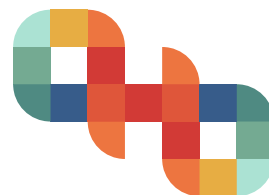


Quarter 3 2025-26  
performance report  
Office of the Health Ombudsman



OFFICE OF THE  
**HEALTH**  
OMBUDSMAN



## Quarterly performance report— Quarter Three 2025-26

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# Introduction

This document reports on the Quarter Three (Q3) performance of the Office of the Health Ombudsman (OHO) for the 2025–26 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:

- receive 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](http://www.oho.qld.gov.au).

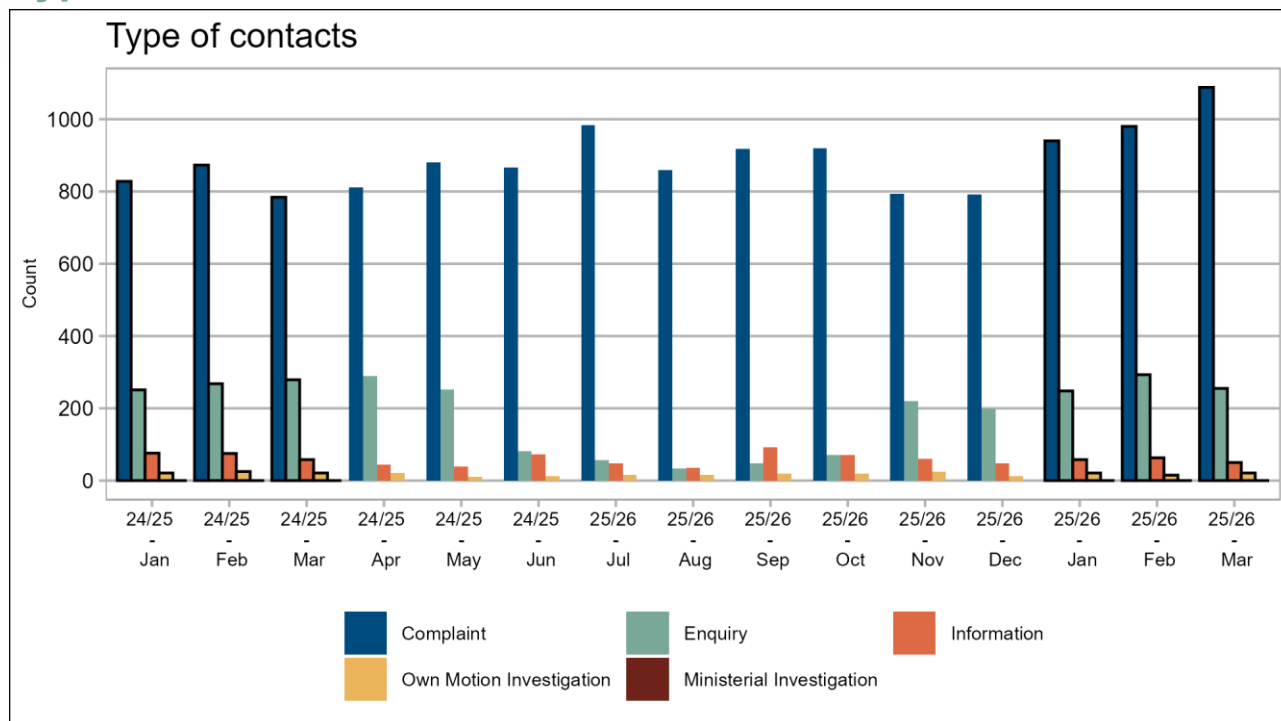
Data in this report is correct as of 05 May 2026, although figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

The OHO works closely with Ahpra within Queensland's co-regulatory framework. All registered health practitioner complaints are 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.

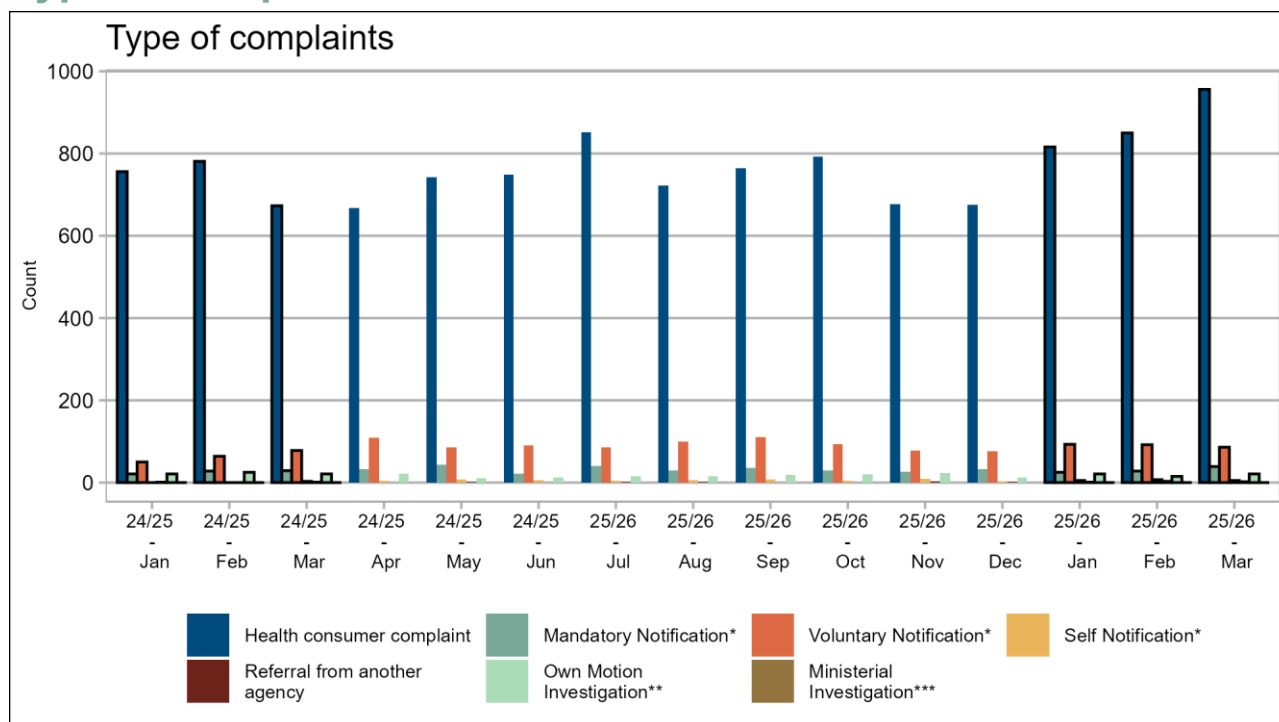
## Type of contacts



Type of contact	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Complaint	940	74.2	980	72.5	1088	76.9	3008	74.6
Enquiry	248	19.6	293	21.7	255	18	796	19.7
Information	58	4.6	63	4.7	50	3.5	171	4.2
Own motion investigation	21	1.7	15	1.1	21	1.5	57	1.4
Ministerial investigation	0	0	0	0	0	0	0	0
<b>Total</b>	<b>1267</b>	<b>100</b>	<b>1351</b>	<b>100</b>	<b>1414</b>	<b>100</b>	<b>4032</b>	<b>100</b>

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

## Type of complaints



Type of complaints	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	816	84.9	850	85.4	956	86.2	2622	85.5
Mandatory notification*	25	2.6	28	2.8	39	3.5	92	3
Voluntary notification*	93	9.7	92	9.2	86	7.8	271	8.8
Self notification*	5	0.5	7	0.7	5	0.5	17	0.6
Referral from another agency	1	0.1	3	0.3	2	0.2	6	0.2
Own motion investigation**	21	2.2	15	1.5	21	1.9	57	1.9
Ministerial investigation***	0	0	0	0	0	0	0	0
<b>Total</b>	<b>961</b>	<b>100</b>	<b>995</b>	<b>100</b>	<b>1109</b>	<b>100</b>	<b>3065</b>	<b>100</b>

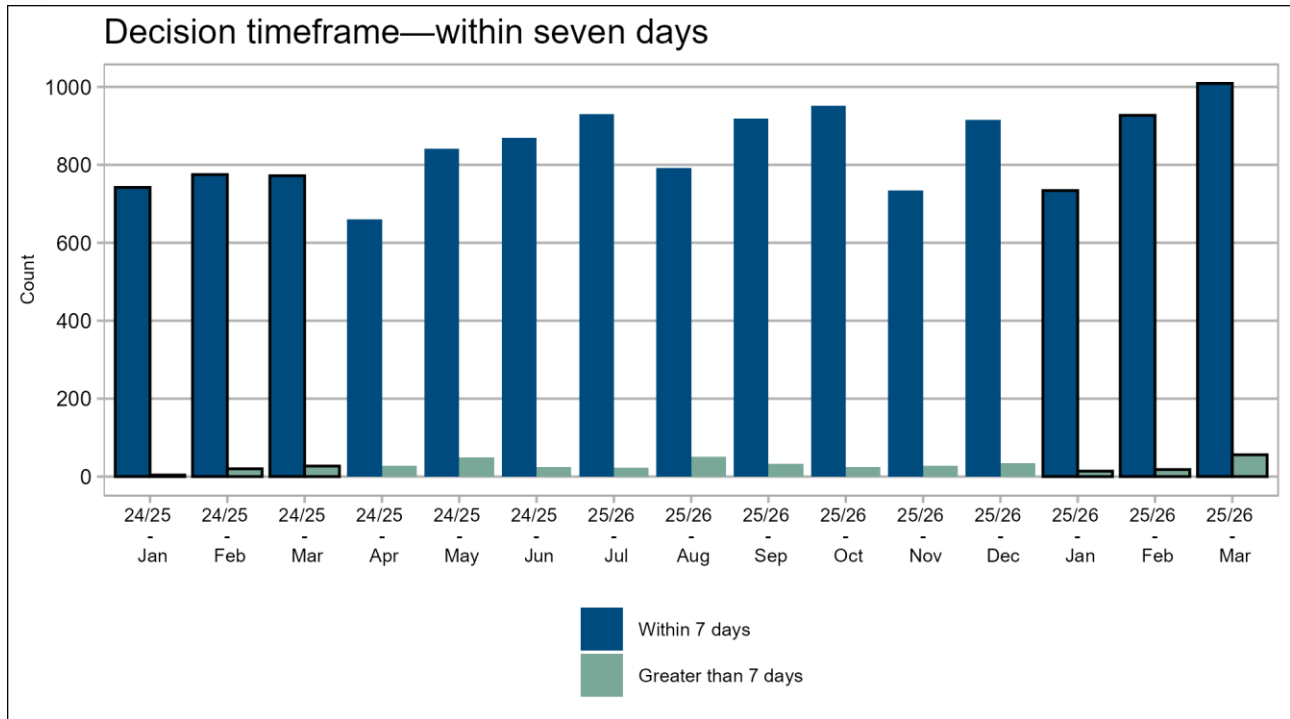
\* Notifications are matters defined under the *Health Practitioner Regulation National Law (Queensland)* and only relate to registered practitioners.

\*\* 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

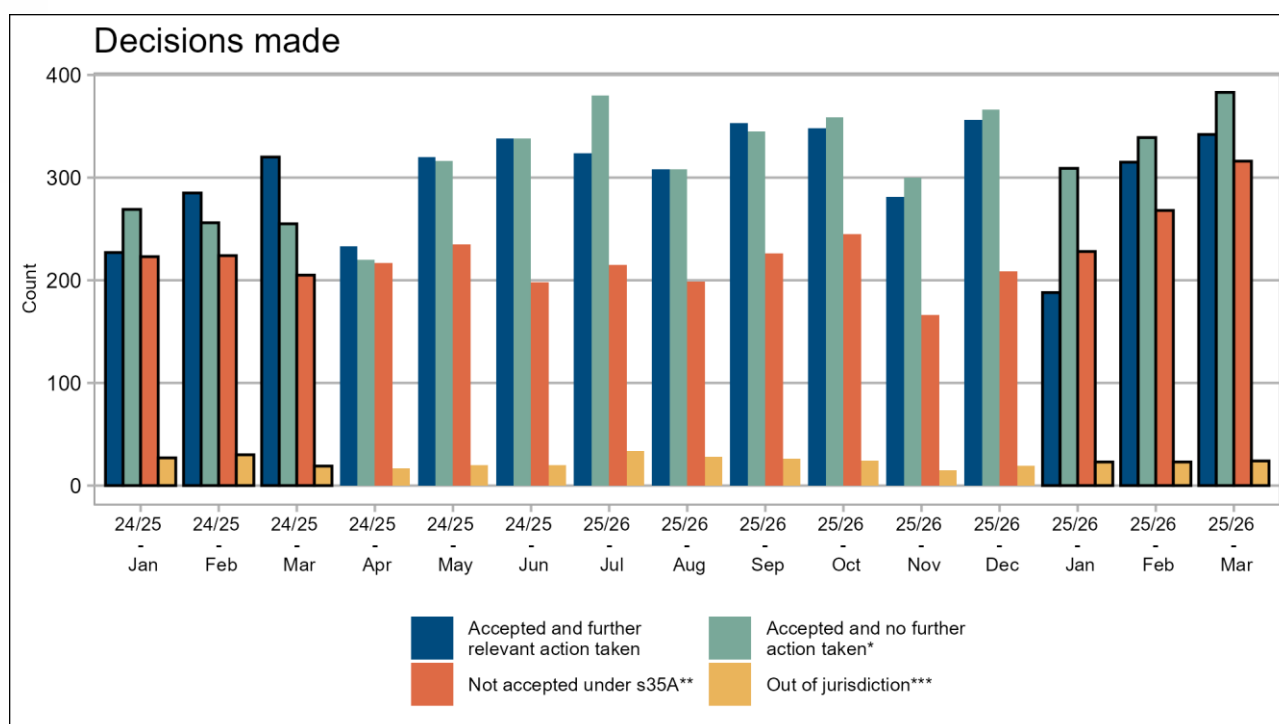
## Decision timeframe—within seven days <sup>1</sup>



Decision timeframe	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Within 7 days	734	98.1	927	98.1	1009	94.7	2670	96.8
Greater than 7 days	14	1.9	18	1.9	56	5.3	88	3.2
<b>Total</b>	<b>748</b>	<b>100</b>	<b>945</b>	<b>100</b>	<b>1065</b>	<b>100</b>	<b>2758</b>	<b>100</b>

<sup>1</sup> Section 35(1) (a) of the *Health Ombudsman Act 2013* stipulates matters received are to have decisions recorded within 7 business days after the OHO receives the complaint

## Decisions made



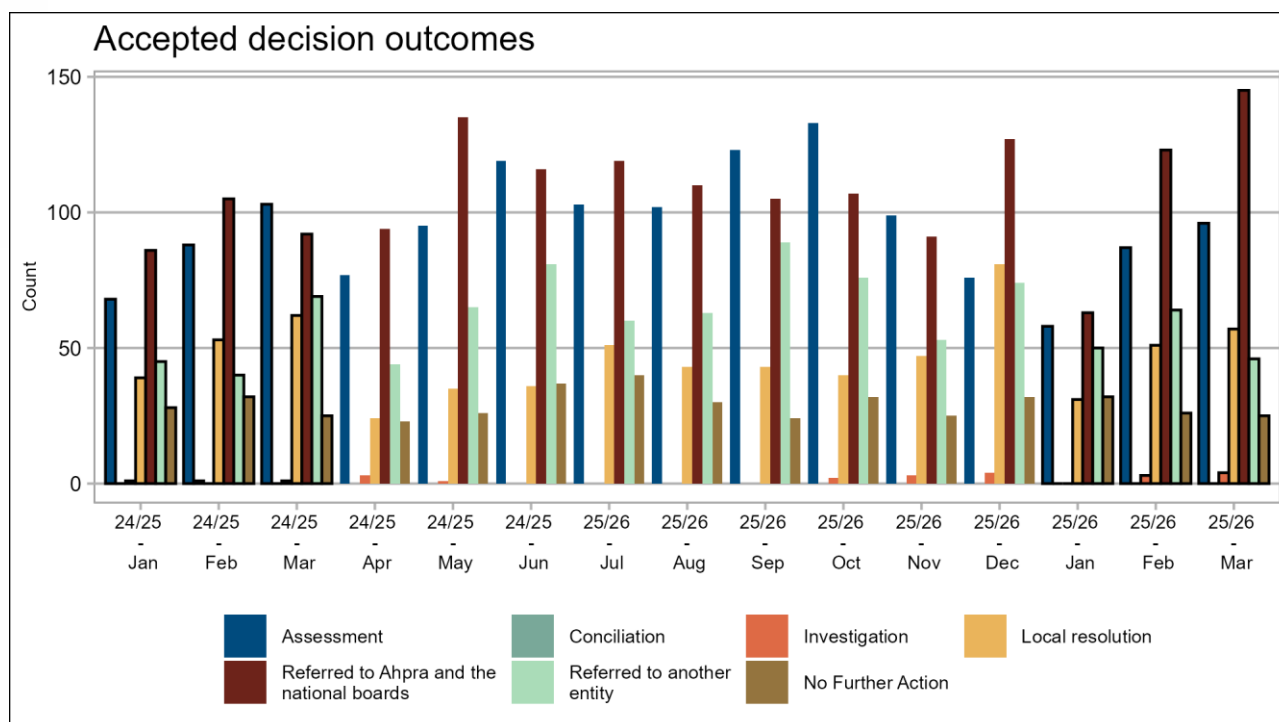
Number of Decisions Made	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Accepted and further relevant action taken	188	25.1	315	33.3	342	32.1	845	30.6
Accepted and no further action taken*	309	41.3	339	35.9	383	36	1031	37.4
Not accepted under s35A**	228	30.5	268	28.4	316	29.7	812	29.4
Out of jurisdiction***	23	3.1	23	2.4	24	2.3	70	2.5
<b>Total</b>	<b>748</b>	<b>100</b>	<b>945</b>	<b>100</b>	<b>1065</b>	<b>100</b>	<b>2758</b>	<b>100</b>

\* 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 that cannot be dealt with under the *Health Ombudsman Act 2013*.

## Accepted decision outcomes



Type of relevant action	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	58	24.8	87	24.6	96	25.7	241	25.1
Conciliation	0	0	0	0	0	0	0	0
Investigation	0	0	3	0.8	4	1.1	7	0.7
Local resolution	31	13.2	51	14.4	57	15.3	139	14.5
Referred to Ahpra and the national boards	63	26.9	123	34.7	145	38.9	331	34.4
Referred to another entity	50	21.4	64	18.1	46	12.3	160	16.6
No Further Action	32	13.7	26	7.3	25	6.7	83	8.6
<b>Total</b>	<b>234</b>	<b>100</b>	<b>354</b>	<b>100</b>	<b>373</b>	<b>100</b>	<b>961</b>	<b>100</b>

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). The 'No further action' outcomes in this table are confined to those accepted complaints.

# Health service complaints profile

## Main issue categories raised in complaints

Issue	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Professional Performance	468	35.3	516	36.4	553	36.3	1537	36
Professional Conduct	204	15.4	198	14	227	14.9	629	14.7
Communication and Information	109	8.2	131	9.2	140	9.2	380	8.9
Access	120	9.1	130	9.2	124	8.1	374	8.8
Medication	109	8.2	116	8.2	134	8.8	359	8.4
Fees and Costs	46	3.5	58	4.1	52	3.4	156	3.7
Grievance Processes	47	3.5	49	3.5	48	3.2	144	3.4
Environment/Management of Facility	46	3.5	44	3.1	41	2.7	131	3.1
Medical Records	35	2.6	40	2.8	53	3.5	128	3
Reports/Certificates	38	2.9	32	2.3	40	2.6	110	2.6
Consent	42	3.2	32	2.3	35	2.3	109	2.6
Discharge and Transfer Arrangements	18	1.4	32	2.3	30	2	80	1.9
Code of conduct for health care worker	24	1.8	21	1.5	19	1.2	64	1.5
Professional Health	18	1.4	15	1.1	26	1.7	59	1.4
Research/teaching/assessment	1	0.1	2	0.1	1	0.1	4	0.1
HO Act Offence	0	0	1	0.1	0	0	1	0
<b>Total</b>	<b>1325</b>	<b>100</b>	<b>1417</b>	<b>100</b>	<b>1523</b>	<b>100</b>	<b>4265</b>	<b>100</b>

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

Subcategories	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Inadequate treatment	129	27.6	146	28.3	160	28.9	435	28.3
Inadequate care	64	13.7	88	17.1	82	14.8	234	15.2
Unexpected treatment outcome/complications	69	14.7	61	11.8	63	11.4	193	12.6
Coordination of treatment	45	9.6	45	8.7	42	7.6	132	8.6
Inadequate consultation	33	7.1	35	6.8	43	7.8	111	7.2
Diagnosis	29	6.2	37	7.2	36	6.5	102	6.6
Delay in treatment	16	3.4	31	6	33	6	80	5.2
Wrong/inappropriate treatment	16	3.4	18	3.5	26	4.7	60	3.9
Competence	11	2.4	14	2.7	17	3.1	42	2.7
No/inappropriate referral	17	3.6	13	2.5	11	2	41	2.7
Rough and painful treatment	9	1.9	12	2.3	9	1.6	30	2
Withdrawal of treatment	10	2.1	4	0.8	11	2	25	1.6
Infection control	6	1.3	3	0.6	13	2.4	22	1.4
Teamwork/supervision	10	2.1	3	0.6	6	1.1	19	1.2
Inadequate prosthetic equipment	4	0.9	6	1.2	1	0.2	11	0.7
Public/private election	0	0	0	0	0	0	0	0
<b>Total</b>	<b>468</b>	<b>100</b>	<b>516</b>	<b>100</b>	<b>553</b>	<b>100</b>	<b>1537</b>	<b>100</b>

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

Subcategories	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Inappropriate behaviour	63	30.9	41	20.7	50	22	154	24.5
Illegal practice	47	23	32	16.2	31	13.7	110	17.5
Inappropriate collection, use or disclosure of information	24	11.8	37	18.7	31	13.7	92	14.6
National Law offence	15	7.4	15	7.6	16	7	46	7.3
Sexual misconduct	12	5.9	10	5.1	15	6.6	37	5.9
Discriminatory conduct	10	4.9	11	5.6	11	4.8	32	5.1
Boundary violation	4	2	12	6.1	13	5.7	29	4.6
National Law breach	8	3.9	7	3.5	6	2.6	21	3.3
False/misleading statements and/or information	1	0.5	7	3.5	12	5.3	20	3.2
Misrepresentation of qualifications	6	2.9	8	4	5	2.2	19	3
Assault	1	0.5	5	2.5	6	2.6	12	1.9
Response to adverse event	1	0.5	1	0.5	9	4	11	1.7
Breach of condition	5	2.5	3	1.5	2	0.9	10	1.6
Excessive treatment	1	0.5	3	1.5	5	2.2	9	1.4
Financial fraud	0	0	4	2	4	1.8	8	1.3
Conflict of interest	0	0	0	0	7	3.1	7	1.1
Attendance	3	1.5	2	1	0	0	5	0.8
Medico-legal conduct	2	1	0	0	2	0.9	4	0.6
Annual declaration not completed or completed incorrectly	0	0	0	0	2	0.9	2	0.3
Emergency treatment not provided	1	0.5	0	0	0	0	1	0.2
Experimental treatment	0	0	0	0	0	0	0	0
Offence by student	0	0	0	0	0	0	0	0
<b>Total</b>	<b>204</b>	<b>100</b>	<b>198</b>	<b>100</b>	<b>227</b>	<b>100</b>	<b>629</b>	<b>100</b>

## Subcategories of Professional Health issues raised in complaints

Subcategories	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Mental impairment – mental illness	9	50	6	40	10	38.5	25	42.4
Mental impairment - substance misuse, abuse or addiction	7	38.9	4	26.7	8	30.8	19	32.2
Mental impairment – other	2	11.1	4	26.7	2	7.7	8	13.6
Mental impairment – cognitive impairment	0	0	0	0	6	23.1	6	10.2
Physical impairment	0	0	1	6.7	0	0	1	1.7
<b>Total</b>	<b>18</b>	<b>100</b>	<b>15</b>	<b>100</b>	<b>26</b>	<b>100</b>	<b>59</b>	<b>100</b>

## Profile of complaints about health practitioners

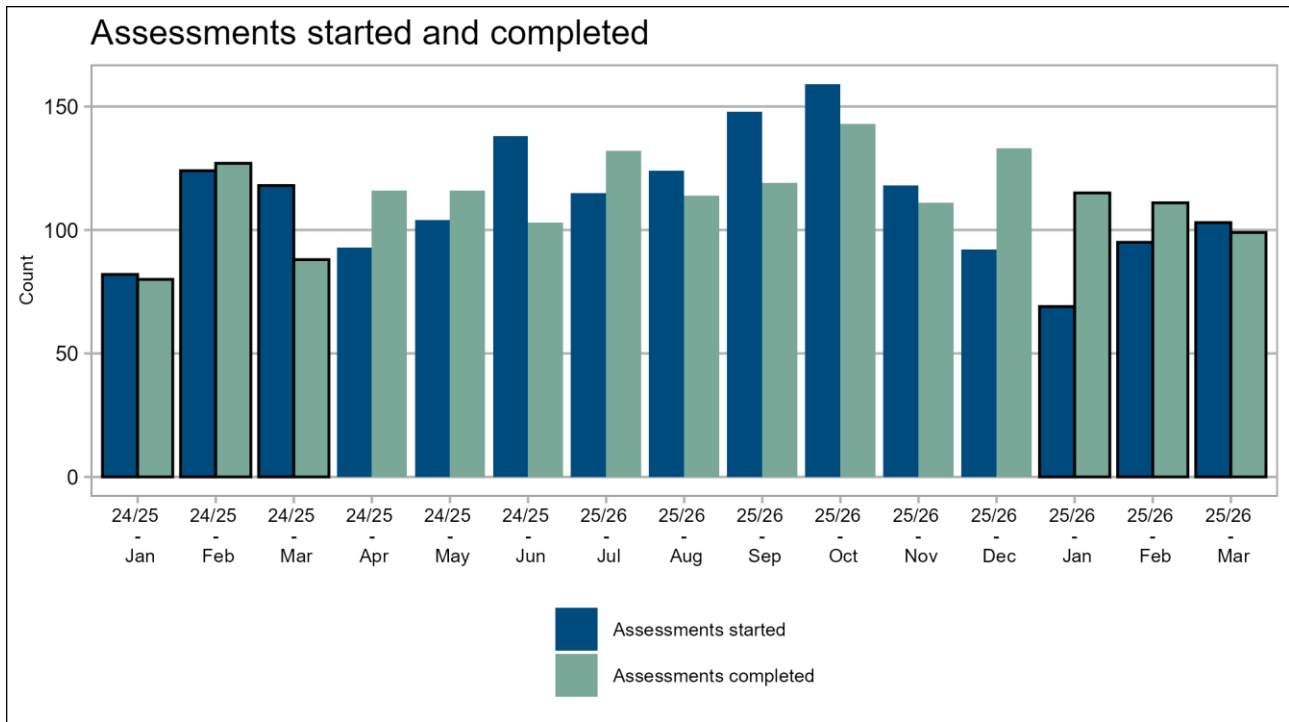
Practitioner Type	Number of practitioners identified in complaints	Number and type of issues identified in complaints about health practitioners															Total	
		Access	Code of conduct for Health Care Workers	Communication & Info.	Consent	Discharge & Transfer Arrangements	Environment /Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Medical Records	Medication	Prof. Conduct	Prof. Health	Prof. Performance	Reports/Certificates		Research/teaching/assessment
Medical Practitioner	633	20	-	88	27	4	4	22	11	-	23	84	144	8	376	54	3	868
Nurse	208	-	-	9	-	1	11	-	1	-	2	11	176	30	46	1	-	288
Unregistered practitioner	94	1	59	7	3	-	2	-	-	1	3	6	47	-	15	3	-	147
Dentist	80	1	-	5	4	-	-	10	7	-	2	-	27	8	63	-	-	127
Psychologist	84	-	-	8	3	-	-	1	1	-	8	-	52	8	24	11	-	116
Pharmacist	44	-	-	3	1	-	7	-	-	-	-	39	12	-	1	-	-	63
Occupational Therapist	17	-	-	1	-	-	-	2	-	-	1	-	7	2	3	5	-	21
Paramedic	17	-	-	-	-	-	-	-	-	-	-	-	16	-	2	-	-	18
Midwife	12	-	-	1	1	-	-	1	-	-	1	-	5	-	7	-	-	16
Physiotherapist	10	-	-	-	-	-	-	-	-	-	-	-	5	-	6	1	1	13
Podiatrist / Chiroprapist	5	-	-	1	-	-	-	-	-	-	-	-	7	-	3	-	-	11
Chiropractor	6	-	-	-	-	-	-	-	-	-	-	-	3	2	2	-	-	7
Medical Radiation Practitioner	5	-	-	-	-	-	-	-	-	-	-	1	1	1	2	-	-	5
Chinese Medicine Practitioner	3	-	-	1	-	-	-	-	-	-	-	-	2	-	1	-	-	4
Optometrist	4	-	-	1	-	-	-	-	-	-	-	-	2	-	1	-	-	4
Aboriginal and Torres Strait Islander Health Practitioner	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Oral Health Therapist	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopath	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Student practitioner	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown practitioner	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	<b>1222</b>	<b>22</b>	<b>59</b>	<b>125</b>	<b>39</b>	<b>5</b>	<b>24</b>	<b>36</b>	<b>20</b>	<b>1</b>	<b>40</b>	<b>141</b>	<b>506</b>	<b>59</b>	<b>552</b>	<b>75</b>	<b>4</b>	<b>1708</b>

## Profile of complaints about health service organisations

Organisation Type	Number of organisations identified in complaints*	Number and type of issues identified in complaints about health service organisations															Total	
		Access	Code of conduct for Health Care Workers	Communication & Info.	Consent	Discharge & Transfer Arrangements	Environment/Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Medical Records	Medication	Prof. Conduct	Prof. Health	Prof. Performance	Reports/Certificates		Research/teaching/assessment
Public Hospital	69	30	2	31	19	25	15	4	23	-	16	12	20	-	54	7	-	258
Medical Centre	162	21	1	29	3	2	9	30	19	-	23	7	14	-	46	5	-	209
Mental Health Service	68	6	1	12	15	7	9	5	5	-	8	16	8	-	42	4	-	138
Pharmaceutical Service	61	3	-	7	2	-	6	3	3	-	1	36	4	-	4	2	-	71
Specialised Health Service	49	1	-	10	2	-	6	13	6	-	2	2	9	-	14	6	-	71
Licensed Private Hospital	33	5	-	11	2	7	4	5	8	-	1	1	4	-	19	1	-	68
Correctional Facility	19	13	-	8	-	-	4	-	4	-	3	12	2	-	17	1	-	64
Dental Service	44	7	-	10	1	-	7	6	3	-	3	-	-	-	23	-	-	60
Community Health Service	37	12	-	9	3	1	2	3	4	-	4	2	5	-	14	-	-	59
Private Organisation	42	1	-	9	1	-	6	4	3	-	5	4	8	-	13	-	-	54
Allied Health Service	30	1	-	4	1	-	1	4	3	-	7	2	4	-	9	1	-	37
Laboratory Service	26	1	-	5	-	-	1	16	1	-	1	-	-	-	7	2	-	34
Other Support Service	24	1	1	5	-	-	-	6	2	-	1	1	2	-	10	1	-	30
Public Health Service	21	5	-	8	-	1	4	2	-	-	1	1	1	-	7	-	-	30
Other Government Department	17	3	-	2	3	1	3	-	3	-	-	-	7	-	4	-	-	26
Aged Care Facility	20	1	-	5	-	-	2	2	1	-	-	3	2	-	8	-	-	24
Ambulance Service	14	2	-	5	2	-	1	-	2	-	-	2	5	-	4	-	-	23
Hospital & Health Service	11	5	-	2	-	-	2	-	1	-	1	1	1	-	6	-	-	19
Administrative Service	7	2	-	3	-	-	1	2	1	-	-	-	-	-	1	-	-	10
Licensed Day Hospital	3	1	-	1	-	1	-	1	-	-	-	-	-	-	1	-	-	5
Health Promotion Service	1	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	2
Optical Store	2	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Residential Care Service	2	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	2
Welfare Service	2	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	2
Area Health Services	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Health Information Service	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Paramedical Service	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Social Work Service	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Environmental Health Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Health Education Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Health Service District	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Nursing Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Parent Organisation	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Registration Board	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown Organisation Type	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	<b>768</b>	<b>123</b>	<b>5</b>	<b>176</b>	<b>54</b>	<b>45</b>	<b>84</b>	<b>107</b>	<b>94</b>	<b>-</b>	<b>77</b>	<b>103</b>	<b>96</b>	<b>-</b>	<b>307</b>	<b>31</b>	<b>-</b>	<b>1302</b>

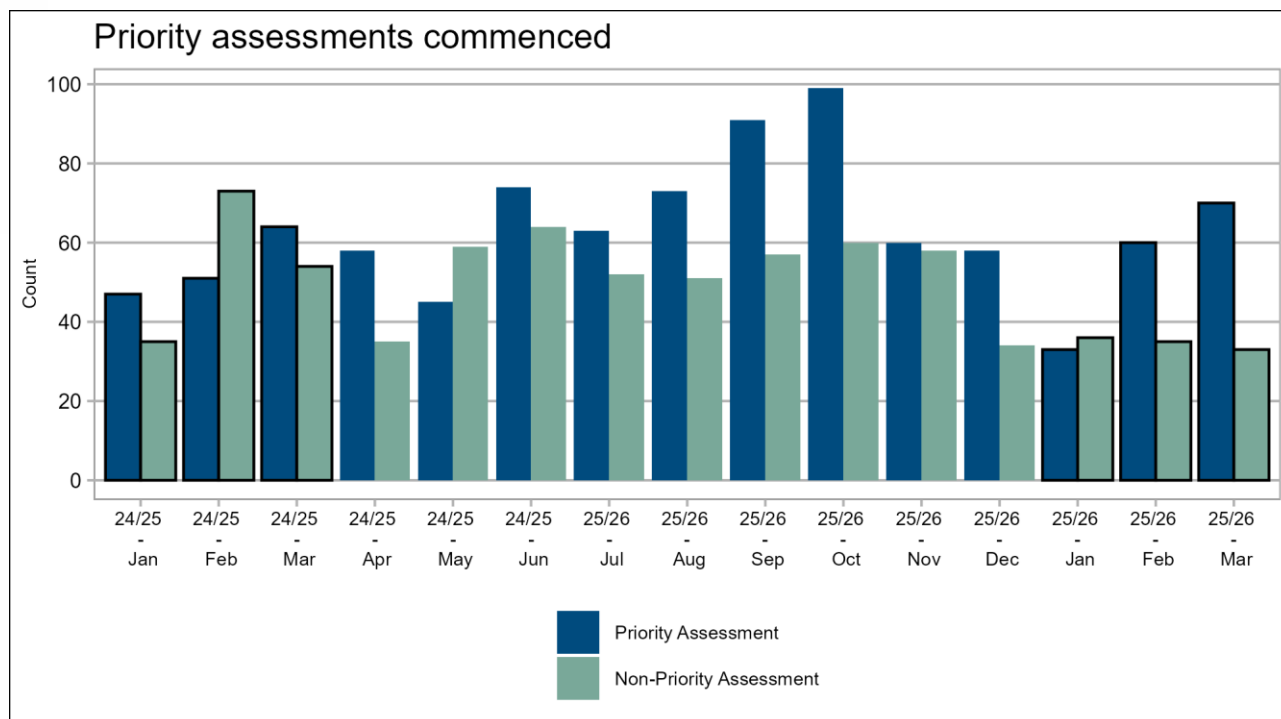
# Assessment

## Assessments started and completed



Assessments Started and Completed	Jan	Feb	Mar	Q3 total
Assessments started	69	95	103	267
Assessments completed	115	111	99	325

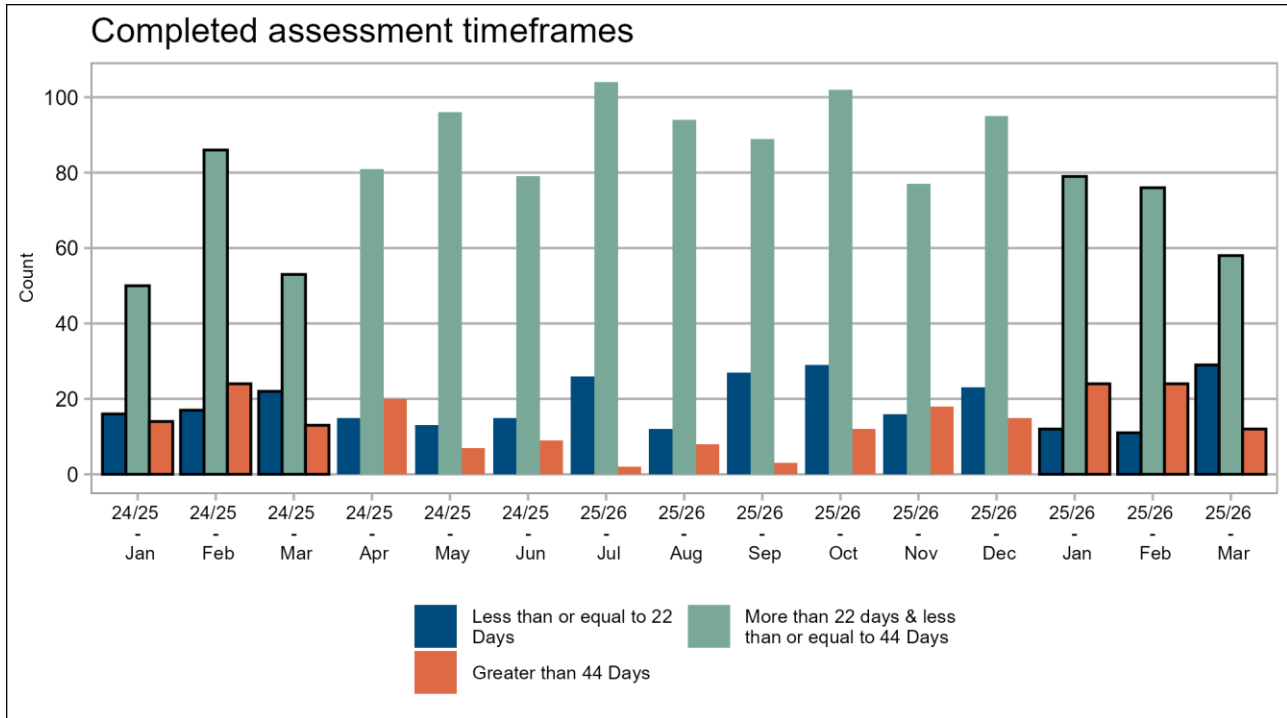
## Assessments started by prioritisation



Priority Assessment*	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Priority Assessment	33	47.8	60	63.2	70	68	163	61
Non-Priority Assessment	36	52.2	35	36.8	33	32	104	39
<b>Total</b>	<b>69</b>	<b>100</b>	<b>95</b>	<b>100</b>	<b>103</b>	<b>100</b>	<b>267</b>	<b>100</b>

\* 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<sup>2</sup>



Assessment timeframes	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Less than or equal to 22 Days	12	10.4	11	9.9	29	29.3	52	16
More than 22 days & less than or equal to 44 Days	79	68.7	76	68.5	58	58.6	213	65.5
Greater than 44 Days	24	20.9	24	21.6	12	12.1	60	18.5
<b>Total</b>	<b>115</b>	<b>100</b>	<b>111</b>	<b>100</b>	<b>99</b>	<b>100</b>	<b>325</b>	<b>100</b>

<sup>2</sup> Section 49 of the *Health Ombudsman Act 2013* stipulates the period for completing assessments which is 22 business days after deciding to carry out the assessment and in certain circumstance this can be extended for a further 22 days. These circumstances include where further time is required because of the size or complexity of the complaint, or the time taken to obtain submissions.

## Assessment Outcomes

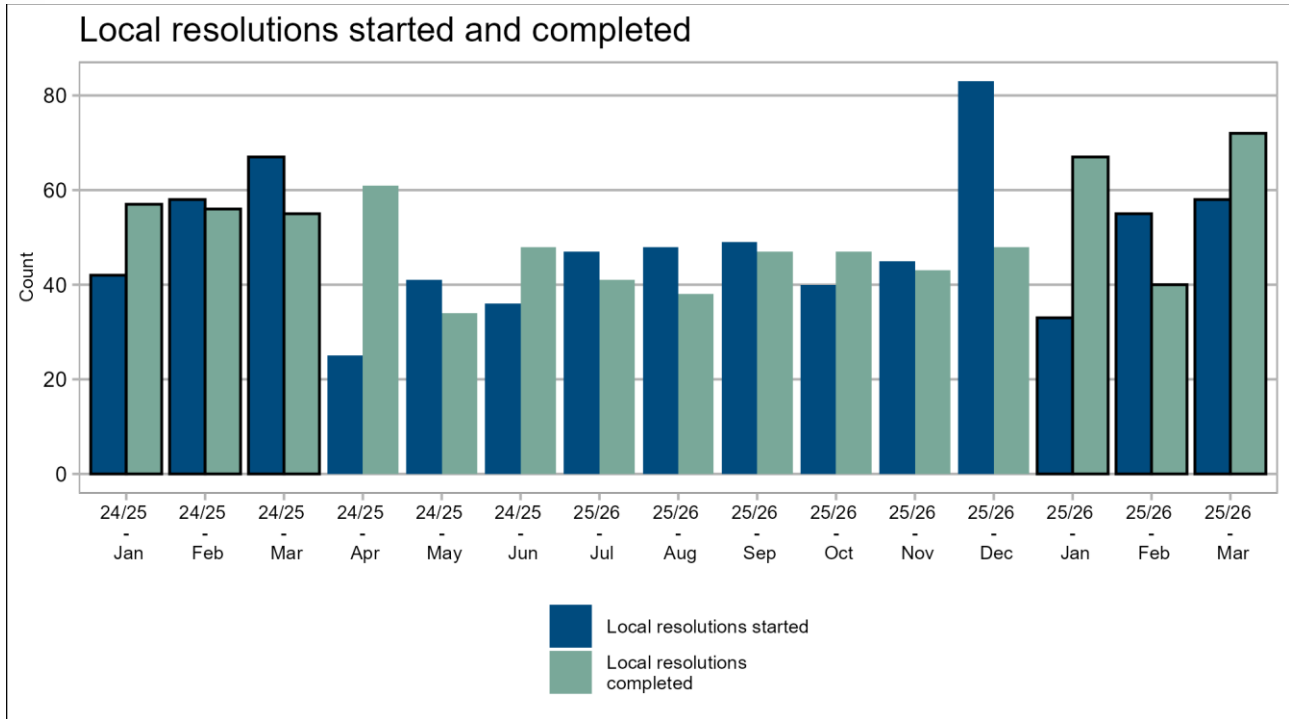
Assessment Outcomes*	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
No Further Action	38	41.3	42	43.3	65	55.6	145	47.4
Referred to another entity	12	13	16	16.5	17	14.5	45	14.7
Referred to Ahpra and the national boards	18	19.6	18	18.6	8	6.8	44	14.4
Investigation	11	12	12	12.4	15	12.8	38	12.4
Conciliation	9	9.8	8	8.2	8	6.8	25	8.2
Referred to Ahpra and another entity	4	4.3	1	1	4	3.4	9	2.9
Director of Proceedings	0	0	0	0	0	0	0	0
Local resolution	0	0	0	0	0	0	0	0
Referral Entity Undetermined at time of Reporting**	0	0	0	0	0	0	0	0
<b>Total</b>	<b>92</b>	<b>100</b>	<b>97</b>	<b>100</b>	<b>117</b>	<b>100</b>	<b>306</b>	<b>100</b>

\* Total assessment 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

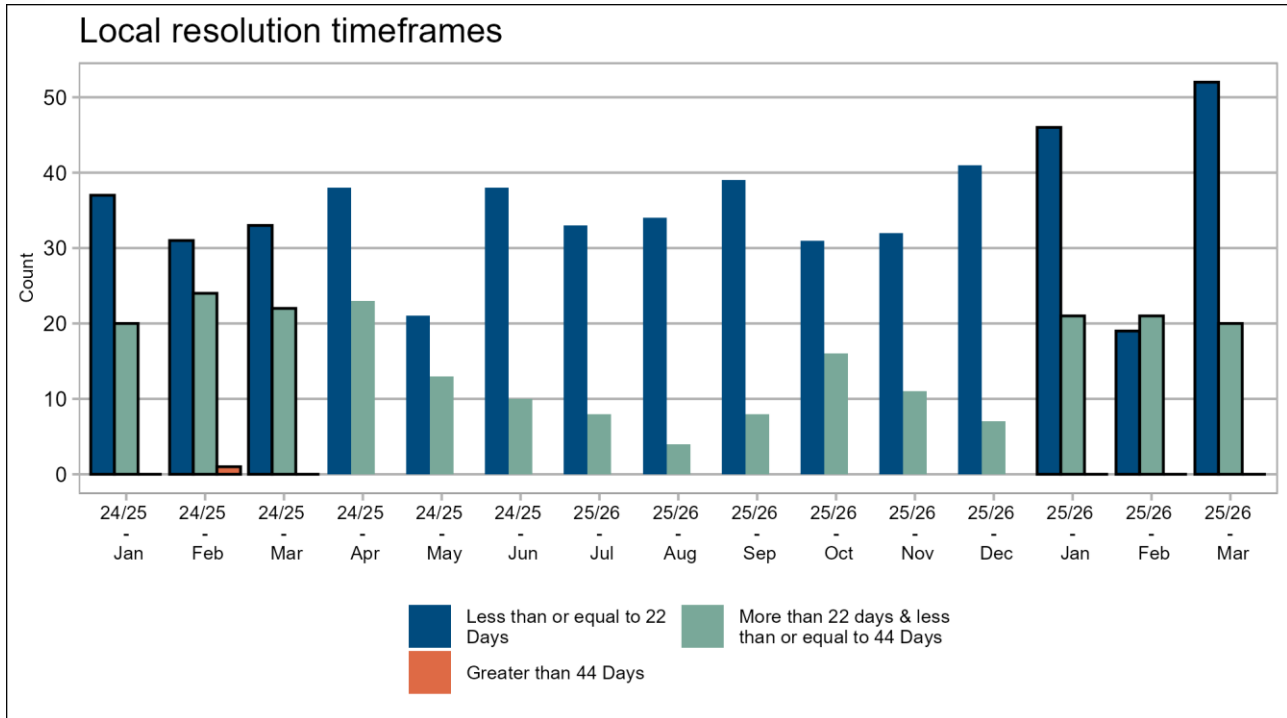
## Local resolutions started and completed



Local resolutions started and completed*	Jan	Feb	Mar	Q3 total
Local resolutions started	33	55	58	146
Local resolutions completed	67	40	72	179

\* 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.

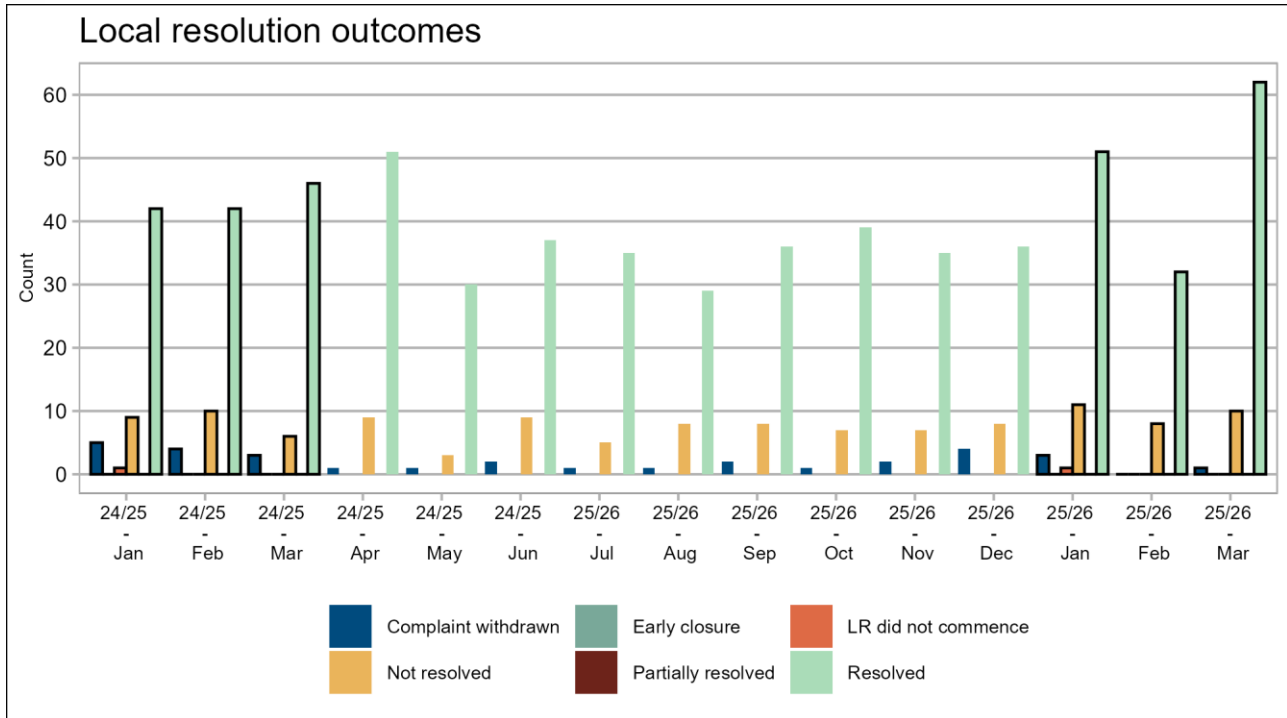
## Completed local resolution timeframes<sup>3</sup>



Local Resolution Timeframes	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Less than or equal to 22 Days	46	68.7	19	47.5	52	72.2	117	65.4
More than 22 days & less than or equal to 44 Days	21	31.3	21	52.5	20	27.8	62	34.6
Greater than 44 Days	0	0	0	0	0	0	0	0
<b>Total</b>	<b>67</b>	<b>100</b>	<b>40</b>	<b>100</b>	<b>72</b>	<b>100</b>	<b>179</b>	<b>100</b>

<sup>3</sup> Section 55 of the *Health Ombudsman Act 2013* stipulates the period for attempting resolution is 22 business days after deciding to try local resolution. In certain circumstance this period can be extended for a further 22 days. These circumstances include where further time is required to obtain submissions.

## Local resolution outcomes



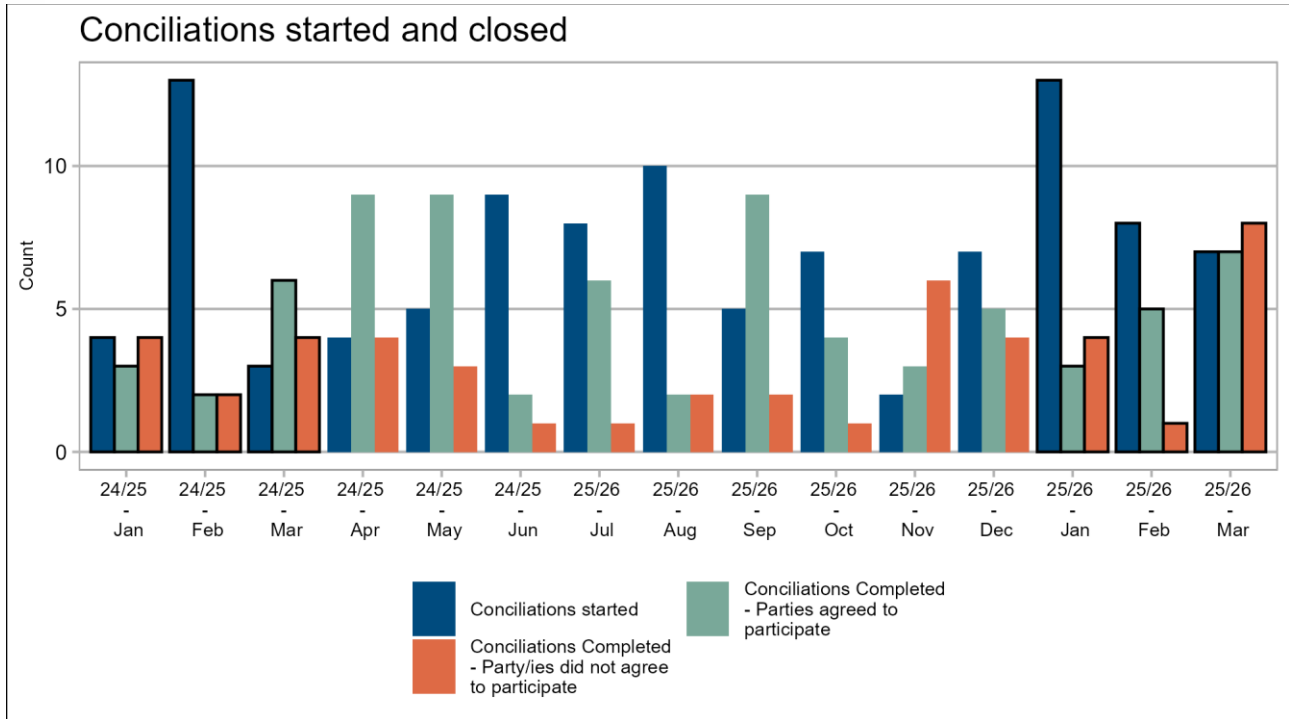
Local resolution outcomes	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Resolved	51	77.3	32	80	62	84.9	145	81
Not resolved	11	16.7	8	20	10	13.7	29	16.2
Complaint withdrawn*	3	4.5	0	0	1	1.4	4	2.2
LR did not commence**	1	1.5	0	0	0	0	1	0.6
Early closure	0	0	0	0	0	0	0	0
Partially resolved	0	0	0	0	0	0	0	0
<b>Total</b>	<b>66</b>	<b>100</b>	<b>40</b>	<b>100</b>	<b>73</b>	<b>100</b>	<b>179</b>	<b>100</b>

\* 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

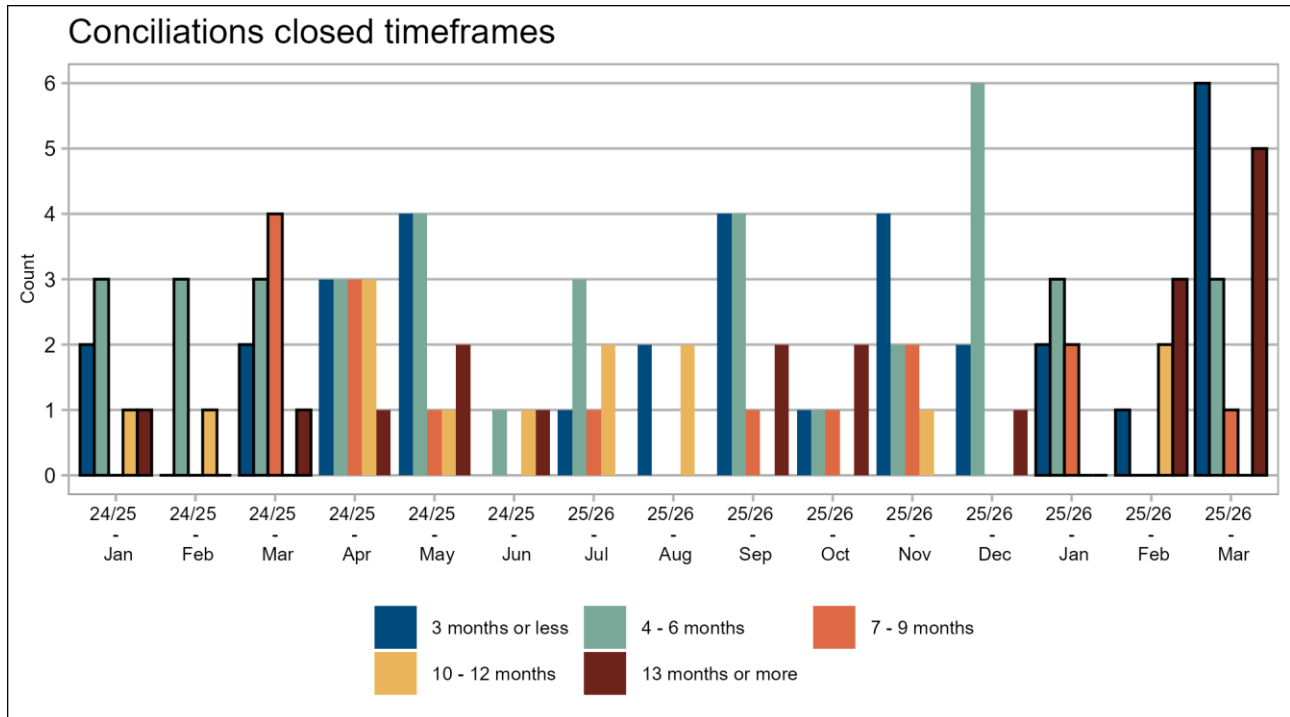


Conciliations this quarter	Jan	Feb	Mar	Q3 total
Conciliations started*	13	8	7	28
Conciliations Completed - Parties agreed to participate	3	5	7	15
Conciliations Completed - Party/ies did not agree to participate	4	1	8	13

\* 'Conciliations started' includes all matters that entered the conciliation workflow during the reporting period. This includes matters where agreement to participate has or has not been reached or the decision is pending. 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.

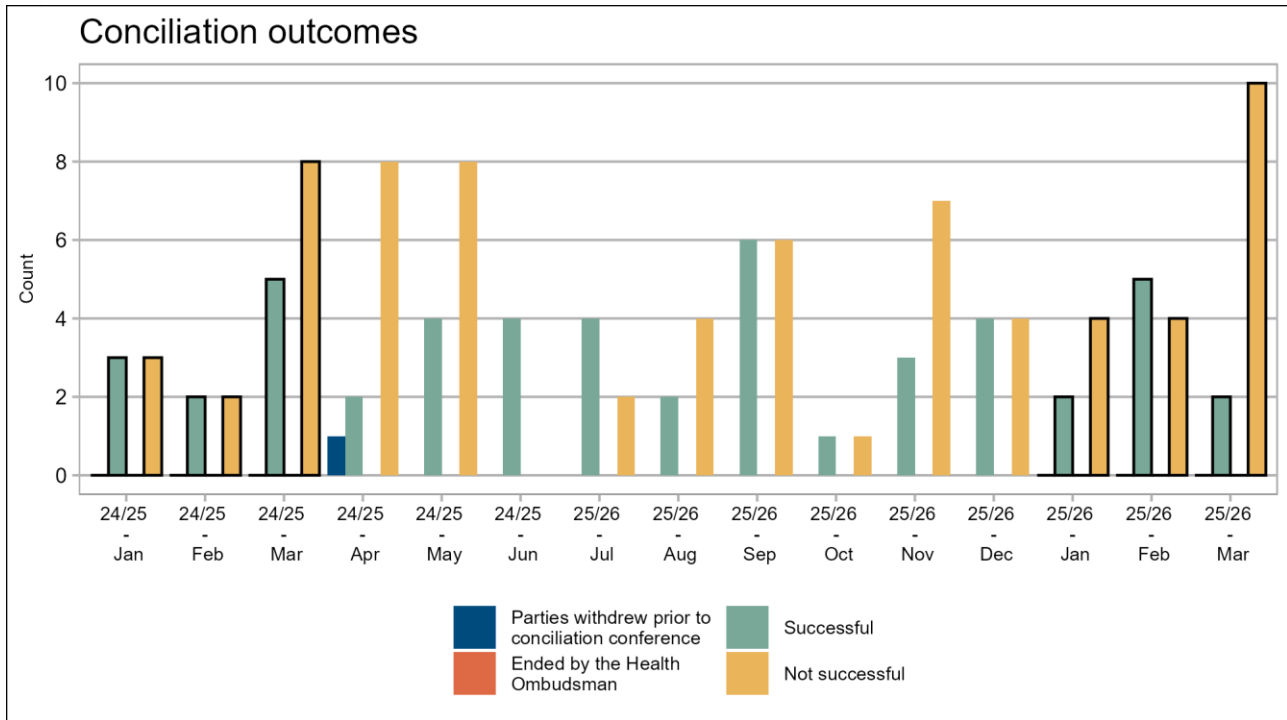
# Completed conciliations

## Timeframes



Conciliations Closed	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
3 months or less	2	28.6	1	16.7	6	40	9	32.1
4 - 6 months	3	42.9	0	0	3	20	6	21.4
7 - 9 months	2	28.6	0	0	1	6.7	3	10.7
10 - 12 months	0	0	2	33.3	0	0	2	7.1
13 months or more	0	0	3	50	5	33.3	8	28.6
<b>Total</b>	<b>7</b>	<b>100</b>	<b>6</b>	<b>100</b>	<b>15</b>	<b>100</b>	<b>28</b>	<b>100</b>

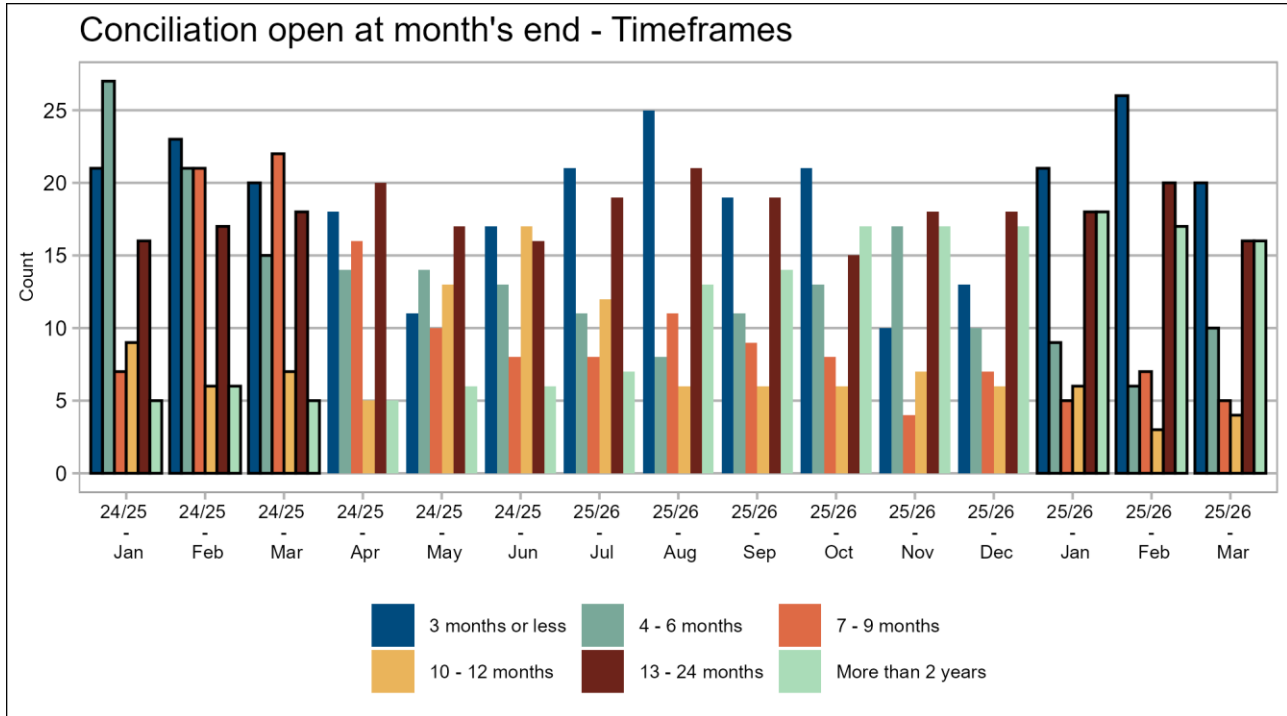
## Outcomes



Conciliation Outcomes	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Not successful	4	66.7	4	44.4	10	83.3	18	66.7
Successful	2	33.3	5	55.6	2	16.7	9	33.3
Parties withdrew prior to conciliation conference	0	0	0	0	0	0	0	0
Ended by the Health Ombudsman	0	0	0	0	0	0	0	0
<b>Total</b>	<b>6</b>	<b>100</b>	<b>9</b>	<b>100</b>	<b>12</b>	<b>100</b>	<b>27</b>	<b>100</b>

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.

## Open conciliation timeframes



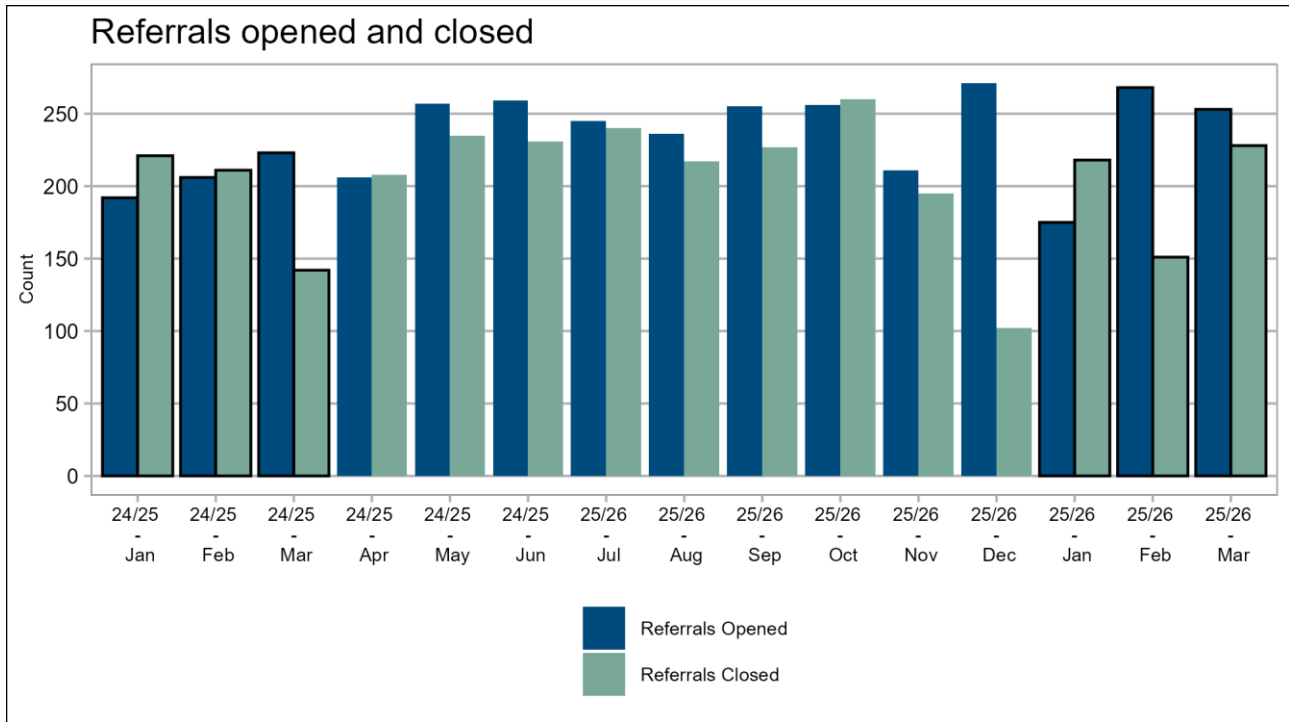
Open at month's end timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	21	27.3	26	32.9	20	28.2
4 - 6 months	9	11.7	6	7.6	10	14.1
7 - 9 months	5	6.5	7	8.9	5	7
10 - 12 months	6	7.8	3	3.8	4	5.6
13 - 24 months	18	23.4	20	25.3	16	22.5
More than 2 years	18	23.4	17	21.5	16	22.5
<b>Total</b>	<b>77</b>	<b>100</b>	<b>79</b>	<b>100</b>	<b>71</b>	<b>100</b>

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)

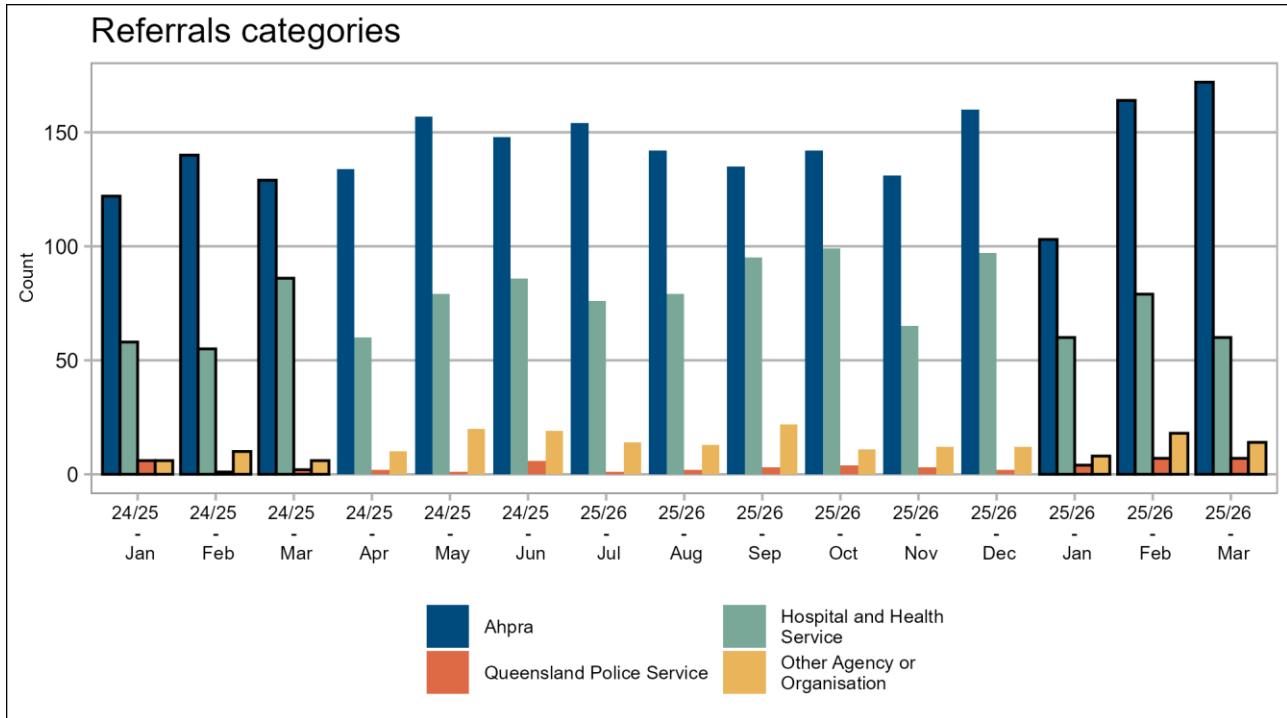
As OHO is the single point of entry for health service complaints in Queensland, effective referral coordination and monitoring is critical. Under the Act, referrals to Ahpra are conducted under s91 either following joint consideration or at other points throughout the regulatory / complaints process. 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 and closed



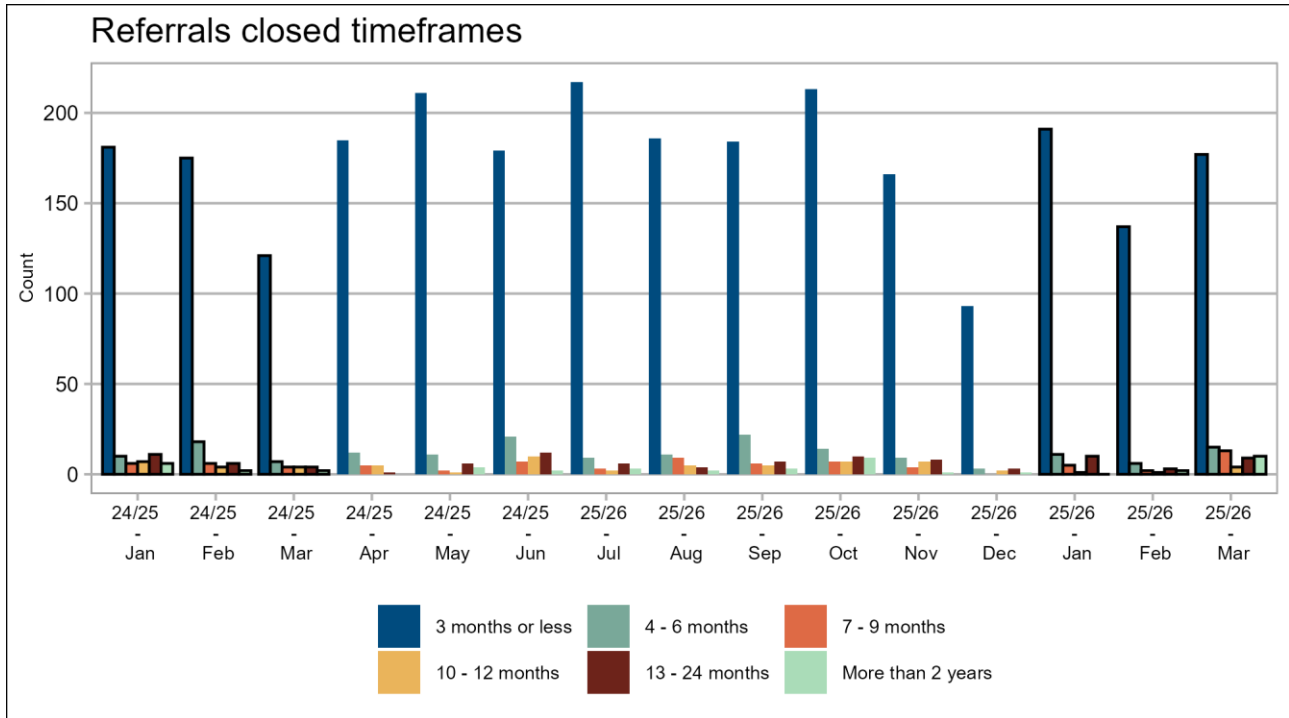
Referrals	Jan	Feb	Mar	Q3 total
Referrals Opened	175	268	253	696
Referrals Closed	218	151	228	597

## Referrals categories



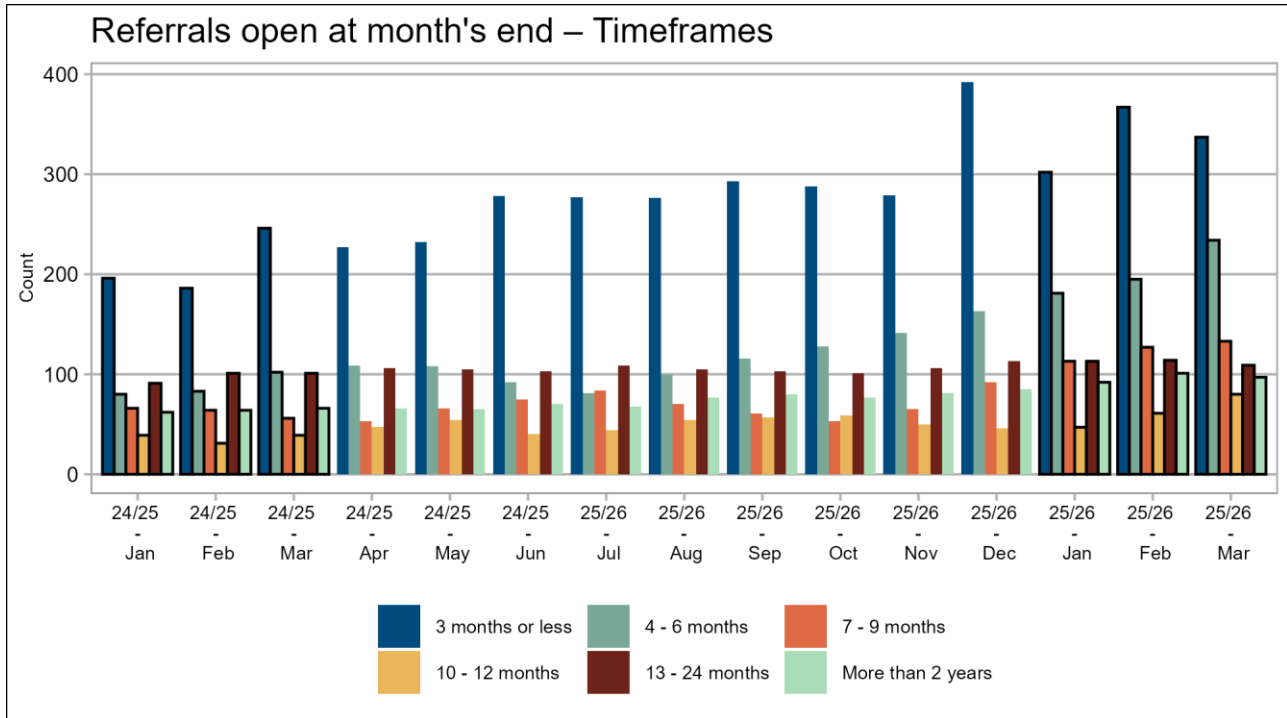
Referrals categories	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Ahpra	103	58.9	164	61.2	172	68	439	63.1
Hospital and Health Service	60	34.3	79	29.5	60	23.7	199	28.6
Queensland Police Service	4	2.3	7	2.6	7	2.8	18	2.6
Other Agency or Organisation	8	4.6	18	6.7	14	5.5	40	5.7
<b>Total</b>	<b>175</b>	<b>100</b>	<b>268</b>	<b>100</b>	<b>253</b>	<b>100</b>	<b>696</b>	<b>100</b>

## Referrals closed timeframes



Referrals closed timeframes	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
3 months or less	191	87.6	137	90.7	177	77.6	505	84.6
4 - 6 months	11	5	6	4	15	6.6	32	5.4
7 - 9 months	5	2.3	2	1.3	13	5.7	20	3.4
10 - 12 months	1	0.5	1	0.7	4	1.8	6	1
13 - 24 months	10	4.6	3	2	9	3.9	22	3.7
More than 2 years	0	0	2	1.3	10	4.4	12	2
<b>Total</b>	<b>218</b>	<b>100</b>	<b>151</b>	<b>100</b>	<b>228</b>	<b>100</b>	<b>597</b>	<b>100</b>

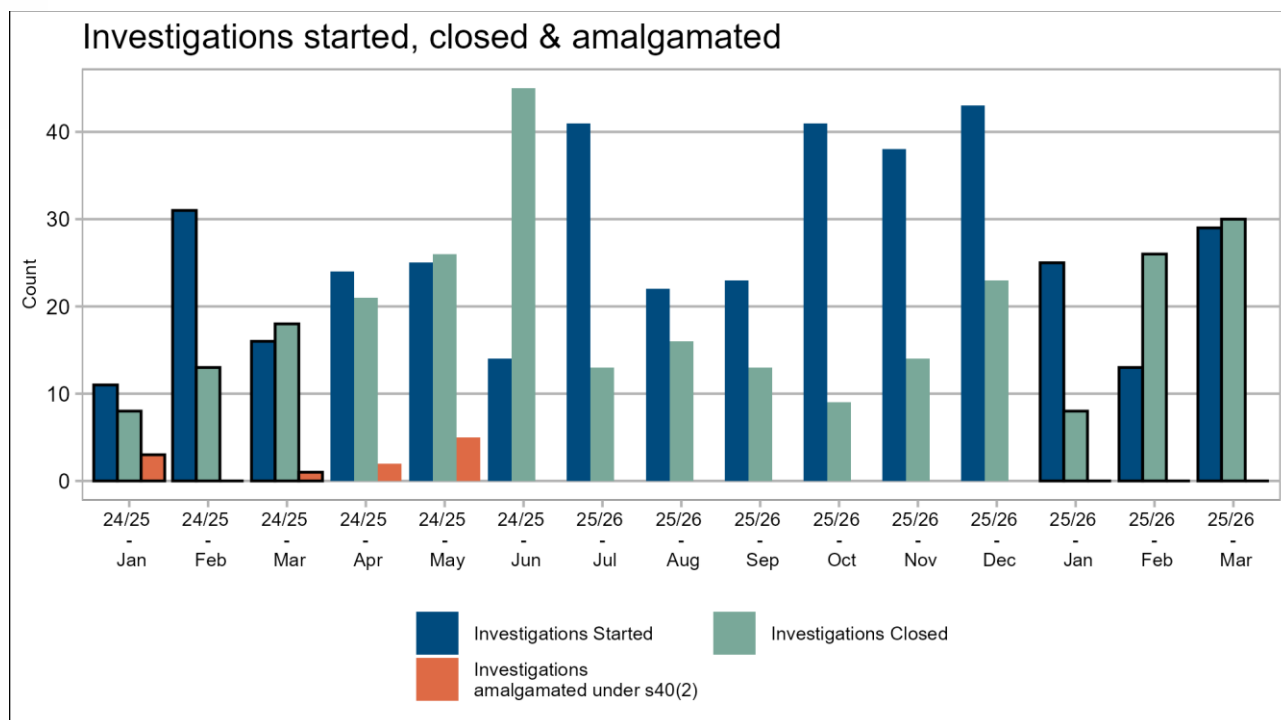
## Referrals open timeframes



Open at month's end timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	302	35.6	367	38	337	34
4 - 6 months	181	21.3	195	20.2	234	23.6
7 - 9 months	113	13.3	127	13.2	133	13.4
10 - 12 months	47	5.5	61	6.3	80	8.1
13 - 24 months	113	13.3	114	11.8	109	11
More than 2 years	92	10.8	101	10.5	97	9.8
<b>Total</b>	<b>848</b>	<b>100</b>	<b>965</b>	<b>100</b>	<b>990</b>	<b>100</b>

# Investigation

## Investigations started, closed and amalgamated

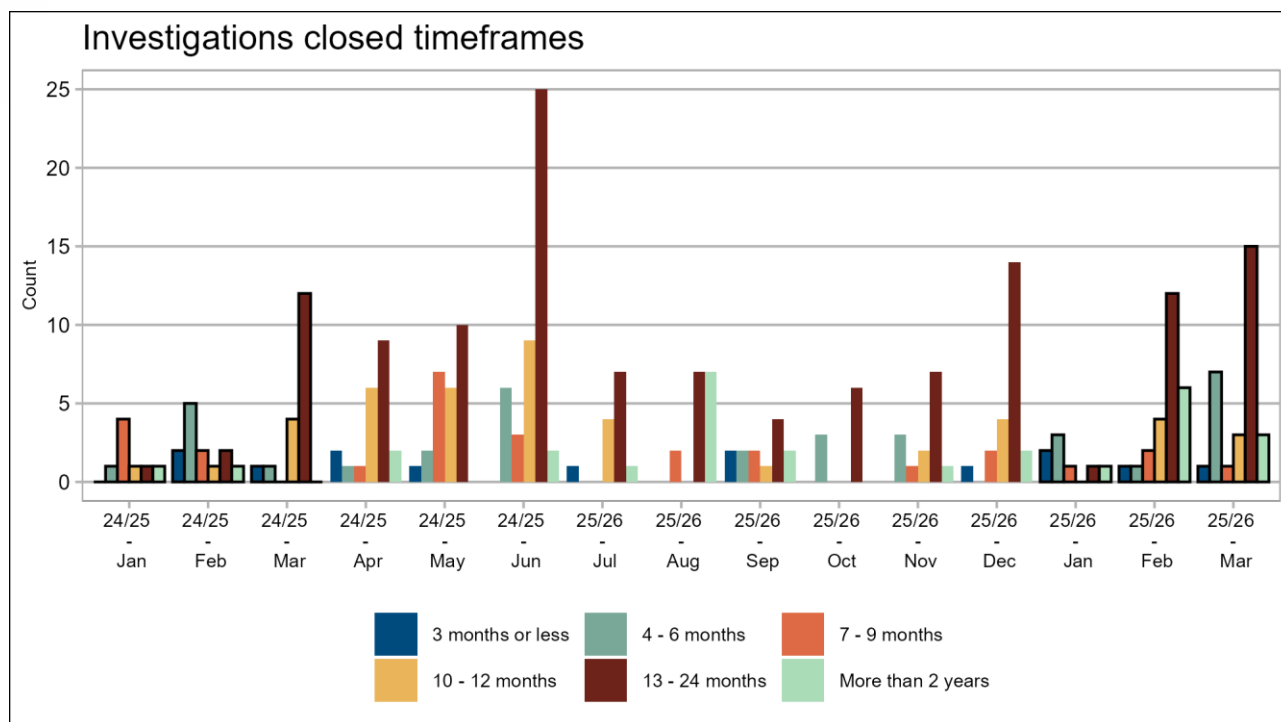


Investigations this quarter	Jan	Feb	Mar	Q3 total
Investigations started*	25	13	29	67
Investigations closed	8	26	30	64
Investigations amalgamated under s40(2)	0	0	0	0

\* 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	Jan		Feb		Mar		Q3 total	
	Number	%	Number	%	Number	%	Number	%
3 months or less	2	25	1	3.8	1	3.3	4	6.2
4 - 6 months	3	37.5	1	3.8	7	23.3	11	17.2
7 - 9 months	1	12.5	2	7.7	1	3.3	4	6.2
10 - 12 months	0	0	4	15.4	3	10	7	10.9
13 - 24 months	1	12.5	12	46.2	15	50	28	43.8
More than 2 years	1	12.5	6	23.1	3	10	10	15.6
<b>Total</b>	<b>8</b>	<b>100</b>	<b>26</b>	<b>100</b>	<b>30</b>	<b>100</b>	<b>64</b>	<b>100</b>

## Outcomes

As there can be different outcomes of investigations for registered practitioners, unregistered practitioners and for health service and systemic investigations, these outcomes are reported separately below to provide a more accurate representation of the outcomes compared with previous quarterly performance reports. This breakdown of outcomes was introduced in the 2024-25 Annual report.

### Outcomes – All Investigation Types

Outcomes*	Jan		Feb		Mar		Q3 total	
<b>Outcomes – Registered practitioner investigations</b>								
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings**	2	25	12	50	12	37.5	26	40.6
Recommend Health Ombudsman issue a Prohibition Order***	0	0	0	0	0	0	0	0
Referred to Ahpra	1	12.5	5	20.8	0	0	6	9.4
Referred to another agency	0	0	0	0	0	0	0	0
Completed with no further action	3	37.5	3	12.5	10	31.2	16	25
<b>Total</b>	<b>6</b>	<b>75</b>	<b>20</b>	<b>83.3</b>	<b>22</b>	<b>68.7</b>	<b>48</b>	<b>75</b>
<b>Outcomes – Unregistered practitioner investigations</b>								
Recommend Health Ombudsman issue a Prohibition Order	0	0	1	4.2	4	12.5	5	7.8
Referred to another agency	0	0	0	0	0	0	0	0
Completed with no further action	0	0	2	8.3	2	6.2	4	6.2
<b>Total</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>12.5</b>	<b>6</b>	<b>18.7</b>	<b>9</b>	<b>14</b>
<b>Outcomes – Systemic investigations</b>								
Completed with recommendation monitoring	1	12.5	0	0	1	3.1	2	3.1
Completed with recommendation monitoring and Referred for conciliation	0	0	0	0	0	0	0	0
Referred for conciliation	0	0	0	0	0	0	0	0
Referred to another agency	0	0	0	0	2	6.2	2	3.1
Completed with no further action	1	12.5	1	4.2	1	3.1	3	4.7
<b>Total</b>	<b>2</b>	<b>25</b>	<b>1</b>	<b>4.2</b>	<b>4</b>	<b>12.4</b>	<b>7</b>	<b>10.9</b>
<b>Grand Total</b>	<b>8</b>	<b>100</b>	<b>24</b>	<b>100</b>	<b>32</b>	<b>100</b>	<b>64</b>	<b>100</b>



\* 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 on previous pages.

\*\* 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.

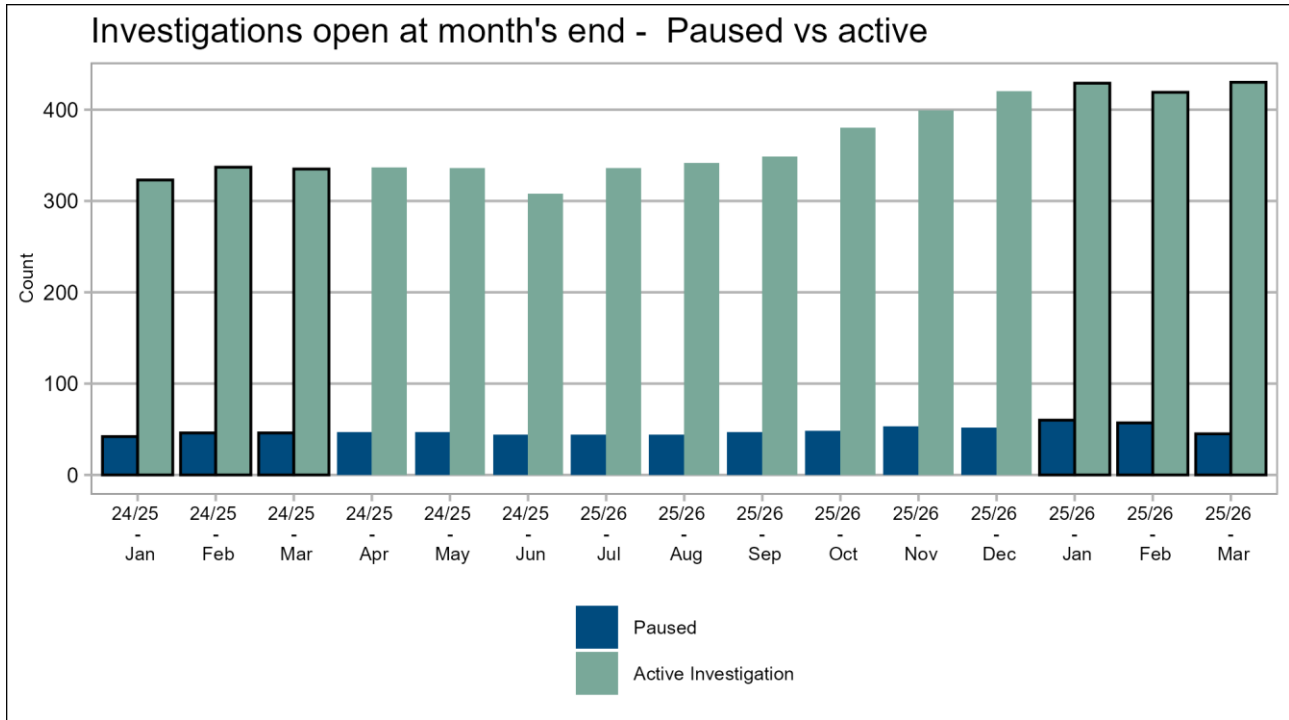
\*\*\* A registered practitioner may also be subjected to a Prohibition Order to prohibit or restrict their provision of 'health services' to persons outside of their registered field of practice (e.g. a registered practitioner (such as a physiotherapist) charged with assault who also provides separate unregistered health services (such as massage therapy) could be subject to a Prohibition Order restricting or prohibiting provision of health services in an unregistered capacity).

## Open investigations

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

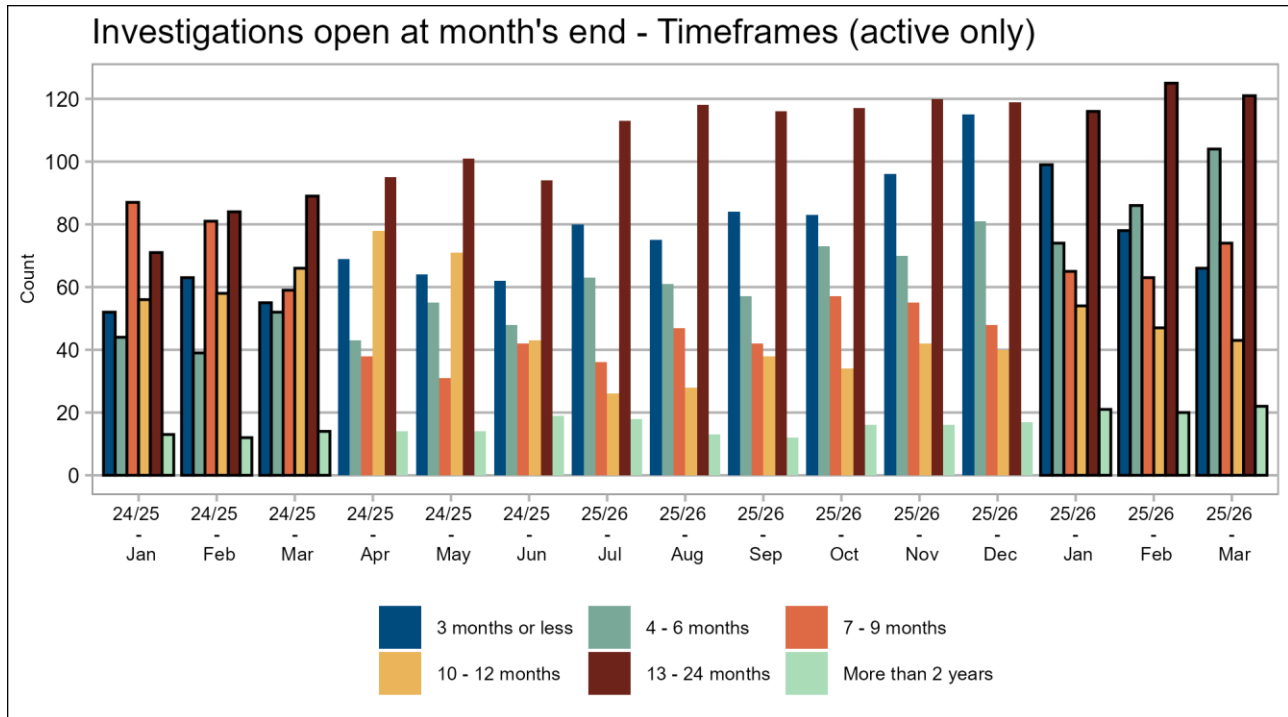
Active investigations are being currently investigated, while paused investigations are not able to be investigated until such time as another agency—such as the Queensland Police Service or the Coroner’s Court of Queensland—concludes their own processes. Despite being unable to progress paused investigations,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

### Active and paused investigations



Open Investigations - Paused vs active	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Paused	60	12.3	57	12	45	9.5
Active Investigation	429	87.7	419	88	430	90.5
<b>Total</b>	<b>489</b>	<b>100</b>	<b>476</b>	<b>100</b>	<b>475</b>	<b>100</b>

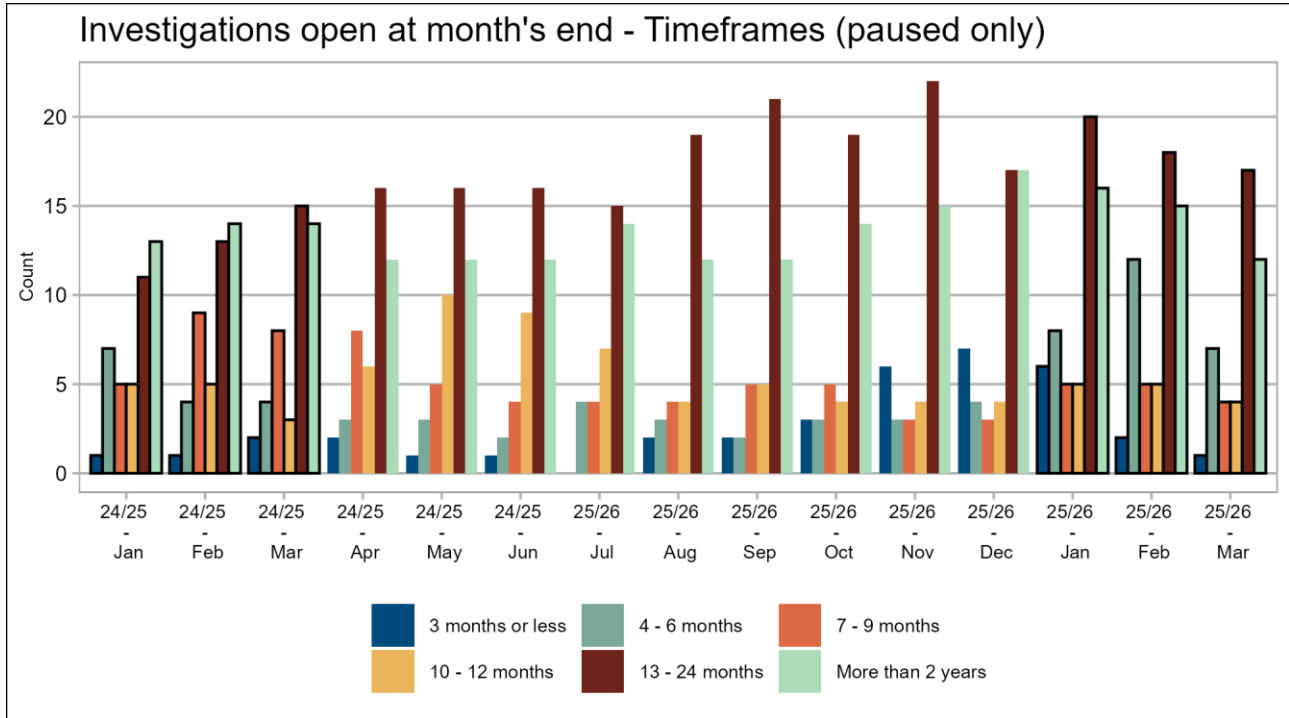
## Investigations open at month end – Timeframes (active only)



Open (Active) Investigations - Timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	99	23.1	78	18.6	66	15.3
4 - 6 months	74	17.2	86	20.5	104	24.2
7 - 9 months	65	15.2	63	15	74	17.2
10 - 12 months	54	12.6	47	11.2	43	10
13 - 24 months	116	27	125	29.8	121	28.1
More than 2 years	21	4.9	20	4.8	22	5.1
<b>Total</b>	<b>429</b>	<b>100</b>	<b>419</b>	<b>100</b>	<b>430</b>	<b>100</b>

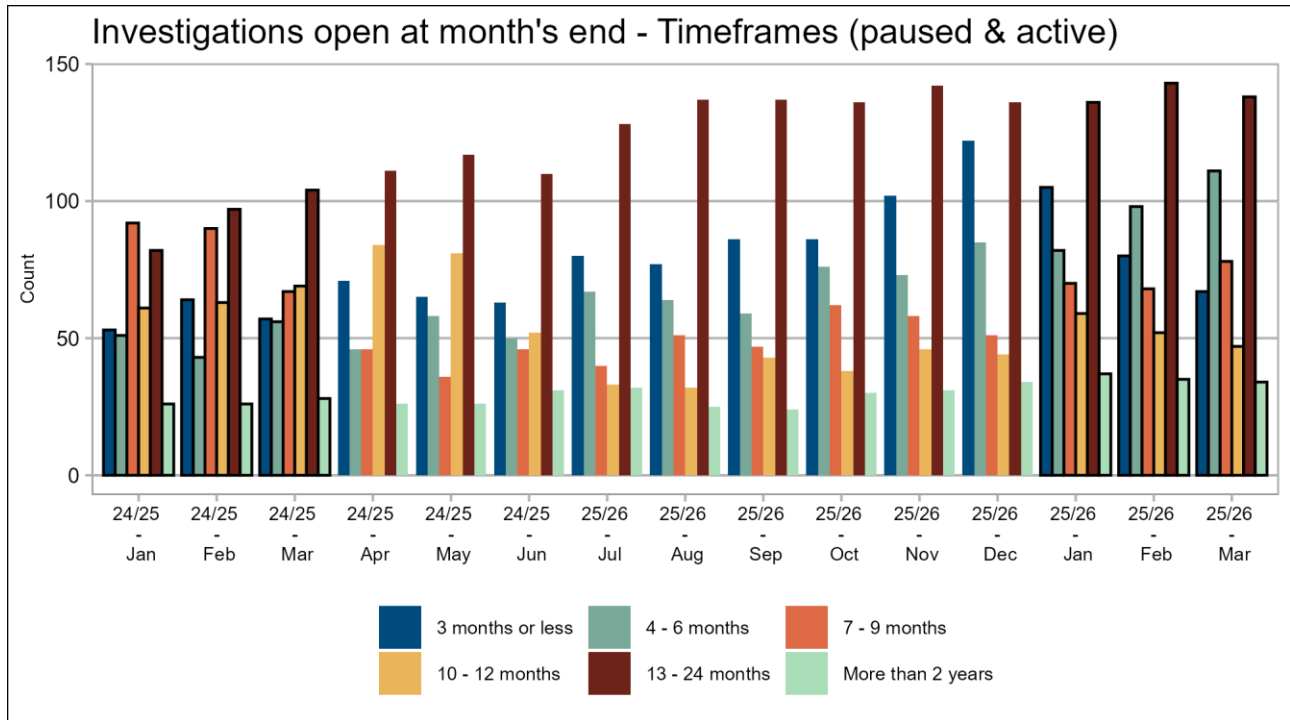
All investigations that have been open for 12 months or more are published on our investigations register, available on our website ([www.oho.qld.gov.au/investigations/investigations-register](http://www.oho.qld.gov.au/investigations/investigations-register)).

## Paused investigation timeframes



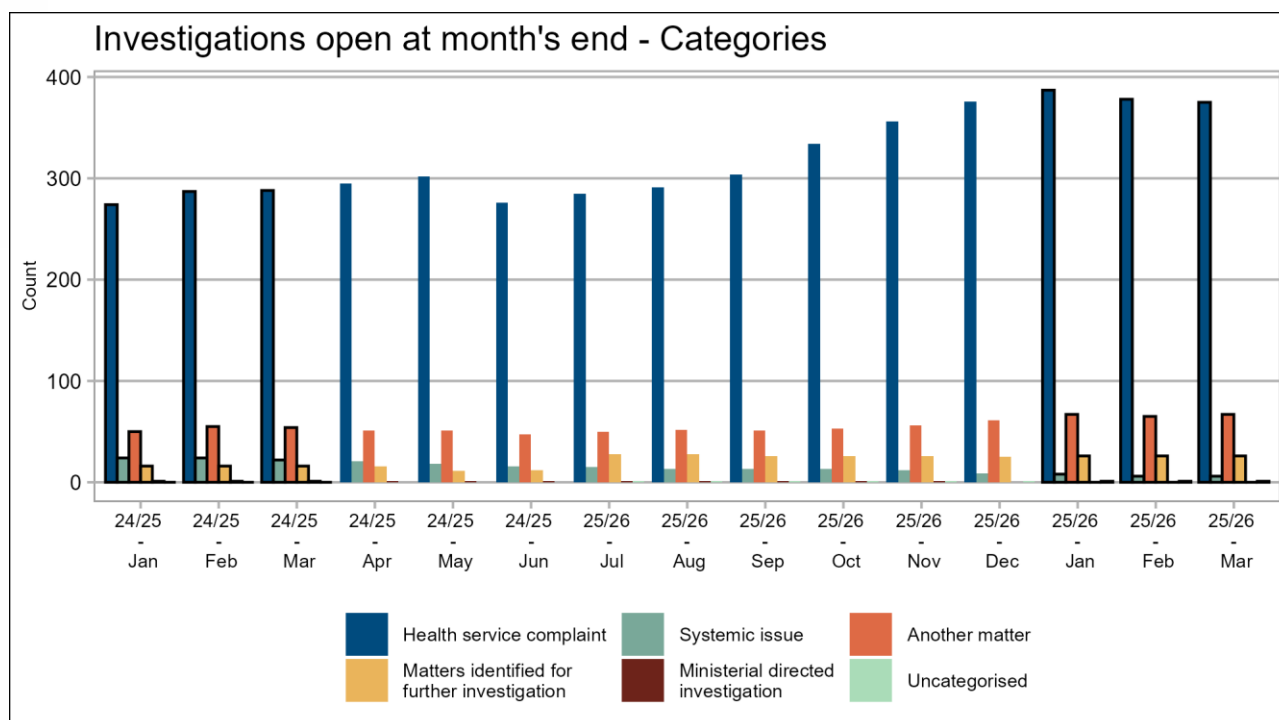
Open (Paused) Investigations - Timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	6	10	2	3.5	1	2.2
4 - 6 months	8	13.3	12	21.1	7	15.6
7 - 9 months	5	8.3	5	8.8	4	8.9
10 - 12 months	5	8.3	5	8.8	4	8.9
13 - 24 months	20	33.3	18	31.6	17	37.8
More than 2 years	16	26.7	15	26.3	12	26.7
<b>Total</b>	<b>60</b>	<b>100</b>	<b>57</b>	<b>100</b>	<b>45</b>	<b>100</b>

## Active and paused (All) investigation timeframes



Open (Active and Paused) Investigations - Timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	105	21.5	80	16.8	67	14.1
4 - 6 months	82	16.8	98	20.6	111	23.4
7 - 9 months	70	14.3	68	14.3	78	16.4
10 - 12 months	59	12.1	52	10.9	47	9.9
13 - 24 months	136	27.8	143	30	138	29.1
More than 2 years	37	7.6	35	7.4	34	7.2
<b>Total</b>	<b>489</b>	<b>100</b>	<b>476</b>	<b>100</b>	<b>475</b>	<b>100</b>

## Open investigation categories



Open Investigations - Categories	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Health service complaint	387	79.1	378	79.4	375	78.9
Systemic issue*	8	1.6	6	1.3	6	1.3
Another matter**	67	13.7	65	13.7	67	14.1
Matters identified for further investigation***	26	5.3	26	5.5	26	5.5
Ministerial directed investigation	0	0	0	0	0	0
Uncategorised	1	0.2	1	0.2	1	0.2
<b>Total</b>	<b>489</b>	<b>100</b>	<b>476</b>	<b>100</b>	<b>475</b>	<b>100</b>

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

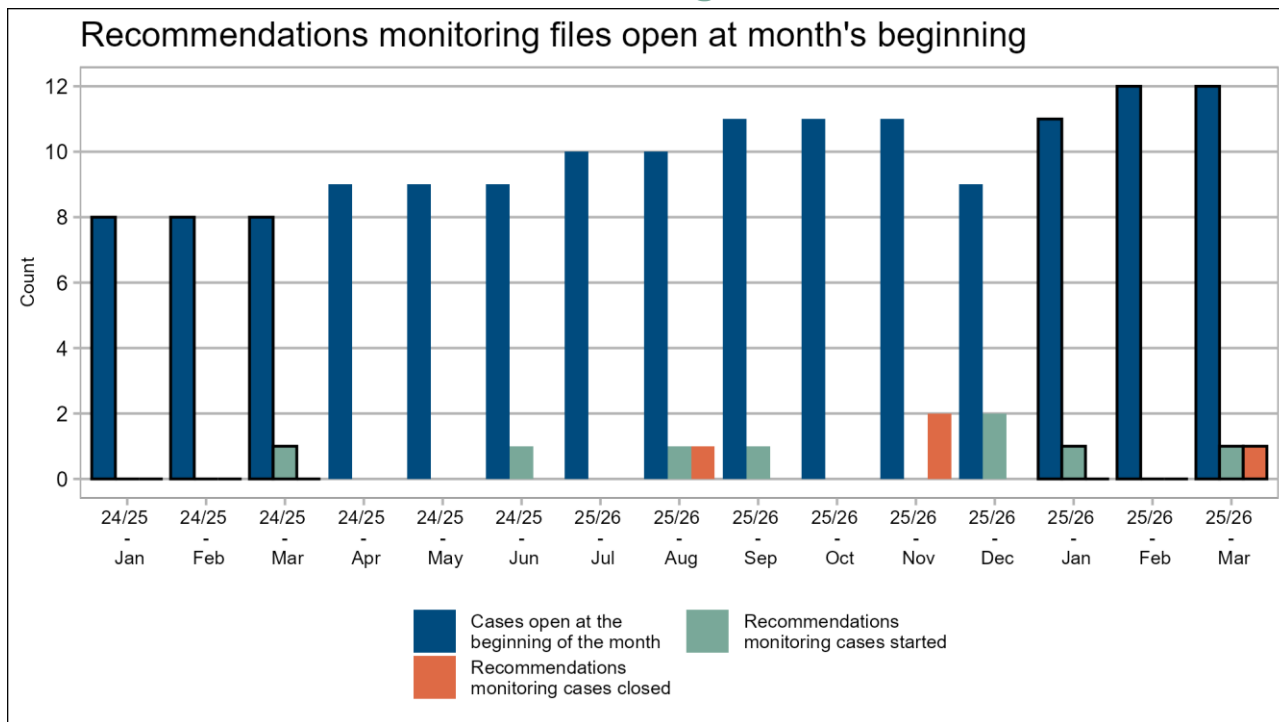
\*\* Matters brought to the Health Ombudsman's attention by means other than through a health service complaint or notification which warrant investigation. These are commonly referred to internally as 'own motion' investigations.

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

# Monitoring investigation recommendations

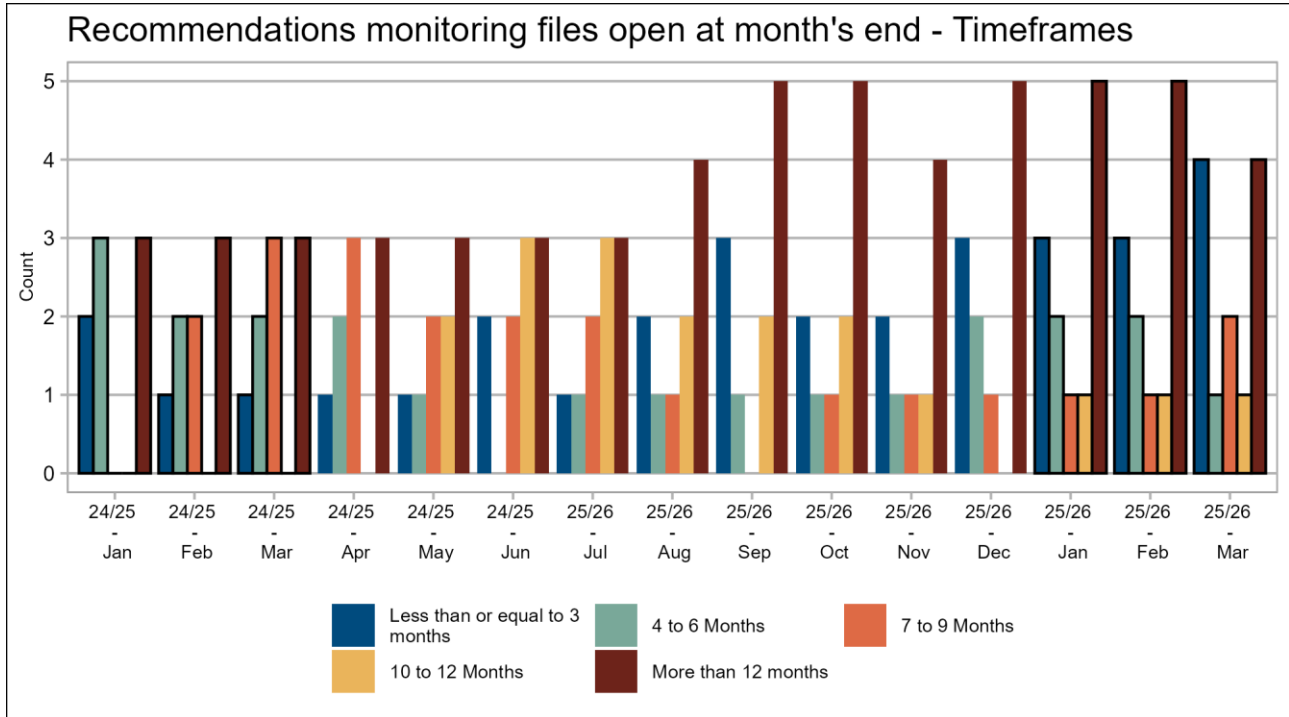
At the completion of certain investigations, the Health Ombudsman makes recommendations to health services for how they can improve service delivery and/or prevent the issues identified in the investigation from happening again. In these instances, the OHO puts in place a recommendation monitoring program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

## OHO recommendations monitoring



OHO monitoring cases	Jan	Feb	Mar
Cases open at the beginning of the month	11	12	12
Recommendations monitoring cases started	1	0	1
Recommendations monitoring cases closed	0	0	1

## Open recommendations monitoring case timeframes



Monitoring case timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	3	25	3	25	4	33.3
4 - 6 months	2	16.7	2	16.7	1	8.3
7 - 9 months	1	8.3	1	8.3	2	16.7
10 - 12 months	1	8.3	1	8.3	1	8.3
More than 12 months	5	41.7	5	41.7	4	33.3
<b>Total</b>	<b>12</b>	<b>100</b>	<b>12</b>	<b>100</b>	<b>12</b>	<b>100</b>

# Director of Proceedings

The role of the Director of Proceedings is to independently assess the merits of an investigation and determine whether the matter in relation to a registered practitioner is suitable to be referred to the Queensland Civil and Administrative Tribunal (QCAT) for a determination in relation to professional disciplinary action.

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	%
Medical Practitioner	14 <sup>4</sup>	45.1
Registered Nurse	9	29.1
Midwife	3 <sup>5</sup>	9.7
Psychologist	3	9.7
Paramedic	1 <sup>6</sup>	3.2
Physiotherapist	1	3.2
<b>Total</b>	<b>31</b>	<b>100</b>

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	%
Medical Practitioner <sup>7</sup>	24	48
Registered Nurse <sup>8</sup>	15	30
Physiotherapist	3	6
Psychologist	3	6
Midwife	2	4
Paramedic	2	4
Pharmacist	1	2
<b>Total</b>	<b>50</b>	<b>100</b>

<sup>4</sup> The 14 matters relate to 9 different practitioners (3x one Practitioner, 2x one Practitioner, 3x one Practitioner)

<sup>5</sup> Two of these matters relate to the same Practitioner.

<sup>6</sup> This figure relates to a matter that was identified (administrative error) which should have been recorded as received in Director of Proceeding (DoP) in a previous month

<sup>7</sup> This includes all medical practitioners including those with specialist registrations.

<sup>8</sup> This includes Registered Nurse and Enrolled Nurse registrations

# Outcomes of matters reviewed by the Director of Proceedings

## Matters filed in the Queensland Civil and Administrative Tribunal

Practitioner type	Number	%
Registered Nurse	8 <sup>9</sup>	40
Medical Practitioner	6 <sup>10</sup>	30
Chiropractor	1 <sup>11</sup>	5
Midwife	1	5
Paramedic	1	5
Pharmacist	1 <sup>12</sup>	5
Physiotherapist	1	5
Psychologist	1	5
<b>Total Registered</b>	<b>20</b>	<b>100</b>

## Matters referred back to the Health Ombudsman

Practitioner type	Number	%
Medical Practitioner	1	33.3
Pharmacist	1	33.3
Registered Nurse	1	33.3
<b>Total</b>	<b>3</b>	<b>100</b>

<sup>9</sup> This figure includes a referral where the Director of Proceedings decided to refer three matters regarding the same Practitioner to QCAT and filed the three matters as one referral.

<sup>10</sup> 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.

<sup>11</sup> 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.

<sup>12</sup> 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.

## Queensland Civil and Administrative Tribunal disciplinary matters

### Matters open in the Queensland Civil and Administrative Tribunal

Practitioner type	Number	%
Registered Nurse <sup>13</sup>	30	35.7
Medical Practitioner <sup>14</sup>	27	32.2
Pharmacist	6	7.2
Paramedic	5	5.9
Psychologist	5	5.9
Chinese Medical Practitioner	3	3.6
Chiropractor	3	3.6
Midwife	2	2.3
Physiotherapist	2	2.3
Podiatrist	1	1.2
<b>Total</b>	<b>84</b>	<b>100</b>

### Outcomes of Queensland Civil and Administrative disciplinary matters

#### Queensland Civil and Administrative Tribunal decisions

Practitioner type	Number
Medical Practitioner	3
Paramedic	2
Psychologist	1
Registered Nurse	1
<b>Total QCAT Decisions</b>	<b>7</b>

#### Matters withdrawn

Practitioner type	Number
-	-
<b>Total matters withdrawn</b>	<b>-</b>

<sup>13</sup> This includes Registered Nurse and Enrolled Nurse registrations

<sup>14</sup> This includes all medical practitioners including those with specialist registrations

## Decisions on matters referred to the Queensland Civil and Administrative Tribunal

There have been 7 decisions made on matters referred to QCAT during Q3.

Date of Decision	Matter	Practitioner Type	Details of QCAT Decision
29-Jan-26	OCR081-25	Medical Practitioner	<ol style="list-style-type: none"> <li>1. Professional Misconduct</li> <li>2. Reprimand</li> <li>3. Registration cancelled</li> <li>4. Disqualified from applying for registration for 4 years</li> <li>5. No order as to costs</li> </ol>
11-Feb-26	OCR059-25	Paramedic	<ol style="list-style-type: none"> <li>1. Unsatisfactory Professional Performance (Allegation 1)</li> <li>2. Unprofessional Conduct (Allegation 2)</li> <li>3. Professional Misconduct (Allegation 3)</li> <li>4. Cautioned (in respect of allegation 1 and the first of the allegations in allegation 2)</li> <li>5. Reprimand (allegation 2)</li> </ol> <p>In respect of that reprimand the Tribunal strongly recommends that it be removed from the public record four (4) months from today's date</p>
12-Feb-26	OCR083-25	Registered Nurse	<ol style="list-style-type: none"> <li>1. Professional Misconduct</li> <li>2. Reprimand</li> <li>3. Each party bear their own costs</li> </ol>
17-Feb-26	OCR053-25	Paramedic	<ol style="list-style-type: none"> <li>1. Professional Misconduct</li> <li>2. Reprimand</li> <li>3. Registration suspended for 3 months</li> <li>4. No order as to costs</li> </ol>
17-Feb-26	OCR185-21	Medical Practitioner	<ol style="list-style-type: none"> <li>1. Professional Misconduct</li> <li>2. Reprimand</li> <li>3. Disqualified from reapplying for registration indefinitely</li> <li>4. No order as to costs</li> </ol>
04-Mar-26	OCR054-25	Psychologist	<ol style="list-style-type: none"> <li>1. Professional Misconduct</li> <li>2. Reprimand</li> <li>3. Disqualified from applying for registration for 6 months</li> <li>4. Non-publication order</li> <li>5. Details re NPO</li> <li>6. No order as to costs</li> </ol>
30-Mar-26	OCR132-24	Medical Practitioner – Obstetrician & Gynaecologist	<ol style="list-style-type: none"> <li>1. Professional Misconduct</li> <li>2. Fined \$2,000</li> <li>3. Reprimand</li> <li>4. No order as to costs</li> </ol> <p>The Tribunal also recommends the reprimand referred to in order 3 above be removed from the public record on a date 12 months from the date of this order</p>

## Decisions on immediate action reviews

There were 0 decisions made by QCAT on immediate action reviews in Q3 2025-26 and 0 matters withdrawn by the Practitioner.

# 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.<sup>15</sup>

## 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 5 registered health practitioners in Q3 2025-26.

### Immediate registration actions - Initiation

Practitioner type	Number	Month	Action taken	Reason/s for taking action	
				Public Interest	Serious Risk
Medical Practitioner	1	Jan	Suspension	✓	✓
Nurse	2	Jan	Suspension	✓	✓
Medical Practitioner	1	Feb	Suspension	✓	✓
Nurse	1	Mar	Suspension	✓	✓

### 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 0 variations to immediate registration actions in Q3 2025-26.

<sup>15</sup> 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.

## 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 6 registered health practitioners in Q3 2025-26.

Practitioner type	Number	Month	Action that was taken	Reason/s for taking action	
				Public Interest	Serious Risk
Physiotherapist	1	Jan	Conditions	✓	✓
Medical Practitioner	1	Jan	Suspension	✓	✓
Nurse	1	Jan	Suspension	✓	✓
Physiotherapist	1	Feb	Conditions		✓
Chinese Medicine Practitioner	2	Feb	Conditions		✓

## Interim prohibition orders

The Health Ombudsman has powers to issue interim prohibition orders to unregistered practitioners and registered practitioners practising 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 4 interim prohibition orders against unregistered health practitioners in Q3 2025-26.

Practitioner type	Number	Month	Action taken	Reason/s for taking action*	
				Public Interest	Serious Risk
Non-clinical support worker	1	Jan	Prohibition w Restriction		✓
Health support worker	1	Jan	Prohibition	✓	✓
Aged care health worker	1	Feb	Prohibition w Restriction		✓
Alternative health provider	1	Mar	Prohibition	✓	✓

### 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 were 0 variations to interim prohibition orders in Q3 2025-26.

### 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.

There were 0 revocations to interim prohibition orders in Q3 2025-26.

## 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.<sup>16</sup>

The Health Ombudsman issued 13 prohibition orders against unregistered health practitioners in Q3 2025-26.

Practitioner type	Number	Month	Action taken
Alternative health provider	1	Jan	Prohibition
Alternative health provider	3	Jan	Prohibition w Restriction
Assistant in nursing	1	Jan	Prohibition
Non-clinical support worker	1	Jan	Prohibition
Assistant in nursing	1	Feb	Prohibition
Counsellor	1	Feb	Prohibition
Alternative health provider	1	Mar	Prohibition
Assistant in nursing	1	Mar	Prohibition w Restriction
Counsellor	1	Mar	Prohibition
Mental health worker	1	Mar	Prohibition w Restriction
Non-clinical support worker	1	Mar	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 was 1 variation to a prohibition order in Q3 2025-26.

Practitioner type	Number	Month	Action taken
Psychologist (deregistered)	1	Feb	Prohibition

### Prohibition Order – review in QCAT

A health practitioner may apply to the Queensland Civil and Administrative Tribunal to review the Health Ombudsman's decision to issue a Prohibition Order.

There were 0 reviews of a prohibition order filed in QCAT in Q3 2025-26.

<sup>16</sup> 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 Q3 2025-26.

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>).

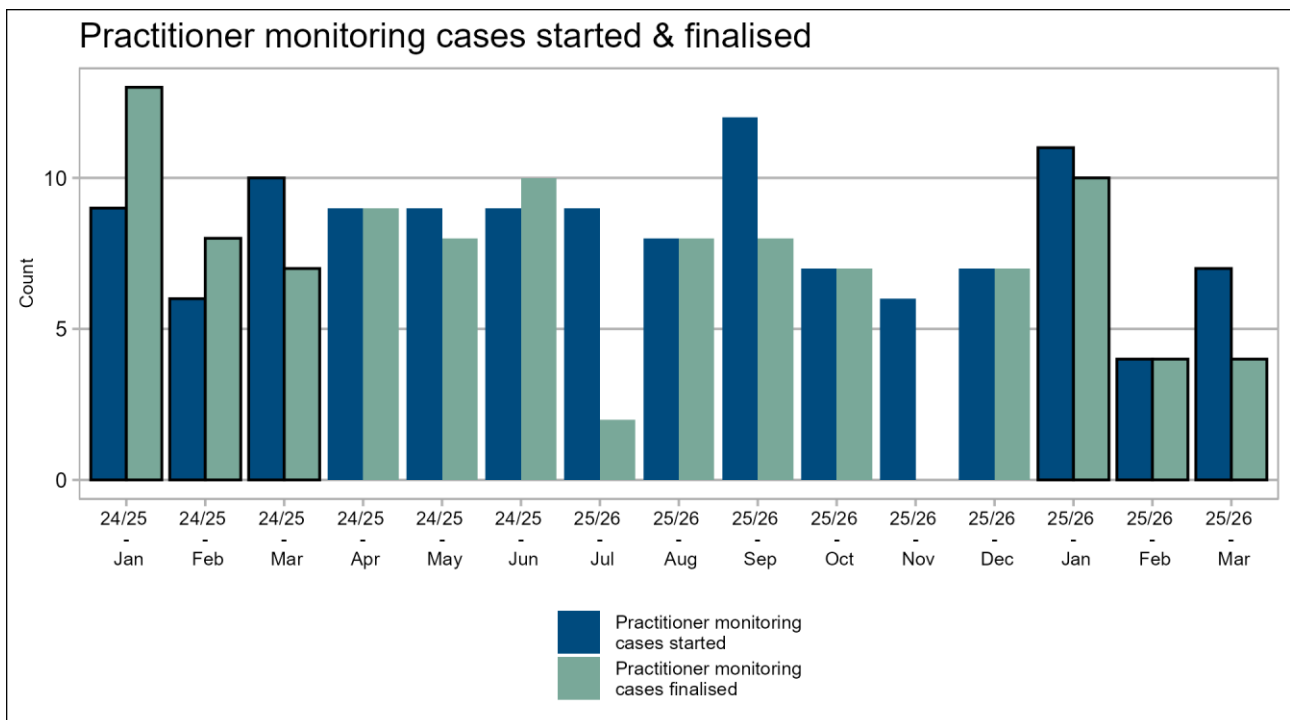
# Monitoring practitioner compliance

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.

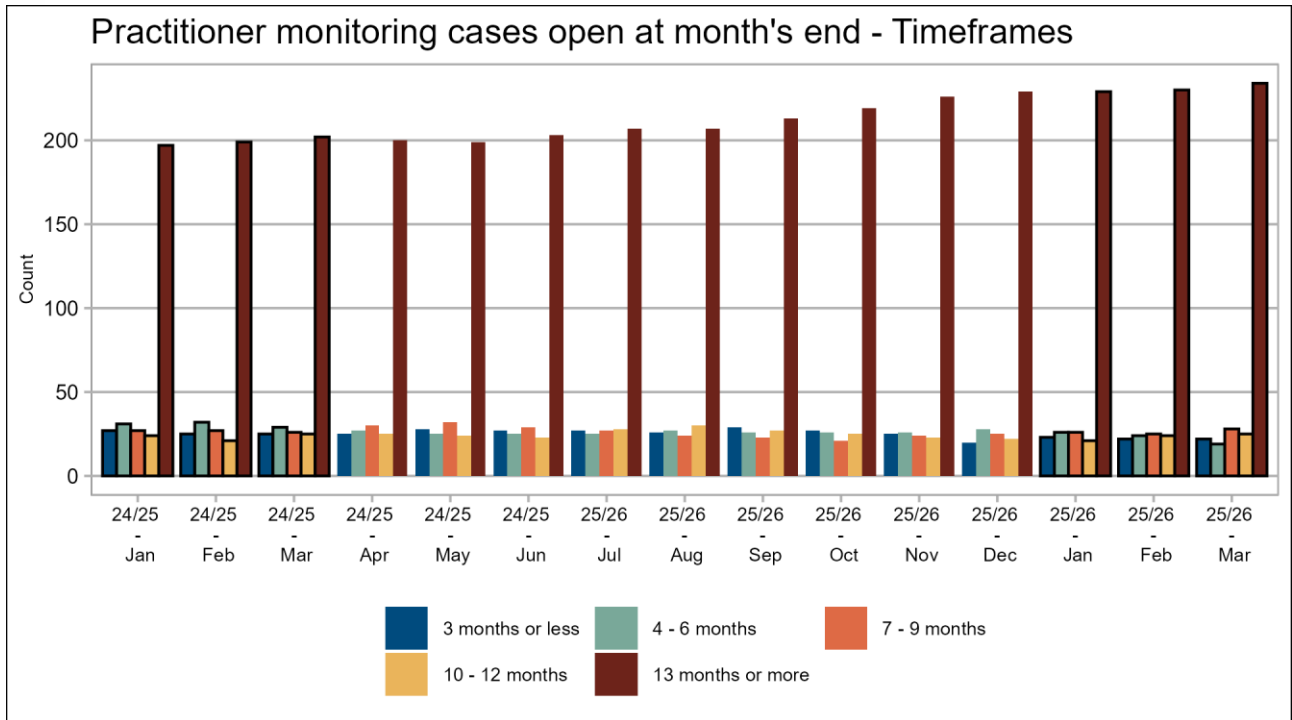
## Practitioner monitoring cases



Cases this month	Jan	Feb	Mar
Practitioner monitoring cases started	11	4	7
Practitioner monitoring cases finalised	10	4	4

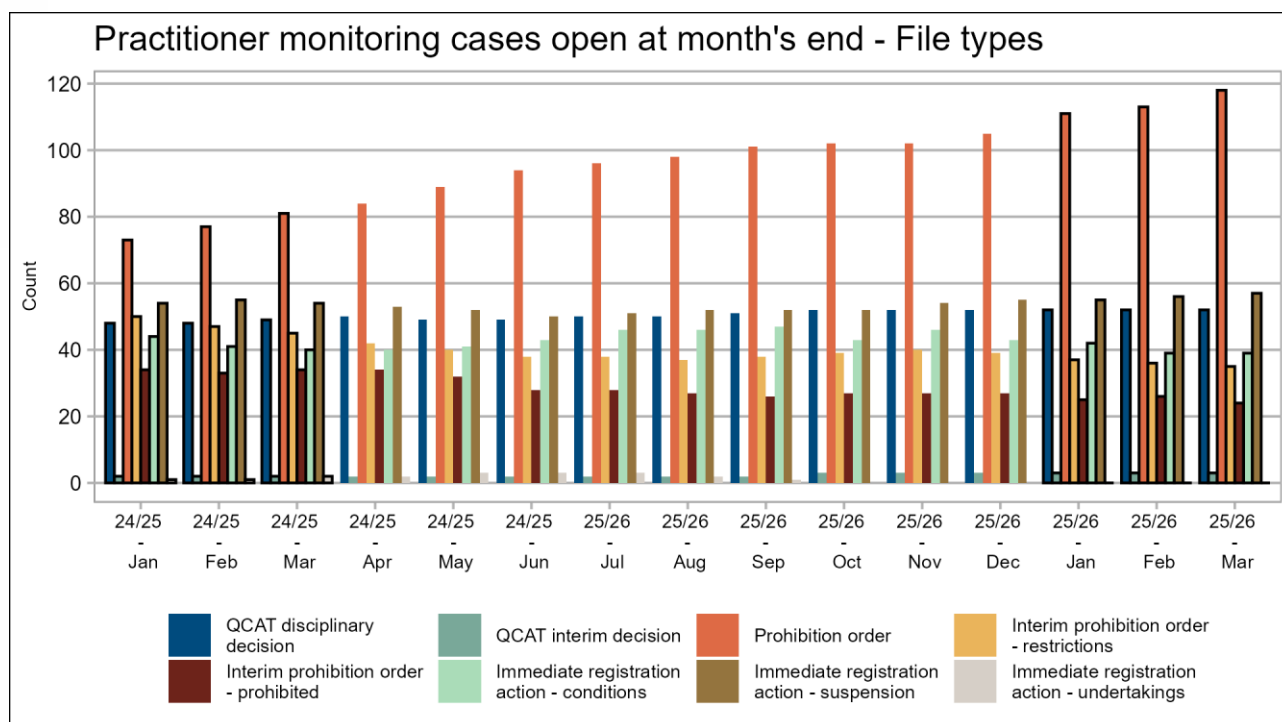
# Open monitoring cases

## Timeframes



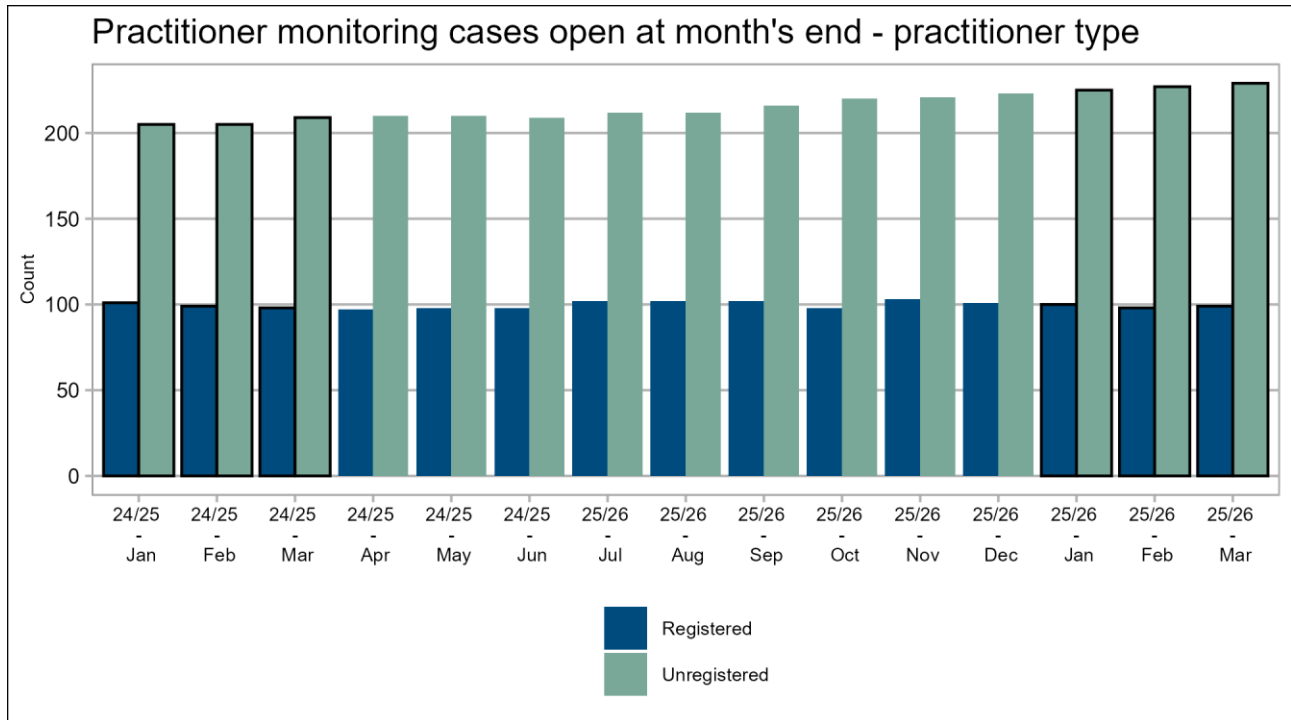
Monitoring case timeframes	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
3 months or less	23	7.1	22	6.8	22	6.7
4 - 6 months	26	8	24	7.4	19	5.8
7 - 9 months	26	8	25	7.7	28	8.5
10 - 12 months	21	6.5	24	7.4	25	7.6
13 months or more	229	70.5	230	70.8	234	71.3
<b>Total</b>	<b>325</b>	<b>100</b>	<b>325</b>	<b>100</b>	<b>328</b>	<b>100</b>

## Immediate action types



Monitoring case immediate action taken	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
QCAT disciplinary decision	52	16	52	16	52	15.9
QCAT interim decision	3	0.9	3	0.9	3	0.9
Prohibition order	111	34.2	113	34.8	118	36
Interim prohibition order - restrictions	37	11.4	36	11.1	35	10.7
Interim prohibition order - prohibited	25	7.7	26	8	24	7.3
Immediate registration action - conditions	42	12.9	39	12	39	11.9
Immediate registration action - suspension	55	16.9	56	17.2	57	17.4
Immediate registration action - undertakings	0	0	0	0	0	0
<b>Total</b>	<b>325</b>	<b>100</b>	<b>325</b>	<b>100</b>	<b>328</b>	<b>100</b>

## Registered Vs unregistered practitioners under monitoring



Practitioners monitoring cases	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Registered	100	30.8	98	30.2	99	30.2
Unregistered	225	69.2	227	69.8	229	69.8
<b>Total</b>	<b>325</b>	<b>100</b>	<b>325</b>	<b>100</b>	<b>328</b>	<b>100</b>

# 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.<sup>17</sup> 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 and finalised

Joint consideration matters	Month	OHO Matter Count	Provider Count	Decision Count*
Matters commenced	Jan	234	229	243
	Feb	311	312	332
	Mar	386	394	417
	<b>Total</b>	<b>931</b>	<b>935</b>	<b>992</b>
Matters finalised	Jan	211	210	223
	Feb	318	323	339
	Mar	381	380	407
	<b>Total</b>	<b>910</b>	<b>913</b>	<b>969</b>

\* The decision count for matters commenced includes active matters marked as decision pending.

<sup>17</sup> Some of these matters are excluded from the 7 day decision timeframe as matters subject to Joint Consideration are covered under section 35F(2) of Under the *Health Ombudsman Act 2013 (Qld)* which states that Ahpra has 15 business days to give a preliminary view.

## Initial joint consideration consultations

### Issues by practitioner type

Practitioner type	Access	Code of conduct for Health Care Workers	Communication and Information	Consent	Discharge and 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	*JC Commented without an Issue	Total
Medical Practitioner	17	-	56	2	4	3	14	9	-	15	66	111	8	251	44	2	-	622
Nurse	-	-	7	2	1	8	-	-	-	3	14	126	17	41	1	-	1	221
Dental practitioner	1	-	5	5	-	-	11	7	-	2	-	16	8	54	-	-	-	109
Psychologist	-	-	5	3	-	-	1	1	-	6	-	46	6	20	10	-	-	98
Pharmacist	-	-	2	1	-	-	-	-	-	-	16	8	-	1	-	-	-	28
Occupational Therapist	-	-	1	-	-	-	-	-	-	1	-	5	2	3	3	-	-	15
Paramedic	-	-	-	-	-	-	-	-	-	-	-	12	-	3	-	-	-	15
Midwife	-	-	-	-	-	-	1	-	-	1	-	4	-	5	-	-	-	11
Physiotherapist	-	-	-	-	-	-	-	-	-	-	-	6	-	3	1	1	-	11
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	3	2	3	-	-	-	8
Chinese Medicine Practitioner	-	-	1	-	-	-	-	-	-	-	-	2	-	2	-	-	-	5
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	1	1	1	2	-	-	-	5
Podiatrist / Chiropodist	-	-	1	-	-	-	-	-	-	-	-	3	-	1	-	-	-	5
Optometrist	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	2
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Oral Health Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	<b>18</b>	<b>-</b>	<b>79</b>	<b>32</b>	<b>5</b>	<b>11</b>	<b>27</b>	<b>17</b>	<b>-</b>	<b>28</b>	<b>97</b>	<b>344</b>	<b>45</b>	<b>389</b>	<b>59</b>	<b>3</b>	<b>1</b>	<b>1156</b>

## Initial joint consideration consultations

### Outcomes by practitioner type

Practitioner type	OHO to retain*		Refer to Ahpra		No further action		Q3 total	
	Num.	%	Num.	%	Num.	%	Num.	%
Aboriginal and Torres Strait Islander health practitioner	0	0	0	0	0	0	0	0
Chinese Medicine Practitioner	0	0	0	0	3	0.7	3	0.3
Chiropractor	0	0	6	1.7	1	0.2	7	0.7
Dental practitioner	17	9.4	43	12.5	19	4.3	79	8.2
Medical Practitioner	67	37	173	50.4	279	62.7	519	53.6
Medical Radiation Practitioner	3	1.7	2	0.6	1	0.2	6	0.6
Midwife	4	2.2	4	1.2	6	1.3	14	1.4
Nurse	68	37.6	60	17.5	67	15.1	195	20.1
Occupational Therapist	1	0.6	5	1.5	7	1.6	13	1.3
Optometrist	0	0	0	0	1	0.2	1	0.1
Oral Health Therapist	0	0	0	0	0	0	0	0
Osteopath	0	0	0	0	0	0	0	0
Paramedic	2	1.1	10	2.9	2	0.4	14	1.4
Pharmacist	3	1.7	15	4.4	9	2	27	2.8
Physiotherapist	4	2.2	2	0.6	5	1.1	11	1.1
Podiatrist / Chiropodist	2	1.1	0	0	2	0.4	4	0.4
Psychologist	10	5.5	23	6.7	42	9.4	75	7.7
Student practitioner	0	0	0	0	1	0.2	1	0.1
Unknown practitioner	0	0	0	0	0	0	0	0
Unregistered practitioner	0	0	0	0	0	0	0	0
<b>Total</b>	<b>181</b>	<b>100</b>	<b>343</b>	<b>100</b>	<b>445</b>	<b>100</b>	<b>969</b>	<b>100</b>

\* Refers to matters that were retained by the Office of Health Ombudsman.

## Subsequent joint consideration consultations

### Matters commenced and finalised

Subsequent joint consideration	Month	OHO Matter Count	Provider Count	Decision Count*
Matters commenced	Jan	19	18	19
	Feb	18	17	18
	Mar	21	15	21
	<b>Total</b>	<b>58</b>	<b>50</b>	<b>58</b>
Matters finalised	Jan	20	19	20
	Feb	16	15	16
	Mar	16	15	16
	<b>Total</b>	<b>52</b>	<b>49</b>	<b>52</b>

\* The decision count for matters commenced includes actives matters marked as decision pending.

## Subsequent joint consideration consultations

### Issues by practitioner type

Practitioner type	Access	Code of conduct for Health Care Workers	Communication and Information	Consent	Discharge and 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	*JC Commented without an Issue	Total
Medical Practitioner	-	-	6	2	-	-	-	2	-	2	-	13	-	17	-	-	-	42
Nurse	-	-	-	-	-	-	-	-	-	1	1	7	2	4	-	-	-	15
Dental practitioner	-	-	-	-	-	-	2	2	-	-	-	1	-	2	-	-	-	7
Psychologist	-	-	-	-	-	1	2	-	-	-	-	3	1	-	-	-	-	7
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	2
Pharmacist	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Physiotherapist	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Unknown practitioner	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Midwife	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Occupational Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Oral Health Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paramedic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Podiatrist / Chiropodist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	-	-	<b>6</b>	<b>2</b>	-	<b>1</b>	<b>4</b>	<b>4</b>	-	<b>3</b>	<b>1</b>	<b>28</b>	<b>3</b>	<b>24</b>	-	-	-	<b>76</b>

## Subsequent joint consideration consultations

### Outcomes by practitioner type

Practitioner type	OHO to retain*		Refer to Ahpra		No further action		No response received from Ahpra		Q3 total	
	Number	%	Number	%	Number	%	Number	%	Number	%
Aboriginal and Torres Strait Islander health practitioner	0	0	0	0	0	0	0	0	0	0
Chinese Medicine Practitioner	0	0	0	0	0	0	0	0	0	0
Chiropractor	0	0	0	0	1	2.5	0	0	1	1.9
Dental practitioner	0	0	0	0	3	7.5	1	10	4	7.7
Medical Practitioner	0	0	2	100	22	55	4	40	28	53.8
Medical Radiation Practitioner	0	0	0	0	0	0	0	0	0	0
Midwife	0	0	0	0	0	0	0	0	0	0
Nurse	0	0	0	0	9	22.5	1	10	10	19.2
Occupational Therapist	0	0	0	0	0	0	0	0	0	0
Optometrist	0	0	0	0	0	0	0	0	0	0
Oral Health Therapist	0	0	0	0	0	0	0	0	0	0
Osteopath	0	0	0	0	0	0	0	0	0	0
Paramedic	0	0	0	0	0	0	0	0	0	0
Pharmacist	0	0	0	0	1	2.5	0	0	1	1.9
Physiotherapist	0	0	0	0	0	0	0	0	0	0
Podiatrist / Chiropodist	0	0	0	0	0	0	0	0	0	0
Psychologist	0	0	0	0	4	10	3	30	7	13.5
Student practitioner	0	0	0	0	0	0	0	0	0	0
Unknown practitioner	0	0	0	0	0	0	1	10	1	1.9
Unregistered practitioner	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>100</b>	<b>40</b>	<b>100</b>	<b>10</b>	<b>100</b>	<b>52</b>	<b>100</b>

\* 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 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

Gender	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Female	426	52	487	55.7	534	54.1
Male	366	44.7	359	41	408	41.3
Non-binary	8	1	4	0.5	6	0.6
Not Applicable*	16	2	23	2.6	36	3.6
Unknown**	3	0.4	2	0.2	3	0.3
<b>Total</b>	<b>819</b>	<b>100</b>	<b>875</b>	<b>100</b>	<b>987</b>	<b>100</b>

\*Not Applicable refers to complainants who are an entity and not a person. For example, a health service organisation.

\*\*Gender not recorded or not provided for person.

### Complainant age

Age group	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Less than 18 years	1	0.1	3	0.3	2	0.2
18-24 years	26	3.2	21	2.4	35	3.5
25-34 years	131	16	143	16.3	142	14.4
35-44 years	201	24.5	195	22.3	231	23.4
45-54 years	148	18.1	191	21.8	179	18.1
55-64 years	117	14.3	106	12.1	155	15.7
65-74 years	61	7.4	71	8.1	66	6.7
More than 75 years	37	4.5	31	3.5	39	4
Not Applicable*	16	2	23	2.6	36	3.6
Unknown**	81	9.9	91	10.4	102	10.3
<b>Total</b>	<b>819</b>	<b>100</b>	<b>875</b>	<b>100</b>	<b>987</b>	<b>100</b>

\*Not Applicable refers to complainants who are an entity and not a person. For example, a health service organisation.

\*\*Age not recorded or not provided for person.

## Complainant location

Location (Hospital and Health Service region)	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Cairns and Hinterland	23	2.8	36	4.1	39	4
Central Queensland	32	3.9	41	4.7	41	4.2
Central West	1	0.1	1	0.1	0	0
Children's Health Queensland	0	0	0	0	0	0
Darling Downs	22	2.7	27	3.1	28	2.8
Gold Coast	59	7.2	63	7.2	81	8.2
Mackay	16	2	18	2.1	21	2.1
Metro North	134	16.4	143	16.3	173	17.5
Metro South	183	22.3	191	21.8	207	21
North West	1	0.1	3	0.3	6	0.6
South West	2	0.2	1	0.1	1	0.1
Sunshine Coast	42	5.1	58	6.6	59	6
Torres and Cape	3	0.4	2	0.2	0	0
Townsville	25	3.1	29	3.3	30	3
West Moreton	73	8.9	57	6.5	71	7.2
Wide Bay	44	5.4	43	4.9	40	4.1
Not Applicable*	0	0	0	0	0	0
Unknown**	159	19.4	162	18.5	190	19.3
<b>Total</b>	<b>819</b>	<b>100</b>	<b>875</b>	<b>100</b>	<b>987</b>	<b>100</b>

\*Not applicable refers to complainants where the geographic details are excluded from an HHS catchment (e.g. The office of Health Ombudsman)

\*\*Geographic details are not recorded or unable to be adequately identified from details provided.

Please note that a consumer and complainant's age and geographic details are recorded at the time of receipt of a complaint. Thus, it is possible for them to have multiple reported age and geographic groupings in the same month if they exist across multiple complaints and/or their details change between the receipt of these complaints.

## Complainant Indigenous Status

Indigenous Status	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Aboriginal	90	11	96	11	91	9.2
Both Aboriginal and Torres Strait Islander	0	0	0	0	0	0
Torres Strait Islander	5	0.6	5	0.6	6	0.6
Non-Indigenous	467	57	470	53.7	524	53.1
Not Applicable*	16	2	23	2.6	36	3.6
Unknown**	241	29.4	281	32.1	330	33.4
<b>Total</b>	<b>819</b>	<b>100</b>	<b>875</b>	<b>100</b>	<b>987</b>	<b>100</b>

\*Not Applicable refers to complainants who are an entity and not a person. For example, a health service organisation.

\*\*Indigenous Status not recorded or not provided for person.

## Healthcare consumers

### Consumer gender

Gender	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Female	384	49.4	432	51.9	462	51.9
Male	386	49.6	392	47.1	417	46.8
Non-binary sex	6	0.8	6	0.7	9	1
Not Applicable*	0	0	1	0.1	1	0.1
Unknown**	2	0.3	1	0.1	2	0.2
<b>Total</b>	<b>778</b>	<b>100</b>	<b>832</b>	<b>100</b>	<b>891</b>	<b>100</b>

\*Gender not recorded or not provided for person.

\*\*Not Applicable refers to consumer who are an entity and not a person. For example, a health service organisation.

### Consumer age

Age group	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Less than 18 years	24	3.1	35	4.2	54	6.1
18-24 years	36	4.6	34	4.1	46	5.2
25-34 years	119	15.3	145	17.4	134	15
35-44 years	176	22.6	178	21.4	187	21
45-54 years	134	17.2	144	17.3	134	15
55-64 years	94	12.1	86	10.3	116	13
65-74 years	59	7.6	63	7.6	58	6.5
More than 75 years	66	8.5	55	6.6	67	7.5
Not Applicable*	0	0	1	0.1	1	0.1
Unknown**	70	9	91	10.9	94	10.5
<b>Total</b>	<b>778</b>	<b>100</b>	<b>832</b>	<b>100</b>	<b>891</b>	<b>100</b>

\*Not Applicable refers to consumer who are an entity and not a person. For example, a health service organisation.

\*\*Age not recorded or not provided for person in the context of a particular matter.

## Consumer location

Location (Hospital and Health Service region)	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Cairns and Hinterland	17	2.2	31	3.7	29	3.3
Central Queensland	28	3.6	32	3.8	40	4.5
Central West	1	0.1	0	0	0	0
Children's Health Queensland	0	0	0	0	0	0
Darling Downs	22	2.8	25	3	26	2.9
Gold Coast	56	7.2	59	7.1	66	7.4
Mackay	18	2.3	11	1.3	18	2
Metro North	116	14.9	115	13.8	138	15.5
Metro South	169	21.7	163	19.6	185	20.8
North West	0	0	3	0.4	6	0.7
South West	2	0.3	1	0.1	1	0.1
Sunshine Coast	39	5	46	5.5	46	5.2
Torres and Cape	2	0.3	1	0.1	0	0
Townsville	19	2.4	25	3	25	2.8
West Moreton	70	9	54	6.5	65	7.3
Wide Bay	40	5.1	38	4.6	33	3.7
Unknown*	179	23	228	27.4	213	23.9
<b>Total</b>	<b>778</b>	<b>100</b>	<b>832</b>	<b>100</b>	<b>891</b>	<b>100</b>

\* Geographic details are not recorded or unable to be adequately identified from details provided.

Please note that a consumer and complainant's age and geographic details are recorded at the time of receipt of a complaint. Thus, it is possible for them to have multiple reported age and geographic groupings in the same month if they exist across multiple complaints and their details change between the receipt of these complaints.

## Consumer Indigenous Status

Indigenous Status	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Aboriginal	90	11.6	96	11.5	95	10.7
Both Aboriginal and Torres Strait Islander	0	0	0	0	0	0
Torres Strait Islander	3	0.4	4	0.5	7	0.8
Non-Indigenous	442	56.8	416	50	463	52
Not Applicable*	0	0	1	0.1	1	0.1
Unknown**	243	31.2	315	37.9	325	36.5
<b>Total</b>	<b>778</b>	<b>100</b>	<b>832</b>	<b>100</b>	<b>891</b>	<b>100</b>

\*Not Applicable refers to complainants who are an entity and not a person. For example, a health service organisation.

\*\*Indigenous Status not recorded or not provided for person.

## Health service providers

### Provider location\*

Location (Hospital and Health Service region)	Jan		Feb		Mar	
	Number	%	Number	%	Number	%
Cairns and Hinterland	19	2.8	36	5.1	35	4.2
Central Queensland	23	3.4	29	4.1	37	4.5
Central West	4	0.6	4	0.6	3	0.4
Children's Health Queensland	0	0	0	0	0	0
Darling Downs	20	3	34	4.9	46	5.6
Gold Coast	100	14.9	90	12.9	110	13.3
Mackay	13	1.9	14	2	15	1.8
Metro North	143	21.3	144	20.6	180	21.7
Metro South	114	17	128	18.3	170	20.5
North West	2	0.3	3	0.4	5	0.6
South West	2	0.3	2	0.3	0	0
Sunshine Coast	42	6.3	54	7.7	46	5.6
Torres and Cape	3	0.4	4	0.6	2	0.2
Townsville	24	3.6	20	2.9	26	3.1
West Moreton	28	4.2	26	3.7	27	3.3
Wide Bay	33	4.9	33	4.7	37	4.5
Unknown**	100	14.9	79	11.3	89	10.7
<b>Total</b>	<b>670</b>	<b>100</b>	<b>700</b>	<b>100</b>	<b>828</b>	<b>100</b>

\* 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.

\*\* Geographic details are not recorded or unable to be adequately identified from details provided.

# 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?
<b>Intake of complaints</b>		
Type of contacts	The date and time the case file is created in Resolve.	The total number of unique case files recorded in Resolve.
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.
<b>Health service complaints profile</b>		
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.
<b>Assessment</b>		
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?
<b>Local resolution</b>		
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.
<b>Conciliation</b>		
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.
<b>Complaints management (Referrals)</b>		
Referrals open and 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.
<b>Investigation</b>		
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 (All reports)	The date in which the outcome is recorded against the investigation case file.	The total number of parent investigations files in that context.
Active and 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 and 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.
<b>Monitoring investigation recommendations</b>		
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.
<b>Director of Proceedings</b>		

Data element	Date stamp	What is being counted?
Matters referred to the Director of Proceedings by practitioner type	The Commencement date of the Director of Proceedings File.	The total number of unique Director of 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.
<b>Immediate action</b>		
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.
<b>Monitoring practitioner compliance</b>		
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.
<b>Australian Health Practitioner Regulation Agency – Initial joint consideration decisions</b>		
Matters commenced and finalised	The date and time in which the initial joint consideration process commenced and was finalised.	1) OHO Matter Count: This is the count of all complaint files within the OHO system which are linked to the joint consideration event.

Data element	Date stamp	What is being counted?
		2) Provider Count: This is the number of unique providers which are linked to the joint consideration event. 3) 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.
<b>Australian Health Practitioner Regulation Agency – Subsequent joint consideration decisions</b>		
Matters commenced and finalised	The date and time in which the subsequent joint consideration process commenced and was finalised.	1) OHO Matter Count: This is the count of all complaint files within the OHO system which are linked to the joint consideration event. 2) Provider Count: This is the amount of unique providers which are linked to the joint consideration event. 3) 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.
<b>Demographics of complainants, healthcare consumers and providers</b>		
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.