Office of the Health Ombudsman

Performance report September 2016



Office of the Health Ombudsman—Performance report September 2016

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Introduction

This document reports on our performance for the month of September 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 is correct as at 13 October 2016, but is subject to change.

Number of contacts

Type of contact	Number	Percentage
Complaint	434	55.43
Enquiry	287	36.73
Yet to be classified	62	7.91
Total	783	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	330	76.04
Mandatory notification*	47	10.83
Voluntary notification*	44	10.14
Self-notification*	5	1.15
Referral**	8	1.84
Total	434	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	366	57.64
Not accepted	142	22.36
Decision pending	127	20.00
Total	635	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

OHO continues to experience challenges with accessing crucial data in relation to registered health practitioners in a timely manner. The lack of accessibility to this data directly impacts on the OHO's ability to progress matters to a delegate for a decision within the required 7 days. Despite attempts to resolve the issue of an appropriate flow of information from AHPRA to the OHO since April 2014, the OHO continues to face blockages to the practitioner data necessary for decisions to be made within statutory timeframes. The OHO continues to seek from AHPRA a satisfactory solution to the issue of data-sharing from AHPRA to OHO that meets parliament's intentions for co-regulation in Queensland.

Decision made within seven days of receiving a complaint	Number	Percentage
Yes	238	46.85
No	270	53.15
Total	508	100.00

Health service complaints profile

Main issues raised in complaints

Issue	Number	Percentage		
Access	5	1.47		
Code of conduct for healthcare workers	0	0.00		
Communication/information	50	14.66		
Consent	8	2.35		
Discharge/transfer arrangements	13	3.81		
Environment/management of facilities	6	1.76		
Enquiry service	0	0.00		
Fees/cost	2	0.59		
Grievance processes	6	1.76		
Medical records	7	2.05		
Medication	35	10.26		
Professional conduct	19	5.57		
Professional health	1	0.29		
Professional performance	188	55.13		
Reports/certificates	1	0.29		
Treatment	0	0.00		
Total	341	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	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese medicine	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2
Dentistry	-	-	1	-	-	-	-	-	1	-	-	-	-	4	-	-	6
Emergency care	-	-	1	-	1	-	-	-	-	-	-	-	-	4	-	-	6
General medical	-	-	4	1	-	-	-	-	1	1	5	4	-	22	1	-	39
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical specialty	-	-	3	-	4	-	-	-	-	3	1	-	-	20	-	-	31
Nursing	-	-	2	1	-	-	-	-	-	-	2	5	1	4	-	-	15
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Optometry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	1	-	5	1	-	2	-	-	9
Physiotherapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Podiatry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psychology	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	3
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Surgical	-	-	3	4	-	-	-	1	-	-	-	-	-	11	-	-	19
Not yet known	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	14	6	5	-	-	1	3	4	13	15	1	69	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	-	-	5	-	-	7
Allied health service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ambulance service	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	2
Community health service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Correctional facility	4	-	4	-	-	-	-	-	-	-	8	-	-	13	-	-	29
Dental service	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	3
Hospital and Health Service	-	-	2	-	-	-	-	-	-	-	-	-	-	3	-	-	5
Laboratory service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Licensed private hospital	-	-	1	1	-	-	-	-	-	-	3	-	-	3	-	-	8
Medical centre	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	-	2
Mental health service	-	-	5	-	-	1	-	-	1	1	1	3	-	6	-	-	18
Nursing service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other government department	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other support service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmaceutical service	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	2
Private organisation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Public health service	-	-	-	-	1	-	-	-	1	-	1	-	-	8	-	-	11
Public hospital	1	-	22	1	6	4	-	-	1	1	7	1	-	75	-	-	119
Residential care service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Specialised health service	-	-	1	-	-	-	-	-	-	1	-	-	-	1	-	-	3
Total	5	-	36	2	8	6	-	1	3	3	22	4	-	119	-	-	209

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	165
Assessments completed	181

Completed assessment timeframes

Due to the complex nature of assessing complaints and the need to have all necessary information to make well-informed and impartial decisions, matters can run over legislated timeframes. Delays can also occur in receiving information from parties or in sourcing independent clinical advice. Of the 37 assessments completed within 60 days, 27 were approved extension. Meanwhile, 68 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 timeframes	Number	Percentage
Completed within 30 days	76	41.99
Completed within 60 days*	37	20.44
Completed in more than 60 days	68	37.57
Total	181	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	5	2.72	
Conciliation	15	8.15	
Investigation	3	1.63	
Referred to AHPRA and the national boards	49	26.63	
Referral to another entity	22	11.96	
Immediate registration action*	0	0.00	
Interim prohibition order*	0	0.00	
No further action	90	48.91	
Total	184	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	98
Local resolutions completed	125

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

In local resolution, delays sometimes occur in sourcing information from parties or due to the complexity of the matter which can result in matters being completed outside of legislated timeframes. All 3 local resolution matters completed within 60 days, were approved for extension.

Local resolution timeframes	Number	Percentage
Completed within 30 days	122	97.60
Completed within 60 days*	3	2.40
Completed in more than 60 days	0	0.00
Total	125	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	111	88.80
Not resolved	14	11.20
Complaint withdrawn*	0	0.00
Total	125	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	0	0.00
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	14	100.00
Total	14	100.00

Conciliation

Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	60
Conciliations started	16
Conciliations closed	15

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	13
Party/ies did not agree to conciliation	8
Decision pending at end of month	19

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	28.57
3–6 months	4	57.14
6–9 months	1	14.28
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.

Completed conciliation outcomes

Conciliation outcomes	Number	Percentage
Successful	5	71.43
Not successful	2	28.57
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	2	100.00
Total	2	100.00

Open conciliation timeframes

Conciliations open	Number	Percentage
Less than 3 months	39	63.93
3–6 months	11	18.03
6–9 months	4	6.56
9–12 months	5	8.20
More than 12 months	2	3.28
Total	61	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 12 matters on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). One of them has been open for less than 3 months, 1 for between 3 and 6 months, 3 for between 6 and 9 months, 5 for between 9 and 12 months, and 2 for more than 12 months.

Investigation

Investigations started and closed

Investigations this month	Number
Investigations open at the beginning of the month	367
Investigations started	18
Investigations closed	22
Investigations paused*	74
Investigations re-commenced**	1

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	2	9.09
3–6 months	6	27.27
6–9 months	0	0.00
9–12 months	2	9.09
More than 12 months	12	54.55
Total	22	100.00

^{**}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
Recommended for referral to Director of Proceedings	4
Report	3
Referred to AHPRA	6
Referred to another agency*	2
No further action	7

^{*} Two matters were referred to Queensland Police.

Open investigation timeframes

Investigations open	Number	Percentage
Less than 3 months	46	15.97
3–6 months	45	15.63
6–9 months	26	9.03
9–12 months	32	11.11
More than 12 months*	139	48.26
Total	362	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 matters are matters which are currently being dealt with by an external agency and cannot be progressed by the OHO.

Open investigation categories

Type of investigation	Number
Health service complaint	221
Systemic issue	35
Another matter*	32

This does not include 74 paused matters, which are 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

Six show cause notices were issued during the month in relation to:

- a medical practitioner for reasons relating to conduct
- two Chinese medical practitioners for reasons relating to performance
- a natural therapist for reasons relating to performance
- a pharmacist for reasons relating to conduct
- an unregistered provider 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

The Health Ombudsman took immediate registration action against three registered health practitioners during the month, including:

- one midwife, whose registration was suspended for reasons relating to conduct
- two medical practitioners, who had conditions imposed on their registrations for reasons relating to conduct.

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 September, the Health Ombudsman issued three interim prohibition orders. These related to:

- a community health worker (social worker) for reasons relating to conduct
- a massage therapist for reasons relating to conduct
- a midwife for reasons relating to conduct.

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 serious matters and no requests for referral to the Health Ombudsman in September

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number
Aboriginal and Torres Strait Islander health	1
Chinese medicine	1
Chiropractic	9
Dental	11
Medical	110
Medical student	0
Medical radiation	0
Nursing and midwifery	48
Nursing student	0
Occupational therapy	0
Optometry	0
Osteopathy	1
Pharmacy	16
Physiotherapy	1
Podiatry	1
Psychology	8
Unregistered practitioner	1
Total	208

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	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Chiropractic	-	-	3	-	-	-	-	-	-	-	-	6	-	4	-	-	13
Dental	-	-	2	-	-	-	-	-	-	1	-	4	-	8	-	-	15
Medical	-	-	15	4	6	-	-	5	-	5	12	19	6	79	8	-	159
Medical student	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nursing and midwifery	-	-	2	-	-	-	-	-	-	5	10	18	10	9	-	-	54
Nursing student	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Optometry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Pharmacy	-	-	2	-	-	-	-	-	1	-	10	2	3	1	-	-	19
Physiotherapy	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Podiatry	-	-	-	-	-	-	-	1	-	-	-	-		2	-	-	3
Psychology	-	-	3	-	-	2	-	-	-	1	-	4	2	2	2	-	16
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Total	-	-	27	4	6	2	-	6	1	12	32	54	22	107	10	-	283

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	88	52.69
Male	77	46.11
Unknown	2	1.20
Total	167	100.00

Age

Age	Number	Percentage
Less than 18	9	5.45
18–24 years	2	1.21
25–34 years	25	15.15
35–44 years	34	20.61
45–54 years	32	19.39
55–64 years	18	10.91
65–74 years	18	10.91
More than 75 years	20	12.12
Unknown*	7	4.24

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

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	64	38.79
Central West	0	0.00
Darling Downs	15	9.09
Far North	8	4.85
Fitzroy	5	3.03
Gold Coast	8	4.85
Mackay	5	3.03
North West	1	0.61
Northern	10	6.06
South West	5	3.03
Sunshine Coast	5	3.03
West Moreton	3	1.82
Wide Bay-Burnett	20	12.12
Outside Queensland	11	6.67
Unknown	5	3.03

The above data is based on health consumer location.

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	84	42.42
Central West	0	0.00
Darling Downs	15	7.58
Far North	12	6.06
Fitzroy	4	2.02
Gold Coast	16	8.08
Mackay	6	3.03
North West	0	0.00
Northern	12	6.06
South West	4	2.02
Sunshine Coast	12	6.06
West Moreton	2	1.01
Wide Bay-Burnett	18	9.09
Outside Queensland*	5	2.53
Unknown	8	4.04

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.

