

Workers' Compensation Regulator

2013 – 14

Statistics Report

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Introduction

This is the fifteenth annual statistical report published by the Workers' Compensation Regulator to circulate Queensland workers' compensation scheme-wide data.

This report covers aspects of the Queensland workers' compensation scheme, including:

- claims information reported by WorkCover Queensland and self-insured employers for statutory claims and common law claims
- scheme-wide information about the major regulatory services provided by the regulator for insurer and medical issues:
 - ◆ administrative review of insurers' decisions
 - ◆ appeals to the Queensland Industrial Relations Commission (QIRC) and the Industrial Magistrate
 - ◆ Medical Assessment Tribunals (MAT).

All figures reported as at 30 June 2014, are true and correct as supplied by insurers.

About the Workers' Compensation Regulator

The *Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2013* (the Amendment Act) received assent on 29 October 2013. Under the provisions of the Amendment Act, Q-COMP (the Workers' Compensation Regulatory Authority) was abolished on 29 October 2013. The Amendment Act also established the Office of the Workers' Compensation Regulator, a new role within the Office of Fair and Safe Work Queensland, Department of Justice and Attorney-General.

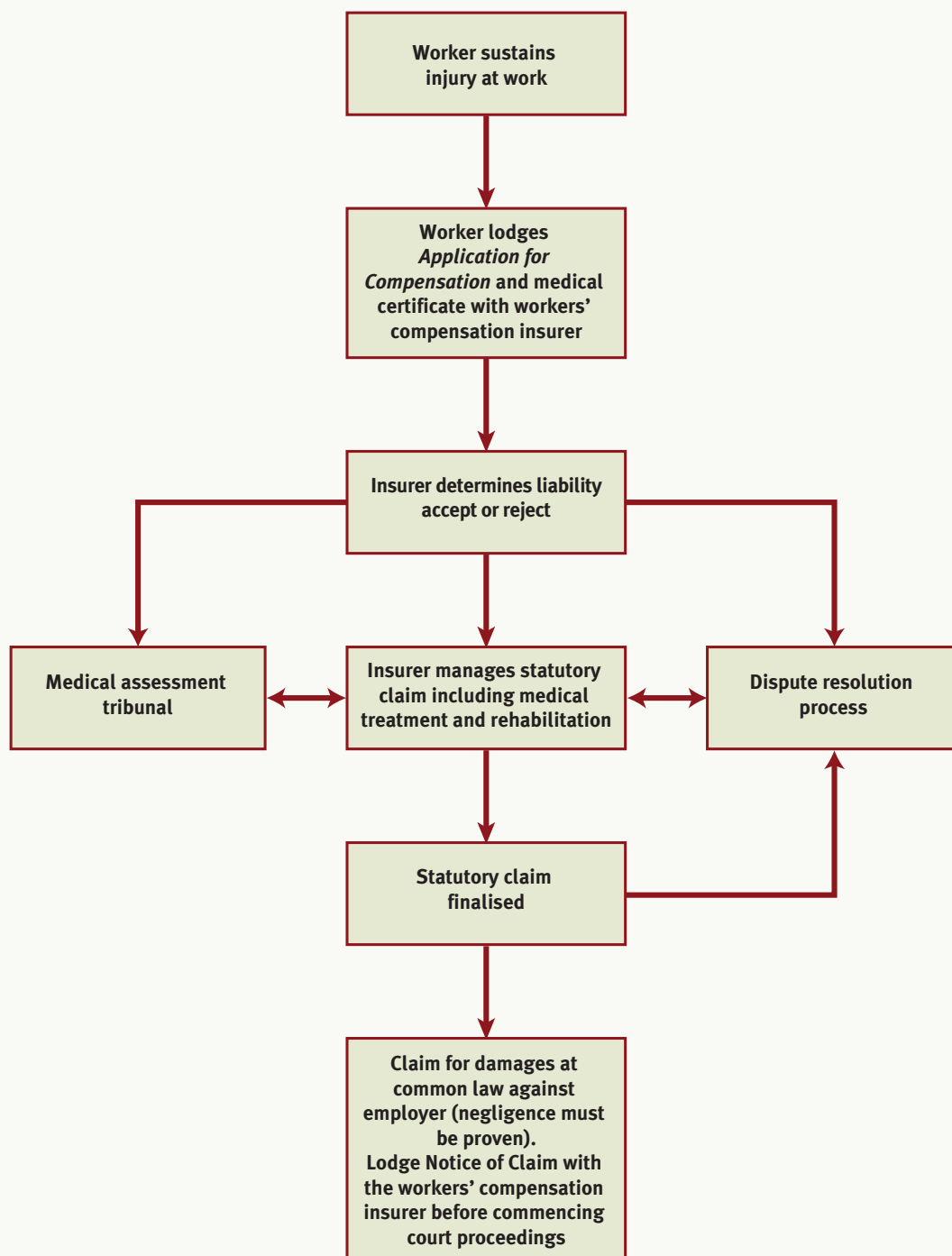
The Office of the Workers' Compensation Regulator (the Regulator) retains the following functions of Q-COMP:

- monitoring insurer performance and compliance with the *Workers' Compensation and Rehabilitation Act 2003* (the Act)
- deciding self-insurance applications
- reviewing insurer decisions
- managing appeals of review decisions
- monitoring employer rehabilitation compliance and providing advice
- supporting the MAT
- maintaining and analysing statistics and reporting on the scheme
- providing workers' compensation information and education
- administering grants.

As at 30 June 2014, there were 27 insurers in the scheme – WorkCover Queensland and 26 self-insured employers.

In Queensland, workers have access to a no fault statutory workers' compensation scheme and where negligence exists, injured workers may be able to access damages at common law. The following figure illustrates the workers' compensation claims process. Each of the key phases of the claim is examined in more detail through this publication.

01 Workers' compensation claims process

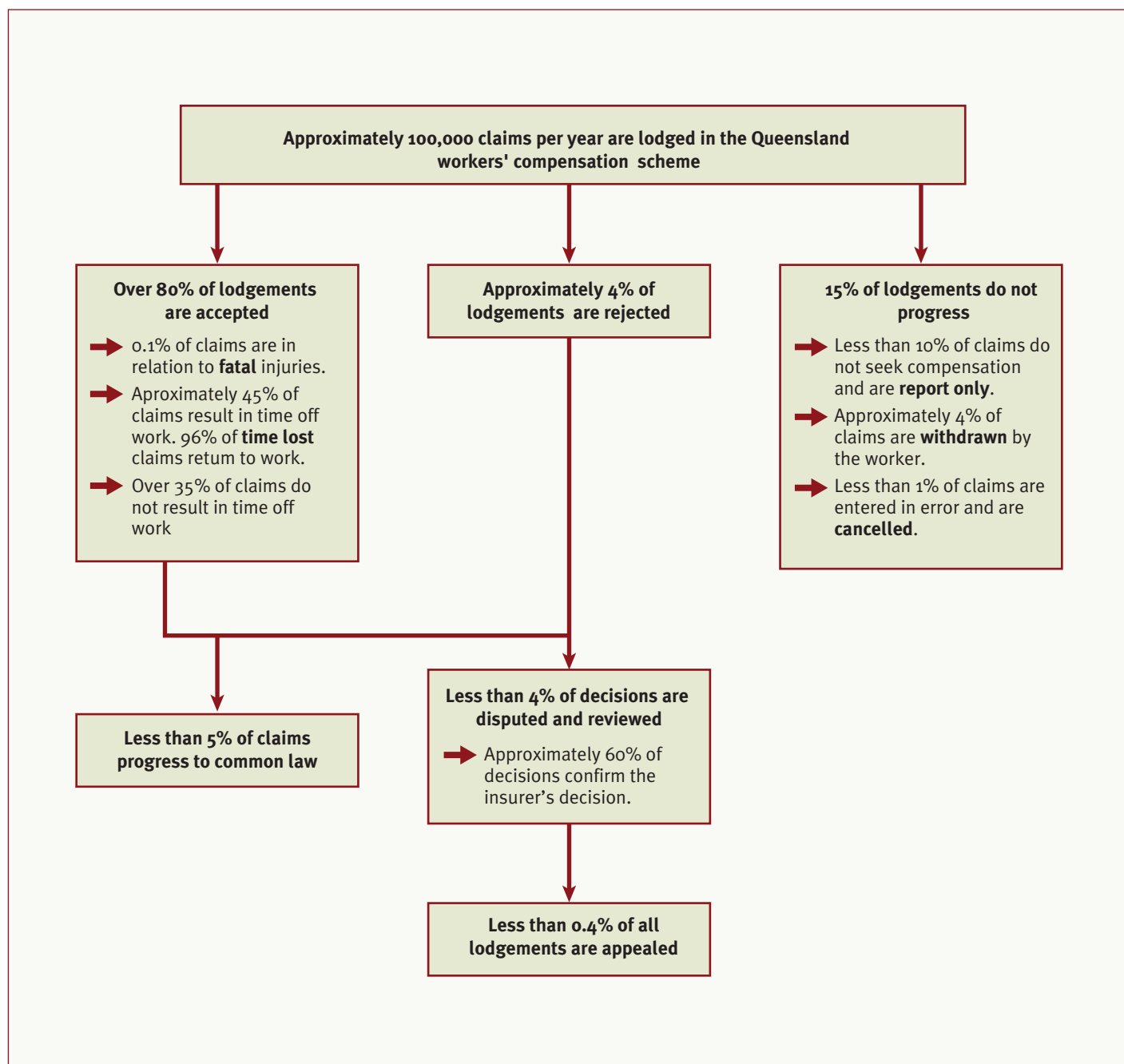


Claim profile

The profile below illustrates the progression of a workers' compensation claim through the statutory claims process to common law and dispute resolution.

As represented in the below figure, there is a gap between the number of claims lodged in the scheme, compared to the number of decisions. This is due to 15% of lodgements failing to progress as they are either withdrawn by the worker, entered in error, or do not require a statutory decision and are report only.

02 Queensland workers' compensation claim profile



Scheme highlights

Statutory claim lodgements

New statutory claims of 92,007 for 13-14 were 7.3% lower than 12-13. In conjunction with stable employment numbers, this resulted in a lower claim rate. The claim rate for 13-14 has reduced by 7.6% to 40.1 claims per 1,000 employees. Industries which have contributed to the reduction in statutory claims include manufacturing, public administration and safety, health care and social assistance, mining and transport, postal and warehousing.

The proportion of psychological and psychiatric statutory claims remains relatively stable for 13-14 at 4.8%, this follows an increase over the previous four years from 3.4% in 08-09 to 4.6% in 12-13. Psychological and psychiatric claims currently represent 6.9% of total statutory payments (\$54.4M for 13-14) and have an average finalised time lost claim cost of \$43,800 (\$40,742 12-13) which is almost three times the average time lost claim cost of physical injuries (\$15,617 for 13-14).

Statutory claim payments

Statutory payments for 13-14 of \$793.3M were marginally below 12-13 (\$797.3M). Weekly compensation payments, which represent 45.0% of statutory payments, have remained stable for 13-14. Average work days lost is up from 42.6 days in 12-13 to 47.8 days in 13-14 and this has contributed to an increase in the average cost of time lost claims (up from \$13,933 in 12-13 to \$16,358 in 13-14).

Fatalities

There were 63 fatal claim lodgements in 13-14. Fatal claim lodgements due to injuries at work represented over a quarter of the 13-14 figures (n = 17; 27.0%). Construction (n = 10) and transport, postal and warehousing (n = 10) industries contributed 31.7% of fatalities.

Because fatality figures are subject to development over time, comparisons between years cannot be made.

Return to work

In 13-14, the return to work rate marginally decreased to 96.3% (96.7% for 12-13). However the return to work rate has remained relatively stable at this higher level after an increase in 11-12 to 97.2%, from 94.3% in 10-11.

Dispute resolution

Review applications have decreased 5.1%, from 3,269 in 12-13 to 3,102. The proportion of review applications to statutory claims has remained relatively stable at 3.4% for 13-14 (3.3% for 12-13). Appeals served in 13-14 have decreased, down 10.0% from 402 served in 12-13 to 362 served in 13-14.

Medical Assessment Tribunals (MAT)

In 13-14, 3,095 referrals were made to the MAT. This is stable with the 3,098 referrals received in 12-13. 43.5% of the cases determined by the MAT were for permanent impairment (PI) assessment (45.1% in 12-13). The proportion of MAT referrals to statutory claims has increased from 3.1% in 12-13 to 3.4% in 13-14.

Common law lodgements

Legislative amendments of 2010 initially reduced the number of new common law claims. These have now stabilised at this new level – claim numbers for 13-14 are 2.0% below 12-13 (4,299). The result of 4,215 new claims for 13-14 is 15.5% below the 09-10 (pre reform) total of 4,988.

Common law average damages

The average cost of finalised common law claims has increased by 4.2% for 13-14. Claims finalised with no damages payment (nil settlements), as a percentage of total common law claims have decreased to 14.7% for 13-14, down from 15.9% in 12-13.

Impact of legislative amendments

The October 2013 legislative amendments to the common law threshold are anticipated to have an effect on reducing the number and cost of common law payments. These amendments take effect based on the date of injury of a worker, not the date of common law lodgement. Due to the fact that there is a considerable time between when an injury occurs and the lodgement of a common law claim, it is anticipated that the full effects of these legislative amendments will not be realised until the 16-17 financial year. It is also anticipated that these amendments will have a small offset effect on the scheme through additional lump sum payments and additional Medical Assessment Tribunal referrals.

03 Scheme at a glance

		13-14	12-13	% Change from previous year	Page number
Statutory claims	New claims	92,007	99,298	-7.3%	10
	Claims per 1,000 employees	40.1	43.4	-7.6%	8
	New claims % psych	4.8%	4.6%	0.2%	12
	Fatalities	63	86		15
	Payments (\$M)	\$793.3	\$797.3	-0.5%	23
Statutory decisions	Average time to decide (days)	7.2	6.4	12.5%	17
	Rejection rate - physical (%)	4.4%	4.1%	0.3%	19
	Rejection rate - psych (%)	64.8%	62.2%	2.6%	19
Outcomes	Average work days lost (days) (time lost claims)	47.8	42.6	12.2%	35
	Return to work rate (%)	96.3%	96.7%	-0.4%	28
Common law	New claims	4,215	4,299	-2.0%	39
	Payments (\$M)	\$566.0	\$526.9	7.4%	44
	Average damages cost (excluding nil settlements)	\$129,940	\$124,743	4.2%	45
Regulator functions	Review applications	3,102	3,269	-5.1%	47
	Appeals served	362	402	-10.0%	50
	MAT referrals	3,095	3,098	-0.1%	52

Workers' compensation statutory claims

- The majority of employers (almost 90%) covered by the scheme in 13-14 did not have a claim for workers' compensation.
- Scheme-wide claim rate decreased 7.6%.
- The manufacturing industry has the highest claim rate.

As at 30 June 2014, approximately 151,000 employers were covered by the Queensland workers' compensation scheme. During the 13-14 year the scheme covered a total of approximately 160,000 employers, taking into account fluctuations in cancelled and new policies.

04 Number of claims lodged by insurance type 13-14

Insurance type	12-13	13-14	% Variance
Employed people	98,886	91,672	-7.3%
Volunteers, industrial placement / work experience, contracts of insurance (Act: section 26)	299	252	-15.7%
Workplace personal injury insurance (self employed , working directors)	90	66	-26.7%
Household workers	23	17	-26.1%
Total lodgements	99,298	92,007	-7.3%

The majority of claims (99.6%) are for "Workers" (as defined in the Act).

05 Number of claims per employer by declared wages 12-13

Number of claims	Declared wages						
	\$1M or less	\$1.01M to \$2.5M	\$2.51M to \$5M	\$5.01M to \$10M	\$10.01M to \$50M	Over \$50M	Total employers
No claims	136,862	3,493	710	189	74	3	141,331
1 claim	8,190	1,495	469	157	73	2	10,386
2 to 5 claims	2,530	1,566	847	426	204	17	5,590
6 to 10 claims	118	235	295	259	182	12	1,101
11 to 20 claims	27	45	123	176	245	40	656
over 20 claims	19	3	15	59	296	191	583
Total with claims	10,884	3,344	1,749	1,077	1,000	262	18,316
Total	147,746	6,837	2,459	1,266	1,074	265	159,647
% without claims	92.6	51.1	28.9	14.9	6.9	1.1	88.5

The above table is based on claims lodged by insurance type "Employed people" and excluding claims which have been lodged by uninsured policies.

The majority of employers (88.5%) did not have a claim for workers' compensation in 13-14. Smaller employers (less than \$1 million in declared wages) were the most likely to have no claims (92.6%).

Claim rate

In 13-14, 92,007 claims were lodged scheme-wide (excluding cancelled claims). The estimated rates per 1,000 employees are detailed below.

06 Claim rates (per 1,000 employees covered by the scheme) 09-10 to 13-14

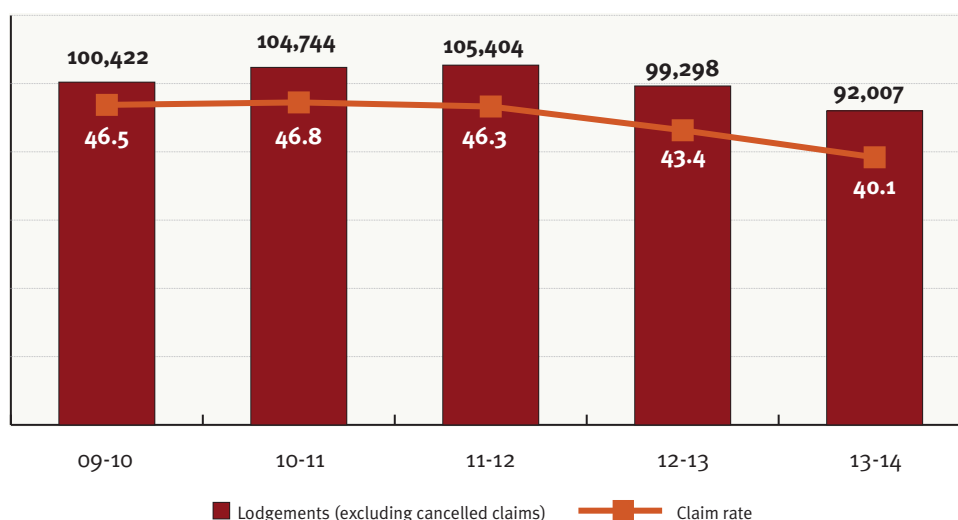
	Annual comparison				
	09-10	10-11	11-12	12-13	13-14
Queensland labour force					
Average number of employed people ('000) ^a	2,223.5	2,307.8	2,330.3	2,338.2	2,353.7
Change from previous year (%)	0.2%	3.8%	1.0%	0.3%	0.7%
Average number of employees covered ('000) ^b	2,159.8	2,238.0	2,275.5	2,286.8	2,296.6
Change from previous year (%)	0.6%	3.6%	1.7%	0.5%	0.4%
Queensland workers' compensation scheme					
Number of lodged claims	100,422	104,744	105,404	99,298	92,007
Change from previous year (%)	-3.1%	4.3%	0.6%	-5.8%	-7.3%
Claim rate					
Number per 1,000 employees covered	46.5	46.8	46.3	43.4	40.1
Change from previous year (%)	-3.7%	0.7%	-1.1%	-6.3%	-7.6%

a Australian Bureau of Statistics, Labour Force, Queensland Average of May Quarter to February Quarter – for each of the above years, Cat No 6291.0.55.003. Australian Bureau of Statistics has adjusted past figures due to change in methodology.

b "Employees covered" is a subset of all employed persons (see definitions).

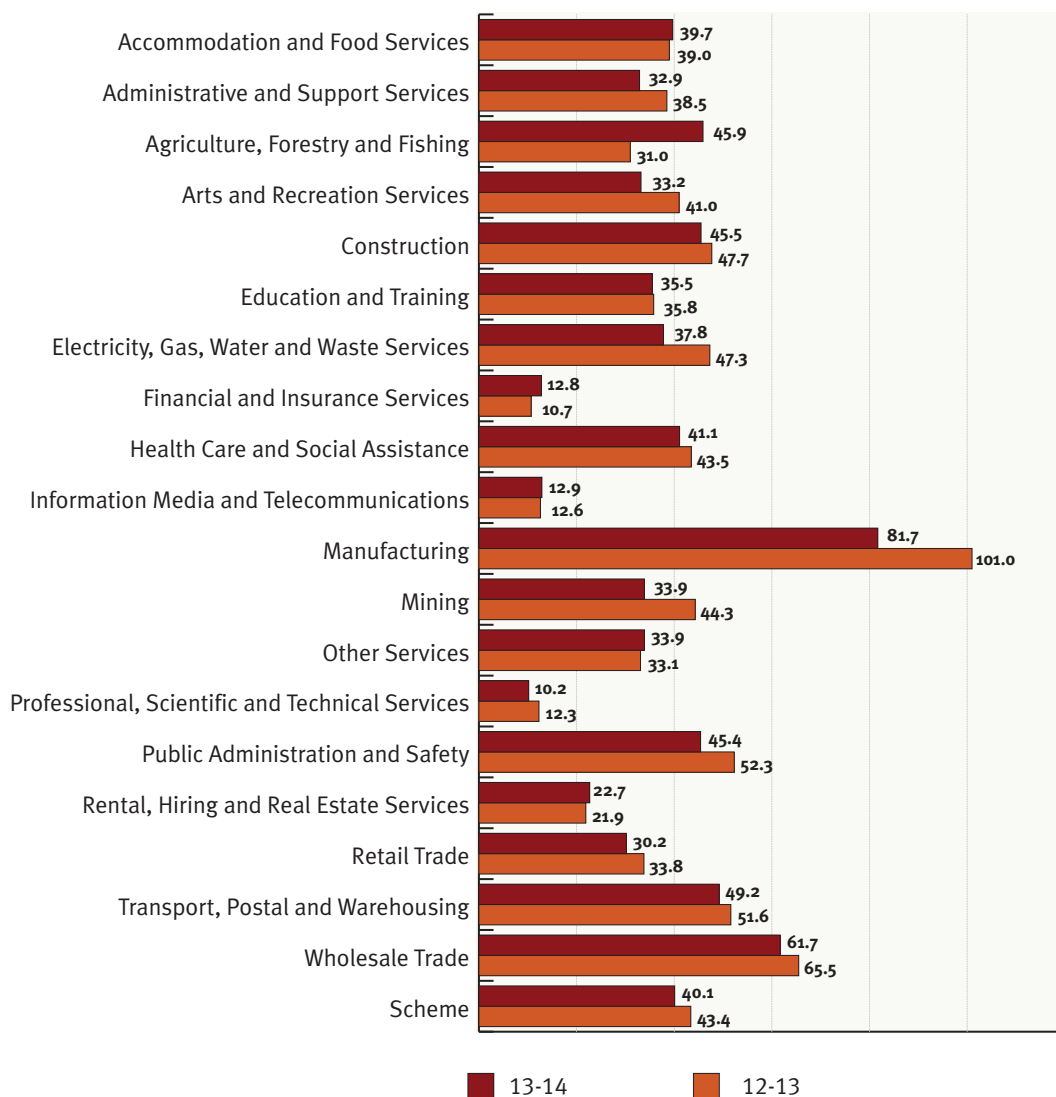
The following figure shows claim rates and claim lodgements in the scheme for the past five years. Lodgements for 13-14 of 92,007 have decreased by 7.3% from 12-13 lodgements of 99,298.

07 Claim rates (per 1,000 employees covered by the scheme) and lodgements 09-10 to 13-14



Manufacturing had the highest claim rate in the scheme, with 81.7 claim lodgements per 1,000 employees covered in the industry. Other industries where the claim rate was larger than the scheme rate of 40.1 include, wholesale trade (61.7), public administration and safety (45.4), transport, postal and warehousing (49.2), agriculture, forestry and fishing (45.9), construction (45.5), and health care and social assistance (41.1).

o8 Claim rates (per 1,000 employees covered by the scheme) by industry 12-13 and 13-14



Statutory claim lodgements

- Lodgements decreased by 7.3% in 13-14.
- Note: cancelled claims have been excluded from the lodgements reported.
- There were 63 fatal claims lodged in 13-14.

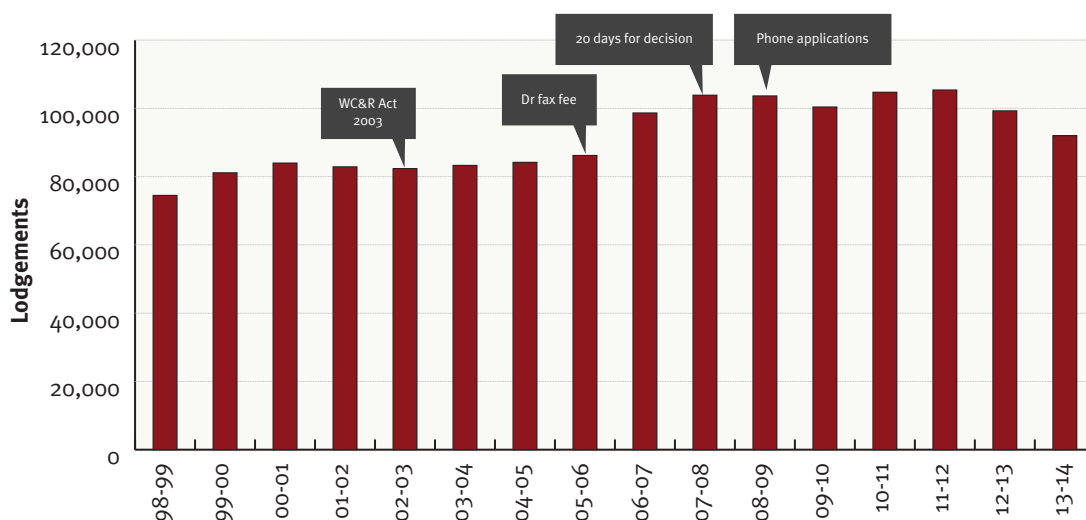
Many factors influence the number of claims lodged in the Queensland workers' compensation scheme. Some of the factors which may have contributed to changes in numbers of lodgements over the years include:

- changing industry economics
- variations in the overall numbers in the workforce
- work process changes within industry – for example, automation, improved workplace health and safety practices
- changes in insurer practices – for example, the doctor fax fee initiative by WorkCover Queensland.

The figure below shows a history of statutory claim lodgements and key events in the Queensland workers' compensation scheme. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

In 13-14, there were 92,007 claims lodged (excluding cancelled), representing a 7.3% decrease from 12-13 (99,298).

09 Statutory claim lodgement history 98-99 to 13-14



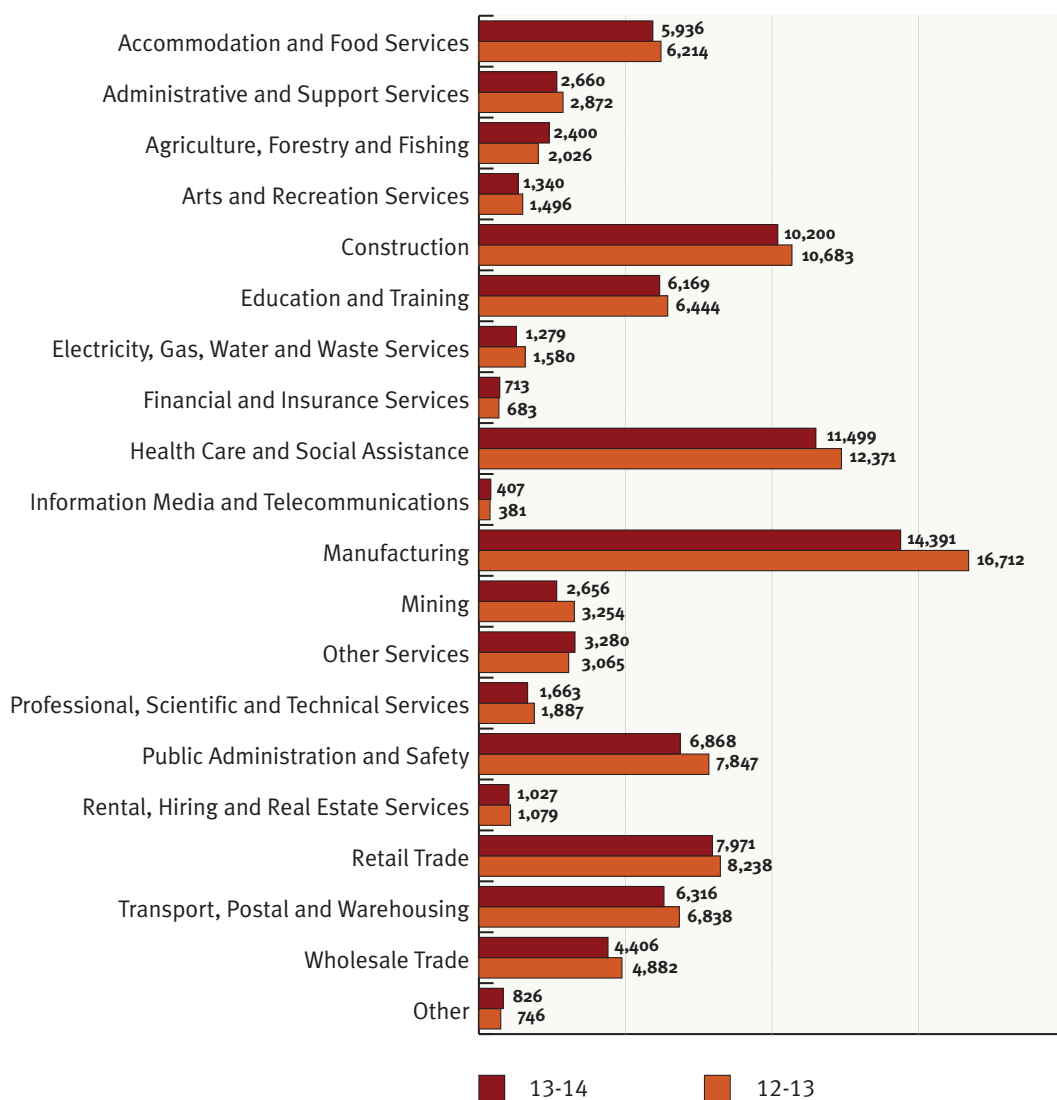
Industry

The manufacturing industry accounted for the largest proportion of claim lodgements with 15.6% of all scheme lodgements.

There were minimal increases across the scheme this year with the largest increase experienced within agriculture, forestry and fishing (up 18.5%).

The largest percentage decreases in claim lodgements were for electricity, gas, water and waste services (down 19.1%), mining (down 18.4%) and manufacturing (down 13.9%).

10 Statutory claim lodgements by industry 12-13 and 13-14



For industry "Other", this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self employed, working directors) and volunteers.

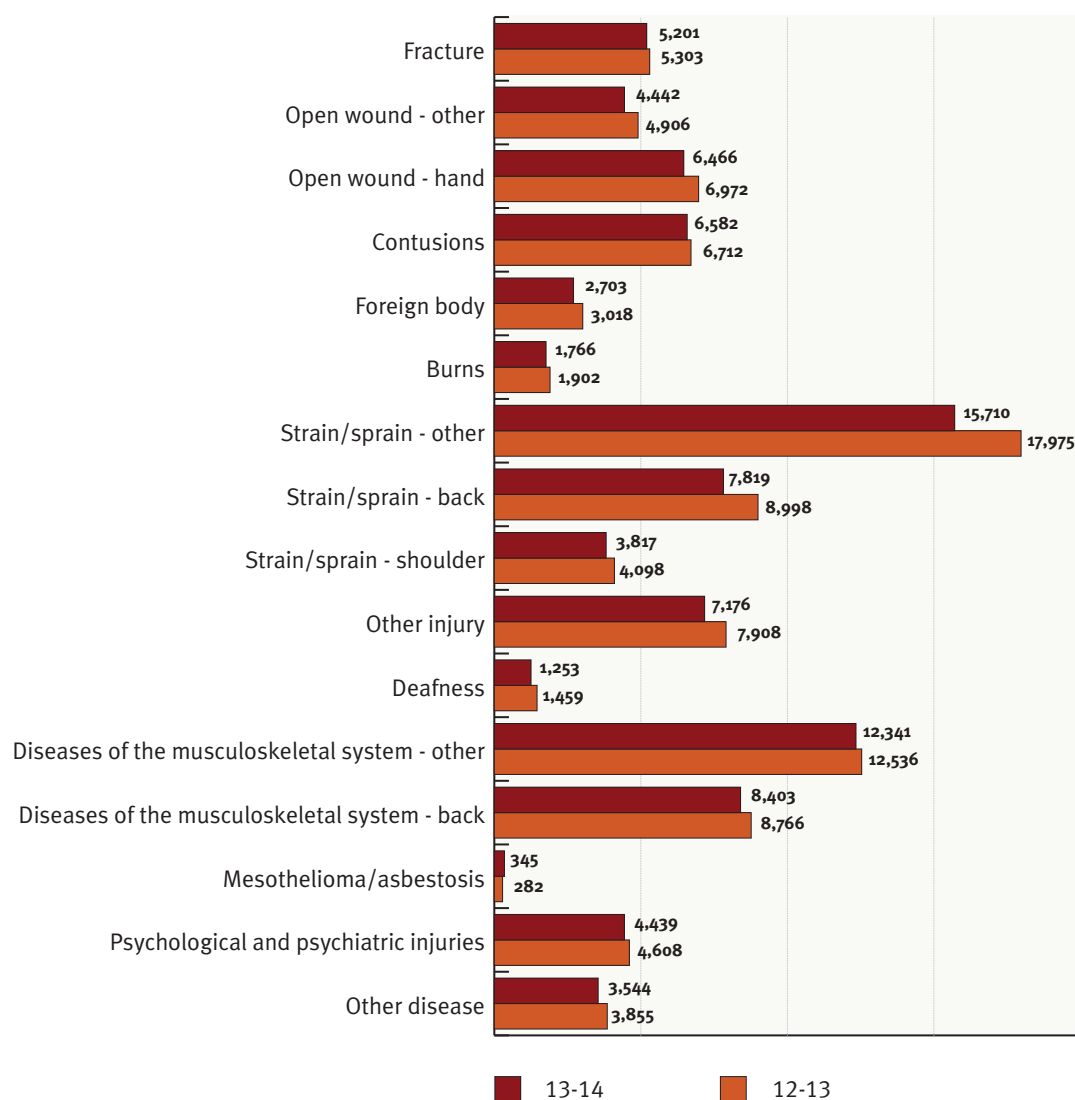
Injury type

Strain and sprain injury claims accounted for almost a third (29.7%) of all injuries lodged in 13-14. Of these, the back was the major bodily location (accounting for 8.5% of all lodgements).

Mesothelioma and asbestosis claims experienced a large increase of 22.3%, up from 282 in 12-13 to 345 in 13-14. This increase is due to a large increase in the report only asbestosis claims in 13-14 (259). Report only claims represent 75.1% of the mesothelioma and asbestosis claims in 13-14 (60.3% in 12-13).

Claims for deafness experienced a decrease, down 14.1% from 1,459 in 12-13 to 1,253 in 13-14.

11 Statutory claim lodgements by injury type 12-13 and 13-14

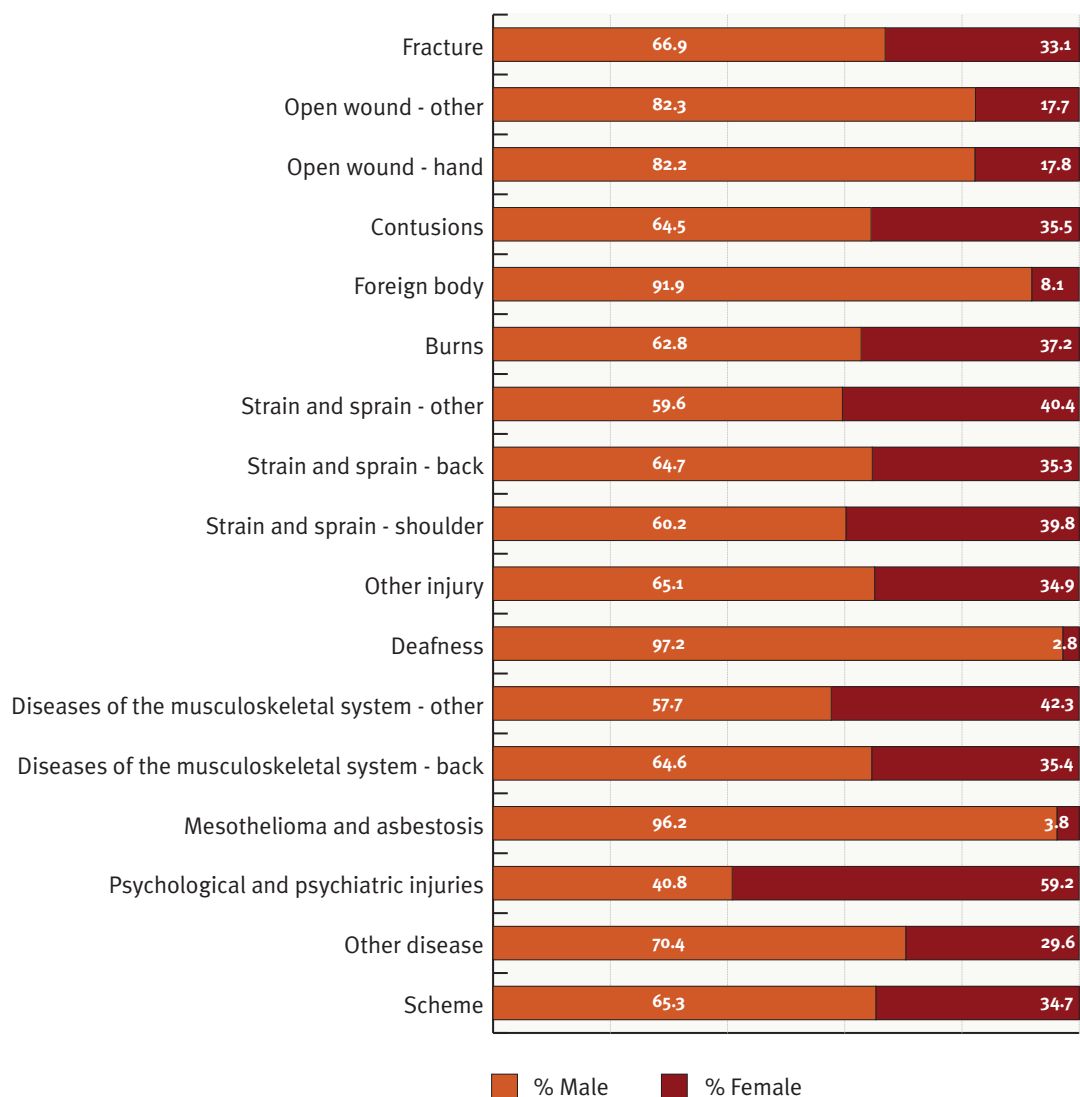


Gender

In 13-14, males represented 65.3% (n = 60,086) of the 92,007 claims lodged in the Queensland workers' compensation scheme. Injuries where males represented a much higher proportion of claims than females were deafness (97.2%), mesothelioma and asbestosis (96.2%), and foreign body (91.9%).

Psychological and psychiatric injury was the only injury type where females were represented more than males, females accounting for 59.2% of claims.

12 Proportion of statutory claim lodgements by injury type and gender 13-14

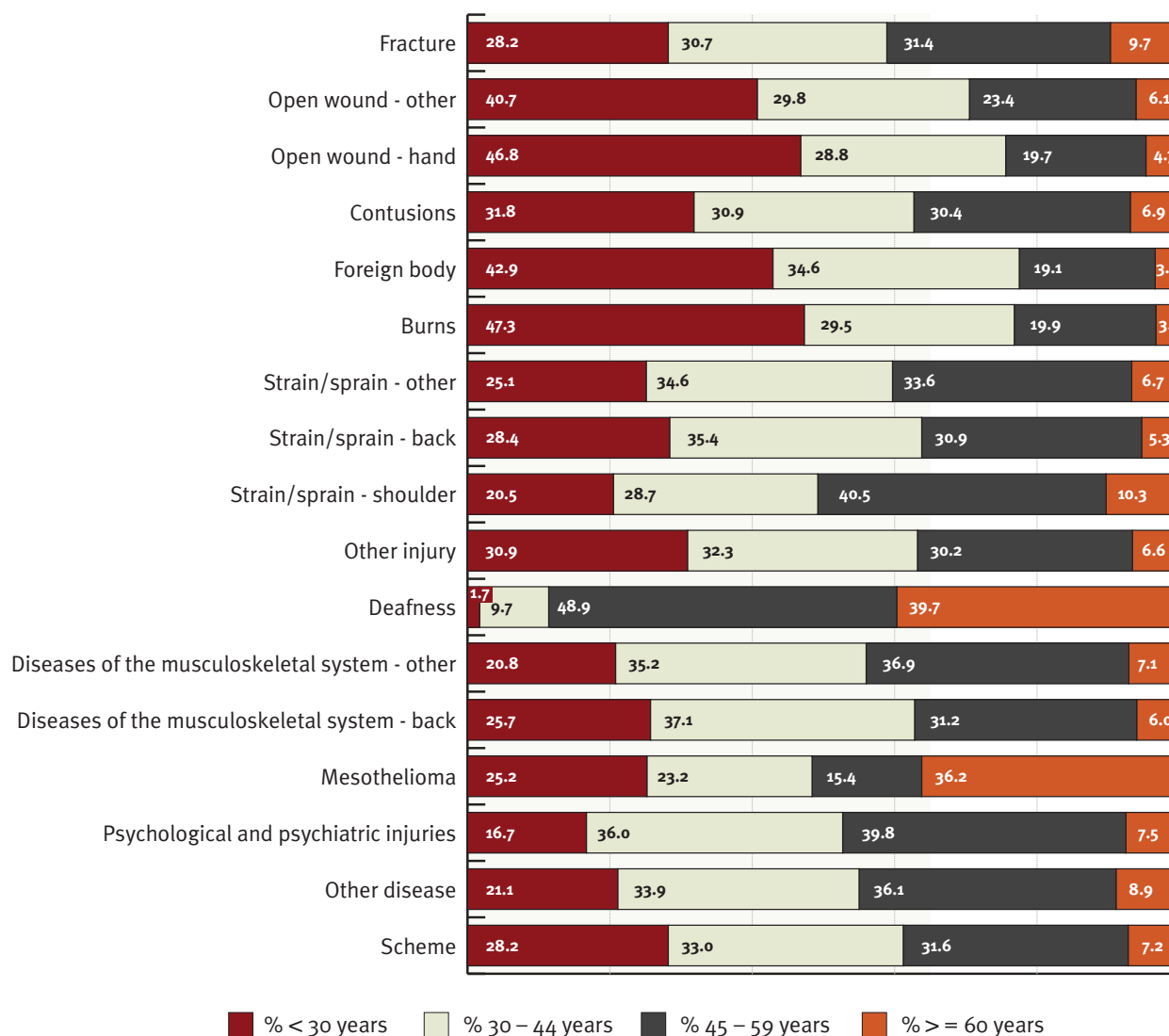


Age

While older workers (60 years or over) represented only 7.2% of all claims lodgements, they have a high representation for injuries such as deafness (39.7%).

Injury types where younger workers (less than 30 years) represented a greater proportion include burns (47.3%), open wound to the hand (46.8%), and foreign body (42.9%).

13 Proportion of statutory claim lodgements by injury type and age group 13-14



Please note: For the purposes of the above figure only, asbestosis has been separated from mesothelioma and categorised into "Other disease".

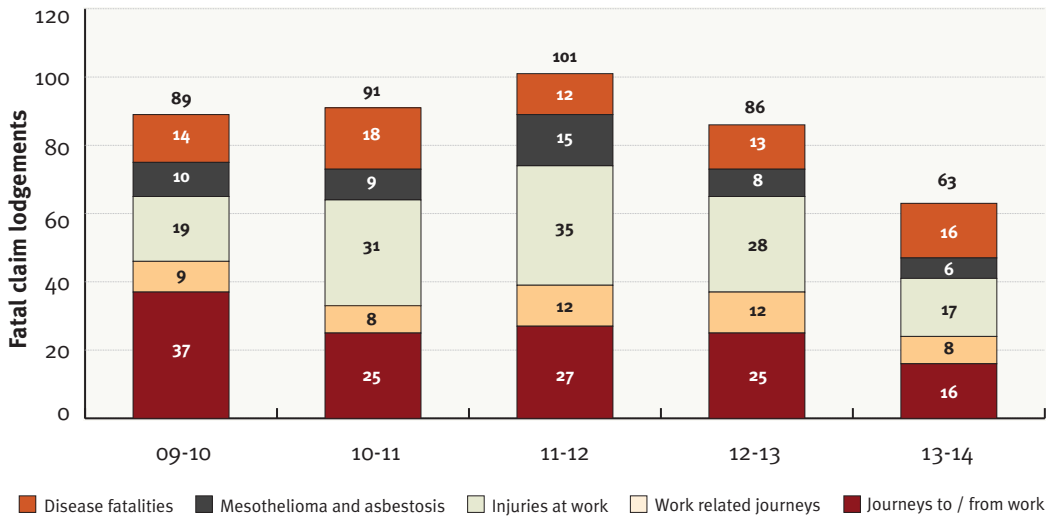
Fatalities

Compensated fatalities are included in the year a workers' compensation claim is lodged, not the year the worker died. Considerable time can, therefore, elapse between claim lodgement and the death of the injured worker. Because these figures are subject to development over time, comparisons between years have not been made.

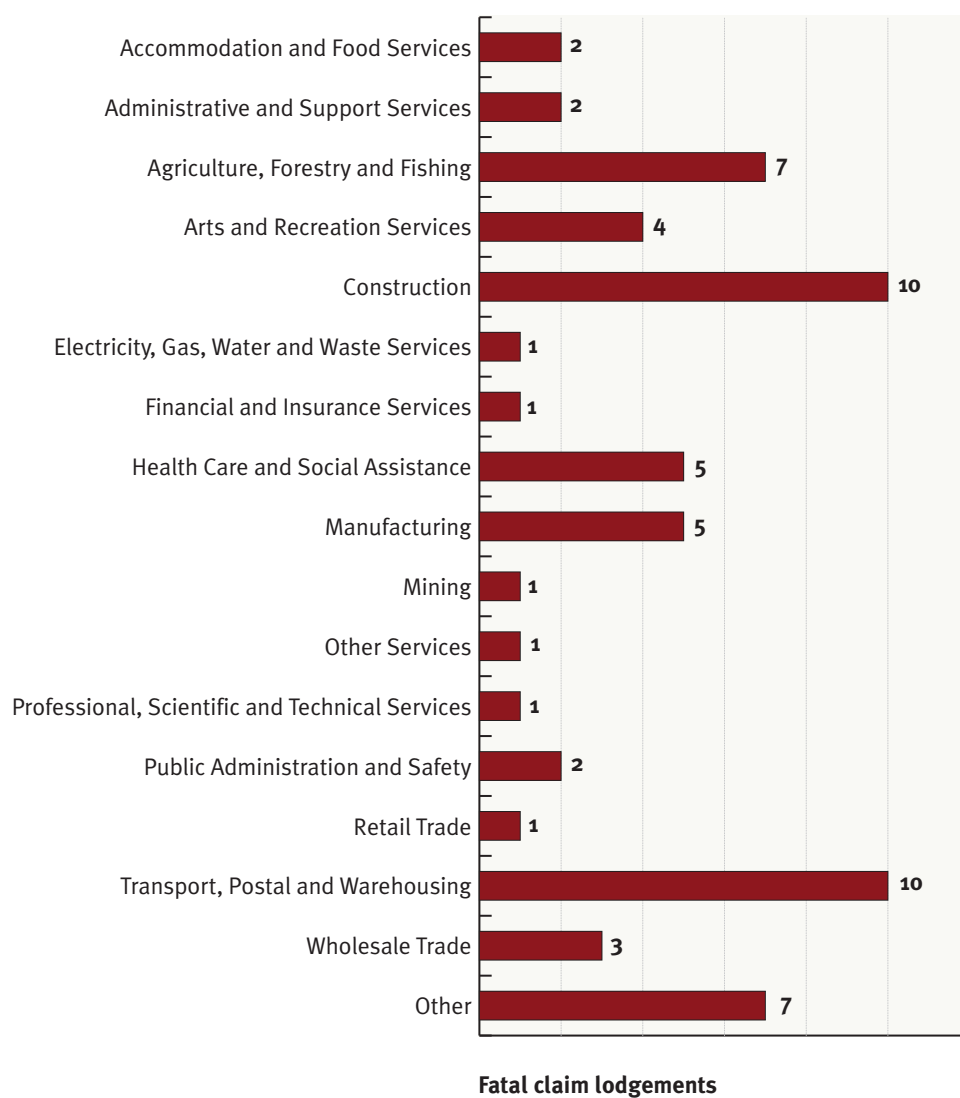
Workers' Compensation Regulator reports the claim as a fatality if the claim is indicated by the insurer as a fatality under the Act, on the individual application, taking into account the definitions of a worker, event and injury under the Act (s11, s31 and s32). The figure below shows the fatal claim lodgement numbers.

There were 63 fatalities lodged in 13-14.

14 Fatal claim lodgements (excluding cancelled claims) 09-10 to 13-14



15 Fatal claim lodgements by industry 13-14



Statutory claim decision-making process

- Decision timeframes have increased by 12.5% for the 13-14 year.
- Rejections and claims for psychological and psychiatric injuries take longer to decide.
- Claims for psychological and psychiatric injuries have a higher chance of rejection.
- 85.5% of rejections are due to the injury not meeting the definition under the Act.
- Claims which are lodged with the insurer early are determined quicker, on average.
- Rejections are more likely to progress to a review than claims which are accepted.

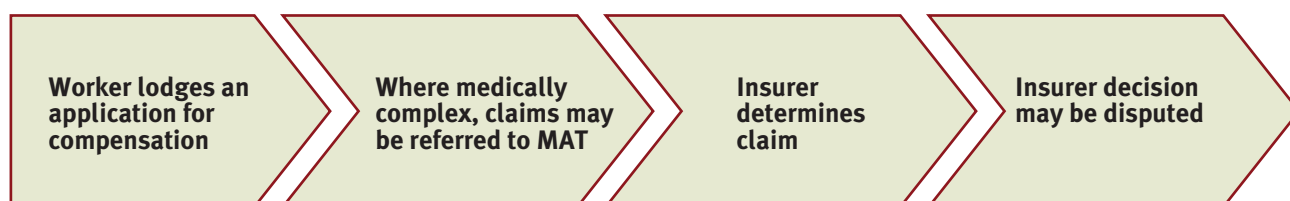
Once the insurer receives a complete application for compensation, they will determine whether or not the claim is compensable under the *Workers' Compensation and Rehabilitation Act 2003* (the Act). Insurers have 20 business days to determine liability for both physical injuries and psychological and psychiatric injuries, lodged after 1 January 2008. Prior to this, insurers had 40 business days for physical injuries and 60 business days for psychological and psychiatric injuries.

Where injuries are difficult to determine due to medical complexities, they may be referred to a medical assessment tribunal (MAT) to determine whether the medical matters alleged in the application for compensation constitute an injury.

If parties (either the worker or the employer) are dissatisfied with the insurer's decision, a dispute resolution process is available. The process involves an initial independent administrative review of the insurer's decision by the Workers' Compensation Regulator, followed by an appeal to the Queensland Industrial Relations Commission (QIRC) if the parties are dissatisfied with the Regulator's review decision. The court or QIRC decision may be appealed in the Industrial Court.

The following figure demonstrates the decision-making process for new claims.

16 Claims decision-making process



The following figure illustrates the change in decision-making timeframes in 12-13 and 13-14.

17 Average time to decide by injury type 12-13 and 13-14

Injury type	Average decision time (days)	
	12-13	13-14
Fracture	4.1	4.3
Open wound - other	3.1	3.5
Open wound - hand	2.9	3.2
Contusions	3.6	4.4
Foreign body	2.8	3.4
Burns	3.2	3.6
Strain and sprain - other	5.1	5.7
Strain and sprain - back	5.9	6.4
Strain and sprain - shoulder	6.8	7.2
Other injury	6.0	6.8
Deafness	15.9	17.7
Diseases of the musculoskeletal system - other	7.2	8.3
Diseases of the musculoskeletal system - back	6.9	7.8
Mesothelioma and asbestosis	51.4	74.2
Psychological and psychiatric injuries	26.1	29.5
Other disease	12.0	13.2
Total average	6.4	7.2

Overall, average decision-making timeframes have increased to 7.2 days in 13-14, up from 6.4 days in 12-13.

The median decision-making timeframes have remained stable at 3.0 days for 13-14.

Due to the complexity of some claims, the duration from lodgement to decision can be lengthy. The injury type with the highest increase in decision times for 13-14 was mesothelioma and asbestosis from 51.4 days to 74.2 days. This increase is due to a small number of claims relating to mesothelioma and asbestosis disease exceeding 150 days from lodgement to decision. All other injuries showed minimal movement over the year.

The following figure illustrates decision-making timeframes and outcomes for claims determined in 13-14. These timeframes are based on statutory claim decisions.

18 Decisions made and average time to decide by decision type and injury type 13-14

Injury type	Number of decisions	Proportion of decisions		Average decision time		
		Admitted %	Rejected %	Admitted days	Rejected days	Total days
Fracture	4,743	96.7	3.3	3.9	15.1	4.3
Open wound - other	3,917	98.3	1.7	3.3	14.2	3.5
Open wound - hand	5,683	98.9	1.1	3.1	11.7	3.2
Contusions	5,656	97.9	2.1	4.1	17.2	4.4
Foreign body	2,395	98.4	1.6	3.3	14.1	3.4
Burns	1,509	98.6	1.4	3.3	22.3	3.6
Strain and sprain - other	13,651	96.2	3.8	5.2	20.9	5.7
Strain and sprain - back	6,807	95.8	4.2	5.7	22.4	6.4
Strain and sprain - shoulder	3,337	95.2	4.8	6.3	25.0	7.2
Other injury	5,596	93.9	6.1	5.6	25.4	6.8
Deafness	877	85.7	14.3	15.7	29.6	17.7
Diseases of the musculoskeletal system - other	10,663	94.2	5.8	7.3	25.9	8.3
Diseases of the musculoskeletal system - back	7,305	94.4	5.6	6.8	24.5	7.8
Mesothelioma and asbestosis	23	91.3	8.7	72.0	96.5	74.2
Psychological and psychiatric injuries	2,815	35.2	64.8	19.1	35.1	29.5
Other disease	2,777	86.3	13.7	10.4	30.9	13.2
Total	77,754	93.4	6.6	5.7	27.8	7.2

Most claims (93.4%) were accepted by insurers with an average determination time of 5.7 days. On average, decision timeframes tended to be longer for:

- rejected claims – determined in 27.8 days on average compared to 5.7 days on average for accepted claims
- diseases, particularly psychological and psychiatric injury claims (average 29.5 days to determine), mesothelioma and asbestosis claims (average 74.2 days to determine) and deafness (average 17.7 days to determine).

Diseases tended to have higher rejection rates than injuries. In 13-14, 14.3% of deafness claims were rejected and 64.8% of psychological and psychiatric claims were rejected.

Another reason the rejection rate of psychological and psychiatric claims is so high is that workers cannot receive compensation for certain psychological and psychiatric injuries that arise out of or in the course of reasonable management action, as they are excluded from the definition of an injury in the Act. In 13-14, 95.9% of the rejected psychological and psychiatric claims were rejected on this basis.

Reasons for claim rejection

Insurers reject claims where, for some reason, the event or the person is not covered under the Act. For 85.5% of rejected claims, the reason for rejection was that the injury did not meet the definition under the Act.

The following figure details the main reasons claims were rejected.

19 Rejected claims by reason for rejection 12-13 and 13-14

Reason for rejection	12-13		13-14	
	Number of rejections	% of rejections	Number of rejections	% of rejections
Not an injury - s.32	4,403	85.2	4,385	85.5
Not a worker - s.11	231	4.5	264	5.1
Out of time - excluded under s.131	121	2.3	139	2.7
Journey - subsequent delay, interruption or deviation - s.36(2)(B)	78	1.5	57	1.1
Invalid application - s.132	6	0.1	3	0.1
Industrial deafness - excluded under s.125 - initial application	71	1.4	71	1.4
Not a journey - s.35	51	1.0	33	0.6
Other	206	4.0	175	3.4
Total	5,167	100.0	5,127	100.0

Determination of medically complex claims

Where an insurer is unable to determine a claim due to complex medical issues, the matter may be referred to a medical assessment tribunal to determine whether the medical matters alleged in the application for compensation constitute an injury.

For 13-14, only 117 claims were referred to a medical assessment tribunal for determination of the worker's injury for an application for compensation. Of these cases, 82 (70.1%) were accepted and the remaining 35 (29.9%) cases were rejected.

Disputation of insurer claim determination decisions

Both the injured worker and employer are able to dispute an insurer's claim determination decision. While only a small percentage of accepted claims are disputed by employers (0.7%), over one third (35.6%) of rejected claims are disputed by either the employer or the injured worker.

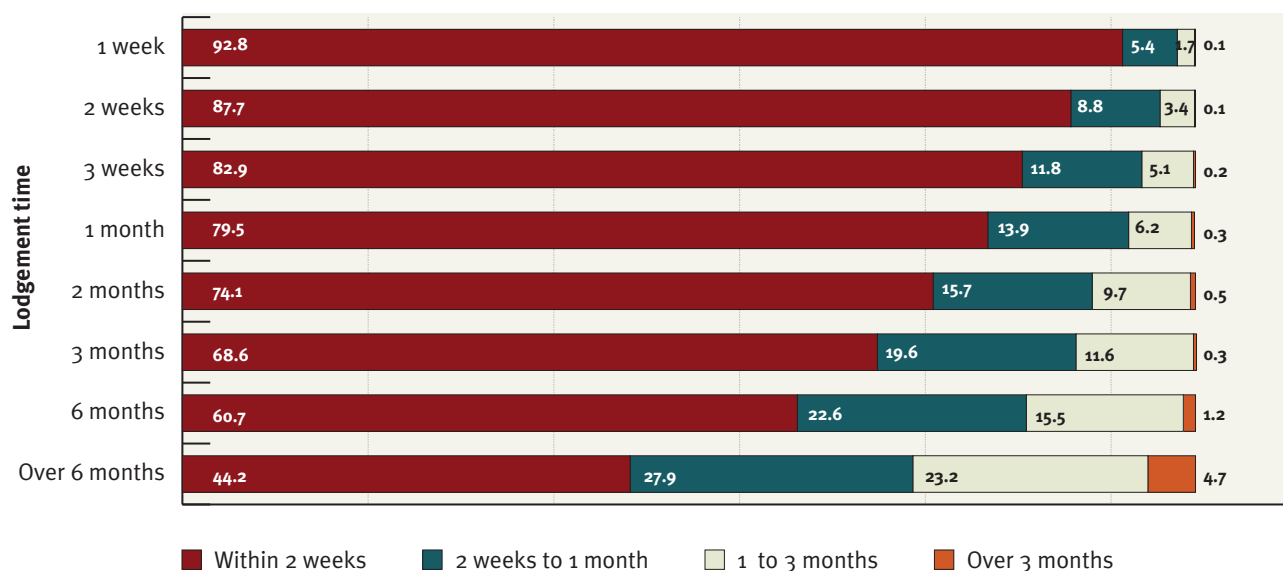
Impact of lodgement time on determination time

Delays in the time from injury to the lodgement of a claim may lead to delays in the decision-making process and, ultimately, additional costs for the claim.

92.8% of claims lodged within the first week of the injury are determined by the insurer within two weeks. The proportion decided within two weeks decreases as the time to lodge the claim increases. For claims lodged more than six months after an injury, the proportion determined in less than two weeks drops to 44.2%.

The following figure illustrates the link between lodgement and decision-making timeframes.

20 Decision-making timeframes for claims decided in 13-14 by the time taken to lodge the claim



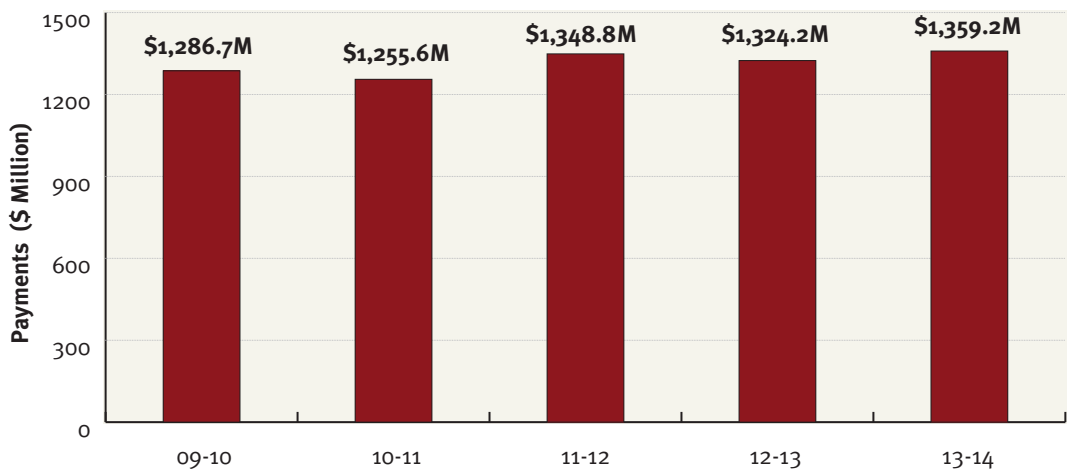
Claim payments

- Total scheme payments have increased by 2.6%.
- There was a 7.4% increase in common law payments made in 13-14.
- Statutory payments decreased slightly (0.5%) between 12-13 and 13-14 with no notable shifts within the payment categories.

Workers' compensation payments

The total scheme payments increased by 2.6%, with common law payments increasing by 7.4%. Statutory payments decreased slightly by 0.5%. Total payments for workers' compensation claims in 13-14 were \$1,359 million. Common law payments made up 41.6% (\$566.0 million) and statutory claim payments made up 58.4% (\$793.3 million).

21 Scheme payments 09-10 to 13-14

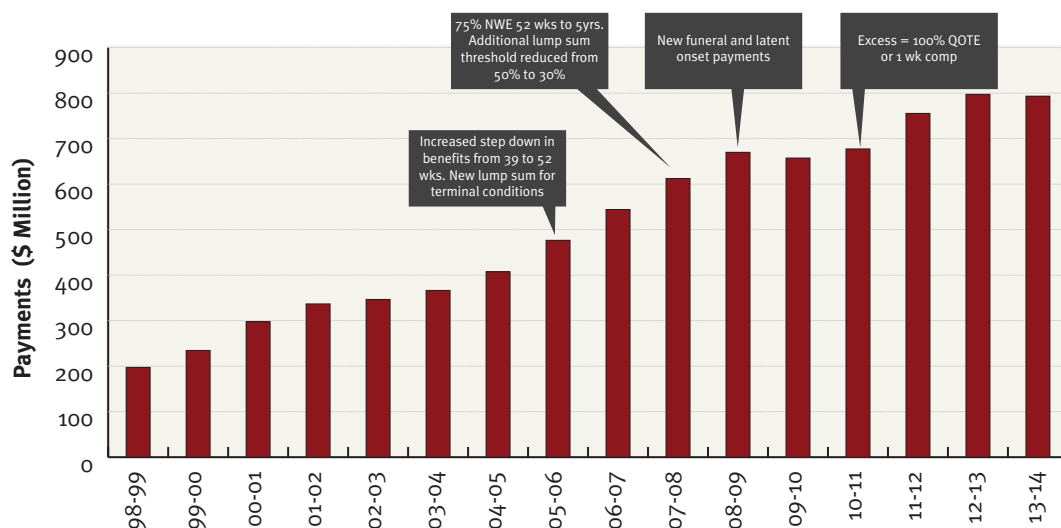


Statutory claim payments

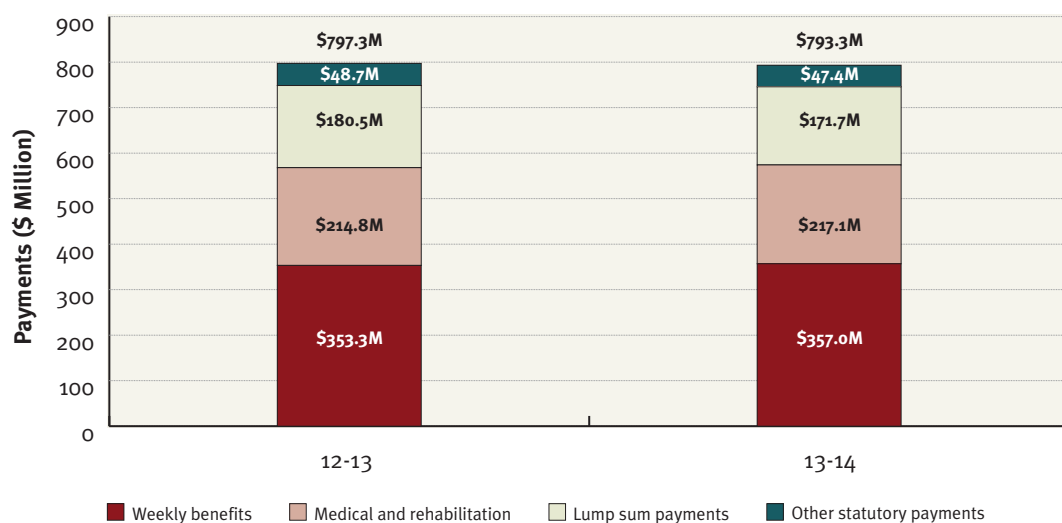
During the management of a claim, payments are made to the worker for weekly compensation to replace wages, lump sums for permanent impairment (PI) and a broad range of services such as medical treatment and rehabilitation.

The figure below shows a history of statutory claim payments and key events in the Queensland workers' compensation scheme. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

22 Statutory claim payment history 98-99 to 13-14



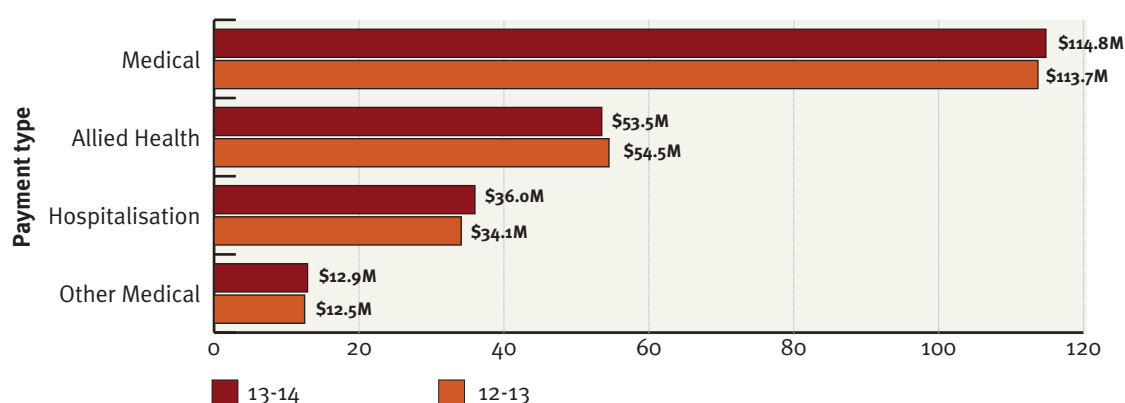
23 Statutory claim payments by payment type 12-13 and 13-14



The total amount spent on claims for the year has decreased by 0.5% from \$797.3 million in 12-13 to \$793.3 million in 13-14.

Weekly benefit payments and medical and rehabilitation payments both increased by approximately 1%, whereas lump sum payments and other statutory payments showed decreases (4.9% and 2.7% respectively).

24 Medical and rehabilitation payments 12-13 and 13-14

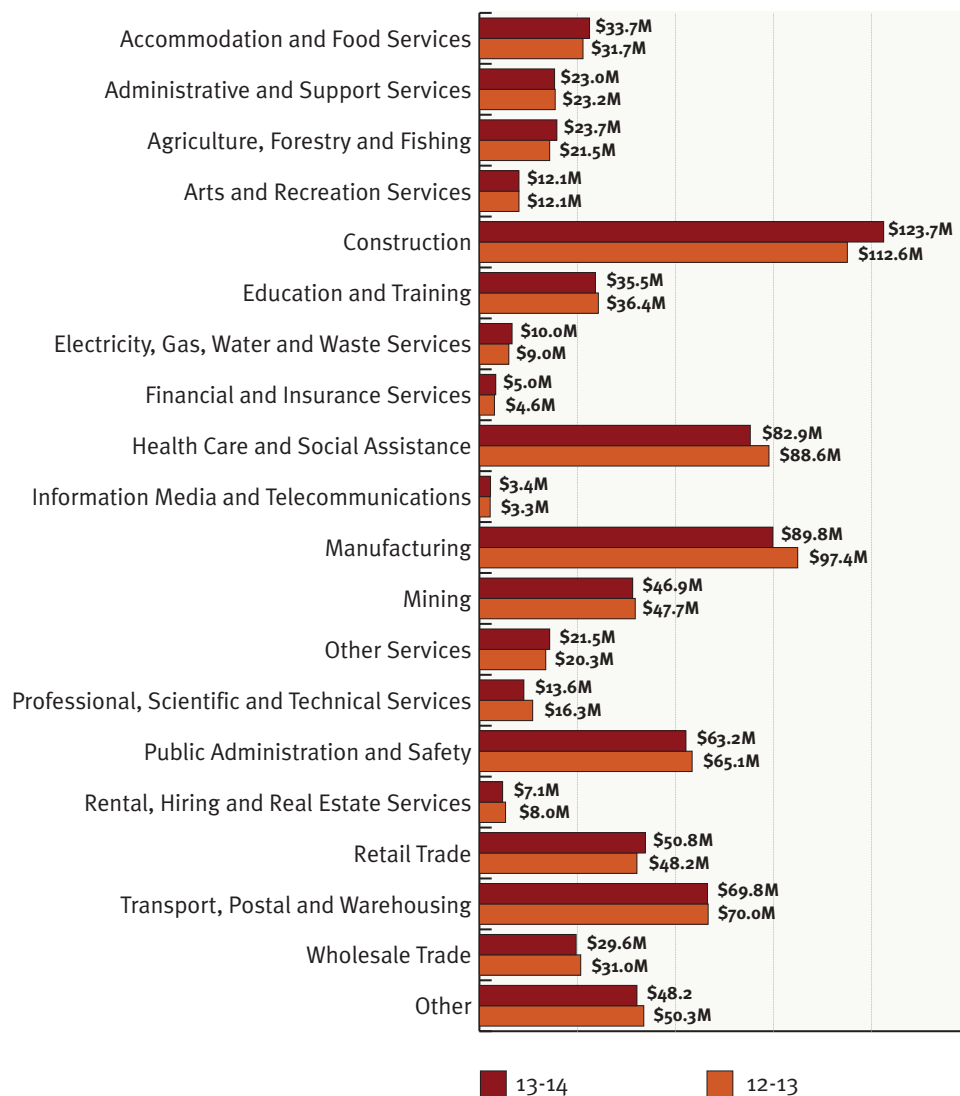


Medical and rehabilitation payments represent 27.4% of statutory payments. Of those, payments for medical treatment accounted for more than half (52.9%) of all payments for medical and rehabilitation fees paid in the scheme in 13-14.

Payments by industry

Claims from the construction industry accounted for the largest proportion (15.6%) of statutory claim payments in 13-14. Manufacturing was the next largest proportion of payments with 11.3%.

25 Statutory claim payments by industry 12-13 and 13-14

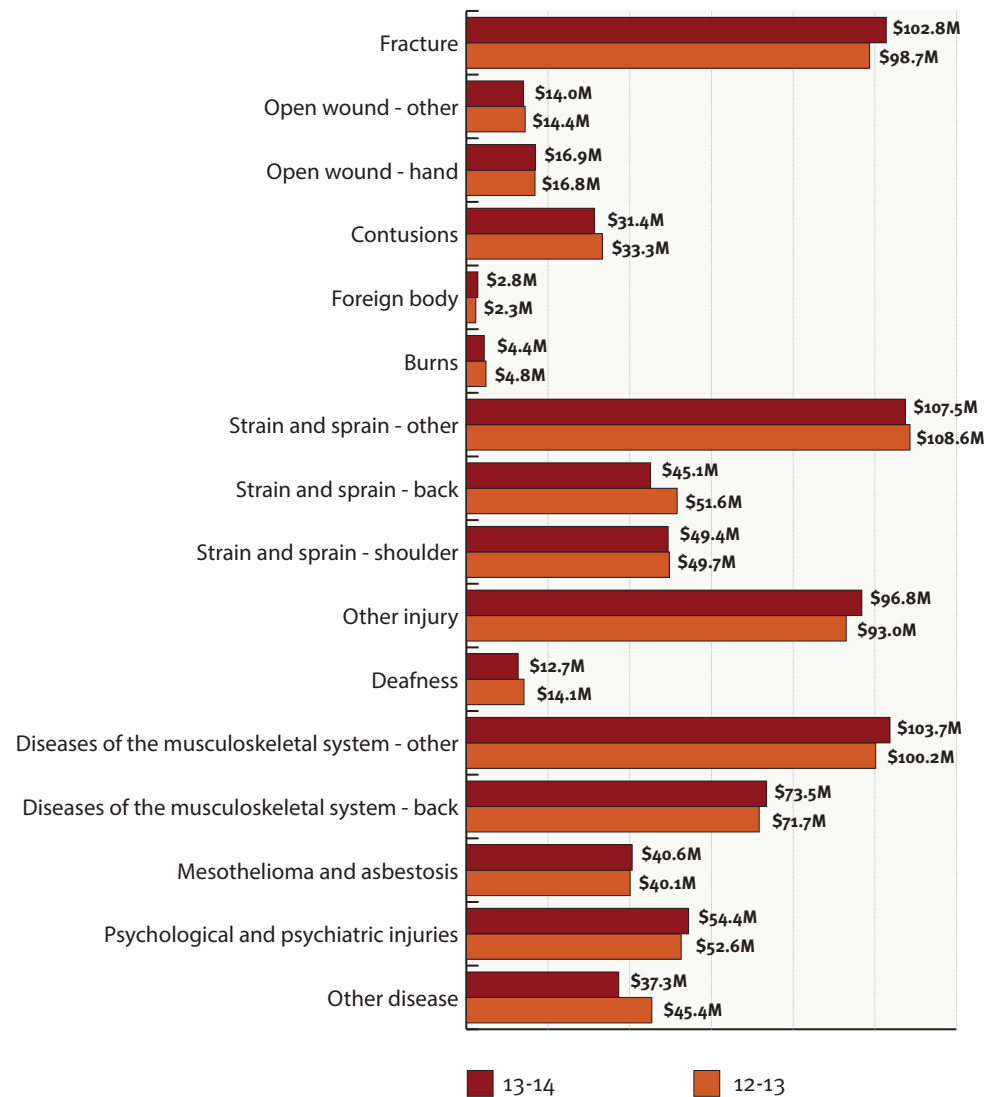


Payments by injury

Claims from strain and sprain injuries accounted for the largest proportion (25.5%) of statutory claim payments in 13-14 (5.7% to the back, 6.2% to the shoulder and 13.5% to a location other than the back or shoulder). Disease of the musculoskeletal system claims accounted for 22.3% of statutory claim payments made in 13-14 (9.3% to the back and 13.1% to a location other than the back).

Injury types that experienced the largest percentage increase in statutory claim payments from 12-13 to 13-14 were foreign body (up 22.3%) and fractures (up 4.2%).

26 Statutory claim payments by injury type 12-13 and 13-14



Finalised claims and outcomes

- 93.0% of workers with claims finalised in 13-14 returned to their same job with the same employer.
- Average costs of finalised medical expense only claims increased by 12.3%.
- Average costs of finalised time lost claims increased by 17.4% and their durations increased 12.2%.

Work related impairment (WRI)

Where a worker has a permanent impairment assessed, the degree of work related impairment (WRI) is calculated.

While a person may have multiple permanent impairments, only one physical and one psychological or psychiatric WRI is calculated as for the purposes of calculating lump sum payments.

The figure below shows the number of claims finalised and those that had a WRI in 12-13 and 13-14.

27 Finalised claims with a WRI 12-13 and 13-14

	12-13	13-14	Variance %
Finalised claims	93,429	87,332	-6.5
Work related impairment	8,806	9,309	5.7
Proportion of finalised with work related impairment	9.4%	10.7%	
Work related impairment range			
0%	2,145	2,219	3.4
0.1% - 4.9%	2,709	2,922	7.9
5% - 9.9%	2,275	2,407	5.8
10% - 14.9%	886	991	11.9
15% - 19.9%	328	326	-0.6
>= 20%	463	444	-4.1

For 13-14, 10.7% of claims were finalised with a WRI calculated. Of these, the majority of claims (95.2%) had a WRI of less than 20% and 23.8% were calculated as having a 0% WRI.

Return to work (RTW) outcomes

Returning an injured worker to the same job with the same employer is the best outcome which can be achieved on a claim. The following figure analyses the RTW outcome of claims reported at the time the claim closed. As the following figure illustrates, this is the outcome achieved in most cases, with 93.0% of injured workers who had time off work returning to the same job and the same employer.

28 Return to work status of finalised time lost claims 12-13 and 13-14

	12-13		13-14	
	Number	% of time lost claims	Number	% of time lost claims
Fit for work: same job/tasks with same employer	48,127	93.4	45,688	93.0
Fit for work: same job/tasks with different employer	341	0.7	309	0.6
Fit for work: different job/tasks with same employer	351	0.7	297	0.6
Fit for work: different job/tasks with different employer	1,002	1.9	999	2.0
Fit for work: no job	452	0.9	501	1.0
Fit for work: worker does not return	591	1.1	615	1.3
Not fit for work	594	1.1	629	1.3
Alternative outcome not claim related	87	0.2	92	0.2
Total	51,545	100	49,130	100

Note: For the purpose of the above figure only, all deceased injured workers have been excluded.

In 13-14, 96.3% of injured workers returned to some type of employment (96.7% in 12-13). In a small number of cases, the worker is deemed fit to return to work but there is no job for the worker to return to (1.0% of time lost claims) or the worker chooses not to return (1.3% of claims).

One of the factors which influence the RTW outcome on a claim is the severity of the injury. The following figure compares claims which have had a permanent impairment assessed as an indicator of the impact of severity of injury on RTW outcomes.

29 Return to work status of finalised time lost claims with/without a permanent impairment assessed 12-13 and 13-14

	12-13 PI assessed			13-14 PI assessed		
	% No	% Yes	Number	% No	% Yes	Number
Fit for work: same job/tasks with same employer	89.1	10.9	48,127	87.5	12.5	45,688
Fit for work: same job/tasks with different employer	79.2	20.8	341	79.0	21.0	309
Fit for work: different job/tasks with same employer	46.4	53.6	351	43.4	56.6	297
Fit for work: different job/tasks with different employer	66.9	33.1	1,002	63.0	37.0	999
Fit for work: no job	46.7	53.3	452	41.9	58.1	501
Fit for work: worker does not return	49.7	50.3	591	42.9	57.1	615
Not fit for work	20.7	79.3	594	21.6	78.4	629
Alternative outcome not claim related	65.5	34.5	87	63.0	37.0	92
Total	86.7	13.3	51,545	84.8	15.2	49,130

Note: For the purpose of the above figure only, all deceased injured workers have been excluded.

Workers with claims assessed for permanent impairment are less likely to return to the same job with the same employer. In 13-14, 12.5% of workers returning to the same job with the same employer had a permanent impairment assessed.

Another factor which influences the RTW outcome on claims is the existence of a psychological or psychiatric injury. The following figure illustrates the impact of the injury type on RTW outcomes.

30 Return to work status of finalised time lost claims by injury nature 12-13 and 13-14

	12-13			13-14		
	Physical only %	Psych only %	Psych & Physical %	Physical only %	Psych only %	Psych & Physical %
Fit for work: same job/tasks with same employer	94.4	72.5	61.3	94.2	72.7	59.2
Fit for work: same job/tasks with different employer	0.6	2.5	1.6	0.6	1.6	0.6
Fit for work: different job/tasks with same employer	0.6	2.2	3.5	0.5	1.7	2.0
Fit for work: different job/tasks with different employer	1.7	7.1	7.8	1.8	8.5	7.2
Fit for work: no job	0.8	2.9	3.7	0.9	2.4	6.3
Fit for work: worker does not return	1.0	4.1	6.8	1.1	4.5	7.3
Not fit for work	0.7	8.2	14.6	0.8	8.1	16.1
Alternative outcome not claim related	0.2	0.5	0.7	0.2	0.5	1.3
Total	100	100	100	100	100	100
Number	49,446	1,291	808	47,014	1,215	901

Note: For the purpose of the above figure only, all deceased injured workers have been excluded.

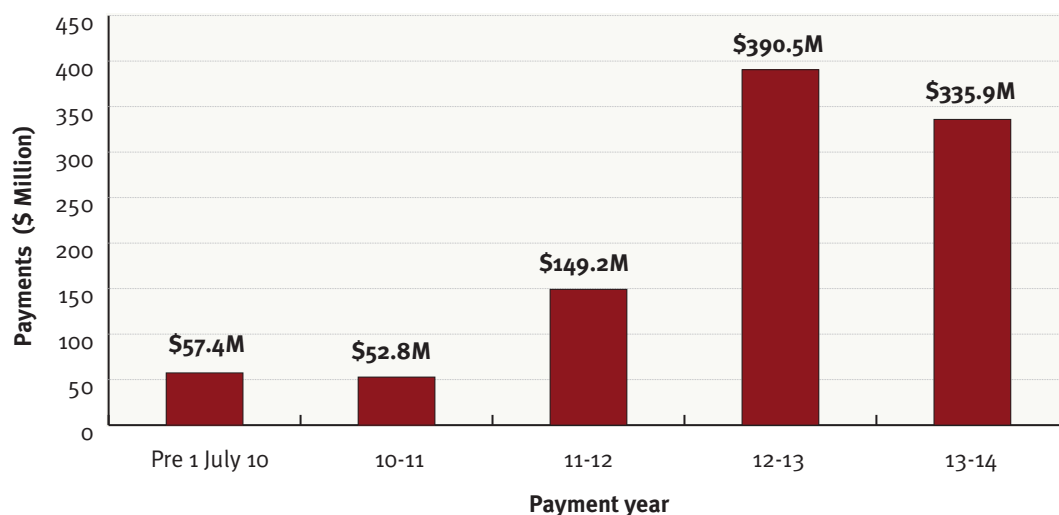
Workers having claims with both a physical and psychological or psychiatric component are the least likely to return to employment and 16.1% in 13-14 were not fit for work at the end of their claim.

Average claim costs

The average finalised claim cost is calculated using statutory claim payments made on a claim that was ceased or finalised within the financial year – the payments made on these claims may have occurred over several years.

The figure below illustrates the payments made on claims finalised in 13-14. Over 60% of the payments for these claims occurred in previous years. Only 34.0% of the statutory payments made on claims finalised in 13-14 were also paid in that financial year. A further 39.6% of payments were made in the 12-13 financial year. The remaining 26.4% of the payments were made in 11-12 or earlier.

31 Payments by payment year for claims finalised in 13-14



The claims that cost more to the scheme tend to be those that have longer durations. These usually occur over several years and therefore would not impact on the average finalised claim cost until the year the claim is ceased or finalised.

The average cost (time lost claims and medical expenses only claims) has increased for the financial year (up 18.6% from \$8,645 in 12-13 to \$10,253 in 13-14).

The figure below shows the number of claims finalised in the past two years, and the average claim costs by claim type for time lost claims and medical expense only claims. These two claims types represent 96.4% of all finalised claims during 13-14.

32 Finalised claims and average claim costs by claim type 12-13 and 13-14

Claim type	Number of claims			Average claim cost		
	12-13	13-14	% Variance	12-13	13-14	% Variance
Time lost claim	51,550	49,136	-4.7%	\$13,933	\$16,358	17.4%
Medical expenses only claim	38,230	35,072	-8.3%	\$1,513	\$1,700	12.3%
Total	89,780	84,208	-6.2%	\$8,645	\$10,253	18.6%

The median claim costs for time lost and medical expense only claims has increased from \$1,122 in 12-13 to \$1,309 in 13-14.

The average finalised claim cost may vary depending on factors such as:

- the duration of claims – the longer an injured worker is away from work, the more weekly compensation payments and medical expenses the claim will incur, impacting on the time lost claims costs and the level of medical and other expenses required for the injury
- changes in industry claim rates and the average wages paid in industry
- the mix of injuries lodged scheme-wide (the severity of injury can impact on the average finalised time lost claim duration and cost)
- changes in practices by insurers can have an impact on claim finalisation and average costs
- changes to legislation to provide increased or additional benefits to claimants
- claim re-openings.

The following figure compares the variance in finalised claim costs to other indicators.

33 Changes in average finalised claim costs and economic indices 13-14

Indicator	% change from previous year
Average finalised time lost claim cost	17.4%
Average finalised medical expense only claim cost	12.3%
Consumer price index	
Average of all groups, Brisbane (excluding GST) ^a	3.1%
Health, Brisbane (excluding GST) ^b	4.4%
Full time adult ordinary earnings ^c	4.0%

^a Australian Bureau of Statistics, consumer price index, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2014, Tables 1 and 2 CPI - all groups, index numbers and percentages changes, Index Numbers; All groups; Brisbane. [Percentage change from March 2013 to March 2014]

^b Australian Bureau of Statistics, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2014, Table 5 CPI - groups, index numbers by capital city, Index Numbers; Health; Brisbane. [Percentage change from March 2013 to March 2014].

^c Australian Bureau of Statistics, average weekly earnings, Australia Cat No 6302.0 - Average weekly earnings Australia, Nov 2013. Table 11C Average weekly earnings Queensland (dollars) - trend, Earnings ; Queensland ; Persons ; Full Time ; Adult ; Ordinary time earnings. [Percentage change from November 2012 to November 2013 at date of publication].

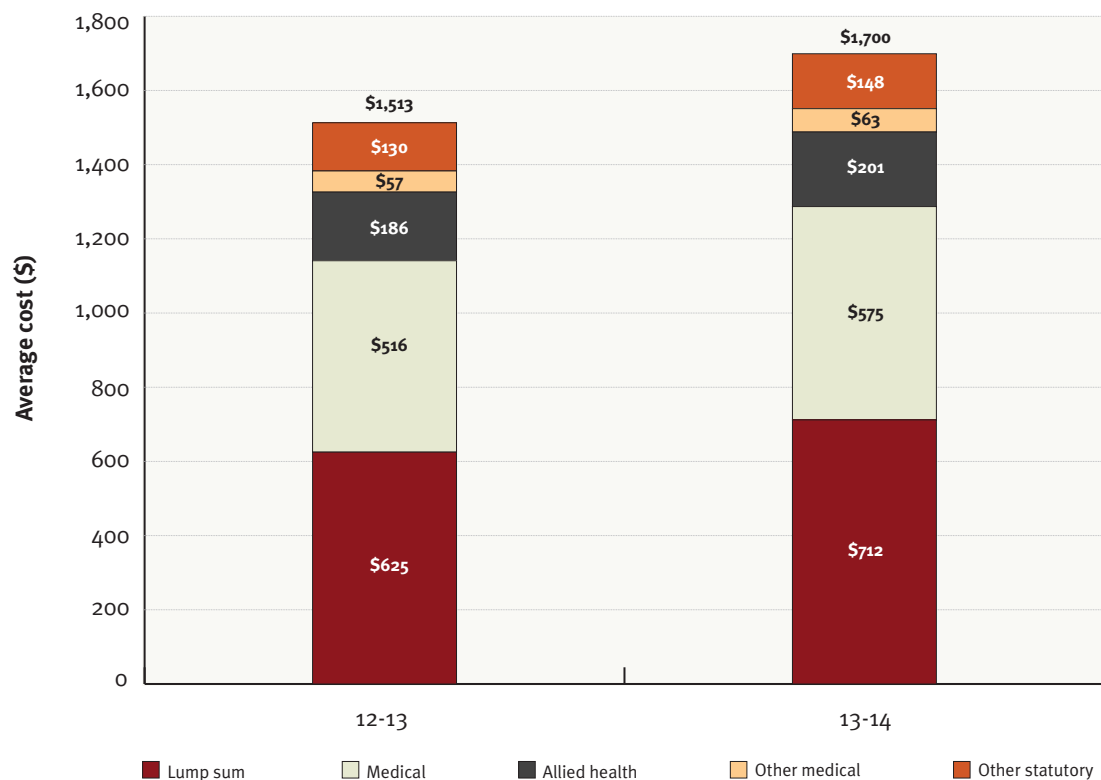
Average finalised medical expense only claim costs

This section looks at a further breakdown of the average costs of finalised medical expense only claims.

The average cost of finalised medical expense only claims has increased by 12.3% from \$1,513 in 12-13 to \$1,700 in 13-14.

The breakdown of the average cost for 13-14 shows 41.9% of the cost is made up of lump sum payments followed by medical and rehabilitation payments of 33.8%. Allied health accounted for 11.8% and other statutory payments account for 8.7%. The remaining 3.7% of the average cost is made up of other medical payments (including hospitalisation).

34 Average finalised medical expense only claim costs by payment type 12-13 and 13-14



Average finalised time lost claim durations

Average finalised time lost claim durations are calculated using finalised time lost claims over a financial year. The number of finalised time lost claims decreased by 4.7% from 51,550 in 12-13 to 49,136 in 13-14.

Durations for finalised time lost claims including the excess paid period by the employer (where applicable) have increased by 12.2%, from 42.6 days in 12-13 to 47.8 days in 13-14.

Almost three-quarters of time lost claims have 40 or less workdays lost (72.1%), while the median workdays lost for all time lost claims is 12 days. This illustrates how the small number of long term claims impact on the average duration. Only 10.1% of time lost claims had more than 130 workdays lost. It is at the 26 week point that the level of compensation benefits payable first begins to decrease (section 150, the Act).

35 Number of time lost claims by workdays lost time band 12-13 and 13-14

Workdays lost timeband	12-13		13-14	
	Number of claims	% of claims	Number of claims	% of claims
1 - 5 days	18,880	36.6%	17,047	34.7%
6 - 10 days	6,769	13.1%	6,230	12.7%
11 - 20 days	6,285	12.2%	6,018	12.2%
21 - 40 days	6,414	12.4%	6,131	12.5%
41 - 65 days	4,049	7.9%	4,047	8.2%
66 - 130 days	4,632	9.0%	4,688	9.5%
131 - 260 days	2,951	5.7%	3,107	6.3%
> 260 days	1,570	3.0%	1,868	3.8%
Total time lost claims	51,550	100.0%	49,136	100.0%

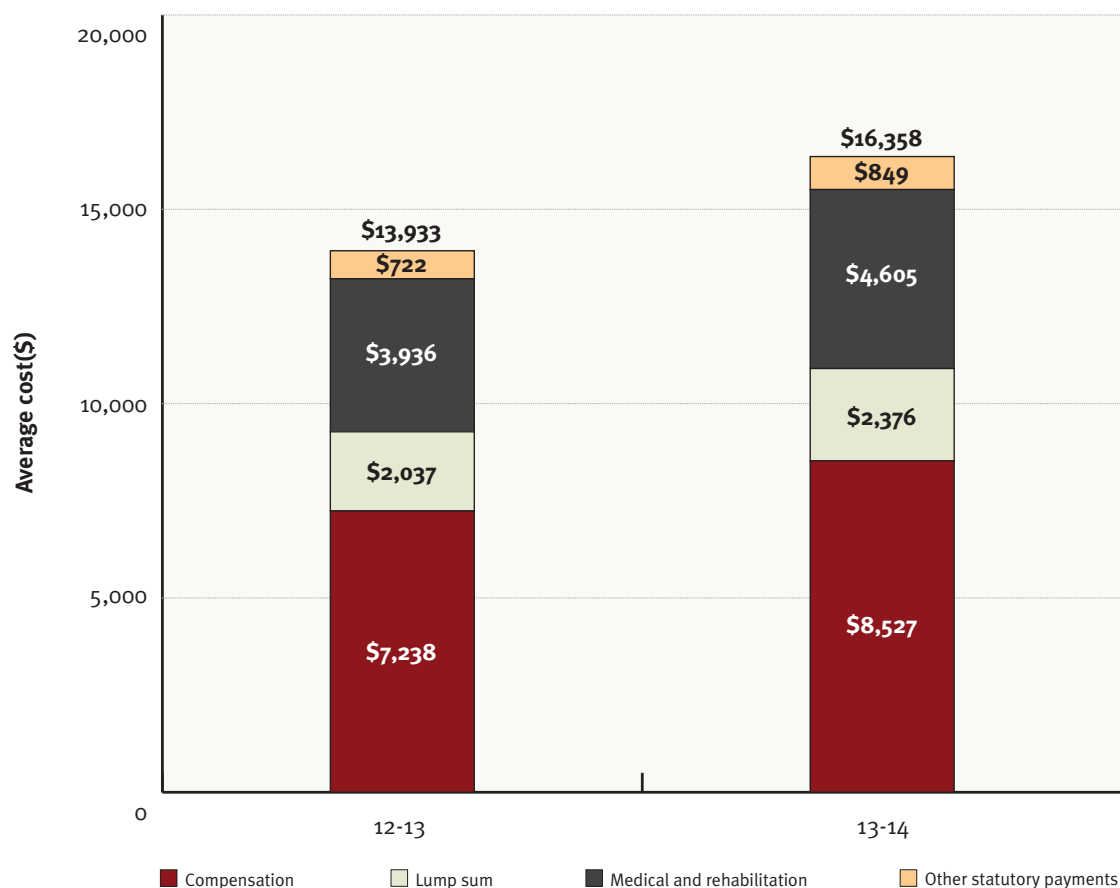
Average finalised time lost claim costs

The average cost of finalised time lost claims has increased by 17.4% from \$13,933 in 12-13 to \$16,358 in 13-14.

The breakdown of the average cost in 13-14 shows over half (52.1%) of the cost is made up of weekly compensation payments.

In 13-14, medical and rehabilitation payments accounted for over a quarter (28.2%) of the average cost and lump sum payments accounted for 14.5%. The remaining 5.2% of the average cost was made up of other statutory payments.

36 Average finalised time lost claim costs by payment type 12-13 and 13-14

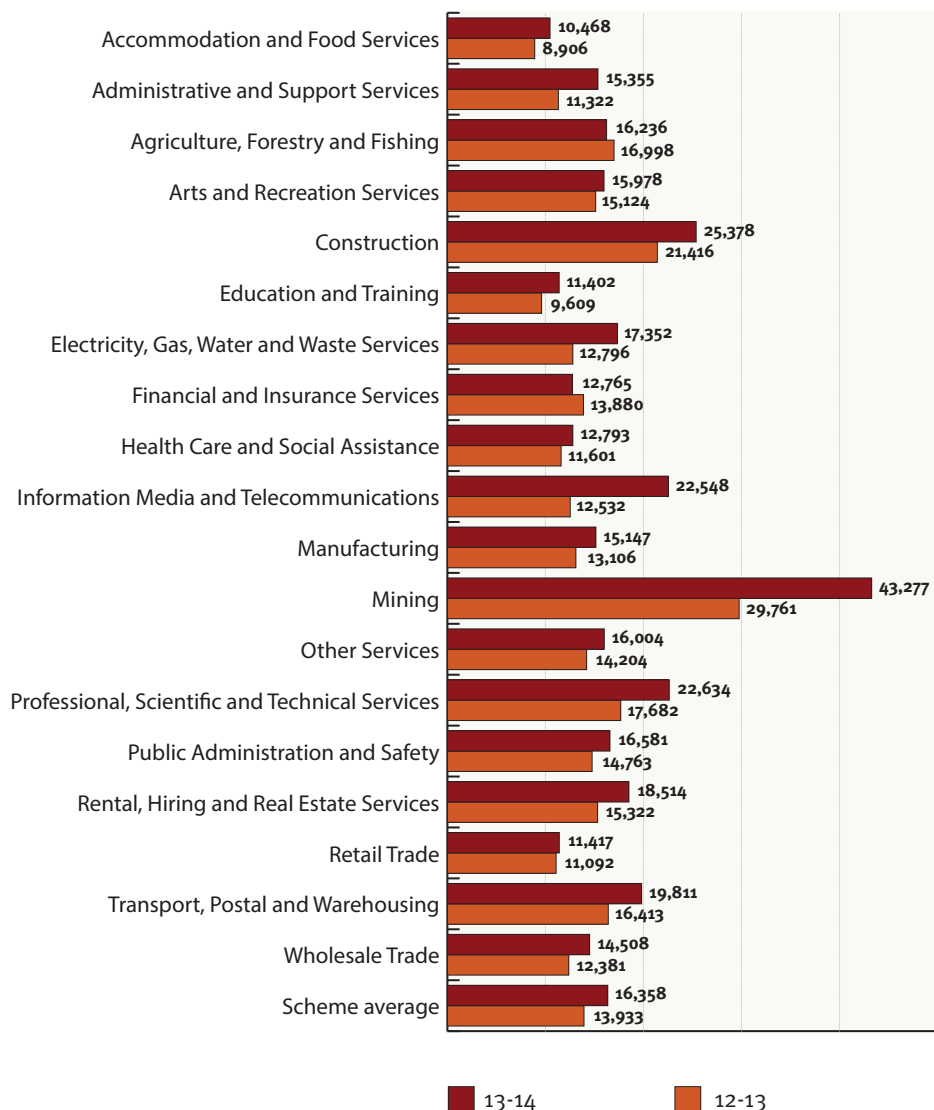


Average cost by industry

Of all industry claims those from the mining industry had the highest average finalised time lost claim cost (\$43,277) partially due to the higher wages paid in the industry. The Australian average weekly earnings (full time adult ordinary time earnings) for employees in the mining industry of \$2,470 are the highest of all industries (Source: ABS, Average Weekly Earnings, Cat No. 6302.0, November 2013, table 10G. Average Weekly Earnings, Industry, Australia (Dollars) - Original - Persons, Full Time Adult Ordinary Time Earnings).

Similarly, industries that tended to have lower average finalised time lost claim cost – for example, accommodation and food services and retail trade – also had the lowest Australian average weekly earnings of all industries (\$1,048 and \$1,032 respectively).

37 Average finalised time lost claim costs by industry 12-13 and 13-14



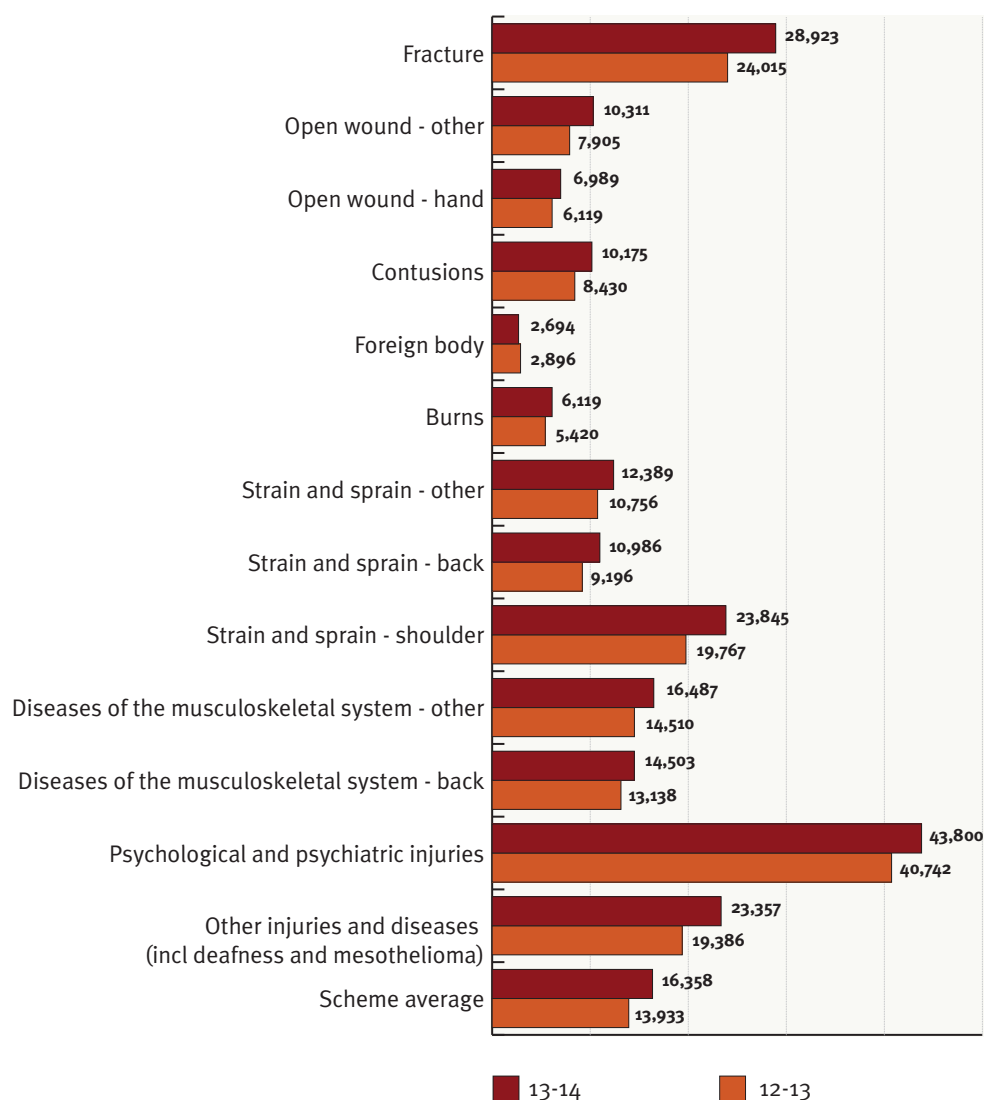
Average cost by injury type

Although psychological and psychiatric injury claims account for only 2.6% of all claims finalised, they are the most expensive with an average finalised time lost claim cost of \$43,800 in 13-14.

In 13-14, the average duration of a psychological or psychiatric injury claim was 149.9 days (143.8 days in 12-13) compared with the overall scheme average of 47.8 days. It is the long duration of psychological and psychiatric injury claims that impacts on the average finalised time lost claim cost for these claims.

The second most expensive injury type was fractures with an average cost of \$28,923 (\$24,015 in 12-13).

38 Average finalised time lost claim cost by injury type 12-13 and 13-14



Claims for damages at common law

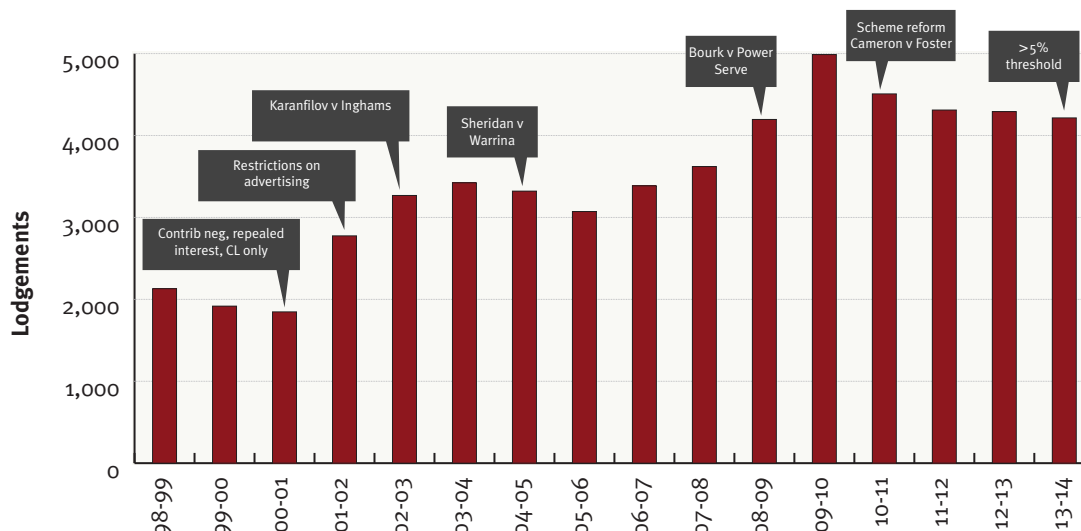
- Common law lodgements have decreased over the last year.
- The majority of lodgements are for injuries that occurred two to three years prior.
- Just under two thirds (66.1%) of common law lodgements have a work related impairment of less than 5%.
- Psychological and psychiatric injury claims represent 8.7% of common law lodgements. They represent only 4.8% of statutory claim lodgements.
- In 13-14, the average settlement cost of a finalised common law claim was \$129,940.

This section reports information about claims for damages at common law (common law claims).

Lodgements

The figure below shows a history of common law lodgements and key events in the Queensland workers' compensation scheme. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

39 Common law lodgements history 98-99 to 13-14



Common law claim lodgements have decreased since 09-10. In 13-14, common law claim lodgements decreased by 2.0% (from 4,299 in 12-13 to 4,215 in 13-14). The figure below shows the common law claim lodgements over the past eight years, by the date of injury.

40 Common law claim lodgements 06-07 to 13-14 by injury year

Injury year	Lodgement year 06-07	Lodgement year 07-08	Lodgement year 08-09	Lodgement year 09-10	Lodgement year 10-11	Lodgement year 11-12	Lodgement year 12-13	Lodgement year 13-14
Pre 1 July 1998	129	83	104	109	44	35	28	35
98-99	6	7	2	4	9	2	0	2
99-00	10	15	7	6	3	2	4	3
00-01	28	10	5	8	7	2	2	0
01-02	21	15	16	8	4	7	3	1
02-03	53	19	12	11	9	9	3	3
03-04	802	59	25	17	11	9	6	5
04-05	1,030	891	43	33	32	12	8	3
05-06	1,159	1,210	917	67	26	24	12	6
06-07	148	1,168	1,306	971	65	40	19	5
07-08		144	1,527	1,575	1,037	65	23	18
08-09			232	1,839	1,371	921	43	24
09-10				340	1,672	1,349	908	51
10-11					218	1,627	1,380	944
11-12						209	1,639	1,440
12-13							221	1,529
13-14								146
Total	3,386	3,621	4,196	4,988	4,508	4,313	4,299	4,215

The majority of common law claims lodged in any given year are for injuries that occurred two to three years prior.

The figure below shows the breakdown of common law claim lodgements in 13-14 by the injured worker's work related impairment assessment.

41 Common law claim lodgements by work related impairment assessment 13-14

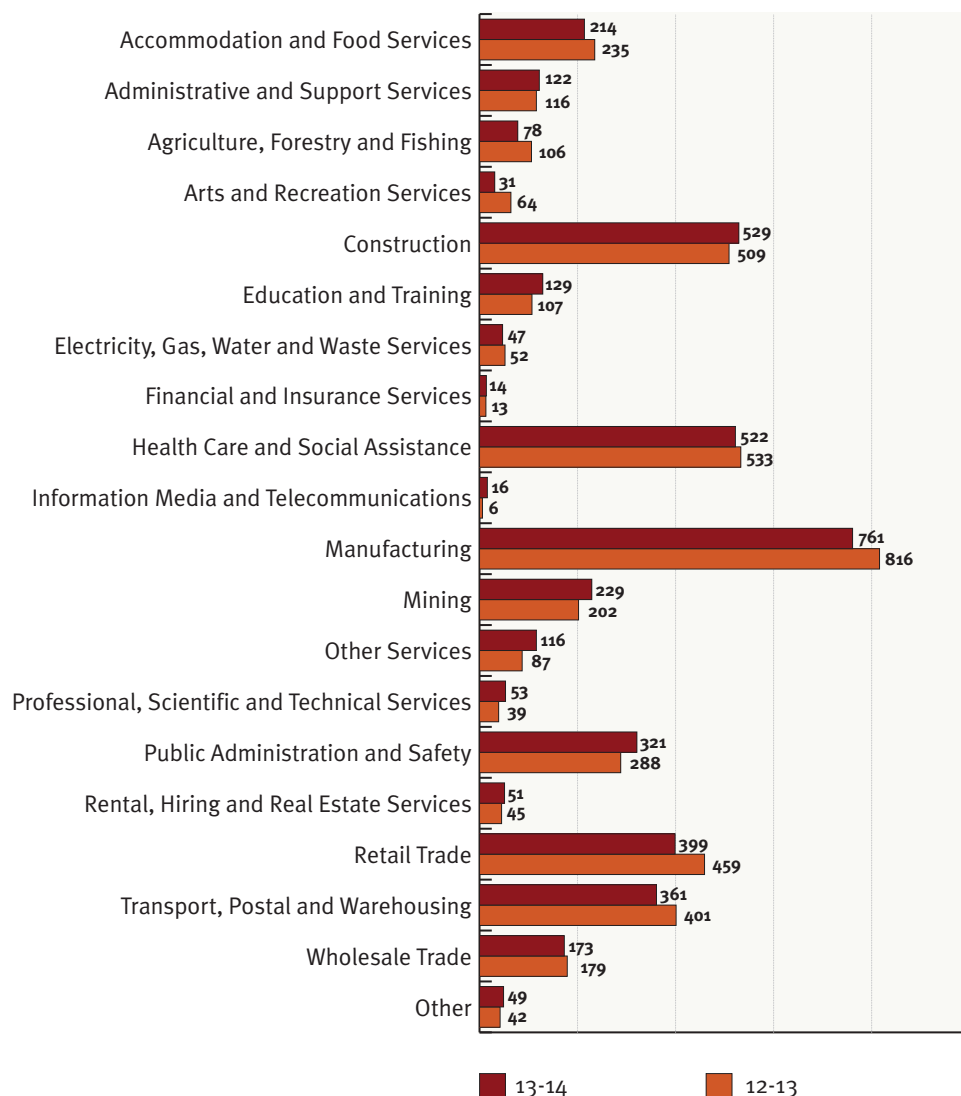
Work related impairment assessment	Common law lodgements	% of common law lodgements
No work related impairment assessed	722	17.1%
0%	1,069	25.4%
0.1%-4.9%	995	23.6%
5.0%-9.9%	818	19.4%
10%-14.9%	343	8.1%
15%-19.9%	94	2.2%
>= 20%	174	4.1%
Total	4,215	100.0%

If the injured worker's work related impairment is less than 20%, the worker has to make an irrevocable decision to either accept a payment of the statutory lump sum compensation for the injury or seek damages at common law. If the work related impairment is 20% or more, the injured worker can accept a lump sum payment and seek damages. Only a small proportion of common law claims (4.1%) are able to access lump sum payment and pursue common law.

Industry

Manufacturing represented the highest proportion of common law claims lodged in the Queensland scheme, accounting for just under a fifth (18.1%) of all common law claim lodgements in 13-14.

42 Common law claim lodgements by industry 12-13 and 13-14



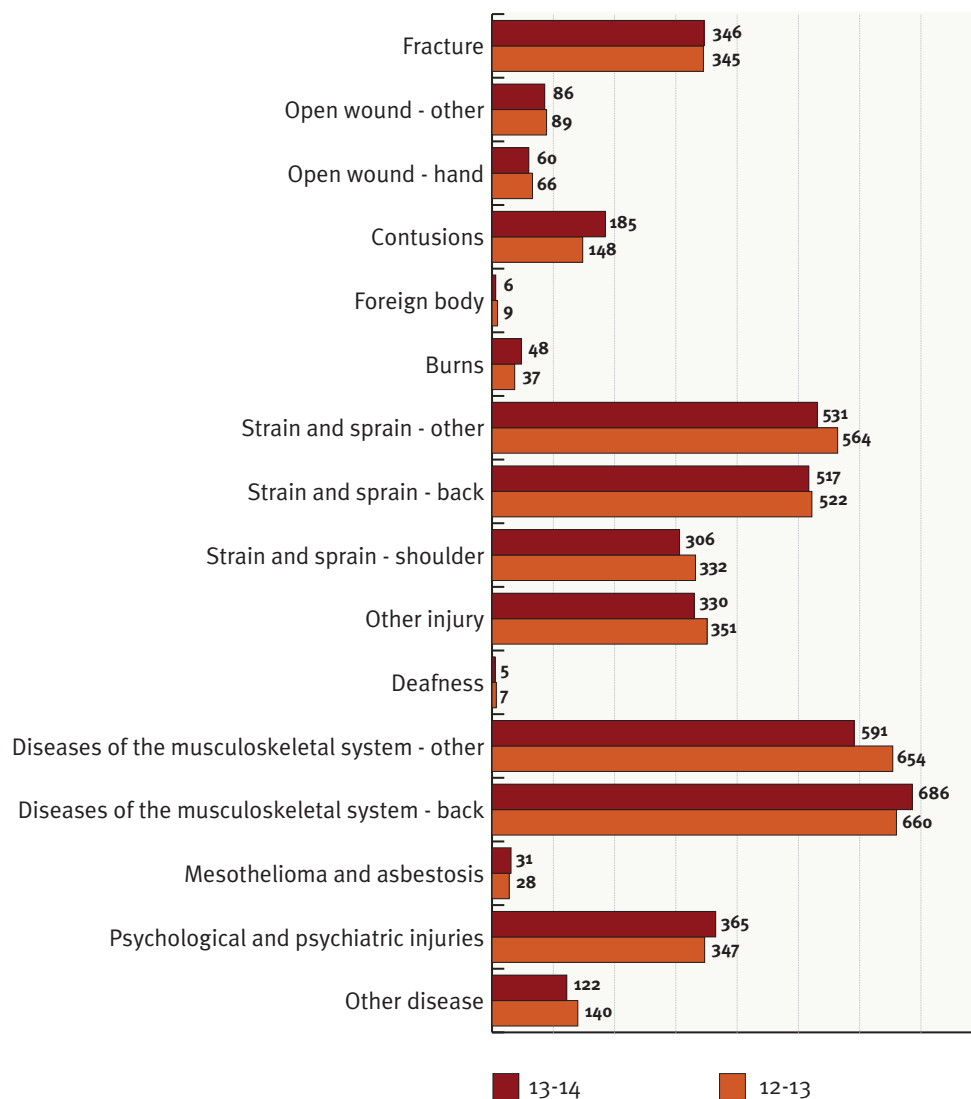
For industry “Other”, this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self employed, working directors) and volunteers.

Injury type

Strain and sprain injury claims accounted for a third (32.1%) of all common law claim lodgements in 13-14.

Although psychological and psychiatric injury claims represented only 4.8% of statutory claim lodgements, they represented 8.7% of all common law claim lodgements in 13-14.

43 Common law claim lodgements by injury type 12-13 and 13-14



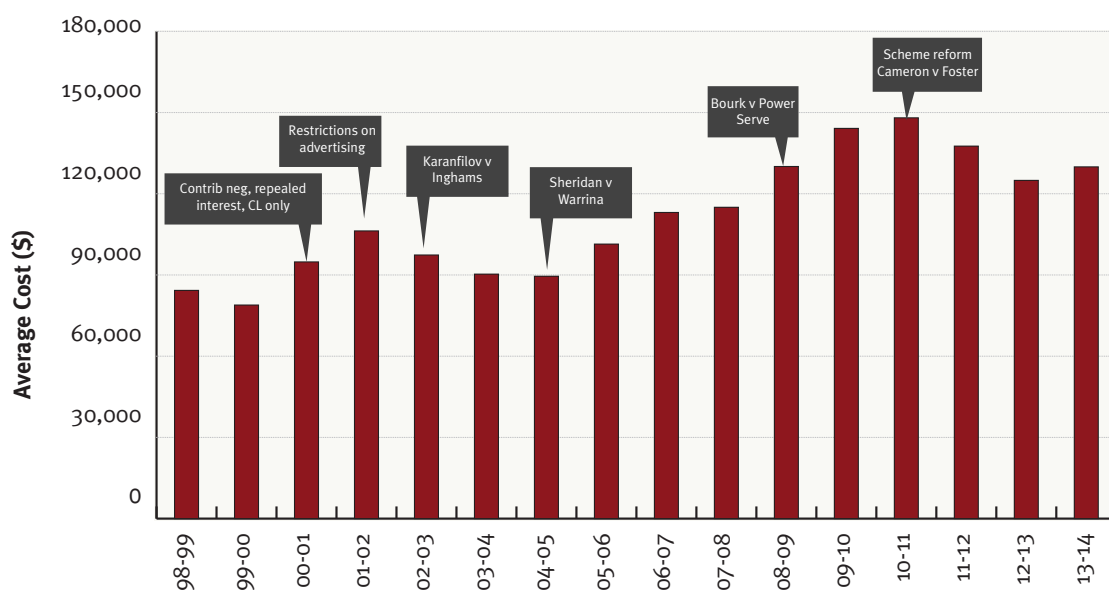
Total common law payments

In 13-14, common law claims cost a total of \$566.0 million. This represented a 7.4% increase from the 12-13 cost of \$526.9 million.

Average costs

The figure below shows a history of average damages settlement for finalised common law claims and key events in the Queensland workers' compensation scheme. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

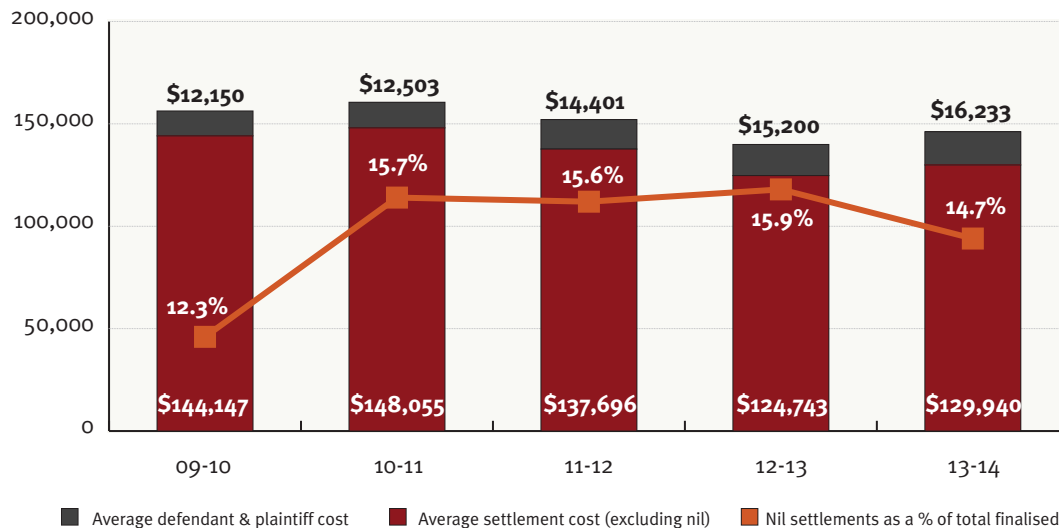
44 Common law average damages settlement history 98-99 to 13-14



Over the past year, the average settlement cost of a finalised common law claim (excluding nil settlements) has increased 4.2% from \$124,743 in 12-13 to \$129,940 in 13-14. The average defendant and plaintiff cost has increased by 6.8% (\$15,200 in 12-13 to \$16,233 in 13-14). It should be noted that restrictions on awarding of plaintiff costs were introduced for injuries occurring on or after 1 January 1996.

In 13-14, there were 631 common law claims finalised with a nil settlement.

45 Average costs for finalised common law claims by payment type 09-10 to 13-14



Heads of damage

Heads of damage consist of two distinct parts: general damages and special damages.

The legislative amendments in 2010 introduced caps on the amount of general damages that can be awarded for pain and suffering, loss of amenity, loss of expectation of life and general disfigurement. The caps align the workers' compensation scheme with the *Civil Liability Act 2003*, and limit the amount of compensation that can be awarded to an injury based on the severity of the injury, or its 'injury scale value'.

Special damages consists of future economic loss, past economic loss, care, and treatment and rehabilitation. This incorporates loss of past and future earnings, future medical needs and care due to the ongoing disability. The amount of future earnings loss must not exceed the amount equal to the present value of 3 times QOTE per week for each week of the period of loss of earnings as specified within the Act.

The figure below shows the average cost of each head of damage for a finalised claim (excluding nil settlements).

46 Heads of damage average cost 12-13 and 13-14

	12-13		13-14		Variance
	\$	%	\$	%	%
General damages	26,081	15.1%	20,640	11.3%	-20.9%
Past economic loss	36,508	21.1%	40,420	22.1%	10.7%
Future economic loss	88,580	51.2%	98,088	53.7%	10.7%
Rehabilitation	18,868	10.9%	21,215	11.6%	12.4%
Gratuitous care	1,223	0.7%	971	0.5%	-20.6%
Other	1,656	1.0%	1,163	0.6%	-29.7%
Gross settlement	172,915	100.0%	182,497	100.0%	5.5%

Average timeframes

For claims lodged in the financial year, the average time from date of injury to lodgement of a common law claim increased by 3.8% (2.09 years in 12-13; 2.17 years in 13-14).

For claims finalised in the financial year, the average time from the lodgement of a common law claim to finalisation has increased 3.8% from 1.06 years in 12-13 to 1.10 years in 13-14.

Review of insurer decisions

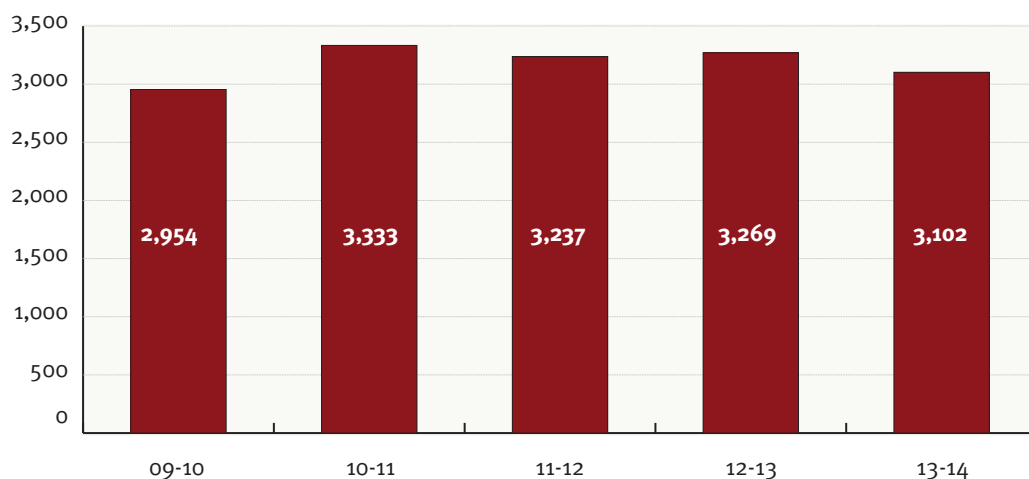
Applications received

A party aggrieved by an insurer decision may apply to the Regulator for review.

Review applications received have decreased slightly (5.1%) in 13-14, down from 3,269 in 12-13 to 3,102 in 13-14.

The figure below shows the number of applications for review received over the last five years.

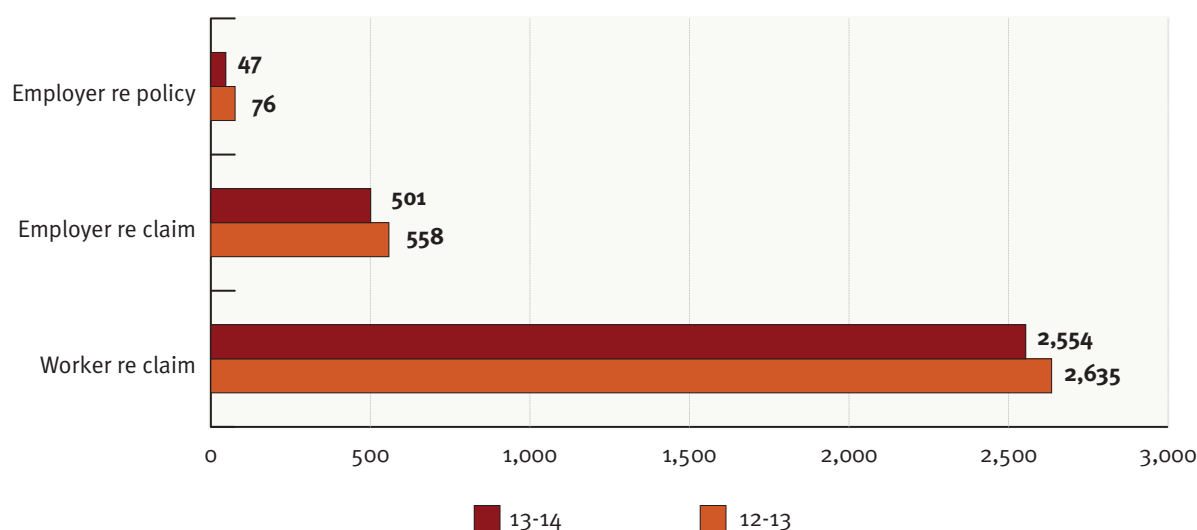
47 Review applications received 09-10 to 13-14



Types of applications

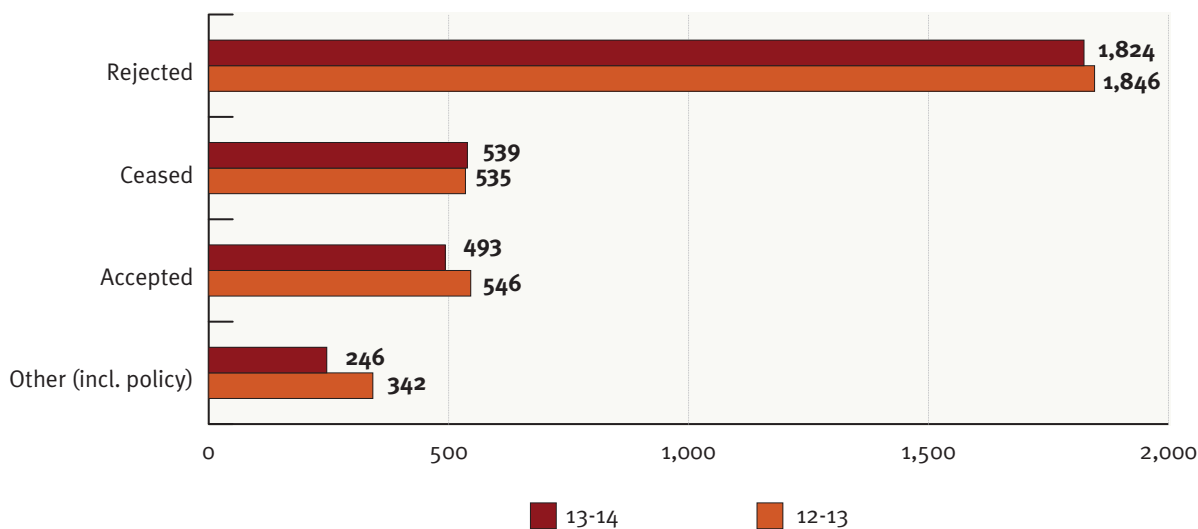
There was little change to the distribution of the type of review applications received in 13-14 compared to the previous financial year. Of the applications lodged, 82.3% were lodged by workers, 16.2% by employers, and the remaining 1.5% of applications were lodged by employers having a policy decision reviewed.

48 Review applications received by type 12-13 and 13-14



Over half (58.8%) of all review applications received in 13-14 related to the insurer decision to reject the claim, 15.9% were lodged after the claim had been accepted and a further 17.4% were following the cessation of the claim.

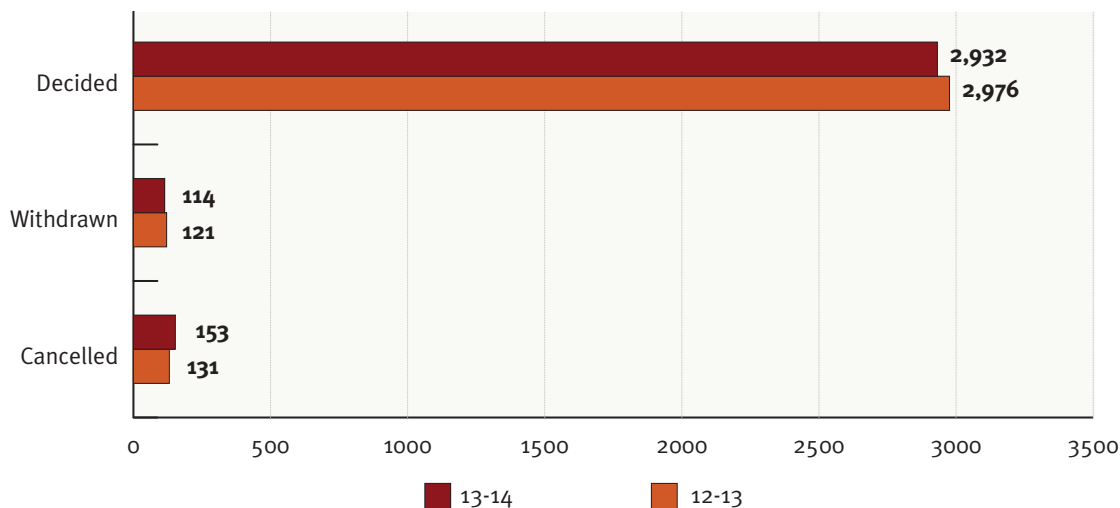
49 Review applications received by insurer decision 12-13 and 13-14



Outcomes

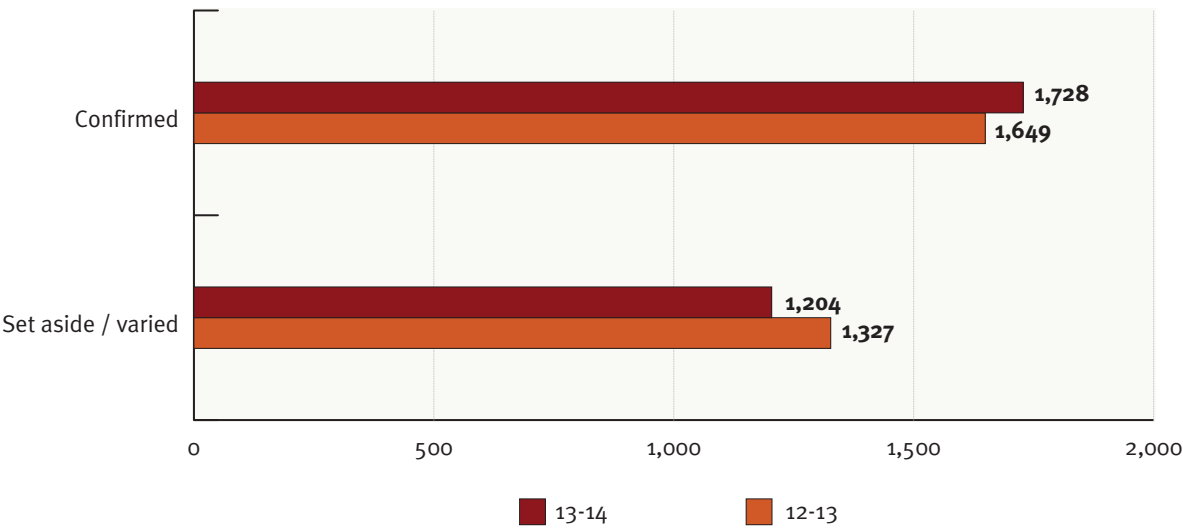
In 13-14, 91.7% of reviews finalised were decided (as compared to 92.2% in 12-13), 4.8% were cancelled (4.1% in 12-13), and the remaining 3.6% were withdrawn (3.7% in 12-13).

50 Review outcomes 12-13 and 13-14



In 13-14, the original decision of the insurer was confirmed by the Review Unit in 58.9% of review decisions made, compared to 55.4% in 12-13.

51 Decided review outcomes 12-13 and 13-14



Appeals of review decisions

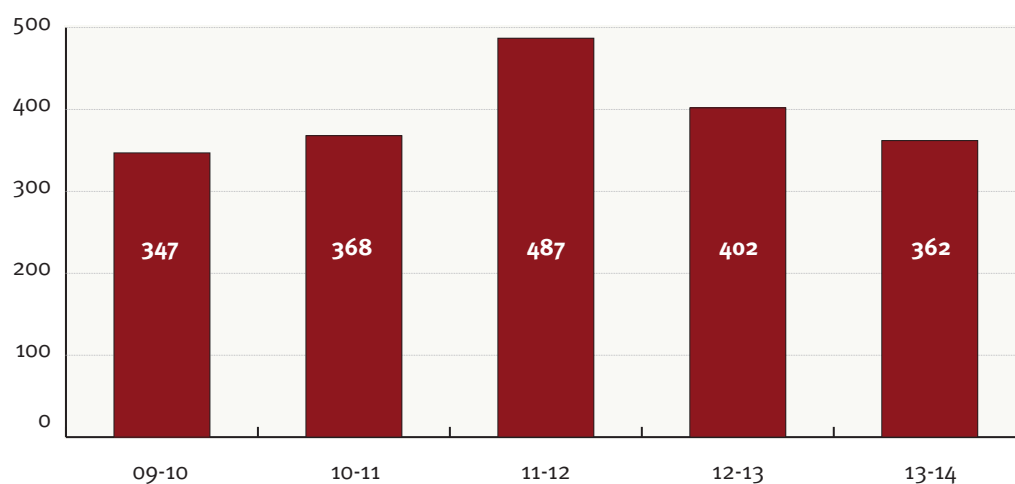
Appeal lodgements

A party aggrieved by a decision of the Regulator may apply for appeal. In December 2010, the QIRC replaced the Industrial Magistrates Court as the appeal body for appeals.

In 13-14, 359 appeals were lodged with the Queensland Industrial Relations Commission (QIRC) and 3 appeals were lodged with the Industrial Magistrate (IM). Of these, 20 further appealed in the Industrial Court.

Appeal lodgements have experienced a decrease of 10.0% in 13-14 compared with 12-13.

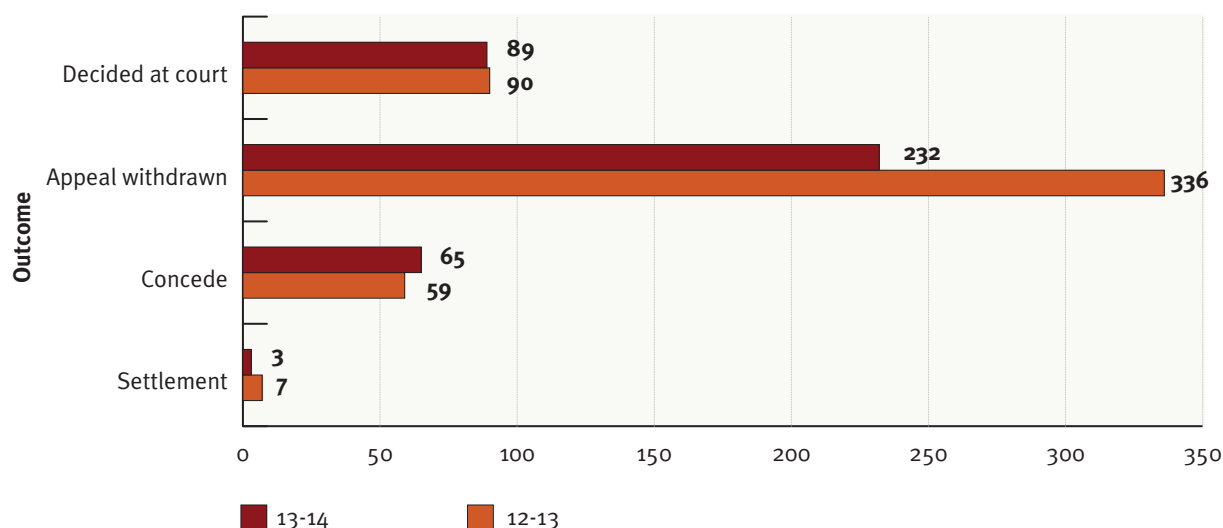
52 Appeals lodged 09-10 to 13-14



Appeal outcomes

In 13-14, 77.1% of appeals were finalised before reaching either the Industrial Relations Commission or Industrial Magistrate, with 77.3% of cases withdrawn by the appellant and a further 22.7% being settled or conceded.

53 Appeals finalised by outcome 12-13 and 13-14



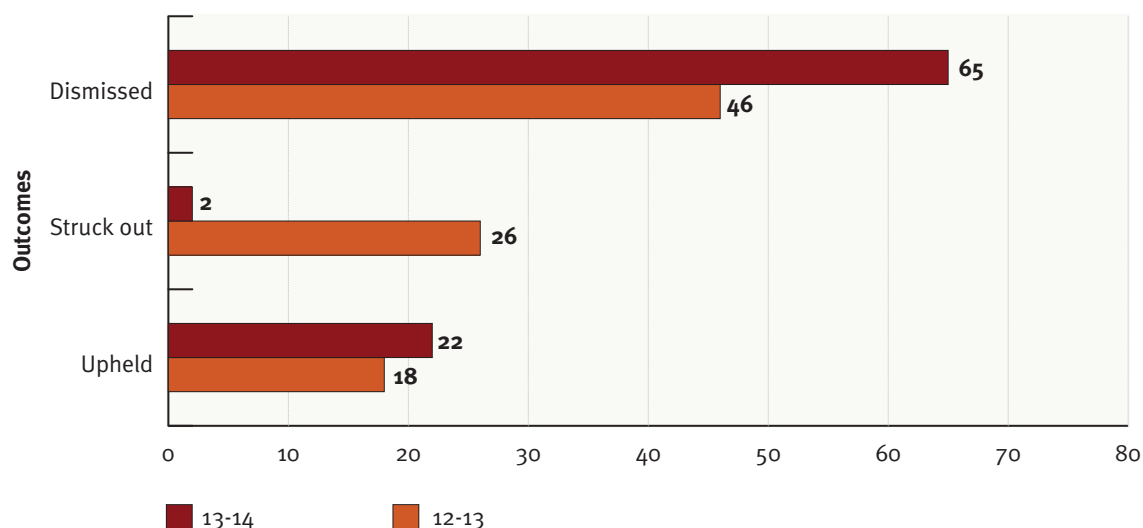
Non-judicial resolution

In 13-14, 300 appeals were finalised before reaching the court or commission. This is a decrease of 25.4% when compared to 402 in 12-13.

Judicial resolution

A total of 89 cases were determined by a court or commission in 13-14, consistent with the 90 cases determined in 12-13. Of these, 67 cases (75.3%) were dismissed or struck-out by the magistrate and 22 cases (24.7%) were upheld in favour of the appellant.

54 Appeals finalised judicially by outcome 12-13 and 13-14



Medical assessment tribunals (MAT)

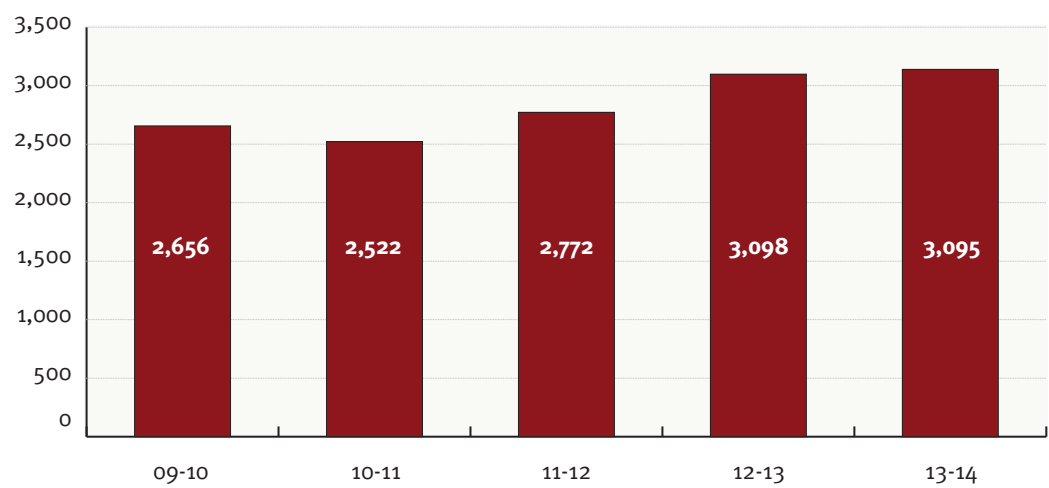
Referrals

Medical tribunals are coordinated by the Regulator to determine ongoing incapacity of an injured worker or the assessment of permanent impairment.

In 13-14, 3,095 cases were referred to a MAT. This is consistent with the 3,098 cases referred in 12-13.

The figure below illustrates the number of MAT referrals received over the past five years.

55 MAT referrals received 09-10 to 13-14



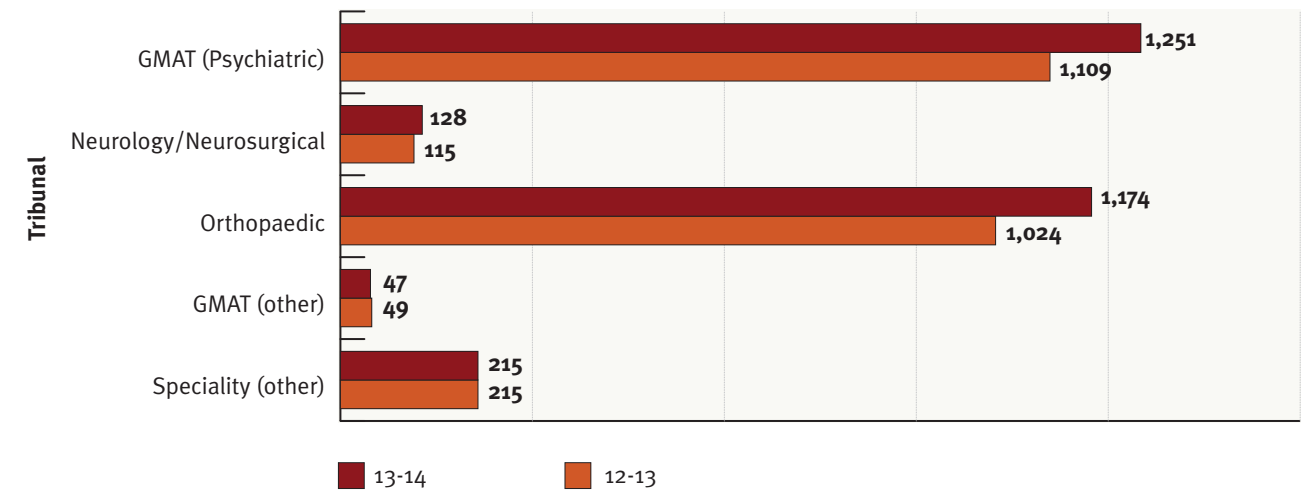
Cases determined

In 13-14, 2,815 cases were determined by a MAT. This represented a 12.1% increase from 12-13 (2,512 determinations).

Of the cases heard in 13-14, 44.4% (1,251) were heard at a General Medical Assessment Tribunal – Psychiatric compared to 44.1% (1,109) in 12-13.

A further 41.7% (1,174) of cases in 13-14 were determined at an Orthopaedic Tribunal as compared to 40.8% in 12-13, representing an increase of 14.6%.

56 Cases determined by tribunal type 12-13 and 13-14



The figure below shows the average number of cases heard per tribunal in 12-13 and 13-14.

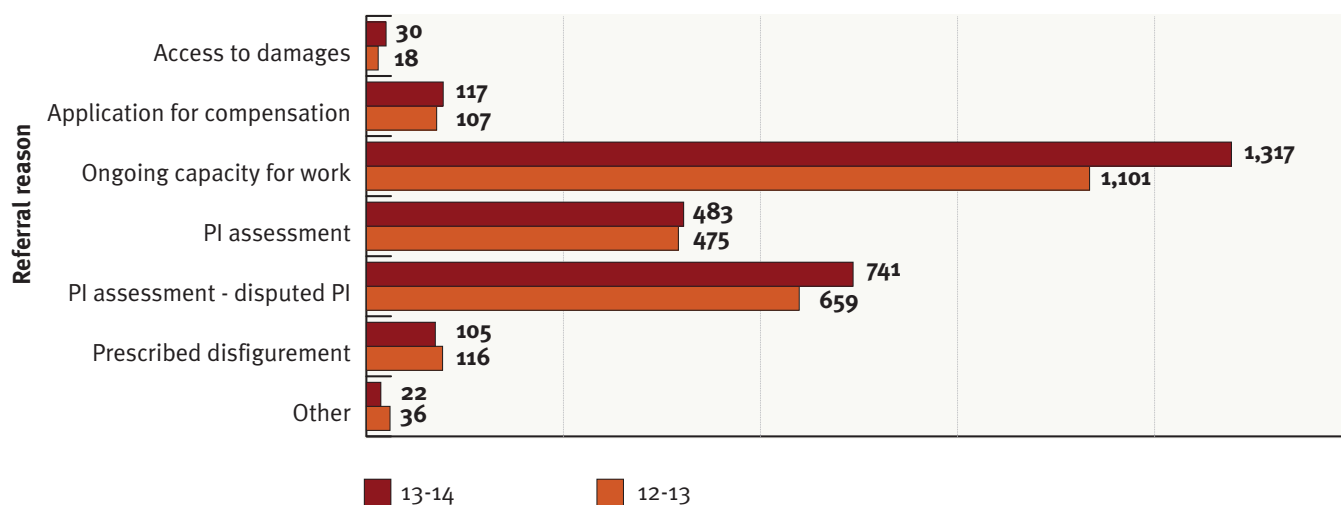
57 Average number of cases heard per tribunal by tribunal type 12-13 and 13-14

Tribunal	Average number of cases heard per tribunal	
	12-13	13-14
GMAT (Psychiatric)	2.5	2.6
Neurology/Neurosurgical	1.9	1.9
Orthopaedic	2.3	2.4
GMAT (Other)	1.5	1.7
Speciality (other)	4.4	3.6
Total	2.4	2.5

Referral reason

In 13-14, 43.5% of the cases determined by the MAT were for permanent impairment (PI) assessment, compared to 45.1% in 12-13.

58 Cases determined by referral reason 12-13 and 13-14



There has been an increase in the proportion of referrals for assessment of ongoing capacity for work (up from 43.8% in 12-13 to 46.8% in 13-14).

Appendix 1: Statistics by sub-industry

59 Statutory claim lodgements, statutory claim payments, average finalised time lost claim costs and durations by industry and sub-industry 12-13 and 13-14

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Accommodation and Food Services	6,214	5,936	-4.5%	31.7	33.7	6.1%	8,906	10,468	17.5%	36.9	42.0	13.8%
Accommodation	1,659	1,726	4.0%	8.5	8.5	0.1%	9,296	10,361	11.5%	35.6	39.8	11.8%
Food and Beverage Services	4,315	3,989	-7.6%	22.1	24.3	9.8%	8,720	10,479	20.2%	37.3	42.8	14.7%
Labour Hire	240	221	-7.9%	1.1	0.9	-21.7%	9,683	11,217	15.8%	39.6	45.0	13.6%
Administrative and Support Services	2,872	2,660	-7.4%	23.2	23.0	-1.1%	11,322	15,355	35.6%	46.1	52.8	14.5%
Administrative Services	758	748	-1.3%	5.5	5.2	-6.1%	14,330	18,848	31.5%	47.4	55.1	16.2%
Building Cleaning, Pest Control and Other Support Services	1,929	1,835	-4.9%	17.4	17.3	-0.5%	10,603	14,602	37.7%	46.5	53.0	14.0%
Labour Hire	185	77	-58.4%	0.3	0.5	50.8%	5,416	9,420	73.9%	18.3	22.5	23.0%
Agriculture, Forestry and Fishing	2,026	2,400	18.5%	21.5	23.7	10.4%	16,998	16,236	-4.5%	52.1	51.3	-1.5%
Agriculture	1,646	1,713	4.1%	16.6	18.7	12.6%	15,864	16,041	1.1%	51.0	50.7	-0.6%
Agriculture, Forestry and Fishing Support Services	180	495	175.0%	2.3	3.5	47.8%	21,367	21,065	-1.4%	63.3	66.3	4.7%
Aquaculture	26	35	34.6%	1.2	0.2	-82.9%	63,684*	25,297	-60.3%	87.1*	40.2	-53.8%
Fishing, Hunting and Trapping	31	32	3.2%	0.3	0.3	16.9%	18,988	16,591	-12.6%	46.4	63.9	37.7%
Forestry and Logging	15	15	0.0%	0.5	0.5	-12.3%	55,796*	23,721*	-57.5%	141.5*	74.0*	-47.7%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Labour Hire	128	110	-14.1%	0.6	0.6	4.5%	7,651	7,633	-0.2%	29.3	30.1	2.7%
Arts and Recreation Services	1,496	1,340	-10.4%	12.1	12.1	0.2%	15,124	15,978	5.6%	50.5	53.1	5.1%
Creative and Performing Arts Activities	141	162	14.9%	0.9	1.1	23.8%	15,933	11,647	-26.9%	50.8	46.0	-9.4%
Gambling Activities	235	157	-33.2%	1.3	0.9	-30.2%	10,367	11,962	15.4%	24.8	35.8	44.4%
Heritage Activities	141	126	-10.6%	0.5	0.6	9.2%	7,225	10,106	39.9%	26.0	41.1	58.1%
Sports and Recreation Activities	971	893	-8.0%	9.3	9.5	2.8%	17,061	17,512	2.6%	59.3	57.3	-3.4%
Labour Hire	8	2	-75.0%	0.1	0.0	-73.9%	703*	91,811*	12959.9%	4.0*	176.5*	4312.5%
Construction	10,683	10,200	-4.5%	112.6	123.7	9.9%	21,416	25,378	18.5%	55.4	66.7	20.4%
Building Construction	1,635	1,398	-14.5%	19.6	17.8	-9.2%	24,018	30,627	27.5%	55.9	72.8	30.2%
Construction Services	6,092	5,849	-4.0%	66.5	67.2	1.0%	19,173	24,589	28.2%	53.5	68.2	27.5%
Heavy and Civil Engineering Construction	1,996	2,180	9.2%	19.1	30.8	61.5%	32,007	26,220	-18.1%	65.0	61.3	-5.7%
Labour Hire	960	773	-19.5%	7.4	7.9	6.3%	18,252	19,005	4.1%	55.4	52.8	-4.7%
Education and Training	6,444	6,169	-4.3%	36.4	35.5	-2.3%	9,609	11,402	18.7%	29.9	33.4	11.7%
Adult, Community and Other Education	185	198	7.0%	2.2	1.3	-40.0%	12,405	25,307	104.0%	48.2	67.6	40.2%
Preschool and School Education	4,282	4,267	-0.4%	26.0	25.1	-3.4%	11,478	12,026	4.8%	33.5	34.3	2.4%
Tertiary Education	1,962	1,694	-13.7%	8.1	9.1	11.8%	6,106	8,561	40.2%	22.2	27.8	25.2%
Labour Hire	15	10	-33.3%	0.0	0.0	-72.2%	1,779*	2,656*	49.3%	10.3*	10.7*	3.9%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Electricity, Gas, Water and Waste Services	1,580	1,279	-19.1%	9.0	10.0	10.1%	12,796	17,352	35.6%	30.2	41.1	36.1%
Electricity Supply	742	582	-21.6%	3.7	4.5	22.1%	15,496	16,989	9.6%	34.3	37.0	7.9%
Gas Supply	19	21	10.5%	0.0	0.1	58.7%	5,411*	12,114*	123.9%	10.0*	20.3*	103.0%
Waste Collection, Treatment and Disposal Services	477	395	-17.2%	3.3	3.4	5.3%	10,155	19,230	89.4%	29.4	51.0	73.5%
Water Supply, Sewerage and Drainage Services	252	214	-15.1%	1.7	1.4	-16.3%	17,466	17,917	2.6%	28.6	37.3	30.4%
Labour Hire	90	67	-25.6%	0.4	0.6	43.9%	5,979	8,336	39.4%	24.2	19.0	-21.5%
Financial and Insurance Services	683	713	4.4%	4.6	5.0	6.8%	13,880	12,765	-8.0%	44.0	42.1	-4.3%
Auxiliary Finance and Insurance Services	139	144	3.6%	0.9	0.9	3.7%	16,094	13,196	-18.0%	44.2	43.3	-2.0%
Finance	314	285	-9.2%	2.4	2.2	-8.2%	15,753	14,310	-9.2%	50.3	51.1	1.6%
Insurance and Superannuation Funds	222	278	25.2%	1.2	1.7	39.5%	10,023	9,107	-9.1%	35.2	25.9	-26.4%
Labour Hire	8	6	-25.0%	0.1	0.1	-9.7%	891*	54,365*	6001.6%	3.7*	153.8*	4056.8%
Health Care and Social Assistance	12,371	11,499	-7.0%	88.6	82.9	-6.5%	11,601	12,793	10.3%	42.9	46.5	8.4%
Hospitals	4,583	4,299	-6.2%	42.1	35.1	-16.7%	14,162	14,924	5.4%	47.1	48.5	3.0%
Medical and Other Health Care Services	1,391	1,410	1.4%	10.6	11.2	5.6%	15,504	13,579	-12.4%	39.9	41.9	5.0%
Residential Care Services	3,806	3,216	-15.5%	20.0	17.9	-10.2%	8,326	10,446	25.5%	40.3	45.7	13.4%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Social Assistance Services	2,496	2,490	-0.2%	15.1	17.4	15.1%	9,272	11,148	20.2%	39.0	44.9	15.1%
Labour Hire	95	84	-11.6%	0.8	1.3	53.4%	21,144	18,778	-11.2%	62.4	68.7	10.1%
Information Media and Tele-communications	381	407	6.8%	3.3	3.4	1.2%	12,532	22,548	79.9%	36.0	61.2	70.0%
Broadcasting (except Internet)	79	58	-26.6%	0.4	0.5	43.0%	10,681	12,784	19.7%	35.3	34.2	-3.1%
Internet Publishing and Broadcasting	4	0		0.0	0.0	0.0%	3,055*	12,853*	320.7%	9.0*	37.5*	316.7%
Internet Service Providers, Web Search Portals and Data Processing Services	33	31	-6.1%	0.4	0.3	-33.4%	15,492	30,106	94.3%	42.2	72.3	71.3%
Library and Other Information Services	14	19	35.7%	0.0	0.1	227.9%	3,976*	15,346*	286.0%	8.7*	57.0*	555.2%
Motion Picture and Sound Recording Activities	74	135	82.4%	0.7	0.9	28.5%	14,321	16,273	13.6%	35.3	49.7	40.8%
Publishing (except Internet and Music Publishing)	115	105	-8.7%	1.2	0.7	-40.0%	15,226	21,433	40.8%	44.7	51.7	15.7%
Tele-communications Services	55	49	-10.9%	0.5	0.8	81.3%	6,141	37,959	518.1%	29.5	124.5	322.0%
Labour Hire	7	10	42.9%	0.2	0.0	-81.0%	28,604*	45,718*	59.8%	43.1*	75.6*	75.4%
Manufacturing	16,712	14,391	-13.9%	97.4	89.8	-7.8%	13,106	15,147	15.6%	36.0	39.7	10.3%
Basic Chemical and Chemical Product Manufacturing	431	325	-24.6%	2.3	2.9	24.9%	16,625	21,083	26.8%	34.4	50.8	47.7%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Beverage and Tobacco Product Manufacturing	260	270	3.8%	1.1	1.1	-2.3%	13,423	14,634	9.0%	44.8	42.5	-5.1%
Fabricated Metal Product Manufacturing	3,650	3,090	-15.3%	20.7	15.7	-23.8%	13,832	16,339	18.1%	36.9	39.5	7.0%
Food Product Manufacturing	4,259	3,552	-16.6%	24.0	21.9	-9.0%	12,363	11,896	-3.8%	33.3	31.8	-4.5%
Furniture and Other Manufacturing	388	368	-5.2%	3.8	3.2	-17.6%	15,103	20,064	32.8%	42.4	62.5	47.4%
Machinery and Equipment Manufacturing	1,554	1,276	-17.9%	9.4	8.5	-9.8%	12,865	15,043	16.9%	33.5	37.9	13.1%
Non-Metallic Mineral Product Manufacturing	791	705	-10.9%	4.8	7.1	48.3%	14,794	24,216	63.7%	41.2	57.8	40.3%
Petroleum and Coal Product Manufacturing	107	93	-13.1%	0.6	0.7	11.4%	19,026	35,053	84.2%	33.6	74.2	120.8%
Polymer Product and Rubber Product Manufacturing	509	526	3.3%	3.3	2.6	-20.2%	16,491	10,971	-33.5%	39.0	35.8	-8.2%
Primary Metal and Metal Product Manufacturing	769	673	-12.5%	4.5	4.1	-9.3%	18,213	22,716	24.7%	41.9	50.8	21.2%
Printing (including the Reproduction of Recorded Media)	203	180	-11.3%	1.1	1.2	9.3%	8,837	14,206	60.8%	31.5	42.7	35.6%
Pulp, Paper and Converted Paper Product Manufacturing	151	164	8.6%	1.2	0.8	-37.4%	40,013	13,904	-65.3%	62.1	26.5	-57.3%
Textile, Leather, Clothing and Footwear Manufacturing	171	196	14.6%	1.6	1.4	-12.1%	15,866	17,057	7.5%	50.7	55.3	9.1%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Transport Equipment Manufacturing	1,504	1,384	-8.0%	6.9	7.8	12.4%	10,261	14,275	39.1%	32.6	36.8	12.9%
Wood Product Manufacturing	796	728	-8.5%	6.0	5.7	-3.6%	13,881	17,014	22.6%	45.3	48.2	6.4%
Labour Hire	1,169	861	-26.3%	6.1	5.3	-14.1%	9,119	13,801	51.3%	31.3	41.7	33.2%
Mining	3,254	2,656	-18.4%	47.7	46.9	-1.8%	29,761	43,277	45.4%	59.9	81.8	36.6%
Coal Mining	1,362	1,149	-15.6%	21.8	22.9	5.2%	37,992	47,746	25.7%	60.0	80.2	33.7%
Exploration and Other Mining Support Services	674	511	-24.2%	9.3	8.8	-4.7%	23,501	41,304	75.8%	66.8	101.8	52.4%
Metal Ore Mining	625	485	-22.4%	7.8	8.0	2.3%	24,715	40,307	63.1%	42.2	69.5	64.7%
Non-Metallic Mineral Mining and Quarrying	367	268	-27.0%	4.2	4.1	-3.7%	29,783	33,742	13.3%	74.7	74.4	-0.4%
Oil and Gas Extraction	73	74	1.4%	1.3	0.7	-46.6%	18,336	33,221	81.2%	49.9	75.4	51.1%
Labour Hire	153	169	10.5%	3.3	2.4	-29.4%	28,202	48,073	70.5%	65.1	67.8	4.1%
Other Services	3,065	3,280	7.0%	20.3	21.5	6.0%	14,204	16,004	12.7%	44.5	47.2	6.1%
Personal and Other Services	1,111	1,064	-4.2%	7.1	7.3	2.5%	12,738	14,485	13.7%	47.1	48.7	3.4%
Repair and Maintenance	1,675	1,637	-2.3%	12.0	12.3	1.8%	15,563	18,022	15.8%	42.9	48.2	12.4%
Labour Hire	279	579	107.5%	1.2	2.0	71.0%	13,092	11,130	-15.0%	41.4	33.9	-18.1%
Professional, Scientific and Technical Services	1,887	1,663	-11.9%	16.3	13.6	-16.8%	17,682	22,634	28.0%	42.1	56.3	33.7%
Computer System Design and Related Services	141	117	-17.0%	1.6	0.7	-54.6%	26,106	13,137	-49.7%	43.7	37.6	-14.0%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	1,729	1,525	-11.8%	14.6	12.4	-15.0%	16,999	23,561	38.6%	42.3	58.3	37.8%
Labour Hire	17	21	23.5%	0.1	0.5	218.7%	1,730*	27,191*	1471.7%	6.0*	60.1*	901.7%
Public Administration and Safety	7,847	6,868	-12.5%	65.1	63.2	-2.9%	14,763	16,581	12.3%	42.3	45.5	7.6%
Defence	87	70	-19.5%	0.4	0.4	8.1%	9,008	11,936	32.5%	30.9	36.2	17.2%
Public Administration	4,026	3,426	-14.9%	30.6	31.4	2.5%	13,226	13,861	4.8%	38.2	39.5	3.4%
Public Order, Safety and Regulatory Services	3,555	3,265	-8.2%	32.8	30.3	-7.6%	17,108	19,977	16.8%	48.4	52.5	8.5%
Labour Hire	179	107	-40.2%	1.2	1.1	-14.3%	11,120	14,732	32.5%	35.7	48.2	35.0%
Rental, Hiring and Real Estate Services	1,079	1,027	-4.8%	8.0	7.1	-11.2%	15,322	18,514	20.8%	47.7	54.8	14.9%
Property Operators and Real Estate Services	414	406	-1.9%	3.5	3.0	-14.0%	17,901	15,173	-15.2%	62.5	53.9	-13.8%
Rental and Hiring Services (except Real Estate)	643	606	-5.8%	4.5	4.0	-9.9%	13,605	20,925	53.8%	38.4	55.7	45.1%
Labour Hire	22	15	-31.8%	0.0	0.1	91.5%	38,940*	14,641*	-62.4%	134.3*	47.3*	-64.8%
Retail Trade	8,238	7,971	-3.2%	48.2	50.8	5.4%	11,092	11,417	2.9%	38.4	38.4	0.0%
Food Retailing	3,235	3,147	-2.7%	18.1	18.5	1.8%	10,622	11,734	10.5%	37.9	37.5	-1.1%
Fuel Retailing	232	239	3.0%	2.7	1.6	-38.8%	15,560	18,206	17.0%	66.0	71.6	8.5%
Motor Vehicle and Motor Vehicle Parts Retailing	1,312	1,248	-4.9%	7.6	7.2	-5.3%	11,789	12,822	8.8%	37.9	35.0	-7.7%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance	12-13	13-14	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	47	46	-2.1%	0.5	0.4	-11.4%	11,814	15,441	30.7%	47.1	60.3	28.0%
Other Store-Based Retailing	3,218	3,113	-3.3%	18.1	21.7	20.1%	11,066	10,394	-6.1%	36.6	37.9	3.6%
Labour Hire	194	178	-8.2%	1.2	1.3	11.0%	8,004	7,584	-5.2%	35.7	33.8	-5.3%
Transport, Postal and Warehousing	6,838	6,316	-7.6%	70.0	69.8	-0.2%	16,413	19,811	20.7%	51.2	56.5	10.4%
Air and Space Transport	661	553	-16.3%	4.3	4.6	6.9%	10,206	12,686	24.3%	36.6	42.7	16.7%
Other Transport	173	193	11.6%	1.8	1.3	-26.5%	11,700	12,830	9.7%	41.1	39.7	-3.4%
Postal and Courier Pick-up and Delivery Services	188	175	-6.9%	2.3	1.8	-22.5%	17,864	27,575	54.4%	69.4	74.8	7.8%
Rail Transport	937	642	-31.5%	7.0	7.2	2.4%	17,920	26,046	45.3%	23.4	35.9	53.4%
Road Transport	3,321	3,207	-3.4%	42.5	42.7	0.5%	18,456	21,691	17.5%	59.3	64.1	8.1%
Transport Support Services	740	699	-5.5%	6.2	6.4	2.7%	14,738	17,637	19.7%	42.8	48.8	14.0%
Warehousing and Storage Services	347	365	5.2%	1.8	2.4	31.4%	12,249	16,454	34.3%	39.3	46.3	17.8%
Water Transport	86	78	-9.3%	0.9	0.6	-34.3%	39,479	17,959	-54.5%	96.2	57.2	-40.5%
Labour Hire	385	404	4.9%	3.0	2.8	-7.6%	8,823	15,301	73.4%	34.2	44.0	28.7%
Wholesale Trade	4,882	4,406	-9.8%	31.0	29.6	-4.5%	12,381	14,508	17.2%	38.4	41.5	8.1%
Basic Material Wholesaling	1,395	1,253	-10.2%	9.6	7.6	-20.5%	14,864	14,537	-2.2%	39.5	40.3	2.0%
Commission-Based Wholesaling	121	63	-47.9%	0.6	0.5	-20.7%	12,398	11,766	-5.1%	38.3	45.4	18.5%

	Claims intimations			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	12-13	13-14	Variance	12-13	13-14	Variance	12-13	13-14	Variance	12-13	13-14	Variance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Grocery, Liquor and Tobacco Product Wholesaling	709	661	-6.8%	4.8	5.5	15.2%	11,768	13,803	17.3%	43.5	45.7	5.1%
Machinery and Equipment Wholesaling	1,462	1,304	-10.8%	8.0	8.5	5.5%	10,982	14,209	29.4%	31.0	32.7	5.5%
Motor Vehicle and Motor Vehicle Parts Wholesaling	346	373	7.8%	2.7	2.0	-23.6%	10,649	15,525	45.8%	30.7	39.0	27.0%
Other Goods Wholesaling	658	663	0.8%	4.0	4.9	22.6%	14,636	14,648	0.1%	52.5	48.8	-7.0%
Labour Hire	191	89	-53.4%	1.3	0.6	-55.9%	6,826	17,403	155.0%	26.6	55.9	110.2%
Other	746	826	10.7%	50.3	48.2	-4.2%	32,593	38,576	18.4%	88.5	101.3	14.5%
Total	99,298	92,007	-7.3%	797.3	793.3	-0.5%	13,933	16,358	17.4%	42.6	47.8	12.2%

*Average is based on less than 30 finalised time lost claims.

For industry "Other", this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self employed, working directors) and volunteers.

"Labour hire" pre July 2009 was classified under industry "Property and business services - Employment services". Post June 2009, WorkCover created a "labour hire" classification for each industry.

60 Statutory claim decisions and statutory claim finalisations by industry and sub-industry 13-14

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Accommodation and Food Services	94.2%	5.8%	4,673	3,060	93.5%	0.8%	0.4%	2.7%	0.7%	0.9%	0.9%	0.1%
Accommodation	93.9%	6.1%	1,248	864	93.0%	0.5%	0.2%	3.2%	0.6%	0.9%	1.4%	0.2%
Food and Beverage Services	94.5%	5.5%	3,274	2,106	93.8%	0.8%	0.5%	2.5%	0.8%	0.9%	0.7%	0.0%
Labour Hire	92.1%	7.9%	151	90	91.2%	3.3%	0.0%	3.3%	2.2%	0.0%	0.0%	0.0%
Administrative and Support Services	92.2%	7.8%	2,246	1,697	92.7%	0.4%	0.2%	2.5%	0.9%	1.5%	1.7%	0.1%
Administrative Services	86.9%	13.1%	572	340	89.7%	0.3%	0.3%	5.3%	0.3%	2.1%	2.0%	0.0%
Building Cleaning, Pest Control and Other Support Services	94.2%	5.8%	1,635	1,325	93.6%	0.4%	0.1%	1.7%	1.1%	1.4%	1.6%	0.1%
Labour Hire	84.6%	15.4%	39	32	84.4%	3.1%	3.1%	6.3%	3.1%	0.0%	0.0%	0.0%
Agriculture, Forestry and Fishing	93.7%	6.3%	1,902	1,454	88.8%	1.0%	0.1%	4.7%	1.6%	2.4%	1.4%	0.0%
Agriculture	95.8%	4.2%	1,475	1,178	88.9%	1.1%	0.1%	4.7%	1.4%	2.6%	1.2%	0.0%
Agriculture, Forestry and Fishing Support Services	81.1%	18.9%	254	149	85.9%	0.7%	0.0%	6.0%	1.3%	2.7%	3.4%	0.0%
Aquaculture	96.7%	3.3%	30	17	88.2%	0.0%	0.0%	5.9%	0.0%	0.0%	5.9%	0.0%
Fishing, Hunting and Trapping	86.2%	13.8%	29	17	88.2%	0.0%	0.0%	0.0%	11.8%	0.0%	0.0%	0.0%
Forestry and Logging	100.0%	0.0%	13	9	88.9%	0.0%	0.0%	11.1%	0.0%	0.0%	0.0%	0.0%
Labour Hire	96.0%	4.0%	101	84	94.0%	1.2%	0.0%	1.2%	3.6%	0.0%	0.0%	0.0%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Arts and Recreation Services	94.7%	5.3%	1,174	695	94.4%	1.0%	0.3%	1.9%	0.6%	0.7%	1.0%	0.1%
Creative and Performing Arts Activities	97.3%	2.7%	146	67	97.0%	1.5%	0.0%	1.5%	0.0%	0.0%	0.0%	0.0%
Gambling Activities	81.9%	18.1%	144	68	98.5%	0.0%	0.0%	0.0%	0.0%	1.5%	0.0%	0.0%
Heritage Activities	96.5%	3.5%	113	60	96.6%	0.0%	0.0%	1.7%	0.0%	0.0%	1.7%	0.0%
Sports and Recreation Activities	96.4%	3.6%	769	498	93.2%	1.2%	0.4%	2.2%	0.8%	0.8%	1.2%	0.2%
Labour Hire	100.0%	0.0%	2	2	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Construction	94.1%	5.9%	8,943	4,725	87.1%	1.6%	0.5%	4.6%	2.1%	2.2%	1.8%	0.1%
Building Construction	93.1%	6.9%	1,247	735	87.1%	1.2%	0.5%	3.3%	3.7%	1.5%	2.4%	0.3%
Construction Services	94.5%	5.5%	5,214	2,897	85.8%	1.8%	0.5%	5.7%	1.7%	2.4%	2.0%	0.1%
Heavy and Civil Engineering Construction	94.5%	5.5%	1,888	747	90.4%	1.2%	0.4%	2.4%	2.3%	2.7%	0.6%	0.0%
Labour Hire	90.9%	9.1%	594	346	91.0%	0.9%	1.2%	2.9%	1.4%	1.7%	0.6%	0.3%
Education and Training	93.7%	6.3%	5,542	3,459	97.6%	0.3%	0.3%	0.7%	0.4%	0.3%	0.3%	0.1%
Adult, Community and Other Education	91.1%	8.9%	158	100	86.0%	2.0%	1.0%	6.0%	4.0%	0.0%	1.0%	0.0%
Preschool and School Education	94.3%	5.7%	3,860	2,363	98.3%	0.0%	0.3%	0.4%	0.3%	0.2%	0.4%	0.1%
Tertiary Education	92.8%	7.2%	1,517	990	96.9%	0.6%	0.3%	1.2%	0.3%	0.5%	0.1%	0.1%
Labour Hire	57.1%	42.9%	7	6	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Electricity, Gas, Water and Waste Services	92.4%	7.6%	1,163	510	95.7%	0.6%	0.2%	1.2%	0.2%	1.0%	1.1%	0.0%
Electricity Supply	91.0%	9.0%	533	172	98.2%	0.0%	0.6%	0.0%	0.0%	0.6%	0.6%	0.0%
Gas Supply	90.0%	10.0%	20	7	85.7%	0.0%	0.0%	14.3%	0.0%	0.0%	0.0%	0.0%
Waste Collection, Treatment and Disposal Services	94.7%	5.3%	357	203	92.1%	1.5%	0.0%	2.0%	0.0%	2.0%	2.4%	0.0%
Water Supply, Sewerage and Drainage Services	92.4%	7.6%	196	91	98.9%	0.0%	0.0%	1.1%	0.0%	0.0%	0.0%	0.0%
Labour Hire	93.0%	7.0%	57	37	97.3%	0.0%	0.0%	0.0%	2.7%	0.0%	0.0%	0.0%
Financial and Insurance Services	84.0%	16.0%	592	363	92.6%	0.8%	0.3%	3.3%	0.8%	1.6%	0.6%	0.0%
Auxiliary Finance and Insurance Services	81.4%	18.6%	118	73	86.3%	0.0%	0.0%	6.9%	2.7%	4.1%	0.0%	0.0%
Finance	85.1%	14.9%	255	163	93.3%	0.6%	0.6%	2.5%	0.6%	1.8%	0.6%	0.0%
Insurance and Superannuation Funds	83.9%	16.1%	217	123	95.9%	1.7%	0.0%	1.6%	0.0%	0.0%	0.8%	0.0%
Labour Hire	100.0%	0.0%	2	4	75.0%	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%	0.0%
Health Care and Social Assistance	92.2%	7.8%	9,426	7,770	94.9%	0.3%	0.7%	0.9%	0.5%	1.0%	1.5%	0.2%
Hospitals	92.6%	7.4%	3,513	3,141	95.5%	0.2%	0.9%	0.5%	0.3%	0.8%	1.6%	0.2%
Medical and Other Health Care Services	92.5%	7.5%	1,063	801	94.3%	0.5%	1.0%	1.2%	0.9%	1.0%	0.9%	0.2%
Residential Care Services	91.7%	8.3%	2,717	2,119	94.7%	0.3%	0.7%	0.8%	0.6%	1.2%	1.5%	0.2%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Social Assistance Services	92.2%	7.8%	2,061	1,648	94.5%	0.2%	0.3%	1.5%	0.7%	1.2%	1.4%	0.2%
Labour Hire	93.1%	6.9%	72	61	95.1%	0.0%	1.7%	1.6%	1.6%	0.0%	0.0%	0.0%
Information Media and Telecommunications	94.7%	5.3%	318	199	87.4%	2.0%	0.6%	5.0%	1.0%	1.5%	2.5%	0.0%
Broadcasting (except Internet)	88.6%	11.4%	44	37	89.2%	5.4%	0.0%	2.7%	0.0%	0.0%	2.7%	0.0%
Internet Publishing and Broadcasting	0.0%	0.0%	-	2	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Internet Service Providers, Web Search Portals and Data Processing Services	92.0%	8.0%	25	20	95.0%	0.0%	0.0%	5.0%	0.0%	0.0%	0.0%	0.0%
Library and Other Information Services	82.4%	17.6%	17	5	80.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%
Motion Picture and Sound Recording Activities	99.0%	1.0%	98	42	83.3%	0.0%	0.0%	11.9%	2.4%	0.0%	2.4%	0.0%
Publishing (except Internet and Music Publishing)	93.7%	6.3%	79	58	93.1%	0.0%	0.0%	3.5%	1.7%	1.7%	0.0%	0.0%
Telecommunications Services	97.9%	2.1%	47	28	78.6%	0.0%	3.6%	3.6%	0.0%	7.1%	7.1%	0.0%
Labour Hire	100.0%	0.0%	8	7	71.4%	28.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Manufacturing	95.9%	4.1%	12,446	6,818	93.6%	0.4%	0.7%	1.8%	1.3%	1.0%	1.0%	0.2%
Basic Chemical and Chemical Product Manufacturing	96.2%	3.8%	263	141	95.0%	0.0%	0.0%	1.5%	0.0%	2.1%	0.7%	0.7%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Beverage and Tobacco Product Manufacturing	95.1%	4.9%	183	76	86.8%	1.3%	5.3%	1.3%	4.0%	1.3%	0.0%	0.0%
Fabricated Metal Product Manufacturing	96.5%	3.5%	2,719	1,428	91.5%	0.6%	0.9%	2.4%	2.2%	1.1%	1.0%	0.3%
Food Product Manufacturing	94.2%	5.8%	3,018	1,953	95.2%	0.3%	0.9%	1.1%	0.7%	1.0%	0.7%	0.1%
Furniture and Other Manufacturing	96.9%	3.1%	320	180	91.1%	0.0%	1.1%	2.8%	3.3%	0.0%	1.7%	0.0%
Machinery and Equipment Manufacturing	97.9%	2.1%	1,120	514	94.0%	0.8%	0.2%	2.2%	1.4%	1.2%	0.2%	0.0%
Non-Metallic Mineral Product Manufacturing	94.3%	5.7%	601	257	93.0%	0.4%	0.4%	1.9%	0.0%	1.6%	2.3%	0.4%
Petroleum and Coal Product Manufacturing	91.3%	8.7%	80	25	84.0%	0.0%	0.0%	8.0%	8.0%	0.0%	0.0%	0.0%
Polymer Product and Rubber Product Manufacturing	96.1%	3.9%	456	230	93.9%	0.5%	0.0%	3.5%	1.3%	0.4%	0.0%	0.4%
Primary Metal and Metal Product Manufacturing	94.0%	6.0%	598	207	92.7%	0.5%	0.5%	1.4%	2.4%	1.0%	1.0%	0.5%
Printing (including the Reproduction of Recorded Media)	92.3%	7.7%	155	108	90.8%	0.9%	0.0%	3.7%	2.8%	0.9%	0.9%	0.0%
Pulp, Paper and Converted Paper Product Manufacturing	97.8%	2.2%	136	72	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Textile, Leather, Clothing and Footwear Manufacturing	95.6%	4.4%	160	111	93.7%	1.8%	1.8%	0.0%	0.9%	0.9%	0.9%	0.0%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Transport Equipment Manufacturing	98.1%	1.9%	1,250	567	93.6%	0.7%	0.4%	1.9%	1.2%	1.1%	0.9%	0.2%
Wood Product Manufacturing	98.1%	1.9%	631	415	92.5%	0.7%	0.2%	1.5%	1.0%	1.0%	2.9%	0.2%
Labour Hire	95.1%	4.9%	756	534	95.1%	0.0%	0.8%	1.3%	0.6%	1.1%	1.1%	0.0%
Mining	90.9%	9.1%	2,360	1,235	88.2%	1.0%	0.7%	2.8%	2.1%	2.1%	2.8%	0.3%
Coal Mining	92.0%	8.0%	1,021	520	88.8%	0.6%	0.2%	2.7%	1.5%	2.3%	3.5%	0.4%
Exploration and Other Mining Support Services	90.8%	9.2%	444	276	83.7%	1.4%	1.1%	5.1%	4.0%	1.8%	2.9%	0.0%
Metal Ore Mining	89.2%	10.8%	464	203	92.6%	1.0%	1.5%	1.0%	1.4%	1.0%	1.0%	0.5%
Non-Metallic Mineral Mining and Quarrying	92.6%	7.4%	229	131	88.6%	1.5%	1.5%	0.8%	1.5%	2.3%	3.8%	0.0%
Oil and Gas Extraction	77.8%	22.2%	63	29	89.7%	0.0%	0.0%	3.4%	0.0%	6.9%	0.0%	0.0%
Labour Hire	92.1%	7.9%	139	76	86.9%	2.7%	0.0%	2.6%	2.6%	2.6%	1.3%	1.3%
Other Services	90.6%	9.4%	2,383	1,387	91.4%	0.8%	0.3%	3.0%	1.6%	1.6%	1.2%	0.1%
Personal and Other Services	88.8%	11.2%	839	573	92.0%	0.9%	0.2%	2.8%	0.3%	2.4%	1.4%	0.0%
Repair and Maintenance	95.0%	5.0%	1,288	702	90.5%	0.9%	0.3%	3.1%	2.9%	1.1%	1.1%	0.1%
Labour Hire	75.0%	25.0%	256	112	94.6%	0.0%	0.9%	2.7%	0.9%	0.9%	0.0%	0.0%
Professional, Scientific and Technical Services	92.8%	7.2%	1,306	744	93.1%	0.8%	0.1%	2.2%	1.1%	1.8%	0.9%	0.0%
Computer System Design and Related Services	90.5%	9.5%	95	70	97.1%	0.0%	0.0%	1.5%	0.0%	1.4%	0.0%	0.0%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	93.0%	7.0%	1,194	663	92.9%	0.9%	0.2%	2.1%	1.2%	1.8%	0.9%	0.0%
Labour Hire	94.1%	5.9%	17	11	81.8%	0.0%	0.0%	9.1%	0.0%	0.0%	9.1%	0.0%
Public Administration and Safety	92.2%	7.8%	5,729	4,186	95.2%	0.3%	1.0%	0.6%	0.5%	0.8%	1.4%	0.2%
Defence	91.4%	8.6%	58	42	95.2%	0.0%	0.0%	0.0%	0.0%	2.4%	0.0%	2.4%
Public Administration	91.3%	8.7%	3,218	2,171	94.9%	0.4%	1.3%	0.4%	0.5%	0.6%	1.6%	0.3%
Public Order, Safety and Regulatory Services	93.2%	6.8%	2,353	1,859	95.6%	0.3%	0.6%	0.8%	0.5%	0.9%	1.3%	0.0%
Labour Hire	98.0%	2.0%	100	114	94.7%	0.0%	0.9%	1.7%	0.9%	0.0%	0.9%	0.9%
Rental, Hiring and Real Estate Services	91.7%	8.3%	844	533	89.5%	0.9%	0.2%	3.9%	1.7%	2.1%	1.7%	0.0%
Property Operators and Real Estate Services	88.3%	11.7%	325	207	87.9%	2.5%	0.0%	4.8%	1.9%	1.9%	1.0%	0.0%
Rental and Hiring Services (except Real Estate)	93.7%	6.3%	506	311	90.3%	0.0%	0.3%	3.2%	1.6%	2.3%	2.3%	0.0%
Labour Hire	100.0%	0.0%	13	15	93.3%	0.0%	0.0%	6.7%	0.0%	0.0%	0.0%	0.0%
Retail Trade	94.4%	5.6%	7,131	4,230	92.3%	0.6%	1.1%	2.1%	0.8%	1.3%	1.5%	0.3%
Food Retailing	94.7%	5.3%	2,951	1,452	91.5%	0.6%	1.8%	1.9%	0.5%	1.4%	2.0%	0.3%
Fuel Retailing	88.9%	11.1%	199	133	91.0%	0.0%	0.0%	4.5%	2.3%	0.7%	1.5%	0.0%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Motor Vehicle and Motor Vehicle Parts Retailing	95.8%	4.2%	1,085	658	93.3%	0.6%	0.5%	2.6%	0.8%	1.0%	1.2%	0.0%
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	92.3%	7.7%	39	33	94.0%	0.0%	0.0%	3.0%	3.0%	0.0%	0.0%	0.0%
Other Store-Based Retailing	93.9%	6.1%	2,692	1,804	92.1%	0.8%	0.9%	2.2%	1.0%	1.3%	1.4%	0.3%
Labour Hire	97.0%	3.0%	165	150	98.6%	0.0%	0.0%	0.0%	0.0%	0.7%	0.7%	0.0%
Transport, Postal and Warehousing	92.6%	7.4%	5,471	3,766	93.1%	0.6%	0.7%	1.5%	0.9%	1.5%	1.1%	0.6%
Air and Space Transport	89.3%	10.7%	512	409	98.8%	0.0%	0.5%	0.0%	0.0%	0.2%	0.5%	0.0%
Other Transport	95.4%	4.6%	151	110	93.6%	0.0%	0.9%	0.0%	0.0%	3.7%	1.8%	0.0%
Postal and Courier Pick-up and Delivery Services	92.6%	7.4%	148	119	89.9%	0.9%	0.0%	1.7%	0.9%	5.0%	0.8%	0.8%
Rail Transport	91.6%	8.4%	628	181	84.5%	0.5%	0.6%	0.6%	0.6%	3.3%	2.2%	7.7%
Road Transport	92.1%	7.9%	2,758	2,160	91.9%	0.9%	0.9%	1.7%	1.3%	1.6%	1.3%	0.4%
Transport Support Services	95.1%	4.9%	567	368	95.4%	0.3%	0.0%	1.6%	0.8%	1.1%	0.5%	0.3%
Warehousing and Storage Services	95.6%	4.4%	298	117	96.6%	0.0%	0.0%	1.7%	1.7%	0.0%	0.0%	0.0%
Water Transport	94.1%	5.9%	68	46	97.8%	0.0%	0.0%	2.2%	0.0%	0.0%	0.0%	0.0%
Labour Hire	95.0%	5.0%	341	256	95.3%	0.0%	0.0%	2.7%	0.4%	0.8%	0.8%	0.0%
Wholesale Trade	92.2%	7.8%	3,900	2,179	93.4%	0.4%	0.5%	2.0%	1.2%	1.3%	1.2%	0.0%

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total Claims Decided	Total Time Lost Claims Finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Basic Material Wholesaling	92.9%	7.1%	1,084	576	93.6%	0.4%	0.3%	2.1%	1.2%	1.4%	1.0%	0.0%
Commission-Based Wholesaling	91.4%	8.6%	58	40	92.5%	0.0%	0.0%	2.5%	0.0%	2.5%	2.5%	0.0%
Grocery, Liquor and Tobacco Product Wholesaling	90.6%	9.4%	593	411	92.7%	0.5%	1.2%	1.7%	1.0%	1.0%	1.9%	0.0%
Machinery and Equipment Wholesaling	92.2%	7.8%	1,159	525	95.6%	0.2%	0.2%	1.5%	1.2%	1.1%	0.2%	0.0%
Motor Vehicle and Motor Vehicle Parts Wholesaling	93.0%	7.0%	328	199	93.5%	0.5%	0.0%	2.5%	2.0%	0.0%	1.5%	0.0%
Other Goods Wholesaling	92.1%	7.9%	597	327	90.5%	0.6%	0.3%	3.1%	1.2%	2.2%	2.1%	0.0%
Labour Hire	95.1%	4.9%	81	101	92.1%	0.0%	1.9%	1.0%	2.0%	2.0%	1.0%	0.0%
Other	88.8%	11.2%	205	120	89.2%	1.7%	0.0%	4.1%	0.8%	0.0%	2.5%	1.7%
Total	93.4%	6.6%	77,754	49,130	93.0%	0.6%	0.6%	2.0%	1.0%	1.3%	1.3%	0.2%

For industry “Other”, this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self employed, working directors) and volunteers.

“Labour hire” pre July 2009 was classified under industry “Property and business services - Employment services”. Post June 2009, WorkCover created a “labour hire” classification for each industry.

For the purposes of the above time lost claims finalised figures, all deceased injured workers have been excluded.

Appendix 2: Industry classification codes

All industry codes are based on the workers' compensation insurers' coding of industry to the divisions from the Australian and New Zealand Standard Industry Classification (ANZSIC 2006), ABS. Below are the ANZSIC divisions and subdivisions with corresponding ANZSIC codes.

H	Accommodation and Food Services
44	Accommodation
45	Food and Beverage Services
N	Administrative and Support Services
72	Administrative Services
73	Building Cleaning, Pest Control and Other Support Services
A	Agriculture, Forestry and Fishing
01	Agriculture
05	Agriculture, Forestry and Fishing Support Services
02	Aquaculture
04	Fishing, Hunting and Trapping
03	Forestry and Logging
R	Arts and Recreation Services
90	Creative and Performing Arts Activities
92	Gambling Activities
89	Heritage Activities
91	Sports and Recreation Activities
E	Construction
30	Building Construction
32	Construction Services
31	Heavy and Civil Engineering Construction
P	Education and Training
82	Adult, Community and Other Education
80	Preschool and School Education
81	Tertiary Education
D	Electricity, Gas, Water and Waste Services
26	Electricity Supply
27	Gas Supply
29	Waste Collection, Treatment and Disposal Services
28	Water Supply, Sewerage and Drainage Services
K	Financial and Insurance Services
64	Auxiliary Finance and Insurance Services
62	Finance
63	Insurance and Superannuation Funds
Q	Health Care and Social Assistance
84	Hospitals
85	Medical and Other Health Care Services
86	Residential Care Services
87	Social Assistance Services
J	Information Media and Telecommunications
56	Broadcasting (except Internet)
57	Internet Publishing and Broadcasting
59	Internet Service Providers, Web Search Portals and Data Processing Services
60	Library and Other Information Services
55	Motion Picture and Sound Recording Activities
54	Publishing (except Internet and Music Publishing)

58	Telecommunications Services
C	Manufacturing
18	Basic Chemical and Chemical Product Manufacturing
12	Beverage and Tobacco Product Manufacturing
22	Fabricated Metal Product Manufacturing
11	Food Product Manufacturing
25	Furniture and Other Manufacturing
24	Machinery and Equipment Manufacturing
20	Non-Metallic Mineral Product Manufacturing
17	Petroleum and Coal Product Manufacturing
19	Polymer Product and Rubber Product Manufacturing
21	Primary Metal and Metal Product Manufacturing
16	Printing (including the Reproduction of Recorded Media)
15	Pulp, Paper and Converted Paper Product Manufacturing
13	Textile, Leather, Clothing and Footwear Manufacturing
23	Transport Equipment Manufacturing
14	Wood Product Manufacturing
B	Mining
06	Coal Mining
10	Exploration and Other Mining Support Services
08	Metal Ore Mining
09	Non-Metallic Mineral Mining and Quarrying
07	Oil and Gas Extraction
S	Other Services
95	Personal and Other Services
96	Private Households Employing Staff and Undifferentiated Goods- and Service-Producing Activities of Households for Own Use
94	Repair and Maintenance
M	Professional, Scientific and Technical Services
70	Computer System Design and Related Services
69	Professional, Scientific and Technical Services (Except Computer System Design and Related Services)
O	Public Administration and Safety
76	Defence
75	Public Administration
77	Public Order, Safety and Regulatory Services
L	Rental, Hiring and Real Estate Services
67	Property Operators and Real Estate Services
66	Rental and Hiring Services (except Real Estate)
G	Retail Trade
41	Food Retailing
40	Fuel Retailing
39	Motor Vehicle and Motor Vehicle Parts Retailing

43	Non-Store Retailing and Retail Commission-Based Buying and/or Selling
42	Other Store-Based Retailing
I	Transport, Postal and Warehousing
49	Air and Space Transport
50	Other Transport
51	Postal and Courier Pick-up and Delivery Services
47	Rail Transport
46	Road Transport
52	Transport Support Services
53	Warehousing and Storage Services
48	Water Transport
F	Wholesale Trade
33	Basic Material Wholesaling
38	Commission-Based Wholesaling
36	Grocery, Liquor and Tobacco Product Wholesaling
34	Machinery and Equipment Wholesaling
35	Motor Vehicle and Motor Vehicle Parts Wholesaling
37	Other Goods Wholesaling

Appendix 3: Critical events history

Pre-1997

1. Irrevocable election to access common law was introduced by Workers' Compensation Amendment Act (no 2) 1995 - provisions commenced 1 Jan 1996.
2. Interest on general damages (i.e. for pain and suffering and loss of impairment of the enjoyments of the amenities of life) was abolished.
3. Gratuitous care awards (Griffiths v Kermeyer) were abolished as a head of damage at common law and provision was made that a statutory lump sum payment of a maximum of \$150,000 be awarded (in lieu of gratuitous care awards in common law).
4. It was introduced that the Courts must give consideration to the steps that have been taken by the injured worker to mitigate their damages.
5. Introduction of interest to be paid on heads of damages due to unreasonable delay.

1 Jul 1997 - WorkCover Queensland Act 1996

6. Changed the definition of worker – went from anybody working under a contract of service to a PAYE taxpayer.
7. Changed the definition of injury – went from employment must be a 'significant contributing factor' to employment must be 'the major contributing factor'.
8. Provision for large employers to self-insure.

1 Jul 1999 - WorkCover Queensland Amendment Act 1999

9. Changed the definition of worker – went from PAYE taxpayer to anybody working under a contract of service.
10. Changed definition of an injury – went from employment being 'the major significant factor' to 'a significant contributing factor'.
11. Further diminution of industrial deafness claims reduced from 5% to 1% hearing loss.
12. The 'reasonable person' and 'ordinary susceptibility' tests for stress claims were removed.
13. Claims must be decided in three months not six months.
14. Establishment of a Review unit.

1 Jul 2001 - WorkCover Queensland Amendment Act 2001

15. Increased statutory benefits. Specifically, lump sum increased to \$250,000; maximum statutory benefits increased to \$150,000; increased the amount available for dependents of those fatally injured; reduced criteria required to access statutory gratuitous care.
16. Amended contributory negligence and mitigating loss provisions.
17. Amended interest on general damages and other heads of damages.
18. Introduction of the common law only process.

16 Jun 2002 – Restrictions of advertising from plaintiff lawyers

19. Personal Injuries Proceedings Act 2002 (Qld) places a restriction on lawyers advertising in Queensland. Specifically, it prohibits a lawyer from: "advertising personal injury services except by means of a statement that includes only the lawyers name and contact details, together with information as to any areas of practice or speciality of the lawyer that is published by an 'allowable publication method'. An example of advertising that is restricted is advertising personal injury services on a 'no win, no fee' or other speculative basis.

6 Jun 2003 - Karanfilov v Inghams Enterprises P/L QCA 242

20. The decision in the case of Karanfilov v Inghams Enterprises P/L allowed the gratuitous care damages payment.

1 Jul 2003 - Workers' Compensation & Rehabilitation Act 2003

21. Established Q-COMP as the workers' compensation regulatory authority.
22. Changed the definition of worker – introduced a 'results test' for determining whether an injured person met the criteria for 'worker'.
23. Legislation amendments which affected liability and quantum.

27 Aug 2004 - Sheridan v Warrina Community Co-Operative Ltd & Anor QCA 308

24. The decision in the Sheridan provision eliminated all financial risk for unsuccessful plaintiffs in common law, thereby removing a notable barrier to claims that may previously have been speculative.

1 Nov 2005 - Workers' Compensation & Rehabilitation & Other Acts Amendment Act 2005

25. Increased injured worker benefits by extending the step down in benefits from 39 to 52 weeks.
26. Introduced a new lump sum amount payable to workers with terminal latent onset conditions.
27. Introduced a greater obligation on employers to take all reasonable steps to assist or provide rehabilitation and suitable duties to injured workers.

1 Jul 2006 – Dr Fax Fee

28. WorkCover Queensland introduced Dr Fax Fee, a small financial incentive to encourage doctors to submit claim information quicker.

1 Jan 2008 - Workers' Compensation & Rehabilitation & Other Acts Amendment Bill 2007

29. Reduced the statutory claim decision timeframe to 20 days.
30. Removed the one and two year step down of benefits entitlements (increasing the benefit to 75% of normal weekly earnings and 70% of Queensland ordinary time earnings for 26 weeks to five years.
31. Increased maximum lump sum compensation payable to \$218,000 and improved access to additional lump sum compensation by reducing the work related impairment threshold from 50% to 30%.
32. Unassessed injuries claimed in relation to a common law claim cannot be assessed for PI.

25 Nov 2008 - Workplace Health & Safety & Other Legislation Amendment Act 2008

- 33. New payment introduced for reasonable funeral expenses (2% of maximum death benefit).
- 34. New entitlement of 15% maximum death benefit for dependents of an injured worker with a terminal latent onset condition.

1 Aug 2008 - Bourk v Power Serve Pty Ltd & Anor QCA 225

- 35. The Court of Appeal upheld the decision that the Workplace Health & Safety Act 1995 can provide an alternative route for common law when negligence cannot be proven. This decision was further upheld in 2009 in the decision of Parry v Woolworths Ltd.

1 Dec 2008 - Transport and Other Legislation Amendment Act 2008

- 36. Enabled injured workers to lodge applications by phone.

1 Jul 2010 - Workers' Compensation & Rehabilitation & Other Legislation Amendment Act

- 37. Insurers are obliged to notify Q-COMP of injured workers who fail to return to work (Return to Work Assist).
- 38. Provisions introduced closely modelled on the Civil Liabilities Act 2003, including the regulation of damages paid to a worker, including loss of earnings, general damages determined by assigning an injury scale value, structured settlements, and indexation.

These provisions apply to injuries arising after 1 July 2010 or if the date of diagnosis of a latent onset injury is on or after 1 July 2010.
- 39. Allowed a court to award costs against plaintiffs whose claims are dismissed.
- 40. Increased the amount of employer excess to 100% of Queensland Ordinary Time Earnings or one week's compensation, whichever is the lesser.
- 41. Amendments to increase the pre-trial obligations on third party contributors to exchange relevant documents and certify readiness for conference.
- 42. Amendments to expand the instances where a court must make orders as to costs to include situations where a court dismisses a worker's claim, makes no award of damages, or makes an award of damages that is equal to or less than the insurer's final written offer.
- 43. New provision that where a contribution claim is not settled at compulsory conference, each party must ensure that it makes a written final offer that would dispose of the contribution claim if accepted.
- 44. Amendments to the Workplace Health and Safety Act reversed the Bourk v Power Serve Pty Ltd & Anor decision.

29 Sep 2010 - Cameron v Foster & Anor QSC 372

- 45. The Cameron decision was significant due to the ruling that courts may make future economic loss allowances past the age of retirement, and also can make allowances for future paid services provided gratuitously by family members.

6 Jun 2011 - Work Health and Safety Act 2011

- 46. Introduced a key structural review recommendation to review the workers' compensation scheme every five years.
- 47. Allowed for a worker to accrue leave while off work on workers' compensation.

29 Oct 2013 - Workers' Compensation & Rehabilitation & Other Legislation Amendment Act

- 48. Abolished the statutory body Q-COMP as the workers' compensation regulator. These functions are now the responsibility of the Workers' Compensation Regulator within the Office of Fair and Safe Work Queensland.
- 49. Introduced a threshold of greater than 5% degree of permanent impairment (DPI) to access common law damages (applicable to injuries from 15 October 2014).
- 50. Injuries from 15 October 2013 will be assessed using the Guide to the Evaluation of Permanent Impairment (GEPI) (which references AMA5). Injured workers will receive an offer of lump sum compensation based on their degree of permanent impairment (DPI).
- 51. Definition of injury change - employment is to be 'the major significant contributing factor' for psychological or psychiatric claims when determining entitlement to compensation.
- 52. From 29 October 2013, employers can request a prospective worker to provide them with information about pre-existing injuries or medical conditions.
- 53. The Office of the Workers' Compensation Regulator is to manage all fraud cases, and the penalties for these offences were increased.
- 54. Insurers are required to provide a mandatory accredited return to work program for common law claimants, thereby removing the need for the Q-COMP service Return to work Assist.
- 55. Rehabilitation and Return to Work Coordinators are no longer required to be accredited or certified through the Workers' Compensation Regulator.
- 56. Clarified the entitlement to gratuitous care damages caused by Cameron v Foster & Anor.

Appendix 4: Definitions

Statutory definitions

Admitted claims – The insurer allows the application for compensation and liability continues to be accepted by the insurer (this is considered to be an initial decision on the claim).

Average finalised claim cost – The average statutory cost of finalised claims.

Average finalised time lost claim cost – The average statutory cost of finalised time lost claims, including any excess amount paid for by the employer. Claims with compensation and with lump sum payments are included as time lost claims.

Average finalised time lost claim durations – Workdays lost due to an injury on finalised time lost claims, including any workdays lost paid for by the employer. Including claims with compensation payments and excluding fatality payments.

Cancelled claims – Claims are cancelled when they should never have been lodged (e.g. the application has already been lodged at least once on the system).

Statutory claim decisions – The first decision about the application for compensation to either allow or reject the application. Statutory decisions exclude decisions cancelled, withdrawn, report only and common law only (s134).

Employees covered – Employees covered for Queensland is obtained from the Australia Bureau of Statistics labour force survey. This definition includes employees and ‘own account’ workers (6291.0.55.003- Labour Force, Australia, Detailed, Quarterly, May 2014).

Fatal claims – All claims where an injury or disease caused the death of an injured worker, excluding cancelled or rejected claims. A claim is a fatality if the claim is indicated by the insurer as a fatality under the Act, on the individual application, taking into account the definitions of a worker, event and injury under the Act (s11, s31 and s32).

Finalised claims – The statutory finalisation of a claim during a financial year; identified by the date of the closure status.

Industry – All industry codes are based on the insurers’ coding of industry to the divisions from the “Australian and New Zealand Standard Industry Classification” (ANZSIC), Australian Bureau of Statistics, 2006.

Injury nature – Injury nature groupings are based on the insurers’ coding of primary injury nature and location. The injury nature and location coding by the insurer is provided using the Type of Occurrence Classification System as published by Safe Work Australia.

Lodgements – All claims lodged with insurers, regardless of the outcome (i.e. excludes cancelled claims, includes withdrawn and report only claims).

Medical expense only claim – All accepted claims which have had medical treatment and rehabilitation payments, excluding those that also had weekly compensation or fatality payments.

Mesothelioma or asbestosis – The injury nature codes ‘783’ and ‘861’ from the “Type of Occurrence Classification System”, Third Edition, Revision 1 Safe Work Australia have been renamed mesothelioma or asbestosis injury in this publication.

Permanent impairment (PI) – A permanent impairment from an injury is an impairment that is stable and stationary and not likely to improve with further medical or surgical treatment (s38).

Psychological or psychiatric injury – The injury nature codes ‘702’, ‘703’, ‘704’, ‘705’, ‘706’, ‘707’, ‘718’ and ‘719’ from the “Type of Occurrence Classification System”, Third Edition, Revision 1 Safe Work Australia have been renamed psychological or psychiatric injury in this publication.

QOTE – The Workers’ Compensation and Rehabilitation Act 2003 describes QOTE for a financial year as being “the seasonally adjusted amount of Queensland full time adult persons ordinary time earnings as declared by the Australian Statistician in the statistician’s report about average weekly earnings published immediately before the start of the financial year”. (6302.0 - Average Weekly Earnings, Australia, Australian Bureau of Statistics).

Rejected claims – The application for compensation is rejected as the initial decision on the claim (s134).

Statutory claim payments – All statutory payments made in the relevant year, including any payments for time lost made by the employer as part of the compensation period (excess) as reported by WorkCover Queensland.

Time lost claims – All accepted claims which have resulted in time lost from work excluding fatalities.

Withdrawn claims – Lodged claims are withdrawn when a notice is initiated and provided by the injured worker to the insurer to formally withdraw the application for compensation.

Common law definitions

Average defendant’s cost – The average defendant’s cost, regardless of when payments were made, of finalised common law claims.

Average plaintiff’s cost – The average plaintiff’s cost, regardless of when payments were made, of finalised common law claims.

Average settlement cost – The average settlement cost, regardless of when payments were made, of finalised common law claims (excludes claims with a nil settlement).

Average time from injury to lodgement – The average time, in years, from injury date to common law lodgement. These are based on the lodgement year of the common law claim.

Average time from lodgement to finalisation – The average time, in years, from the common law claim lodgement to common law finalisation. These are based on the finalisation year of the common law claim.

Common law claim lodgements – All common law claims lodged with insurers, regardless of the outcome. If a common law claim is associated with more than one statutory claim, it will be counted for each statutory claim it is associated with (if one common law claim is associated with three statutory claims, the common law lodgement has been counted three times).

Common law claim payments – All common law payments made within the financial year.

Defendant's costs – Costs incurred by the defendant.

Heads of damage – Heads of damage consist of two distinct parts: general damages and special damages.

The legislative amendments in 2010 introduced caps on the amount of general damages that can be awarded for pain and suffering, loss of amenity, loss of expectation of life and general disfigurement. The caps align the workers' compensation scheme with the Civil Liability Act 2003, and limit the amount of compensation that can be awarded to an injury based on the severity of the injury, or its 'injury scale value'. Special damages consists of future economic loss, past economic loss, care and treatment and rehabilitation. This incorporates loss of past and future earnings, future medical needs and care due to the ongoing disability. The amount of future earnings loss must not exceed the amount equal to the present value of 3 times QOTE per week for each week of the period of loss of earnings as specified within the Act.

Nil settlement – A nil settlement is where a common law claim has finalised with no damages paid.

Plaintiff's costs – Costs incurred by the plaintiff.

Settlement payments – Settlement payments are calculated as the gross settlement amount less contributory negligence less contribution from third party less statutory claim payments.

Medical assessment tribunal definitions

Access to damages – This is for instances where an application for statutory compensation has not been lodged and the insurer has not admitted that the worker sustained an injury. The worker is seeking common law damages.

Application for compensation – This reference is used when a worker has made an application for compensation. (Liability has not been accepted for the injury for which the worker is claiming). The insurer is unable to determine liability for the claim due to matters of a medical nature.

Cases determined – All cases heard and determined by the Medical Assessment Tribunals.

GMAT (Other) – General Medical Assessment Tribunals including the Medical, Vascular, Surgical, Urology, Gynaecology, Thoracic and Rheumatology specialties. (Excludes General Medical Assessment Tribunal – Psychiatric).

GMAT (Psychiatric) – General Medical Assessment Tribunal – Psychiatric.

Ongoing capacity for work – The insurer is asking whether the worker's ongoing incapacity for work is related to the accepted work injury.

Other reasons for referral – Includes level of dependency, further material deterioration, etc.

Permanent impairment (PI) assessment – The insurer is asking the tribunal to determine whether the worker has sustained a permanent impairment. Under the legislation for psychological or psychiatric injury claims the MAT must determine the degree of permanent impairment.

Permanent impairment (PI) assessment – disputed PI – The insurer is asking the tribunal to determine whether the worker has sustained a permanent impairment. This reference would be used if the worker does not agree with the permanent impairment which has been independently assessed by the insurer.

Prescribed disfigurement – The insurer requests the tribunal to assess, by physical examination, whether the bodily scarring or facial disfigurement is severe enough to be considered prescribed disfigurement.

Referral reasons – The specific questions which can be asked of the Medical Assessment Tribunals are defined in the Workers' Compensation and Rehabilitation Act 2003.

Specialty (Other) – Medical Assessment Tribunals including the Cardiac, Dermatology, Ear, Nose and Throat, Ophthalmology and Disfigurement specialties.

Review definitions

Confirmed – Insurers' decision is confirmed by the Review Unit.

Set aside – Insurers' decision is set aside by the Review Unit and a new decision substituted.

Varied – Insurers' decision is varied by the Review Unit.

Appeal definitions

Conceded – The regulator indicates to the parties to the appeal and the court or commission that it will not be defending the review decision.

Decided at court – Appeals that have been dismissed, upheld or struck out at the Queensland Industrial Relations Commission or Industrial Magistrates Court.

Dismissed – After hearing evidence, the Commissioner or Magistrate has dismissed the appeal and confirmed the review decision.

Settled – The parties to the appeal have negotiated a settlement out of court.

Struck out – Appeals struck out by the Commissioner or Magistrate because of failure of the appellant to comply with legislative, court or Commission requirements.

Upheld – After hearing evidence, the Commissioner or Magistrate has upheld the appeal and set aside or varied the review decision.

Withdrawn – Appeals withdrawn by the appellant prior to hearing.

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