

JOINT ACTION ON MONITORING INJURIES IN EUROPE (JAMIE): DEVELOPMENT OF A NEW MINIMUM DATA SET (MDS)

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Background Transnational injury surveillance requires the adoption of standardised systems providing nationally representative samples of cases. The EU Injury Data Base (IDB) operates in 13 EU countries but at varying level. Hence, there is no comprehensive system across Europe to provide a basis for benchmarking or designing and evaluating prevention policies at EU level.

Aims/Objectives/Purpose To develop a common hospital-based emergency department injury surveillance methodology that is both sufficiently detailed to provide the most relevant information for prevention and simple enough to be implementable at low cost in all European Member States.

Methods Following a literature review, a consultative and iterative process was undertaken involving injury surveillance experts from the JAMIE management team and IDB National Database Administrators (NDAs) from each country with the aim of producing an agreed Minimum Data Set (MDS).

Results/Outcomes The agreed MDS contains information on major components of aetiology: intent, location (setting) of incidence, activity when injured, mechanism of injury, type of injury, and injured body part. Data set length is 32 compared to 85 for the standard IDB. Feedback suggests widespread willingness to implement the MDS either as a new data collection or to be abstracted from existing systems. Within JAMIE 13 more EU countries have expressed their willingness to implement the common system and 26 countries are expected to participate by 2014.

Significance/Contribution to the Field The proposed JAMIE MDS provides an opportunity to implement a common low cost injury surveillance system for Europe to support policy development and injury prevention.