



133 Molesworth Street  
PO Box 5013  
Wellington 6140  
New Zealand  
T+64 4 496 2000

16 August 2022

Lisa Riley

By email: [fyi-request-18452-74d5ab08@requests.fyi.org.nz](mailto:fyi-request-18452-74d5ab08@requests.fyi.org.nz)

Ref: H202207087/ OMB 574836

Cc: [leanne.stewart@ombudsman.parliament.nz](mailto:leanne.stewart@ombudsman.parliament.nz)

Kia ora Lisa

### **Reconsideration of your request for official information**

I refer to your request under the Official Information Act 1982 (the Act) to Manatū Hauora Ministry of Health (Manatū Hauora) on 5 February 2022. You requested:

*“Please provide the following information on the cases that you have reported as being in hospital, in ICU or being a death with COVID-19 for the entire pandemic period.*

*Specifically, please provide the total number of cases for the age groups used in your reports, the percentage of these who were admitted to hospital or ICU because of COVID complications, the percentage who were admitted for other reasons but tested positive.*

*Please do the same for the deaths that have unfortunately occurred and been recorded as a COVID death.”*

On the same day, Manatū Hauora communicated a decision on your request and stated the Ministry was updating its process on reporting COVID-19 deaths, comorbidities and demographic details, and that the website would be soon updated.

Due to the adoption of new confidentiality methods, described below, the Ministry can now release data that was previously protected due to privacy concerns.

The figures we present on our web pages are only for hospitalisations and deaths where COVID-19 was part of the reason for hospitalisation or death. We attempt to exclude hospitalisations and deaths of people who had COVID-19 but who COVID-19 infections were unrelated to their hospitalisation or death.

Please see below table 1 with a breakdown of cases, hospitalisations, ICU admissions and deaths (where COVID-19 was the underlying cause or a contributory cause) by age group.

**Table 1: COVID-19 Statistics as of 2 February 2022 in 10 year age bands**

Age Band	Cases	Hospitalisations	ICU Care	Deaths	Count Type
0 to 9	168,126	1,455	27	.s	FRR3
10 to 19	243,543	435	12	.s	FRR3
20 to 29	285,318	654	9	.s	FRR3
30 to 39	281,439	786	30	6	FRR3
40 to 49	236,544	807	42	15	FRR3
50 to 59	191,577	1,152	81	60	FRR3
60 to 69	124,317	1,404	78	123	FRR3
70 to 79	64,347	1,680	63	312	FRR3
80 to 89	27,057	1,761	30	558	FRR3
90+	6,975	600	.s	480	FRR3
Unknown	51	.s	.s	.s	FRR3

**Confidentiality methods:**

To avoid revealing sensitive information about potentially identifiable individuals in our data, we apply two data confidentiality methods, perturbation and suppression, to any data that is not already released as exact counts on the Manatū Hauora website.

Perturbation is the adding of random noise to data, for example, rounding up or rounding down, and suppression is not providing data, where doing so could compromise confidentiality.

For data that is not already provided exactly on the website:

- All values between 1 and 5 are suppressed.
- Zero values are provided exactly, except for in sensitive categories where a zero value may be suppressed to protect other low values.
- Values of 6 and above are perturbed using fixed random rounding to base 3 (FRR3). This entails rounding values to neighbouring multiples of 3. For example, 11 may be rounded to 12 or 9.

FRR3 is a best-practice confidentiality method recommended by Stats NZ. More information about this is available at: [www.data.govt.nz/toolkit/privacy-and-security/understanding-data-confidentiality/data-confidentiality-principles-and-methods-report/](http://www.data.govt.nz/toolkit/privacy-and-security/understanding-data-confidentiality/data-confidentiality-principles-and-methods-report/).

Examples:

True value	Displayed value
4	.s (suppressed)
11	9 or 12
15	15
16	15 or 18
301	300 or 303

Thank you for your patience while we reconsidered your request. I hope this assists with your complaint to the Office of the Ombudsman.

Nāku noa, nā



Gill Hall  
**Group Leader, Intelligence, Surveillance and Knowledge  
Public Health Agency, Ministry of Health**