**Country update on Injury Surveillance: Ireland**



*Background*

In 2014, injury accounted for 11% of the 512,681 hospital in-patient discharges and 5% of the 29,252 registered deaths in Ireland. Annually, injury accounts for almost two-thirds of all Irish deaths in the age range 5-34 years, making it one of the most significant contributors to years of potential life lost.

The National Health Strategy (2001) acknowledged the need for a national injury prevention strategy, and identified the key groups where preventable injuries were highest, particularly young children and older adults. The strategy called for a co-ordinated approach across sectors to achieve this but, despite interest and support from key stakeholders and medical professionals, no action was taken at a national level.

One example of Irish injury prevention success relates to road safety. Ireland had an above-average rate of transport deaths, but over the past decade significant investment into successive road safety strategies has approximately halved the mortality rate. However, similar investment has not yet been made into the prevention of other injury-related deaths, and their rates have remained stable or increased.

*ED-based data collection*

The National Data Administrator for injury in Ireland is the National Suicide Research Foundation. The Foundation operates the National Self-Harm Registry Ireland and since 2006, has recorded self-harm presentations to all emergency departments (EDs) in the country. In 2015, 11,189 presentations were recorded, accounting for 1% of all ED presentations, yielding an incidence rate of 204 per 100,000.

The NSRF collaborated as the Irish partner in the Joint Action on Injury Monitoring in Europe (JAMIE), 2011-2015, and has contributed data to IDB previously. A surveillance system was implemented, on a sample basis, in the three hospital EDs in Cork City over a 6-month period in 2005. The 2,957 recorded injury presentations gave a total injury rate of 11,322 per 100,000. The peak male rate was among 15-29 year-olds, 2.5 times the female rate for the same age range. In women, the peak rate was recorded among over 85 year olds.

The findings, if generalised to Ireland as a whole, suggested that 45% of the 1.2 million presentations to Irish EDs annually are due to injuries. However for a high proportion of cases information on many of the core data items, such as activity and location when injured, was not available.

*Current data collection*

The primary objective of the JAMIE project in Ireland was to pilot the development and implementation of a hospital-based injury monitoring system. The project involved assessing current hospital data collection practices and procedures and identifying suitable hospital EDs for injury surveillance. An additional aim was to extrapolate incidence rates of injuries among the general population as well as assessing the burden of injuries in the country. Activities in the project have involved identifying and contacting key stakeholders and assessing hospitals for participation in the project. From the hospitals that have been surveyed, none have ED information systems capable of providing the data for FDS injury surveillance systems, with only a minority capable of providing data for MDS injury data. Arising from the JAMIE project, MDS data collection commenced in one large hospital ED in Dublin. Since 2013, data on all injury presentations for adults only (16+years) have been collected. At present, the activities of the NSRF as NDA for Ireland are being supported by the European BRIDGE-Health Project (2015-2018).

*Future outlook*

It is planned to continue to MDS data in Ireland for adult presentations and to expand the coverage to child and adolescent attendances for the collection of 2015 data. However, there is currently no funding to support such data collection on an ongoing basis or to support dissemination activities.

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