

Queensland workers' compensation scheme statistics

2017–18

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Introduction

This is the 19th annual statistical report published by the Office of Industrial Relations to circulate Queensland workers' compensation scheme-wide data.

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

- claims information reported by WorkCover Queensland and self-insured employers for statutory claims and common law claims
- scheme-wide information about the major regulatory services provided by the Office of Industrial Relations for insurer and medical issues including:
 - administrative review of insurers' decisions
 - appeals to the Queensland Industrial Relations Commission and the Industrial Court
 - Medical assessment tribunals.

All figures reported as at 30 June 2018, are true and correct as supplied by insurers.

Queensland's workers' compensation scheme

The *Workers' Compensation and Rehabilitation Act 2003* (the Act) is administered by the Office of Industrial Relations, Queensland Government.

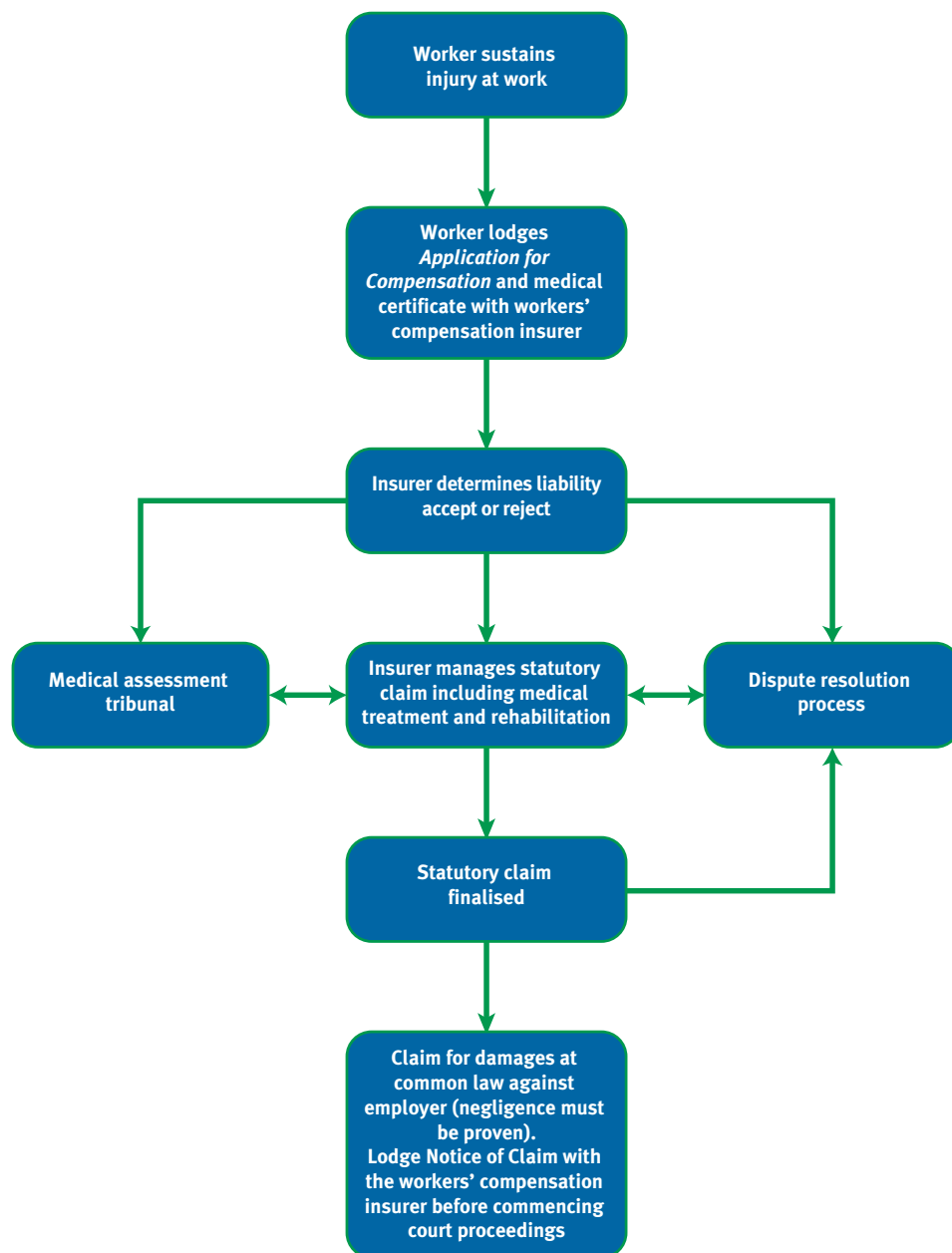
The Office of Industrial Relations is responsible for:

- monitoring insurer performance and compliance with the Act
- deciding self-insurance 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
- administering grants.

As at 30 June 2018 there were 29 insurers in the scheme – WorkCover Queensland and 28 self- insured employers.

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

1 Workers' compensation claims process

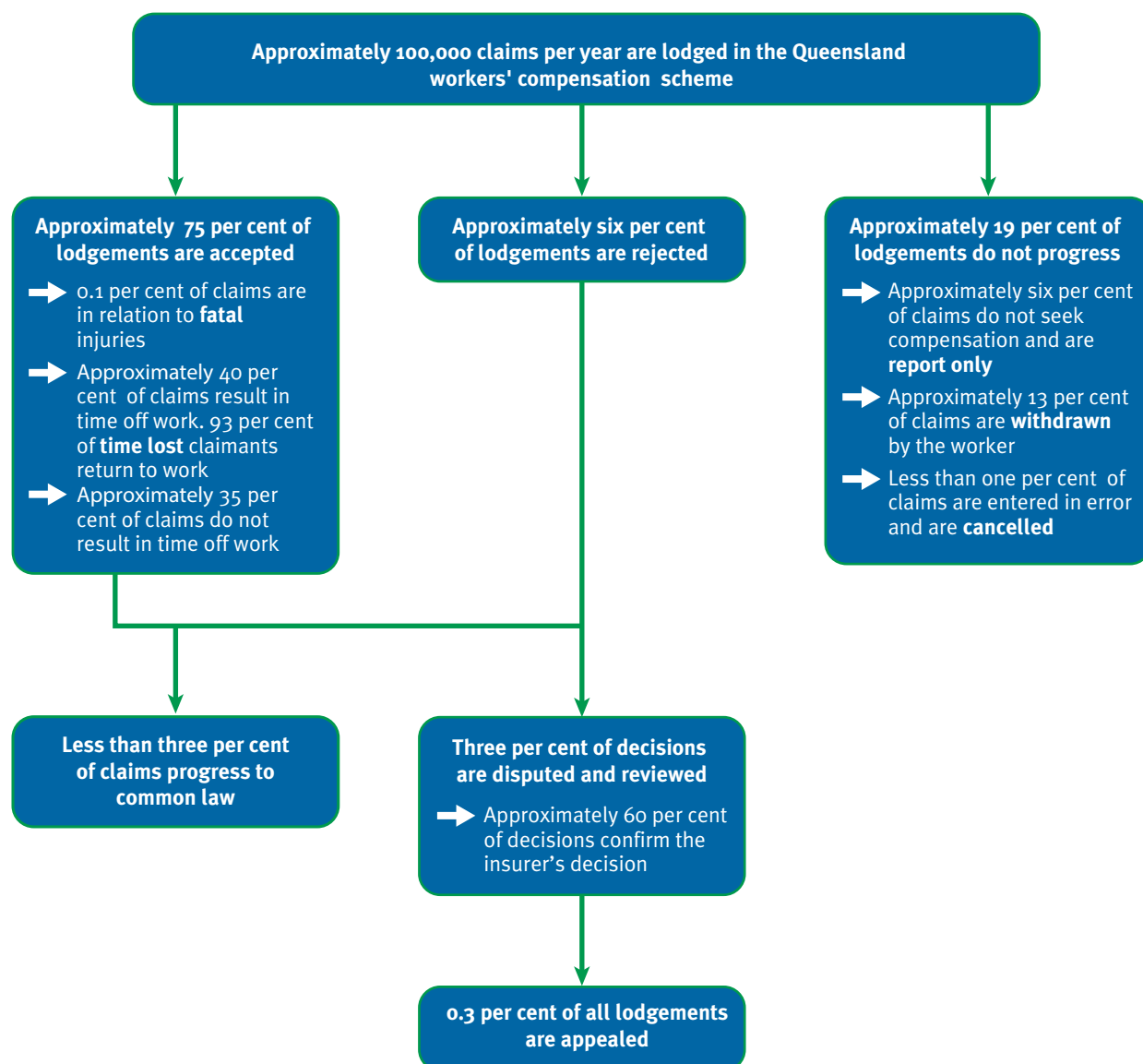


Claim profile

Figure 2 illustrates the progression of a workers' compensation claim through the statutory claims process to common law and dispute resolution.

As represented in figure 2, there is a gap between the number of claims lodged in the scheme, compared to the number of decisions. This is due to 19 per cent of lodgements failing to progress as they are either withdrawn by the worker, entered in error, or do not require a statutory decision and are 'report only'.

2 Queensland workers' compensation claim profile



Scheme highlights

Statutory claim lodgements

New statutory claims of 96,967 for 2017-18 were 1.6 per cent lower than 2016-17. While the number of employed people increased by 4.0 per cent for 2017-18, there was a 5.5 per cent decrease in the claim rate. The claim rate for 2017-18 has decreased to 39.6 claims per 1,000 employed people. Industries that have increases in statutory claims this year include administrative and support services and manufacturing.

The proportion of psychological and psychiatric statutory claims increased slightly for 2017-18 at 4.5 per cent (4.4 per cent in 2016-17). Psychological and psychiatric claims currently represent 6.3 per cent of total statutory payments (\$59.0 million for 2017-18) and have an average finalised time lost claim cost of \$46,285 (\$50,556 in 2016-17) which is just over two and a half times the average time lost claim cost of physical injuries (\$18,074 for 2017-18).

Statutory claim payments

Statutory payments for 2017-18 of \$943.5 million were 2.8 per cent higher than in 2016-17 (\$918.2 million). Weekly compensation payments, which represent 42.9 per cent of statutory payments, have increased 8.6 per cent for 2017-18 from \$372.5 million to \$404.5 million. Average work days lost decreased from 50.8 days in 2016-17 to 49.2 days in 2017-18. The average cost of time lost claims was stable with a small increase from \$18,744 in 2016-17 to \$18,771 in 2017-18.

Fatalities

There were 59 fatal claim lodgements in 2017-18. Fatal claim lodgements due to injuries at work represented over one third of the 2017-18 figures (n = 21; 35.6 per cent). Agriculture, forestry and fishing (n = 10); transport, postal and warehousing (n = 9); construction (n = 7), and manufacturing (n = 6) industries contributed 54.2 per cent of fatalities in 2017-18.

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

Return to work

In 2017-18, the return to work rate increased slightly to 93.2 per cent (92.1 per cent for 2016-17).

Dispute resolution

Review applications have decreased 8.9 per cent, from 2,820 in 2016-17 to 2,568 in 2017-18. The proportion of review applications to statutory claims has decreased to 2.6 per cent for 2017-18 (3.1 per cent for 2016-17). Appeals served in 2017-18 have decreased, down 3.5 per cent from 255 served in 2016-17 to 246 served in 2017-18.

Medical assessment tribunals

In 2017-18, 2,422 referrals were made to the Medical assessment tribunal. This is a decrease of 13.6 per cent from the 2,803 referrals received in 2016-17. Of the cases determined by the Medical assessment tribunal, 48.7 per cent were for permanent impairment (PI) assessment (46.0 per cent in 2016-17). The proportion of Medical assessment tribunal referrals to statutory claims has decreased for 2017-18 to 2.5 per cent from 2.8 per cent in 2016-17.

Common law lodgements

Common law lodgements decreased from 2,789 in 2016-17 to 2,753 in 2017-18. Strains and sprains accounted for 29.1 per cent of all common law claim lodgements in 2017-18.

Common law average damages

The average cost of finalised common law claims was stable, with a small increase of 1.7 per cent for 2017-18. The average defendant and plaintiff cost decreased 7.1 per cent from \$25,155 in 2016-17 to \$23,378 in 2017-18.

3 Scheme at a glance

		Overview			
		2017-18	2016-17	% change from previous year	page number
Statutory claims	New claims	96,967	98,581	-1.6%	10
	Claims per 1,000 employed people	39.6	41.9	-5.5%	8
	New psychological claims (%)	4.5%	4.4%	0.1%	12
	Payments (\$M)	\$943.5	\$918.2	2.8%	23
Statutory decisions	Average time to decide (days)	8.1	7.7	5.2%	18
	Rejection rate – physical (%)	5.8%	5.8%	0%	19
	Rejection rate – psychological and psychiatric (%)	62.4%	62.9%	-0.5%	19
Outcomes	Average work days lost (days) (time lost claims)	49.2	50.8	-3.1%	32
	Return to work rate (%)	93.2%	92.1%	1.1%	28
Common law	New claims	2,753	2,789	-1.3%	36
	Payments (\$M)	\$419.3	\$411.1	2.0%	41
	Average damages cost (excluding nil settlements)	\$155,563	\$152,901	1.7%	41
Regulator functions	Review applications	2,568	2,820	-8.9%	44
	Appeals served	246	255	-3.5%	47
	Medical assessment tribunal referrals	2,422	2,803	-13.6%	50

Workers' compensation statutory claims

- The majority of employers (almost 90 per cent) covered by the scheme in 2017-18 did not have a claim for workers' compensation.
- The scheme-wide claim rate decreased 5.5 per cent.
- The manufacturing industry has the highest claim rate.

As at 30 June 2018, approximately 162,000 employers were covered by the Queensland workers' compensation scheme. During 2017-18, the scheme covered approximately 169,000 employers, taking into account fluctuations in cancelled and new policies.

4 Number of claims lodged by insurance type 2016-17 and 2017-18

Insurance type	2016-17	2017-18	% Variance
Employed people	98,211	96,589	-1.7
Volunteers, industrial placement / work experience, contracts of insurance (the Act s26)	272	268	-1.5
Workplace personal injury insurance (self-employed, working directors)	77	81	5.2
Household workers	21	29	38.1
Total lodgements	98,581	96,967	-1.6

The majority of claims (99.6 per cent) are for 'workers' (as defined in the *Workers' Compensation and Rehabilitation Act 2003* – the Act).

5 Number of claims per employer by declared wages 2016-17

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	142,498	4,077	790	240	85	4	147,694
1 claim	9,625	1,773	497	188	68	4	12,155
2 to 5 claims	2,979	1,770	968	465	288	16	6,486
6 to 10 claims	110	273	281	279	225	22	1,190
11 to 20 claims	28	42	105	161	261	34	631
Over 20 claims	20	6	31	64	280	187	588
Total with claims	12,762	3,864	1,882	1,157	1,122	263	21,050
Total	155,260	7,941	2,672	1,397	1,207	267	168,744
% without claims	91.8	51.3	29.6	17.2	7.0	1.5	87.5

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

The majority of employers (87.5 per cent) did not have a claim for workers' compensation in 2017-18. Smaller employers (\$1 million or less in declared wages) were the most likely to have no claims (91.8 per cent).

Claim rate

In 2017-18, 96,967 claims were lodged scheme-wide (excluding cancelled claims). The estimated rates per 1,000 employed people are detailed below.

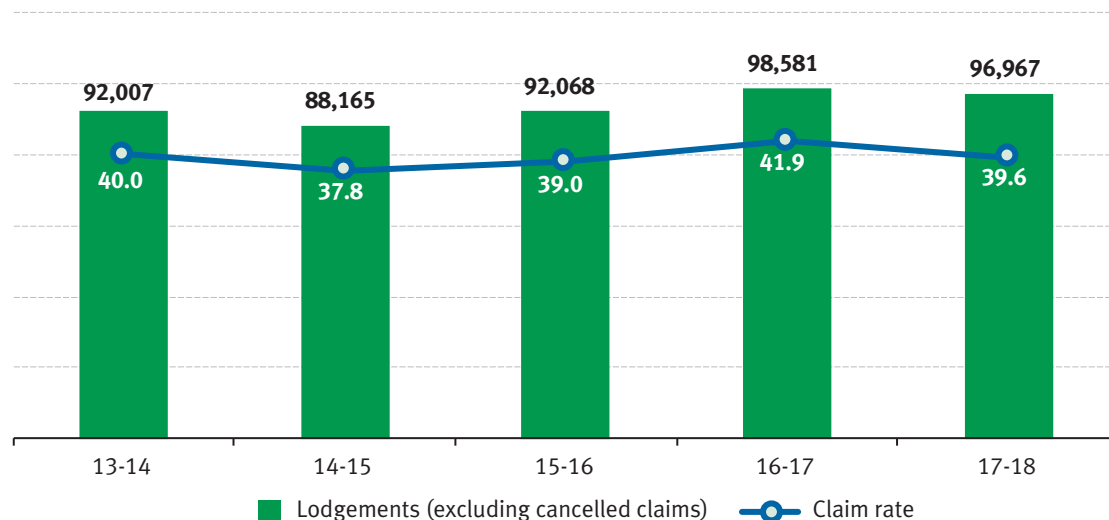
6 Claim rates (per 1,000 employed people) 2013-14 to 2017-18

	Annual comparison				
	2013-14	2014-15	2015-16	2016-17	2017-18
Queensland labour force					
Average number of employed people ('000) ^a	2,301.4	2,330.0	2,362.3	2,353.3	2,447.6
Change from previous year (%)	0.7	1.2	1.4	-0.4	4.0
Queensland workers' compensation scheme					
Number of lodged claims	92,007	88,165	92,068	98,581	96,967
Change from previous year (%)	-7.3	-4.2	4.4	7.1	-1.6
Claim rate					
Number per 1,000 employed people	40.0	37.8	39.0	41.9	39.6
Change from previous year (%)	-7.8	-5.5	3.2	7.4	-5.5

^a Australian Bureau of Statistics, Labour Force, Queensland Average of May Quarter to February Quarter, Cat. No. 6291.0.55.003, May 2018.

Figure 7 shows claim rates and claim lodgements in the scheme for the past five years. Lodgements for 2017-18 of 96,967 have decreased by 1.6 per cent from 2016-17 lodgements of 98,581.

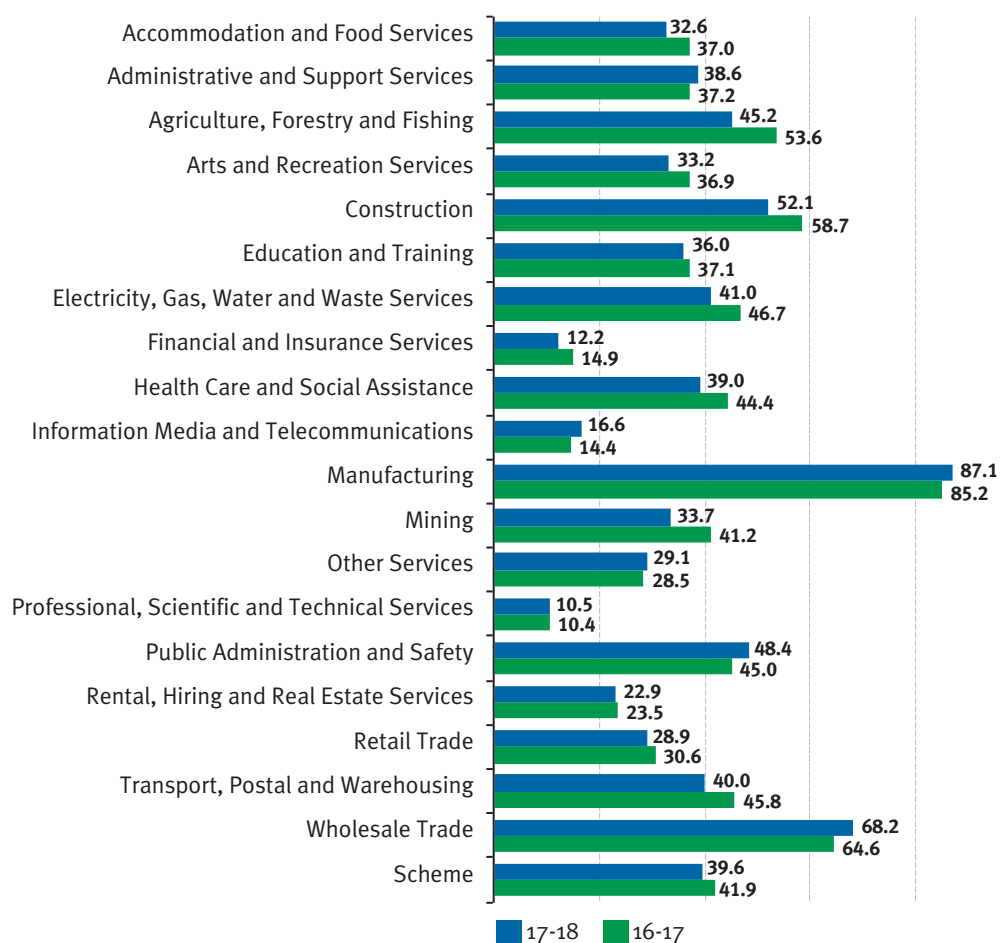
7 Claim rates (per 1,000 employed people) and lodgements 2013-14 to 2017-18



As shown in figure 8, manufacturing had the highest claim rate in the scheme, with 87.1 claim lodgements per 1,000 employed people in the industry. Other industries where the claim rate was larger than the scheme rate of 39.6 include:

- wholesale trade (68.2)
- construction (52.1)
- public administration and safety (48.4)
- agriculture, forestry and fishing (45.2)
- electricity, gas, water and waste services (41.0)
- transport, postal and warehousing (40.0).

8 Claim rates (per 1,000 employed people) by industry 2016-17 and 2017-18



Statutory claim lodgements

- Lodgements decreased by 1.6 per cent in 2017-18.
- Note: cancelled claims have been excluded from the lodgements reported.
- There were 59 fatal claims lodged in 2017-18.

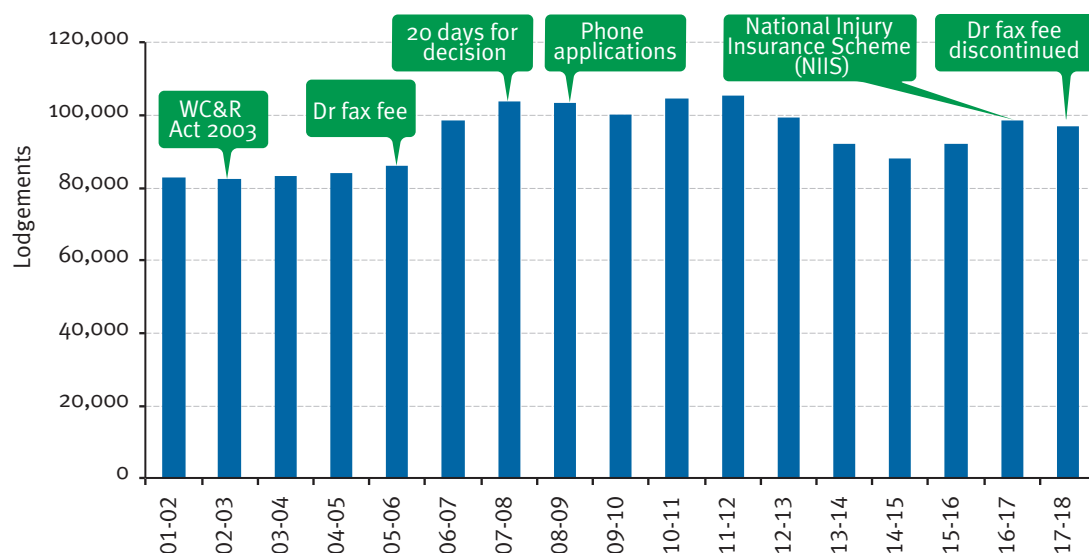
Many factors influence the number of claims lodged in the Queensland workers' compensation scheme. Some of the factors that may have contributed to changes in numbers of lodgements over the years include:

- injury prevention initiatives and interventions by Workplace Health and Safety Queensland (WHSQ) and WorkCover Queensland
- changing industry economics
- variations in the overall numbers in the workforce
- work process changes within industry (e.g. automation and improved work health and safety practices).

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 2017-18, there were 96,967 claims lodged (excluding cancelled), representing a 1.6 per cent decrease from 2016-17 (98,581).

9 Statutory claim lodgement history 2001-02 to 2017-18

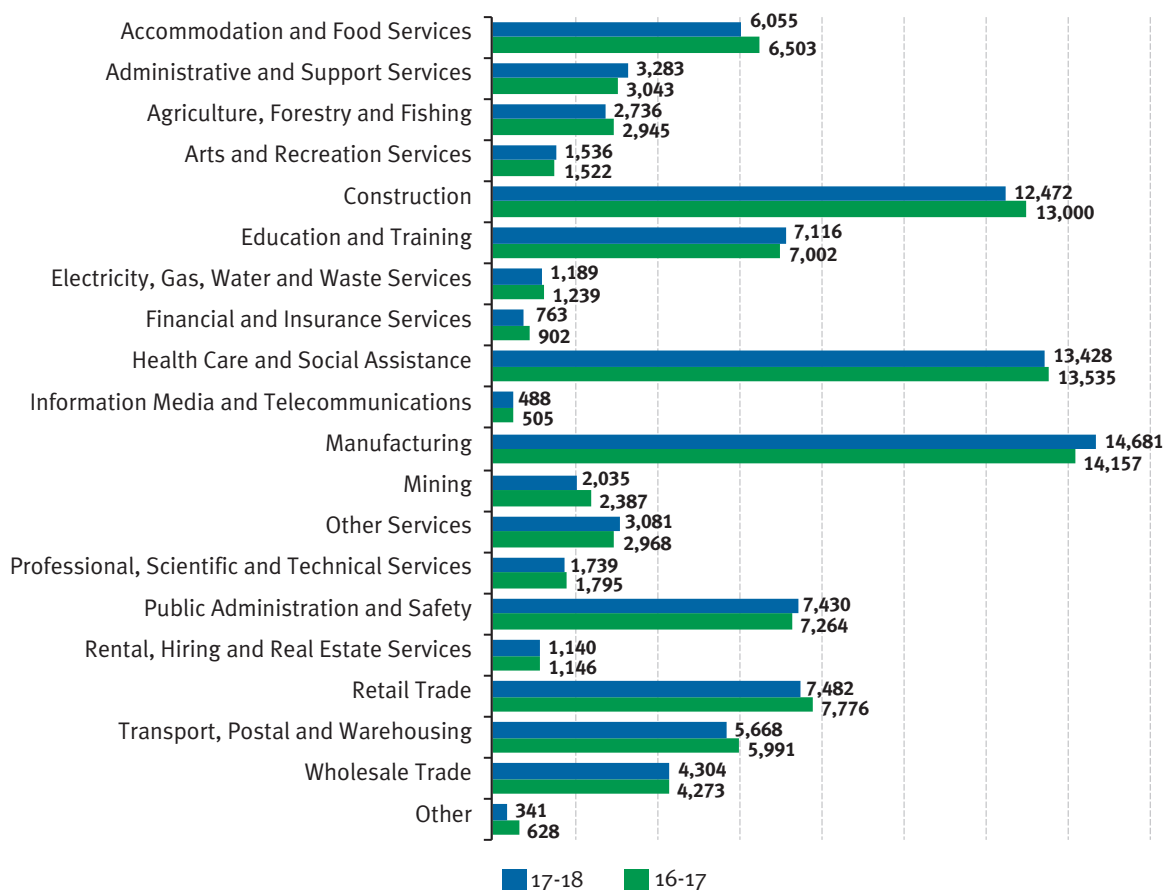


Industry

The manufacturing industry accounted for the largest proportion of claim lodgements with 15.1 per cent of all scheme lodgements.

The largest claim increases were in the administration and support services industry, up 7.9 per cent from 3,043 to 3,283, and the manufacturing industry, up 3.7 per cent from 14,157 to 14,681 (figure 10).

10 Statutory claim lodgements by industry 2016-17 and 2017-18



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.

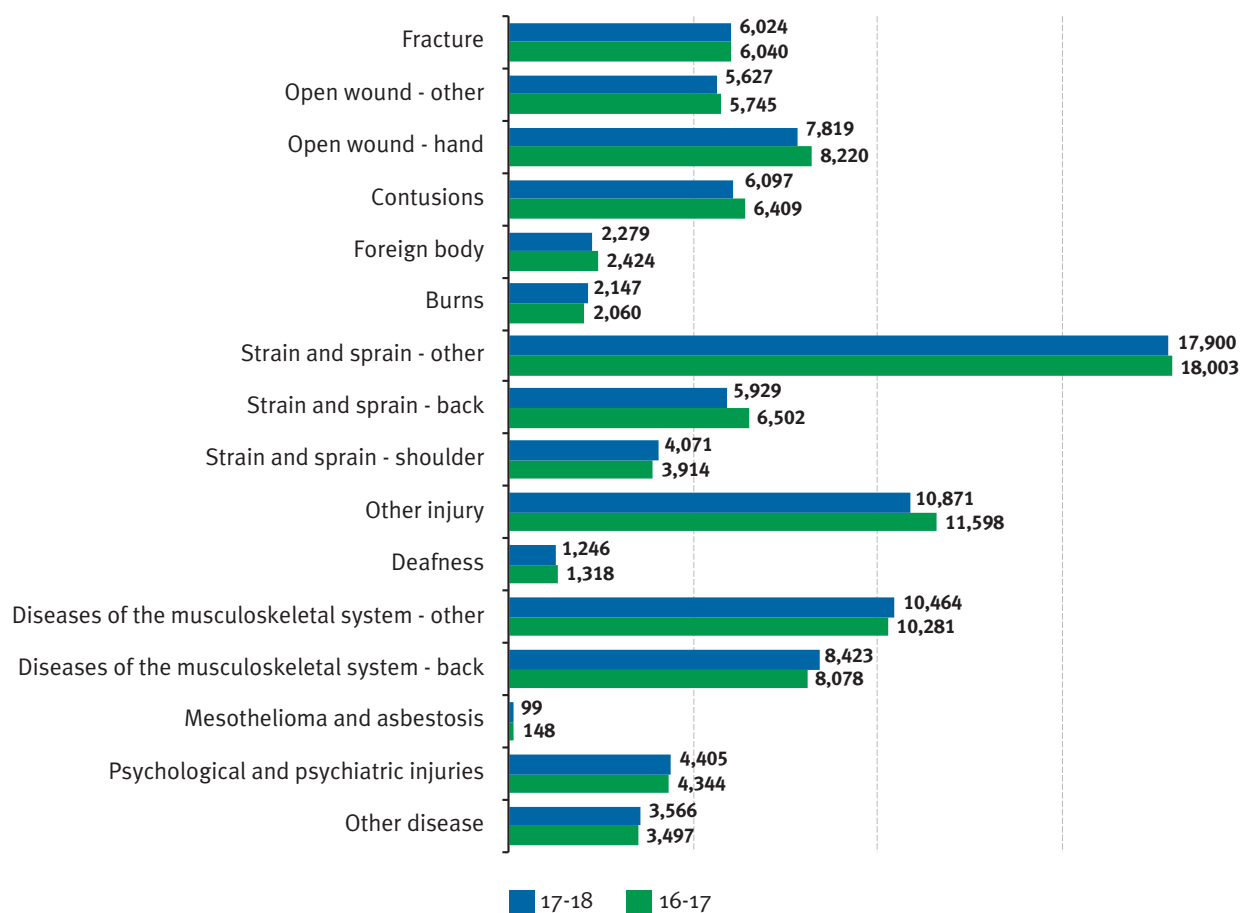
Injury type

Strain and sprain injury claims accounted for over a quarter (28.8 per cent) of all injuries lodged in 2017-18. Of these, the back was the major bodily location (accounting for 6.1 per cent of all lodgements).

Diseases of the musculoskeletal system to the back increased in 2017-18, up 4.3 per cent from 8,078 in 2016-17 to 8,423.

Mesothelioma and asbestosis injuries experienced a 33.1 per cent decrease in lodgements in 2017-18, from 148 in 2016-17 to 99 in 2017-18.

11 Statutory claim lodgements by injury type 2016-17 and 2017-18

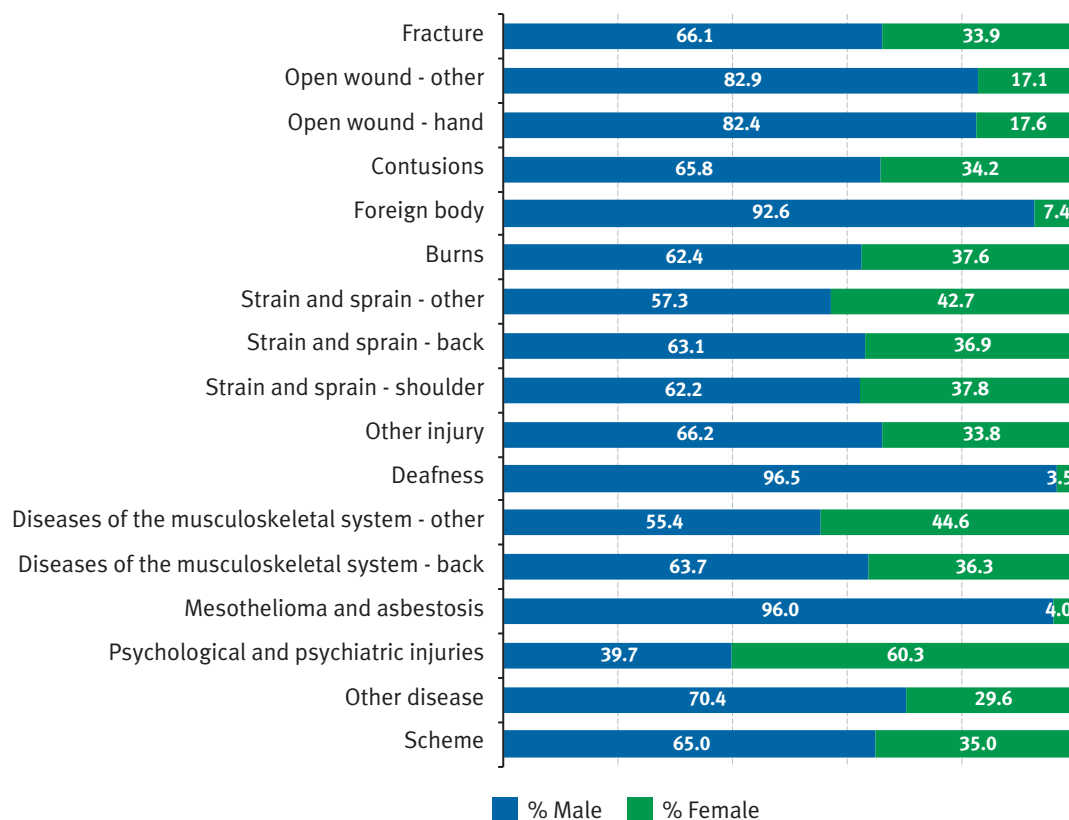


Gender

In 2017-18, males represented 65.0 per cent (n = 62,991) of the 96,967 claims lodged in the Queensland workers' compensation scheme. Injuries where males represented a much higher proportion of claims than females were deafness (96.5 per cent), mesothelioma and asbestosis (96.0 per cent) and foreign body (92.6 per cent).

Psychological and psychiatric injury was the only injury type where females were represented more than males, with females accounting for 60.3 per cent of claims.

12 Proportion of statutory claim lodgements by injury type and gender 2017-18

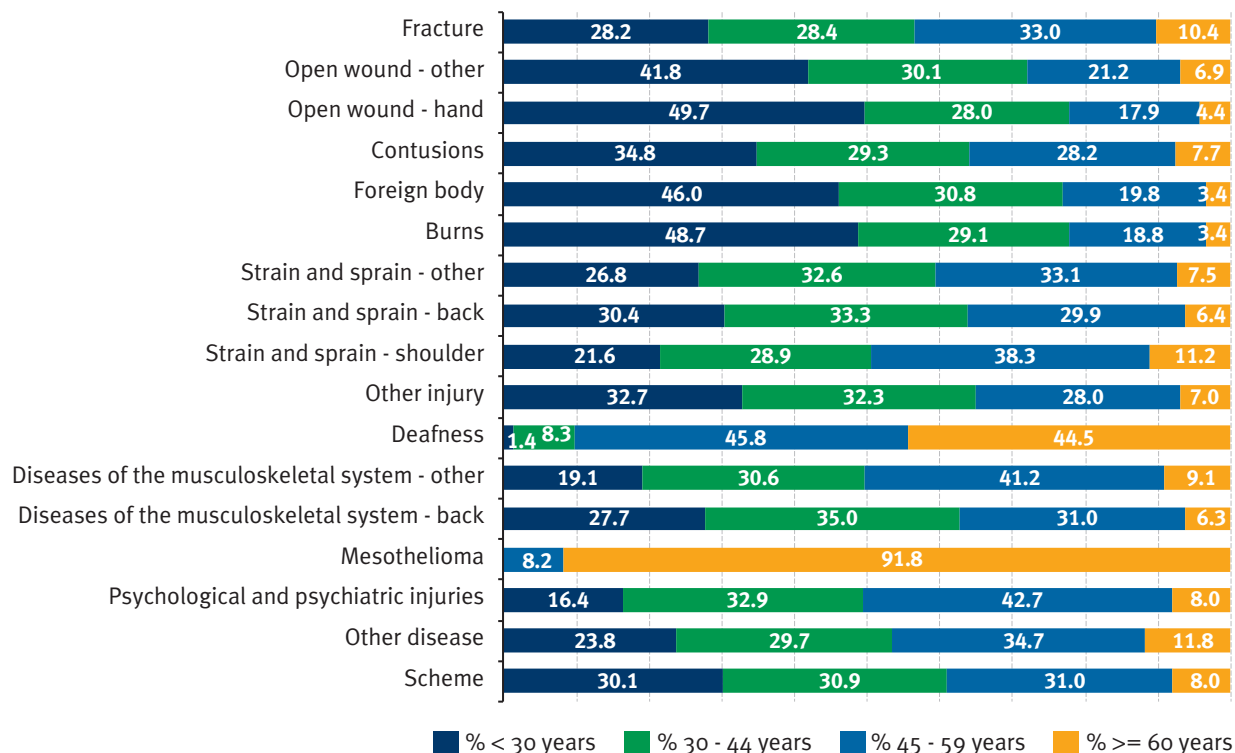


Age

While older workers (60 years or over) represented only 8.0 per cent of all claim lodgements, they have a high representation for injuries such as mesothelioma (91.8 per cent) and deafness (44.5 per cent).

Injury types where younger workers (less than 30 years) represented a greater proportion include open wound to the hand (49.7 per cent), burns (48.7 per cent), foreign body (46.0 per cent) and open wound to a location other than the hand (41.8 per cent).

13 Proportion of statutory claim lodgements by injury type and age group 2017-18



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

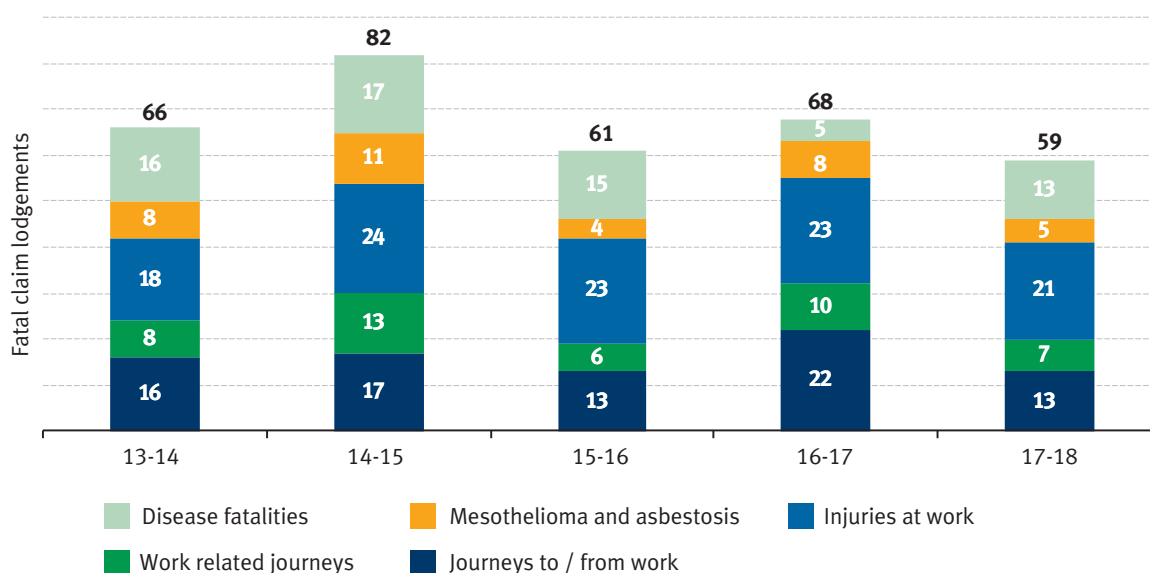
Compensated fatalities

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

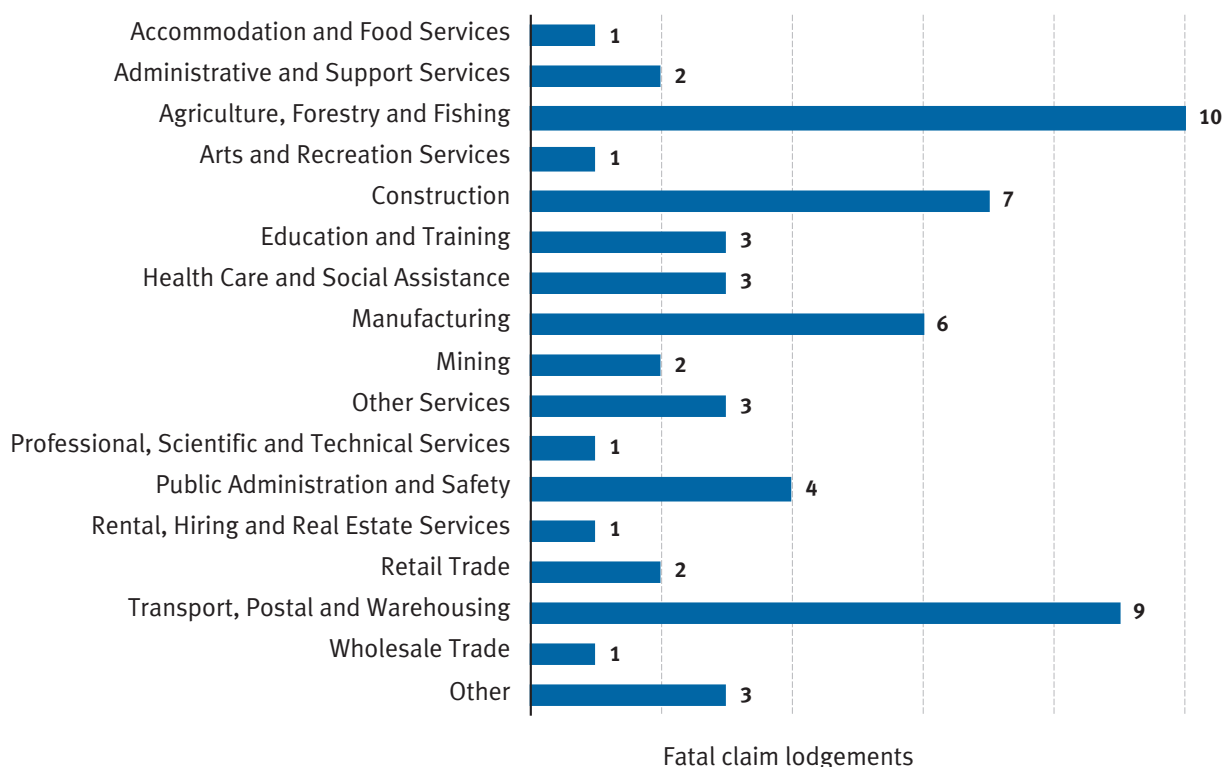
The Office of Industrial Relations reports the claim as a fatality if the claim is indicated by the insurer as a fatality under the Act on the individual application, taking into account the definitions of a worker, event and injury under the Act (s11, s31 and s32). Figure 14 below shows the fatal claim lodgement numbers.

There were 59 fatalities lodged in 2017-18.

14 Fatal claim lodgements (excluding cancelled claims) 2013-14 to 2017-18



15 Fatal claim lodgements by industry 2017-18



Statutory claim decision-making process

- Decision timeframes have increased 5.8 per cent in 2017-18.
- Rejections and claims for psychological and psychiatric injuries take longer to decide.
- Claims for psychological and psychiatric injuries have a higher chance of rejection.
- 78.4 per cent of claims 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.
- Rejections are more likely to progress to a review than claims that are accepted.

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

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

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

Figure 16 demonstrates the decision-making process for new claims.

16 Claims decision-making process



Figure 17 illustrates the change in decision-making timeframes in 2016-17 and 2017-18.

17 Average time to decide by injury type 2016-17 and 2017-18

Injury type	Average decision time (days)	
	2016-17	2017-18
Fracture	4.6	4.4
Open wound – other	4.1	4.2
Open wound – hand	4.0	3.9
Contusions	4.6	4.8
Foreign body	4.0	4.5
Burns	4.6	4.6
Strain and sprain – other	6.3	6.5
Strain and sprain – back	6.3	7.3
Strain and sprain – shoulder	7.1	7.1
Other injury	6.3	6.6
Deafness	16.9	18.9
Diseases of the musculoskeletal system – other	9.2	9.6
Diseases of the musculoskeletal system – back	8.0	8.2
Mesothelioma and asbestosis	88.8	56.5
Psychological and psychiatric injuries	31.1	34.0
Other disease	16.6	18.5
Total average	7.7	8.1

Overall, the average decision-making timeframe has increased to 8.1 days in 2017-18.

The median decision-making timeframe is stable at four days in 2017-18.

Due to the complexity of some claims, the duration from lodgement to decision can be lengthy. The injuries with the longest average decision times in 2017-18 were mesothelioma and asbestosis, and psychological and psychiatric injuries.

Figure 18 illustrates decision-making timeframes and outcomes for claims determined in 2017-18. These timeframes are based on statutory claim decisions.

18 Decisions made and average time to decide by decision type and injury type 2017-18

Injury type	Number of decisions	Proportion of decisions		Average decision time		
		Admitted %	Rejected %	Admitted days	Rejected days	Total days
Fracture	5,339	95.9	4.1	3.9	15.9	4.4
Open wound - other	4,417	96.5	3.5	3.8	16.0	4.2
Open wound - hand	6,270	97.1	2.9	3.6	13.8	3.9
Contusions	4,895	96.4	3.6	4.4	17.1	4.8
Foreign body	1,694	95.7	4.3	4.1	13.2	4.5
Burns	1,684	96.1	3.9	4.0	19.9	4.6
Strain and sprain - other	15,159	96.0	4.0	5.9	19.7	6.5
Strain and sprain - back	5,217	95.5	4.5	6.5	22.4	7.3
Strain and sprain - shoulder	3,602	95.0	5.0	6.2	25.0	7.1
Other injury	7,697	92.7	7.3	5.5	20.7	6.6
Deafness	1,009	88.7	11.3	17.6	29.6	18.9
Diseases of the musculoskeletal system - other	9,132	91.4	8.6	7.9	27.6	9.6
Diseases of the musculoskeletal system - back	7,343	93.1	6.9	7.0	23.9	8.2
Mesothelioma and asbestosis	68	95.6	4.4	57.1	43.0	56.5
Psychological and psychiatric injuries	2,996	37.6	62.4	22.1	41.1	34.0
Other disease	2,829	81.2	18.8	14.1	37.6	18.5
Total	79,351	92.1	7.9	6.3	28.9	8.1

Most claims (92.1 per cent) were accepted by insurers with an average determination time of 6.3 days. On average, decision timeframes tended to be longer for:

- rejected claims – determined in 28.9 days on average compared to 6.3 days on average for accepted claims
- diseases – particularly psychological and psychiatric injury claims (average 34.0 days to determine), mesothelioma and asbestosis claims (average 56.5 days to determine) and deafness (average 18.9 days to determine).

In 2017-18, 62.4 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 2017-18, 93.5 per cent of the rejected psychological and psychiatric claims were rejected on this basis.

Reasons for claim rejection

Insurers reject claims where, for some reason, the event or the person is not covered under the Act. For 78.4 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 2016-17 and 2017-18

Reason for rejection	2016-17		2017-18	
	Number of rejections	% of rejections	Number of rejections	% of rejections
Not an injury - s.32	4,763	76.9	4,917	78.4
Not a worker - s.11	681	11.0	551	8.8
Out of time - excluded under s.131	381	6.2	430	6.9
Journey - subsequent delay, interruption or deviation - s.36(2)(B)	70	1.1	81	1.3
Invalid application - s.132	3	0.0	3	0.0
Industrial deafness - excluded under s.125 - initial application	52	0.8	70	1.1
Not a journey - s.35	38	0.6	47	0.8
Other	207	3.4	170	2.7
Total	6,195	100	6,269	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 2017-18, only 99 claims were referred to the Medical assessment tribunal for determination of the worker's injury for an application for compensation. Of these cases, 65 (65.7 per cent) were accepted and the remaining 34 (34.3 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 (0.4 per cent), 23.9 per cent of rejected claims are disputed by either the employer or the injured worker.

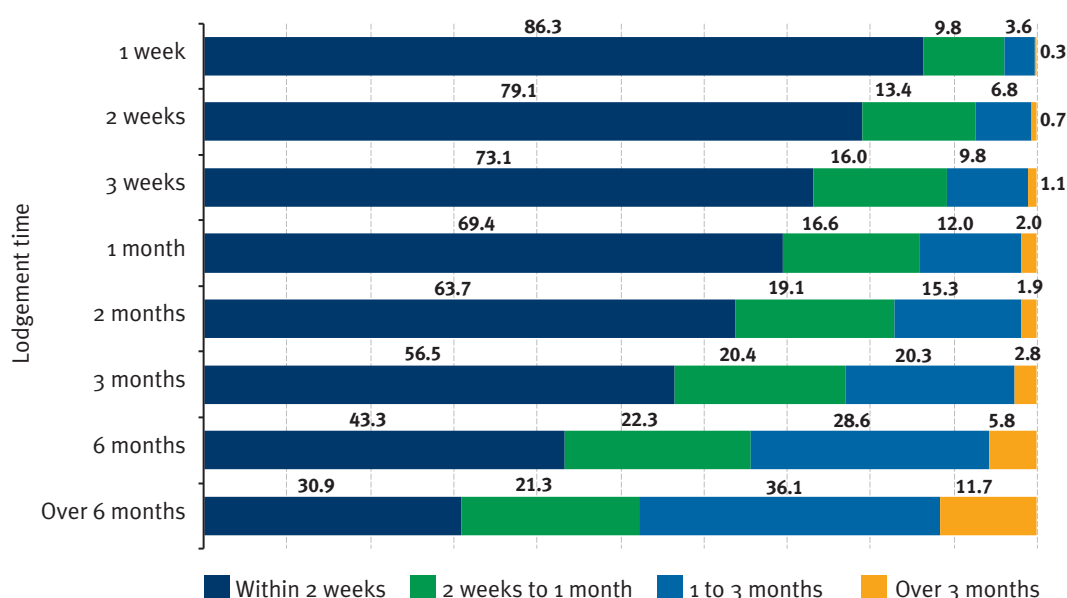
Impact of lodgement time on determination time

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

86.3 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 decreases as the time to lodge the claim increases. For claims lodged more than six months after an injury, the proportion determined in less than two weeks drops to 30.9 per cent.

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

20 Decision-making timeframes for claims decided in 2017-18 by the time taken to lodge the claim



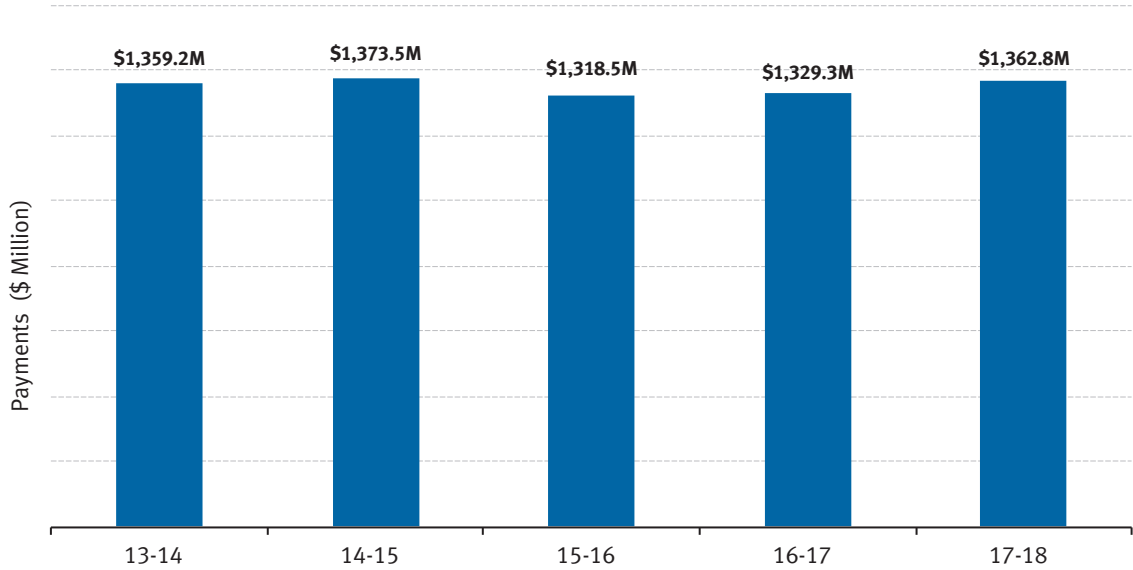
Claim payments

- Total scheme payments increased 2.5 per cent in 2017-18.
- There was a 2.0 per cent increase in common law payments made in 2017-18.
- Statutory payments increased by 2.8 per cent between 2016-17 and 2017-18.

Workers' compensation payments

Overall, the total scheme payments increased 2.5 per cent in 2017-18, with common law payments increasing by 2.0 per cent and statutory payments increasing by 2.8 per cent. Total payments for workers' compensation claims in 2017-18 were \$1,362.8 million. Common law payments made up 30.8 per cent (\$419.3 million) and statutory claim payments made up 69.2 per cent (\$943.5 million).

21 Scheme payments 2013-14 to 2017-18

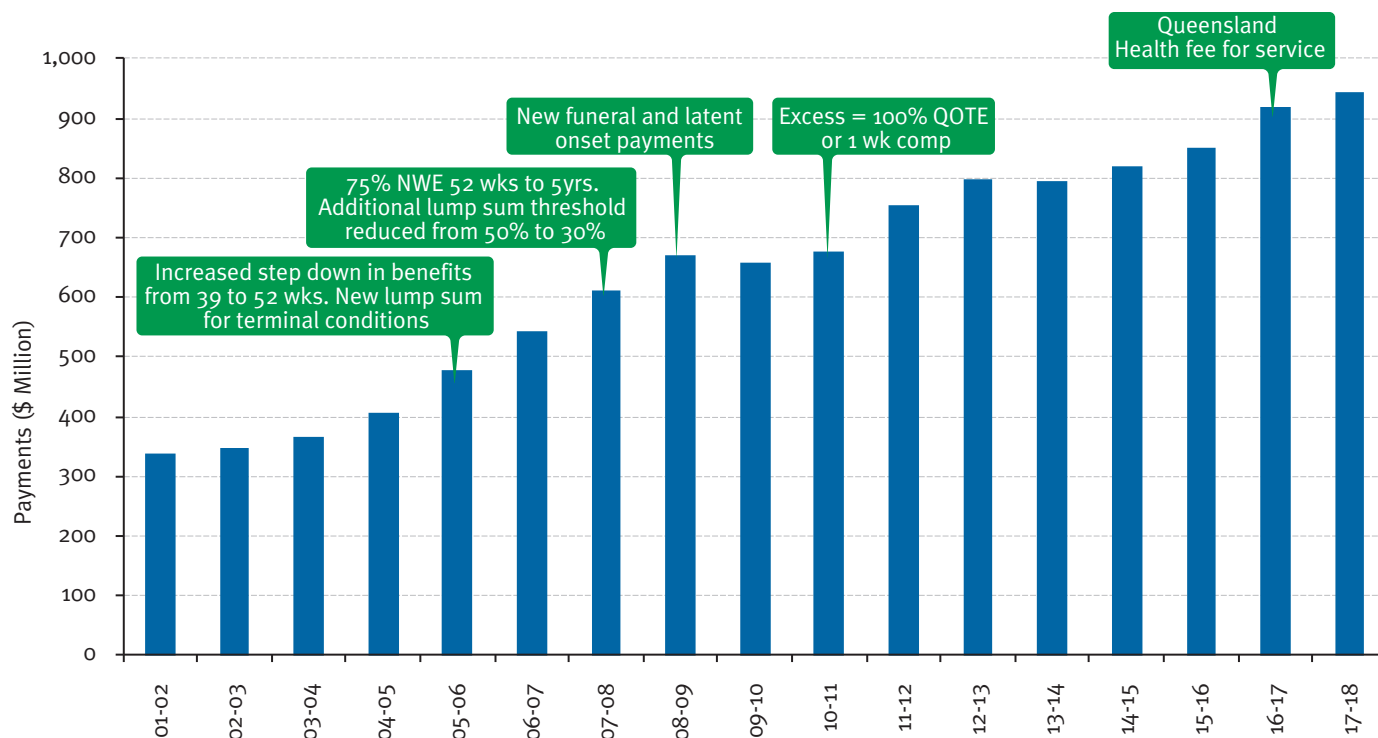


Statutory claim payments

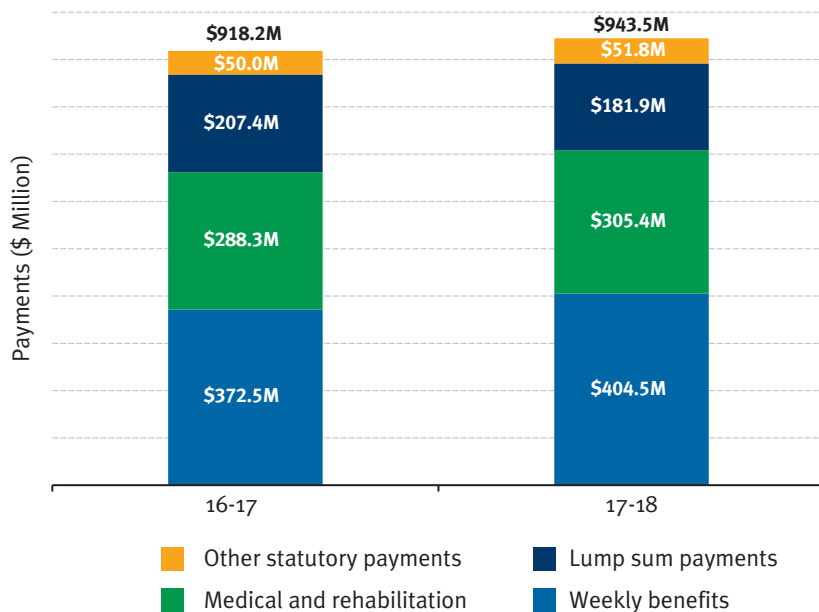
During the management of a claim, payments are made to the worker for weekly compensation to replace wages, lump sums for permanent impairment (PI) and a broad range of services such as medical treatment and rehabilitation.

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 2001-02 to 2017-18



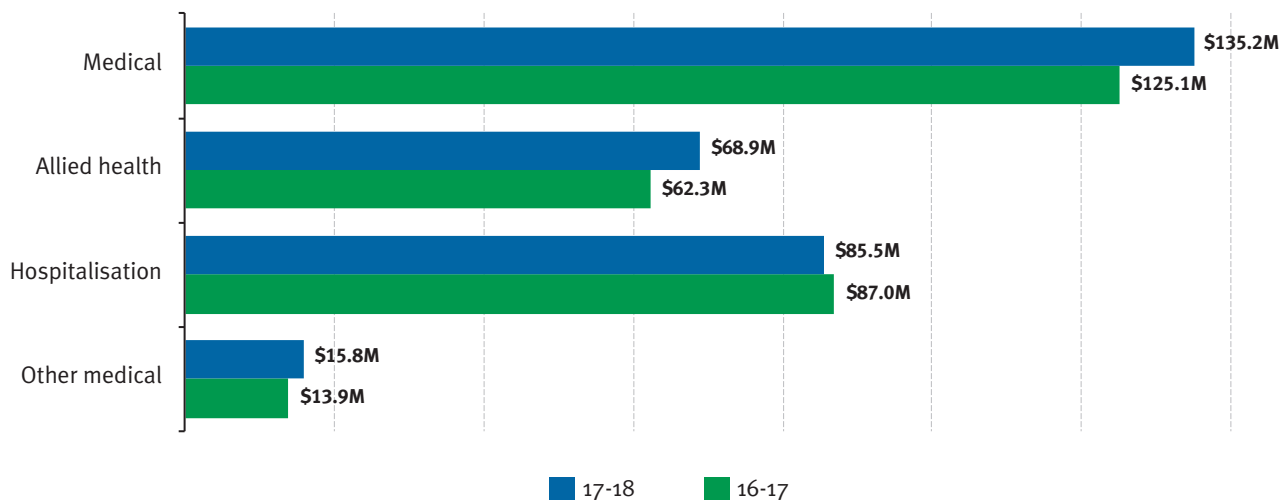
23 Statutory claim payments by payment type 2016-17 and 2017-18



The total amount spent on claims for the year has increased by 2.8 per cent from \$918.2 million in 2016-17 to \$943.5 million in 2017-18 (figure 23).

The largest payments increase was for weekly benefits payments, up 8.6 per cent from 2016-17. Medical and rehabilitation payments also increased, by 5.9 per cent. Lump sum payments decreased 12.3 per cent from \$207.4 million in 2016-17 to \$181.9 million in 2017-18.

24 Medical and rehabilitation payments 2016-17 and 2017-18

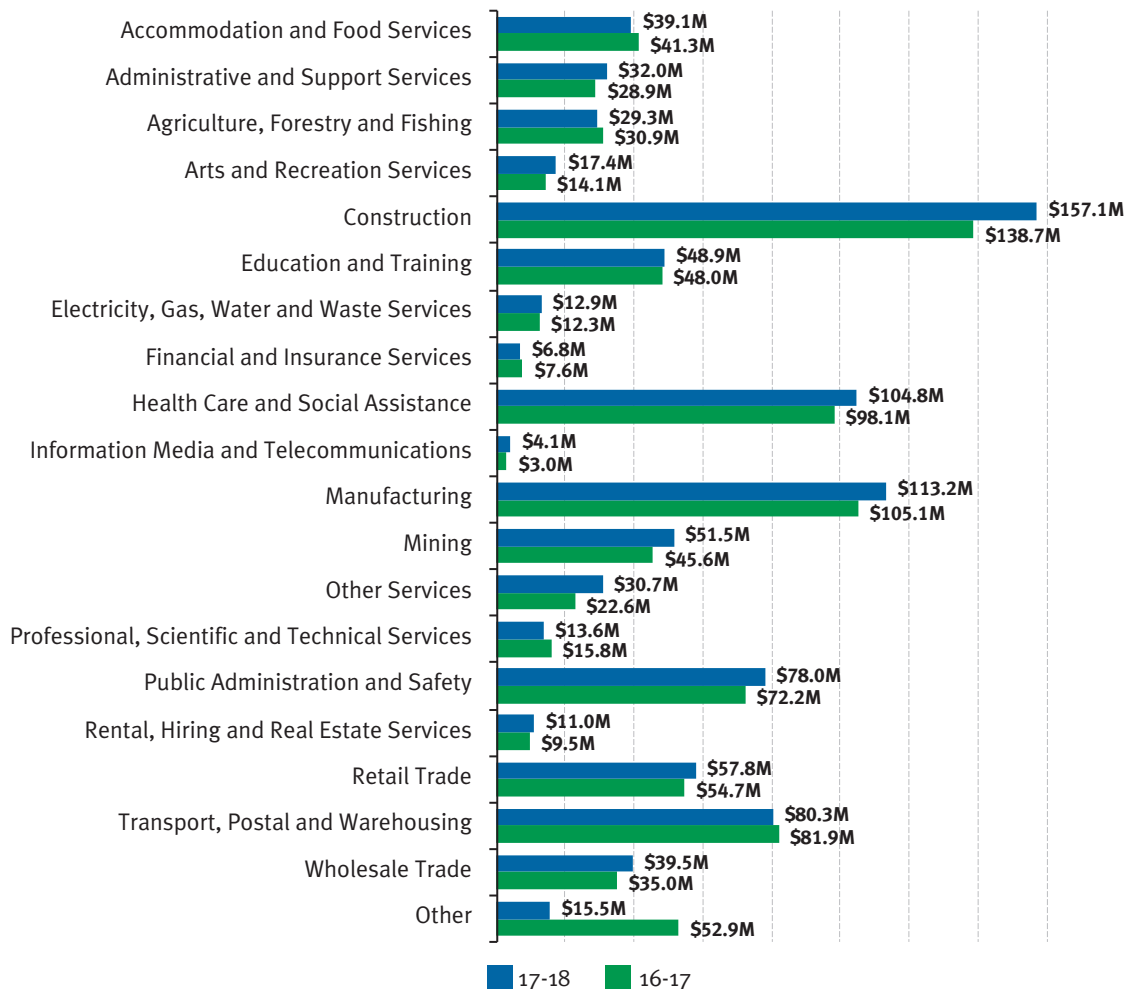


Medical and rehabilitation payments represent 22.4 per cent of statutory payments. Payments for medical treatment accounted for 44.3 per cent of all payments for medical and rehabilitation fees paid in the scheme in 2017-18. Allied health payments increased 10.6 per cent in 2017-18 from \$62.3 million in 2016-17 to \$68.9 million.

Payments by industry

Claims from the construction industry accounted for the largest proportion (16.6 per cent) of statutory claim payments in 2017-18. Manufacturing accounted for 12.0 per cent of statutory payments, while health care and social assistance accounted for 11.1 per cent (figure 25).

25 Statutory claim payments by industry 2016-17 and 2017-18

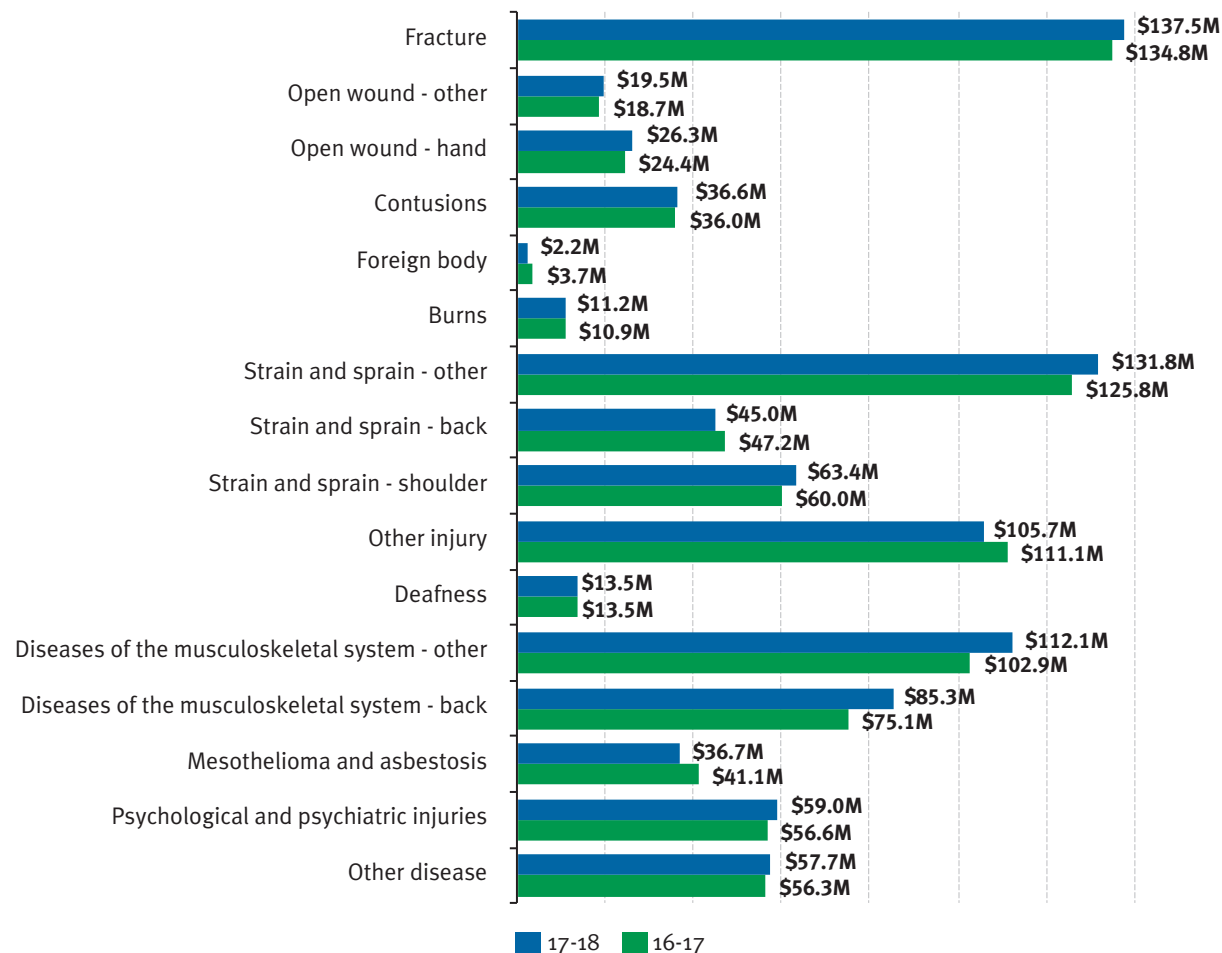


Payments by injury

As shown in figure 26, claims from strain and sprain injuries accounted for the largest proportion (25.5 per cent) of statutory claim payments in 2017-18 (4.8 per cent to the back, 6.7 per cent to the shoulder and 14.0 per cent to a location other than the back or shoulder). Disease of the musculoskeletal system claims accounted for 20.9 per cent of statutory claim payments made in 2017-18 (9.0 per cent to the back and 11.9 per cent to a location other than the back). Fractures accounted for 14.6 per cent of claim injuries in 2017-18.

Injury types that experienced the largest percentage increase in statutory claim payments from 2016-17 to 2017-18 were diseases of the musculoskeletal system to the back (13.7 per cent) and to locations other than the back (9.0 per cent).

26 Statutory claim payments by injury type 2016-17 and 2017-18



Finalised claims and outcomes

- In 2017-18, 87.7 per cent of workers with claims finalised returned to their same job with the same employer.
- The average costs of finalised medical expense only claims increased by 16.6 per cent.
- The average costs of finalised time lost claims was stable in 2017-18 and the duration decreased 3.1 per cent.

Work related impairment/degree of permanent impairment

Where a worker has a permanent impairment (PI) assessed, the degree of work related impairment (WRI) is calculated. WRI applies to injuries before 15 October 2013. Under the 2013 legislative amendments if a worker is injured on or after 15 October 2013 the worker is assessed for a degree of permanent impairment (DPI).

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 under the 2013 legislative amendments, 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 below shows the number of claims finalised and those that had a WRI/DPI in 2016-17 and 2017-18.

27 Finalised claims with a WRI/DPI 2016-17 and 2017-18

	2016-17	2017-18	Variance %
Finalised claims	78,158	77,943	-0.3
WRI/DPI	8,332	8,229	-1.2
Proportion of finalised claims with WRI/DPI	10.7%	10.6%	-0.1
Work related impairment/Degree of permanent impairment range			
0%	2,053	2,093	1.9
0.1% - 4.9%	2,554	2,688	5.2
5% - 9.9%	2,372	2,178	-8.2
10% - 14.9%	686	624	-9.0
15% - 19.9%	274	247	-9.9
>=20%	393	399	1.5

For 2017-18, 10.6 per cent of claims were finalised with a PI. Of these, the majority of claims (95.2 per cent) had a WRI/DPI of less than 20 per cent and 25.4 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. The following figure analyses the RTW outcome of claims reported at the time the claim closed. As figure 28 illustrates, this is the outcome achieved in most cases, with 87.7 per cent of injured workers who had time off work returning to the same job and the same employer.

28 Return to work status of finalised time lost claims 2016-17 and 2017-18

	2016-17		2017-18	
	Number	% of time lost claims	Number	% of time lost claims
Fit for work: same job/tasks with same employer	38,317	86.9	38,558	87.7
Fit for work: same job/tasks with different employer	503	1.1	571	1.3
Fit for work: different job/tasks with same employer	513	1.2	475	1.1
Fit for work: different job/tasks with different employer	1,299	2.9	1,367	3.1
Fit for work: no job	988	2.3	843	2.0
Fit for work: worker does not return	1,286	2.9	1,177	2.6
Not fit for work	1,112	2.5	923	2.1
Alternative outcome not claim related	85	0.2	63	0.1
Total	44,103	100	43,977	100

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

In 2017-18, 93.2 per cent of injured workers returned to some type of employment (92.1 per cent in 2016-17). 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 (2.0 per cent of time lost claims) or the worker chooses not to return (2.6 per cent of claims).

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.

29 Return to work status of finalised time lost claims with/without a PI assessed 2016-17 and 2017-18

	2016-17			2017-18		
	PI Assessed			PI Assessed		
	% No	% Yes	Number	% No	% Yes	Number
Fit for work: same job/tasks with same employer	91.0	9.0	38,317	90.7	9.3	38,558
Fit for work: same job/tasks with different employer	69.2	30.8	503	73.4	26.6	571
Fit for work: different job/tasks with same employer	48.5	51.5	513	51.8	48.2	475
Fit for work: different job/tasks with different employer	52.2	47.8	1,299	52.5	47.5	1,367
Fit for work: no job	37.4	62.6	988	40.8	59.2	843
Fit for work: worker does not return	49.6	50.4	1,286	51.1	48.9	1,177
Not fit for work	28.0	72.0	1,112	24.3	75.7	923
Alternative outcome not claim related	56.5	43.5	85	47.6	52.4	63
Total	85.0	15.0	44,103	85.4	14.6	43,977

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

Workers with claims assessed for PI are less likely to return to the same job with the same employer. In 2017-18, 9.3 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.

30 Return to work status of finalised time lost claims by injury nature 2016-17 and 2017-18

	2016-17			2017-18		
	Physical only %	Psych only %	Psych and Physical %	Physical only %	Psych only %	Psych and Physical %
Fit for work: same job/tasks with same employer	89.4	56.8	37.9	90.0	61.5	39.3
Fit for work: same job/tasks with different employer	1.1	1.9	2.2	1.2	2.2	3.2
Fit for work: different job/tasks with same employer	1.0	2.8	3.7	0.9	3.9	3.9
Fit for work: different job/tasks with different employer	2.4	11.0	11.5	2.7	10.5	10.8
Fit for work: no job	1.9	4.8	10.0	1.6	4.1	9.6
Fit for work: worker does not return	2.5	8.1	11.2	2.2	8.0	12.5
Not fit for work	1.5	14.2	22.1	1.3	9.6	19.3
Alternative outcome not claim related	0.1	0.3	1.5	0.1	0.2	1.4
Total	100	100	100	100	100	100
Number	41,534	1,081	1,488	41,535	993	1,449

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

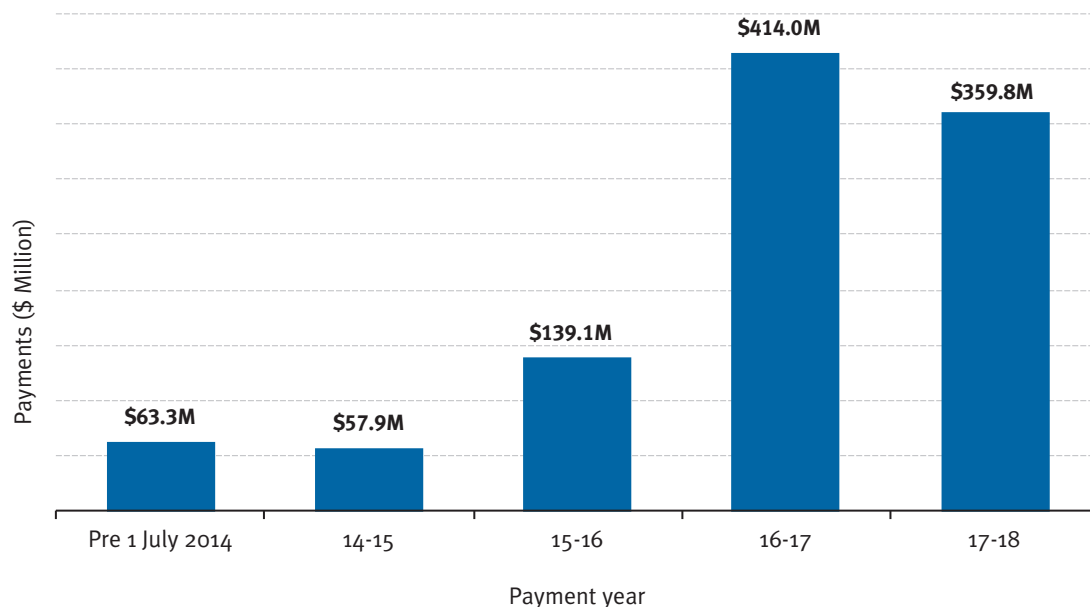
Workers having claims with both a physical and psychological or psychiatric component are the least likely to return to employment and in 2017-18 19.3 per cent were not fit for work at the end of their claim.

Average claim costs

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

Figure 31 below illustrates the payments made on claims finalised in 2017-18. Over 60 per cent of the payments for these claims occurred in previous years. Only 34.8 per cent of the statutory payments made on claims finalised in 2017-18 were also paid in that financial year. A further 40.0 per cent of payments were made in the 2016-17 financial year. The remaining 25.2 per cent of the payments were made in 2015-16 or earlier.

31 Payments by payment year for claims finalised in 2017-18



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

The average cost (time lost claims and medical expenses only claims) has increased for the financial year (up 1.4 per cent from \$11,619 in 2016-17 to \$11,777 in 2017-18).

The number of claims finalised in the past two financial years, and the average claim costs by claim type for time lost claims and medical expense only claims is represented in figure 32 below. These two claims types represent 97.4 per cent of all finalised claims during 2017-18.

32 Finalised claims and average claim costs by claim type 2016-17 and 2017-18

Claim type	Number of claims			Average claim cost		
	2016-17	2017-18	Variance %	2016-17 \$	2017-18 \$	Variance %
Time lost claim	44,113	43,984	-0.3	18,744	18,771	0.1
Medical expense only claim	32,090	31,886	-0.6	1,825	2,128	16.6
Total	76,203	75,870	-0.4	11,619	11,777	1.4

The median claim costs for time lost and medical expense only claims has increased from \$1,416 in 2016-17 to \$1,599 in 2017-18.

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 2017-18

Indicator	% change from previous year
Average finalised time lost claim cost	0.1
Average finalised medical expense only claim cost	16.6
Consumer price index	
Average of all groups, Brisbane (excluding GST) ^a	1.7
Health, Brisbane (excluding GST) ^b	3.8
Full time adult ordinary earnings ^c	3.1

^a Australian Bureau of Statistics, consumer price index, Australia Cat. No. 6401.0 - Consumer Price Index, Australia, March 2018, Tables 1 and 2 CPI - all groups, index numbers and percentages changes, Index Numbers; All groups; Brisbane. [Percentage change from March 2017 to March 2018.]

^b Australian Bureau of Statistics, Australia Cat. No. 6401.0 - Consumer Price Index, Australia, March 2018, Table 5 CPI - groups, index numbers by capital city, Index Numbers; Health; Brisbane. [Percentage change from March 2017 to March 2018.]

^c Australian Bureau of Statistics, average weekly earnings, Australia Cat. No 6302.0 - Average weekly earnings Australia, November 2017. Table 13C Average weekly earnings Queensland (dollars) - Original Earnings; Queensland; Persons; Full Time; Adult; Ordinary time earnings. [Percentage change from November 2016 to November 2017.]

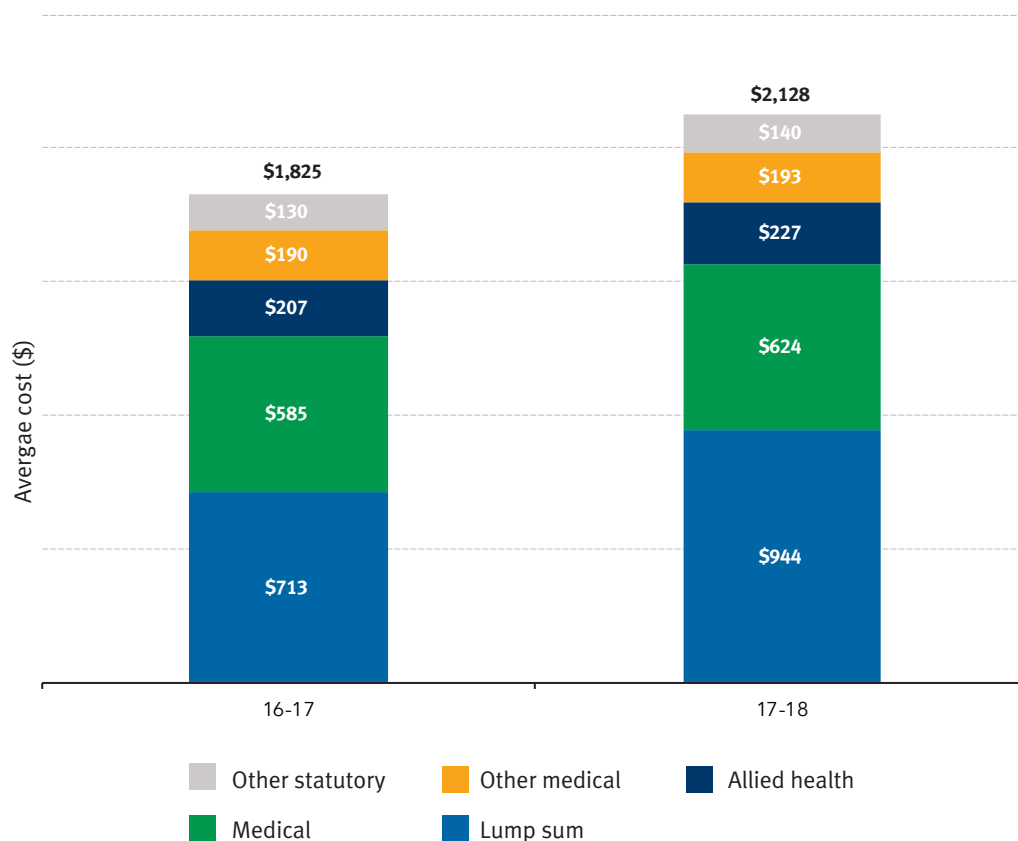
Average finalised medical expense only claim costs

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

The average cost of finalised medical expense only claims has increased by 16.6 per cent from \$1,825 in 2016-17 to \$2,128 in 2017-18 (figure 34).

The breakdown of the average cost for 2017-18 shows 44.3 per cent of the cost is made up of lump sum payments followed by medical and rehabilitation payments of 29.3 per cent. Allied health payments account for 10.7 per cent and other medical payments (including hospitalisation) account for 9.1 per cent. The remaining 6.6 per cent of the average cost is made up of other statutory payments.

34 Average finalised medical expense only claim costs by payment type 2016-17 and 2017-18



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 was stable in 2017-18, down 0.3 per cent from 44,113 in 2016-17 to 43,984.

Durations for finalised time lost claims including the excess paid period by the employer (where applicable) have decreased from 50.8 days in 2016-17 to 49.2 days in 2017-18.

Over 70 per cent of time lost claims have 40 or less workdays lost (71.8 per cent), while the median workdays lost for all time lost claims is 13 days. This illustrates how the small number of long term claims impact the average duration. Only 10.3 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 (the Act s150).

35 Number of time lost claims by workdays lost time band 2016-17 and 2017-18

Workdays lost	2016-17		2017-18	
	Number of claims	% of claims	Number of claims	% of claims
1 - 5 days	15,447	35.0	15,190	34.5
6 - 10 days	5,176	11.7	5,353	12.2
11 - 20 days	5,475	12.4	5,451	12.4
21 - 40 days	5,443	12.3	5,572	12.7
41 - 65 days	3,727	8.5	3,719	8.5
66 - 130 days	4,190	9.5	4,150	9.3
131 - 260 days	2,737	6.2	2,839	6.5
> 260 days	1,918	4.4	1,710	3.9
Total time lost claims	44,113	100	43,984	100

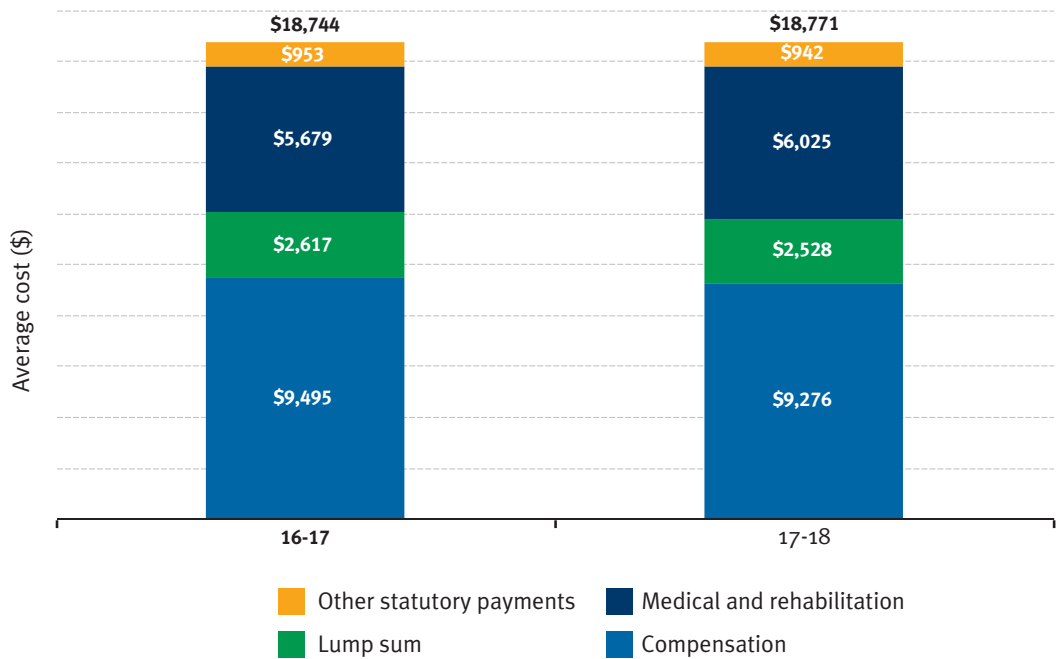
Average finalised time lost claim costs

The average cost of finalised time lost claims was stable and only increased by 0.1 per cent from \$18,744 in 2016-17 to \$18,771 in 2017-18 (figure 36).

The breakdown of the average cost in 2017-18 shows just under half (49.4 per cent) of the cost is made up of weekly compensation payments.

In 2017-18, medical and rehabilitation payments accounted for almost a third (32.1 per cent) of the average cost and lump sum payments accounted for 13.5 per cent. The remaining 5.0 per cent of the average cost was made up of other statutory payments.

36 Average finalised time lost claim costs by payment type 2016-17 and 2017-18

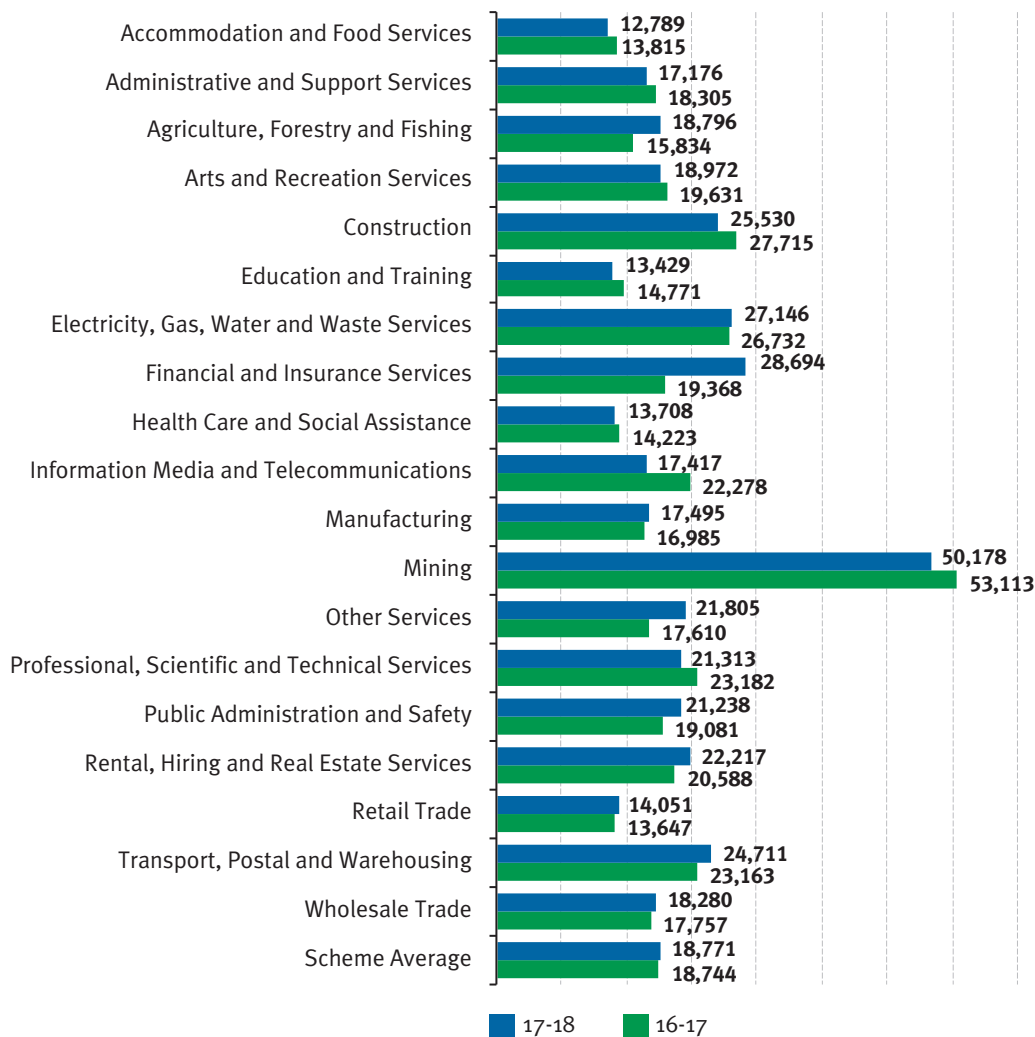


Average cost by industry

Of all industry claims, those from the mining industry had the highest average finalised time lost claim cost (\$50,178) partially due to the higher wages paid in the industry (figure 37). Being the highest of all industries, the Australian average weekly earnings (full time adult ordinary time earnings) for workers within the mining industry is \$2,581*.

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 - \$1,113 and \$1,143 respectively.

37 Average finalised time lost claim costs by industry 2016-17 and 2017-18



*Source: ABS, Average Weekly Earnings, Cat. No. 6302.0, November 2017, table 10G. Average Weekly Earnings, Industry, Australia (Dollars) - Original - Persons, Full Time Adult Ordinary Time Earnings.

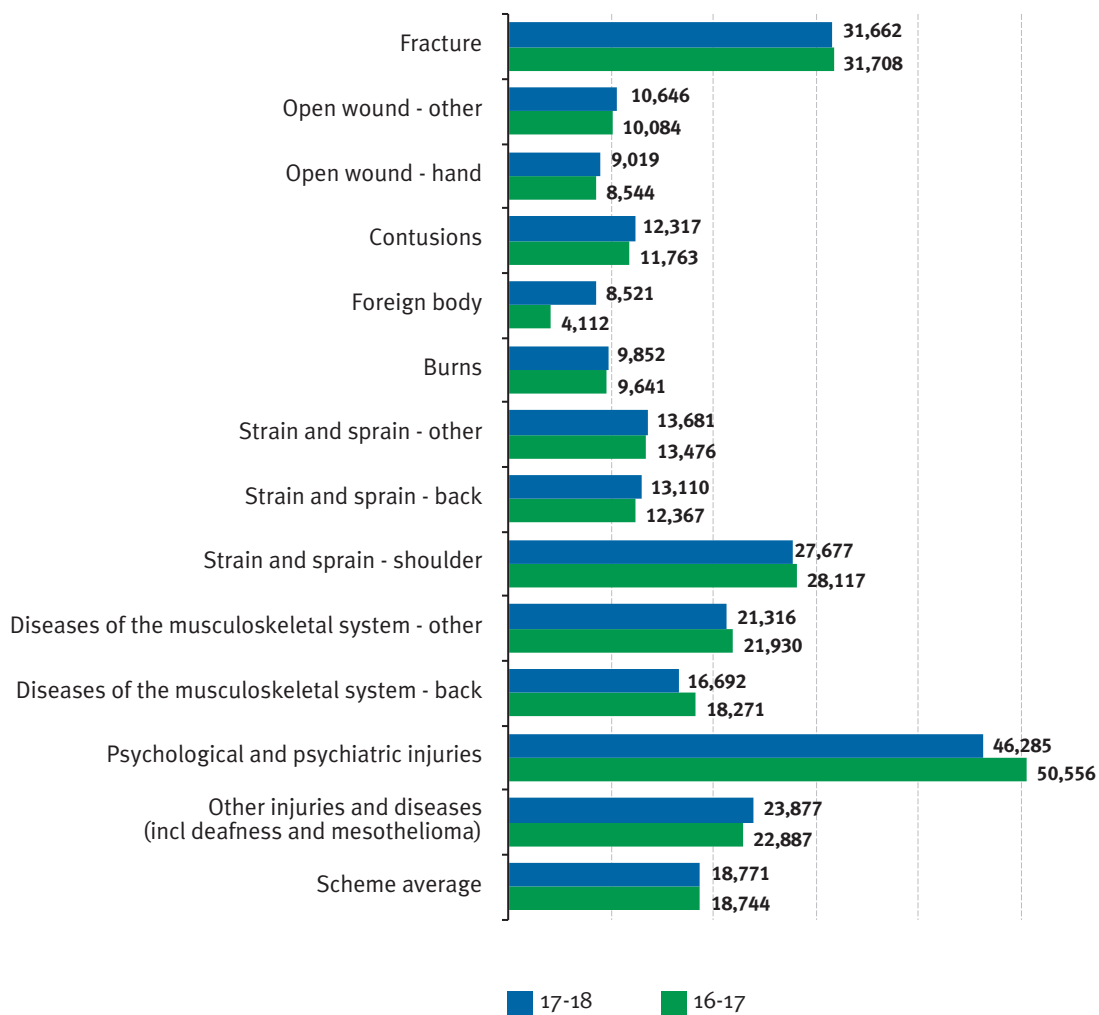
Average cost by injury type

Although psychological and psychiatric injury claims account for only 2.5 per cent of all time lost claims finalised, they are the most expensive with an average finalised time lost claim cost of \$46,285 in 2017-18.

In 2017-18, the average duration of a psychological or psychiatric injury claim was 145.3 days (153.3 days in 2016-17) compared with the overall scheme average of 49.2 days. It is the long duration of psychological and psychiatric injury claims that impacts on the average finalised time lost claim cost for these claims.

As shown in figure 38, the second most expensive injury type was fractures with an average cost of \$31,662 (\$31,708 in 2016-17).

38 Average finalised time lost claim cost by injury type 2016-17 and 2017-18



Claims for damages at common law

- Common law lodgements have decreased slightly over the last year.
- The majority of lodgements are for injuries that occurred two to three years prior.
- Over half (60.0 per cent) of common law lodgements have a work related impairment of less than five per cent.
- Psychological and psychiatric injury claims represent 9.3 per cent of common law lodgements. They represent only 4.5 per cent of statutory claim lodgements.
- In 2017-18, the average settlement cost of a finalised common law claim was \$155,563.

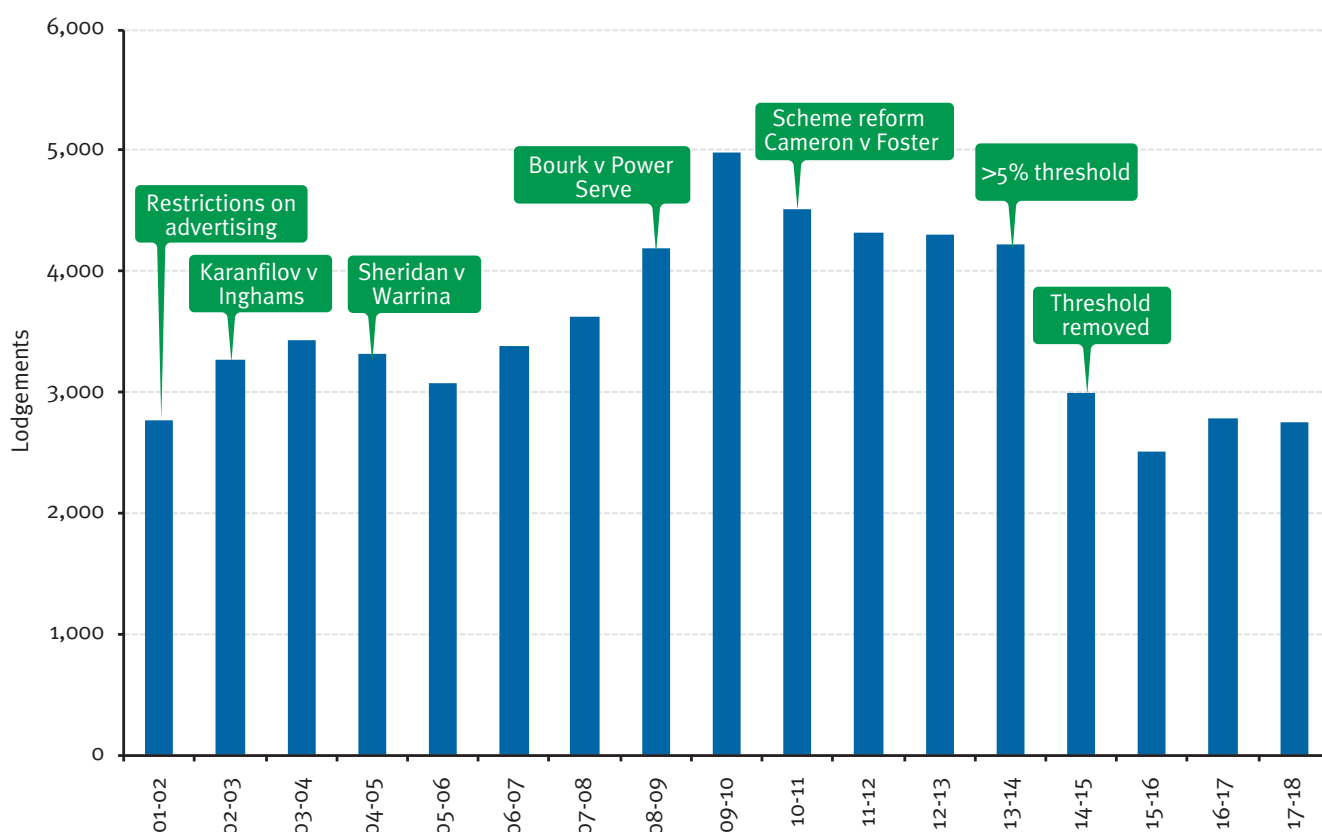
Legislative amendments in 2013 introduced a threshold to restrict access to common law damages. This threshold required workers with injuries on or after 15 October 2013 to have a degree of permanent impairment (DPI) greater than five per cent to access common law damages.

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.

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 2001-02 to 2017-18



In 2017-18, common law claim lodgements decreased by 1.3 per cent, decreasing from 2,789 in 2016-17 to 2,753 in 2017-18. Figure 40 shows common law claim lodgements over the past eight years by the date of injury.

40 Common law claim lodgements 2010-11 to 2017-18 by injury year

Injury year	Lodgement year							
	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Pre 01/07/2003	77	62	39	60	30	26	21	17
2003-04	11	8	6	5	7	2	4	0
2004-05	32	12	8	3	2	0	4	2
2005-06	25	24	12	6	5	2	1	2
2006-07	65	40	19	5	4	3	0	4
2007-08	1,037	64	24	16	12	6	4	4
2008-09	1,371	921	43	22	13	10	3	4
2009-10	1,672	1,348	908	53	18	12	4	4
2010-11	219	1,624	1,379	948	44	21	13	8
2011-12		210	1,640	1,436	867	40	12	12
2012-13			223	1,526	1,236	856	27	13
2013-14				148	717	852	634	47
2014-15					41	575	939	677
2015-16						108	1,008	1,000
2016-17							115	864
2017-18								95
Total	4,509	4,313	4,301	4,228	2,996	2,513	2,789	2,753

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

Figure 41 shows the breakdown of common law claim lodgements in 2017-18 by the injured worker's WRI/DPI.

41 Common law claim lodgements by WRI/DPI 2017-18

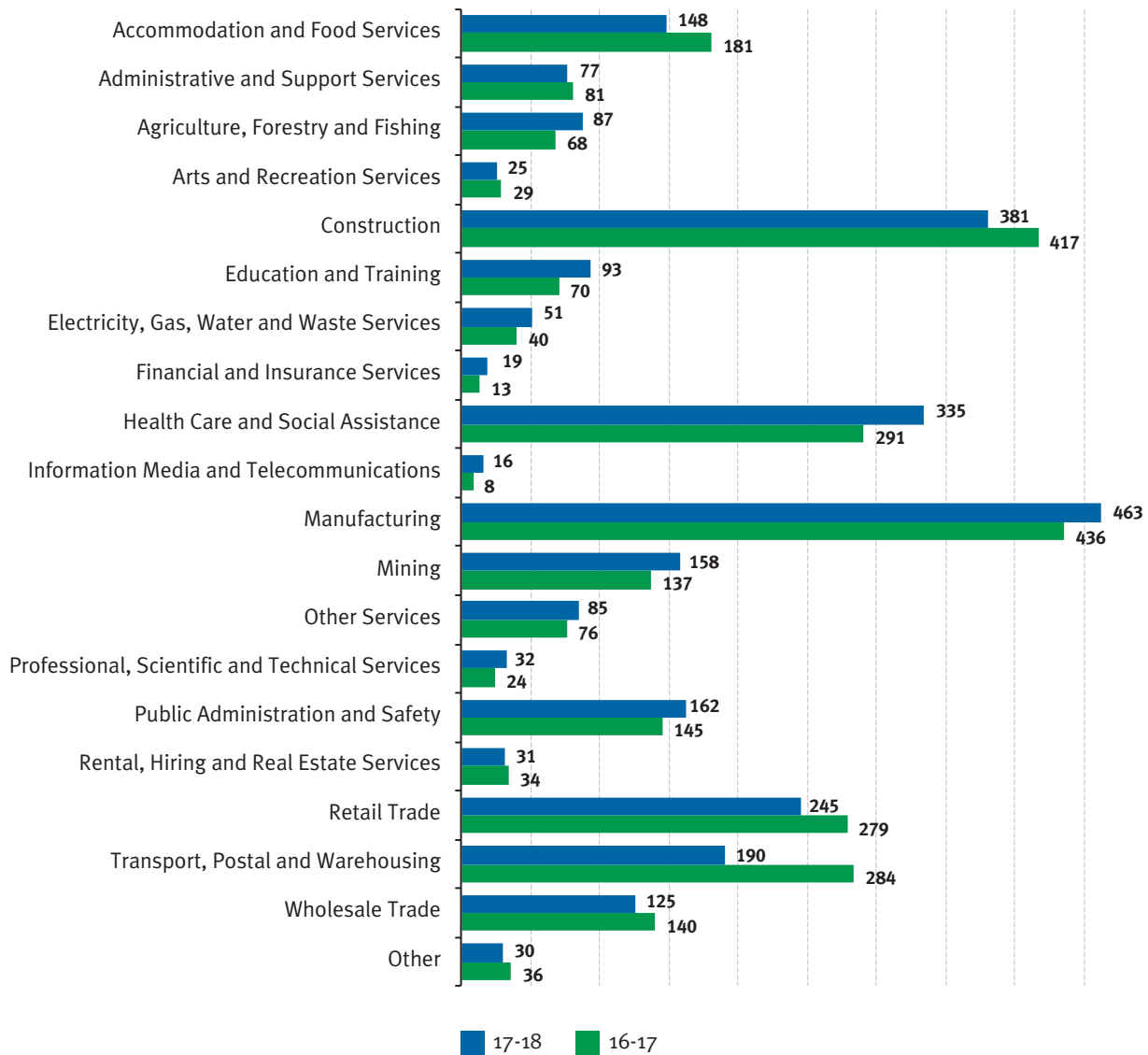
WRI/DPI	Common law lodgements	% of common law lodgements
No impairment assessed	411	14.9
0%	627	22.8
0.1 - 4.9%	615	22.3
5 - 9.9%	687	25.0
10 - 14.9%	182	6.6
15 - 19.9%	73	2.7
>=20%	158	5.7
Total	2,753	100

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 (5.7 per cent) are able to access lump sum payment and pursue common law.

Industry

The manufacturing and construction industries represented the highest proportion of common law claims lodged in the Queensland Workers' Compensation scheme. The manufacturing industry accounted for 16.8 per cent and the construction industry accounted for 13.8 per cent of all common law claim lodgements in 2017-18 (figure 42).

42 Common law claim lodgements by industry 2016-17 and 2017-18



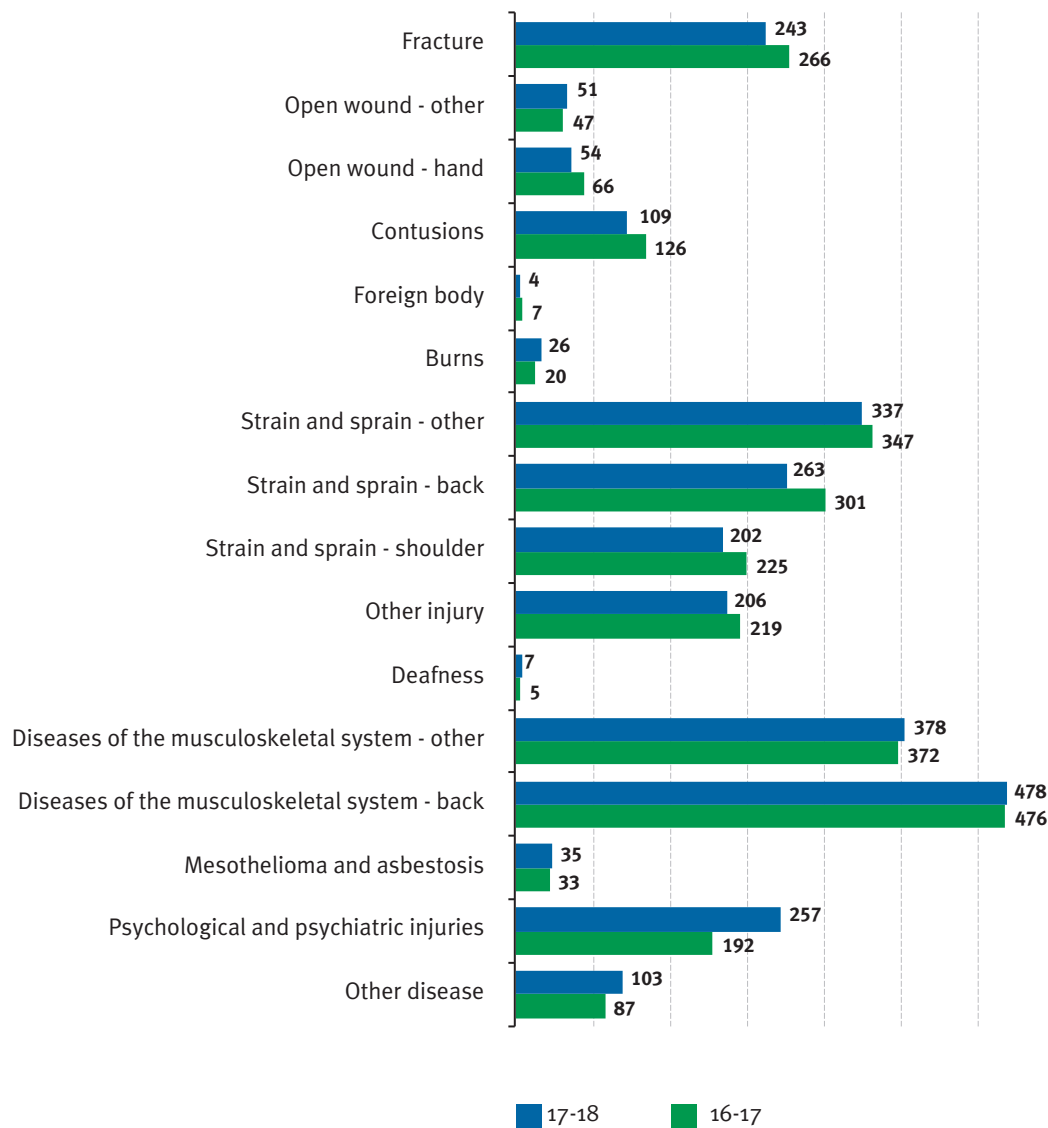
For industry 'Other', this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strains and sprains accounted for 29.1 per cent of all common law claim lodgements in 2017-18.

Although psychological and psychiatric injury claims represented only 4.5 per cent of statutory claim lodgements, they represented 9.3 per cent of all common law claim lodgements in 2017-18.

43 Common law claim lodgements by injury type 2016-17 and 2017-18



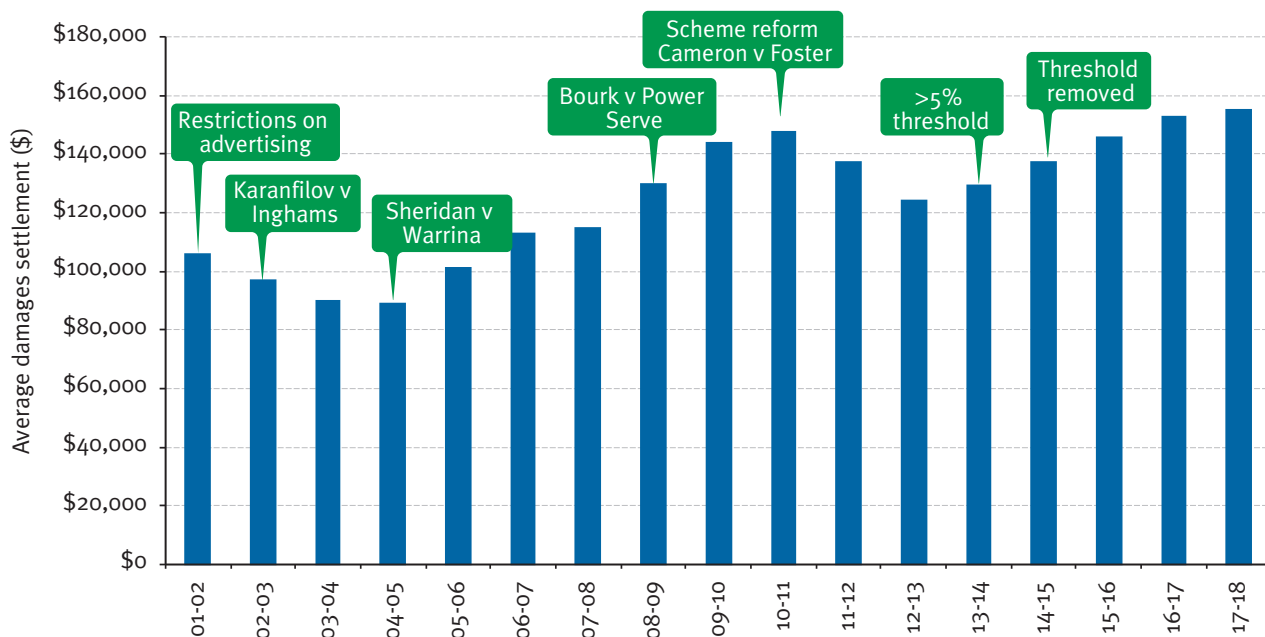
Total common law payments

In 2017-18, common law claims cost a total of \$419.3 million. This represents a 2.0 per cent increase from the 2016-17 cost of \$411.1 million.

Average costs

A history of the average damages settlement for finalised common law claims and key events in the Queensland workers' compensation scheme is shown in figure 44. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

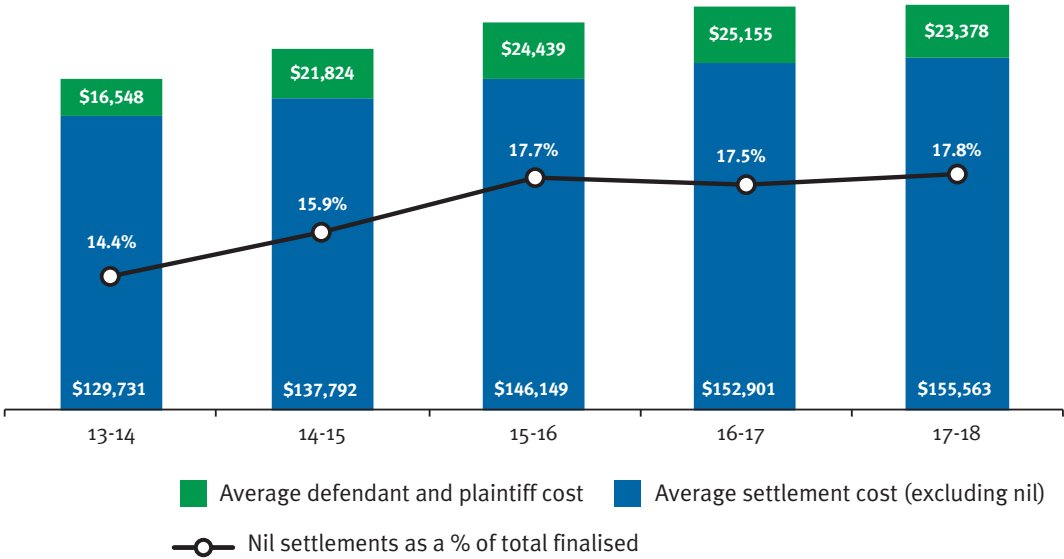
44 Common law average damages settlement history 2001-02 to 2017-18



Over the last year, the average settlement cost of a finalised common law claim (excluding nil settlements) has increased 1.7 per cent from \$152,901 in 2016-17 to \$155,563 in 2017-18. The average defendant and plaintiff cost decreased 7.1 per cent from \$25,155 in 2016-17 to \$23,378 in 2017-18. Figure 45 shows average cost fluctuations between 2013-14 and 2017-18.

In 2017-18, there were 483 common law claims finalised with a nil settlement.

45 Average costs for finalised common law claims by payment type 2013-14 to 2017-18



Heads of damage

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

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

Special damages consists of future economic loss, past economic loss, care, and treatment and rehabilitation. This incorporates loss of past and future earnings, future medical needs and care due to the ongoing disability. The amount of future earnings loss must not exceed the amount equal to the present value of 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 2016-17 and 2017-18

	2016-17		2017-18	
	\$	%	\$	%
General damages	20,764	8.9	20,612	8.6
Past economic loss	56,912	24.3	58,684	24.5
Future economic loss	119,408	50.9	126,576	52.9
Rehabilitation	31,430	13.4	29,483	12.3
Gratuitous care	2,989	1.3	2,035	0.9
Other	3,080	1.3	1,829	0.8
Gross settlement	234,583	100	239,219	100

Average timeframes

For claims lodged in the financial year, the average time from date of injury to lodgement of a common law claim decreased by 0.9 per cent (2.21 years in 2016-17; 2.19 years in 2017-18).

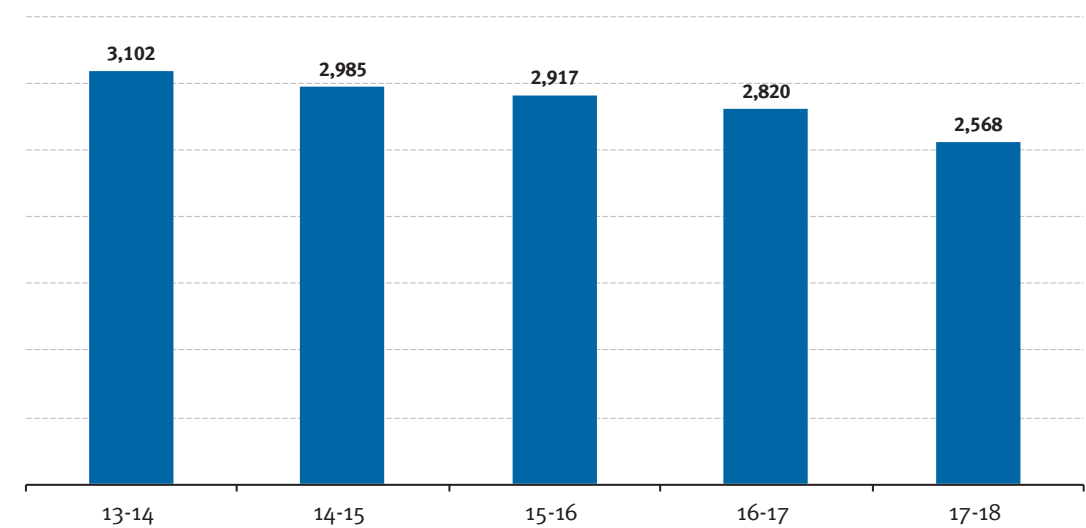
For claims finalised in the financial year, the average time from the lodgement of a common law claim to finalisation decreased 10.2 per cent to 0.97 years in 2017-18 (1.08 years in 2016-17).

Review of insurer decisions

Applications received

A party aggrieved by an insurer decision may apply to the Office of Industrial Relations for review. Review applications received have decreased (8.9 per cent) in 2017-18, down from 2,820 in 2016-17 to 2,568 in 2017-18. Figure 47 shows the number of applications for review received over the last five years.

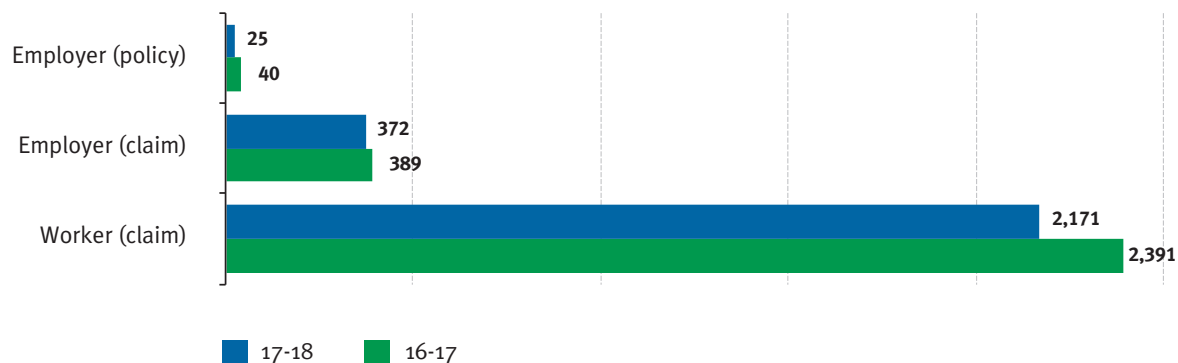
47 Review applications received 2013-14 to 2017-18



Types of applications

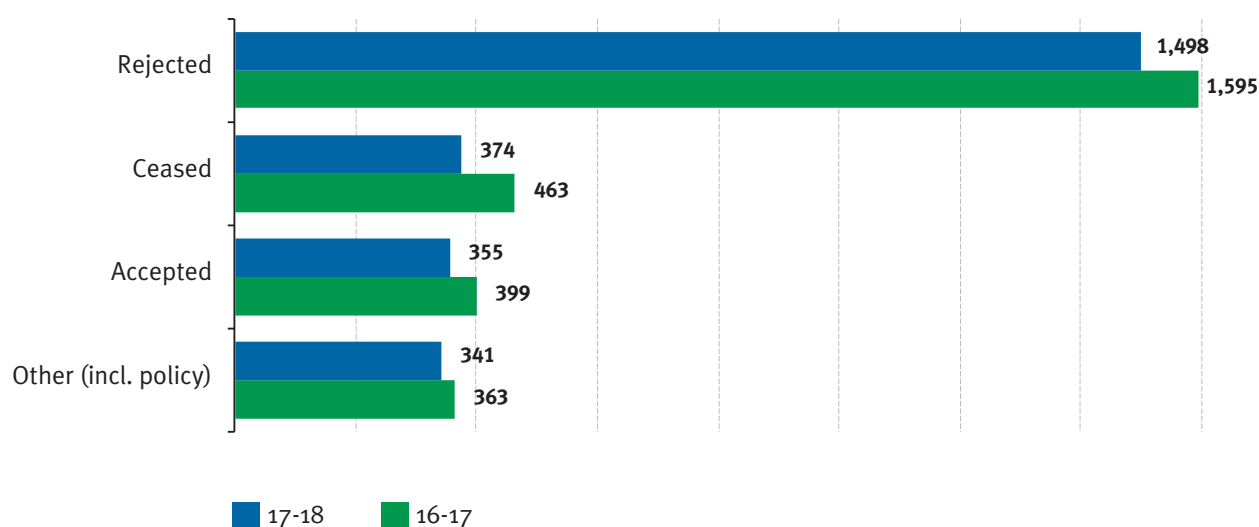
Of the applications lodged in 2017-18, 84.5 per cent were lodged by workers, down from 84.8 per cent in 2016-17. Employers lodged 14.5 per cent of reviews in 2017-18, up from 13.8 per cent in 2016-17. The remaining 1.0 per cent of applications were lodged by employers having a policy decision reviewed.

48 Review applications received by type 2016-17 and 2017-18



Over half (58.3 per cent) of all review applications received in 2017-18 related to the insurer decision to reject the claim, 13.8 per cent were lodged after the claim had been accepted and a further 14.6 per cent were following the cessation of the claim.

49 Review applications received by insurer decision 2016-17 and 2017-18



Outcomes

As shown in figure 50, in 2017-18, 90.5 per cent of reviews finalised were decided (as compared to 90.2 per cent in 2016-17), 6.0 per cent were cancelled (6.6 per cent in 2016-17), and the remaining 3.4 per cent were withdrawn (3.2 per cent in 2016-17)

50 Review outcomes 2016-17 and 2017-18

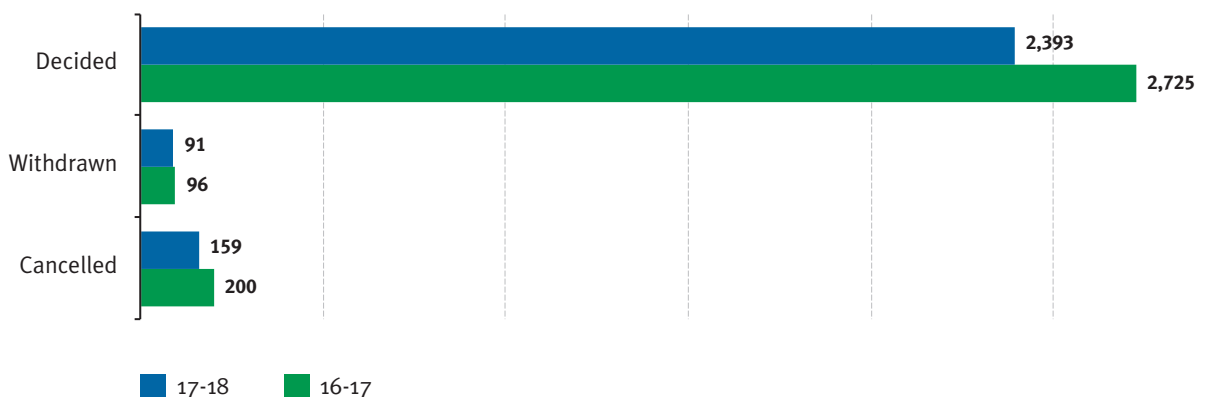
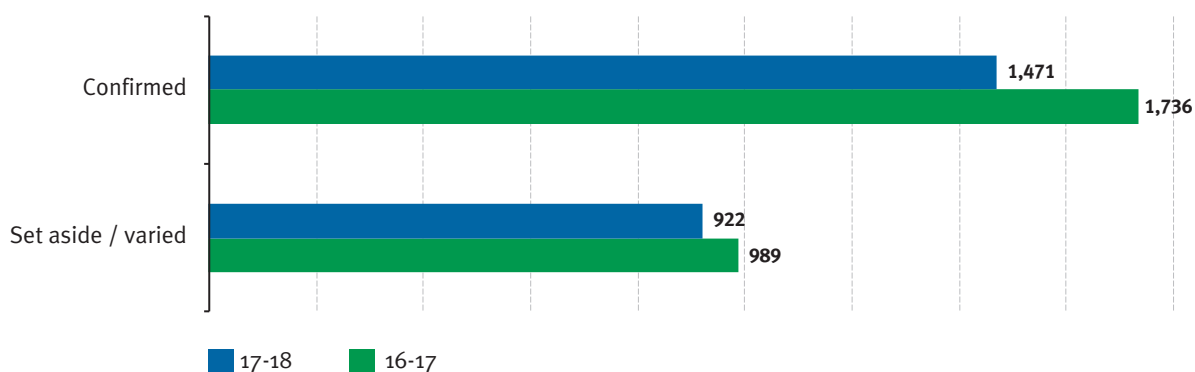


Figure 51 demonstrates in 2017-18, the original decision of the insurer was confirmed by the Review Unit in 61.5 per cent of review decisions made, compared to 63.7 per cent in 2016-17.

51 Decided review outcomes 2016-17 and 2017-18



Appeals of review decisions

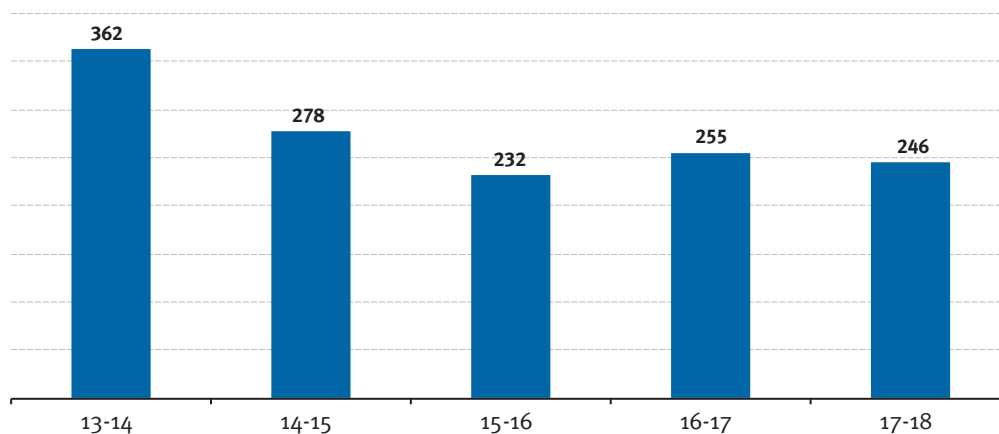
Appeal lodgements

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

In 2017-18, 246 appeals were lodged with the Queensland Industrial Relations Commission. Of these, 11 further appealed in the Industrial Court.

Appeal lodgements have experienced a decrease of 3.5 per cent in 2017-18 compared with 2016-17 (figure 52).

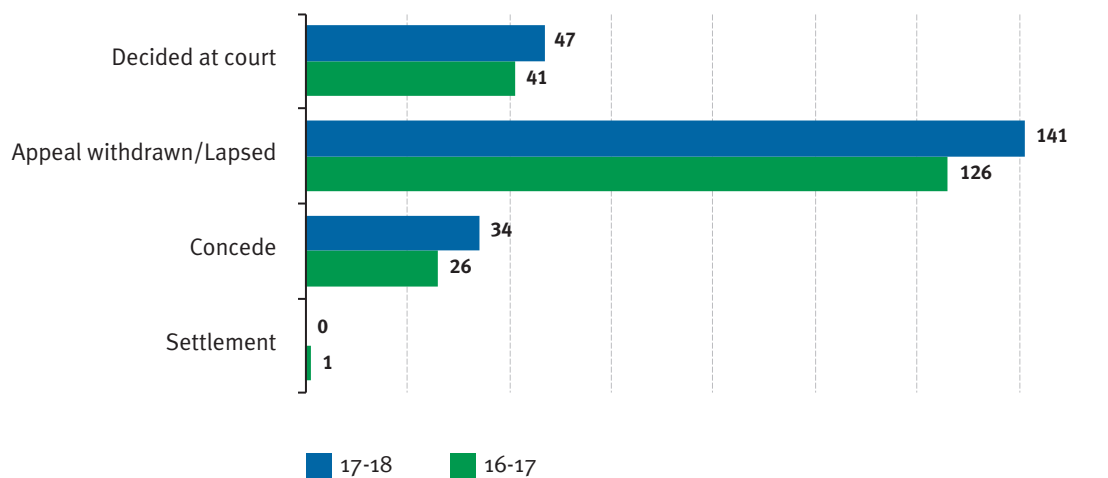
52 Appeals lodged 2013-14 to 2017-18



Appeal outcomes

In 2017-18, 78.8 per cent of appeals were finalised before reaching the QIRC. Of these, 80.6 per cent of cases were withdrawn by the appellant and 19.4 per cent were conceded (figure 53).

53 Appeals finalised by outcome 2016-17 and 2017-18



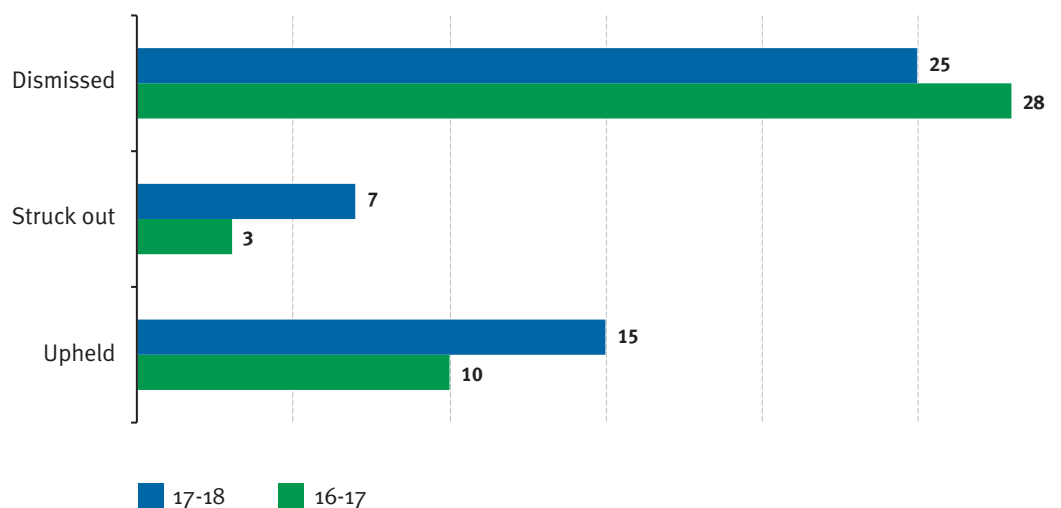
Non-judicial resolution

In 2017-18, 175 appeals were finalised before reaching the court or commission. This is an increase of 14.4 per cent when compared to 153 in 2016-17.

Judicial resolution

The total percentage of cases determined by a court or commission in 2017-18 was 21.2 per cent which is in line with the figure for 2016-17 (21.1 per cent). Of these, 32 cases (68.1 per cent) were dismissed or struck-out and 15 cases (31.9 per cent) were upheld in favour of the appellant (figure 54).

54 Appeals finalised judicially by outcome 2016-17 and 2017-18



Medical assessment tribunals

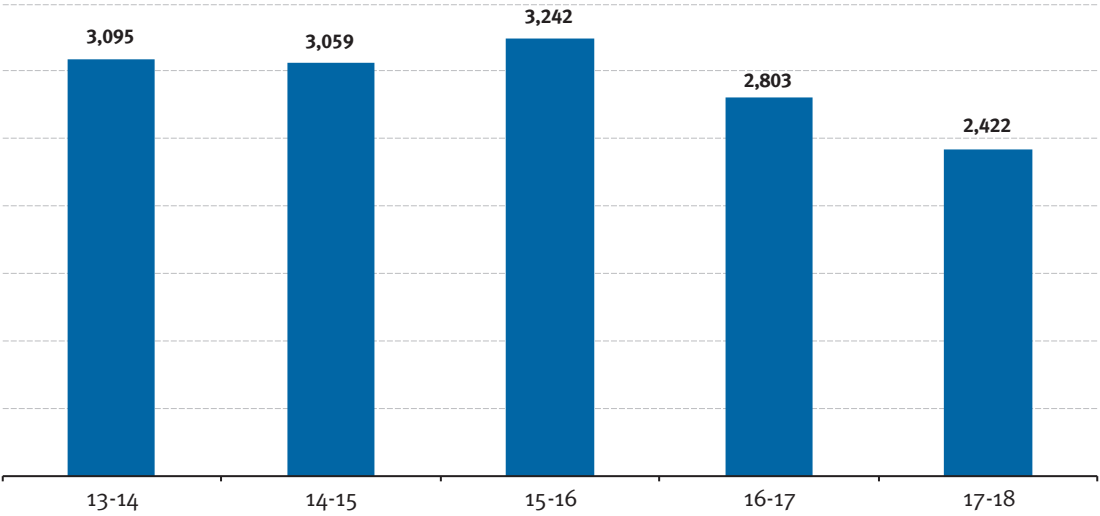
Referrals

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

In 2017-18, 2,422 cases were referred to a Medical assessment tribunal. This is a 13.6 per cent decrease on the 2,803 cases referred in 2016-17.

Figure 55 illustrates the number of Medical assessment tribunal referrals received over the past five years.

55 Medical assessment tribunal referrals received 2013-14 to 2017-18



Cases determined

In 2017-18, 2,008 cases were determined by a Medical assessment tribunal. This represented a 16.9 per cent decrease from 2016-17 (2,416 determinations).

Of the cases heard in 2017-18, 61.8 per cent (1,240) were heard at a General medical assessment tribunal (GMAT) – Psychiatric compared to 59.7 per cent (1,443) in 2016-17.

A further 29.0 per cent (582) of cases in 2017-18 were determined at an Orthopaedic Tribunal as compared to 30.9 per cent (746) in 2016-17 (figure 56).

56 Cases determined by tribunal type 2016-17 and 2017-18

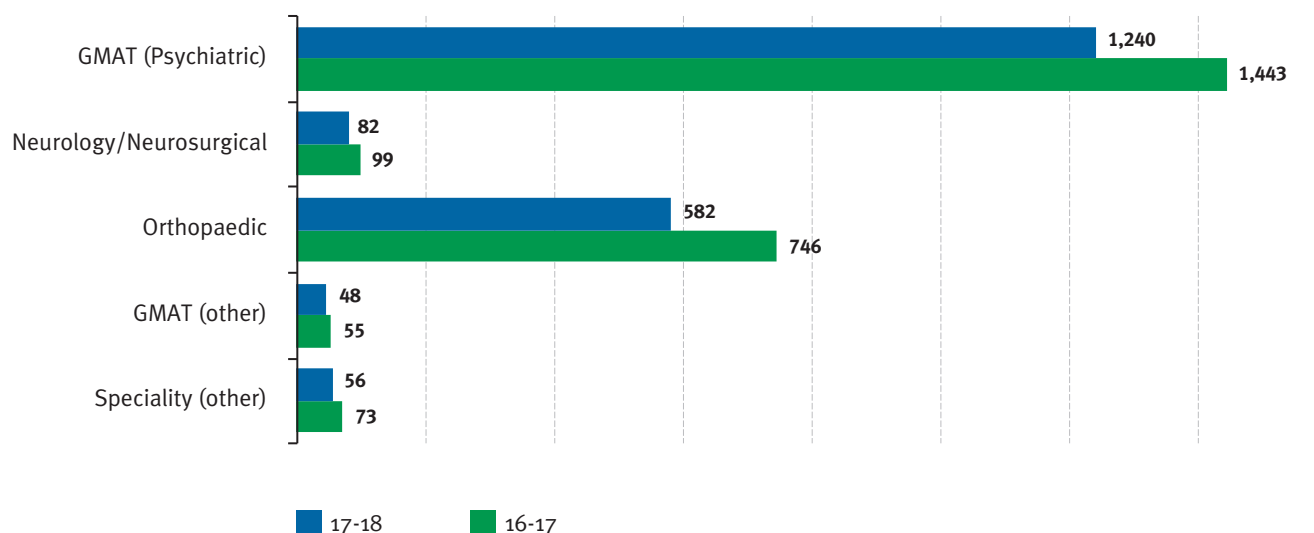


Figure 57 shows the average number of cases heard per tribunal in 2016-17 and 2017-18.

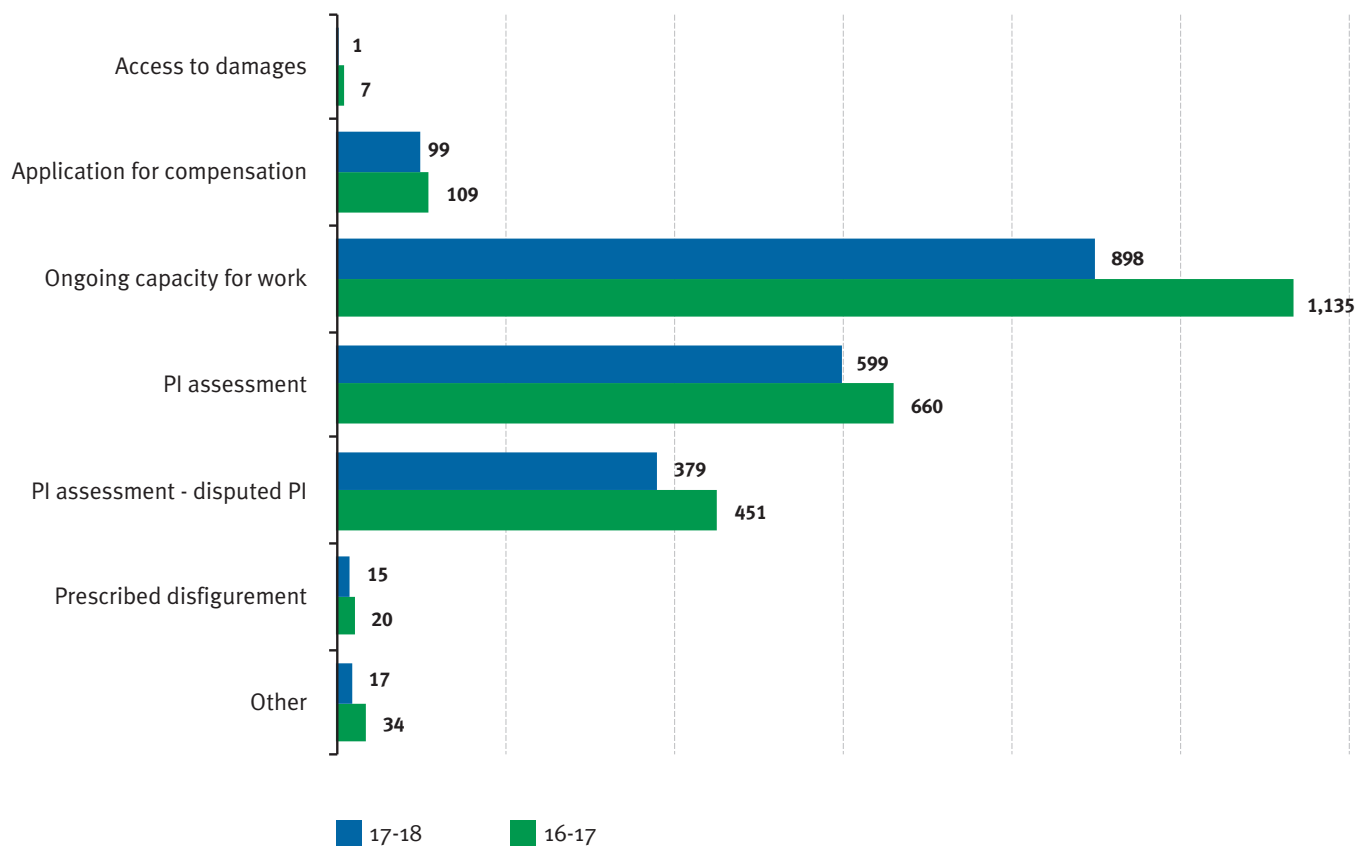
57 Average number of cases heard per tribunal by tribunal type 2016-17 and 2017-18

Tribunal	Average number of cases heard per tribunal	
	16-17	17-18
GMAT (Psychiatric)	1.9	1.9
Neurology/Neurosurgical	1.7	1.9
Orthopaedic	1.7	2.0
GMAT (other)	1.3	1.5
Speciality (other)	1.7	2.2
Total	1.8	1.9

Referral reason

In 2017-18, 48.7 per cent of the cases determined by the Medical assessment tribunal were for PI assessment, compared to 46.0 per cent in 2016-17.

58 Cases determined by referral reason 2016-17 and 2017-18



Appendix 1: Statistics by sub-industry

59 Statutory claim lodgements, statutory claim payments, average finalised time lost claim costs and durations by industry and sub-industry 2016-17 and 2017-18

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Vari- ance	16-17	17-18	Vari- ance	16-17	17-18	Vari- ance	16-17	17-18	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Accommodation and Food Services	6,503	6,055	-6.9	41.3	39.1	-5.2	13,815	12,789	-7.4	47.0	44.2	-6.0
Accommodation	1,624	1,443	-11.1	11.9	9.4	-21.0	13,036	12,684	-2.7	42.6	43.8	2.8
Food and Beverage Services	4,737	4,453	-6.0	28.7	28.8	0.5	13,918	12,926	-7.1	48.4	44.3	-8.5
Labour Hire	142	159	12.0	0.7	0.9	33.7	19,571	10,390	-46.9	57.1	43.9	-23.1
Administrative and Support Services	3,043	3,283	7.9	28.9	32.0	10.9	18,305	17,176	-6.2	61.3	52.5	-14.4
Administrative Services	977	1,128	15.5	9.6	8.2	-13.8	21,683	16,870	-22.2	58.2	45.3	-22.2
Building Cleaning, Pest Control and Other Support Services	2,010	2,083	3.6	18.9	22.6	19.4	17,318	17,416	0.6	62.6	55.5	-11.3
Labour Hire	56	72	28.6	0.4	1.2	197.7	18,422	5,910	-67.9	45.8	12.0	-73.8
Agriculture, Forestry and Fishing	2,945	2,736	-7.1	30.9	29.3	-5.3	15,834	18,796	18.7	41.4	45.4	9.7
Agriculture	2,324	2,188	-5.9	24.1	23.6	-2.0	16,202	18,034	11.3	42.6	43.0	0.9
Agriculture, Forestry and Fishing Support Services	368	313	-14.9	4.5	4.1	-8.7	10,938	21,297	94.7	31.7	52.3	65.0
Aquaculture	36	37	2.8	0.1	0.2	67.3	9,738	13,948	43.2	16.5	37.4	126.7
Fishing, Hunting and Trapping	43	33	-23.3	0.3	0.3	0.0	16,677	20,173	21.0	56.8	58.3	2.6
Forestry and Logging	13	17	30.8	0.5	0.1	-77.8	62,374*	76,738*	23.0	108.8*	133.1*	22.3
Labour Hire	161	148	-8.1	1.3	0.9	-30.7	16,117	19,112	18.6	40.6	53.6	32.0
Arts and Recreation Services	1,522	1,536	0.9	14.1	17.4	23.2	19,631	18,972	-3.4	61.4	57.2	-6.8
Creative and Performing Arts Activities	193	227	17.6	1.8	1.6	-9.8	18,900	20,227	7.0	66.0	62.8	-4.8
Gambling Activities	162	169	4.3	1.1	1.7	58.6	14,848	8,805	-40.7	35.5	27.1	-23.7
Heritage Activities	232	253	9.1	1.6	1.6	-5.7	11,020	12,434	12.8	34.5	38.3	11.0

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Sports and Recreation Activities	926	883	-4.6	9.6	12.5	30.4	22,105	22,563	2.1	69.5	67.1	-3.5
Labour Hire	9	4	-55.6	0.0	0.0	24.2	23,622*	30,429*	28.8	90.0*	107.3*	19.2
Construction	13,000	12,472	-4.1	138.7	157.0	13.2	27,715	25,530	-7.9	64.2	58.7	-8.6
Building Construction	2,094	2,062	-1.5	20.8	27.1	30.4	27,403	27,258	-0.5	62.1	55.7	-10.3
Construction Services	9,042	8,296	-8.3	89.6	102.8	14.7	23,324	22,846	-2.0	57.9	56.1	-3.1
Heavy and Civil Engineering Construction	1,130	1,251	10.7	19.9	17.2	-13.6	57,130	42,585	-25.5	110.7	84.0	-24.1
Labour Hire	734	863	17.6	8.4	9.9	17.7	27,978	24,240	-13.4	61.4	57.6	-6.2
Education and Training	7,002	7,116	1.6	48.0	48.9	1.8	14,771	13,429	-9.1	36.0	32.3	-10.3
Adult, Community and Other Education	200	242	21.0	1.4	2.0	43.2	10,532	15,569	47.8	31.5	39.3	24.8
Preschool and School Education	4,882	5,180	6.1	36.4	38.4	5.6	14,574	13,864	-4.9	35.2	32.6	-7.4
Tertiary Education	1,913	1,686	-11.9	10.2	8.4	-17.9	15,904	11,594	-27.1	38.4	30.4	-20.8
Labour Hire	7	8	14.3	0.0	0.1	455.5	73,130*	0	-100.0	349.0*	0.0	-100.0
Electricity, Gas, Water and Waste Services	1,239	1,189	-4.0	12.3	12.9	4.6	26,732	27,146	1.5	60.1	61.4	2.2
Electricity Supply	469	474	1.1	3.9	4.4	13.8	40,529	29,150	-28.1	70.1	54.6	-22.1
Gas Supply	34	21	-38.2	0.8	0.2	-72.5	8,194	65,427*	698.5	17.1	79.2*	363.2
Waste Collection, Treatment and Disposal Services	474	457	-3.6	5.3	4.9	-7.3	21,074	26,798	27.2	56.4	70.3	24.6
Water Supply, Sewerage and Drainage Services	193	160	-17.1	1.7	2.2	31.7	23,717	18,112	-23.6	71.0	56.1	-21.0
Labour Hire	69	77	11.6	0.7	1.1	66.9	15,834	17,891	13.0	29.1	39.3	35.1
Financial and Insurance Services	902	763	-15.4	7.6	6.8	-9.9	19,368	28,694	48.2	51.2	63.7	24.4
Auxiliary Finance and Insurance Services	166	152	-8.4	1.6	1.1	-28.8	23,046	30,695	33.2	62.7	70.5	12.4
Finance	248	272	9.7	3.3	3.1	-7.2	23,216	37,547	61.7	58.5	72.1	23.2

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Insurance and Superannuation Funds	475	329	-30.7	2.7	2.6	-1.6	14,638	22,088	50.9	39.8	56.5	42.0
Labour Hire	13	10	-23.1	0.0	0.0	-62.5	6,069*	3,660*	-39.7	25.3*	17.2*	-32.0
Health Care and Social Assistance	13,535	13,428	-0.8	98.1	104.8	6.8	14,223	13,708	-3.6	47.8	45.6	-4.6
Hospitals	5,527	5,439	-1.6	39.2	45.4	15.6	16,112	15,005	-6.9	48.3	45.1	-6.6
Medical and Other Health Care Services	1,646	1,666	1.2	11.7	10.6	-9.2	16,003	15,226	-4.9	44.9	42.4	-5.6
Residential Care Services	3,403	3,275	-3.8	23.8	24.8	4.3	11,581	11,908	2.8	49.5	48.0	-3.0
Social Assistance Services	2,848	2,951	3.6	21.7	23.1	6.2	12,825	12,968	1.1	44.6	43.6	-2.2
Labour Hire	111	97	-12.6	1.7	0.9	-44.2	29,264	24,928	-14.8	87.0	88.7	2.0
Information Media and Telecommunications	505	488	-3.4	3.0	4.1	34.7	22,278	17,417	-21.8	63.6	43.4	-31.8
Broadcasting (except Internet)	80	68	-15.0	0.3	0.6	95.6	14,726	18,539	25.9	39.2	57.4	46.4
Internet Publishing and Broadcasting	0	0	0.0	0.0	0.0	0.0	0	0	0.0	0	0	0.0
Internet Service Providers, Web Search Portals and Data Processing Services	8	12	50.0	0.0	0.0	13.9	23,857*	1,342*	-94.4	37.4*	4.3*	-88.5
Library and Other Information Services	15	11	-26.7	0.0	0.0	28.5	19,763*	4,549*	-77.0	88.7*	6.8*	-92.3
Motion Picture and Sound Recording Activities	279	154	-44.8	1.5	2.1	43.8	21,820	14,904	-31.7	55.9	35.4	-36.7
Publishing (except Internet and Music Publishing)	83	63	-24.1	0.8	0.7	-12.0	34,524	24,464	-29.1	101.2	45.8	-54.7
Telecommunications Services	25	160	540.0	0.4	0.5	22.2	8,369*	30,772	267.7	56.1*	114.2	103.6
Labour Hire	15	20	33.3	0.0	0.2	376.5	14,164*	7,049*	-50.2	51.7*	12.3*	-76.2

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Manufacturing	14,157	14,681	3.7	105.1	113.2	7.8	16,985	17,495	3.0	41.8	42.1	0.7
Basic Chemical and Chemical Product Manufacturing	353	322	-8.8	2.5	2.6	2.5	18,364	21,986	19.7	49.1	47.4	-3.5
Beverage and Tobacco Product Manufacturing	170	145	-14.7	1.4	1.2	-15.0	19,964	19,210	-3.8	39.0	36.0	-7.7
Fabricated Metal Product Manufacturing	3,174	3,280	3.3	18.4	20.9	13.4	14,627	15,513	6.1	35.1	38.0	8.3
Food Product Manufacturing	3,076	3,275	6.5	24.3	26.6	9.2	15,033	14,477	-3.7	37.6	37.4	-0.5
Furniture and Other Manufacturing	501	485	-3.2	4.4	5.1	15.2	19,005	27,387	44.1	55.4	61.7	11.4
Machinery and Equipment Manufacturing	1,140	1,208	6.0	10.3	10.5	1.6	20,905	20,186	-3.4	47.6	48.4	1.7
Non-Metallic Mineral Product Manufacturing	802	883	10.1	7.4	8.5	15.5	17,007	19,358	13.8	47.4	53.8	13.5
Petroleum and Coal Product Manufacturing	56	46	-17.9	1.0	0.5	-47.6	59,354	98,690	66.3	99.9	160.4	60.6
Polymer Product and Rubber Product Manufacturing	541	512	-5.4	5.0	4.7	-5.1	19,275	16,816	-12.8	47.7	48.3	1.3
Primary Metal and Metal Product Manufacturing	581	510	-12.2	5.2	3.8	-26.7	25,096	29,754	18.6	54.8	45.4	-17.2
Printing (including the Reproduction of Recorded Media)	163	175	7.4	1.0	1.3	30.8	17,471	16,200	-7.3	41.6	43.9	5.5
Pulp, Paper and Converted Paper Product Manufacturing	160	132	-17.5	1.2	1.4	8.2	15,106	32,720	116.6	37.6	68.0	80.9
Textile, Leather, Clothing and Footwear Manufacturing	317	257	-18.9	1.6	0.9	-39.4	19,562	13,432	-31.3	50.5	44.1	-12.7
Transport Equipment Manufacturing	1,142	1,244	8.9	7.0	8.3	18.5	18,963	16,369	-13.7	44.0	36.7	-16.6
Wood Product Manufacturing	1,138	1,116	-1.9	7.3	8.7	18.7	15,867	18,614	17.3	41.0	43.0	4.9
Labour Hire	843	1,091	29.4	7.0	8.2	18.4	16,184	15,649	-3.3	41.1	39.3	-4.4

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Mining	2,387	2,035	-14.7	45.6	51.5	13.0	53,113	50,178	-5.5	97.5	91.1	-6.6
Coal Mining	1,174	834	-29.0	21.8	27.6	26.6	61,513	66,046	7.4	95.2	100.4	5.5
Exploration and Other Mining Support Services	273	324	18.7	6.5	5.8	-10.5	50,797	45,255	-10.9	128.3	119.8	-6.6
Metal Ore Mining	369	362	-1.9	7.8	7.7	-1.3	53,439	48,336	-9.5	91.8	76.7	-16.4
Non-Metallic Mineral Mining and Quarrying	254	197	-22.4	2.3	3.4	49.6	28,974	25,190	-13.1	72.2	48.8	-32.4
Oil and Gas Extraction	45	34	-24.4	0.8	0.4	-50.1	78,039	52,533	-32.7	125.4	129.2	3.0
Labour Hire	272	284	4.4	6.3	6.5	2.6	48,497	36,358	-25.0	88.0	79.6	-9.5
Other Services	2,968	3,081	3.8	22.6	30.7	35.4	17,610	21,805	23.8	53.6	55.1	2.8
Personal and Other Services	1,022	1,055	3.2	7.1	9.5	33.1	16,134	15,308	-5.1	56.0	46.1	-17.7
Repair and Maintenance	1,710	1,723	0.8	14.6	19.8	35.5	19,297	27,796	44.0	53.2	63.9	20.1
Labour Hire	236	303	28.4	0.9	1.4	52.5	12,152	10,015	-17.6	41.0	35.6	-13.2
Professional, Scientific and Technical Services	1,795	1,739	-3.1	15.8	13.6	-13.6	23,182	21,313	-8.1	52.7	49.4	-6.3
Computer System Design and Related Services	177	146	-17.5	1.9	1.1	-39.7	17,350	24,054	38.6	34.9	36.3	4.0
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	1,607	1,578	-1.8	13.7	12.4	-9.6	24,266	20,725	-14.6	55.8	50.4	-9.7
Labour Hire	11	15	36.4	0.2	0.1	-46.9	5,406*	91,025*	1,583.8	8.9*	263.5*	2,860.7
Public Administration and Safety	7,264	7,430	2.3	72.2	78.0	8.0	19,081	21,238	11.3	49.8	53.7	7.8
Defence	14	14	0.0	0.1	0.2	103.0	65,221*	59,770*	-8.4	215.7*	143.9*	-33.3
Public Administration	3,376	3,236	-4.1	32.2	34.1	5.9	16,622	17,110	2.9	43.6	43.8	0.5
Public Order, Safety and Regulatory Services	3,698	3,979	7.6	38.1	41.7	9.3	22,392	24,993	11.6	57.4	62.6	9.1
Labour Hire	176	201	14.2	1.8	2.0	11.3	13,112	21,345	62.8	41.8	56.6	35.4

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Rental, Hiring and Real Estate Services	1,146	1,140	-0.5	9.5	11.0	14.9	20,588	22,217	7.9	61.9	61.7	-0.3
Property Operators and Real Estate Services	537	589	9.7	4.8	5.6	17.9	20,856	19,656	-5.8	64.5	56.9	-11.8
Rental and Hiring Services (except Real Estate)	597	541	-9.4	4.7	5.2	11.0	20,435	24,845	21.6	59.4	65.8	10.8
Labour Hire	12	10	-16.7	0.1	0.1	68.9	5,523*	27,040*	389.6	31.0*	98.5*	217.7
Retail Trade	7,776	7,482	-3.8	54.7	57.8	5.7	13,647	14,051	3.0	43.9	43.9	0.0
Food Retailing	2,890	2,765	-4.3	23.0	22.6	-1.6	13,543	14,998	10.7	42.6	46.4	8.9
Fuel Retailing	199	232	16.6	1.8	1.8	-0.9	15,788	14,749	-6.6	60.3	52.3	-13.3
Motor Vehicle and Motor Vehicle Parts Retailing	1,396	1,398	0.1	8.6	8.7	1.1	13,731	13,617	-0.8	42.9	39.8	-7.2
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	55	63	14.5	0.5	0.8	79.0	13,557	14,235	5.0	34.1	44.7	31.1
Other Store-Based Retailing	3,124	2,932	-6.1	20.2	23.0	13.9	13,624	13,360	-1.9	44.3	43.0	-2.9
Labour Hire	112	92	-17.9	0.7	1.0	40.8	12,163	12,994	6.8	45.1	40.3	-10.6
Transport, Postal and Warehousing	5,991	5,668	-5.4	81.9	80.3	-1.9	23,163	24,711	6.7	59.7	59.8	0.2
Air and Space Transport	332	333	0.3	3.8	3.3	-13.3	18,400	17,120	-7.0	33.6	35.5	5.7
Other Transport	235	244	3.8	1.8	2.2	20.0	15,558	16,451	5.7	45.2	40.3	-10.8
Postal and Courier Pick-up and Delivery Services	206	221	7.3	2.7	2.1	-21.8	19,201	18,301	-4.7	64.7	60.5	-6.5
Rail Transport	566	567	0.2	9.2	9.0	-1.8	22,591	27,923	23.6	37.7	39.6	5.0
Road Transport	2,970	2,823	-4.9	51.2	49.5	-3.2	26,089	28,614	9.7	70.0	71.1	1.6
Transport Support Services	640	594	-7.2	5.4	5.7	4.2	18,589	18,906	1.7	43.9	46.1	5.0
Warehousing and Storage Services	554	424	-23.5	3.1	3.8	21.0	22,909	18,464	-19.4	60.3	47.3	-21.6
Water Transport	100	108	8.0	1.2	1.4	14.8	35,244	30,159	-14.4	78.6	68.6	-12.7
Labour Hire	388	354	-8.8	3.4	3.3	-2.9	13,290	15,579	17.2	39.2	46.5	18.6
Wholesale Trade	4,273	4,304	0.7	35.0	39.5	13.0	17,757	18,280	2.9	47.3	48.7	3.0

	Claim lodgement			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance	16-17	17-18	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Basic Material Wholesaling	1,190	1,260	5.9	8.4	11.6	38.4	16,441	16,793	2.1	43.4	42.3	-2.5
Commission-Based Wholesaling	79	109	38.0	1.1	1.1	1.9	15,412	21,575	40.0	37.2	52.7	41.7
Grocery, Liquor and Tobacco Product Wholesaling	765	722	-5.6	6.9	8.5	23.5	17,444	17,140	-1.7	53.0	54.9	3.6
Machinery and Equipment Wholesaling	1,148	1,177	2.5	10.0	9.5	-4.9	20,688	20,717	0.1	43.7	49.5	13.3
Motor Vehicle and Motor Vehicle Parts Wholesaling	400	384	-4.0	2.8	3.0	7.8	14,438	14,690	1.7	40.6	41.0	1.0
Other Goods Wholesaling	566	574	1.4	5.0	5.1	1.7	20,647	21,507	4.2	61.3	54.8	-10.6
Labour Hire	125	78	-37.6	0.8	0.7	-17.7	13,988	13,607	-2.7	41.6	47.0	13.0
Other	628	341	-45.7	52.9	15.5	-70.8	44,074	27,311	-38.0	254.0	70.6	-72.2
Total	98,581	96,967	-1.6	918.2	943.5	2.8	18,744	18,771	0.1	50.8	49.2	-3.1

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

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

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

60 Statutory claim decisions and statutory claim finalisations by industry and sub-industry 2017-18

	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	92.6	7.4	4,952	2,902	86.6	2.4	1.0	3.7	1.4	3.1	1.7	0.1
Accommodation	93.0	7.0	1,234	736	87.9	1.6	0.4	4.4	0.8	3.0	1.5	0.4
Food and Beverage Services	92.5	7.5	3,589	2,079	86.2	2.6	1.2	3.3	1.6	3.2	1.9	0.0
Labour Hire	92.3	7.7	129	87	86.2	4.6	1.2	4.6	1.1	2.3	0.0	0.0
Administrative and Support Services	89.7	10.3	2,618	1,630	87.6	1.2	0.6	3.9	1.9	3.1	1.7	0.0
Administrative Services	85.9	14.1	817	422	83.6	1.7	1.2	5.9	2.4	3.3	1.9	0.0
Building Cleaning, Pest Control and Other Support Services	91.5	8.5	1,748	1,194	89.2	1.1	0.3	3.0	1.7	3.0	1.7	0.0
Labour Hire	86.8	13.2	53	14	71.5	0.0	0.0	14.3	7.1	7.1	0.0	0.0
Agriculture, Forestry and Fishing	94.8	5.2	2,161	1,380	81.3	1.9	1.1	5.6	1.7	6.1	2.2	0.1
Agriculture	95.9	4.1	1,718	1,092	83.3	1.6	0.9	5.1	1.4	5.6	1.9	0.2
Agriculture, Forestry and Fishing Support Services	92.2	7.8	245	163	73.6	3.1	0.6	9.2	2.5	9.2	1.8	0.0
Aquaculture	88.2	11.8	34	18	77.8	0.0	0.0	5.6	5.6	5.5	5.5	0.0
Fishing, Hunting and Trapping	65.0	35.0	20	15	80.0	6.7	0.0	0.0	0.0	0.0	13.3	0.0
Forestry and Logging	78.6	21.4	14	8	62.5	0.0	12.5	12.5	0.0	12.5	0.0	0.0
Labour Hire	93.1	6.9	130	84	73.8	2.4	3.6	6.0	3.6	7.1	3.5	0.0
Arts and Recreation Services	93.5	6.5	1,308	734	89.4	1.1	1.0	4.2	2.2	1.6	0.4	0.1
Creative and Performing Arts Activities	96.4	3.6	196	92	88.0	2.2	1.1	4.3	4.4	0.0	0.0	0.0
Gambling Activities	88.0	12.0	159	93	90.3	0.0	5.3	1.1	1.1	2.2	0.0	0.0
Heritage Activities	96.3	3.7	216	115	93.9	0.0	0.9	2.6	1.7	0.9	0.0	0.0

	Claim decisions			Time lost claim finalisation								
	Admit	Rejected	Total claims decided	Total time lost claims finalised	Fit for work: same job / tasks with same employer	Fit for work: same job / tasks with diff employer	Fit for work: diff job / tasks with same employer	Fit for work: diff job / tasks with diff employer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alternative outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Sports and Recreation Activities	93.0	7.0	733	431	88.6	1.4	0.0	5.1	1.9	2.1	0.7	0.2
Labour Hire	100.0	0.0	4	3	33.4	0.0	0.0	33.3	33.3	0.0	0.0	0.0
Construction	93.5	6.5	9,609	5,033	79.9	3.0	0.6	6.5	4.3	3.0	2.5	0.2
Building Construction	94.0	6.0	1,623	858	82.5	4.0	0.8	5.0	3.5	2.2	1.9	0.1
Construction Services	93.4	6.6	6,286	3,371	80.9	2.6	0.4	6.4	4.2	3.0	2.4	0.1
Heavy and Civil Engineering Construction	93.6	6.4	1,012	469	73.1	4.5	0.0	7.7	7.1	3.6	3.6	0.4
Labour Hire	93.0	7.0	688	335	73.4	3.5	1.8	9.3	3.9	4.5	3.3	0.3
Education and Training	91.6	8.4	6,149	3,488	95.3	0.4	0.9	1.1	0.5	1.1	0.6	0.1
Adult, Community and Other Education	86.1	13.9	195	88	87.5	2.3	1.1	5.7	1.2	1.1	1.1	0.0
Tertiary Education	88.1	11.9	1,317	734	93.5	0.8	0.8	1.2	1.2	1.9	0.3	0.3
Preschool and School Education	92.9	7.1	4,632	2,666	96.1	0.2	0.9	0.9	0.3	0.8	0.7	0.1
Labour Hire	80.0	20.0	5	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Electricity, Gas, Water and Waste Services	94.2	5.8	1,012	476	89.3	1.1	1.1	2.7	1.4	1.9	2.5	0.0
Electricity Supply	94.5	5.5	404	151	97.4	0.6	0.6	0.0	0.0	0.7	0.7	0.0
Gas Supply	100.0	0.0	19	18	83.3	0.0	5.6	0.0	0.0	0.0	11.1	0.0
Waste Collection, Treatment and Disposal Services	93.3	6.7	385	206	84.5	1.9	1.0	3.4	2.4	2.4	4.4	0.0
Water Supply, Sewerage and Drainage Services	93.5	6.5	139	66	87.9	0.0	1.5	4.5	1.6	4.5	0.0	0.0
Labour Hire	96.9	3.1	65	35	88.5	0.0	0.0	8.6	2.9	0.0	0.0	0.0
Financial and Insurance Services	77.8	22.2	563	278	84.9	0.7	0.7	2.9	2.5	4.3	4.0	0.0

	Claim decisions			Time lost claim finalisation								
	Admit	Rejected	Total claims decided	Total time lost claims finalised	Fit for work: same job / tasks with same employer	Fit for work: same job / tasks with diff employer	Fit for work: diff job / tasks with same employer	Fit for work: diff job / tasks with diff employer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alternative outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Auxiliary Finance and Insurance Services	73.8	26.2	107	52	84.6	0.0	0.0	2.0	1.9	3.8	7.7	0.0
Finance	79.8	20.2	213	97	84.5	2.0	1.0	0.0	2.1	5.2	5.2	0.0
Insurance and Superannuation Funds	77.8	22.2	234	123	84.6	0.0	0.8	5.7	3.3	4.0	1.6	0.0
Labour Hire	77.8	22.2	9	6	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Health Care and Social Assistance	90.3	9.7	10,917	7,015	92.2	0.5	1.2	1.1	0.5	2.0	2.3	0.2
Hospitals	91.3	8.7	4,246	2,591	94.2	0.3	1.4	0.5	0.2	0.8	2.4	0.2
Medical and Other Health Care Services	88.2	11.8	1,283	648	92.0	0.3	0.6	2.2	0.6	2.2	2.1	0.0
Residential Care Services	88.9	11.1	2,809	2,008	91.6	0.3	1.5	0.9	0.7	2.4	2.4	0.2
Social Assistance Services	91.1	8.9	2,504	1,720	90.1	0.9	1.1	1.9	0.8	3.1	1.9	0.2
Labour Hire	92.0	8.0	75	48	83.3	2.1	0.0	2.0	2.1	6.3	4.2	0.0
Information Media and Telecommunications	84.8	15.2	349	178	81.5	3.9	0.0	2.8	5.0	3.4	2.8	0.6
Broadcasting (except Internet)	88.7	11.3	53	21	81.0	0.0	0.0	0.0	4.8	4.8	4.7	4.7
Internet Publishing and Broadcasting	0.0	0.0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Internet Service Providers, Web Search Portals and Data Processing Services	90.9	9.1	11	4	75.0	0.0	0.0	0.0	0.0	25.0	0.0	0.0
Library and Other Information Services	80.0	20.0	10	4	75.0	25.0	0.0	0.0	0.0	0.0	0.0	0.0
Motion Picture and Sound Recording Activities	96.5	3.5	141	96	82.3	3.1	0.0	4.1	6.3	2.1	2.1	0.0
Publishing (except Internet and Music Publishing)	89.1	10.9	55	33	78.8	6.0	0.0	3.0	0.0	6.1	6.1	0.0

	Claim decisions			Time lost claim finalisation								
	Admit	Rejected	Total claims decided	Total time lost claims finalised	Fit for work: same job / tasks with same employer	Fit for work: same job / tasks with diff employer	Fit for work: diff job / tasks with same employer	Fit for work: diff job / tasks with diff employer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alternative outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Telecommunications Services	48.4	51.6	62	13	92.3	0.0	0.0	0.0	7.7	0.0	0.0	0.0
Labour Hire	94.1	5.9	17	7	71.4	14.3	0.0	0.0	14.3	0.0	0.0	0.0
Manufacturing	95.2	4.8	12,577	5,782	87.5	0.9	0.9	3.0	2.5	3.1	1.9	0.2
Basic Chemical and Chemical Product Manufacturing	92.7	7.3	273	120	82.5	0.0	0.0	5.8	1.7	8.3	1.7	0.0
Beverage and Tobacco Product Manufacturing	94.3	5.7	122	58	82.8	1.7	0.0	1.7	6.9	6.9	0.0	0.0
Fabricated Metal Product Manufacturing	96.2	3.8	2,813	1,280	88.0	1.1	0.7	4.2	2.1	2.0	1.8	0.1
Food Product Manufacturing	94.0	6.0	2,787	1,331	88.3	0.5	1.6	1.7	2.1	4.1	1.3	0.4
Furniture and Other Manufacturing	94.7	5.3	411	212	83.5	0.9	0.5	5.2	3.3	1.9	4.2	0.5
Machinery and Equipment Manufacturing	96.4	3.6	1,057	442	86.4	1.4	0.6	2.7	3.2	3.4	2.3	0.0
Non-Metallic Mineral Product Manufacturing	94.0	6.0	767	322	90.7	0.6	0.3	0.9	3.7	1.3	2.5	0.0
Petroleum and Coal Product Manufacturing	86.4	13.6	44	10	50.0	0.0	0.0	20.0	10.0	10.0	10.0	0.0
Polymer Product and Rubber Product Manufacturing	95.5	4.5	443	212	89.6	0.5	1.4	0.0	2.8	3.8	1.4	0.5
Primary Metal and Metal Product Manufacturing	95.8	4.2	452	165	86.8	1.2	1.8	1.8	3.6	2.4	2.4	0.0
Printing (including the Reproduction of Recorded Media)	95.1	4.9	144	72	93.1	0.0	0.0	1.4	0.0	5.5	0.0	0.0
Pulp, Paper and Converted Paper Product Manufacturing	94.6	5.4	111	40	77.5	0.0	7.5	2.5	2.5	10.0	0.0	0.0

	Claim decisions			Time lost claim finalisation								
	Admit	Rejected	Total claims decided	Total time lost claims finalised	Fit for work: same job / tasks with same employer	Fit for work: same job / tasks with diff employer	Fit for work: diff job / tasks with same employer	Fit for work: diff job / tasks with diff employer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alternative outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Textile, Leather, Clothing and Footwear Manufacturing	81.8	18.2	154	62	85.5	0.0	3.3	1.6	1.6	4.8	3.2	0.0
Transport Equipment Manufacturing	96.7	3.3	1,077	462	87.9	1.7	0.6	3.3	2.6	1.7	2.2	0.0
Wood Product Manufacturing	96.5	3.5	947	483	92.3	0.2	0.0	2.9	0.8	1.5	2.3	0.0
Labour Hire	95.5	4.5	975	511	82.6	2.2	0.8	4.7	3.9	4.3	1.3	0.2
Mining	89.0	11.0	1,675	800	79.4	1.7	2.4	4.1	3.3	4.0	4.3	0.8
Coal Mining	88.1	11.9	663	300	80.0	0.3	2.3	3.0	3.0	4.0	5.7	1.7
Exploration and Other Mining Support Services	89.9	10.1	248	128	78.9	4.7	1.6	4.7	2.3	3.1	4.7	0.0
Metal Ore Mining	87.1	12.9	325	141	79.4	2.1	5.0	4.3	3.6	2.8	2.1	0.7
Non-Metallic Mineral Mining and Quarrying	92.0	8.0	162	81	88.9	2.5	0.0	1.2	1.2	1.2	5.0	0.0
Oil and Gas Extraction	85.2	14.8	27	14	78.7	0.0	7.1	7.1	0.0	7.1	0.0	0.0
Labour Hire	91.6	8.4	250	136	72.8	1.5	1.4	7.4	5.9	7.4	3.6	0.0
Other Services	89.2	10.8	2,433	1,181	84.0	2.4	0.8	4.1	3.3	3.2	2.2	0.0
Personal and Other Services	86.1	13.9	868	437	84.0	2.7	0.7	3.4	3.7	4.1	1.4	0.0
Repair and Maintenance	90.9	9.1	1,357	653	84.4	2.3	0.6	4.3	3.1	2.4	2.9	0.0
Labour Hire	90.9	9.1	208	91	81.3	2.2	2.2	5.5	3.3	4.4	1.1	0.0
Professional, Scientific and Technical Services	85.8	14.2	1,409	674	87.8	2.2	0.3	2.8	1.0	3.0	2.7	0.2
Computer System Design and Related Services	83.8	16.2	117	77	92.2	2.6	0.0	1.3	0.0	1.3	2.6	0.0
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	85.9	14.1	1,280	595	87.4	2.2	0.3	3.0	1.2	3.2	2.5	0.2

	Claim decisions			Time lost claim finalisation								
	Admit	Rejected	Total claims decided	Total time lost claims finalised	Fit for work: same job / tasks with same employer	Fit for work: same job / tasks with diff employer	Fit for work: diff job / tasks with same employer	Fit for work: diff job / tasks with diff employer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alternative outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Labour Hire	91.7	8.3	12	2	50.0	0.0	0.0	0.0	0.0	0.0	50.0	0.0
Public Administration and Safety	91.5	8.5	5,959	3,396	92.8	0.6	0.6	1.3	0.4	1.9	2.3	0.1
Defence	75.0	25.0	12	9	88.9	0.0	0.0	0.0	0.0	11.1	0.0	0.0
Public Administration	91.2	8.8	2,987	1,613	94.7	0.2	0.7	0.8	0.4	1.4	1.7	0.1
Public Order, Safety and Regulatory Services	91.5	8.5	2,779	1,677	91.4	0.8	0.5	1.6	0.5	2.1	2.9	0.2
Labour Hire	97.8	2.2	181	97	86.6	1.0	0.0	4.1	0.0	6.2	2.1	0.0
Rental, Hiring and Real Estate Services	88.7	11.3	892	461	88.3	0.9	0.7	3.0	2.2	2.6	1.9	0.4
Property Operators and Real Estate Services	88.5	11.5	460	236	84.7	1.3	0.9	3.8	2.5	3.0	3.4	0.4
Rental and Hiring Services (except Real Estate)	88.8	11.2	421	219	93.2	0.4	0.5	1.8	1.8	1.8	0.5	0.0
Labour Hire	90.9	9.1	11	6	50.0	0.0	0.0	16.6	0.0	16.7	0.0	16.7
Retail Trade	92.2	7.8	6,345	3,637	86.4	1.2	2.5	3.2	1.8	2.6	2.2	0.1
Food Retailing	92.1	7.9	2,400	1,324	85.3	0.8	5.1	2.2	1.1	2.3	3.1	0.1
Fuel Retailing	89.7	10.3	195	126	83.3	2.4	1.6	3.2	2.4	6.3	0.8	0.0
Motor Vehicle and Motor Vehicle Parts Retailing	93.8	6.2	1,177	658	85.4	1.1	0.9	5.8	2.4	2.5	1.7	0.2
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	90.0	10.0	40	25	76.0	4.0	0.0	12.0	4.0	4.0	0.0	0.0
Other Store-Based Retailing	91.5	8.5	2,454	1,442	88.4	1.5	1.0	2.8	1.9	2.5	1.8	0.1
Labour Hire	97.5	2.5	79	62	82.4	3.2	1.6	3.2	3.2	4.8	1.6	0.0
Transport, Postal and Warehousing	91.6	8.4	4,693	2,987	85.7	1.3	1.5	3.4	2.5	2.8	2.7	0.1
Air and Space Transport	90.9	9.1	297	198	94.4	0.5	1.0	0.5	0.0	1.5	2.1	0.0

	Claim decisions			Time lost claim finalisation								
	Admit	Rejected	Total claims decided	Total time lost claims finalised	Fit for work: same job / tasks with same employer	Fit for work: same job / tasks with diff employer	Fit for work: diff job / tasks with same employer	Fit for work: diff job / tasks with diff employer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alternative outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Other Transport	92.8	7.2	194	138	90.6	0.0	0.7	3.6	1.5	2.2	1.4	0.0
Postal and Courier Pick-up and Delivery Services	88.1	11.9	168	101	85.1	1.0	0.0	2.0	6.9	2.0	3.0	0.0
Rail Transport	93.1	6.9	533	216	91.2	0.9	1.9	2.3	1.4	0.5	1.8	0.0
Road Transport	91.5	8.5	2,323	1,692	83.4	1.7	1.7	4.2	2.5	3.1	3.3	0.1
Transport Support Services	93.9	6.1	492	252	93.2	0.0	1.6	1.6	0.8	1.6	1.2	0.0
Warehousing and Storage Services	85.4	14.6	288	119	82.4	0.8	0.8	2.5	6.7	0.9	5.0	0.9
Water Transport	96.6	3.4	89	46	86.9	0.0	2.2	2.2	2.2	2.2	4.3	0.0
Labour Hire	92.2	7.8	309	225	80.5	2.7	0.4	4.0	4.9	6.2	1.3	0.0
Wholesale Trade	93.6	6.4	3,511	1,856	86.4	0.8	1.1	3.8	2.5	3.2	2.1	0.1
Basic Material Wholesaling	93.8	6.2	1,037	494	87.7	0.8	1.0	2.7	2.4	3.2	2.0	0.2
Commission-Based Wholesaling	92.3	7.7	91	54	83.3	3.7	0.0	3.7	3.7	3.7	1.9	0.0
Grocery, Liquor and Tobacco Product Wholesaling	94.7	5.3	599	380	86.3	0.3	0.8	3.4	2.9	3.4	2.9	0.0
Machinery and Equipment Wholesaling	93.2	6.8	938	429	86.5	0.9	1.4	4.0	1.6	3.0	2.4	0.2
Motor Vehicle and Motor Vehicle Parts Wholesaling	96.4	3.6	309	169	87.6	0.0	2.4	4.1	1.2	1.7	3.0	0.0
Other Goods Wholesaling	90.2	9.8	468	265	84.2	0.8	1.1	5.2	4.2	3.4	1.1	0.0
Labour Hire	97.1	2.9	69	65	84.6	1.5	0.0	6.2	3.1	4.6	0.0	0.0
Other	90.0	10.0	219	89	83.1	1.1	1.1	3.4	4.5	3.4	3.4	0.0
Total	92.1	7.9	79,351	43,977	87.7	1.3	1.1	3.1	1.9	2.7	2.1	0.1

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 the Office of Industrial Relations.
- 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.

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

- 61. Implemented the National Injury Insurance Scheme for work related catastrophic injuries connected with Queensland.
- 62. Amended the self-insurance licensing requirements to provide greater flexibility for applicants.
- 63. Reversed the impact of the Byrne decision and restoring arrangements in relation to third party liability and prosecutions for fraud.

64. 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

65. 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.
66. 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

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

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, including any workdays lost paid for by the employer. Includes 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. 6291.0.55.003 - 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).

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.

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 consists of future economic loss, past economic loss, care and treatment and rehabilitation. This incorporates loss of past and future earnings, future medical needs and care due to the ongoing disability. The amount of future earnings loss must not exceed the amount equal to the present value of 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.

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

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

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

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

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

Referral reasons – The specific questions which can be asked of the Medical assessment tribunals are defined in the 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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