

Quarterly performance report— Quarter Three 2023-24

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Introduction

This document reports on the Quarter Three (Q3) performance of the Office of the Health Ombudsman (OHO) for the 2023–24 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 Agency (Ahpra) when dealing with notifications and complaints about registered health practitioners. The OHO also deals with complaints about unregistered health practitioners and health service organisations and facilities.

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

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

We have a range of functions which include:

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

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

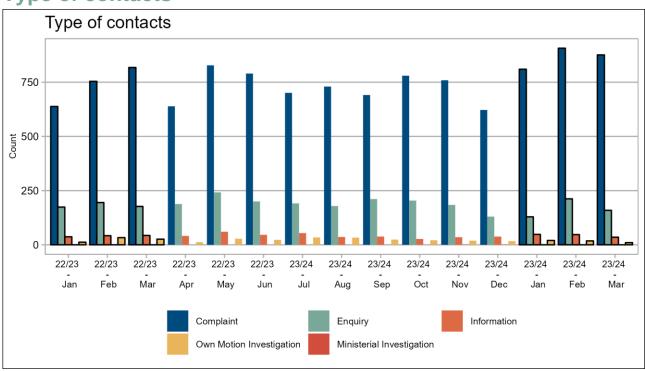
Data in this report is correct as of 11 April 2024, though figures may differ from those published in previous reports due to subsequent adjustments which occurred after the publication of those reports.

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

Intake of complaints

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

Type of contacts



Type of contact	January		Febru	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%	
Complaint	810	80.44	907	76.6	876	81.11	2593	79.27	
Enquiry	129	12.81	212	17.91	159	14.72	500	15.29	
Information	48	4.77	47	3.97	35	3.24	130	3.97	
Own Motion Investigation	20	1.99	18	1.52	10	0.93	48	1.47	
Ministerial Investigation	0	0	0	0	0	0	0	0	
Total	1007	100	1184	100	1080	100	3271	100	

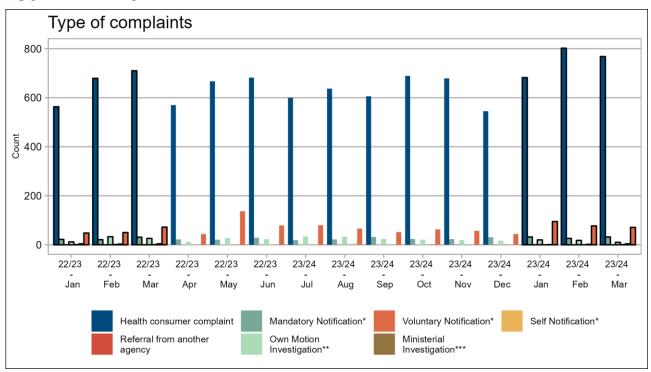
In addition to above contacts, 1 further contact is yet to be classified.

Contacts Received through Genesys

A large portion of Resolve contacts are generated from calls to the OHO. To manage these calls the OHO utilises Genesys - a cloud-based telephony / contact system that provides the OHO with multiple contemporary functions to record and report on work beyond what is formally recorded in our complaint's management systems. In short, for the same period (Q3) Genesys contacts amounted to 4756 which equates to approximately 31% of other contacts made with the OHO which do not necessitate being recorded in the Resolve system as a particular type of contact (as shown on the previous page). The table below is a breakdown of the contacts recorded in Genesys.

Type of contact	January		Febru	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%	
General Enquiry	240	15.4	324	19.5	320	20.9	884	18.6	
Health Service Complaint	618	39.6	672	40.4	645	42.1	1935	40.7	
Notification	82	5.3	85	5.1	80	5.2	247	5.2	
PPL	353	22.6	323	19.4	245	16.0	921	19.4	
Email	266	17.1	261	15.7	242	15.8	769	16.2	
Total	1559	100	1665	100	1532	100	4756	100	

Type of complaints



Type of complaints	Jan	uary	Febr	February		rch	Q3 total	
	Number	%	Number	%	Number	%	Number	%
Health consumer complaint	682	82.17	802	86.7	768	86.68	2252	85.27
Mandatory Notification*	32	3.86	26	2.81	32	3.61	90	3.41
Voluntary Notification*	95	11.45	77	8.32	71	8.01	243	9.2
Self Notification*	1	0.12	2	0.22	4	0.45	7	0.27
Referral from another agency	0	0	0	0	1	0.11	1	0.04
Own Motion Investigation**	20	2.41	18	1.95	10	1.13	48	1.82
Ministerial Investigation***	0	0	0	0	0	0	0	0
Total	830	100	925	100	886	100	2641	100

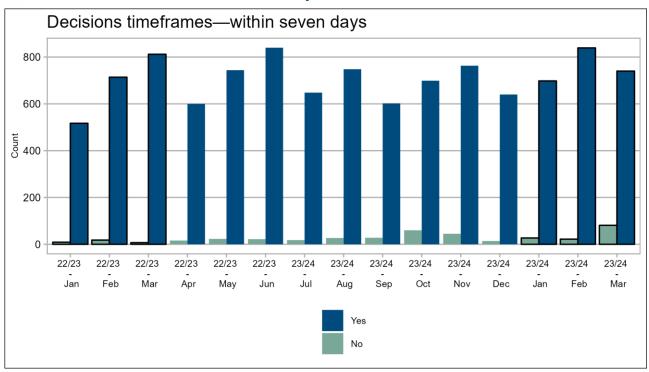
^{*} Notifications are matters defined under the Health Practitioner Regulation National Law (Queensland) and only relate to registered practitioners.

^{**} Own Motion Investigations refer to matters initiated by the Health Ombudsman, primarily following the receipt of information from the Queensland police service.

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

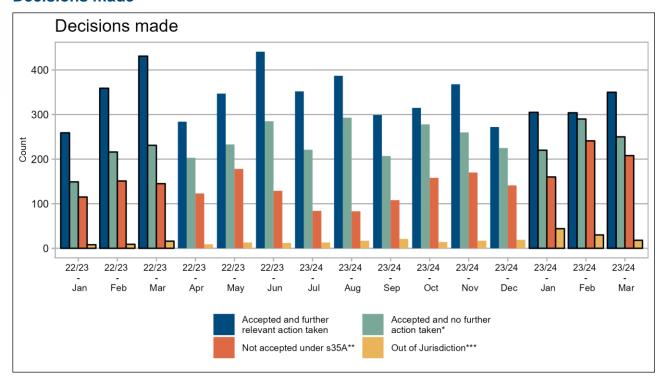
Complaint decisions

Decisions timeframes—within seven days



Decision made	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Yes	698	96.28	839	97.44	740	90.13	2277	94.6
No	27	3.72	22	2.56	81	9.87	130	5.4
Total	725	100	861	100	821	100	2407	100

Decisions made



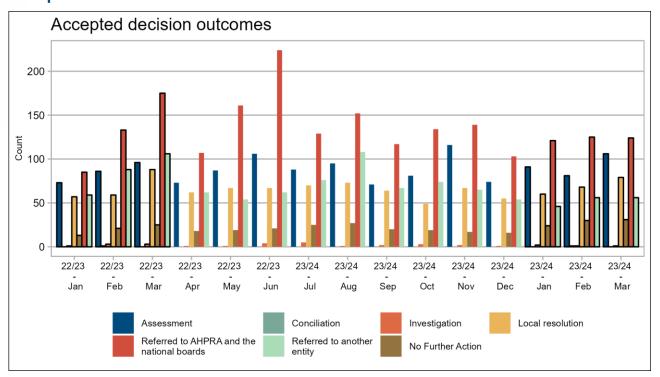
Number of decisions made	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Accepted and further relevant action taken	305	41.84	304	35.14	350	42.37	959	39.63
Accepted and no further action taken*	220	30.18	290	33.53	250	30.27	760	31.4
Not accepted under s35A**	160	21.95	241	27.86	208	25.18	609	25.17
Out of Jurisdiction***	44	6.04	30	3.47	18	2.18	92	3.8
Total	729	100	865	100	826	100	2420	100

^{*} These decisions relate to matters in which the Health Ombudsman has decided to take no further action under section 44 of the *Health Ombudsman Act 2013*. Prior to 1 June 2020, this category was reported as "Not Accepted".

^{**} Matters may not be accepted under s35A of the Act where the matter would be more appropriately dealt with by an entity other than the health ombudsman or where the complainant has not yet sought a resolution with the health service provider.

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

Accepted decision outcomes



Type of relevant action	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Assessment	91	26.45	81	22.38	106	26.7	278	25.2
Conciliation	0	0	1	0.28	0	0	1	0.09
Investigation	2	0.58	1	0.28	1	0.25	4	0.36
Local resolution	60	17.44	68	18.78	79	19.9	207	18.77
Referred to AHPRA and the national boards	121	35.17	125	34.53	124	31.23	370	33.54
Referred to another entity	46	13.37	56	15.47	56	14.11	158	14.32
No Further Action	24	6.98	30	8.29	31	7.81	85	7.71
Total	344	100	362	100	397	100	1103	100

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

Health service complaints profile

Main issue categories raised in complaints

Issue	Jan	uary	Febr	uary	Ма	rch	Q3 t	total
	Number	%	Number	%	Number	%	Number	%
Access	126	9.39	181	13.96	168	12.8	475	12.02
Code of conduct for Health Care Workers	21	1.56	13	1	25	1.91	59	1.49
Communication and Information	152	11.33	154	11.87	157	11.97	463	11.72
Consent	25	1.86	36	2.78	26	1.98	87	2.2
Discharge and Transfer Arrangements	14	1.04	14	1.08	23	1.75	51	1.29
Environment/Manag ement of Facility	51	3.8	55	4.24	41	3.12	147	3.72
Fees and Costs	49	3.65	60	4.63	48	3.66	157	3.97
Grievance Processes	61	4.55	46	3.55	45	3.43	152	3.85
Health Ombudsman Act 2013 Offence	0	0	0	0	1	0.08	1	0.03
Information	0	0	0	0	0	0	0	0
Medical Records	54	4.02	34	2.62	41	3.12	129	3.26
Medication	147	10.95	124	9.56	142	10.82	413	10.45
Professional Conduct	175	13.04	144	11.1	142	10.82	461	11.67
Professional Health	28	2.09	15	1.16	20	1.52	63	1.59
Professional Performance	423	31.52	385	29.68	397	30.26	1205	30.5
Reports/Certificates	16	1.19	34	2.62	33	2.52	83	2.1
Research/teaching/a ssessment	0	0	2	0.15	3	0.23	5	0.13
Total	1342	100	1297	100	1312	100	3951	100

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

Subcategories of professional performance issues raised in complaints

Issue	Jan	uary	Febr	February		rch	Q3 total	
	Number	%	Number	%	Number	%	Number	%
Competence	16	3.78	17	4.42	19	4.79	52	4.32
Coordination of treatment	42	9.93	39	10.13	48	12.09	129	10.71
Delay in treatment	19	4.49	21	5.45	27	6.8	67	5.56
Diagnosis	29	6.86	27	7.01	29	7.3	85	7.05
Inadequate care	49	11.58	35	9.09	40	10.08	124	10.29
Inadequate consultation	28	6.62	33	8.57	39	9.82	100	8.3
Inadequate prosthetic equipment	2	0.47	0	0	7	1.76	9	0.75
Inadequate treatment	148	34.99	116	30.13	102	25.69	366	30.37
Infection control	9	2.13	2	0.52	5	1.26	16	1.33
No or inappropriate referral	6	1.42	9	2.34	9	2.27	24	1.99
Public or private election	0	0	1	0.26	0	0	1	0.08
Rough and painful treatment	17	4.02	9	2.34	9	2.27	35	2.9
Teamwork or supervision	2	0.47	3	0.78	1	0.25	6	0.5
Unexpected treatment outcome or complications	42	9.93	62	16.1	43	10.83	147	12.2
Withdrawal of treatment	4	0.95	2	0.52	5	1.26	11	0.91
Wrong or inappropriate treatment	10	2.36	9	2.34	14	3.53	33	2.74
Total	423	100	385	100	397	100	1205	100

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

Subcategories of professional conduct issues raised in complaints

Issue	Jan	uary	Febr	uary	Ma	rch	Q3 t	otal
	Number	%	Number	%	Number	%	Number	%
Annual declaration not completed or completed incorrectly	1	0.57	0	0	0	0	1	0.22
Assault	5	2.86	7	4.86	9	6.34	21	4.56
Attendance	0	0	0	0	0	0	0	0
Boundary violation	6	3.43	7	4.86	5	3.52	18	3.9
Breach of condition	5	2.86	1	0.69	1	0.7	7	1.52
Conflict of interest	2	1.14	2	1.39	3	2.11	7	1.52
Discriminatory conduct	3	1.71	1	0.69	3	2.11	7	1.52
Emergency treatment not provided	1	0.57	1	0.69	1	0.7	3	0.65
Excessive treatment	4	2.29	2	1.39	3	2.11	9	1.95
Experimental treatment	0	0	0	0	0	0	0	0
False or misleading statements and or information	6	3.43	4	2.78	5	3.52	15	3.25
Financial fraud	6	3.43	2	1.39	7	4.93	15	3.25
Illegal practice	57	32.57	39	27.08	27	19.01	123	26.68
Inappropriate behaviour	29	16.57	24	16.67	30	21.13	83	18
Inappropriate collection, use or disclosure of information	21	12	22	15.28	22	15.49	65	14.1
Medico-legal conduct	0	0	0	0	0	0	0	0
Misrepresentation of qualifications	4	2.29	4	2.78	1	0.7	9	1.95
National Law breach	7	4	4	2.78	0	0	11	2.39
National Law offence	12	6.86	13	9.03	12	8.45	37	8.03
Offence by student	0	0	0	0	0	0	0	0
Response to adverse event	1	0.57	0	0	2	1.41	3	0.65
Sexual misconduct	5	2.86	11	7.64	11	7.75	27	5.86
Total	175	100	144	100	142	100	461	100

Subcategories of professional health issues raised in complaints

Issue	January		Febr	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%	
Mental impairment - cognitive impairment	4	14.29	0	0	1	5	5	7.94	
Mental impairment - mental illness	5	17.86	4	26.67	11	55	20	31.75	
Mental impairment - other	3	10.71	2	13.33	1	5	6	9.52	
Mental impairment - substance misuse, abuse or addiction	14	50	9	60	5	25	28	44.44	
Physical impairment	2	7.14	0	0	2	10	4	6.35	
Total	28	100	15	100	20	100	63	100	

Profile of complaints about health practitioners

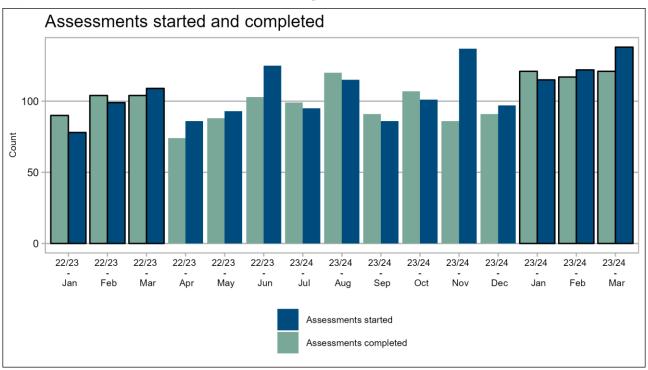
	Number of	Number and type of issues identified in complaints about health practitioners																	
Practitioner type	practitioners identified in complaints	Access		Communication and Information	Consent	Discharge and Transfer Arrangements	Management	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Aboriginal and Torres Strait Islander health practitioner	1	-	-	1	-	-	-	-	-	-	-	•	-	-	-	-	-	-	1
Chinese Medicine Practitioner	3	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	-	3
Chiropractor	5	-	-	-	-	-	-	-	-	-	-	-	-	5	-	3	-	-	8
Dental practitioner	57	1	-	10	5	-	-	2	3	-	-	1	1	5	2	56	-	-	86
Medical Practitioner	676	43	-	147	29	5	4	31	10	-	-	36	141	150	14	366	45	2	1023
Medical Radiation Practitioner	8	1	-	-	-	-	-	-	-	-	-	-	-	6	5	4	-	-	16
Midwife	18	-	-	1	-	-	-	-	-	-	-	2	-	3	1	13	-	-	20
Occupational Therapist	147	1	-	10	3	-	-	-	1	-	-	6	19	103	32	37	1	-	213
Optometrist	11	1	-	1	-	-	-	2	-	-	-	-	-	3	-	6	4	-	17
Oral Health Therapist	3	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	3
Osteopath	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Paramedic	2	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2	-	-	4
Pharmacist	29	-	-	2	-	-	1	-	-	-	-	-	1	34	5	3	-	-	46
Physiotherapist	25	1	-	5	-	-	2	-	1	-	-	-	17	10	3	2	-	-	41
Podiatrist / Chiropodist	14	-	-	3	-	-	-	2	-	-	-	-	-	7	-	3	1	-	16
Psychologist	4	1	-	-	-	-	2	-	-	-	-	-	-	2	-	3	-	-	8
Nurse	65	3	2	12	-	-	-	5	1	-	-	5	2	37	-	15	11	-	93
Student practitioner	4	-	-	-	-	-	-	-	-	-	-	-	=	2	1	1	-	-	4
Unknown practitioner	0	-	-	-	-	-	-	-	-	-	-	-	=	-	-	-	-	-	-
Unregistered practitioner	55	3	51	24	6	1	2	-	3	1	-	2	10	15	-	33	-	-	151
Total	1128	55	53	216	43	6	11	42	19	1	-	52	191	389	63	549	62	2	1754

Profile of complaints about health service organisations

	Number of		Number and type of issues identified in complaints about health practitioners																
Practitioner type	practitioners identified in complaints	Access		Communication and Information	Consent	Discharge and Transfer Arrangements	Environment/ Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Inform	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Ce tificates	Research/te aching/asse ssment	Total
Administrative Service	4	-	-	1	-	-	3	2	-	-	-	-	-	-	-	-	-	-	6
Aged Care Facility	12	3	-	1	-	-	1	1	1	-	-	-	2	-	-	3	-	-	12
Allied Health Service	18	2	-	6	2	-	3	3	3	-	-	-	-	-	-	6	3	-	28
Ambulance Service	8	3	-	3	1	-	-	-	1	-	-	1	1	4	-	5	-	-	19
Area Health Services	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Community Health Service	25	10	-	9	-	-	-	1	1	-	-	4	1	2	-	9	-	-	37
Correctional Facility	15	209	-	19	-	-	4	2	2	-	-	3	118	1	-	120	-	-	478
Dental Service	35	7	-	5	2	-	2	5	6	-	-	-	-	4	-	10	-	-	41
Environmental Health Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Health Education Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Health Information Service	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Health Promotion Service	2	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Health Service District	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Hospital & Health Service	11	6	-	2	-	-	2	-	3	-	-	-	-	2	-	2	-	-	17
Laboratory Service	18	1	-	2	1	-	3	7	4	-	-	2	-	2	-	5	-	-	27
Licensed Day Hospital	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Licensed Private Hospital	31	5	-	11	-	5	9	7	14	-	-	3	6	2	-	38	1	-	101
Medical Centre	171	51	2	34	-	-	29	39	21	-	-	31	12	10	-	12	4	-	245
Mental Health Service	40	5	-	18	22	6	6	1	1	-	-	-	13	9	-	29	2	-	112
Nursing Service	2	-	-	-	-	-	-	-	1	-	-	-	-	1	-	1	-	-	3
Optical Store	3	-	-	-	-	-	-	2	-	-	-	-	-	-	-	2	-	-	4
Other Government Department	12	6	-	3	-	-	6	-	-	-	-	-	1	1	-	1	1	-	19
Other Support Service	10	1	-	-	-	-	4	2	2	-	-	-	3	-	-	1	-	-	13
Paramedical Service	2	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	2
Parent Organisation	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Pharmaceutical Service	54	3	-	9	-	-	4	11	4	-	-	1	31	6	-	2	1	-	72
Private Organisation	37	2	2	8	-	1	7	14	9	-	-	3	2	3	-	10	2	1	64
Public Health Service	13	6	-	3	-	-	-	-	2	-	-	-	2	-	-	14	-	-	27
Public Hospital	56	94	2	96	14	33	46	5	52	-	-	28	24	21	-	375	4	1	795
Registration Board	2	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Residential Care Service	5	-	-	1	-	-	-	-	-	-	-	-	2	-	-	2	1	1	7
Social Work Service	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Specialised Health Service	44	4	-	14	1	-	6	12	6	-	-	1	5	3	-	8	2	-	62
Welfare Service	2	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	-	2
Total	635	420	6	248	44	45	136	115	133	-	-	78	223	72	-	656	21	3	2200

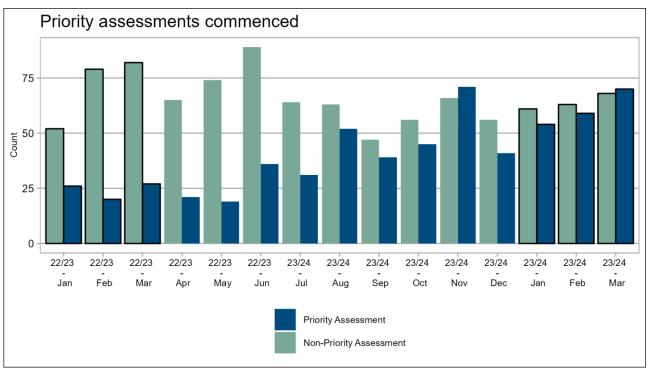
Assessment

Assessments started and completed



Assessments this quarter	January	February	March	Q3 total
Assessments started	115	122	138	375
Assessments completed	121	117	121	359

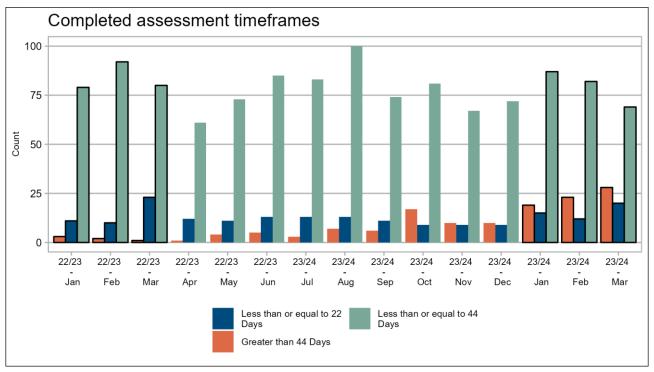
Assessment Started by Prioritisation



Assessment timeframes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Priority Assessment	54	46.96	59	48.36	70	50.72	183	48.8
Non-Priority Assessment	61	53.04	63	51.64	68	49.28	192	51.2
Total	115	100	122	100	138	100	375	100

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

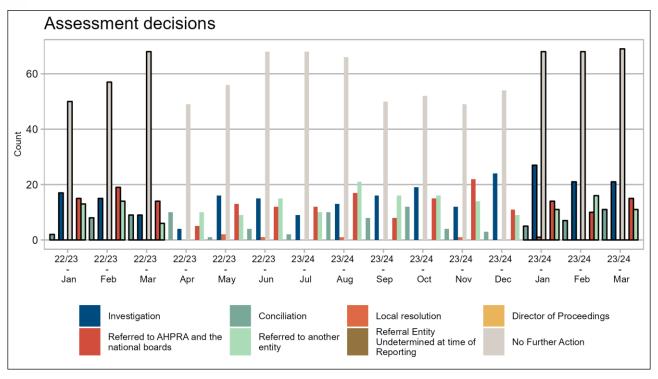
Completed assessment timeframes



Assessment timeframes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Less than or equal to 22 Days	15	12.4	12	10.26	20	17.09	47	13.24
Less than or equal to 44 Days	87	71.9	82	70.09	69	58.97	238	67.04
Greater than 44 Days	19	15.7	23	19.66	28	23.93	70	19.72
Total	121	100	117	100	117	100	355	100

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

Assessment decisions



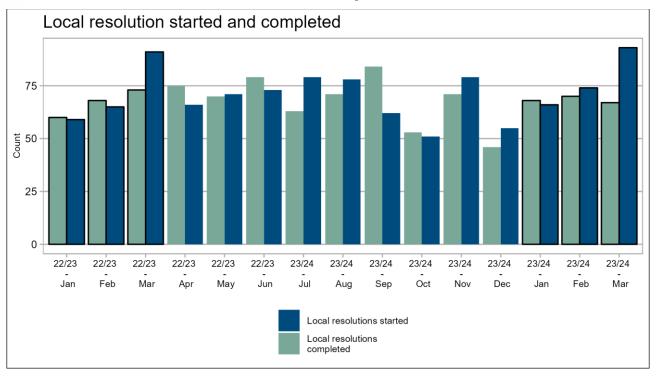
Type of relevant action*	Janı	uary	Febr	uary	March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Investigation	27	21.43	21	17.21	21	16.54	69	18.4
Conciliation	5	3.97	7	5.74	11	8.66	23	6.13
Local resolution	1	0.79	0	0	0	0	1	0.27
Director of Proceedings	0	0	0	0	0	0	0	0
Referred to AHPRA and the national boards	14	11.11	10	8.2	15	11.81	39	10.4
Referred to another entity	11	8.73	16	13.11	11	8.66	38	10.13
Referral Entity Undetermined at time of Reporting**	0	0	0	0	0	0	0	0
No Further Action	68	53.97	68	55.74	69	54.33	205	54.67
Total	126	100	122	100	127	100	375	100

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

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

Local resolution

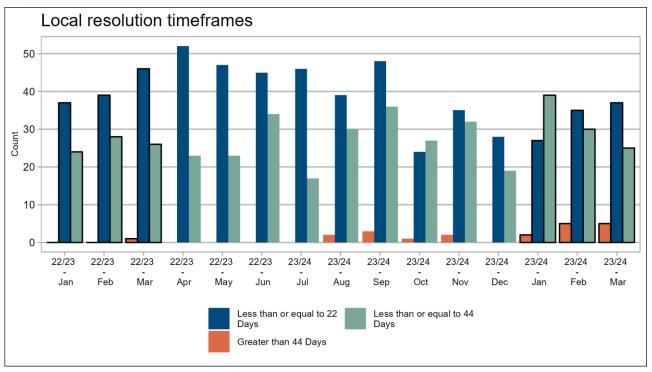
Local resolutions started and completed



Local resolutions this quarter*	January	February	March	Q3 total
Local resolutions started	66	74	93	233
Local resolutions completed	68	70	67	205

^{*} 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.

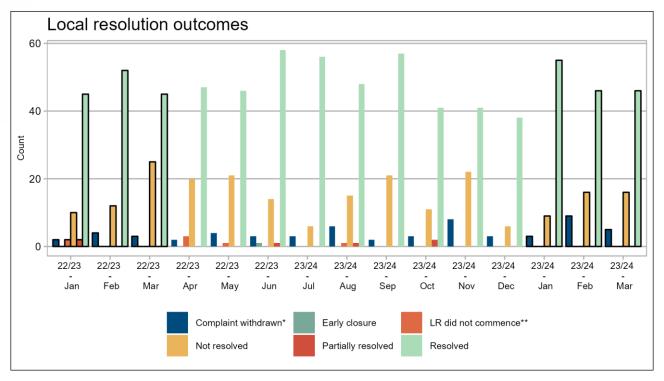
Completed local resolutions Time Frames



Local resolution timeframe	January		Febr	February		rch	Q3 total		
	Number	%	Number	%	Number	%	Number	%	
Less than or equal to 22 Days	27	39.71	35	50	37	55.22	99	48.29	
Less than or equal to 44 Days	39	57.35	30	42.86	25	37.31	94	45.85	
Greater than 44 Days	2	2.94	5	7.14	5	7.46	12	5.85	
Total	68	100	70	100	67	100	205	100	

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

Local Resolution Outcomes



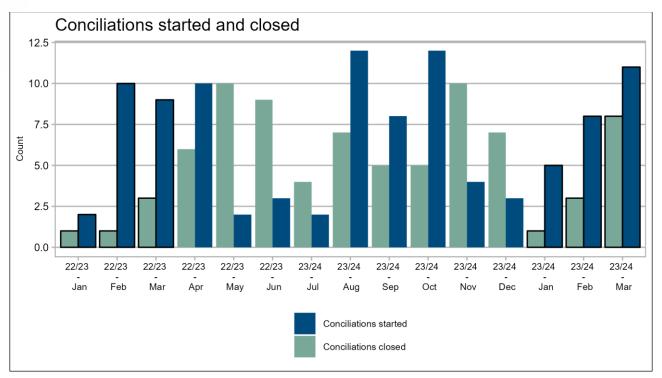
Local resolution outcomes	Janu	January		February		ch	Q3 total		
	Number	%	Number	%	Number	%	Number	%	
Complaint withdrawn*	3	4.48	9	12.68	5	7.46	17	8.29	
Early closure	0	0	0	0	0	0	0	0	
Local Resolution did not commence**	0	0	0	0	0	0	0	0	
Not Resolved	9	13.43	16	22.54	16	23.88	41	20	
Partially Resolved	0	0	0	0	0	0	0	0	
Resolved	55	82.09	46	64.79	46	68.66	147	71.71	
Total	67	100	71	100	67	100	205	100	

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

^{**} A local resolution may not commence where the complaint is resolved directly with the health care provider prior to the commencement of the process.

Conciliation

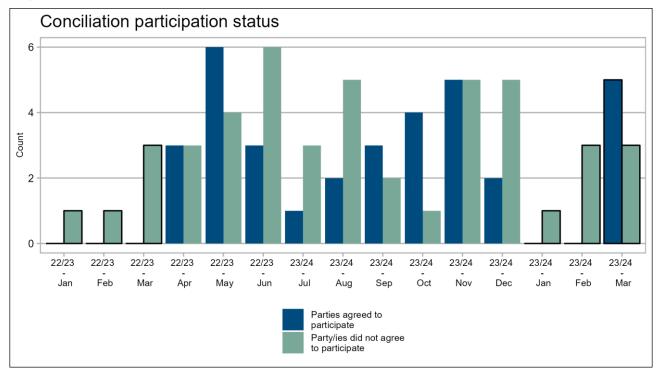
Conciliations started and closed



Conciliations this quarter	January	February	March	Q3 total
Conciliations started*	5	8	11	24
Conciliations closed	1	3	8	12

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

Agreement to participate in conciliation

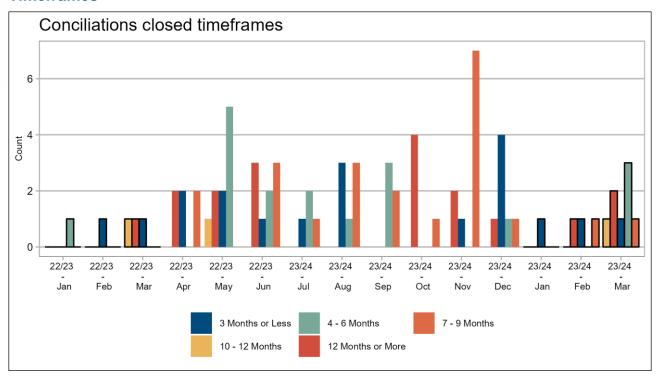


Agreement to participate*	January	February	March	Q3 total
Parties agreed to participate	0	0	5	5
Party/ies did not agree to participate	1	3	3	7

^{*} Once the decision is made to attempt conciliation, both parties must agree to participate in the process. If either one, or both, of the parties do not agree, the conciliation process does not commence, and the matter is closed.

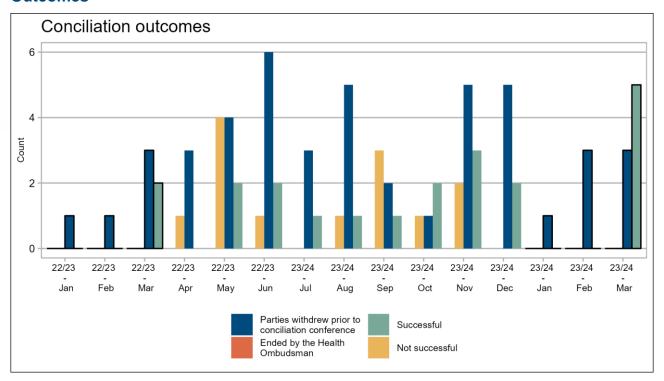
Completed conciliations

Timeframes



Conciliations Closed	January		Febr	February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%	
3 Months or Less	1	100	1	33.33	1	12.5	3	25	
4 - 6 Months	0	0	0	0	3	37.5	3	25	
7 - 9 Months	0	0	1	33.33	1	12.5	2	16.67	
10 - 12 Months	0	0	0	0	1	12.5	1	8.33	
12 Months or More	0	0	1	33.33	2	25	3	25	
Total	1	100	3	100	8	100	12	100	

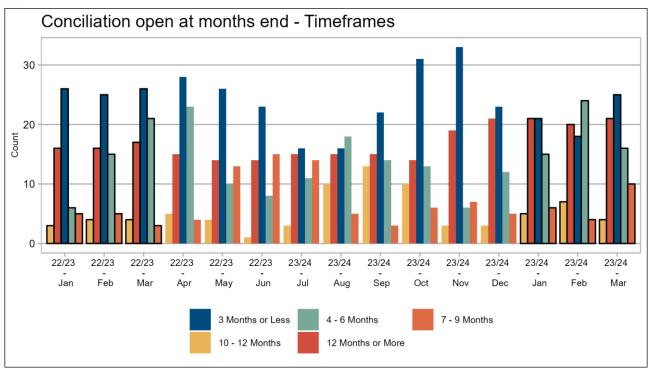
Outcomes



Conciliation outcomes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Parties withdrew prior to conciliation conference	1	100	3	100	3	37.5	7	58.33
Successful	0	0	0	0	5	62.5	5	41.67
Ended by the Health Ombudsman	0	0	0	0	0	0	0	0
Not successful	0	0	0	0	0	0	0	0
Total	1	100	3	100	8	100	12	100

The data above relates to matters where parties initially agreed to participate in conciliation. After agreeing, the conciliation process was completed with the matter either being successful or not successful—or in some instances, the Health Ombudsman may end a conciliation or parties involved may withdraw from the process prior to conciliation occurring. 'Completed conciliations' differ from 'closed conciliations'—in the table on page 22—in that they only relate to matters where parties agreed to participate in conciliation.

Open conciliation timeframes



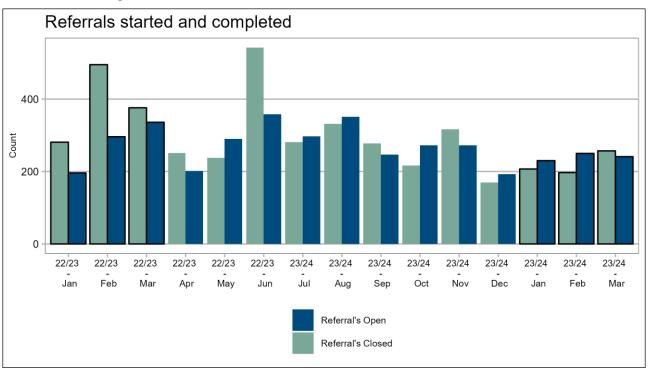
Open at Months End Timeframes	January		Febr	uary	March		
	Number	%	Number	%	Number	%	
3 Months or Less	21	30.88	18	24.66	25	32.89	
4 - 6 Months	15	22.06	24	32.88	16	21.05	
7 - 9 Months	6	8.82	4	5.48	10	13.16	
10 - 12 Months	5	7.35	7	9.59	4	5.26	
12 Months or More	21	30.88	20	27.4	21	27.63	
Total	68	100	73	100	76	100	

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

Complaint Management (Referrals)

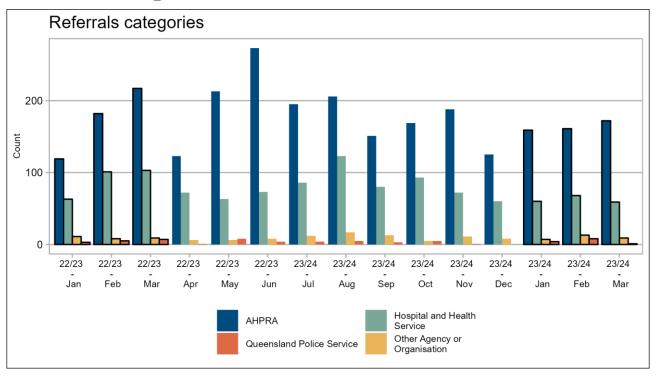
As OHO is the single point of entry for health service complaints in Queensland effective referral coordination and monitoring is critical. Under the Act, referrals to Ahpra are conducted under s91 either following joint consideration or at other points throughout the regulatory / complaints process.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

Referrals Open & Closed



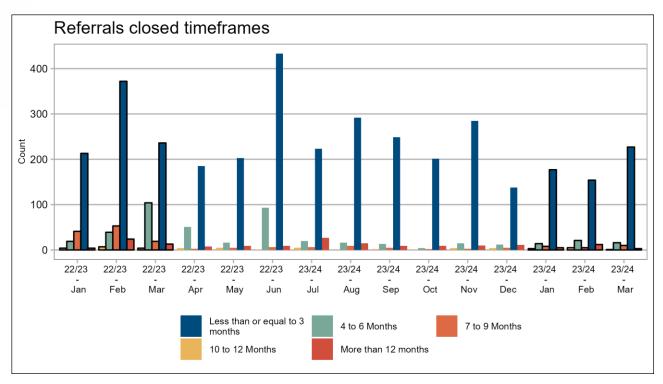
Referrals	January	February	March	Q3 total
Referrals Open	230	250	241	721
Referrals Closed	207	197	257	661

Referrals Categories



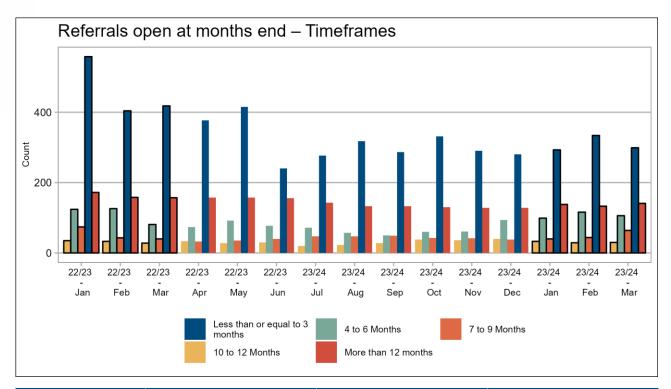
Referrals Categories	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
AHPRA	159	69.13	161	64.4	172	71.37	492	68.24
Hospital and Health Service	60	26.09	68	27.2	59	24.48	187	25.94
Queensland Police Service	4	1.74	8	3.2	1	0.41	13	1.8
Other Agency or Organisation	7	3.04	13	5.2	9	3.73	29	4.02
Total	230	100	250	100	241	100	721	100

Referrals Closed Timeframes



	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
3 Months or Less	177	85.51	154	78.17	227	88.33	558	84.42
4 to 6 Months	14	6.76	21	10.66	16	6.23	51	7.72
7 to 9 Months	8	3.86	5	2.54	10	3.89	23	3.48
10 to 12 Months	3	1.45	5	2.54	1	0.39	9	1.36
More than 12 Months	5	2.42	12	6.09	3	1.17	20	3.03
Total	207	100	197	100	257	100	661	100

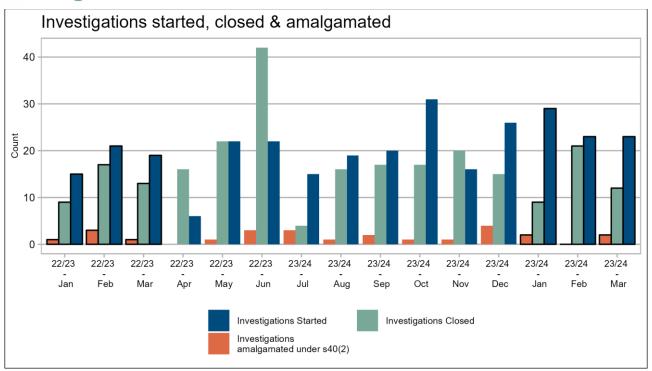
Referrals Open Timeframes



Open at Months End Timeframes	January		Febr	uary	March		
	Number	%	Number	%	Number	%	
3 Months or Less	293	48.59	334	50.91	299	46.72	
4 to 6 Months	99	16.42	116	17.68	106	16.56	
7 to 9 Months	40	6.63	44	6.71	64	10	
10 to 12 Months	33	5.47	29	4.42	30	4.69	
More than 12 Months	138	22.89	133	20.27	141	22.03	
Total	603	100	656	100	640	100	

Investigation

Investigations started and closed

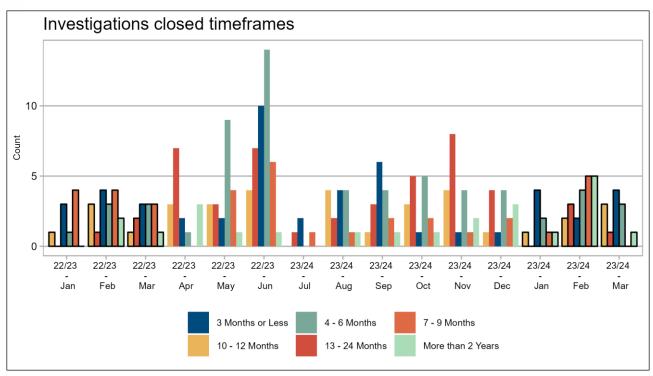


Investigations this quarter	January	February	March	Q3 total
Investigations started*	29	23	23	75
Investigations closed	9	21	12	42
Investigations amalgamated under s40(2)	2	0	2	4

^{*} 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.

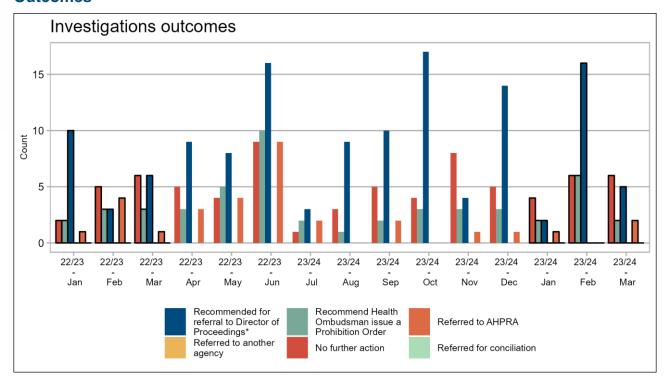
Closed investigations

Timeframes



Closed investigation timeframes	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
3 Months or Less	4	44.44	2	9.52	4	33.33	10	23.81
4 - 6 Months	2	22.22	4	19.05	3	25	9	21.43
7 - 9 Months	1	11.11	5	23.81	0	0	6	14.29
10 - 12 Months	1	11.11	2	9.52	3	25	6	14.29
13 - 24 Months	0	0	3	14.29	1	8.33	4	9.52
More than 2 Years	1	11.11	5	23.81	1	8.33	7	16.67
Total	9	100	21	100	12	100	42	100

Outcomes



Investigation outcomes*	January		February		March		Q3 total	
	Number	%	Number	%	Number	%	Number	%
Recommended for referral to Director of Proceedings**	2	22.22	16	57.14	5	33.33	23	44.23
Recommend Health Ombudsman issue a Prohibition Order	2	22.22	6	21.43	2	13.33	10	19.23
Referred to AHPRA	1	11.11	0	0	2	13.33	3	5.77
Referred to another agency	0	0	0	0	0	0	0	0
No further action	4	44.44	6	21.43	6	40	16	30.77
Referred for conciliation	0	0	0	0	0	0	0	0
Total	9	100	28	100	15	100	52	100

^{*} A single investigation may result in multiple outcomes, and as such the total number of outcomes in this table may not match the number of closed investigations detailed in the table above.

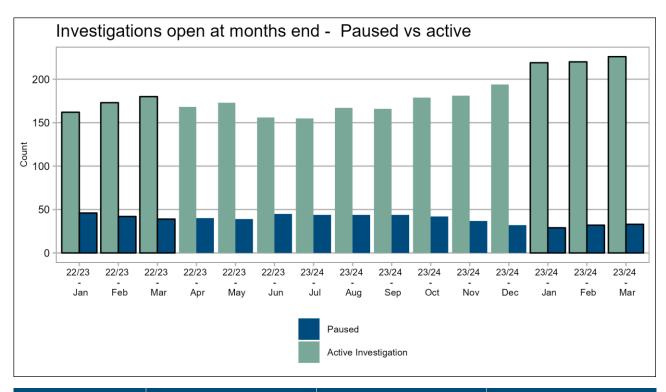
^{**} Matters determined suitable for referral to the Director of Proceedings at the conclusion of an investigation are sent to the Health Ombudsman for consideration and determination on whether referral to the Director of Proceedings is appropriate.

Open investigations

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

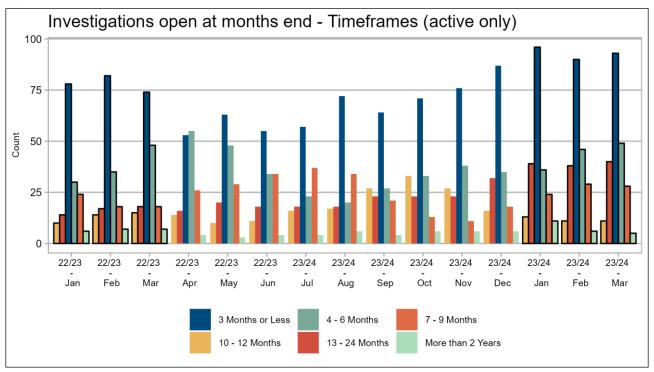
Active investigations are being currently investigated, while paused investigations are not able to be investigated until such time as another agency—such as the Queensland Police Service or the Coroner's Court of Queensland—concludes their own processes. Despite being unable to progress paused investigations,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

Active & Paused Investigations



	January		February		March	
	Number	%	Number	%	Number	%
Paused	29	11.69	32	12.7	33	12.74
Active Investigation	219	88.31	220	87.3	226	87.26
Total	248	100	252	100	259	100

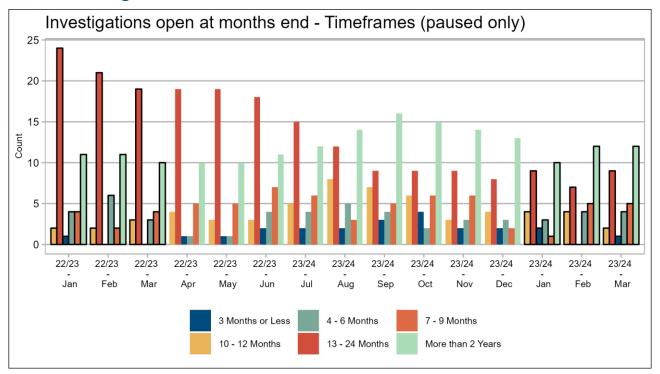
Active investigation timeframes



	January		February		March	
	Number	%	Number	%	Number	%
3 Months or Less	96	43.84	90	40.91	93	41.15
4 - 6 Months	36	16.44	46	20.91	49	21.68
7 - 9 Months	24	10.96	29	13.18	28	12.39
10 - 12 Months	13	5.94	11	5	11	4.87
13 - 24 Months	39	17.81	38	17.27	40	17.7
More than 2 Years	11	5.02	6	2.73	5	2.21
Total	219	100	220	100	226	100

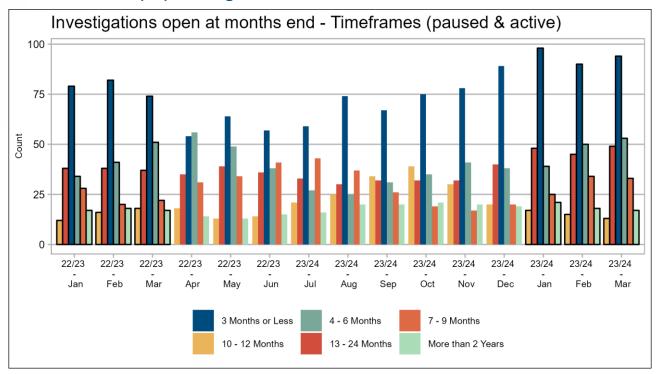
All investigations that have been open for 12 Months or More are published on our investigations register, available on our website (www.oho.qld.gov.au).

Paused investigation timeframes



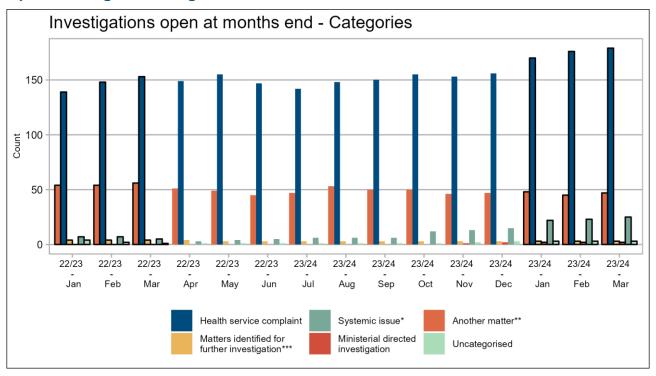
	January		February		March	
	Number	%	Number	%	Number	%
3 Months or Less	2	6.9	0	0	1	3.03
4 - 6 Months	3	10.34	4	12.5	4	12.12
7 - 9 Months	1	3.45	5	15.62	5	15.15
10 - 12 Months	4	13.79	4	12.5	2	6.06
13 - 24 Months	9	31.03	7	21.88	9	27.27
More than 2 Years	10	34.48	12	37.5	12	36.36
Total	29	100	32	100	33	100

Active & Paused (All) Investigation Timeframes



	January		February		March	
	Number	%	Number	%	Number	%
3 Months or Less	98	39.52	90	35.71	94	36.29
4 - 6 Months	39	15.73	50	19.84	53	20.46
7 - 9 Months	25	10.08	34	13.49	33	12.74
10 - 12 Months	17	6.85	15	5.95	13	5.02
13 - 24 Months	48	19.35	45	17.86	49	18.92
More than 2 Years	21	8.47	18	7.14	17	6.56
Total	248	100	252	100	259	100

Open investigation categories



	January		Febr	uary	March	
	Number	%	Number	%	Number	%
Health service complaint	170	68.55	176	69.84	179	69.11
Systemic issue*	22	8.87	23	9.13	25	9.65
Another matter**	48	19.35	45	17.86	47	18.15
Matters identified for further investigation***	3	1.21	3	1.19	3	1.16
Ministerial directed investigation	2	0.81	2	0.79	2	0.77
Uncategorised	3	1.21	3	1.19	3	1.16
Total	248	100	252	100	259	100

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

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

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

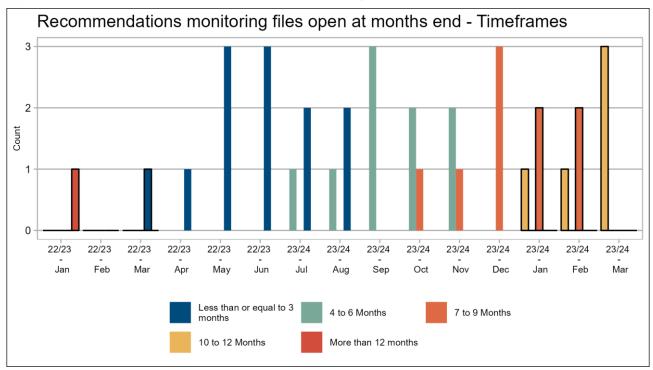
Monitoring investigation recommendations

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	January	February	March
Cases open at the beginning of the month	3	3	3
Recommendations monitoring cases started	-	-	-
Recommendations monitoring cases closed	-	-	-

Open recommendations monitoring case timeframes



Monitoring case timeframes	January		February		March	
	Number	%	Number	%	Number	%
3 Months or Less	0	0	0	0	0	0
4 to 6 Months	0	0	0	0	0	0
7 to 9 Months	2	66.67	2	66.67	0	0
10 to 12 Months	1	33.33	1	33.33	3	100
12 Months or More	0	0	0	0	0	0
Total	3	100	3	100	3	100

Director of Proceedings

The role of the Director of Proceedings is to independently assess the merits of an investigation and determine whether the matter is suitable to be run to Queensland Civil and Administrative Tribunal (QCAT) for a determination.

Where the Director of Proceedings determines that an investigation has produced evidence of issues relating to health, conduct and/or performance that require intervention by QCAT, a comprehensive brief of evidence is prepared and in-house or external lawyers are briefed to represent the Health Ombudsman before QCAT.

Matters referred to the Director of Proceedings by practitioner type

Practitioner type	Number	Percentage
Chiropractor	2	8.7%
Medical Practitioner	2	8.7%
Osteopath	3	13.1%
Pharmacist	4	17.4%
Psychologist	3	13.1%
Registered Nurse	9	39.2%
Total	23	100%

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

Practitioner type	Number	Percentage
Chiropractor	2	3.1%
Medical Practitioner	18	27.7%
Obstetrician & Gynaecologist	1	1.6%
Osteopath	3	4.6%
Pharmacist	12	18.5%
Physiotherapist	2	3.1%
Psychologist	6	9.2%
Registered Nurse	21	32.3%
Total	65	100%

Outcomes of matters reviewed by the Director of Proceedings

Matters filed in the Queensland Civil and Administrative Tribunal

Practitioner type	Number	Percentage
Medical Practitioner	1	20%
Medical Radiation Practitioner	1	20%
Midwife	2	40%
Pharmacist	1	20%
Total Registered	5	100%

Matters referred back to Health Ombudsman

Practitioner type	Number	Percentage
Medical Practitioner	3	33.4%
Physiotherapist	1	11.2%
Registered Nurse	3	33.4%
Surgeon	2	22.3%
Total	9	100%

Queensland Civil and Administrative Tribunal disciplinary matters

Matters Open in the Queensland Civil and Administrative Tribunal

Practitioner type	Number	Percentage
Chinese Medical Practitioner	1	1.8%
Chiropractor	2	3.5%
Medical Radiation Practitioner	2	3.5%
Medical Practitioner	23	40.4%
Midwife	2	3.5%
Osteopath	2	3.5%
Paediatrician	1	1.8%
Pharmacist	7	12.3%
Psychologist	6	10.6%
Registered Nurse	10	17.6%
Total Registered	56	98.5%
Massage Therapist	1	1.8%
Total Unregistered	1	1.8%
Total	57	100%

Outcomes of Queensland Civil and Administrative disciplinary matters

Queensland Civil and Administrative Decisions

Practitioner type	Number		
Medical Practitioner	2		
Medical Practitioner & Dentist	5 ¹		
Physiotherapist	1		
Sonographer	1		
Total QCAT Decisions	9		

¹ These 5 matters related to the same Practitioner where there were 5 separate referrals filed.

Matters withdrawn

Practitioner type	Number
Total matters withdrawn	0

Decisions on matters referred to the Queensland Civil and Administrative Tribunal

There have been five (5) decisions made on matters referred to QCAT during the quarter.

Date of Decision	Matter	Details of QCAT Decision
24 January 2024	OCR287-18	 Professional Misconduct Reprimand Condition imposed (refer to order) National Law, Part 7, division 11, subdivision 2 applies to the condition Review period of 2 years Registration suspended for 3.5months commencing in 60 days Practitioner to pay Applicant's costs of \$5,000 Non publication order (refer to order)
1 February 2024	HO v HOUSEGO (5x matters)	 Professional Misconduct Registration cancelled Disqualified from applying for registration until 17 September 2025 Prohibited from providing any health service until registered Each party bear their own costs
27 February 2024	OCR095-23	 Professional Misconduct Reprimand Disqualified from applying for registration for a period of 3 months commencing 27 February 2024 and ending 27 May 2024 Each party bears their own costs Non-publication order
1 March 2024 HO v van den BRINK		 Professional Misconduct Reprimand Registration suspended for 6 months No order as to costs
18 March 2024	HO v OROLA	 Professional Misconduct Disqualified from applying for registration for a period of 12 years Prohibited from providing any health service for a period of 12 years Each party bear their own costs

Decisions on immediate action reviews

There was one (1) new application made to the Queensland Civil and Administrative Tribunal to review an Immediate Registration Action, two (2) matters withdrawn and zero (0) matters were heard/determined. Four (4) matters are currently in litigation in QCAT.

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.

Show cause notices

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

In January, February and March 2024, 20 (twenty) show cause notices were issued:

- Six (6) Registered nurses relating to professional conduct
- Four (4) Paramedic relating to professional conduct
- One (1) Medical Practitioners relating to professional conduct
- Nine (9) unregistered practitioners relating to professional conduct

Immediate registration actions

Immediate registration actions - Initiation

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

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

Immediate registration actions - Variation

Practitioner type	Number	Month	Action taken	Reason/s for taking action		
				Public Interest	Serious Risk	
Psychologist	1	Feb	Conditions		✓	
Medical Practitioner	1	Feb	Conditions	✓	✓	

Immediate registration actions - Revocation

Practitioner type	Number	Month	Action that	Reason/s for taking	action
			was taken	Public Interest	Serious Risk
Medical Practitioner	1	Jan	Conditions	✓	
Medical Practitioner	1	Jan	Conditions		✓
Nurse	1	Jan	Conditions	✓	✓
Nurse	1	Jan	Suspension	✓	✓
Nurse	1	Feb	Suspension	✓	
Paramedic	1	Feb	Suspension	√	
Podiatrist	1	Mar	Conditions	√	

Interim prohibition orders

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

The details for current interim prohibition orders can be found on the prohibition order register on the OHO website.

Interim Prohibition Order - Initiation

Practitioner type	Number	Month	Action taken	Reason/s for taking action*		
				Public Interest	Serious Risk	
Alternative health provider	2	Jan	Prohibition	✓	√	
Nurse	1	Jan	Prohibition with Restriction		√	
Alternative health provider	1	Feb	Prohibition		✓	
Counsellor	1	Feb	Prohibition		✓	
Disability support worker	2	Feb	Prohibition	√	√	
Alternative health provider	1	Feb	Prohibition with Restriction		√	
Assistant in nursing	1	Feb	Prohibition with Restriction		√	
Assistant in nursing	1	Feb	Prohibition with Restriction	√	✓	
Chinese Medical Practitioner/ Massage Therapist	1	Mar	Prohibition	✓	√	
Assistant in nursing	1	Mar	Prohibition with Restriction		√	

Interim Prohibition Order – Variation

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

There were no variations to Interim Prohibition Orders in Q3 2023-24.

Interim Prohibition Order - Revocation

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

Prohibition orders

Prohibition Order - Initiation

Practitioner type	Number	Month	Action taken	Reason/s for taking action		
				Public Interest	Serious Risk	
Assistant in nursing	1	Jan	Prohibition		✓	
Disability support worker	1	Jan	Prohibition		✓	
Alternative health provider	1	Mar	Prohibition		✓	

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.

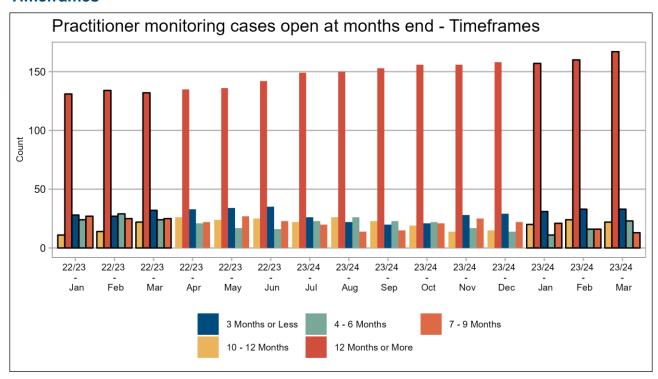
The Health Ombudsman may take immediate action against a single practitioner with both immediate registration action and an interim prohibition order. This can occur, for example, in instances where there is a risk that a registered practitioner may also practise in an unregistered capacity.

Practitioner monitoring cases

Cases this month	January	February	March
Practitioner monitoring cases started	9	11	12
Practitioner monitoring cases finalised	5	2	1

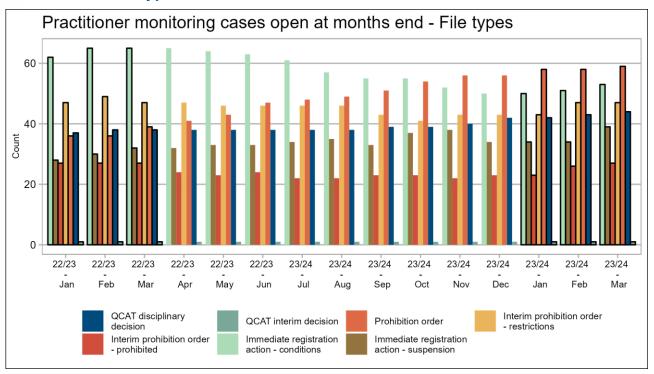
Open monitoring cases

Timeframes



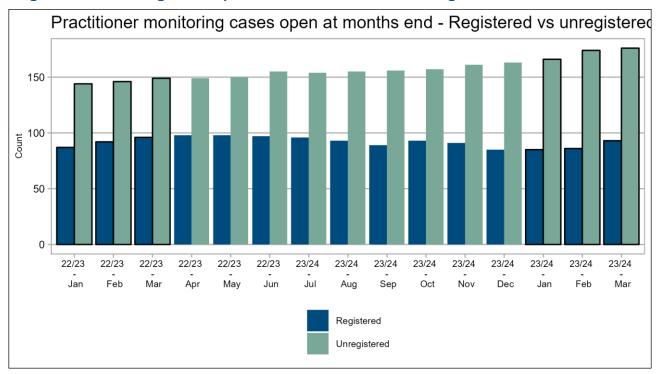
	January		February		March	
	Number	%	Number	%	Number	%
3 Months or Less	31	12.92	33	13.25	33	12.79
4 - 6 Months	11	4.58	16	6.43	23	8.91
7 - 9 Months	21	8.75	16	6.43	13	5.04
10 to 12 Months	20	8.33	24	9.64	22	8.53
12 Months or More	157	65.42	160	64.26	167	64.73
Total	240	100	249	100	258	100

Immediate action types



	January		February		March	
	Number	%	Number	%	Number	%
QCAT disciplinary decision	42	16.73	43	16.54	44	16.3
QCAT interim decision	1	0.4	1	0.38	1	0.37
Permanent prohibition order	58	23.11	58	22.31	59	21.85
Interim prohibition order - restrictions	43	17.13	47	18.08	47	17.41
Interim prohibition order - prohibited	23	9.16	26	10	27	10
Immediate registration action - conditions	50	19.92	51	19.62	53	19.63
Immediate registration action - suspension	34	13.55	34	13.08	39	14.44
Total	251	100	260	100	270	100

Registered Vs Unregistered practitioners under monitoring



	Janı	uary	Febr	uary	March		
	Number %		Number	%	Number	%	
Registered	85	33.86	86	33.08	93	34.57	
Unregistered	166	66.14	174	66.92	176	65.43	
Total	251	100	260	100	269	100	

Australian Health Practitioner Regulation Agency

Joint consideration matters

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

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

Initial joint consideration consultations

Matters Commenced & Finalised

	Month	OHO Matter Count	Provider Count	Decision Count*
	January	294	310	327
Matters	February	322	348	361
commenced	March	310	337	348
	Total	926	995	1036
	January	291	297	315
Metters Finalised	February	317	349	363
Matters Finalised	March	316	338	352
	Total	924	984	1030

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

Issues by Practitioner Type

	Access	Code of conduct for Health Care Workers	and Information	Consent	Discharge and Transfer Arrangements	Environment/ Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	-	3	-	1	-	-	4
Dental practitioner	-	-	8	4	-	-	2	3	-	-	1	-	5	1	40	-	-	64
Medical Practitioner	34	-	110	21	4	2	28	10	1	-	33	126	124	11	307	41	3	855
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	5	4	1	-	-	10
Midwife	1	-	-	-	-	-	-	-	-	-	1	-	3	2	15	-	-	22
Nurse	-	-	8	3	-	-	-	1	-	-	8	20	84	25	44	2	1	196
Occupational Therapist	1	-	1	-	-	-	1	-	-	-	-	-	1	-	6	4	-	14
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	3
Oral Health Therapist	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	3
Paramedic	-	-	2	-	-	-	-	-	-	-	-	1	29	4	3	-	-	39
Pharmacist	1	-	4	-	-	2	-	1	-	-	-	23	8	1	2	-	-	42
Physiotherapist	-	-	3	-	-	-	-	-	-	-	-	-	5	-	3	1	-	12
Podiatrist / Chiropodist	1	-	-	-	-	-	-	-	-	-	-	-	2	-	3	-	-	6
Psychologist	3	1	10	-	-	-	2	-	-	-	5	-	31	-	11	8	-	71
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown practitioner	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	41	1	146	28	4	4	33	15	1	-	48	170	305	48	440	56	4	1344

Outcomes by Practitioner Type

Issue	HCE to	retain*	Refer to Age	National ncy	No furth	er action	Q3 total	
	Number	%	Number	%	Number	%	Number	%
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	0.27	-	-
Chinese Medicine Practitioner	-	-	-	-	1	0.27	1	0.10
Chiropractor	-	-	2	0.49	1	4.26	3	0.29
Dental practitioner	16	6.56	20	4.88	16	71.54	52	5.05
Medical Practitioner	131	53.69	241	58.78	269	-	641	62.23
Medical Radiation Practitioner	-	-	6	1.46	-	1.86	6	0.58
Midwife	8	3.28	3	0.73	7	6.91	18	1.75
Nurse	43	17.62	85	20.73	26	1.06	154	14.95
Occupational Therapist	3	1.23	2	0.49	4	0.27	9	0.87
Optometrist	1	0.41	1	0.24	1	-	3	0.29
Oral Health Therapist	-	-	1	0.24	-	-	1	0.10
Osteopath	-	-	2	0.49	-	1.86	2	0.19
Paramedic	22	9.02	5	1.22	7	2.13	34	3.30
Pharmacist	5	2.05	21	5.12	8	1.06	34	3.30
Physiotherapist	1	0.41	6	1.46	4	0.27	11	1.07
Podiatrist / Chiropodist	4	1.64	-	-	1	8.24	5	0.49
Psychologist	9	3.69	15	3.66	31	-	55	5.34
Student practitioner	-	-	-	-	-	-	-	-
Unknown practitioner	1	0.41	-	-	-	-	1	0.10
Unregistered practitioner	-	-	-	-	-	0.27	-	-
Total	244	100	410	100	376	100	1030	100

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

Subsequent joint consideration consultations

Matters Commenced & Finalised

	Month	OHO Matter Count	Provider Count	Decision Count*
	January	12	12	12
Matters commenced	February	17	17	17
	March	22	22	22
	Total	51	51	51
	January	14	14	14
Mattera Finalized	February	12	12	12
Matters Finalised .	March	28	28	28
	Total	54	54	54

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

Issues by Practitioner Type

	Access	Code of conduct for Health Care Workers	Communication and Information		Discharge and Transfer Arrangements	Environment/ Management of Facility	Fees and Costs	Grievance Processes	Health Ombudsman Act 2013 Offence	Inform ation	Medical Records	Medication	Professional Conduct	Professional Health	Professional Performance	Reports/Cer tificates	Research/te aching/asse ssment	Total
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chiropractor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dental practitioner	-	-	-	1	-	-	3	-	-	-	-	-	-	-	4	-	-	8
Medical Practitioner	-	-	7	2	1	-	3	2	-	-	3	-	4	-	16	-	-	38
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Midwife	-	-	-	-	-	-	-	-	-	-	1	-	-	-	3	1	-	5
Nurse	-	-	1	-	-	-	-	-	-	-	1	-	8	-	1	-	-	11
Occupational Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Optometrist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Oral Health Therapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Osteopath	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paramedic	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	-	3
Pharmacist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Physiotherapist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Podiatrist / Chiropodist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psychologist	-	-	1	-	-	-	1	-	-	-	1	-	6	-	1	-	-	10
Student practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unregistered practitioner	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	9	3	1	-	7	2	-	-	6	-	21	-	25	2	-	76

Outcomes by Practitioner Type

Issue	HCE to	retain*		National ency	No furth	er action	Q3 total		
	Number	%	Number	%	Number	%	Number	%	
Aboriginal and Torres Strait Islander health practitioner	-	-	-	-	-	-	-	-	
Chinese Medicine Practitioner	-	-	-	-	-	-	-	-	
Chiropractor	-	-	-	-	-	-	-	-	
Dental practitioner	-	-	-	-	4	7.41	4	7.41	
Medical Practitioner	-	-	-	-	32	59.26	32	59.26	
Medical Radiation Practitioner	-	-	-	-	-	-	-	-	
Midwife	-	-	-	-	3	5.56	3	5.56	
Nurse	-	-	-	-	9	16.67	9	16.67	
Occupational Therapist	-	-	-	-	1	1.85	1	1.85	
Optometrist	-	-	-	-	-	-	-	-	
Oral Health Therapist	-	-	-	-	-	-	-	-	
Osteopath	-	-	-	-	-	-	-	-	
Paramedic	-	-	-	-	2	3.70	2	3.70	
Pharmacist	-	-	-	-	-	-	-	-	
Physiotherapist	-	-	-	-	-	-	-	-	
Podiatrist / Chiropodist	-	-	-	-	-	-	-	-	
Psychologist	-	-	-	-	3	5.56	3	5.56	
Student practitioner	-	-	-	-	-	-	-	-	
Unknown practitioner	-	-	-	-	-	-	-	-	
Unregistered practitioner	-	-	-	-	-	-	-	-	
Total	-	-	-	-	54	100	54	100	

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

Demographics of complainants, healthcare consumers and providers

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

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

Complainants

Complainant Gender

	Jan	uary	Febr	uary	March		
	Number %		Number	%	Number	%	
Female	390	48.21	510	51.15	461	49.95	
Male	383	47.34	437	43.83	419	45.4	
Non-binary sex	4	0.49	4	0.4	8	0.87	
Unknown	32	3.96	46	4.61	35	3.79	
Total	809	100	997	100	923	100	

Complainant Age

	Jan	uary	Febr	uary	March		
	Number	%	Number	%	Number	%	
Less than 18 years	0	0	3	0.3	0	0	
18-24 years	19	2.35	35	3.51	27	2.93	
25-34 years	139	17.18	140	14.04	129	13.98	
35-44 years	181	22.37	217	21.77	193	20.91	
45-54 years	153	18.91	190	19.06	180	19.5	
55-64 years	97	11.99	139	13.94	138	14.95	
65-74 years	79	9.77	70	7.02	71	7.69	
More than 75 years	44	5.44	52	5.22	52	5.63	
Unknown*	97	11.99	151	15.15	133	14.41	
Total	809	100	997	100	923	100	

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

Complainant Location

	Jan	uary	Febr	uary	December		
	Number	%	Number	%	Number	%	
Brisbane	324	44.57	361	42.82	363	44.81	
Central West	1	0.14	2	0.24	1	0.12	
Darling Downs	27	3.71	29	3.44	28	3.46	
Far North	27	3.71	32	3.8	33	4.07	
Fitzroy	36	4.95	41	4.86	34	4.2	
Gold Coast	82	11.28	89	10.56	71	8.77	
Mackay	15	2.06	22	2.61	14	1.73	
North West	2	0.28	3	0.36	2	0.25	
Northern	27	3.71	37	4.39	35	4.32	
Off-Shore Areas & Migratory (QLD	0	0	0	0	0	0	
South West	3	0.41	1	0.12	2	0.25	
Sunshine Coast	42	5.78	48	5.69	44	5.43	
West Moreton	17	2.34	12	1.42	12	1.48	
Wide Bay-Burnett	38	5.23	48	5.69	52	6.42	
Unknown	86	11.83	118	14	119	14.69	
Total	727	100	843	100	810	100	

Healthcare Consumers

Consumer Gender

	Janı	uary	Febr	uary	December		
	Number %		Number	%	Number	%	
Female	340	44.1	429	46.99	383	47.52	
Male	425	55.12	472	51.7	412	51.12	
Non-binary sex	2	0.26	4	0.44	7	0.87	
Unknown	4	0.52	8	0.88	4	0.5	
Total	771 100		913	100	806	100	

Consumer Age

	Janı	uary	Febr	uary	December		
	Number	%	Number	%	Number	%	
Less than 18 years	35	4.54	56	6.13	40	4.96	
18-24 years	28	3.63	45	4.93	36	4.47	
25-34 years	123	15.95	126	13.8	113	14.02	
35-44 years	163	21.14	174	19.06	149	18.49	
45-54 years	124	16.08	141	15.44	129	16	
55-64 years	85	11.02	108	11.83	109	13.52	
65-74 years	80	10.38	68	7.45	73	9.06	
More than 75 years	70	9.08	87	9.53	70	8.68	
Unknown*	63	8.17	108	11.83	87	10.79	
Total	771	100	913	100	806	100	

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

Consumer Location

	January		February		December	
	Number	%	Number	%	Number	%
Brisbane	291	42.17	307	38.66	292	40.05
Central West	1	0.14	2	0.25	1	0.14
Darling Downs	22	3.19	24	3.02	21	2.88
Far North	21	3.04	28	3.53	27	3.7
Fitzroy	31	4.49	32	4.03	28	3.84
Gold Coast	70	10.14	74	9.32	58	7.96
Mackay	10	1.45	16	2.02	12	1.65
North West	3	0.43	3	0.38	1	0.14
Northern	21	3.04	28	3.53	27	3.7
Off-Shore Areas & Migratory (QLD	0	0	0	0	0	0
South West	3	0.43	0	0	2	0.27
Sunshine Coast	35	5.07	30	3.78	29	3.98
West Moreton	15	2.17	9	1.13	8	1.1
Wide Bay-Burnett	31	4.49	39	4.91	45	6.17
Unknown	136	19.71	202	25.44	178	24.42
Total	690	100	794	100	729	100

Health service providers

Location of Providers

	January		February		December	
	Number	%	Number	%	Number	%
Brisbane	271	42.28	306	44.8	305	44.01
Central West	3	0.47	2	0.29	2	0.29
Darling Downs	27	4.21	30	4.39	33	4.76
Far North	30	4.68	29	4.25	27	3.9
Fitzroy	21	3.28	27	3.95	34	4.91
Gold Coast	83	12.95	98	14.35	90	12.99
Mackay	21	3.28	17	2.49	15	2.16
North West	4	0.62	4	0.59	2	0.29
Northern	25	3.9	24	3.51	32	4.62
Off-Shore Areas & Migratory (QLD	0	0	0	0	0	0
South West	3	0.47	1	0.15	3	0.43
Sunshine Coast	42	6.55	43	6.3	41	5.92
West Moreton	4	0.62	3	0.44	4	0.58
Wide Bay-Burnett	35	5.46	56	8.2	47	6.78
Unknown	72	11.23	43	6.3	58	8.37
Total	641	100	683	100	693	100

^{*} Health service provider location is taken from the primary address of the provider recorded in the OHO complaints management system. Complaints can be made about health service providers from other states who have provided health services in Queensland. This could include locums travelling to Queensland from interstate or providers who previously lived in Queensland providing services but have since moved interstate—as the OHO can deal with complaints up to two years old.

Aggregated Data Descriptions

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

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

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

Data Element	Date Stamp	What is being counted?
Local resolution		
Local resolutions started and completed	The start and end date of the Local Resolution.	The total number of unique Local Resolution case files.
Completed local resolutions Time Frames	The end date of the Local Resolution.	The total number of unique Local Resolution case files.
Local Resolution Outcomes	The date and time in which the outcome is recorded against the Local Resolution case file.	The total number of unique Local Resolution case files.
Conciliation		
Conciliations started and closed	The start and end date of the Conciliation file.	The total number of unique Conciliation case files.
Agreement to participate in conciliation	The end date of the Conciliation file.	The total number of unique Conciliation case files.
Completed conciliation timeframes	The end date of the Conciliation file.	The total number of unique Conciliation case files.
Completed conciliation outcomes	The date and time in which the outcome is recorded against the Conciliation case file.	The total number of unique Conciliation case files.
Open conciliation timeframes		The total number of Conciliation Case files open at the end of the month.
Complaints Management (Referrals)	
Referrals open & closed	The start and end date of the Referral case file.	The total number of unique Referral case files.
Referrals categories	The start date of the Referral case file.	The total number of unique Referral case files.
Referrals closed timeframes	The end date of the Referral case file.	The total number of unique Referral case files.
Referrals open timeframes		The total number of Referral Case files open at the end of the month.
Investigation		
Investigations started and closed	The date in which the investigations file is recorded as having commenced.	The total number of parent investigations in the context of 'Started' and 'Closed'. Amalgamated investigations represents that the total number of investigations amalgamated.
Closed investigation timeframes	The closed date of the investigation.	The total number of parent investigations closed.
Closed investigation outcomes	The date in which the outcome is recorded against the investigation case file.	The total number of parent investigations files.
Active & Paused Investigations		The total number of open parent investigations open at the end of the month.
Active investigation timeframes		The total number of open parent investigations open at the end of the month.
Paused investigation timeframes		The total number of open parent investigations open at the end of the month.
Active & Paused (All) Investigation Timeframes		The total number of open parent investigations open at the end of the month.
Open investigation categories		The total number of open parent investigations open at the end of the month.
Monitoring Investigation R	ecommendations	
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.

Data Element	Date Stamp	What is being counted?
Director of Proceedings		
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 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 Decisions	The date in which the decision was recorded by QCAT.	The total number of decisions recorded as part of the QCAT proceeding.
Matters withdrawn	The date in which the matter was recognised as formally withdrawn.	The total number of Director of Proceeding case files.
Immediate Action		
Show case notices	The date in which the show cause notice was distributed.	The show cause notice.
Initiation events for Immediate Registration Actions, Interim Prohibition Orders and Permanent Prohibition Orders	The date in which the order/action was initiated.	The number of unique practitioners under the action taken conditions specified in the table.
Variation events for Immediate Registration Actions, Interim Prohibition Orders and Permanent Prohibition Orders	The date in which the order/action variation took effect.	The number of unique practitioners under the action taken conditions specified in the table.
Revocation events for Immediate Registration Actions, Interim Prohibition Orders and Permanent Prohibition Orders	The date in which the order/action was revoked.	The number of unique practitioners under the action taken conditions specified in the table.
Monitoring practitioner cor	mpliance	
Practitioner monitoring cases	The original effected date of the practitioner monitoring file and the finalisation date.	The unique number of practitioner monitoring files.
Open monitoring cases timeframes		The total number of practitioners with a Monitoring Case Files open at the end of the month.
Immediate action types		The total number of Practitioners Monitoring Case Files open at the end of the month.
Registered Vs Unregistered practitioners under monitoring		The total number of Practitioners Monitoring Case Files open at the end of the month.
	ner Regulation Agency – Initial Joint Con	sideration Decisions
Matters commenced and finalised	The date and time in which the initial joint consideration process commenced and was finalised.	OHO Matter Count: This is the count of all complaint files within the OHO system which are linked to the joint consideration event.

Data Element	Date Stamp	What is being counted?	
		 Provider Count: This is the number of unique providers which are linked to the join consideration event. Decision Count: This is the amount the of decisions that are made for a given joint consideration event. This count usually corresponds with the total number of matters considered on the Ahpra side of joint consideration. 	
Issues by Practitioner Type	The date and time in which the initial joint consideration process commenced.	The total number of issues considered in the context of a decision. Please note, this figure does not necessarily equate to the decision count figure as a decision and issues context have a complex relationship. Namely, a decision can be made in the context of anywhere from zero to multiple issues at once.	
Outcomes by Practitioner Type	The date and time in which the Initial joint consideration process was finalised.	The total number of decisions made.	
Australian Health Practition	ner Regulation Agency – Subsequent Jo	int Consideration Decisions	
Matters Commenced & Finalised	The date and time in which the subsequent joint consideration process commenced and was finalised.	 OHO Matter Count: This is the count of all complaint files within the OHO system which are linked to the joint consideration event. Provider Count: This is the amount of unique providers which are linked to the join consideration event. Decision Count: This is the amount the of decisions that are made for a given joint consideration event. This count usually corresponds with the total number of matters considered on the Ahpra side of joint consideration 	
Issues by Practitioner Type	The date and time in which the subsequent joint consideration process commenced.	The total number of issues considered in the context of a decision. Please note, this figure does not necessarily equate to the decision count figure as a decision and issues context have a complex relationship. Namely, a decision can be made in the context of anywhere from zero to multiple issues at once.	
Outcomes by Practitioner Type	The date and time in which the subsequent joint consideration process was finalised.	The total number of decisions made.	
Demographics of complainants, healthcare consumers and providers			
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.	