

Office of the Health Ombudsman

Performance report March 2016



Office of the Health Ombudsman—Performance report March 2016

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Introduction

This document contains our performance data for March 2016. Over time, our monthly data will identify trends which will inform our work in promoting improved health service delivery by health service providers, and in identifying systemic issues. As we continue to monitor our performance data, we will also look for areas of improvement, innovation and greater efficiency.

Importantly, our monthly performance reporting highlights our commitment to transparency and accountability, and our desire to ensure Queenslanders have confidence in the management of health service complaints.

The Office of the Health Ombudsman (OHO) commenced operation on 1 July 2014 as Queensland's health service complaints management agency. On commencement, the OHO not only started receiving enquiries and health service complaints, but assumed responsibility for 289 matters previously managed by the Health Quality and Complaints Commission. All matters transitioned from the commission that have been reviewed, audited and processed within the OHO's health service complaints management system are integrated within this data.

In addition, during August 2014, the OHO began reviewing current matters from the Australian Health Practitioner Regulation Agency (AHPRA) and the national boards to determine those that were most appropriately dealt with by the OHO, and those that should continue to be dealt with by AHPRA. The OHO took on this existing work in conjunction with the notification (after 1 July) of new serious matters by AHPRA to the OHO for determination and action, as appropriate. These matters are included within the data of this report.

Data in this report is correct as at 14 April 2016, but is subject to change.

Number of contacts

Type of contact	Number	Percentage
Complaint	479	53.34
Enquiry	378	42.09
Yet to be classified	41	4.57
Total	898	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	397	82.88
Mandatory notification*	45	9.39
Voluntary notification*	19	3.97
Self-notification*	14	2.92
Referral**	4	0.84
Total	479	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	375	66.60
Not accepted	85	15.10
Decision pending	103	18.30
Total	563	100.00

'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

A total of 898 contacts were made to the OHO in March, exceeding the previous record of 879 contacts set in February 2016. March also saw the:

- second highest number of complaint contacts made to the OHO (479)
- second highest number of decisions made within seven days (460)
- fourth highest number of enquiries made to the OHO (378).

These results are encouraging given that a number of staff from the Initial Screening team were on leave at various times throughout the month. It may also suggest that training programs implemented for Initial Screening staff are having a positive impact on productivity. These training sessions are scheduled to continue on a fortnightly basis in April.

In addition, the OHO is continuing to work with AHPRA to improve the accessibility of crucial data held by AHPRA relating to registered health practitioners. The historical lack of accessibility to this data has directly impacted on the OHO's ability to progress matters for decision within the required seven calendar days. It is hoped further collaboration will see increased accessibility in this space, leading to improvements in decision-making timeframes.

Decision made within seven days of receiving a complaint	Number	Percentage
Yes	271	58.91
No	189	41.09
Total	460	100.00

Health service complaints profile

Main issues raised in complaints

Issue	Number	Percentage
Access	2	0.83
Code of conduct for healthcare workers	0	0.00
Communication/information	43	17.77
Consent	1	0.41
Discharge/transfer arrangements	10	4.13
Environment/management of facilities	4	1.65
Enquiry service	0	0.00
Fees/cost	2	0.83
Grievance processes	6	2.48
Medical records	9	3.72
Medication	13	5.37
Professional conduct	12	4.96
Professional health	3	1.24
Professional performance	136	56.20
Reports/certificates	1	0.41
Treatment	0	0.00
Total	242	100.00

These figures are based on complaints that completed the assessment process during the month. Basing figures on completed assessments produces accurate reporting of the type(s) of issues identified as all relevant details of a matter have been identified at the time an assessment is completed. Please note, there can be multiple issues identified within a single complaint.

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	Enquiry service	Fees and costs	Grievance process	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Treatment	Total
Alternative care	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Chinese medicine	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dentistry	-	-	-	-	-	-	-	-	-	1	-	-	-	8	-	-	9
Emergency care	-	-	1	-	1	-	-	-	-	-	-	-	-	2	-	-	4
General medical	-	-	8	-	1	-	-	-	-	3	7	1	-	23	-	-	43
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical specialty	1	-	7	-	1	-	-	-	-	-	-	-	-	7	1	-	17
Nursing	-	-	1	-	1	-	-	-	-	1	1	2	2	5	-	-	13
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Optometry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	2	-	-	-	3	-	4	-	-	9
Pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-	-	2	1	-	-	-	-	3
Physiotherapy	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Podiatry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psychology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Surgical	-	-	6	-	1	-	-	-	-	1	-	1	-	23	-	-	32
Not yet known	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	1	-	23	-	5	-	-	2	-	6	10	8	3	73	1	-	132

These figures are based on complaints that completed the assessment process during the month. Basing figures on completed assessments produces accurate reporting of the type(s) of issues identified as all relevant details of a matter have been identified at the time an assessment is completed. Please note, there can be multiple issues identified within a single complaint.

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	Enquiry service	Fees and costs	Grievance process	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Treatment	Total
Aged care facility	-	-	-	-	-	-	-	-	1	-	-	1	-	1	-	-	3
Allied health service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ambulance service	-	-	1	-	-	-	-	-	-	-	-	-	-	2	-	-	3
Community health service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Correctional facility	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	2
Dental service	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Health service district	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Laboratory service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Licensed day hospital	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Licensed private hospital	1	-	4	-	1	1	-	-	1	3	-	1	-	9	-	-	21
Medical centre	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mental health service	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	2
Nursing service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other government department	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Other support service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmaceutical service	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	2
Public health service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Public hospital	-	-	12	1	4	2	-	-	4	-	1	-	-	49	-	-	73
Residential care service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Specialised health service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Not yet known	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	1	-	20	1	5	4	-	-	6	3	3	4	-	63	-	-	110

These figures are based on complaints that completed the assessment process during the month. Basing figures on completed assessments produces accurate reporting of the type(s) of issues identified as all relevant details of a matter have been identified at the time an assessment is completed. Please note, there can be multiple issues identified within a single complaint.

Assessment

Assessments started and completed

Assessments this month	Number
Assessments started	150
Assessments completed	118

Completed assessment timeframes

A total of 62 assessments were completed within 60 days in March, including 29 matters which were eligible for and received an approved extension (beyond the initial 30-day period). The 56 matters that were completed in more than 60 days took longer to complete due to various factors, including high levels of assessment matters, the complexity and/or seriousness of certain matters, delays in receiving information from parties or in sourcing the necessary independent clinical advice required to appropriately assess the matters.

Assessment timeframes	Number	Percentage
Completed within 30 days	26	22.03
Completed within 60 days	36	30.51
Completed in more than 60 days	56	47.46
Total	118	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	16	12.80
Conciliation	9	7.20
Investigation	7	5.60
Referred to AHPRA and the national boards	43	34.40
Referral to another entity	8	6.40
Immediate registration action*	0	0.00
Interim prohibition order*	0	0.00
No further action	42	33.60
Total	125	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	117
Local resolutions completed	142

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 resolution timeframes

There were 141 local resolutions completed within 60 days. Of these, 17 were completed between 30 and 60 days, with four matters eligible for and receiving an approved extension (beyond the initial 30-day period) while the remaining 11 matters were finalised without an extension due to the unexpected volume of complaints moving into local resolution in the previous month, together with high levels of staff absence due to illness.

The one matter that took more than 60 days to complete was eligible for and received an approved extension (beyond the initial 30-day period), but was completed in more than 60 days due to delays in obtaining information required by notice.

Local resolution timeframes	Number	Percentage
Completed within 30 days	124	87.32
Completed within 60 days	17	11.97
Completed in more than 60 days	1	0.70
Total	142	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.

Local resolution outcomes

Local resolution outcomes	Number	Percentage
Resolved	120	84.50
Not resolved	22	15.50
Complaint withdrawn*	0	0.00
Total	142	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	3	13.64
Conciliation	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	19	86.36
Total	22	100.00

Conciliation

Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	40
Conciliations started	10
Conciliations closed	5

The number of conciliations started in the reporting period may not 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 in conciliation	Number
Party/ies agreed to conciliation	5
Party/ies did not agree to conciliation	0
Decision pending at end of month	10

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 conciliation timeframes

Conciliations completed	Number	Percentage
Less than 3 months	2	40.00
3–6 months	1	20.00
6–9 months	2	40.00
9–12 months	0	0.00
More than 12 months	0	0.00
Total	5	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.

Completed conciliation outcomes

Conciliation outcomes	Number	Percentage
Successful	3	60.00
Not successful	2	40.00
Ended by Health Ombudsman	0	0.00
Total	5	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	2	100.00
Total	2	100.00

Open conciliation timeframes

Conciliations open	Number	Percentage
Less than 3 months	26	57.78
3–6 months	17	37.78
6–9 months	0	0.00
9–12 months	1	2.22
More than 12 months	1	2.22
Total	45	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.

Ten matters are currently on hold pending the outcome of another process (i.e. the process of another agency such as AHPRA). This includes three matters that have been open for less than 3 months, five matters that have been open for 3–6 months, one matter that has been open for 9–12 months and one matter that has been open for more than 12 months.

Investigation

Investigations started and closed

Investigations this month	Number
Investigations open at the beginning of the month	266
Investigations started	16
Investigations closed	9
Investigations paused*	0
Investigations re-commenced**	2

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).

*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 an external agency's processes. As a result, investigation of these matters will be put on hold until the external agency finalises its processes.

**These are matters that have been re-commenced by the OHO following an external agency completing their processes.

Closed investigation timeframes

Investigations closed	Number	Percentage
Less than 3 months	1	11.11%
3–6 months	2	22.22%
6–9 months	0	0.00%
9–12 months	3	33.33%
More than 12 months	3	33.33%
Total	9	100.00

Closed investigation outcome

Closed investigation outcome	Number
Referred to Director of Proceedings	1
Report	0
Referred to AHPRA	7
Referred to another agency	0
No further action	1

Open investigation timeframes

Investigations open	Number	Percentage
Less than 3 months	27	9.82
3–6 months	38	13.82
6–9 months	32	11.64
9–12 months	43	15.64
More than 12 months*	135	49.1
Total	275	100.00

This does not include the 63 paused matters currently with an external agency.

*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).

Open investigation categories

Type of investigation	Number
Health service complaint	238
Systemic issue	0
Another matter*	37

This does not include the 63 paused matters currently with an external agency.

*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

One show cause notice was issued against a medical practitioner on 4 March 2016.

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

The Health Ombudsman did not take immediate registration action against any registered health practitioner in March.

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

The Health Ombudsman issued one prohibition order to an audiologist on 11 March 2016.

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

One new notification (s193 of the Act) about a possible serious matter was received in March. No matters were requested for referral to the Health Ombudsman.

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number
Aboriginal and Torres Strait Islander health	0
Chinese medicine	0
Chiropractic	4
Dental	15
Medical	93
Medical student	0
Medical radiation	5
Nursing and midwifery	25
Nursing student	0
Occupational therapy	1
Optometry	2
Osteopathy	4
Pharmacy	4
Physiotherapy	0
Podiatry	1
Psychology	6
Unregistered practitioner	0
Total	160

Number of issues referred to AHPRA by practitioner type

Registered practitioner type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Enquiry service	Fees and costs	Grievance process	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Treatment	Total
Aboriginal and Torres Strait Islander health	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese medicine	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chiropractic	-	-	1	-	-	-	-	-	-	-	-	2	-	1	-	-	4
Dental	-	-	-	2	-	-	-	-	-	1	-	1	1	10	-	-	15
Medical	-	-	15	1	1	-	-	2	-	5	5	12	4	102	4	-	151
Medical student	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-	4
Nursing and midwifery	-	-	3	-	-	-	-	4	-	1	5	12	7	15	-	-	47
Nursing student	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Optometry	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-	-	4	-	-	-	-	-	4
Physiotherapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Podiatry	-	-	-	-	-	-	-	-	-	-	-	5	-	-	-	-	5
Psychology	-	-	-	-	-	-	-	-	-	3	-	3	1	3	-	-	10
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	19	3	1	-	-	6	-	10	14	38	15	133	4	-	243

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	58	54.21
Male	47	43.93
Unknown	2	1.87
Total	107	100.00

Age

Age	Number	Percentage
Less than 18	5	4.79
18–24 years	10	9.35
25–34 years	14	13.08
35–44 years	20	18.69
45–54 years	11	10.28
55–64 years	14	13.08
65–74 years	10	9.35
More than 75 years	15	14.02
Unknown*	8	7.48

*Not recorded or not provided for a particular matter.

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	52	48.60
Central West	0	0.00
Darling Downs	7	6.54
Far North	3	2.80
Fitzroy	4	3.75
Gold Coast	10	9.35
Mackay	3	2.80
North West	0	0.00
Northern	4	3.74
South West	0	0.00
Sunshine Coast	11	10.28
West Moreton	3	2.80
Wide Bay–Burnett	4	3.74
Outside Queensland	1	0.93
Unknown	5	4.67

The above data is based on health consumer location.

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	68	55.74
Central West	0	0.00
Darling Downs	5	4.10
Far North	2	1.64
Fitzroy	2	1.64
Gold Coast	10	8.20
Mackay	3	2.46
North West	0	0.00
Northern	4	3.28
South West	0	0.00
Sunshine Coast	15	12.30
West Moreton	1	0.82
Wide Bay–Burnett	3	2.46
Outside Queensland*	9	7.39
Unknown	0	0.00

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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