

# Quarterly performance report

Quarter one 2017–18



Office of the  
**HEALTH  
OMBUDSMAN**

*Listen. Respond. Resolve.*

## Quarterly performance report—Quarter four 2016–17

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## Introduction

This document reports on the quarter one (Q1) performance of the Office of the Health Ombudsman (OHO) for the 2017–18 financial year.

The OHO is the agency responsible for health service complaints management in Queensland. We're committed to protecting the health and safety of the public by assessing, investigating and resolving complaints made about health services provided in Queensland.

We are impartial and independent, and our vision is to be the cornerstone of a transparent, accountable and fair health complaints management system. As testament to this, our performance reports—which are published monthly, quarterly and yearly—are available to the public on our website [www.oho.qld.gov.au](http://www.oho.qld.gov.au).

Data in this report are correct as at 6 October 2017, though figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

# Intake of complaints

## Type of contacts

Type of contact	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Complaint	568	62.76	593	64.25	512	59.19	1688	62.75
Enquiry	334	36.91	312	33.80	342	39.54	994	36.95
Yet to be classified	3	0.33	18	1.95	11	1.27	8	0.30
<b>Total</b>	<b>905</b>	<b>100.00</b>	<b>923</b>	<b>100.00</b>	<b>865</b>	<b>100.00</b>	<b>2690</b>	<b>100.00</b>

The total for the quarter differs from the total monthly figures due to matters 'yet to be classified' being classified as either a complaint or enquiry during the reporting period. Similarly, contacts that are 'yet to be classified' at the time of running this report will be counted as complaints or enquiries in future reporting.

Matters that are 'yet to be classified' are contacts in which not enough information was provided in the first instance to allow for a determination, and additional information is being sought. They may also be 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.

## Type of complaints

Type of complaints	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	493	86.80	520	87.69	432	84.38	1458	86.37
Mandatory notification*	10	1.76	14	2.36	16	3.13	40	2.37
Voluntary notification*	51	8.98	52	8.77	59	11.52	166	9.83
Self-notification*	9	1.58	3	0.51	2	0.39	14	0.83
Referral from another agency	5	0.88	4	0.67	3	0.59	10	0.59
<b>Total</b>	<b>568</b>	<b>100.00</b>	<b>593</b>	<b>100.00</b>	<b>512</b>	<b>100.00</b>	<b>1688</b>	<b>100.00</b>

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

## Complaint decisions

### Decisions timeframes—within seven days

Decision made	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Yes	459	89.30	473	88.25	451	88.26	1358	86.83
No	55	10.70	63	11.75	60	11.74	206	13.17
<b>Total</b>	<b>514</b>	<b>100.00</b>	<b>536</b>	<b>100.00</b>	<b>511</b>	<b>100.00</b>	<b>1564</b>	<b>100.00</b>

### Accepted vs not accepted

Number of decisions made	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Accepted	397	67.86	372	58.86	385	65.81	1155	70.51
Not accepted	117	20.00	164	25.95	126	21.54	409	24.97
Decision pending	71	12.14	96	15.19	74	12.65	74	4.52
<b>Total</b>	<b>585</b>	<b>100.00</b>	<b>632</b>	<b>100.00</b>	<b>585</b>	<b>100.00</b>	<b>1638</b>	<b>100.00</b>

'Not accepted' decisions relate to complaints 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 100 matters were determined by the office to fall outside the jurisdiction of the Act, and therefore have been excluded from the 'Decision timeframes—within seven days' and 'Accepted vs not accepted' tables.

## Accepted decision outcomes

Type of relevant action	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	169	38.94	143	36.57	136	33.66	448	36.33
Local resolution	126	29.03	127	32.48	101	25.00	354	28.71
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	5	1.15	7	1.79	9	2.23	21	1.70
Referred to AHPRA and the national boards	134	30.88	114	29.16	158	39.11	406	32.93
Referred to another entity	0	0.00	0	0.00	0	0.00	4	0.32
Immediate registration action	0	0.00	0	0.00	0	0.00	0	0.00
Interim prohibition order	0	0.00	0	0.00	0	0.00	0	0.00
<b>Total</b>	<b>434</b>	<b>100.00</b>	<b>391</b>	<b>100.00</b>	<b>404</b>	<b>100.00</b>	<b>1233</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 'Accepted decision outcomes' 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	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Access	30	3.79	46	5.35	44	5.31	123	4.76
Code of conduct for healthcare workers	7	0.88	3	0.35	5	0.60	15	0.58
Communication/information	99	12.52	101	11.74	97	11.70	311	12.03
Consent	11	1.39	9	1.05	11	1.33	32	1.24
Discharge/transfer arrangements	13	1.64	12	1.40	15	1.81	44	1.70
Environment/management of facilities	23	2.91	20	2.33	18	2.17	62	2.40
Fees/cost	20	2.53	11	1.28	12	1.45	48	1.86
Grievance processes	17	2.15	17	1.98	11	1.33	47	1.82
<i>Health Ombudsman Act 2013 offence</i>	2	0.25	2	0.23	2	0.24	6	0.23
Medical records	22	2.78	20	2.33	23	2.77	69	2.67
Medication	77	9.73	103	11.98	84	10.13	273	10.56
Professional conduct	98	12.39	128	14.88	123	14.84	359	13.89
Professional health	27	3.41	22	2.56	28	3.38	81	3.13
Professional performance	334	42.23	353	41.05	341	41.13	1075	41.59
Reports/certificates	11	1.39	13	1.51	15	1.81	40	1.55
<b>Total</b>	<b>791</b>	<b>100.00</b>	<b>860</b>	<b>100.00</b>	<b>829</b>	<b>100.00</b>	<b>2585</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 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	-	5	-	-	-	-	-	-	-	-	-	6	-	2	-	-	13
Chinese medicine	-	-	-	-	-	-	1	-	-	1	-	2	-	1	-	-	5
Chiropractor	-	-	-	2	-	-	-	-	-	-	-	6	-	3	1	-	12
Dentistry	1	-	7	4	-	2	5	-	1	6	1	20	1	84	-	-	132
Emergency care	-	-	1	-	-	-	-	-	-	-	-	2	2	12	-	-	17
General medical	14	2	85	1	3	-	1	1	1	17	74	85	16	216	13	-	529
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	1	-	7	-	-	8
Medical specialty	-	-	15	-	-	1	3	3	-	3	4	11	1	51	8	-	100
Nursing	-	4	8	-	1	-	-	-	2	4	8	86	29	33	-	-	175
Occupational therapy	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	2
Optometry	-	-	-	-	-	-	-	-	-	-	-	1	1	3	1	-	6
Osteopathy	-	-	1	-	-	-	-	-	-	1	-	-	1	2	-	-	5
Other	-	4	8	-	-	-	-	-	-	-	3	62	25	12	1	-	115
Pathology service	-	-	1	-	-	-	-	-	-	-	-	-	-	2	1	-	4
Pharmacy	-	-	6	-	-	2	-	1	-	-	24	7	-	4	-	-	44
Physiotherapy	-	-	-	-	-	-	-	-	-	2	-	6	1	5	-	-	14
Podiatry	-	-	-	1	-	-	-	-	-	-	-	3	-	2	-	-	6
Psychology	-	-	7	2	-	-	3	1	-	3	1	19	2	19	8	-	65
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Surgical	-	-	4	5	-	-	1	1	-	2	4	6	2	69	-	-	94
<b>Total</b>	<b>15</b>	<b>15</b>	<b>143</b>	<b>15</b>	<b>4</b>	<b>5</b>	<b>15</b>	<b>7</b>	<b>4</b>	<b>39</b>	<b>119</b>	<b>324</b>	<b>81</b>	<b>527</b>	<b>33</b>	<b>0</b>	<b>1346</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 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	-	-	6	-	-	11	-	1	-	-	5	3	-	18	-	-	44
Allied health service	-	-	1	-	-	-	1	-	-	-	-	3	-	3	-	-	8
Ambulance service	-	-	1	-	-	-	-	1	-	-	-	-	-	5	-	-	7
Community health service	2	-	2	-	-	-	-	-	-	1	-	3	-	6	-	-	14
Correctional facility	63	-	17	1	1	4	-	3	1	3	109	1	-	114	-	-	317
Dental service	2	-	7	-	-	2	3	2	-	1	-	-	-	17	-	-	34
Hospital and health service	2	-	4	-	1	1	-	2	-	1	1	-	-	9	-	-	21
Laboratory service	-	-	-	-	-	-	3	2	-	-	-	1	-	4	-	-	10
Licensed private hospital	4	-	9	1	5	4	6	2	-	2	3	-	-	25	-	-	61
Medical centre	8	-	14	2	-	3	6	1	1	7	7	4	-	22	3	-	78
Mental health service	3	-	14	3	1	7	-	2	-	1	5	3	-	25	-	-	64
Other support service	-	-	1	-	-	-	1	-	-	-	-	-	-	2	1	-	5
Pharmaceutical service	-	-	2	-	-	2	1	-	-	-	7	3	-	-	-	-	15
Private organisation	-	-	-	-	-	-	3	1	-	-	-	-	-	4	-	-	8
Public health service	-	-	10	2	2	1	-	1	-	1	3	1	-	14	-	-	35
Public hospital	22	-	75	7	30	19	5	20	-	13	13	12	-	272	2	-	490
Residential care service	-	-	1	-	-	1	-	-	-	-	-	1	-	-	-	-	3
Specialised health service	2	-	3	1	-	1	4	2	-	-	-	-	-	4	1	-	18
Administrative service	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Health service district	-	-	1	-	-	-	-	-	-	-	1	-	-	2	-	-	4
Optical store	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Welfare service	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
<b>Total</b>	<b>108</b>	<b>0</b>	<b>168</b>	<b>17</b>	<b>40</b>	<b>57</b>	<b>33</b>	<b>40</b>	<b>2</b>	<b>30</b>	<b>154</b>	<b>35</b>	<b>0</b>	<b>548</b>	<b>7</b>	<b>0</b>	<b>1239</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.

# Assessment

## Assessments started and completed

Assessments this quarter	July	August	September	Q1 total
Assessments started	197	166	158	517
Assessments completed	172	160	182	521

## Completed assessment timeframes

Of the 521 assessments finalised in Q1, 386 were completed within 30 days, or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 74.08 per cent.

Of the 156 assessments completed within 60 days, 110 matters were approved for extension.

The 89 matters completed outside of 60 days were due to the continuing high 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 timeframe	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Within 30 days	96	55.81	84	52.50	91	50.00	276	52.97
Within 60 days*	56	32.56	49	30.63	50	27.47	156	29.94
More than 60 days	20	11.63	27	16.88	41	22.53	89	17.08
<b>Total</b>	<b>172</b>	<b>100.00</b>	<b>160</b>	<b>100.00</b>	<b>182</b>	<b>100.00</b>	<b>521</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	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	2	1.10	0	0.00	1	0.52	3	0.55
Conciliation	4	2.21	8	4.88	11	5.73	24	4.41
Investigation	8	4.42	9	5.49	9	4.69	27	4.96
Referred to AHPRA and the national boards	25	13.81	30	18.29	41	21.35	94	17.28
Referred to another entity	45	24.86	36	21.95	40	20.83	124	22.79
Immediate registration action*	0	0.00	0	0.00	0	0.00	0	0.00
Interim prohibition order*	0	0.00	0	0.00	0	0.00	0	0.00
No further action	97	53.59	81	49.39	90	46.88	272	50.00
<b>Total</b>	<b>181</b>	<b>100.00</b>	<b>164</b>	<b>100.00</b>	<b>192</b>	<b>100.00</b>	<b>544</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 etc.) due to the time between a decision being made and an action 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 actions decisions being made outside of the assessment process.

# Local resolution

## Local resolutions started and completed

Local resolutions this quarter	July	August	September	Q1 total
Local resolutions started	129	127	103	359
Local resolutions completed	99	145	100	344

The number of local resolutions started in the quarter 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

Of the 344 local resolutions finalised in Q1, 338 were completed within 30 days or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 98.26 per cent.

Of the 23 local resolutions completed within 60 days, 18 were approved for extension.

Local resolution timeframe	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Within 30 days	87	87.88	140	96.55	93	93.00	320	93.02
Within 60 days*	11	11.11	5	3.45	7	7.00	23	6.69
More than 60 days	1	1.01	0	0.00	0	0.00	1	0.29
<b>Total</b>	<b>99</b>	<b>100.00</b>	<b>145</b>	<b>100.00</b>	<b>100</b>	<b>100.00</b>	<b>344</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	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Resolution reached	76	76.77	122	84.14	70	70.00	268	77.90
No resolution reached	12	12.12	14	9.66	19	19.00	45	13.08
Complaint withdrawn*	11	11.11	9	6.21	11	11.00	31	9.01
<b>Total</b>	<b>99</b>	<b>100.00</b>	<b>145</b>	<b>100.00</b>	<b>100</b>	<b>100.00</b>	<b>344</b>	<b>100.00</b>

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

## Decisions for matters that were not resolved

Type of relevant action	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	1	8.33	0	0.00	0	0.00	1	0.05
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	0	0.00	0	0.00	0	0.00	0	0.00
Referred to AHPRA and the national boards	0	0.00	0	0.00	0	0.00	0	0.00
Referred to another entity	0	0.00	0	0.00	0	0.00	0	0.00
Immediate action	0	0.00	0	0.00	19	100.00	0	0.00
No further action	11	0.00	14	100.00	19	100.00	19	95.00
<b>Total</b>	<b>12</b>	<b>100.00</b>	<b>14</b>	<b>100.00</b>	<b>19</b>	<b>100.00</b>	<b>20</b>	<b>100.00</b>

# Conciliation

## Conciliations started and closed

Conciliations this quarter	July	August	September	Q1 total
Conciliations started	8	8	12	28
Conciliations closed	9	9	6	24

The number of conciliations started in the reporting period may not directly 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	July	August	September	Q1 total
Party/ies agreed to participate	4	8	7	19
Party/ies did not agree to participate	4	4	4	12
Decisions pending at close of the period	27	23	26	26

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

Conciliations completed	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
0–3 months	0	0.00	1	20.00	0	0.00	1	7.69
3–6 months	2	40.00	1	20.00	2	100.00	5	38.46
6–9 months	3	60.00	2	40.00	0	0.00	6	46.15
9–12 months	0	0.00	0	0.00	0	0.00	0	0.00
More than 12 months	0	0.00	1	20.00	0	0.00	1	7.69
<b>Total</b>	<b>5</b>	<b>100.00</b>	<b>5</b>	<b>100.00</b>	<b>2</b>	<b>100.00</b>	<b>13</b>	<b>100.00</b>

### Outcomes

Conciliation outcomes	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Successful	4	80.00	3	60.00	1	50.00	8	66.67
Not successful	1	20.00	2	40.00	1	50.00	4	33.33
Ended by the Health Ombudsman	0	0.00	0	0.00	0	0.00	0	0.00
<b>Total</b>	<b>5</b>	<b>100.00</b>	<b>5</b>	<b>100.00</b>	<b>2</b>	<b>100.00</b>	<b>12</b>	<b>100.00</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 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	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	0	0.00	0	0.00	0	0.00	0	0.00
Referred to AHPRA and the national boards	0	0.00	0	0.00	0	0.00	0	0.00
Referred to another entity	0	0.00	0	0.00	0	0.00	0	0.00
Immediate action	0	0.00	0	0.00	0	0.00	0	0.00
No further action	1	100.00	2	100.00	1	100.00	4	100.00
<b>Total</b>	<b>1</b>	<b>100.00</b>	<b>2</b>	<b>100.00</b>	<b>1</b>	<b>100.00</b>	<b>4</b>	<b>100.00</b>

## Open conciliation timeframes

Conciliations open	July		August		September	
	Number	%	Number	%	Number	%
Less than 3 months	32	53.33	24	40.68	25	38.46
3–6 months	12	20.00	20	33.90	21	32.31
6–9 months	7	11.67	4	6.78	7	10.77
9–12 months	4	6.67	5	8.47	6	9.23
More than 12 months	5	8.33	6	10.17	6	9.23
<b>Total</b>	<b>60</b>	<b>100.00</b>	<b>59</b>	<b>100.00</b>	<b>65</b>	<b>100.00</b>

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

## Investigation

Due to an ongoing reconciliation process with investigations data, the investigations data reported in this report may not match data reported in previous performance reports. This is due to the reclassification of a number of open investigations during the quarter, as well as decisions to investigate, pause or close a matter having been recorded in a subsequent month to the month in which a decision was made.

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 quarter	July	August	September	Q1 total
Investigations started	16	16	22	54
Investigations closed	30	19	42	91

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 as a result of investigations being started via other processes (e.g. own-motion investigation).

### Closed investigations

#### Timeframes

Closed investigation timeframes	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	0	0.00	2	10.52	3	7.14	5	5.49
3–6 months	3	10.00	1	5.26	5	11.91	9	9.89
6–9 months	1	3.33	5	26.32	4	9.52	10	10.99
9–12 months	2	6.67	2	10.53	8	19.05	12	13.19
12–24 months	12	40.00	5	26.32	18	42.86	35	38.46
More than 24 months	12	40.00	4	21.05	4	9.52	20	21.98
<b>Total</b>	<b>30</b>	<b>100</b>	<b>19</b>	<b>100</b>	<b>42</b>	<b>100</b>	<b>91</b>	<b>100</b>

## Outcomes

Closed investigation outcomes	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings*	16	51.61	7	35.00	16	38.10	39	41.94
Referred to Executive Director, Legal Services**	0	0.00	0	0.00	0	0.00	0	0.00
Referred to AHPRA	4	12.90	1	5.00	13	30.95	18	19.35
Referred to another agency	1	3.23	0	0.00	1	2.38	2	2.15
No further action	10	32.26	12	60.00	12	28.57	34	36.56
<b>Total</b>	<b>31</b>	<b>100</b>	<b>20</b>	<b>100</b>	<b>42</b>	<b>100</b>	<b>93</b>	<b>100</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, 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 QCAT.

## Open investigations

Open investigations consist of two categories—active investigations and paused investigations.

Active investigations are being currently investigated, while paused investigations are not able to be investigated until such time as another agency—such as the Queensland Police Service or the Coroner’s Court of Queensland—concludes their own processes. Despite being unable to progress paused investigations, they are still considered to be open investigations.

Where a matter is referred under section 193A(4) of the *Health Practitioner Regulation National Law (Queensland)*, we calculate timeframes inclusive of any period in which the investigation was open with AHPRA, to provide transparency of the complete length of an investigation.

### Active investigation timeframes

Active investigation timeframes	July		August		September	
	Number	%	Number	%	Number	%
Less than 3 months	42	12.73	34	10.53	47	15.06
3–6 months	33	10.00	38	11.76	34	10.90
6–9 months	50	15.15	46	14.24	35	11.22
9–12 months	45	13.64	42	13.00	41	13.14
12–24 months*	114	34.55	117	36.22	107	34.29
More than 24 months*	46	13.94	46	14.24	48	15.38
<b>Total</b>	<b>330</b>	<b>100</b>	<b>323</b>	<b>100</b>	<b>312</b>	<b>100</b>

\*All investigations that have been open for more than 12 months are published on our investigations register, available on our website ([www.oho.qld.gov.au](http://www.oho.qld.gov.au)).

## Paused investigation timeframes

Paused investigation timeframes	July		August		September	
	Number	%	Number	%	Number	%
Less than 3 months	9	17.65	9	16.67	2	4.44
3–6 months	5	9.80	4	7.41	8	17.78
6–9 months	7	13.73	11	20.37	2	4.44
9–12 months	6	11.76	6	11.11	11	24.44
12–24 months	22	43.14	20	37.04	21	46.67
More than 24 months	2	3.92	4	7.41	1	2.22
<b>Total</b>	<b>51</b>	<b>100</b>	<b>54</b>	<b>100</b>	<b>45</b>	<b>100</b>

## Open investigation timeframes

Total open investigation timeframes	July		August		September	
	Number	%	Number	%	Number	%
Less than 3 months	51	13.39	43	11.41	49	13.73
3–6 months	38	9.97	42	11.14	42	11.76
6–9 months	57	14.96	57	15.12	37	10.36
9–12 months	51	13.39	48	12.73	52	14.57
12–24 months	136	35.70	137	36.34	128	35.85
More than 24 months	48	12.60	50	13.26	49	13.73
<b>Total</b>	<b>381</b>	<b>100</b>	<b>377</b>	<b>100</b>	<b>357</b>	<b>100</b>

## Open investigation categories

Type of investigation	July	August	September
Health service complaint	270	266	243
Systemic issue	38	38	37
Another matter*	73	73	77

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

## Monitoring investigation recommendations

We monitor the implementation of recommendations made as an outcome of two types of investigation process—recommendations made as a result of an investigation completed by our office and recommendations made as a result of an investigation completed by a health service provider.

### OHO recommendations monitoring

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, we put in place a recommendations monitoring program to track the implementation of the recommendations.

#### Monitoring cases started and closed

OHO monitoring cases	July	August	September
Cases open at the beginning of the month	4	4	4
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	0	0	0

### Health service provider recommendations monitoring

A health service provider may also 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.

#### Monitoring cases started and closed

Health service provider monitoring cases	July	August	September
Cases open at the beginning of the month	4	3	2
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	1	1	0

### Open recommendations monitoring case timeframes

Monitoring case timeframes*	July		August		September	
	Number	%	Number	%	Number	%
Less than 6 months	3	42.86	0	0.00	0	0.00
6–12 months	3	42.86	2	3.33	2	33.33
More than 12 months	1	14.29	4	66.67	4	66.67
<b>Total</b>	<b>7</b>	<b>100.00</b>	<b>6</b>	<b>100.00</b>	<b>6</b>	<b>100.00</b>

\*Open recommendations monitoring cases include those resulting from recommendations by the Health Ombudsman, and those resulting from an investigation conducted by a health service provider.



## Director of Proceedings

The role of the Director of Proceedings is to independently assess the merits of an investigation and determine whether the matter is suitable to be run to Queensland Civil and Administrative Tribunal (QCAT) for a determination.

In relation to investigation and prosecution, the Health Ombudsman has established a different approach to that undertaken by AHPRA and the national boards. Where the Director of Proceedings determines that an investigation has produced evidence of issues relating to health, conduct and/or performance that require intervention by QCAT, a comprehensive brief of evidence is prepared and in-house or external lawyers are briefed to represent the Health Ombudsman before QCAT. This model represents the *model-litigant* approach to presenting matters before QCAT that have the potential to have a significant and long-term impact on the livelihoods of practitioners. This is a more efficient and cost-effective approach than what has been used in the Queensland health regulatory system previously.

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

Practitioner type	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Medical practitioner	2	22.22	0	0.00	3	33.33	5	20.83
Nurse	3	33.33	2	33.33	1	11.11	6	25.00
Dentist	2	22.22	0	0.00	0	0.00	2	8.33
Massage therapist	2	22.22	1	16.67	0	0.00	3	12.50
Pharmacist	0	0.00	1	16.67	1	11.11	2	8.33
Psychologist	0	0.00	1	16.67	2	22.22	3	12.50
Holding out as registered nurse	0	0.00	1	16.67	0	0.00	1	4.17
Unregistered chiropractor	0	0.00	0	0.00	1	11.11	1	4.17
Ambulance officer	0	0.00	0	0.00	1	11.11	1	4.71
<b>Total</b>	<b>9</b>	<b>100.00</b>	<b>6</b>	<b>100.00</b>	<b>9</b>	<b>100.00</b>	<b>24</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
Medical practitioner	26	36.62
Nurse	22*	30.99
Psychologist	4	5.63
Pharmacist	3	4.23
Dentist	4	5.63
Unregistered chiropractor	2	2.82
Massage therapist	4	5.63
Student nurse	1	1.41
Podiatrist	1	1.41
Chiropractor	1	1.41
Physiotherapist	1	1.41
Ambulance officer	1	1.41
Holding out as registered nurse	1	1.41
<b>Total</b>	<b>71</b>	<b>100.00</b>

\*One practitioner holds dual registration as a nurse and a midwife.

## Matters referred to QCAT

Practitioner type	July	August	September	Q1 total
Medical practitioner	1	1	0	2
Psychologist	1	1	0	2
<b>Total</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>4</b>

The Director of Proceedings considers all relevant aspects of each matter to determine whether to refer the matter to QCAT.

## Decisions on matters referred to Queensland Civil and Administrative Tribunal

There have been no decisions made on matters referred to QCAT during the quarter.

## Decisions on immediate action reviews

There has been one decision made on an immediate action review in QCAT during the quarter.

On 21 August 2017, a decision was handed down in *A Practitioner v The Health Ombudsman*. This matter involved an unregistered massage therapist. The tribunal dismissed the practitioner's application to set aside the Health Ombudsman's decision to impose an interim prohibition order.

## 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 Q1.

## 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

There were two show cause notices issued during the quarter.

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	Reason/s for taking action		
			Health	Conduct	Performance
Chinese medicine practitioner	1	Conditions			✓
Enrolled nurse	1	Suspension		✓	
Pharmacist	1	Conditions		✓	
Pharmacist	2	Suspension		✓	
Dental practitioner	1	Conditions		✓	✓
<b>Total</b>	<b>6</b>				

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	Reason/s for taking action			
			Health	Conduct	Performance	Interstate
Pathology specimen collector	1	Prohibition		✓		
Audiologist	1	Restrictions			✓	
Dental assistant	1	Prohibition		✓		
Massage therapist	1	Restrictions		✓		
<b>Total</b>	<b>4</b>					

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 prohibition order register on the OHO website ([www.oho.qld.gov.au](http://www.oho.qld.gov.au)).

## Monitoring practitioner compliance

When the Health Ombudsman takes immediate action against a health practitioner, we monitor 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. 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	July	August	September
Cases open at the beginning of the month	100	104	101
Practitioner monitoring cases started	4	1	2
Practitioner monitoring cases closed	0	4	4

### Open monitoring cases

#### Timeframes

Open case timeframes	July		August		September	
	Number	%	Number	%	Number	%
Less than 6 months	30	28.85	26	25.74	20	20.20
6–12 months	36	34.62	32	31.68	33	33.33
More than 12 months	38	36.54	43	42.57	46	46.46
<b>Total</b>	<b>104</b>	<b>100.00</b>	<b>101</b>	<b>100.00</b>	<b>99</b>	<b>100.00</b>

## Immediate action types

Open cases by immediate action type	July		August		September	
	Number	%	Number	%	Number	%
Interim prohibition order—restrictions	22	21.15	22	21.78	24	24.24
Interim prohibition order—prohibited	27	25.96	28	27.72	27	27.27
Immediate registration action—conditions	32	30.77	28	27.72	28	28.28
Immediate registration action—suspension	23	22.12	23	22.77	20	20.20
<b>Total</b>	<b>104</b>	<b>100.00</b>	<b>101</b>	<b>100.00</b>	<b>99</b>	<b>100.00</b>

\* As at 30 September 2017 nine practitioners were under monitoring in relation to both an immediate registration action and an interim prohibition order.

## Registered practitioners under monitoring by practitioner type

Practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health worker	0	0.00
Chinese medicine	2	3.51
Chiropractic	1	1.75
Dental	3	5.26
Medical	10	17.54
Medical radiation	0	0.00
Nursing and midwifery	33	57.89
Occupational therapy	0	0.00
Optometry	0	0.00
Osteopathy	0	0.00
Pharmacy	3	5.26
Physiotherapy	2	3.51
Podiatry	0	0.00
Psychology	3	5.26
<b>Total</b>	<b>57</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 type

Practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health worker	1	3.03
Assistant in nursing	4	12.12
Audiologist	2	6.06
Counsellor	1	3.03
Dental assistant	1	3.03
Dental nurse	1	3.03
Holding out*	4	12.12
Massage therapist	10	30.30
Natural therapist	2	6.06
Naturopath	1	3.03
Paramedic	4	12.12
Personal carer	1	3.03
Social worker	1	3.03
<b>Total</b>	<b>33</b>	<b>100.00</b>

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

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

The Australian Health Practitioner Regulation Agency (AHPRA) notified the Health Ombudsman of two serious matters during the quarter, as prescribed under section 193 of the National Law.

The Health Ombudsman asked the national board to continue to deal with these matters under section 193(2)(b) National Law.

## Consultation on matters

The office consults with AHPRA on whether matters being considered for referral are appropriate for AHPRA to manage. For matters we are considering referring to AHPRA under s91 of the *Health Ombudsman Act 2013*, we provide all necessary information in order for AHPRA to form a view as to whether referral is or is not appropriate.

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	July	August	September	Q1 total
Matters consulted on*	191	166	222	579
Matters referred	180	165	212	557
Matters retained by the office**	3	2	4	9
Decisions pending	14	8	20	20

\*The number of matters consulted on may not equal the total number of matters referred, retained 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	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Intake and triage	154	80.69	123	74.10	166	74.82	443	76.51
Assessment	32	16.74	37	22.29	40	17.94	109	18.83
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Local resolution	2	1.03	2	1.20	1	0.45	5	0.86
Investigation	3	1.54	4	2.41	15	6.79	22	3.80
<b>Total</b>	<b>191</b>	<b>100.00</b>	<b>166</b>	<b>100.00</b>	<b>222</b>	<b>100.00</b>	<b>579</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	427	4	7	2	3
Assessment	12	11	27	22	37
Local resolution	0	0	1	3	1
Conciliation	0	0	0	0	0
Investigation	0	0	0	0	22
<b>Total</b>	<b>439</b>	<b>15</b>	<b>35</b>	<b>27</b>	<b>63</b>

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

## Consultation duration

Consultation duration	July		August		September		Total	
	Number	%	Number	%	Number	%	Number	%
0–3 days	185	86.86	156	93.98	213	95.95	554	95.68
4–7 days	4	2.09	9	5.42	8	3.60	21	3.63
8–11 days	0	0.00	1	0.60	1	0.45	2	0.35
More than 12 days	2	1.05	0	0.00	0	0.00	2	0.35
<b>Total</b>	<b>191</b>	<b>100.00</b>	<b>166</b>	<b>100.00</b>	<b>222</b>	<b>100.00</b>	<b>579</b>	<b>100.00</b>

## Number of practitioners referred to AHPRA by practitioner type

Practitioner type	July		August		September		Q1	
	Number	%	Number	%	Number	%	Number	%
Aboriginal and Torres Strait Islander health practitioner	0	0.00	0	0.00	0	0.00	0	0.00
Chinese medicine practitioner	0	0.00	0	0.00	1	0.47	1	0.18
Chiropractor	4	2.22	4	2.42	5	2.36	13	2.33
Dental practitioner	19	10.56	15	9.09	26	12.26	60	10.77
Medical practitioner	83	46.11	85	51.52	106	50.00	274	49.19
Medical radiation practitioner	1	0.56	0	0.00	2	0.94	3	0.54
Nursing and midwifery practitioner	38	21.11	42	25.45	52	24.53	132	23.70
Occupational therapist	0	0.00	2	1.21	1	0.47	3	0.54
Optometrist	1	0.56	2	1.21	0	0.00	3	0.54
Osteopath	1	0.56	1	0.61	0	0.00	2	0.36
Pharmacist	15	8.33	5	3.03	7	3.30	27	4.85
Physiotherapist	4	2.22	2	1.21	4	1.89	10	1.80
Podiatrist	3	1.67	2	1.21	0	0.00	5	0.90
Psychology	8	4.44	4	2.42	8	3.77	20	3.59
Student practitioner*	3	1.67	1	0.61	0	0.00	4	0.72
<b>Total</b>	<b>180</b>	<b>100.00</b>	<b>165</b>	<b>100.00</b>	<b>212</b>	<b>100.00</b>	<b>557</b>	<b>100.00</b>

\*During Q1, three student nurses and one student podiatrist were referred to AHPRA.

## 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 processes	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Total
Aboriginal and Torres Strait Islander health worker	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine practitioner	-	-	-	-	-	1	-	1	-	2	-	1	-	5
Chiropractic	-	-	2	-	-	-	-	-	-	12	-	4	-	18
Dental practitioner	-	4	2	-	-	-	-	4	-	14	2	65	-	91
Medical practitioner	4	37	5	2	1	-	1	14	47	30	17	233	9	400
Medical radiation practitioner	-	-	-	-	-	-	-	-	-	-	1	2	-	3
Nursing and midwifery practitioner	-	8	2	1	-	-	-	5	15	59	41	36	-	167
Occupational therapy	-	-	-	-	-	-	-	-	-	3	-	-	-	3
Optometry	-	-	-	-	-	-	-	-	-	-	1	2	-	3
Osteopathy	-	-	-	-	-	-	-	1	-	-	1	2	-	4
Pharmacy	-	5	-	-	2	-	1	-	19	2	1	4	-	34
Physiotherapy	-	-	-	-	-	-	-	2	-	3	2	6	-	13
Podiatry	-	-	-	-	-	-	-	-	-	3	1	2	-	6
Psychology	-	3	-	-	-	1	-	2	-	10	4	11	-	31
Speech pathologist	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Student practitioner	-	-	-	-	-	-	-	-	-	2	2	-	-	4
<b>Total</b>	<b>4</b>	<b>57</b>	<b>11</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>29</b>	<b>81</b>	<b>140</b>	<b>73</b>	<b>368</b>	<b>9</b>	<b>782</b>

## 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 our commitment to continual improvement as we mature as an agency and the importance we place 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	663	47.42
Male	663	47.42
Prefer not to specify	0	0.00
Unknown	72	5.15
<b>Total</b>	<b>1398</b>	<b>100.00</b>

## Age

Age	Number	Percentage
Less than 18 years	69	4.94
18–24 years	79	5.65
25–34 years	270	19.31
35–44 years	274	19.60
45–54 years	216	15.45
55–64 years	180	12.88
65–74 years	111	7.94
More than 75 years	82	5.87
Unknown*	117	8.37
<b>Total</b>	<b>1398</b>	<b>100.00</b>

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



## Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	537	38.41
Central West	1	0.07
Darling Downs	33	2.36
Far North	86	6.15
Fitzroy	55	3.93
Gold Coast	142	10.16
Mackay	33	2.36
North West	4	0.29
Northern	66	4.72
South West	7	0.50
Sunshine Coast	63	4.51
West Moreton	26	1.86
Wide Bay-Burnett	163	11.66
Outside Queensland	53	3.79
Unknown	129	9.23
<b>Total</b>	<b>1398</b>	<b>100.00</b>

## Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	706	42.43
Central West	1	0.06
Darling Downs	32	1.92
Far North	89	5.35
Fitzroy	52	3.13
Gold Coast	160	9.62
Mackay	35	2.10
North West	4	0.24
Northern	81	4.87
South West	9	0.54
Sunshine Coast	74	4.45
West Moreton	17	1.02
Wide Bay-Burnett	164	9.86
Outside Queensland*	23	1.38
Unknown	217	13.04
<b>Total</b>	<b>1664</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.



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