# Office of the Health Ombudsman

Performance report November 2015



#### Office of the Health Ombudsman—Performance report November 2015

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#### For more information contact:

Office of the Health Ombudsman, PO Box 13281 George Street, Brisbane Qld 4003, email <a href="mailto:communications@oho.qld.gov.au">communications@oho.qld.gov.au</a>, phone 133 OHO (133 646).

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### Introduction

This document contains our performance data for November 2015. 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 7 December 2015, but is subject to change.

### **Number of contacts**

Type of contact	Number	Percentage
Complaint	377	47.90
Enquiry	321	40.79
Yet to be classified	89	11.31
Total	787	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	275	72.94
Mandatory notification*	64	16.99
Voluntary notification*	10	2.65
Self-notification*	10	2.65
Referral**	18	4.77
Total	377	100.00

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

<sup>\*\*</sup>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	231	65.07
Not accepted	46	12.96
Decision pending	78	21.97
Total	355	100.00

<sup>&#</sup>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**

The OHO received the second highest number of contacts since opening (787), with 377 of these contacts (as shown in the table on the previous page) being categorised as complaints—the highest number since the OHO started. This was compounded by new staff having to manage an increased caseload. This contributed to a lower percentage of decisions being made within seven calendar days when compared to the previous two months.

Strategies have been put in place to manage the increasingly high level of contacts being received by the OHO and to ensure staff are able to process these matters as quickly as possible, while still ensuring a high level of service to parties involved in complaints.

Decision made within seven days of receiving a complaint	Number	Percentage
Yes	124	44.77
No	153	55.23
Total	277	100.00

## Health service complaints profile

## Main issues raised in complaints

Issue	Number	Percentage	
Access	4	0.81	
Code of conduct for healthcare workers	1	0.20	
Communication/information	62	12.53	
Consent	14	2.83	
Discharge/transfer arrangements	10	2.02	
Environment/management of facilities	11	2.22	
Fees/cost	4	0.81	
Grievance processes	10	2.02	
Medical records	15	3.03	
Medication	35	7.07	
Professional conduct	61	12.32	
Professional health	25	5.05	
Professional performance	241	48.69	
Reports/certificates	2	0.40	
Treatment	0	0.00	
Total	495	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	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	2
Dentistry	-	-	1	1	-	-	-	-	1	1	-	1	-	19	-	-	24
Emergency care	-	-	4	1	-	-	-	-	-	-	1	1	-	4	-	-	11
General medical	1	-	13	2	1	1	-	-	-	4	13	12	5	67	1	-	120
Medical radiation	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Medical specialty	-	1	4	3	-	-	-	-	-	-	3	5	-	20	-	-	36
Nursing	-	-	-	-	-	1	-	-	-	1	-	10	10	2	-	-	24
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	-	3
Optometry	-	-	-	-	-	-	-	-	-	-	-	2	-	3	-	-	5
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other	-	-	2	-	-	-	-	-	-	-	1	10	7	9	-	-	29
Pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	2	-	-	-	-	-	-	1	4	7	2	-	-	-	16
Physiotherapy	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	2
Podiatry	-	-	-	-	-	-	-	1	1	-	-	2	-	1	-	-	5
Psychology	-	-	1	-	-	-	-	1	1	2	-	6	1	4	-	-	16
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Surgical	-	-	7	1	1	-	-	-	-	-	1	-	-	34	-	-	44
Not yet known	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	1	1	35	9	2	2	-	2	3	11	23	57	25	166	2	-	339

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	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	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Allied health service	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Ambulance service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Community health service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Correctional facility	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	2
Dental service	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	2
Health service district	1	-	-	2	-	-	-	1	-	-	-	-	2	-	-	6
Laboratory service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Licensed day hospital	-	1	-	-	-	-	1	-	-	-	-	-	1	-	-	3
Licensed private hospital	-	4	-	-	4	-	1	1	-	2	-	-	12	-	-	24
Medical centre	1	1	-	-	-	-	-	-	1	-	-	-	-	-	-	3
Mental health service	-	2	1	-	1	-	-	1	1	1	2	-	6	-	-	15
Nursing service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other government department	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other support service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmaceutical service	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Public health service	-	-	1	-	-	-	-	-	-	-	-	-	2	-	-	3
Public hospital	1	17	3	6	4	-	-	3	2	6	2	-	48	-	-	92
Residential care service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Specialised health service	-	1	-	-	-	-	-	-	-	-	-	-	3	-	-	4
Not yet known	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	3	27	5	8	9	-	2	7	4	12	4	-	75	-	-	156

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	152
Assessments completed	262

#### **Completed assessment timeframes**

A significantly higher percentage of assessments were completed within 30 days than has been achieved for several months and there continues to be a focus on finalising assessments that have been open for more than 60 days.

This has been achieved while starting the highest number of assessments in eight months (152) and closing the second highest number of assessments (262) since the OHO began in July 2014.

The OHO has a continued focus on processing older assessments while ensuring the ongoing high number of new assessments are worked through quickly, while still ensuring quality decision making and a high level of service for parties involved in complaints.

Assessment timeframes	Number	Percentage
Completed within 30 days	114	43.51
Completed within 60 days*	37	14.12
Completed in more than 60 days**	111	42.37
Total	262	100.00

<sup>\*</sup>Assessments are able to be completed within 60 days when granted an extension of 30 days as a result of legislated requirements being met. Of the 37 assessments completed within 60 days, 10 matters were eligible for and received an approved extension.

<sup>\*\*111</sup> matters were completed outside of 60 days due to high levels of assessment matters, the complexity of certain matters and delays in receiving information from parties or in sourcing the necessary independent clinical advice required to appropriately assess the matters.

#### **Assessment decisions**

Type of relevant action	Number	Percentage		
Local resolution	10	3.69		
Conciliation	4	1.48		
Investigation	10	3.69		
Referred to AHPRA and the national boards	170	62.73		
Referral to another entity	5	1.85		
Immediate registration action*	0	0.00		
Interim prohibition order*	0	0.00		
No further action	72	26.56		
Total	271	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	92
Local resolutions completed	81

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**

Local resolution timeframes	Number	Percentage
Completed within 30 days	68	82.93
Completed within 60 days*	13	17.07
Completed in more than 60 days**	0	0.00
Total	81	100.00

<sup>\*</sup>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. Of the 13 local resolution matters completed within 60 days, seven were eligible for and received an approved extension. The remaining six matters completed within 60 days were finalised without an extension due to the volume of complaints moving into local resolution during a period of reduced resource availability.

#### **Local resolution outcomes**

Local resolution outcomes	Number	Percentage
Resolved	76	93.83
Not resolved	4	4.94
Complaint withdrawn*	1	1.23
Total	81	100.00

<sup>\*</sup>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
Conciliation	0	0.00
Investigation	0	0.00
Referred to AHPRA and the national boards	1	25.00
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	3	75.00
Total	4	100.00

#### Conciliation

#### Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	44
Conciliations started	6
Conciliations closed	17

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	2
Party/ies did not agree to conciliation	4
Decision pending at end of month	12

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	3	23.08
3–6 months	7	53.84
6–9 months	3	23.08
9–12 months	0	0.00
More than 12 months	0	0.00
Total	13	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	9	69.23
Not successful	4	30.77
Ended by Health Ombudsman	0	0.00
Total	13	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	4	100.00
Total	4	100.00

## **Open conciliation timeframes**

Conciliations open	Number	Percentage
Less than 3 months	25	75.76
3–6 months	6	18.18
6–9 months	1	3.03
9–12 months	0	0.00
More than 12 months	1	3.03
Total	33	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 currently eight matters in the table above on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). These eight matters include six that have been open less than 3 months, one that has been open between 3 and 6 months and one 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	259
Investigations started	14
Investigations closed	27
Investigations paused*	6
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 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.

### **Closed investigation timeframes**

Investigations closed	Number	Percentage
Less than 3 months	3	11.11
3–6 months	7	25.93
6–9 months	5	18.52
9–12 months	5	18.52
More than 12 months	7	25.93
Total	27	100.00

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

### **Closed investigation outcome**

Closed investigation outcome	Number
Referred to Director of Proceedings	2
Report	2
Referred to AHPRA	16
Referred to another agency*	1
No further action	6

<sup>\*</sup>One matter was referred to the Queensland Police Service.

### **Open investigation timeframes**

Investigations open	Number	Percentage
Less than 3 months	29	11.98
3–6 months	50	20.66
6–9 months	34	14.05
9–12 months	34	14.05
More than 12 months*	95	39.26
Total	242	100.00

This does not include the 38 paused matters currently with an external agency.

### **Open investigation categories**

Type of investigation	Number
Health service complaint	214
Systemic issue	0
Another matter*	28

This does not include the 38 paused matters currently with an external agency.

<sup>\*</sup>All investigations that have been open for more than 12 months are published on the investigations register on the OHO website (<a href="https://www.oho.qld.gov.au">www.oho.qld.gov.au</a>).

<sup>\*</sup>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

Five show cause notices were issued in November.

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

No immediate registration actions were taken in November.

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 November, the Health Ombudsman issued three separate interim prohibition orders. Interim prohibition orders were issued to a massage therapist, an unregistered chiropractor and a counsellor.

The details for current prohibition orders can be found on the OHO website (<a href="www.oho.qld.gov.au">www.oho.qld.gov.au</a>) 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**

Two new notifications (s193 of the *Health Ombudsman Act 2013*) about possible serious matters were received this month. One matter was requested for referral to the Health Ombudsman, while the other was left with AHPRA to manage.

## Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number
Aboriginal and Torres Strait Islander health	-
Chinese medicine	-
Chiropractic	1
Dental	15
Medical	100
Medical radiation	-
Nursing and midwifery	29
Occupational therapy	2
Optometry	1
Osteopathy	-
Pharmacy	8
Physiotherapy	2
Podiatry	1
Psychology	4
Unregistered practitioner	-
Total	163

## Number of issues referred to AHPRA by practitioner type

Registered practitioner type	Access	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	-	-	1
Dental	-	2	-	-	-	-	-	1	-	-	1	-	17	-	-	21
Medical	-	20	6	2	1	-	-	1	8	10	14	7	103	2	-	174
Medical student	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nursing and midwifery	-	-	-	-	-	-	-	-	1	-	15	18	2	-	-	36
Nursing student	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Occupational therapy	-	-	-	-	-	-	-	-	-	-	1	-	2	1	-	4
Optometry	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-	5	2	1	-	-	-	8
Physiotherapy	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	2
Podiatry	-	-	-	-	-	-	1	1	-	-	2	-	1	-	-	5
Psychology	-	-	-	-	-	-	-	-	-	-	3	-	3	-	-	6
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	22	6	2	1	-	1	3	10	15	40	27	130	3	-	260

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	135	60.27
Male	89	39.73
Unknown	0	0.00
Total	224	100.00

#### Age

Age	Number	Percentage
Less than 18	16	7.14
18–24 years	13	5.80
25–34 years	27	12.05
35–44 years	34	15.18
45–54 years	36	16.07
55–64 years	37	16.52
65–74 years	25	11.16
More than 75 years	25	11.16
Unknown*	11	4.91

<sup>\*</sup>Not recorded or not provided for a particular matter.

### **Location of healthcare consumers**

Location of healthcare consumers	Number	Percentage
Brisbane	89	39.73
Central West	0	0.00
Darling Downs	5	2.23
Far North	7	3.13
Fitzroy	10	4.46
Gold Coast	29	12.95
Mackay	6	2.68
North West	1	0.45
Northern	22	9.82
South West	1	0.45
Sunshine Coast	23	10.27
West Moreton	6	2.68
Wide Bay-Burnett	11	4.91
Outside Queensland	10	4.46
Unknown	4	1.79

The above data is based on health consumer location.

## Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	131	43.96
Central West	0	0.00
Darling Downs	9	3.02
Far North	20	6.71
Fitzroy	12	4.03
Gold Coast	36	12.08
Mackay	7	2.35
North West	2	0.67
Northern	29	9.73
South West	1	0.34
Sunshine Coast	22	7.38
West Moreton	3	1.01
Wide Bay-Burnett	15	5.03
Outside Queensland*	11	3.69
Unknown	0	0.00

The above data is based on health service provider location.

<sup>\*</sup>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.

