

# National Healthcare Agreement: PI 16—Potentially avoidable deaths, 2022

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# National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2022

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Progress measure
<b>Short name:</b>	PI 16–Potentially avoidable deaths, 2022
<b>METEOR identifier:</b>	740864
<b>Registration status:</b>	<a href="#">Health!</a> , Standard 24/09/2021
<b>Description:</b>	Deaths from conditions that are potentially preventable through individualised care and/or treatable through existing primary or hospital care.
<b>Indicator set:</b>	<a href="#">National Healthcare Agreement (2022)</a> <a href="#">Health!</a> , Standard 24/09/2021
<b>Outcome area:</b>	<a href="#">Primary and Community Health</a> <a href="#">Health!</a> , Standard 07/07/2010

## Collection and usage attributes

<b>Population group age to:</b>	Under 75 years
<b>Computation description:</b>	Deaths are defined as avoidable in the context of the present health system.  International Classification of Diseases (ICD-10, 2019 version) codes in scope are as specified below:

**Table 1: Potentially avoidable deaths International Classification of Disease (ICD-10) Codes**

Cause of death groups	ICD-10 Codes	Limits (age, sex)
<b>Infections</b>		
Selected invasive infections	A38–A41, A46, A48.1, G00, G03, J02.0, J13–J16, J18, L03	
Viral pneumonia and influenza	J10–J12	
HIV/AIDS	B20–B24	
<b>Cancer</b>		
Cancer of the colon, sigmoid, rectum and anus	C18–C21, C26.0	
Skin	C43, C44	
Breast	C50	Female
Cervix	C53	
Prostate	C61	
Kidney	C64	
Thyroid	C73	
Hodgkin's disease	C81	

Acute lymphoid leukaemia/Acute lymphoblastic leukaemia	C91.0	0-44 years
<b>Diabetes</b>	E10-E14	
<b>Diseases of the circulatory system</b>		
Rheumatic and other valvular heart disease	I00-I09, I33-I37	
Hypertensive heart and renal disease	I10-I13	
Ischaemic heart disease	I20-I25	
Cerebrovascular diseases	I60-I69	
Heart failure	I50, I51.1, I51.2, I51.4, I51.5	
Pulmonary embolism	I26	
<b>Diseases of the genitourinary system</b>		
Renal failure	N17-N19	
<b>Diseases of the respiratory system</b>		
COPD	J40-J44	
Asthma	J45, J46	
<b>Diseases of the digestive system</b>		
Peptic ulcer disease	K25-K27	
<b>Maternal &amp; infant causes</b>		
Complications of the perinatal period	P00-P96	
<b>Other conditions</b>		
Complications of pregnancy, labour or the puerperium	O00-O99	
<b>Selected external causes of morbidity and mortality</b>		
Falls	W00-W19	
Fires, burns	X00-X09	
Suicide and self-inflicted injuries	X60-X84, Y87.0	
Misadventures to patients during surgical and medical care	Y60-Y69	
Medical devices associated with adverse incidents in diagnostic and therapeutic use	Y70-Y82	
Surgical and other medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure	Y83, Y84	
<b>Other external causes of morbidity and mortality</b>		
Transport accidents	V01-V99	
Exposure to inanimate mechanical forces	W20-W49	
Exposure to animate mechanical forces	W50-W64	
Accidental drowning and submersion	W65-W74	
Other accidental threats to breathing	W75-W84	
Exposure to electric current, radiation and extreme ambient air temperature and pressure	W85-W99	
Contact with heat and hot substances	X10-X19	

Contact with venomous animals and plants	X20–X29	
Exposure to forces of nature	X30–X39	
Accidental poisoning by and exposure to noxious substances	X40–X49	
Overexertion, travel and privation	X50–X57	
Accidental exposure to other and unspecified factors	X58,X59	
Assault	X85–Y09	
Event of undetermined intent	Y10–Y34	
Legal interventions and operations of war	Y35, Y36	
Drugs, medicaments and biological substances causing adverse effects in therapeutic use	Y40–Y59	
Sequelae of external causes of morbidity and mortality	Y85, Y86, Y87.1–Y89	

Rates are directly age-standardised to the 2001 Australian population.

Variability bands are to be calculated for single-year rates using the method below.

Presented per 100,000 population.

**Computation:**

Number

Crude rate: 100,000 x (Numerator ÷ Denominator)

Variability bands are to be calculated for single-year rates using the following method for estimating 95% confidence intervals:

*Age-standardised rate*

$$CI (ASR)_{95\%} = ASR \pm 1.96 \times \sqrt{\sum_{i=1}^i \frac{w_i^2 d_i}{n_i^2}}$$

Where  $w_i$  = the proportion of the standard population in age group  $i$

$d_i$  = the number of deaths in age group  $i$

$n_i$  = the number of people in the population in age group  $i$

**Numerator:**

Number of deaths of persons aged less than 75 categorised as potentially avoidable

**Numerator data elements:**

**Data Element / Data Set**

Person—age

**Data Source**

[ABS Causes of Death Collection](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Person—underlying cause of death, code \(ICD-10 2016 version\) ANN{.N}](#)

**Data Source**

[ABS Causes of Death Collection](#)

**Guide for use**

Data source type: Administrative by-product data

**Denominator:**

Population aged less than 75

**Denominator data elements:**

**Data Element / Data Set**

Person—projected Indigenous population of Australia, total people N[N(7)]

**Data Source**

[ABS Indigenous estimates and projections \(2016 Census-based\)](#)

**Guide for use**

Data source type: Census-based plus administrative by-product data

**Data Element / Data Set**

[Person—age, total years N\[NN\]](#)

**Data Source**

[ABS Estimated resident population \(2016 Census-based\)](#)

**Guide for use**

Data source type: Census-based plus administrative by-product data

**Data Element / Data Set**

[Person—age, total years N\[NN\]](#)

**Data Source**

[ABS Indigenous estimates and projections \(2016 Census-based\)](#)

**Guide for use**

Data source type: Census-based plus administrative by-product data

**Data Element / Data Set**

[Person—estimated resident population of Australia, total people N\[N\(7\)\]](#)

**Data Source**

[ABS Estimated resident population \(2016 Census-based\)](#)

**Guide for use**

Data source type: Census-based plus administrative by-product data

**Disaggregation:**

2017, 2018, 2019 (resupplied for revision to ABS cause of death data), 2020—State and territory.

2017, 2018, 2019 (updated for revision to ABS cause of death data), 2020—Nationally, by Indigenous status (not reported).

2013–2017, 2014–2018, 2015–2019 (updated for revision to ABS cause of death data), 2016–2020—State and territory, by Indigenous status.

Some disaggregations may result in numbers too small for publication. Disaggregation by Indigenous status will be based on data only from jurisdictions for which the quality of Indigenous identification is considered acceptable—New South Wales, Queensland, South Australia, Western Australia, Northern Territory.

**Disaggregation data elements:**

**Data Element / Data Set**

[Person—Indigenous status, code N](#)

**Data Source**

[ABS Causes of Death Collection](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Person—area of usual residence, statistical area level 2 \(SA2\) code \(ASGS 2016\) N\(9\)](#)

**Data Source**

[ABS Causes of Death Collection](#)

**Guide for use**

Data source type: Administrative by-product data  
Used for disaggregation by state/territory

**Data Element / Data Set**

[Person—underlying cause of death, code \(ICD-10 2016 version\) ANN{.N}](#)

**Data Source**

[ABS Causes of Death Collection](#)

**Guide for use**

Data source type: Administrative by-product data

**Comments:**

Most recent data available for 2022 National Healthcare Agreement performance reporting:

- 2020 (total population and Indigenous status at national level)
- aggregated data 2016–2020 (Indigenous status).

A number of updates to the ICD-10 were applied to 2013 and subsequent years causes of death data. Details of the impact of these changes on the mortality data are described in [ABS Implementation of Iris Software: Understanding Coding and Process Improvements](#).

Data from 2018 onwards was coded using an updated version of Iris, the automated cause of death coding software. Coding updates as a result of this process are described in [Update to Iris coding software: Implementing WHO updates and improvement in coding processes](#).

2013 data are coded using ICD-10 (2013 version). 2014, 2015, 2016 and 2017 data are coded using ICD-10 (2015 version). 2018 data are coded using ICD-10 (2016 version). 2019 and 2020 data are coded using ICD-10 (2019 version).

Due to the small number of Indigenous deaths reported each year, 5-year combined data will be reported for state and territory disaggregations.

Estimated Residential Population (ERP) data for the total population and the Indigenous population are sourced from ERP rebased after the 2016 Census.

Data by remoteness may be available, pending assessment of data quality.

Data are based on the state or territory of usual residence of the deceased, regardless of where in Australia the death occurred and was registered.

Registrars of Births, Deaths and Marriages in New South Wales, Queensland and the Northern Territory took a number of initiatives in recent years to improve processing systems and timeliness of registrations of births. These issues affected the birth counts of these jurisdictions. Care should therefore be taken when interpreting changes in mortality rates for these jurisdictions and national totals.

Rates derived from administrative data counts are not subject to sampling error but might be subject to natural random variation, especially for small counts. Variability bands associated with each estimate are reported to account for this (for example,  $80.0 \pm 2.7$ ). Variability bands can be used for comparisons within jurisdictions or over time, but not between jurisdictions or between jurisdictions and national totals.

Further details on potentially avoidable deaths among Indigenous Australians are available from the Aboriginal and Torres Strait Islander Health Performance Framework ([measure 1.24: Avoidable and preventable deaths](#)).

## Representational attributes

<b>Representation class:</b>	Rate
<b>Data type:</b>	Real
<b>Unit of measure:</b>	Person
<b>Format:</b>	NN[N].N

## Indicator conceptual framework

<b>Framework and dimensions:</b>	<a href="#">Deaths</a>
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## Data source attributes



**Data sources:**

**Data Source**

[ABS Indigenous estimates and projections \(2016 Census-based\)](#)

**Frequency**  
Periodic

**Data custodian**  
Australian Bureau of Statistics

**Data Source**

[ABS Causes of Death Collection](#)

**Frequency**  
Annual

**Data quality statement**  
[ABS causes of death collection, QS](#)

**Data custodian**  
Australian Bureau of Statistics

**Data Source**

[ABS Estimated resident population \(2016 Census-based\)](#)

**Frequency**  
Quarterly

**Data custodian**  
Australian Bureau of Statistics

## Accountability attributes

**Reporting requirements:** National Healthcare Agreement

**Organisation responsible for providing data:** Australian Bureau of Statistics (ABS).

**Further data development / collection required:** Specification: Minor work required, the measure needs minor work to meet the intention of the indicator.

## Source and reference attributes

**Reference documents:** Australian Bureau of Statistics (ABS) 2015. *Causes of Death, Australia, 2013*, ABS cat. no. 3303.0. Canberra: ABS. Viewed 14 May 2020, [https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/3303.0 Main+Features12013?OpenDocument](https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/3303.0>Main+Features12013?OpenDocument)

ABS (Reference period: 2019). *Causes of Death, Australia*. ABS Website. Viewed 22 February 2021, <https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/latest-release>

Australian Institute of Health and Welfare (AIHW) 2020. *Aboriginal and Torres Strait Islander Health Performance Framework*. Canberra: AIHW. Viewed 19 February 2021, <https://indigenoushpf.gov.au/>

## Relational attributes

### Related metadata references:

Supersedes [National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2021](#)

[Health!](#), Standard 03/07/2020

See also [Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers, 2020](#)

[Health!](#), Standard 13/10/2021

See also [Australian Health Performance Framework: PI 1.2.3–Levels of risky alcohol consumption, 2020](#)

[Health!](#), Standard 13/10/2021

See also [Australian Health Performance Framework: PI 1.3.1–Prevalence of overweight and obesity, 2020](#)

[Health!](#), Standard 13/10/2021

See also [Australian Health Performance Framework: PI 2.1.4–Selected potentially preventable hospitalisations, 2020](#)

[Health!](#), Standard 01/12/2020

See also [Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2020](#)

[Health!](#), Standard 01/12/2020

See also [National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 04–Rates of current daily smokers, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 05–Levels of risky alcohol consumption, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 06–Life expectancy, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 07–Infant and young child mortality rate, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 08–Major causes of death, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 18–Selected potentially preventable hospitalisations, 2022](#)

[Health!](#), Standard 24/09/2021

See also [National Healthcare Agreement: PI 23–Unplanned hospital readmission rates, 2022](#)

[Health!](#), Standard 24/09/2021