Quarterly performance report

Quarter one 2018-19



Quarterly performance report—Quarter one 2018–19

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Introduction

This document reports on the quarter one (Q1) performance of the Office of the Health Ombudsman (OHO) for the 2018–19 financial year.

The OHO is the agency responsible for health service complaints management in Queensland. We are 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.

Data in this report is correct as at 25 January 2019, 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	Ju	ly	Aug	ust	Septe	mber	Q1 total		
	Number	%	Number	%	Number	%	Number	%	
Complaint	679	63.28	668	61.62	605	62.63	1952	62.50	
Enquiry	394	36.72	415	38.28	361	37.37	1170	37.46	
Yet to be classified	0	0.00	1	0.09	0	0.00	1	0.03	
Total	1073	100.00	1084	100.00	966	100.00	3123	100.00	

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.

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	Ju	ıly	Auç	gust	Septe	ember	Q1 total		
	Number	%	Number	%	Number	%	Number	%	
Health consumer complaint	611	89.99	588	88.02	543	89.75	1742	89.24	
Mandatory notification*	15	2.21	13	1.95	9	1.49	37	1.90	
Voluntary notification*	47	6.92	51	7.63	43	7.11	141	7.22	
Self-notification*	3	0.44	3	0.45	1	0.17	7	0.36	
Referral from another agency	3	0.44	13	1.95	9	1.49	25	1.28	
Total	679	100.00	668	100.00	605	100.00	1952	100.00	

^{*}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		Aug	ust	Septe	mber	Q1 total		
	Number	%	Number	%	Number	%	Number	%	
Yes	541	89.72	571	91.36	533	88.69	1645	89.94	
No	62	10.28	54	8.64	68	11.31	184	10.06	
Total	603	100.00	625	100.00	601	100.00	1829	100.00	

Accepted vs not accepted

Number of decisions made	July		Auç	gust	Septe	ember	Q1 total		
	Number	%	Number	per % Number %		%	Number	%	
Accepted	332	55.06	393 62.88		393	65.39	1118	61.13	
Not accepted	271	44.94	232	37.12	208	34.61	711	38.84	
Total	603	100.00	625	100.00	601	100.00	1829	100.00	

^{&#}x27;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* (the Act).

An additional 77 matters were determined by the office to fall outside the jurisdiction of the Act, and therefore have been excluded from the tables above.

Accepted decision outcomes

Type of relevant action	Ju	ly	Aug	ust	Septe	mber	Q1 total		
	Number	%	Number	%	Number	%	Number	%	
Assessment	125	33.42	135	32.17	175	40.89	435	35.60	
Local resolution	88	23.53	110	26.19	84	19.63	282	23.08	
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00	
Investigation	10	2.67	8	1.90	6	1.40	24	1.96	
Referred to AHPRA and the national boards	151	40.37	166	39.52	163	38.08	480	39.28	
Referred to another entity	0	0.00	0	0.00	0	0.00	0	0.00	
Referred to legal services	0	0.00	1	0.24	0	0.00	1	0.08	
Immediate registration action	0	0.0	0	0.00	0	0.00	0	0.00	
Interim prohibition order	0	0.00	0	0.00	0	0.00	0	0.00	
Total	374	100.00	420	100.00	428	100.00	1222	100.00	

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 'Accepted vs not accepted' table on page 6).

Health service complaints profile

Main issues raised in complaints

Issue	Ju	ıly	Auç	gust	Septe	ember	Q1 t	otal
	Number	%	Number	%	Number	%	Number	%
Access	72	7.23	60	5.86	65	7.37	197	6.79
Code of conduct for healthcare workers	9	0.90	9	0.88	7	0.79	25	0.86
Communication/ information	124	12.45	139	13.57	105	11.90	368	12.68
Consent	16	1.61	14	1.37	11	1.25	41	1.41
Discharge/transfer arrangements	15	1.51	23	2.25	19	2.15	57	1.96
Environment/ management of facilities	23	2.31	27	2.64	23	2.61	73	2.52
Fees/cost	33	3.31	32	3.13	28	3.17	93	3.20
Grievance processes	19	1.91	24	2.34	20	2.27	63	2.17
Health Ombudsman Act 2013 offence	0	0.00	0	0.00	0	0.00	0	0.00
Medical records	23	2.31	30	2.93	17	1.93	70	2.41
Medication	128	12.85	112	10.94	104	11.79	344	11.85
Professional conduct	87	8.73	117	11.43	75	8.50	279	9.61
Professional health	22	2.21	25	2.44	13	1.47	60	2.07
Professional performance	397	39.86	394	38.48	367	41.61	1158	39.90
Reports/certificates	28	2.81	18	1.76	24	2.72	70	2.41
Research/teaching/ assessment	0	0.00	0	0.00	4	0.45	4	0.14
Total	996	100.00	1024	100.00	882	100.00	2902	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 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	-	8	-	-	-	-	-	-	-	-	-	3	-	3	2	-	16
Chinese medicine	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	6	-	4	-	-	10
Dentistry	4	-	6	2	-	1	9	1	-	4	-	22	1	83	-	1	134
Emergency care	1	3	2	-	1	-	-	-	-	-	-	-	4	5	1	-	17
General medical	17	-	93	7	3	3	10	2	-	12	109	79	19	204	36	-	594
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	-	1	5	-	-	6
Medical specialty	4	-	21	1	1	-	2	1	-	1	12	11	5	82	12	-	153
Nursing	-	2	7	-	-	2	-	-	-	7	15	48	19	28	-	2	130
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Optometry	-	-	1	-	-	-	-	-	-	-	1	2	1	4	-	-	9
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Other	-	9	9	-	-	-	-	-	-	-	2	31	5	3	1	1	61
Pathology service	-	-	-	-	-	-	-	-	-	-	-	2	1	1	-	-	4
Pharmacy	-	-	6	-	-	-	-	-	-	-	19	11	1	4	-	-	41
Physiotherapy	-	-	-	1	-	-	1	-	-	-	-	1	-	2	-	-	5
Podiatry	-	-	-	-	-	-	-	-	-	1	-	3	-	2	-	-	6
Psychology	1	1	15	-	-	-	2	-	-	4	4	21	-	12	6	-	66
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Surgical	3	-	13	3	1	-	1	2	-	4	2	5	3	79	2	-	118
Total	30	23	173	14	6	6	26	6	0	33	164	245	60	523	60	4	1373

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

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	-	-	3	1	-	9	1	1	-	4	5	-	-	16	-	-	40
Allied health service	-	-	2	-	-	-	4	-	-	-	-	1	-	9	-	-	16
Ambulance service	1	-	5	2	-	-	2	1	-	-	1	1	-	4	-	-	17
Community health service	9	-	5	-	-	1	-	2	-	-	1	1	-	9	1	-	29
Correctional facility	67	-	3	-	-	1	1	1	-	3	99	-	-	97	2	-	274
Dental service	9	-	5	-	-	5	6	5	-	1	-	-	-	17	-	-	48
Hospital and Health Service	2	-	1	-	-	1	-	1	-	1	-	1	-	2	-	-	9
Laboratory service	-	2	1	-	-	3	1	-	-	1	-	-	-	2	1	-	11
Licensed private hospital	3	-	19	1	3	11	10	6	-	4	9	3	-	53	1	-	123
Medical centre	21	-	21	2	-	8	9	4	-	11	5	6	-	31	3	-	121
Mental health service	9	-	12	9	4	4	1	3	-	1	8	4	-	27	-	-	82
Nursing service	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Other government department	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Other support service	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	-	4
Pharmaceutical service	-	-	2	-	-	1	7	3	-	-	18	1	-	-	-	-	32
Private organisation	2	-	1	-	-	2	-	1	-	1	1	2	-	7	-	-	17
Public health service	2	-	2	-	5	5	-	1	-	-	3	-	-	14	-	-	32
Public hospital	40	-	104	11	39	12	13	24	-	10	28	8	-	328	2	-	619
Residential care service	-	-	-	-	-	-	-	1	-	-	1	-	-	2	-	-	4
Specialised health service	2	-	6	1	-	3	9	1	-	-	1	3	-	8	-	-	34
Health information service	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1
Licensed day hospital	-	-	1	-	-	1	-	1	-	-	-	-	-	2	-	-	5
Optical store	-	-	1	-	-	-	2	1	-	-	-	-	-	1	-	-	5
Paramedical service	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	3
Total	167	2	195	27	51	67	67	57	0	37	180	34	0	635	10	0	1529

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 quarter	July	August	September	Q1 total
Assessments started	136	143	192	471
Assessments completed	133	157	177	467

Completed assessment timeframes

Assessment timeframes	July		Auç	gust	Septe	ember	Q1 total		
	Number	%	Number	%	Number	%	Number	%	
Within legislative timeframes*	121	90.98	156	99.36	176	99.44	453	97.00	
Outside legislative timeframes	12	9.02	1 0.64		1	0.56	14	3.00	
Total	133 100.00		157	100.00	177	100.00	467	100.00	

^{*}Includes matters completed within 30 days or 60 days with an approved extension.

Assessment decisions

Type of relevant action	Ju	ıly	Auç	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%	
Local resolution	0	0.00	1	0.62	0	0.00	1	0.21	
Conciliation	9	6.62	8	4.97	8	4.44	25	5.24	
Investigation	10	7.35	8	4.97	4	2.22	22	4.61	
Referred to AHPRA and the national boards	6	4.41	19	11.80	21	11.67	46	9.64	
Referred to another entity	47	34.56	54	33.54	75	41.67	176	36.90	
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	64	47.06	71	44.10	72	40.00	207	43.40	
Total	136	100.00	161	100.00	180	100.00	477	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.

Local resolution

Local resolutions started and completed

Local resolutions this quarter	July	August	September	Q1 total
Local resolutions started	84	117	86	287
Local resolutions completed	127	100	98	325

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

Local resolution timeframe	Ju	ıly	Auç	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%	
Within legislative timeframes*	127	100.00	100	100.00	98	100.00	325	100.00	
Outside legislative timeframes	0	0.00	0	0.00	0	0.00	0	0.00	
Total	127	100.00	100	100.00	98	100.00	325	100.00	

^{*}Includes matters completed within 30 days or 60 days with an approved extension

Outcomes

Local resolution outcomes	Ju	ıly	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Resolution reached	108	85.04	77	77.00	80	81.63	265	81.54
No resolution reached	13	10.24	14	14.00	9	9.18	36	11.08
Complaint withdrawn*	5	3.94	8	8.00	5	5.10	18	5.54
Local resolution did not commence**	1	0.79	1	1.00	4	4.08	6	1.85
Total	127	100.00	100	100.00	98	100.00	325	100.00

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

Decisions for matters that were not resolved

Type of relevant action	Ju	ıly	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	0	0.00	0	0.00	0	0.00	0	0.00
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	1	7.14	0	0.00	1	2.78
Immediate action	0	0.00	0	0.00	0	0.00	0	0.00
No further action	13	100.00	13	92.86	9	100.00	35	97.22
Total	13	100.00	14	100.00	9	100.00	36	100.00

^{**}A local resolution may not commence where the complaint is resolved directly with the health care provider prior to the commencement of the process. Prior to October 2017, these matters were classified as 'Complaint withdrawn'.

Conciliation

Conciliations started and closed

Conciliations this quarter	July	August	September	Q1 total
Conciliations started	14	8	10	32
Conciliations closed	13	9	8	30

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 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
Parties agreed to participate	4	8	3	15
Party/ies did not agree to participate	7	3	4	14

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	Ju	ıly	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	4	66.67	1	16.67	1	25.00	6	37.50
3–6 months	1	16.67	5	83.33	2	50.00	8	50.00
6–9 months	0	0.00	0	0.00	1	25.00	1	6.25
9–12 months	1	16.67	0	0.00	0	0.00	1	6.25
More than 12 months	0	0.00	0	0.00	0	0.00	0	0.00
Total	6	100.00	6	100.00	4	100.00	16	100.00

Outcomes

Conciliation outcomes	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Successful	3	50.00	5	83.33	0	0.00	8	50.00
Not successful	3	50.00	1	16.67	4	100.00	8	50.00
Ended by the Health Ombudsman	0	0.00	0	0.00	0	0.00	0	0.00
Total	6	100.00	6	100.00	4	100.00	16	100.00

The data above relates to matters where parties agreed to participate in conciliation. After agreeing, the conciliation process was completed with the matter either being successful or not successful—or in rare instances, the Health Ombudsman ending it. Completed conciliations differ from closed conciliations—in the first conciliation data table above—as completed conciliations only relate to matters where parties agreed to participate and the conciliation process was completed.

Decisions for conciliations that were not successful

Type of relevant action	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	3	100.00	1	100.00	4	100.00	8	100.00
Total	3	100.00	1	100.00	4	100.00	8	100.00

Open conciliation timeframes

Conciliations open	Ju	ıly	August		Septe	ember
	Number	%	Number	%	Number	%
Less than 3 months	23	62.16	24	66.67	22	57.89
3–6 months	10	27.03	5	13.89	9	23.68
6–9 months	2	5.41	4	11.11	4	10.53
9–12 months	0	0.00	1	2.78	1	2.63
More than 12 months	2	5.41	2	5.56	2	5.26
Total	37	100.00	36	100.00	38	100.00

Investigation

Investigations started and closed

Investigations this quarter	July	August	September	Q1 total
Investigations started	21	24	10	55
Investigations closed	9	25	17	51
Investigations amalgamated under s40(2)	3	5	3	11

Closed investigations

Timeframes

Closed investigation timeframes	Ju	ly	Aug	ust	Septe	mber	Q1 t	otal
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	3	33.33	3	12.00	3	17.65	9	17.65
3–6 months	0	0.00	3	12.00	3	17.65	6	11.76
6–9 months	2	22.22	3	12.00	2	11.76	7	13.73
9–12 months	1	11.11	6	24.00	2	11.76	9	17.65
12-24 months	3	33.33	7	28.00	6	35.29	16	31.37
More than 24 months	0	0.00	3	12.00	1	5.88	4	7.84
Total	9	100.00	25	100.00	17	100.00	51	100.00

Outcomes

Investigation outcomes	Ju	ly	Aug	ust	Septe	mber	Q1 t	otal
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings*	4	40.00	16	59.26	9	50.00	29	52.73
Referred to AHPRA	5	50.00	5	18.52	3	16.67	13	23.64
Referred to another agency	0	0.00	1	3.70	2	11.11	3	5.45
No further action	1	10.00	5	18.52	4	22.22	10	18.18
Referred for conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Total	10	100.00	27	100.00	18	100.00	55	100.00

A single investigation may result in multiple outcomes, and as such the total number of outcomes in this table may not match the number of closed investigations detailed in the table above.

^{*}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.

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.

Active investigation timeframes

Active investigation timeframes	July		Auç	gust	September		
	Number	%	Number	%	Number	%	
Less than 3 months	43	34.13	47	40.52	34	32.38	
3–6 months	16	12.70	17	14.66	24	22.86	
6–9 months	21	16.67	16	13.79	9	8.57	
9–12 months	10	7.94	8	6.90	14	13.33	
12–24 months*	24	19.05	18	15.52	15	14.29	
More than 24 months*	12	9.52	10	8.62	9	8.57	
Total	126	100.00	116	100.00	105	100.00	

^{*}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).

Paused investigation timeframes

Paused investigation timeframes	July		Auç	gust	September		
	Number	%	Number	%	Number	%	
Less than 3 months	2	5.56	6	15.00	6	14.63	
3–6 months	10	27.78	7	17.50	6	14.63	
6–9 months	5	13.89	8	20.00	11	26.83	
9–12 months	7	19.44	7	17.50	3	7.32	
12–24 months	9	25.00	9	22.50	12	29.27	
More than 24 months	3	8.33	3 7.50		3	7.32	
Total	36	100.00	40 100.00		41	100.00	

Open investigation timeframes

Total open investigation timeframes	July		Auç	gust	September		
	Number	%	Number	%	Number	%	
Less than 3 months	45	27.78	53	33.97	40	27.40	
3–6 months	26	16.05	24	15.38	30	20.55	
6–9 months	26	16.05	24	15.38	20	13.70	
9–12 months	17	10.49	15	9.62	17	11.64	
12-24 months	33	20.37	27	17.31	27	18.49	
More than 24 months	15	9.26	13 8.33		12	8.22	
Total	162	100.00	156 100.00		146	100.00	

Open investigation categories

Type of investigation	July	August	September
Health service complaint	102	96	89
Systemic issue	13	12	10
Another matter*	45	47	46
Matters identified for further investigation**	2	1	1
Total	162	156	146

^{*}Matters 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

We monitor the implementation of recommendations made as an outcome of two types of investigation processes—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 recurrence of the issues identified in the investigation. 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	5	5	5
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	0	0	0
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	0	0	0

Open recommendations monitoring case timeframes

Monitoring case timeframes*	July		Auç	gust	September		
	Number	%	Number %		Number	%	
Less than 6 months	2	40.00	1	20.00	0	0.00	
6–12 months	1	20.00	2	40.00	3	60.00	
More than 12 months	2	40.00	2	40.00	2	40.00	
Total	5	100.00	5	100.00	5	100.00	

^{*}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	Ju	ıly	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Chinese medicine practitioner	0	0.00	0	0.00	1	11.11	1	3.70
Holding out as a registered nurse	0	0.00	1	7.14	0	0.00	1	3.70
Medical practitioner	3	75.00	5	35.71	3	33.33	11	40.74
Pharmacist	1	25.00	2	14.29	2	22.22	5	18.52
Registered nurse	0	0.00	6	42.86	3	33.33	9	33.33
Total	4	100.00	14	100.00	9	100.00	27	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 the 'Closed investigation outcomes' figures on page 20.

Matters currently with the Director of Proceedings by practitioner type

Practitioner type	Number	Percentage
Chinese medicine practitioner	3	1.69
Dentist	6	3.37
Medical practitioner	60*	33.71
Medical radiation practitioner	2	1.12
Pharmacist	12	6.74
Physiotherapist	1	0.56
Podiatrist	2	1.12
Psychologist	9**	5.06
Registered nurse	66***	37.64
Advanced care paramedic	2	1.12
Assistant in nursing	3	1.69
Audiologist	2	1.12
Dental assistant	1	0.56
Holding out as a psychologist	1	0.56
Holding out as a registered nurse	2	1.12
Massage therapist	2	1.12
Natural therapist	1	0.56
Social worker	1	0.56
Student nurse	1	0.56
Unregistered chiropractor	1	0.56
Total	178	100.00

Data in this table is as at the last day of Q1 2018-19.

^{*}One medical practitioner held dual registration as a dentist

^{**}This includes two matters where the Director of Proceedings has decided to file the matter in QCAT, but the filing has not yet occurred.

^{***}One registered nurse held dual registration as a midwife.

Outcomes of matters reviewed by the Director of Proceedings

Matters filed in the Queensland Civil and Administrative Tribunal

Practitioner type	Ju	ıly	Aug	gust	Septe	ember	Q1 :	total
	Number	%	Number	%	Number	%	Number	%
Dentist	0	0.00	0	0.00	1	50.00	1	25.00
Medical Practitioner	1	50.00	0	0.00	0	0.00	1	25.00
Physiotherapist	0	0.00	0	0.00	0	0.00	0	0.00
Pharmacist	0	0.00	0	0.00	0	0.00	0	0.00
Registered Nurse	1	50.00	0	0.00	1	50.00	2	50.00
Total	2	100.00	0	N/A	2	100.00	4	100.00

The table above reflects the number of matters 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 Health Ombudsman

Practitioner type	Jι	ıly	August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
Chiropractor	0	0.00	1	33.33	0	0.00	1	33.33
Massage therapist	0	0.00	1	33.33	0	0.00	1	33.33
Medical Practitioner	0	0.00	1	33.33	0	0.00	1	33.33
Total	0	0.00	3	100.00	0	0.00	3	100.00

^{*}One provider held dual registration as a midwife.

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 this quarter.

Immediate action

The *Health Ombudsman Act 2013* allows for immediate action to be taken against a registered or unregistered health practitioner if the Health Ombudsman reasonably believes:

 that a practitioner's health, conduct or performance poses a serious risk to the health and safety of the public

or

that action is in the public interest.

Show cause notices

There were eight show cause notices issued during the quarter.

- four medical practitioners for reasons relating to conduct.
- one enrolled nurse for reasons relating to conduct.
- one dentist for reasons relating to public interest.
- one assistant in nursing for reasons relating to conduct
- one acupuncturist for reasons relating to conduct.

As outlined in the *Health Ombudsman Act 2013*, upon receipt of a show cause notice, a health service provider is invited to make a submission within a stated period of time. The Health Ombudsman will then consider the submission before deciding whether to take immediate action against the provider.

Immediate registration actions

Practitioner type	Number	Action taken	Reason/s for taking action				
			Health	Conduct	Performance		
Medical practitioner	1	Conditions		✓			
Psychiatrist	1	Conditions		√			
Enrolled nurse	1	Conditions		✓			

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	
Massage therapist	1	Prohibition		✓			
Paramedic	1	Prohibition		✓			
Kinesiologist	1	Restrictions		√			

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.

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 prohibitions placed 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	92	92	93
Practitioner monitoring cases started	3	3	1
Practitioner monitoring cases closed	3	2	1

Open monitoring cases

Timeframes

Open case timeframes	July		Aug	gust	September		
	Number	%	Number	%	Number	%	
Less than 6 months	23	25.00	21	22.58	20	21.51	
6–12 months	14	15.22	18	19.35	19	20.43	
More than 12 months	55	59.78	54	58.06	54	58.06	
Total	92	100.00	93	100.00	93	100.00	

Immediate action types

Open cases by immediate action type	July		August		September	
	Number	%	Number	%	Number	%
Interim prohibition order—restrictions	16	17.39	17	18.28	17	18.28
Interim prohibition order—prohibited	38	41.30	40	43.01	39	41.94
Immediate registration action—conditions	19	20.65	18	19.35	19	20.43
Immediate registration action—suspension	18	19.57	17	18.28	17	18.28
QCAT issued conditions or prohibition	1	1.09	1	1.08	1	1.08
Total	92	100.00	93	100.00	93	100.00

Registered practitioners under monitoring by practitioner type*

Practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health practitioner	0	0.00
Chinese medicine practitioner	1	2.00
Chiropractor	1	2.00
Dental practitioner	3	6.00
Medical practitioner	9	18.00
Medical radiation practitioner	0	0.00
Nursing and midwifery practitioner	32	64.00
Occupational therapist	0	0.00
Optometrist	0	0.00
Osteopath	0	0.00
Pharmacist	0	0.00
Physiotherapist	2	4.00
Podiatrist	0	0.00
Psychologist	2	4.00
Total	50	100.00

These figures are based on the number of individual registered practitioners being monitored by the OHO as at the end of 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

Open cases by practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health worker	1	2.50
Assistant in nursing	8	20.00
Audiologist	2	5.00
Counsellor	1	2.50
Dental assistant	1	2.50
Dental nurse	1	2.50
Former nurse	1	2.50
Holding out*	3	7.50
Kinesiologist	1	2.50
Massage therapist	12	30.00
Medical assistant	1	2.50
Natural therapist	1	2.50
Naturopath	1	2.50
Paramedic	4	10.00
Personal carer	1	2.50
Social worker	1	2.50
Total	40	100.00

^{*}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 as at the end of 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. One matter was requested for referral back to the office.

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 section 91 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*	182	206	189	577
Matters referred	193	205	188	586
Matters retained by the office**	2	11	5	18

^{*}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	Ju	ıly	August Se		Septe	September		Q1 total	
	Number	%	Number	%	Number	%	Number	%	
Intake and triage	153	84.07	166	80.58	158	83.60	477	82.67	
Assessment	22	12.09	30	14.56	24	12.70	76	13.17	
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00	
Local resolution	1	0.55	5	2.43	1	0.53	7	1.21	
Investigation	6	3.30	4	1.94	5	2.65	15	2.60	
Internal review	0	0.00	1	0.49	1	0.53	2	0.35	
Total	182	100.00	206	100.00	189	100.00	577	100.00	

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	475	2	0	0	0
Assessment	10	7	22	28	9
Local resolution	0	0	3	1	3
Conciliation	0	0	0	0	0
Investigation	0	1	0	1	13
Internal review	0	0	0	0	2
Total	485	10	25	30	27

^{&#}x27;Age of matters' is calculated from the date on which a matter was accepted by the office.

Consultation duration

Consultation duration	July		August		September		Q1 total	
	Number	%	Number	%	Number	%	Number	%
0–3 days	135	74.18	145	70.39	162	85.71	442	76.60
4–7 days	47	25.82	57	27.67	27	14.29	131	22.70
8–11 days	0	0.00	3	1.46	0	0.00	3	0.52
More than 12 days	0	0.00	1	0.49	0	0.00	1	0.17
Total	182	100.00	206	100.00	189	100.00	577	100.00

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Jι	ıly	August		September		Q1 total	
	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	0	0.00	0	0.00
Chiropractor	3	1.55	1	0.49	4	2.13	8	1.37
Dental practitioner	21	10.88	25	12.20	19	10.11	65	11.09
Medical practitioner	111	57.51	112	54.63	111	59.04	334	57.00
Medical radiation practitioner	3	1.55	0	0.00	1	0.53	4	0.68
Nursing and midwifery practitioner	34	17.62	39	19.02	38	20.21	111	18.94
Occupational therapist	0	0.00	0	0.00	0	0.00	0	0.00
Optometrist	1	0.52	2	0.98	1	0.53	4	0.68
Osteopath	0	0.00	0	0.00	0	0.00	0	0.00
Pharmacist	9	4.66	13	6.34	9	4.79	31	5.29
Physiotherapist	3	1.55	1	0.49	0	0.00	4	0.68
Podiatrist	2	1.04	1	0.49	0	0.00	3	0.51
Psychology	5	2.59	11	5.37	5	2.66	21	3.58
Student practitioner*	1	0.52	0	0.00	0	0.00	1	0.17
Total	193	100.00	205	100.00	188	100.00	586	100.00

^{*}Three medical students and one student nurse were referred to AHPRA during the quarter.

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	Research / teaching / assessment	Total
Aboriginal and Torres Strait Islander health worker	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chiropractor	-	-	-	-	-	-	-	-	-	4	-	4	-	-	8
Dental practitioner	1	6	1	-	1	1	1	4	-	14	1	56	-	-	86
Medical practitioner	2	54	6	4	1	1	2	8	82	44	19	244	13	-	480
Medical radiation practitioner	-	-	-	-	-	-	-	-	-	-	2	2	-	-	4
Nursing and midwifery practitioner	-	3	-	-	-	-	-	3	16	37	33	35	-	1	128
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Optometrist	-	-	-	-	-	-	-	-	-	1	-	3	-	-	4
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Paramedic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacist	-	1	-	-	-	-	-	1	21	10	2	2	-	-	37
Physiotherapist	-	3	1	-	-	1	-	-	-	2	-	2	-	-	6
Podiatrist	-	-	-	-	-	-	-	1	-	3	-	2	-	-	6
Psychologist	-	-	-	-	-	1	-	4	-	7	1	10	1	-	27
Student practitioner	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Total	3	67	8	4	2	4	3	21	119	122	59	360	14	1	787

Demographics

The following demographic data is based on matters accepted during the reporting period

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	921	51.80
Male	808	45.44
Prefer not to specify	44	2.47
Unknown	5	0.28
Total	1778	100.00

Age

Age	Number	Percentage
Less than 18 years	104	5.85
18–24 years	87	4.89
25–34 years	323	18.17
35–44 years	380	21.37
45–54 years	288	16.20
55–64 years	236	13.27
65–74 years	149	8.38
More than 75 years	112	6.30
Unknown*	99	5.57
Total	1778	100.00

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

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	801	45.05
Central West	4	0.22
Darling Downs	63	3.54
Far North	88	4.95
Fitzroy	56	3.15
Gold Coast	206	11.59
Mackay	36	2.02
North West	4	0.22
Northern	72	4.05
South West	7	0.39
Sunshine Coast	79	4.44
West Moreton	32	1.80
Wide Bay-Burnett	136	7.65
Outside Queensland	121	6.81
Unknown	73	4.11
Total	1778	100.00

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	1046	48.40
Central West	3	0.14
Darling Downs	67	3.10
Far North	100	4.63
Fitzroy	60	2.78
Gold Coast	251	11.61
Mackay	39	1.80
North West	7	0.32
Northern	101	4.67
South West	8	0.37
Sunshine Coast	114	5.28
West Moreton	20	0.93
Wide Bay-Burnett	141	6.52
Outside Queensland*	24	1.11
Unknown	180	8.33
Total	2161	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.

