

PROACTIVE RELEASE March 2022

GOV-015769 Data related to COVID-19 vaccinations

This treatment injury data provided was extracted on 7 March 2022 and includes claims lodged between 18 February 2021, when New Zealand began Covid vaccinations, and 5 March 2022, where the treatment event was *vaccination* or *injection/medications, adverse reaction/medication error* and where the medication type was recorded as *vaccine*.

However, as these fields are only completed when cover for the claim is decided, the figures provided have been supplemented by a text search of the claim forms received by ACC which mention *Comirnaty* (the name of the Pfizer-BioNTech COVID-19 vaccine), or included the terms *covid* or *Pfizer* together with *vacc* or *injection*. This text search allows us to identify claims that have been lodged but where cover has not been decided. Free text search methods are not reliable data extraction methods and can result in anomalies in the data; so claims identified by this method above have been manually reviewed and some false positive matches removed.

During this period, ACC has received 2,322 claims for injuries relating to the Covid vaccination. 860 claims have been accepted, 1,046 have been declined and 416 are yet to be decided. The following tables break down these numbers by the sex, age and ethnicity of the claimants.

Comirnaty had until very recently been the only Covid vaccine that has been used as part of New Zealand's vaccination response but more recently the Astra Zeneca Covid-19 vaccine has also been used. The specific vaccine used is not always identified on the claim so identifying the vaccine used cannot be reliably determined. Given the vaccination policy, the vast majority of the claims reported below relate to the Pfizer-BioNTech Comirnaty vaccine.

Claim lodgement rates

These are dependent on several factors. They can be influenced by:

- population demography i.e. the characteristics of the resident population, visitors and referred patients
- health status of the population treated
- what level of facility the organisation provides i.e. tertiary versus secondary
- familiarity of health providers or clients in recognising and/or lodging treatment injury claims.

<u>Privacy</u>

ACC does not routinely disclose claim counts fewer than four. Accordingly, some of the values in the tables only indicate that the number is fewer than 4 (denoted as <4). In other instances, values are supressed and denotated as two dashes (--) to limit the potential for particular individuals or matters specific to certain individuals from being identified.

Withholding in this way is necessary to protect the privacy of these individuals under section 9(2)(a) of the Act. In doing so, we have considered the public interest in making the information available and have determined that it does not outweigh the need to protect the privacy of these persons.

<u>Dose</u>

ACC has asked lodging providers to indicate whether the vaccination leading to the claim was a first, second or third/booster dose. Whilst nearly 50% have provided this information it has been provided as free text and over 50% of claims do not clarify which dose was involved. The table below categorises the claims received based on whether the claim was for the first, second or third primary/booster dose or whether this wasn't clear from the description given.

Dose	Accepted	Declined	Pending Decision	Total
First	118	189	48	355
Second	244	274	93	611
Third/Booster	44	56	51	151
Unspecified	454	527	224	1,205
Total	860	1,046	416	2,322

Accepted Injuries

Treatment injuries are confirmed and recorded when a claim is decided. The following table shows the primary injury recorded for the accepted Covid vaccination claims decided by 5 March 2022.

Primary Injury	Accepted Claims
Allergic Reaction	172
Sprain	95
Contusion	93
Anaphylactic Reaction	80
Adverse Drug Reaction	79
Cardiac injury	59
Infection	56
Cellulitis	41
Nerve Damage	15
Bursitis	14
Other (injuries with fewer than 14 accepted claims)	156
Total	860

Declined Reason

The table below shows the number of declined claims, broken down by declined reasons, which relate to the treatment injury assessment criteria.

Declined Reason	Number of Declined Claims
No Injury	825
No Causal Link	95
Withdrawn	49
Lack of Information	15
Ordinary Consequence of Treatment	14
Other	48
Total	1,046

Severity of Injuries

Measuring the impact of an injury on a person is challenging. ACC and others use the overall cost of a treatment injury claim as an indicator of the severity of the injury because more costly claims are likely to indicate claims where there has been a more severe impact on the person injured. While not always directly related, overall cost is one measure of severity and impact.

The following table shows the number of accepted claims grouped by the total payments made per claim to 7 March 2022.

Payments to 7 March 2022	Number of Accepted Claims
No payment to date	215
Up to \$100	269
Over \$100 to \$500	270
Over \$500 to \$1,000	32
Over \$1,000 to \$5,000	35
Over \$5,000 to \$10,000	16
Over \$10,000 to \$50,000	23
Total	860

Total payments made by ACC by 7 March 2022 on these 860 accepted claims was \$772,106. 106 of the 860 accepted claims had resulted in payments of over \$500 by 7 March 2022. 215 accepted claims had yet to receive a payment by 9 March 2022.

To date, fewer than 4 claims have been lodged with ACC which have related to a fatal injury. All have been accepted.

Ethnicity	Accepted	Declined	Pending Decision	Total
Maori	74	87	41	202
Pacific Peoples	31	47	11	89
Asian	84	89	34	207
European	610	734	296	1,640
Other	61	89	34	184
Total	860	1,046	416	2,322

Ethnicity

71% of claims lodged with ACC for Covid vaccination injuries have been for clients with European ethnicity with 71% accepted for cover. Māori comprise 9% of claims lodged with ACC for Covid vaccination injuries and 9% of the claims accepted.

The ethnicity data provided is based on ACC's 'prioritised ethnicity' data field. This method reduces the six ethnic responses to a single response by a system of "prioritisation" where: Māori regardless of other ethnicities listed is classified as Māori; Pacific peoples with any other response other than Māori is classified as Pacific; Asian peoples with any other response other than Māori and Pacific are classified as Asian; Other ethnicity regardless of any other response other than Māori, Asian or Pacific is classified as Other. Those that listed European and did not list Māori, Pacific, Asian or Other are classified as European.

ACC reports ethnicity using a different method to Statistics New Zealand. Care must be taken when comparing ACC's ethnicity data with other Government agencies or census data.

Age Band

Age Band	Accepted	Declined	Pending Decision	Total
5-11	4	4	6	14
12-17	35	33	4	72
18-24	70	91	28	189
25-29	58	84	34	176
30-34	85	98	48	231
35-39	83	106	38	227
40-44	86	113	37	236
45-49	101	120	46	267
50-54	74	106	54	234
55-59	78	96	34	208
60-64	59	78	28	165
65-69	59	36	27	122
70-74	28	39	15	82
75-79	15	19	8	42
80 plus and unknown	25	23	9	57
Total	860	1,046	416	2,322

<u>Sex</u>

Sex	Accepted	Declined	Pending Decision	Total
Female	597	692	263	1,552
Male	263	354	153	770
Total	860	1,046	416	2,322

The table above shows that females are far more likely than males to have lodged a claim for a Covid vaccination treatment injury. Claims for female clients represent 67% of claims lodged. This compares to 50% of the population with at least one Covid vaccination.¹

Claims by Month

The following table shows the number of Covid vaccination injury claims received by ACC by month. This is grouped by the recorded accident date ('Number of Claimed Vaccinations' column in table below) and by the date on which the claim was lodged with ACC ('Number Lodged' column in table below). ACC records treatment injury accident dates as the date on which the client first sought treatment for the injury. This may not necessarily be the date on which the event leading to the injury occurred although for the purpose of the analysis this date is used as a proxy for the date of vaccination.

Few vaccinations and consequently vaccination claims were lodged in the month of February 2021, so February and March have been grouped together to avoid reporting small numbers. As this extract was taken early in March 2022 few claims had been lodged for March 2022 so these claims have been grouped with February 2022.

1,993 (86%) of the Covid vaccination injury claims received to date have been lodged since the beginning of September, many are in the process of being assessed and do not yet have a decision. At this stage, it is difficult to provide meaningful data on the persistency of any injuries sustained.

¹ Source: <u>COVID-19: Vaccine data | Ministry of Health NZ</u>

Month	Number of Claimed Vaccinations	Number Lodged
February - March 2021		5
April 2021	63	21
May 2021	98	61
June 2021	90	68
July 2021	121	51
August 2021	295	123
September 2021	410	262
October 2021	454	315
November 2021	282	415
December 2021	211	371
January 2022	162	266
February - March 2022 ¹	121	364
Unknown	<4	0

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¹March 2022 is partial month to 5 March 2022.

<u>DHB</u>

The DHB has been provided below based on the DHB of Treatment where this has been identified and by the DHB of Residence of the client. The DHB of Treatment is often not confirmed until the claim is decided hence the large number of claims recorded with no known DHB of Treatment.

Given that the number of claims received from some DHBs is quite small, only the total number of claims lodged has been shown in the table below.

Waitemata	60	21
Wairarapa	8	21
Waikato	129	266
Taranaki	57	103
Tairawhiti	8	
Southern	103	237
South Canterbury	17	21
Northland	35	68
Nelson Marlborough	43	89
Mid Central	44	85
Lakes	15	45
Hutt Valley	30	73
Hawkes Bay	33	71
Counties Manukau	26	132
Capital & Coast	72	132
Bay of Plenty Canterbury	86	238
Auckland Bay of Planty	<u> </u>	184
District Health Board Region	DHB of Treatment	DHB of Residence

Time to Lodgement

Some vaccination injuries are immediately apparent whereas other injuries may take some time to become apparent. The table below shows the time between the accident date (assumed to be the date of vaccination in most cases) and the date when the claim is lodged with ACC.

Delay	Number of Claims	Delay	Number of Claims
0 days	102	20 days	27
1 days	131	21 days	31
2 days	111	22 days	22
3 days	124	23 days	17
4 days	96	24 days	30
5 days	81	25 days	16
6 days	65	26 days	11
7 days	62	27 days	17
8 days	48	4 weeks	142
9 days	36	5 weeks	91
10 days	38	6 weeks	79
11 days	31	7 weeks	78
12 days	38	8 weeks	65
13 days	30	9 weeks	60
14 days	30	10 weeks	53
15 days	25	11 weeks	53
16 days	25	12 weeks	45
17 days	22	3 months	151
18 days	24	4 months +	192
19 days	23		

Treatment Injury

ACC has provided cover for treatment injuries since 1 July 2005, when treatment injury provisions came into law. The treatment injury provisions replaced the medical misadventure provisions of the Accident Compensation Act 2001, to bring it more in line with the no-fault nature of the scheme.

A treatment injury is a personal injury caused as a result of seeking or receiving medical treatment from, or at the direction of, a registered health professional. In order to fulfil the criteria for cover, the person must have suffered a personal injury and there must be a clear causal link between the treatment and the injury, and the injury must not be a necessary part or ordinary consequence of the treatment.

When considering treatment injury data, it is important to note that the number of claims lodged with ACC cannot be taken as an accurate indication of the occurrence of injury during treatment or the quality of care. This is because, among other reasons, not all occurrences of injury during treatment are lodged with ACC.

The ACC website contains further information on treatment injury <u>https://www.acc.co.nz/for-providers/treatment-safety/</u>.

A full overview of treatment injury in public and private surgical hospitals and general practice settings is available at <u>https://www.acc.co.nz/assets/provider/ACC7971-Supporting-Treatment-Safety-2021.pdf</u>.