Quarterly performance report

Quarter three 2019-20



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Introduction

This document reports on the quarter three (Q3) performance of the Office of the Health Ombudsman (OHO) for the 2019–20 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 20 April 2020, 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 a high volume of contacts with 3566 received during the quarter. Of these contacts 2585, or 72 per cent, were classified as complaints.

- 98 per cent of the 2440 intake decisions were made within seven days, compared to 83 percent (of the 1952 decisions) and 94 per cent (of the 1679 decisions) within the same period in 2018-19 and 2017-18 respectively.
- 93 per cent of the 453 assessments decisions made in Q3 were completed within legislative timeframes, compared to 98 per cent (of the 359 assessments) and 70 per cent (of the 464 assessments) within the same periods in 2018-19 and 2017-18 respectively.
- 86 per cent of the 397 local resolutions finalised in Q3 were completed within legislative timeframes, compared to 100 per cent (of the 197 local resolutions) and 93 per cent (of the 345 local resolutions) within the same periods in 2018-19 and 2017-18 respectively.
- 61 per cent of the 38 investigations closed in Q3 were closed within twelve months of commencement, compared to 73 per cent (of the 48 investigations) and 45 per cent (of the 86 investigations) within the same periods in 2018-19 and 2017-18 respectively.
- 6 matters were filed in QCAT in Q3, compared to 26 and 14 within the same periods in 2018-19 and 2017-18 respectively.
- 13 decisions were handed down by QCAT within the quarter compared to 9 and 0 within the same periods in 2018-19 and 2017-18 respectively.

Intake of complaints

Type of contacts

Type of contact	Janu	ıary	Febr	uary	Ма	rch	Q3 total		
	Number %		Number	%	Number	%	Number	%	
Complaint	865	75.81	863	72.58	857	69.34	2585	72.49	
Enquiry	263	23.05	294	24.73	363	29.37	920	25.80	
Information*	13	1.14	32	2.69	16	1.29	61	1.71	
Yet to be classified	0	0.00	0	0.00	0	0.00	0	0.00	
Total	1141	100.00	1189	100.00	1236	100.00	3566	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.

The number of complaint contacts will not equal the number of decisions made in the table below.

Type of complaints

Type of complaints	Jan	uary	Febr	uary	Ma	rch	Q3 total		
	Number	%	Number	%	Number	%	Number	%	
Health consumer complaint	805	93.06	780	90.38	794	92.65	2379	92.03	
Mandatory notification*	14	1.62	15	1.74	16	1.87	45	1.74	
Voluntary notification*	38	4.39	61	7.07	36	4.20	135	5.22	
Self-notification*	3	0.35	4	0.46	5	0.58	12	0.46	
Referral from another agency	5	0.58	3	0.35	6	0.70	14	0.54	
Total	865	100.00	863	100.00	857	100.00	2585	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)*.

^{*}The introduction of improved business processes in August 2019 resulted in the addition of 'Information' as a new contact category. The office may receive information from other government entities, for example the Queensland Police Service, relating to health service practitioners. These matters previously would have been classified as either a complaint or enquiry depending on whether further action was required by the office but are now captured as information.

Complaint decisions

On 1 March 2020, amendments were made to the *Health Ombudsman Act 2013* enabling the office to 'Not accept' a complaint in situations where the Health Ombudsman is satisfied:

- the complaint would be more appropriately dealt with by a different entity; or
- the complainant has not yet sought a resolution with the relevant health service provider and it is reasonable in the circumstances for the complainant to first do so.

As a result of these changes, the table "Accepted vs Not Accepted" has been replaced with the table "Decisions made" included below.

Cases previously categorised as "Not Accepted" are now reported under the category of "Accepted and no further action taken" and relate to the number of decisions to take no further action under s 44 of the Act. To enable consistent reporting of data throughout the quarter, this change has been applied to data previously reported in January and February under the previous method of classification. This change is to definition only, and no alterations have been made to how these cases are managed by the office.

Decisions timeframes—within seven days

Decision made	Janu	ary	Febru	uary	Mar	ch	Q3 total			
	Number %		Number	%	Number	%	Number	%		
Yes	750 98.94		806	98.65	823	95.14	2379	97.50		
No	8	1.06	11	1.35	42	4.86	61	2.50		
Total	758 100.00		817	100.00	865	100.00	2440	100.00		

Decisions made

Number of decisions made	Jan	uary	Febr	uary	Ma	rch	Q3 total		
	Number	%	Number	%	Number	%	Number	%	
Accepted and further relevant action taken	501	66.09	553	67.69	448	51.79	1502	61.56	
Accepted and no further action taken*	257	33.91	264	32.31	334	38.61	855	35.04	
Not accepted under s35A**	N/A	N/A	N/A	N/A	83	9.60	83	3.40	

Number of decisions made	Jan	uary	Febi	ruary	Ма	rch	Q3 total			
Total	758	100.00	817	100.00	865	100.00	2440 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*. Prior to 1 March 2020, this category was reported as "Not Accepted".

An additional 54 matters were determined to fall outside the jurisdiction of the Act.

Accepted decision outcomes

Type of relevant action	Janu	ıary	Febr	uary	Maı	ch	Q3 total		
	Number	%	Number	%	Number	%	Number	%	
Assessment	111	21.68	151	26.54	109	24.12	371	24.20	
Local resolution	117	22.85	129	22.67	91	20.13	337	21.98	
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00	
Investigation	13	2.54	9	1.58	6	1.33	28	1.83	
Referred to AHPRA and the national boards	125	24.41	172	30.23	152	33.63	449	29.29	
Referred to another entity	145	28.32	108	18.98	94	20.80	347	22.64	
Referred to director of proceedings	1	0.20	0	0.00	0	0.00	1	0.07	
Total	512	100.00	569	100.00	452	100.00	1533	100.00	

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).

^{**}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.

Health service complaints profile

Main issues raised in complaints

Issue	Jan	uary	Febr	uary	Ma	rch	Q3 t	otal
	Number	%	Number	%	Number	%	Number	%
Access	190	13.39	175	12.81	198	15.46	563	13.85
Code of conduct for healthcare workers	11	0.78	7	0.51	7	0.55	25	0.61
Communication/ information	185	13.04	166	12.51	152	11.87	503	12.37
Consent	17	1.20	24	1.76	28	2.19	69	1.70
Discharge/transfer arrangements	22	1.55	19	1.39	21	1.64	62	1.52
Environment/ management of facilities	43	3.03	43	3.15	44	3.43	130	3.20
Fees/cost	47	3.31	38	2.78	45	3.51	130	3.20
Grievance processes	42	2.96	27	1.98	29	2.26	98	2.41
Health Ombudsman Act 2013 offence	1	0.07	0	0.00	0	0.00	1	0.02
Medical records	40	2.82	33	2.42	28	2.19	101	2.48
Medication	181	12.76	164	12.01	152	11.87	497	12.22
Professional conduct	110	7.75	139	10.18	124	9.68	373	9.17
Professional health	20	1.41	28	2.05	26	2.03	74	1.82
Professional performance	486	34.25	467	34.19	391	30.52	1344	33.05
Reports/certificates	24	1.69	35	2.56	35	2.73	94	2.31
Research/teaching/ assessment	0	0.00	1	0.07	1	0.08	2	0.05
Total	1419	100.00	1366	100.00	1281	100.00	4066	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.

Profile of complaints about health practitioners

	Number of						Num	ber and type o	of issues** ider	ntified in compl	aints about he	ealth practition	ers**					
Practitioner type	practitioners identified in complaints*	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
Aboriginal and Torres Strait Islander health	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine practitioner	2	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Chiropractor	9	1	-	1	-	-	1	1	-	-	-	-	6	-	1	-	-	11
Dental practitioner	74	2	-	4	3	-	1	4	3	-	2	2	14	5	53	-	-	93
Medical practitioner	684	42	-	134	18	2	3	24	10	-	22	117	90	22	383	54	-	921
Medical radiation practitioner	3	-	-	-	-	-	-	-	-	-	-	-	4	-	-	-	-	4
Midwife	2	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2
Nurse	156	1	-	14	-	-	1	-	2	-	4	15	91	34	32	1	-	195
Occupational therapist	7	-	-	3	-	-	-	1	-	-	-	-	2	-	3	1	-	10
Optometrist	4	-	-	1	-	-	-	1	-	-	-	-	-	-	3	-	-	5
Osteopath	3	-	-	-	-	-	-	-	-	-	-	-	2	-	2	-	-	4
Paramedic	7	-	-	-	1	-	-	-	-	-	-	-	5	-	1	-	-	7
Pharmacist	29	-	-	4	-	-	-	1	-	-	-	24	5	1	1	-	-	36
Physiotherapist	14	1	-	2	-	-	-	-	-	-	1	-	8	-	5	-	-	17
Podiatrist	3	-	-	-	-	-	-	-	-	-	-	-	3	2	-	-	-	5
Psychologist	58	2	-	13	-	-	-	1	1	-	4	-	31	6	12	7	1	78
Student practitioner	3	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-	-	4
Unknown practitioner	71	5	2	6	-	2	1	4	-	-	3	8	13	2	31	1	-	78
Unregistered practitioner	42	-	20	2	-	-	-	-	-	1	-	1	11	-	7	3	-	45
Total	1170	54	22	186	22	4	7	37	16	1	36	167	288	74	535	67	1	1517

^{*} 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 practitioner and/or health service organisation. In circumstances where a health practitioner is identified in relation to multiple complaints, the health practitioner would be counted per complaint. For example, a health practitioner identified in three complaints would be counted three times in this column. From 1 July 2019, the practitioner type categories listed in this table have been updated to more accurately reflect the types of practitioners about whom the office receives complaints.

^{**} 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

			Number and type of issues [™] identified in complaints about health service organisations															
Organisation type	Number of facilities identified in complaints*	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
Administrative service	3	-	-	-	1	-	1	1	-	-	-	-	-	-	-	-	-	3
Aged care facility	26	2	1	8	-	-	4	1	3	-	2	5	2	-	19	-	-	47
Allied health service	28	4	-	3	2	-	5	5	4	-	1	2	2	-	9	2	-	39
Ambulance service	10	1	-	4	1	-	1	-	-	-	-	2	-	-	4	-	-	13
Community health service	39	8	-	15	1	-	2	2	2	-	2	2	-	-	16	-	-	50
Correctional facility	522	304	-	20	-	-	20	-	-	-	3	213	6	-	71	-	-	637
Dental service	77	29	-	8	-	-	2	4	6	-	-	2	2	-	38	-	-	91
Health information service	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Health promotion service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Hospital and Health Service	13	5	-	3	-	-	1	-	1	-	-	1	1	-	7	-	-	19
Laboratory service	16	1	-	5	-	-	2	5	1	-	-	-	2	-	4	-	-	20
Licensed day hospital	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Licensed private hospital	60	2	-	12	-	10	3	16	6	-	2	5	2	-	27	1	-	86
Medical centre	173	34	-	48	2	-	15	17	16	-	26	12	12	-	42	4	-	228
Mental health service	115	11	-	28	24	8	19	-	5	-	2	11	14	-	54	2	-	178
Nursing service	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1
Optical store	5	1	-	-	-	-	-	1	-	-	-	-	-	-	4	-	-	6
Other government department	6	-	-	-	-	-	-	-	-	-	-	3	1	-	3	-	-	7
Other support service	18	1	1	4	-	-	2	3	3	-	-	-	2	-	6	2	-	24
Paramedical service	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Pharmaceutical service	40	-	-	8	-	-	2	6	4	-	1	25	2	-	-	-	-	48

Private organisation	18	-	1	-	1	-	-	3	-	-	2	1	5	-	6	1	1	21
Public health service	23	4	-	6	-	1	1	1	-	-	-	1	1	-	12	1	-	28
Public hospital	623	99	-	140	15	38	36	14	29	-	23	43	26	-	470	12	-	945
Residential care service	6	-	-	1	-	-	2	-	-	-	-	-	1	-	4	-	-	8
Specialised health service	37	3	-	4	-	-	4	14	2	-	1	2	4	-	10	2	-	46
Welfare service	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Total	1863	509	3	317	47	58	123	93	82	0	65	330	85	0	809	27	1	2549

^{*} 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 health practitioner and/or health service organisation. 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	January	February	March	Q3 total
Assessments started	137	162	133	432
Assessments completed	156	131	166	453

Completed assessment timeframes

Assessment timeframes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Within legislative timeframes*	144	92.31	124	94.66	154	92.77	422	93.16
Outside legislative timeframes	12	7.69	7	5.34	12	7.23	31	6.84
Total	156	100.00	131	100.00	166	100.00	453	100.00

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

Assessment decisions

Type of relevant action	Jan	uary	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Local resolution	0	0.00	0	0.00	0	0.00	0	0.00
Conciliation	3	1.86	2	1.50	6	3.53	11	2.37
Investigation	3	1.86	6	4.51	6	3.53	15	3.23
Referred to AHPRA and the national boards	20	12.42	19	14.29	20	11.76	59	12.72
Referred to another entity	15	9.32	12	9.02	25	14.71	52	11.21
No further action	120	74.53	94	70.68	113	66.47	327	70.47
Total	161	100.00	133	100.00	170	100.00	464	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	January	February	March	Q3 total
Local resolutions started	119	137	100	356
Local resolutions completed	113	140	144	397

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*	86	76.11	126	90.00	128	88.89	340	85.64
Outside legislative timeframes	27	23.89	14	10.00	16	11.11	57	14.36
Total	113	100.00	140	100.00	144	100.00	397	100.00

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

Outcomes

Local resolution outcomes	Jan	January February		uary	Ма	rch	Q3 total	
	Number	%	Number	%	Number	%	Number	%
Resolution reached	93	82.30	116	82.86	114	79.17	323	81.36
No resolution reached	10	8.85	12	8.57	15	10.42	37	9.32
Complaint withdrawn*	7	6.19	11	7.86	15	10.42	33	8.31
Local resolution did not commence**	3	2.65	1	0.71	0	0.00	4	1.01
Total	113	100.00	140	100.00	144	100.00	397	100.00

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

Decisions for matters that were not resolved

Type of relevant action	January		Febr	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	10.00	1	8.33	0	0.0	2	5.41	
Referred to another entity	0	0.00	0	0.00	1	6.67	1	2.70	
No further action	9	90.00	11	91.67	14	93.33	34	91.89	
Total	10	100.00	12	100.00	15	100.00	37	100.00	

Conciliation

Conciliations started and closed

Conciliations this quarter	January	February	March	Q3 total
Conciliations started	2	2	5	9
Conciliations closed	3	5	7	15

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	5	1	0	6
Party/ies did not agree to participate	2	2	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.

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	Janı	uary	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	100.00	3	100.00	3	50.00	7	70.00
6–9 months	0	0.00	0	0.00	1	16.70	1	10.00
9–12 months	0	0.00	0	0.00	0	0.00	0	0.00
More than 12 months	0	0.00	0	0.00	2	33.33	2	20.00
Total	1	100.00	3	100.00	6	100.00	10	100.00

Outcomes

Conciliation outcomes	January		Febr	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%	
Successful	0	0.00	2	66.67	3	50.00	5	50.00	
Not successful	1	100.00	1	33.33	3	50.00	5	50.00	
Ended by the Health Ombudsman	0	0.00	0	0.00	0	0.00	0	0.00	
Total	1	100.00	3	100.00	6	100.00	10	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		Febr	February		March		Q3 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	1	100.00	1	100.00	3	100.00	5	100.00	
Total	1	100.00	1	100.00	3	100.00	5	100.00	

Open conciliation timeframes

Conciliations open	January		Febr	uary	March	
	Number	%	Number	%	Number	%
Less than 3 months	13	41.94	8	28.57	8	30.77
3–6 months	7	22.58	10	35.71	10	38.46
6–9 months	3	9.68	1	3.57	0	0.00
9–12 months	1	3.23	3	10.71	4	15.38
More than 12 months	7	22.58	6	21.43	4	15.38
Total	31	100.00	28	100.00	26	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	January	February	March	Q3 total
Open at start of month	160	168	165	n/a
Investigations started	19	19	14	52
Investigations closed	7	18	13	38
Investigations amalgamated under s40(2)	4	5	2	11
Investigations separated under s40(2)	1	0	0	1

Closed investigations

Timeframes

In Q32, 60.53 per cent of the 38 investigations were closed within twelve months of commencement.

Closed investigation timeframes	Janu	ary	Febr	uary	Mar	ch	Q3 t	otal
	Number	%	Number	%	Number	%	Number	%
Less than 3 months	1	14.29	6	33.33	3	23.08	10	26.32
3–6 months	1	14.29	2	11.11	2	15.38	5	13.16
6–9 months	2	28.57	1	5.56	2	15.38	5	13.16
9–12 months	0	0.00	1	5.56	2	15.38	3	7.89
12-24 months	2	28.57	6	33.33	4	30.77	12	31.58
More than 24 months	1	14.29	2	11.11	0	0.00	3	7.89
Total	7	100.00	18	100.00	13	100.00	38	100.00

Outcomes

Investigation outcomes	Janu	ıary	Febr	uary	Mar	ch	Q3 t	otal
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings*	6	75.00	7	36.84	5	33.33	18	42.86
Referred to AHPRA	0	0.00	6	31.58	4	26.66	10	23.81
Referred to another agency	0	0.00	0	0.00	1	6.67	1	2.38
No further action	2	25.00	6	31.58	5	33.33	13	30.95
Referred for conciliation	0	0.00	0	0.00	0	0.00	0	0.00
Total	8	100.00	19	100.00	15	100.00	42	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	January		February		March	
	Number	%	Number	%	Number	%
Less than 3 months	37	28.91	33	24.81	35	26.32
3–6 months	23	17.97	27	20.30	19	14.29
6–9 months	19	14.84	17	12.78	24	18.05
9–12 months	16	12.50	19	14.29	16	12.03
12–24 months*	25	19.53	30	22.56	31	23.31
More than 24 months*	8	6.25	7	5.26	8	6.02
Total	128	100.00	133	100.00	133	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 Februar		uary	March		
	Number	%	Number	%	Number	%
Less than 3 months	2	5.00	2	6.25	1	3.23
3–6 months	6	15.00	4	12.50	3	9.68
6–9 months	6	15.00	6	18.75	5	16.13
9–12 months	4	10.00	4	12.50	5	16.13
12–24 months	18	45.00	10	31.25	11	35.48
More than 24 months	4	10.00	6	18.75	6	19.35
Total	40	100.00	32	100.00	31	100.00

Open investigation timeframes

Total open investigation timeframes	Jan	uary	February		March	
	Number	%	Number	%	Number	%
Less than 3 months	39	23.21	35	21.21	36	21.95
3–6 months	29	17.26	31	18.79	22	13.41
6–9 months	25	14.88	23	13.94	29	17.68
9–12 months	20	11.90	23	13.94	21	12.80
12-24 months	43	25.60	40	24.24	42	25.61
More than 24 months	12	7.14	13	7.88	14	8.54
Total	168	100.00	165	100.00	164	100.00

Open investigation categories

Type of investigation	January	February	March
Health service complaint	102	96	96
Systemic issue	4	4	3
Ministerial directed investigation	0	0	0
Another matter	52	55	56
Matters identified for further investigation	10	10	9
Total	168	165	164

^{*}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	1	1	1
Recommendations monitoring cases started	0	0	0
Recommendations monitoring cases closed	0	0	0

Open recommendations monitoring case timeframes

Monitoring case timeframes*	January		Febr	uary	March		
	Number	%	Number	%	Number	%	
Less than 6 months	0	0.00	0	0.00	0	0.00	
6–12 months	1	100.00	1	100.00	1	100.00	
More than 12 months	0	0.00	0	0.00	0	0.00	
Total	1	100.00	1	100.00	1	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.

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	Jan	uary	Febr	uary	Ма	rch	Q3 t	total
	Number	%	Number	%	Number	%	Number	%
Massage therapist	2	33.33	1	12.50	0	0.00	3	15.79
Medical practitioner	1	16.67	5	62.50	4	80.00	10	52.63
Paramedic	0	0.00	1	12.50	0	0.00	1	5.26
Registered nurse	3	50.00	1	12.50	1	20.00	5	26.31
Total	6	100.00	8	100.00	5	100.00	19	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

Practitioner type	Number	Percentage
Chinese medicine practitioner	1	2.38
Dentist	1	2.38
Medical practitioner	31*	73.81
Osteopath	1	2.38
Pharmacist	2	4.76
Psychologist	1	2.38
Registered nurse	5	11.90
Total	42	100.00

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

Outcomes of matters reviewed by the Director of Proceedings

Matters filed in the Queensland Civil and Administrative Tribunal

Practitioner type	Janı	uary	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Medical practitioner	1	20.00	1*	100.00	0	0.00	2	33.33
Pharmacist	1	20.00	0	0.00	0	0.00	1	16.67
Physiotherapist	1	20.00	0	0.00	0	0.00	1	16.67
Registered nurse	2	40.00	0	0.00	0	0.00	2	33.33
Total	5	100.00	1	100.00	0	0.00	6	100.00

^{**}This figure includes a referral where the Director of Proceedings decided to refer two matters regarding the same practitioner to QCAT and filed both matters as one referral.

Matters to be referred back to Health Ombudsman

On 1 March 2020, amendments were made to the *Health Ombudsman Act 2013* allowing the Health Ombudsman to issue permanent prohibition orders against unregistered practitioners, where previously these matters would have been referred to QCAT for disciplinary proceedings.

In line with this amendment, a number of matters relating to unregistered practitioners have been referred back to the Health Ombudsman for consideration as to whether a permanent prohibition order is appropriate.

Practitioner type	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Assistant in nursing	0	0.00	0	0.00	5	26.32	5	20.00
Audiologist	2	50.00	0	0.00	0	0.00	2	8.00
Holding out as an enrolled nurse	0	0.00	0	0.00	1	5.26	1	4.00
Holding out as a paramedic	0	0.00	0	0.00	1	5.26	1	4.00
Holding out as a psychologist	0	0.00	0	0.00	1	5.26	1	4.00
Massage therapist	0	0.00	0	0.00	3	15.79	3	12.00
Medical assistant	0	0.00	0	0.00	1	5.26	1	4.00
Medical practitioner	0	0.00	1	50.00	1	5.26	2	8.00
Natural therapist	0	0.00	0	0.00	1	5.26	1	4.00
Osteopath	1	25.00	0	0.00	0	0.00	1	4.00
Paramedic	0	0.00	0	0.00	1	5.26	1	4.00
Registered nurse	1	25.00	1	50.00	0	0.00	2	8.00
Social worker	0	0.00	0	0.00	1	5.26	1	4.00
Unregistered chiropractor	0	0.00	0	0.00	1	5.26	1	4.00
Unregistered paramedic	0	0.00	0	0.00	2	10.53	2	8.00
Total	4	100.00	2	100.00	19	100.00	25	100.00

Decisions on matters referred to the Queensland Civil and Administrative Tribunal

There have been thirteen decisions made on matters referred to QCAT during the quarter, and one matter was withdrawn from QCAT. Of the thirteen decisions handed down by QCAT, three are yet to be published by QCAT. Outlines of the ten decisions handed down and published are included below.

On 17 January 2020, a decision was handed down in *Health Ombudsman v GCV*. The Tribunal found that the practitioner behaved in a way that constitutes professional misconduct. The practitioner was reprimanded and disqualified from applying for registration for a period of 9 years. The practitioner prohibited from providing any health service for 9 years.

On 17 January 2020, a decision was handed down in *Health Ombudsman v McGuinness*. The Tribunal found that the practitioner had behaved in a way that constitutes professional misconduct and the practitioner was reprimanded.

On 4 February 2020, a decision was handed down in *Health Ombudsman v Cash*. The Tribunal found that the practitioner behaved in a way that constitutes professional misconduct and the practitioner was reprimanded.

On 5 February 2020, a decision was handed down in *Health Ombudsman v Corocher*. The Tribunal found that the practitioner had behaved in a way that constitutes professional misconduct. The practitioner's registration was cancelled, and the practitioner was disqualified from applying a for registration as a registered health practitioner indefinitely. The practitioner was permanently prohibited from providing any health service.

On 10 February 2020, a decision was handed down in *Health Ombudsman v Henson*. The Tribunal found, in relation to Allegation 1, that the practitioner had behaved in a way that constitutes professional misconduct. In relation to Allegation 2, the Tribunal found that there was no case to answer. In relation to Allegation 3, the Tribunal found that the practitioner behaved in a way that constitutes unprofessional conduct. The practitioner was reprimanded.

On 12 February 2020, a decision was handed down in *Health Ombudsman v Chaffey*. The Tribunal found, in relation to Allegation 1, that the practitioner had behaved in a way that constitutes professional misconduct. In relation to Allegation 2, the Tribunal found that there was no case to answer. The practitioner was reprimanded and ordered to complete an educational course on professional accountability within twelve months.

On 12 February 2020, a decision was handed down in *Health Ombudsman v CSM*. The Tribunal found that the practitioner had behaved in a way that constitutes professional misconduct and the practitioner was reprimanded.

On 19 February 2020, a decision was handed down in *Health Ombudsman v Tu*. The Tribunal found, in relation to Allegations 1, 2 and 4 that the practitioner had behaved in a way which constitutes professional misconduct. In relation to Allegation 3, the Tribunal found that the practitioner had behaved in a way which constitutes unprofessional conduct. The practitioner was disqualified for applying for registration as a registered health practitioner for two years.

On 27 February 2020, a decision was handed down in *Health Ombudsman v Passmore*. In relation to Charge 1, the Tribunal found that the practitioner behaved in a way that constitutes professional misconduct. In relation to Charge 2, the Tribunal found that the practitioner behaved in a way that constitutes unprofessional conduct. The practitioner was reprimanded.

On 12 March 2020, a decision was handed down in *Health Ombudsman v Rissanen*. In relation to Charge 1, the Tribunal found that the practitioner had behaved in a way which constitutes professional misconduct. In relation to Charge 3, the Tribunal found that the practitioner behaved in a way that constitutes unprofessional conduct. The practitioner was reprimanded.

Decisions on immediate action reviews

QCAT made no new decisions regarding immediate action reviews during the 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

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 eleven show cause notices during the quarter.

Immediate registration actions

Practitioner type	Number	Action taken	Reason/s for taking action*	
			Public Interest	Serious Risk
Enrolled nurse	1	Suspension	✓	✓
Medical practitioner	3	Conditions		✓
Paramedic	1	Suspension		✓
Paramedic	1	Conditions		✓
Osteopath	1	Suspension	✓	✓

^{*}From July 2019 the reason/s for taking action included in this table have been updated to more accurately reflect the immediate action process.

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	
Aged care worker	1	Prohibition		✓	
Disability support worker	1	Restrictions		✓	
Counsellor	1	Prohibition	✓	√	
Student nurse	1	Prohibition		✓	

^{*}From July 2019 the reason/s for taking action included in this table have been updated to more accurately reflect the immediate action process.

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	119	124*	125*
Practitioner monitoring cases started	6	4	2
Practitioner monitoring cases closed	1	2	1

^{*}Two additional monitoring cases were closed but not recorded in the office's case management system until a subsequent reporting period.

Open monitoring cases

Timeframes

Open case timeframes	January		February		March	
	Number	%	Number	%	Number	%
Less than 6 months	32	25.81	31	24.80	25	19.69
6–12 months	33	26.61	27	21.60	32	25.20
More than 12 months	59	47.58	67	53.60	70	55.12
Total	124	100.00	125	100.00	127	100.00

Immediate action types

Open cases by immediate action type	Jan	uary	February		/ February March		rch
	Number	%	Number	%	Number	%	
Interim prohibition order—restrictions	18	14.52	17	13.60	18	14.17	
Interim prohibition order—prohibited	39	31.45	39	31.20	40	31.50	
Immediate registration action—conditions	42	33.87	42	33.60	42	33.07	
Immediate registration action—suspension	17	13.71	17	13.60	17	13.39	
QCAT disciplinary decision	7	5.65	9	7.20	9	7.09	
QCAT interim decision	1	0.81	1	0.80	1	0.79	
Total	124	100.00	125	100.00	127	100.00	

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	4.92
Chiropractor	0	0.00
Dental practitioner	4	6.56
Medical practitioner	29	47.54
Medical radiation practitioner	0	0.00
Nursing and midwifery practitioner	18	29.51
Occupational therapist	0	0.00
Optometrist	0	0.00
Osteopath	1	1.64
Paramedic	2	3.28
Pharmacist	0	0.00
Physiotherapist	2	3.28
Podiatrist	0	0.00
Psychologist	2	3.28
Total	61	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	1.67
Aged care worker	2	3.33
Assistant in nursing	9	15.00
Audiologist	2	3.33
Counsellor	1	1.67
Disability support worker	1	1.67
Former registered health practitioner	12	20.00
Health support worker	1	1.67
Holding out*	3	5.00
Kinesiologist	2	3.33
Massage therapist	16	26.67
Medical assistant	2	3.33
Natural therapist	1	1.67
Personal carer	1	1.67
Social worker	1	1.67
Student practitioner	1	1.67
Unregistered paramedic**	4	6.67
Total	60	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

Two new notifications and no new requests (s193 of the Act) relating to possible serious matters were made during the quarter.

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*	190	204	242	636
Matters referred	192	178	261	631
Matters retained by the office**	13	6	8	27

^{*}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	Jan	January F		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%	
Intake and triage	140	73.68	153	75.00	199	82.23	492	77.36	
Assessment	45	23.68	39	19.12	35	14.46	119	18.71	
Conciliation	0	0.00	0	0.00	0	0.00	0	0.00	
Local resolution	3	1.58	3	1.47	1	0.41	7	1.10	
Investigation	0	0.00	6	2.94	7	2.89	13	2.04	
Director of proceedings	0	0.00	0	0.00	0	0.00	0	0.00	
Internal review	2	1.05	3	1.47	0	0.00	5	0.79	
Total	190	100.00	204	100.00	242	1000.00	636	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	486	4	2	0	0
Assessment	7	5	36	45	26
Local resolution	2	0	1	2	2
Conciliation	0	0	0	0	0
Investigation	0	0	0	2	11
Director of Proceedings	0	0	0	0	0
Internal review	5	0	0	0	0
Total	500	9	39	49	39

Ope 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	110	57.89	169	82.84	206	85.12	485	76.26
4–7 days	80	42.11	32	15.69	34	14.05	146	22.96
8–11 days	0	0.00	2	0.98	2	0.83	4	0.63
More than 12 days	0	0.00	1	0.49	0	0.00	1	0.16
Total	190	100.00	204	100.00	242	100.00	636	100.00

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Janı	uary	Febi	February		March		Q2 total	
	Number	%	Number	%	Number	%	Number	%	
Aboriginal and Torres Strait Islander health practitioner	0	0.00	0	0.00	0	0.00	0	0.00	
Chinese medicine practitioner	0	0.00	0	0.00	0	0.00	0	0.00	
Chiropractor	1	0.52	1	0.56	4	1.53	6	0.95	
Dental practitioner	15	7.81	10	5.62	28	10.73	53	8.40	
Medical practitioner	128	66.67	111	62.36	148	56.70	387	61.33	
Medical radiation practitioner	0	0.00	0	0.00	2	0.77	2	0.32	
Nursing and midwifery practitioner	31	16.15	33	18.54	46	17.62	110	17.43	
Occupational therapist	1	0.52	1	0.56	1	0.38	3	0.48	
Optometrist	0	0.00	0	0.00	2	0.77	2	0.32	
Osteopath	0	0.00	1	0.56	1	0.38	2	0.32	
Paramedic	0	0.00	2	1.12	1	0.38	3	0.48	
Pharmacist	8	4.17	3	1.69	11	4.21	22	3.49	
Physiotherapist	2	1.04	1	0.56	1	0.38	4	0.63	
Podiatrist	0	0.00	2	1.12	1	0.38	3	0.48	
Psychology	5	2.60	12	6.74	14	5.36	31	4.91	
Student practitioner*	1	0.52	1	0.56	1	0.38	3	0.48	
Total	192	100.00	178	100.00	261	100.00	631	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	Research / teaching / assessment	Total
Aboriginal and Torres Strait Islander health worker	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chiropractor	-	-	-	-	-	-	-	-	-	5	-	1	-	-	6
Dental practitioner	1	2	2	-	1	-	-	1	1	9	4	41	-	-	62
Medical practitioner	7	68	11	2	1	3	4	12	76	36	20	299	16	-	555
Medical radiation practitioner	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Nursing and midwifery practitioner	-	4	-	-	-	-	-	4	10	56	37	29	-	-	140
Occupational therapy	-	1	-	-	-	1	-	-	-	1	-	1	1	-	5
Optometrist	-	-	-	-	-	-	-	-	-	-	-	3	-	-	3
Osteopath	-	-	-	-	-	-	-	-	-	1	-	2	-	-	3
Paramedic	-	-	-	-	-	-	-	-	-	1	1	1	-	-	3
Pharmacist	-	2	-	-	-	-	-	-	22	1	-	1	-	-	26
Physiotherapist	-	-	-	-	-	-	-	-	-	2	-	2	-	-	4
Podiatrist	-	-	-	-	-	-	-	-	-	2	1	1	-	-	4
Psychologist	-	5	1	-	-	1	-	1	-	22	3	9	1	1	44
Student practitioner	-	-	-	-	-	-	-	-	-	2	2	0	-	-	4
Total	8	82	14	2	2	5	4	18	109	140	68	390	18	1	861

Demographics of healthcare consumers

Gender of healthcare consumers

Gender	Number	Percentage
Female	1149	44.76
Male	1325	51.62
Prefer not to specify	53	2.06
Unknown	40	1.56
Total	2567	100.00

Age of healthcare consumers

Age	Number	Percentage
Less than 18 years	148	5.77
18–24 years	134	5.22
25–34 years	493	19.21
35–44 years	487	18.97
45–54 years	438	17.06
55–64 years	305	11.88
65–74 years	210	8.18
More than 75 years	180	7.01
Unknown*	172	6.70
Total	2567	100.00

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

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	1148	44.72
Central West	2	0.08
Darling Downs	83	3.23
Far North	137	5.34
Fitzroy	101	3.93
Gold Coast	283	11.02
Mackay	58	2.26
North West	9	0.35
Northern	116	4.52
South West	9	0.35
Sunshine Coast	117	4.56
West Moreton	68	2.65
Wide Bay-Burnett	182	7.09
Outside Queensland	167	6.51
Unknown	87	3.39
Total	2567	100.00

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	1399	47.94
Central West	2	0.07
Darling Downs	92	3.15
Far North	142	4.87
Fitzroy	99	3.39
Gold Coast	327	11.21
Mackay	64	2.19
North West	15	0.51
Northern	122	4.18
South West	6	0.21
Sunshine Coast	159	5.45
West Moreton	42	1.44
Wide Bay-Burnett	177	6.07
Outside Queensland*	40	1.37
Unknown	232	7.95
Total	2918	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.

