



National Health
Practitioner
Ombudsman

Our work in March 2026

Monthly approaches overview

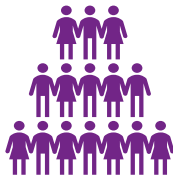
1 March 2026 to 31 March 2026



National Health Practitioner Ombudsman

Please note: our data is subject to change due to ongoing investigations and quality assurance activities. If you have a question about our data, please contact us on 1300 795 265 or by email via complaints@nhpo.gov.au.

137 approaches received



Down from 202 in March 2025



60 Ombudsman complaints received



Down from 77 in March 2025



2 FOI matters received



Down from 3 in March 2025



4 privacy complaints received



Up from 1 in March 2025



71 enquiries received



Down from 121 in March 2025



Ombudsman complaints were made by 59 individuals (up from 58) in March 2025



2 FOI review determinations (0 in March 2025)



0 notifiable data breaches assessed (0 in March 2025)

Complaints to the Ombudsman

9 early resolution transfers made



Up from 4 in March 2025



17 preliminary inquiries made



Up from 8 in March 2025



1 investigations launched



Up from 0 in March 2025



89

Ombudsman complaints finalised

Up from 57 in March 2025



Stage complaint was finalised

64 assessment

6 preliminary inquiry

15 early resolution transfer

4 investigation

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Notification-related complaints to the Ombudsman

1 March 2026 to 31 March 2026



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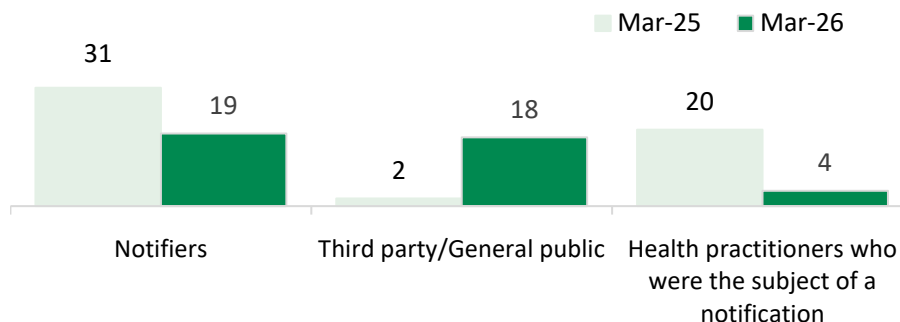
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notification-related complaints received

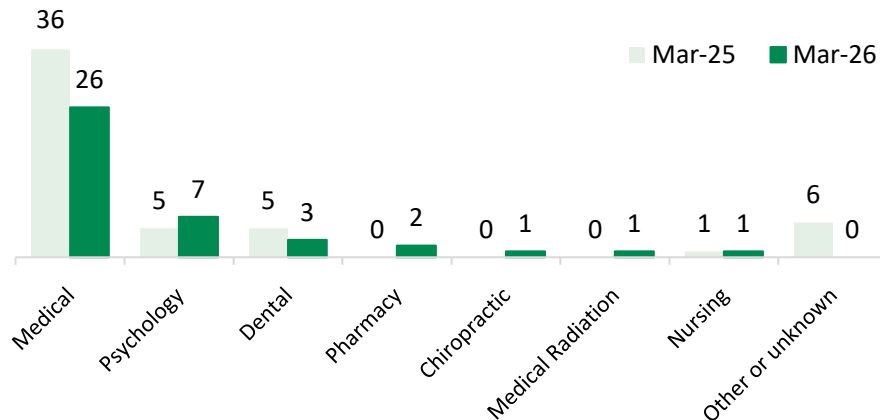


Down from 53 in March 2025

Who made notification-related complaints



Professions notification-related complaints were about



Types of notification actions that most frequently drove notification-related complaints

1. Action taken in the form of immediate action
2. No further action taken at the assessment stage
3. An active notification
4. Action taken to refer a practitioner to a Tribunal or Panel
5. Action taken at the investigation stage

Stage notification-related complaints were finalised



Most common outcomes of notification-related complaints

1. An investigation was not warranted in the circumstances
2. The person who made the complaint is not a party to the matter they are complaining about
3. The organisation's response to the complaint was fair and reasonable
4. The complainant did not provide information that our office had requested
5. The complaint concerned the merits of the organisation's decision and we do not have the power to review the merits of a decision

Registration-related complaints to the Ombudsman

1 March 2026 to 31 March 2026



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12

registration-related complaints received

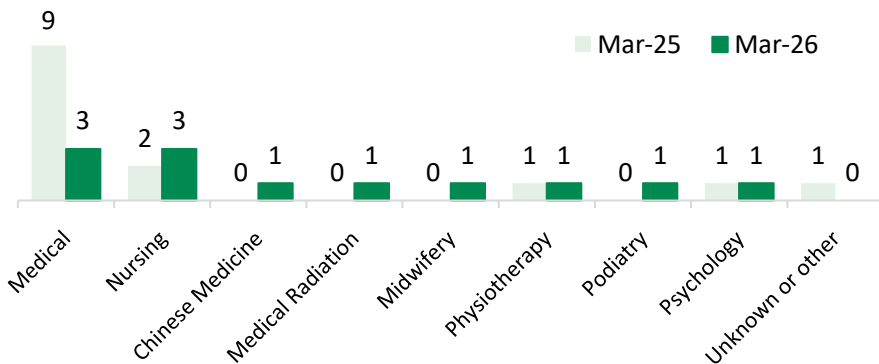


Down from 14 in March 2025

Types of registration driving registration-related complaints



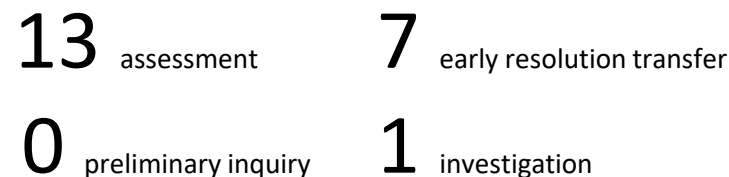
Professions registration-related complaints were about



Registration processes that most frequently drove registration-related complaints

1. Publication of information to the National Register
2. Processing of a new registration application
3. Processing of a registration renewal application
4. Facilitating the supervised practice of a registered practitioner
5. Processing of an application for endorsement

Stage registration-related complaints were finalised



Most common outcomes of registration-related complaints

1. The organisation's response to the complaint was fair and reasonable
2. An investigation was not warranted in the circumstances
3. The complainant requested to withdraw their complaint
4. The complainant did not provide information that our office had requested
5. The complainant agreed that their concerns had been resolved

Accreditation-related complaints to the Ombudsman

1 March 2026 to 31 March 2026



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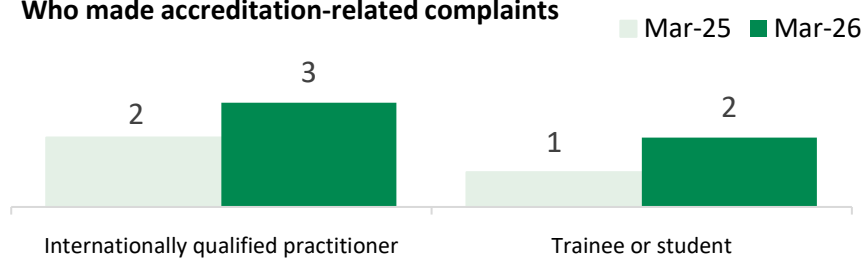
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accreditation-related complaints received

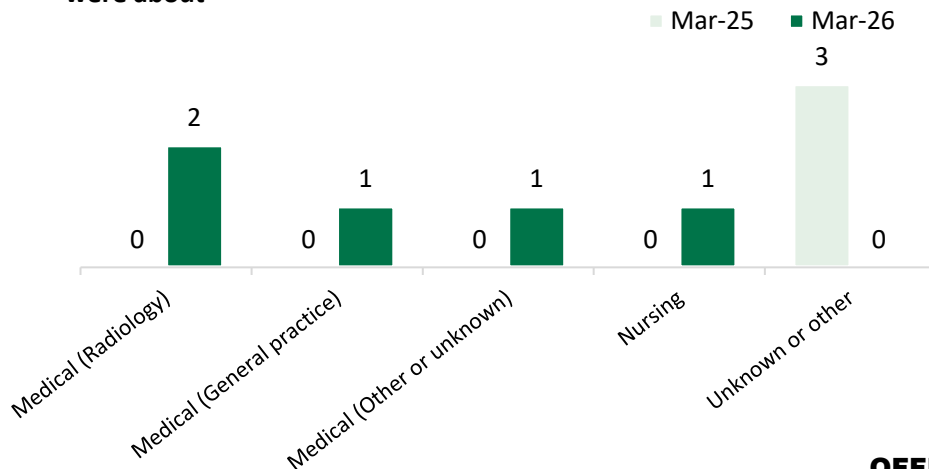


Up from 3 in March 2025

Who made accreditation-related complaints



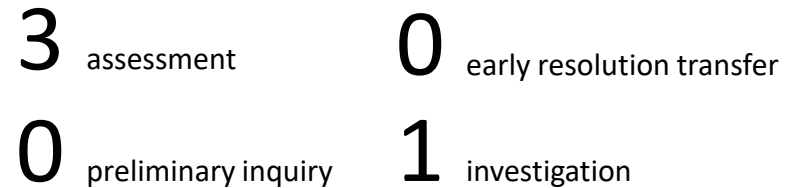
Professions and specialties that accreditation-related complaints were about



Processes that most frequently drove accreditation-related complaints

1. Fairness of an examination
2. Entry to a specialist medical practitioner training program
3. Merits review processes
4. Addressing bullying or harassment at a training site

Stage accreditation-related complaints were finalised



Most common outcomes of accreditation-related complaints

1. An investigation was not warranted in the circumstances
2. The complainant did not provide information that our office had requested
3. The matter complained about was still actively being considered by the organisation
4. Following an investigation, our office provided the complainant with a further explanation
5. Following an investigation, the organisation provided an apology to the complainant

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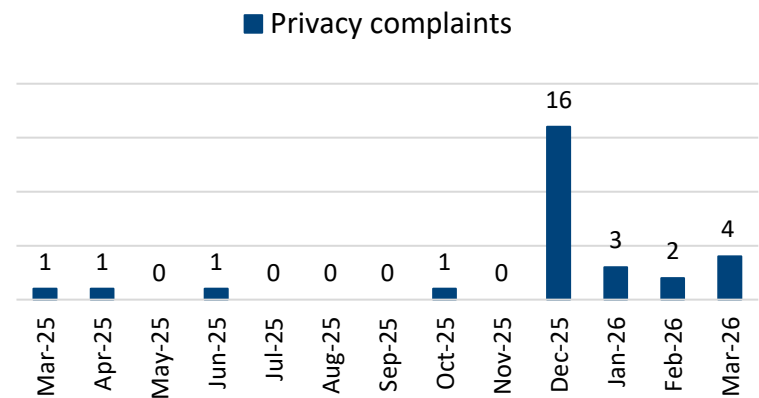
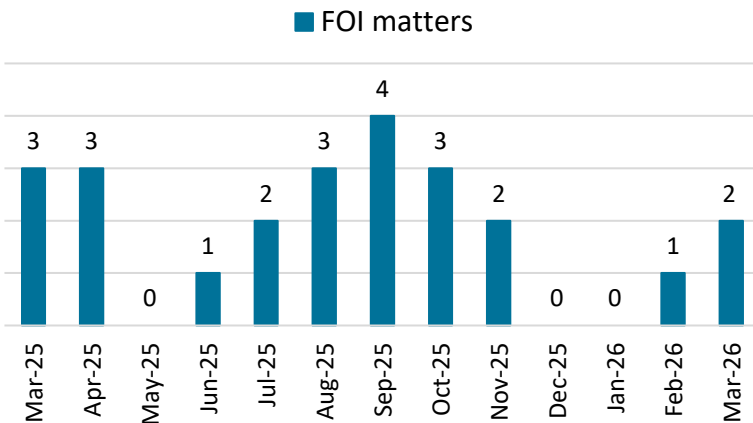
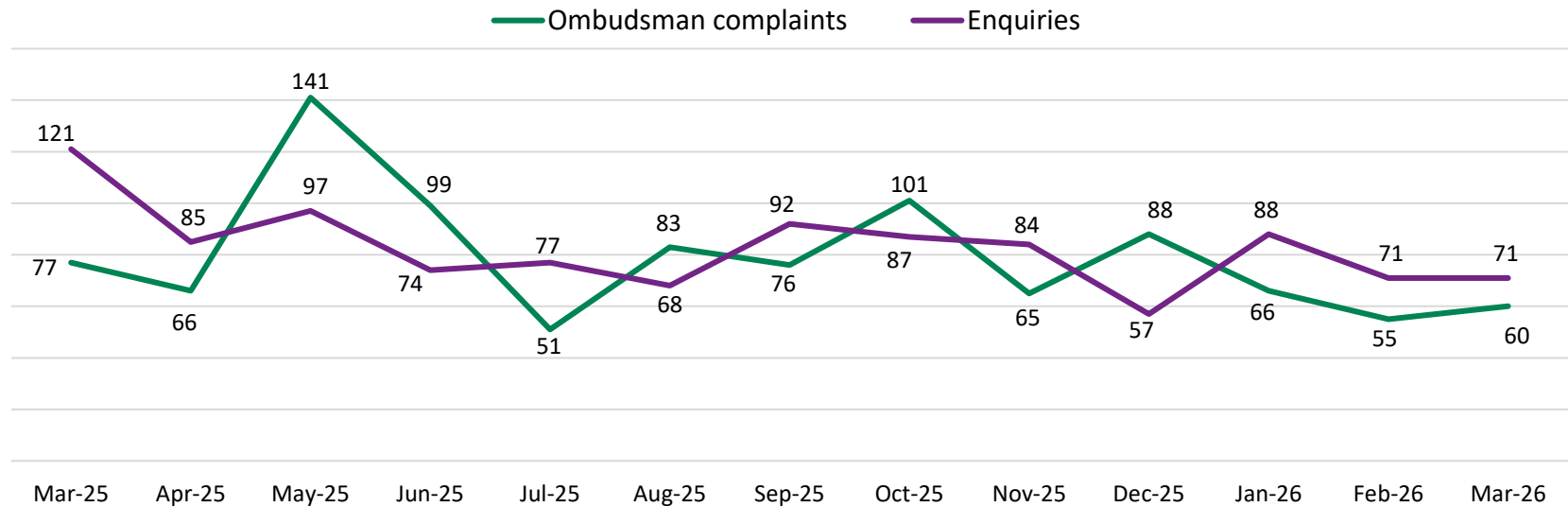
National Health
Practitioner
Ombudsman

Our financial year to date

1 July 2025 to 31 March 2026

Approach trends

1 March 2025 to 31 March 2026



Ombudsman complaints received from 1 July 2025 to 31 March 2026

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Types of complaints received

356 ↓ notification
Down from 400 in the same period last financial year

192 ↑ registration
Up from 185 in the same period last financial year

59 ↑ accreditation
Up from 53 in the same period last financial year

Who made complaints

410 health practitioners
234 non-practitioners

↓ Down from 434 in the same period last financial year

↓ Down from 240 in the same period last financial year

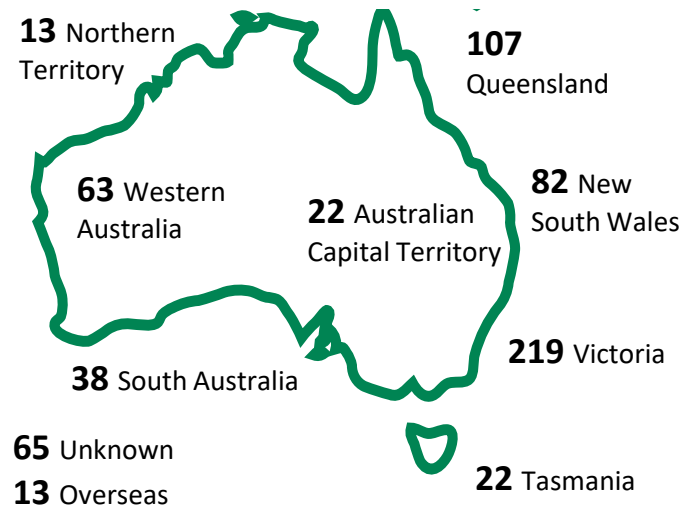
Professions most complaints were about

375 medical
↓ Down from 442 in the same period last financial year

78 nursing
↓ Down from 89 in the same period last financial year

69 psychology
↑ Up from 61 in the same period last financial year

Location complaints were made from



Most common notification-related issues that drove complaints

1. Notifier believes a decision to take no further action at the assessment stage was unfair or unreasonable
2. Notifier believes inadequate reasons were provided for a decision to take no further action at the assessment stage

Most common registration-related issues that drove complaints

1. Practitioner believes the handling of their application for general registration was unreasonably delayed
2. Practitioner believes the process for renewing their general registration was unfair

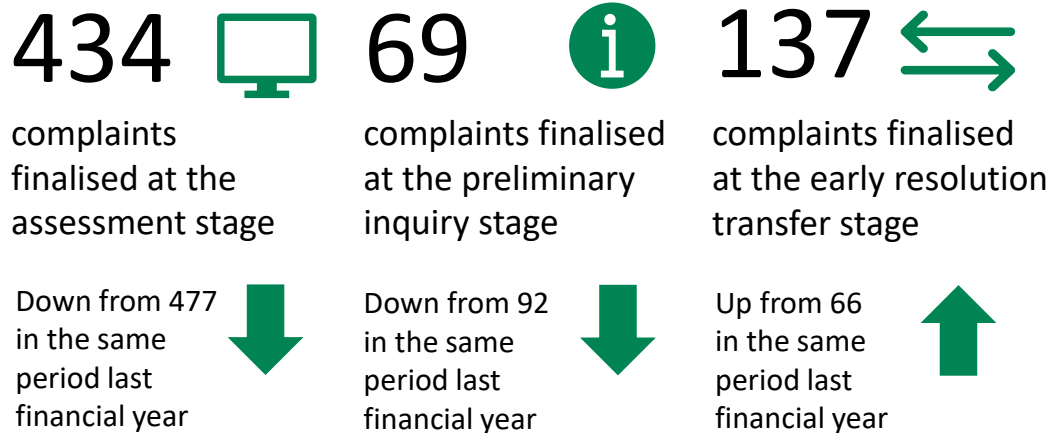
Most common accreditation-related issues that drove complaints

1. Internationally qualified practitioner believes fees charged for accreditation processes are unfair or unreasonable
2. Internationally qualified practitioner believes the outcome of a merits review process is unfair or unreasonable

Resolution of Ombudsman complaints from 1 July 2025 to 31 March 2026

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Early resolution mechanisms



Most common outcomes at early resolution stages (assessment, preliminary inquiry and early resolution transfer)

1. An investigation was not warranted in the circumstances
2. The organisation's response to the complaint was fair and reasonable
3. The complainant did not provide information that our office had requested for us to further consider their concerns
4. The complaint concerned the merits of the organisation's decision and we do not have the power to review the merits of a decision
5. The matter complained about was still actively being considered by the organisation

Investigations



Most common investigation outcomes

1. Our office provided the complainant with a further explanation
2. Our office provided feedback to the organisation complained about
3. The organisation took appropriate steps to address a systemic problem
4. Our office is addressing the concern as a systemic issue
5. The organisation provided an apology or acknowledgement

Ombudsman and Commissioner's observations

During March 2026, my office received a spike in complaints from the general public about a decision to take regulatory action against a medical practitioner. We received 18 complaints of this type during March 2026, while during the same period last financial year we received only 1 complaint.

March 2026 was otherwise quieter than in the same period of last financial year. My office received 137 approaches, down from 202 in March 2025. This decrease was mostly associated with less enquiries about matters we could not assist with, which reduced from 121 to 71.

Despite the spike in Ombudsman complaints described above, we received fewer Ombudsman complaints than in March 2025 (60, down from 77). However, the number of people making complaints remained consistent (59 complainants, up from 58). This indicates that a similar number of people are contacting us with complaints, but they are less likely to raise concerns about multiple regulatory matters at once.

The decrease in Ombudsman complaints was mostly associated with notifications (41, down from 53). This reduction was mostly linked to the medical profession (26, down from 36). Both notifiers (19, down from 31) and practitioners who were the subject of notifications (4, down from 20) submitted significantly fewer complaints.

Comparatively, registration-related complaints (12, down from 14) and accreditation-related complaints (5, up from 3) remained relatively steady when compared with March 2025. Interestingly, we saw an increase in concerns related to the publication of information about practitioners on Ahpra's National Register. Accreditation-related complaint trends remained consistent with this time last year.

My office embraced the reduced complaint demand to focus on existing complainant's concerns, and we successfully finalised 89 complaints to the Ombudsman, including 4 formal investigations. I also made 2 decisions regarding Freedom of Information applications. In both instances I decided to affirm Ahpra's decision that documents requested by an applicant were exempt from release. These decisions are published on our [website](http://www.nhpo.gov.au/foi-review-decisions): <www.nhpo.gov.au/foi-review-decisions>.