

# **Review article: Emergency department data sharing to reduce alcohol-related violence: a systematic review of the feasibility and effectiveness of community-level interventions**

Author(s)

Droste N, Miller P, Baker T

Published

2014

Publisher

Emergency Medicine Australasia

Type

Journal article

Volume

26

Issue

4

Page(s)

326-35

## **Abstract**

The present paper aims to review current evidence for the effectiveness and/or feasibility of using inter-agency data sharing of ED recorded assault information to direct interventions reducing alcohol-related or nightlife assaults, injury or violence. Potential data-sharing partners involve police, local council, liquor licensing regulators and venue management. A systematic review of the peer-reviewed literature was conducted. The initial search discovered 19,506 articles. After removal of duplicates and articles not meeting review criteria, n=8 articles were included in quantitative and narrative synthesis. Seven of eight studies were conducted in UK EDs, with the remaining study presenting Australian data. All studies included in the review deemed data sharing a worthwhile pursuit. All studies attempting to measure intervention effectiveness reported substantial reductions of assaults and ED attendances post-intervention, with one reporting no change. Negative logistic feasibility concerns were minimal, with general consensus among authors being that data-sharing protocols and partnerships could be easily implemented into modern ED triage systems, with minimal cost, staff workload burden, impact to patient safety, service and anonymity, or risk of harm displacement to other licensed venues, or increase to length of patient stay. However, one study reported a potential harm displacement effect to streets surrounding intervention venues. In future, data-sharing systems should triangulate ED, police and ambulance data sources, and assess intervention effectiveness using randomised controlled trials that account for variations in venue capacity, fluctuations in ED attendance and population levels, seasonal variations in assault and injury, and control for concurrent interventions.

Web Link

<http://www.ncbi.nlm.nih.gov/pubmed/24931278>

[View PDF](#)