



Potentially avoidable deaths in hospital in people with and without disability

This fact sheet provides information on how potentially avoidable deaths (PADs) are measured in Australia's Disability Strategy Outcomes Framework.

Australia's Disability Strategy 2021-2031

Australia's Disability Strategy 2021-2031 (the Strategy) is a plan to make life better for people with disability. The Australian Government wrote this plan with people with disability. More information can be found on the [Strategy and supporting documents](#) page of the Disability Gateway website.

The Strategy is supported by an Outcomes Framework that focuses on 7 outcome areas such as health care, housing, education and employment. Measuring outcomes across these areas can provide important information on where and how life is improving for people with disability.

Health and wellbeing

PADs in hospital is one of the things being measured as part of the Outcomes Framework. PADs in hospital in people with disability have not been measured before because disability is not consistently included and described in the data that hospitals routinely collect. We have developed an approach to overcome this and allow reporting on this measure for people receiving government funded disability supports. This does not represent all people with disability.

For those people with disability included in our approach, the data showed that the rate of potentially avoidable deaths in hospital in 2021-22 was 7-times higher for people with disability compared to people without disability.

There are some limitations with our approach and the true difference in potentially avoidable deaths between people with and without disability might be larger. The approach and limitations are described below.

What is a potentially avoidable death?

Potentially avoidable deaths are deaths that may have been preventable with proper care or treatment. They are deaths where the underlying cause is considered to be potentially treatable through existing primary or hospital care or potentially preventable, either through screening or prevention before the disease or injury ever occurs (Falster and Jorm 2017). This is an internationally recognised way of assessing health outcomes and health system performance. The criteria used by the Australian Health Performance Framework to identify potentially avoidable deaths have been used to measure potentially avoidable deaths for Australia's Disability Strategy Outcomes Framework.

The Australian Health Performance Framework is a tool for reporting on the health of Australians and the performance of the Australian health system. The set of indicators used by the Australian Health

Performance Framework to measure these outcomes includes ‘potentially avoidable deaths’.

The Australian Institute of Health and Welfare website contains more information about the [Australian Health Performance Framework](#) and the [criteria for identifying potentially avoidable deaths](#).

How were potentially avoidable deaths in hospital identified for this analysis?

While potentially avoidable deaths are included in data reported elsewhere, potentially avoidable deaths in hospital are not usually separated from potentially avoidable deaths in other health settings and the number of these deaths for people with disability is not routinely separately identified in reporting.

State and territory hospitals data and information on cause of death were used to identify deaths that occurred in hospital that met the potentially avoidable deaths criteria. To help track what is happening for people with disability under the Outcomes Framework, we linked hospitals data with other government data to identify people with disability.

Who is included in the reported disability data?

We used the disability indicators (or ‘flags’) approach from the National Disability Data Asset to measure disability for the Outcomes Framework measure on potentially avoidable deaths. More information about using these indicators to measure disability can be found on the National Disability Data Asset [Measuring disability factsheet](#).

The National Disability Data Asset approach uses information from different government agencies to improve the quality of data about people with disability. The National Disability Data Asset team worked with people with disability, their representatives and experts in disability data, to develop criteria that consistently collect information that better describes people with disability.

The first set of indicators include people who, at any time during 2019 to 2023:

- were National Disability Insurance Scheme participants; or
- were assessed as eligible for or received:
 - Centrelink Disability Support Pension
 - Centrelink Mobility Allowance
 - Centrelink Youth Disability Supplement
 - a one-off Business Services Wage Assessment Tool payment scheme; or
- had carers eligible for Centrelink Carer Allowance or Carer Payment. (National Disability Data Asset 2024)

This information on people with disability was used with hospitals and cause-of-death data to measure potentially avoidable deaths in hospital. The information was de-identified, meaning that individual people in the data could not be identified.

The first set of indicators were released in December 2024 but do not represent all people with disability in Australia. As noted in the [Measuring disability in the National Disability Data Asset](#) document, older Australians with disability, people with disability with low or no need for support, and people who pay for private support services are under-represented (National Disability Data Asset 2024). These indicators include around 1.4 million Australians with disability and still allow valuable insights for this large group of people with disability to be reported. Refer to the National Disability Data Asset [Disability Indicators Explanatory Notes](#) for further information.

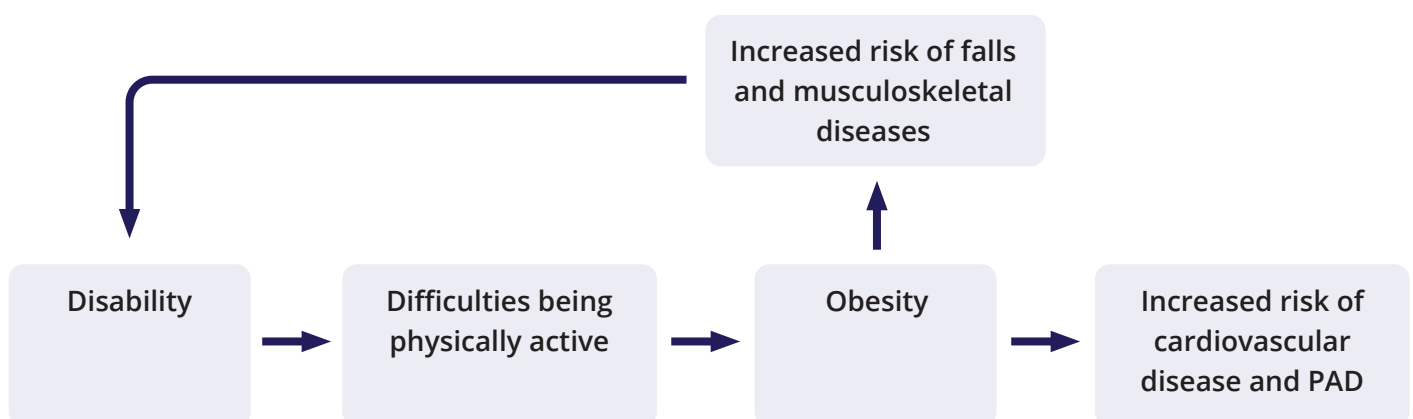
What are the limitations of the potentially avoidable deaths measure?

- The potentially avoidable death criteria were not specifically designed for people with disabilities.
- Sometimes, a person's disability might be incorrectly recorded as the cause of death.
- Not all people with disabilities are included in the data, especially older people and those who need less government support.

Things to consider when interpreting the findings on potentially avoidable deaths in hospital for people with disability:

- The potentially avoidable deaths criteria were designed to assess health outcomes and health system effectiveness across the whole population. These criteria were not specifically designed to identify potentially avoidable deaths for people with disability.
- Cause of death can be incorrectly attributed to a person's disability. Attributing a person's cause of death to their disability can prevent other factors that may have contributed to the person's death from being recorded. In some instances, this can mean a death from a potentially avoidable cause is not counted as a potentially avoidable death. This is known as 'overshadowing' (Hallyburton 2022). An example is where a person's intellectual disability (or its cause - for example, Down Syndrome), is recorded as their underlying cause of death, instead of more accurately attributing the death to another cause (for example, an infection), which may have been preventable with prompt and appropriate medical care (Trollor et al. 2017).
- Sometimes a cause of death that is counted as potentially avoidable, may not have been avoidable for a person with disability. For example, Parkinson's disease, Down Syndrome, and spinal cord injuries can lead to the development of cardiovascular diseases (Ryu et al. 2023, Dimopoulos et al. 2023, Montesinos-Magraner et al. 2018). While cardiovascular diseases are classified as potentially avoidable in the general population, they may be more difficult to prevent in people with some types of disability.
- The relationship between disability and health is complex.
 - Long-term health conditions might cause disability, and disability can contribute to health problems. Obesity is shown as an example of this process (Figure 1).

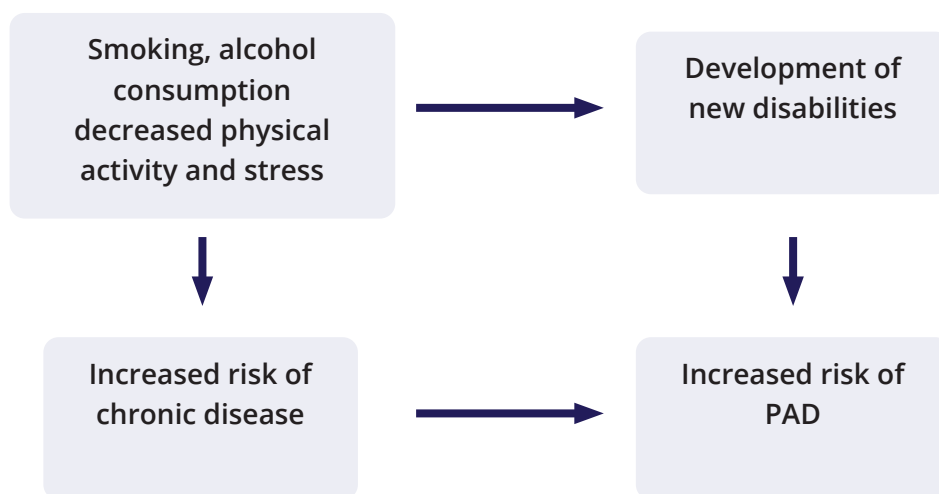
Figure 1: The complex association between obesity and disability



Source: Neri et al. 2019, Anandacoomarasamy et al. 2008, Litwic et al. 2013, Heeb Desai et al. 2013, Kingston et al. 2021, Abdelaal et al. 2017.

- Some risk factors can lead to both chronic disease and disability. Rather than the disability contributing to a death, the death may be caused by a medical condition associated with the same risk factors as the disability, as shown in Figure 2.

Figure 2 Modifiable risk factors can lead to both chronic disease and disability, which can independently increase the risk of PADs



Source: Anderson and Durstine 2019, Ng et al. 2020, Kim et al. 2022, Dixon-Ibarra and Horner-Johnson 2014.

Note: These figures represent broad trends observed across the whole population. It is not suggested that all disability and chronic disease associated with modifiable risk factors or obesity are preventable.

- Current data do not allow a full comparison to be made of potentially avoidable deaths of people with disability compared to people without disability. Data only allow a comparison between people who received specific government disability payments and services with those who did not. This limitation means that some people with disability were included in the results for people without disability.
- Older Australians with disability are under-represented in the disability population used in this reporting. Older Australians are more likely to have disability (AIHW 2024). Both older people and people with disability are more likely to experience a potentially avoidable death (AIHW 2020, Australian Institute of Health and Welfare & National Indigenous Australians Agency 2022).

The above limitations suggest that the difference in the rate of potentially avoidable deaths in people with and without disability reported for this Outcomes Framework measure may not reflect the true difference. Because of these issues, the true difference in potentially avoidable deaths between people with and without disabilities might be even larger than what the data are currently able to measure.

How can the potentially avoidable deaths measure be improved?

- We need better data to include more people with disabilities and track deaths by disability type over time.
- This will help us understand and improve health outcomes for people with disabilities.

The measures that make up the Outcomes Framework are intended to capture broad trends in selected outcomes for people with disability and be easily interpreted. Despite the limitations outlined above, the results for the measure on potentially avoidable deaths in hospitals provide important information on what is happening for a large group of people with disability in Australia. However, improvements can be made by:

- improving the National Disability Data Asset disability indicators so that they represent more people with disability
- looking at potentially avoidable deaths data by disability type
- tracking potentially avoidable deaths data over time
- improving 'cause of death' coding for deaths involving people with disability
- developing potentially avoidable deaths criteria that have been specifically designed to reflect the complex relationship between disability and health.

Implementing these improvements could better inform interventions which could improve outcomes for people with disability.

As more data become available, the disability indicators/flags developed for the National Disability Data Asset will be improved and will better represent more people with disability. Data for the Outcomes Framework measure on potentially avoidable deaths will be revised as these improvements are made.

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