

# Office of the Health Ombudsman

Performance report December 2017



Office of the  
**HEALTH  
OMBUDSMAN**

*Listen. Respond. Resolve.*

## Office of the Health Ombudsman—Performance report December 2017

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For more information contact:

Office of the Health Ombudsman, PO Box 13281 George Street, Brisbane QLD 4003, email [communications@oho.qld.gov.au](mailto:communications@oho.qld.gov.au).

An electronic version of this document is available at [www.oho.qld.gov.au](http://www.oho.qld.gov.au).

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## Introduction

This document reports on our performance during December 2017.

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 8 January 2018, but is subject to change.

# Intake of complaints

## Type of contacts

Type of contact	Number	Percentage
Complaint	420	64.22
Enquiry	234	35.78
Yet to be classified	0	0.00
<b>Total</b>	<b>654</b>	<b>100.00</b>

'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	353	84.05
Mandatory notification*	17	4.05
Voluntary notification*	35	8.33
Self-notification*	9	2.14
Referral from another agency	6	1.43
<b>Total</b>	<b>420</b>	<b>100.00</b>

\*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)*.

## Complaint decisions

### Decision timeframes—within seven days

Decision made within seven days of receiving a complaint	Number	Percentage
Yes	482	89.42
No	57	10.58
<b>Total</b>	<b>539</b>	<b>100.00</b>

### Accepted vs not accepted

Number of decisions made	Number	Percentage
Accepted	355	63.06
Not accepted*	184	32.68
Decision pending**	24	4.26
<b>Total</b>	<b>563</b>	<b>100.00</b>

\*'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*.

\*\*'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 32 matters were determined to fall outside the jurisdiction of the Act.

## Accepted decision outcomes

Type of relevant action	Number	Percentage
Assessment	146	40.00
Local resolution	87	23.84
Conciliation	0	0.00
Investigation	10	2.74
Referral to AHPRA and the national boards	122	33.42
Referral to another entity	0	0.00
Immediate registration action	0	0.00
Interim prohibition order	0	0.00
<b>Total</b>	<b>365</b>	<b>100.00</b>

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	30	4.43
Code of conduct for healthcare workers	13	1.92
Communication/information	89	13.15
Consent	16	2.36
Discharge/transfer arrangements	5	0.74
Environment/management of facilities	14	2.07
Fees/cost	15	2.22
Grievance processes	11	1.62
<i>Health Ombudsman Act 2013 offence</i>	0	0.00
Medical records	22	3.25
Medication	88	13.00
Professional conduct	76	11.23
Professional health	17	2.51
Professional performance	268	39.59
Reports/certificates	12	1.77
Research/teaching/assessment	1	0.15
<b>Total</b>	<b>677</b>	<b>100.00</b>

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	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Chinese medicine	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Dentistry	1	-	1	2	-	-	1	-	-	-	-	2	-	21	-	-	28
Emergency care	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
General medical	3	2	17	2	-	-	2	-	-	2	20	16	3	55	5	-	127
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Medical specialty	-	-	3	4	-	-	1	-	-	1	2	4	-	17	2	-	34
Nursing	-	-	3	-	-	-	-	-	-	2	11	15	6	12	-	-	49
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Optometry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Other	-	5	2	-	-	-	-	-	-	1	2	11	5	11	-	-	37
Pathology service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacy	-	-	1	-	-	-	-	-	-	-	4	3	-	-	-	-	8
Physiotherapy	-	1	-	-	-	-	-	-	-	-	-	1	1	-	-	-	3
Podiatry	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Psychology	-	-	1	1	-	-	-	-	-	2	2	9	1	4	2	1	23
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Surgical	-	-	1	1	-	-	-	-	-	1	-	2	1	19	-	-	25
<b>Total</b>	<b>4</b>	<b>10</b>	<b>29</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>9</b>	<b>41</b>	<b>64</b>	<b>17</b>	<b>145</b>	<b>9</b>	<b>1</b>	<b>343</b>

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	-	-	-	-	-	-	-	-	4
Allied health service	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Ambulance service	-	2	1	-	-	-	-	1	-	-	-	-	-	1	-	-	5
Community health service	2	-	1	-	-	-	-	-	-	1	-	-	-	1	-	-	5
Correctional facility	12	-	5	-	-	-	-	-	-	-	30	-	-	24	-	-	71
Dental service	2	-	1	-	-	-	1	1	-	3	-	1	-	3	-	-	12
Hospital and Health Service	-	-	3	-	-	-	-	-	-	1	-	-	-	4	-	-	8
Laboratory service	-	-	1	-	-	2	2	-	-	-	-	-	-	-	-	-	5
Licensed private hospital	1	-	-	-	-	-	2	-	-	-	-	-	-	3	-	-	6
Medical centre	4	-	8	-	-	-	2	-	-	4	1	1	-	9	2	-	31
Mental health service	-	-	8	1	1	3	-	-	-	1	5	-	-	8	-	-	27
Nursing service	-	-	-	-	-	-	-	-	-	1	-	2	-	-	-	-	3
Other support service	-	-	1	-	-	-	-	-	-	-	1	-	-	3	-	-	5
Pharmaceutical service	-	-	2	-	-	1	3	2	-	-	4	-	-	-	-	-	12
Private organisation	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Public health service	-	-	2	-	-	-	-	1	-	-	-	-	-	1	-	-	4
Public hospital	5	1	25	5	4	5	-	4	-	2	6	5	-	62	1	-	125
Residential care service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Specialised health service	-	-	1	-	-	1	1	-	-	-	-	3	-	2	-	-	8
<b>Total</b>	<b>26</b>	<b>3</b>	<b>60</b>	<b>6</b>	<b>5</b>	<b>14</b>	<b>11</b>	<b>11</b>	<b>0</b>	<b>13</b>	<b>47</b>	<b>12</b>	<b>0</b>	<b>123</b>	<b>3</b>	<b>0</b>	<b>334</b>

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	162
Assessments completed	173

## Completed assessment timeframes

Of the 173 assessments finalised in December, 137 were completed within 30 days or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 79.19 per cent.

Of the 47 assessments completed within 60 days, 35 matters were approved for extension.

The 24 matters completed outside of 60 days were due to the volume of matters that require additional assessment, the complexity of many of the matters in assessment, and delays in receiving information from parties or in obtaining the necessary independent clinical advice required to appropriately assess the matters.

Assessment timeframes	Number	Percentage
Completed within 30 days	102	58.96
Completed within 60 days*	47	27.17
Completed in more than 60 days	24	13.87
<b>Total</b>	<b>173</b>	<b>100.00</b>

\*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	1	0.54
Conciliation	5	2.69
Investigation	13	6.99
Referred to AHPRA and the national boards	17	9.14
Referral to another entity	65	34.95
Immediate registration action*	0	0.00
Interim prohibition order*	0	0.00
No further action	85	45.70
<b>Total</b>	<b>186</b>	<b>100.00</b>

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 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	94
Local resolutions completed	117

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 117 local resolutions finalised in December, 111 were completed within 30 days or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 94.87 per cent.

Of the 13 local resolution matters completed within 60 days, 9 were approved for extension.

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

Local resolution timeframes	Number	Percentage
Completed within 30 days	102	87.18
Completed within 60 days*	13	11.11
Completed in more than 60 days	2	1.71
<b>Total</b>	<b>117</b>	<b>100.00</b>

\*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	93	79.49
Not resolved	16	13.68
Complaint withdrawn*	8	6.84
Local resolution did not commence**	0	0.00
<b>Total</b>	<b>117</b>	<b>100.00</b>

\*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	1	6.25
Conciliation	0	0.00
Investigation	0	0.00
Referral to AHPRA and the national boards	1	6.25
Referral to another entity	0	0.00
Immediate action	0	0.00
No further action	14	87.50
<b>Total</b>	<b>16</b>	<b>100.00</b>

# Conciliation

## Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	47
Conciliations started	6
Conciliations closed	6

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	0
Party/ies did not agree to conciliation	6
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	0	0.00
6–9 months	0	0.00
9–12 months	0	0.00
More than 12 months	0	0.00
<b>Total</b>	<b>0</b>	<b>0.00</b>

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 on page 15—as they only relate to matters where parties agreed to participate and the conciliation process was completed.

No matters completed a conciliation process in December, due to the high numbers of conciliations being completed in the two months prior.

### Outcomes

Conciliation outcomes	Number	Percentage
Successful	0	0.00
Not successful	0	0.00
Ended by Health Ombudsman	0	0.00
<b>Total</b>	<b>0</b>	<b>0.00</b>

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	0	0.00
<b>Total</b>	<b>0</b>	<b>0.00</b>

## Open conciliation timeframes

Open conciliation timeframes	Number	Percentage
Less than 3 months	15	31.91
3–6 months	12	25.53
6–9 months	9	19.15
9–12 months	5	10.64
More than 12 months	6	12.77
<b>Total</b>	<b>47</b>	<b>100.00</b>

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 11 matters on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). This includes 3 matters that have been open for less than 3 months, 1 that has been open for 3–6 months, 2 that have been open for 6 – 9 months, 1 that has been open for 9–12 months, and 4 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

In October 2017 improvements to systems and processes were made to allow multiple investigations about individual practitioners and/or health service organisations which involve similar allegations to be combined and dealt with together under s40(2) of the *Health Ombudsman Act 2013*. This approach ensures greater efficiency, transparency and accountability in dealing with health service complaints. As a result of this, the number of open investigations reported below has decreased significantly when compared to previously reported performance data.

To allow for continued transparency in the timeliness of investigation processes, where an investigation involves more than one complaint or other matters, timeframes are calculated from the oldest decision to investigate date.

This update is an example of our commitment to continual improvement as we mature as an agency and the importance we place on transparent, robust data.

### Investigations started and closed

Investigations this month	Number
Investigations open at the beginning of the month	238
Investigations started	31
Investigations closed	42

The number of investigations started in the reporting period may not match the number of assessment decisions to undertake investigation due to the time between a decision being made and an action taken crossing over different reporting periods, or due to investigations being started via other processes (e.g. own-motion investigation).

### Closed investigations

#### Timeframes

Closed investigation timeframes	Number	Percentage
Less than 3 months	15	35.71
3–6 months	0	0.00
6–9 months	3	7.14
9–12 months	3	7.14
12–24 months	7	16.67
More than 2 years	14	33.33
<b>Total</b>	<b>42</b>	<b>100.00</b>

## Outcomes

Investigation outcomes	Number	Percentage
Recommended for referral to Director of Proceedings*	25	58.14
Referred to AHPRA	12	27.91
Referred to another agency	1	2.33
No further action	5	11.63
Referred to Executive Director, Legal Services**	0	0.00
<b>Total</b>	<b>43</b>	<b>100.00</b>

\*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.

## 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 Office of the State Coroner—concludes their own processes. Despite the office being unable to progress paused investigations, they are still considered to be open investigations.

### Active investigation timeframes

Active investigation timeframes	Number	Percentage
Less than 3 months	43	21.83
3–6 months	23	11.68
6–9 months	22	11.17
9–12 months	18	9.14
12–24 months*	62	31.47
More than 2 years*	29	14.72
<b>Total</b>	<b>197</b>	<b>100.00</b>

\* 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](http://www.oho.qld.gov.au)).

## Paused investigation timeframes

Paused investigation timeframes	Number	Percentage
Less than 3 months	3	10.00
3–6 months	7	23.33
6–9 months	5	16.67
9–12 months	1	3.33
12–24 months	9	30.00
More than 2 years	5	16.67
<b>Total</b>	<b>30</b>	<b>100</b>

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.

## Total open investigation timeframes

Total open investigation timeframes	Number	Percentage
Less than 3 months	46	20.26
3–6 months	30	13.22
6–9 months	27	11.89
9–12 months	19	8.37
12–24 months	71	31.28
More than 2 years	34	14.98
<b>Total</b>	<b>227</b>	<b>100.00</b>

## Total open investigation categories

Type of investigation	Number
Health service complaint	151
Systemic issue	26
Another matter*	48
Matters identified for further investigation**	2
<b>Total</b>	<b>227</b>

\*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 s105 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 on 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	4
Recommendations monitoring cases started	0
Recommendations monitoring cases closed	0

## Health service provider recommendations monitoring

Cases this month	Number
Cases open at the beginning of the month	2
Recommendations monitoring cases started	0
Recommendations monitoring cases closed	0

## Open recommendations monitoring timeframes

Open case timeframes	Number	Percentage
Less than 6 months	0	0.00
6–12 months	2	33.33
More than 12 months	4	66.67
<b>Total</b>	<b>6</b>	<b>100.00</b>

# Director of Proceedings

## Matters referred to the Director of Proceedings by practitioner type

Practitioner type	Number	Percentage
Registered nurse	7	43.75
Medical practitioner	3	18.75
Pharmacist	2	12.50
Registered nurse & midwife	1	6.25
Psychologist	1	6.25
Medical radiation practitioner	1	6.25
Assistant in nursing	1	6.25
<b>Total</b>	<b>16</b>	<b>100.00</b>

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
Registered nurse*	40	34.19
Medical practitioner	37	31.62
Pharmacist	10	8.55
Psychologist	8	6.84
Massage Therapist	6	5.13
Dentist	5	4.27
Advanced Care Paramedic	2	1.71
Unregistered Former Chiropractor	1	0.85
Holding Out as Registered Nurse	1	0.85
Student nurse	1	0.85
Podiatrist	1	0.85
Chiropractor	1	0.85
Physiotherapist	1	0.85
Chinese Medical Practitioner	1	0.85
Assistant in Nursing	1	0.85
Medical Radiation Practitioner	1	0.85
<b>Total</b>	<b>117</b>	<b>100.00</b>

\*Two registered nurses held dual registration as a midwife.

## Matters referred to the Queensland Civil and Administrative Tribunal

Practitioner type	Number	Percentage
Registered nurse	3	50.00
Medical practitioner	1	16.67
Dentist	1	16.67
Unregistered Former Chiropractor	1	16.67
<b>Total</b>	<b>6</b>	<b>100.00</b>

The Director of Proceedings considers all relevant aspects of each matter to determine whether to refer the matter to the Queensland Civil and Administrative Tribunal.

## 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 December.

## 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.

### Show cause notices

In December 2017, five show cause notices were issued. These relate to:

- One medical practitioner for reasons relating to conduct
- One Chinese medicine practitioner for reasons relating to performance
- One unregistered nurse for reasons relating to conduct
- One enrolled nurse for reasons related to conduct (relating to both an immediate registration action and an interim prohibition order)

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 actions

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

Immediate registration actions apply only to registered practitioners and may result in the Health Ombudsman issuing a suspension—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
Enrolled nurse	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 with 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	4
Practitioner monitoring cases closed	3

### Open practitioner monitoring cases

#### Open monitoring cases timeframes

Open case timeframes	Number	Percentage
Less than 6 months	16	15.84
6–12 months	24	23.76
More than 12 months	61	60.40
<b>Total</b>	<b>101</b>	<b>100.00</b>

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	22	21.78
Interim prohibition order – prohibited	33	32.67
Immediate registration action - conditions	27	26.73
Immediate registration action - suspension	19	18.81
<b>Total</b>	<b>101</b>	<b>100.00</b>

## 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	5.36
Chiropractor	1	1.79
Dental practitioner	3	5.36
Medical practitioner	9	16.07
Medical radiation practitioner	0	0.00
Nursing and midwifery	33	58.93
Occupational therapy	0	0.00
Optometry	0	0.00
Osteopathy	0	0.00
Pharmacy	2	3.57
Physiotherapy	2	3.57
Podiatry	0	0.00
Psychology	3	5.36
<b>Total</b>	<b>56</b>	<b>100.00</b>

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	2.86
Assistant in nursing	3	8.57
Audiologist	2	5.71
Counsellor	2	5.71
Dental assistant	1	2.86
Dental nurse	1	2.86
Former nurse	1	2.86
Holding out*	4	11.43
Massage therapist	11	31.43
Naturopath	1	2.86
Natural therapist	2	5.71
Other health provider	1	2.86
Paramedic	3	8.57
Personal carer	1	2.86
Social worker	1	2.86
<b>Total</b>	<b>35</b>	<b>100.00</b>

\*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 December the OHO received one new notification (under section 193 of the Act) relating to a possible serious matter.

## 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 it needs 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*	183
Matters referred	164
Matters retained by the office**	9
Decision pending	33

\*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	137	74.86
Assessment	31	16.94
Conciliation	0	0.00
Local resolution	2	1.09
Internal review	1	0.55
Investigations	12	6.56
<b>Total</b>	<b>183</b>	<b>100.00</b>

## Age of matters on commencement of consultation

In order 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	135	2	0	0	0
Assessment	2	2	9	10	8
Local resolution	0	0	0	2	0
Conciliation	0	0	0	0	0
Internal review	1	0	0	0	0
Investigation	0	5	0	0	7
<b>Total</b>	<b>138</b>	<b>9</b>	<b>9</b>	<b>12</b>	<b>15</b>

'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	155	84.70
4–7 days	27	14.75
8–11 days	0	0.00
More than 12 days	1	0.55
<b>Total</b>	<b>183</b>	<b>100.00</b>

## 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	1	0.61
Chiropractor	1	0.61
Dental practitioner	21	12.80
Medical practitioner	84	51.22
Medical radiation practitioner	0	0.00
Nursing and midwifery practitioner	38	23.17
Occupational therapist	0	0.00
Optometrist	0	0.00
Osteopathy	0	0.00
Pharmacist	10	6.10
Physiotherapy	1	0.61
Podiatrist	1	0.61
Psychologist	6	3.66
Unregistered practitioner	1*	0.61
<b>Total</b>	<b>164</b>	<b>100.00</b>

\*The office referred one medical student to AHPRA in December 2017.

## Number of issues referred to AHPRA by practitioner type

Registered practitioner type	Access	Communication and information	Consent	Discharge/transfer arrangements	Environment / management of facility	Fees and costs	Grievance process	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research / Teaching / Assessment	Total
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine practitioner	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Dental practitioner	-	3	2	-	-	-	-	-	1	1	-	22	-	-	29
Medical practitioner	-	7	4	-	-	-	-	2	9	9	5	73	2	-	111
Medical student	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Medical radiation practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Nursing and midwifery practitioner	-	-	-	-	-	-	-	3	7	7	12	15	-	-	44
Nursing student	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Occupational therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacist	-	-	-	-	-	-	-	-	9	1	-	-	-	-	10
Physiotherapist	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Podiatrist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Psychologist	-	-	-	-	-	-	-	-	-	3	1	1	1	1	7
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
<b>Total</b>	<b>0</b>	<b>10</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>26</b>	<b>21</b>	<b>20</b>	<b>114</b>	<b>3</b>	<b>1</b>	<b>206</b>

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

Reporting parameters for demographics data were updated as of June 2017. Previously, demographics contained within the office's reporting related to complaints that had completed the assessment process during the reporting period.

Refinements to systems and processes now allow for reporting on the demographics of complainants, consumers and practitioners who have made, or were identified in, a complaint during the reporting period. This change will result in higher numbers in the following four tables from June 2017.

This update is an example of the office's commitment to continual improvement as it matures as an agency and the importance it places on transparent, robust data.

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	198	49.25
Male	188	46.77
Prefer not to specify	1	3.73
Unknown*	15	0.25
<b>Total</b>	<b>402</b>	<b>100.00</b>

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

## Age

Age	Number	Percentage
Less than 18 years	16	3.98
18–24 years	20	4.98
25–34 years	60	14.93
35–44 years	89	22.14
45–54 years	82	20.40
55–64 years	49	12.19
65–74 years	32	7.96
More than 75 years	23	5.72
Unknown*	31	7.71
<b>Total</b>	<b>402</b>	<b>100.00</b>

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

## Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	161	40.05
Central West	0	0.00
Darling Downs	15	3.73
Far North	23	5.72
Fitzroy	10	2.49
Gold Coast	45	11.19
Mackay	9	2.24
North West	0	0.00
Northern	18	4.48
South West	4	1.00
Sunshine Coast	20	4.98
West Moreton	11	2.74
Wide Bay–Burnett	38	9.45
Outside Queensland	16	3.98
Unknown*	32	7.96
<b>Total</b>	<b>402</b>	<b>100.00</b>

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

## Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	154	41.96
Central West	1	0.27
Darling Downs	14	3.81
Far North	16	4.36
Fitzroy	9	2.45
Gold Coast	46	12.53
Mackay	14	3.81
North West	1	0.27
Northern	14	3.81
South West	3	0.82
Sunshine Coast	33	8.99
West Moreton	2	0.54
Wide Bay-Burnett	25	6.81
Outside Queensland*	2	0.54
Unknown**	33	8.99
<b>Total</b>	<b>367</b>	<b>100.00</b>

\*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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