

EPAC - Continuous Survey on Home and Leisure injuries (HLA)

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General

Identification

Detailed name Continuous Survey on Home and Leisure injuries (HLA)

Sign or acronym EPAC

CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation CCTIRS: 13547 CNIL: Hgp08160122 (ongoing)

General Aspects

Medical area Emergency medicine
Traumatology

Pathology (details) prevention

Health determinants Intoxication
Lifestyle and behavior
Social and psychosocial factors

Keywords domestic accidents, trauma, hospital emergencies, daily life, home and leisure injury

Scientific investigator(s) (Contact)

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Organization InVS

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Unit	DMCT-Unité traumatismes
Organization	InVS
Collaborations	
Funding	
Funding status	Public
Details	InVS
Governance of the database	
Sponsor(s) or organisation(s) responsible	InVS
Organisation status	Public
Additional contact	
Main features	
Type of database	
Type of database	Morbidity registers
Additional information regarding sample selection.	Comprehensive collection of EPAC data throughout hospitals participating in EPAC. Based on data from the Annual Statistical Survey of Healthcare Institutions (Statistique Annuelle des Établissements) in 1997, 1998 and 1999, participating hospitals accounted for just over 3% of overall activity in emergency departments throughout metropolitan France. Recorded HLA data are not representative. However, there is a variety of different activities and situations in participating hospitals: size (large, small), geographical location (sea, mountains, flat, tourist or non-tourist region, etc.), university hospital (or not). The inclusion of a post code aims to improve information on database representativity.

Database objective

Main objective

The main objective of the Continuous Survey on Home and Leisure injuries is to provide descriptive, detailed, accurate and current results on the number and characteristics of home and leisure accidents (HLA) occurring in France and involving the use of emergency hospital care, including the product(s) implicated in the accident, the location of the accident, the activity when the accident occurred and the accident mechanism.

Initially implemented in 1986 as part of a European framework under the name EHLASS (European home and leisure accident surveillance system), the French section of the European IDB (Injury Data Base) surveillance network was formed in recent years.

Inclusion criteria

Comprehensive data collection for all patients involved in an accident and attending the emergency department of participating EPAC hospitals. Between seven and eleven hospitals have participated in the collection of data every year since 1986. All accidents or unintentional injuries that are not work- or road-related accidents are recorded.

Population type

Age

Newborns (birth to 28 days)
Infant (28 days to 2 years)
Early childhood (2 to 5 years)
Childhood (6 to 13 years)
Adolescence (13 to 18 years)
Adulthood (19 to 24 years)
Adulthood (25 to 44 years)
Adulthood (45 to 64 years)
Elderly (65 to 79 years)
Great age (80 years and more)

Population covered

General population

Gender

Male
Woman

Geography area

National

Detail of the geography area

Metropolitan France and Réunion Island.

Data collection

Dates

Date of first collection (YYYY or MM/YYYY)	1986
Size of the database	
Size of the database (number of individuals)	Greater than 20 000 individuals
Details of the number of individuals	Almost 2,000,000 records available to date since 1986. 2012: 125,000.
Data	
Database activity	Current data collection
Type of data collected	Clinical data Declarative data Administrative data
Clinical data (detail)	Medical registration
Details of collected clinical data	Injuries, severity, injured parties, treatment.
Declarative data (detail)	Face to face interview
Details of collected declarative data	Circumstances of the accident: product, activity, location, mechanism.
Administrative data (detail)	Age, sex, Socioprofessional Categories, residence postal code.
Presence of a biobank	No
Health parameters studied	Health event/morbidity Health care consumption and services
Care consumption (detail)	Hospitalization
Procedures	
Data collection method	Compilation from medical and paramedical emergency reports. Data formatting, coding, entry and validation by individual trained in home and leisure accidents and specialising in this field. The hospital's participation in the network is agreed with the French Institute for Public Health Surveillance. Quality analyses are carried out annually in each hospital to check data completeness, quality and consistency. Return results are organised regularly. Information and training meeting are regularly held with coders and network advisors.

Classifications used	EPAC classifications are those defined at European level for the collection of interest items for home and leisure accidents (version V2000). This includes injuries, injured parties, products, activity, location, mechanism of the accident, as well as type of sport for a sports accident. Socioprofessional categories and occupation are coded according to the most aggregated classifications currently used in France. Collection characteristics are outlined in an EPAC reference guide published in a report by the health surveillance institute in 2005, available on the institute's website and supplemented by enrolment notes and coding specific HLA cases.
Quality procedure(s) used	On-site quality analyses, 12 days randomly selected throughout the year to assess data quality and completeness.
Participant monitoring	No
Links to administrative sources	No
Promotion and access	
Promotion	
Link to the document	http://www.invs.sante.fr/Dossiers-thematiques/Maladies-chroniques-et-traumatismes/Traumatismes/Enquetes-Systemes-de-surveillance/Recueils-permanents/Enquete-Permanente-sur-les-Accidents-de-la-Vie-Courante-EPAC
Access	
Terms of data access (charter for data provision, format of data, availability delay)	Access to results on InVS website. A section of the site is dedicated to accidents and trauma injuries and contains EPAC results.