

Quarterly performance report

Quarter three 2017–18



Quarterly performance report—Quarter three 2017–18

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For more information contact:

Office of the Health Ombudsman, PO Box 13281 George Street, Brisbane Qld 4003, email communications@oho.qld.gov.au.

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Introduction

This document reports on the quarter three (Q3) 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 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 11 April 2018, though figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

Performance overview

The office continues to see rising numbers of contacts with 3197 received during the quarter—that is 15.54 per cent more than Q3 2016-17 and 25.23 per cent more than Q3 2015–16. Of these contacts 1857 were classified as complaints which is 17.90 per cent more than Q3 2016-17 and 25.73 per cent more than in Q3 2015-16.

Notwithstanding this increase in workload, a number of indicators demonstrate improved performance by the OHO during the third quarter including:

- 93.15 per cent of the 1678 intake decisions made were completed within seven days, representing the highest rate of achievement since the office's inception. This is compared to 90.48 per cent achieved in Q3 2016-17 (1324 decisions) and 54.05 per cent in Q3 2015-16 (1310 decisions).
- 70.04 percent of the 464 assessments decisions made in Q3 were completed within legislative timeframes, compared to 68.08 percent (611 assessments) and 35.57 per cent (388 assessments) within the same periods in 2016-17 and 2015-16 respectively.
- 92.46 per cent of the 345 local resolutions finalised in Q3 were completed within legislative timeframes, compared to 93.01 per cent (229 local resolutions) 83.33 per cent (305 local resolutions) within the same periods in 2016-17 and 2015-16 respectively.
- 86 investigations were closed in Q3, compared to 55 and 16 within the same periods in 2016-17 and 2015-16 respectively.
- As at the close of Q3 there were 201 fewer open investigations compared with same time last year (195 compared to 396 at the close of Q3 2016-17)—due to improved business processes and amalgamations under s40(2) of the Act.
- As at the close of Q3 there were 64 fewer investigations aged between one and two years compared to the same time last year (52 compared to 116). At the close of Q3 there were also 18 fewer investigations aged greater than two years (22 compared to 40).
- 14 matters were filed in QCAT in Q3, 2 more than the 12 matters filed in the entire 2016-17 performance year.

Intake of complaints

Type of contacts

Type of contact	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Complaint	652	60.99	601	59.39	604	54.12	1857	58.09
Enquiry	417	39.01	411	40.61	512	45.88	1340	41.91
Yet to be classified	0	0.00	0	0.00	0	0.00	0	0.00
Total	1069	100.00	1012	100.00	1116	100.00	3197	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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	578	88.65	528	87.85	526	87.09	1632	87.88
Mandatory notification*	12	1.84	11	1.83	9	1.49	32	1.72
Voluntary notification*	54	8.28	52	8.65	61	10.09	167	8.99
Self-notification*	5	0.77	8	1.33	4	0.66	17	0.92
Referral from another agency	3	0.46	2	0.33	4	0.66	9	0.48
Total	652	100.00	601	100.00	604	100.00	1857	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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Yes	510	95.33	542	92.65	511	91.58	1563	93.15
No	25	4.67	43	7.35	47	8.42	115	6.85
Total	535	100.00	585	100.00	558	100.00	1678	100.00

Accepted vs not accepted

Number of decisions made	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Accepted	364	64.42	400	66.01	374	63.61	1138	66.63
Not accepted	171	30.27	185	30.53	184	31.29	540	31.62
Decision pending	30	5.31	21	3.47	30	5.10	30	1.76
Total	565	100.00	606	100.00	588	100.00	1708	100.00

'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).

'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 66 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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	113	29.89	175	40.89	158	40.93	446	37.42
Local resolution	126	33.33	107	25.00	75	19.43	308	25.84
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Investigation	7	1.85	10	2.34	7	1.81	24	2.01
Referred to AHPRA and the national boards	132	34.92	136	31.78	146	37.82	414	34.73
Referred to another entity	0	0.00	0	0.00	0	0.00	0	0.00
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
Total	378	100.00	428	100.00	386	100.00	1192	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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Access	88	8.84	75	7.95	60	6.34	223	7.73
Code of conduct for healthcare workers	31	3.11	7	0.74	27	2.85	65	2.25
Communication/information	137	13.76	109	11.56	116	12.25	362	12.54
Consent	11	1.10	15	1.59	18	1.90	44	1.52
Discharge/transfer arrangements	18	1.81	20	2.12	15	1.58	53	1.84
Environment/management of facilities	20	2.01	19	2.01	19	2.01	58	2.01
Fees/cost	29	2.91	22	2.33	26	2.75	77	2.67
Grievance processes	15	1.51	18	1.91	21	2.22	54	1.87
<i>Health Ombudsman Act 2013 offence</i>	0	0.00	1	0.11	0	0.00	1	0.03
Medical records	39	3.92	32	3.39	38	4.01	109	3.78
Medication	91	9.14	117	12.41	120	12.67	328	11.37
Professional conduct	102	10.24	78	8.27	85	8.98	265	9.18
Professional health	20	2.01	21	2.23	35	3.70	76	2.63
Professional performance	380	38.15	391	41.46	349	36.85	1120	38.81
Reports/certificates	15	1.51	17	1.80	18	1.90	50	1.73
Research/teaching/assessment	0	0.00	1	0.11	0	0.00	1	0.03
Total	996	100.00	943	100.00	947	100.00	2886	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	-	36	-	-	-	-	-	1	-	-	-	5	-	1	-	-	43
Chinese medicine	-	1	1	-	-	-	-	-	-	-	1	2	-	2	-	-	7
Chiropractor	-	-	1	1	-	1	-	-	-	2	-	3	-	4	-	-	12
Dentistry	1	-	2	3	1	-	5	-	-	4	-	16	2	61	-	-	95
Emergency care	-	1	-	-	-	-	-	-	-	-	-	1	2	7	-	-	11
General medical	24	1	90	9	2	-	6	4	-	29	71	64	17	232	14	1	564
Medical radiation	-	-	-	-	-	-	-	-	-	-	-	3	-	-	2	-	5
Medical specialty	2	1	20	2	-	-	4	2	-	6	9	13	4	58	8	-	129
Nursing	2	5	6	1	-	-	-	-	-	4	9	44	33	37	-	-	141
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	3	-	3	3	-	9
Optometry	-	-	-	-	-	-	-	-	-	-	-	1	-	5	1	-	7
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2
Other	2	16	5	-	-	-	1	-	1	4	5	28	8	25	1	-	96
Pathology service	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Pharmacy	1	-	2	-	-	-	-	-	-	-	29	9	1	1	-	-	43
Physiotherapy	-	-	2	-	-	-	1	-	-	-	-	4	1	3	-	-	11
Podiatry	-	-	1	-	-	-	-	-	-	-	-	2	2	3	-	-	8
Psychology	-	-	5	2	-	-	1	-	-	4	2	15	5	7	7	-	48
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Surgical	-	-	7	6	-	-	3	1	-	2	-	3	1	56	-	-	79
Total	32	61	142	24	3	1	21	8	1	55	126	217	76	508	36	1	1312

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	-	-	6	-	1	5	-	1	-	4	5	-	-	23	-	-	45
Allied health service	1	-	-	-	-	1	-	-	-	-	-	-	-	2	-	-	4
Ambulance service	-	1	1	-	-	-	-	1	-	1	-	-	-	3	-	-	7
Community health service	4	-	6	-	-	1	1	2	-	1	1	2	-	10	2	-	30
Correctional facility	94	-	14	-	-	3	-	1	-	4	133	2	-	109	-	-	360
Dental service	4	-	10	-	-	-	10	2	-	1	-	-	-	22	-	-	49
Hospital and Health Service	2	-	2	-	-	2	-	-	-	-	1	-	-	8	-	-	15
Laboratory service	-	-	1	-	-	-	3	1	-	1	-	-	-	4	1	-	11
Licensed private hospital	1	-	13	2	2	4	5	2	-	-	7	3	-	27	1	-	67
Medical centre	24	-	32	-	-	5	14	5	-	19	6	9	-	19	2	-	135
Mental health service	6	-	11	6	4	2	-	1	-	2	5	8	-	28	1	-	74
Nursing service	-	-	-	-	-	2	1	1	-	-	-	-	-	-	-	-	4
Other government department	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Other support service	2	-	2	-	-	1	-	1	-	1	2	-	-	2	1	-	12
Pharmaceutical service	1	-	5	1	-	6	4	4	-	-	20	2	-	3	-	-	46
Private organisation	-	3	1	-	-	2	4	-	-	2	-	1	-	8	-	-	21
Public health service	3	-	3	-	1	3	-	-	-	-	2	1	-	5	-	-	18
Public hospital	47	-	103	10	42	20	8	21	-	17	18	17	-	327	3	-	633
Specialised health service	2	-	5	1	-	-	4	3	-	1	2	3	-	10	1	-	32
Health information service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Licensed private hospital	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Optical store	-	-	-	-	-	-	2	-	-	-	-	-	-	-	2	-	4
Paramedical service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Social work service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Welfare service	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Total	191	4	220	20	50	57	56	46	0	54	202	48	0	612	14	0	1574

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	January	February	March	Q3 total
Assessments started	127	188	178	493
Assessments completed	135	140	189	464

Completed assessment timeframes

Assessment timeframes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Within legislative timeframes*	91	67.41	91	65.00	143	75.66	325	70.04
Outside legislative timeframes	44	32.59	49	35.00	46	24.34	139	29.96
Total	135	100.00	140	100.00	189	100.00	464	100.00

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

Assessment decisions

Type of relevant action	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	1	0.65	0	0.00	2	0.96	3	0.58
Conciliation	8	5.23	7	4.49	5	2.39	20	3.86
Investigation	10	6.54	4	2.56	13	6.22	27	5.21
Referred to AHPRA and the national boards	12	7.84	15	9.62	26	12.44	53	10.23
Referred to another entity	48	31.37	44	28.21	71	33.97	163	31.47
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	74	48.37	86	55.13	92	44.02	252	48.65
Total	153	100.00	156	100.00	209	100.00	518	100.00

Total assessment decisions will not equal the total number of assessments (in previous tables), as a single assessment can result in multiple relevant actions.

The figures for the type of relevant action decided in the assessment stage may not correspond with totals for respective relevant actions (e.g. local resolution, conciliation, investigation) due to the time between a decision being made and an action 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	January	February	March	Q3 total
Local resolutions started	133	115	80	328
Local resolutions completed	85	136	124	345

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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Within legislative timeframes*	72	84.71	129	94.85	118	94.16	319	92.46
Outside legislative timeframes	13	15.29	7	5.15	6	4.84	26	7.54
Total	85	100.00	136	100.00	124	100.00	345	100.00

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

Outcomes

Local resolution outcomes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Resolution reached	68	80.00	112	82.35	106	85.48	286	82.90
No resolution reached	12	14.12	14	10.29	7	5.65	33	9.57
Complaint withdrawn*	3	3.53	6	4.41	10	8.06	19	5.51
Local resolution did not commence**	2	2.35	4	2.94	1	0.81	7	2.03
Total	85	100.00	136	100.00	124	100.00	345	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. Prior to October 2017, these matters were classified as 'Complaint withdrawn'.

Decisions for matters that were not resolved

Type of relevant action	January		February		March		Q3 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	1	8.33	3	21.43	1	14.29	5	15.15
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	11	91.67	11	78.57	6	85.71	28	84.85
Total	12	100.00	14	100.00	7	100.00	33	100.00

Conciliation

Conciliations started and closed

Conciliations this quarter	January	February	March	Q3 total
Conciliations started	11	7	3	21
Conciliations closed	9	4	7	20

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	January	February	March	Q3 total
Parties agreed to participate	2	4	6	12
Party/ies did not agree to participate	4	1	2	7
Decisions pending at close of the period	18	25	19	19

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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	0	0.00	0	0.00	0	0.00	0	0.00
3–6 months	1	20.00	2	66.67	1	20.00	4	30.77
6–9 months	2	40.00	1	33.33	1	20.00	4	30.77
9–12 months	1	20.00	0	0.00	1	20.00	2	15.38
More than 12 months	1	20.00	0	0.00	2	40.00	3	23.08
Total	5	100.00	3	100.00	5	100.00	13	100.00

Outcomes

Conciliation outcomes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Successful	5	100.00	1	33.33	4	80.00	10	76.92
Not successful	0	0.00	2	66.67	1	20.00	3	23.08
Ended by the Health Ombudsman	0	0.00	0	0.00	0	0.00	0	0.00
Total	5	100.00	3	100.00	5	100.00	13	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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	0	0.00	0	0.00	0	0.00	0	0
Investigation	0	0.00	0	0.00	0	0.00	0	0
Referred to AHPRA and the national boards	0	0.00	0	0.00	0	0.00	0	0
Referred to another entity	0	0.00	0	0.00	0	0.00	0	0
Immediate action	0	0.00	0	0.00	0	0.00	0	0
No further action	0	0.00	2	100.00	1	100.00	3	100.00
Total	0	0.00	2	100.00	1	100.00	3	100.00

Open conciliation timeframes

Conciliations open	January		February		March	
	Number	%	Number	%	Number	%
Less than 3 months	19	38.78	21	40.38	20	41.67
3–6 months	12	24.49	13	25.00	8	16.67
6–9 months	9	18.37	5	9.62	8	16.67
9–12 months	4	8.16	6	11.54	6	12.50
More than 12 months	5	10.20	7	13.46	6	12.50
Total	49	100.00	52	100.00	48	100.00

As at 31 March 2018 there were 16 matters on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). This includes 8 matters that have been open for less than 3 months, 3 that have been open for 3–6 months, 2 that have been open for 6 – 9 months, 2 that have been open for 9–12 months, and 4 that have been open for more than 12 months.

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

Investigation

Investigations started and closed

Investigations this quarter	January	February	March	Q3 total
Investigations started	18	18	17	53
Investigations closed	21	24	41	86
Investigations amalgamated under s40(2)	1	0	0	1

*In March 2018 two (2) matters that were previously amalgamated under s40(2) of the act were separated again into individual investigations.

Closed investigations

Timeframes

Closed investigation timeframes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	1	4.76	9	37.50	5	12.20	15	17.44
3–6 months	4	19.05	3	12.50	3	7.32	10	11.63
6–9 months	1	4.76	2	8.33	3	7.32	6	6.98
9–12 months	2	9.52	2	8.33	2	4.88	6	6.98
12–24 months	6	28.57	6	25.00	19	46.34	31	36.05
More than 24 months	7	33.33	2	8.33	9	21.95	18	20.93
Total	21	100.00	24	100.00	41	100.00	86	100.00

Outcomes

Closed investigation outcomes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings*	16	72.73	13	52.00	26	63.41	55	62.50
Referred to AHPRA	1	4.55	8	32.00	3	7.32	12	13.64
Referred to another agency	0	0.00	0	0.00	1	2.44	1	1.14
No further action	5	22.73	4	16.00	11	26.83	20	22.73
Referred to Executive Director, Legal Services**	0	0.00	0	0.00	0	0.00	0	0.00
Total	22	100.00	25	100.00	41	100.00	88	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.

**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	January		February		March	
	Number	%	Number	%	Number	%
Less than 3 months	43	22.75	42	23.33	37	23.72
3–6 months	26	13.76	25	13.89	31	19.87
6–9 months	19	10.05	15	8.33	13	8.33
9–12 months	19	10.05	19	10.56	15	9.62
12–24 months*	58	30.69	56	31.11	43	27.56
More than 24 months*	24	12.70	23	12.78	17	10.90
Total	189	100.00	180	100.00	156	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	January		February		March	
	Number	%	Number	%	Number	%
Less than 3 months	6	17.65	6	16.22	4	10.26
3–6 months	5	14.71	9	24.32	7	17.95
6–9 months	7	20.59	6	16.22	8	20.51
9–12 months	2	5.88	2	5.41	6	15.38
12–24 months	9	26.47	9	24.32	9	23.08
More than 24 months	5	14.71	5	13.51	5	12.82
Total	34	100.00	37	100.00	39	100.00

Open investigation timeframes

Total open investigation timeframes	January		February		March	
	Number	%	Number	%	Number	%
Less than 3 months	49	21.97	48	22.12	41	21.03
3–6 months	31	13.90	34	15.67	38	19.49
6–9 months	26	11.66	21	9.68	21	10.77
9–12 months	21	9.42	21	9.68	21	10.77
12–24 months	67	30.04	65	29.95	52	26.67
More than 24 months	29	13.00	28	12.90	22	11.28
Total	223	100.00	217	100.00	195	100.00

Open investigation categories

Type of investigation	January	February	March
Health service complaint	148	137	120
Systemic issue	24	24	22
Another matter*	49	55	52
Matters identified for further investigation**	2	1	1
Total	223	217	195

*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	January	February	March
Cases open at the beginning of the month	4	4	4
Recommendations monitoring cases started	0	1	1
Recommendations monitoring cases closed	0	1	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	January	February	March
Cases open at the beginning of the month	2	2	1
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	0	1	1

Open recommendations monitoring case timeframes

Monitoring case timeframes*	January		February		March	
	Number	%	Number	%	Number	%
Less than 6 months	0	0.00	1	20.00	2	40.00
6–12 months	2	33.33	1	20.00	0	0.00
More than 12 months	4	66.67	3	60.00	3	60.00
Total	6	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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Advance care paramedic	0	0.00	0	0.00	1	3.85	1	1.82
Audiologist	2	12.50	0	0.00	0	0.00	2	3.64
Assistant in nursing	0	0.00	0	0.00	1	3.85	1	1.82
Chinese medicine practitioner	1	6.25	0	0.00	0	0.00	1	1.82
Chiropractor	0	0.00	0	0.00	0	0.00	0	0.00
Dentist	0	0.00	1	7.69	0	0.00	1	1.82
Former chiropractor	0	0.00	0	0.00	0	0.00	0	0.00
Holding out as a psychologist	0	0.00	0	0.00	1	3.85	1	1.82
Massage therapist	2	12.50	0	0.00	1	3.85	3	5.45
Medical practitioner	2	12.50	5	38.46	3	11.54	10	18.18
Medical radiation practitioner	0	0.00	0	0.00	1	3.85	1	1.82
Natural therapist	0	0.00	1	7.69	0	0.00	1	1.82
Optometrist	0	0.00	1	7.69	0	0.00	1	1.82
Pharmacist	1	6.25	1	7.69	1	3.85	3	5.45
Podiatrist	1	6.25	0	0.00	0	0.00	1	1.82

Practitioner type	January		February		March		Q3 total	
Psychologist	0	0.00	0	0.00	1	3.85	1	1.82
Physiotherapist	1	6.25	0	0.00	2	7.69	3	5.45
Registered nurse	6	37.50	4	30.77	12	46.15	22	40.00
Social worker	0	0.00	0	0.00	1	3.85	1	1.82
Student nurse	0	0.00	0	0.00	1	3.85	1	1.82
Total	16	100.00	13	100.00	26	100.00	55	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
Advanced care paramedic	3	1.92
Assistant in nursing	2	1.28
Audiologist	2	1.28
Chinese medical practitioner	2	1.28
Chiropractor	1	0.64
Dentist	6	3.85
Former chiropractor	1	0.64
Holding out as registered nurse	1	0.64
Holding out as psychologist	1	0.64
Massage therapist	9	5.77
Medical practitioner	45	28.85
Medical radiation practitioner	2	1.28
Natural therapist	1	0.64
Optometrist	1	0.64
Pharmacist	12	7.69
Physiotherapist	2	1.28
Podiatrist	2	1.28
Psychologist	9	5.77
Registered Nurse	52	33.33
Social worker	1	0.64
Student nurse	1	0.64
Total	156	100.00

*One practitioner held dual registration as a nurse and a midwife.

Decisions made by the Director of Proceedings

Matters to be referred to the Queensland Civil and Administrative Tribunal

Practitioner type	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Physiotherapist	0	0.00	0	0.00	2	50.00	2	15.38
Pharmacist	0	0.00	1	16.67	0	0.00	1	7.69
Registered Nurse	3	100.00	4	66.67	1	25.00	8	61.54
Registered Nurse and Midwife	0	0.00	0	0.00	1	25.00	1	7.69
Student Nurse	0	0.00	1	16.67	0	0.00	1	7.69
Total	3	100.00	6	100.00	4	100.00	13	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.

*One provider held dual registration as a midwife.

Matters to be referred back to Health Ombudsman

Practitioner type	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Medical Practitioner	0	0.00	0	0.00	1	100.00	1	33.33
Holding out as a registered nurse	1	50.00	0	0.00	0	0.00	1	33.33
Registered nurse	1	50.00	0	0.00	0	0.00	1	33.33
Total	2	100.00	0	0.00	1	100.00	3	100.00

Disciplinary Matters filed in QCAT

Practitioner type	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Medical practitioner	1	25.00	1	14.29	0	0.00	2	14.29
Pharmacist	0	0.00	1	14.29	0	0.00	1	7.14
Physiotherapist	0	0.00	0	0.00	1*	33.33	1*	7.14
Registered nurse	3	75.00	3	42.86	1	33.33	7	50.00
Registered nurse and midwife	0	0.00	1	14.29	1	33.33	2	14.29
Student nurse	0	0.00	1	14.29	0	0.00	1	7.14
Total	4	100.00	7	100.00	3	100.00	14	100.00

*During March the Director of Proceedings made the decision to refer two separate matters regarding the same practitioner to QCAT. These two matters were filed together as one referral to QCAT.

Decisions on matters referred to the Queensland Civil and Administrative Tribunal

There were no new decisions, relating to referred matters, handed down by QCAT during the quarter.

Decisions on immediate action reviews

QCAT made no new decisions regarding immediate action reviews during the quarter.

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 14 show cause notices issued during the quarter.

- two assistants in nursing for reasons relating to conduct
- one enrolled nurse for reasons relating to conduct
- one enrolled nurse for reasons relating to conduct and health
- one massage therapist for reasons relating to conduct
- one osteopath for reasons relating to conduct.
- one paramedic for reasons relating to conduct
- one personal carer for reasons relating to performance
- three registered nurses for reasons relating to conduct
- one registered nurse for reasons relating to conduct, performance and health
- one registered nurse for reasons relating to conduct and performance
- one unregistered physiotherapist 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
Chinese medicine practitioner	1	Conditions			✓
Enrolled nurse	1	Conditions		✓	
Enrolled nurse	1	Suspension		✓	
Medical practitioner	1	Conditions		✓	
Registered nurse	2	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
Assistant in nursing	2	Prohibition		✓		
Counsellor	1	Prohibition		✓		
Enrolled nurse	1	Prohibition		✓		
Massage therapist	2	Prohibition		✓		
Massage therapist	1	Restrictions		✓		
Unregistered nurse	1	Prohibition		✓		

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

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

The details for current prohibition orders can be found on the 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	January	February	March
Cases open at the beginning of the month	100	101	104
Practitioner monitoring cases started	3	6	4
Practitioner monitoring cases closed	3	3	9

Open monitoring cases

Timeframes

Open case timeframes	January		February		March	
	Number	%	Number	%	Number	%
Less than 6 months	17	17.00	23	22.12	25	25.25
6–12 months	24	24.00	20	19.23	13	13.13
More than 12 months	59	59.00	61	58.65	61	61.62
Total	100	100.00	104	100.00	99	100.00

Immediate action types

Open cases by immediate action type	January		February		March	
	Number	%	Number	%	Number	%
Interim prohibition order—restrictions	22	22.00	22	21.15	18	18.18
Interim prohibition order—prohibited	32	32.00	34	32.69	37	37.37
Immediate registration action—conditions	27	27.00	30	28.85	27	27.27
Immediate registration action—suspension	19	19.00	18	17.31	17	17.17
Total	100	100	104	100.00	99	100.00

* As at 31 December 2017 ten practitioners were under monitoring in relation to both an immediate registration action and an interim prohibition order.

Registered practitioners under monitoring by practitioner type

Open cases by practitioner type	Number	Percentage
Aboriginal and Torres Strait Islander health worker	0	0.00
Chinese medicine practitioner	3	5.45
Chiropractor	1	1.82
Dental practitioner	3	5.45
Medical practitioner	9	16.36
Medical radiation practitioner	0	0.00
Nursing and midwifery practitioner	34	61.82
Occupational therapy	0	0.00
Optometrist	0	0.00
Osteopath	0	0.00
Pharmacist	0	0.00
Physiotherapist	2	3.64
Podiatrist	0	0.00
Psychologist	3	5.45
Total	55	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	2.63
Assistant in nursing	7	18.42
Audiologist	2	5.26
Counsellor	1	2.63
Dental assistant	1	2.63
Dental nurse	1	2.63
Former nurse	1	2.63
Holding out*	3	7.89
Massage therapist	13	34.21
Medical assistant	1	2.63
Naturopath	1	2.63
Natural therapist	1	2.63
Paramedic	3	7.89
Personal carer	1	2.63
Social worker	1	2.63
Total	38	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 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. 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	January	February	March	Q3 total
Matters consulted on*	152	182	208	542
Matters referred	173	171	195	539
Matters retained by the office**	6	3	4	13
Decisions pending	6	33	22	22

*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	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Intake and triage	128	84.21	131	71.98	149	71.63	408	75.28
Assessment	18	11.84	37	20.33	47	22.60	102	18.82
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Local resolution	3	1.97	4	2.20	1	0.48	8	1.48
Investigation	1	0.66	10	5.49	6	2.88	17	3.14
Internal review	2	1.32	0	0.00	5	2.40	7	1.29
Total	152	100.00	182	100.00	208	100.00	542	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	408	0	0	0	0
Assessment	7	9	22	30	34
Local resolution	0	2	2	4	0
Conciliation	0	0	0	0	0
Investigation	0	0	0	0	17
Internal review	0	0	0	0	7
Total	415	11	24	34	58

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

Consultation duration

Consultation duration	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
0–3 days	131	86.18	146	80.22	190	91.35	467	86.16
4–7 days	21	13.82	30	16.48	14	6.73	65	11.99
8–11 days	0	0.00	6	3.30	4	1.92	10	1.85
More than 12 days	0	0.00	0	0.00	0	0.00	0	0.00
Total	152	100.00	182	100.00	208	100.00	542	100.00

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	January		February		March		Q3 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	2	1.16	1	0.58	2	1.03	5	0.93
Chiropractor	2	1.16	1	0.58	0	0.00	3	0.56
Dental practitioner	15	8.67	20	11.70	15	7.69	50	9.28
Medical practitioner	98	56.65	91	53.22	112	57.44	301	55.84
Medical radiation practitioner	0	0.00	0	0.00	0	0.00	0	0.00
Nursing and midwifery practitioner	35	20.23	37	21.64	47	24.10	119	22.08
Occupational therapist	4	2.31	1	0.58	0	0.00	5	0.93
Optometrist	0	0.00	1	0.58	3	1.54	4	0.74
Osteopath	0	0.00	0	0.00	0	0.00	0	0.00
Pharmacist	7	4.05	10	5.85	12	6.15	29	5.38
Physiotherapist	1	0.58	4	2.34	0	0.00	5	0.93
Podiatrist	1	0.58	0	0.00	1	0.51	2	0.37
Psychology	8	4.62	5	2.92	3	1.54	16	2.97
Student practitioner*	0	0.00	0	0.00	0	0.00	0	0.00
Total	173	100.00	171	100.00	195	100.00	539	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	-	1	-	-	-	-	-	-	1	2	-	2	-	-	6
Chiropractor	-	-	1	-	1	-	-	2	-	1	-	2	-	-	7
Dental practitioner	-	1	3	-	-	-	-	3	-	9	2	42	-	-	60
Medical practitioner	5	53	9	2	-	3	2	14	41	34	15	243	12	1	434
Medical radiation practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Nursing and midwifery practitioner	1	4	2	-	-	-	-	5	11	41	44	43	-	-	151
Occupational therapy	-	-	-	-	-	-	-	-	-	3	-	1	4	-	5
Optometrist	-	-	-	-	-	-	-	-	-	1	-	3	-	-	4
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacist	-	2	-	-	-	-	-	-	25	7	2	-	-	-	36
Physiotherapist	-	-	-	-	-	-	-	-	-	3	1	1	-	-	5
Podiatrist	-	1	-	-	-	-	-	-	-	-	3	2	-	-	6
Psychologist	-	3	-	-	-	-	-	-	-	9	4	4	1	-	21
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Total	6	65	15	2	1	3	2	24	78	110	71	343	14	1	735

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	775	46.41
Male	830	49.70
Prefer not to specify	5	0.30
Unknown	60	3.59
Total	1670	100.00

Age

Age	Number	Percentage
Less than 18 years	100	5.99
18–24 years	101	6.05
25–34 years	306	18.32
35–44 years	323	19.34
45–54 years	283	16.95
55–64 years	202	12.10
65–74 years	135	8.08
More than 75 years	102	6.11
Unknown*	118	7.07
Total	1670	100.00

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

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	663	39.70
Central West	3	0.18
Darling Downs	62	3.71
Far North	71	4.25
Fitzroy	46	2.75
Gold Coast	189	11.32
Mackay	44	2.63
North West	6	0.36
Northern	79	4.73
South West	6	0.36
Sunshine Coast	98	5.87
West Moreton	40	2.40
Wide Bay-Burnett	170	10.18
Outside Queensland	53	3.17
Unknown	140	8.38
Total	1670	100.00

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	893	44.96
Central West	2	0.10
Darling Downs	86	4.33
Far North	94	4.73
Fitzroy	49	2.47
Gold Coast	223	11.23
Mackay	50	2.52
North West	7	0.35
Northern	97	4.88
South West	8	0.40
Sunshine Coast	129	6.50
West Moreton	19	0.96
Wide Bay-Burnett	185	9.32
Outside Queensland*	25	1.26
Unknown	119	5.99
Total	1986	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.



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