

Emergency department visits for injuries in children (≤ 18 years of age)

Resource for Indicator Standards (RIS)
Health Analytics Branch, Ministry of Health and Long-Term Care

Indicator description

RIS indicator name

Emergency department visits for injuries in children (≤ 18 years of age)

Other names for this indicator

N/A

Indicator description

This indicator measures the number and rate of visits to the emergency department for intentional and unintentional causes of injury in children.

Accountability agreement(s) or ministry initiative(s) the indicator supports

- The Quarterly

Numerator

Data source

National Ambulatory Care Reporting System (NACRCS)

Inclusion/exclusion criteria

Includes:

1. Emergency department visits for injuries:
 - a. Unintentional causes of injury (ICD-10 codes): V0-X59, Y85-Y86;
 - b. Intentional causes of injury (ICD 10 codes): X60-Y09, Y870-Y871;
2. Children ≤ 18 years of age;
3. Unscheduled emergency visits to emergency departments or urgent care centres (i.e. AM case type = EMG);
4. Ontario residents (province of residence = ON).

Excludes:

1. External causes classified as: undetermined intent; legal intervention and operations of war; and complications of medical and surgical care (adverse effects).

Calculation

Steps:

1. Apply inclusion criteria, and obtain the number of emergency visits.
2. Multiply by 10,000.

Denominator

Data source

Population Estimates and Projections, Statistics Canada & Ontario Ministry of Finance

Inclusion/exclusion criteria

Includes:

1. Ontario residents (province of residence = ON);
2. Children ≤ 18 years of age.

Excludes:

N/A

Calculation

Steps:

1. Total number of Ontario resident's age < 18 years.
2. The yearly total is used for each time period reported.

Timing and geography

Timing/frequency of release

How often and when data are being released (e.g., be as specific as possible...data are released annually in mid-May)

Final NACRS data by fiscal year are available annually (usually by July); interim data are updated quarterly.

Trending

Years available for trending

Data using ICD-10-CA codes are available as of 2002/03 fiscal year (data prior to that time are potentially incomplete).

Levels of comparability

Levels of geography for comparison

Data are available at the Public Health Unit (PHU), Local Health Integration Network (LHIN), provincial, and other levels of geography including postal code. PHU of patient is generally used.

Additional information

Limitations

Specific limitations

Population estimates for PHUs are not provided by Statistics Canada. At the Ministry of Health and Long-Term Care, they are derived from municipality estimates.

Population projections are not provided at the municipality level. Therefore, population projections for PHUs are derived by applying the 2-year average annual growth to the most recent year's estimate.

Comments

Additional information regarding the calculation, interpretation, data source, etc.

Because of differences in the database structure, the data extraction method will differ depending on the NACRS data source used, e.g. IntelliHEALTH ONTARIO vs. Health Data Branch server.

References

Provide URLs of any key references (e.g., Diabetes in Canada, [http:// ...](#))

1. [Association of Public Health Epidemiologists for Ontario \(APHEO\) Core Indicators](#)

Contact information

For more information about this indicator, please contact RIS@ontario.ca.

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2013-07-03

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