TIIG Cumbria Themed Report
Unintentional and Deliberate Injuries in Children and Young People across Cumbria (2012/13)

Karen A Critchley and Mark Whitfield, May 2014
ACKNOWLEDGEMENTS

With thanks to the emergency departments involved with the collection of the data used in this report and Cumbria County Council Public Health Team for their continued involvement in the Trauma and Injury Intelligence Group, particularly Emma Graham for her comments and contributions. Thank you also to Jennifer Brizell, Jane Harris and Howard Reed at the Centre for Public Health for their assistance in proof reading this report.

SUMMARY AND KEY FINDINGS

- Between April 2012 and March 2013 there were 6,881 emergency department (ED) attendances made by children aged 14 years and under and 6,806 attendances made by young people aged between 15 and 24 years.

- In the 12 month period, 98% of attendances made by children were due to unintentional injuries (n=6,770) compared to 2% deliberate injuries (n=111). Eighty-four per cent of young people sustained unintentional injuries (n=5,687) compared to 16% deliberate injuries (n=1,119).

- Cumberland Infirmary in Carlisle saw the largest proportion of attendances (48% of children and 47% of young people).

- Just under two-fifths (38%) of children and over a third (36%) of young people attending an ED in 2012/13 were from Carlisle local authority. Under a quarter of children and young people (23% each) were from Copeland local authority, and one in five children and young people (21% each) were from Allerdale local authority.

- Crude rates per 10,000 resident population presenting to an ED in 2012/13 were significantly worse for children resident in Carlisle and Copeland local authorities when compared to the Cumbria average. For young people, crude rates were significantly worse for those from Allerdale, Carlisle and Copeland local authorities.

- Males accounted for 58% of children and 62% of young people attending an ED between April 2012 and March 2013.

- Forty-one per cent of children were aged between 10 and 14 years, 33% aged four years or less and 26% aged between five and nine years. Over half (54%) of young people were aged between 20 and 24 years and 46% aged between 15 and 19 years.

- The primary incident location for children was the home (49%), followed by 17% which occurred in an educational establishment and <15% in a public place. Almost half (46%) of injuries in young people were recorded as taking place in ‘other’ location. The primary specified injury location for young people was the home (28%), followed by 18% which occurred in a public place.

- Sixty-seven per cent of children and 58% of young people were discharged from hospital with no follow-up treatment required, whilst 27% of children and 30% of young people required a referral or follow-up treatment.

- There were 370 children and 525 young people admitted to hospital following an injury attendance in 2012/13.
INTRODUCTION

The Public Health Outcomes Framework (PHOF) for England, *Improving outcomes and supporting transparency*, sets out desired outcomes for public health and how these will be measured. The overarching vision of the PHOF is to improve and protect the nation’s health and wellbeing and improve the health of the poorest fastest. The outcomes focus not only on how long people live, but on how well they live throughout the life course\(^1\). The two overarching indicators are:

- Healthy life expectancy; and,
- Differences in life expectancy and healthy life expectancy between communities.

Linked to these outcomes are a range of specific public indicators grouped into four domains, which are:

- Improving the wider determinants of health;
- Health improvement;
- Health protection; and,
- Healthcare public health and preventing premature mortality.

Within the health improvement domain there are two indicators concerning hospital admissions due to injury (sourced from Hospital Episode Statistics, Health and Social Care Information Centre); these are\(^6\):

- Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 years); and,
- Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years).

The crude rates of hospital admissions caused by unintentional and deliberate injuries in children and young people in Cumbria in 2012/13 are significantly worse than England. The crude rates of admissions for children and young people are 119.0 and 153.3 per 10,000 population respectively (Table 1)\(^1\). Within Cumbria, crude rates are significantly worse than England in Barrow-in-Furness and Copeland local authorities for children, and Barrow-in-Furness, Copeland and South Lakeland local authorities for young people.

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\(^1\) The Public Health Outcomes Framework data tool can be accessed at: [www.phoutcomes.info](http://www.phoutcomes.info).
Data collected and collated by the Trauma and Injury Intelligence Group (TIIG) Injury Surveillance System will be used to report on the nature of unintentional and deliberate injury attendances in children and young people to the emergency departments (EDs) across Cumbria in 2012/13. This report can be used by local partners and commissioners to inform prevention strategies and to support local work in relation to the PHOF.

### METHODS

Data were extracted from the TIIG Injury Surveillance System for attendances to the three emergency departments (EDs) in Cumbria (Cumberland Infirmary, Carlisle; Furness General Hospital, Barrow-in-Furness; and, West Cumberland Hospital, Whitehaven) between April 2012 and March 2013. The reason for reporting on attendances in 2012/13 is to match the time period of the PHOF indicators (Table 1). Data are for children and young people resident in Cumbria only (based on the postcode of residence, where complete and correct). Throughout this report, ‘children’ refers to those aged 14 years and under, and ‘young people’ refers to those aged between 15 and 24 years. Figures do not relate to individuals, but to the number of attendances; for example, an individual could present to an ED more than once during the twelve-month period but all attendances made by the individual have been included in the analyses. Injury attendances to the EDs are categorised by injury group; unintentional injuries are identified as road traffic collisions, sports injury and other injury; and, deliberate injuries

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**Table 1: Crude rates of hospital admissions caused by unintentional and deliberate injuries in children and young people, 2012/13**

<table>
<thead>
<tr>
<th></th>
<th>Children (aged 0-14 years)</th>
<th>Young people (aged 15-24 years)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Crude rate per 10,000</td>
<td>95% confidence interval</td>
</tr>
<tr>
<td></td>
<td>Lower limit</td>
<td>Upper limit</td>
</tr>
<tr>
<td>England</td>
<td>103.8</td>
<td>103.2</td>
</tr>
<tr>
<td>North West</td>
<td>133.9</td>
<td>131.9</td>
</tr>
<tr>
<td>Cumbria</td>
<td>119.0</td>
<td>111.4</td>
</tr>
<tr>
<td>Local authority</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allerdale</td>
<td>103.2</td>
<td>87.6</td>
</tr>
<tr>
<td>Barrow-in-Furness</td>
<td>166.1</td>
<td>143.1</td>
</tr>
<tr>
<td>Carlisle</td>
<td>106.9</td>
<td>92.1</td>
</tr>
<tr>
<td>Copeland</td>
<td>139.9</td>
<td>118.7</td>
</tr>
<tr>
<td>Eden</td>
<td>91.7</td>
<td>71.6</td>
</tr>
<tr>
<td>South Lakeland</td>
<td>111.9</td>
<td>95.3</td>
</tr>
</tbody>
</table>


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8 Confidence intervals (CIs) are a range of values indicating the uncertainty there is around the estimation of a calculated rate; the wider the CI, the more uncertainty there is. CIs are normally calculated at a 95% confidence level, representing the range in which the true population value will lie 95 out of 100 times.
include assaults and deliberate self-harm. ‘Other’ injury includes bites and stings, burns and scalds, falls, firework injuries, overdose and poisoning, trauma and all other injuries.

Unintentional and deliberate injury attendances made by children and young people were analysed to explore the extent of incidents across Cumbria as a whole and then broken down by local authority areas also. The criteria of the data used for this report have been summarised in Box 1.

Crude rates were calculated for each local authority and Middle Layer Super Output Area (MSOA) of residence per 10,000 resident population (using Office for National Statistics mid-2012 population estimates). To identify where there were significant differences between areas, 95% confidence intervals (CIs) were calculated. A full list of the number, crude rate and CIs for each MSOA of residence are available in Appendices 1-2. Maps have been created using InstantAtlas software to illustrate the crude rates of injury attendances based on the MSOA of residence.

For all tables, numbers less than five have been suppressed (with ***) in line with patient confidentiality. If there is only one number less than five in a category then a second number has been suppressed to prevent back calculations from totals. Percentages may not add up to 100% due to rounding.

### INJURIES ACROSS CUMBRIA

### NUMBER OF ATTENDANCES AND INJURY TYPE

Between April 2012 and March 2013 there were 6,881 attendances made by 0-14 year old children to an emergency department (ED) in Cumbria due to unintentional and deliberate injuries (Table 2). Unintentional injuries accounted for 98% of attendances (n=6,770) compared to just 111 children presenting with deliberate injuries (2%). Over four in five (83%) unintentional injuries were recorded as ‘other’ injury, followed by 15% sustained by sport and 3% owing to road traffic collisions. Under three-quarters (74%) of deliberate injuries were sustained by assault, while 26% were due to deliberate self-harm.

There were 6,806 injury attendances made by young people aged between 15 and 24 years to one of Cumbria’s EDs in 2012/13 (Table 2). Over four-fifths (84%) of injuries were unintentional (n=5,687) and 16% were deliberate (n=1,119). Over three-fifths (63%) of unintentional injuries were categorised as ‘other’ injury, with over a quarter (26%) sustained by sport and 11% due to a road traffic collision. Assault accounted for 53% of deliberate injuries and deliberate self-harm accounted for 47%.

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Box 1: Criteria for data used in this report

- Attendances to Cumberland Infirmary, Furness General Hospital and West Cumberland Hospital EDs;
- Attendances between April 2012 and March 2013;
- Residents of Cumbria (based on postcode of residence);
- Children aged 0-14 years and young people aged 15-24 years; and,
- Unintentional injuries (road traffic collisions, sports injury and other injury) and deliberate injuries (assault and deliberate self-harm).

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Super Output Areas (SOAs) are used in the reporting of small area statistics, broken down into Lower Layer Super Output Areas (LSOAs) and Middle Layer Super Output Areas (MSOAs); for more information visit: [http://www.ons.gov.uk/ons/guide-method/geography/beginner-s-guide/census/super-output-areas--soas--index.html](http://www.ons.gov.uk/ons/guide-method/geography/beginner-s-guide/census/super-output-areas--soas--index.html)
Table 2: Injury attendances by injury group, 2012/13

<table>
<thead>
<tr>
<th>Injury group</th>
<th>Children</th>
<th>Young people</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td><strong>Unintentional injuries</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other injury</td>
<td>5609</td>
<td>83%</td>
</tr>
<tr>
<td>Road traffic collision</td>
<td>175</td>
<td>3%</td>
</tr>
<tr>
<td>Sports injury</td>
<td>986</td>
<td>15%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>6770</td>
<td>-</td>
</tr>
<tr>
<td><strong>Deliberate injuries</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault</td>
<td>82</td>
<td>74%</td>
</tr>
<tr>
<td>Deliberate self-harm</td>
<td>29</td>
<td>26%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>111</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total injuries</strong></td>
<td>6881</td>
<td>-</td>
</tr>
</tbody>
</table>

Just under half of all children (n=3,327; 48%) and young people (n=3,195; 47%) attended Cumberland Infirmary, Carlisle, between April 2012 and March 2013 (Figure 1). Thirty-seven per cent of children (n=2,539) and 36% of young people (n=2,460) attended West Cumberland Hospital in Whitehaven, and 15% and 17% of children (n=1,015) and young people (n=1,151) respectively attended Furness General Hospital in Barrow-on-Furness.

Figure 1: Injury attendances by emergency department attended, 2012/13

Children = 6,881; Young people = 6,806.
**AREA OF RESIDENCY**

Figure 2 demonstrates the local authority of residence of the ED attendees in 2012/13. Under two in five children (n=2,632; 38%) and over a third of young people (n=2,417; 36%) were from Carlisle local authority. Under a quarter of children (n=1,550; 23%) and young people (n=1,582; 23%) were from Copeland local authority and over one-fifth of children (n=1,441; 21%) and young people (n=1,416; 21%) were from Allerdale local authority.

**Figure 2: Injury attendances by local authority of residence, 2012/13**

![Chart showing percentages of attendances by local authority for children and young people.]

Crude rates per 10,000 resident population of the children and young people attending an ED in 2012/13 have been calculated and presented in Table 3. The crude rate of attendances for children aged 14 years or less was 897.0 (CI 876.0 to 918.5) per 10,000 population. Crude rates were significantly worse than the Cumbria average for children resident in Carlisle and Copeland local authorities, and significantly better for children resident in Barrow-in-Furness, Eden and South Lakeland local authorities. There were no significant differences between Allerdale local authority and the Cumbria average.

The crude rate of attendances for young people aged between 15 and 24 years was 1,224.6 (CI 1,195.7 to 1,254.0) per 10,000 population (Table 3). Crude rates were significantly worse for young people from Allerdale, Carlisle and Copeland local authorities and significantly better for those from Barrow-in-Furness, Eden and South Lakeland local authorities.
Table 3: Numbers, crude rates and confidence intervals of injury attendances by local authority of residence, 2012/13

<table>
<thead>
<tr>
<th>Local authority</th>
<th>n</th>
<th>Crude rate per 10,000</th>
<th>95% confidence interval</th>
<th>n</th>
<th>Crude rate per 10,000</th>
<th>95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Lower limit</td>
<td>Upper limit</td>
<td></td>
<td>Lower limit</td>
<td>Upper limit</td>
</tr>
<tr>
<td>Allerdale</td>
<td>1441</td>
<td>965.9</td>
<td>916.6</td>
<td>1416</td>
<td>1357.1</td>
<td>1287.3</td>
</tr>
<tr>
<td>Barrow-in-Furness</td>
<td>782</td>
<td>694.5</td>
<td>646.7</td>
<td>866</td>
<td>1058.8</td>
<td>989.5</td>
</tr>
<tr>
<td>Carlisle</td>
<td>2632</td>
<td>1521.2</td>
<td>1463.6</td>
<td>2417</td>
<td>1798.5</td>
<td>1727.5</td>
</tr>
<tr>
<td>Copeland</td>
<td>1550</td>
<td>1408.5</td>
<td>1339.2</td>
<td>1582</td>
<td>1992.9</td>
<td>1895.9</td>
</tr>
<tr>
<td>Eden</td>
<td>290</td>
<td>374.7</td>
<td>332.8</td>
<td>325</td>
<td>582.9</td>
<td>521.2</td>
</tr>
<tr>
<td>South Lakeland</td>
<td>186</td>
<td>128.4</td>
<td>110.6</td>
<td>200</td>
<td>199.8</td>
<td>173.0</td>
</tr>
<tr>
<td>Cumbria</td>
<td>6881</td>
<td>897.0</td>
<td>876.0</td>
<td>6806</td>
<td>1224.6</td>
<td>1195.7</td>
</tr>
</tbody>
</table>

Crude rates per 10,000 resident population of the children and young person’s Middle Super Output Area (MSOA) of residency are illustrated in Maps 1 and 2, overlaid by local authority boundaries. A table accompanies each map, highlighting the five MSOAs in Cumbria where rates were highest (see Appendices 1-2 for a full list of the number, crude rate and CIs for each MSOA).

Nineteen out of the 64 MSOAs in Cumbria had rates significantly worse than the Cumbria average for attendances made by children (30%); rates were highest in Carlisle 009, Carlisle 008 and Copeland 005 (Map 1; also see Appendix 1). Equally, there were 19 MSOAs significantly worse than Cumbria for attendances made by young people (30%); rates were highest in Copeland 005, Carlisle 009 and Carlisle 012 (Map 2; also see Appendix 2).
Map 1: Crude rates per 10,000 resident population of injury attendances by MSOA of residence (Children), overlaid by local authority boundaries, 2012/13

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Key (rate per 10,000 population):
- 0.0 - 290.7
- 290.8 - 645.7
- 645.8 - 912.5
- 912.6 - 1,434.2
- 1,434.3 - 2,059.2

Five highest crude rates per 10,000 population (Children)

<table>
<thead>
<tr>
<th>MSOA code</th>
<th>MSOA name</th>
<th>n</th>
<th>Crude rate per 10,000</th>
<th>95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lower limit</td>
</tr>
<tr>
<td>E02003995</td>
<td>Carlisle 009</td>
<td>348</td>
<td>2059.2</td>
<td>1848.5</td>
</tr>
<tr>
<td>E02003994</td>
<td>Carlisle 008</td>
<td>225</td>
<td>1897.1</td>
<td>1657.3</td>
</tr>
<tr>
<td>E02004004</td>
<td>Copeland 005</td>
<td>321</td>
<td>1814.6</td>
<td>1621.5</td>
</tr>
<tr>
<td>E02003998</td>
<td>Carlisle 012</td>
<td>244</td>
<td>1761.7</td>
<td>1547.6</td>
</tr>
<tr>
<td>E02003997</td>
<td>Carlisle 011</td>
<td>367</td>
<td>1740.2</td>
<td>1566.7</td>
</tr>
<tr>
<td>Cumbria</td>
<td></td>
<td>6881</td>
<td>897.0</td>
<td>876.0</td>
</tr>
</tbody>
</table>
Map 2: Crude rates per 10,000 resident population of injury attendances by MSOA of residence (Young people), overlaid by local authority boundaries, 2012/13

Five highest crude rates per 10,000 population (Young people)

<table>
<thead>
<tr>
<th>MSOA code</th>
<th>MSOA name</th>
<th>n</th>
<th>Crude rate per 10,000</th>
<th>95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lower limit</td>
</tr>
<tr>
<td>E02004004</td>
<td>Copeland 005</td>
<td>324</td>
<td>2762.1</td>
<td>2469.5</td>
</tr>
<tr>
<td>E02003995</td>
<td>Carlisle 009</td>
<td>250</td>
<td>2360.7</td>
<td>2077.1</td>
</tr>
<tr>
<td>E02003998</td>
<td>Carlisle 012</td>
<td>199</td>
<td>2332.9</td>
<td>2020.1</td>
</tr>
<tr>
<td>E02003997</td>
<td>Carlisle 011</td>
<td>274</td>
<td>2257.0</td>
<td>1997.6</td>
</tr>
<tr>
<td>E02004002</td>
<td>Copeland 003</td>
<td>256</td>
<td>2226.1</td>
<td>1961.7</td>
</tr>
<tr>
<td>Cumbria</td>
<td></td>
<td>6808</td>
<td>1224.6</td>
<td>1195.7</td>
</tr>
</tbody>
</table>
PATIENT DEMOGRAPHY

Males accounted for fewer than three in five (58%) children and over three-fifths (62%) of young people (Figure 3a). Over two in five (41%) children were aged between 10 and 14 years, a third (33%) were aged four years or less and over a quarter (26%) were aged between five and nine years (Figure 3b). Over half (54%) of young people were aged between 20 and 24 years and 46% were aged between 15 and 19 years (Figure 3b).

Figure 3: Injury attendances by patient demographics, 2012/13

INCIDENT LOCATION

Table 4 shows the injury location for children and young people attending an ED in 2012/13. Just under half (49%) of children sustained injuries at home, while 17% occurred in an educational establishment and <15% occurred in a public place. For young people, almost half (46%) of injuries were recorded as taking place in ‘other’ location. The primary specified injury location was the home (28%), followed by under one-fifth (18%) which occurred in a public place.

Table 4: Injury attendances by incident location, 2012/13
The disposal method can provide an indication of the severity of injuries sustained. Table 5 shows that 67% of children were discharged following an ED attendance and 27% required a referral or follow-up appointment for further treatment. There were 370 children from Cumbria who were admitted to hospital following an injury attendance in 2012/13 (5%). Under three in five (58%) young people were discharged and three in ten (30%) were referred for further treatment. There were 525 young people from Cumbria who were admitted to hospital with injuries (8%) (Table 5).

Table 5: Injury attendances by disposal method, 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th>Young people</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Admitted</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admitted to hospital bed/became a lodged patient of the same health care provider</td>
<td>370</td>
<td>5%</td>
</tr>
<tr>
<td>Discharged</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discharged - did not require any follow-up treatment</td>
<td>4588</td>
<td>67%</td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discharged - follow-up treatment to be provided by general practitioner</td>
<td>435</td>
<td>6%</td>
</tr>
<tr>
<td>Follow-up with ED</td>
<td>50</td>
<td>1%</td>
</tr>
<tr>
<td>Referred to ED clinic</td>
<td>274</td>
<td>4%</td>
</tr>
<tr>
<td>Referred to fracture clinic</td>
<td>175</td>
<td>3%</td>
</tr>
<tr>
<td>Referred to other health care professional</td>
<td>55</td>
<td>1%</td>
</tr>
<tr>
<td>Referred to other out-patient clinic</td>
<td>812</td>
<td>12%</td>
</tr>
<tr>
<td>Transferred to other health care provider</td>
<td>24</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Died in department</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td>Left before triage</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td>Left department before being treated</td>
<td>67</td>
<td>1%</td>
</tr>
<tr>
<td>Left department having refused treatment</td>
<td>***</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Other</td>
<td>&lt;35</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Total</td>
<td>6881</td>
<td>100%</td>
</tr>
</tbody>
</table>

ADMITTED PATIENTS

Of the 370 children from Cumbria admitted to hospital due to an injury attendance between April 2012 and March 2013, 93% sustained unintentional injuries (n=343); the majority of which were recorded as ‘other’ injury (n=307; 90%). Equal proportions (5% each) of unintentional injuries were due to road traffic collisions (n=18) and sports injury (n=18). There were 27 children admitted to hospital due to deliberate injuries (7%); 78% were sustained by deliberate self-harm (n=21) and 22% as a result of...
assaults (n=6). Over half (54%) of children were male (n=198) and 45% were aged four years and under (n=165), followed by three in ten (30%) aged between 10 and 14 years (n=110) and 26% aged between five and nine years (n=95).

Over half (51%) of young people admitted to hospital in 2012/13 sustained unintentional injuries (n=270). Three-quarters (75%) of unintentional injuries were recorded as ‘other’ injury (n=202), followed by 15% due to road traffic collisions (n=40) and 10% due to sports injury (n=28). Just under half (49%) of young people admitted due to injury were as a result of deliberate injury (n=255); of which, the majority were sustained by deliberate self-harm (n=210; 82%) followed by 18% due to assault (n=45). Under three in five (58%) young people were female (n=304) and over three-fifths (61%) were aged between 20 and 24 years (n=318), followed by 39% aged between 15 and 19 years (n=207).

**LOCAL AUTHORITY PROFILES**

The following sections of this report explore injury attendances made by children and young people in Cumbria by each local authority across the county.

**ALLERDALE**

There were 1,441 children from Allerdale local authority attending an ED in Cumbria in 2012/13 due to injury (Table 6). Unintentional injuries accounted for 99% of attendances, with the majority (87%) recorded as ‘other’ injury and over one in ten (11%) sustained by sport. The majority (<85%) of deliberate injuries were caused by assault.

Between April 2012 and March 2013 there were 1,416 young people from Allerdale local authority attending one of Cumbria’s EDs (Table 6). Under nine in ten (86%) of injuries were unintentional; over three-fifths (63%) were recorded as ‘other’ injury, over a quarter (27%) were due to sports injury and 11% as a result of a road traffic collision. Assault accounted for over half (52%) of deliberate injuries in young people, compared to 49% deliberate self-harm.

**Table 6: Injury attendances by injury group (Allerdale residents), 2012/13**

<table>
<thead>
<tr>
<th>Injury group</th>
<th>Children</th>
<th>Young people</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td><strong>Unintentional injuries</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other injury</td>
<td>1234</td>
<td>87%</td>
</tr>
<tr>
<td>Road traffic collision</td>
<td>29</td>
<td>2%</td>
</tr>
<tr>
<td>Sports injury</td>
<td>163</td>
<td>11%</td>
</tr>
<tr>
<td>Total</td>
<td>1426</td>
<td>-</td>
</tr>
<tr>
<td><strong>Deliberate injuries</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault</td>
<td>&lt;15</td>
<td>&lt;85%</td>
</tr>
<tr>
<td>Deliberate self-harm</td>
<td>***</td>
<td>&lt;25%</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total injuries</strong></td>
<td>1441</td>
<td>-</td>
</tr>
</tbody>
</table>

\(^{0}\) See Appendices 1-2 for a full list of the number, crude rate and CIs for each MSOA.
Males accounted for under three-fifths (57%) of children and over three in five (62%) young people (Figure 4a) from Allerdale local authority. Figure 4b illustrates that over two in five (41%) children were aged between 10 and 14 years, followed by a third (33%) aged four years or less and over a quarter (26%) aged between five and nine years. Over half (54%) of young people were aged between 20 and 24 years.

**Figure 4: Injury attendances by patient demographics (Allerdale residents), 2012/13**

![Gender and Age Group](image)

The crude rate of attendances for children resident in Allerdale local authority was 965.9 (CI 916.6 to 1,017.1) per 10,000 population; there was no significant difference in this rate compared to the whole of Cumbria. However, rates for children were significantly worse than the average for Cumbria in Allerdale 009 and Allerdale 010. For young people resident in Allerdale, the crude rate was 1,357.1 (CI 1,287.3 to 1,429.7) per 10,000 population, significantly worse than the Cumbria average. Rates were significantly worse in Allerdale 009, Allerdale 011 and Allerdale 005.

Table 7 shows the disposal method of Allerdale residents following an injury attendance to an ED in Cumbria. Under seven in ten (69%) children were discharged, followed by 23% who required follow-up treatment. There were 105 children from Allerdale who were admitted to hospital with injuries (7%). Over three-fifths (63%) of young people were discharged and over a quarter (27%) referred for follow-up treatment. There were 111 young people from Allerdale admitted to hospital following an injury attendance in 2012/13 (8%).
Table 7: Injury attendances by disposal method (Allerdale residents), 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th></th>
<th>Young people</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Admitted</td>
<td>105</td>
<td>7%</td>
<td>111</td>
<td>8%</td>
</tr>
<tr>
<td>Discharged</td>
<td>990</td>
<td>69%</td>
<td>888</td>
<td>63%</td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td>330</td>
<td>23%</td>
<td>388</td>
<td>27%</td>
</tr>
<tr>
<td>Other</td>
<td>16</td>
<td>1%</td>
<td>29</td>
<td>2%</td>
</tr>
<tr>
<td>Total</td>
<td>1441</td>
<td>100%</td>
<td>1416</td>
<td>100%</td>
</tr>
</tbody>
</table>

**Admitted patients**

Of the 105 children from Allerdale local authority were admitted to hospital, the majority sustained unintentional injuries (n=105). Just under nine in ten (89%) unintentional injuries were categorised as ‘other’ injury (n=91), followed by 8% sports injuries (n=8). Over half (53%) of the children were male (n=56) and 55% were aged four years or less (n=58), followed by a quarter (25%) aged between 10 and 14 years (n=26) and one-fifth (20%) aged between five and nine years (n=21).

Over half (53%) of the 111 young people admitted had sustained deliberate injuries (n=59), with deliberate self-harm accounting for 81% of all deliberate injuries (n=48) and 19% assault (n=11). Over seven in ten (71%) young people admitted with unintentional injuries were categorised as ‘other’ injury (n=37), followed by just under one in five (19%) due to a road traffic collision (n=10) and 10% due to sport (n=5). There were more females than males from Allerdale aged between 15 and 24 years admitted (females=60; 54%), with three in five (60%) aged between 20 and 24 years (n=67) and two in five (20%) aged between 15 and 19 years (n=44).

**BARROW-IN-FURNESS**

Between April 2012 and March 2013 there were 782 children from Barrow-in-Furness local authority attending an ED in Cumbria due to injury (Table 8). Unintentional injuries accounted for 96% of attendances, with over three-fifths (61%) of unintentional injuries categorised as ‘other’ injury, a third (33%) sustained by sport and 6% due to a road traffic collision. Just over three-quarters (76%) of deliberate injuries were due to assault compared to 24% caused by deliberate self-harm.

There were 866 young people from Barrow-in-Furness local authority attending an ED in 2012/13 (Table 8). Seventy-eight per cent of injuries in young people were unintentional; of these, just under two in five (39%) were due to sport with 18% sustained by road traffic collisions. Over three-fifths (62%) of deliberate injuries sustained by young people were caused by an assault and 38% due to deliberate self-harm.
Table 8: Injury attendances by injury group (Barrow-in-Furness residents), 2012/13

<table>
<thead>
<tr>
<th>Injury group</th>
<th>Children</th>
<th></th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td>%</td>
<td>n</td>
<td>%</td>
<td></td>
<td>%</td>
</tr>
<tr>
<td><strong>Unintentional injuries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other injury</td>
<td>458</td>
<td>61%</td>
<td></td>
<td></td>
<td>294</td>
<td>43%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Road traffic collision</td>
<td>42</td>
<td>6%</td>
<td>96%</td>
<td></td>
<td>120</td>
<td>18%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sports injury</td>
<td>249</td>
<td>33%</td>
<td></td>
<td></td>
<td>262</td>
<td>39%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>749</td>
<td>-</td>
<td></td>
<td>78%</td>
<td>676</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Deliberate injuries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault</td>
<td>25</td>
<td>76%</td>
<td>4%</td>
<td></td>
<td>117</td>
<td>62%</td>
<td></td>
<td>22%</td>
</tr>
<tr>
<td>Deliberate self-harm</td>
<td>8</td>
<td>24%</td>
<td></td>
<td></td>
<td>73</td>
<td>38%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>33</td>
<td>-</td>
<td></td>
<td></td>
<td>190</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total injuries</strong></td>
<td>782</td>
<td>-</td>
<td></td>
<td></td>
<td>866</td>
<td>-</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 5a illustrates that males accounted for under three-fifths (59%) of children and seven in ten (70%) young people from Barrow-in-Furness local authority. Over half (55%) of the children were aged between 10 and 14 years, and exactly half (50%) of the young people were aged between 15 and 19 years or between 20 and 24 years (Figure 5b).

**Figure 5: Injury attendances by patient demographics (Barrow-in-Furness residents), 2012/13**

**a) Gender**

<table>
<thead>
<tr>
<th></th>
<th>Children</th>
<th></th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>464</td>
<td></td>
<td></td>
<td>Female</td>
<td>604</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of attendances</td>
<td>318</td>
<td></td>
<td></td>
<td>262</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**b) Age group**

<table>
<thead>
<tr>
<th></th>
<th>Children</th>
<th></th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0-4</td>
<td>182</td>
<td></td>
<td></td>
<td>171</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5-9</td>
<td>429</td>
<td></td>
<td></td>
<td>433</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10-14</td>
<td>433</td>
<td></td>
<td></td>
<td>433</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The crude rate for children resident in Barrow-in-Furness local authority was 694.5 (CI 646.7 to 744.9) per 10,000 population, significantly better than the average for Cumbria. Crude rates for children attending an ED with injuries were highest in Barrow-in-Furness 004 and Barrow-in-Furness 003, although there were no significant differences between these rates and the average for children in Cumbria. For young people from Barrow-in-Furness local authority, the crude rate was also significantly better than the Cumbria average (1,058.8 [CI 989.5 to 1,131.7] per 10,000 population). Rates were highest in Barrow-in-Furness 002, Barrow-in-Furness 005 and Barrow-in-Furness 010. Yet again, there were no significant differences in these rates compared to the average for young people in Cumbria.
Table 9 shows the disposal method of Barrow-in-Furness residents following an injury attendance between April 2012 and March 2013. Equal proportions of children were discharged and referred for follow-up treatment (46% each). There were 36 children from Barrow-in-Furness local authority who were admitted to hospital with injuries (5%). Forty-five per cent of young people required follow-up treatment, with 41% discharged without a referral. There were 59 young people from Barrow-in-Furness who were admitted to hospital following an injury attendance in 2012/13 (7%).

Table 9: Injury attendances by disposal method (Barrow-in-Furness residents), 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th></th>
<th>Young people</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Admitted</td>
<td>36</td>
<td>5%</td>
<td>59</td>
<td>7%</td>
</tr>
<tr>
<td>Discharged</td>
<td>362</td>
<td>46%</td>
<td>358</td>
<td>41%</td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td>360</td>
<td>46%</td>
<td>391</td>
<td>45%</td>
</tr>
<tr>
<td>Other</td>
<td>24</td>
<td>3%</td>
<td>58</td>
<td>7%</td>
</tr>
<tr>
<td>Total</td>
<td>782</td>
<td>100%</td>
<td>866</td>
<td>100%</td>
</tr>
</tbody>
</table>

Admitted patients

Of the 36 children from Barrow-in-Furness local authority who were admitted to hospital, over seven in ten (72%) were due to unintentional injuries (n=26), with 65% recorded as ‘other’ injury (n=17). Over half (53%) admitted children were female (n=19) and 53% were aged between 10 and 14 years (n=19), followed by a third (33%) aged four years or less (n=12) and 14% aged between five and nine years (n=5).

Three-quarters (75%) of the 59 young people admitted had sustained deliberate injuries (n=44), with deliberate self-harm accounting for 77% of all deliberate injuries (n=34) while 23% were caused by assault (n=10). ‘Other’ injury accounted for two in five (40%) unintentional injuries in young people (n=6). Males accounted for 56% of young people admitted (n=33) and under three-fifths (58%) were aged between 20 and 24 years (n=34) with 42% aged between 15 and 19 years (n=25).

CARLISLE

Table 10 shows there were 2,632 children resident in Carlisle local authority who attended an ED in 2012/13. The majority (98%) of injuries in children were unintentional, 87% of which were categorised as ‘other’ injury followed by over one in ten (11%) caused by sport and 2% due to a road traffic collision. Under three-quarters (73%) of deliberate injuries in children were due to assault compared to 27% caused by deliberate self-harm.

There were 2,417 young people from Carlisle local authority attending an ED between April 2012 and March 2013 (Table 10). Unintentional injuries accounted for 83% of young person’s attendances; of these, just under three-quarters (74%) were recorded as ‘other’ injury, 18% sustained by sports injury and 8% due to a road traffic collision. Over half (53%) of deliberate injuries sustained by young people were due to assault and 47% due to deliberate self-harm.
Table 10: Injury attendances by injury group (Carlisle residents), 2012/13

<table>
<thead>
<tr>
<th>Injury group</th>
<th>Children</th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Other injury</td>
<td>2264</td>
<td>87%</td>
<td></td>
<td>1486</td>
<td>74%</td>
<td></td>
</tr>
<tr>
<td>Road traffic collision</td>
<td>50</td>
<td>2%</td>
<td>98%</td>
<td>165</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>Sports injury</td>
<td>277</td>
<td>11%</td>
<td></td>
<td>360</td>
<td>18%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>2591</td>
<td>-</td>
<td></td>
<td>2011</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Deliberate injuries</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault</td>
<td>30</td>
<td>73%</td>
<td>2%</td>
<td>216</td>
<td>53%</td>
<td>17%</td>
</tr>
<tr>
<td>Deliberate self-harm</td>
<td>11</td>
<td>27%</td>
<td></td>
<td>190</td>
<td>47%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>41</td>
<td>-</td>
<td></td>
<td>406</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Total injuries</td>
<td>2632</td>
<td>-</td>
<td>-</td>
<td>2417</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Males accounted for under three-fifths (58%) of children and a similar proportion (57%) of young people (Figure 6a) from Carlisle local authority. Under two-fifths (38%) of children were aged four years and under, followed by over a third (34%) aged between 10 and 14 years and 28% aged between five and nine years (Figure 6b). Fewer than three in five (57%) young people were aged between 20 and 24 years.

Figure 6: Injury attendances by patient demographics (Carlisle residents), 2012/13

The overall crude rate of attendances for children from Carlisle local authority was 1,521.2 (CI 1,463.6 to 1,580.5) per 10,000 population, significantly worse than the average for Cumbria. Rates for attendances were significantly worse than Cumbria in 11 out of the 13 MSOAs in Carlisle. Rates were highest in Carlisle 009 and Carlisle 008. The crude rate for young people from Carlisle local authority was also significantly worse than the Cumbria average (Carlisle=1,798.5 [CI 1,727.5 to 1,871.7] per 10,000 population). Rates were significantly worse in nine of the MSOAs, with the highest rates in Carlisle 009, Carlisle 012 and Carlisle 011.
The disposal method of Carlisle residents attending an ED in Cumbria in 2012/13 is presented in Table 11. The majority (69%) of children were discharged and a quarter (25%) required a referral for further treatment. There were 109 children from Carlisle local authority who were admitted to hospital following an injury attendance in 2012/13 (4%). Over three-fifths (61%) of young people were discharged and 27% were referred for follow-up treatment. One hundred and ninety young people from Carlisle local authority were admitted to hospital with injuries (8%).

Table 11: Injury attendances by disposal method (Carlisle residents), 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th></th>
<th>Young people</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Admitted</td>
<td>109</td>
<td>4%</td>
<td>190</td>
<td>8%</td>
</tr>
<tr>
<td>Discharged</td>
<td>1825</td>
<td>69%</td>
<td>1465</td>
<td>61%</td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td>665</td>
<td>25%</td>
<td>655</td>
<td>27%</td>
</tr>
<tr>
<td>Other</td>
<td>33</td>
<td>1%</td>
<td>107</td>
<td>4%</td>
</tr>
<tr>
<td>Total</td>
<td>2632</td>
<td>100%</td>
<td>2417</td>
<td>100%</td>
</tr>
</tbody>
</table>

Admitted patients

Of the 109 children from Carlisle local authority who were admitted to hospital, 94% sustained unintentional injuries (n=102), the majority (91%) of which were recorded as ‘other’ injury (n=93). Over half (56%) of the children were male (n=61) and 39% were aged four years and under (n=42), followed by 36% aged between five and nine years (n=39) and 26% aged between 10 and 14 years (n=28).

Sixty-seven per cent of young people admitted had sustained unintentional injuries (n=128); 86% were categorised as ‘other’ injury (n=110), followed by 9% road traffic collisions (n=11) and 6% sports injury (n=7). Over three-quarters (76%) of deliberate injuries were due to deliberate self-harm (n=47) and under a quarter (24%) due to assault (n=15). Over three in five (62%) young people were female (n=117) and 65% were aged between 20 and 24 years (n=124) while 35% aged between 15 and 19 years.

COPELAND

There were 1,550 injury attendances in 2012/13 from children resident in Copeland local authority (Table 12). The majority (99%) of injuries in children were unintentional with ‘other’ injury making up 84% of all unintentional injuries, followed by 12% sports injury and 3% road traffic collisions. Under nine in ten (<90%) deliberate injuries in children were due to assault.

Between April 2012 and March 2013 there were 1,582 young people from Copeland local authority attending an ED due to injury (Table 12). Unintentional injuries accounted for 84% of young person’s attendances; three in five (60%) were categorised as ‘other’ injury, followed by three in ten (30%) due to sport and 10% due to a road traffic collision. Over half (51%) of deliberate injuries sustained by young people were due to deliberate self-harm and 49% were as a result of assault.
Table 12: Injury attendances by injury group (Copeland residents), 2012/13

<table>
<thead>
<tr>
<th>Injury group</th>
<th>Children</th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td><strong>Unintentional injuries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other injury</td>
<td>1292</td>
<td>84%</td>
<td>99%</td>
<td>795</td>
<td>60%</td>
<td>84%</td>
</tr>
<tr>
<td>Road traffic collision</td>
<td>53</td>
<td>3%</td>
<td>140</td>
<td>10%</td>
<td>84%</td>
<td></td>
</tr>
<tr>
<td>Sports injury</td>
<td>191</td>
<td>12%</td>
<td>399</td>
<td>30%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1536</td>
<td>-</td>
<td>1334</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Deliberate injuries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault</td>
<td>&lt;15</td>
<td>&lt;90%</td>
<td>122</td>
<td>49%</td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>Deliberate self-harm</td>
<td>***</td>
<td>&lt;15%</td>
<td>126</td>
<td>51%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>14</td>
<td>-</td>
<td>248</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total injuries</strong></td>
<td>1550</td>
<td>-</td>
<td>1582</td>
<td>-</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 7a shows that just under three-fifths (59%) of children and 63% of young people from Copeland local authority were male. Over two in five (41%) children were aged between 10 and 14 years followed by a third (33%) aged four years or less. Over half (53%) of young people were aged between 20 and 24 years (Figure 7b).

Figure 7: Injury attendances by patient demographics (Copeland residents), 2012/13

The crude rate for children from Copeland local authority attending an ED in 2012/13 was significantly worse than the average for Cumbria (Copeland=1,408.5 [CI 1,339.2 to 1,480.4] per 10,000 population). Rates for children were significantly worse in six out of the eight MSOAs in Copeland. Rates were highest in Copeland 005, Copeland 003 and Copeland 001. The overall crude rate for young people from Copeland local authority attending an ED in 2012/13 was 1,992.9 (CI 1,895.9 to 2,093.6) per 10,000 population, also worse than the average for Cumbria. Rates for young people were significantly worse than Cumbria in seven of the MSOAs and were highest in Copeland 005, Copeland 003 and Copeland 001.
Table 13 presents the disposal method for Copeland residents attending an ED between April 2012 and March 2013. Three-quarters (75%) of children were discharged and just under one-fifth (19%) required a referral for follow-up treatment. There were 82 children from Copeland local authority admitted to hospital with injuries (5%). Sixty-four per cent of young people were discharged and 27% were referred for follow-up treatment. Following an injury attendance in 2012/13, 117 young people from Copeland local authority were admitted to hospital (7%).

Table 13: Injury attendances by disposal method (Copeland residents), 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>----------------</td>
<td>---</td>
</tr>
<tr>
<td>Admitted</td>
<td>82</td>
<td>5%</td>
<td>117</td>
<td>7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discharged</td>
<td>1160</td>
<td>75%</td>
<td>1010</td>
<td>64%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td>290</td>
<td>19%</td>
<td>421</td>
<td>27%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>18</td>
<td>1%</td>
<td>34</td>
<td>2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1550</td>
<td>100%</td>
<td>1582</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Admitted patients

The majority of children from Copeland local authority admitted to hospital had sustained unintentional injuries (n=<82); 93% of which were recorded as ‘other’ injury (n=74). There was an even split between females and males (n=41 each), with 54% aged four years and under (n=44), over a quarter (26%) aged between five and nine years (n=21) and 21% aged between 10 and 14 years (n=17).

Sixty-five per cent of young people admitted had sustained deliberate injuries (n=76), the majority (88%) of which were caused by deliberate self-harm (n=67) and 12% owed to assault (n=9). Over three-quarters (76%) of unintentional injuries were categorised as ‘other’ injury and 17% sports injury (n=7). Two-thirds (66%) of young people admitted were female (n=79) and those aged between 20 and 24 years accounted for 57% of young people (n=67) followed by 43% aged between 15 and 19 years (n=50).

EDEN

Between April 2012 and March 2013, there were 290 children from Eden local authority who attended an ED in Cumbria due to injury (Table 14). ‘Other’ injury made up 87% of all unintentional injuries in children, followed by 13% owing to sport.

Table 14 also shows that there were 325 young people from Eden local authority attending an ED in 2012/13. Unintentional injuries accounted for 86% of young person’s attendances with seven in ten (70%) recorded as ‘other’ injury, one-fifth (19%) due to sport and 11% due to a road traffic collision. Over half (55%) of deliberate injuries sustained by young people were due to deliberate self-harm, with 45% caused by an assault.
Table 14: Injury attendances by injury group (Eden residents), 2012/13

<table>
<thead>
<tr>
<th>Injury group</th>
<th>Children</th>
<th></th>
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<th>Young people</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td>n</td>
<td>%</td>
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</tr>
<tr>
<td>Unintentional injuries</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other injury</td>
<td>249</td>
<td>87%</td>
<td></td>
<td>196</td>
<td>70%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Road traffic collision</td>
<td>***</td>
<td>&lt;1%</td>
<td>&lt;100%</td>
<td>31</td>
<td>11%</td>
<td></td>
<td></td>
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<tr>
<td>Sports injury</td>
<td>36</td>
<td>13%</td>
<td></td>
<td>54</td>
<td>19%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>&lt;290</td>
<td>-</td>
<td></td>
<td>281</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deliberate injuries</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault</td>
<td>***</td>
<td>25%</td>
<td>&lt;5%</td>
<td>20</td>
<td>45%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deliberate self-harm</td>
<td>***</td>
<td>75%</td>
<td></td>
<td>24</td>
<td>55%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>***</td>
<td>-</td>
<td></td>
<td>44</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total injuries</td>
<td>290</td>
<td>-</td>
<td></td>
<td>325</td>
<td>-</td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 8a shows that 58% of children and 56% of young people from Eden local authority were male. Just under half (49%) of children were aged between 10 and 14 years, followed by 26% aged between five and nine years and 25% aged four years or less. Fifty-four per cent of young people from Eden local authority were aged between 15 and 19 years (Figure 8b).

Figure 8: Injury attendances by patient demographics (Eden residents), 2012/13

The crude rate of Eden children attending an ED due to injury in 2012/13 was 374.7 (CI 332.8 to 420.4) per 10,000 population, significantly better than the average for Cumbria. Rates were highest in Eden 002 and Eden 004 for children, although these rates were significantly better than Cumbria. Crude rates for young people from Eden local authority were also significantly better than the Cumbria average (Eden=582.9 [CI 521.2 to 649.8] per 10,000 population). Though significantly better than Cumbria, rates were highest in Eden 002 and Eden 001.
Over half (53%) of the children from Eden local authority were discharged and <35% were referred for follow-up treatment. Thirty-three children from Eden were admitted to hospital with injuries following an ED attendance (11%). Under three-fifths (57%) of young people were discharged and over three in ten (<35%) required follow-up treatment. There were 37 young people from Eden local authority admitted to hospital following an injury attendance (11%).

Table 15: Injury attendances by disposal method (Eden residents), 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th></th>
<th></th>
<th></th>
<th>Young people</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td></td>
<td>n</td>
<td>%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admitted</td>
<td>33</td>
<td>11%</td>
<td></td>
<td></td>
<td>37</td>
<td>11%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discharged</td>
<td>155</td>
<td>53%</td>
<td></td>
<td></td>
<td>184</td>
<td>57%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td>&lt;100</td>
<td>&lt;35%</td>
<td></td>
<td></td>
<td>&lt;105</td>
<td>&lt;35%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>***</td>
<td>&lt;5%</td>
<td></td>
<td></td>
<td>***</td>
<td>&lt;5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>290</td>
<td>100%</td>
<td></td>
<td></td>
<td>325</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Admitted patients

Of the 33 children from Eden local authority admitted to hospital with injuries, 91% sustained unintentional injuries (n=<33); all (100%) were categorised as ‘other’ injury. Sixty-four per cent of children were male (n=21) and 55% were aged between 10 and 14 years (n=18), followed by 24% aged four years and under (n=8) and 21% aged between five and nine years (n=7).

Of the 37 young people admitted, 73% sustained unintentional injuries (n=27); 37% were due to a road traffic collision (n=10). All deliberate injury attendances made by young people admitted to hospital were due to deliberate self-harm (n=10; 100%). Over half (51%) of young people admitted were female (n=19) and 57% were aged between 20 and 24 years (n=21) and 43% aged between 15 and 19 years (n=16).

SOUTH LAKELAND

There were 186 children who attended an ED in Cumbria in 2012/13 resident in South Lakeland local authority (Table 16). Over three in five (62%) unintentional injuries were recorded as ‘other’ injury and under two in five (38%) were due to sport.

Between April 2012 and March 2013 there were 200 young people presenting to an ED with injuries (Table 16). Unintentional injuries accounted for 85% of young person’s attendances; of these, two-fifths (40%) were due to sport and 23% were caused by road traffic collisions. Under three-fifths (58%) of deliberate injuries were sustained by assault and over two in five (42%) were due to deliberate self-harm.
Males accounted for 64% of children and 73% of young people from South Lakeland local authority (Figure 9a). Over half (53%) of children were aged between 10 and 14 years, followed by 26% aged between five and nine years and 20% aged four years or less (Figure 9b). Fifty-four per cent of young people were aged between 15 and 19 years.

The crude rate for South Lakeland children attending an ED was significantly better than the average for Cumbria (South Lakeland=128.4 [CI 110.6 to 148.3] per 10,000 population). Although significantly better than Cumbria, crude rates were highest in South Lakeland 012 and South Lakeland 014. The crude rate for young people was 199.8 (CI 173.0 to 229.4) per 10,000 population, also significantly better than the Cumbria average. Rates were highest for young people in South Lakeland 012, however, there was no significant difference when compared to Cumbria.
Over half (52%) of the children attending an ED in Cumbria were discharged and <45% were referred for follow-up treatment. There were five children from South Lakeland local authority admitted to hospital in 2012/13 due to injury (3%). Over half (52%) of young people required a referral or follow-up treatment and 37% were discharged. Eleven young people from South Lakeland local authority were admitted to hospital following an injury attendance (6%).

Table 17: Injury attendances by disposal method (South Lakeland residents), 2012/13

<table>
<thead>
<tr>
<th>Disposal method</th>
<th>Children</th>
<th></th>
<th>Young people</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Admitted</td>
<td>5</td>
<td>3%</td>
<td>11</td>
<td>6%</td>
</tr>
<tr>
<td>Discharged</td>
<td>96</td>
<td>52%</td>
<td>73</td>
<td>37%</td>
</tr>
<tr>
<td>Follow-up/referral</td>
<td>&lt;85</td>
<td>&lt;45%</td>
<td>104</td>
<td>52%</td>
</tr>
<tr>
<td>Other</td>
<td>***</td>
<td>&lt;5%</td>
<td>12</td>
<td>6%</td>
</tr>
<tr>
<td>Total</td>
<td>186</td>
<td>100%</td>
<td>200</td>
<td>100%</td>
</tr>
</tbody>
</table>

Due to small numbers of children and young people from South Lakeland admitted to hospital, the injury group and patient demographics of admitted patients have not been provided in order to maintain patient confidentiality.
## APPENDICES

### Appendix 1: Number, crude rate and confidence intervals of injury attendances per 10,000 resident population by MSOA of residence (Children), 2012/13

<table>
<thead>
<tr>
<th>MSOA code</th>
<th>MSOA name</th>
<th>n</th>
<th>Crude rate per 10,000</th>
<th>95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lower limit</td>
<td>Upper limit</td>
</tr>
<tr>
<td>E02003965</td>
<td>Allerdale 001</td>
<td>147</td>
<td>910.8</td>
<td>769.5</td>
</tr>
<tr>
<td>E02003966</td>
<td>Allerdale 002</td>
<td>85</td>
<td>875.4</td>
<td>699.2</td>
</tr>
<tr>
<td>E02003967</td>
<td>Allerdale 003</td>
<td>129</td>
<td>1014.9</td>
<td>847.4</td>
</tr>
<tr>
<td>E02003968</td>
<td>Allerdale 004</td>
<td>136</td>
<td>1042.9</td>
<td>875.0</td>
</tr>
<tr>
<td>E02003969</td>
<td>Allerdale 005</td>
<td>125</td>
<td>997.6</td>
<td>830.4</td>
</tr>
<tr>
<td>E02003970</td>
<td>Allerdale 006</td>
<td>92</td>
<td>756.6</td>
<td>609.9</td>
</tr>
<tr>
<td>E02003971</td>
<td>Allerdale 007</td>
<td>106</td>
<td>889.3</td>
<td>728.1</td>
</tr>
<tr>
<td>E02003972</td>
<td>Allerdale 008</td>
<td>135</td>
<td>907.9</td>
<td>761.2</td>
</tr>
<tr>
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<td>Allerdale 009</td>
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<td>1218.0</td>
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</tr>
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<td>Allerdale 010</td>
<td>150</td>
<td>1165.5</td>
<td>986.5</td>
</tr>
<tr>
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<td>1048.5</td>
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</tr>
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<td>E02003978</td>
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<td>618.5</td>
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<td>692.5</td>
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<td>642.5</td>
<td>517.9</td>
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</tr>
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<td>Carlisle 011</td>
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<td>1442.0</td>
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</table>
Appendix 1 (continued): Number, crude rate and confidence intervals of injury attendances per 10,000 resident population by MSOA of residence (Children), 2012/13

<table>
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<tr>
<th>MSOA code</th>
<th>MSOA name</th>
<th>n</th>
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<th>95% confidence interval</th>
<th>Lower limit</th>
<th>Upper limit</th>
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