

DELIVERING
FOR QUEENSLAND

Queensland workers'
compensation scheme statistics
2024–25



Queensland
Government

State of Queensland 2025



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PN 13286

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2024–25 Scheme highlights

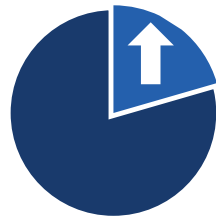
New claims up 2.1 per cent



Statutory claim rate decreased



Common law claims up 5.6 per cent



Scheme payments have increased by 9.8 per cent



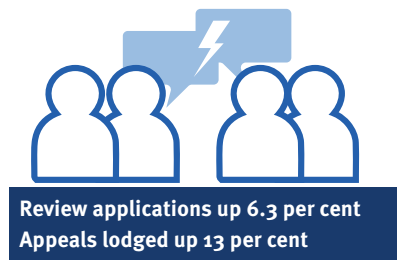
Average work days lost 70 days



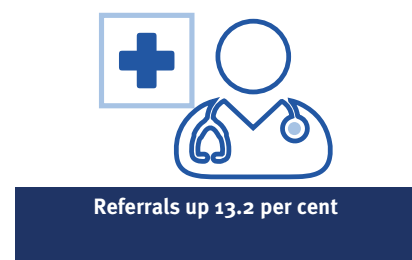
Average cost of a time lost claim around \$29,000



Disputes



Medical Assessment Tribunals



Introduction

This is the 26th annual statistical report published by the Office of Industrial Relations (OIR) on Queensland workers' compensation scheme-wide data.

This report provides scheme-wide data around the performance of Queensland's workers' compensation scheme, including:

- claims information from all scheme insurers (including WorkCover Queensland and licensed self-insured employers) on statutory and common law claims
- information about the workers' compensation regulatory services provided by OIR, including:
 - administrative review of insurers' decisions
 - appeals to the Queensland Industrial Relations Commission and the Industrial Court
 - Medical Assessment Tribunals
 - workers' compensation investigations and prosecutions
 - insurer licensing, performance and compliance.

All figures reported as at 30 June 2025 are true and correct as supplied by insurers.

Queensland's workers' compensation scheme

The Workers' Compensation Regulator (the Regulator) is the Deputy-Director General, Office of Industrial Relations, Department of State Development, Infrastructure and Planning under the *Workers' Compensation and Rehabilitation Act 2003* (the Act).

The Regulator delegates functions and powers under the Act to public service employees and authorised persons within Workers' Compensation Regulatory Services in the Office of Industrial Relations.

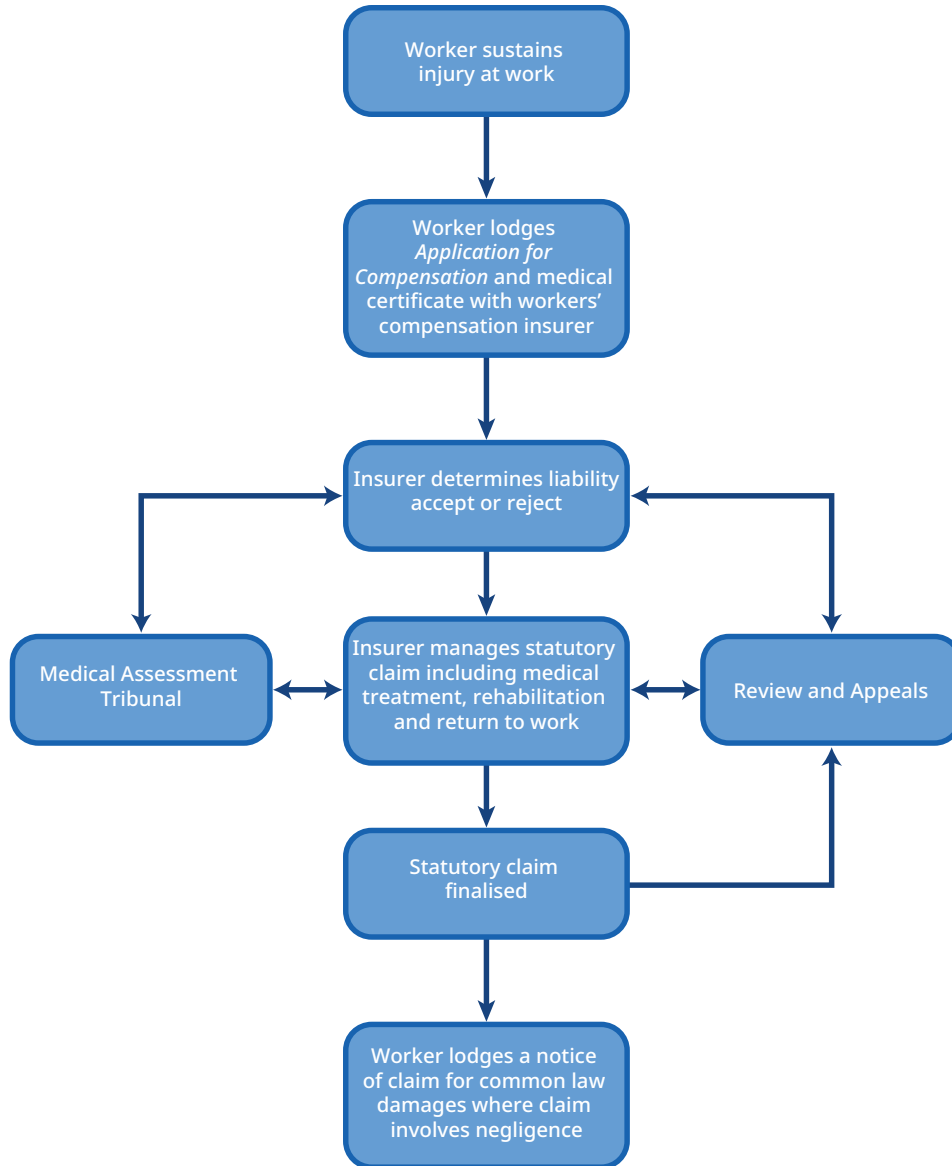
These key functions include:

- monitoring insurer performance and compliance with the Act
- deciding self-insurance licence applications
- reviewing insurer decisions
- managing appeals of review decisions
- monitoring employer rehabilitation compliance and providing advice
- supporting the Medical Assessment Tribunal
- maintaining and analysing statistics and reporting on the scheme
- providing workers' compensation information and education.

As at 30 June 2025 there were 28 insurers in the scheme—WorkCover Queensland and 27 licenced self-insured employers.

In Queensland, injured workers have access to no-fault statutory workers' compensation and, where negligence exists, injured workers may be able to access damages at common law. Figure 1 below illustrates the workers' compensation claims process. Each of the key phases of a workers' compensation claim is examined in more detail throughout this publication.

1 Workers' compensation claims process



Claim profile

2 Queensland workers' compensation claim profile

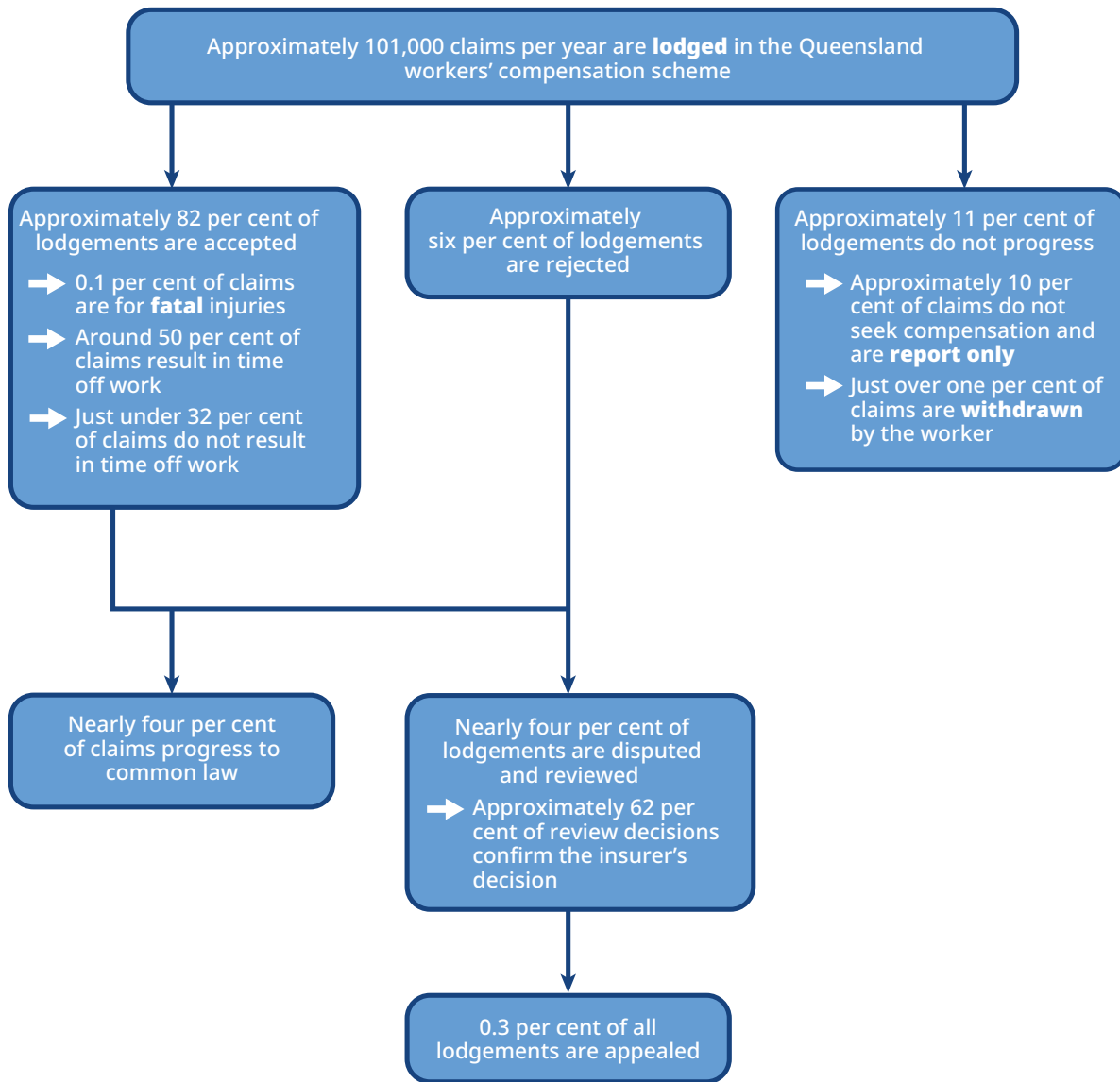


Figure 2 illustrates the progression of a workers' compensation claim through the statutory claims process to common law and dispute resolution. There is a gap between the number of claims lodged in the scheme, compared to the number of decisions, as 11 per cent of claim lodgements do not progress as they are withdrawn by the worker or are 'report only' (do not require a decision).

Scheme highlights

Statutory claim lodgements

New statutory claims of 100,722 for 2024–25 was 2.1 per cent higher than 2023–24, while the number of employed people increased by 2.9 per cent for 2024–25. This saw the claims rate for 2024–25 decrease by 0.9 per cent to 34 claims per 1000 employed people. Some industries that have experienced decreases in claim rates this year include electricity, gas, water and waste services, rental, hiring and real estate services, retail trade, and, administrative and support services.

The proportion of psychological and psychiatric statutory claims increased for 2024–25 at 8.6 per cent (8.1 per cent in 2023–24). Psychological and psychiatric claims represent 14.8 per cent of total statutory payments (\$283.2 million for 2024–25) and have an average finalised time lost claim cost of \$67,477 (\$63,589 in 2023–24) which is over two times the average time lost claim cost of physical injuries (\$26,577 for 2024–25).

Statutory claim payments

Statutory payments for 2024–25 of \$1910.8 million were 16.5 per cent higher than in 2023–24 (\$1640.5 million). Weekly compensation payments, which represent 50.6 per cent of statutory payments, have increased 19.5 per cent for 2024–25 from \$809.3 million to \$967.2 million. Average work days lost increased from 68.7 days in 2023–24 to 70 days in 2024–25. The average cost of time lost claims increased by 6.6 per cent from \$27,182 in 2023–24 to \$28,974 in 2024–25.

Fatalities

There were 65 fatal claim lodgements in 2024–25. Fatal claim lodgements due to injuries at work represent close to half of the 2024–25 figures (29 claims; 44.6 per cent). Construction (14 claims); transport, postal and warehousing (9 claims); and manufacturing (6 claims) industries contributed 44.6 per cent of fatalities in 2024–25.

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

Return to Work

In 2024–25, the return to work rate increased to 90.7 per cent (90.5 per cent for 2023–24).

Review and Appeals

Review applications increased by 6.3 per cent, from 3380 in 2023–24 to 3593 in 2024–25. The proportion of review applications to statutory claims increased to 3.6 per cent for 2024–25 (3.4 per cent for 2023–24). Appeals served in 2024–25 have increased, up 13 per cent from 231 served in 2023–24 to 261 served in 2024–25.

Medical Assessment Tribunals

In 2024–25, 4271 referrals were made to the Medical Assessment Tribunals. This is an increase of 13.2 per cent from the 3773 referrals received in 2023–24. Of the cases determined by the Medical Assessment Tribunals, 52.2 per cent were for permanent impairment (PI) assessment (47.9 per cent in 2023–24) and 45.6 per cent were for ongoing capacity to work (48.8 per cent in 2023–24). The proportion of Medical Assessment Tribunal referrals to statutory claims has increased for 2024–25 to 4.2 per cent (3.8 per cent for 2023–24).

Common law lodgements

Common law lodgements increased by 5.6 per cent from 3555 in 2023–24 to 3753 in 2024–25. Strains and sprains accounted for 25.2 per cent of all common law claim lodgements in 2024–25.

Common law average damages

The average cost of finalised common law claims decreased by 2.8 per cent to \$182,296 for 2024–25. The average defendant and plaintiff cost increased by 2.5 per cent from \$24,060 in 2023–24 to \$24,670 in 2024–25.

3 Scheme at a glance

Overview		2024-25	2023-24	% change from previous year	Page number
Statutory claims	New claims	100,722	98,643	2.1	11
	Claims per 1000 employees	34	34.3	-0.9	9
	New psychological claims (%)	8.6	8.1	0.5	13
	Compensated fatalities	65	78		16
	Payments (\$B)	\$1.91	\$1.64	16.5	24
Statutory decisions	Average time to decide (days)	9	8.8	2.3	18
	Rejection rate – physical (%)	4.5	4.9	-0.4	19
	Rejection rate – psychological (%)	48.3	49.9	-1.6	19
Outcomes	Average work days lost (days) (time lost claims)	70	68.7	1.9	33
	Return to work rate (%)	90.7	90.5	0.2	28
Common law	New claims	3753	3555	5.6	38
	Payments (\$M)	\$656.8	\$697.2	-5.8	42
	Average damages cost (excluding nil settlements)	\$182,296	\$187,519	-2.8	43
Regulator functions	Review applications	3593	3380	6.3	45
	Appeals served	261	231	13	48
	MAT referrals	4271	3773	13.2	51
	Reports of suspected offending	211	251	-15.9	54

Workers' compensation statutory claims

- The majority of employers (89.1 per cent) covered by the scheme in 2024–25 did not have a claim for workers' compensation.
- The scheme-wide claim rate decreased by 0.9 per cent.
- The manufacturing industry has the highest claim rate.

As at 30 June 2025, approximately 181,000 employers were covered by the Queensland workers' compensation scheme. During 2024–25, the scheme covered approximately 191,000 employers, taking into account fluctuations in cancelled and new policies.

4 Number of claims lodged by insurance type 2023–24 and 2024–25

Insurance type	2023–24	2024–25	% Variance
Employed people	98,107	100,035	2
Volunteers, industrial placement / work experience, contracts of insurance under s26 of the Act.	375	473	26.1
Workplace personal injury insurance (self-employed, working directors)	133	174	30.8
Household workers	28	40	42.9
Total lodgements	98,643	100,722	2.1

The majority of claims (99.3 per cent) are for 'workers' as defined in the Act.

5 Number of claims per employer by declared wages 2023–24

Number of claims	Declared wages						Total employers
	\$1M or less	\$1.01M to \$2.5M	\$2.51M to \$5M	\$5.01M to \$10M	\$10.01M to \$50M	Over \$50M	
No claims	159,603	7965	2003	690	253	12	170,526
1 claim	8011	2629	1012	403	202	12	12,269
2 to 5 claims	1743	1810	1362	872	533	43	6363
6 to 10 claims	60	89	187	351	427	36	1150
11 to 20 claims	13	13	38	112	385	73	634
Over 20 claims	17	1	7	23	223	253	524
Total with claims	9844	4542	2606	1761	1770	417	20,940
Total	169,447	12,507	4609	2451	2023	429	191,466
% without claims	94.2	63.7	43.5	28.2	12.5	2.8	89.1

Figure 5 is based on claims lodged by insurance type 'employed people' and excluding claims that have been lodged under uninsured policies.

The majority of employers (89.1 per cent) did not have a claim for workers' compensation in 2024–25. Smaller employers (\$1 million or less in declared wages) were the most likely to have no claims (94.2 per cent).

Claim rate

In 2024–25, 100,722 claims were lodged scheme-wide (excluding cancelled claims). The estimated claim rates per 1000 employed people are detailed below.

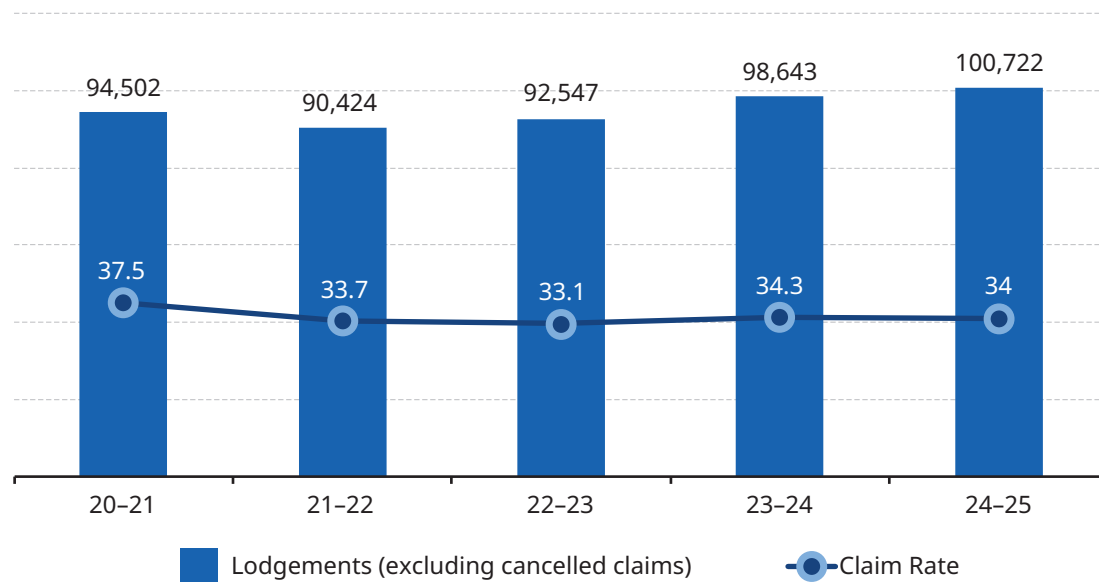
6 Claim rates (per 1000 employed people) 2020–21 to 2024–25

	Annual comparison				
	2020–21	2021–22	2022–23	2023–24	2024–25
Queensland labour force					
Average number of employed people ('000) ^a	2518.4	2680.7	2794	2878.1	2962.8
Change from previous year (%)	-1.2	6.4	4.2	3	2.9
Queensland workers' compensation scheme					
Number of lodged claims	94,502	90,424	92,547	98,643	100,722
Change from previous year (%)	4.9	-4.3	2.3	6.6	2.1
Claim rate					
Number per 1000 employed people	37.5	33.7	33.1	34.3	34
Change from previous year (%)	5.9	-10.1	-1.8	3.6	-0.9

^a Australian Bureau of Statistics, Labour Force, Queensland Average of May Quarter to February Quarter, Cat No. 6291.0.55.001, May 2025.

Figure 7 shows claim rates and claim lodgements in the scheme for the past five years.

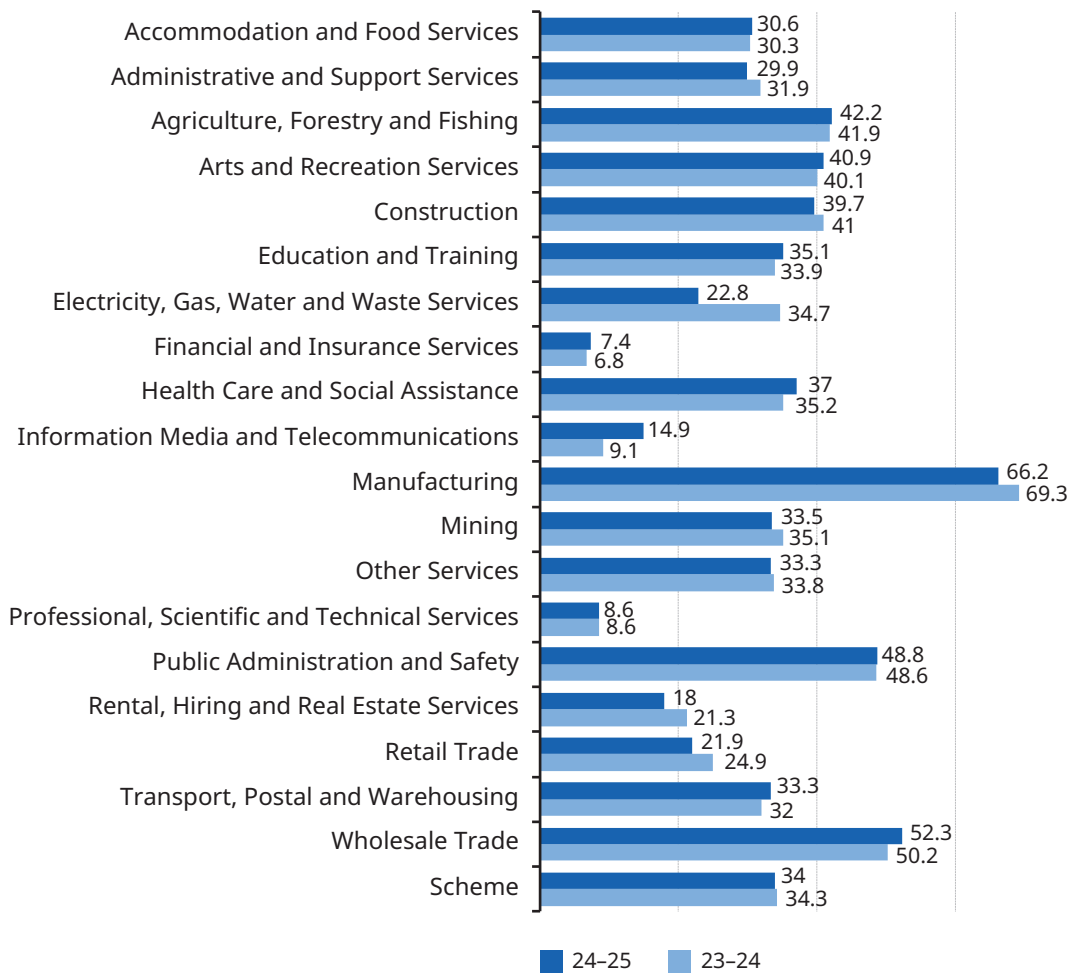
7 Claim rates (per 1000 employed people) and lodgements 2020–21 to 2024–25



Manufacturing had the highest claim rate in the scheme, with 66.2 claim lodgements per 1000 employed people in the industry. Other industries where the claim rate was larger than the scheme rate of 34 include:

- wholesale trade (52.3)
- public administration and safety (48.8)
- agriculture, forestry and fishing (42.2)
- arts and recreation services (40.9)
- construction (39.7)
- health care and Social Assistance (37)
- education and training (35.1)

8 Claim rates (per 1000 employed people) by industry 2023–24 and 2024–25



Statutory claim lodgements

- Lodgements increased by 2.1 per cent in 2024–25.
- There were 65 fatal claims lodged in 2024–25.

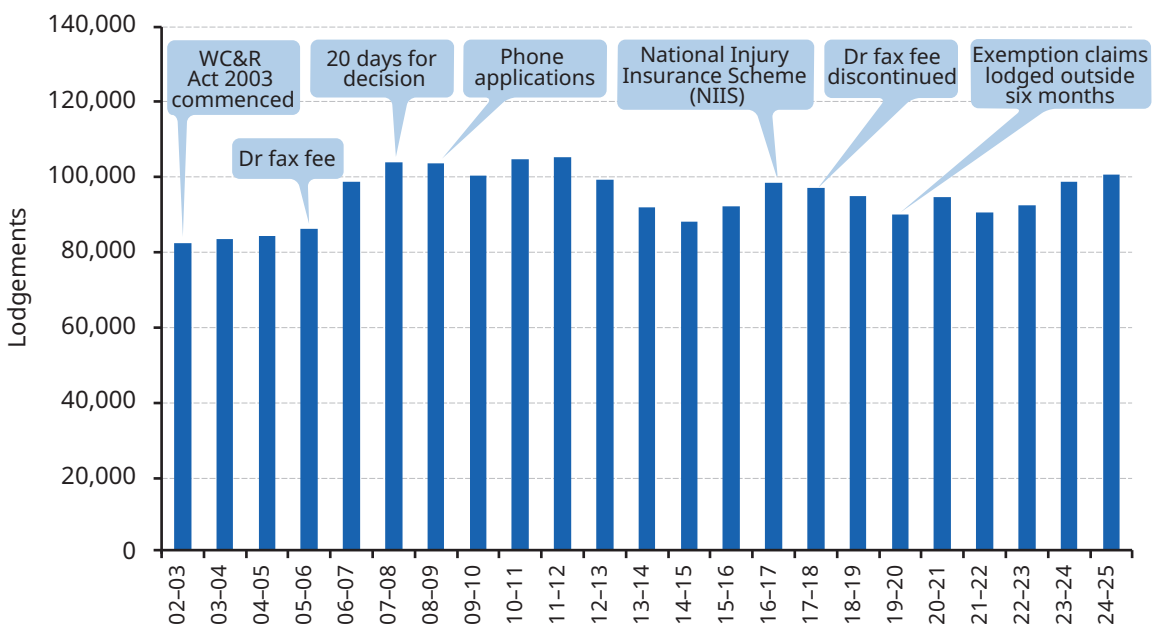
Many factors influence the number of claims lodged in the Queensland workers' compensation scheme. Some of the factors that may have contributed to changes in numbers of lodgements over the years include:

- injury prevention initiatives and interventions by Workplace Health and Safety Queensland (WHSQ) and WorkCover Queensland
- the changing industrial/services mix of the Queensland Economy
- variations in the overall numbers in the workforce
- work process changes within industry (e.g. automation and improved work health and safety practices)
- Other external factors affecting economic activity (e.g. pandemic-related health orders).

Figure 9 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 2024–25, there were 100,722 claims lodged (excluding cancelled), representing a 2.1 per cent increase from 2023–24 (98,643).

9 Statutory claim lodgement history 2002–03 to 2024–25

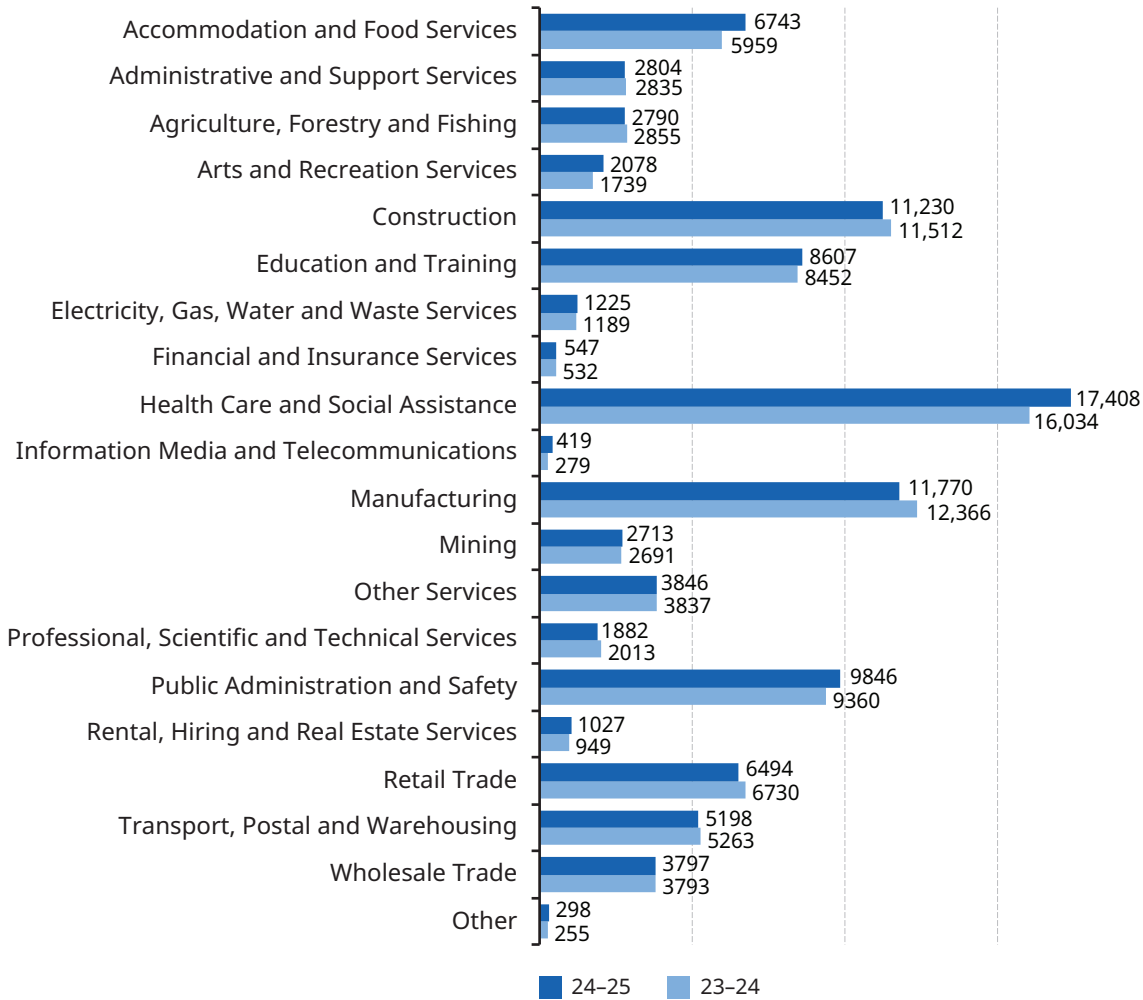


Industry

As shown in figure 10, the health care and social assistance industry accounted for the largest proportion of claim lodgements with 17.3 per cent of all scheme lodgements.

The largest claim increases were in accommodation and food services, up 13.2 per cent from 5959 to 6743 and health care and social assistance, up 8.6 per cent from 16,034 to 17,408.

10 Statutory claim lodgements by industry 2023–24 and 2024–25



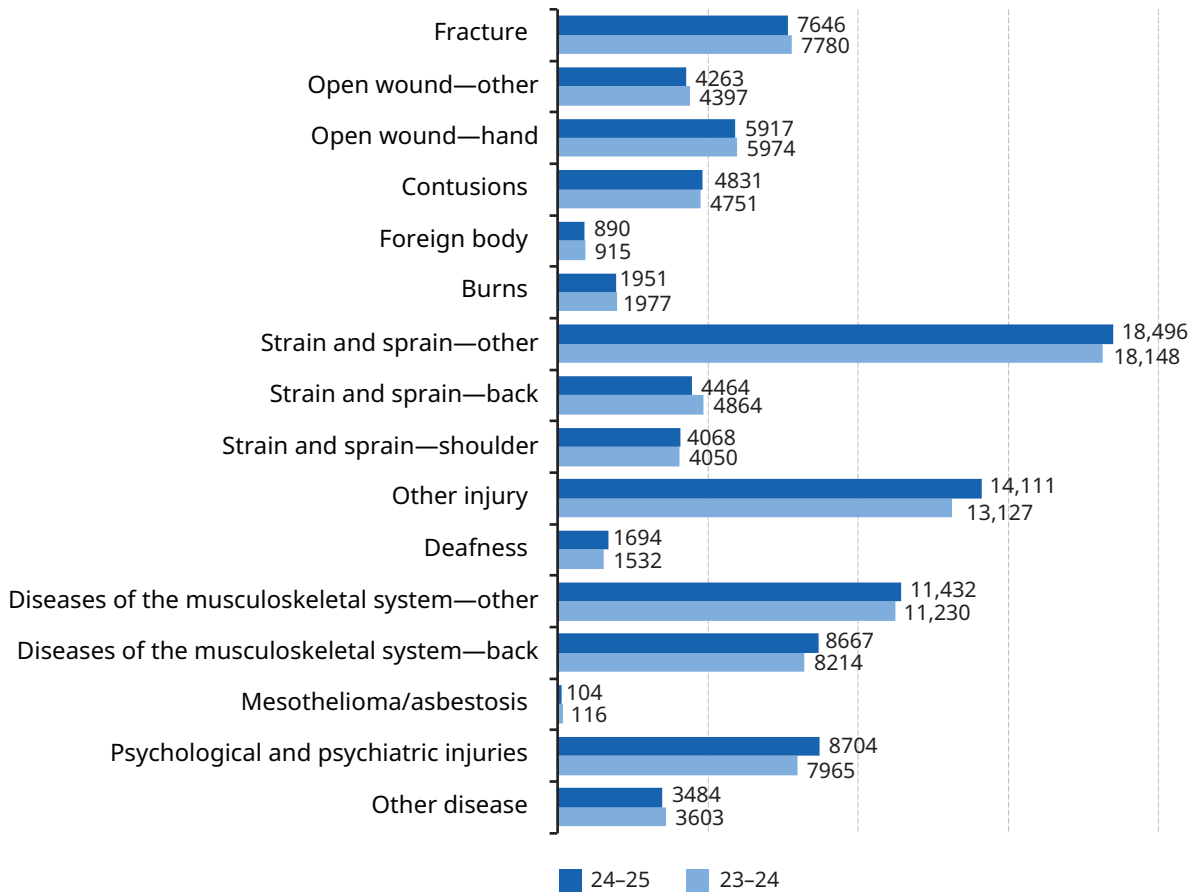
Note: For industry 'Other', this includes injuries pre-July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strain and sprain injury claims accounted for 26.8 per cent of all injuries lodged in 2024–25. Of these, the back was the major bodily location (accounting for 4.4 per cent of all lodgements).

Psychological and psychiatric injury claims increased 9.3 per cent in 2024–25, up from 7965 in 2023–24 to 8704.

11 Statutory claim lodgements by injury type 2023–24 and 2024–25

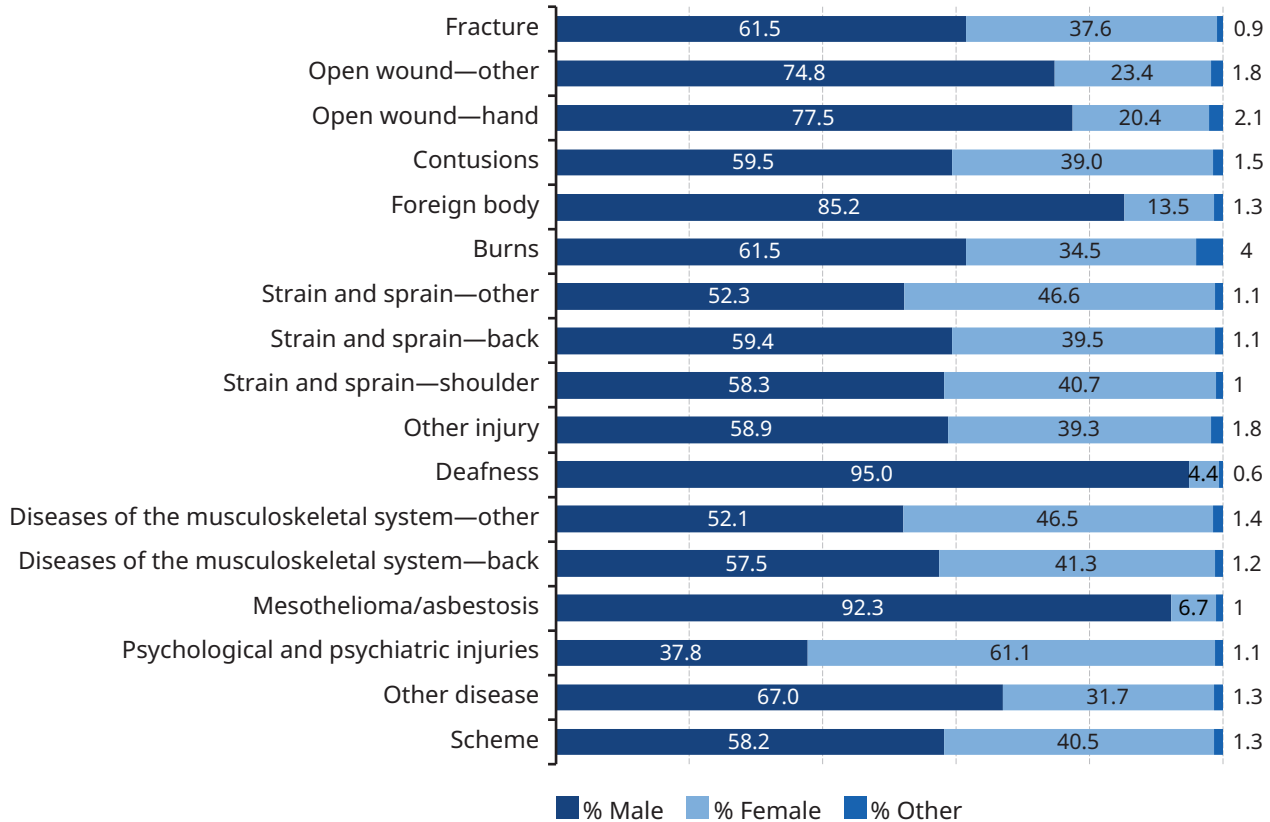


Gender

In 2024–25, males represented 58.2 per cent of the 100,722 claims lodged in the Queensland workers' compensation scheme. Injuries where males represented a much higher proportion of claims than females were deafness (95 per cent), mesothelioma and asbestosis (92.3 per cent) and foreign body (85.2 per cent).

Psychological and psychiatric injury was the only injury type where females were represented more than males, with females accounting for 61.1 per cent of claims.

12 Proportion of statutory claim lodgements by injury type and gender 2024–25

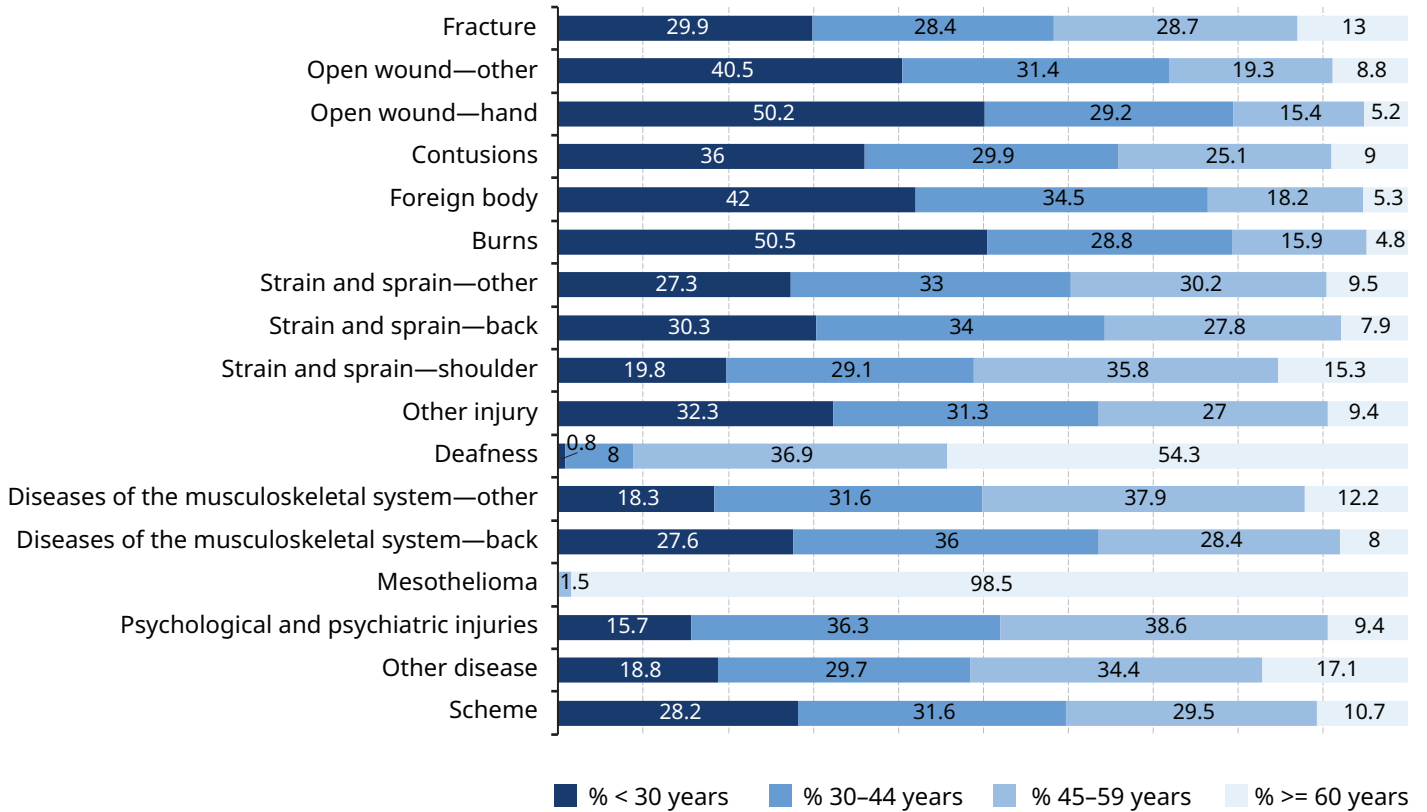


Age

While older workers (60 years or over) represented only 10.7 per cent of all claim lodgements, they have a high representation for injuries such as mesothelioma (97 per cent) and deafness (54 per cent).

Injury types where younger workers (less than 30 years) represented a greater proportion of claims lodgements include burns (50.5 per cent), open wound to the hand (50.2 per cent), foreign body (42 per cent) and open wound to a location other than the hand (40.5 per cent).

13 Proportion of statutory claim lodgements by injury type and age group 2024–25



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

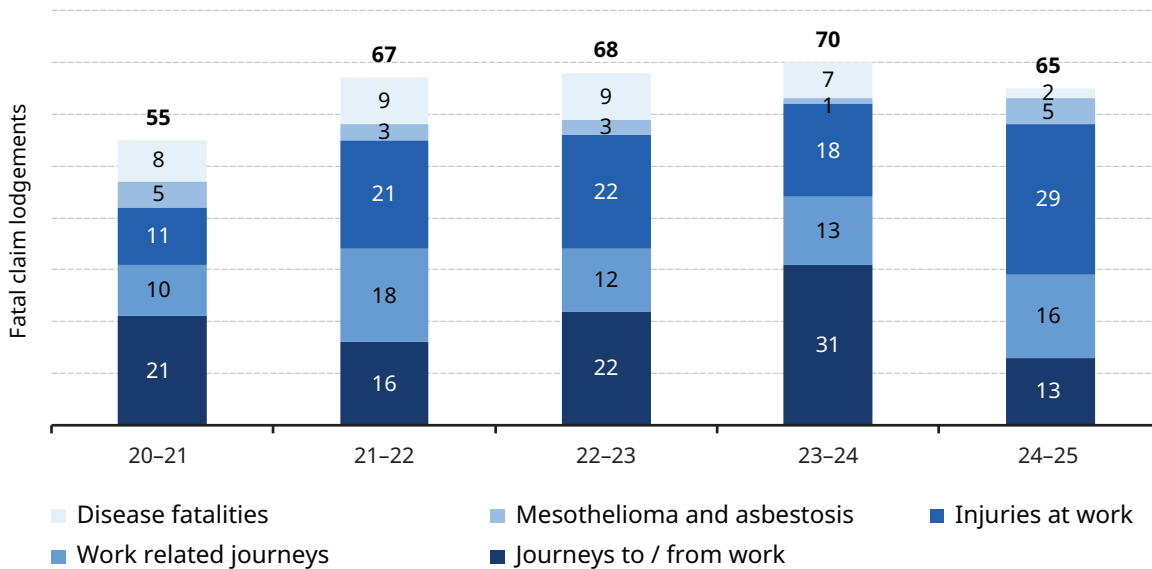
Compensated fatalities

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

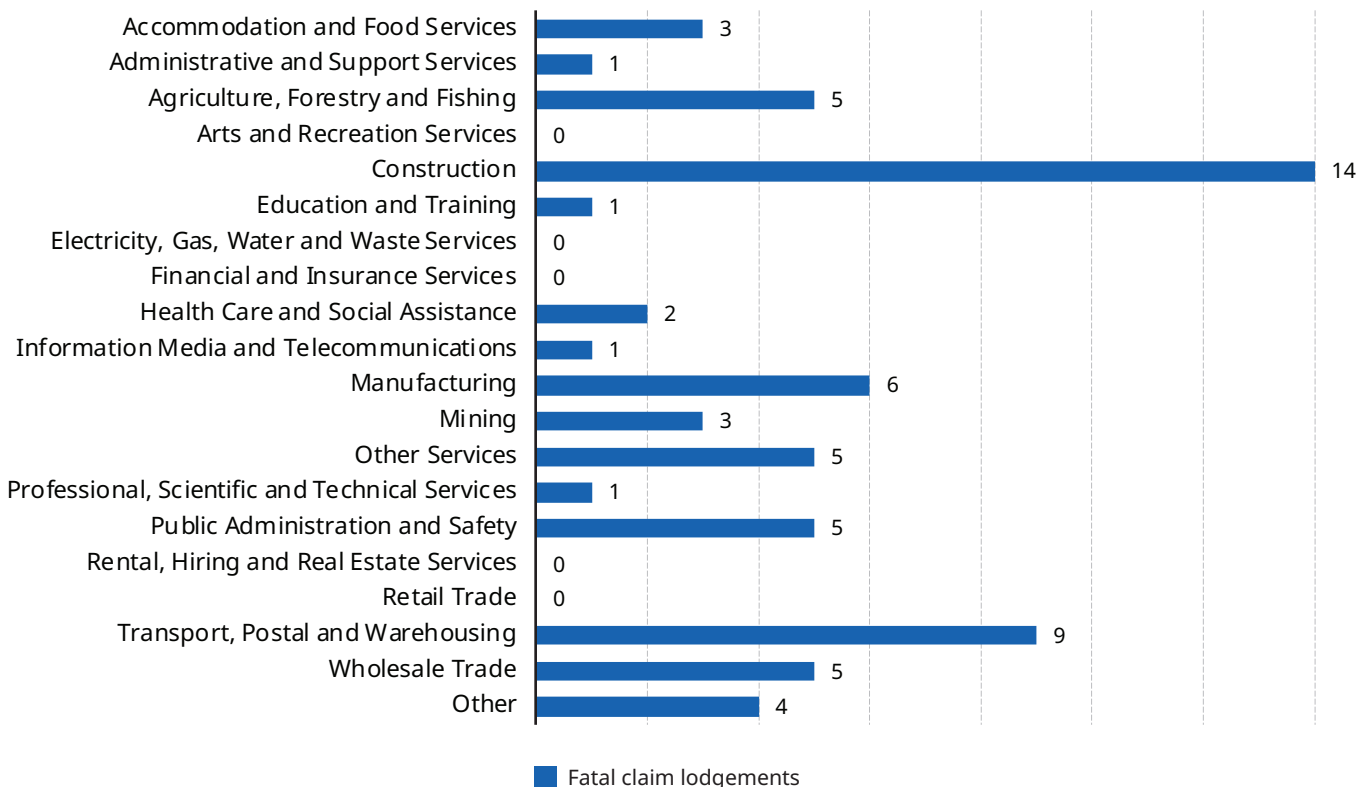
OIR reports the claim as a fatality if the claim is indicated by the insurer as a fatality under the Act on the individual application, taking into account the definitions of a worker, event and injury under the Act (s11, s31 and s32).

Figure 14 below shows the fatal claim lodgement numbers. There were 65 fatalities lodged in 2024-25.

14 Fatal claim lodgements (excluding cancelled claims) 2020-21 to 2024-25



15 Fatal claim lodgements (excluding cancelled claims) by industry 2024-25



Statutory claim decision-making process

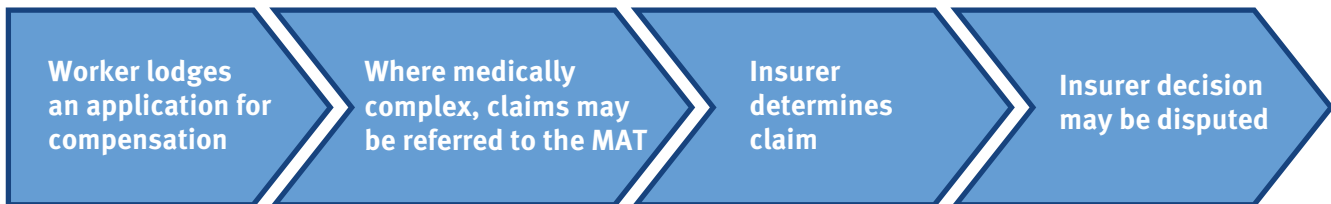
- **Decision timeframes have increased 2 per cent in 2024–25.**
- **Claims that are rejected and claims for psychological and psychiatric injuries take longer to decide.**
- **Claims for psychological and psychiatric injuries have a higher chance of rejection.**
- **Of all rejected claims, 77.2 per cent are rejected due to the injury not meeting the definition under the Act.**
- **Claims lodged with the insurer early are, on average, determined more quickly.**
- **Claims that are rejected 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 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 the Medical Assessment Tribunal to determine whether the medical matters alleged in the application for compensation constitute an injury.

If a party (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 Regulator followed by an appeal to the Queensland Industrial Relations Commission (QIRC) if a party is dissatisfied with the Regulator's review decision. The court or QIRC decision may be appealed in the Industrial Court (IC).

16 Claims decision-making process



Overall, the average decision-making timeframe has increased to 9 days in 2024–25.

The median decision-making timeframe remained steady at four days in 2024–25, unchanged from 2023–24.

Due to the complexity of some claims, the duration from lodgement to decision can be lengthy. The injuries with the longest average decision times were mesothelioma and asbestosis, psychological and psychiatric injuries and deafness.

17 Average time to decide by injury type 2023–24 and 2024–25

Injury type	Average decision time (days)	
	2023–24	2024–25
Fracture	4.9	4.9
Open wound—other	4.4	4.6
Open wound—hand	3.9	3.8
Contusions	4.8	4.9
Foreign body	5.1	4.7
Burns	4.6	4.5
Strain and sprain—other	6	6.1
Strain and sprain—back	6.2	6.6
Strain and sprain—shoulder	7.1	9
Other injury	6.9	7.3
Deafness	11	13.8
Diseases of the musculoskeletal system—other	9.7	9.4
Diseases of the musculoskeletal system—back	8.2	8.2
Mesothelioma and asbestosis	63.5	68.5
Psychological and psychiatric injuries	27.2	25.6
Other disease	20.5	22.2
Total average	8.8	9

Figure 18 illustrates decision-making timeframes and outcomes for claims determined in 2024–25. These timeframes are based on statutory claim decisions.

Most claims (91.7 per cent) were accepted by insurers with an average determination time of 7.1 days. On average, decision timeframes tended to be longer for:

- rejected claims—determined in 29.9 days on average compared to 7.1 days on average for accepted claims
- diseases—particularly psychological and psychiatric injury claims (average 25.6 days to determine), mesothelioma and asbestosis claims (average 68.5 days to determine) and deafness (average 13.8 days to determine).

In 2024–25, 48.3 per cent of psychological and psychiatric claims were rejected.

One 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 under the Act. In 2024–25, 97.3 per cent of the rejected psychological and psychiatric claims were rejected on this basis.

18 Decisions made and average time to decide by decision type and injury type 2024–25

Injury type	Number of decisions	Proportion of decisions		Average decision time		
		Admitted %	Rejected %	Admitted days	Rejected days	Total days
Fracture	7062	96.4	3.6	4.3	20.1	4.9
Open wound—other	3516	97.7	2.3	4.4	12.7	4.6
Open wound—hand	4992	98.5	1.5	3.7	11.3	3.8
Contusions	4049	97.4	2.6	4.6	15	4.9
Foreign body	686	98	2	4.5	9.9	4.7
Burns	1407	98.7	1.3	4.4	16.6	4.5
Strain and sprain—other	16,684	96.9	3.1	5.6	23.6	6.1
Strain and sprain—back	4074	96.9	3.1	6.1	21	6.6
Strain and sprain—shoulder	3719	96.8	3.2	8.3	28.7	9
Other injury	11,435	94.6	5.4	6.3	24.6	7.3
Deafness	1422	86.7	13.3	13.3	17.1	13.8
Diseases of the musculoskeletal system—other	10,398	93.3	6.7	8.0	29.5	9.4
Diseases of the musculoskeletal system—back	7736	95.2	4.8	7.2	26	8.2
Mesothelioma and asbestosis	85	94.1	5.9	64.1	139.6	68.5
Psychological and psychiatric injuries	7449	51.7	48.3	18	33.7	25.6
Other disease	3057	84.8	15.2	18.7	41.4	22.2
Total	87,771	91.7	8.3	7.1	29.9	9

Reasons for claim rejection

Insurers reject claims where, for some reason, the event or the person is not covered under the Act. For 77.2 per cent of rejected claims, the reason for rejection was that the injury did not meet the definition under the Act.

Figure 19 details the main reasons claims were rejected.

19 Rejected claims by reason for rejection 2023–24 and 2024–25

Reason for rejection	23–24		24–25	
	Number of rejections	% of rejections	Number of rejections	% of rejections
Not an injury—s.32	5715	76	5597	77.2
Not a worker—s.11	874	11.7	754	10.4
Out of time—excluded under s.131	531	7.1	451	6.2
Journey—subsequent delay, interruption or deviation—s.36(2)(B)	56	0.7	52	0.7
Invalid application—s.132	3	0	4	0.1
Industrial deafness—excluded under s.125—initial application	94	1.2	162	2.2
Not a journey—s.35	76	1	76	1
Other	176	2.3	157	2.2
Total	7525	100	7253	100

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 the Medical Assessment Tribunal to determine whether the medical matters alleged in the application for compensation constitute an injury.

In 2024-25, 28 claims were referred to the Medical Assessment Tribunal for determination of the worker's injury for an application for compensation. Of these cases, 19 (67.9 per cent) were accepted and the remaining 9 (32.1 per cent) 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 (0.8 per cent), 24.2 per cent of rejected claims are disputed by either the employer or the injured worker.

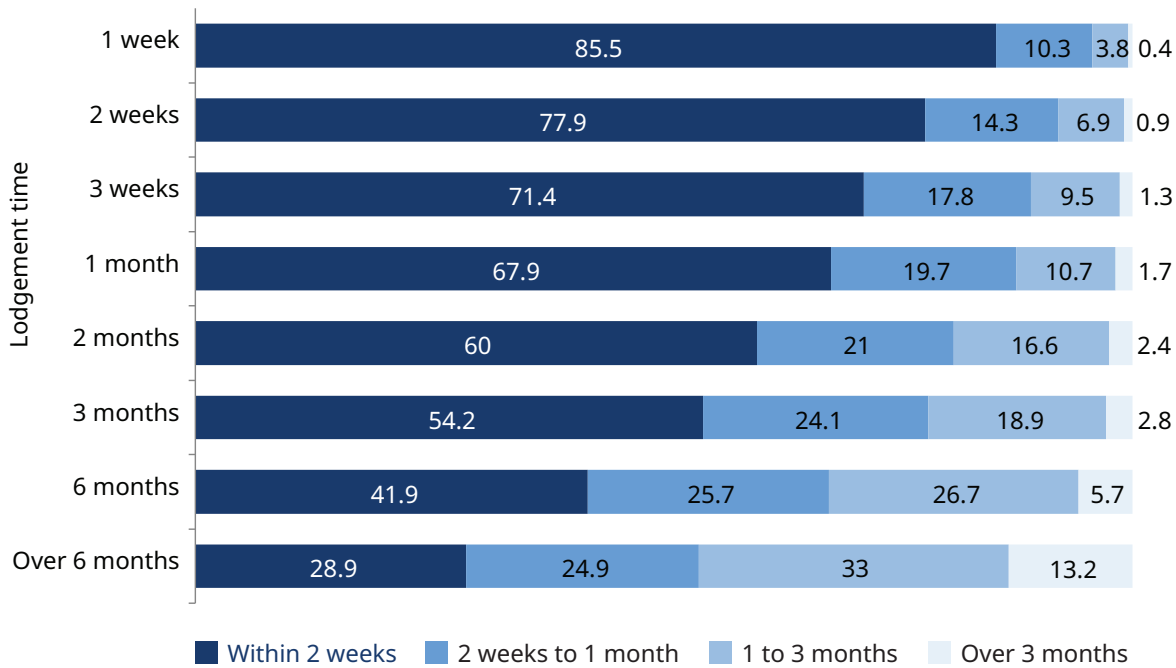
Impact of lodgement time on determination time

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

85.5 per cent of claims lodged within the first week of the injury are determined by the insurer within two weeks. The proportion decided within two weeks reduces as the time taken 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 28.9 per cent.

Figure 20 below illustrates the link between lodgement and decision-making timeframes.

20 Decision-making timeframes for claims decided in 2024–25 by the time taken to lodge the claim



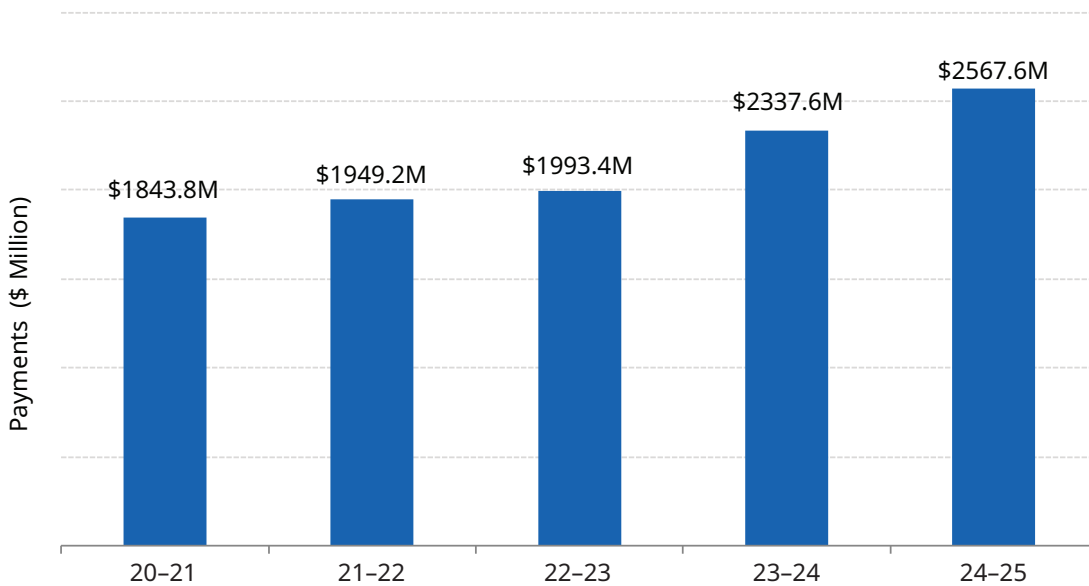
Claim payments

- Total scheme payments increased 9.8 per cent in 2024–25.
- There was a 5.8 per cent decrease in common law payments made in 2024–25.
- Statutory payments increased by 16.5 per cent between 2023–24 and 2024–25.

Workers' compensation payments

Overall, the total scheme payments increased 9.8 per cent in 2024–25, with common law payments decreasing by 5.8 per cent and statutory payments increasing by 16.5 per cent. Total payments for workers' compensation claims in 2024–25 were \$2567.6 million. Common law payments made up 25.6 per cent (\$656.8 million) and statutory claim payments made up 74.4 per cent (\$1910.8 million).

21 Scheme payments 2020–21 to 2024–25

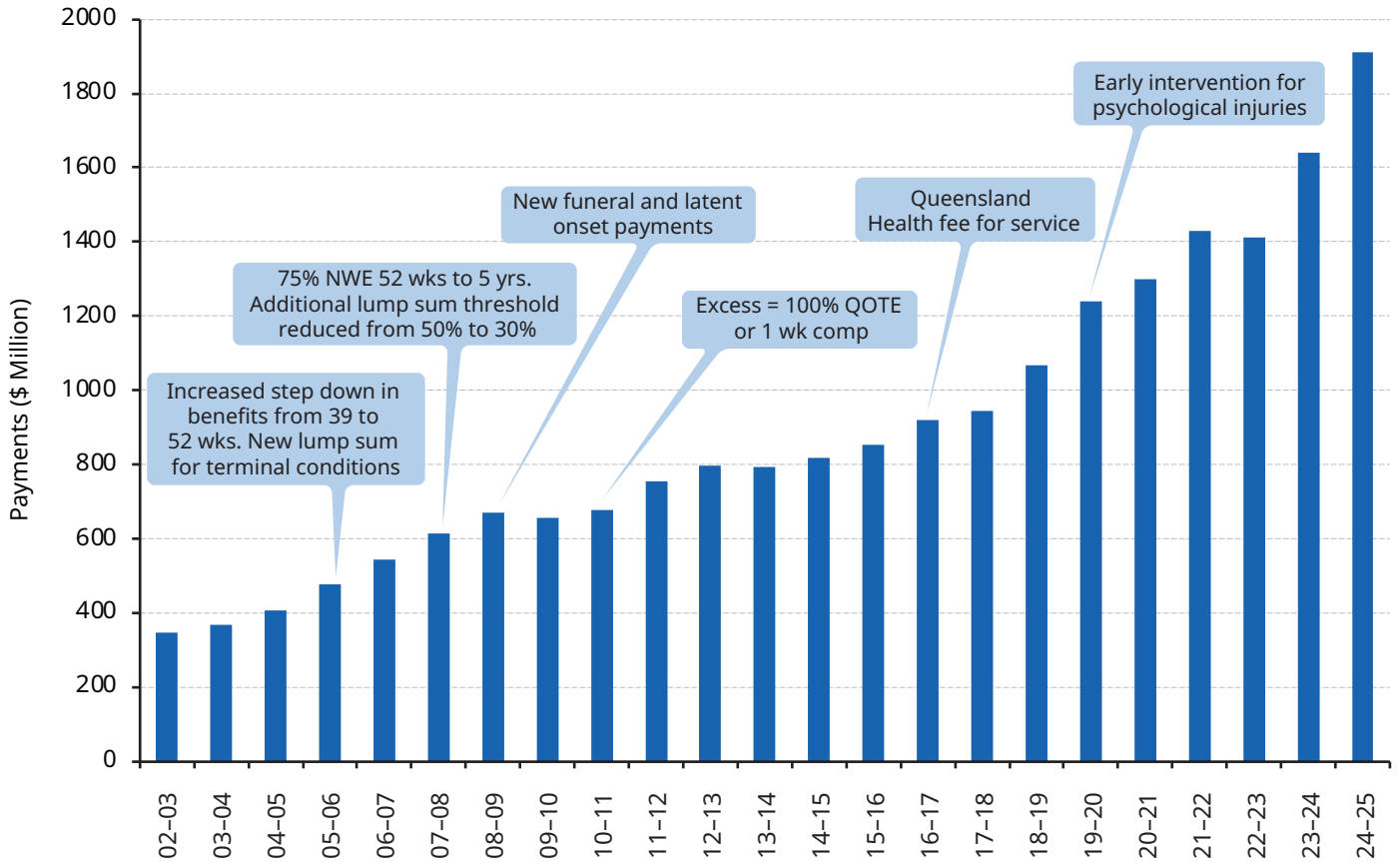


Statutory claim payments

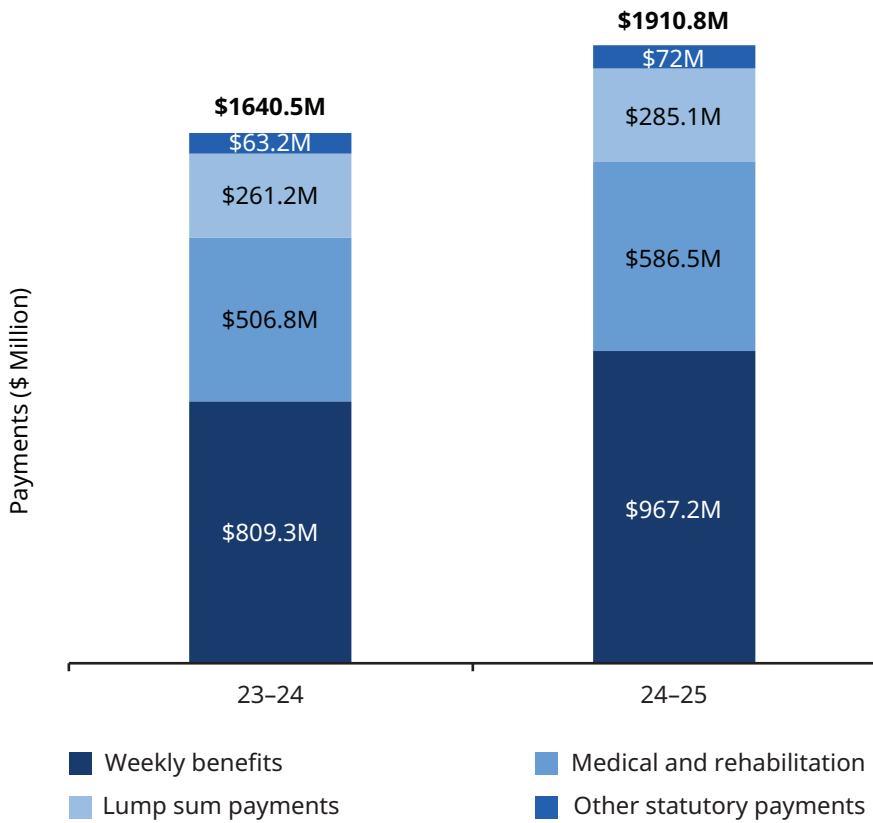
During the management of a claim, payments are made to the worker for weekly compensation to replace wages, lump sums for permanent impairment (PI) and a broad range of services such as medical treatment and rehabilitation.

Figure 22 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 2002-03 to 2024-25



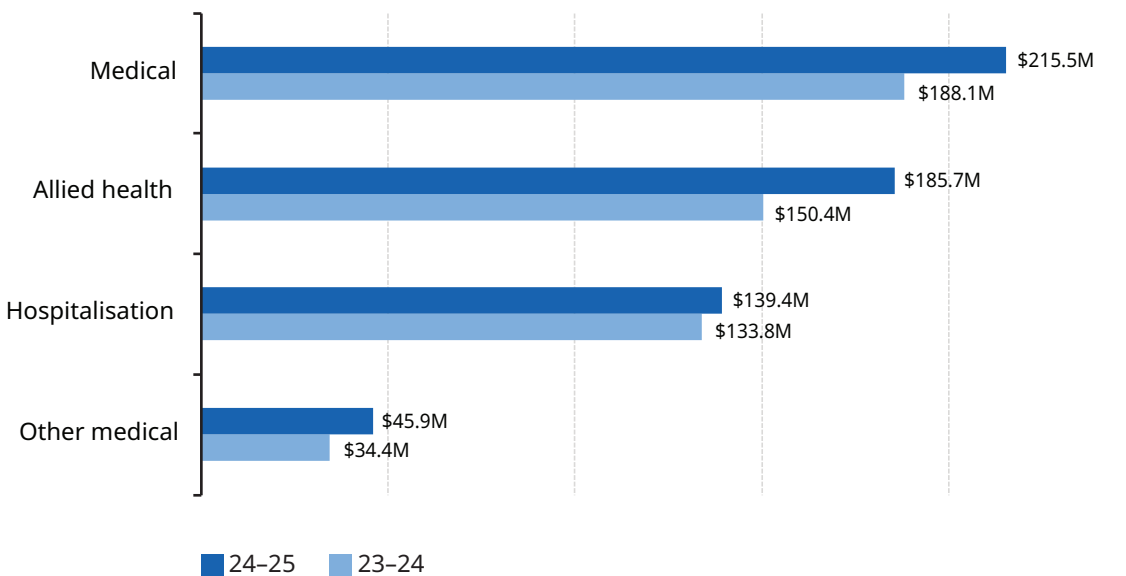
23 Statutory claim payments by payment type 2023–24 and 2024–25



As shown in figure 23, the total amount spent on claims for the year has increased by 16.5 per cent from \$1640.5 million in 2023–24 to \$1910.8 million in 2024–25.

The largest payments increase was for weekly benefit payments, up 19.5 per cent from 2023–24.

24 Medical and rehabilitation payments 2023–24 and 2024–25

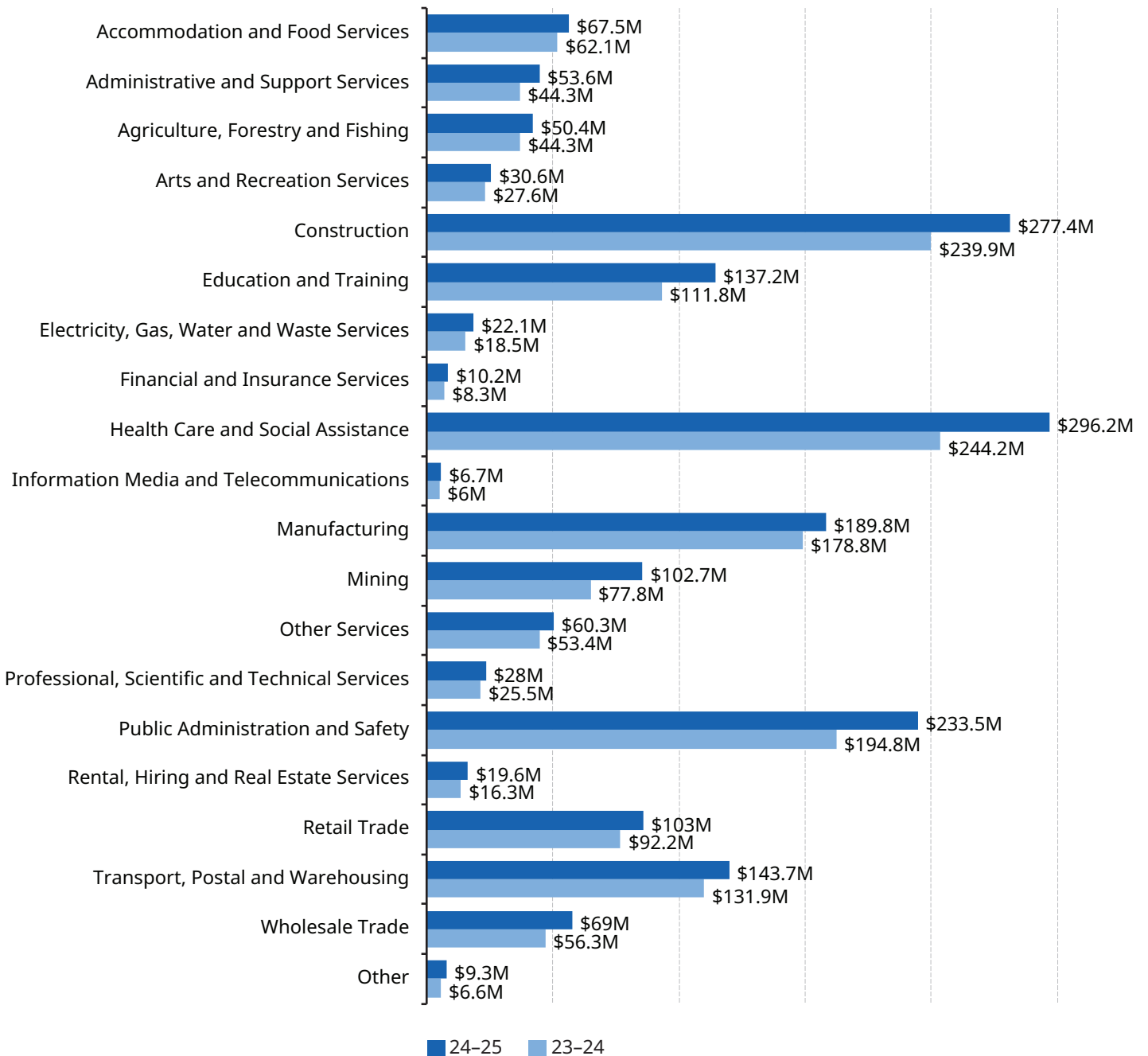


Medical and rehabilitation payments represent 30.7 per cent of statutory payments. Payments for medical treatment accounted for 36.7 per cent of all payments for medical and rehabilitation fees paid in the scheme in 2024–25. Allied health payments increased 23.4 per cent in 2024–25 from \$150.4 million in 2023–24 to \$185.7 million.

Payments by industry

As shown in figure 25, claims from the health care and social assistance industry accounted for the largest proportion (15.5 per cent) of statutory claim payments in 2024–25. Construction accounted for 14.5 per cent of statutory payments, while public administration and safety accounted for 12.2 per cent.

25 Statutory claim payments by industry 2023–24 and 2024–25

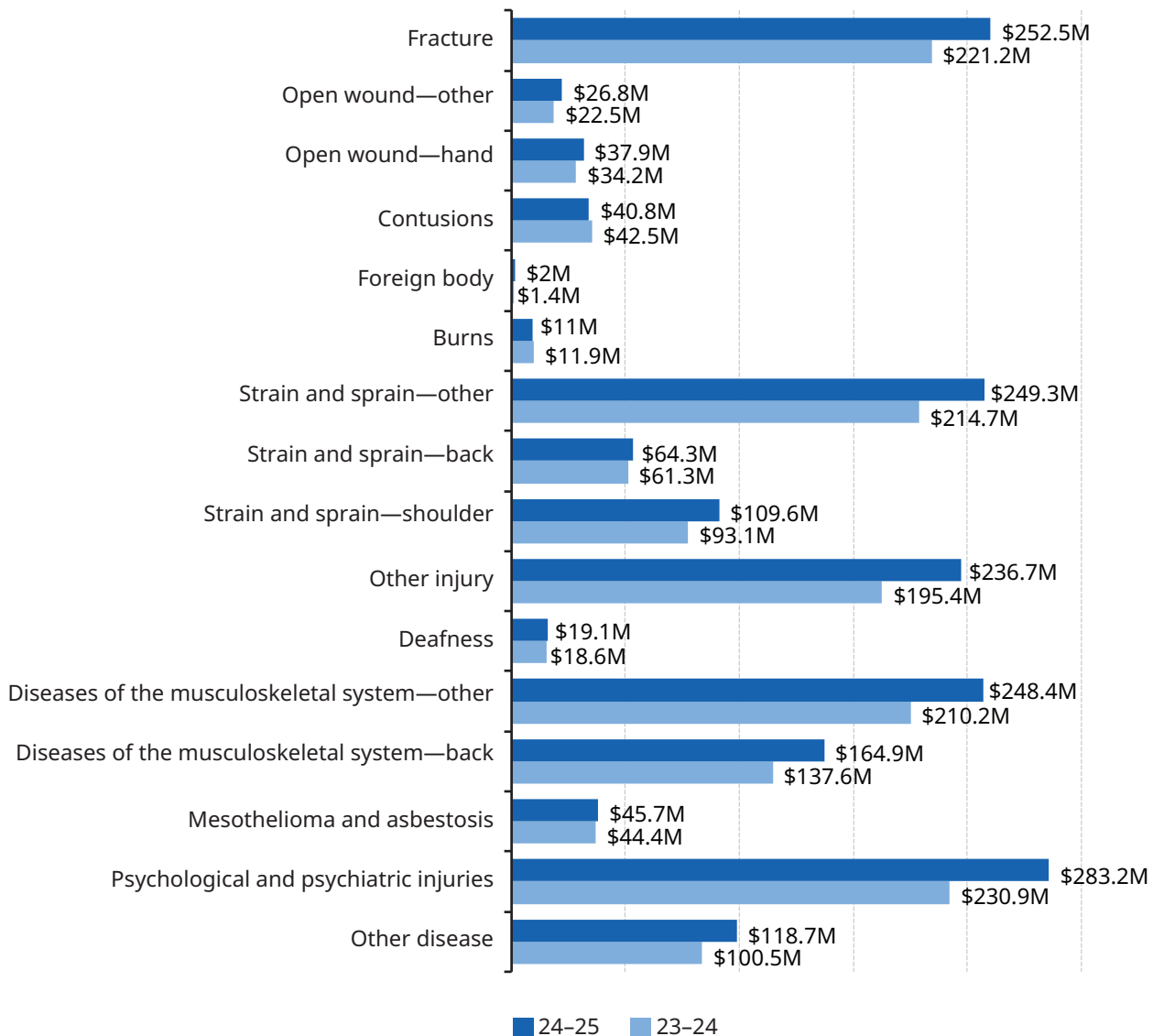


Payments by injury

Claims from strain and sprain injuries accounted for the largest proportion (22.2 per cent) of statutory claim payments in 2024–25 (3.4 per cent to the back, 5.7 per cent to the shoulder and 13 per cent to a location other than the back or shoulder). Diseases of the musculoskeletal system claims accounted for 21.6 per cent of statutory claim payments made in 2024–25 (8.6 per cent to the back and 13 per cent to a location other than the back). Psychological and psychiatric injuries accounted for 14.8 per cent of statutory claim payments in 2024–25.

The injury type that experienced the largest increase in statutory claim payments from 2023–24 to 2024–25 was psychological and psychiatric injuries which increased by \$52.3M. Followed by diseases of the musculoskeletal system to locations other than the back, which increased by \$38.2M.

26 Statutory claim payments by injury type 2023–24 and 2024–25



Finalised claims and outcomes

- The average costs of finalised medical expense only claims increased by 31 per cent.
- The average costs of finalised time lost claims increased by 6.6 per cent and the duration increased 1.9 per cent.

Work related impairment/degree of permanent impairment

When a worker has a permanent impairment (PI) assessed the worker receives a degree of permanent impairment (DPI). Note, before 15 October 2013 a workers' work-related impairment (WRI) was calculated.

For injuries before 15 October 2013 a person may have multiple permanent impairments assessed separately; from these only one physical and one psychological or psychiatric WRI is calculated. For injuries after 15 October 2013, impairments are assessed together and only one physical and one psychological or psychiatric DPI is given.

Injured workers receive an offer of lump sum compensation based on their WRI or DPI.

Figure 27 shows the number of claims finalised and those that had a WRI/DPI in 2023–24 and 2024–25.

27 Finalised claims with a WRI/DPI 2023–24 and 2024–25

	23–24	24–25	Variance %
Finalised claims	82,133	84,431	2.8
WRI/DPI	11,069	12,625	14.1
Proportion of finalised claims with WRI/DPI	13.5%	15%	1.5
Work related impairment/Degree of permanent impairment range			
0%	2493	2794	12.1
0.1%–4.9%	3453	4197	21.5
5%–9.9%	3392	3827	12.8
10%–14.9%	810	859	6
15%–19.9%	370	398	7.6
>=20%	551	550	-0.2

For 2024–25, 15 per cent of claims were finalised with a PI. Of these, the majority of claims (95.6 per cent) had a WRI/DPI of less than 20 per cent and 22.1 per cent were calculated as having a zero per cent impairment.

Return to work (RTW) outcomes

Returning an injured worker to the same job with the same employer is the best outcome that can be achieved on a claim. As figure 28 illustrates, this is the outcome achieved in most cases, with 79.4 per cent of injured workers who had time off work returning to the same job and the same employer.

In 2024–25, 90.7 per cent of injured workers returned to some type of employment. 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 (2.1 per cent of time lost claims) or the worker chooses not to return (4 per cent of claims).

28 Return to work status of finalised time lost claims 2023–24 and 2024–25

	23–24		24–25	
	Number	% of time lost claims	Number	% of time lost claims
Fit for work: same job/tasks with same employer	41,767	79	44,699	79.4
Fit for work: same job/tasks with different employer	832	1.6	925	1.6
Fit for work: different job/tasks with same employer	2354	4.4	2453	4.4
Fit for work: different job/tasks with different employer	2882	5.5	2958	5.3
Fit for work: no job	1205	2.3	1202	2.1
Fit for work: worker does not return	2061	3.9	2223	4
Not fit for work	1638	3.1	1756	3.1
Alternative outcome not claim related	91	0.2	72	0.1
Total	52,830	100	56,288	100

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

One of the factors that influence the RTW outcome on a claim is the severity of the injury. Figure 29 compares claims that have had a PI assessed as an indicator of the impact of severity of injury on RTW outcomes.

Workers with claims assessed for PI are less likely to return to the same job with the same employer. In 2024–25, 9.4 per cent of workers returning to the same job with the same employer had a PI assessed.

Another factor that influences the RTW outcome on claims is the existence of a psychological or psychiatric injury. Figure 30 below illustrates the impact of the injury type on RTW outcomes.

29 Return to work status of finalised time lost claims with/without a PI assessed 2023–24 and 2024–25

	23–24			24–25		
	PI Assessed			PI Assessed		
	% No	% Yes	Number	% No	% Yes	Number
Fit for work: same job/tasks with same employer	91.7	8.3	41,767	90.6	9.4	44,699
Fit for work: same job/tasks with different employer	74.8	25.2	832	69	31	925
Fit for work: different job/tasks with same employer	58.7	41.3	2354	53.8	46.2	2453
Fit for work: different job/tasks with different employer	56.6	43.4	2882	53.4	46.6	2958
Fit for work: no job	37.2	62.8	1205	32.9	67.1	1202
Fit for work: worker does not return	52.7	47.3	2061	50.5	49.5	2223
Not fit for work	29.7	70.3	1638	28.6	71.4	1756
Alternative outcome not claim related	68.1	31.9	91	54.2	45.8	72
Total	83.4	16.6	52,830	81.9	18.1	56,288

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 in 2024–25, 15.3 per cent were not fit for work at the end of their claim.

30 Return to work status of finalised time lost claims by injury nature 2023–24 and 2024–25

	23–24			24–25		
	Physical only %	Psych only %	Psych and Physical %	Physical only %	Psych only %	Psych and Physical %
Fit for work: same job/tasks with same employer	83.5	46.3	34.6	84	46.7	35.4
Fit for work: same job/tasks with different employer	1.3	4.5	2.3	1.4	4	2.5
Fit for work: different job/tasks with same employer	4	8	8.3	4	7.3	7.6
Fit for work: different job/tasks with different employer	4.3	15.7	16	3.9	16.2	17.6
Fit for work: no job	1.8	4.8	9	1.6	4.6	8.8
Fit for work: worker does not return	3.1	10.6	11.2	3.1	10.3	12.1
Not fit for work	1.9	9.8	17.5	1.9	10.8	15.3
Alternative outcome not claim related	0.1	0.3	1.2	0.1	0.1	0.7
Total	100	100	100	100	100	100
Number	47,382	2708	2740	50,260	3002	3026

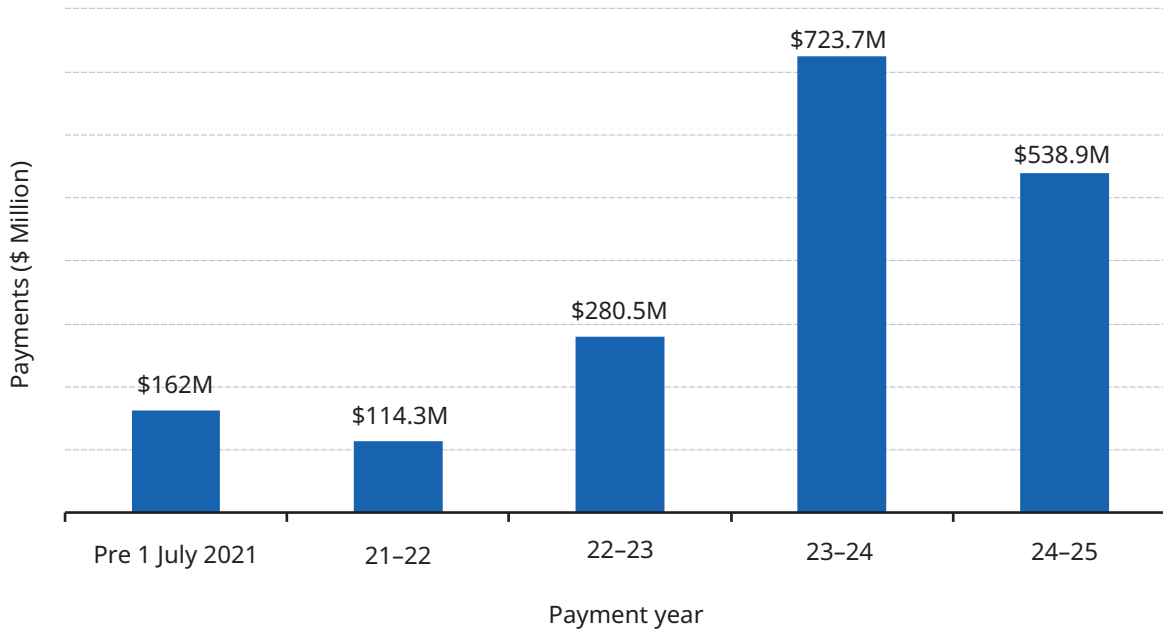
Note: For the purpose of the above figure only, all deceased injured workers have been excluded.

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.

Figure 31 below illustrates the payments made on claims finalised in 2024–25. Over 70 per cent of the payments for these claims occurred in previous years. Only 29.6 per cent of the statutory payments made on claims finalised in 2024–25 were also paid in that financial year. A further 39.8 per cent of payments were made in the 2023–24 financial year. The remaining 30.6 per cent of the payments were made in 2022–23 or earlier.

31 Payments by payment year for claims finalised in 2024–25



It should be noted that claims with longer durations that occur over multiple years do not impact 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 11 per cent from \$19,039 in 2023–24 to \$21,142 in 2024–25).

Figure 32 below shows the number of claims finalised in the past two financial years. The table also shows the average claim costs by claim type for time lost claims and medical expense only claims. These two claim types represent 97.5 per cent of all finalised claims during 2024-25.

32 Finalised claims and average claim costs by claim type 2023-24 and 2024-25

Claim type	Number of claims			Average claim cost		
	23-24	24-25	Variance %	23-24	24-25	Variance %
Time lost claim	52,852	56,305	6.5	\$27,182	\$28,974	6.6
Medical expense only claim	27,186	26,036	-4.2	\$3208	\$4203	31
Total	80,038	82,341	2.9	\$19,039	\$21,142	11

The median claim costs for time lost and medical expense only claims have increased from \$3351 in 2023-24 to \$4116 in 2024-25.

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 the 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.

Figure 33 compares the variance in finalised claim costs to other indicators.

33 Changes in average finalised claim costs and economic indices 2024-25

Indicator	% change from previous year
Average finalised time lost claim cost	6.6
Average finalised medical expense only claim cost	31
Consumer price index	
Average of all groups, Brisbane (excluding GST) ^a	2.7
Health, Brisbane (excluding GST) ^b	4.1
Full time adult ordinary earnings ^c	5.9

^a Australian Bureau of Statistics, consumer price index, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2025, Tables 1 and 2 CPI - all groups, index numbers and percentages changes, Index Numbers; All groups; Brisbane. [Percentage change from March 2024 to March 2025].

^b Australian Bureau of Statistics, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2025, Table 5 CPI - groups, index numbers by capital city, Index Numbers; Health; Brisbane. [Percentage change from March 2024 to March 2025].

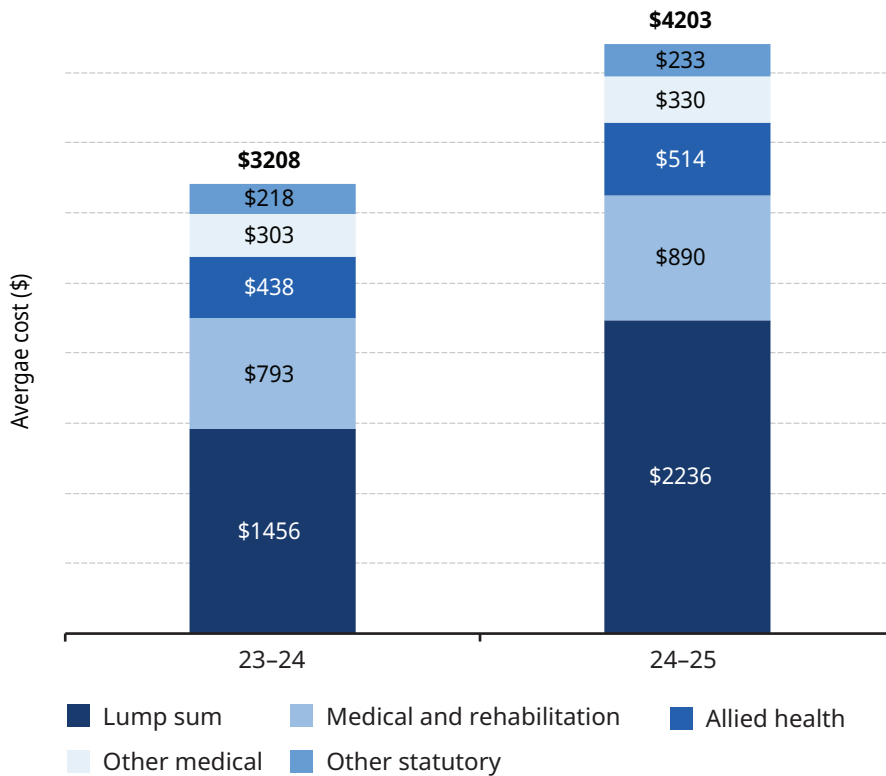
^c Australian Bureau of Statistics, average weekly earnings, Australia Cat No. 6302.0 - Average weekly earnings Australia, November 2024. Table 13C Average weekly earnings Queensland (dollars) - trend, Earnings; Queensland; Persons; Full Time; Adult; Ordinary time earnings. [Percentage change from November 2023 to November 2024].

Average finalised medical expense only claim costs

As shown in figure 34, the average cost of finalised medical expense only claims has increased by 31 per cent from \$3208 in 2023–24 to \$4203 in 2024–25.

The breakdown of the average cost for 2024–25 shows 53.2 per cent of the cost is made up of lump sum payments followed by medical and rehabilitation payments of 21.2 per cent. Allied health payments account for 12.2 per cent and other medical payments (including hospitalisation) account for 7.9 per cent. The remaining 5.5 per cent of the average cost is made up of other statutory payments.

34 Average finalised medical expense only claim costs by payment type 2023–24 and 2024–25



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 increased in 2024–25, up 6.5 per cent from 52,852 in 2023–24 to 56,305.

Durations for finalised time lost claims including the excess paid period by the employer (where applicable) have increased from 68.7 days in 2023–24 to 70 days in 2024–25.

Almost two thirds of time lost claims have 40 or less workdays lost (63.3 per cent), while the median workdays lost for all time lost claims is 21 days. This illustrates how the small number of long-term claims impact the average duration. Only 15.5 per cent 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 of the Act).

35 Number of time lost claims by workdays lost time band 2023–24 and 2024–25

Workdays lost 20	2023–24		2024–25	
	Number of claims	% of claims	Number of claims	% of claims
1–5 days	13,634	25.8	13,990	24.8
6–10 days	6565	12.4	6758	12
11–20 days	6879	13	7225	12.8
21–40 days	7180	13.6	7696	13.7
41–65 days	4891	9.3	5375	9.5
66–130 days	5951	11.3	6561	11.7
131–260 days	4181	7.9	4872	8.7
> 260 days	3571	6.7	3828	6.8
Total time lost claims	52,852	100	56,305	100

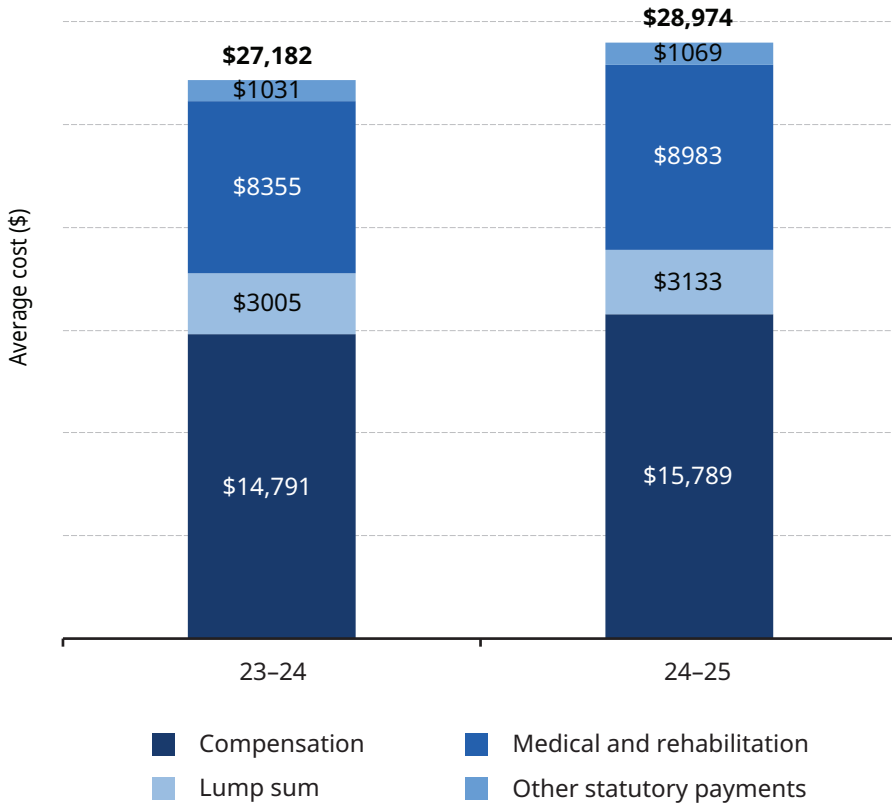
Average finalised time lost claim costs

Figure 36 shows the average cost of claims increased by 6.6 per cent from \$27,182 in 2023–24 to \$28,974 in 2024–25.

The breakdown of the average cost in 2024–25 shows over half (54.5 per cent) of the cost is made up of weekly compensation payments.

In 2024–25, medical and rehabilitation payments accounted for almost a third (31 per cent) of the average cost and lump sum payments accounted for 10.8 per cent. The remaining 3.7 per cent of the average cost was made up of other statutory payments.

36 Average finalised time lost claim costs by payment type 2023–24 and 2024–25

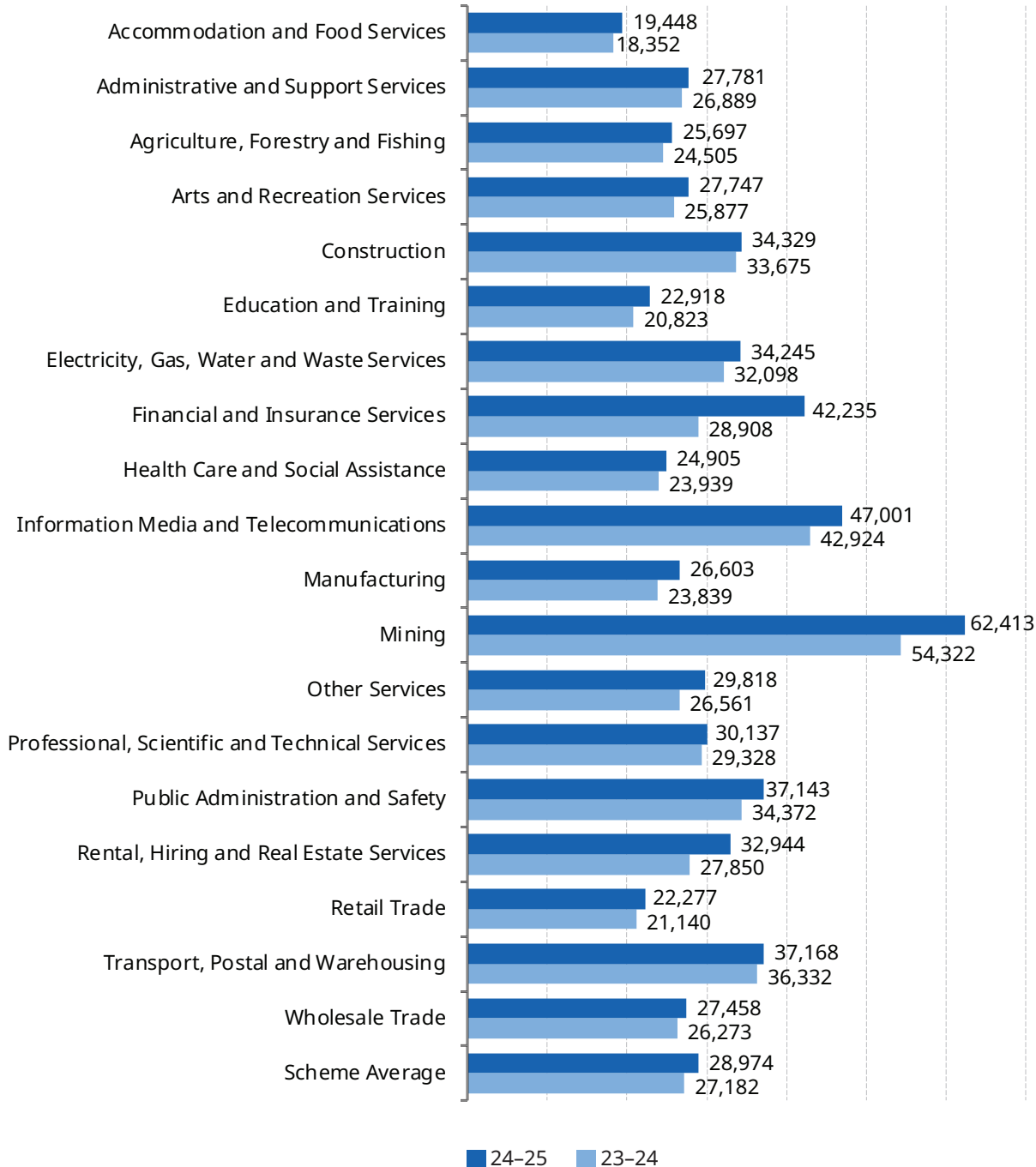


Average cost by industry

Figure 37 shows, of all industry claims, those from the mining industry had the highest average finalised time lost claim cost (\$62,413), partially due to the higher wages paid in the industry. Being the highest of all industries, the Australian average weekly earnings (full time adult ordinary time earnings) for workers within the mining industry is \$3112*.

Similarly, industries that tended to have a lower average finalised time lost claim cost (e.g. accommodation and food services and retail trade) also had the lowest Australian average weekly earnings of all industries—\$1431 and \$1496 respectively.

37 Average finalised time lost claim costs by industry 2023–24 and 2024–25



*Source: ABS, Average Weekly Earnings, Cat. No. 6302.0, November 2024, Table 10G. Average Weekly Earnings, Industry, Australia (Dollars) - Original - Persons, Full Time Adult Ordinary Time Earnings.

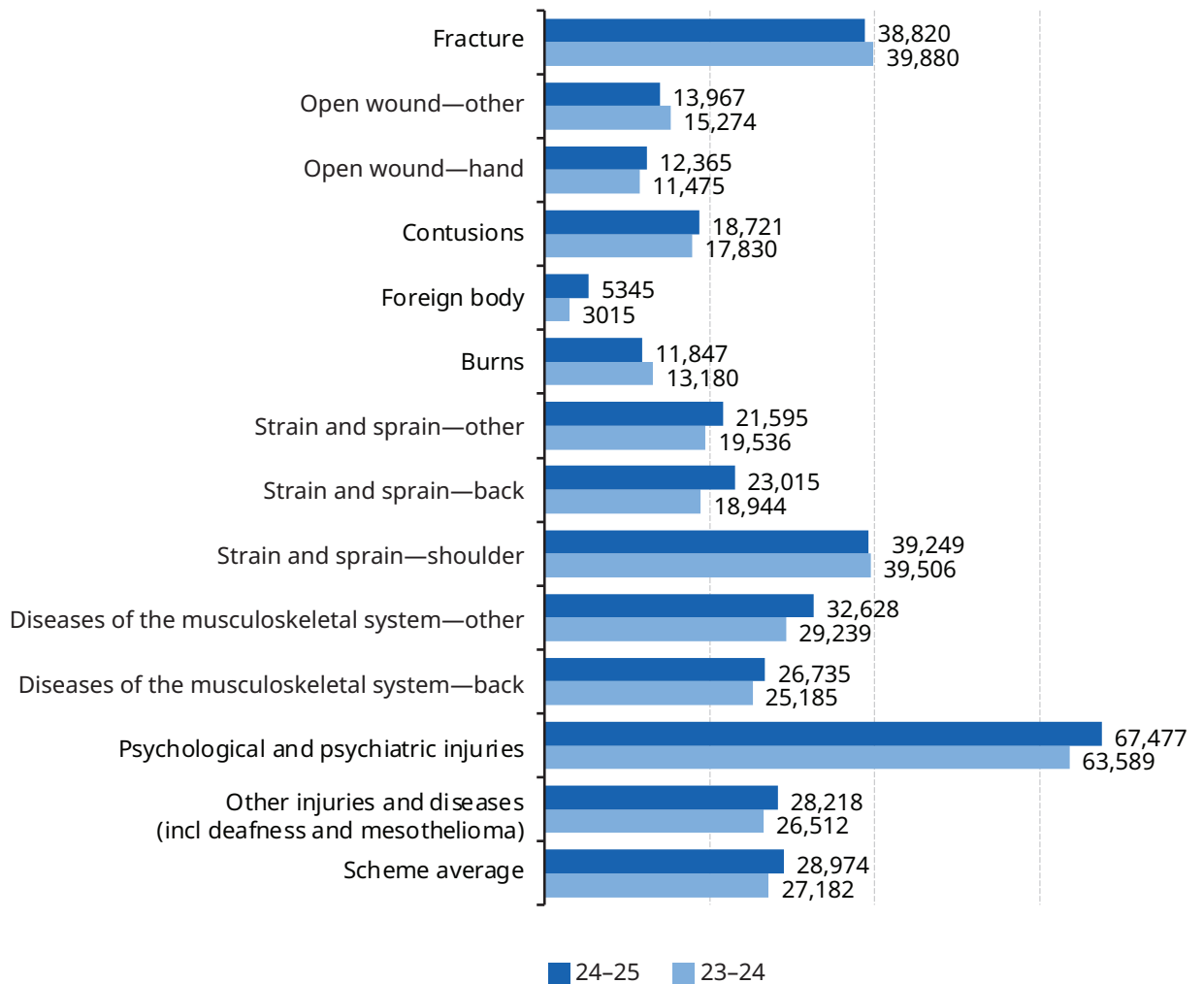
Average cost by injury type

Although psychological and psychiatric injury claims account for only 5.9 per cent of all time lost claims finalised, they are the most expensive with an average finalised time lost claim cost of \$67,477 in 2024-25.

In 2024-25, the average duration of a psychological or psychiatric injury claim was 180 days (178.9 days in 2023-24) compared with the overall scheme average of 70 days. It is the long duration of psychological and psychiatric injury claims that impacts the average finalised time lost claim cost for these claims.

As shown in figure 38, the second most expensive injury type was strain and sprain of the shoulder with an average cost of \$39,249 (\$39,506 in 2023-24).

38 Average finalised time lost claim cost by injury type 2023-24 and 2024-25



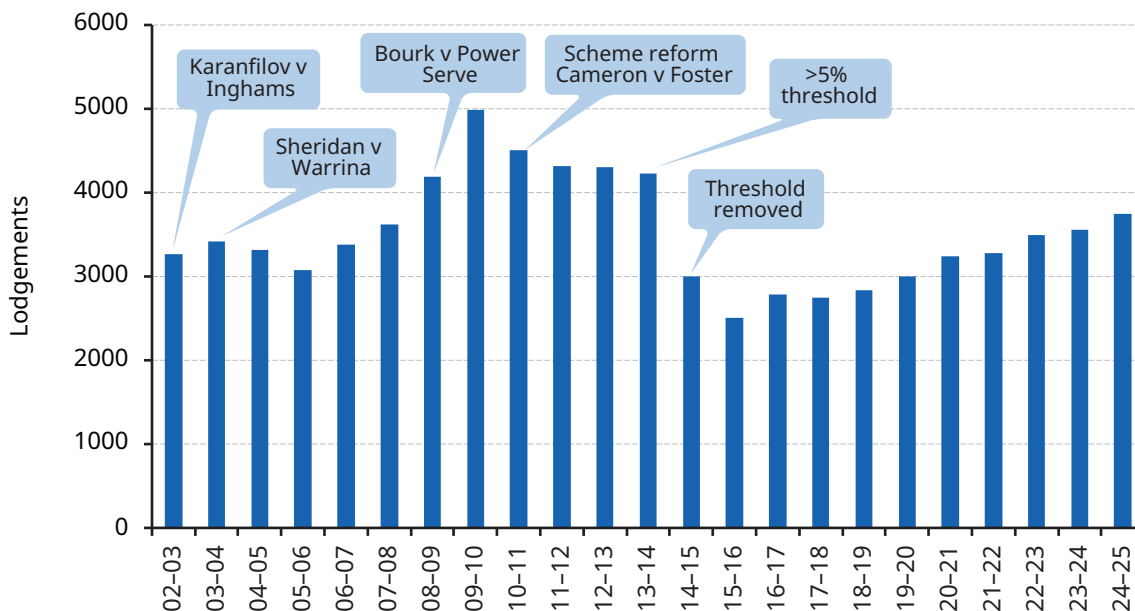
Claims for damages at common law

- Common law lodgements have increased 5.6 per cent over the last year.
- The majority of lodgements are for injuries that occurred one to three years prior.
- Over half (56.2 per cent) of common law lodgements have a work-related impairment of less than 5 per cent.
- Psychological and psychiatric injury claims represent 15.7 per cent of common law lodgements. They represent only 8.6 per cent of statutory claim lodgements.
- In 2024–25, the average settlement cost of a finalised common law claim was \$182,296.

Lodgements

Figure 39 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 2002–03 to 2024–25



Legislative amendments in 2013 introduced a threshold to restrict access to common law damages. This threshold required workers with injuries on or after 15 October 2013 to have a degree of permanent impairment (DPI) greater than five per cent to access common law damages.

In 2015, the threshold was removed for injuries on or after 31 January 2015. The 2015 legislative amendments established a provision for additional compensation for workers impacted by the common law threshold.

In 2024–25, common law claim lodgements increased by 5.6 per cent, increasing from 3555 in 2023–24 to 3753 in 2024–25. Figure 40 shows common law claim lodgements over the past eight years by the date of injury.

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

40 Common law claim lodgements 2017–18 to 2024–25 by injury year

Injury year	Lodgement year							
	2017–18	2018–19	2019–20	2020–21	2021–22	2022–23	2023–24	2024–25
Pre 01/07/2008	32	35	35	38	36	9	16	17
2008–09	4	0	4	2	4	1	1	2
2009–10	3	1	0	0	1	1	2	0
2010–11	8	4	1	2	0	1	0	1
2011–12	12	2	6	5	3	1	2	0
2012–13	12	10	8	6	5	2	1	3
2013–14	47	11	6	6	4	1	6	2
2014–15	671	35	20	7	8	4	6	1
2015–16	1003	737	61	28	15	5	11	4
2016–17	867	1048	771	121	45	28	16	10
2017–18	96	863	1074	780	126	39	20	16
2018–19	0	96	915	1194	914	226	80	30
2019–20	0	0	103	956	1222	963	212	57
2020–21	0	0	0	91	826	1356	991	188
2021–22	0	0	0	0	66	808	1284	955
2022–23	0	0	0	0	0	58	833	1407
2023–24	0	0	0	0	0	0	74	993
2024–25	0	0	0	0	0	0	0	67
Total	2755	2842	3004	3236	3275	3503	3555	3753

Figure 41 shows the breakdown of common law claim lodgements in 2024–25 by the injured worker’s WRI/DPI.

If the injured worker’s work-related impairment/degree of permanent impairment is less than 20 per cent, 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/degree of permanent impairment is 20 per cent or more, the injured worker can accept a lump sum payment and seek damages. Only a small proportion of common law claims (5.3 per cent) are able to access lump sum payment and pursue common law.

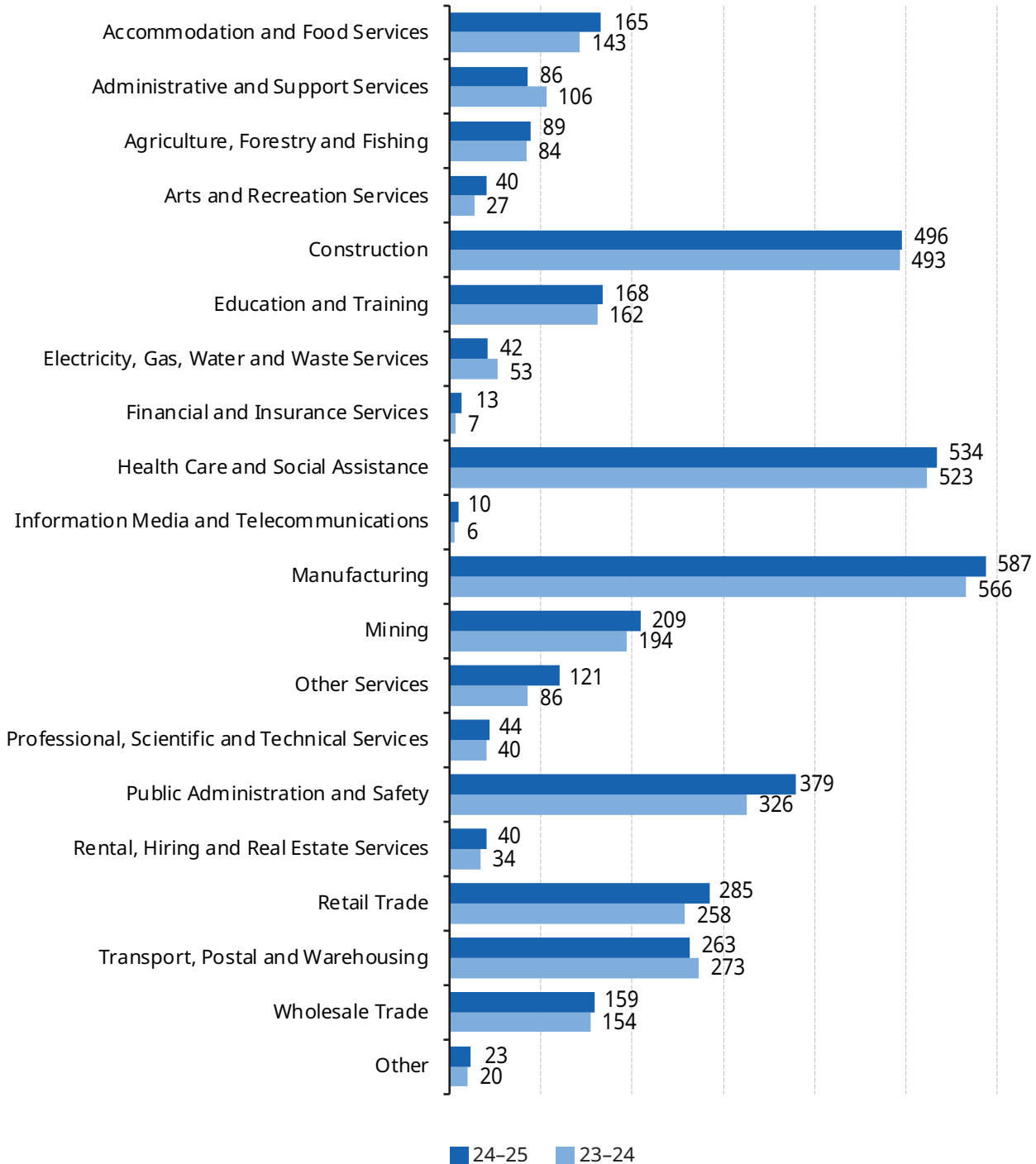
41 Common law claim lodgements by WRI/DPI 2024–25

WRI/DPI	Common law lodgements	% of common law lodgements
No impairment assessed	396	10.6
0%	763	20.3
0.1–4.9%	949	25.3
5–9.9%	1115	29.7
10–14.9%	238	6.3
15–19.9%	94	2.5
>=20%	198	5.3
Total	3753	100

Industry

As shown in figure 42, the manufacturing (15.6 per cent), health care and social assistance (14.2 per cent), and construction (13.2 per cent) industries represent the highest proportion of common law claims lodged in the Queensland workers' compensation scheme.

42 Common law claim lodgements by industry 2023–24 and 2024–25



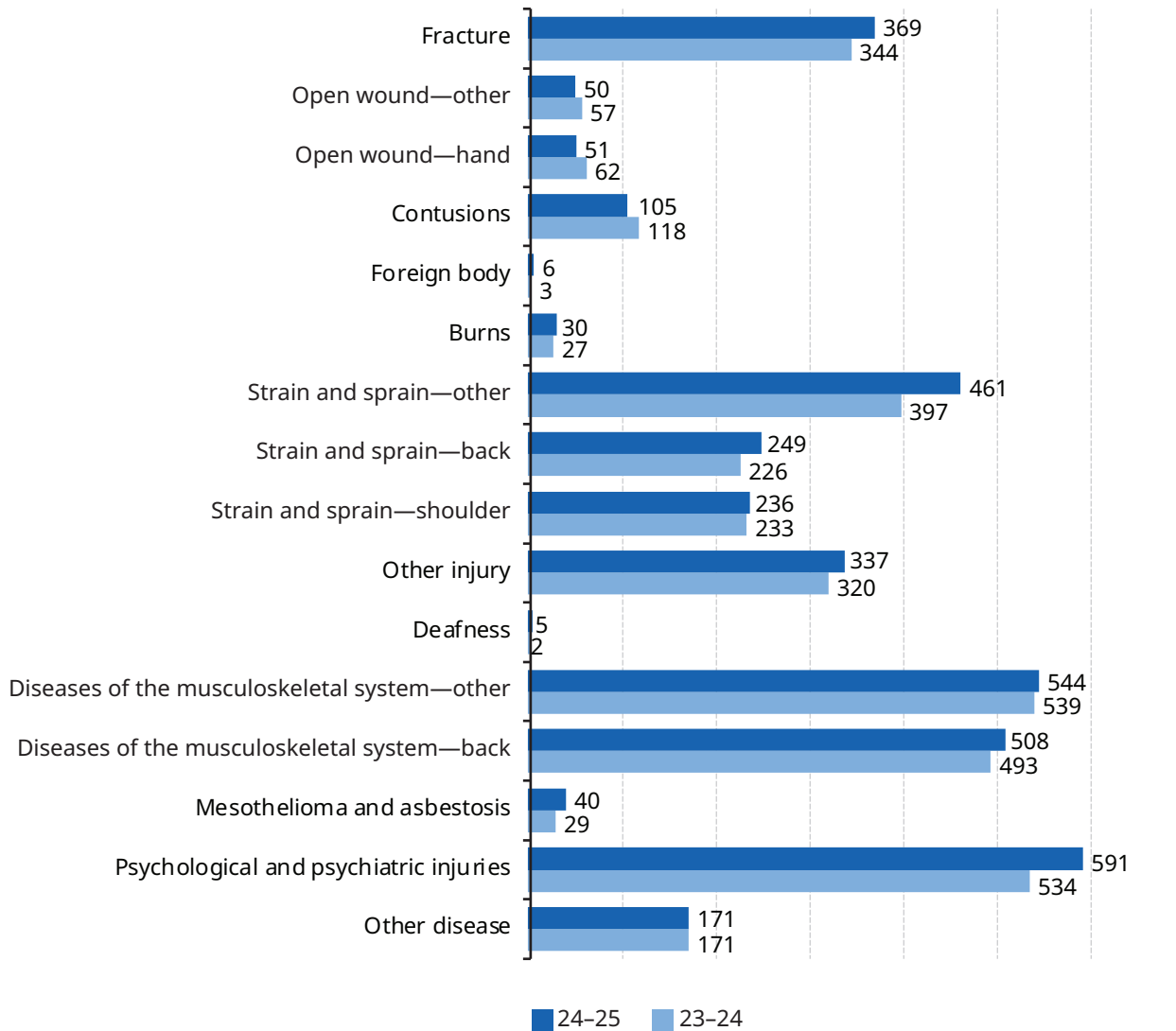
Note: For industry 'Other', this includes injuries pre-July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strains and sprains accounted for 25.2 per cent of all common law claim lodgements in 2024–25.

Although psychological and psychiatric injury claims represented only 8.6 per cent of statutory claim lodgements, they represented 15.7 per cent of all common law claim lodgements in 2024–25.

43 Common law claim lodgements by injury type 2023–24 and 2024–25



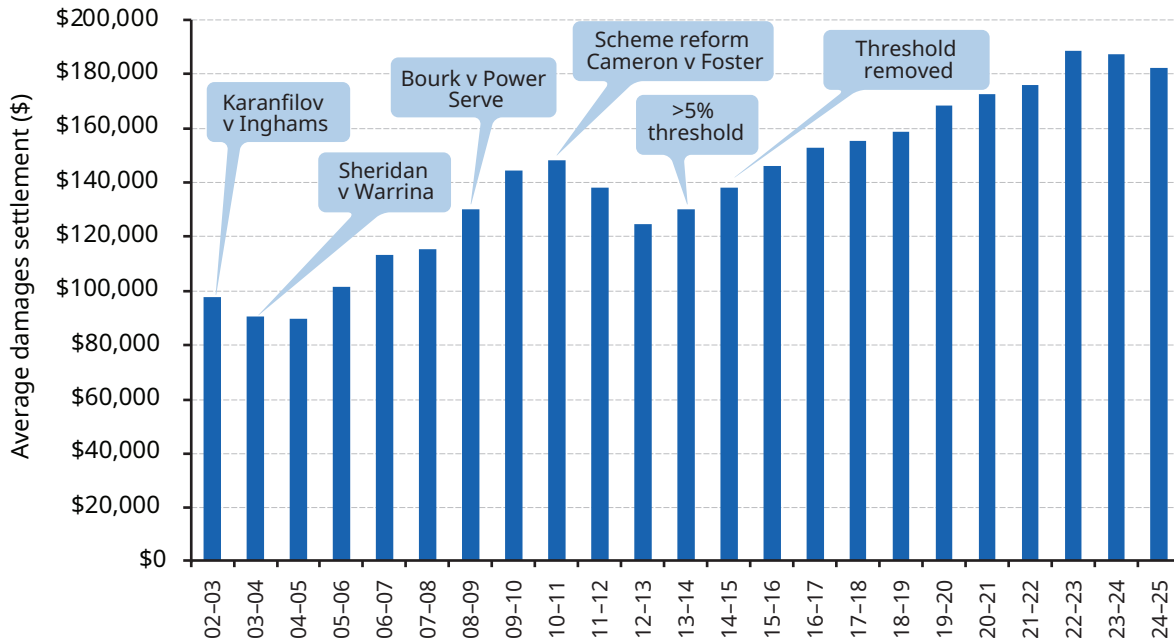
Total common law payments

In 2024–25, common law claims cost a total of \$656.8 million. This represents a 5.8 per cent decrease from the 2023–24 cost of \$697.2 million.

Average costs

Figure 44 shows a history of the 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.

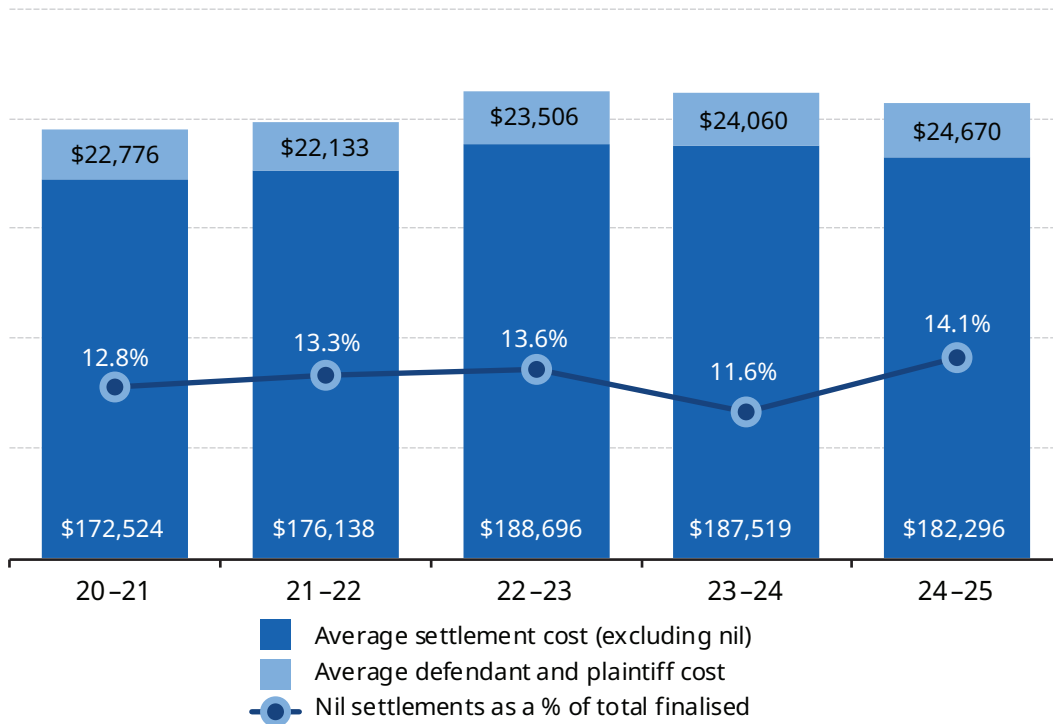
44 Common law average damages settlement history 2002–03 to 2024–25



Over the last year, the average settlement cost of a finalised common law claim (excluding nil settlements) has decreased 2.8 per cent from \$187,519 in 2023–24 to \$182,296 in 2024–25. The average defendant and plaintiff cost increased 2.5 per cent from \$24,060 in 2023–24 to \$24,670 in 2024–25. Figure 45 shows average cost fluctuations between 2020–21 and 2024–25.

In 2024–25, there were 483 common law claims finalised with a nil settlement.

45 Average costs for finalised common law claims by payment type 2020–21 to 2024–25



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 consist 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 three times Queensland ordinary time earnings (QOTE) per week for each week of the period of loss of earnings as specified within the Act.

Figure 46 shows the average cost of each head of damage for a finalised claim (excluding nil settlements).

46 Heads of damage average cost 2023–24 and 2024–25

	2023–24		2024–25	
	\$	%	\$	%
General damages	26,360	8.6	25,473	8.7
Past economic loss	78,738	25.8	75,326	25.8
Future economic loss	153,788	50.3	148,799	51
Rehabilitation	40,040	13.1	37,960	13
Gratuitous care	3894	1.3	1737	0.6
Other	2874	0.9	2669	0.9
Gross settlement	305,694	100	291,964	100

Average timeframes

For claims lodged in the financial year, the average time from date of injury to lodgement of a common law claim has decreased by 0.4 per cent (2.38 years in 2023–24; 2.37 years in 2024–25).

For claims finalised in the financial year, the average time from the lodgement of a common law claim to finalisation has decreased by 4.7% (1.06 years in 2023–24; 1.01 years in 2024–25).

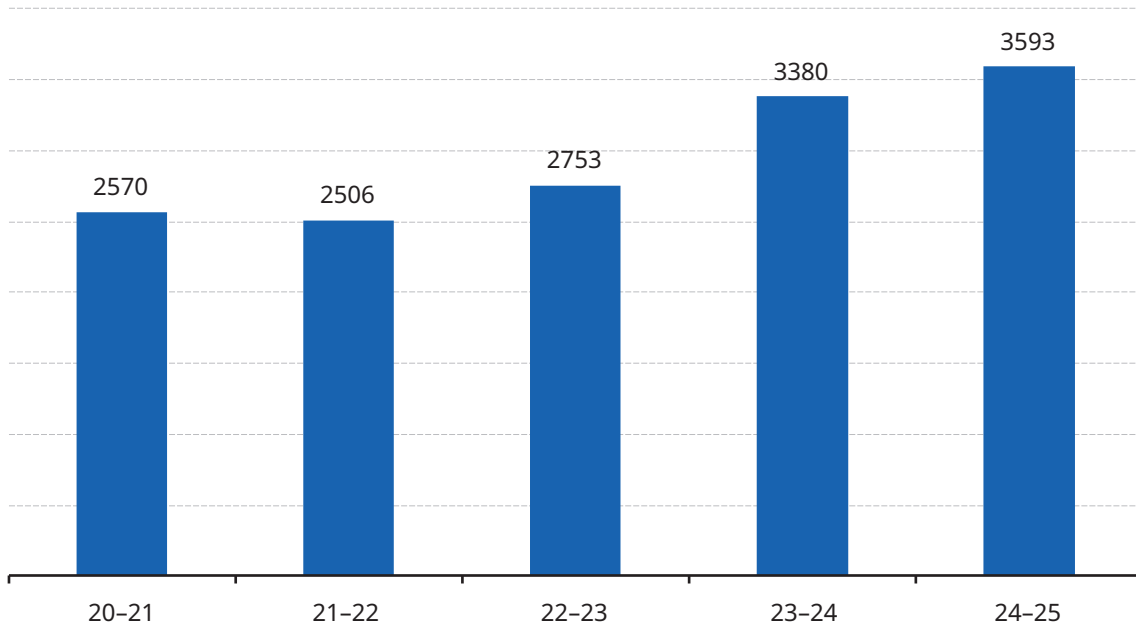
Review of insurer decisions

Applications received

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

Review applications received have increased (6.3 per cent) to 3593 in 2024–25, up from 3380 in 2023–24.

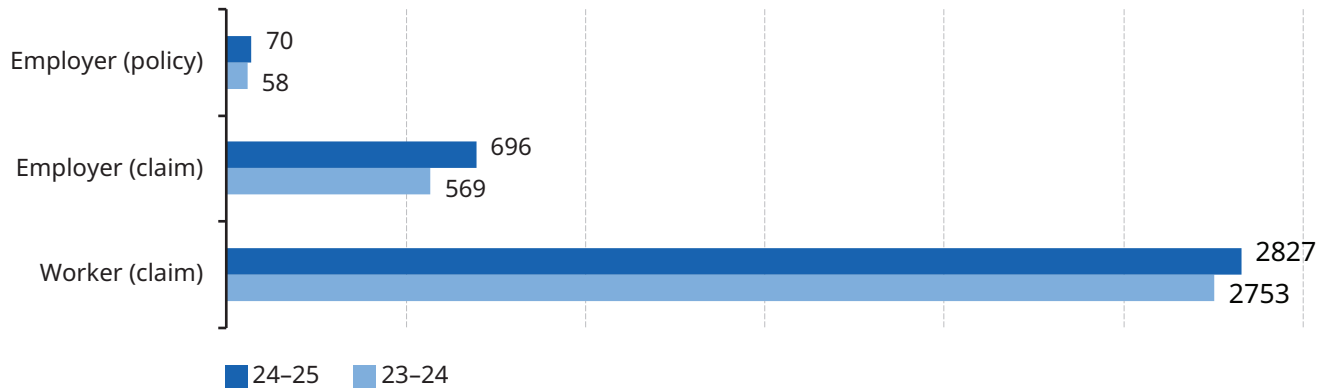
47 Review applications received 2020–21 to 2024–25



Types of applications

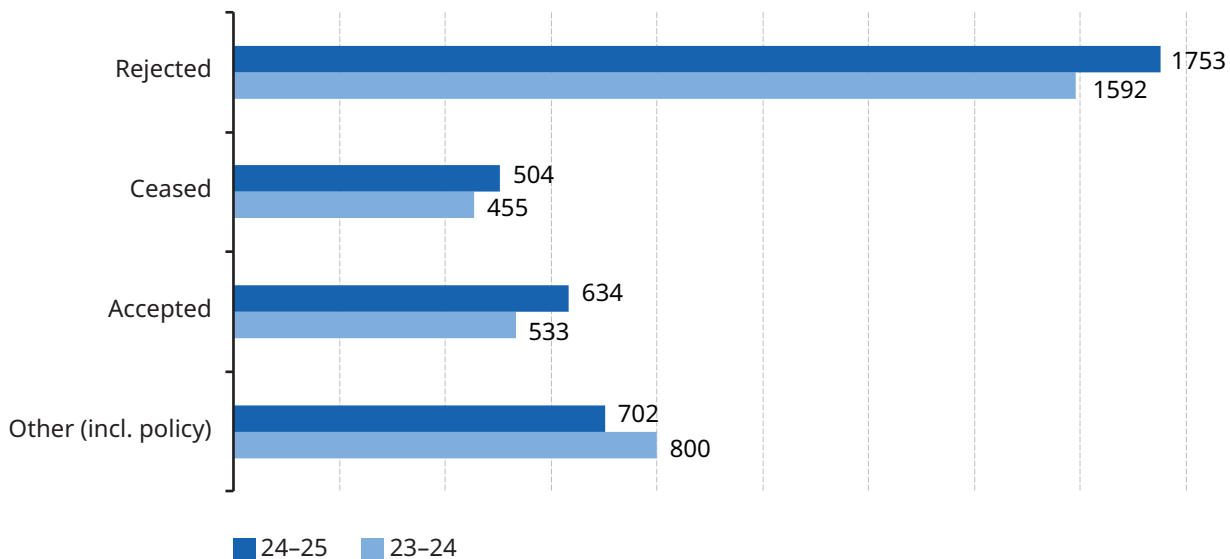
Of the applications lodged in 2024–25, 78.7 per cent were lodged by workers, down from 81.4 per cent in 2023–24. Employers lodged 19.4 per cent of reviews in 2024–25, up from 16.8 per cent in 2023–24. The remaining 1.9 per cent of applications were lodged by employers having a policy decision reviewed.

48 Review applications received by type 2023–24 and 2024–25



Just under half (48.8 per cent) of all review applications received in 2024–25 related to the insurer decision to reject the claim, 17.6 per cent were lodged after the claim had been accepted and 14 per cent were following the cessation of the claim.

49 Review applications received by insurer decision 2023–24 and 2024–25



Outcomes

As shown in figure 50, 90.5 per cent of reviews finalised in 2024–25 were decided, the same proportion as in 2023–24, 5.8 per cent were cancelled (5.9 per cent in 2023–24), and the remaining 3.7 per cent were withdrawn (3.6 per cent in 2023–24).

50 Review outcomes 2023–24 and 2024–25

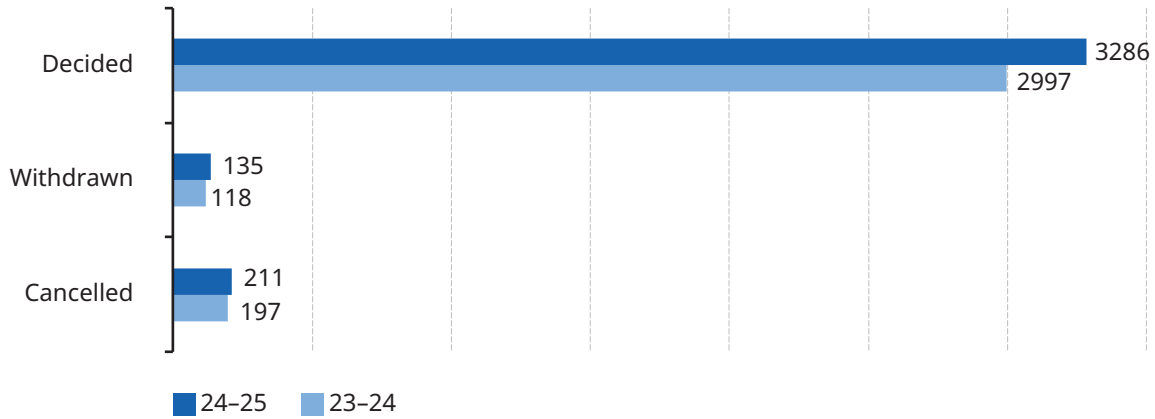
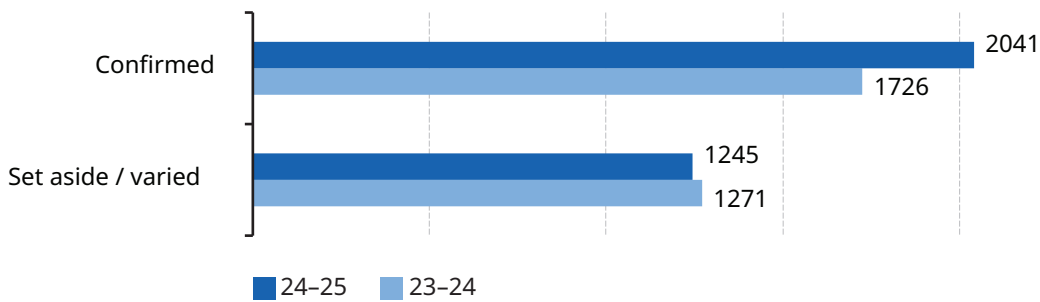


Figure 51 demonstrates that in 2024–25, the original decision of the insurer was confirmed by the Regulator in 62.1 per cent of review decisions made, compared to 57.6 per cent in 2023–24.

51 Decided review outcomes 2023–24 and 2024–25



Appeals of review decisions

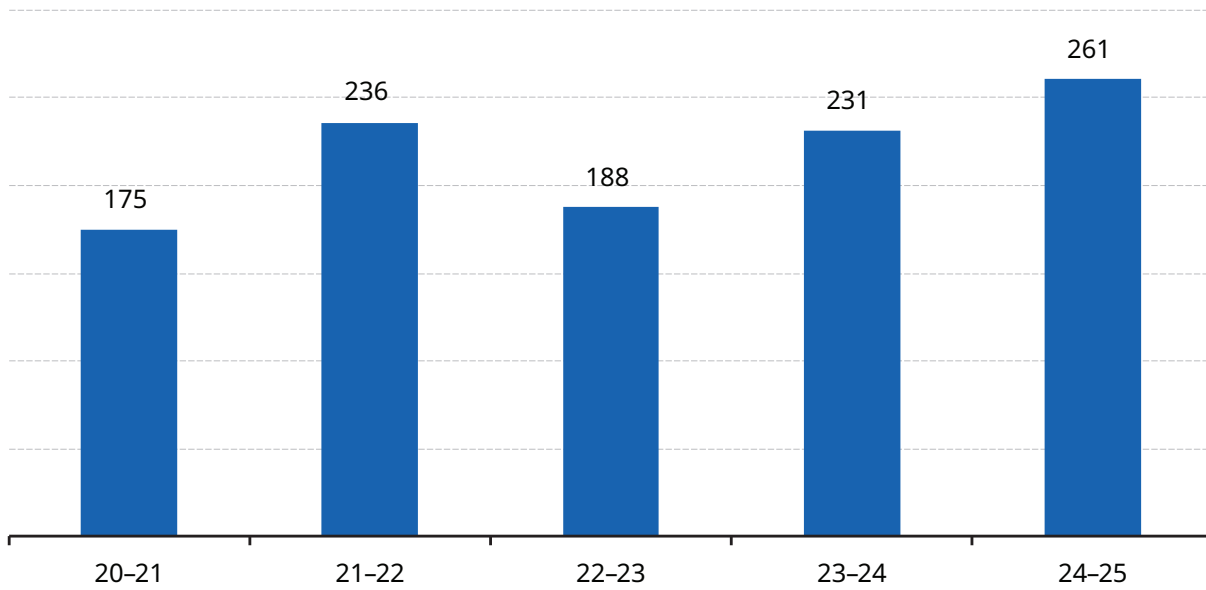
Appeal lodgements

A party aggrieved by a decision of the Regulator may apply for appeal. In December 2010, the Queensland Industrial Relations Commission (QIRC) replaced the Industrial Magistrates Court as the appeal body for appeals of reviewable decisions (except for appeals about WorkCover Queensland's premium decisions).

In 2024–25, 261 appeals were lodged with the QIRC. There were no appeals made in the Industrial Court (IC).

Appeal lodgements have experienced an increase of 13 per cent in 2024–25 compared with 2023–24.

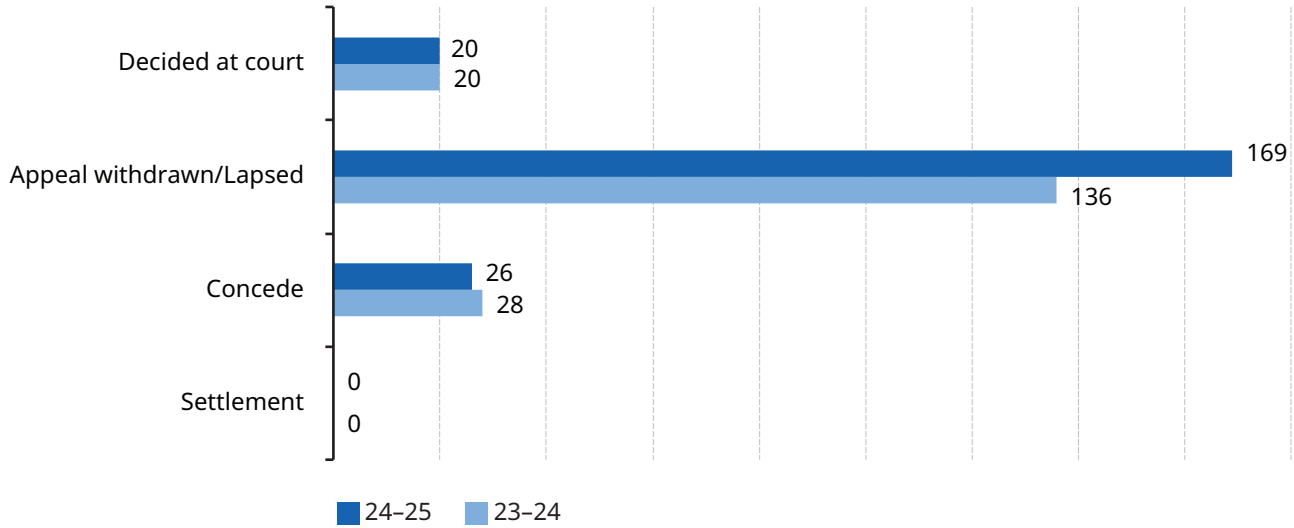
52 Appeals lodged 2020–21 to 2024–25



Appeal outcomes

In 2024-25, 90.7 per cent of appeals were finalised before reaching the QIRC. Of these, 86.7 per cent of cases were withdrawn by the appellant and 13.3 per cent were conceded.

53 Appeals finalised by outcome 2023-24 and 2024-25



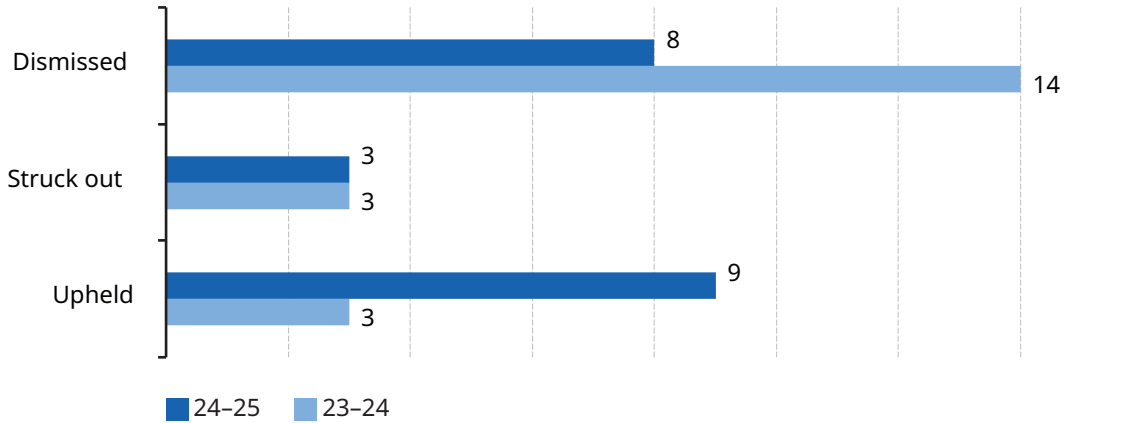
Non-judicial resolution

In 2024–25, 195 appeals were finalised before reaching the court or commission. This is an increase of 18.9 per cent when compared to 164 in 2023–24.

Judicial resolution

The total percentage of cases determined by a court or commission in 2024–25 was 9.3 per cent, which has decreased compared to 2023–24 (10.9 per cent). As shown in figure 54, of the cases determined, 11 cases (55 per cent) were dismissed or struck-out and 9 cases (45 per cent) were upheld in favour of the appellant.

54 Appeals finalised judicially by outcome 2023–24 and 2024–25



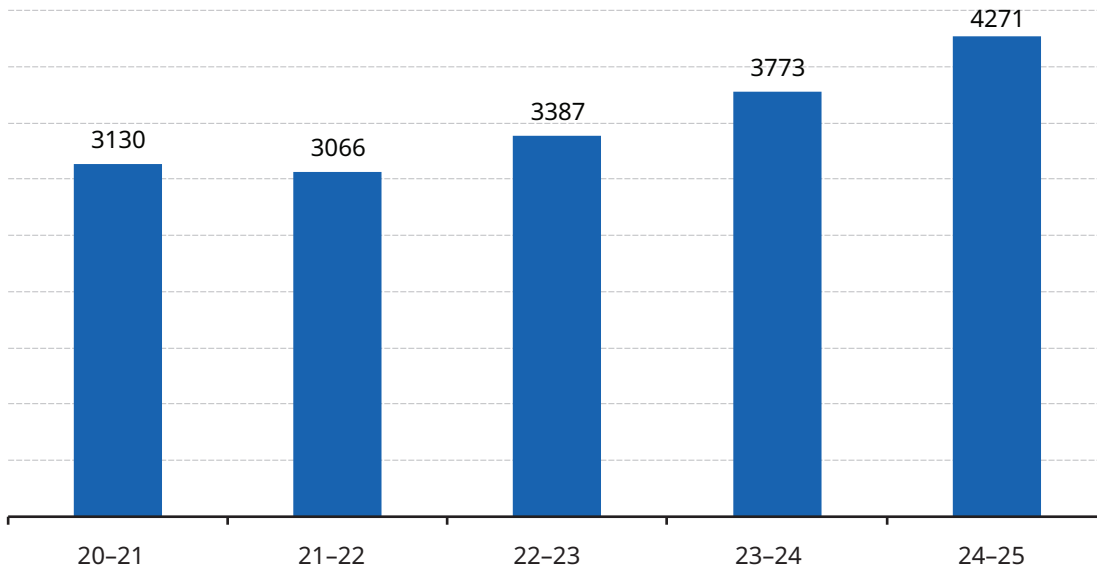
Medical Assessment Tribunals

Referrals

Medical Assessment Tribunals are coordinated by the Regulator to determine ongoing incapacity of an injured worker, assess permanent impairment and whether the injury is work related.

In 2024–25, 4271 cases were referred to a Medical Assessment Tribunal. This is a 13.2 per cent increase on the 3773 cases referred in 2023–24.

55 Medical Assessment Tribunal referrals received 2020–21 to 2024–25



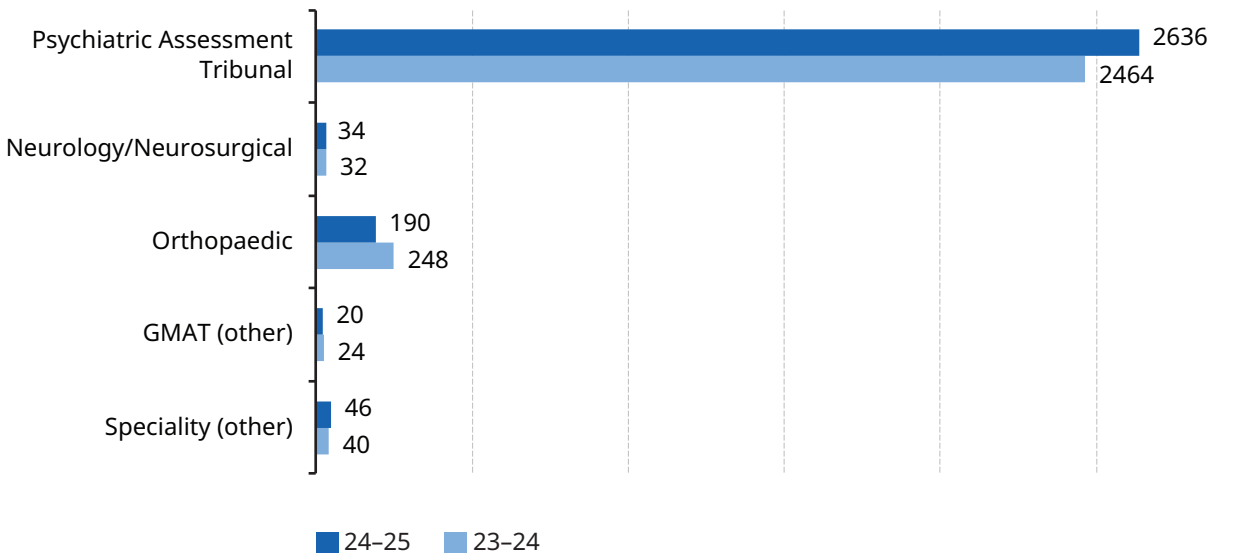
Cases determined

In 2024–25, 2926 cases were determined by a Medical Assessment Tribunal. This represented a 4.2 per cent increase from 2023–24 (2808 determinations).

Of the cases heard in 2024–25, 90.1 per cent (2636) were heard at a Psychiatric Assessment Tribunal compared to 87.7 per cent (2464) in 2023–24.

As shown in figure 56, a further 6.5 percent (190) of cases in 2024–25 were determined at an Orthopaedic Tribunal as compared to 8.8 per cent (248) in 2023–24.

56 Cases determined by tribunal type 2023–24 and 2024–25



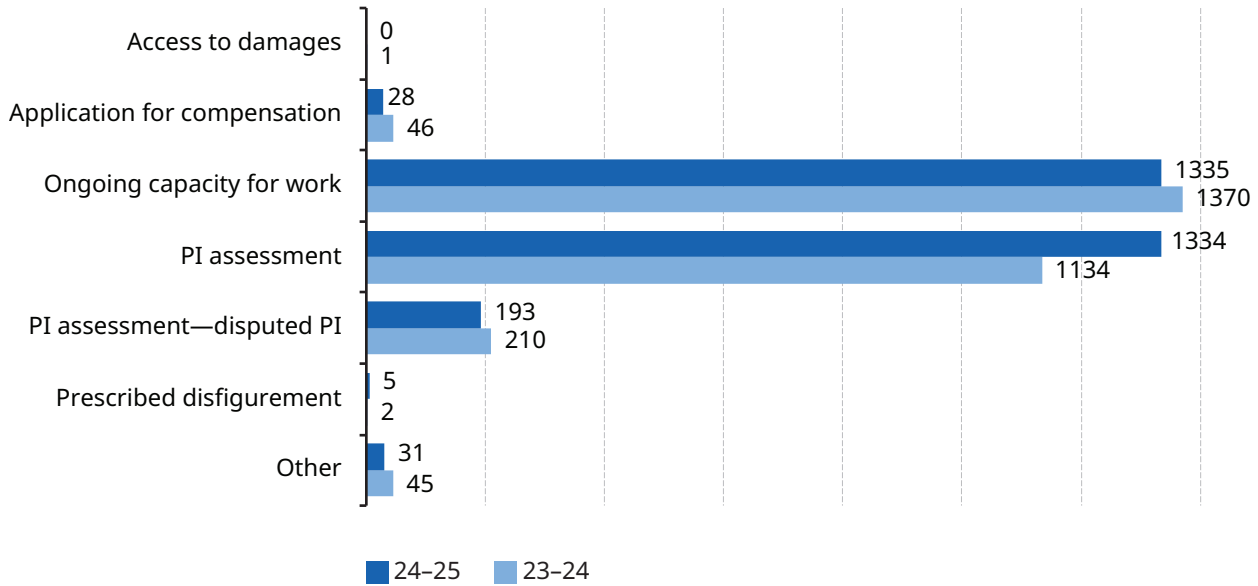
57 Average number of cases heard per tribunal by tribunal type 2023–24 and 2024–25

Tribunal	Average number of cases heard per tribunal	
	2023–24	2024–25
Psychiatric Assessment Tribunal	1.9	1.8
Neurology/Neurosurgical	1.5	1.5
Orthopaedic	2	1.7
GMAT (other)	1.3	1.1
Speciality (other)	1.4	1.4
Total	1.9	1.8

Referral reason

In 2024–25, 52.2 per cent of the cases determined by the Medical Assessment Tribunal were for PI assessment (initial or disputed), compared to 47.9 per cent in 2023–24.

58 Cases determined by referral reason 2023–24 and 2024–25



Workers' compensation investigations and prosecutions

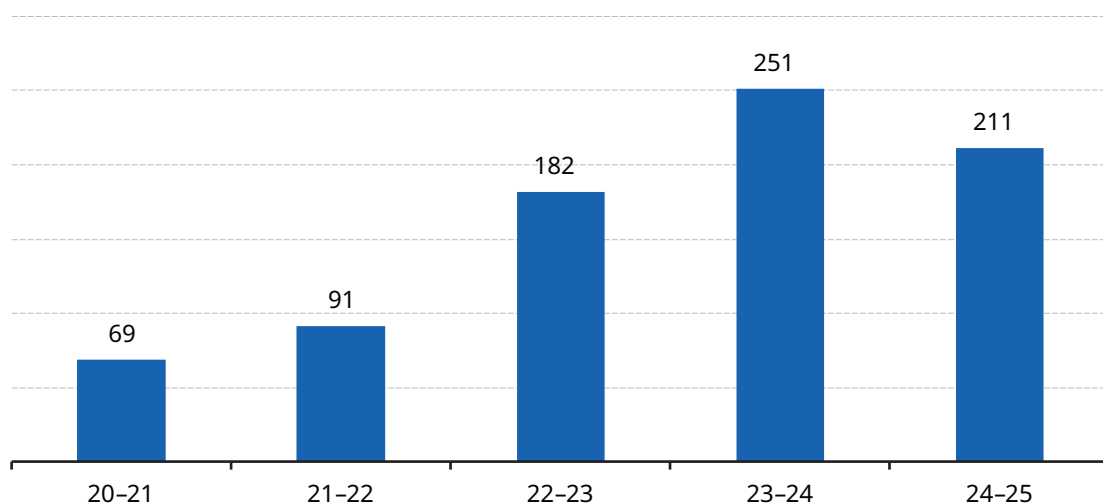
The Regulator investigates and manages the prosecution of offences under the Act.

All insurers have mandatory reporting obligations which require that certain offences are reported to the Regulator where there is a reasonable belief an offence has been committed. These offences include fraud, provision of false information and claim farming offences.

Total reports

In 2024-25, 211 reports of suspected offending were made to the Regulator (a 206 per cent increase over the last five years).

59 Total reports of suspected offending 2020-21 to 2024-25



Investigations and prosecutions

60 Investigations and prosecutions actions and outcomes 2024-25

Investigations finalised	Prosecutions commenced	Prosecutions successfully finalised	Total amount of restitution ordered following conviction for fraud (payable to insurers)	Total amount of fines ordered (payable to the Regulator)	Total amount of costs ordered (payable to the Regulator)
211	6	11	<p>\$253,799.42 as per Court orders made in the 2024-25 financial year.</p> <p>(This is the amount referred to State Penalties Enforcement Registry (SPER) for recovery and is not reflective of restitution amounts paid to OIR).</p>	<p>\$6200 as per Court orders made in the 2024-25 financial year.</p> <p>(The Court does not make a fine order where another penalty is imposed, such as imprisonment or suspended sentence).</p>	<p>\$97,513.94 as per Court orders made in the 2024-25 financial year.</p> <p>(This is the amount referred to SPER for recovery and is not reflective of restitution amounts paid to OIR).</p>

Insurer Licensing, Performance and Compliance

The Regulator monitors insurer performance and compliance with the Act and manage self-insurance licence applications.

As at 30 June 2025, there were 27 self-insurance licences, with 58 per cent of insurers holding a four-year licence. In 2024-25, five (5) self-insurance licences were renewed with two (2) insurers renewed for four years and three (3) insurers renewed for two years.

There were 29 audits conducted across all insurers (including WorkCover Queensland and self-insured employers). This includes compliance, targeted, licence condition and special audits.

At the end of 2024-25, there were 12 self-insured employers that had a special licence condition and 9 active improvement action plans across all insurers. In 2024-25 there were five compliance notices issued.

Appendix 1: Statistics by sub-industry

61 Statutory claim lodgements, statutory claim payments, average finalised time lost claim costs and durations by industry and sub-industry 2023-24 and 2024-25

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Accommodation and Food Services	5959	6743	13.2	62	67.5	8.8	18,352	19,448	6	56.1	57.8	3.1
Accommodation	1532	2339	52.7	15.2	16.7	10.2	22,583	19,550	-13.4	65.2	61.4	-5.8
Food and Beverage Services	4213	4167	-1.1	45.8	49.2	7.3	17,275	19,564	13.2	53.9	57.2	6.2
Labour Hire	214	237	10.7	1	1.6	54.7	14,431	13,972	-3.2	44.4	40.5	-8.7
Administrative and Support Services	2835	2804	-1.1	43.9	53.6	22	26,889	27,781	3.3	80.7	82.5	2.2
Administrative Services	776	689	-11.2	8.9	10.5	18.9	30,236	33,866	12	88.3	86.9	-1.5
Building Cleaning, Pest Control and Other Support Services	1985	2042	2.9	34.4	40.9	19	26,304	26,066	-0.9	79.3	81.4	2.6
Labour Hire	74	73	-1.4	0.7	2.2	203.7	12,039	40,680	237.9	48.6	79.2	63
Agriculture, Forestry and Fishing	2855	2790	-2.3	44	50.4	14.4	24,505	25,697	4.9	56.9	56.7	-0.4
Agriculture	2127	2084	-2	34.8	38.9	11.9	26,703	27,635	3.5	60	60.3	0.4
Agriculture, Forestry and Fishing Support Services	379	320	-15.6	6.7	6.5	-2.8	27,207	23,746	-12.7	64.2	51.6	-19.7
Aquaculture	35	37	5.7	0.4	0.3	-28.5	33,641	20,974	-37.7	91.9	63.8	-30.5
Fishing, Hunting and Trapping	33	40	21.2	0.4	1.1	165.5	39,390	29,820	-24.3	88.3	80.1	-9.3
Forestry and Logging	15	12	-20	0.4	0.4	22.8	18,147*	46,329*	155.3	56.5*	85.5*	51.4
Labour Hire	266	297	11.7	1.4	3.1	130.5	7527	11,023	46.4	25.2	27.2	8
Arts and Recreation Services	1739	2078	19.5	27.6	30.6	11	25,877	27,747	7.2	67	72.7	8.5
Creative and Performing Arts Activities	209	261	24.9	2.5	3.2	28.7	23,383	33,857	44.8	62.4	80.6	29
Gambling Activities	190	268	41.1	5.2	6.2	19.6	19,486	31,056	59.4	56.1	85.5	52.5
Heritage Activities	288	275	-4.5	2.3	2.3	0.3	16,858	12,769	-24.3	34.6	33.9	-2

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Sports and Recreation Activities	1041	1143	9.8	17.5	18.7	6.8	29,421	29,585	0.6	76.1	77.6	2
Labour Hire	11	131	1090.9	0.1	0.2	155.1	32,357*	11,253	-65.2	156.4*	29.1	-81.4
Construction	11,512	11,230	-2.4	240	277.4	15.6	33,675	34,329	1.9	75.3	74.2	-1.5
Building Construction	2066	2017	-2.4	38	47.1	24	29,050	28,062	-3.4	62.6	59.4	-5.2
Construction Services	7052	6911	-2	140.3	161.1	14.8	34,082	35,168	3.2	77.4	77.9	0.7
Heavy and Civil Engineering Construction	1496	1445	-3.4	28.8	36.5	26.8	39,123	33,590	-14.1	79.7	65.1	-18.3
Labour Hire	898	857	-4.6	32.9	32.8	-0.4	33,457	44,188	32.1	82.2	92.2	12.3
Education and Training	8452	8607	1.8	111.7	137.2	22.8	20,823	22,918	10.1	47.8	51.2	7
Adult, Community and Other Education	231	218	-5.6	2.4	2.9	17.1	21,521	21,410	-0.5	54.7	56.6	3.4
Preschool and School Education	6960	7144	2.6	95.7	119.1	24.5	21,212	23,422	10.4	48.5	52.2	7.7
Tertiary Education	1233	1221	-1	13.3	15.1	13.3	18,556	20,567	10.8	42.6	44.7	4.9
Labour Hire	28	24	-14.3	0.3	0.2	-37.5	9678*	8824*	-8.8	30.2*	31.3*	3.4
Electricity, Gas, Water and Waste Services	1189	1225	3	18.4	22.1	20.3	32,098	34,245	6.7	70.5	70.7	0.2
Electricity Supply	454	459	1.1	6.9	7.8	12.7	29,898	31,313	4.7	65.8	59.7	-9.4
Gas Supply	25	20	-20	0.1	0.2	46.5	36,087*	31,839*	-11.8	99.4*	100.1*	0.7
Waste Collection, Treatment and Disposal Services	509	510	0.2	8.5	11.3	31.8	32,619	34,135	4.6	68	73.3	7.7
Water Supply, Sewerage and Drainage Services	156	195	25	1.7	1.9	13.2	30,556	26,242	-14.1	70	51.6	-26.3
Labour Hire	45	41	-8.9	1.1	0.9	-15.4	47,375	70,764	49.4	131.4	153.8	17.1
Financial and Insurance Services	532	547	2.8	8.3	10.2	22.8	28,908	42,235	46.1	65.9	96.3	46.2
Auxiliary Finance and Insurance Services	111	89	-19.8	2	1.6	-18.6	27,085	57,936	113.9	60.1	128.5	114
Finance	144	149	3.5	2.4	2.3	-1.2	31,267	37,335	19.4	71.8	99.4	38.6
Insurance and Superannuation Funds	268	304	13.4	3.6	6	69.7	29,608	38,605	30.4	67.5	82.5	22.2
Labour Hire	9	5	-44.4	0.3	0.1	-59.7	8047*	64,836*	705.7	27*	177*	555.6

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Health Care and Social Assistance	16,034	17,408	8.6	244.3	296.2	21.3	23,939	24,905	4	73.6	72.6	-1.3
Hospitals	5462	5987	9.6	86.9	101.7	17	27,517	25,813	-6.2	74.7	71.1	-4.8
Medical and Other Health Care Services	2010	2193	9.1	36	45.5	26.3	29,126	35,800	22.9	74.8	85.6	14.5
Residential Care Services	3496	3701	5.9	48.6	57.3	17.8	19,533	20,319	4	71.9	68	-5.5
Social Assistance Services	4796	5307	10.7	67.8	86.5	27.6	21,320	23,365	9.6	72.4	73.1	1
Labour Hire	270	220	-18.5	5	5.3	5.6	28,332	29,400	3.8	84.9	77.2	-9.1
Information Media and Telecommunications	279	419	50.2	6	6.7	12.3	42,924	47,001	9.5	84.2	90	6.9
Broadcasting (except Internet)	28	29	3.6	0.7	0.5	-31	48,412*	70,402*	45.4	88*	141.9*	61.2
Internet Publishing and Broadcasting	2	5	150	0	0.1	1370.5	43,651*	33,890*	-22.4	65*	79*	21.5
Internet Service Providers, Web Search Portals and Data Processing Services	10	10	0	0.3	0.2	-23.2	14,102*	54,079*	283.5	45.2*	123.2*	172.5
Library and Other Information Services	18	20	11.1	0.2	0.3	14.8	105,890*	26,095*	-75.4	263.3*	48.4*	-81.6
Motion Picture and Sound Recording Activities	177	311	75.7	3.2	5.1	57.6	32,270	43,117	33.6	63	77.3	22.6
Publishing (except Internet and Music Publishing)	15	16	6.7	1.2	0.3	-74.6	47,830*	69,223*	44.7	120.2*	210.1*	74.8
Telecommunications Services	21	23	9.5	0.3	0.1	-53.5	190,549*	57,733*	-69.7	269*	111.8*	-58.5
Labour Hire	8	5	-37.5	0.1	0.2	169	25,669*	33,011*	28.6	25*	20*	-20
Manufacturing	12,366	11,770	-4.8	178.9	189.8	6.1	23,839	26,603	11.6	57.7	61.9	7.3
Basic Chemical and Chemical Product Manufacturing	297	310	4.4	5.9	6	1.8	27,305	31,333	14.8	73.5	78.8	7.3
Beverage and Tobacco Product Manufacturing	186	167	-10.2	2.6	1.8	-30.9	36,348	24,647	-32.2	76.4	52.9	-30.8
Fabricated Metal Product Manufacturing	2424	2239	-7.6	34.6	34.9	1	21,966	25,000	13.8	53.7	58.1	8.1

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Food Product Manufacturing	2917	2826	-3.1	43.7	48.4	10.6	23,101	24,964	8.1	57.3	60.5	5.6
Furniture and Other Manufacturing	382	345	-9.7	5.7	6.8	20.9	36,984	26,461	-28.5	80	65.6	-18
Machinery and Equipment Manufacturing	1069	1055	-1.3	15.7	17.1	9.1	22,223	26,243	18.1	44.9	59.9	33.6
Non-Metallic Mineral Product Manufacturing	726	690	-5	15.2	13.1	-13.7	30,514	40,860	33.9	68.6	81.3	18.6
Petroleum and Coal Product Manufacturing	46	32	-30.4	1.8	2	12.9	96,838	51,557	-46.8	174.3	80.3	-53.9
Polymer Product and Rubber Product Manufacturing	470	427	-9.1	6.1	7	14.1	20,032	28,703	43.3	53.3	65.3	22.6
Primary Metal and Metal Product Manufacturing	394	338	-14.2	5.8	4.5	-23.4	28,628	36,819	28.6	56.5	65.7	16.3
Printing (including the Reproduction of Recorded Media)	91	81	-11	1.8	1.2	-32.8	25,610	26,623	4	58.6	81.6	39.4
Pulp, Paper and Converted Paper Product Manufacturing	105	114	8.6	1.6	1.3	-15.6	25,738	54,891	113.3	59.3	95.5	61.1
Textile, Leather, Clothing and Footwear Manufacturing	88	121	37.5	1.5	1.8	22.4	20,014	21,503	7.4	48.1	65.7	36.4
Transport Equipment Manufacturing	1243	1141	-8.2	14.5	18.8	30.2	23,736	25,010	5.4	60.1	57.2	-4.8
Wood Product Manufacturing	836	738	-11.7	10.7	13	22.2	25,943	29,306	13	65.1	69.4	6.6
Labour Hire	1092	1146	4.9	12	12	0.6	18,347	19,425	5.9	50.9	50.5	-0.7
Mining	2691	2713	0.8	78	102.7	31.7	54,322	62,413	14.9	104.7	111	6
Coal Mining	1131	1247	10.3	38.2	52.4	37.2	67,878	71,572	5.4	116.1	101.6	-12.4
Exploration and Other Mining Support Services	485	425	-12.4	12	16	33.8	44,112	57,501	30.4	97.7	113.5	16.2
Metal Ore Mining	518	493	-4.8	11.7	15	28.6	41,611	56,608	36	83.5	101.6	21.7
Non-Metallic Mineral Mining and Quarrying	179	161	-10.1	4.8	6.5	34.1	42,113	45,653	8.4	93.1	116.9	25.6

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Oil and Gas Extraction	32	33	3.1	0.7	0.5	-21.8	60,535	50,229	-17	116.2	99.7	-14.2
Labour Hire	346	354	2.3	10.7	12.3	15.1	52,105	58,531	12.3	111.5	139.5	25.2
Other Services	3837	3846	0.2	52.9	60.3	14.1	26,561	29,818	12.3	63	71	12.7
Personal and Other Services	1550	1496	-3.5	19.2	19.3	0.7	25,048	26,862	7.2	70.6	76	7.7
Repair and Maintenance	1888	1739	-7.9	30.6	37.8	23.8	28,823	32,855	14	59.8	68.8	15
Labour Hire	399	611	53.1	3.1	3.2	1.8	17,244	22,105	28.2	50.5	59	16.7
Professional, Scientific and Technical Services	2013	1882	-6.5	25.5	28	9.7	29,328	30,137	2.8	63.6	61.1	-4
Computer System Design and Related Services	172	166	-3.5	2.7	3.1	14.6	30,463	44,878	47.3	59.4	77.7	30.8
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	1822	1701	-6.6	22.8	24.8	9	29,585	28,542	-3.5	64.8	59.4	-8.3
Labour Hire	19	15	-21.1	0.1	0.1	35.1	5727*	6032*	5.3	15.8*	20.3*	28.7
Public Administration and Safety	9360	9846	5.2	195.3	233.5	19.6	34,372	37,143	8.1	79.6	80.5	1.2
Defence	6	4	-33.3	0.1	0	-91.9	4779*	0*	-100	6*	0*	-100
Public Administration	3115	3231	3.7	54.3	65.1	19.9	27,181	29,985	10.3	65.6	66.5	1.3
Public Order, Safety and Regulatory Services	6138	6468	5.4	138.7	165.5	19.3	38,424	41,371	7.7	87	88.7	1.9
Labour Hire	101	143	41.6	2.2	3	34.6	27,217	20,052	-26.3	79.9	51.2	-35.9
Rental, Hiring and Real Estate Services	949	1027	8.2	16.3	19.6	20.3	27,850	32,944	18.3	72	79.8	11
Property Operators and Real Estate Services	425	480	12.9	8.8	10.6	20.3	34,269	37,500	9.4	95.7	99.3	3.8
Rental and Hiring Services (except Real Estate)	516	538	4.3	7.4	8.9	20.5	23,773	29,693	24.9	56.4	65.5	16.1
Labour Hire	8	9	12.5	0.1	0.1	4.8	4326*	17,957*	315.1	12.8*	40*	212.5
Retail Trade	6730	6494	-3.5	92.5	103	11.4	21,140	22,277	5.4	60.7	61.6	1.5

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Food Retailing	2427	2246	-7.5	34.9	40	14.7	21,126	22,783	7.8	59.1	65.6	10.9
Fuel Retailing	211	241	14.2	3.3	4.3	30.2	28,016	28,188	0.6	86.3	89.5	3.7
Motor Vehicle and Motor Vehicle Parts Retailing	1112	1136	2.2	15.6	15.4	-1.2	20,793	22,435	7.9	54.2	56.2	3.7
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	108	120	11.1	1.9	2.1	8.4	18,190	21,059	15.8	52.3	57.6	10.1
Other Store-Based Retailing	2730	2646	-3.1	35.1	39.8	13.4	20,950	21,595	3.1	62.1	58.2	-6.3
Labour Hire	142	105	-26.1	1.6	1.3	-17.7	20,648	18,732	-9.3	77.9	65.2	-16.4
Transport, Postal and Warehousing	5263	5198	-1.2	131.7	143.7	9.1	36,332	37,168	2.3	89.5	86.8	-3
Air and Space Transport	228	274	20.2	4.5	4.7	3.5	23,491	24,620	4.8	49.6	41.9	-15.5
Other Transport	162	192	18.5	3.4	3.6	7.4	21,740	27,177	25	64.7	70.8	9.5
Postal and Courier Pick-up and Delivery Services	266	263	-1.1	4.6	6.5	42.1	32,790	35,069	7	93.8	98.9	5.4
Rail Transport	533	504	-5.4	13.4	15.4	15.6	44,060	38,184	-13.3	86.6	63.3	-26.9
Road Transport	2632	2489	-5.4	78.5	85.1	8.4	41,507	42,517	2.4	99.9	100.1	0.1
Transport Support Services	666	670	0.6	12.8	14.4	12.3	28,297	28,069	-0.8	73.6	66.4	-9.8
Warehousing and Storage Services	252	262	4	3.8	3.6	-5.3	31,442	31,897	1.4	92.5	82.5	-10.9
Water Transport	126	120	-4.8	2.3	2.2	-4.8	32,559	35,888	10.2	90	88.7	-1.5
Labour Hire	398	424	6.5	8.4	8.2	-2.8	24,903	28,659	15.1	75.6	79.2	4.8
Wholesale Trade	3793	3797	0.1	56.5	69	22.1	26,273	27,458	4.5	64.1	62.9	-1.9
Basic Material Wholesaling	1066	1045	-2	17.5	20.4	16.5	29,542	35,691	20.8	68.1	73.3	7.7
Commission-Based Wholesaling	81	66	-18.5	1.4	1.2	-14.6	22,262	26,792	20.4	53.2	53.4	0.5
Grocery, Liquor and Tobacco Product Wholesaling	731	678	-7.3	13.6	15.6	15.1	25,290	26,221	3.7	67.4	68.3	1.3
Machinery and Equipment Wholesaling	989	1054	6.6	11.4	16.4	44	23,994	24,421	1.8	50.6	51.9	2.5

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance	23-24	24-25	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Motor Vehicle and Motor Vehicle Parts Wholesaling	334	368	10.2	4.6	5.5	18.7	29,057	20,803	-28.4	76.1	54.8	-27.9
Other Goods Wholesaling	471	470	-0.2	6.4	7.8	21.9	25,176	24,394	-3.1	65.2	63.1	-3.3
Labour Hire	121	116	-4.1	1.6	2.1	31.8	19,813	14,115	-28.8	62.8	43	-31.5
Other	255	298	16.9	6.6	9.3	41.7	52,623	41,356	-21.4	147.8	89.4	-39.5
Total	98,643	100,722	2.1	1640.5	1910.8	16.5	27,182	28,974	6.6	68.7	70	1.9

Note:

*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.

62 Statutory claim decisions and statutory claim finalisations by industry and sub-industry 2024–25

	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	91.6	8.4	5002	3282	79	1.6	3.7	6.6	1.8	4.8	2.4	0
Accommodation	87.3	12.7	1259	750	80.9	1.6	2.5	4.5	2.5	5.9	2	0
Food and Beverage Services	93.1	6.9	3609	2466	78.5	1.5	4.1	7.3	1.7	4.3	2.6	0
Labour Hire	92.5	7.5	134	66	74.2	7.6	3	7.6	0	7.6	0	0
Administrative and Support Services	89.5	10.5	2372	1682	75.9	1.2	3.9	6.6	2.4	5.7	3.9	0.3
Administrative Services	78.6	21.4	500	338	71.6	0.9	2.4	12.1	2.7	6.8	3.6	0
Building Cleaning, Pest Control and Other Support Services	92.7	7.3	1829	1327	77.2	1.2	4.4	5.1	2.3	5.4	4	0.4
Labour Hire	79.1	20.9	43	17	58.8	11.8	0	11.8	11.8	5.9	0	0
Agriculture, Forestry and Fishing	94.9	5.1	2376	1640	77.9	2.3	2.3	7.3	2.9	5	2.2	0
Agriculture	95.1	4.9	1771	1234	76.1	2.9	2.2	8	3.1	5.3	2.4	0
Agriculture, Forestry and Fishing Support Services	93.6	6.4	265	194	80.4	1	2.6	6.2	2.6	5.7	1.5	0
Aquaculture	100	0	31	26	80.8	0	0	11.5	3.8	3.8	0	0
Fishing, Hunting and Trapping	79.4	20.6	34	24	70.8	0	0	12.5	8.3	0	8.3	0
Forestry and Logging	91.7	8.3	12	11	72.7	0	0	9.1	9.1	9.1	0	0
Labour Hire	96.2	3.8	263	151	90.7	0	4	1.3	0.7	2	1.3	0
Arts and Recreation Services	93.8	6.2	1783	1111	80.6	1.4	3.5	5.8	1.3	3.6	3.7	0.1
Creative and Performing Arts Activities	97	3	232	99	78.8	5.1	3	5.1	3	2	3	0
Gambling Activities	93.4	6.6	256	150	75.3	1.3	4.7	2.7	0	2.7	12.7	0.7
Heritage Activities	95	5	262	151	86.1	1.3	2.6	2.6	2.6	4	0.7	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
	%	%			%	%	%	%	%	%	%	%
Sports and Recreation Activities	93	7	1013	703	80.9	1	3.6	7	1	4	2.6	0
Labour Hire	90	10	20	8	75	0	0	25	0	0	0	0
Construction	94.2	5.8	9794	6177	77.2	2.4	2.9	7.1	3.8	3.9	2.5	0.1
Building Construction	93.9	6.1	1776	1084	80.4	2.5	3.1	5.5	3.2	3.5	1.8	0
Construction Services	94.8	5.2	6072	4039	77.1	2.3	3	7.1	3.9	3.7	2.7	0.2
Heavy and Civil Engineering Construction	93.7	6.3	1273	660	77.7	2.7	1.8	7.6	3.6	4.1	2.4	0
Labour Hire	90.5	9.5	673	394	68.8	2.3	2.3	10.7	5.3	7.1	3.3	0.3
Education and Training	91.4	8.6	7930	4702	85.3	1.3	4.7	3	0.8	2.4	2.3	0.1
Adult, Community and Other Education	83.6	16.4	195	103	79.6	2.9	4.9	6.8	0	1.9	3.9	0
Preschool and School Education	92.5	7.5	6624	3907	85.7	1.2	5	2.6	0.7	2.1	2.5	0.1
Tertiary Education	86.6	13.4	1091	676	83.9	1.8	3.6	4.7	1	3.8	1	0.1
Labour Hire	75	25	20	16	93.8	0	0	0	6.3	0	0	0
Electricity, Gas, Water and Waste Services	90.8	9.2	1054	601	78.9	1.7	4.2	4.2	2.3	5.7	3.2	0
Electricity Supply	88.2	11.8	397	223	86.1	0.4	7.2	1.8	0.4	2.2	1.8	0
Gas Supply	100	0	19	7	71.4	0	0	14.3	14.3	0	0	0
Waste Collection, Treatment and Disposal Services	93	7	442	275	74.2	2.2	1.5	6.5	2.9	8.4	4.4	0
Water Supply, Sewerage and Drainage Services	89.2	10.8	157	63	81	1.6	6.3	0	1.6	6.3	3.2	0
Labour Hire	94.9	5.1	39	33	66.7	6.1	3	6.1	9.1	6.1	3	0
Financial and Insurance Services	77.4	22.6	464	246	69.9	2	6.1	9.3	3.3	3.7	5.7	0
Auxiliary Finance and Insurance Services	65.8	34.2	73	46	54.3	8.7	2.2	8.7	4.3	8.7	13	0
Finance	73.3	26.7	116	59	67.8	1.7	10.2	8.5	3.4	1.7	6.8	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
	%	%			%	%	%	%	%	%	%	%
Insurance and Superannuation Funds	82.3	17.7	271	138	76.1	0	5.8	10.1	2.9	2.9	2.2	0
Labour Hire	75	25	4	3	66.7	0	0	0	0	0	33.3	0
Health Care and Social Assistance	90	10	15,707	11,019	81.2	1.5	5.3	4	1.1	3.5	3.2	0.1
Hospitals	88.3	11.7	5516	3790	86.3	0.5	6.1	1.4	0.4	2.1	3.1	0.1
Medical and Other Health Care Services	90.2	9.8	1902	1166	78.1	1.8	5.6	5.7	1.6	3.3	3.9	0
Residential Care Services	91.2	8.8	3315	2588	81.3	1.5	4.9	4	1.4	3.3	3.4	0.3
Social Assistance Services	90.8	9.2	4784	3295	76.4	2.5	4.8	6.3	1.6	5.3	2.9	0.2
Labour Hire	94.7	5.3	190	180	80.6	3.3	1.1	6.7	0.6	6.1	1.7	0
Information Media and Telecommunications	92.6	7.4	366	177	62.1	11.9	1.7	10.7	6.8	2.3	4.5	0
Broadcasting (except Internet)	76	24	25	16	43.8	12.5	12.5	0	12.5	6.3	12.5	0
Internet Publishing and Broadcasting	75	25	4	1	100	0	0	0	0	0	0	0
Internet Service Providers, Web Search Portals and Data Processing Services	100	0	9	6	66.7	0	0	0	16.7	0	16.7	0
Library and Other Information Services	100	0	15	5	60	0	0	0	0	40	0	0
Motion Picture and Sound Recording Activities	94.7	5.3	282	132	65.2	12.9	0	12.9	5.3	0	3.8	0
Publishing (except Internet and Music Publishing)	90.9	9.1	11	7	28.6	14.3	14.3	14.3	28.6	0	0	0
Telecommunications Services	75	25	16	8	75	0	0	12.5	0	12.5	0	0
Labour Hire	100	0	4	2	50	50	0	0	0	0	0	0
Manufacturing	94.4	5.6	10,483	6693	81	1	3.6	5.5	2.6	3.8	2.3	0.1

	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 Chemical and Chemical Product Manufacturing	93.1	6.9	288	137	81.8	0.7	0.7	6.6	2.2	2.9	5.1	0
Beverage and Tobacco Product Manufacturing	92.5	7.5	146	74	79.7	2.7	2.7	5.4	2.7	5.4	1.4	0
Fabricated Metal Product Manufacturing	95.9	4.1	2040	1271	83.5	1.1	3.3	4.6	2.7	3.2	1.7	0
Food Product Manufacturing	94.1	5.9	2543	1753	78	0.9	6	5	2.3	5.4	2.3	0.1
Furniture and Other Manufacturing	93.9	6.1	293	204	87.7	1	1	3.9	2	2.9	1.5	0
Machinery and Equipment Manufacturing	94.8	5.2	965	559	82.5	1.3	2.5	6.8	2.5	2.1	2.1	0.2
Non-Metallic Mineral Product Manufacturing	93.4	6.6	609	401	74.6	1	4	7.5	4	4.7	4.2	0
Petroleum and Coal Product Manufacturing	92.6	7.4	27	14	57.1	7.1	14.3	14.3	0	7.1	0	0
Polymer Product and Rubber Product Manufacturing	90.5	9.5	380	205	82.9	0.5	2.4	4.9	3.9	3.9	1.5	0
Primary Metal and Metal Product Manufacturing	93.6	6.4	296	142	80.3	0	4.2	6.3	3.5	3.5	1.4	0.7
Printing (including the Reproduction of Recorded Media)	92	8	75	55	83.6	0	3.6	5.5	5.5	0	1.8	0
Pulp, Paper and Converted Paper Product Manufacturing	94.9	5.1	98	45	77.8	0	6.7	4.4	2.2	4.4	4.4	0
Textile, Leather, Clothing and Footwear Manufacturing	92.2	7.8	116	83	84.3	0	2.4	2.4	3.6	6	1.2	0
Transport Equipment Manufacturing	94.9	5.1	1054	613	83.4	1.6	2.1	5.5	2.1	1.6	3.3	0.3

	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
	%	%			%	%	%	%	%	%	%	%
Wood Product Manufacturing	96.9	3.1	641	504	83.1	0.4	2.4	6	3	2.6	2.4	0.2
Labour Hire	93	7	912	633	81	1.6	2.1	6.3	2.5	4.4	1.9	0.2
Mining	90.5	9.5	2432	1228	72.7	2.1	7	5.7	2.9	4.2	5	0.4
Coal Mining	90.6	9.4	1135	514	72	1.6	11.3	3.9	2.7	3.1	4.9	0.6
Exploration and Other Mining Support Services	92	8	374	229	75.1	4.8	3.1	9.2	1.7	2.6	3.5	0
Metal Ore Mining	89.5	10.5	446	185	76.2	1.1	5.4	5.4	2.7	4.3	4.9	0
Non-Metallic Mineral Mining and Quarrying	92.9	7.1	140	98	68.4	1	4.1	10.2	4.1	5.1	5.1	2
Oil and Gas Extraction	85.2	14.8	27	10	90	0	0	0	0	0	10	0
Labour Hire	89	11	310	192	69.8	2.1	3.6	4.7	4.2	8.9	6.8	0
Other Services	90	10	2885	1704	76.1	2.1	3.5	6.6	3.1	6	2.5	0.2
Personal and Other Services	86.5	13.5	1154	674	70.5	2.5	4.3	9.2	3.3	6.8	3	0.4
Repair and Maintenance	94.3	5.7	1517	925	79.5	1.9	2.9	5	3	5.4	2.3	0
Labour Hire	79	21	214	105	81.9	1	2.9	4.8	1.9	6.7	1	0
Professional, Scientific and Technical Services	88	12	1571	837	79.2	3.1	2.9	6.8	2.3	3.2	2.5	0
Computer System Design and Related Services	82.1	17.9	145	90	71.1	6.7	7.8	7.8	2.2	2.2	2.2	0
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	88.8	11.2	1413	741	80	2.7	2.3	6.7	2.3	3.4	2.6	0
Labour Hire	69.2	30.8	13	6	100	0	0	0	0	0	0	0
Public Administration and Safety	90	10	8673	5049	82.8	0.9	4.5	2.7	1.2	3.3	4.6	0.1
Defence	100	0	1	0	0	0	0	0	0	0	0	0
Public Administration	86.9	13.1	3091	1647	85.7	0.9	4.3	2.2	1.1	2.7	2.9	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
	%	%			%	%	%	%	%	%	%	%
Public Order, Safety and Regulatory Services	91.6	8.4	5454	3280	81.4	0.7	4.7	2.8	1.2	3.6	5.5	0
Labour Hire	93.7	6.3	127	122	81.1	5.7	1.6	4.1	2.5	3.3	0.8	0.8
Rental, Hiring and Real Estate Services	90.4	9.6	906	533	73.2	3	3.6	8.1	3.9	4.3	3.9	0
Property Operators and Real Estate Services	87.2	12.8	414	231	67.1	4.8	3.5	8.2	4.3	6.5	5.6	0
Rental and Hiring Services (except Real Estate)	93.2	6.8	483	296	78	1.7	3.4	7.8	3.7	2.7	2.7	0
Labour Hire	88.9	11.1	9	6	66.7	0	16.7	16.7	0	0	0	0
Retail Trade	92.5	7.5	5669	3966	76.1	1.7	6.7	5.5	2	4.5	3.2	0.2
Food Retailing	91.2	8.8	1923	1342	73.8	1.2	11	3.7	1.4	3.9	4.7	0.3
Fuel Retailing	91	9	210	134	61.9	0.7	5.2	8.2	4.5	11.9	7.5	0
Motor Vehicle and Motor Vehicle Parts Retailing	93.9	6.1	1019	694	76.8	4	4.3	5.3	2.6	4.9	2	0
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	93.4	6.6	106	68	76.5	2.9	7.4	7.4	1.5	4.4	0	0
Other Store-Based Retailing	93.1	6.9	2324	1616	79	1	4.5	6.6	2.2	4	2.5	0.2
Labour Hire	93.1	6.9	87	112	75	3.6	5.4	6.3	0.9	8	0.9	0
Transport, Postal and Warehousing	91.4	8.6	4648	3417	75.3	2.2	4.1	5.9	3.3	4.4	4.7	0.1
Air and Space Transport	94.4	5.6	250	177	86.4	1.1	6.8	3.4	0	1.7	0.6	0
Other Transport	86.5	13.5	148	97	71.1	4.1	4.1	11.3	1	7.2	1	0
Postal and Courier Pick-up and Delivery Services	86.5	13.5	229	158	66.5	2.5	1.3	10.1	7	5.7	6.3	0.6
Rail Transport	88.9	11.1	477	292	82.9	0.3	8.9	1.7	0.3	1.4	4.5	0
Road Transport	91.1	8.9	2242	1834	73.3	2.3	3.7	5.7	3.9	4.9	5.9	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
	%	%			%	%	%	%	%	%	%	%
Transport Support Services	92.3	7.7	582	350	84	1.1	3.1	5.1	3.1	1.4	2	0
Warehousing and Storage Services	93.8	6.2	227	131	70.2	4.6	4.6	6.9	3.1	6.1	4.6	0
Water Transport	99.1	0.9	107	69	75.4	2.9	5.8	4.3	2.9	4.3	4.3	0
Labour Hire	94.3	5.7	386	309	71.5	3.2	2.3	8.7	3.9	7.1	3.2	0
Wholesale Trade	94.2	5.8	3434	2112	78.3	0.9	4.2	7.1	2.3	4.6	2.5	0
Basic Material Wholesaling	95.7	4.3	946	627	75.4	1.1	4.8	7.5	2.4	4.9	3.7	0.2
Commission-Based Wholesaling	91.4	8.6	58	41	75.6	4.9	4.9	2.4	0	4.9	7.3	0
Grocery, Liquor and Tobacco Product Wholesaling	94.5	5.5	622	434	77.9	0.2	5.3	7.8	1.2	5.8	1.8	0
Machinery and Equipment Wholesaling	93.4	6.6	952	489	83.4	0.8	3.3	5.9	2.5	2.9	1.2	0
Motor Vehicle and Motor Vehicle Parts Wholesaling	96	4	321	205	81.5	1	1.5	6.8	2.4	3.9	2.9	0
Other Goods Wholesaling	91.4	8.6	431	240	75	0.4	5	8.8	3.8	5	2.1	0
Labour Hire	93.3	6.7	104	76	75	3.9	2.6	5.3	3.9	6.6	2.6	0
Other	90.5	9.5	222	112	65.2	2.7	10.7	4.5	2.7	7.1	5.4	1.8
Total	91.7	8.3	87,771	56,288	79.4	1.6	4.4	5.3	2.1	4	3.1	0.1

Note:

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 Kerkmeyer) 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 five per cent to one per cent 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 and 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 that affected liability and quantum.

27 Aug 2004: *Sheridan v Warrina Community Co-Operative Ltd and 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 and Rehabilitation and 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 the doctor fax fee, a small financial incentive to encourage doctors to submit claim information quicker.

1 Jan 2008: *Workers' Compensation and Rehabilitation and 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 per cent of normal weekly earnings and 70 per cent 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 per cent to 30 per cent.

32. Unassessed injuries claimed in relation to a common law claim cannot be assessed for PI.

25 Nov 2008: Workplace Health and Safety and Other Legislation Amendment Act 2008

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

1 Aug 2008: Bourk v Power Serve Pty Ltd and Anor QCA 225

35. The Court of Appeal upheld the decision that the *Workplace Health and 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 and Rehabilitation and 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 per cent 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 and Anor* decision.

29 Sep 2010: Cameron v Foster and 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 and Rehabilitation and 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 OIR.
 49. Introduced a threshold of greater than five per cent degree of permanent impairment (DPI) to access common law damages (applicable to injuries from 15 October 2013).
 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 and Anor*.
- 17 September 2015: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act**
57. Removed the common law threshold of greater than five per cent degree of permanent impairment (DPI) to access common law damages. Applicable to injuries on or after 31 January 2015.
 58. Established the ability to provide additional compensation to particular workers impacted by the common law threshold, for injuries on or after 15 October 2013 and before 31 January 2015.
 59. Introduced provisions for firefighters diagnosed with one of 12 specified diseases that deem their injury to be work related.
 60. Removed the entitlement prospective employers had to obtain a copy of a prospective worker's compensation claims history from the Queensland Workers'

Compensation Regulator.

1 January 2016: Change in administration process of Queensland Health

61. Change in the administration process of Queensland Health moving to a fee for service arrangement with WorkCover Queensland in relation to public hospital payments.

8 September 2016: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act

62. Implemented the National Injury Insurance Scheme for work related catastrophic injuries connected with Queensland.
63. Amended the self-insurance licensing requirements to provide greater flexibility for applicants.
64. Reversed the impact of the Byrne decision and restoring arrangements in relation to third party liability and prosecutions for fraud.
65. Amended the indexation method used to calculate workers' compensation benefits.

23 August 2017: Workers' Compensation and Rehabilitation (Coal Workers' Pneumoconiosis) and Other Legislation Amendment Bill 2017

66. Improved the workers' compensation scheme for workers who have been diagnosed, or suspect they may have, coal workers' pneumoconiosis, also known as CWP or 'black lung'. Changes included establishing medical examination process, introducing an additional lump sum compensation for workers with pneumoconiosis, and clarifying a worker with pneumoconiosis can access further workers' compensation entitlements if they experience disease progression.
67. Amended the *Industrial Relations Act 2016* to clarify that the power to grant a stay under the *Industrial Relations Act 2016* does not apply to an appeal under the *Workers' Compensation and Rehabilitation Act 2003*.

1 December 2017: Doctor fax fee

68. The doctor fax fee was discontinued by WorkCover Queensland.

30 October 2019: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2019

69. Amended the meaning of injury for a psychiatric or psychological disorder to remove 'the major' as a qualifier for employment's 'significant contributing factor' to the injury.
70. Required insurers to take all reasonable steps to provide claimants with psychiatric or psychological injuries access to reasonable support services relating to their injury during claim determination.
71. Exempted expressions of regret and apologies provided by employers following a workplace injury from being considered in any assessment of liability for damages brought under the *Workers' Compensation and Rehabilitation Act 2003* to align with the approach taken in the *Civil Liability Act 2003*.
72. Required insurers to provide ongoing rehabilitation and return to work services if the injured worker has been unable to return to work after their entitlement to weekly benefits and medical expenses ceases.

73. Clarified that insurers have a discretion to accept claims submitted more than six months after the injury is diagnosed, if the injured worker has lodged a claim within 20 days of developing an incapacity for work from their injury.
74. Clarified WorkCover Queensland's ability to fund and provide programs and incentives that support employers improving health and safety performance, after consulting with the regulator under the *Work Health and Safety Act 2011* or any other relevant health and safety regulator.

1 July 2020: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2019

75. Required self-insured employers to report injuries and any payments made to injured workers to their insurer, aligning their obligations with the existing obligations on employers insured with WorkCover Queensland.
76. Extended workers' compensation coverage to unpaid interns.
77. Required employers to provide details of their rehabilitation and return to work coordinators to insurers.
78. Replaced dollar amounts in legislation with multiples/percentages of Queensland Ordinary Time Earnings.

20 May 2021: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2021

79. Presumptive legislation for first responders diagnosed with post-traumatic stress disorder (PTSD). It applies to workers and relevant volunteers if they are a first responder or an eligible employee in certain government departments.

30 June 2022: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2022

80. Amendment to the meaning of terminal condition to "within 3 years after the terminal nature of the condition is diagnosed".
81. Disclosure of information for administering claim farming provisions. Queensland Workers' Compensation law requires a law practice certificate (LPC) to be provided to the insurer and the claimant or potential claimant in several circumstances. In addition, it is the insurers' responsibility to report non-compliance.

23 August 2024: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2024

82. Required insurers to give mandatory scheme information statements to workers and employers.
83. Expanded the number of diseases presumed to be work-related for firefighters from 12 to 23 diseases.
84. Expedited injured workers' access to weekly payments by introducing a basic weekly payment to be paid while the insurer waits for the information necessary to calculate the workers' actual weekly compensation entitlement.
85. Required insurers to take all reasonable steps to minimise the risk of a secondary psychological injury arising from a physical injury.
86. Expanded the compliance and enforcement tools available to the Workers' Compensation Regulator,

including by introducing a framework for the issuing of compliance notices in the scheme.

87. Enabled injured workers who are dissatisfied with the workplace rehabilitation provider selected by an insurer to nominate an alternative accredited workplace rehabilitation provider.
88. Required host employers to cooperate with labour hire providers to fulfil the provider's rehabilitation and return to work obligations for injured labour hire workers.
89. Required insurers to have a rehabilitation and return to work plan in place for an injured worker within 10 days of claim acceptance.
90. Enabled the Queensland Government to deem gig workers and businesses as 'workers' and 'employers' for the purposes of the Act, where the person is covered by a relevant determination of the Fair Work Commission.

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 lump sum payments are included as time lost claims.

Average finalised time lost claim durations: The average workdays lost due to an injury on finalised time lost claims, includes any workdays lost paid for by the employer. Including claims with compensation payments and excludes 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).

Degree of permanent impairment (DPI): Injuries on or after 15 October 2013 are assessed under the Guidelines to the Evaluation of Permanent Impairment (GEPI) (which references AMA5). From this assessment injured workers receive a degree of permanent impairment (DPI).

Employed people: Employed people for Queensland is obtained from the Australian Bureau of Statistics (ABS) labour force survey Cat. no. 6291.0.55.001 - Labour Force, Queensland, Employed total, Average of May quarter to February quarter.

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 (ABS), 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 Queensland ordinary time earnings (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).

Self insurance: When an organisation manages and takes on the costs and risks of its own workers' compensation claims. With distinct and separate employer and insurer functions. Self-insurance licence applications are decided by the Workers' Compensation Regulator.

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).

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.

Work related impairment (WRI) - The degree of work-related impairment is calculated after one or more permanent impairments (PI) are assessed. WRI applies to injuries before 15 October 2013.

WorkCover Queensland: The statutory workers' compensation insurer for the state of Queensland. Provides insurance coverage to employers for work-related injuries and illnesses sustained by their employees.

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 (example: 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 consist 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 three 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 (assessments on or before 30 June 2024).

Ongoing capacity for work: The insurer is asking whether the worker's ongoing incapacity for work is related to the assessed 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.

Psychiatric Assessment Tribunal: Specialty tribunal to assess psychiatric and psychological injuries. For assessments on or after 1 July 2024.

Referral reasons: The specific questions which can be asked of the Medical Assessment Tribunals are defined in the Act.

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.

Lapsed: The QIRC determined that the appeal has not been progressed by the appellant within an appropriate timeframe and the appeal is closed.

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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