Mortality reporting: ABS process changes in the COVID-19 pandemic

Health and Vital Statistics Section
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Overview

- Current situation in Australia
- Assessment of mortality resources
- Changes to ABS processing
- New statistical outputs
- Future opportunities
2 current systems for mortality:

**ABS:**
- Large scale epidemiological dataset
- Linked to CRVS system
- Annual output

**Surveillance:**
- E.g. Influenza
- Rapid reporting
- Can be subject to change
Health departments took surveillance lead for infections and fatalities

- Data updated daily
- Collated from state and territory health departments

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total cases</td>
<td>12,428</td>
</tr>
<tr>
<td>Total cases recovered</td>
<td>8,541</td>
</tr>
<tr>
<td>Total deaths</td>
<td>126</td>
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<tr>
<td>New cases in last 24 hours</td>
<td>388</td>
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<tr>
<td>Active Cases</td>
<td>3,267</td>
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<tr>
<td>Total hospitalised</td>
<td>183</td>
</tr>
<tr>
<td>Tests in last 24 hours</td>
<td>56,310</td>
</tr>
<tr>
<td>Locally acquired last 7 days</td>
<td>1,075</td>
</tr>
<tr>
<td>Overseas acquired last 7 days</td>
<td>38</td>
</tr>
</tbody>
</table>
Identifying where value could be added

- Objective 1: Not to create confusion
- Objective 2: Provide data for existing data gaps
  - Policy questions:
    - Is there excess mortality in Australia
    - Are there any effects of lockdown on mortality?
    - Are there any effects of changes to health services?
Public health data response: Changes to ABS processes

- Data to have both population and health perspective
- Data could not take on traditional format of ABS mortality releases
- Data outputs needed to be innovated under existing processes
  - Ability to respond quickly
  - Burden on providers
New output format:
- Date of occurrence of death
- Doctor certified deaths only
- Monthly output
- Provisional data
- Raw counts, averages and proportions

Pros – timely, occurrence produces real time change, gold standard coded cause of death

Challenges – effects of pandemic on registration patterns, new monthly processes, no information on coroner referred deaths
Public Health data response: Excess mortality

Doctor certified deaths, COVID-19 infections, Australia, 1 Jan – 28 Apr 2020 vs 2015-19 benchmarks
Focus on associated causes of death to complement surveillance data

Most common certified acute disease outcomes of COVID-19 (%)

- Pneumonia
- Respiratory failure
- Other Organ failure
- Acute respiratory distress syndrome
- Other infections

Comorbidities certified with registered COVID-19 deaths (%)

- Hypertension
- Dementia
- Diabetes
- Chronic lower respiratory
- Cancer
- Ischaemic heart disease
- Musculoskeletal
Future opportunities

- Work with other agencies in CRVS system to look at coroner referred deaths
- Continue to work closely with RBDMs
- Continue to look at systems and opportunities a digital environment might bring
- Continue to refine statistical methods
- Continue more timely release of data
Questions?