Office of the Health Ombudsman

Performance report December 2016



Office of the Health Ombudsman—Performance report December 2016

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Introduction

This document reports on our performance during December 2016.

As Queensland's health service complaints agency, the Office of the Health Ombudsman (OHO) aims to protect the health and safety of the public by assessing, investigating and resolving complaints made about health services provided in Queensland.

Our vision is to be the cornerstone of a transparent, accountable and fair system for effectively and quickly dealing with complaints and other healthcare matters in Queensland. Our performance reports—which we update and publish monthly, quarterly and yearly—are a testament to this.

The office is committed to ensuring that all decisions are well-informed, fair, impartial and timely.

Data in this report are correct as at 9 January 2017, but are subject to change.

Number of contacts

Type of contact	Number	Percentage
Complaint	407	59.68
Enquiry	274	40.18
Yet to be classified	1	0.15
Total	682	100.00

This data is based on contacts with the OHO during the month. Matters that are 'yet to be classified' are contacts in which not enough information was provided initially to allow for a determination and additional information is being sought, or are 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.

Contacts 'yet to be classified' at the time of running this report will continue to be allocated as complaints (and enquiries) as additional information is received. However, decisions on these complaints will be registered in the next reporting period.

Type of complaints

Type of complaints	Number	Percentage
Health consumer complaint	335	82.31
Mandatory notification*	31	7.62
Voluntary notification*	27	6.63
Self-notification*	2	0.49
Referral**	12	2.95
Total	407	100.00

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

^{**}Referrals are matters referred by government and non-government agencies to the OHO.

Decisions

Number of decisions made

Number of decisions made	Number	Percentage
Accepted	397	63.12
Not accepted	210	33.39
Decision pending	22	3.49
Total	629	100.00

^{&#}x27;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.

Decisions made within seven days

In December, there was a significant increase in the proportion of decisions made within seven days, up to 82.54 per cent from 49.83 per cent in November. 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 within seven days of receiving a complaint	Number	Percentage
Yes	501	82.54
No	106	17.46
Total	607	100.00

Health service complaints profile

Reporting parameters for the identification of issues in complaints were updated as of October 2016. Previously, issues contained within the office's reporting related to complaints that completed the office's assessment process during the reporting period.

Refinements to systems and processes now allow for the reporting of all issues identified in complaints during the reporting period. This change will result in higher numbers of issues appearing in the following three tables from October 2016.

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.

Main issues raised in complaints

Issue	Number	Percentage
Access	35	5.13
Code of conduct for healthcare workers	4	0.59
Communication/information	97	14.22
Consent	9	1.32
Discharge/transfer arrangements	10	1.47
Environment/management of facilities	18	2.64
Enquiry service	0	0.00
Fees/cost	15	2.20
Grievance processes	7	1.03
Medical records	16	2.35
Medication	61	8.94
Professional conduct	74	10.85
Professional health	32	4.69
Professional performance	293	42.96
Reports/certificates	11	1.61
Treatment	0	0.00
Total	682	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	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/ certificates	Research/ teaching/ assessment	Total
Alternative care	-	2	-	-	-	-	-	-	-	-	2	-	-	-	-	4
Chinese medicine	-	-	-	1	-	-	-	-	-	-	9	1	2	-	-	13
Chiropractor	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	2
Dentistry	-	-	3	2	-	3	2	-	1	1	6	-	17	-	-	35
Emergency care	-	-	2	-	-	-	1	-	-	-	-	-	5	-	-	8
General medical	5	-	28	1	2	-	3	-	2	21	14	7	60	1	-	144
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	2
Medical specialty	-	-	9	-	1	1	2	-	1	-	2	-	18	5	-	39
Nursing	-	-	5	-	-	-	-	-	1	5	21	15	11	1	-	59
Occupational therapy	-	-	2	-	-	-	-	-	-	-	1	-	-	-	-	3
Optometry	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	2
Osteopathy	-	-	-	1	-	-	-	-	1	-	1	-	1	-	-	4
Other	-	2	-	1	-	-	-	-	-	-	5	-	2	-	-	10
Pathology	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Pharmacy	-	-	-	-	-	-	-	-	-	5	3	3	-	-	-	11
Physiotherapy	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Podiatry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Psychology	-	-	4	-	-	2	-	-	2	1	1	3	3	-	-	16
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	2
Surgical	-	-	7	1	-	-	-	1	-	-	1	-	33	2	-	45
Total	5	4	61	7	3	6	8	1	8	33	68	32	155	10	0	401

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	Communication and information	Consent	Discharge/ transfer arrangements	Environment/ management of facility	Fees and costs	Grievance process	Medical records	Medication	Professional conduct	Professional performance	Reports/ certificates	Research/ teaching/ assessment	Total
Aged care facility	-	-	-	-	-	-	1	-	-	-	3	-	-	4
Allied health service	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Ambulance service	-	1	-	-	-	-	-	-	-	-	1	-	-	2
Community health service	-	1	-	-	-	-	-	-	-	-	1	-	-	2
Correctional facility	17	2	-	-	-	-	1	1	21	-	45	1	-	88
Dental service	1	-	-	-	-	1	-	-	-	-	2	-	-	4
Hospital and Health Service	2	-	-	-	-	-	-	-	-	-	1	-	-	3
Laboratory service	-	-	-	-	-	1	-	-	-	-	-	-	-	1
Licensed private hospital	-	4	1	1	-	1	-	1	5	1	7	-	-	21
Medical centre	3	1	-	-	-	2	1	1	-	2	2	-	-	12
Mental health service	2	4	-	-	-	-	-	-	-	-	8	-	-	14
Nursing service	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Other support service	-	-	-	-	-	-	-	-	-	-	3	-	-	3
Pharmaceutical service	-	1	-	-	-	-	-	-	2	1	-	-	-	4
Private organisation	1	1	-	-	1	-	1	-	-	-	3	-	-	7
Public health service	-	3	-	-	2	-	-	-	-	1	6	-	-	12
Public hospital	3	17	1	6	9	-	2	5	-	1	55	-	-	99
Residential care service	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Specialised health service	1	1	-	-	-	2	-	-	-	-	-	-	-	4
Not yet known	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Total	30	36	2	7	12	7	6	8	28	6	138	1	0	281

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 month	Number
Assessments started	162
Assessments completed	205

Completed assessment timeframes

Of the 41 assessments completed within 60 days, 21 matters were approved for extension.

The 52 matters completed outside of 60 days were due to the continuing high volume of matters that require additional assessment, 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.

Overall, there was an improvement in the proportion of assessments completed within legislated timeframes, up to 64.88 per cent compared to 47.16 per cent in November. This improvement reflects the focus on targeted strategies to progress and finalise matters.

Assessment timeframes	Number	Percentage
Completed within 30 days	112	54.63
Completed within 60 days*	41	20.00
Completed in more than 60 days	52	25.37
Total	205	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	Number	Percentage
Local resolution	3	1.38
Conciliation	7	3.21
Investigation	8	3.67
Referred to AHPRA and the national boards	42	19.27
Referral to another entity	67	30.73
Immediate registration action*	1	0.46
Interim prohibition order*	0	0.00
No further action	90	41.28
Total	218	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 being 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 action decisions being made outside of the assessment process.

Local resolution

Local resolutions started and completed

Local resolutions this month	Number
Local resolutions started	64
Local resolutions completed	110

The number of local resolutions started in the month 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 resolutions

Timeframes

Of the 15 local resolution matters completed within 60 days, 8 were approved for extension.

Although we strive to finalise all matters within legislated timeframes, some can take longer than others due to factors outside of our control, such as delays in receiving information and responses from individual parties.

Local resolution timeframes	Number	Percentage
Completed within 30 days	95	86.36
Completed within 60 days*	15	13.63
Completed in more than 60 days	0	0.00
Total	110	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	Number	Percentage
Resolved	97	88.18
Not resolved	10	9.09
Complaint withdrawn*	3	2.72
Total	110	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	Number	Percentage
Assessment	0	0.00
Conciliation	0	0.00
Investigation	0	0.00
Referred to AHPRA and the national boards	1	10.00
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	9	90.00
Total	10	100.00

Conciliation

Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	64
Conciliations started	9
Conciliations closed	9

The number of conciliations started in the reporting period may not match the number of decisions to refer for conciliation noted in other areas of the report 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 in conciliation	Number
Party/ies agreed to conciliation	9
Party/ies did not agree to conciliation	2
Decision pending at end of month	23

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

Completed conciliation timeframes	Number	Percentage
Less than 3 months	3	42.86
3–6 months	4	57.14
6–9 months	0	0.00
9–12 months	0	0.00
More than 12 months	0	0.00
Total	7	100.00

The data above relates to matters where parties agreed to participate in conciliation and the conciliation process was completed within the specified timeframes. Completed conciliations differ from closed conciliations (in the table above) as they only relate to matters where parties agreed to participate and the conciliation process was completed.

Outcomes

Conciliation outcomes	Number	Percentage
Successful	6	85.71
Not successful	1	14.29
Ended by Health Ombudsman	0	0.00
Total	7	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	Number	Percentage
Local resolution	0	0.00
Investigation	0	0.00
Referred to AHPRA and the national boards	0	0.00
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	1	100.00
Total	1	100.00

Open conciliation timeframes

Open conciliation timeframes	Number	Percentage
Less than 3 months	35	54.69
3–6 months	19	29.69
6–9 months	3	4.69
9–12 months	2	3.13
More than 12 months	5	7.81
Total	64	100.00

Matters can be referred simultaneously to conciliation and another relevant action. Conciliation may not commence until after the other relevant action has been finalised.

There are 13 matters on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). This includes 4 matters that have been open for less than 3 months, 2 that have been open for 9–12 months, and 5 that have been open for more than 12 months.

Investigation

Investigations started and closed

Investigations this month	Number
Investigations open at the beginning of the month	359
Investigations started	23
Investigations closed	22

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 due to investigations being started via other processes (e.g. own-motion investigation).

Closed investigations

Timeframes

Closed investigation timeframes	Number	Percentage
Less than 3 months	2	9.09
3–6 months	0	0.00
6–9 months	3	13.64
9–12 months	0	0.00
More than 12 months	17	77.27
Total	22	100.00

Outcomes

Closed investigation outcomes	Number	Percentage
Recommended for referral to Director of Proceedings*	11	50.00
Referred to AHPRA	1	4.55
Referred to another agency	0	0.00
No further action	10	45.45
Total	22	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.

Open investigations

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

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

Active investigation timeframes

Active investigation timeframes	Number	Percentage
Less than 3 months	54	18.82
3–6 months	44	15.33
6–9 months	47	16.38
9–12 months	20	6.97
More than 12 months*	122	42.51
Total	287	100.00

^{*} All investigations that have been open for more than 12 months are published on the investigations register on the OHO website (www.oho.qld.gov.au).

Paused investigation timeframes

Paused investigation timeframes	Number	Percentage
Less than 3 months	5	6.85
3–6 months	3	4.11
6–9 months	15	20.55
9–12 months	9	12.33
More than 12 months	41	56.16
Total	73	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	Number	Percentage
Less than 3 months	59	16.39
3–6 months	47	13.06
6–9 months	62	17.22
9–12 months	29	8.06
More than 12 months	163	45.28
Total	360	100.00

Open investigation categories

Type of investigation	Number
Health service complaint	264
Systemic issue	33
Another matter*	63
Total	360

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

Immediate action

The Health Ombudsman can take immediate action against both registered and unregistered health practitioners if the Health Ombudsman reasonably believes the practitioner poses a serious risk to the health and safety of the public.

Show cause notices

In December, five show cause notices were issued. These relate to:

- three registered nurses for reasons relating to conduct
- one student nurse for reasons relating to conduct
- one dentist for reasons relating to conduct.

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 action

In December, the Health Ombudsman took immediate registration action against four registered health practitioners. These relate to:

- two registered nurses suspended for reasons relating to performance
- one registered nurse suspended for reasons relating to conduct and performance
- one dentist suspended for reasons relating to conduct and performance.

The Health Ombudsman can take immediate registration action if a registered health practitioner's health, conduct or performance means they pose a serious risk to people and immediate action is necessary to protect public health and safety.

The Health Ombudsman can temporarily suspend or impose conditions on the registration of registered health practitioners.

Prohibition orders

In December, the Health Ombudsman issued three prohibition notices. These relate to:

- two paramedics with restrictions for reasons relating to conduct
- one assistant in natural therapy with restrictions for reasons relating to conduct and performance.

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

The Health Ombudsman can issue an interim prohibition order if an unregistered health practitioner's health, conduct or performance means they pose a serious risk to people and immediate action is necessary to protect public health and safety.

An interim prohibition order can *prohibit* or *restrict* a health 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.

Australian Health Practitioner Regulation Agency

Notifications from AHPRA

There were no new notifications (s193 of the Act) relating to possible serious matters in December. The Health Ombudsman requested the referral of one matter from AHPRA back to the OHO.

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number
Aboriginal and Torres Strait Islander health	0
Chinese medicine	10
Chiropractic	2
Dental	16
Medical	99
Medical student	0
Medical radiation	1
Nursing and midwifery	36
Nursing student	0
Occupational therapy	0
Optometry	1
Osteopathy	1
Pharmacy	8
Physiotherapy	2
Podiatry	0
Psychology	7
Unregistered practitioner	0
Total	183

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 process	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/ certificates	Total
Aboriginal and Torres Strait Islander health	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine	-	-	1	-	-	-	-	-	-	8	-	2	-	11
Chiropractic	-	-	-	-	-	-	-	-	-	1	-	1	-	2
Dental	-	1	3	-	-	-	-	-	-	5	-	19	-	28
Medical	6	29	3	1	1	-	-	3	20	11	6	104	4	188
Medical student	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Medical radiation	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Nursing and midwifery	-	6	-	-	-	-	-	-	6	13	10	11	1	47
Nursing student	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Optometry	-	-	-	-	-	-	-	-	-	1	1	-	-	2
Osteopathy	-	-	-	-	-	-	-	1	-	-	-	1	-	2
Pharmacy	-	-	-	-	-	-	-	-	6	1	3	-	-	10
Physiotherapy	-	-	-	-	-	-	-	-	-	2	-	-	-	2
Podiatry	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Psychology	-	1	-	-	2	-	-	2	-	1	2	2	-	10
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Total	6	37	7	1	3	0	0	6	32	43	23	140	5	303

The figures above represent the number of issues referred to AHPRA, not the number of practitioners. The referral of a single practitioner may include multiple issues relating to that practitioner, with each issue requiring its own action.

Demographics

The following demographic data is based on matters that have completed the assessment process. Basing figures on completed assessments produces accurate reporting as all relevant details of a matter have been identified.

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	95	47.98
Male	98	49.49
Unknown	5	2.53
Total	198	100.00

Age

Age	Number	Percentage
Less than 18	11	5.56
18–24 years	12	6.06
25–34 years	23	11.62
35–44 years	41	20.71
45–54 years	45	22.73
55–64 years	24	12.12
65–74 years	7	3.54
More than 75 years	15	7.58
Unknown*	20	10.10

^{*}Not recorded or not provided for a particular matter.

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	72	36.36
Central West	0	0.00
Darling Downs	7	3.54
Far North	13	6.57
Fitzroy	8	4.04
Gold Coast	22	11.11
Mackay	6	3.03
North West	1	0.51
Northern	16	8.08
South West	5	2.53
Sunshine Coast	10	5.05
West Moreton	3	1.52
Wide Bay-Burnett	13	6.57
Outside Queensland	9	4.55
Unknown	13	6.57

The above data is based on health consumer location.

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	93	43.66
Central West	0	0.00
Darling Downs	10	4.69
Far North	11	5.16
Fitzroy	7	3.29
Gold Coast	22	10.33
Mackay	3	1.41
North West	0	0.00
Northern	18	8.45
South West	2	0.94
Sunshine Coast	8	3.76
West Moreton	4	1.88
Wide Bay-Burnett	15	7.04
Outside Queensland*	7	3.29
Unknown	12	5.63

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.

