collected from the majority (72%) of assault patients. Where data was collected, half (50%) of assault patients had been assaulted by more than one person.

Table 5: Assault attendances by number of individuals involved in assault and month, August 2008to June 2009

Number of attackers	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
1	-	-	-	-	-	-	-	40	25	25	12	102	13
2	-	-	-	-	-	-	-	11	10	10	<5	33	4
3	-	-	-	-	-	-	-	11	6	<5	<5	20	3
4	-	-	-	-	-	-	-	6	<5	7	<5	14	2
5 plus	-	-	-	-	-	-	-	9	10	12	<5	34	4
Unknown	-	-	-	-	-	-	-	169	155	192	<5	681	72
Refused to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	8	I
Unable to answer	-	-	-	-	-	-	-	5	6	<5	<5	13	2
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Table six illustrates gender of attackers. Of those known 90% were male, compared with 8% female.

Table 6: Assault attendances by gender of attackers and month, August 2008 to June 2009

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Gender of attackers	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Both	-	-	-	-	-	-	-	<5	<5	<5	<5	5	I
Female	-	-	-	-	-	-	-	7	6	<5	<5	17	2
Male	-	-	-	-	-	-	-	70	49	49	20	188	21
Unknown	-	-	-	-	-	-	-	167	153	194	165	679	75
Refused to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	7	I
Unable to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	9	I
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Table seven shows that the relationship between assault attendee and those involved in the assault was unknown in three quarters of (74%) incidents during August 2008 to June 2009. Where data was collected, six in ten (61%) assault patients had been assaulted by a stranger.

Relationship with attacker	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Unknown	-	-	-	-	-	-	-	169	165	199	165	698	77
Stranger	-	-	-	-	-	-	-	56	23	29	8	116	13
Acquaintance/Friend	-	-	-	-	-	-	-	12	7	11	<5	33	4
Partner	-	-	-	-	-	-	-	<5	<5	<5	<5	13	Ι
Bouncer	-	-	-	-	-	-	-	<5	<5	6	<5	11	Ι
Unable to answer	-	-	-	-	-	-	-	<5	5	<5	<5	10	Ι
Family member	-	-	-	-	-	-	-	<5	5	<5	<5	8	Ι
Refused to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	8	Ι
Ex-partner	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Police	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Work client/Customer	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Work mate/Colleague	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Table 7: Assault attendances by relationship with attacker and month, August 2008 to June 2009

Table eight shows method of attack. Of those known, 72% were attacked with a body part, such as a fist, 8% with a bottle and 6% with a knife.

Table 8: Assault attendances by method of attack and month, August 2008 to June 2009

Method of attack	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	%
Unknown	-	-	-	-	-	-	-	171	156	194	165	686	76
Body part (e.g. fist)	-	-	-	-	-	-	-	43	45	44	16	148	16
Other	-	-	-	-	-	-	-	6	<5	9	<5	18	2
Bottle	-	-	-	-	-	-	-	14	<5	<5	<5	17	2
Knife	-	-	-	-	-	-	-	6	<5	<5	<5	13	I
Unable to answer	-	-	-	-	-	-	-	5	<5	<5	<5	9	I
Acquaintance/friend	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Blunt object	-	-	-	-	-	-	-	<5	<5	<5	<5	5	I
Firearm	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Glass	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Refused to answer	-	-	-	-	-	-	-	<5	<5	<5	<5	<5	0
Total	-	-	-	-	-	-	-	253	213	253	186	905	100

Published August 2009 Dan J Hungerford (TIIG Analyst) Centre for Public Health, Liverpool John Moores University, 5th Floor, Kingsway House, Liverpool, L3 2AJ Tel: 0151 231 8724 Email: <u>d.j.hungerford@ljmu.ac.uk</u> Website: <u>www.tiig.info</u> (please note data requests should be made through the website)

ⁱ Trauma relates to all AED attendances presenting as a result of an accident or intentional/unintentional injury.

ⁱⁱ Please note that all numbers less than five have been suppressed in line with patient confidentiality and if there is only one number <5 in a category then two numbers will be suppressed at the next level (e.g. <10) in order to prevent back calculations from totals.

ⁱⁱⁱ Please note that although a patient may complete the assault patient questionnaire data may not be provided for each question as the patient can refuse or be unable to answer particular questions. Data provided in the following analyses represent those patients who completed each question, respectively.