

Health system indicators

On the right we present some findings about selected health system indicators.

Data is sourced from the Ministry of Health's:

- Mortality Collection Data Set (MORT), from 2000-2015
- National Minimum Data Set (NMDS) from 1996/97 to 2016/17.
- National Non-Admitted Patient Collection (NNPAC), from 2007/08 to 2016/17.





Avoidable premature deaths in under 75 year olds is known as amenable mortality. These deaths could have been avoided if the patient had received effective and timely healthcare.

Māori have higher amenable mortality rates than non-Māori.

Māori males' amenable mortality rates are higher than Māori females.

The difference between Maori and non-Maori was mostly higher for females.

Amenable mortality rates are decreasing for both Māori and non-Māori. The equity gap is narrowing over time, especially for females.



Ambulatory sensitive hospitalisation

Acute hospital admissions of under 75 year olds for conditions that are preventable or could have been treated earlier is known as ambulatory sensitive hospitalisation (ASH).

Māori children aged 0-4 have a 20% higher ASH rate than non-Māori children aged 0-4.

Boys have a higher rate of ASH than girls among all children.

The gap between Māori and non-Māori children widened in the early 2000s.

There was an increase in non-Māori children's ASH rates around 2009, but no decrease in Māori children's ASH rates.

Māori adults aged 45–64 had higher ASH rates than non-Māori adults and the equity gap has not changed much over time.



Discharge is when a patient leaves hospital to return home, transfers to another hospital or residential institution, or dies in hospital after being formally admitted.

non-Māori.

Over time Māori had a greater increase in hospital discharge rates than non-Māori.



When a healthcare user is assessed by a registered medical practitioner or nurse practitioner in the emergency department, but not admitted to hospital, this is called emergency department (ED) attendance. They may receive treatment, therapy, advice, diagnostic or investigatory procedures.

Māori.

Māori had a greater increase in ED attendance rates than non-Māori over time.

Publicly funded hospital discharges

Māori have a higher hospital discharge rate than

Females had higher hospital discharge rates than males for both Māori and non-Māori.

Emergency department attendances

Māori have a higher ED attendance rate than non-