

As part of the Trauma and Injury Intelligence Group (TIIG) injury surveillance system, Arrowe Park Emergency Department (ED) collect detailed data from assault patients (at reception) concerning the circumstances of their assault, to support local violence prevention activity. This report provides a summary of data collected from 1,591 assault attendances to the ED between April 2011 and March 2012. More detailed data (e.g. assault location) are available for community safety, and other relevant partners, via the author.

Patient demographics

More than half (52%) of assault attendees were aged 15 to 29 years and the majority (69%) were male (Table 1). Males aged 15 to 29 years accounted for almost two-fifths (36%) of all assault attendees.

Time and date of ED attendance

The highest number of assault attendees presented at the ED during May 2011 (n=154), whilst March had the lowest recorded number (n=103) (Figure 1). Table 2 shows the time and date of assault attendances between April 2011 and March 2012. Almost one in four (23%) of all assault attendees presented on a Sunday and almost three in ten (28%) of these occurred between midnight and 3.59am. Similarly almost one in four (23%) of assault attendees presented on a Saturday and three in ten (31%) of these occurred between midnight and 3.59am.

Arrival mode and source of referral

Figure 2 shows the arrival mode of all assault attendees presenting to Arrowe Park ED between April

2011 and March 2012. Almost half (47%) of assault attendees arrived by private transport, while 45% arrived by ambulance. Table 3 shows that the majority (86%) of attendees self referred, whilst 10% of attendees were referred by the emergency services.

Location of assault

Table 4a gives the location of assault. Almost four in ten (38%) of assaults occurred in a public space, 18% were reported to have occurred in the home and 16% occurred on a street/road. Of all assaults that occurred in a public space or on the street/road, the majority (75% and 82% respectively) of victims were male. Of all assaults that occurred in the home, 59% of victims were female.

Table 4b shows the location in which assaults were reported to have taken place. Birkenhead Town Centre showed the highest prevalence of assault, accounting for 29% of all assault attendances between April 2011 and March 2012. The second highest proportion (11%) of assaults was reported to have taken place in Wallasey/Seacombe.

Alcohol consumption

Table 5 shows the number of assault attendees who had or had not consumed alcohol in the three hours prior to the incident. 46% of attendees had not consumed alcohol and 48% had. Of the 48% who had, 75% were male. Table 6 shows that December had the highest proportion of assault attendances reporting that they had consumed alcohol (59%).

Weapon / time of incident

From May 2010, data has been collected on the time and day of the assault as well as weapon used. However between April 2011 and March 2012, a small proportion of data was missing (see Box 1). Where data was recorded, assaults were most prevalent between 10.00pm and 3.59am (81%) and least prevalent between 10.00am and 11.59am (0.004%). Where reported, assaults were most prevalent on a Saturday and Sunday (45%). Almost three quarters (72%) of all assaults used a body part as a weapon.

Of the 48% of assault victims who reported to have consumed alcohol in the three hours prior to the incident, 58% stated the incident occurred on a Saturday or Sunday, and 68% between midnight and 1.59am.

Informing the police

Data was collected on whether or not assault attendees had or intended to inform the police of the incident. A small proportion of this data was missing (see Box 1). Of the data collected, almost two thirds (65%) assault attendees said that they had informed or intended to inform the police of the incident.

Further information regarding the attacker

Data was also collected on the assault attendee's relationship to the attacker, whether or not this was a repeat incident, the number of attackers and whether or not the patient perceived their attacker to be drunk. A small proportion of this data was missing (see Box 1). Of the data collected, over half (56%) of all victims reported that they had been assaulted by a stranger. Over seven in ten (72%) victims reported that they had not been assaulted by the attacker before and over one third of victims (36%) believed their attacker to be drunk. For six in ten (60%) of assaults, victims reported that they were attacked by one person. Over a fifth of assault victims (22%) reported that they were attacked by more than two people.

Disposal

Table 7 shows the disposal method of assault attendees. Almost half (48%) of all assault attendees were discharged without follow-up, while 13% were admitted to hospital.

Patient area of residence

Figures 3a and 3b show the number of assault attendees to Arrowe Park ED between April 2011 and

Box 1: Data collection: quality and quantity

Overall, data collection is excellent and in line with national guidance which recommends that detailed assault data are collected for at least 70% of ED assault patients, to be most effective for violence prevention. A small proportion of data (1%) are missing for the following questions key questions: weapon of use, police informed, relationship with attacker, number of attackers, repeat incident and whether or not the patient perceived their attacker to be drunk. A higher proportion of data is missing for day of incident (51%).

March 2012 by area of residence according to lower super output area (LSOA) and middle super output area (MSOA). The top five LSOAs on Wirral for assault attendances to Arrowe Park ED were:

- E01007126 (32)
- E01007127 (30)
- E01007129 (29)
- E01007122 (26)
- E01007289 (26)

The top five MSOAs on Wirral for assault attendances to Arrowe Park ED were:

- E02001482 (123)
- E02001487 (99)
- E02001474 (88)
- E02001493 (77)
- E02001474 (54)

Figures 4a and 4b show the reported location of assaults for April 2011 to March 2012, (obtained from free text data; 93% completion) by LSOA and MSOA. The top five reported LSOA assault locations on Wirral were:

- E01007126 (95)
- E01007160 (85)
- E01007128 (73)
- E01006650 (45)
- E01007129 (45)

The top five reported MSOA assault locations on Wirral were:

- E02001482 (239)
- E02001486 (118)
- E02001379 (84)
- E02001487 (84)
- E02001493 (73)

Table 1: Assault attendees by gender and age group, Arrowe Park ED, April 2011 to March 2012¹

Gender	0 - 4	5 - 14	15 - 29	30 - 59	60 plus	Total	%
Female	***	21	247	213	<15	496	31
Male	***	36	580	452	<30	1095	69
Total	***	57	827	665	<45	1591	100

Figure 1: Assault attendances by gender and month, Arrowe Park ED, April 2011 to March 2012

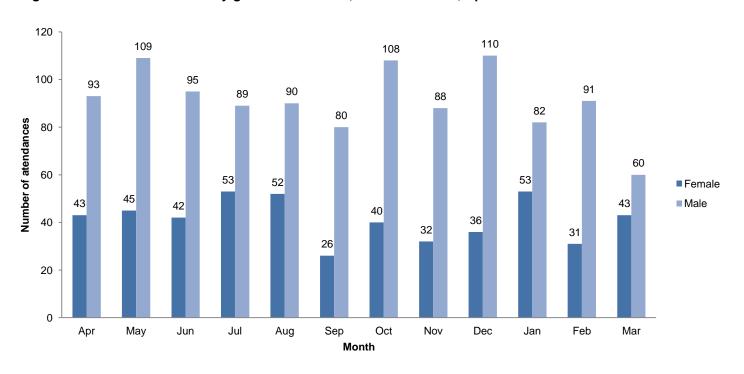


Table 2: Assaults attendances by time and day of attendance, Arrowe Park ED, April 2011 to March 2012

						Т	ime group							
Day	0 - 1.59	2 - 3.59	4 - 5.59	6 - 7.59	8 - 9.59	10 - 11.59	12 - 13.59	14 - 15.59	16 - 17.59	18 - 19.59	20 - 21.59	22 - 23.59	Total	%
Sun	53	49	32	16	15	34	33	22	18	31	31	29	363	23
Mon	23	15	16	***	<10	27	23	27	19	19	24	24	228	14
Tue	17	<15	***	***	<10	8	17	20	15	19	23	15	160	10
Wed	8	***	5	***	9	20	11	12	11	15	13	15	125	8
Thu	10	15	***	***	7	18	14	10	15	13	23	21	151	9
Fri	17	21	9	***	***	11	14	11	21	13	29	45	197	12
Sat	62	51	43	13	10	24	28	21	25	28	26	36	367	23
Total	190	168	112	41	59	142	140	123	124	138	169	185	1591	100

¹Please note that, throughout this report, where attendance numbers are less than five and can be back calculated from totals they have been suppressed (***). Where there is only one number less than 5, two numbers will be suppressed at the next level (e.g.<6).

Figure 2: Assault attendances by arrival mode, Arrowe Park ED, April 2011 to March 2012

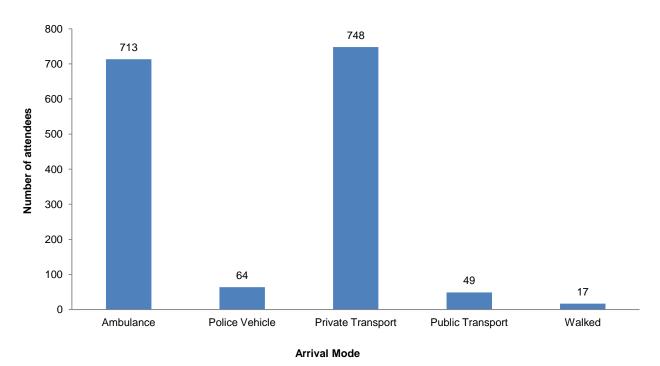


Table 3: Assault attendances by source of referral, Arrowe Park ED, April 2011 to March 2012^{2,3}

Source of referral	Number	%
Self referral	1369	86
Emergency services	155	10
Police	41	3
Other	17	1
Health care provider: same or other	***	<1
Work	***	<1
Unknown	***	<1
General medical practitioner	***	<1
Educational establishment	***	<1
Local authority social services	***	<1
Total	1591	100

² Please note that where attendance numbers are less than five and can be back calculated from totals they have been suppressed (***). <1% represents cases where attendance numbers were less than five but back calculations are not possible. 0% is used where there were no attendances.

Please also note percentages might not total one hundred due to rounding.

Table 4: Assault attendances by a) location of incident and gender, and b) general area of incident location, Arrowe Park ED, April 2011 to March 2012

4a) 4b)

	Gene	der		
Location	Female	Male	Total	%
Public space	148	450	598	38
Domestic violence/home	167	114	281	18
Street/road	46	205	251	16
Public house	18	81	99	6
Other	38	40	78	5
Public park	17	55	72	5
Night club	12	48	60	4
Work	21	19	40	3
Unknown	5	14	19	1
School	***	<17	18	1
Railway station	***	<13	15	1
Details withheld by patient	***	<8	11	1
Leisure facility	5	5	10	1
Car park	***	<7	9	1
On public transport	***	***	***	0
Shop/shopping centre	***	<7	7	0
Bus station	***	<5	5	0
Hospital	***	***	***	0
Road/car rage	***	***	***	0
Football ground/crowd	***	***	***	0
Total	496	1095	1591	100

General area of incident location	Number	%
Birkenhead city centre	461	29
Wallasey/Seacombe	175	11
Bidston/Prenton/Oxton	151	9
New Ferry/Rock Ferry	109	7
Moreton/Leasowe	107	7
Other	98	6
Liverpool city centre	94	6
Greasby/Upton/Arrowe Park	92	6
Bromborough/Eastham	67	4
New Brighton	49	3
Bebington	42	3
Heswall/Pensby/Thingwall	35	2
Meols/Frankby/Hoylake	26	2
Neston/Parkgate	20	1
West Kirby	19	1
Unknown	19	1
Refused to answer	13	1
Ellesmere Port/Cheshire Oaks	12	1
Hooton	***	0
Barnston	***	0
Total	1591	100

Table 5: Assault attendances by whether the patient had consumed alcohol within three hours prior to the incident, Arrowe Park ED, April 2011 to March 2012

		Gender						
Alcohol consumed	Female	Male	Total	%				
Yes	187	575	762	48				
No	273	456	729	46				
Unable to answer	31	47	78	5				
Unknown	***	<11	14	1				
Refused to answer	***	<8	8	1				
Total	496	1095	1591	100				

Table 6: Assaults attendances by whether the patient had consumed alcohol within three hours prior to the incident by month, Arrowe Park ED, April 2011 to March 2012

		Month												
Alcohol consumed	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total	%
Yes	58	79	60	69	<70	50	73	61	86	63	56	46	762	48
No	65	65	69	67	79	<55	65	53	<60	56	56	49	729	46
Unknown/ unable/ refused to answer	13	10	8	6	***	<8	10	6	<6	16	10	8	100	6
Total	136	154	137	142	142	106	148	120	146	135	122	103	1591	100

Table 7: Assault attendees by disposal method, Arrowe Park ED, April 2011 to March 2012

Disposal method	Number	%
Discharged - No follow-up required	764	48
Admitted	199	13
Left department before assessment	171	11
Discharged - GP to follow-up	104	7
Discharged – Ear, nose and throat clinic	79	5
Discharged - Max-fax clinic	75	5
Left department against advice	48	3
Discharged - Fracture clinic	39	2
Discharged other	36	2
Discharged - GP practice nurse	27	2
Discharged - Ophthalmology clinic	17	1
Transferred to other health care provider	14	1
Discharged - Adult ED clinic review	11	1
Discharged - Paediatric ED clinic review	***	0
Died in department	***	0
Discharged - district nurse to follow-up	***	0
Discharged - physiotherapy follow-up	***	0
Discharged - walk-in centre to follow-up	***	0
Discharged - Primary care assessment unit	***	0
Total	1591	100

Figure 3: Assault attendances by a) lower super output area of residence and b) middle super output area of residence, Arrowe Park ED, April 2011 to March 2012

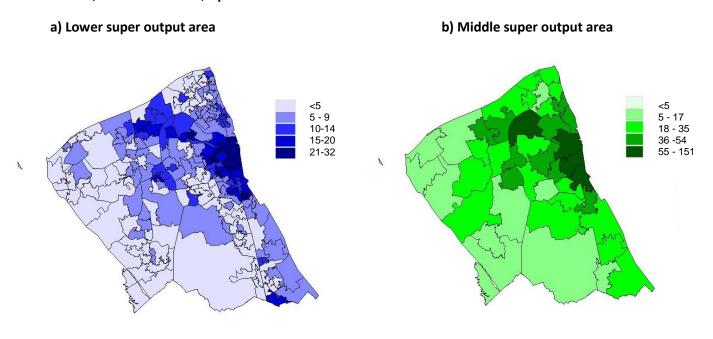
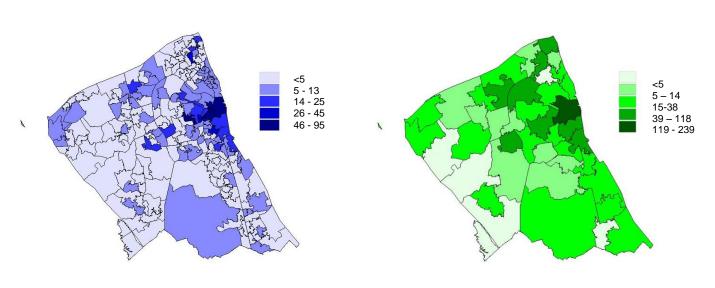


Figure 4: Assault attendances by a) lower super output area of reported location of incident and b) middle super output area of reported location of incident, Arrowe Park ED, April 2011 to March 2012



b) Middle super output area



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