

Office of the Health Ombudsman

Performance report April 2018



Office of the
**HEALTH
OMBUDSMAN**

Listen. Respond. Resolve.

Office of the Health Ombudsman—Performance report April 2018

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Introduction

This document reports on our performance during April 2018.

As Queensland's health service complaints agency, the Office of the Health Ombudsman (OHO) exists 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.

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

Data in this report is correct as at 3 May 2018, but is subject to change.

Intake of complaints

Type of contacts

Type of contact	Number	Percentage
Complaint	579	58.37
Enquiry	412	41.53
Yet to be classified	1	0.10
Total	992	100.00

'Yet to be classified' includes contacts in which not enough information was provided for a determination to be reached—but further information is being sought—or matters that were not able to be finalised prior to the end of the reporting period. Contacts deemed 'yet to be classified' will be allocated as complaints or enquiries once additional information is received and registered as such in the next reporting period.

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

Type of complaints

Type of complaints	Number	Percentage
Health consumer complaint	523	90.33
Mandatory notification*	14	2.42
Voluntary notification*	34	5.87
Self-notification*	1	0.17
Referral from another agency	7	1.21
Total	579	100.00

*Notifications are matters raised by health service providers which do not otherwise meet the definition of a health consumer complaint as required under the *Health Practitioner Regulation National Law (Queensland)* (the National Law).

Complaint decisions

Decision timeframes—within seven days

Decision made within seven days of receiving a complaint	Number	Percentage
Yes	447	86.29
No	71	13.71
Total	518	100.00

Accepted vs not accepted

Number of decisions made	Number	Percentage
Accepted	309	54.79
Not accepted*	209	37.06
Decision pending**	46	8.16
Total	564	100.00

*'Not accepted' decisions relate to matters in which the Health Ombudsman has decided to take no further action under section 44 of the *Health Ombudsman Act 2013* (the Act).

**'Decision pending' relates to matters where more information is required before a decision on whether to accept or not accept can be made, or because the matter came in just before the end of the reporting period and is still being processed.

An additional 20 matters were determined to fall outside the jurisdiction of the Act.

Accepted decision outcomes

Type of relevant action	Number	Percentage
Assessment	111	33.34
Local resolution	90	27.11
Conciliation	0	0.00
Investigation	4	1.20
Referral to AHPRA and the national boards	127	38.25
Referral to another entity	0	0.00
Immediate registration action	0	0.00
Interim prohibition order	0	0.00
Total	332	100.00

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

Health service complaints profile

Main issues raised in complaints

Issue	Number	Percentage
Access	46	6.03
Code of conduct for healthcare workers	13	1.70
Communication/information	86	11.27
Consent	11	1.44
Discharge/transfer arrangements	9	1.18
Environment/management of facilities	16	2.10
Enquiry service	0	0.00
Fees/cost	27	3.54
Grievance processes	17	2.23
<i>Health Ombudsman Act 2013 offence</i>	2	0.26
Medical records	29	3.80
Medication	102	13.37
Professional conduct	77	10.09
Professional health	8	1.05
Professional performance	298	39.06
Reports/certificates	22	2.88
Research/teaching/assessment	0	0.00
Total	763	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 issues identified in complaints by health practitioner

Practitioner type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance process	Health Ombudsman Act 2013 offence	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research/teaching/assessment	Total
Alternative care	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	2
Chinese medicine	-	-	-	-	-	-	-	-	-	-	1	2	-	-	-	-	3
Chiropractic	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Dentistry	-	-	1	1	-	-	4	1	-	2	1	4	-	14	-	-	28
Emergency care	-	-	-	-	-	-	-	-	-	1	-	-	-	6	-	-	7
General medical	4	-	23	4	-	1	3	1	-	5	28	21	3	80	6	-	179
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Medical specialty	1	-	2	1	-	-	1	-	-	1	1	4	1	14	2	-	28
Nursing	1	1	-	-	-	-	-	-	-	2	-	11	3	6	-	-	24
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Optometry	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	2
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Other	-	9	1	-	-	-	-	-	2	-	2	13	-	8	-	-	35
Pathology service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacy	-	-	-	-	-	-	-	-	-	-	13	1	1	-	-	-	15
Physiotherapy	-	-	1	-	-	-	-	-	-	-	-	4	-	1	-	-	6
Podiatry	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Psychology	-	1	4	-	-	-	-	1	-	3	1	5	-	3	6	-	24
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Surgical	-	-	1	3	-	-	-	-	-	1	-	1	-	11	1	-	18
Total	6	12	34	9	0	1	9	3	2	15	47	69	8	145	16	0	376

These figures are based on issues recorded during the reporting period. A single complaint can contain multiple issues.

Number and type of issues identified in complaints by health service organisation

Organisation type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance processes	Health Ombudsman Act 2013 offence	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research/teaching/assessment	Total
Aged care facility	1	-	1	-	-	-	-	-	-	-	2	-	-	5	-	-	9
Allied health service	-	-	-	-	-	-	-	-	-	1	1	-	-	1	-	-	3
Ambulance service	-	-	1	-	-	-	-	-	-	-	1	-	-	1	-	-	3
Community health service	-	-	1	-	-	-	-	-	-	-	-	1	-	1	1	-	4
Correctional facility	24	-	2	-	-	1	-	-	-	-	30	-	-	13	-	-	70
Dental service	2	-	-	-	-	-	6	-	-	-	-	1	-	4	-	-	13
Hospital and health service	-	-	-	-	-	-	-	-	-	1	-	-	-	3	-	-	4
Laboratory service	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	2
Licensed private hospital	-	-	7	-	1	-	3	-	-	1	1	2	-	6	-	-	21
Medical centre	2	-	6	-	-	8	4	2	-	6	3	-	-	9	2	-	42
Mental health service	2	-	6	-	1	2	-	3	-	2	2	1	-	5	2	-	26
Nursing service	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Other government department	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Other support service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmaceutical service	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	2
Public health service	-	-	2	-	-	-	-	-	-	-	-	-	-	4	-	-	6
Public hospital	7	-	25	2	7	4	1	8	-	3	14	3	-	97	1	-	172
Residential care service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Specialised health service	1	-	1	-	-	-	3	-	-	-	-	-	-	3	-	-	8
Total	40	1	52	2	9	15	18	14	0	14	55	8	0	153	6	0	387

These figures are based on issues recorded during the reporting period. A single complaint can contain multiple issues.

Assessment

Assessments started and completed

Assessments this month	Number
Assessments started	120
Assessments completed	186

Completed assessment timeframes

Of the 186 assessments finalised in April, 124 were completed within 30 days or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 66.67 per cent.

Of the 59 assessments completed within 60 days, 40 matters were approved for extension.

The 43 matters completed outside of 60 days were due to the seriousness and complexity of many of the matters as well as delays in receiving information from parties required to appropriately assess the matters.

Assessment timeframes	Number	Percentage
Completed within 30 days	84	45.16
Completed within 60 days*	59	31.72
Completed in more than 60 days	43	23.12
Total	186	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	0	0.00
Conciliation	11	5.85
Investigation	9	4.79
Referral to AHPRA and the national boards	14	7.45
Referral to another entity	60	31.91
Immediate registration action*	0	0.00
Interim prohibition order*	0	0.00
No further action	94	50.00
Total	188	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) 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 other 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	91
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 resolutions

Timeframes

Of the 81 local resolutions finalised in March, all were completed within 30 days or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 100 per cent.

Of the 9 local resolution matters completed within 60 days, 9 were approved for extension.

Local resolution timeframes	Number	Percentage
Completed within 30 days	72	88.89
Completed within 60 days*	9	11.11
Completed in more than 60 days	0	0.00
Total	81	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	60	74.07
Not resolved	13	16.05
Complaint withdrawn*	8	9.88
Local resolution did not commence**	0	0.00
Total	81	100.00

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

**A local resolution may not commence where the complaint is resolved directly with the health care provider prior to the commencement of the process.

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
Referral to AHPRA and the national boards	1	7.69
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	12	92.31
Total	13	100.00

Conciliation

Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	48
Conciliations started	13
Conciliations closed	14

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
Parties agreed to conciliation	6
Party/ies did not agree to conciliation	7
Decision pending at end of month	18

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	0	0.00
3–6 months	1	14.29
6–9 months	2	28.57
9–12 months	2	28.57
More than 12 months	2	28.57
Total	7	100.00

The data above relates to matters where both 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 on page 15—in that they only relate to matters where parties agreed to participate and the conciliation process was completed.

Outcomes

Conciliation outcomes	Number	Percentage
Successful	4	57.14
Not successful	3	42.86
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 table on page 15—in that they 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
Referral to AHPRA and the national boards	0	0.00
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	3	100.00
Total	3	100.00

Open conciliation timeframes

Open conciliation timeframes	Number	Percentage
Less than 3 months	20	41.67
3–6 months	8	16.67
6–9 months	8	16.67
9–12 months	6	12.50
More than 12 months	6	12.50
Total	48	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 10 matters on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). This includes 6 matters that have been open for less than 3 months, 1 that has been open for 9–12 months, and 3 that have been open for more than 12 months.

To allow for continued transparency in the timeliness of conciliation processes, open conciliation timeframes include the time in which a matter was on hold whilst another process was finalised.

Investigation

Investigations started and closed

Investigations this month	Number
Investigations open at the beginning of the month	195
Investigations started	15
Investigations closed	38
Investigations amalgamated under section 40(2)*	0

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).

*Matters that involve similar allegations against a health service provider may be combined and dealt with together under section 40(2) of the *Health Ombudsman Act 2013*.

Closed investigations

Timeframes

Closed investigation timeframes	Number	Percentage
Less than 3 months	5	13.16
3–6 months	6	15.79
6–9 months	4	10.53
9–12 months	3	7.89
12–24 months	12	31.58
More than 2 years	8	21.05
Total	38	100.00

Outcomes

Investigation outcomes	Number	Percentage
Recommended for referral to Director of Proceedings*	19	47.50
Referral to AHPRA	4	10.00
Referral to another agency	6	15.00
No further action	11	27.50
Referral to Executive Director, Legal Services**	0	0.00
Total	40	100.00

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

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

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 Coroner’s Court of Queensland—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	32	23.53
3–6 months	30	22.06
6–9 months	14	10.29
9–12 months	12	8.82
12–24 months*	35	25.74
More than 2 years*	13	9.56
Total	136	100.00

* All investigations that have been open for more than 12 months are published to the [investigations register on the OHO website](#).

Paused investigation timeframes

Paused investigation timeframes	Number	Percentage
Less than 3 months	6	16.67
3–6 months	5	13.89
6–9 months	6	16.67
9–12 months	5	13.89
12–24 months	9	25.00
More than 2 years	5	13.89
Total	36	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 section 92 of the Act). 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.

Total open investigation timeframes

Total open investigation timeframes	Number	Percentage
Less than 3 months	38	22.09
3–6 months	35	20.35
6–9 months	20	11.63
9–12 months	17	9.88
12–24 months	44	25.58
More than 2 years	18	10.47
Total	172	100.00

Total open investigation categories

Type of investigation	Number
Health service complaint	105
Systemic issue	20
Another matter*	46
Matters identified for further investigation**	1
Total	172

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

**Matters referred for further investigation by the Health Ombudsman under section 105 of the Act following referral to Director of Proceedings.

Monitoring investigation recommendations

The OHO monitors the implementation of recommendations made as an outcome of two types of investigation process—recommendations made as a result of an OHO investigation and recommendations made as a result of a health service provider investigation.

OHO recommendations

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

Health service provider recommendations

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

OHO recommendations monitoring

Cases this month	Number
Cases open at the beginning of the month	5
Recommendations monitoring cases started	1
Recommendations monitoring cases closed	0

Health service provider recommendations monitoring

Cases this month	Number
Cases open at the beginning of the month	0
Recommendations monitoring cases started	0
Recommendations monitoring cases closed	0

Open recommendations monitoring timeframes

Open case timeframes	Number	Percentage
Less than 6 months	3	50.00
6–12 months	0	0.00
More than 12 months	3	50.00
Total	6	100.00

Director of Proceedings

Matters referred to the Director of Proceedings by practitioner type

Practitioner type	Number	Percentage
Dentist	1	5.88
Medical practitioner	2	11.76
Medical practitioner and dentist	1	5.88
Pharmacist	2	11.76
Registered nurse	11	64.71
Total	17	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. As a result, these figures will differ from 'closed investigation outcomes' figures.

Matters currently with the Director of Proceedings by practitioner type

Practitioner type	Number	Percentage
Chinese medicine practitioner	2	1.23
Chiropractor	1	0.61
Dentist	7	4.29
Medical practitioner	45*	27.60
Medical radiation practitioner	2	1.23
Pharmacist	12	7.36
Physiotherapist	2	1.23
Podiatrist	2	1.23
Psychologist	8	4.91
Registered nurse	63	38.65
Advanced care paramedic	3	1.84
Assistant in nursing	2	1.23
Audiologist	2	1.23
Former chiropractor	1	0.61
Holding out psychologist	1	0.61
Holding out registered nurse	1	0.61
Massage therapist	6	3.68
Natural therapist	1	0.61
Social worker	1	0.61
Student nurse	1	0.61
Total	163	100.00

*One medical practitioner held dual registration as a dentist.

Decisions made by the Director of Proceedings

Matters to be referred to the Queensland Civil and Administrative Tribunal

Practitioner type	Number	Percentage
Medical practitioner	2	25.00
Pharmacist	2	25.00
Optometrist	1	12.50
Massage therapist	3	37.50
Total	8	100.00

The table above reflects the number of matters for which the Director of Proceedings decided that a referral to QCAT would be appropriate. The filing of a matter with QCAT may occur at a later date and these figures are reflected in the table below.

Matters to be referred back to the Health Ombudsman

Practitioner type	Number	Percentage
Medical practitioner	1	50.00
Psychologist	1	50.00
Total	2	100.00

Disciplinary matters filed in QCAT

Practitioner type	Number	Percentage
Medical practitioner	2	25.00
Pharmacist	2	25.00
Optometrist	1	12.50
Massage therapist	3	37.50
Total	8	100.00

Offences against the *Health Ombudsman Act 2013*

The *Health Ombudsman Act 2013* specifies a number of breaches of the Act which constitute either a summary or indictable offence.

Where there is evidence of such a breach, a matter may be referred to the Executive Director, Legal Services to commence prosecution within the courts.

No matters were referred for summary prosecution in April.

Immediate action

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

Show cause notices

In April 2018, 5 show cause notices were issued. These relate to:

- One assistant in nursing for reasons relating to conduct
- One registered nurse for reasons relating to conduct
- One medical practitioner for reasons relating to conduct
- One health support worker for reasons relating to conduct

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

Immediate registration actions

Practitioner type	Number	Action taken	Reasons/s for taking action		
			Health	Conduct	Performance
Enrolled nurse	1	Suspension		✓	
Registered nurse	1	Suspension		✓	

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

Interim prohibition orders

Practitioner type	Number	Action taken	Reasons/s for taking action			
			Health	Conduct	Performance	Interstate
Massage therapist	1	Prohibition		✓		

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

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

The details for current prohibition orders can be found on the OHO website on the [prohibition order register](#).

Monitoring practitioner compliance

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

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

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

Practitioner monitoring cases

Cases this month	Number
Cases open at the beginning of the month	99
Practitioner monitoring cases started	2
Practitioner monitoring cases closed	6

Open monitoring cases timeframes

Open case timeframes	Number	Percentage
Less than 6 months	22	23.16
6–12 months	12	12.63
More than 12 months	61	64.21
Total	95	100.00

These figures are based on the number of monitoring cases in the period. A single practitioner may be monitored in relation to more than one immediate action.

Open monitoring cases by immediate action type

Open cases by immediate action type	Number	Percentage
Interim prohibition order—restrictions	18	18.95
Interim prohibition order—prohibition	37	38.95
Immediate registration action—conditions	24	25.26
Immediate registration action—suspension	16	16.84
Total	95	100.00

Registered practitioners under monitoring by practitioner type

Open cases by practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health worker	0	0.00
Chinese medicine practitioner	3	5.66
Chiropractor	1	1.89
Dental practitioner	3	5.66
Medical practitioner	8	15.09
Medical radiation practitioner	0	0.00
Nursing and midwifery practitioner	33	62.26
Occupational therapist	0	0.00
Optometrist	0	0.00
Osteopath	0	0.00
Pharmacist	0	0.00
Physiotherapist	2	3.77
Podiatrist	0	0.00
Psychologist	3	5.66
Total	53	100.00

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

Unregistered practitioners under monitoring by practitioner type

Open cases by practitioner type	Number	Percentage
Aboriginal and Torres strait islander health worker	1	2.70
Assistant in nursing	7	18.92
Audiologist	2	5.41
Counsellor	1	2.70
Dental assistant	1	2.70
Dental nurse	1	2.70
Former nurse	1	2.70
Holding out*	3	8.11
Massage therapist	12	32.43
Medical assistant	1	2.70
Naturopath	1	2.70
Natural therapist	1	2.70
Paramedic	3	8.11
Personal carer	1	2.70
Social worker	1	2.70
Total	37	100.00

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

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

Australian Health Practitioner Regulation Agency

Notifications from AHPRA

In April the OHO received no new notifications (under section 193 of the Act) relating to a possible serious matter from the Australian Health Practitioner Regulation Agency (AHPRA). One matter was requested for referral back to the OHO.

Consultation on matters

The office consults with AHPRA on matters that are considered to be appropriate for AHPRA to manage. For matters that we are considering referring to AHPRA under section 91 of the *Health Ombudsman Act 2013*, we provide AHPRA with all necessary information in order for AHPRA to form a view as to whether they need to discuss or accept and progress the referral.

For complex cases or where a pattern of conduct may be present we may hold case conferences with AHPRA, either in person or electronically, which can sometimes delay the consultation process. By encouraging robust conversations during this process productive and consistent decisions between the co-regulatory agencies is achieved.

Consultation matters	Number
Matters consulted on*	170
Matters referred	168
Matters retained by the office**	5
Decision pending	18

*The number of matters consulted on may not equal the total number of matters referred, withdrawn and pending as a matter may have commenced consultation prior to the start of the reporting period.

**Under certain circumstances additional information may be received in the course of consultation resulting in the office retaining carriage of the matter and/or taking other relevant action.

Relevant action proposing referral

Relevant action	Number	Percentage
Intake and triage	127	74.71
Assessment	31	18.24
Conciliation	0	0.00
Local resolution	1	0.59
Internal review	4	2.35
Investigations	7	4.12
Total	170	100.00

Age of matters on commencement of consultation

To prevent duplication of work, we aim to ensure that matters are referred to AHPRA as early as possible in the complaint management process.

Due to the type of matters in which investigation or conciliation is deemed appropriate, and the more time intensive nature of these processes, these matters are usually older when consultation commences.

Relevant action	0–7 days	8–14 days	15–30 days	30–60 days	More than 60 days
Intake and triage	127	0	0	0	0
Assessment	3	1	10	15	2
Local resolution	0	0	1	0	0
Conciliation	0	0	0	0	0
Internal review	4	0	0	0	0
Investigation	0	0	0	0	7
Total	134	1	11	15	9

'Age of matters' is calculated from the date on which a matter was accepted by the office.

Consultation duration

Consultation duration	Number	Percentage
0–3 days	150	88.24
4–7 days	20	11.76
8–11 days	0	0.00
More than 12 days	0	0.00
Total	170	100.00

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health practitioner	0	0.00
Chinese medicine practitioner	3	1.79
Chiropractor	1	0.60
Dental practitioner	13	7.74
Medical practitioner	99	58.93
Medical radiation practitioner	1	0.60
Nursing and midwifery practitioner	30	17.86
Occupational therapist	0	0.00
Optometrist	0	0.00
Osteopathy	0	0.00
Pharmacist	10	5.95
Physiotherapist	2	1.19
Podiatrist	4	2.38
Psychologist	5	2.98
Unregistered practitioner	0	0.00
Total	168	100.00

Number of issues referred to AHPRA by practitioner type

Registered practitioner type	Access	Communication /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 practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine practitioner	-	-	-	-	-	-	-	-	-	3	-	-	-	3
Chiropractor	-	-	1	-	-	-	-	-	-	-	-	1	-	2
Dental practitioner	-	1	-	-	-	-	1	1	-	2	-	14	-	19
Medical practitioner	2	4	6	-	-	-	-	5	19	13	2	81	6	138
Medical student	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Medical radiation practitioner	-	-	-	-	-	-	-	-	-	2	-	-	-	2
Nursing and midwifery practitioner	-	-	-	-	-	-	-	2	2	13	5	12	-	34
Nursing student	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Occupational therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacist	-	-	-	-	-	-	-	-	9	-	1	-	-	10
Physiotherapist	-	-	-	-	-	-	-	-	-	2	-	1	-	3
Podiatrist	-	-	-	-	-	-	-	-	-	2	-	3	-	5
Psychologist	-	1	-	-	-	-	-	1	-	2	1	1	-	6
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Total	2	6	7	0	0	0	1	9	30	39	9	113	6	222

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

Gender

Gender	Number	Percentage
Female	203	45.21
Male	224	49.89
Prefer not to specify	1	0.22
Unknown*	21	4.68
Total	449	100.00

*Not recorded or not provided for a particular matter.

Age

Age	Number	Percentage
Less than 18 years	17	3.80
18–24 years	19	4.25
25–34 years	96	21.48
35–44 years	90	20.13
45–54 years	73	16.33
55–64 years	57	12.75
65–74 years	36	8.05
More than 75 years	33	7.38
Unknown*	26	5.82
Total	447	100.00

*Not recorded or not provided for a particular matter.

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	172	38.48
Central West	0	0.00
Darling Downs	12	2.68
Far North	17	3.80
Fitzroy	7	1.57
Gold Coast	53	11.86
Mackay	7	1.57
North West	3	0.67
Northern	12	2.68
South West	0	0.00
Sunshine Coast	27	6.04
West Moreton	6	1.34
Wide Bay–Burnett	78	17.45
Outside Queensland	14	3.13
Unknown*	39	8.72
Total	447	100.00

*Not recorded or not provided for a particular matter.

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	276	46.00
Central West	0	0.00
Darling Downs	14	2.33
Far North	36	6.00
Fitzroy	13	2.17
Gold Coast	74	12.33
Mackay	13	2.17
North West	3	0.50
Northern	30	5.00
South West	3	0.50
Sunshine Coast	39	6.50
West Moreton	7	1.17
Wide Bay–Burnett	51	8.50
Outside Queensland*	13	2.17
Unknown**	28	4.67
Total	600	100.00

*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.

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



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