

Office of the Health Ombudsman

Performance report April 2017



Office of the
**HEALTH
OMBUDSMAN**

Listen. Respond. Resolve.

Office of the Health Ombudsman—Performance report April 2017

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Table of Contents

Introduction	4
Intake of complaints	5
Type of contacts	5
Type of complaints	5
Complaint decisions	6
Health service complaints profile	8
Main issues raised in complaints	8
Number and type of complaints by health practitioner	9
Number and type of complaints by health service organisation	10
Assessment	11
Assessments started and completed	11
Completed assessment timeframes	11
Assessment decisions	12
Local resolution	13
Local resolutions started and completed	13
Completed local resolutions	13
Decisions for matters that were not resolved	14
Conciliation	15
Conciliations started and closed	15
Agreement to participate in conciliation	15
Completed conciliations	16
Decisions for conciliations that were not successful	17
Open conciliation timeframes	17
Investigation	18
Investigations started and closed	18
Closed investigations	18
Open investigations	19
Director of Proceedings	21
Matters referred to the Director of Proceedings by practitioner type	21
Matters currently with the Director of Proceedings by practitioner type	21
Matters referred to the Queensland Civil and Administrative Tribunal	21
Immediate action	22
Show cause notices	22
Immediate registration actions	22
Interim prohibition orders	22

Australian Health Practitioner Regulation Agency	23
Notifications from AHPRA	23
Number of practitioners referred to AHPRA by practitioner type	23
Number of issues referred to AHPRA by practitioner type	24
Demographics	25
Gender	25
Age	25
Location of healthcare consumers	26
Location of health service providers	27

Introduction

This document reports on our performance during April 2017.

As Queensland's health service complaints agency, the Office of the Health Ombudsman (OHO) exists to protect the health and safety of the public by assessing, investigating and resolving complaints made about health services provided in Queensland.

Our vision is to be the cornerstone of a transparent, accountable and fair system for effectively and quickly dealing with complaints and other healthcare matters in Queensland. Our performance reports—which we update and publish monthly, quarterly and yearly—are a testament to this.

We are committed to ensuring that all decisions are well-informed, fair, impartial and timely.

Data in this report are correct as at 5 May 2017, but are subject to change.

Intake of complaints

Type of contacts

Type of contact	Number	Percentage
Complaint	397	60.80
Enquiry	255	39.05
Yet to be classified	1	0.15
Total	653	100.00

'Yet to be classified' includes contacts in which not enough information was provided for a determination to be reached—but further information is being sought—or matters that were not able to be finalised prior to the end of the reporting period. Contacts deemed 'yet to be classified' will be allocated as complaints or enquiries once additional information is received and registered as such in the next reporting period.

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

Type of complaints

Type of complaints	Number	Percentage
Health consumer complaint	333	83.88
Mandatory notification*	5	1.26
Voluntary notification*	47	11.84
Self-notification*	5	1.26
Referral from another agency**	7	1.76
Total	397	100.00

*Notifications are matters raised by health service providers which do not otherwise meet the definition of a health consumer complaint as required under the Health Practitioner Regulation National Law (Queensland).

**Referrals are matters formally referred by government agencies to the OHO.

Complaint decisions

Decision timeframes—within seven days

April data shows that the improvements seen since December 2016 in the proportion of decisions made within seven days has been sustained, although slightly lower than March's performance of 92.16 per cent. We achieved these results in the context of multiple public holidays in April.

For complaints about registered health practitioners, we depend on timely data from external agencies, including the Australian Health Practitioner Regulation Agency (AHPRA), so that decisions can be made within seven days.

Decision made within seven days of receiving a complaint	Number	Percentage
Yes	369	88.70
No	47	11.30
Total	416	100.00

Accepted vs. not accepted

Number of decisions made	Number	Percentage
Accepted	279	61.86
Not accepted	137	30.38
Decision pending	35	7.76
Total	451	100.00

'Decision pending' relates to matters where more information is required before a decision on whether to accept or not accept can be made, or because the matter came in just before the end of the reporting period and is still being processed.

Accepted decision outcomes

Type of relevant action	Number	Percentage
Assessment	78	18.53
Local resolution	86	20.43
Conciliation	0	0.00
Investigation	6	1.43
Referred to AHPRA and the national boards	110	26.13
Referral to another entity	0	0.00
Immediate registration action	0	0.00
Interim prohibition order	0	0.00
No further action	141	33.49
Total	421	100.00

Accepted decisions may result in multiple issues and/or practitioners being identified, each requiring its own action. The data in the above *Accepted decision outcomes* table includes all identified issues/practitioners requiring action that were identified in the accepted complaints (noted in the previous *Accepted vs. not accepted* table).

Health service complaints profile

Reporting parameters for the identification of issues in complaints were updated as of October 2016. Previously, issues contained within our reporting related to complaints that completed our assessment process during the reporting period.

Refinements to systems and processes now allow for the reporting of all issues identified in complaints during the reporting period. This change will result in higher numbers of issues appearing in the following three tables from October 2016.

This update is an example of our commitment to continual improvement as we mature as an agency and the importance we place on transparent, robust data.

Main issues raised in complaints

Issue	Number	Percentage
Access	35	5.14
Code of conduct for healthcare workers	6	0.88
Communication/information	103	15.12
Consent	11	1.62
Discharge/transfer arrangements	11	1.62
Environment/management of facilities	9	1.32
Enquiry service	0	0.00
Fees/cost	26	3.82
Grievance processes	13	1.91
Medical records	19	2.79
Medication	67	9.84
Professional conduct	62	9.10
Professional health	12	1.76
Professional performance	291	42.73
Reports/certificates	16	2.35
Treatment	0	0.00
Research/Teaching/Assessment	0	0.00
Total	681	100.00

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

Number and type of complaints by health practitioner

Practitioner type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance process	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research/Teaching/Assessment	Total
Alternative care	-	5	1	1	1	-	-	-	-	-	1	-	1	-	-	10
Chinese medicine	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Dentistry	-	-	1	-	-	-	-	-	-	-	2	-	16	-	-	19
Emergency care	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
General medical	3	-	22	7	-	1	12	1	7	27	12	3	74	3	-	172
Medical radiation	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Medical specialty	-	-	4	1	-	-	1	-	-	3	-	-	9	7	-	25
Nursing	-	-	1	-	-	-	-	-	2	4	17	8	13	-	-	45
Occupational therapy	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	2
Optometry	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Other	-	-	5	1	-	1	-	-	-	2	9	-	1	-	-	19
Pathology service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacy	-	-	2	-	-	-	-	-	-	4	3	-	-	-	-	9
Physiotherapy	-	-	-	-	-	-	-	-	1	-	-	-	2	-	-	3
Podiatry	-	-	1	-	-	-	-	-	-	-	1	-	1	-	-	3
Psychology	-	-	4	-	-	-	1	1	1	2	3	1	6	4	-	23
Speech pathology	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Surgical	1	-	7	1	1	-	1	-	-	-	2	-	15	1	-	29
Total	4	5	49	11	2	2	15	2	11	42	53	12	140	15	0	363

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

Number and type of complaints by health service organisation

Organisation type	Access	Code of conduct for healthcare workers	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance processes	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Research/Teaching/Assessment	Total
Aged care facility	-	1	1	-	-	-	-	-	-	-	-	-	1	-	-	3
Allied health service	-	-	2	-	-	-	-	-	1	-	1	-	1	-	-	5
Ambulance service	-	-	2	-	-	-	-	-	-	-	-	-	3	-	-	5
Community health service	2	-	2	-	-	-	1	1	-	-	-	-	2	-	-	8
Correctional facility	10	-	4	-	-	-	-	1	-	17	1	-	38	-	-	71
Dental service	-	-	3	-	-	-	1	1	-	-	-	-	5	-	-	10
Hospital and Health Service	-	-	2	-	-	-	-	1	-	-	-	-	4	-	-	7
Laboratory service	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	2
Licensed private hospital	-	-	2	-	3	2	-	-	-	1	-	-	7	-	-	15
Medical centre	5	-	10	-	-	2	3	-	2	2	2	-	-	-	-	26
Mental health service	1	-	2	-	-	-	-	2	-	2	2	-	16	-	-	25
Nursing service	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmaceutical service	-	-	2	-	-	-	-	-	-	-	1	-	-	-	-	3
Private organisation	-	-	2	-	-	-	-	1	1	-	-	-	1	-	-	5
Public health service	-	-	2	-	1	-	-	-	1	-	1	-	3	-	-	8
Public hospital	12	-	16	-	5	3	1	4	3	2	1	-	68	-	-	115
Residential care service	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Specialised health service	1	-	1	-	-	-	4	-	-	1	-	-	1	1	-	9
Total	31	1	54	0	9	7	11	11	8	25	9	0	151	1	0	318

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

Assessment

Assessments started and completed

Assessments this month	Number
Assessments started	102
Assessments completed	117

Completed assessment timeframes

Of the 117 assessments finalised in April, 92 were completed within 30 days or 60 days with an approved extension, representing a finalisation rate within statutory timeframes of 78.63 per cent—an improvement of 5.61 percentage points month-to-month.

Of the 42 assessments completed within 60 days, 37 matters were approved for extension.

The finalisation of 20 matters outside of 60 days was due in part to dealing with a residual of older, complex cases that required additional assessment. Such matters often require the collection and analysis of collateral information from third parties and clinical advice from expert clinicians. The assessment of complex matters tends to be time consuming, but is necessary to ensure quality and comprehensive assessments are completed.

Assessment timeframes	Number	Percentage
Completed within 30 days	55	47.01
Completed within 60 days*	42	35.90
Completed in more than 60 days	20	17.09
Total	117	100.00

*Assessments are able to be completed within 60 days when granted an extension of 30 days as a result of legislated requirements being met.

Assessment decisions

Type of relevant action	Number	Percentage
Local resolution	4	2.90
Conciliation	6	4.35
Investigation	7	5.07
Referred to AHPRA and the national boards	19	13.77
Referral to another entity	22	15.94
Immediate registration action*	0	0.00
Interim prohibition order*	0	0.00
No further action	80	57.97
Total	138	100.00

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

The figures for the type of relevant action decided in the assessment stage may not correspond with totals for respective relevant actions (e.g. local resolution, conciliation, investigation etc.) due to the time between a decision being made and an action being taken crossing over different reporting periods.

*Immediate action assessment decision figures may not align with the immediate action figures later in the report due to immediate action decisions being made outside of the assessment process.

Local resolution

Local resolutions started and completed

Local resolutions this month	Number
Local resolutions started	95
Local resolutions completed	69

The number of local resolutions started in the month may not directly match the number of assessment decisions to undertake local resolution due to the time between a decision being made and an action taken crossing over different reporting periods.

Completed local resolutions

Timeframes

Of the 69 local resolutions completed this month 67 were completed within 30 days or 60 days with an approved extension. This represents a finalisation rate within statutory timeframes of 97.1 per cent.

Of the 12 local resolution matters completed within 60 days, 11 were approved for extension.

While we strive to finalise all matters within legislated timeframes, some can take longer than others due to factors outside of our control, such as delays in receiving information and responses from individual parties.

Local resolution timeframes	Number	Percentage
Completed within 30 days	56	81.16
Completed within 60 days*	12	17.39
Completed in more than 60 days	1	1.45
Total	69	100.00

*Local resolutions are able to be completed within 60 days when granted an extension of 30 days as a result of legislated requirements being met.

Outcomes

Local resolution outcomes	Number	Percentage
Resolved	57	82.61
Not resolved	8	11.59
Complaint withdrawn*	4	5.80
Total	69	100.00

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

Decisions for matters that were not resolved

Type of relevant action	Number	Percentage
Assessment	0	0
Conciliation	0	0
Investigation	0	0
Referred to AHPRA and the national boards	0	0
Referral to another entity	0	0
Immediate action	0	0
No further action	8	100.00
Total	8	100.00

Conciliation

Conciliations started and closed

Conciliations this month	Number
Conciliations open at the start of the month	58
Conciliations started	8
Conciliations closed	19

The number of conciliations started in the reporting period may not match the number of decisions to refer for conciliation noted in other areas of the report due to the time between a decision being made and an action taken crossing over different reporting periods.

'Conciliations started' includes all matters—including matters where agreement to participate has or has not been reached or the decision is pending—that entered the conciliation workflow during the reporting period following our assessment of them as being suitable for conciliation. Similarly, 'conciliations closed' are all matters that were closed during the reporting period, whether due to parties not agreeing to participate or the matter being closed after completing the conciliation process. Closed conciliations differ from completed conciliations below, as completed conciliations only include matters where both parties agreed to participate and the conciliation process was completed.

Agreement to participate in conciliation

Agreement to participate in conciliation	Number
Party/ies agreed to conciliation	1
Party/ies did not agree to conciliation	6
Decision pending at end of month	18

Once the decision is made to attempt conciliation, both parties must agree to participate in the process. If one of the parties does not agree, the conciliation process does not commence and the matter is closed.

Decisions pending includes matters where parties are still deciding whether to participate in conciliation at the end of the reporting period. It also includes matters that have been referred to another relevant action, where conciliation may not commence until this relevant action has been finalised.

Completed conciliations

Timeframes

Completed conciliation timeframes	Number	Percentage
Less than 3 months	2	15.38
3–6 months	4	30.77
6–9 months	7	53.85
9–12 months	0	0.00
More than 12 months	0	0.00
Total	13	100.00

The data above relates to matters where parties agreed to participate in conciliation and the conciliation process was completed within the specified timeframes. Completed conciliations differ from closed conciliations (in the table above) as they only relate to matters where parties agreed to participate and the conciliation process was completed.

Outcomes

Conciliation outcomes	Number	Percentage
Successful	6	46.15
Not successful	7	53.85
Ended by Health Ombudsman	0	0.00
Total	13	100.00

The data above relates to matters where parties agreed to participate in conciliation. After agreeing, the conciliation process was completed with the matter either being successful or not successful—or in rare instances, the Health Ombudsman ending it. Completed conciliations differ from closed conciliations—in the first conciliation data table above—as completed conciliations only relate to matters where parties agreed to participate and the conciliation process was completed.

Decisions for conciliations that were not successful

Type of relevant action	Number	Percentage
Local resolution	0	0
Investigation	0	0
Referred to AHPRA and the national boards	0	0
Referral to another entity	0	0
Immediate action	0	0
No further action	7	100.00
Total	7	100.00

Open conciliation timeframes

Open conciliation timeframes	Number	Percentage
Less than 3 months	20	42.55
3–6 months	13	27.66
6–9 months	8	17.02
9–12 months	1	2.13
More than 12 months	5	10.64
Total	47	100.00

Matters can be referred simultaneously for conciliation and another relevant action. Conciliation may not commence until after the other relevant action has been finalised.

There are 11 matters on hold until the outcome of another process is finalised (e.g. the process of another agency such as AHPRA). This includes two matters that have been open for less than 3 months, one that has been open for 3–6 months, two that have been open for 6–9 months, one that has been open for 9–12 months, and five that have been open for more than 12 months.

Investigation

Investigations started and closed

Investigations this month	Number
Investigations open at the beginning of the month	388
Investigations started	16
Investigations closed	7

The number of investigations started in the reporting period may not match the number of assessment decisions to undertake investigation due to the time between a decision being made and an action taken crossing over different reporting periods, or due to investigations being started via other processes (e.g. own-motion investigation).

Closed investigations

Timeframes

Closed investigation timeframes	Number	Percentage
Less than 3 months	0	0.00
3–6 months	3	42.86
6–9 months	2	28.57
9–12 months	0	0.00
More than 12 months	2	28.57
Total	7	100.00

Outcomes

Closed investigation outcomes	Number	Percentage
Recommended for referral to Director of Proceedings*	3	42.86
Referred to AHPRA	0	0.00
Referred to another agency	0	0.00
No further action	4	57.14
Total	7	100.00

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

Open investigations

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

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

Active investigation timeframes

Active investigation timeframes	Number	Percentage
Less than 3 months	48	13.68
3–6 months	60	17.09
6–9 months	47	13.39
9–12 months	50	14.25
More than 12 months*	146	41.60
Total	351	100.00

*All investigations that have been open for more than 12 months are published on the investigations register on our website (www.oho.qld.gov.au).

Paused investigation timeframes

Paused investigation timeframes	Number	Percentage
Less than 3 months	1	2.17
3–6 months	4	8.70
6–9 months	5	10.87
9–12 months	7	15.22
More than 12 months	29	63.04
Total	46	100.00

A matter may be referred to an external agency, such as the Queensland Police Service while criminal proceedings take place, or to the coroner if it relates to a reportable death (under s92 of the *Health Ombudsman Act 2013*). From our perspective, these matters are not closed but effectively paused within our complaints management system, as in these circumstances, it is not appropriate for us to conduct any investigations that may impede on an external agency's processes. As a result, investigation of these matters will be put on hold until the external agency finalises its processes.

Total open investigation timeframes

Total open investigation timeframes	Number	Percentage
Less than 3 months	49	12.34
3–6 months	64	16.12
6–9 months	52	13.10
9–12 months	57	14.36
More than 12 months	175	44.08
Total	397	100.00

Total open investigation categories

Type of investigation	Number
Health service complaint	287
Systemic issue	33
Another matter*	77
Total	397

*Matters that are brought to the Health Ombudsman's attention by means other than through a health service complaint or notification.

Director of Proceedings

Matters referred to the Director of Proceedings by practitioner type

Practitioner type	Number
Medical practitioner	2
Registered Nurse	1
Dentist	1
Total	4

Matters determined suitable for referral to the Director of Proceedings at the conclusion of an investigation are sent to the Health Ombudsman for consideration and determination on whether referral to the Director of Proceedings is appropriate. As a result, these figures will differ from *closed investigation outcomes* figures.

Matters currently with the Director of Proceedings by practitioner type

Practitioner type	Number
Medical practitioner	19
Pharmacist	1
Psychologist	4
Registered nurse	11
Student nurse	1
Unregistered practitioner	1
Chiropractor	1
Dentist	1
Total	39

Matters referred to the Queensland Civil and Administrative Tribunal

No matters were referred to the Queensland Civil and Administrative Tribunal this month.

The Director of Proceedings considers all relevant aspects of each matter to determine whether to refer the matter to the Queensland Civil and Administrative Tribunal.

Immediate action

The *Health Ombudsman Act 2013* allows for the Health Ombudsman to take immediate action against registered and unregistered health practitioners in instances where the Health Ombudsman reasonably believes the practitioner's health, conduct or performance poses a serious risk to the health and safety of the public.

Show cause notices

In April, three show cause notices were issued to:

- one psychologist for reasons relating to conduct
- one enrolled nurse for reasons relating to conduct
- one pharmacist for reasons relating to conduct.

As outlined in the *Health Ombudsman Act 2013*, on receipt of a show cause notice, a health service provider is invited to make a submission within a stated period of time. The Health Ombudsman will then consider the submission before deciding whether to take immediate action against the provider.

Immediate registration actions

Practitioner type	Number	Action taken	Reasons/s for taking action		
			Health	Conduct	Performance
Student nurse ¹	1	Conditions		✓	
Registered nurse	1	Conditions		✓	
Registered nurse	2	Suspension		✓	
Medical practitioner	1	Conditions			✓

¹One student nurse had both an immediate registration action taken and a prohibition order issued within the reporting period.

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

Interim prohibition orders

Practitioner type	Number	Action taken	Reasons/s for taking action			
			Health	Conduct	Performance	Interstate
Assistant in nursing	1	Prohibition		✓		
Student Nurse ¹	1	Restrictions		✓		
Audiologist ²	1	Restrictions			✓	

¹One student nurse had both an immediate registration action taken and a prohibition order issued within the reporting period.

²One audiologist's full prohibition was revoked and a new prohibition order, with restrictions, was issued.

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

The Health Ombudsman can also enforce a prohibition order or an interim prohibition order issued in another state or territory where that interstate prohibition order corresponds—or substantially corresponds—to the type of prohibition order that can be made in Queensland. The details for current prohibition orders can be found on our website (www.oho.qld.gov.au).

Australian Health Practitioner Regulation Agency

Notifications from AHPRA

No new notifications (s193 of the Act) relating to a possible serious matter were received in April and no new matters were requested for referral back to the OHO.

Number of practitioners referred to AHPRA by practitioner type

Practitioner type	Number
Aboriginal and Torres Strait Islander health	0
Chinese medicine	0
Chiropractic	0
Dental	12
Medical	85
Medical student	0
Medical radiation	1
Nursing and midwifery	33
Nursing student	1
Occupational therapy	0
Optometry	2
Osteopathy	0
Pharmacy	5
Physiotherapy	0
Podiatry	0
Psychology	2
Unregistered practitioner	0
Total	141

Number of issues referred to AHPRA by practitioner type

Registered practitioner type	Access	Communication and information	Consent	Discharge/transfer arrangements	Environment/management of facility	Fees and costs	Grievance processes	Medical records	Medication	Professional conduct	Professional health	Professional performance	Reports/certificates	Total
Aboriginal and Torres Strait Islander health	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chinese medicine	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Chiropractic	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Dental Prosthetist	-	-	-	-	-	-	-	-	-	-	-	3	-	3
Dentist	-	-	-	-	-	-	-	-	-	1	-	13	-	14
Medical	-	16	6	-	-	5	-	8	21	9	1	80	3	149
Medical student	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Medical radiation	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Nursing and midwifery	-	1	-	-	-	-	-	3	4	16	5	8	-	37
Nursing and midwifery student	-	-	-	-	-	-	-	-	-	1	1	-	-	2
Occupational therapy	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Optometry	-	-	-	-	-	-	-	-	-	3	-	-	-	3
Osteopathy	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Pharmacy	-	-	-	-	-	-	-	-	5	1	-	1	-	7
Physiotherapy	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Podiatry	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Psychology	-	1	-	-	-	-	-	-	-	1	-	-	-	2
Speech Pathologist	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	0
Total	0	18	6	0	0	5	0	11	31	32	7	105	3	218

The figures above represent the number of issues referred to AHPRA, not the number of practitioners. The referral of a single practitioner may include multiple issues relating to that practitioner, with each issue requiring its own action.

Demographics

The following demographic data is based on matters that have completed the assessment process. Basing figures on completed assessments produces accurate reporting as all relevant details of a matter have been identified.

Unless otherwise specified, data is based on healthcare consumers, not the complainant, as the complainant in a matter may not be the consumer of the health service. Matters where the healthcare consumer is an organisation are not included in these figures.

Gender

Gender	Number	Percentage
Female	64	56.14
Male	47	41.23
Unknown	3	2.63
Total	114	100.00

Age

Age	Number	Percentage
Less than 18	10	8.77
18–24 years	6	5.26
25–34 years	21	18.42
35–44 years	21	18.42
45–54 years	17	14.91
55–64 years	14	12.28
65–74 years	15	13.16
More than 75 years	6	5.26
Unknown*	4	3.51

*Not recorded or not provided for a particular matter.

Location of healthcare consumers

Location of healthcare consumers	Number	Percentage
Brisbane	58	50.88
Central West	0	0.00
Darling Downs	1	0.88
Far North	2	1.75
Fitzroy	4	3.51
Gold Coast	16	14.04
Mackay	3	2.63
North West	0	0.00
Northern	8	7.02
South West	0	0.00
Sunshine Coast	6	5.26
West Moreton	2	1.75
Wide Bay–Burnett	4	3.51
Outside Queensland	3	2.63
Unknown	7	6.14

The above data is based on health consumer location.

Location of health service providers

Location of health service providers	Number	Percentage
Brisbane	68	55.74
Central West	0	0.00
Darling Downs	1	0.82
Far North	4	3.28
Fitzroy	4	3.28
Gold Coast	20	16.39
Mackay	4	3.28
North West	0	0.00
Northern	7	5.74
South West	0	0.00
Sunshine Coast	7	5.74
West Moreton	1	0.82
Wide Bay-Burnett	3	2.46
Outside Queensland*	2	1.64
Unknown	2	1.64

The above data is based on health service provider location.

*Health service provider location is taken from the primary address of the provider recorded in our 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 we can deal with complaints up to two years old.



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