

# Searching for consensus in a list of indicators – Mission Possible

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Colin Cryer

Maria Segui-Gomez

And you all

# Outline

- Objective
- Justification
- Background
- Method
- Your choices (Results)
- Let's remember some of the basics
- Open discussion
- Conclusions - action items

# Objective

- As stated in our communications: “To reach consensus on what are the 10 most important indicators of injury incidence that offer the potential for international comparisons, as well as for regional or global monitoring.”

# Realistic Objective

- To define a “road map” that would allow us to coordinate work towards a consensus on the more relevant injury indicators and their data sources (and establish priorities).
- Settle for the 5?? That we feel are ready to go

# The dream

Indicator	Operational definition	Data source 1 (e.g., death certificate)	Data source 2 (e.g., hospital data)	Data source 3 (e.g., surveys)
1		ideal	Next best	
2		Next best	ideal	Third best
...				
n		ideal	never	next

# And for a few...develop something like this...

**Name :** *ICISS-based all serious non-fatal injury rate*

**Concept reflected :** *Individuals' average annual risk of serious unintentional non-fatal injury*

**Scope :** *Injury type – All injury diagnosis*                      *Gender – Both genders*                      *Age – All ages*

**Numerator :**

- *Cases hospitalised for unintentional injury in a calendar year, who were discharged alive and had an ICISS score of 0.941 or less*
- *External cause of injury mortality : E800-E869, E880-E928 (ICD-9-CA) and a diagnosis in range 800-904 or 910-995*
- *Readmissions and transfers excluded*
- *Quebec's hospital discharge database, Quebec's Health Ministry OR xxxx OR XXX*

**Denominator :**

- *Estimated population counts on July 1<sup>st</sup> of this calendar year*
- *Postcensal estimates are based on the most recent census and adjusted for sub-enumeration of the population and change in the population between Census Day and July 1<sup>st</sup> (births, deaths, migration)*

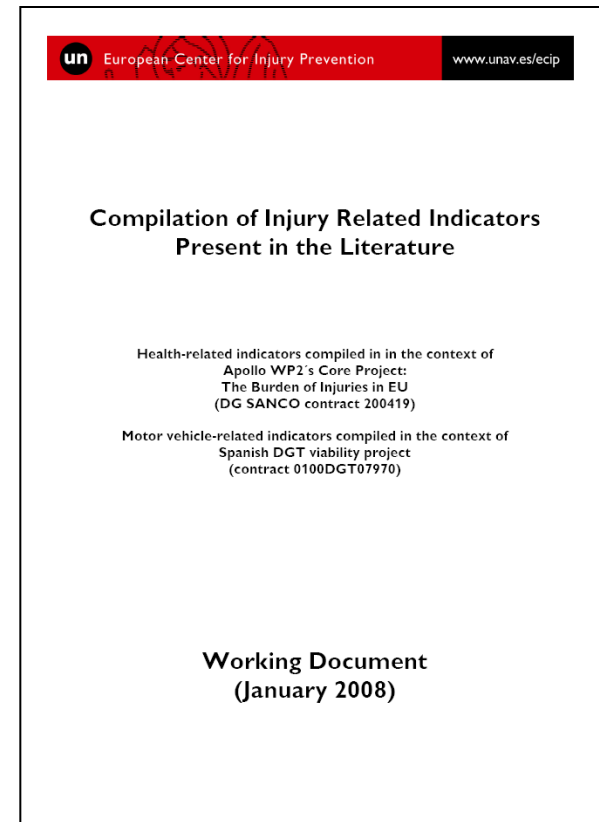
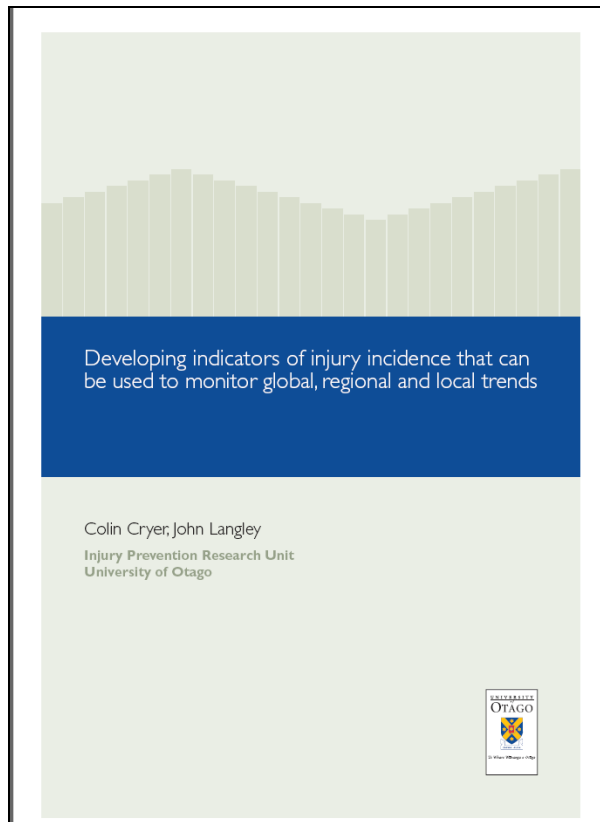
**Calculation :**

- *Age standardized rate – Direct method – with age group of 0-4, 5-9, 10-14, ... 80-84, 85-89, 90 and over.*

# Justification

- Multiple prior discussions @ ICE, WHO consultation data meeting, governmental reports, individual consultations, ...
- “more though is to be given”, “none is perfect”, ...
  - Yet we have to move forward!!

# Background material (among others)





# Method

- Pre-meeting e-mail survey
- 2 rounds of messages 3 weeks apart

Of course, to get your answers but mostly to get you thinking and warmed up to the meeting

....So that we have some material to start with at the meeting, we are asking you to send us in writing what you think are the top five such indicators. (If you send fewer than 5 that will be fine-- better to send something than not sending anything at all.

You are most welcome to define the indicator in whatever way you feel is most relevant-- either global, specific to an age group, specific to an injury type, or specific to an injury mechanism. Please feel free to add one or two sentences regarding the specification for the numerator and denominator (if any) that you would prescribe for such an indicator, as well as a data source for its calculation.

# Method-2

- Let's remember a few things (Colin)
- Let's settle some basic points

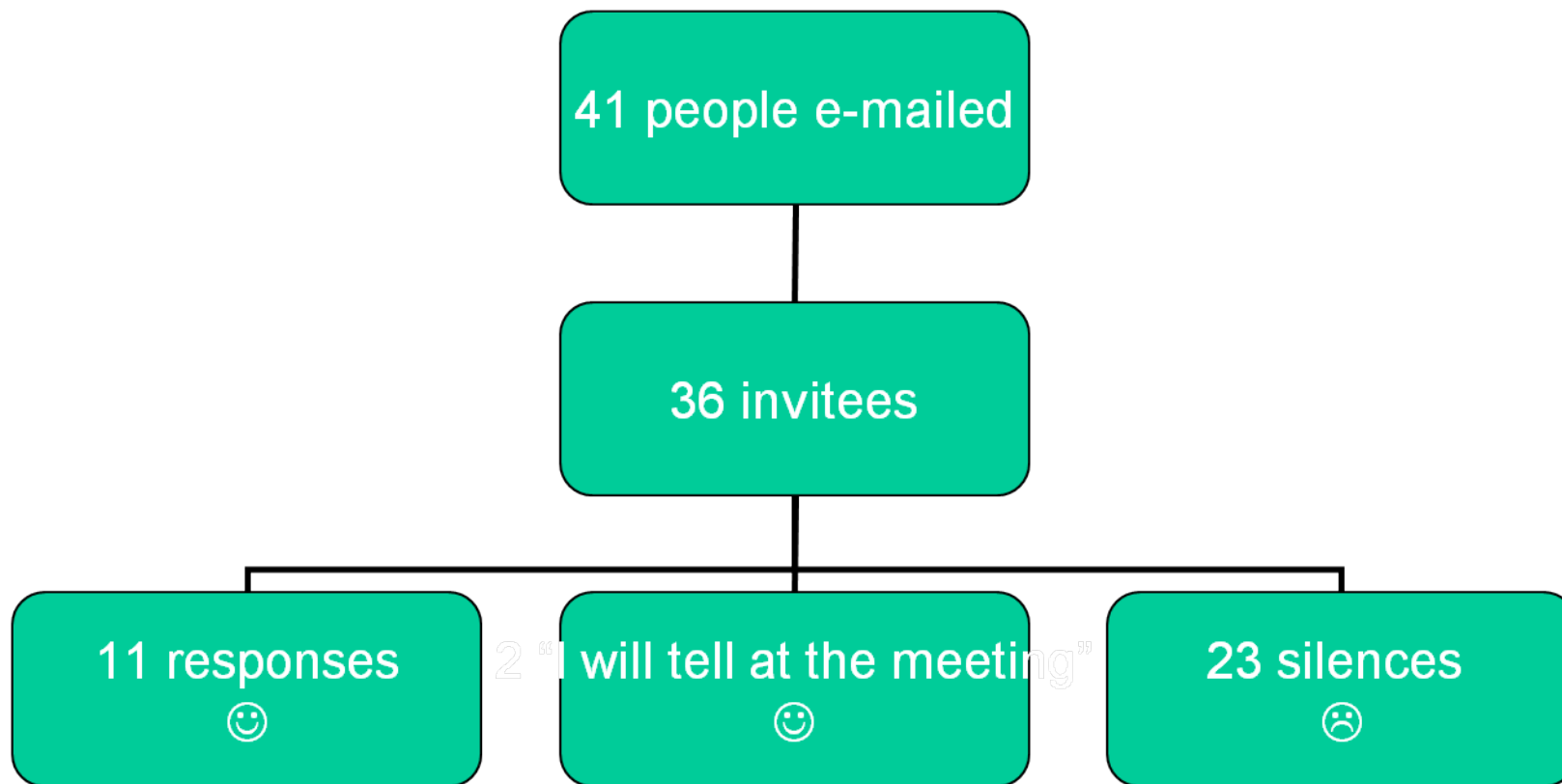
# Method & 3. Group discussion and voting



# Some other considerations

- Intentional vs. Unintentional
- Physical damage vs. Other forms of damage
- Mortality vs. Non-fatal
- Same indicator can be derived from several datasources

# Results



So we expect high participation today!

# Your choices... in order of votes

- Mortality
  - By mechanism MV
- Non fatal
  - Severity threshold
- ED=Disability
- Miscellanea

Indicador	datasource	Operacional definitions	votes	notes
Deaths due to injuries	-- vital statistics, mortuary records, police records,...)		8	
		Underlying case or any of the multiple causes is any injury	1	
		By mechanism (unintentional, suicide, homicide, legal int. war, undetermined intent). Excluding adverse effects	2	
		Traffic injury, violence, work related, home and leisure	1	
		As proposed by Griffiths et al	1	
		Within 30 days of injury	1	
		Only in persons 0-65	1	AS
Death rates			1	

MV mortality rate	Vital statistics	V02-04, V09....(detailed list)	4	AS
YPLL due to MV	Vital statistics	Cut off could be 65 or 75	1	
MV injury deaths per registered vehicle			1	
MV Injury deaths per km travelled			2	
Injuries per km travelled			1	
Deaths due to MV		Subdivided by: occupant, motorcyclist, occupant of 3-wheeled vehicle, pedalcyclist, pedestrian)	1	



Self harm mortality rate	Vita statistics	X60-X84---(detailed list)	2	AS
Homicide and violence death rates	Vital statistics	Detailed codes	1	
		Only in persons <18	1	
Medical and surgical complication death rate	Vital statistics	Detailed codes	1	
Unintentional falls and unspecified fx older adults		W00-W19 or X59 &S02 (detailed list)	1	
Deaths due to falls (ages 65+)		W00-W19, X59.0 or X59	1	
Occupational fatal injury rates	Occupational labor data system		1	
Deaths due to drowning (age 0-44)		(using multiple cause of death codes) W65-W74, X71, X92, Y21	1	
Unintentional death rates excluding MV		Detailed codes	1	
Unintentional injury mortality rate		V01-x59; Y85-Y86	1	AS
TBI deaths		Possibly by mechanism	2 (1 by MV)	

Number of injuries			7	
	Hospitalizations		1	
		Hospitalized cases with injury as first diagnoses and at least 3 days stay	1	Hosp?
		Stay more than 3 days	1	
		Median length of stay	1	
Cases with Fx neck of femur	hospital inpatients	Relevant ICD	3	
TBI hospitalization			2	
		For MV only	1	
Other seriously injured case	Hospital inpatients	Not defined	2	
		S02, S06, S12, S14, S22.....(defined codes)	1	
Long bone fx	Hospital discharge	Specific codes	1	
		For MV only	1	
ICISS-based <i>non-fatal</i> injury rate	Hospital database	ICISS $\leq$ 0.941	1	AS
Hospitalization with MAIS3+	Hospital discharge		2	

Associated with fall (age 65+)		S72 & W00-W19 or X59.0 or X59	1	
MV hospitalization rates	Hospital discharge	Specific codes	1	
		With MAIS3+	1	
Poisoning hospitalization rates	Hospital discharge	Specific codes	1	
Drowning and near drowning hospitalization rates	Hospital discharge	Specific codes	1	
Suicide and suicide attempt	Hospital discharge	Specific codes	1	
Violence hospitalization rates	Hospital discharge	Specific codes	1	



ED attendances	ED data	Selective radiologically verifiable fractures (excluding finger/toes fx)	3	
Percent ED MV visits that get admitted			1	
TBI cases attended in ED			1	

Any medical treatment		No specified	1	
Violence and its non-injury health consequences	Self reported data	e.g, Family Conflict Tactics Scale	1	
Long term disability	Community surveys	Disability >30 days	1	
		Returning to work >30 days	1	
		Work leave due to MV	1	
Injury discharges with mechanism information	Hospital discharge		1	
Proportion of women who denounce their partner for physical violence	National survey			
In general By age categories and sex?			2	

# COLIN's part

# Group discussion

# Indicator 1

**Name :** *Ixxx*

**Concept reflected :** *Ixxx*

**Scope :** *Injury type –  
xxx*

*Gender –  
xxx*

*Age –  
Xxx*

- Numerator :**
- *Cases xxx*
  - *Codes xxxx ICD9/ICD10/others*
  - *Inclusion /exclusion*
  - *Primary datasources*
  - *Secondary datasources*

- Denominator :**
- *Estimated population counts on July 1<sup>st</sup> of this calendar year*
  - *Cases xxx*
  - *Codes xxxx ICD9/ICD10/others*
  - *Inclusion /exclusion*
  - *Primary datasources*
  - *Secondary datasources*

- Calculation :**
- *ssss*
  - *If Age standardized rate – Direct method – with age group of 0-4, 5-9, 10-14, ... 80-84, 85-89, 90 and over.*



# Did we achieve the dream

Indicator	Operational definition	Data source 1 OPTIMAL	Data source 2 NEXT BEST	Data source 3 IF ALL ELSE FAILS
1				
2				
...				
n				



THANKS!