

Quarterly performance report

Quarter four 2016–17



Office of the
**HEALTH
OMBUDSMAN**

Listen. Respond. Resolve.

Quarterly performance report—Quarter four 2016–17

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Introduction

This document reports on the quarter four (Q4) performance of the Office of the Health Ombudsman (OHO) for 2016–17.

The OHO is the agency responsible for health service complaints management in Queensland. We're committed to protecting the health and safety of the public by assessing, investigating and resolving complaints made about health services provided in Queensland.

We are impartial and independent—and our vision is to be the cornerstone of a transparent, accountable and fair health complaints management system. As testament to this, our performance reports—which are published monthly, quarterly and yearly—are available to the public on our website www.oho.qld.gov.au.

Data in this report are correct as at 12 June 2017, though figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

Intake of complaints

Type of contacts

Type of contact	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Complaint	397	60.80	555	62.01	548	62.70	1494	61.71
Enquiry	255	39.05	337	37.65	326	37.30	927	38.29
Yet to be classified	1	0.15	3	0.34	0	0.00	0	0.00
Total	653	100.00	895	100.00	874	100.00	2421	100.00

The total for the quarter differs from the total monthly figures due to matters 'yet to be classified' being classified as either a complaint or enquiry during the reporting period. Similarly, contacts that are 'yet to be classified' at the time of running this report will be counted as complaints or enquiries in future reporting.

Matters that are 'yet to be classified' are contacts in which not enough information was provided in the first instance to allow for a determination, and additional information is being sought. They can also be matters that came in just before the end of the reporting period and were still being processed.

The number of complaint contacts will not equal the number of decisions made in the table below.

Type of complaints

Type of complaints	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	333	83.88	477	85.95	474	86.50	1270	85.23
Mandatory notification*	5	1.26	15	2.70	20	3.65	39	2.62
Voluntary notification*	47	11.84	47	8.47	42	7.66	142	9.53
Self-notification*	5	1.26	4	0.72	5	0.91	14	0.94
Referral **	7	1.76	12	2.16	7	1.28	25	1.68
Total	397	100.00	555	100.00	548	100.00	1490	100.00

*Notifications are made by health service providers, as required in the Health Practitioner Regulation National Law (Queensland).

The total for the quarter differs from the total monthly figures due to matters 'yet to be classified' being classified as either a complaint or enquiry during the reporting period. Similarly, contacts that are 'yet to be classified' at the time of running this report will be counted as complaints or enquiries in future reporting.

Complaint decisions

Decisions timeframes—within seven days

The improvements seen in Q3 to the proportion of decisions made within seven days have continued during Q4 with 90.14 per cent of decisions falling within this timeframe. This is on par with the 90.65 per cent achieved in Q3, and a significant improvement on the 66.90 per cent achieved in Q2.

This result was achieved following the implementation of process improvements to deal with the significant increases in complaints made to the OHO in 2015–16 and in the first six months of 2016–17.

Decision made	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Yes	369	88.70	437	90.85	457	91.22	1262	90.14
No	47	11.30	44	9.15	44	8.78	138	9.86
Total	416	100.00	481	100.00	501	100.00	1400	100.00

Accepted versus not accepted

Number of decisions made	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Accepted	279	61.86	337	61.16	360	66.91	978	68.58
Not accepted	137	30.38	145	26.32	141	26.21	422	29.59
Decision pending	35	7.76	69	12.52	37	6.88	26	1.82
Total	451	100.00	551	100.00	538	100.00	1426	100.00

The total for the quarter differs from the total monthly figures due to 'decision pending' matters being either accepted, not accepted or 'closed—no further action' during the reporting period. Similarly, matters that are 'decision pending' at the time of running this report will be counted as accepted or not accepted in future reporting.

'Closed—no further action' relates to matters deemed to be out of jurisdiction for the OHO and are not included in our reporting data. 'Decision pending' relates to matters where more information is required before deciding whether to accept or not accept a complaint, or because a matter came in just before the end of the reporting period and is still to be processed.

Accepted decision outcomes

Type of relevant action	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	78	27.86	105	30.88	137	39.37	320	33.06
Local resolution	86	30.71	101	29.71	87	25.00	274	28.30
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	6	2.14	8	2.35	9	2.59	23	2.38
Referred to AHPRA and the national boards	110	39.29	125	36.76	115	33.04	350	36.16
Referral to another entity	0	0.00	1	0.29	0	0.00	1	0.10
Immediate registration action	0	0.00	0	0.00	0	0.00	0	0.00
Interim prohibition order	0	0.00	0	0.00	0	0.00	0	0.00
Total	280	100.00	340	100.00	348	100.00	968	100.00

Accepted decisions may result in multiple issues and/or practitioners being identified, each requiring its own action. The data in the above *Accepted decision outcomes* table includes all identified issues/practitioners requiring action that were identified in the accepted complaints (noted in the previous *Accepted versus. not accepted* table).

Health service complaints profile

Main issues raised in complaints

Issue	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Access	35	5.14	42	4.57	34	4.16	116	4.64
Code of conduct for healthcare workers	6	0.88	8	0.87	6	0.73	24	0.96
Communication/information	103	15.12	98	10.66	105	12.84	311	12.44
Consent	11	1.62	13	1.41	16	1.96	40	1.60
Discharge/transfer arrangements	11	1.62	21	2.29	17	2.08	52	2.08
Environment/management of facilities	9	1.32	16	1.74	18	2.20	45	1.80
Fees/cost	26	3.82	30	3.26	21	2.57	81	3.24
Grievance processes	13	1.91	21	2.29	14	1.71	49	1.96
Health ombudsman act offence	0	0.00	0	0.00	1	0.12	1	0.04
Medical records	19	2.79	34	3.70	21	2.57	77	3.08
Medication	67	9.84	104	11.32	90	11.12	276	11.04
Professional conduct	62	9.10	103	11.21	91	11.12	264	10.56
Professional health	12	1.76	24	2.61	19	2.32	57	2.28
Professional performance	291	42.73	393	42.76	349	42.67	1060	42.42
Reports/certificates	16	2.35	12	1.31	16	1.96	46	1.84
Total	681	100.00	919	100.00	818	100.00	2499	100.00

These figures are based on issues recorded during the reporting period. A single complaint can contain multiple issues. Reporting on all issues identified in complaints allows comprehensive monitoring of trends, which can in turn inform a range of health complaint management system functions, such as education and information provision.

Number and type of complaints by health practitioner

Practitioner type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance process	Health Ombudsman Act Offence	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research/Teaching/Assessment	Total
Alternative care	-	15	-	2	-	-	-	-	-	-	-	4	-	2	-	-	23
Chinese medicine	-	-	-	1	-	1	-	-	-	-	-	3	-	7	-	-	12
Chiropractor	-	-	1	-	-	-	1	-	-	-	-	6	-	1	-	-	9
Dentistry	-	-	3	1	-	-	5	2	-	4	-	8	1	67	-	-	91
Emergency care	-	3	2	-	1	-	-	-	-	1	-	1	4	12	-	-	24
General medical	11	-	65	12	5	5	13	4	1	26	86	66	11	250	15	-	570
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	1	-	3	-	-	4
Medical specialty	-	-	16	4	2	-	8	1	-	1	7	14	1	31	12	-	97
Nursing	-	1	9	1	-	-	-	-	-	6	7	58	26	23	-	-	131
Occupational therapy	-	-	1	-	-	-	1	-	-	-	-	1	-	3	-	-	6
Optometry	-	-	1	-	-	-	-	-	-	-	-	2	-	-	-	-	3
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Other	2	3	7	1	-	2	2	-	-	-	3	41	7	8	1	-	77
Pathology service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Pharmacy	-	-	6	-	-	-	-	-	-	-	22	10	5	1	-	-	44
Physiotherapy	-	-	-	-	-	-	-	1	-	2	-	3	-	7	-	-	13
Podiatry	-	-	1	-	-	-	1	-	-	-	-	2	-	3	-	-	7
Psychology	2	1	10	-	-	-	1	1	-	3	2	11	2	17	12	-	62
Speech pathology	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	2
Surgical	2	-	16	4	3	-	5	-	-	2	-	5	-	70	2	-	109
Total	17	23	140	26	11	8	37	9	1	45	127	236	57	506	42	0	1285

These figures are based on issues recorded during the reporting period. A single complaint can contain multiple issues. Reporting on all issues identified in complaints allows comprehensive monitoring of trends, which can in turn inform a range of health complaint management system functions, such as education and information provision.

Number and type of complaints by health service organisation

Organisation type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance processes	Health Ombudsman Act Offence	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research/Teaching/Assessment	Total
Aged care facility	-	1	1	1	-	3	-	1	-	2	2	3	-	26	-	-	40
Allied health service	-	-	2	-	-	-	3	-	-	1	-	1	-	2	-	-	9
Ambulance service	-	-	3	-	1	-	-	-	-	-	-	1	-	3	-	-	8
Community health service	4	-	6	-	-	3	2	2	-	-	1	3	-	7	-	-	28
Correctional facility	43	-	9	1	1	1	-	2	-	-	90	2	-	124	-	-	273
Dental service	4	-	5	-	-	-	6	3	-	3	-	1	-	14	-	-	36
Hospital and Health Service	2	-	5	-	1	1	-	2	-	-	-	-	-	13	1	-	25
Laboratory service	-	-	2	1	-	2	8	2	-	2	-	-	-	4	-	-	21
Licensed private hospital	1	-	6	-	6	7	4	-	-	-	2	-	-	26	1	-	53
Medical centre	14	-	17	-	-	3	6	3	-	11	5	2	-	8	-	-	69
Mental health service	2	-	13	2	5	2	-	4	-	1	9	4	-	31	-	-	73
Other support service	-	-	-	-	-	-	-	-	-	-	1	1	-	2	-	-	4
Pharmaceutical service	-	-	6	1	-	-	2	3	-	-	13	1	-	-	-	-	26
Private organisation	1	-	3	-	-	-	-	2	-	1	-	1	-	5	-	-	13
Public health service	-	-	3	-	-	2	1	2	-	1	-	2	-	15	-	-	26
Public hospital	26	-	85	8	27	13	2	11	-	9	22	5	-	263	-	-	471
Residential care service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Specialised health service	2	-	4	-	-	-	10	3	-	1	3	1	-	8	2	-	34
Health service district	-	-	-	-	-	-	-	-	-	-	1	-	-	3	-	-	4
Total	99	1	171	14	41	37	44	40	0	32	149	28	0	554	4	0	1214

These figures are based on issues recorded during the reporting period. A single complaint can contain multiple issues. Reporting on all issues identified in complaints allows comprehensive monitoring of trends, which can in turn inform a range of health complaint management system functions, such as education and information provision.

Assessment

Assessments started and completed

Assessments this quarter	April	May	June	Q4 total
Assessments started	102	150	178	430
Assessments completed	117	146	134	397

Completed assessment timeframes

Overall, there continues to be a significant improvement in the proportion of assessments completed within legislated timeframes. Of the 397 assessments finalised in Q4, 300 were completed within 30 days or 60 days with an approved extension (101 assessments), representing a finalisation rate within statutory timeframes of 75.57 per cent. This is an improvement of 20.25 and 7.59 percentage points when compared to Q2 and Q3 respectively. This improvement reflects the focus on targeted strategies to progress and finalise matters.

The 97 matters completed outside of the legislated timeframe were due to the complexity of many of the matters in assessment, and delays in receiving information from parties or in obtaining the necessary independent clinical advice required to appropriately assess the matters.

Assessment timeframe	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Within 30 days	55	47.01	67	45.89	77	57.46	199	50.13
Within 60 days*	42	35.90	41	28.08	36	26.87	119	29.97
Greater than 60 days	20	17.09	38	26.03	21	15.67	79	19.90
Total	117	100.00	146	100.00	134	100.00	397	100.00

*Assessments are able to be completed within 60 days when granted an extension of 30 days as a result of legislated requirements being met.

Assessment decisions

Type of relevant action	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	4	2.90	6	3.95	2	1.43	12	2.79
Conciliation	6	4.35	16	10.53	14	10.00	36	8.37
Investigation	7	2.05	9	5.92	2	1.43	18	4.19
Referred to AHPRA and the national boards	19	13.77	25	16.45	31	22.14	75	17.44
Referral to another entity	22	15.94	23	15.13	40	28.57	85	19.77
Immediate registration action*	0	0.00	0	0.00	0	0.00	0	0.00
Interim prohibition order*	0	0.00	0	0.00	1	0.71	1	0.23
No further action	73	57.97	73	48.03	50	35.71	203	47.21
Total	138	100.00	152	100.00	140	100.00	430	100.00

Total assessment decisions will not equal the total number of assessments (in previous tables), as a single assessment can result in multiple relevant actions.

The figures for the type of relevant action decided in the assessment stage may not correspond with totals for respective relevant actions (e.g. local resolution, conciliation, investigation etc.) due to the time between a decision being made and an action taken crossing over different reporting periods.

*Immediate action assessment decision figures may not align with the immediate action figures later in the report due to immediate actions decisions being made outside of the assessment process.

Local resolution

Local resolutions started and completed

Local resolutions this quarter	April	May	June	Q4 total
Local resolutions started	95	108	88	291
Local resolutions completed	69	111	103	283

The number of local resolutions started in the quarter may not directly match the number of assessment decisions to undertake local resolution, due to the time between a decision being made and an action taken crossing over different reporting periods.

Completed local resolution

Timeframes

Of the 283 local resolutions finalised in Q4, 275 were completed within 30 days or 60 days with an approved extension (33 local resolutions), representing a finalisation rate within statutory timeframes of 97.17 per cent.

Local resolution timeframe	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Within 30 days	56	81.16	95	85.59	91	88.35	242	85.51
Within 60 days	12	17.39	15	13.51	12	11.65	39	13.78
Greater than 60 days	1	1.45	1	0.90	0	0.00	2	0.71
Total	69	100.00	111	100.00	103	100.00	283	100.00

*Local resolutions are able to be completed within 60 days when granted an extension of 30 days as a result of legislated requirements being met.

Outcomes

Local resolution outcomes	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Resolution reached	57	82.61	91	81.98	78	75.73	226	79.86
No resolution reached	8	11.59	14	12.61	13	12.62	35	12.37
Complaint withdrawn*	4	5.80	6	5.41	12	11.65	22	7.77
Total	69	100.00	111	100.00	103	100.00	283	100.00

*Complainants can choose to withdraw their complaint at any stage during local resolution.

Decisions for matters that were not resolved

Type of relevant action	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	0	0.00	1	7.14	1	100.00	2	8.70
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	0	0.00	0	0.00	0	0.00	0	0.00
Referred to AHPRA and the national boards	0	0.00	1	7.14	0	0.00	1	4.35
Referral to another entity	0	0.00	0	0.00	0	0.00	0	0.00
Immediate action	0	0.00	0	0.00	0	0.00	0	0.00
No further action	8	100.00	12	85.71	0	0.00	20	86.96
Total	8	100.00	14	100.00	1	100.00	23	100.00

Conciliation

Conciliations started and closed

Conciliations this quarter	April	May	June	Q4 total
Conciliations started	8	16	12	36
Conciliations closed	19	10	4	33

The number of conciliations started in the reporting period may not directly match the number of assessment decisions to undertake conciliation, due to the time between a decision being made and an action taken crossing over different reporting periods.

Conciliations started includes all matters—including matters where agreement to participate has or has not been reached or the decision is pending—that entered the conciliation workflow during the reporting period following the OHO assessing them as being suitable for conciliation. Similarly, conciliations closed are all matters that were closed during the reporting period, whether due to parties not agreeing to participate or the matter being closed after completing the conciliation process. Closed conciliations differ from completed conciliations below, as completed conciliations only include matters where both parties agreed to participate and the conciliation process was completed.

Agreement to participate in conciliation

Agreement to participate	April	May	June	Q4 total
Party/ies agreed to participate	1	5	6	12
Party/ies did not agree to participate	6	6	3	15
Decisions pending at close of the period	16	20	25	25

Once the decision is made to attempt conciliation, both parties must agree to participate in the process. If either one, or both, of the parties do not agree, the conciliation process does not commence and the matter is closed.

Decisions pending includes matters where parties are still deciding whether to participate in conciliation at the end of the reporting period. It also includes matters that have been referred to another relevant action, where conciliation may not commence until this relevant action has been finalised.

Completed conciliations

Timeframes

Conciliations completed	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
0–3 months	2	15.38	1	25.00	0	0.00	3	16.67
3–6 months	4	30.77	0	0.00	0	0.00	4	22.22
6–9 months	7	53.85	3	75.00	1	100.00	11	61.11
9–12 months	0	0.00	0	0.00	0	0.00	0	0.00
12+ months	0	0.00	0	0.00	0	0.00	0	0.00
Total	13	100.00	4	100.00	1	100.00	18	100.00

Outcomes

Conciliation outcomes	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Successful	6	15.38	4	100.00	1	100.00	11	61.11
Not successful	7	30.77	0	0.00	0	0.00	7	38.89
Ended early	0	53.85	0	0.00	0	0.00	0	0.00
Total	13	100.00	4	100.00	1	100.00	18	100.00

The data above relates to matters where parties agreed to participate in conciliation. After agreeing, the conciliation process was completed with the matter either being successful or not successful—or in rare instances, the Health Ombudsman ending it. Completed conciliations differ from closed conciliations—in the first conciliation data table above—as completed conciliations only relate to matters where parties agreed to participate and the conciliation process was completed.

Decisions for conciliations that were not successful

Type of relevant action	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	0	0.00	0	0.00	0	0.00	0	0.00
Referred to AHPRA and the national boards	0	0.00	0	0.00	0	0.00	0	0.00
Referral to another entity	0	0.00	0	0.00	0	0.00	0	0.00
Immediate action	0	0.00	0	0.00	0	0.00	0	0.00
No further action	7	100.00	4	100.00	0	0.00	11	100.00
Total	7	100.00	4	100.00	0	100.00	11	100.00

Open conciliation timeframes

Conciliations open	April		May		June	
	Number	%	Number	%	Number	%
Less than 3 months	20	42.55	25	47.47	31	50.82
3–6 months	13	27.66	11	20.75	13	21.31
6–9 months	8	17.02	10	18.87	10	16.39
9–12 months	1	21.3	3	5.66	3	4.92
12+ months	5	10.64	4	7.55	4	6.65
Total	47	100.00	53	100.00	61	100.00

As at 30 June 2017 there were 12 matters on hold until the outcome of another process was finalised (e.g. the process of another agency such as AHPRA). This includes 2 matters that have been open for less than 3 months, 3 that have been open for 3–6 months, 1 that has been open for 6–9 months, 2 matters that have been open for 9–12 months, and 4 that have been open for more than 12 months.

Investigation

Due to an ongoing reconciliation process with investigations data, the investigations data reported in this report may not match data reported in previous performance reports. This is due to the reclassification of a number of open investigations during the quarter, as well as decisions to investigate, pause or close a matter having been recorded in a subsequent month to the month in which a decision was made.

This update is an example of our commitment to continual improvement as we mature as an agency and the importance we place on transparent, robust data.

Investigations started and closed

Investigations this quarter	April	May	June	Q4 total
Investigations started	16	20	17	53
Investigations closed	13	22	20	55

The number of investigations started in the reporting period may not match the number of assessment decisions to undertake investigation due to the time between a decision being made and an action taken crossing over different reporting periods, or as a result of investigations being started via other processes (e.g. own-motion investigation).

Closed investigations

Timeframes

Closed investigation timeframes	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	1	7.69	2	9.09	4	20.00	7	12.73
3–6 months	4	30.77	6	27.27	4	20.00	14	25.45
6–9 months	3	23.08	1	4.55	5	25.00	9	16.36
9–12 months	1	7.69	3	13.64	2	10.00	6	10.91
12+ months	4	30.77	10	45.45	5	10.00	19	34.55
Total	13	100.00	22	100.00	20	100.00	55	100.00

Outcomes

Closed investigation outcomes	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings	5	38.46	10	45.45	8	40.00	23	41.82
Referred to legal services	0	0.00	2	9.09	0	0.00	2	3.64
Referred to AHPRA	3	23.08	3	13.64	6	30.00	12	21.82
Referred to another agency	0	0.00	0	0.00	2	10.00	2	3.64
No further action	5	38.46	7	31.82	4	20.00	16	29.09
Total	13	100.00	22	100.00	20	100.00	55	100.00

*Matters determined suitable for referral to the Director of Proceedings at the conclusion of an investigation are sent to the Health Ombudsman for consideration and determination on whether referral to the Director of Proceedings is appropriate.

**These matters are referred to the Executive Director, Legal Services Division within the office for consideration as to whether there is evidence of a breach of the Act that constitutes an offence that should be prosecuted in the courts. These matters differ to those referred to the Director of Proceedings, which require an independent determination of whether the matter should be put before QCAT.

Open investigations

Open investigations consist of two categories—active investigations and paused investigations.

Active investigations are being currently investigated, while paused investigations are not able to be investigated until such time as another agency—such as the Queensland Police Service or the Office of the State Coroner—concludes their own processes. Despite being unable to progress paused investigations, they are still considered to be open investigations.

Where a matter is referred under section 193A(4) of the Health Practitioner Regulation National Law (Queensland), we calculate timeframes inclusive of any period in which the investigation was open with AHPRA, to provide transparency of the complete length of an investigation.

Active investigation timeframes

Active investigation timeframes	April		May		June	
	Number	%	Number	%	Number	%
Less than 3 months	47	13.51	41	11.95	44	12.94
3–6 months	63	18.10	59	17.20	41	12.06
6–9 months	47	13.51	45	13.12	47	13.82
9–12 months	48	13.79	43	12.54	40	11.76
12+ months*	143	41.09	155	45.19	168	49.41
Total	348	100.00	343	100.00	340	100.00

*All investigations that have been open for more than 12 months are published on our investigations register, available on our website (www.oho.qld.gov.au).

Paused investigation timeframes

Paused investigation timeframes	April		May		June	
	Number	%	Number	%	Number	%
Less than 3 months	2	3.92	5	9.26	4	7.41
3–6 months	7	13.73	10	18.52	5	9.26
6–9 months	5	9.80	7	12.96	13	24.07
9–12 months	8	15.69	5	9.26	4	7.41
12+ months	29	56.86	27	50.00	28	51.85
Total	51	100.00	54	100.00	54	100.00

Certain matters may be referred to an external agency, such as the Queensland Police Service while criminal proceedings take place, or to the coroner if it relates to reportable deaths (under s92 of the *Health Ombudsman Act 2013*). From an OHO perspective, these matters are not closed but effectively paused within the OHO's complaints management system as in these circumstances it is not appropriate for the OHO to conduct any investigations that may impede on an external agency's processes. As a result, investigation of these matters will be put on hold until the external agency finalises its processes.

Open investigation timeframes

Total open investigation timeframes	April		May		June	
	Number	%	Number	%	Number	%
Less than 3 months	49	12.28	46	11.59	48	12.18
3–6 months	70	17.54	69	17.38	46	11.68
6–9 months	52	13.03	52	13.10	60	15.23
9–12 months	56	14.04	48	12.09	44	11.17
12+ months*	172	43.11	182	45.84	196	49.75
Total	399	100.00	397	100.00	394	100.00

Open investigation categories

Type of investigation	April	May	June
Health service complaint	287	290	289
Systemic issue	34	34	34
Another matter*	78	73	71

*Matters brought to the Health Ombudsman's attention by means other than through a health service complaint or notification.

Monitoring investigation recommendations

We monitor the implementation of recommendations made as an outcome of two types of investigation process—recommendations made as a result of an investigation completed by our office and recommendations made as a result of an investigation completed by a health service provider.

OHO recommendations monitoring

At the completion of certain investigations, the Health Ombudsman makes recommendations to health services for how they can improve service delivery and/or prevent the issues identified in the investigation from happening again. In these instances, we put in place a recommendations monitoring program to track the implementation of the recommendations.

Monitoring cases started and closed

OHO monitoring cases	April	May	June
Cases open at the beginning of the month	4	4	4
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	0	0	0

Health service provider recommendations monitoring

A health service provider may also conduct its own investigation, or engage another entity to conduct an independent investigation, resulting in recommendations for improvement. The Health Ombudsman may decide to monitor the implementation of these recommendations.

Monitoring cases started and closed

Health service provider monitoring cases	April	May	June
Cases open at the beginning of the month	8	6	5
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	2	1	1

Open recommendations monitoring case timeframes

Monitoring case timeframes*	April		May		June	
	Number	%	Number	%	Number	%
Less than 6 months	6	60.00	3	33.33	1	12.50
6–12 months	4	40.00	0	0.00	6	75.00
More than 12 months	0	0.00	6	66.67	1	12.50
Total	10	100.00	9	100.00	8	100.00

*Open recommendations monitoring cases include those resulting from recommendations by the Health Ombudsman, and those resulting from an investigation conducted by a health service provider.

Director of Proceedings

The role of the Director of Proceedings is to independently assess the merits of an investigation and determine whether the matter is suitable to be run to Queensland Civil and Administrative Tribunal (QCAT) for a determination.

Matters referred to the Director of Proceedings by practitioner type

Practitioner type	April	May	June	Q4 total
Medical practitioner	2	1	3	6
Nurse	1	4	2	7
Dentist	1	0	1	2
Pharmacist	0	0	1	1
Podiatrist	0	0	1	1
Massage therapist	0	1	0	1
Total	4	6	8	18

Matters determined suitable for referral to the Director of Proceedings at the conclusion of an investigation are sent to the Health Ombudsman for consideration and determination on whether referral to the Director of Proceedings is appropriate. As a result, these figures will differ from *closed investigation outcomes* figures.

Matters currently with the Director of Proceedings by practitioner type

Practitioner type	Number	Percentage
Medical Practitioner	23	44.23
Nurse	15	28.85
Psychologist	4	7.69
Pharmacist	2	3.85
Dentist	2	3.85
Unregistered chiropractor	1	1.92
Massage therapist	1	1.92
Student nurse	1	1.92
Nurse/midwife	1*	1.92
Podiatrist	1	1.92
Chiropractor	1	1.92
Total	52	100.00

*One practitioner holds dual registration as a nurse and a midwife.

Matters referred to the Queensland Civil and Administrative Tribunal

Practitioner type	April	May	June	Total
Nurse	0	0	1	1
Total	0	0	0	1

The Director of Proceedings considers all relevant aspects of each matter to determine whether to refer the matter to QCAT.

Immediate action

The *Health Ombudsman Act 2013* allows for the Health Ombudsman to take immediate action against registered and unregistered health practitioners in instances where the Health Ombudsman reasonably believes the practitioner's health, conduct or performance poses a serious risk to the health and safety of the public.

Show cause notices

There were ten show cause notices issued during the quarter.

As outlined in the *Health Ombudsman Act 2013*, upon receipt of a show cause notice, a health service provider is invited to make a submission within a stated period of time. The Health Ombudsman will then consider the submission before deciding whether to take immediate action against the provider.

Immediate registration actions

Practitioner type	Number	Action taken	Reasons/s for taking action		
			Health	Conduct	Performance
Student Nurse ¹	1	Conditions		✓	
Nurse	2	Conditions		✓	
Nurse	3	Suspension		✓	✓
Medical practitioner	3	Conditions		✓	✓
Psychologist	1	Conditions		✓	
Pharmacist	1	Conditions		✓	✓
Total	11				

¹One student nurse had both an immediate registration action taken and a prohibition order issued within the reporting period.

Immediate registration actions apply only to registered practitioners and may result in the Health Ombudsman issuing a suspension of, or imposing conditions upon, a registered practitioner's registration.

Interim prohibition orders

Practitioner type	Number	Action taken	Reasons/s for taking action			
			Health	Conduct	Performance	Interstate
Assistant in nursing	2	Prohibition		✓		
Dental assistant	1	Prohibition		✓		
Student nurse ¹	1	Restrictions		✓		
Audiologist ²	1	Restrictions			✓	
Total	5					

¹ One student nurse had both an immediate registration action taken and a prohibition order issued within the reporting period.

² One audiologist's full prohibition was revoked and a new interim prohibition order issued, with restrictions.

The Health Ombudsman has powers to issue interim prohibitions orders to unregistered practitioners and registered practitioners practicing outside their field of registration. An interim prohibition order can prohibit or restrict the practitioner from providing any health service, or a specific health service.

The Health Ombudsman can also enforce a prohibition order or an interim prohibition order issued in another state or territory where that interstate prohibition order corresponds—or substantially corresponds—to the type of prohibition order that can be made in Queensland.

The details for current prohibition orders can be found on the OHO website (www.oho.qld.gov.au) on the prohibition order register.

Monitoring practitioner compliance

When the Health Ombudsman takes immediate action against a health practitioner, we monitor the practitioner's compliance with the conditions of the order.

For interim prohibition orders, this means monitoring compliance with the restriction(s) on or prohibition of service. For immediate registration actions, this means monitoring compliance with condition(s) on or suspension of a practitioner's registration.

The Health Ombudsman may take immediate action against a single practitioner with both immediate registration action and an interim prohibition order. This can occur, for example, in instances where there is a risk that a registered practitioner may also practice in an unregistered capacity.

Practitioner monitoring cases

Cases this month	April	May	June
Cases open at the beginning of the month	92	95	96
Practitioner monitoring cases started	7	3	4
Practitioner monitoring cases closed	4	1	0

Open monitoring cases

Timeframes

Open case timeframes	April		May		June	
	Number	%	Number	%	Number	%
Less than 6 months	34	35.79	33	34.02	31	31.00
6–12 months	31	32.63	29	29.90	33	33.00
More than 12 months	30	31.58	35	36.08	36	36.00
Total	95	100.00	97	100.00	100	100.00

Immediate action types

Open cases by immediate action type	April		May		June	
	Number	%	Number	%	Number	%
Interim prohibition order—restrictions	22	23.16	23	23.71	22	22.00
Interim prohibition order—prohibited	26	27.37	26	26.80	28	28.00
Immediate registration action—conditions	27	28.42	28	28.87	30	30.00
Immediate registration action—suspension	20	21.05	20	20.62	20	20.00
Total	95	100.00	97	100.00	100*	100.00

* As at 30 June 2017 nine practitioners were under monitoring in relation to both an immediate registration action and an interim prohibition order.

Registered practitioners under monitoring by practitioner type

Practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health worker	1	1.59
Chinese medicine	2	3.17
Chiropractic	2	3.17
Dental	4	6.35
Medical	13	20.63
Medical radiation	0	0.00
Nursing and midwifery	32	50.79
Nursing student	3	4.76
Occupational therapy	0	0.00
Optometry	0	0.00
Osteopathy	0	0.00
Pharmacy	1	1.59
Physiotherapy	2	3.17
Podiatry	0	0.00
Psychology	3	4.76
Total	63	100.00

These figures are based on the number of individual registered practitioners being monitored by the OHO during the reporting period. As a single practitioner may be monitored in relation to more than one immediate action, these figures may not match the total number of open monitoring cases.

Unregistered practitioners under monitoring by type

Practitioner type	Number	Percentage
Assistant in nursing	4	13.79
Audiologist	2	6.90
Counsellor	3	10.34
Holding out*	2	6.90
Massage therapist	10	34.48
Natural therapist	2	6.90
Paramedic	4	13.79
Social worker	1	3.45
Support worker	1	3.45
Total	29	100.00

*Certain titles of registered health professions are protected under the National Law. Anyone who uses a protected title (e.g. medical practitioner), without being registered for that profession, are classified as 'holding out' as a practitioner of that profession.

These figures are based on the number of individual unregistered practitioners being monitored by the OHO during the reporting period. As a single practitioner may be monitored in relation to more than one immediate action, these figures may not match the total number of open monitoring cases.

Australian Health Practitioner Regulation Agency

Notifications from AHPRA

AHPRA notified the Health Ombudsman of one serious matter during the quarter, as prescribed under s193 of the National Law.

The Health Ombudsman asked the national board to continue to deal with this matter under s193(2)(b) National Law.

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health	0	0.00
Chinese medicine	1	0.21
Chiropractic	2	0.42
Dental	48	10.00
Medical	287	59.79
Medical radiation	1	0.21
Nursing and midwifery	101	21.04
Occupational therapy	5	1.04
Optometry	2	0.42
Osteopathy	0	0.00
Pharmacy	22	4.58
Physiotherapy	2	0.42
Podiatry	1	0.21
Psychology	8	1.67
Unregistered practitioner	0	0.00
Total	480	100.00

Number of issues referred to AHPRA by practitioner type

Registered practitioner type	Access	Communication and information	Consent	Discharge/ transfer arrangements	Environment/ management of facility	Fees and costs	Grievance processes	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/ certificates	Total
Aboriginal and Torres Strait Islander health worker	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine	-	-	-	-	-	-	-	-	-	1	-	2	-	3
Chiropractic	-	-	-	-	-	-	-	-	-	2	-	-	-	2
Dentist	-	1	1	--	-	2	1	3	-	2	-	52	-	62
Medical	2	43	12	9	-	7	1	19	51	22	8	242	9	425
Medical radiation	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Nursing and midwifery	-	1	1	-	-	1	-	7	11	46	29	28	-	124
Occupational therapy	-	-	-	-	-	1	-	-	-	2	1	2	-	6
Optometry	-	-	-	-	-	-	-	-	-	2	-	-	-	2
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacy	-	3	-	-	-	-	-	-	17	2	4	2	-	28
Physiotherapy	-	-	-	-	-	-	-	1	-	1	-	-	-	2
Podiatry	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Psychology	-	3	-	-	-	-	-	-	-	3	1	2	-	9
Speech Pathologist	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Exempt	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Total	2	51	14	9	0	10	2	30	79	85	43	331	9	665

Demographics

Reporting parameters for demographics data were updated as of June 2017. Previously, demographics contained within the office's reporting related to complaints that had completed the assessment process during the reporting period.

Refinements to systems and processes now allow for reporting on the demographics of complainants, consumers and practitioners who have made, or were identified in, a complaint during the reporting period. This change will result in higher numbers in the following four tables from June 2017.

This update is an example of the office's commitment to continual improvement as it matures as an agency and the importance it places on transparent, robust data.

Unless otherwise specified, data is based on healthcare consumers, not the complainant, as the complainant in a matter may not be the consumer of the health service. Matters where the healthcare consumer is an organisation are not included in these figures.

Gender

Gender	Number	Percentage
Female	641	50.43
Male	599	47.13
Prefer not to specify	4	2.12
Unknown	27	0.31
Total	1271	100.00

Age

Age	Number	Percentage
Less than 18	63	4.96
18–24 years	62	4.88
25–34 years	248	19.51
35–44 years	249	19.59
45–54 years	214	16.84
55–64 years	165	12.98
65–74 years	105	8.26
More than 75 years	73	5.74
Unknown*	92	7.24

*Age not recorded or not provided for a particular matter.

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	547	43.04
Central West	2	0.16
Darling Downs	45	3.54
Far North	67	5.27
Fitzroy	48	3.78
Gold Coast	121	9.52
Mackay	26	2.05
North West	9	0.71
Northern	64	5.04
South West	7	0.55
Sunshine Coast	64	5.04
West Moreton	22	1.73
Wide Bay-Burnett	115	9.05
Outside Queensland	39	3.07
Unknown	95	7.47

The above data is based on health consumer location.

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	696	45.05
Central West	4	0.26
Darling Downs	58	3.75
Far North	78	5.05
Fitzroy	54	3.50
Gold Coast	156	10.10
Mackay	40	2.59
North West	7	0.45
Northern	78	5.05
South West	9	0.58
Sunshine Coast	87	5.63
West Moreton	13	0.84
Wide Bay-Burnett	109	7.06
Outside Queensland*	25	1.62
Unknown	131	8.48

The above data is based on health service provider location.

*Health service provider location is taken from the primary address of the provider recorded in the OHO complaints management system. Complaints can be made about health service providers from other states who have provided health services in Queensland. This could include locums travelling to Queensland from interstate or providers who previously lived in Queensland providing services but have since moved interstate—as the OHO can deal with complaints up to two years old.



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