

Quarterly performance report—Quarter Four 2024-25

Published by the Office of the Health Ombudsman September 2025.



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Introduction

This document reports on the Quarter Four (Q4) performance of the Office of the Health Ombudsman (OHO) for the 2024–25 financial year.

The OHO provides a single point of entry for health service complaints and operates in a co-regulatory model with the Australian Health Practitioner Regulation Agency (Ahpra) when dealing with notifications and complaints about registered health practitioners. The OHO also deals with complaints about unregistered health practitioners and health service organisations and facilities.

The key objectives of the Health Ombudsman Act 2013 (the Act) are to:

- Protect the health and safety of the public.
- Promote professional, safe and competent practice by health practitioners.
- Promote high standards of service delivery by health service organisations.
- Maintain public confidence in the management of complaints and other matters relating to the provision of health services.

We have a range of functions which include:

- receives enquiries, complaints and notifications about health services and health service providers, including registered and unregistered health practitioners and take relevant action
- take relevant action in relation to those complaints including immediate action where necessary to protect the health and safety of the public or where it is in the public interest
- investigate and report on systemic issues and identify and recommend opportunities for improvement
- monitor the functions of Ahpra and the National Boards as they relate to registered practitioners in Queensland
- provide information about minimising and resolving health service complaints
- report publicly on the performance of the OHO's functions.

Our performance reports are available to the public on our website www.oho.qld.gov.au.

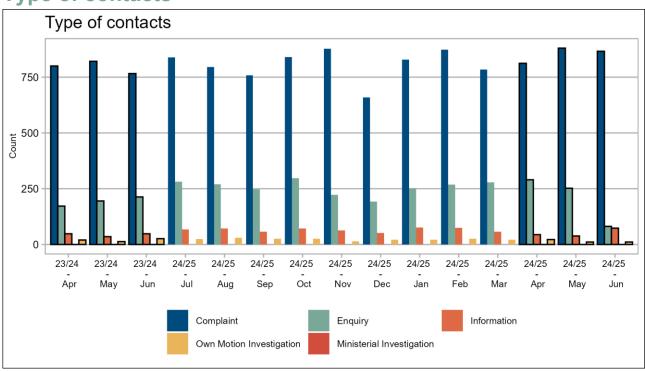
Data in this report is correct as of 05 September 2025, though figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

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

Intake of complaints

The commencement of a complaint begins by the recording of data within the OHO case management platform, Resolve. Data outlined in this section refers to entries into Resolve unless otherwise specified.

Type of contacts



Type of contact	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Complaint	812	69.52	880	74.51	866	84	2558	75.68
Enquiry	290	24.83	252	21.34	81	7.86	623	18.43
Information	44	3.77	38	3.22	73	7.08	155	4.59
Own motion investigation	22	1.88	11	0.93	11	1.07	44	1.3
Ministerial investigation	0	0	0	0	0	0	0	0
Total	1168	100	1181	100	1031	100	3380	100

In addition to the above, 1 further contact is yet to be classified.

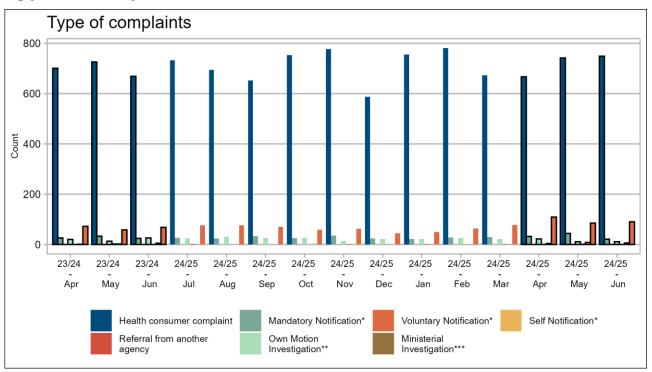
Contacts received through Genesys

A large portion of Resolve contacts are generated from calls to the OHO. To manage these calls the OHO utilises Genesys - a cloud-based telephony / contact system that provides the OHO with multiple contemporary functions to record and report on work beyond what is formally recorded in our complaints management systems. In short, for the same period (Q4) Genesys contacts amounted to 6437 which equates to approximately 47.5% of other contacts made with the OHO which do not necessitate being recorded in the Resolve system as a particular type of contact (as shown on the previous page).

The table below is a breakdown of the contacts recorded in Genesys.

Type of contact	April		Ma	May		June		otal
	Number	%	Number	%	Number	%	Number	%
General enquiry	369	17.4	371	17.0	334	15.7	1074	16.7
Health service complaint	509	24.0	576	26.4	519	24.3	1604	24.9
Notification	54	2.5	58	2.7	53	2.5	165	2.6
Prisoner phone line	224	10.5	312	14.3	255	12.0	791	12.3
Email	948	44.6	850	39.0	961	45.1	2759	42.9
Webchat	21	1.0	13	0.6	10	0.5	44	0.7
Total	2125	100	2180	100	2132	100	6437	100

Type of complaints



Type of complaints	Ap	oril	M	ay	Ju	ne	Q4 t	otal
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	667	79.98	742	83.28	749	85.4	2158	82.94
Mandatory notification*	32	3.84	44	4.94	21	2.39	97	3.73
Voluntary notification*	109	13.07	85	9.54	90	10.26	284	10.91
Self notification*	4	0.48	8	0.9	6	0.68	18	0.69
Referral from another agency	0	0	1	0.11	0	0	1	0.04
Own motion investigation**	22	2.64	11	1.23	11	1.25	44	1.69
Ministerial investigation***	0	0	0	0	0	0	0	0
Total	834	100	891	100	877	100	2602	100

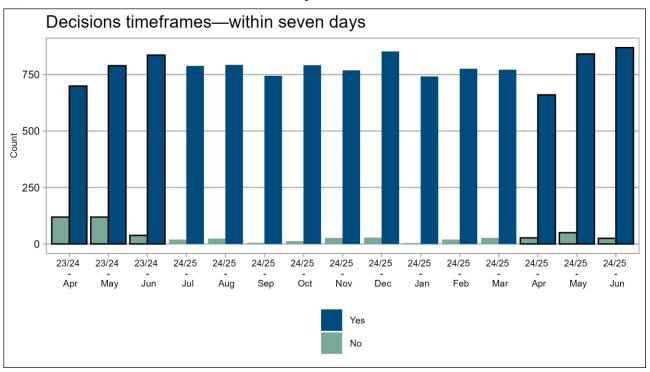
^{*} Notifications are matters defined under the Health Practitioner Regulation National Law (Queensland) and only relate to registered practitioners.

^{**} Own motion investigations refer to matters initiated by the Health Ombudsman, primarily following the receipt of information from the Queensland Police Service.

^{***} Ministerial investigations refer to matters initiated under s81 of the *Health Ombudsman Act 2013*.

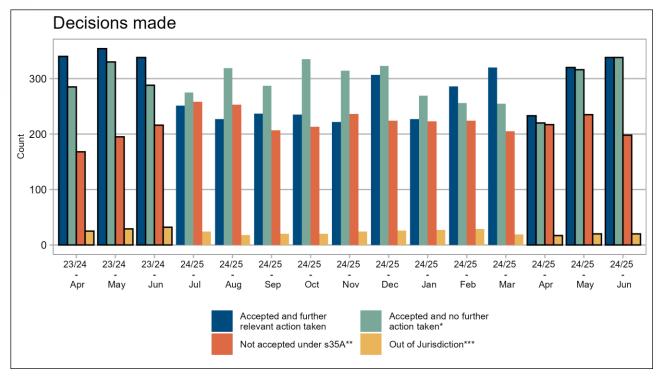
Complaint decisions

Decisions timeframes—within seven days



Decision made	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Yes	660	96.07	841	94.39	869	97.2	2370	95.87
No	27	3.93	50	5.61	25	2.8	102	4.13
Total	687	100	891	100	894	100	2472	100

Decisions made



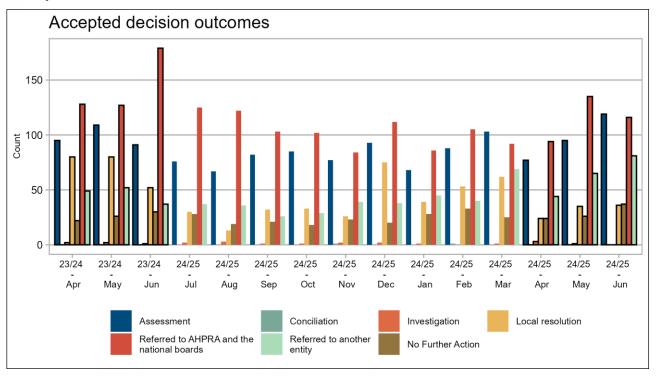
Number of decisions made	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Accepted and further relevant action taken	233	33.92	320	35.91	338	37.81	891	36.04
Accepted and no further action taken*	220	32.02	316	35.47	338	37.81	874	35.36
Not accepted under s35A**	217	31.59	235	26.37	198	22.15	650	26.29
Out of jurisdiction***	17	2.47	20	2.24	20	2.24	57	2.31
Total	687	100	891	100	894	100	2472	100

^{*} 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 December 2020, this category was reported as "Not Accepted".

^{**} 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.

^{***} Matters classified as out of jurisdiction refer to complaints registered with the OHO but cannot be dealt with under the *Health Ombudsman Act 2013*.

Accepted decision outcomes



Type of relevant action	April		May		Ju	ne	Q4 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	77	28.95	95	26.61	119	30.59	291	28.75
Conciliation	0	0	0	0	0	0	0	0
Investigation	3	1.13	1	0.28	0	0	4	0.4
Local resolution	24	9.02	35	9.8	36	9.25	95	9.39
Referred to AHPRA and the national boards	94	35.34	135	37.82	116	29.82	345	34.09
Referred to another entity	44	16.54	65	18.21	81	20.82	190	18.77
No further action	24	9.02	26	7.28	37	9.51	87	8.6
Total	266	100	357	100	389	100	1012	100

Accepted decisions may result in multiple issues and/or practitioners being identified, each requiring its own action. The data in the above table includes all identified issues/practitioners requiring action that were identified in the accepted complaints where further relevant action was taken (noted in category 'Accepted and further relevant action taken' included the previous 'Decisions made' table).

Health service complaints profile

Main issue categories raised in complaints

Issue	Aŗ	oril	M	ay	Ju	ne	Q4 t	otal
	Number	%	Number	%	Number	%	Number	%
Access	111	8.86	115	8.56	130	10.35	356	9.24
Code of conduct for Health Care Workers	19	1.52	25	1.86	44	3.5	88	2.28
Communication and Information	139	11.09	149	11.09	122	9.71	410	10.64
Consent	30	2.39	35	2.61	35	2.79	100	2.6
Discharge and Transfer Arrangements	27	2.15	21	1.56	16	1.27	64	1.66
Environment/Manag ement of Facility	32	2.55	55	4.1	29	2.31	116	3.01
Fees and Costs	33	2.63	48	3.57	45	3.58	126	3.27
Grievance Processes	54	4.31	50	3.72	65	5.18	169	4.39
Health Ombudsman Act 2013 Offence	0	0	1	0.07	1	0.08	2	0.05
Information	0	0	0	0	0	0	0	0
Medical Records	34	2.71	53	3.95	37	2.95	124	3.22
Medication	135	10.77	111	8.27	123	9.79	369	9.58
Professional Conduct	193	15.4	160	11.91	147	11.7	500	12.98
Professional Health	29	2.31	22	1.64	19	1.51	70	1.82
Professional Performance	390	31.13	471	35.07	418	33.28	1279	33.2
Reports/Certificates	27	2.15	27	2.01	25	1.99	79	2.05
Research/teaching/a ssessment	0	0	0	0	0	0	0	0
Total	1253	100	1343	100	1256	100	3852	100

These figures are based on the registration date of the issue recorded during the period. A single complaint can contain multiple issues. Reporting on all issues identified in complaints allows comprehensive monitoring of trends, which can in turn inform a range of health complaint management system functions, such as education and information provision.

Subcategories of professional performance issues raised in complaints

Issue	Aŗ	oril	М	May		ne	Q4 total	
	Number	%	Number	%	Number	%	Number	%
Competence	29	7.44	19	4.03	16	3.83	64	5
Coordination of treatment	34	8.72	36	7.64	38	9.09	108	8.44
Delay in treatment	16	4.1	30	6.37	31	7.42	77	6.02
Diagnosis	28	7.18	22	4.67	20	4.78	70	5.47
Inadequate care	49	12.56	67	14.23	43	10.29	159	12.43
Inadequate consultation	26	6.67	35	7.43	50	11.96	111	8.68
Inadequate prosthetic equipment	4	1.03	3	0.64	6	1.44	13	1.02
Inadequate treatment	98	25.13	152	32.27	120	28.71	370	28.93
Infection control	5	1.28	7	1.49	10	2.39	22	1.72
No or inappropriate referral	11	2.82	13	2.76	6	1.44	30	2.35
Public or private election	0	0	0	0	0	0	0	0
Rough and painful treatment	8	2.05	7	1.49	5	1.2	20	1.56
Teamwork or supervision	2	0.51	1	0.21	1	0.24	4	0.31
Unexpected treatment outcome or complications	67	17.18	54	11.46	51	12.2	172	13.45
Withdrawal of treatment	3	0.77	8	1.7	6	1.44	17	1.33
Wrong or inappropriate treatment	10	2.56	17	3.61	15	3.59	42	3.28
Total	390	100	471	100	418	100	1279	100

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

Subcategories of professional conduct issues raised in complaints

Issue	Aŗ	oril	M	ay	Ju	ne	Q4 t	otal
	Number	%	Number	%	Number	%	Number	%
Annual declaration not completed or completed incorrectly	0	0	0	0	0	0	0	0
Assault	10	5.18	5	3.12	4	2.72	19	3.8
Attendance	1	0.52	0	0	0	0	1	0.2
Boundary violation	7	3.63	3	1.88	3	2.04	13	2.6
Breach of condition	4	2.07	2	1.25	4	2.72	10	2
Conflict of interest	6	3.11	3	1.88	10	6.8	19	3.8
Discriminatory conduct	8	4.15	5	3.12	2	1.36	15	3
Emergency treatment not provided	2	1.04	1	0.62	0	0	3	0.6
Excessive treatment	2	1.04	1	0.62	1	0.68	4	0.8
Experimental treatment	1	0.52	0	0	0	0	1	0.2
False or misleading statements and or information	5	2.59	3	1.88	2	1.36	10	2
Financial fraud	5	2.59	7	4.38	4	2.72	16	3.2
Illegal practice	41	21.24	38	23.75	30	20.41	109	21.8
Inappropriate behaviour	28	14.51	30	18.75	27	18.37	85	17
Inappropriate collection, use or disclosure of information	30	15.54	23	14.37	21	14.29	74	14.8
Medico-legal conduct	0	0	0	0	2	1.36	2	0.4
Misrepresentation of qualifications	4	2.07	8	5	1	0.68	13	2.6
National Law breach	9	4.66	6	3.75	6	4.08	21	4.2
National Law offence	15	7.77	11	6.88	14	9.52	40	8
Offence by student	0	0	0	0	0	0	0	0
Response to adverse event	2	1.04	3	1.88	2	1.36	7	1.4
Sexual misconduct	13	6.74	11	6.88	14	9.52	38	7.6
Total	193	100	160	100	147	100	500	100

Subcategories of professional health issues raised in complaints

Issue	April		Ma	May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%	
Mental impairment - cognitive impairment	0	0	0	0	1	5.26	1	1.43	
Mental impairment - mental illness	11	37.93	11	50	11	57.89	33	47.14	
Mental impairment - other	0	0	1	4.55	0	0	1	1.43	
Mental impairment - substance misuse, abuse or addiction	16	55.17	10	45.45	6	31.58	32	45.71	
Physical impairment	2	6.9	0	0	1	5.26	3	4.29	
Total	29	100	22	100	19	100	70	100	

Profile of complaints about health practitioners

	Number of practitioners Number of																		
Practitioner type	practitioners identified in complaints	Access		and Information	Consent	Discharge and Transfer Arrangements	Management		Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Aboriginal and Torres Strait Islander health practitioner	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese Medicine Practitioner	2	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Chiropractor	15	-	-	1	1	-	-	-	-	-	-	-	-	10	1	5	-	-	18
Dental practitioner	59	1	-	6	3	-	2	3	2	-	-	1	1	12	3	52	-	-	86
Medical Practitioner	658	19	1	125	35	9	7	23	15	-	-	35	145	134	14	365	31	-	958
Medical Radiation Practitioner	4	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	-	-	5
Midwife	18	-	-	1	-	-	-	-	-	-	-	-	1	9	-	12	-	-	23
Occupational Therapist	192	1	2	11	5	1	6	-	2	-	-	7	18	142	33	45	2	-	275
Optometrist	24	-	-	2	1	-	-	2	1	-	-	1	-	10	2	4	7	-	30
Oral Health Therapist	6	-	-	1	-	-	-	1	-	-	-	1	-	2	1	5	-	-	11
Osteopath	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paramedic	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacist	18	-	-	1	-	-	-	-	-	-	-	-	-	18	4	5	-	-	28
Physiotherapist	35	-	-	5	-	-	-	-	1	-	-	-	21	16	1	1	-	-	45
Podiatrist / Chiropodist	27	-	-	1	1	-	-	1	1	1	-	1	-	16	2	9	-	-	33
Psychologist	3	1	-	1	-	-	-	2	-	-	-	-	-	1	-	2	-	-	7
Nurse	63	1	3	8	1	-	-	4	1	-	-	11	-	36	4	23	12	-	104
Student practitioner	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown practitioner	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unregistered practitioner	90	-	69	13	2	-	1	3	1	1	-	2	3	30	4	22	2	-	153
Total	1214	23	75	176	49	10	16	39	24	2	-	59	189	440	70	552	54	-	1778

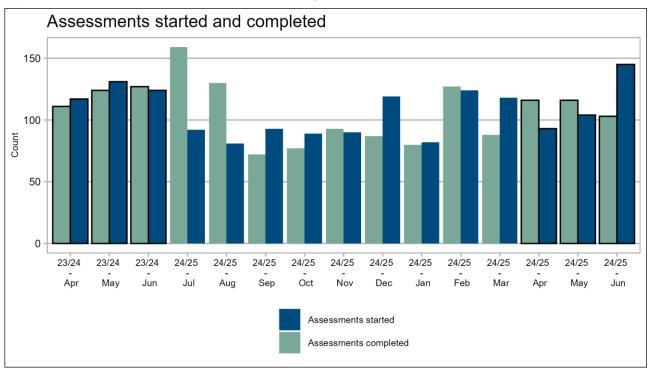
Profile of complaints about health service organisations

	Number of							Number and	type of issue	s identified in o	complain	ts about h	ealth practitio	ners					
Practitioner type	practitioners identified in complaints	Access		Communication and Information	Consent	Discharge and Transfer Arrangements	Environment/ Management of Facility		Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Administrative Service	3	-	-	-	-	-	-	1	2	-	-	-	-	-	-	-	1	-	4
Aged Care Facility	15	-	-	2	-	-	2	-	2	-	-	-	-	1	-	12	-	-	19
Allied Health Service	23	2	-	6	_	-	3	7	3	-	-	-	-	4	-	4	1	_	30
Ambulance Service	11	3	-	3	1	-	-	1	4	-	-	-	-	1	-	3	-	-	16
Area Health Services	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Community Health Service	28	7	1	8	1	-	4	-	1	-	-	1	5	1	-	10	-	-	39
Correctional Facility	13	12	-	7	-	1	1	-	2	-	-	2	11	-	-	12	-	-	48
Dental Service	45	5	-	5	1	-	6	9	8	-	-	1	1	2	-	25	1	-	64
Environmental Health Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	_
Health Education Service	0		-	-	-	-	_		-	-	_	-	-	-	-	-	-	-	-
Health Information Service	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Health Promotion Service	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Health Service District	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	_
Hospital & Health Service	13	4	-	-	-	-	2	3	2	-	-	-	-	1	-	6	-	-	18
Laboratory Service	16	1	-	1	-	-	3	7	1	-	-	-	-	1	-	4	1	-	19
Licensed Day Hospital	0	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Licensed Private Hospital	35	2	_	7	2	4	7	8	11	_	_	2	3	3	_	25	_	_	74
Medical Centre	136	19	1	24	2	1	15	18	27	-	-	22	16	5	-	22	7	-	179
Mental Health Service	41	3	1	15	10	5	6	-	3	-	-	5	8	3	-	22	4	-	85
Nursing Service	1	-	-	-	-	-	1	-	1	-	-	-	1	-	-	1	-	-	4
Optical Store	5	-	-	-	-	-	1	1	-	-	-	-	-	-	-	3	-	-	5
Other Government Department	11	3	-	4	_	-	3	1	1	-	_	1	-	-	-	5	-	-	18
Other Support Service	16	1	1	3	_	_	5	1	-	_	_	1	1	-	-	6	_	_	19
Paramedical Service	0	_	-	-	-	_	-	-	-	-	-	_	-	-	-	-	-	_	_
Parent Organisation	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmaceutical Service	50	1	-	6	-	-	1	6	4	-	_	1	33	2	-	4	1	-	59
Private Organisation	35	1	4	7	-	-	5	7	5	-	-	4	3	5	-	8	-	-	49
Public Health Service	16	5	1	4	-	-	-	-	1	-	-	-	1	-	-	7	1	-	20
Public Hospital	55	26	2	25	13	23	19	3	20	-	-	11	12	16	-	51	3	-	224
Registration Board Residential Care	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Service	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Social Work Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Specialised Health Service	39	4	1	9	1	-	3	7	7	-	-	-	3	4	-	12	2	-	53
Welfare Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

	Number of						ļ	Number and	type of issue	es identified in c	omplain	its about h	ealth practitio	ners					
Practitioner type	practitioners identified in complaints	Access		and Information		Discharge and Transfer Arrangements	Management			Health Ombudsman Act 2013 Offence				Professional Conduct	Professional Health	Professional Performance		Research/te aching/asse ssment	
Unknown Organisation Type	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Total	611	101	13	137	31	34	87	80	105	-	-	51	98	49	-	243	22	-	1051

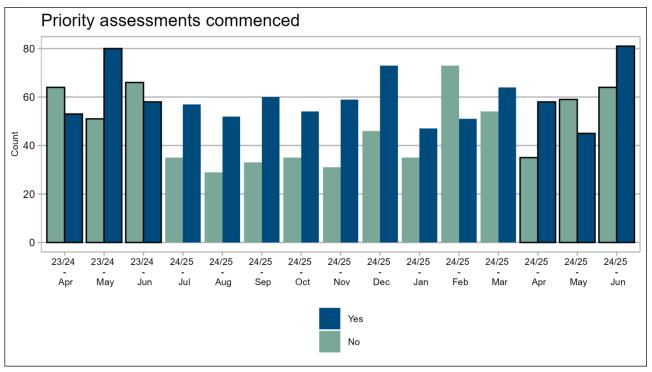
Assessment

Assessments started and completed



Assessments this quarter	April	May	June	Q4 total
Assessments started	93	104	145	342
Assessments completed	116	116	103	335

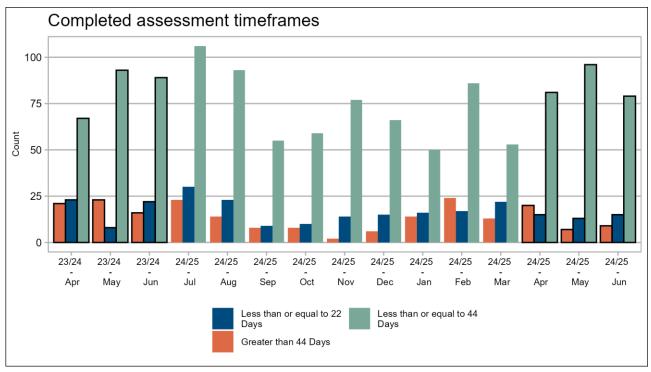
Assessments started by prioritisation



Assessment timeframes	Aŗ	oril	Ma	ay	Ju	ne	Q4 t	otal
	Number	%	Number	%	Number	%	Number	%
Priority assessment*	58	62.37	45	43.27	81	55.86	184	53.8
Non-priority assessment	35	37.63	59	56.73	64	44.14	158	46.2
Total	93	100	104	100	145	100	342	100

^{*} A priority matter is the term used for the management of serious and high-risk complaints which can include significant conduct / performance concerns, serious clinical outcomes and systemic issues that may pose ongoing risks to patient safety. Particular complaint vulnerabilities and cultural sensitivities are also factors in determining a priority matter.

Completed assessment timeframes



Assessment timeframes*	Ap	oril	M	ay	Ju	ne	Q4 t	otal
	Number	%	Number	%	Number	%	Number	%
Less than or equal to 22 days	15	12.93	13	11.21	15	14.56	43	12.84
Less than or equal to 44 days	81	69.83	96	82.76	79	76.7	256	76.42
Greater than 44 days	20	17.24	7	6.03	9	8.74	36	10.75
Total	116	100	116	100	103	100	335	100

^{*} Assessments can be completed within 44 business days when granted an extension as a result of legislated requirements being met.

Assessment decisions

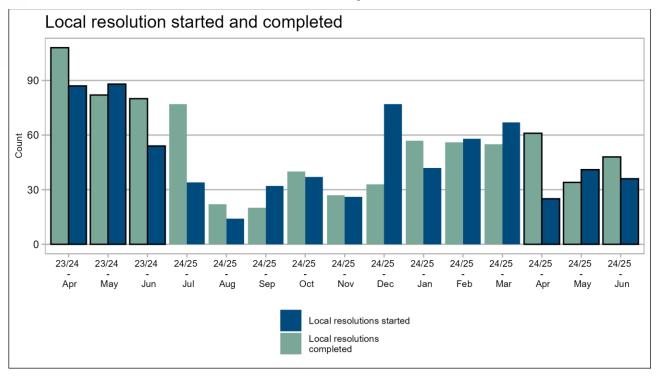
Type of relevant action*	Ар	oril	M	ay	Ju	ne	Q4 t	otal
	Number	%	Number	%	Number	%	Number	%
Investigation	17	14.29	17	14.17	10	9.35	44	12.72
Conciliation	4	3.36	5	4.17	8	7.48	17	4.91
Local resolution	0	0	0	0	1	0.93	1	0.29
Director of Proceedings	0	0	0	0	0	0	0	0
Referred to AHPRA AND another entity	3	2.52	5	4.17	2	1.87	10	2.89
Referred to AHPRA and the national boards	15	12.61	11	9.17	12	11.21	38	10.98
Referred to another entity	13	10.92	15	12.5	12	11.21	40	11.56
Referral entity undetermined at time of reporting**	0	0	0	0	0	0	0	0
No further action	67	56.3	67	55.83	62	57.94	196	56.65
Total	119	100	120	100	107	100	346	100

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

^{**} For assessments finished near the date of data capture, an outcome of Referral may have been recorded with no specific referral entity listed.

Local resolution

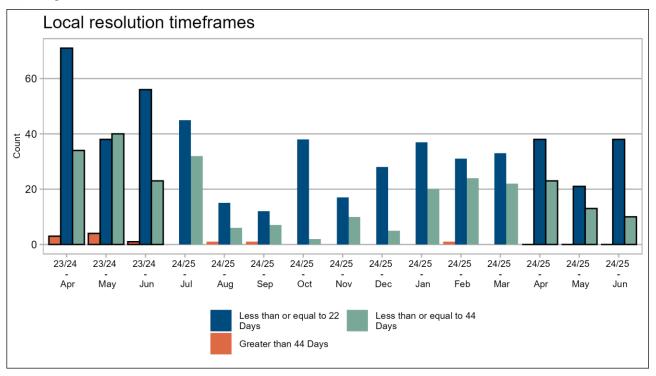
Local resolutions started and completed



Local resolutions this quarter*	April	May	June	Q4 total
Local resolutions started	25	41	36	102
Local resolutions completed	61	34	48	143

^{*} 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.

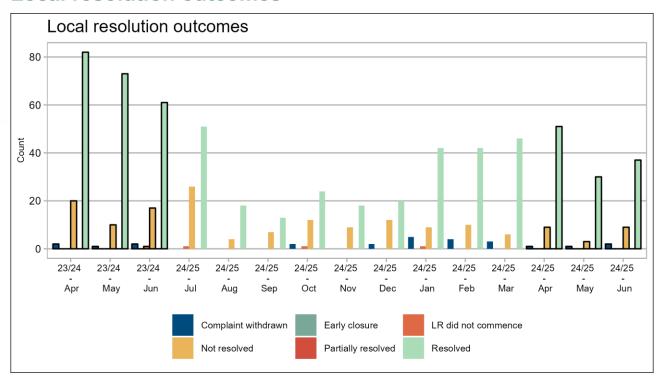
Completed local resolution timeframes



Local resolution timeframe	Ар	oril	Ma	ay	Ju	ne	Q4 1	otal
	Number	%	Number	%	Number	%	Number	%
Less than or equal to 22 days	38	62.3	21	61.76	38	79.17	97	67.83
Less than or equal to 44 days	23	37.7	13	38.24	10	20.83	46	32.17
Greater than 44 days	0	0	0	0	0	0	0	0
Total	61	100	34	100	48	100	143	100

Local Resolutions can be completed within 44 business when granted an extension as a result of legislated requirements being met.

Local resolution outcomes



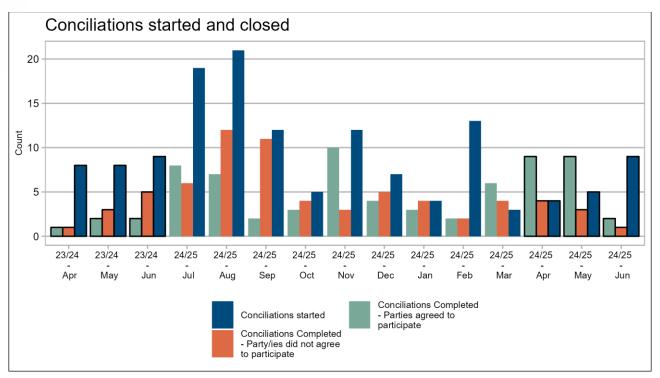
Local resolution outcomes	Ар	ril	May	/	Jun	e	Q4 to	otal
	Number	%	Number	%	Number	%	Number	%
Complaint withdrawn*	1	1.64	1	2.94	2	4.17	4	2.8
Early closure	0	0	0	0	0	0	0	0
Local resolution did not commence**	0	0	0	0	0	0	0	0
Not resolved	9	14.75	3	8.82	9	18.75	21	14.69
Partially resolved	0	0	0	0	0	0	0	0
Resolved	51	83.61	30	88.24	37	77.08	118	82.52
Total	61	100	34	100	48	100	143	100

^{*} 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.

Conciliation

Conciliations started and closed

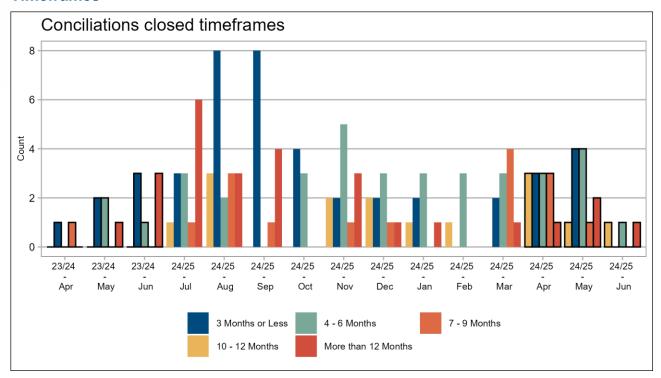


Conciliations this quarter	April	May	June	Q4 total
Conciliations started*	4	5	9	18
Conciliations Completed - Parties agreed to participate	9	9	2	20
Conciliations Completed - Party/ies did not agree to participate	4	3	1	8

^{* &#}x27;Conciliations started' includes all matters—including matters where agreement to participate has or has not been reached or the decision is pending—that entered the conciliation workflow during the reporting period. Similarly, 'Conciliations closed' are all matters that were closed during the reporting period, whether due to parties not agreeing to participate or the matter being closed after completing the conciliation process. Closed conciliations differ from completed conciliations below, as completed conciliations only include matters where both parties initially agreed to participate in the conciliation process.

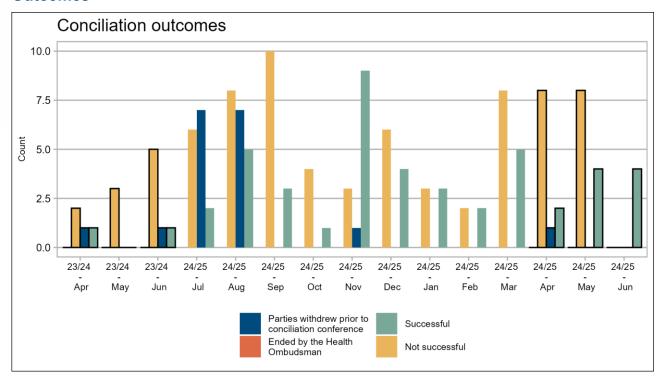
Completed conciliations

Timeframes



Conciliations Closed	Ар	oril	Ma	ay	Ju	ne	Q4 1	otal
	Number	%	Number	%	Number	%	Number	%
3 months or Less	3	23.08	4	33.33	0	0	7	25
4 - 6 months	3	23.08	4	33.33	1	33.33	8	28.57
7 - 9 months	3	23.08	1	8.33	0	0	4	14.29
10 - 12 months	3	23.08	1	8.33	1	33.33	5	17.86
12 months or More	1	7.69	2	16.67	1	33.33	4	14.29
Total	13	100	12	100	3	100	28	100

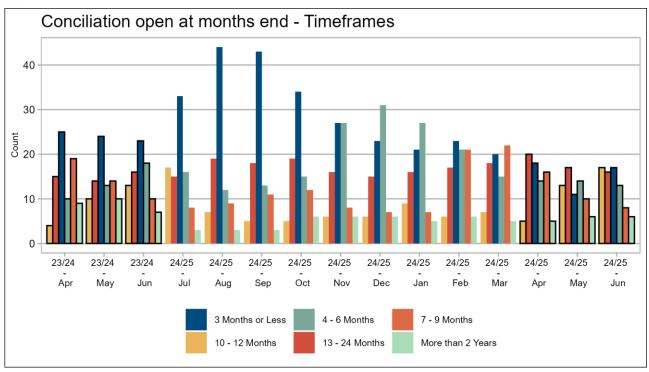
Outcomes



Conciliation outcomes	April		Мау		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Parties withdrew prior to conciliation conference	1	9.09	0	0	0	0	1	3.7
Successful	2	18.18	4	33.33	4	100	10	37.04
Ended by the Health Ombudsman	0	0	0	0	0	0	0	0
Not successful	8	72.73	8	66.67	0	0	16	59.26
Total	11	100	12	100	4	100	27	100

The data above relates to matters where parties initially agreed to participate in conciliation. After agreeing, the conciliation process was completed with the matter either being successful or not successful—or in some instances, the Health Ombudsman may end a conciliation or parties involved may withdraw from the process prior to conciliation occurring. 'Completed conciliations' differ from 'closed conciliations'—in the table on page 24—in that they only relate to matters where parties agreed to participate in conciliation.

Open conciliation timeframes



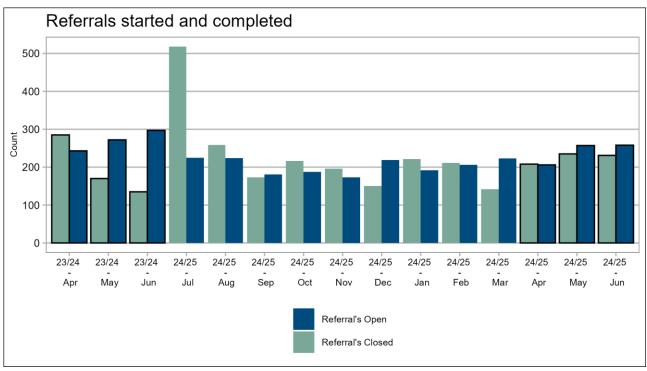
Open at month's end timeframes	April		М	ay	June		
	Number	%	Number	%	Number	%	
3 months or less	18	23.08	11	15.49	17	22.08	
4 - 6 months	14	17.95	14	19.72	13	16.88	
7 - 9 months	16	20.51	10	14.08	8	10.39	
10 - 12 months	5	6.41	13	18.31	17	22.08	
13 - 24 Months	20	25.64	17	23.94	16	20.78	
More than 2 Years	5	6.41	6	8.45	6	7.79	
Total	78	100	71	100	77	100	

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.

Complaint management (Referrals)

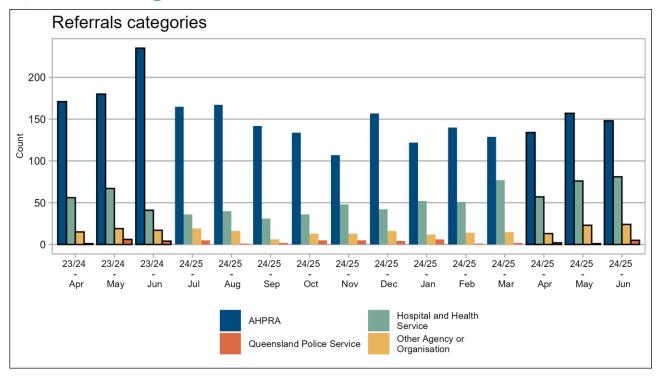
As OHO is the single point of entry for health service complaints in Queensland effective referral coordination and monitoring is critical. Under the Act, referrals to Ahpra are conducted under s91 either following joint consideration or at other points throughout the regulatory / complaints process. We also make referrals to other entities (State and Commonwealth) conducted under s92. These matters are monitored and the s93 responses from the entities are analysed by the OHO from a safety and quality oversight perspective.

Referrals open & closed



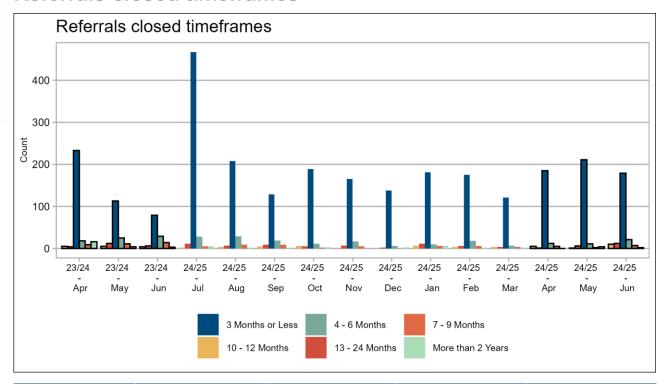
Referrals	April	Мау	June	Q4 total
Referrals open	206	257	258	721
Referrals closed	208	235	231	674

Referrals categories



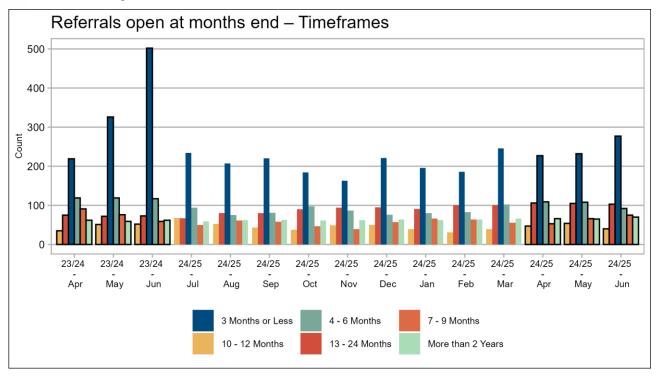
Referrals categories	April		Мау		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Ahpra	134	65.05	157	61.09	148	57.36	439	60.89
Hospital and Health Service	57	27.67	76	29.57	81	31.4	214	29.68
Queensland Police Service	2	0.97	1	0.39	5	1.94	8	1.11
Other agency or organisation	13	6.31	23	8.95	24	9.3	60	8.32
Total	206	100	257	100	258	100	721	100

Referrals closed timeframes



	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
3 months or less	185	88.94	211	89.79	179	77.49	575	85.31
4 - 6 months	12	5.77	11	4.68	21	9.09	44	6.53
7 - 9 months	5	2.4	2	0.85	7	3.03	14	2.08
10 - 12 months	5	2.4	1	0.43	10	4.33	16	2.37
13 - 24 Months	1	0.48	6	2.55	12	5.19	19	2.82
More than 2 Years	0	0	4	1.7	2	0.87	6	0.89
Total	208	100	235	100	231	100	674	100

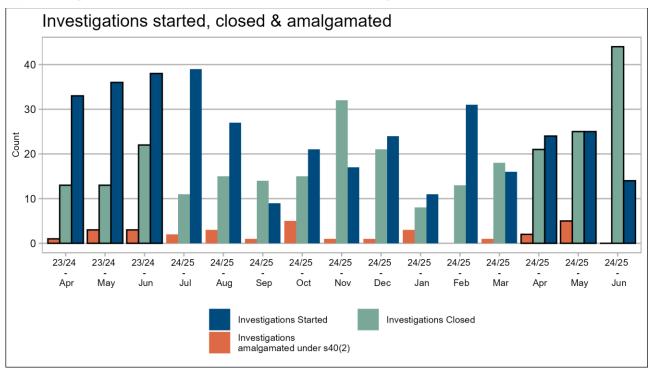
Referrals open timeframes



Open at month's end timeframes	April		M	ay	June		
	Number	%	Number	%	Number	%	
3 Months or less	227	37.34	232	36.83	277	42.16	
4 - 6 months	109	17.93	108	17.14	92	14	
7 - 9 months	53	8.72	66	10.48	75	11.42	
10 - 12 months	47	7.73	54	8.57	40	6.09	
13 - 24 Months	106	17.43	105	16.67	103	15.68	
More than 2 Years	66	10.86	65	10.32	70	10.65	
Total	608	100	630	100	657	100	

Investigation

Investigations started, closed & amalgamated

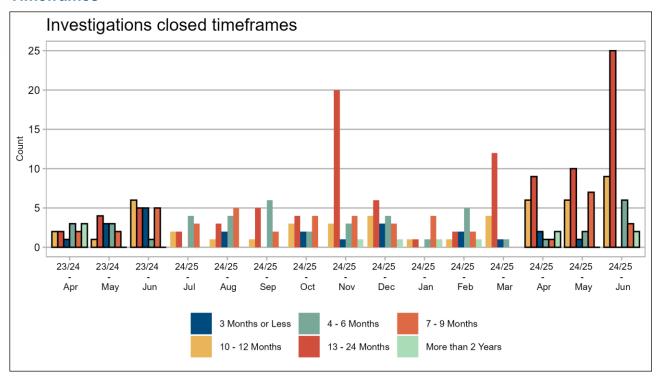


Investigations this quarter	April	May	June	Q4 total
Investigations started*	24	25	14	63
Investigations closed	21	25	44	90
Investigations amalgamated under s40(2)	2	5	0	7

^{*} The number of investigations started in the quarter may be higher than the number referred to investigations due to the number of matters brought to the Health Ombudsman's attention by means other than through a health service complaint or notification.

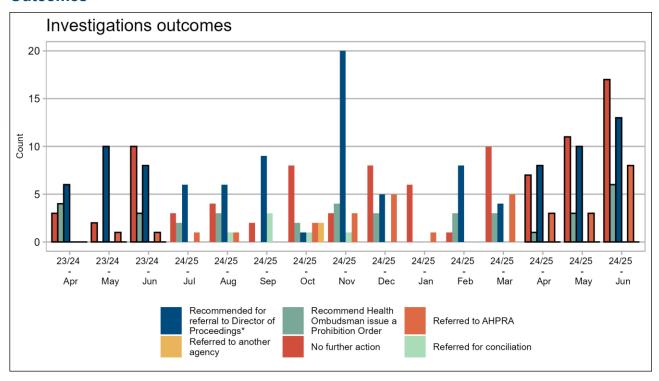
Closed investigations

Timeframes



Closed investigation timeframes	April		Мау		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
3 months or less	2	9.52	1	3.85	0	0	3	3.26
4 - 6 months	1	4.76	2	7.69	6	13.33	9	9.78
7 - 9 months	1	4.76	7	26.92	3	6.67	11	11.96
10 - 12 months	6	28.57	6	23.08	9	20	21	22.83
13 - 24 months	9	42.86	10	38.46	25	55.56	44	47.83
More than 2 years	2	9.52	0	0	2	4.44	4	4.35
Total	21	100	26	100	45	100	92	100

Outcomes



Investigation outcomes*	April		May		June		Q4 total	
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings**	8	42.11	10	37.04	13	29.55	31	34.44
Recommend Health Ombudsman issue a Prohibition Order	1	5.26	3	11.11	6	13.64	10	11.11
Referred to AHPRA	3	15.79	3	11.11	8	18.18	14	15.56
Referred to another agency	0	0	0	0	0	0	0	0
No further action	7	36.84	11	40.74	17	38.64	35	38.89
Referred for conciliation	0	0	0	0	0	0	0	0
Total	19	100	27	100	44	100	90	100

^{*} 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.

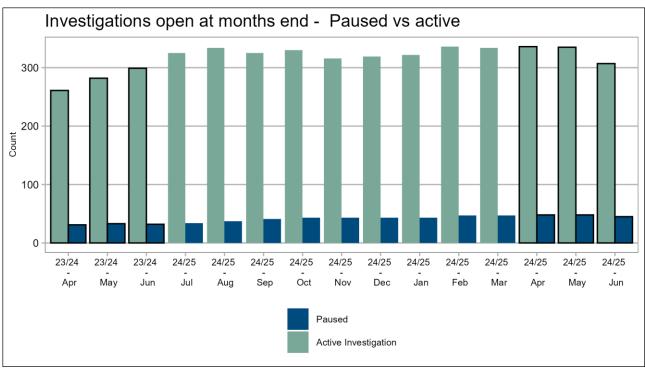
^{**} Matters determined suitable for referral to the Director of Proceedings at the conclusion of an investigation are sent to the Health Ombudsman for consideration and determination on whether referral to the Director of Proceedings is appropriate.

Open investigations

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

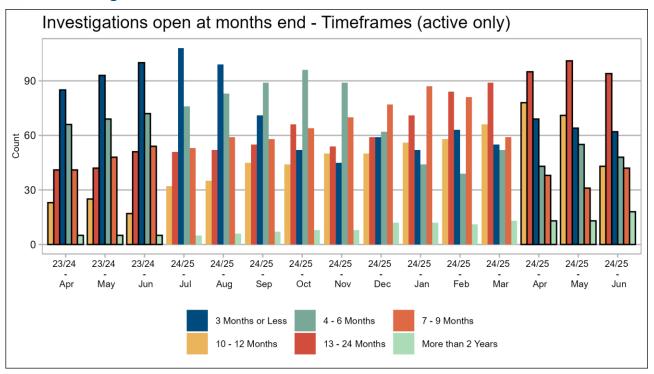
Active investigations are being currently investigated, while paused investigations are not able to be investigated until such time as another agency—such as the Queensland Police Service or the Coroner's Court of Queensland—concludes their own processes. Despite being unable to progress paused investigations,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

Active & paused investigations



	April		May		June	
	Number	%	Number	%	Number	%
Paused	48	12.5	48	12.53	45	12.78
Active	336	87.5	335	87.47	307	87.22
Total	384	100	383	100	352	100

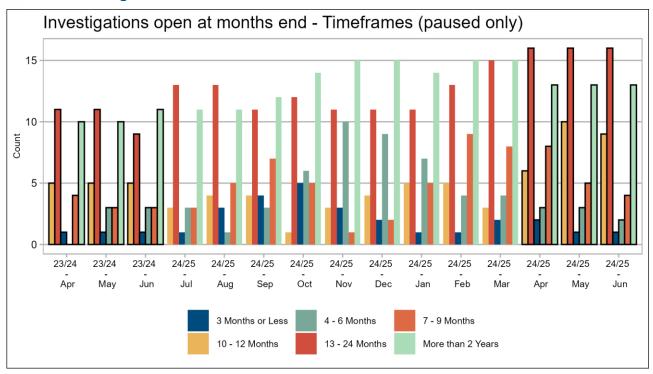
Active investigation timeframes



	April		Мау		June	
	Number	%	Number	%	Number	%
3 months or less	69	20.54	64	19.1	62	20.2
4 - 6 months	43	12.8	55	16.42	48	15.64
7 - 9 months	38	11.31	31	9.25	42	13.68
10 - 12 months	78	23.21	71	21.19	43	14.01
13 - 24 months	95	28.27	101	30.15	94	30.62
More than 2 years	13	3.87	13	3.88	18	5.86
Total	336	100	335	100	307	100

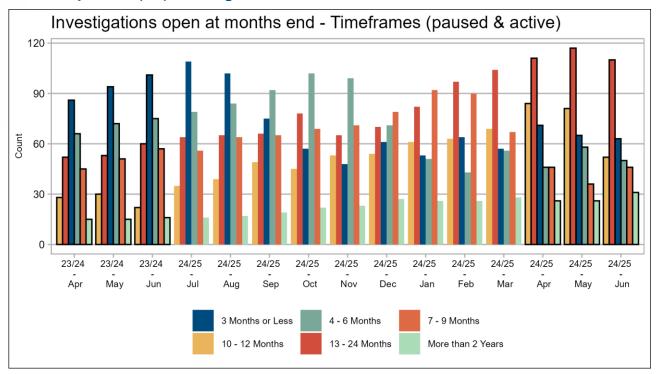
All investigations that have been open for 12 months or more are published on our investigations register, available on our website (www.oho.qld.gov.au/investigations/investigations-register).

Paused investigation timeframes



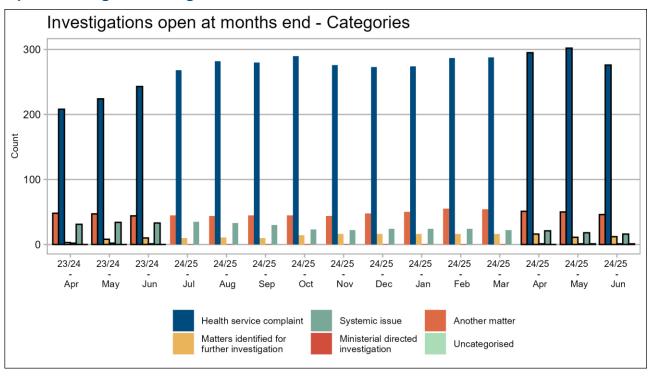
	April		May		June	
	Number	%	Number	%	Number	%
3 months or less	2	4.17	1	2.08	1	2.22
4 - 6 months	3	6.25	3	6.25	2	4.44
7 - 9 months	8	16.67	5	10.42	4	8.89
10 - 12 months	6	12.5	10	20.83	9	20
13 - 24 months	16	33.33	16	33.33	16	35.56
More than 2 years	13	27.08	13	27.08	13	28.89
Total	48	100	48	100	45	100

Active & paused (All) investigation timeframes



	April		May		June	
	Number	%	Number	%	Number	%
3 months or less	71	18.49	65	16.97	63	17.9
4 - 6 months	46	11.98	58	15.14	50	14.2
7 - 9 months	46	11.98	36	9.4	46	13.07
10 - 12 months	84	21.88	81	21.15	52	14.77
13 - 24 months	111	28.91	117	30.55	110	31.25
More than 2 years	26	6.77	26	6.79	31	8.81
Total	384	100	383	100	352	100

Open investigation categories



	April		May		June	
	Number	%	Number	%	Number	%
Health service complaint	295	76.82	302	78.85	276	78.41
Systemic issue*	21	5.47	18	4.7	16	4.55
Another matter**	51	13.28	50	13.05	46	13.07
Matters identified for further investigation***	16	4.17	11	2.87	12	3.41
Ministerial directed investigation	1	0.26	1	0.26	1	0.28
Uncategorised	0	0	1	0.26	1	0.28
Total	384	100	383	100	352	100

^{*} Matters involving a systemic issue relating to the provision of a health service, including an issue affecting the quality of a health service.

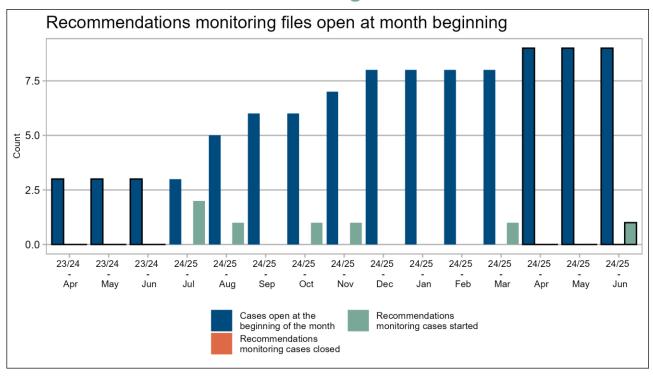
^{**} Matters brought to the Health Ombudsman's attention by means other than through a health service complaint or notification which warrant investigation. These are commonly referred to internally as 'own motion' investigations.

^{***} Matters referred for further investigation by the Health Ombudsman under s105 of the Act following referral to the Director of Proceedings.

Monitoring investigation recommendations

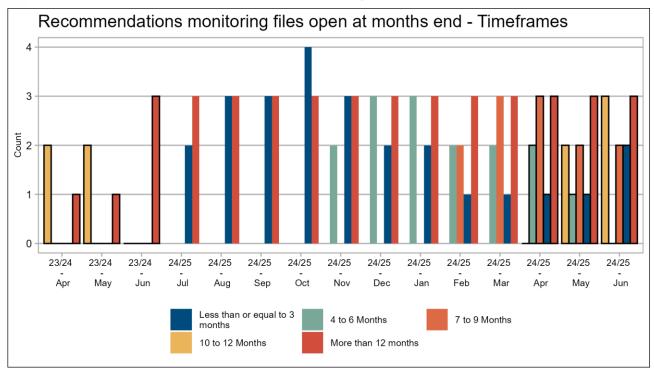
At the completion of certain investigations, the Health Ombudsman makes recommendations to health services for how they can improve service delivery and/or prevent the issues identified in the investigation from happening again. In these instances, the OHO puts in place a recommendation monitoring program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

OHO recommendations monitoring



OHO monitoring cases	April	May	June
Cases open at the beginning of the month	9	9	9
Recommendations monitoring cases started	0	0	1
Recommendations monitoring cases closed	0	0	0

Open recommendations monitoring case timeframes



Monitoring case timeframes	April		May		June	
	Number	%	Number	%	Number	%
3 months or less	1	11.11	1	11.11	2	20
4 - 6 months	2	22.22	1	11.11	0	0
7 - 9 months	3	33.33	2	22.22	2	20
10 - 12 months	0	0	2	22.22	3	30
12 months or more	3	33.33	3	33.33	3	30
Total	9	100	9	100	10	100

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	Number	Percentage
Chiropractor	3 ¹	9.1%
Medical Practitioner	11 ²	33.3%
Midwife	1	3.1%
Paramedic	2	6.0%
Pharmacist	4 ³	12.2%
Physiotherapist	1	3.1%
Podiatrist	24	6.0%
Psychologist	2	6.0%
Registered Nurse	7	21.2%
Total	33	100%

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 may differ from the Investigation outcomes' figures elsewhere in this report.

Matters currently with the Director of Proceedings by practitioner type

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

Practitioner type	Number	Percentage
Chiropractor	4	6.9%
Medical Practitioner ⁵	18	31.1%
Midwife	1	1.8%
Paramedic	1	1.8%
Pharmacist	9	15.5%

¹ 2 of these matters relate to the same practitioner.

² 1 of the these matters were referred back to DoP after stated information obtained.

³ These 4 matters relates to 2 different practitioners all of which were referred back to DoP after further investigation.

⁴ Both matters relate to the same practitioner.

⁵ This includes all medical practitioners including those with specialist registrations.

Practitioner type	Number	Percentage
Physiotherapist	1	1.8%
Podiatrist	2	3.5%
Psychologist	6	10.4%
Registered Nurse	16	27.6%
Total	58	100%

Outcomes of matters reviewed by the Director of Proceedings

Matters filed in the Queensland Civil and Administrative Tribunal

Practitioner type	Number	Percentage
Medical Practitioner	4 ¹	25%
Midwife	1	6.2%
Paramedic	2	12.5%
Pharmacist	5	31.3%
Registered Nurse	4	25%
Total	16	100%

Matters referred back to the Health Ombudsman

Practitioner type	Number	Percentage
Medical Practitioner	18 ²	85.8%
Registered Nurse	3	14.3%
Total	21	100%

Queensland Civil and Administrative Tribunal disciplinary matters

Matters open in the Queensland Civil and Administrative Tribunal

Practitioner type	Number	Percentage
Chinese Medical Practitioner	1	1.6%
Chiropractor	1	1.6%
Medical Practitioner	20	31.3%
Midwife	2	3.1%
Obstetrician & Gynaecologist	1	1.6%
Osteopath	1	1.6%
Paramedic	6	9.4%

¹ 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.

² 16x matters related to the same Practitioner.

Practitioner type	Number	Percentage
Pharmacist	4	6.3%
Physiotherapist	1	1.6%
Psychologist	6	9.4%
Registered Nurse	21	32.8%
Total	64	100%

Outcomes of Queensland Civil and Administrative disciplinary matters

Queensland Civil and Administrative Tribunal decisions

Practitioner type	Number
Chinese Medical Practitioner	1
Medical Practitioner	4
Midwife	1
Pharmacist	21
Physiotherapist	1
Psychologist	1
Registered Nurse	4
Total QCAT Decisions	14

Matters withdrawn

Practitioner type	Number	
Massage Therapist	12	
Total matters withdrawn	1	

Decisions on matters referred to the Queensland Civil and Administrative Tribunal

There have been eight 13 decisions made on matters referred to QCAT during the quarter.

Date of Decision	Matter	Details of QCAT Decision
09-Apr-25	OCR143-24	1. Professional Misconduct
		2. Reprimand
10-Apr-25	OCR128-24	1. Unprofessional Conduct
		2. Reprimand
		3. No order as to costs
11-Apr-25	OCR130-24	1. Professional Misconduct
		2. Reprimand
		3. Registration cancelled
		4. Disqualified from applying for registration for 24 months from
		date of decision
		5. No order as to costs
14-Apr-25	OCR046-24	1. Non-publication order is affirmed
r -		2. Professional Misconduct

¹ These 2 matters related to the same Practitioner where one decision was given for both matters.

² Unregistered Massage Therapist – dismissed by QCAT after undertaking complied with.

Date of Decision	Matter	Details of QCAT Decision
		3. Reprimand
		4. Disqualified from applying for registration for a period of 2 years
		5. No order as to costs
28-Apr-25	OCR144-24	Professional Misconduct
20 Apr 20	0011144 24	2. Reprimand
		3. Registration cancelled
		4. Disqualified from applying for registration for 6 years from date
		of order
		5. Prohibited from providing any health service until obtain
		registration
		6. IRA imposed by the HO on 27/08/24 is set aside
		7. IPO issued by the HO on 27/08/24 is set aside
		8. No order as to costs
06-May-25	OCR048-24	The non-publication order made by the Deputy President on 16
•		December 2024 is affirmed on a permanent basis
		1. Professional Misconduct (allegation 1)
		2. Reprimand
		3. Registration suspended for a period of 3 months to commence
		on 6 June 2025
		4. Each party must bear their own costs of the proceedings
22-May-25	OCR121-24	Professional Misconduct (allegation 1)
		2. Unprofessional Conduct (allegation 2)
		3. Reprimand
		4. No order as to costs
04-Jun-25	OCR146-21	1. Professional Misconduct
		2. Reprimand
		3. Registration cancelled
		4. Disqualified from applying for registration for 2 years from date
		of order
		5. No order as to costs
05-Jun-25	OCR244-24	Professional Misconduct
		2. Reprimand
		3. No order as to costs
11-Jun-25	OCR094-23	1. Pursuant to s93(1)(a) of the QCAT Act, Respondent did not
	OCR294-23	attend hearing and Tribunal is satisfied that he has been given
		notice of hearing
		2. Tribunal will hear and decide matter in absence of the
		respondent
		3. Non-publication order - patients and health practitioners
		referred to in the material
		4. Any material affected by NPO not be copied or inspected with
		an order of the Tribunal
		5. Professional Misconduct
		6. Reprimand 7. Registration cancelled
		8. Disqualified from applying for registration not before 11 August 2027
		9. IRA imposed by the HO is set aside
		10. Each party must bear their own costs
		Professional Misconduct
13-Jun-25	OCR200-24	Reprimand
		3. No order as to costs
18-Jun-25	OCR157-24	Professional Misconduct Poprimand
		2. Reprimand
		3. No order as to costs
18-Jun-25	OCR021-24	Professional Misconduct Operation
		2. Caution

Date of Decision	Matter	Details of QCAT Decision
		3. No order as to costs

Decisions on immediate action reviews

There were 0 decisions made on immediate action reviews in Q4 2024-25.

Immediate action

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

- that a practitioner's health, conduct or performance poses a serious risk to the health and safety of the public
- that action is in the public interest.¹

Immediate registration actions

Immediate registration actions apply only to registered health practitioners and may result in the Health Ombudsman issuing a suspension, imposing conditions, or accepting an undertaking from a registered health practitioner.

The Health Ombudsman took initial immediate registration action in relation to 8 registered health practitioners in Q4 2024-25.

Immediate registration actions - Initiation

Practitioner type	Number	Month	Action taken	Reason/s for taking action	
				Public Interest	Serious Risk
Medical Practitioner	2	Apr	Suspension	✓	✓
Nurse	1	Apr	Conditions		✓
Nurse	1	May	Conditions	✓	✓
Nurse	1	May	Undertakings		✓
Nurse	3	Jun	Conditions		✓

Immediate registration actions - Variation

A health practitioner may apply to the Health Ombudsman to vary an immediate action if there is a material change in relation to the matter giving rise to the immediate action. The Health Ombudsman may also initiate a decision to vary an immediate action if, at any time after a decision to take immediate action, there is a material change in relation to the matter giving rise to the immediate action.

There were no variations to immediate registration actions in Q4 2024-25.

Immediate registration actions – Revocation

If at any time the Health Ombudsman is satisfied the immediate registration action is no longer necessary on the grounds that the practitioner's health, conduct or performance poses a serious risk to persons or public interest, the Health Ombudsman must revoke the action.

The Health Ombudsman revoked immediate registration action against 5 registered health practitioners in Q4 2024-25.

Practitioner type	Number	Month	Action that was taken			g action	
				Public Interest	Serious Risk		
Nurse	1	Apr	Conditions	✓	✓		
Nurse	1	Apr	Conditions		✓		

¹ Prior to taking immediate action or varying an immediate action, the Health Ombudsman must first show cause. The Health Ombudsman may take an initial immediate action without first issuing a show cause notice in cases they believe it is necessary to ensure the health and safety of an individual or the public. The Health Ombudsman does not report publicly on show cause notices.

Nurse	1	Apr	Suspension	✓	
Chiropractor	1	May	Suspension		✓
Medical Practitioner	1	Jun	Suspension	✓	✓

Interim prohibition orders

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.

Interim prohibition order – Initiation

The Health Ombudsman issued interim prohibition orders against unregistered health practitioners in Q4 2024-25.

Practitioner type	Number	Month	Action taken	Reason/s for taking action*	
				Public Interest	Serious Risk
Health support worker	1	Apr	Prohibition w Restriction	✓	✓
Non-clinical support worker	1	Apr	Prohibition w Restriction		✓
Alternative health provider	1	May	Prohibition	√	✓
Non-clinical support worker	1	May	Prohibition w Restriction		✓
Non-clinical support worker	1	Jun	Prohibition w Restriction		✓

Interim prohibition order - Variation

A health practitioner may apply to the Health Ombudsman to vary an immediate action if there is a material change in relation to the matter giving rise to the immediate action. The Health Ombudsman may also initiate a decision to vary an immediate action if, at any time after a decision to take immediate action, there is a material change in relation to the matter giving rise to the immediate action.

There was 1 variations to interim prohibition orders in Q4 2024-25.

Practitioner type	Number	Month	Action taken	Reason/s for taking action*	
				Public Interest	Serious Risk
Alternative health provider	1	Jun	Prohibition w Restriction		√

Interim prohibition order - Revocation

If at any time the Health Ombudsman is satisfied an interim prohibition order is no longer necessary on the grounds that the practitioner's health, conduct or performance poses a serious risk to persons or public interest, the Health Ombudsman must revoke the order.

The Health Ombudsman revoked an interim prohibition order against 5 unregistered health practitioners in Q4 2024-25.

Practitioner type Nu	mber Month	Action taken	Reason/s for taking action*
----------------------	------------	--------------	-----------------------------

				Public Interest	Serious Risk
Nurse (Enrolled)	1	Apr	Prohibition w Restriction		✓
Chiropractor	1	May	Prohibition		✓
Nurse (Registered)	1	May	Prohibition w Restriction		✓
Non-clinical support worker	1	Jun	Prohibition w Restriction		✓
Psychotherapists	1	Jun	Prohibition w Restriction		✓

Prohibition orders

Prohibition order – Initiation

The Health Ombudsman may issue a prohibition order – either permanently or for a stated period – once they have finished investigating an unregistered health practitioner and are satisfied that the practitioner's health, conduct or performance poses a serious risk to the health and safety of the public.¹

The Health Ombudsman issued 13 prohibition orders against unregistered health practitioners in Q4 2024-25.

Practitioner type	Number	Month	Action taken
Assistant in nursing	1	Apr	Prohibition
Assistant in nursing	1	Apr	Prohibition w Restriction
Nurse	1	Apr	Prohibition w Restriction
Assistant in nursing	1	May	Prohibition
Disability support worker	1	May	Prohibition
Holding Out	1	May	Prohibition w Restriction
Non-clinical support worker	2	May	Prohibition
Alternative health provider	1	Jun	Prohibition
Alternative health provider	1	Jun	Prohibition w Restriction
Disability support worker	1	Jun	Prohibition
Health support worker	1	Jun	Prohibition
Student Provider (Nursing)	1	Jun	Prohibition

Prohibition order – Variation

A health practitioner may apply to the Health Ombudsman to vary a prohibition order if there is a material change in relation to the matter giving rise to the prohibition order. The Health Ombudsman may also initiate a decision to vary a prohibition order if, at any time after a decision to issue a prohibition order, there is a material change in relation to the matter giving rise to the prohibition order.

There were 0 variations to prohibition orders in Q4 2024-25.

¹ Prior to issuing a prohibition order or varying a prohibition order, the Health Ombudsman must first show cause. The Health Ombudsman does not report publicly on show cause notices.

Prohibition order – Revocation

If at any time the Health Ombudsman is satisfied that the prohibition order is no longer necessary on the grounds that the unregistered health practitioners health, conduct or performance poses a serious risk to persons, the Health Ombudsman must revoke the prohibition order.

There were 0 revocations to prohibition orders in Q4 2024-25.

The details for all actions and orders can be found on the action/orders register on the OHO website (https://www.oho.qld.gov.au/public/protective-orders).

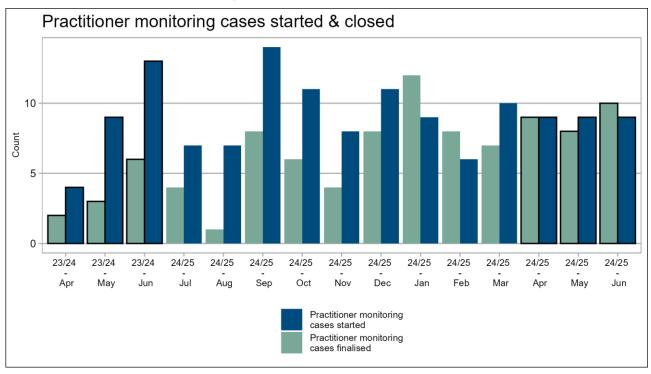
Monitoring practitioner compliance

When the Health Ombudsman takes immediate action against a health practitioner, we monitor the practitioner's compliance with the action.

For interim prohibition orders, this means monitoring compliance with either a full prohibition, or restrictions imposed, on a practitioner's provision of health services. 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 practise in an unregistered capacity.

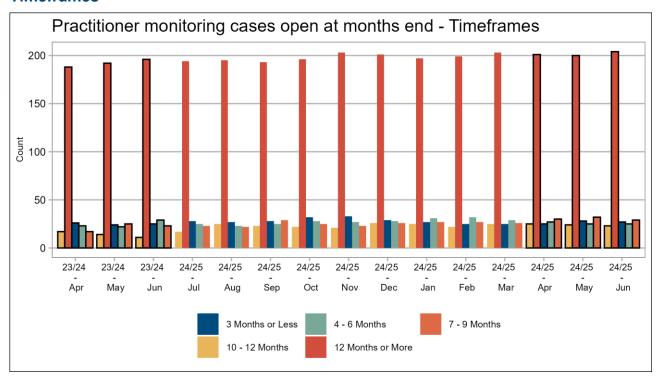
Practitioner monitoring cases



Cases this month	April	May	June
Practitioner monitoring cases started	9	9	9
Practitioner monitoring cases finalised	9	8	10

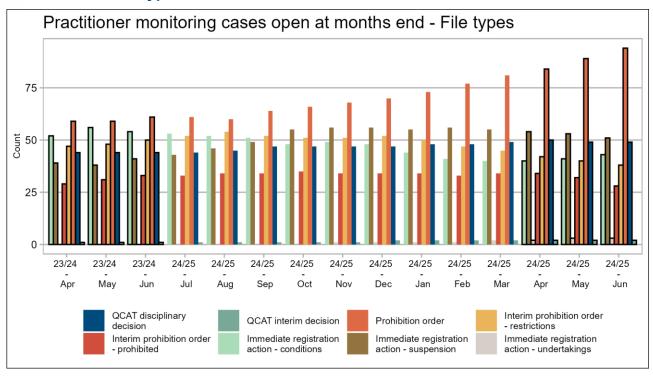
Open monitoring cases

Timeframes



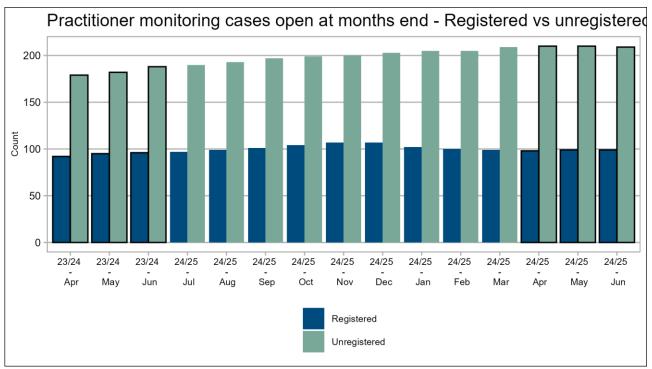
	Aŗ	oril	M	ay	June			
	Number	%	Number	%	Number	%		
3 months or less	25	8.12	28	9.06	27	8.77		
4 - 6 months	27	8.77	25	8.09	25	8.12		
7 - 9 months	30	9.74	32	10.36	29	9.42		
10 - 12 months	25	8.12	24	7.77	23	7.47		
12 months or more	201 65.26		200	64.72	204	66.23		
Total	308	100	309	100	308	100		

Immediate action types



	Αp	oril	M	ay	Ju	ine
	Number	%	Number	%	Number	%
QCAT disciplinary decision	50	16.23	49	15.86	49	15.91
QCAT interim decision	2	0.65	2	0.65	2	0.65
Permanent prohibition order	84	27.27	89	28.8	94	30.52
Interim prohibition order - restrictions	42	13.64	40	12.94	38	12.34
Interim prohibition order - prohibited	34	11.04	32	10.36	28	9.09
Immediate registration action - conditions	40	12.99	41	13.27	43	13.96
Immediate registration action - suspension	54	17.53	53	17.15	51	16.56
Immediate registration action - undertakings	2	0.65	3	0.97	3	0.97
Total	308	100	309	100	308	100

Registered Vs unregistered practitioners under monitoring



	Ap	oril	M	ay	June			
	Number %		Number	%	Number	%		
Registered	98 31.82		99	32.04	99	32.14		
Unregistered	210 68.18		210	67.96	209	67.86		
Total	308	100	309	100	308 100			

Australian Health Practitioner Regulation Agency

Joint consideration matters

The Health Ombudsman and Ahpra must jointly consider all matters received involving registered health practitioners within 7 business days and decide what course of action to take. The consultation period is excluded from the 7 business day statutory timeframe. A matter can either be retained by the Health Ombudsman, referred to Ahpra or no further action taken.

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

Initial joint consideration consultations

Matters commenced & finalised

	Month	OHO Matter Count	Provider Count	Decision Count*		
	Apr	302	308	329		
Matters	May	360	377	394		
commenced	Jun	360	384	405		
	Total	1022	1069	1128		
	Apr	240	241	259		
Matters finalised	May	369	376	394		
watters imansed	Jun	377	399	420		
	Total	986	1016	1073		

^{*} The decision count for matters commenced includes active matters marked as decision pending.

Issues by practitioner type

	Access	Code of conduct for Health Care Workers	Communication and Information		Discharge and Transfer Arrangements	Environment/ Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Chiropractor	-	-	1	1	-	-	-	-	-	-	1	-	6	1	2	-	-	12
Dental practitioner	1	-	6	4	-	3	5	3	-	-	2	1	9	1	43	-	-	78
Medical Practitioner	14	-	110	28	10	5	17	15	-	-	29	126	108	14	306	31	-	813
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	3	-	3	-	-	6
Midwife	-	-	1	-	-	-	-	-	-	-	-	3	4	-	7	-	-	15
Nurse	1	-	9	5	-	4	-	1	-	-	7	19	116	25	44	2	-	233
Occupational Therapist	-	-	1	1	-	-	2	1	-	-	2	-	7	2	4	6	-	26
Optometrist	-	-	-	-	-	-	1	-	-	-	1	-	1	1	4	-	-	8
Oral Health Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paramedic	-	-	2	-	-	-	-	-	-	-	-	-	12	2	4	-	-	20
Pharmacist	-	-	5	-	-	-	-	1	-	-	-	15	12	1	1	-	-	35
Physiotherapist	-	-	1	-	-	-	1	-	-	-	1	-	12	-	8	-	-	23
Podiatrist / Chiropodist	1	-	1	-	-	-	1	-	-	-	-	-	1	-	3	-	-	7
Psychologist	-	3	2	1	-	-	4	1	-	-	6	-	22	4	20	10	-	73
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	1	2	-	-	-	3
Unknown practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	17	3	139	40	10	12	31	22	-	-	49	164	317	53	449	49	-	1355

Quarter Four 2024-25 performance report

Outcomes by practitioner type

Issue	HCE to	retain*	Refer to Age	National ncy	No furth	er action	Q4 1	otal
	Number	%	Number	%	Number	%	Number	%
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	1	0.20	1	0.09
Chinese Medicine Practitioner	1	0.46	-	-	1	0.20	2	0.19
Chiropractor	1	0.46	5	1.38	2	0.41	8	0.75
Dental practitioner	8	3.67	22	6.06	34	6.91	64	5.96
Medical Practitioner	103	47.25	223	61.43	320	65.04	646	60.21
Medical Radiation Practitioner	2	0.92	2	0.55	1	0.20	5	0.47
Midwife	3	1.38	8	2.20	3	0.61	14	1.30
Nurse	61	27.98	52	14.33	62	12.60	175	16.31
Occupational Therapist	5	2.29	7	1.93	8	1.63	20	1.86
Optometrist	-	-	3	0.83	1	0.20	4	0.37
Oral Health Therapist	-	-	-	-	-	-	-	-
Osteopath	-	-	-	-	-	-	-	-
Paramedic	10	4.59	3	0.83	5	1.02	18	1.68
Pharmacist	6	2.75	12	3.31	10	2.03	28	2.61
Physiotherapist	7	3.21	5	1.38	8	1.63	20	1.86
Podiatrist / Chiropodist	2	0.92	1	0.28	2	0.41	5	0.47
Psychologist	9	4.13	18	4.96	33	6.71	60	5.59
Student practitioner	-	-	2	0.55	1	0.20	3	0.28
Unknown practitioner	-	-	-	-	-	-	-	-
Unregistered practitioner	-	-	-	-	-	-	-	-
Total	218	100	363	100	492	100	1073	100

^{*} Refers to matters that were retained by the Office of Health Ombudsman.

Subsequent joint consideration consultations

Matters commenced & finalised

	Month	OHO Matter Count	Provider Count	Decision Count*		
	Apr	18	18	18		
Matters	May	7	7	7		
commenced	Jun	25	24	25		
	Total	50	49	50		
	Apr	27	27	27		
Matters finalised	May	7	7	7		
watters imansed	Jun	23	22	23		
	Total	57	56	57		

^{*} The decision count for matters commenced includes actives matters marked as decision pending.

Issues by practitioner type

	Access	Code of conduct for Health Care Workers	Communication and Information		Discharge and Transfer Arrangements	Environment/ Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Dental practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Medical Practitioner	-	-	2	-	-	-	-	4	-	-	3	1	11	-	5	2	-	28
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Midwife	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nurse	-	-	1	-	-	-	-	-	-	-	-	-	10	1	-	-	-	12
Occupational Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	•
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Oral Health Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paramedic	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Pharmacist	-	-	-	-	-	-	-	-	-	-	-	1	3	-	-	-	-	4
Physiotherapist	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2
Podiatrist / Chiropodist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psychologist	-	1	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	4
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	•
Total	-	1	3	-	-	-	-	4	-	-	3	2	29	1	8	2	-	53

Outcomes by practitioner type

Issue	HCE t retain		Refer Natio Agen	nal	No fui acti		No resi give		Q4 to	otal
	Number	%	Number	%	Number	%	Number	%	Number	%
Aboriginal and Torres Strait Islander health practitioner	-	0	-	0	-	-	-	-	-	-
Chinese Medicine Practitioner	-	0	-	0	-	-	-	-	-	-
Chiropractor	-	0	1	100	-	-	-	-	1	1.75
Dental practitioner	-	0	-	0	1	2.70	-	-	1	1.75
Medical Practitioner	-	0	-	0	21	56.76	7	36.84	28	49.12
Medical Radiation Practitioner	-	0	-	0	-	-	2	10.53	2	3.51
Midwife	-	0	-	0	-	-	-	-	-	-
Nurse	-	0	-	0	9	24.32	5	26.32	14	24.56
Occupational Therapist	-	0	-	0	-	-	-	-	-	-
Optometrist	-	0	-	0	-	-	-	-	-	-
Oral Health Therapist	-	0	-	0	-	-	-	-	-	-
Osteopath	-	0	-	0	-	-	-	-	-	-
Paramedic	-	0	-	0	1	2.70	1	5.26	2	3.51
Pharmacist	-	0	-	0	-	-	4	21.05	4	7.02
Physiotherapist	-	0	-	0	1	2.70	-	-	1	1.75
Podiatrist / Chiropodist	-	0	-	0	-	-	-	-	-	-
Psychologist	-	0	-	0	3	8.11	-	-	3	5.26
Student practitioner	-	0	-	0	1	2.70	-	-	1	1.75
Unknown practitioner	-	0	-	0	-	-	-	-	-	-
Unregistered practitioner	-	0	-	0	-	-	-	-	-	-
Total	-	0	1	100	37	100	19	100	57	100

^{*} Refers to matters that were retained by the Office of Health Ombudsman.

Demographics of complainants, healthcare consumers and providers

As part of the complaints management process, three key groups of person(s) are identified:

- 1. **Complainant:** This is the person and/or entity who has raised the complaint with the Office of the Health Ombudsman
- 2. **Healthcare Consumer:** This is the person and/or entity in which the healthcare service identified in the complaint was provided to. It is very common for both the Complainant and Healthcare Consumer to be the same person.
- 3. **Provider:** This is the person and/or entity who provided the healthcare service.

Complainants

Complainant gender

	April		Мау		June	
	Number	%	Number	%	Number	%
Female	397	54.61	444	55.36	453	57.34
Male	293	40.3	311	38.78	304	38.48
Non-binary	7	0.96	12	1.5	8	1.01
Unknown*	2	0.28	2	0.25	4	0.51
Not Applicable**	28	3.85	33	4.11	21	2.66
Total	727	100	802	100	790	100

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

Complainant age

	April		May		June	
	Number	%	Number	%	Number	%
Not Applicable**	28	3.85	33	4.11	21	2.66
Unknown*	50	6.88	57	7.11	83	10.51
Less than 18 years	1	0.14	3	0.37	2	0.25
18-24 years	19	2.61	29	3.62	24	3.04
25-34 years	124	17.06	154	19.2	144	18.23
35-44 years	170	23.38	177	22.07	203	25.7
45-54 years	141	19.39	155	19.33	134	16.96
55-64 years	109	14.99	113	14.09	99	12.53
65-74 years	59	8.12	43	5.36	44	5.57
More than 75 years	26	3.58	38	4.74	36	4.56
Total	727	100	802	100	790	100

^{**}Not Applicable refers to complainants who are an entity and not a person. For example, a Health-Care Organisation

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

^{**}Not Applicable refers to complainants who are an entity and not a person. For example, a Health-Care Organisation

Complainant location

	Ap	April		May		June	
	Number	%	Number	%	Number	%	
Not Applicable*	0	0	1	0.12	0	0	
Unknown**	135	18.57	132	16.44	139	17.59	
Cairns and Hinterland	29	3.99	33	4.11	31	3.92	
Central Queensland	44	6.05	22	2.74	28	3.54	
Central West	0	0	1	0.12	1	0.13	
Children's Health Queensland	0	0	0	0	0	0	
Darling Downs	22	3.03	22	2.74	35	4.43	
Gold Coast	69	9.49	79	9.84	62	7.85	
Mackay	16	2.2	13	1.62	19	2.41	
Metro North	122	16.78	134	16.69	129	16.33	
Metro South	146	20.08	204	25.4	180	22.78	
North West	2	0.28	2	0.25	2	0.25	
South West	2	0.28	3	0.37	4	0.51	
Sunshine Coast	35	4.81	53	6.6	38	4.81	
Torres and Cape	3	0.41	2	0.25	0	0	
Townsville	25	3.44	21	2.62	28	3.54	
West Moreton	42	5.78	44	5.48	58	7.34	
Wide Bay	35	4.81	37	4.61	36	4.56	
Total	727	100	803	100	790	100	

Healthcare consumers

Consumer gender

	April		Мау		June	
	Number	%	Number	%	Number	%
Female	337	49.71	390	52.42	380	52.56
Male	331	48.82	338	45.43	335	46.33
Non-binary	7	1.03	7	0.94	5	0.69
Unknown*	1	0.15	2	0.27	2	0.28
Not Applicable**	2	0.29	7	0.94	1	0.14
Total	678	100	744	100	723	100

Consumer age

	Ap	oril	M	May		June	
	Number	%	Number	%	Number	%	
Not Applicable**	2	0.29	7	0.94	1	0.14	
Unknown*	58	8.55	69	9.27	69	9.54	
Less than 18 years	33	4.87	38	5.11	39	5.39	
18-24 years	30	4.42	29	3.9	36	4.98	
25-34 years	111	16.37	142	19.09	129	17.84	
35-44 years	136	20.06	128	17.2	163	22.54	
45-54 years	102	15.04	127	17.07	98	13.55	
55-64 years	86	12.68	92	12.37	79	10.93	
65-74 years	60	8.85	45	6.05	55	7.61	
More than 75 years	60	8.85	67	9.01	54	7.47	
Total	678	100	744	100	723	100	

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

Consumer location

	April		М	May		June	
	Number	%	Number	%	Number	%	
Unknown**	210	30.97	192	25.77	167	23.1	
Cairns and Hinterland	23	3.39	27	3.62	31	4.29	
Central Queensland	35	5.16	22	2.95	20	2.77	
Central West	0	0	0	0	0	0	
Children's Health Queensland	0	0	0	0	0	0	
Darling Downs	13	1.92	18	2.42	29	4.01	
Gold Coast	54	7.96	61	8.19	53	7.33	
Mackay	8	1.18	10	1.34	17	2.35	
Metro North	90	13.27	108	14.5	111	15.35	
Metro South	135	19.91	184	24.7	150	20.75	
North West	2	0.29	2	0.27	1	0.14	
South West	2	0.29	2	0.27	2	0.28	
Sunshine Coast	22	3.24	35	4.7	26	3.6	
Torres and Cape	2	0.29	2	0.27	0	0	
Townsville	15	2.21	13	1.74	24	3.32	
West Moreton	40	5.9	41	5.5	57	7.88	
Wide Bay	27	3.98	28	3.76	35	4.84	
Total	678	100	745	100	723	100	

Health service providers

Provider location

	April		М	Мау		June	
	Number	%	Number	%	Number	%	
Unknown**	67	10.69	81	11.59	78	11.35	
Cairns and Hinterland	25	3.99	31	4.43	24	3.49	
Central Queensland	27	4.31	23	3.29	29	4.22	
Central West	0	0	1	0.14	0	0	
Children's Health Queensland	0	0	0	0	0	0	
Darling Downs	18	2.87	18	2.58	34	4.95	
Gold Coast	84	13.4	90	12.88	92	13.39	
Mackay	14	2.23	14	2	14	2.04	
Metro North	125	19.94	134	19.17	136	19.8	
Metro South	120	19.14	147	21.03	151	21.98	
North West	3	0.48	2	0.29	1	0.15	
South West	6	0.96	2	0.29	7	1.02	
Sunshine Coast	41	6.54	57	8.15	43	6.26	
Torres and Cape	1	0.16	3	0.43	0	0	
Townsville	26	4.15	33	4.72	21	3.06	
West Moreton	30	4.78	24	3.43	38	5.53	
Wide Bay	40	6.38	39	5.58	19	2.77	
Total	627	100	699	100	687	100	

^{*} 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.

Aggregated data descriptions

To assist with understanding the data in this report, each set of visuals/table has been further defined using the following descriptions:

- Date Stamp? This describes the date field that is used to mark the occurrence of the event that is being counted/measured within the data.
- What is being counted? This describes the unique instance that is being counted/measured.

Data element	Date stamp	What is being counted?
Intake of complaints		
Type of contacts	The date and time the case file is created in Resolve.	The total number of unique case files recorded in Resolve.
Contacts received through Genesys	The date and time of the interaction.	The total number of unique person(s) interacted within in the Genesys Telephony System
Type of complaints	The date and time the case file is created in Resolve.	The total number of unique case files recorded as a complaint in resolve.
Decision timeframes	The end date and time of a case file tracking clock which documents the processing time of decisions during the intake phase.	The total number of unique case files recorded as a complaint in resolve.
Decisions made	The end date and time of a case file tracking clock which documents the processing time of decisions during the intake phase.	The total number of decisions being made. Please note, as decisions can be reconsidered, certain case files will have multiple decisions recorded against them
Accepted decision outcomes	The date and time in which the outcome is recorded against the case file.	The total number of unique case files recorded as a complaint in resolve in the context of an accepted decision.
Health service complaints	profile	
Main issue category raised in complaints	The date and time the case file is created in Resolve.	A recorded issue against the complaint case file.
Subcategories of professional performance issues raised in complaints	The date and time the case file is created in Resolve.	A recorded issue against the complaint case file.
Subcategories of professional conduct issues raised in complaints	The date and time the case file is created in Resolve.	A recorded issue against the complaint case file.
Subcategories of professional health issues raised in complaints	The date and time the case file is created in Resolve.	A recorded issue against the complaint case file.
Profile of complaints about health practitioners	The date and time the case file is created in Resolve.	In the grey cells, counts refer to the number of unique practitioners. In every other cell, counts refer to the number of issues.
Profile of complaints about health service organisations	The date and time the case file is created in Resolve.	In the grey cells, counts refer to the number of unique organisations. In every other cell, counts refer to the number of issues.
Assessment		
Assessments started and completed	The start and end date of the assessment.	The total number of unique assessment case files.
Assessment started by prioritisation	The start date of the assessment	The total number of unique assessment case files.
Completed assessment timeframes	The end date of the assessment.	The total number of unique assessment case files.
Assessment decisions	The date and time in which the outcome is recorded against the assessment case file.	The total number of unique assessment case files.

Data element	Date stamp	What is being counted?
Local resolution		
Local resolutions started and completed	The start and end date of the Local Resolution.	The total number of unique Local Resolution case files.
Completed local resolutions timeframes	The end date of the Local Resolution.	The total number of unique Local Resolution case files.
Local Resolution Outcomes	The date and time in which the outcome is recorded against the Local Resolution case file.	The total number of unique Local Resolution case files.
Conciliation		
Conciliations started and closed	The start and end date of the Conciliation file.	The total number of unique Conciliation case files.
Completed conciliation timeframes	The end date of the Conciliation file.	The total number of unique Conciliation case files.
Completed conciliation outcomes	The date and time in which the outcome is recorded against the Conciliation case file.	The total number of unique Conciliation case files.
Open conciliation timeframes		The total number of Conciliation Case files open at the end of the month.
Complaints management (Referrals)	
Referrals open & closed	The start and end date of the Referral case file.	The total number of unique Referral case files.
Referrals categories	The start date of the Referral case file.	The total number of unique Referral case files.
Referrals closed timeframes	The end date of the Referral case file.	The total number of unique Referral case files.
Referrals open timeframes		The total number of Referral Case files open at the end of the month.
Investigation		
Investigations started and closed	The date in which the investigations file is recorded as having commenced.	The total number of parent investigations in the context of 'Started' and 'Closed'. Amalgamated investigations represents that the total number of investigations amalgamated.
Closed investigation timeframes	The closed date of the investigation.	The total number of parent investigations closed.
Closed investigation outcomes	The date in which the outcome is recorded against the investigation case file.	The total number of parent investigations files.
Active & paused investigations		The total number of open parent investigations open at the end of the month.
Active investigation timeframes		The total number of open parent investigations open at the end of the month.
Paused investigation timeframes		The total number of open parent investigations open at the end of the month.
Active & paused (All) investigation timeframes		The total number of open parent investigations open at the end of the month.
Open investigation categories		The total number of open parent investigations open at the end of the month.
Monitoring investigation re	commendations	
OHO recommendations monitoring	The start date and finalisation date of the recommendations monitoring file	Each unique recommendation monitoring file.
Open recommendations monitoring case timeframes		The total number of open recommendation monitoring files at the end of the month.
Director of Proceedings		
Matters referred to the	The Commencement date of the	The total number of unique Director of

Data element	Date stamp	What is being counted?
Director of Proceedings by practitioner type	Director of Proceedings File.	Proceeding case files.
Matters currently with the Director of Proceedings by practitioner type	Not applicable.	The total number of unique Director of Proceeding case files.
Matters filed in the Queensland Civil and Administrative Tribunal	The date in which the matter is filed to QCAT.	The total number of matters filed in QCAT.
Matters referred back to the Health Ombudsman	The date in which the decision was made to refer the matter back to the Health Ombudsman.	The total number of Director of Proceeding case files referred back to the Health Ombudsman.
Matters open in the Queensland Civil and Administrative Tribunal	Not applicable.	The total number of matters filed in QCAT.
Queensland Civil and Administrative Tribunal decisions	The date in which the decision was recorded by QCAT.	The total number of decisions recorded as part of the QCAT proceeding.
Matters withdrawn	The date in which the matter was recognised as formally withdrawn.	The total number of Director of Proceeding case files.
Immediate action		
Show case notices	The date in which the show cause notice was distributed.	The show cause notice.
Initiation events for Immediate Registration Actions, Interim Prohibition Orders and Permanent Prohibition Orders	The date in which the order/action was initiated.	The number of unique practitioners under the action taken conditions specified in the table.
Variation events for Immediate Registration Actions, Interim Prohibition Orders and Permanent Prohibition Orders	The date in which the order/action variation took effect.	The number of unique practitioners under the action taken conditions specified in the table.
Revocation events for Immediate Registration Actions, Interim Prohibition Orders and Permanent Prohibition Orders	The date in which the order/action was revoked.	The number of unique practitioners under the action taken conditions specified in the table.
Monitoring practitioner cor	npliance	
Practitioner monitoring cases	The original effected date of the practitioner monitoring file and the finalisation date.	The unique number of practitioner monitoring files.
Open monitoring cases timeframes		The total number of practitioners with a Monitoring Case Files open at the end of the month.
Immediate action types		The total number of Practitioners Monitoring Case Files open at the end of the month.
Registered Vs unregistered practitioners under monitoring		The total number of Practitioners Monitoring Case Files open at the end of the month.
	ner Regulation Agency – Initial joint cons	ideration decisions
Matters commenced and finalised	The date and time in which the initial joint consideration process commenced and was finalised.	OHO Matter Count: This is the count of all complaint files within the OHO system which are linked to the joint consideration event. Provider Count: This is the number of unique providers which are linked to the join consideration event.

Data element	Date stamp	What is being counted?
		 Decision Count: This is the amount the of decisions that are made for a given joint consideration event. This count usually corresponds with the total number of matters considered on the Ahpra side of joint consideration.
Issues by practitioner type	The date and time in which the initial joint consideration process commenced.	The total number of issues considered in the context of a decision. Please note, this figure does not necessarily equate to the decision count figure as a decision and issues context have a complex relationship. Namely, a decision can be made in the context of anywhere from zero to multiple issues at once.
Outcomes by practitioner type	The date and time in which the Initial joint consideration process was finalised.	The total number of decisions made.
Australian Health Practition	ner Regulation Agency – Subsequent joi	nt consideration decisions
Matters commenced & finalised		 OHO Matter Count: This is the count of all complaint files within the OHO system which are linked to the joint consideration event. Provider Count: This is the amount of unique providers which are linked to the join consideration event. Decision Count: This is the amount the of decisions that are made for a given joint consideration event. This count usually corresponds with the total number of matters considered on the Ahpra side of joint consideration
Issues by practitioner type	The date and time in which the subsequent joint consideration process commenced.	The total number of issues considered in the context of a decision. Please note, this figure does not necessarily equate to the decision count figure as a decision and issues context have a complex relationship. Namely, a decision can be made in the context of anywhere from zero to multiple issues at once.
Outcomes by practitioner type	The date and time in which the subsequent joint consideration process was finalised.	The total number of decisions made.
Demographics of compla	inants, healthcare consumers and pro	viders
Complainants	The date and time the case file is created in Resolve.	The total number of unique complainants in each month.
Healthcare consumers	The date and time the case file is created in Resolve.	The total number of unique consumers in each month.
Health service providers	The date and time the case file is created in Resolve.	The total number of unique providers in each month.