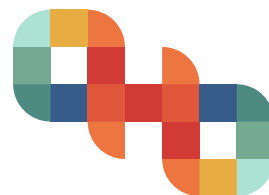


Quarter Two 2021-22
performance report
Office of the Health Ombudsman



OFFICE OF THE
HEALTH
OMBUDSMAN



Quarterly performance report—Quarter two 2021-22

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Contents

Introduction	4
Intake of complaints	5
Type of contacts	5
Type of complaints	5
Complaint decisions	6
Health service complaints profile	8
Main issues raised in complaints	8
Subcategories of professional performance issues raised in complaints	9
Profile of complaints about health practitioners	10
Profile of complaints about health service organisations	11
Assessment	13
Assessments started and completed	13
Completed assessment timeframes	13
Assessment decisions	14
Local resolution	15
Local resolutions started and completed	15
Completed local resolutions	15
Decisions for matters that were not resolved	16
Conciliation	17
Conciliations started and closed	17
Agreement to participate in conciliation	17
Completed conciliations	17
Decisions for conciliations that were not successful	18
Open conciliation timeframes	18
Investigation	19
Investigations started and closed	19
Closed investigations	19
Open investigations	21
Monitoring investigation recommendations	23
OHO recommendations monitoring	23
Open recommendations monitoring case timeframes	23
Director of Proceedings	24
Matters referred to the Director of Proceedings by practitioner type	24
Matters currently with the Director of Proceedings by practitioner type	24
Outcomes of matters reviewed by the Director of Proceedings	25
Decisions on matters referred to the Queensland Civil and Administrative Tribunal	26
Decisions on immediate action reviews	27
QCAT disciplinary matters	28
Outcomes of QCAT disciplinary matters	29
Immediate action	30
Show cause notices	30
Immediate registration actions	30
Interim prohibition orders	31
Monitoring practitioner compliance	32
Practitioner monitoring cases	32



Open monitoring cases	32
Australian Health Practitioner Regulation Agency	36
Number of issues referred to AHPRA by practitioner type.....	40
Demographics of healthcare consumers.....	41
Gender of healthcare consumers	41
Age of healthcare consumers	41
Location of healthcare consumers.....	42
Location of health service providers	43



Introduction

This document reports on the quarter two (Q2) performance of the Office of the Health Ombudsman (OHO) for the 2021–22 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 31 December 2022, though figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

The OHO is working closely with Ahpra within Queensland's co-regulatory framework. All registered practitioner complaints are now jointly considered by OHO and Ahpra from 6 December 2021.

Intake of complaints

Type of contacts

Type of contact	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Complaint	788	79.36	914	78.12	720	74.92	2,422	77.53
Enquiry	154	15.51	184	15.73	177	18.42	515	16.49
Information	50	5.04	72	6.15	56	5.83	178	5.70
Yet to be classified	1	0.10	0	0.00	8	0.83	9	0.29
Total	993	100.00	1170	100.00	961	100.00	3,124	100.00

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.

Type of complaints

Type of complaints	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	698	88.58	791	86.54	625	86.81	2,114	87.28
Mandatory notification*	20	2.54	35	3.83	31	4.31	86	3.55
Voluntary notification*	64	8.12	76	8.32	56	7.78	196	8.09
Self-notification*	2	0.25	5	0.55	2	0.28	9	0.37
Referral from another agency	4	0.51	7	0.77	6	0.83	17	0.70
Total	788	100.00	914	100.00	720	100.00	2,422	100.00

*Notifications are matters defined under the Health Practitioner Regulation National Law (Queensland) and only relate to registered practitioners.

Complaint decisions

The *Health Ombudsman Act 2013* requires a decision to be made within 7 days. Prior to 6 December 2021, this was 7 calendar days however when legislative amendments commenced on 6 December 2021 this timeframe became 7 business days.

Decisions timeframes—within seven days

Decision made	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Yes	759	98.19	865	97.63	783	99.49	2,407	98.41
No	14	1.81	21	2.37	4	0.51	39	1.59
Total	773	100.00	886	100.00	787	100.00	2,446	100.00

Decisions made

Number of decisions made	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Accepted and further relevant action taken	412	53.30	460	51.92	392	49.81	1,264	51.68
Accepted and no further action taken*	254	32.86	293	33.07	254	32.27	801	32.75
Not accepted under s35A**	107	13.84	133	15.01	141	17.92	381	15.58
Total	773	100.00	886	100.00	787	100.00	2,446	100.00

*These 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*.

**Matters may not be accepted under s35A of the Act where the matter would be more appropriately dealt with by an entity other than the health ombudsman or where the complainant has not yet sought a resolution with the health service provider.

Accepted decision outcomes

Type of relevant action	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	99	21.15	103	20.48	85	20.09	287	20.59
Local resolution	73	15.60	81	16.10	60	14.18	214	15.35
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	3	0.64	5	0.99	5	1.18	13	0.93
Referred to AHPRA and the national boards	144	30.77	199	39.56	168	39.72	511	36.66
Referred to another entity	149	31.84	115	22.86	105	24.82	369	26.47
Referred to Director of Proceedings	0	0.00	0	0.00	0	0.00	0	0.00
Total	468	100	503	100	423	100	1,394	100

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 where further relevant action was taken (noted in category 'Accepted and further relevant action taken' included the previous 'Decisions made' table).

Health service complaints profile

Main issues raised in complaints

Issue	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Access	144	10.83	145	9.45	130	10.92	419	10.49
Code of conduct for healthcare workers	12	0.90	16	1.04	21	1.76	49	1.23
Communication/information	160	12.03	179	11.66	140	11.75	419	10.49
Consent	28	2.11	33	2.15	44	3.69	105	2.63
Discharge/transfer arrangements	31	2.33	24	1.56	18	1.51	73	1.83
Environment/management of facilities	54	4.06	49	3.19	39	3.27	142	3.55
Fees/cost	36	2.71	53	3.45	28	2.35	117	2.93
Grievance processes	51	3.83	73	4.76	61	5.12	185	4.63
<i>Health Ombudsman Act 2013 offence</i>	1	0.08	0	0.00	1	0.08	2	0.05
Medical records	56	4.21	53	3.45	37	3.11	146	3.65
Medication	115	8.65	167	10.88	102	8.56	384	9.61
Professional conduct	157	11.80	191	12.44	143	12.01	491	12.29
Professional health	21	1.58	23	1.50	27	2.27	71	1.78
Professional performance	431	32.41	501	32.64	363	30.48	1,295	32.41
Reports/certificates	33	2.48	27	1.76	37	3.11	97	2.43
Research/teaching/assessment	0	0.00	1	0.07	0	0.00	1	0.03
Total	1,330	100.00	1,535	100.00	1,191	100.00	3,996	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.

Subcategories of professional performance issues raised in complaints

Issue	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Competence	13	3.02	23	4.59	12	3.31	48	3.71
Coordination of treatment	63	14.62	50	9.98	51	14.05	164	12.66
Delay in treatment	23	5.34	28	5.59	15	4.13	66	5.10
Diagnosis	26	6.03	39	7.78	35	9.64	100	7.72
Inadequate care	55	12.76	39	7.78	32	8.82	126	9.73
Inadequate consultation	46	10.67	56	11.18	25	6.89	127	9.81
Inadequate prosthetic equipment	4	0.93	3	0.60	5	1.38	12	0.93
Inadequate treatment	75	17.40	98	19.56	70	19.28	243	18.76
Infection control	5	1.16	8	1.60	5	1.38	18	1.39
No or inappropriate referral	8	1.86	19	3.79	21	5.79	48	3.71
Public or private election	0	0.00	0	0.00	0	0.00	0	0.00
Rough and painful treatment	12	2.78	7	1.40	12	3.31	31	2.39
Teamwork and supervision	6	1.39	5	1.00	3	0.83	14	1.08
Unexpected treatment outcome or complications	71	16.47	92	18.36	61	16.80	224	17.30
Withdrawal of treatment	7	1.62	15	2.99	1	0.28	23	1.78
Wrong or inappropriate treatment	17	3.94	19	3.79	15	4.13	51	3.94
Total	431	100.00	501	100.00	363	100.00	1,295	100.00

Professional performance represents the largest proportion of complaint issues. Additional information on this category of issue provides greater transparency around the issues being managed by OHO.

Profile of complaints about health practitioners

Practitioner type	Number of practitioners identified in complaints [*]	Number and type of issues ^{**} identified in complaints about health practitioners ^{**}																Total
		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	
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese medicine practitioner	5	-	2	-	-	-	-	-	-	-	-	-	1	-	2	-	-	5
Chiropractor	14	-	-	2	-	-	-	-	-	-	-	-	12	1	6	-	-	21
Dental practitioner	67	1	-	5	3	-	-	8	3	-	5	-	7	2	74	1	-	109
Medical practitioner	635	53	-	166	34	4	4	18	12	-	43	105	142	22	428	65	1	1097
Medical radiation practitioner	3	-	-	1	-	-	-	-	-	-	-	-	2	2	-	-	-	5
Midwife	6	-	-	-	-	2	-	-	-	-	-	-	4	-	4	-	-	10
Nurse	144	-	1	8	2	-	-	-	4	1	9	12	110	28	27	-	-	202
Occupational therapist	9	-	-	2	-	-	-	-	-	-	-	-	5	-	3	2	-	12
Optometrist	6	-	-	-	-	-	-	1	-	-	-	-	-	-	5	-	-	6
Osteopath	1	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	2
Paramedic	14	-	-	-	-	-	-	-	-	-	-	-	11	3	3	-	-	17
Pharmacist	31	-	-	5	-	-	-	-	1	-	-	16	18	2	3	-	-	45
Physiotherapist	11	-	-	-	-	-	-	-	-	-	-	-	6	-	8	-	-	14
Podiatrist	1	-	-	1	-	-	-	-	-	-	-	-	1	1	-	-	-	3
Psychologist	67	-	-	20	1	-	-	4	-	-	8	-	36	7	28	6	-	110
Student practitioner	3	-	-	-	-	-	-	-	-	-	-	-	3	1	-	-	-	4
Unknown practitioner	-	3	4	17	2	1	1	-	2	-	1	4	17	-	35	2	-	89
Unregistered practitioner	48	-	37	6	-	-	-	1	1	1	1	3	23	-	6	-	-	79
Total	1065	57	44	234	42	7	5	32	23	2	67	140	398	69	633	76	1	1830

^{*} The figures reported in this column are a count of the number of health practitioners identified in complaints during the reporting period. A single complaint may identify more than one health provider. In circumstances where a health practitioner is identified in relation to multiple complaints, the health practitioner would be counted per complaint.

^{**} This data is a count of the number of issues identified within the reporting period. A complaint may also identify more than one issue per health practitioner.

Profile of complaints about health service organisations

Organisation type	Number of facilities identified in complaints	Number and type of issues* identified in complaints about health service organisations																Total
		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	
Administrative service	2	-	-	1	-	-	1	-	-	-	-	-	-	-	-	1	-	3
Aged care facility	15	-	-	5	1	1	3	-	3	-	-	1	1	-	18	1	-	34
Allied health service	15	2	-	4	1	-	-	2	5	-	1	2	3	-	9	-	-	29
Ambulance service	7	1	-	3	-	-	-	-	2	-	-	1	1	-	5	-	-	13
Community health service	32	10	1	6	3	1	7	4	8	-	3	3	2	1	22	1	-	72
Correctional facility	16	132	-	21	-	-	16	-	-	-	3	143	-	-	92	1	-	408
Dental service	46	16	-	10	1	-	-	-	-	-	-	-	-	-	33	-	-	60
Health information service	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Health promotion service	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Hospital and Health Service	9	11	-	6	2	4	2	1	6	-	-	4	1	-	23	1	-	61
Laboratory service	11	2	-	3	-	-	3	4	3	-	-	-	1	-	1	1	-	18
Licensed day hospital	3	-	-	-	-	-	-	1	2	-	-	-	1	-	2	-	-	6
Licensed private hospital	32	7	-	14	-	7	11	12	9	-	4	7	6	-	28	-	-	105
Medical centre	193	72	1	45	6	-	32	22	22	-	37	17	15	-	43	4	-	316
Mental health service	47	7	-	15	21	8	4	1	3	-	4	20	12	1	40	1	-	137
Nursing service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Optical store	5	-	-	1	1	-	1	1	1	-	1	-	-	-	-	-	-	6
Other government department	9	1	-	1	-	-	10	-	-	-	1	-	1	-	1	1	-	16
Other support service	12	3	-	2	-	1	1	2	4	-	1	1	2	-	3	1	-	21
Parent Organisation	1	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	2
Paramedical service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmaceutical service	26	4	-	6	-	-	3	2	5	-	-	15	1	-	1	-	-	37
Private organisation	44	8	2	3	1	1	6	8	6	-	3	6	8	-	8	1	-	61
Public health service	13	6	-	2	1	-	4	2	2	-	3	3	2	-	8	-	-	33
Public hospital	52	71	-	86	22	42	27	5	64	-	14	20	34	-	308	7	-	700



Residential care service	5	1	1	2	1	-	2	-	4	-	-	-	-	-	2	-	-	13
Social work service	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Specialised health service	35	7	-	5	1	1	2	9	2	-	2	1	2	-	14	-	-	46
Welfare service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown organisation	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Total	634	362	5	245	63	66	135	76	151	0	77	244	93	2	662	21	0	2,202

*The figures reported in this column are a count of the number of health service organisations identified in complaints during the reporting period. A single complaint may identify more than one provider. In circumstances where a health service organisation is identified in multiple complaints, the organisation would be counted per complaint. For example, a health service organisation identified in three complaints would be counted three times in this column.

**This data is a count of the number of issues identified within the reporting period. A complaint may also identify more than one issue per health service organisation.

Assessment

Assessments started and completed

Assessments this quarter	October	November	December	Q2 total
Assessments started	104	115	90	309
Assessments completed	93	96	128	317

Completed assessment timeframes

As per s34 of the Health Transparency Bill 2019 (Assent: 05 December 2021), the timeframe for finalising assessment matters received from 6th December 2021 onwards has changed from 30 calendar days (or 60 calendar days with an approved extension) to 22 business days (or 44 business days with an approved extension).

Assessment timeframes	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Completed within 22 days					2	1.56	2	0.63
Completed within 30 days	36	38.71	34	35.42	41	32.03	111	35.02
Completed within 44 days*					0	0.00	0	0.00
Completed within 60 days*	53	56.99	58	60.42	78	60.94	189	59.62
Completed in more than 44 days					0	0.00	0	0.00
Completed in more than 60 days	4	4.30	4	4.17	7	5.47	15	4.73
Total	93	100.00	96	100.00	128	100.00	317	100.00

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

Assessment decisions

Type of relevant action	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	0	0.00	0	0.00	0	0.00	0	0.00
Conciliation	3	2.86	4	3.85	1	0.72	8	2.30
Investigation	8	7.62	11	10.58	10	7.19	29	8.33
Referred to AHPRA and the national boards	24	22.86	22	21.15	36	25.90	82	23.56
Referred to another entity	9	8.57	14	13.46	17	12.23	40	11.49
Director of Proceedings	0	0.00	0	0.00	0	0.00	0	0.00
No further action	61	58.10	53	50.96	75	53.96	189	54.31
Total	105	100.00	104	100.00	139	100.00	348	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	October	November	December	Q2 total
Local resolutions started	73	85	58	216
Local resolutions completed	57	75	85	217

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 resolutions

As per s35 of the Health Transparency Bill 2019 (Assent: 05 December 2021), the timeframe for finalising local resolution matters received from 6th December 2021 onwards has changed from 30 calendar days (or 60 calendar days with an approved extension) to 22 business days (or 44 business days with an approved extension).

Timeframes

Local resolution timeframe	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Completed within 22 days					8	9.41	8	3.69
Completed within 30 days	41	71.93	55	73.33	43	50.59	139	64.06
Completed within 44 days*					0	0.00	0	0.00
Completed within 60 days*	14	24.56	20	26.67	34	40.00	68	31.34
Completed in more than 44 days					0	0.00	0	0.00
Completed in more than 60 days	2	3.51	0	0.00	0	0.00	2	0.92
Total	57	100.00	75	100.00	85	100.00	217	100.00

*Local resolutions are able to be completed within 60 calendar days (or 44 business for matters received 06/12/2021 onwards) when granted an extension of 30 days (or 22 business days for matters received 06/12/2021 onwards) as a result of legislated requirements being met

Outcomes

Local resolution outcomes	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Resolved	28	49.12	34	45.33	48 ¹	56.47	110	50.69
Not resolved	26	45.61	30	40.00	33	38.82	89	41.01
Complaint withdrawn*	3	5.26	9	12.00	3	3.53	15	6.91
LR did not commence**	0	0.00	2	2.67	1	1.18	3	1.38
Total	57	100.0	75	100.0	85	100.0	217	100.00

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

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

¹ Two partially resolved cases in December's published reporting should have been picked up as resolved cases. These figures have been amended into this Q2 report section.

Decisions for matters that were not resolved

Type of relevant action	October		November		December		Q2 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	2	6.67	2	6.06	4	4.49
Referral to another entity	0	0.00	0	0.00	0	0.00	0	0.00
No further action	26	100.00	28	93.33	31	93.94	85	95.51
Total	26	100.00	30	100.00	33	100.00	89	100.00

Conciliation

Conciliations started and closed

Conciliations this quarter	October	November	December	Q2 total
Conciliations started	4	5	1	10
Conciliations closed	2	5	3	10

'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. 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 initially agreed to participate in the conciliation process.

Agreement to participate in conciliation

Agreement to participate	October	November	December	Q2 total
Parties agreed to participate	1	1	0	2
Party/ies did not agree to participate	1	3	1	5

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.

Completed conciliations

Timeframes

Conciliations completed	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	0	0.00	2	100.00	0	0.00	2	40.00
3–6 months	0	0.00	0	0.00	1	50.00	1	20.00
6–9 months	0	0.00	0	0.00	1	50.00	1	20.00
9–12 months	0	0.00	0	0.00	0	0.00	0	0.00
More than 12 months	1	100.00	0	0.00	0	0.00	1	20.00
Total	1	100.00	2	100.00	2	100.00	5	100.00

Outcomes

Conciliation outcomes	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Successful	1	100.00	2	100.00	2	100.00	5	100.00
Not successful	0	0.00	0	0.00	0	0.00	0	0.00
Ended by the Health Ombudsman	0	0.00	0	0.00	0	0.00	0	0.00
Parties withdrew prior to conciliation conference	0	0.00	0	0.00	0	0.00	0	0.00
Total	1	100.00	2	100.00	2	100.00	5	100.00

The data above relates to matters where parties initially agreed to participate in conciliation. After agreeing, the conciliation process was completed with the matter either being successful or not successful—or in some instances, the Health Ombudsman may end a conciliation or parties involved may withdraw from the process prior to conciliation occurring. 'Completed conciliations' differ from 'closed conciliations'—in the table on page 17—in that they only relate to matters where parties agreed to participate in conciliation.

Decisions for conciliations that were not successful

Type of relevant action	October		November		December		Q2 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
No further action	0	0.00	3	100.00	0	0.00	3	100.00
Total	0	0.00	3	100.00	0	0.00	3	100.00

Open conciliation timeframes

Conciliations open	October		November		December	
	Number	%	Number	%	Number	%
Less than 3 months	19	57.58	16	48.48	8	25.81
3–6 months	3	9.09	6	18.18	14	45.16
6–9 months	3	9.09	3	9.09	1	3.23
9–12 months	1	3.03	1	3.03	1	3.23
More than 12 months	7	21.21	7	21.21	7	22.58
Total	33	100.00	33	100.00	31	100.00

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

Investigation

Investigations started and closed

Investigations this quarter	October	November	December	Q2 total
Investigations started	11	28	17	56
Investigations closed	14	11	18	43
Investigations amalgamated under s40(2)	2	1	4	7
Investigations separated under s40(2)	0	0	0	0

Closed investigations

Timeframes

Closed investigation timeframes	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	3	21.43	1	9.09	3	16.67	7	16.28
3–6 months	2	14.29	1	9.09	3	16.67	6	13.95
6–9 months	1	7.14	1	9.09	5	27.78	7	16.28
9–12 months	1	7.14	2	18.18	1	5.56	4	9.30
12–18 months	1	7.14	1	9.09	3	16.67	5	11.63
18–24 months	3	21.43	3	27.27	2	11.11	8	18.60
More than 24 months	3	21.43	2	18.18	1	5.56	6	13.95
Total	14	100.00	11	100.00	18	100.00	43	100.00

Outcomes

Investigation outcomes	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings*	3	15.79	6	60.00	11	61.11	20	42.55
Recommend Health Ombudsman issue a Permanent Prohibition Order	3	15.79	3	30.00	1	5.56	7	14.89
Referred to AHPRA	3	15.79	0	0.00	0	0.00	3	6.38
Referred to another agency	1	5.26	0	0.00	5	27.78	6	12.77
No further action	9	47.37	1	10.00	1	5.56	11	23.40
Referred for conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Total	19	100.00	10	100.00	18	100.00	47	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	October		November		December	
	Number	%	Number	%	Number	%
Less than 3 months	24	27.59	37	36.63	38	40.43
3–6 months	20	22.99	17	16.83	19	20.21
6–9 months	18	20.69	23	22.77	14	14.89
9–12 months	9	10.34	7	6.93	10	10.64
12–24 months*	12	13.79	13	12.87	11	11.70
More than 24 months*	4	4.60	4	3.96	2	2.13
Total	87	100.00	101	100.00	94	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	October		November		December	
	Number	%	Number	%	Number	%
Less than 3 months	4	7.27	5	8.77	7	11.48
3–6 months	12	21.82	12	21.05	12	19.67
6–9 months	3	5.45	7	12.28	8	13.11
9–12 months	8	14.55	7	12.28	6	9.84
12–24 months	21	38.18	20	35.09	22	36.06
More than 24 months	7	12.73	6	10.53	6	9.84
Total	55	100.00	57	100.00	61	100.00

Total open investigation timeframes (active & paused)

Total open investigation timeframes	October		November		December	
	Number	%	Number	%	Number	%
Less than 3 months	28	19.72	42	26.58	45	29.22
3–6 months	32	22.54	29	18.35	31	20.13
6–9 months	21	14.79	30	18.99	22	14.29
9–12 months	17	11.97	14	8.86	15	9.74
12–24 months	33	23.24	33	20.89	33	21.43
More than 24 months	11	7.75	10	6.33	8	5.19
Total	142	100.00	158	100.00	154	100.00

Open investigation categories

Type of investigation	October	November	December
Health service complaint	77	87	86
Systemic issue	2	3	3
Ministerial directed investigation	0	0	0
Another matter*	59	64	61
Matters identified for further investigation**	4	4	4
Total	142	158	154

*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

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

OHO recommendations monitoring

OHO monitoring cases	October	November	December
Cases open at the beginning of the month	2	2	2
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	0	0	0

Open recommendations monitoring case timeframes

Monitoring case timeframes*	October		November		December	
	Number	%	Number	%	Number	%
Less than 6 months	0	0.00	0	0.00	0	0.00
6–12 months	0	0.00	0	0.00	0	0.00
More than 12 months	2	100.00	2	100.00	2	100.00
Total	2	100.00	2	100.00	2	100.00

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.

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.

Matters referred to the Director of Proceedings by practitioner type

Practitioner type	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Medical practitioner	2	66.67	2	33.33	3	27.27	7	35.00
Paramedic	0	0.00	1	16.67	2	18.18	3	15.00
Pharmacist	0	0.00	0	0.00	1	9.09	1	5.00
Registered nurse	1	33.33	3	50.00	5	45.45	9	45.00
Total	3	100.00	6	100.00	11	100.00	20	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 Investigation outcomes' figures elsewhere in this report.

Matters currently with the Director of Proceedings by practitioner type

These are matters that have been referred to the Director of Proceedings but have not been filed in QCAT or referred back to the Health Ombudsman. This includes matters where there has been a decision to refer the matter to QCAT, but no referral has been filed QCAT at this stage.

Practitioner type	Number	Percentage
Dentist	1	2.70
Medical Practitioner	23	62.16
Paramedic	3	8.11
Pharmacist	2	5.41
Registered Nurse	8	21.62
Total	37	100.00

Outcomes of matters reviewed by the Director of Proceedings

Matters filed in the Queensland Civil and Administrative Tribunal

Practitioner type	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Medical practitioner	2	100.00	1	25.00	0	0.00	3	33.33
Medical practitioner & Dentist	0	0.00	1	25.00	0	0.00	1	11.11
Registered nurse	0	0.00	2	50.00	3	100.00	5	55.56
Total	2	100.00	4	100.00	3	100.00	9	100.00

Matters referred back to Health Ombudsman

Practitioner type	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Medical practitioner	1	100.00	1	50.00	0	0.00	2	66.67
Pharmacist	0	0.00	1	50.00	0	0.00	1	33.33
Total	1	100.00	2	100.00	0	0.00	3	100.00

*From 1 March 2021, improvements to systems and processes mean that matters being referred to the Health Ombudsman are now counted based on the date of referral, rather than the date of the decision to refer.

Decisions on matters referred to the Queensland Civil and Administrative Tribunal

There have been 10 decisions made on matters referred to QCAT during the quarter.

Date of Decision	Matter	Details of QCAT decision
7 October 2021	<i>Health Ombudsman v Duggirala</i>	Professional misconduct Registration cancelled Disqualified from applying for registration indefinitely Permanently prohibited from providing any health service involving direct contact with any female patient or client
12 October 2021	<i>Health Ombudsman v Pennington</i>	Professional misconduct Unprofessional conduct Reprimand Disqualified from applying for registration for 12 months
27 October 2021	<i>Health Ombudsman v Choudhary</i>	Professional misconduct Reprimand Registration suspended for 6 months from 28 November 2021 Interim non-publication order discharged
28 October 2021	<i>Health Ombudsman v O'Reilly</i>	Professional misconduct Reprimand Registration suspended for 3 months from 6 November 2021
9 November 2021	<i>Health Ombudsman v McNeal</i>	Professional Misconduct Reprimand Disqualified for 12 months Each party bear their own costs
10 November 2021	<i>Health Ombudsman v Gindi</i>	Professional Misconduct Reprimand Conditions imposed on registration Review period of 5 years
19 November 2021	<i>Health Ombudsman v XHC</i>	Professional Misconduct Reprimand IRA taken on 31 January 2019 set aside Non-publication order re Respondent

Date of Decision	Matter	Details of QCAT decision
22 November 2021	<i>Health Ombudsman v OOD</i>	Professional Misconduct Reprimand Disqualified from applying for registration until 13 February 2022 Each party bear their own costs
29 November 2021	<i>Health Ombudsman v McDowell</i>	Professional Misconduct Reprimand Suspended for 6 months
1 December 2021	<i>Health Ombudsman v XPW</i>	Professional Misconduct Reprimand Disqualified from applying for registration for a period of 12 months
13 December 2021	<i>Health Ombudsman v HNH</i>	Professional Misconduct Reprimand Non-publication order relating to the Respondent

Decisions on immediate action reviews

There were no decisions on immediate action reviews handed down in the quarter.

QCAT disciplinary matters

Matters open in QCAT

Practitioner type	Number	Percentage
Chinese Medical Practitioner	2	2.1
Dentist	5	5.2
Medical Practitioner	37	38.1
Medical Practitioner and Dentist	3	3.1
Medical Oncologist	1	1.0
Osteopath	2	2.1
Paramedic	2	2.1
Pharmacist	4	4.1
Physiotherapist	2	2.1
Psychologist	5	5.2
Registered Nurse	31	32.0
Registered Nurse and Midwife	1	1.0
Total Registered	95	97.9
Massage Therapist	2	2.1
Total Unregistered	2	2.1
Total	97	100.0



Outcomes of QCAT disciplinary matters

QCAT decisions

Practitioner type	Number
Medical Practitioner	6
Psychologist	1
Registered Nurse	3
Registered Nurse and Midwife	1
Total QCAT Decisions	11

Matters withdrawn

Practitioner type	Number
Total matters withdrawn	0

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
- that action is in the public interest.

Show cause notices

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.

The Health Ombudsman issued thirteen show cause notices in the quarter.

Immediate registration actions

Practitioner type	Number	Action taken	Reason/s for taking action	
			Public Interest	Serious Risk
Nurse	1	Conditions	✓	✓
Nurse	1	Conditions		✓
Nurse	1	Conditions	✓	✓
Nurse	1	Suspension	✓	
Medical Practitioner	1	Conditions	✓	✓
Midwife	1	Conditions		✓
Pharmacist	1	Suspension	✓	

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

Interim prohibition orders

Practitioner type	Number	Action taken	Reason/s for taking action*	
			Public Interest	Serious Risk
Assistant in Nursing	1	Prohibition	✓	✓
Health Service Provider	1	Prohibition	✓	✓
Massage Therapist	1	Prohibition	✓	✓
Massage therapist	1	Prohibit	✓	
Massage therapist	1	Conditions	✓	✓
Massage therapist	1	Prohibit	✓	✓
Security guard	1	Prohibit		✓
Unregistered non-clinical support	1	Prohibit	✓	✓

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 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	October	November	December
Practitioner monitoring cases started	3	3	10
Practitioner monitoring cases closed	3	2	1

Open monitoring cases

Timeframes

Open case timeframes	October		November		December	
	Number	%	Number	%	Number	%
Less than 6 months	50	28.09	51	28.49	55	29.26
6–12 months	34	19.10	37	20.67	41	21.81
More than 12 months	94	52.81	91	50.84	92	48.93
Total	178	100.00	179	100.00	188	100.00

Immediate action types

Open cases by immediate action type	October		November		December	
	Number	%	Number	%	Number	%
Interim prohibition order – restrictions	26	15.38	25	13.97	26	13.83
Interim prohibition order – prohibited	31	18.34	30	16.76	33	17.55
Immediate registration action - conditions	52	30.77	51	28.49	53	28.19
Immediate registration action – suspension	19	11.24	22	12.29	24	12.77
QCAT disciplinary decision	28	16.57	31	17.32	31	16.49
QCAT interim decision	1	0.59	1	0.56	1	0.53
Permanent prohibition order	12	7.10	19	10.61	20	10.64
Total	178	100.00	179	100.00	188	100.00

Registered practitioners under monitoring by practitioner type

Open cases by practitioner type	Number	Percentage
Chinese medicine practitioner	5	6.67
Chiropractor	1	1.33
Dental practitioner	3	4.00
Medical practitioner	30	40.00
Nursing and midwifery practitioner	20	26.67
Osteopath	1	1.33
Paramedic	4	5.33
Pharmacist	2	2.67
Physiotherapist	4	5.33
Psychologist	5	6.67
Total	75	100.00

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

Unregistered practitioners under monitoring by type

Open cases by practitioner type	Number	Percentage
Aboriginal and Torres strait islander health worker	1	1.04
Aged care health worker	8	8.33
Assistant in nursing	13	13.54
Ayurvedic medicine practitioner	1	1.04
Cosmetic therapist	1	1.04
Counsellor	1	1.04
Disability support worker	1	1.04
Former registered health practitioner	17	17.71
Holding out*	3	3.13
Kinesiologist	2	2.08
Massage therapist	30	31.25
Medical assistant	3	3.13
Naturopath	1	1.04
Other health educator	2	2.08
Other health support worker	2	2.08
Other natural or alternative health care provider	2	2.08
Personal carer	3	3.13
Psychotherapists	1	1.04
Social worker	1	1.04
Unregistered paramedic**	2	2.08
Wardsperson	1	1.04
Total	95	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.

**On 1 December 2018 paramedicine became a regulated profession under the National Registration and Accreditation Scheme. The practitioners listed in this table were working as paramedics prior to the regulation of the profession and are therefore listed as unregistered.

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

Prior to a change in legislation in December 2021, the Health Ombudsman and Ahpra consulted on matters that were determined to be appropriate for referral to Ahpra for the Boards to manage.

The Health Transparency Bill 2019 (Assent: 05 December 2021), has changed the way the Health Ombudsman consults with Ahpra. From 6th December 2021 onwards, the Health Ombudsman and Ahpra must jointly consider all matters received involving registered health practitioners within 7 business days and decide what course of action to take. The consultation period is excluded from the 7 business day statutory timeframe. A matter can either be retained by the Health Ombudsman, referred to Ahpra or no further action taken.

If a matter is retained by the Health Ombudsman for further relevant action and at the end of the relevant action the decision is to take no further action on the complaint, Ahpra can decide to have the matter referred to them. This is known as subsequent joint consideration. (Refer to the Health Transparency Bill 2019 for more information on the joint consideration process.)

The following section of the report relates to matters that were **commenced** prior to the implementation of the new joint consideration process. These matters will also continue to be reported on in Quarter 3 as they progress through the pre-joint consideration process. It is anticipated that there will be a steady reduction of these matters into Quarter 4.

For the joint consideration process to commence, significant system changes were required which also included an upgrade on the existing case management system. Therefore, joint consideration matters commencing from 6 December 2021 will not be reported in Quarter 2 or 3 monthly reports but will be comprehensively reported on in Quarter 4 and the annual report.

Consultation on matters (matters commenced prior to 6 December 2021)

The office consulted with Ahpra on matters that were considered to be appropriate for Ahpra to manage. For matters that we were considering referring to Ahpra under section 91 of the Act, we provided Ahpra with all necessary information in order for Ahpra to form a view as to whether they needed to discuss or accept and progress the referral.

Consultation matters	October	November	December	Q2 total
Matters consulted on*	206	237	156	599
Matters referred	203	233	156	592
Matters retained by the office**	3	4	0	7
Decision pending	33	37	0	70

*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	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Intake and triage	169	82.04	204	86.08	107	68.15	480	80.00
Assessment	33	16.02	31	13.08	49	31.21	113	18.83
Local resolution	1	0.49	2	0.84	1	0.64	4	0.67
Investigation	3	1.46	0	0.00	0	0.00	3	0.50
Total	206	100.00	237	100.00	157	100.00	600	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	433	22	23	2	0
Assessment	2	6	36	49	19
Local resolution	0	0	1	3	0
Investigation	2	0	0	0	1
Total	437	28	60	54	20

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

Consultation duration

Consultation duration	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
0–3 days	124	60.19	185	78.06	132	84.62	441	73.62
4–7 days	36	17.48	21	8.86	0	0.00	57	9.52
8–11 days	2	0.97	0	0.00	2	1.28	4	0.67
More than 12 days	44	21.36	31	13.08	22	14.10	97	16.19
Total	206	100.00	237	100.00	156	100.00	599	100.00

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	October		November		December		Q2 total	
	Number	%	Number	%	Number	%	Number	%
Aboriginal and Torres Strait Islander health practitioner	0	0.00	1	0.42	1	0.53	2	0.32
Chinese medicine practitioner	1	0.49	4	1.69	2	1.07	7	1.12
Chiropractor	1	0.49	1	0.42	3	1.60	5	0.80
Dental practitioner	14	6.86	14	5.93	6	3.21	34	5.42
Medical practitioner	106	51.96	132	55.93	94	50.27	332	52.95
Medical radiation practitioner	1	0.49	3	1.27	0	0.00	4	0.64
Nursing and midwifery practitioner	48	23.53	46	19.49	54	28.88	148	23.60
Occupational therapist	1	0.49	2	0.85	2	1.07	5	0.80
Optometrist	3	1.47	0	0.00	0	0.00	3	0.48
Osteopath	0	0.00	1	0.42	1	0.53	2	0.32
Paramedic	7	3.43	5	2.12	2	1.07	14	2.23
Pharmacist	4	1.96	12	5.08	11	5.88	27	4.31
Physiotherapist	3	1.47	1	0.42	0	0.00	4	0.64
Podiatrist	0	0.00	0	0.00	1	0.53	1	0.16
Psychologist	12	5.88	14	5.93	8	4.28	34	5.42
Student practitioner	3	1.47	0	0.00	1	0.53	4	0.64
Unknown practitioner	0	0.00	0	0.00	1	0.53	1	0.16
Total	204	100.00	236	100.00	187	100.00	627	100.00

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	-	-	-	-	-	-	-	-	-	4	-	1	-	5
Chinese medicine practitioner	-	-	-	-	-	-	-	-	-	-	-	2	-	2
Chiropractor	-	-	-	-	-	-	-	-	-	3	1	2	-	6
Dental practitioner	-	3	4	-	-	1	3	1	-	4	3	41	-	60
Medical practitioner	6	55	17	6	3	9	6	19	62	84	16	251	16	550
Medical radiation practitioner	-	1	-	-	-	-	-	-	-	3	1	-	-	5
Nursing and midwifery practitioner	-	7	4	-	-	-	2	11	13	100	30	31	-	198
Occupational therapy	-	1	-	-	-	-	-	-	-	2	1	3	1	8
Optometrist	-	-	-	-	-	-	-	-	-	-	-	3	-	3
Osteopath	-	1	-	-	-	-	-	-	-	-	-	1	-	2
Paramedic	-	-	-	-	-	-	-	-	-	8	4	3	-	15
Pharmacist	-	2	-	-	-	-	-	-	12	10	2	1	-	27
Physiotherapist	-	-	-	-	-	-	-	-	-	2	-	2	-	4
Podiatrist	-	1	-	-	-	-	-	-	-	1	1	-	-	3
Psychologist	-	9	-	-	-	1	-	4	-	23	6	21	-	64
Student practitioner	-	-	-	-	-	-	-	-	-	4	2	-	-	6
Unknown practitioner	-	-	-	-	-	-	-	-	1	-	-	1	-	2
Total	6	80	25	6	3	11	11	35	88	248	67	363	17	960

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 of healthcare consumers

Gender of healthcare consumers

Gender	Number	Percentage
Female	1328	49.78
Male	1227	45.99
Prefer not to specify	65	2.44
Unknown	48	1.80
Total	2,668	100.00

Age of healthcare consumers

Age	Number	Percentage
Less than 18 years	160	6.00
18–24 years	129	4.84
25–34 years	493	18.48
35–44 years	569	21.33
45–54 years	444	16.64
55–64 years	330	12.37
65–74 years	186	6.97
More than 75 years	177	6.63
Unknown*	180	6.75
Total	2,668	100.00

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

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	1,132	42.43
Central West	4	0.15
Darling Downs	96	3.60
Far North	124	4.65
Fitzroy	106	3.97
Gold Coast	278	10.42
Mackay	47	1.76
North West	11	0.41
Northern	121	4.54
South West	5	0.19
Sunshine Coast	140	5.25
West Moreton	82	3.07
Wide Bay-Burnett	154	5.77
Outside Queensland	253	9.48
Unknown	115	4.31
Total	2,668	100.00

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	1,366	48.29
Central West	2	0.07
Darling Downs	84	2.97
Far North	145	5.13
Fitzroy	86	3.04
Gold Coast	304	10.75
Mackay	58	2.05
North West	6	0.21
Northern	123	4.35
South West	26	0.92
Sunshine Coast	7	0.25
West Moreton	165	5.83
Wide Bay-Burnett	38	1.34
Outside Queensland*	157	5.55
Unknown	262	9.26
Total	2,829	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.