The need for a pan-European accident and injury data system

Joint call
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Link to contact details
ANEC, The European Consumer Voice in Standardisation,
BEUC, The European Consumer Organisation,
BUSINESSEUROPE, The main horizontal business organisation at EU level,
CEN, The European Committee for Standardization,
CENELEC, The European Committee for Electrotechnical Standardization,
EuroCommerce, The Retail, Wholesale and International Trade Representation to the EU,
EuroSafe, The European Association for Injury Prevention and Safety Promotion,
ORGALIME, The European Engineering Industries Association representing the interests of the Mechanical, Electrical, Electronic, Metalworking & Metal Articles Industries.

With the support of:

ACFSE, The Alliance for Consumer Fire Safety in Europe,
AGE Platform Europe, The largest European Older People's network,
CAPIEL, The European low voltage switchgear and control gear association,
CECAPI, The European Committee of Electrical Installation Equipment Manufacturers,
CECED, The European Committee of Domestic Equipment Manufacturers,
ECSA, The European Child Safety Alliance,
EFLM, The European Federation of Lighters Manufacturers,
EGMF, The European Garden Machinery Federation,
ELA, The European Lift Association,
ENPC, The European Nursery Products Confederation,
ESF, The European Safety Federation,
ESTES, The European Society for trauma and emergency surgery,
ETUI, The European Trade Union Institute,
EuPHA, The European Public Health Association,
Euralarm, the association of European manufacturers, installers and service providers of the electronic Fire Safety and Security industry,
FENA, The European Federation for Furniture Retailers,
FSEU, Fire Safe Europe,
ILSE, The International Lifesaving Federation of Europe,
PROSAFE, The Product Safety Enforcement Forum of Europe,
TIE, Toy Industries of Europe.
Call on the European Institutions and the Member States to create an EU-funded accident and injury data system, embracing all Member States, under the co-ordination of the European Commission.

This system should build upon the principles developed in several Member States, be similar to the US National Electronic Injury Surveillance System, and provide data from samples of national accident and emergency departments. It needs to be led and adequately funded by the European Commission.

All Member States should be required to contribute to the establishment of the database and regularly deliver injury data to the Commission that are comprehensive and in accordance with harmonised methodology and classification.

The system should be readily accessible to all relevant stakeholders and allow analysis of injury risks, in particular those related to home and leisure accidents, and the potential effectiveness of various policy options and injury prevention measures.

Such effective collection and assessment of injury data would enhance the ability of the Commission, Member States and stakeholders to ensure the continuous improvement of the legal frameworks and policies for health and safety, both in their development and implementation, and help create a level playing-field for European consumers and European businesses.
The need for a pan-European accident and injury data system

Injuries: a huge social and financial burden

Accidents and injuries place a huge burden on societies and individuals in the European Union. The report, “Injuries in the European Union - Statistics Summary 2008-2010”¹, reveals that around 5.7 million people are admitted to hospital annually as a result of an injury. 34 million others are treated as outpatients. These injuries result in personal suffering and significant financial costs to individuals and families, as well as to employers and the state, in terms of lost earnings, lost production and healthcare costs. The majority of these injuries by far (73%) are due to home and leisure accidents, particularly affecting vulnerable groups such as the less well-off, children, older people and people with disabilities.

Need for better injury data in the EU

Most injuries are preventable and hence so are the related costs to society. Reliable and up-to-date accident and injury data are of huge importance to a wide range of stakeholders including governments, businesses, consumers, standards developers, enforcement authorities and prevention agencies. These data are critical in the setting of priorities; the development of policy; the determination of preventive actions and public awareness campaigns; the understanding of risk; the design of safety into new products; and the development of standards. Data are also needed to evaluate the effectiveness of preventive measures and therefore determine the value of further investment in prevention strategies.

Injury data can be found from several sources within Member States. Regrettably, these sources are limited in their size and scope, and incomplete and insufficient to identify the circumstances in which accidents and injuries occur. Within the EU, much injury information is not comparable among countries, nor among registers. A principal cause is the lack of resources and political commitment in certain Member States, and the lack of an EU-level funding and coordination.

At the moment, injury surveillance within the EU can be characterised as operating from an incomplete puzzle of data sources that provides only a notion of the importance of the issue, and lacks the information required for policies and actions.

The need for enhanced investments in injury surveillance has been recognised in a WHO-EURO-Resolution on the Prevention of Injuries\(^2\); an EU Recommendation on the Prevention of Injuries and the Promotion of Safety\(^3\); EU Regulation 765/2008 setting out the requirements for accreditation and market surveillance relating to the marketing of products\(^4\); EU Regulation 1338/2008 on Community statistics on public health\(^5\), and the European Parliament’s Resolution on Revision of the General Product Safety Directive and Market Surveillance\(^6\).

The OECD has also concluded that, as a result of international trade, consumer safety issues are becoming more complex and difficult to address. Hence, the sharing of information on injuries internationally is seen as key to increasing the efficiency of policy-making and enforcement. The OECD has therefore decided that injury data should be part of its recently-launched consumer-safety portal\(^7\).

**The USA provides a good example**

For over 30 years, the U.S. Consumer Product Safety Commission (US-CPSC) has operated the National Electronic Injury Surveillance System (NEISS). This injury surveillance system operates in a sample of emergency departments (EDs). EDs are the best places to collect injury data as they treat the more severe injuries and can collect injury data at a low cost for a large number of cases.

From this sample, the total number of injuries treated in hospital emergency rooms nationwide is estimated. Web access to NEISS allows estimates to be retrieved online, aiding its use by a wide range of stakeholders. The injury estimates produced can be refined through the use of the filters:

- Product (e.g. how many consumer product-related injuries occurred)
- Locale (e.g. how many injuries occurred in playgrounds)
- Diagnosis (e.g. how many fractures or brain injuries occurred)
- Body part (e.g. how many head injuries were involved)
- Disposition (e.g. how many people were admitted for further treatment)
- Date (e.g. how many injuries were treated in a given year or season)
- Sex and Age (e.g. how many injuries occurred to males aged 35-55)

Such a data set can be enhanced by including information on the circumstances of the accident and the user behaviour. ED-based injury data is also relevant to other fields, as one in five injury cases treated in EDs relates to a road traffic accident or a workplace accident.

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\(^2\) WHO-EUR/RC55/R9 of 15 September 2005
\(^3\) Recommendation (EC) 2007/C164/01 of 18 July 2007
\(^6\) Resolution of 8 March 2011
\(^7\) OECD, DSTI/CP (2010)3/FINAL
Europe needs to catch up

In the EU today, only a few countries routinely collect injury data from hospital EDs. Data collection has proven to be feasible and affordable in these countries, although it is clear such data collection efforts require to be supported by adequate financial arrangements between the public authorities and the reporting hospitals.

The additional costs of data collection are only marginal compared with the overall direct medical costs arising from these injuries, the latter being estimated for the entire EU at 78 billion euros per annum. The cost of data collection represents only a small fraction of the direct medical expenditure on the treatment of injuries, while the availability of these data would encourage significant injury reductions, as well as financial benefits far exceeding this additional marginal cost.

The European Commission is supporting a Joint Action on Injury Monitoring in Europe (JAMIE) until early 2014. It aims at extending current injury data collection efforts throughout the EU/EFTA regions, but most Member State governments and the European Institutions have failed to give political commitment to the continued exchange of ED-based injury data after 2014.

Only a mandatory reporting requirement on all Member States, coupled with strong leadership by the European Commission, will result in a sustainable system that is comparable with those operating in other regions of the world.

Conclusion

In order to develop and implement effective prevention strategies and monitor their impact, the EU needs comprehensive and comparable information on accidents and injuries. The considerable differences that exist among countries in gathering injury data at the national level obstruct the creation of a level playing-field in Europe for consumers and businesses alike.

Without accurate data, the need for injury prevention policies cannot be properly assessed, nor the effectiveness of such policies implemented at national or EU level. Similarly, there is no way to determine the true return on the investments in health and safety made by Member States or the European Institutions.

The EU needs to fulfil its role as an international player and global partner through providing funding for an accident and injury data system that covers the entire region and which meets international good practices, such as those developed by the US-CPSC and the Joint Action on Injury Monitoring in Europe (JAMIE).

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8 EuroSafe, IDB-JAMIE Manual, Amsterdam 2012:
With the support of:

ACFSE  The Alliance For Consumer Fire Safety in Europe - Alliance pour la Sécurité d’Incendie du Consommateur en Europe
Europäische Allianz Verbraucher und Brandschutz - Europees Brandpreventie Platform voor Consumenten

AGE Platform Europe

CAPIEL
european coordinating committee of manufacturers of electrical cookers and coalheaters

CECAPI

CECed

FEDERATION EUROPEENNE DES FABRICANTS DE BRIQUETS - EUROPEAN FEDERATION OF LIGHTER MANUFACTURERS

EGMF

ELA
european trade union institute

ENPC  European Nursery Products Confederation

ESF  European Society for Trauma and Emergency Surgery

EUPHA  EUROPEAN PUBLIC HEALTH ASSOCIATION

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