

Workers' Compensation Regulator

2014 – 15

Statistics Report

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Introduction

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

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

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

All figures reported as at 30 June 2015, are true and correct as supplied by insurers.

About the Workers' Compensation Regulator

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

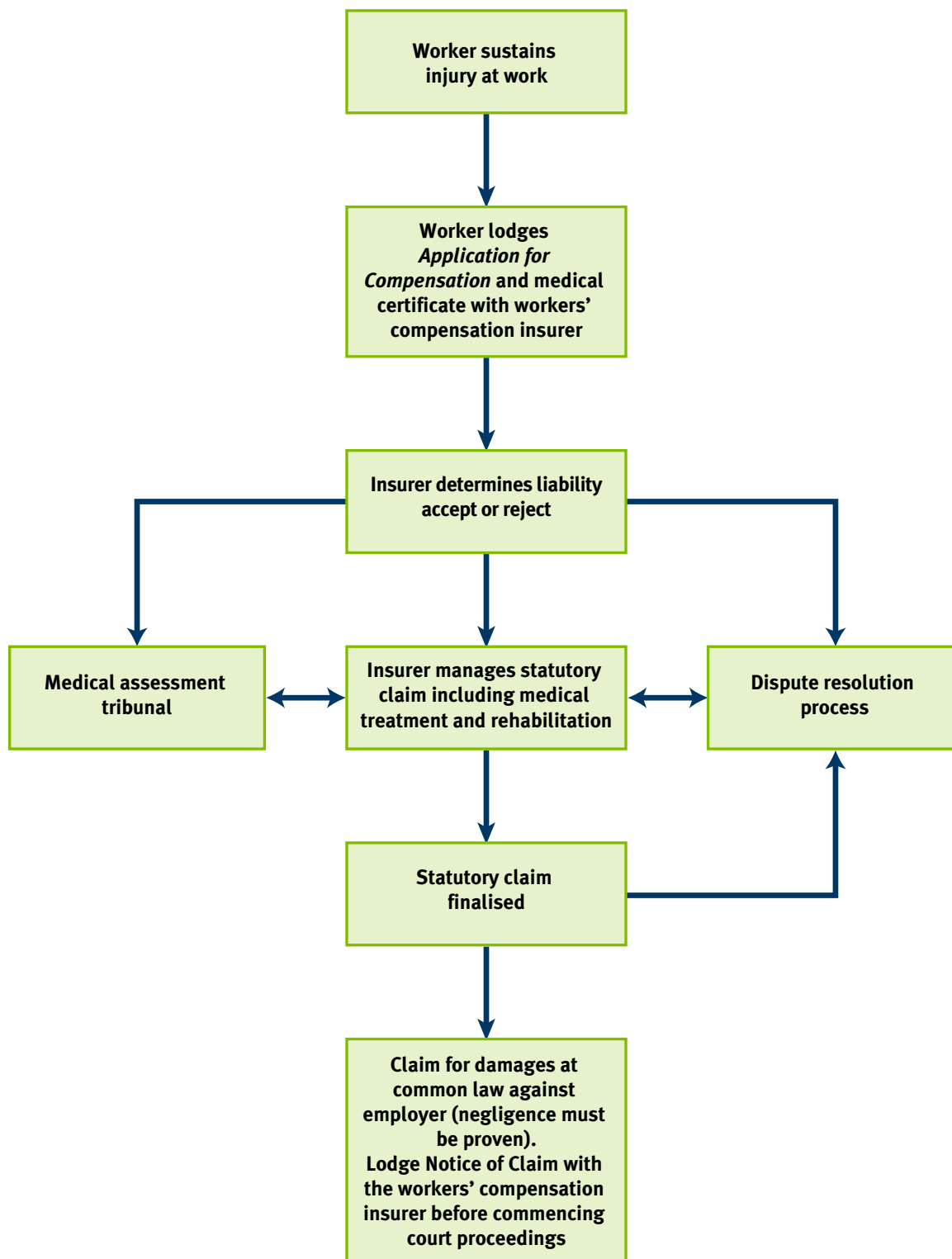
The Office of the Workers' Compensation Regulator (the Regulator) retains the following functions of Q-COMP:

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

As at 30 June 2015, 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. The following figure illustrates the workers' compensation claims process. Each of the key phases of the claim is examined in more detail through this publication.

01 Workers' compensation claims process

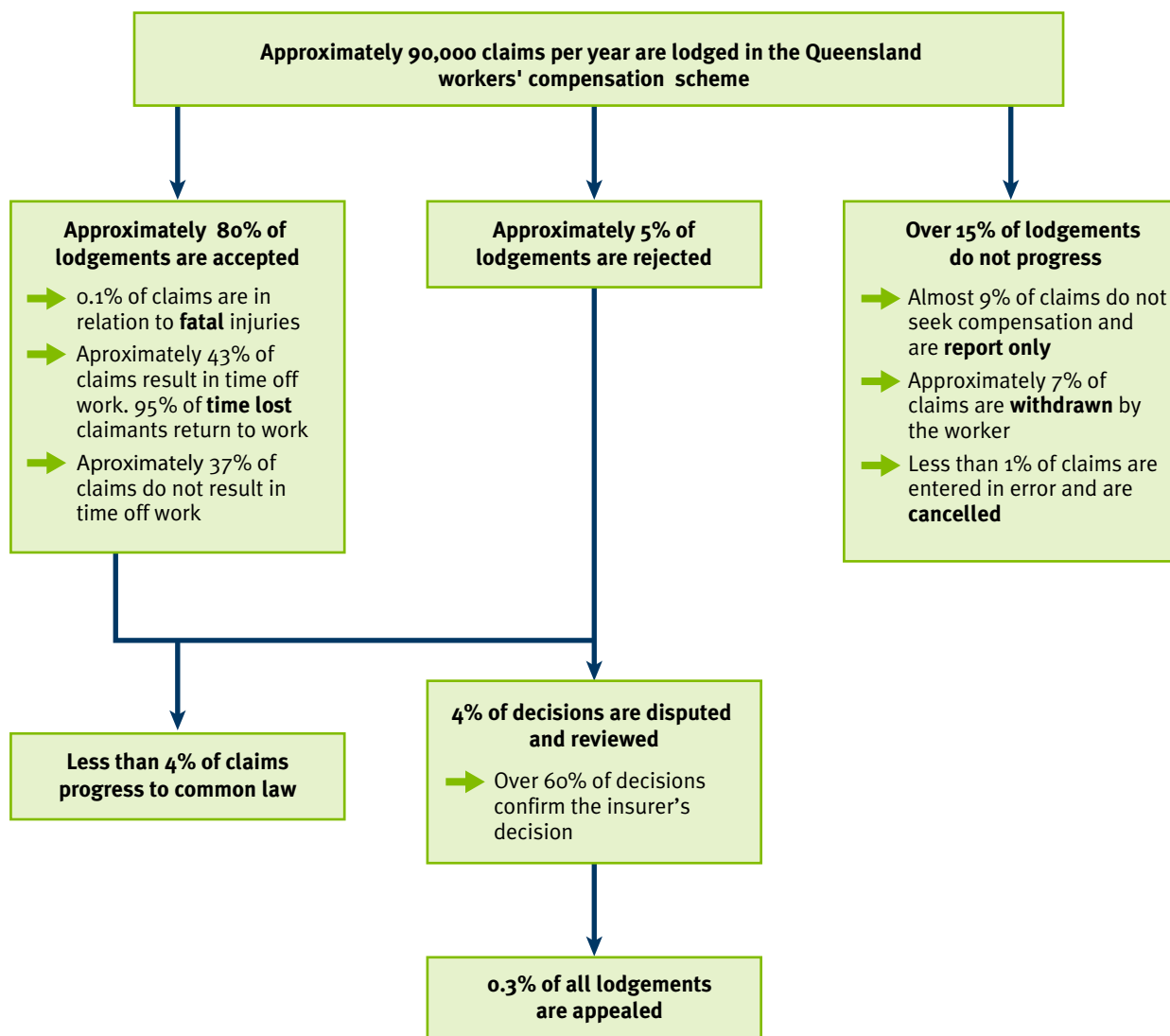


Claim profile

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

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

02 Queensland workers' compensation claim profile



Scheme highlights

Statutory claim lodgements

New statutory claims of 88,165 for 2014-15 were 4.2% lower than 2013-14. In conjunction with stable employment numbers, this resulted in a lower claim rate. The claim rate for 2014-15 has reduced by 4.5% to 38.3 claims per 1,000 workers. Industries which have contributed to the reduction in statutory claims include manufacturing, transport, postal and warehousing, other services, construction and retail trade.

The proportion of psychological and psychiatric statutory claims remains relatively stable for 2014-15 at 4.7%. This follows an increase over the previous six years from 3.4% in 2008-09 to 4.8% in 2013-14. Psychological and psychiatric claims currently represent 6.3% of total statutory payments (\$52.0M for 2014-15) and have an average finalised time lost claim cost of \$52,782 (\$43,800 for 2013-14) which is more than three times the average time lost claim cost of physical injuries (\$16,309 for 2014-15).

Statutory claim payments

Statutory payments for 2014-15 of \$819.2M were 3.3% higher than in 2013-14 (\$793.3M). Weekly compensation payments, which represent 44.2% of statutory payments, have remained relatively stable for 2014-15. Average work days lost is up slightly from 47.8 days in 2013-14 to 49.1 days in 2014-15. This has contributed to a slight increase in the average cost of time lost claims (up from \$16,358 in 2013-14 to \$17,228 in 2014-15).

Fatalities

There were 70 fatal claim lodgements in 2014-15. Fatal claim lodgements due to injuries at work represented almost one third of the 2014-15 figures (n = 23; 32.9%). Construction (n = 16) and transport, postal and warehousing (n = 11) industries contributed 38.6% of fatalities.

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

Return to work

In 2014-15, the return to work rate decreased slightly to 94.7% (96.3% for 2013-14).

Dispute resolution

Review applications have decreased 3.8%, from 3,102 in 2013-14 to 2,985 in 2014-15. The proportion of review applications to statutory claims has remained stable at 3.4% for 2014-15 (3.4% for 2013-14). Appeals served in 2014-15 have decreased, down 23.2% from 362 served in 2013-14 to 278 served in 2014-15.

Medical Assessment Tribunals (MAT)

In 2014-15, 3,059 referrals were made to the MAT. This is a decrease of 1.2% on the 3,095 referrals received in 2013-14. Of the cases determined by the MAT 45.1% were for permanent impairment (PI) assessment (43.5% in 2013-14). The proportion of MAT referrals to statutory claims has increased marginally from 3.4% in 2013-14 to 3.5% in 2014-15.

Common law lodgements

The October 2013 legislative amendments to the common law threshold have had an effect on reducing the number of common law claims lodged. There were 2,986 common law claims lodged in 2014-15. This is a 29.3% reduction on the 4,226 lodged in 2013-14.

Common law average damages

The average cost of finalised common law claims has increased by 6.5% for 2014-15. Claims finalised with no damages payment (nil settlements), as a percent of total common law claims have increased to 16.1% for 2014-15, up from 14.4% in 2013-14.

03 Scheme at a glance

Overview					
		2014-15	2013-14	% change from previous year	Page number
Statutory claims	New claims	88,165	92,007	-4.2%	10
	Claims per 1,000 workers	38.3	40.1	-4.5%	8
	New psychological claims (%)	4.7%	4.8%	-0.1%	12
	Fatalities	70	63		15
	Payments (\$M)	\$819.2	\$793.3	3.3%	23
Statutory decisions	Average time to decide (days)	7.6	7.2	5.6%	18
	Rejection rate – physical (%)	5.0%	4.4%	0.6%	19
	Rejection rate – psych (%)	65.4%	64.8%	0.6%	19
Outcomes	Average work days lost (days) (time lost claims)	49.1	47.8	2.7%	33
	Return to work rate (%)	94.7%	96.3%	-1.6%	28
Common law	New claims	2,986	4,226	-29.3%	37
	Payments (\$M)	\$554.3	\$566.0	-2.1%	42
	Average damages cost (excluding nil settlements)	\$138,257	\$129,768	6.5%	43
Regulator functions	Review applications	2,985	3,102	-3.8%	45
	Appeals served	278	362	-23.2%	48
	MAT referrals	3,059	3,095	-1.2%	50

Workers' compensation statutory claims

- The majority of employers (almost 90%) covered by the scheme in 2014-15 did not have a claim for workers' compensation.
- Scheme-wide claim rate decreased 4.5%.
- The manufacturing industry has the highest claim rate.

As at 30 June 2015, approximately 153,000 employers were covered by the Queensland workers' compensation scheme. During the 2014-15 year the scheme covered a total of approximately 160,000 employers, taking into account fluctuations in cancelled and new policies.

04 Number of claims lodged by insurance type 13-14 and 14-15

Insurance type	13-14	14-15	% Variance
Employed people	91,672	87,803	-4.2%
Volunteers, industrial placement / work experience, contracts of insurance (Act: section 26)	252	280	11.1%
Workplace personal injury insurance (self-employed, working directors)	66	60	-9.1%
Household workers	17	22	29.4%
Total lodgements	92,007	88,165	-4.2%

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

05 Number of claims per employer by declared wages 13-14

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	137,648	3,694	755	231	86	8	142,422
1 claim	8,156	1,479	475	169	70	7	10,356
2 to 5 claims	2,540	1,581	824	456	245	11	5,657
6 to 10 claims	110	205	266	263	192	22	1,058
11 to 20 claims	24	52	80	170	227	35	588
Over 20 claims	19	7	16	58	269	186	555
Total with claims	10,849	3,324	1,661	1,116	1,003	261	18,214
Total	148,497	7,018	2,416	1,347	1,089	269	160,636
% without claims	92.7%	52.6%	31.3%	17.1%	7.9%	3.0%	88.7%

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

The majority of employers (88.7%) did not have a claim for workers' compensation in 2014-15. Smaller employers (less than \$1 million in declared wages) were the most likely to have no claims (92.7%).

Claim rate

In 2014-15, 88,165 claims were lodged scheme-wide (excluding cancelled claims). The estimated rates per 1,000 workers are detailed below.

06 Claim rates (per 1,000 workers covered by the scheme) 10-11 to 14-15

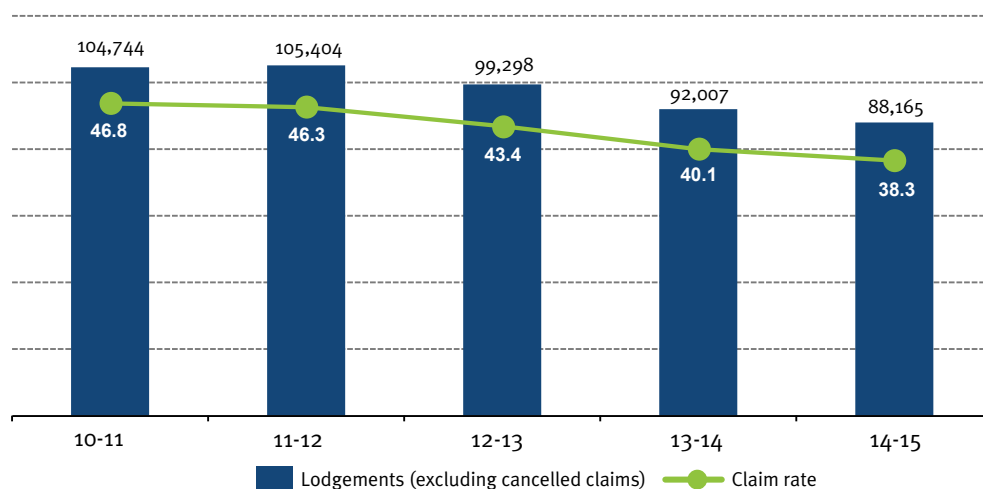
	Annual comparison				
	10-11	11-12	12-13	13-14	14-15
Queensland labour force					
Average number of employed people ('000) ^a	2,307.8	2,330.3	2,338.2	2,353.7	2,347.5
Change from previous year (%)	3.8%	1.0%	0.3%	0.7%	-0.3%
Average number of workers covered ('000) ^b	2,238.0	2,275.5	2,286.8	2,296.6	2,301.6
Change from previous year (%)	3.6%	1.7%	0.5%	0.4%	0.2%
Queensland workers' compensation scheme					
Number of lodged claims	104,744	105,404	99,298	92,007	88,165
Change from previous year (%)	4.3%	0.6%	-5.8%	-7.3%	-4.2%
Claim rate					
Number per 1,000 workers covered	46.8	46.3	43.4	40.1	38.3
Change from previous year (%)	0.7%	-1.1%	-6.3%	-7.6%	-4.5%

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

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

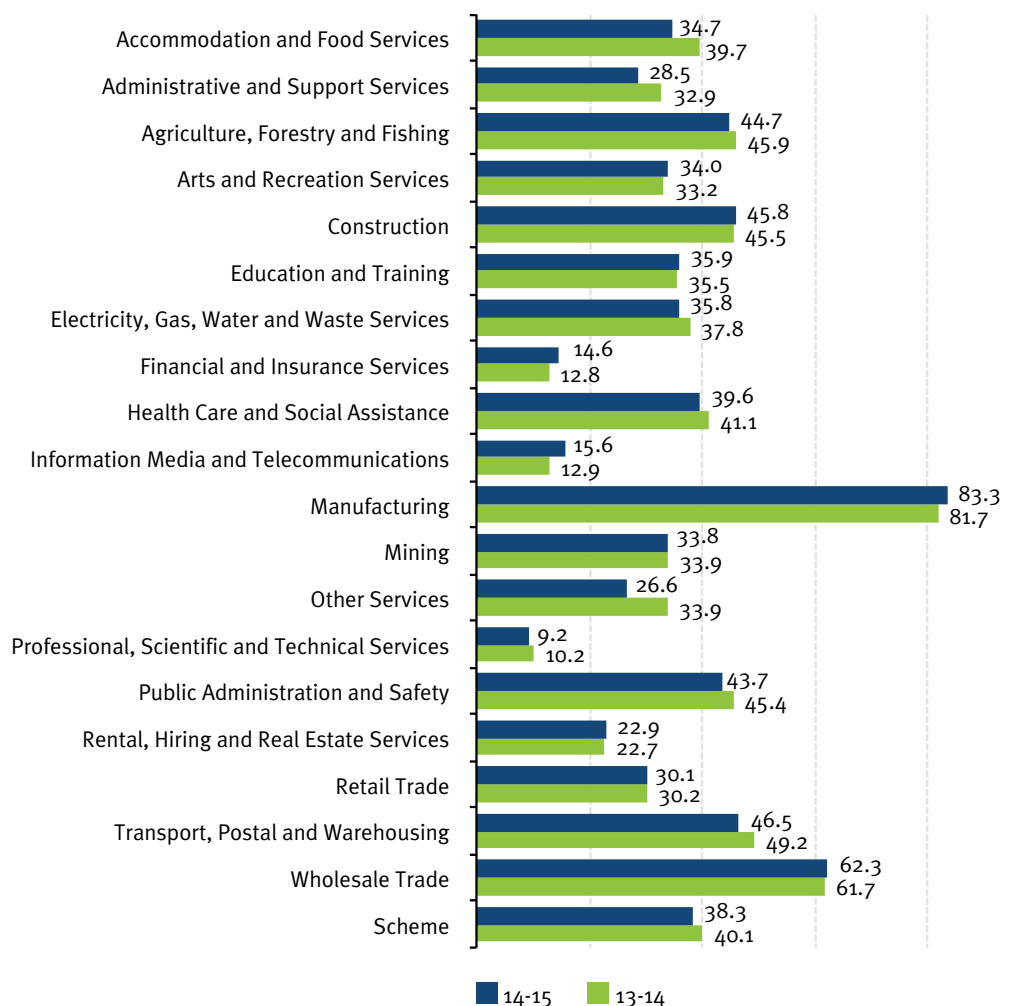
The following figure shows claim rates and claim lodgements in the scheme for the past five years. Lodgements for 2014-15 of 88,165 have decreased by 4.2% from 2013-14 lodgements of 92,007.

07 Claim rates (per 1,000 workers covered by the scheme) and lodgements 10-11 to 14-15



Manufacturing had the highest claim rate in the scheme, with 83.3 claim lodgements per 1,000 workers covered in the industry. Other industries where the claim rate was larger than the scheme rate of 38.3 include, wholesale trade (62.3), transport, postal and warehousing (46.5), construction (45.8), agriculture, forestry and fishing (44.7), public administration and safety (43.7), and health care and social assistance (39.6).

o8 Claim rates (per 1,000 workers covered by the scheme) by industry 13-14 and 14-15



Statutory claim lodgements

- Lodgements decreased by 4.2% in 2014-15.
- Note: cancelled claims have been excluded from the lodgements reported.
- There were 70 fatal claims lodged in 2014-15.

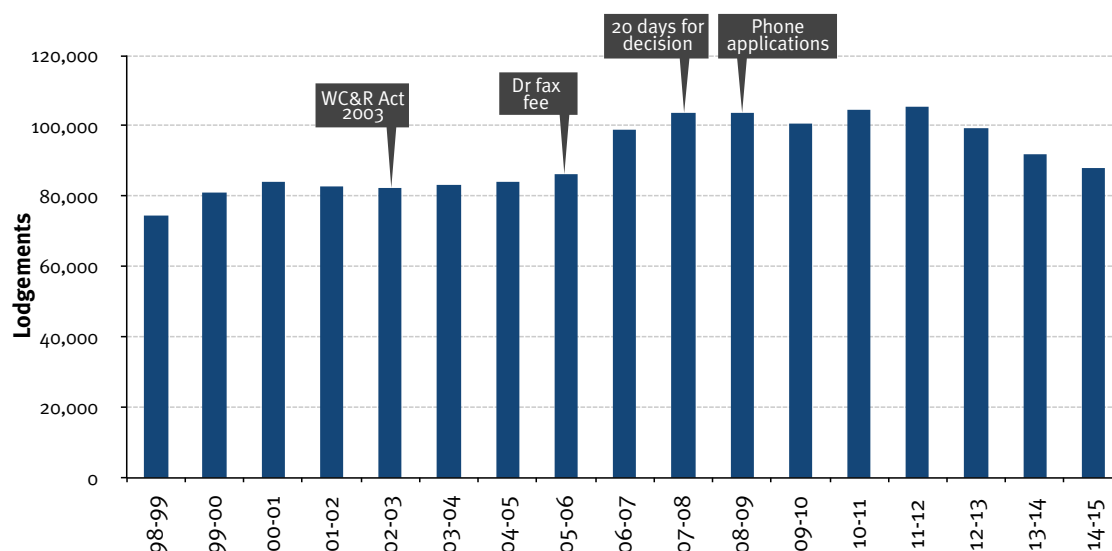
Many factors influence the number of claims lodged in the Queensland workers' compensation scheme. Some of the factors which may have contributed to changes in numbers of lodgements over the years include:

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

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

In 2014-15, there were 88,165 claims lodged (excluding cancelled), representing a 4.2% decrease from 2013-14 (92,007).

09 Statutory claim lodgement history 98-99 to 14-15



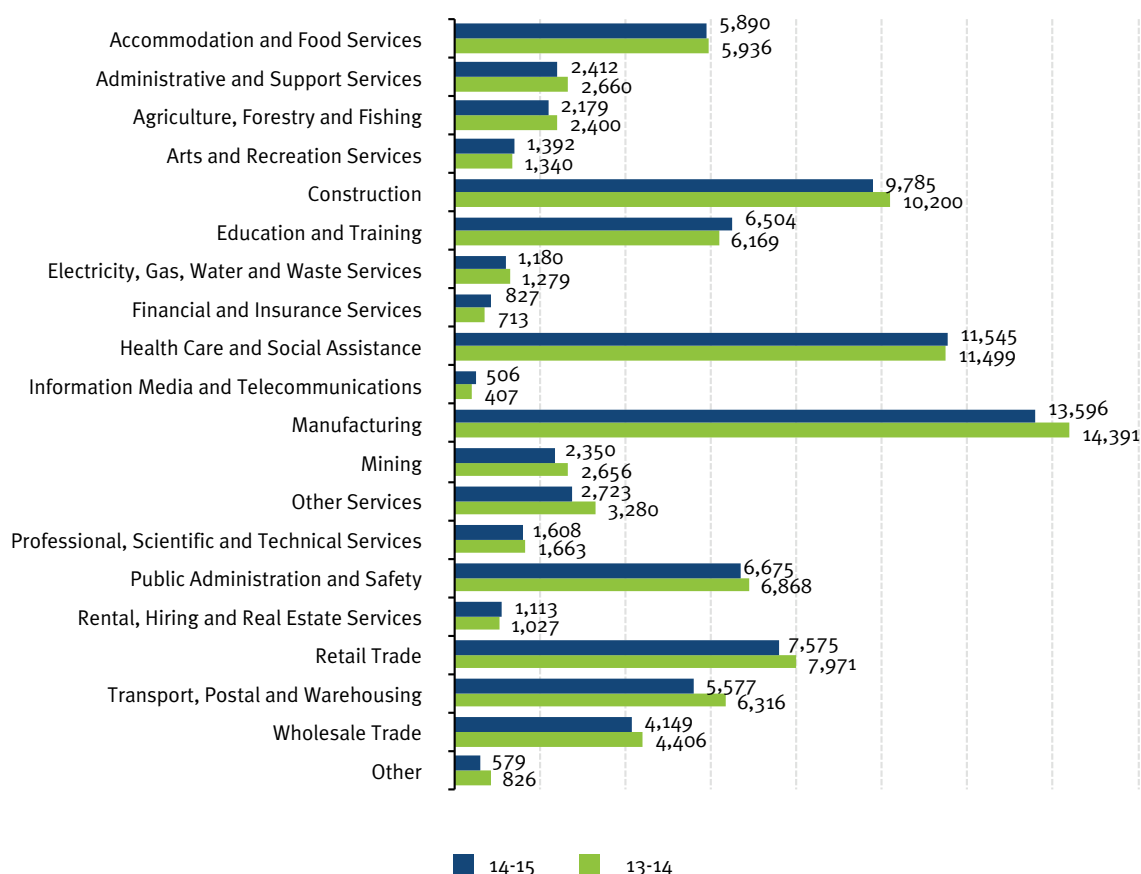
Industry

The manufacturing industry accounted for the largest proportion of claim lodgements with 15.4% of all scheme lodgements.

Almost all industries experienced a decrease in the number of claims lodged.

The largest percentage decreases in claim lodgements were for other services (down 17.0%), transport, postal and warehousing (down 11.7%) and mining (down 11.5%). Other major industries also saw decreases, with manufacturing down 5.5%, construction down 4.1% and retail trade down 5%.

10 Statutory claim lodgements by industry 13-14 and 14-15



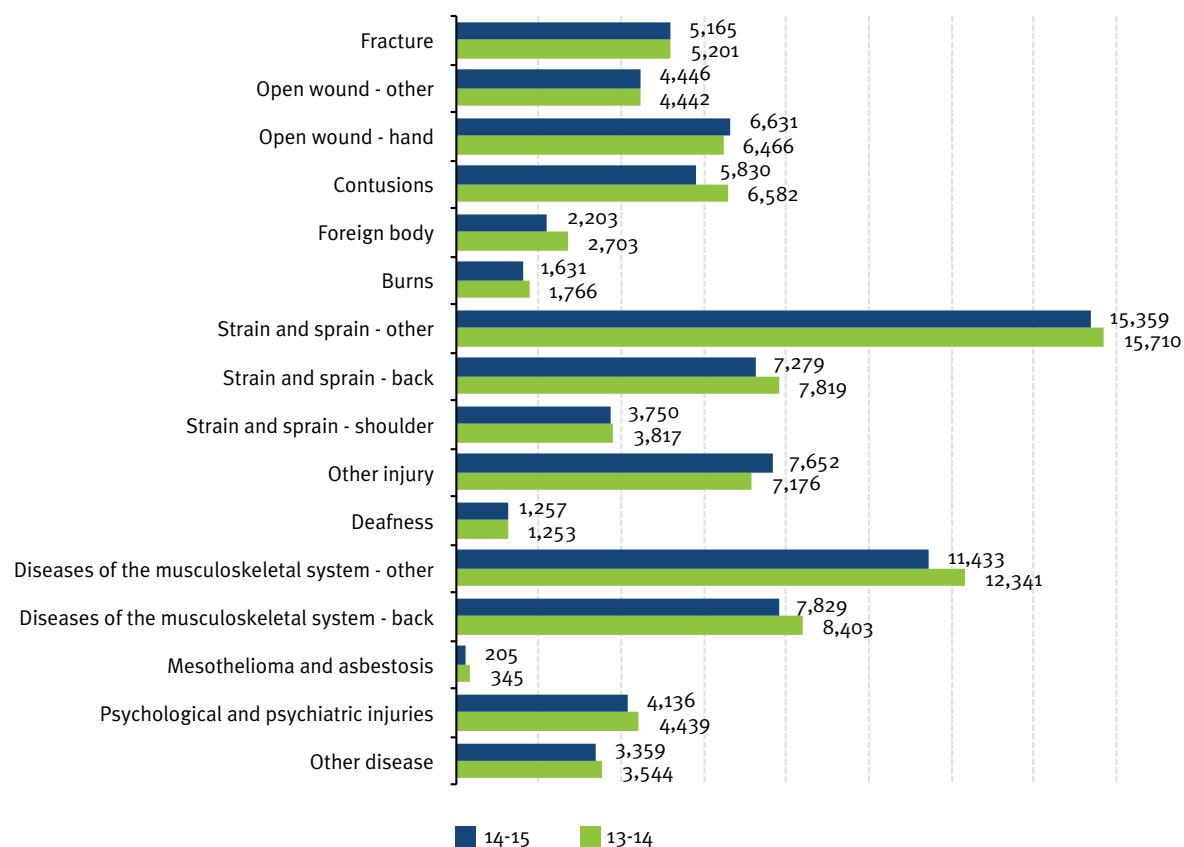
For industry "Other", this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self employed, working directors) and volunteers.

Injury type

Strain and sprain injury claims accounted for almost a third (29.9%) of all injuries lodged in 2014-15. Of these, the back was the major bodily location (accounting for 8.3% of all lodgements).

Mesothelioma and asbestosis claims experienced a large decrease of 40.6%, down from 345 in 2013-14 to 205 in 2014-15. This is due to a large decrease in report only claims, which represent 58.5% of the mesothelioma and asbestosis claims in 2014-15, compared with 75.1% in 2013-14.

11 Statutory claim lodgements by injury type 13-14 and 14-15

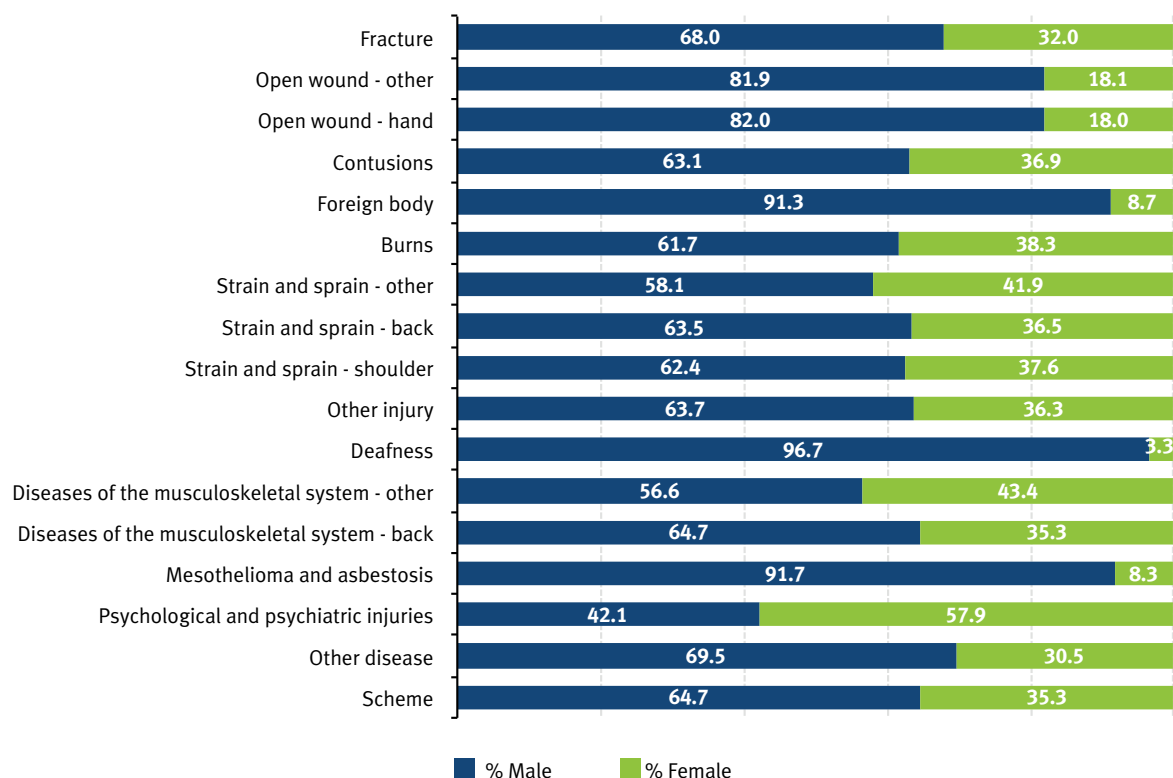


Gender

In 2014-15, males represented 64.7% (n = 57,073) of the 88,165 claims lodged in the Queensland workers' compensation scheme. Injuries where males represented a much higher proportion of claims than females were deafness (96.7%), mesothelioma and asbestosis (91.7%), and foreign body (91.3%).

Psychological and psychiatric injury was the only injury type where females were represented more than males, with females accounting for 57.9% of claims.

12 Proportion of statutory claim lodgements by injury type and gender 14-15

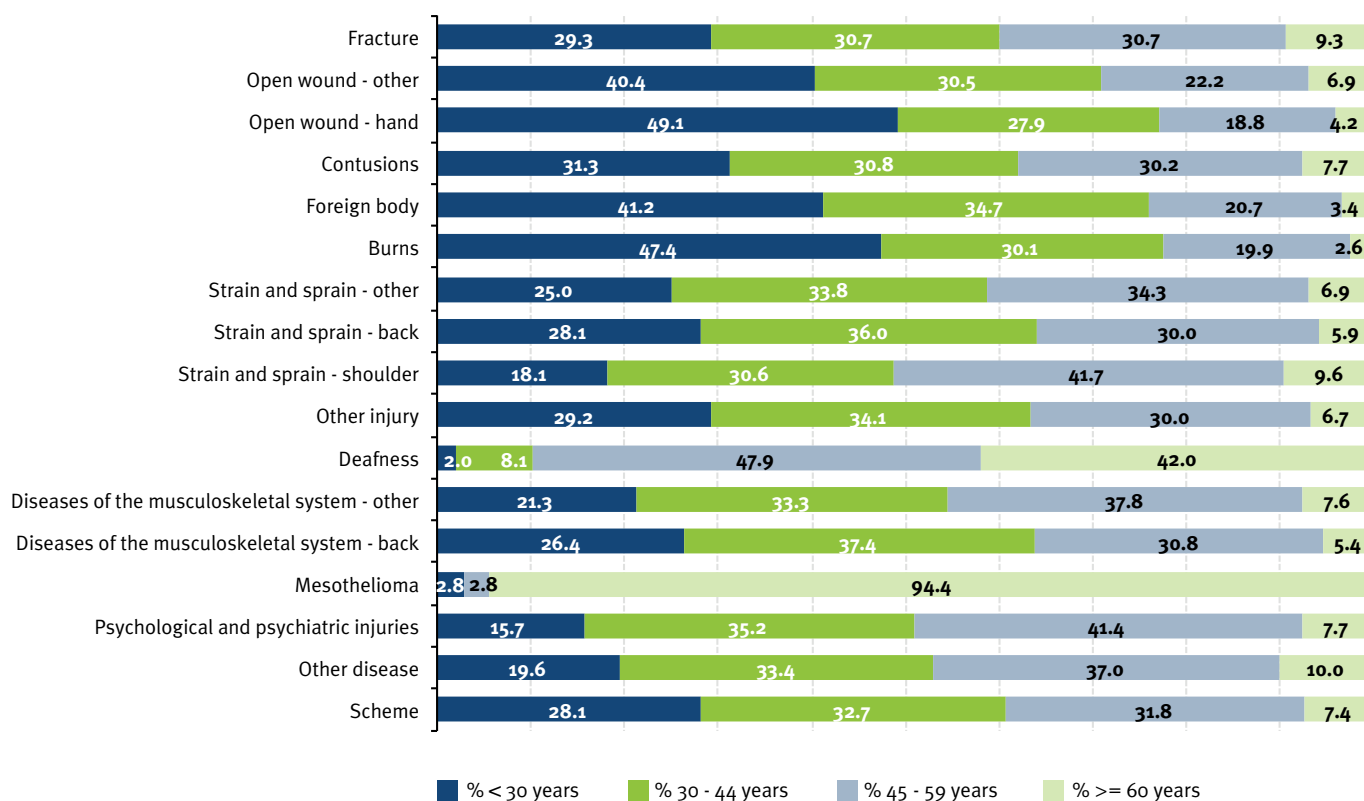


Age

While older workers (60 years or over) represented only 7.4% of all claims lodgements, they have a high representation for injuries such as mesothelioma (94.4%) and deafness (42.0%).

Injury types where younger workers (less than 30 years) represented a greater proportion include open wound to the hand (49.1%), burns (47.4%), foreign body (41.2%) and open wound to a location other than the hand (40.4%).

13 Proportion of statutory claim lodgements by injury type and age group 14-15



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

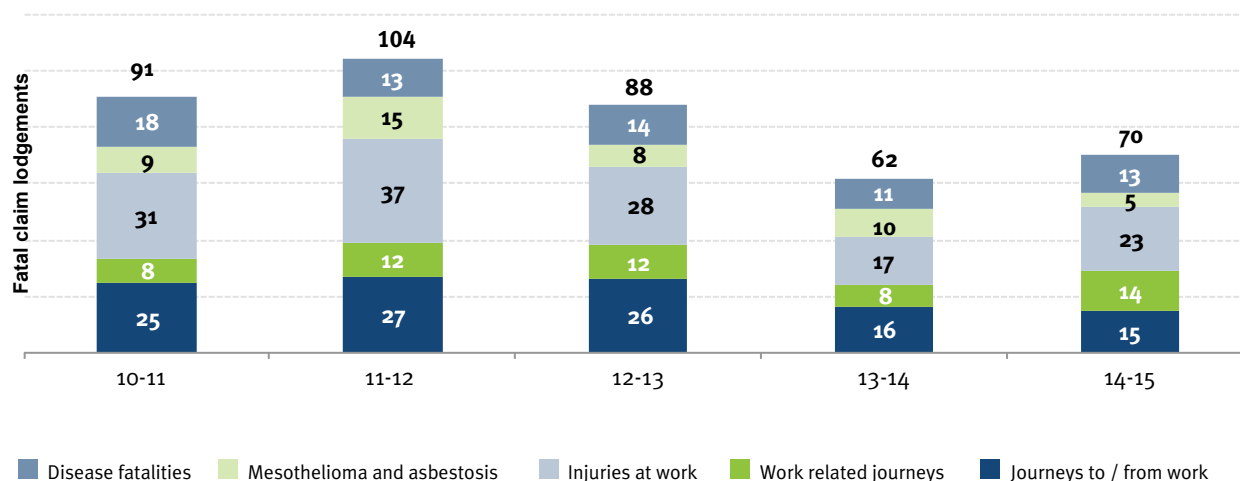
Fatalities

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

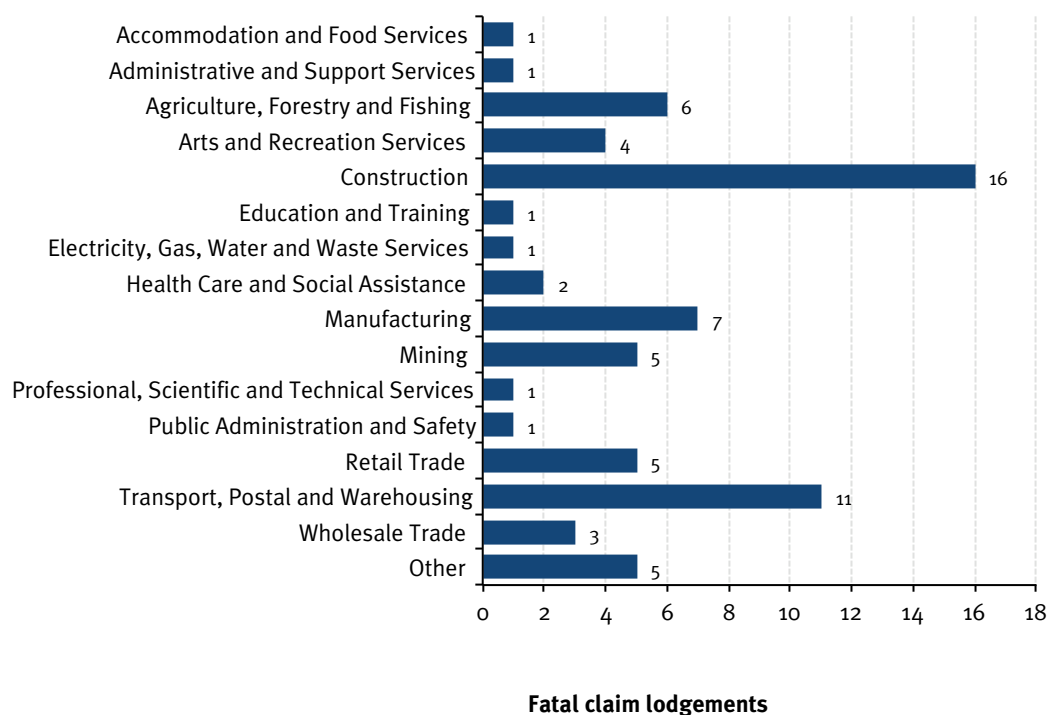
The Workers' Compensation Regulator reports the claim as a fatality if the claim is indicated by the insurer as a fatality under the Act, on the individual application, taking into account the definitions of a worker, event and injury under the Act (s11, s31 and s32). The figure below shows the fatal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

There were 70 fatalities lodged in 2014-15.

14 Fatal claim lodgements (excluding cancelled claims) 10-11 to 14-15



15 Fatal claim lodgements (excluding cancelled claims) by industry 14-15



Statutory claim decision-making process

- Decision timeframes have increased by 5.9% for the 2014-15 year.
- Rejections and claims for psychological and psychiatric injuries take longer to decide.
- Claims for psychological and psychiatric injuries have a higher chance of rejection.
- 84.8% of rejections are due to the injury not meeting the definition under the Act.
- Claims which are lodged with the insurer early are determined quicker, on average.
- Rejections are more likely to progress to a review than claims which are accepted.

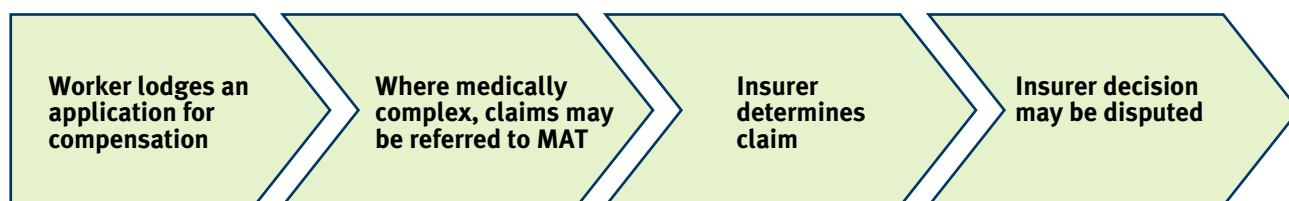
Once the insurer receives a complete application for compensation, they will determine whether or not the claim is compensable under the *Workers' Compensation and Rehabilitation Act 2003* (the Act). Insurers have 20 business days to determine liability for both physical injuries and psychological and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

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

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

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

16 Claims decision-making process



The following figure illustrates the change in decision-making timeframes in 2013-14 and 2014-15.

17 Average time to decide by injury type 13-14 and 14-15

Average decision time (days)		
Injury type	13-14	14-15
Fracture	4.3	5.1
Open wound – other	3.5	5.4
Open wound – hand	3.2	3.5
Contusions	4.4	5.0
Foreign body	3.4	3.4
Burns	3.6	3.9
Strain and sprain – other	5.7	5.6
Strain and sprain – back	6.4	8.7
Strain and sprain – shoulder	7.2	7.0
Other injury	6.8	6.9
Deafness	17.7	20.2
Diseases of the musculoskeletal system – other	8.3	8.2
Diseases of the musculoskeletal system – back	7.8	7.7
Mesothelioma and asbestosis	74.2	61.9
Psychological and psychiatric injuries	29.5	29.7
Other disease	13.2	13.4
Total average	7.2	7.6

Overall, average decision-making timeframes have increased to 7.6 days in 2014-15, up from 7.2 days in 2013-14.

The median decision-making timeframes have remained stable at 3.0 days for 2014-15.

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 2014-15 were mesothelioma and asbestosis and psychological and psychiatric injuries.

The average decision time for mesothelioma and asbestosis claims has decreased from 74.2 days in 2013-14 to 61.9 days in 2014-15. This decrease is due to a small number of claims in 2013-14 relating to mesothelioma and asbestosis disease that exceeded 150 days from lodgement to decision.

The following figure illustrates decision-making timeframes and outcomes for claims determined in 2014-15. These timeframes are based on statutory claim decisions.

18 Decisions made and average time to decide by decision type and injury type 14-15

Injury type	Number of decisions	Proportion of decisions		Average decision time		
		Admitted %	Rejected %	Admitted days	Rejected days	Total days
Fracture	4,733	96.5%	3.5%	4.8	13.1	5.1
Open wound - other	3,893	98.4%	1.6%	5.2	13.6	5.4
Open wound - hand	5,826	98.6%	1.4%	3.4	10.3	3.5
Contusions	5,050	97.7%	2.3%	4.8	14.3	5.0
Foreign body	1,936	98.2%	1.8%	3.2	13.6	3.4
Burns	1,404	98.1%	1.9%	3.7	14.7	3.9
Strain and sprain - other	13,568	95.9%	4.1%	4.9	22.1	5.6
Strain and sprain - back	6,440	95.4%	4.6%	8.1	20.1	8.7
Strain and sprain - shoulder	3,347	94.6%	5.4%	6.2	22.6	7.0
Other injury	6,000	92.9%	7.1%	5.6	24.2	6.9
Deafness	917	84.7%	15.3%	17.7	33.8	20.2
Diseases of the musculoskeletal system - other	10,090	93.7%	6.3%	7.1	25.7	8.2
Diseases of the musculoskeletal system - back	6,807	93.0%	7.0%	6.5	23.8	7.7
Mesothelioma and asbestosis	38	84.2%	15.8%	59.1	77.3	61.9
Psychological and psychiatric injuries	2,663	34.6%	65.4%	19.0	35.3	29.7
Other disease	2,773	85.4%	14.6%	10.1	32.7	13.4
Total	75,485	92.9%	7.1%	6.1	27.4	7.6

Most claims (92.9%) were accepted by insurers with an average determination time of 6.1 days. On average, decision timeframes tended to be longer for:

- rejected claims – determined in 27.4 days on average compared to 6.1 days on average for accepted claims
- diseases, particularly psychological and psychiatric injury claims (average 29.7 days to determine), mesothelioma and asbestosis claims (average 61.9 days to determine) and deafness (average 20.2 days to determine).

Diseases tended to have higher rejection rates than injuries. In 2014-15, 15.3% of deafness claims were rejected and 65.4% of psychological and psychiatric claims were rejected.

Another reason the rejection rate of psychological and psychiatric claims is so high is that workers cannot receive compensation for certain psychological and psychiatric injuries that arise out of or in the course of reasonable management action, as they are excluded from the definition of an injury in the Act. In 2014-15, 96.8% 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 84.8% of rejected claims, the reason for rejection was that the injury did not meet the definition under the Act.

The following figure details the main reasons claims were rejected.

19 Rejected claims by reason for rejection 13-14 and 14-15

Reason for rejection	13-14		14-15	
	Number of rejections	% of rejections	Number of rejections	% of rejections
Not an injury - s.32	4,385	85.5%	4,538	84.8%
Not a worker - s.11	264	5.2%	294	5.5%
Out of time - excluded under s.131	139	2.7%	184	3.4%
Journey - subsequent delay, interruption or deviation - s.36(2)(B)	57	1.1%	77	1.5%
Invalid application - s.132	3	0.1%	2	0.0%
Industrial deafness - excluded under s.125 - initial application	71	1.4%	70	1.3%
Not a journey - s.35	33	0.6%	25	0.5%
Other	175	3.4%	160	3.0%
Total	5,127	100.0%	5,350	100.0%

Determination of medically complex claims

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

For 2014-15, only 112 claims were referred to a medical assessment tribunal for determination of the worker's injury for an application for compensation. Of these cases, 81 (72.3%) were accepted and the remaining 31 (27.7%) 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 (0.6%), one third (33.2%) of rejected claims are disputed by either the employer or the injured worker.

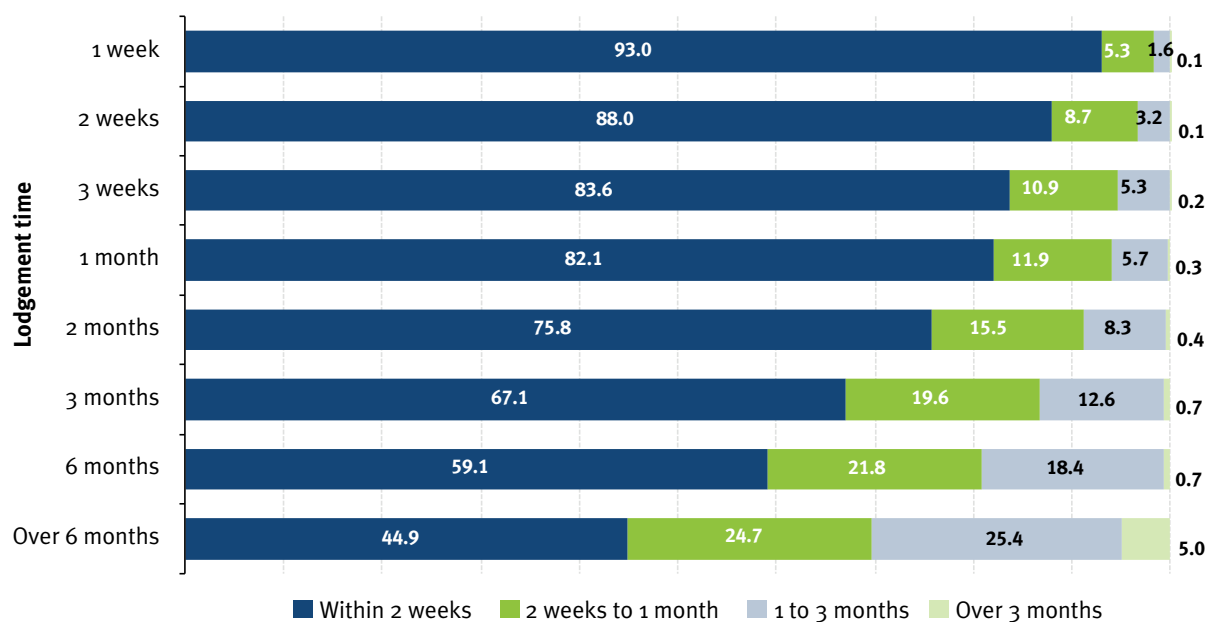
Impact of lodgement time on determination time

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.

93.0% of claims lodged within the first week of the injury are determined by the insurer within two weeks. The proportion decided within two weeks decreases as the time to lodge the claim increases. For claims lodged more than six months after an injury, the proportion determined in less than two weeks drops to 44.9%.

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

20 Decision-making timeframes for claims decided in 14-15 by the time taken to lodge the claim



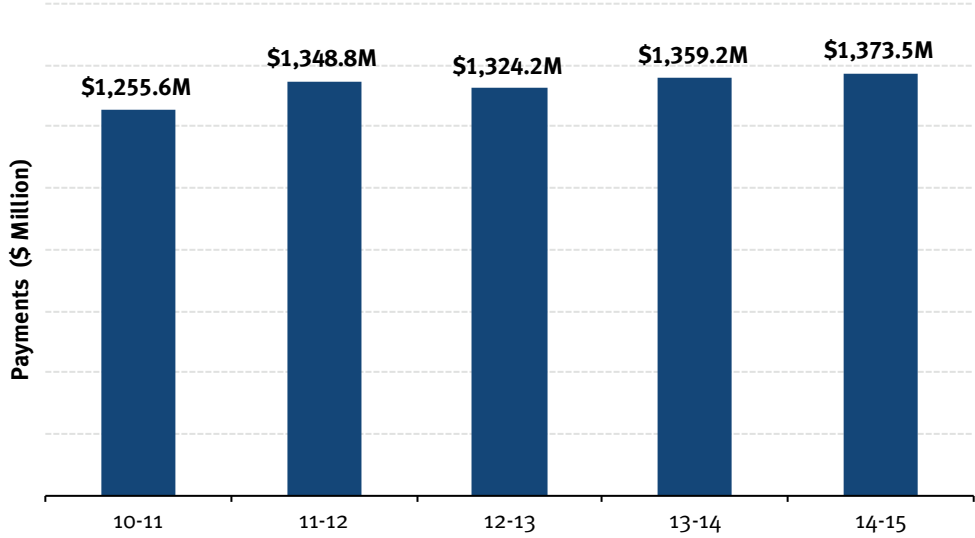
Claim payments

- Total scheme payments have increased by 1.0%.
- There was a 2.1% decrease in common law payments made in 2014-15.
- Statutory payments increased by 3.3% between 2013-14 and 2014-15 with no notable shifts within the payment categories.

Workers' compensation payments

The total scheme payments increased by 1.0%, with common law payments decreasing by 2.1% and statutory payments increasing by 3.3%. Total payments for workers' compensation claims in 2014-15 were \$1,373.5 million. Common law payments made up 40.4% (\$554.3 million) and statutory claim payments made up 59.6% (\$819.2 million).

21 Scheme payments 10-11 to 14-15

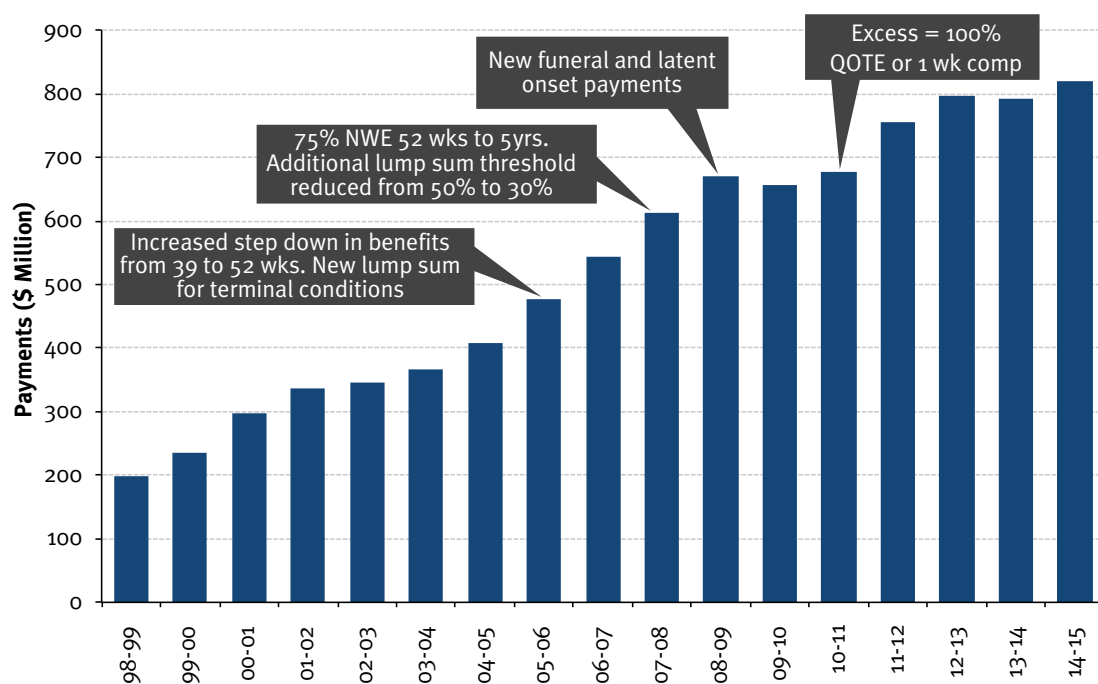


Statutory claim payments

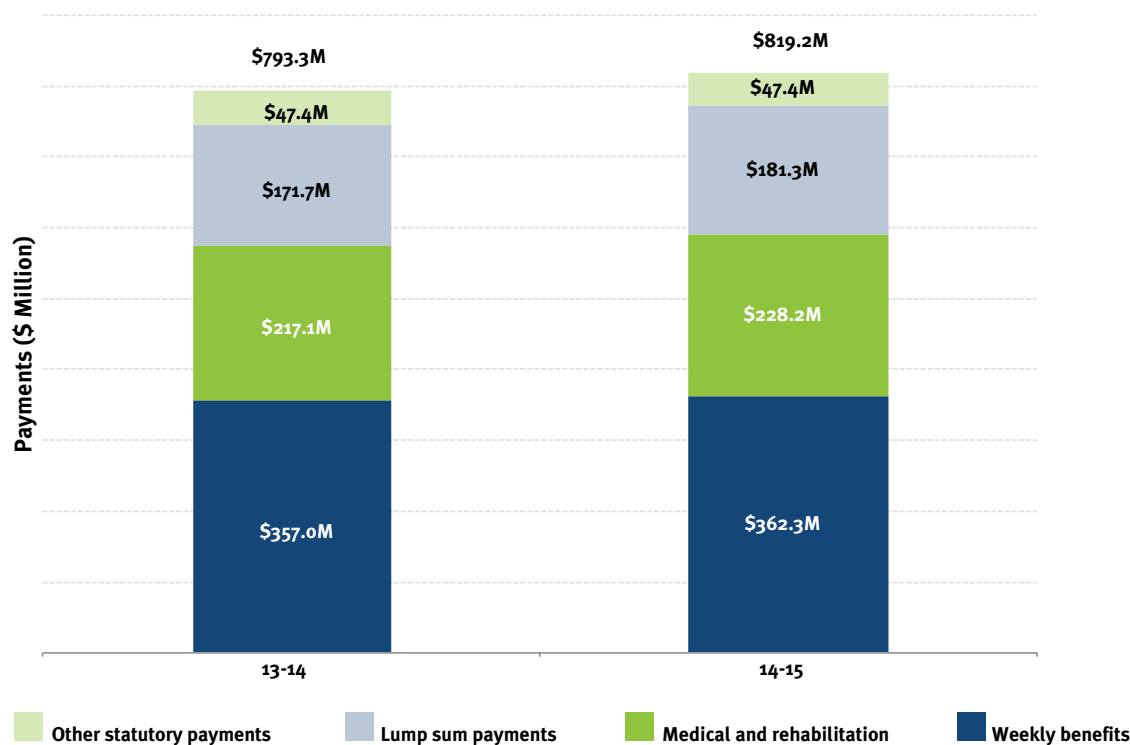
During the management of a claim, payments are made to the worker for weekly compensation to replace wages, lump sums for permanent impairment (PI) and a broad range of services such as medical treatment and rehabilitation.

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

22 Statutory claim payment history 98-99 to 14-15



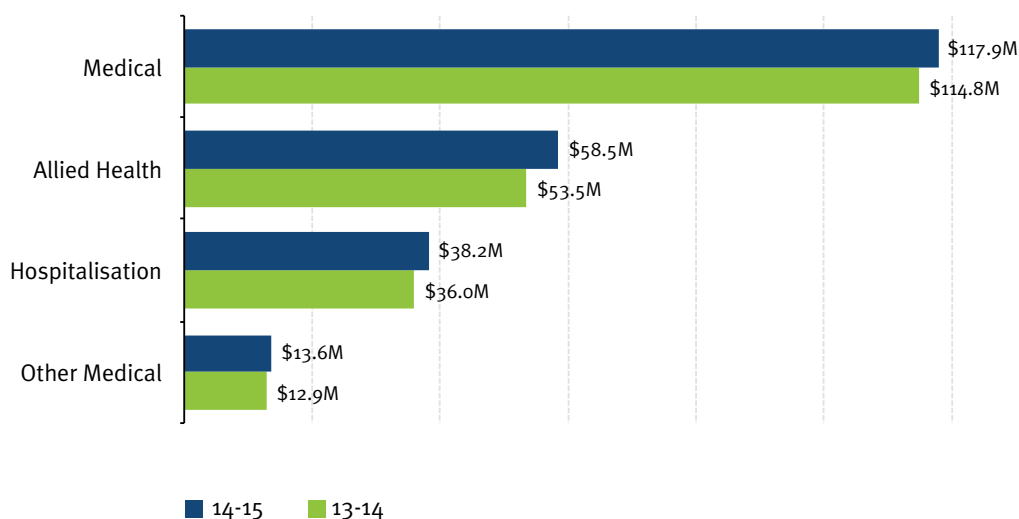
23 Statutory claim payments by payment type 13-14 and 14-15



The total amount spent on claims for the year has increased by 3.3% from \$793.3 million in 2013-14 to \$819.2 million in 2014-15.

Weekly benefit payments increased by 1.5%, medical and rehabilitation payments and lump sum payments both increased by just over 5.5%, and there was no change in other statutory payments.

24 Medical and rehabilitation payments 13-14 and 14-15

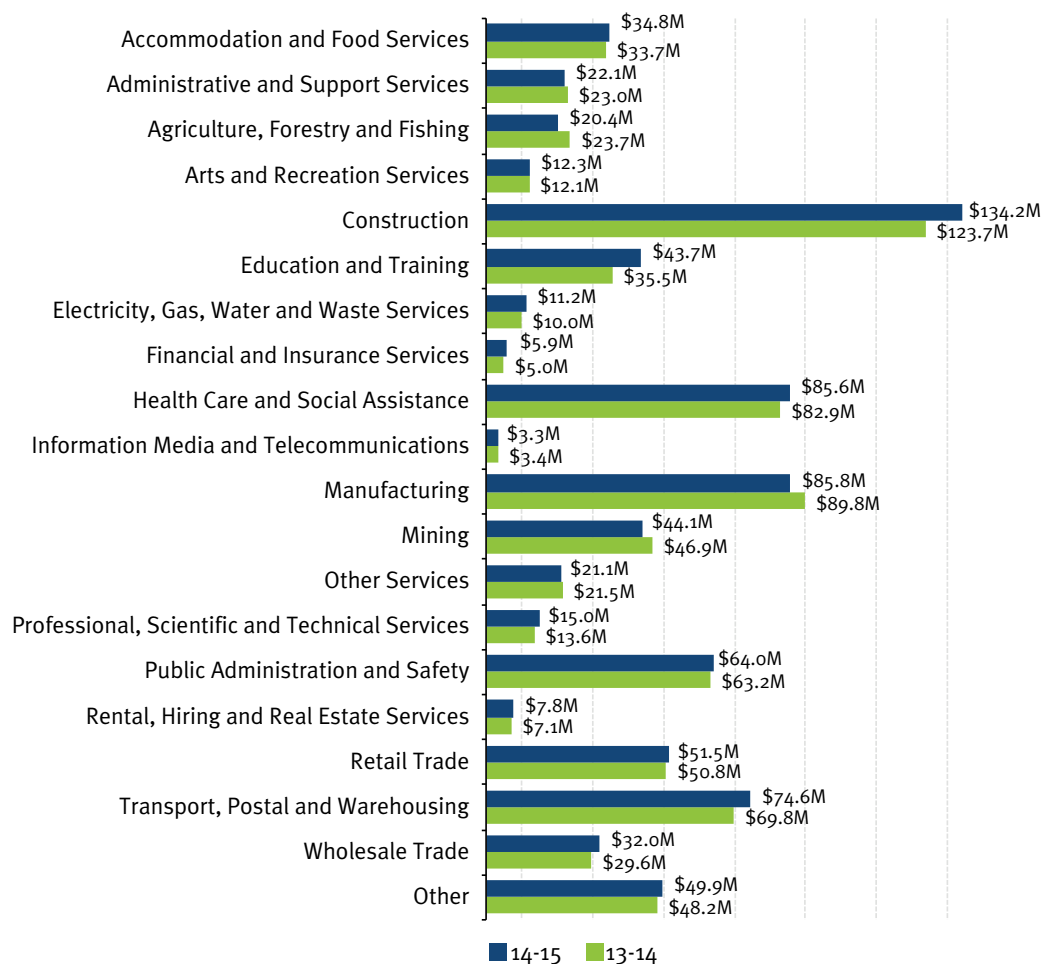


Medical and rehabilitation payments represent 27.9% of statutory payments. Of those, payments for medical treatment accounted for more than half (51.7%) of all payments for medical and rehabilitation fees paid in the scheme in 2014-15.

Payments by industry

Claims from the construction industry accounted for the largest proportion (16.4%) of statutory claim payments in 2014-15. Manufacturing accounted for 10.5% of statutory payments, while health care and social assistance accounted for 10.4%.

25 Statutory claim payments by industry 13-14 and 14-15

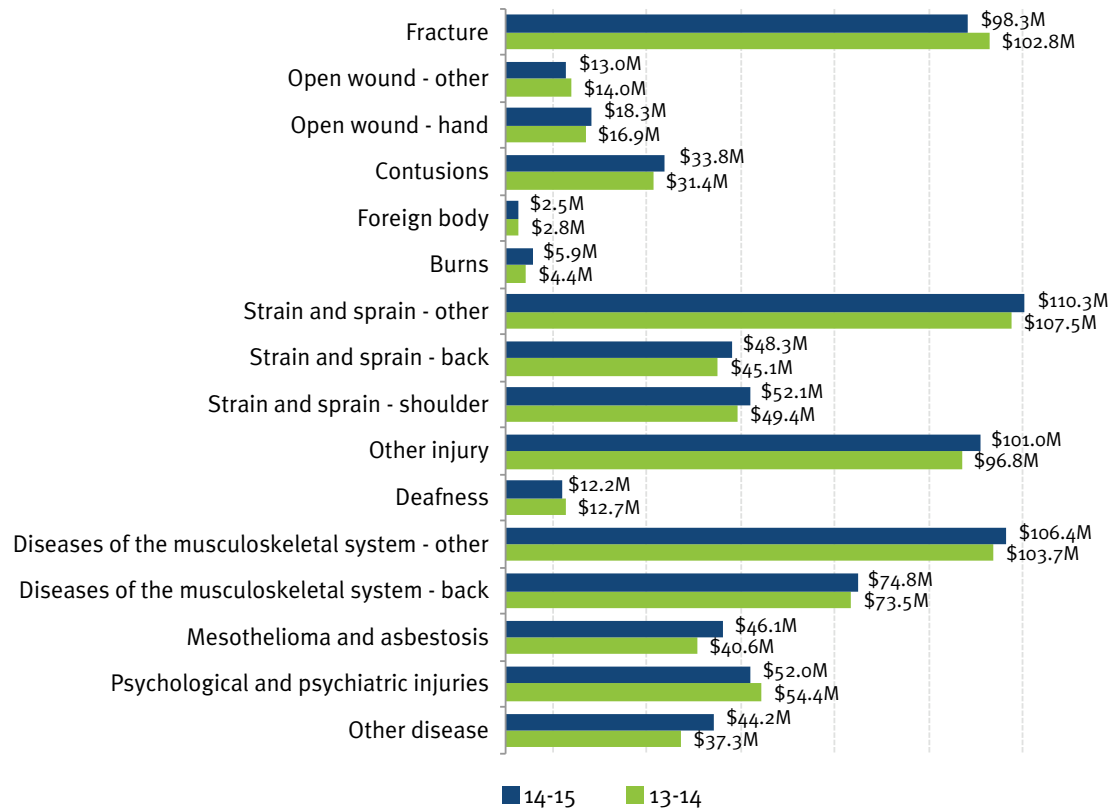


Payments by injury

Claims from strain and sprain injuries accounted for the largest proportion (25.7%) of statutory claim payments in 2014-15 (5.9% to the back, 6.4% to the shoulder and 13.5% to a location other than the back or shoulder). Disease of the musculoskeletal system claims accounted for 22.1% of statutory claim payments made in 2014-15 (9.1% to the back and 13.0% to a location other than the back).

Injury types that experienced the largest percentage increase in statutory claim payments from 2013-14 to 2014-15 were burns (up 34.1%) and mesothelioma and asbestosis (up 13.0%).

26 Statutory claim payments by injury type 13-14 and 14-15



Finalised claims and outcomes

- 90.9% of workers with claims finalised in 2014-15 returned to their same job with the same employer.
- Average costs of finalised medical expense only claims increased slightly by 1.5%.
- Average costs of finalised time lost claims increased by 5.3% and their durations increased 2.7%.

Work related impairment (WRI)/Degree of permanent impairment (DPI)

Where a worker has a permanent impairment 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 received an offer of lump sum compensation based on their WRI or DPI.

The figure below shows the number of claims finalised and those that had a WRI/DPI in 2013-14 and 2014-15.

27 Finalised claims with a WRI/DPI 13-14 and 14-15

	13-14	14-15	Variance %
Finalised claims	87,332	76,925	-11.9%
WRI/DPI	9,309	7,788	-16.3%
Proportion of finalised with WRI/DPI	10.7%	10.1%	
Work related impairment/Degree of permanent impairment range			
0%	2,219	1,939	-12.6%
0.1% - 4.9%	2,922	2,304	-21.1%
5% - 9.9%	2,407	1,964	-18.4%
10% - 14.9%	991	811	-18.2%
15% - 19.9%	326	320	-1.8%
>=20%	444	450	1.4%

For 2014-15, 10.1% of claims were finalised with a permanent impairment. Of these, the majority of claims (94.2%) had a WRI/DPI of less than 20% and 24.9% were calculated as having a 0% impairment.

Return to work (RTW) outcomes

Returning an injured worker to the same job with the same employer is the best outcome which can be achieved on a claim. The following figure analyses the RTW outcome of claims reported at the time the claim closed. As the following figure illustrates, this is the outcome achieved in most cases, with 90.9% 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 13-14 and 14-15

	13-14		14-15	
	Number	% of time lost claims	Number	% of time lost claims
Fit for work: same job/tasks with same employer	45,688	93.0%	39,442	90.9%
Fit for work: same job/tasks with different employer	309	0.6%	372	0.9%
Fit for work: different job/tasks with same employer	297	0.6%	340	0.8%
Fit for work: different job/tasks with different employer	999	2.0%	927	2.1%
Fit for work: no job	501	1.0%	610	1.4%
Fit for work: worker does not return	615	1.3%	870	2.0%
Not fit for work	629	1.3%	736	1.7%
Alternative outcome not claim related	92	0.2%	87	0.2%
Total	49,130	100.0%	43,384	100.0%

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

In 2014-15, 94.7% of injured workers returned to some type of employment (96.3% in 2013-14). In a small number of cases, the worker is deemed fit to return to work but there is no job for the worker to return to (1.4% of time lost claims) or the worker chooses not to return (2.0% of claims).

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

29 Return to work status of finalised time lost claims with/without a permanent impairment assessed 13-14 and 14-15

	13-14			14-15		
	PI Assessed			PI Assessed		
	% No	% Yes	Number	% No	% Yes	Number
Fit for work: same job/tasks with same employer	87.5%	12.5%	45,688	89.5%	10.5%	39,442
Fit for work: same job/tasks with different employer	79.0%	21.0%	309	81.2%	18.8%	372
Fit for work: different job/tasks with same employer	43.4%	56.6%	297	54.4%	45.6%	340
Fit for work: different job/tasks with different employer	63.0%	37.0%	999	62.9%	37.1%	927
Fit for work: no job	41.9%	58.1%	501	47.5%	52.5%	610
Fit for work: worker does not return	42.9%	57.1%	615	53.3%	46.7%	870
Not fit for work	21.6%	78.4%	629	29.9%	70.1%	736
Alternative outcome not claim related	63.0%	37.0%	92	36.8%	63.2%	87
Total	84.8%	15.2%	49,130	86.2%	13.8%	43,384

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

Workers with claims assessed for permanent impairment are less likely to return to the same job with the same employer. In 2014-15, 10.5% of workers returning to the same job with the same employer had a permanent impairment assessed.

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

30 Return to work status of finalised time lost claims by injury nature 13-14 and 14-15

	13-14			14-15		
	Physical only %	Psych only %	Psych & Physical %	Physical only %	Psych only %	Psych & Physical %
Fit for work: same job/tasks with same employer	94.2%	72.7%	59.2%	92.5%	64.0%	51.1%
Fit for work: same job/tasks with different employer	0.6%	1.6%	0.6%	0.8%	2.3%	1.4%
Fit for work: different job/tasks with same employer	0.5%	1.7%	2.0%	0.7%	2.5%	3.3%
Fit for work: different job/tasks with different employer	1.8%	8.5%	7.2%	1.9%	6.7%	7.4%
Fit for work: no job	0.9%	2.4%	6.3%	1.2%	4.3%	6.8%
Fit for work: worker does not return	1.1%	4.5%	7.3%	1.7%	7.8%	10.7%
Not fit for work	0.8%	8.1%	16.1%	1.1%	11.8%	16.5%
Alternative outcome not claim related	0.2%	0.5%	1.3%	0.1%	0.6%	2.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Number	47,014	1,215	901	41,367	1,009	1,008

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

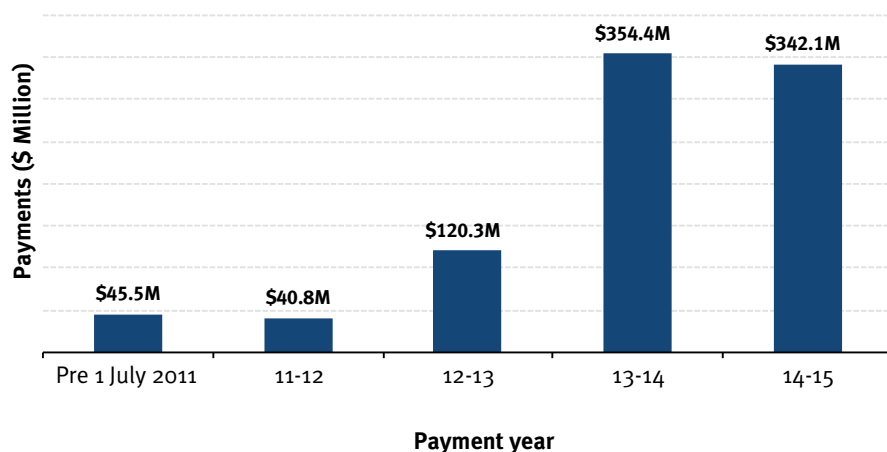
Workers having claims with both a physical and psychological or psychiatric component are the least likely to return to employment and 16.5% in 2014-15 were not fit for work at the end of their claim.

Average claim costs

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

The figure below illustrates the payments made on claims finalised in 2014-15. Over 60% of the payments for these claims occurred in previous years. Only 37.9% of the statutory payments made on claims finalised in 2014-15 were also paid in that financial year. A further 39.2% of payments were made in the 2013-14 financial year. The remaining 22.9% of the payments were made in 2012-13 or earlier.

31 Payments by payment year for claims finalised in 14-15



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 5.1% from \$10,253 in 2013-14 to \$10,780 in 2014-15).

The figure below shows the number of claims finalised in the past two years, and the average claim costs by claim type for time lost claims and medical expense only claims. These two claims types represent 96.6% of all finalised claims during 2014-15.

32 Finalised claims and average claim costs by claim type 13-14 and 14-15

Claim type	Number of claims			Average claim cost		
	13-14	14-15	Variance	13-14	14-15	Variance
Time lost claim	49,136	43,397	-11.7%	\$16,358	\$17,228	5.3%
Medical expenses only claim	35,072	30,901	-11.9%	\$1,700	\$1,725	1.5%
Total	84,208	74,298	-11.8%	\$10,253	\$10,780	5.1%

The median claim costs for time lost and medical expense only claims has increased from \$1,309 in 2013-14 to \$1,388 in 2014-15.

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

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

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

33 Changes in average finalised claim costs and economic indices 14-15

Indicator	% change from previous year
Average finalised time lost claim cost	5.3%
Average finalised medical expense only claim cost	1.5%
Consumer price index	
Average of all groups, Brisbane (excluding GST) ^a	1.4%
Health, Brisbane (excluding GST) ^b	4.5%
Full time adult ordinary earnings ^c	2.5%

^a Australian Bureau of Statistics, Consumer Price Index, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2014, Tables 1 and 2 CPI - all groups, index numbers and percentages changes, Index Numbers; All groups; Brisbane. [Percentage change from March 2014 to March 2015].

^b Australian Bureau of Statistics, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2015, Table 5 CPI - groups, index numbers by capital city, Index Numbers; Health; Brisbane. [Percentage change from March 2014 to March 2015].

^c Australian Bureau of Statistics, average weekly earnings, Australia Cat No 6302.0 - Average weekly earnings Australia, Nov 2014. Table 13C Average weekly earnings Queensland (dollars) - Original Earnings ; Queensland ; Persons ; Full Time ; Adult ; Ordinary time earnings. [Percentage change from November 2013 to November 2014].

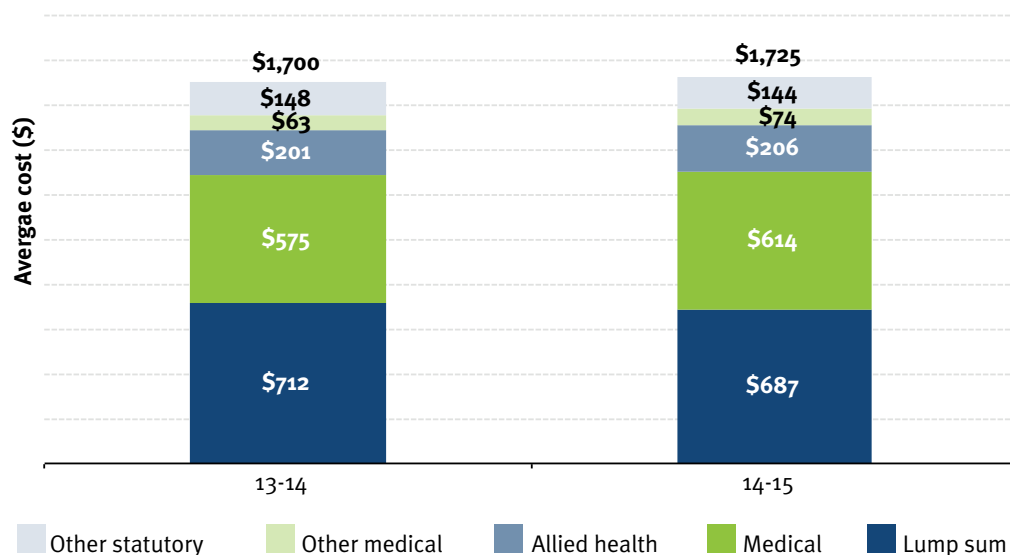
Average finalised medical expense only claim costs

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 just 1.5% from \$1,700 in 2013-14 to \$1,725 in 2014-15.

The breakdown of the average cost for 2014-15 shows 39.8% of the cost is made up of lump sum payments followed by medical and rehabilitation payments of 35.6%. Allied health accounted for 12.0% and other statutory payments account for 8.4%. The remaining 4.3% of the average cost is made up of other medical payments (including hospitalisation).

34 Average finalised medical expense only claim costs by payment type 13-14 and 14-15



Average finalised time lost claim durations

Average finalised time lost claim durations are calculated using finalised time lost claims over a financial year. The number of finalised time lost claims decreased by 11.7% from 49,136 in 2013-14 to 43,397 in 2014-15.

Durations for finalised time lost claims including the excess paid period by the employer (where applicable) have increased by 2.7%, from 47.8 days in 2013-14 to 49.1 days in 2014-15.

Over 70% of time lost claims have 40 or less workdays lost (71.7%), while the median workdays lost for all time lost claims is 12 days. This illustrates how the small number of long term claims impact the average duration. Only 10.1% of time lost claims had more than 130 workdays lost. It is at the 26 week point that the level of compensation benefits payable first begins to decrease (section 150, the Act).

35 Number of time lost claims by workdays lost time band 13-14 and 14-15

Workdays lost	13-14		14-15	
	Number of claims	% of claims	Number of claims	% of claims
1 - 5 days	17,047	34.7%	15,055	34.7%
6 - 10 days	6,230	12.7%	5,448	12.6%
11 - 20 days	6,018	12.2%	5,140	11.8%
21 - 40 days	6,131	12.5%	5,471	12.6%
41 - 65 days	4,047	8.2%	3,649	8.4%
66 - 130 days	4,688	9.5%	4,235	9.8%
131 - 260 days	3,107	6.3%	2,638	6.1%
> 260 days	1,868	3.8%	1,761	4.1%
Total time lost claims	49,136	100.0%	43,397	100.0%

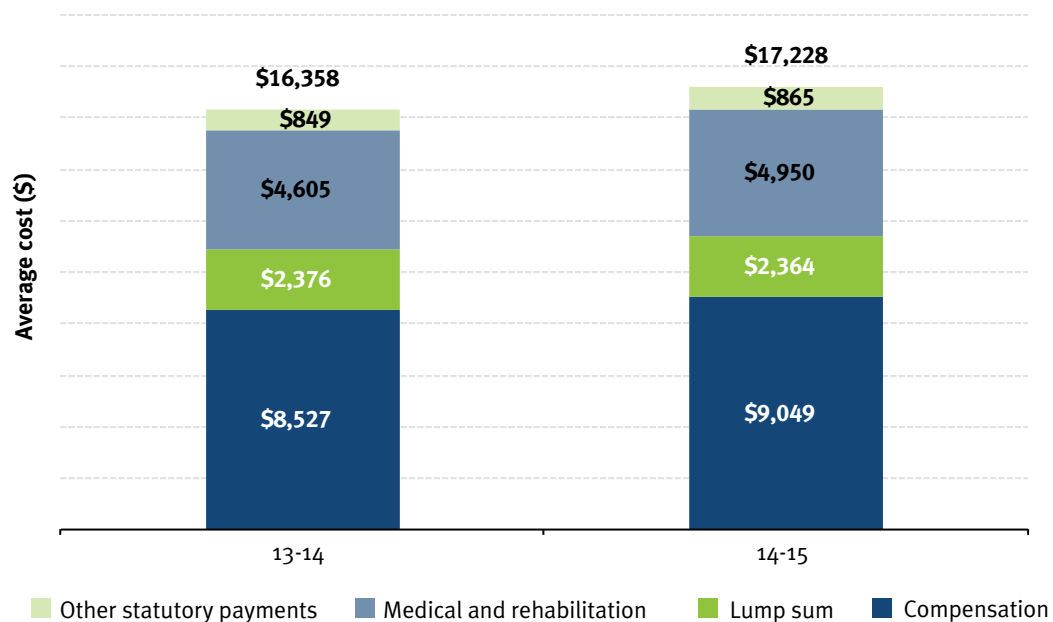
Average finalised time lost claim costs

The average cost of finalised time lost claims has increased by 5.3% from \$16,358 in 2013-14 to \$17,228 in 2014-15.

The breakdown of the average cost in 2014-15 shows over half (52.5%) of the cost is made up of weekly compensation payments.

In 2014-15, medical and rehabilitation payments accounted for over a quarter (28.7%) of the average cost and lump sum payments accounted for 13.7%. The remaining 5.0% of the average cost was made up of other statutory payments.

36 Average finalised time lost claim costs by payment type 13-14 and 14-15

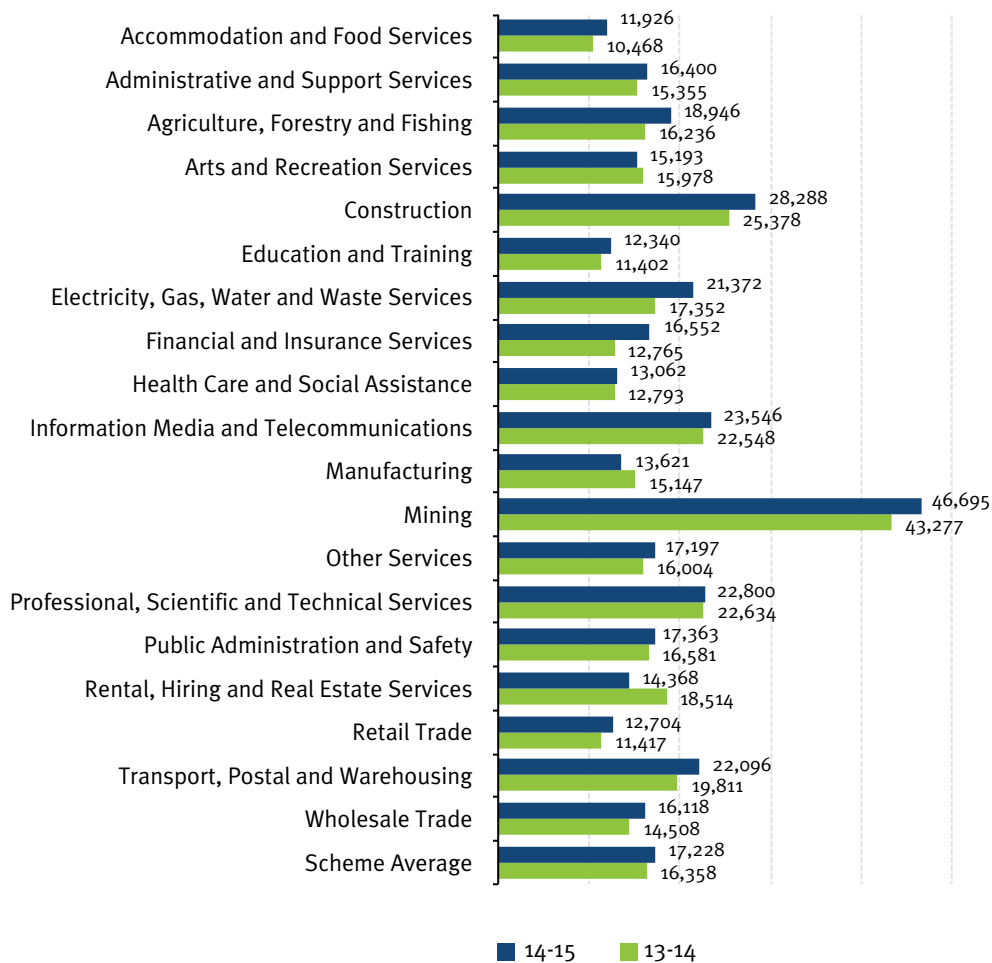


Average cost by industry

Of all industry claims those from the mining industry had the highest average finalised time lost claim cost (\$46,695) partially due to the higher wages paid in the industry. The Australian average weekly earnings (full time adult ordinary time earnings) for workers in the mining industry of \$2,495 are the highest of all industries (Source: ABS, Average Weekly Earnings, Cat No. 6302.0, November 2014, table 10G. Average Weekly Earnings, Industry, Australia (Dollars) - Original - Persons, Full Time Adult Ordinary Time Earnings).

Similarly, industries that tended to have lower average finalised time lost claim cost – for example, accommodation and food services and retail trade – also had the lowest Australian average weekly earnings of all industries (\$1,037 and \$1,064 respectively).

37 Average finalised time lost claim costs by industry 13-14 and 14-15



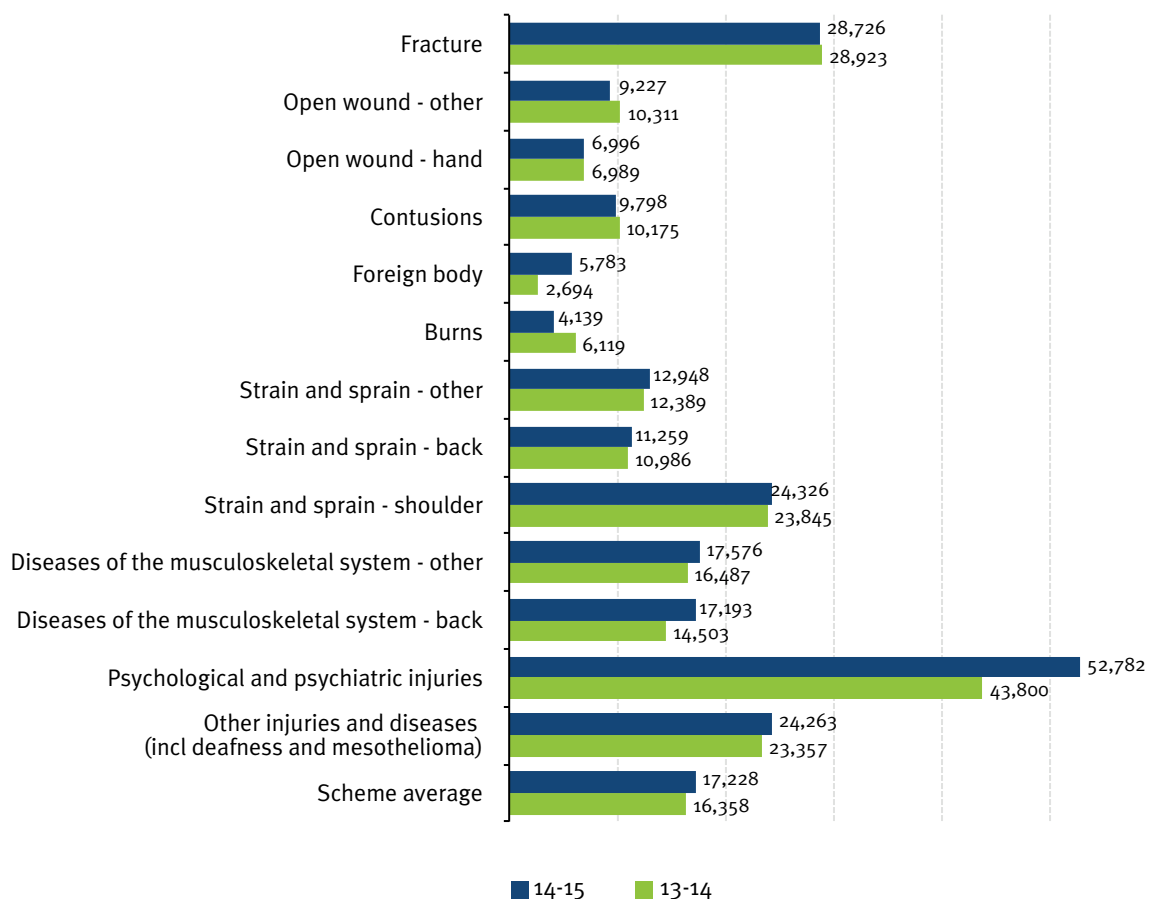
Average cost by injury type

Although psychological and psychiatric injury claims account for only 2.5% of all time lost claims finalised, they are the most expensive with an average finalised time lost claim cost of \$52,782 in 2014-15.

In 2014-15, the average duration of a psychological or psychiatric injury claim was 169.7 days (149.9 days in 2013-14) compared with the overall scheme average of 49.1 days. It is the long duration of psychological and psychiatric injury claims that impacts on the average finalised time lost claim cost for these claims.

The second most expensive injury type was fractures with an average cost of \$28,726 (\$28,923 in 2013-14).

38 Average finalised time lost claim cost by injury type 13-14 and 14-15



Claims for damages at common law

- Common law lodgements have decreased over the last year.
- The majority of lodgements are for injuries that occurred two to three years prior.
- Just under two thirds (62.3%) of common law lodgements have a work related impairment of less than 5%.
- Psychological and psychiatric injury claims represent 10.0% of common law lodgements. They represent only 4.7% of statutory claim lodgements.
- In 2014-15, the average settlement cost of a finalised common law claim was \$138,257.

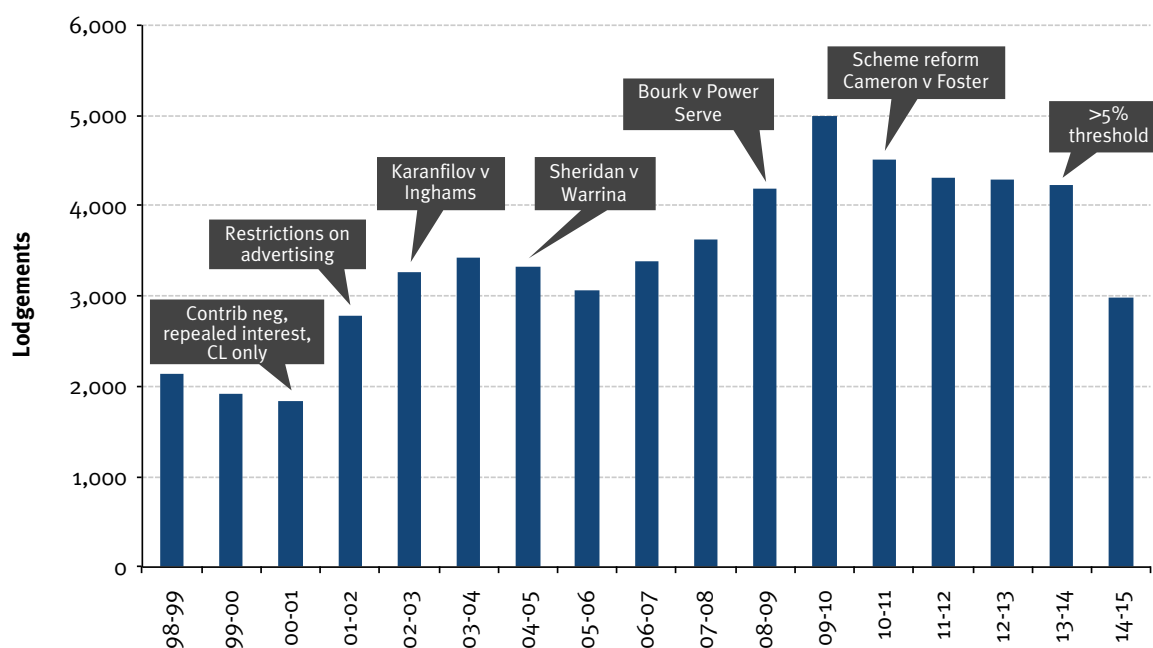
This section reports information about claims for damages at common law (common law claims).

The legislative amendments in 2013 introduced a threshold to restrict access to common law damages. This threshold requires workers with injuries on or after 15 October 2013 to have a degree of permanent impairment (DPI) greater than 5% to access common law damages.

Lodgements

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

39 Common law lodgements history 98-99 to 14-15



In 2014-15, common law claim lodgements decreased by 29.3% driven by the legislative amendments in 2013 (from 4,226 in 2013-14 to 2,986 in 2014-15). The figure below shows the common law claim lodgements over the past eight years, by the date of injury.

40 Common law claim lodgements 07-08 to 14-15 by injury year

Injury year	Lodgement year							
	07-08	08-09	09-10	10-11	11-12	12-13	13-14	14-15
Pre 1 July 1999	90	107	113	53	41	27	48	17
99-00	15	7	6	3	2	4	3	2
00-01	10	5	8	7	2	2	0	1
01-02	15	16	8	4	7	2	1	1
02-03	19	12	11	9	9	3	3	2
03-04	59	25	17	11	9	6	5	7
04-05	891	43	33	32	12	8	3	2
05-06	1,210	917	67	25	24	12	6	5
06-07	1,168	1,306	971	65	40	19	5	4
07-08	144	1,527	1,575	1,037	65	24	16	12
08-09		232	1,839	1,371	921	43	22	13
09-10			340	1,673	1,348	908	53	19
10-11				219	1,624	1,379	948	46
11-12					210	1,641	1,436	864
12-13						223	1,529	1,238
13-14							148	714
14-15								39
Total	3,621	4,197	4,988	4,509	4,314	4,301	4,226	2,986

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

The figure below shows the breakdown of common law claim lodgements in 2014-15 by the injured worker's WRI/DPI.

41 Common law claim lodgements by WRI/DPI 14-15

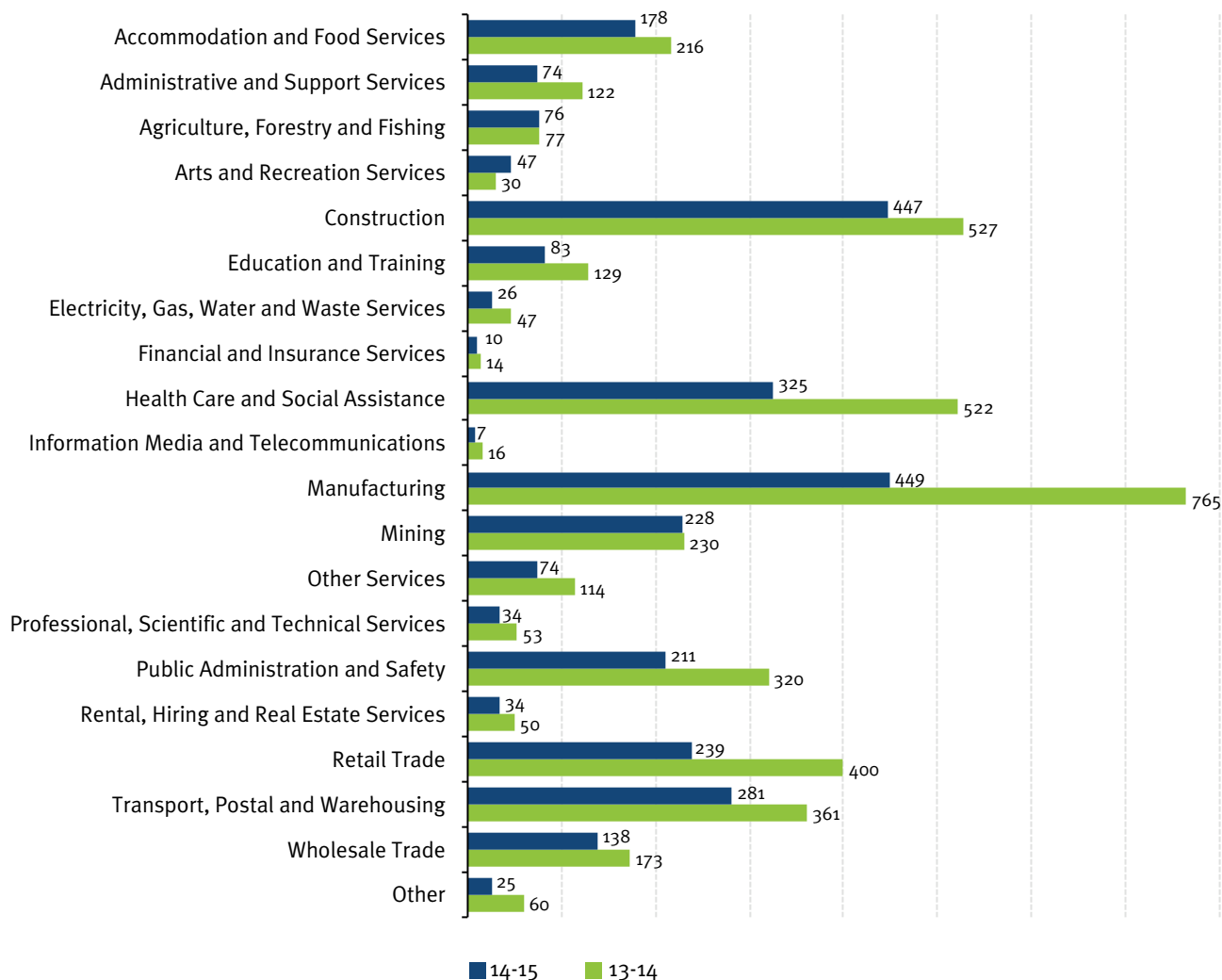
WRI/DPI	Common law lodgements	% of common law lodgements
No impairment assessed	625	20.9%
0%	636	21.3%
0.1% - 4.9%	599	20.1%
5% - 9.9%	626	21.0%
10% - 14.9%	283	9.5%
15% - 19.9%	93	3.1%
>=20%	124	4.2%
Total	2,986	100.0%

If the injured worker's work related impairment is less than 20%, the worker has to make an irrevocable decision to either accept a payment of the statutory lump sum compensation for the injury or seek damages at common law. If the work related impairment is 20% or more, the injured worker can accept a lump sum payment and seek damages. Only a small proportion of common law claims (4.2%) 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 scheme, with each industry accounting for 15.0% of all common law claim lodgements in 2014-15.

42 Common law claim lodgements by industry 13-14 and 14-15



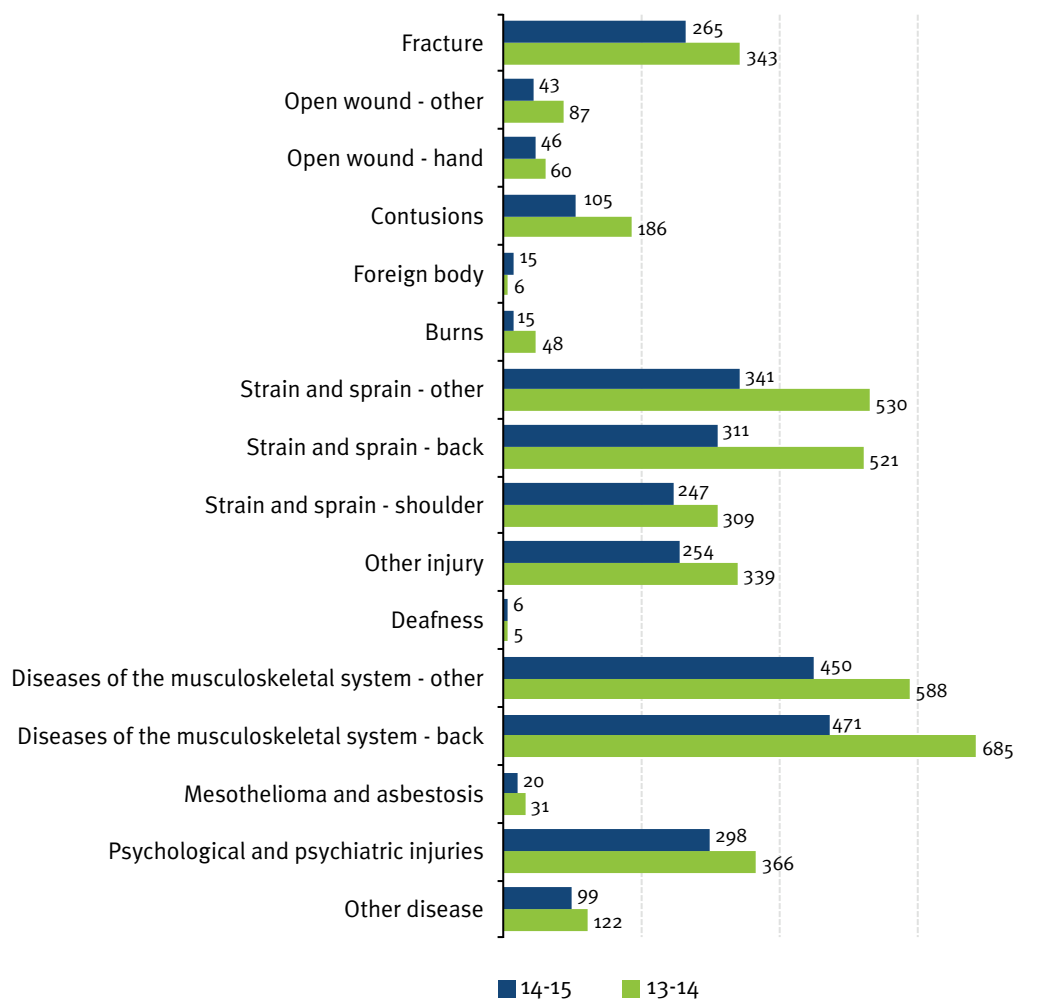
For industry "Other", this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self employed, working directors) and volunteers.

Injury type

Strain and sprain injury claims accounted for just over 30% of all common law claim lodgements in 2014-15.

Although psychological and psychiatric injury claims represented only 4.7% of statutory claim lodgements, they represented 10.0% of all common law claim lodgements in 2014-15.

43 Common law claim lodgements by injury type 13-14 and 14-15



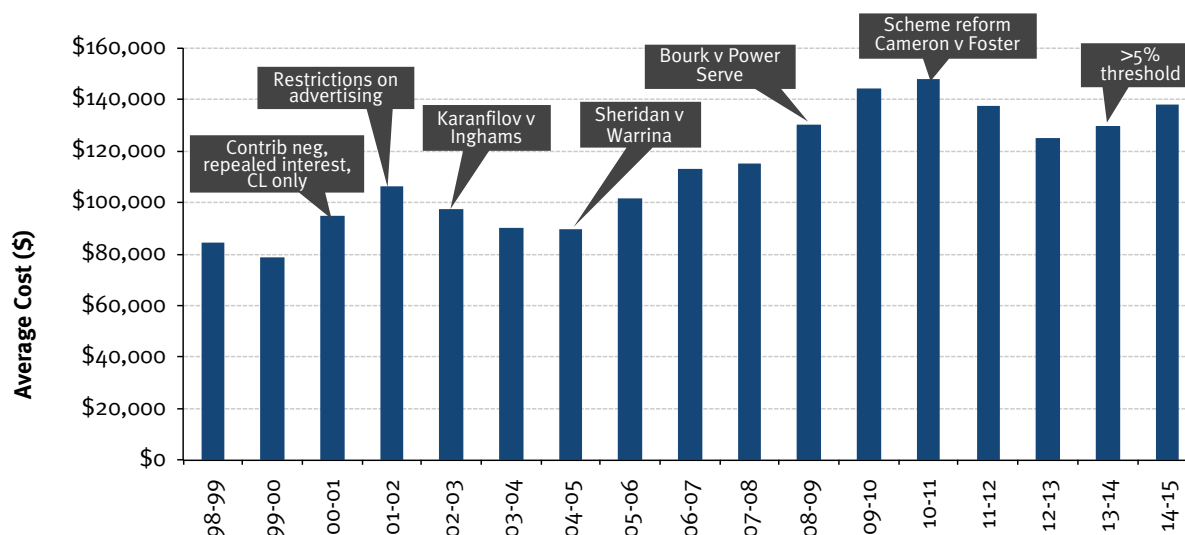
Total common law payments

In 2014-15, common law claims cost a total of \$554.3 million. This represented a 2.1% decrease from the 2013-14 cost of \$566.0 million.

Average costs

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

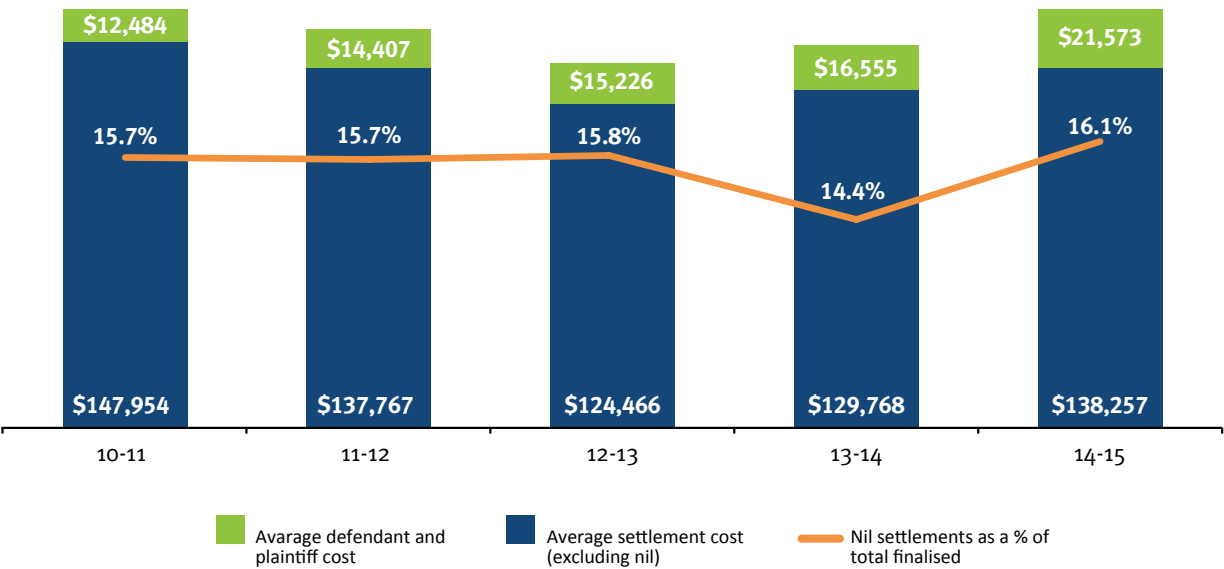
44 Common law average damages settlement history 98-99 to 14-15



Over the past year, the average settlement cost of a finalised common law claim (excluding nil settlements) has increased 6.5% from \$129,768 in 2013-14 to \$138,257 in 2014-15. The average defendant and plaintiff cost has increased by 30.3% (\$16,555 in 2013-14 to \$21,573 in 2014-15). It should be noted that restrictions on awarding of plaintiff costs were introduced for injuries occurring on or after 1 January 1996.

In 2014-15, there were 638 common law claims finalised with a nil settlement.

45 Average costs for finalised common law claims by payment type 10-11 to 14-15



Heads of damage

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

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

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

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

46 Heads of damage average cost 13-14 and 14-15

	13-14		14-15	
	\$	%	\$	%
General damages	20,756	11.4%	18,743	9.3%
Past economic loss	40,202	22.1%	46,512	23.2%
Future economic loss	97,649	53.7%	106,644	53.2%
Rehabilitation	21,116	11.6%	23,699	11.8%
Gratuitous care	976	0.5%	2,986	1.5%
Other	1,177	0.6%	2,017	1.0%
Gross settlement	181,876	100.0%	200,601	100.0%

Average timeframes

For claims lodged in the financial year, the average time from date of injury to lodgement of a common law claim increased by 10.1% (2.18 years in 2013-14; 2.40 years in 2014-15).

For claims finalised in the financial year, the average time from the lodgement of a common law claim to finalisation has remained stable at 1.10 years in 2014-15 (1.10 years in 2013-14).

Review of insurer decisions

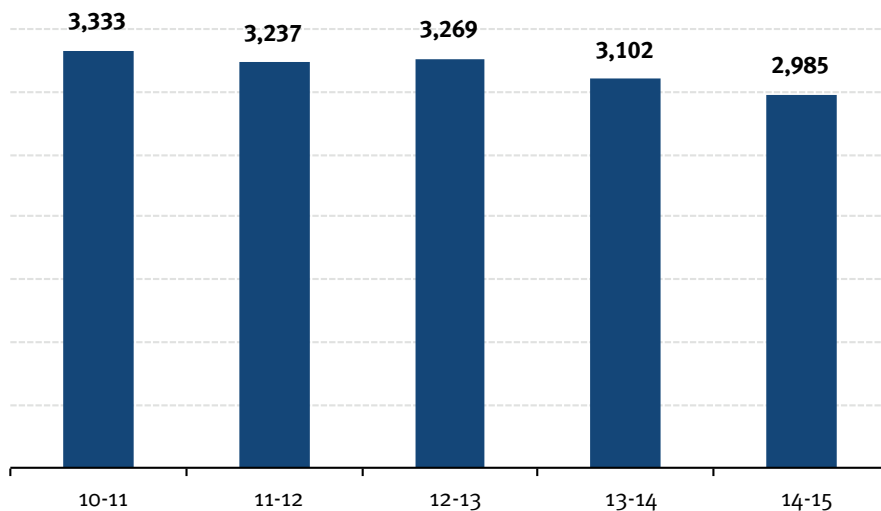
Applications received

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

Review applications received have decreased slightly (3.8%) in 2014-15, down from 3,102 in 2013-14 to 2,985 in 2014-15.

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

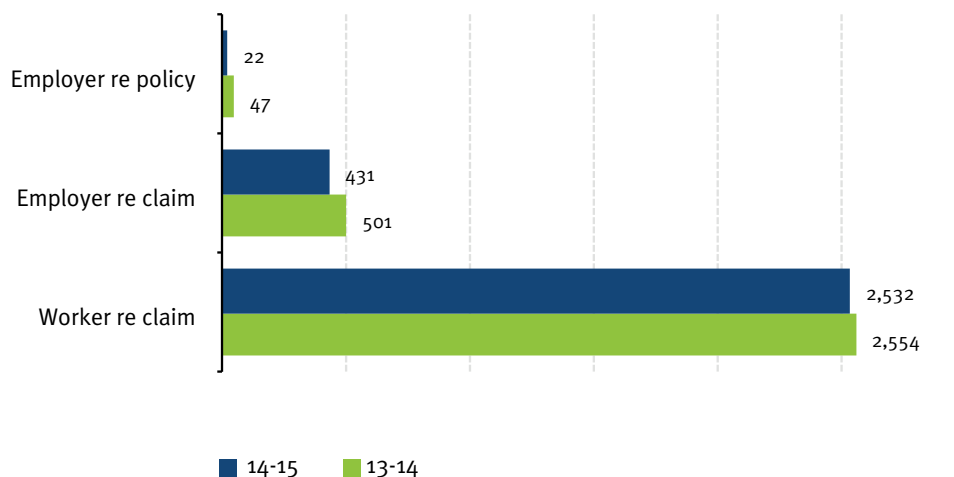
47 Review applications received 10-11 to 14-15



Types of applications

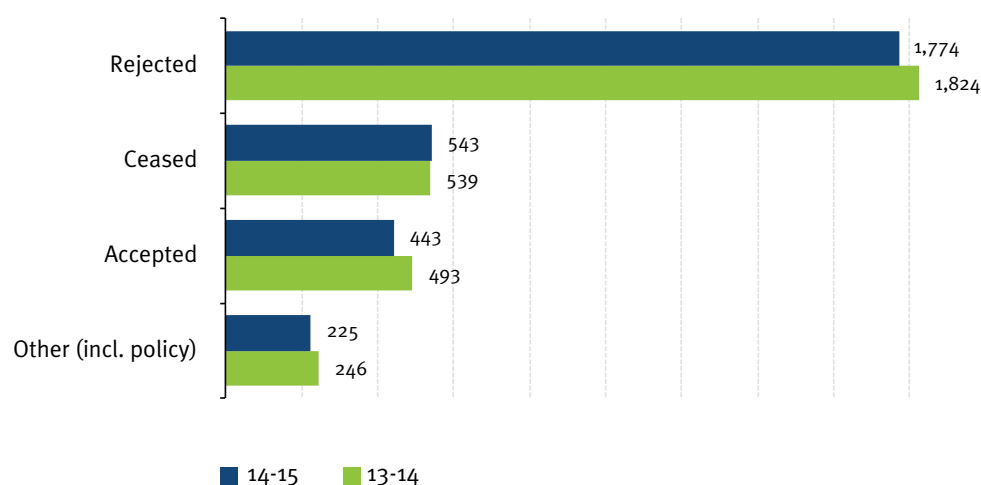
There was little change to the distribution of the type of review applications received in 2014-15 compared to the previous financial year. Of the applications lodged, 84.8% were lodged by workers, 14.4% by employers, and the remaining 0.7% of applications were lodged by employers having a policy decision reviewed.

48 Review applications received by type 13-14 and 14-15



Over half (59.4%) of all review applications received in 2014-15 related to the insurer decision to reject the claim, 14.8% were lodged after the claim had been accepted and a further 18.2% were following the cessation of the claim.

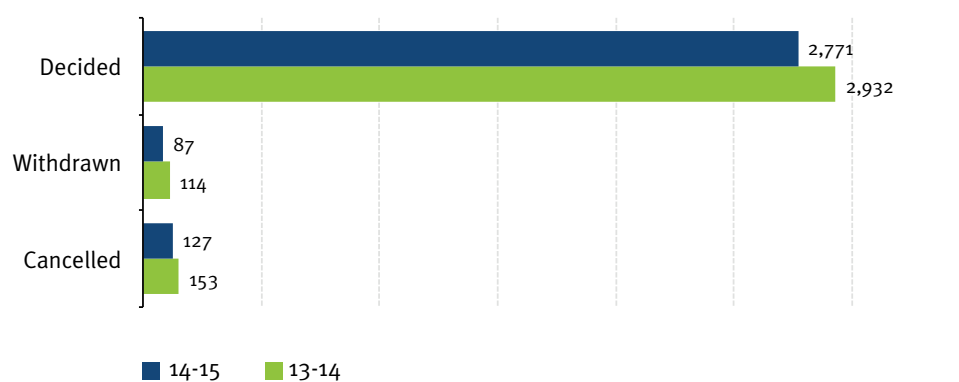
49 Review applications received by insurer decision 13-14 and 14-15



Outcomes

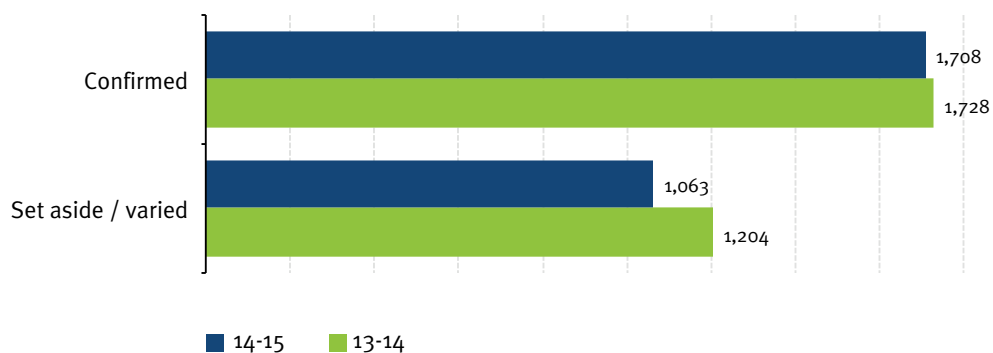
In 2014-15, 92.8% of reviews finalised were decided (as compared to 91.7% in 2013-14), 4.3% were cancelled (4.8% in 2013-14), and the remaining 2.9% were withdrawn (3.6% in 2013-14).

50 Review outcomes 13-14 and 14-15



In 2014-15, the original decision of the insurer was confirmed by the Review Unit in 61.6% of review decisions made, compared to 58.9% in 2013-14.

51 Decided review outcomes 13-14 and 14-15



Appeals of review decisions

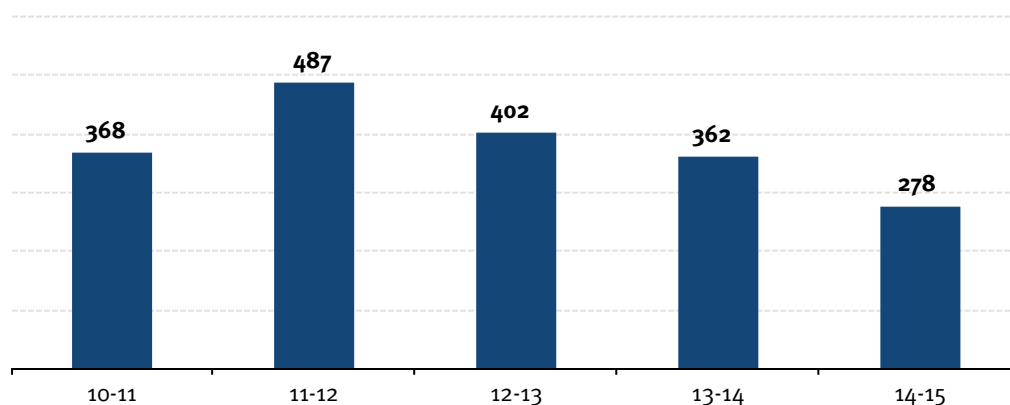
Appeal lodgements

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

In 2014-15, 278 appeals were lodged with the Queensland Industrial Relations Commission (QIRC). Of these, 16 further appealed in the Industrial Court.

Appeal lodgements have experienced a decrease of 23.2% in 2014-15 compared with 2013-14.

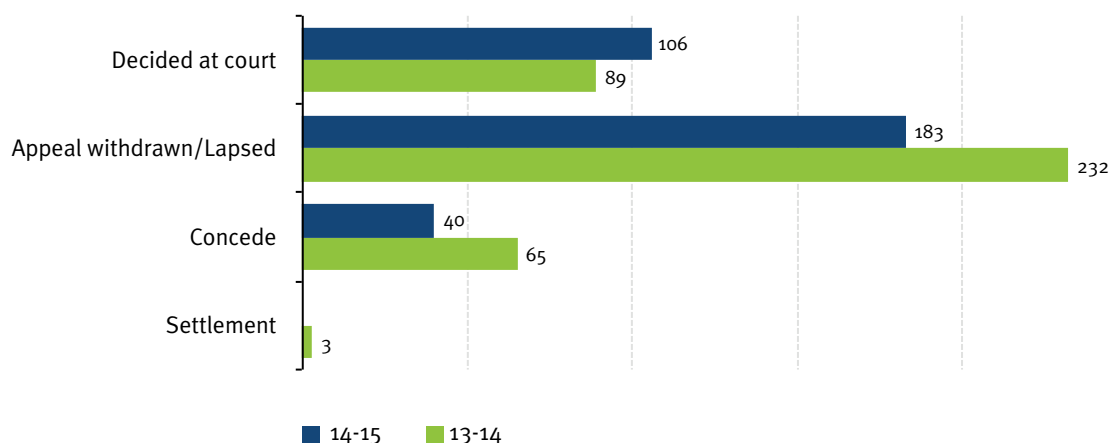
52 Appeals lodged 10-11 to 14-15



Appeal outcomes

In 2014-15, 67.8% of appeals were finalised before reaching the Industrial Relations Commission. Of these, 82.1% of cases were withdrawn by the appellant and 17.9% were settled or conceded.

53 Appeals finalised by outcome 13-14 and 14-15



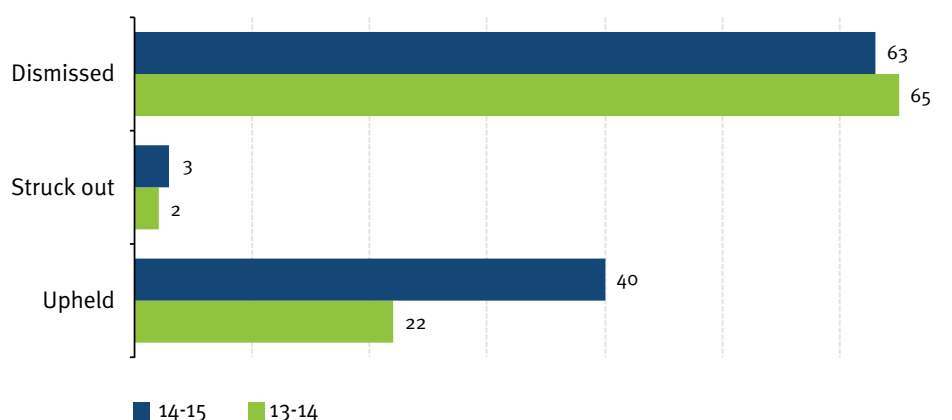
Non-judicial resolution

In 2014-15, 223 appeals were finalised before reaching the court or commission. This is a decrease of 25.7% when compared to 300 in 2013-14.

Judicial resolution

The total number of cases determined by a court or commission increased by 19.1%, from 89 in 2013-14 to 106 in 2014-15. Of these, 66 cases (62.3%) were dismissed or struck-out by the magistrate and 40 cases (37.7%) were upheld in favour of the appellant.

54 Appeals finalised judicially by outcome 13-14 and 14-15



Medical assessment tribunals (MAT)

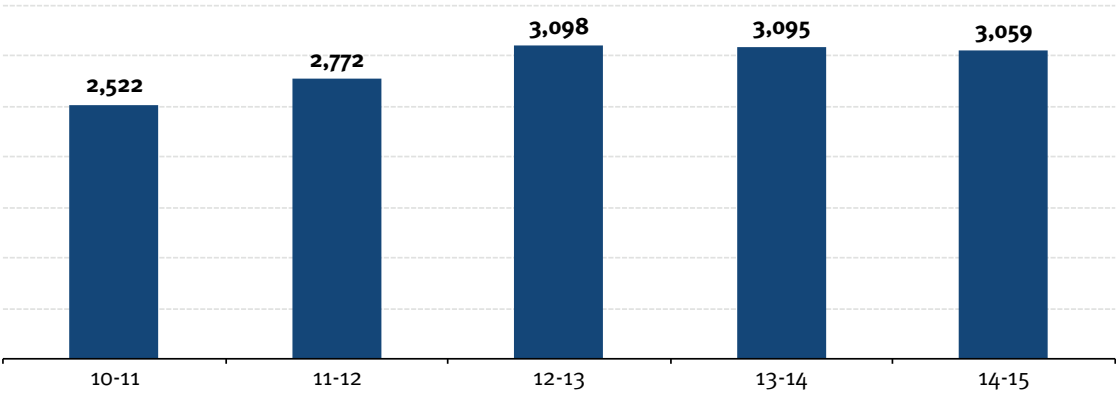
Referrals

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

In 2014-15, 3,059 cases were referred to a MAT. This is consistent with the 3,095 cases referred in 2013-14.

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

55 MAT referrals received 10-11 to 14-15



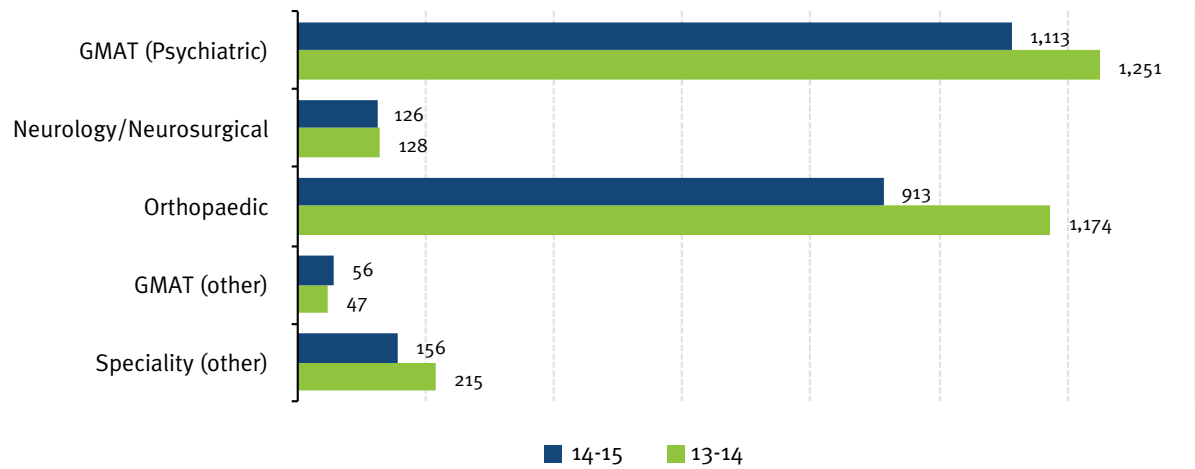
Cases determined

In 2014-15, 2,364 cases were determined by a MAT. This represented a 16.0% decrease from 2013-14 (2,815 determinations).

Of the cases heard in 2014-15, 47.1% (1,113) were heard at a General Medical Assessment Tribunal – Psychiatric compared to 44.4% (1,251) in 2013-14.

A further 38.6% (913) of cases in 2014-15 were determined at an Orthopaedic Tribunal as compared to 41.7% (1,174) in 2013-14, representing a decrease of 22.2%.

56 Cases determined by tribunal type 13-14 and 14-15



The figure below shows the average number of cases heard per tribunal in 2013-14 and 2014-15.

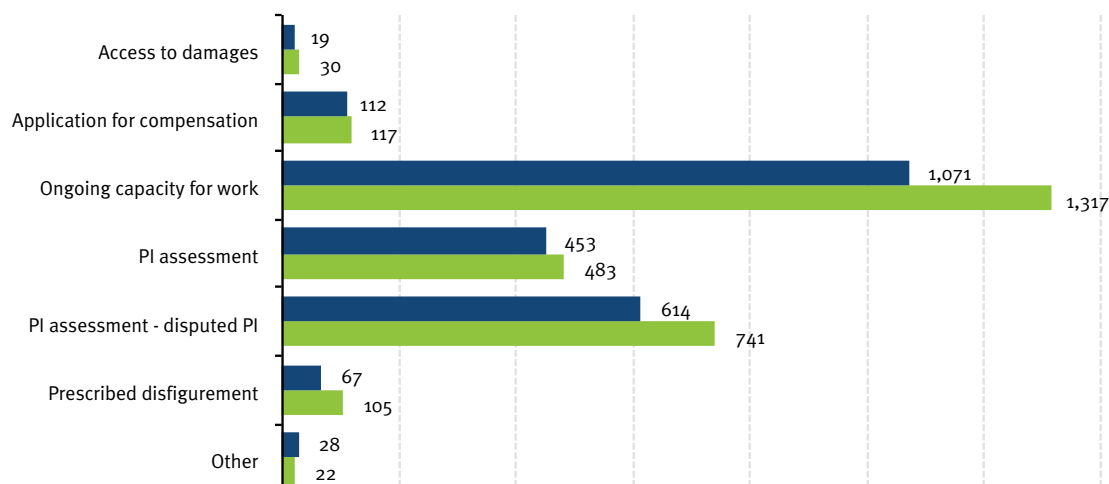
57 Average number of cases heard per tribunal by tribunal type 13-14 and 14-15

Tribunal	Average number of cases heard per tribunal	
	13-14	14-15
GMAT (Psychiatric)	2.6	2.0
Neurology/Neurosurgical	1.9	1.9
Orthopaedic	2.4	1.9
GMAT (other)	1.7	1.6
Speciality (other)	3.6	2.7
Total	2.5	2.0

Referral reason

In 2014-15, 45.1% of the cases determined by the MAT were for permanent impairment (PI) assessment, compared to 43.5% in 2013-14.

58 Cases determined by referral reason 13-14 and 14-15



There has been a decrease in the proportion of referrals for assessment of ongoing capacity for work (down from 46.8% in 2013-14 to 45.3% in 2014-15).

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 13-14 and 14-15

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Variance	13-14	14-15	Variance	13-14	14-15	Variance	13-14	14-15	Variance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Accommodation and Food Services	5,936	5,890	-0.8%	33.7	34.8	3.3%	10,468	11,926	13.9%	42.0	46.8	11.4%
Accommodation	1,726	1,479	-14.3%	8.5	9.5	11.9%	10,361	12,306	18.8%	39.8	45.6	14.6%
Food and Beverage Services	3,989	4,182	4.8%	24.3	23.7	-2.5%	10,479	11,907	13.6%	42.8	47.7	11.4%
Labour Hire	221	229	3.6%	0.9	1.6	83.1%	11,217	7,850	-30.0%	45.0	35.1	-22.0%
Administrative and Support Services	2,660	2,412	-9.3%	23.0	22.1	-3.8%	15,355	16,400	6.8%	52.8	61.0	15.5%
Administrative Services	748	653	-12.7%	5.2	4.8	-8.0%	18,848	18,738	-0.6%	55.1	63.5	15.2%
Building Cleaning, Pest Control and Other Support Services	1,835	1,708	-6.9%	17.3	17.2	-0.7%	14,602	15,792	8.1%	53.0	60.2	13.6%
Labour Hire	77	51	-33.8%	0.5	0.1	-71.6%	9,420	22,568	139.6%	22.5	79.1	251.6%
Agriculture, Forestry and Fishing	2,400	2,179	-9.2%	23.7	20.4	-14.2%	16,236	18,946	16.7%	51.3	53.5	4.3%
Agriculture	1,713	1,731	1.1%	18.7	16.5	-11.9%	16,041	19,032	18.6%	50.7	51.6	1.8%
Agriculture, Forestry and Fishing Support Services	495	226	-54.3%	3.5	2.2	-36.6%	21,065	21,320	1.2%	66.3	66.8	0.8%
Aquaculture	35	44	25.7%	0.2	0.3	37.2%	25,297	16,369	-35.3%	40.2	50.6	25.9%
Fishing, Hunting and Trapping	32	33	3.1%	0.3	0.3	-14.5%	16,591	17,861	7.7%	63.9	78.1	22.2%
Forestry and Logging	15	9	-40.0%	0.5	0.4	-6.8%	23,721*	62,784*	164.7%	74.0*	208.2*	181.4%
Labour Hire	110	136	23.6%	0.6	0.7	19.4%	7,633	8,847	15.9%	30.1	33.2	10.3%
Arts and Recreation Services	1,340	1,392	3.9%	12.1	12.3	1.9%	15,978	15,193	-4.9%	53.1	53.7	1.1%
Creative and Performing Arts Activities	162	140	-13.6%	1.1	0.7	-36.0%	11,647	17,618	51.3%	46.0	65.7	42.8%
Gambling Activities	157	196	24.8%	0.9	1.0	6.0%	11,962	8,931	-25.3%	35.8	26.3	-26.5%

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Heritage Activities	126	170	34.9%	0.6	0.7	25.2%	10,106	7,808	-22.7%	41.1	33.4	-18.7%
Sports and Recreation Activities	893	882	-1.2%	9.5	9.9	4.2%	17,512	17,216	-1.7%	57.3	60.3	5.2%
Labour Hire	2	4	100.0%	0.0	0.1	48.4%	91,811*	29,587*	-67.8%	176.5*	157.0*	-11.0%
Construction	10,200	9,785	-4.1%	123.7	134.2	8.5%	25,378	28,288	11.5%	66.7	69.4	4.0%
Building Construction	1,398	1,396	-0.1%	17.8	19.3	8.7%	30,627	26,468	-13.6%	72.8	69.0	-5.2%
Construction Services	5,849	5,980	2.2%	67.2	73.2	8.9%	24,589	25,439	3.5%	68.2	65.8	-3.5%
Heavy and Civil Engineering Construction	2,180	1,721	-21.1%	30.8	34.4	11.7%	26,220	39,109	49.2%	61.3	80.7	31.6%
Labour Hire	773	688	-11.0%	7.9	7.2	-8.6%	19,005	31,825	67.5%	52.8	76.9	45.6%
Education and Training	6,169	6,504	5.4%	35.5	43.7	23.0%	11,402	12,340	8.2%	33.4	32.3	-3.3%
Adult, Community and Other Education	198	187	-5.6%	1.3	1.5	7.9%	25,307	16,319	-35.5%	67.6	48.5	-28.3%
Preschool and School Education	4,267	4,473	4.8%	25.1	31.9	26.9%	12,026	12,227	1.7%	34.3	31.7	-7.6%
Tertiary Education	1,694	1,831	8.1%	9.1	10.3	13.7%	8,561	12,155	42.0%	27.8	31.7	14.0%
Labour Hire	10	13	30.0%	0.0	0.1	1194.2%	2,656*	12,937*	387.1%	10.7*	35.5*	231.8%
Electricity, Gas, Water and Waste Services	1,279	1,180	-7.7%	10.0	11.2	12.8%	17,352	21,372	23.2%	41.1	47.4	15.3%
Electricity Supply	582	487	-16.3%	4.5	4.8	7.0%	16,989	22,135	30.3%	37.0	50.4	36.2%
Gas Supply	21	20	-4.8%	0.1	0.3	225.9%	12,114*	7,580*	-37.4%	20.3*	22.5*	10.8%
Waste Collection, Treatment and Disposal Services	395	409	3.5%	3.4	4.4	29.3%	19,230	22,101	14.9%	51.0	46.7	-8.4%
Water Supply, Sewerage and Drainage Services	214	203	-5.1%	1.4	1.1	-19.0%	17,917	21,141	18.0%	37.3	42.6	14.2%
Labour Hire	67	61	-9.0%	0.6	0.6	8.1%	8,336	16,414	96.9%	19.0	51.2	169.5%
Financial and Insurance Services	713	827	16.0%	5.0	5.9	18.3%	12,765	16,552	29.7%	42.1	38.9	-7.6%

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Auxiliary Finance and Insurance Services	144	124	-13.9%	0.9	1.4	49.2%	13,196	21,347	61.8%	43.3	48.2	11.3%
Finance	285	294	3.2%	2.2	3.0	34.3%	14,310	18,128	26.7%	51.1	45.5	-11.0%
Insurance and Superannuation Funds	278	405	45.7%	1.7	1.5	-13.3%	9,107	13,564	48.9%	25.9	30.0	15.8%
Labour Hire	6	4	-33.3%	0.1	0.0	-76.1%	54,365*	7,693*	-85.8%	153.8*	28.0*	-81.8%
Health Care and Social Assistance	11,499	11,545	0.4%	82.9	85.6	3.3%	12,793	13,062	2.1%	46.5	45.6	-1.9%
Hospitals	4,299	4,343	1.0%	35.1	37.3	6.1%	14,924	15,359	2.9%	48.5	47.1	-2.9%
Medical and Other Health Care Services	1,410	1,429	1.3%	11.2	9.9	-11.5%	13,579	13,854	2.0%	41.9	41.4	-1.2%
Residential Care Services	3,216	2,998	-6.8%	17.9	18.4	2.5%	10,446	9,923	-5.0%	45.7	44.1	-3.5%
Social Assistance Services	2,490	2,695	8.2%	17.4	18.9	8.8%	11,148	11,625	4.3%	44.9	45.8	2.0%
Labour Hire	84	80	-4.8%	1.3	1.1	-11.1%	18,778	28,001	49.1%	68.7	76.3	11.1%
Information Media and Telecommunications	407	506	24.3%	3.4	3.3	-2.1%	22,548	23,546	4.4%	61.2	60.4	-1.3%
Broadcasting (except Internet)	58	79	36.2%	0.5	0.3	-35.0%	12,784	14,589	14.1%	34.2	30.6	-10.5%
Internet Publishing and Broadcasting	0	0	-	0.0	-	-	12,853*	-	-	37.5*	-	-
Internet Service Providers, Web Search Portals and Data Processing Services	31	16	-48.4%	0.3	0.2	-24.8%	30,106	41,014*	36.2%	72.3	84.9*	17.4%
Library and Other Information Services	19	14	-26.3%	0.1	0.0	-62.4%	15,346*	9,639*	-37.2%	57.0*	30.1*	-47.2%
Motion Picture and Sound Recording Activities	135	248	83.7%	0.9	1.1	24.1%	16,273	24,563	50.9%	49.7	60.3	21.3%
Publishing (except Internet and Music Publishing)	105	71	-32.4%	0.7	0.6	-8.3%	21,433	18,131	-15.4%	51.7	52.8	2.1%
Telecommunications Services	49	63	28.6%	0.8	0.9	5.1%	37,959	38,096	0.4%	124.5	105.0	-15.7%

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Labour Hire	10	15	50.0%	0.0	0.1	129.1%	45,718*	6,207*	-86.4%	75.6*	18.5*	-75.5%
Manufacturing	14,391	13,596	-5.5%	89.8	85.8	-4.5%	15,147	13,621	-10.1%	39.7	36.2	-8.8%
Basic Chemical and Chemical Product Manufacturing	325	336	3.4%	2.9	2.5	-14.2%	21,083	15,811	-25.0%	50.8	44.3	-12.8%
Beverage and Tobacco Product Manufacturing	270	208	-23.0%	1.1	1.3	20.1%	14,634	16,998	16.2%	42.5	44.0	3.5%
Fabricated Metal Product Manufacturing	3,090	2,754	-10.9%	15.7	15.0	-4.9%	16,339	12,361	-24.3%	39.5	33.4	-15.4%
Food Product Manufacturing	3,552	3,442	-3.1%	21.9	21.5	-1.7%	11,896	12,334	3.7%	31.8	31.1	-2.2%
Furniture and Other Manufacturing	368	444	20.7%	3.2	3.1	-1.4%	20,064	18,207	-9.3%	62.5	44.8	-28.3%
Machinery and Equipment Manufacturing	1,276	1,172	-8.2%	8.5	7.5	-12.4%	15,043	18,183	20.9%	37.9	44.0	16.1%
Non-Metallic Mineral Product Manufacturing	705	677	-4.0%	7.1	5.8	-18.3%	24,216	21,182	-12.5%	57.8	54.0	-6.6%
Petroleum and Coal Product Manufacturing	93	88	-5.4%	0.7	0.9	24.5%	35,053	31,524	-10.1%	74.2	58.1	-21.7%
Polymer Product and Rubber Product Manufacturing	526	460	-12.5%	2.6	3.2	24.9%	10,971	12,722	16.0%	35.8	36.6	2.2%
Primary Metal and Metal Product Manufacturing	673	629	-6.5%	4.1	5.4	34.0%	22,716	15,391	-32.2%	50.8	38.9	-23.4%
Printing (including the Reproduction of Recorded Media)	180	178	-1.1%	1.2	1.0	-13.5%	14,206	8,304	-41.5%	42.7	23.5	-45.0%
Pulp, Paper and Converted Paper Product Manufacturing	164	133	-18.9%	0.8	1.2	55.2%	13,904	15,050	8.2%	26.5	29.8	12.5%
Textile, Leather, Clothing and Footwear Manufacturing	196	215	9.7%	1.4	1.2	-15.7%	17,057	19,077	11.8%	55.3	57.3	3.6%
Transport Equipment Manufacturing	1,384	1,112	-19.7%	7.8	6.4	-17.9%	14,275	11,808	-17.3%	36.8	31.9	-13.3%

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Wood Product Manufacturing	728	866	19.0%	5.7	5.5	-4.8%	17,014	11,821	-30.5%	48.2	36.0	-25.3%
Labour Hire	861	882	2.4%	5.3	4.4	-16.1%	13,801	11,141	-19.3%	41.7	38.9	-6.7%
Mining	2,656	2,350	-11.5%	46.9	44.1	-5.9%	43,277	46,695	7.9%	81.8	93.1	13.8%
Coal Mining	1,149	984	-14.4%	22.9	21.5	-6.3%	47,746	54,847	14.9%	80.2	95.7	19.3%
Exploration and Other Mining Support Services	511	341	-33.3%	8.8	7.8	-11.8%	41,304	43,025	4.2%	101.8	110.7	8.7%
Metal Ore Mining	485	550	13.4%	8.0	8.5	5.8%	40,307	44,480	10.4%	69.5	77.5	11.5%
Non-Metallic Mineral Mining and Quarrying	268	231	-13.8%	4.1	2.2	-46.0%	33,742	42,974	27.4%	74.4	84.9	14.1%
Oil and Gas Extraction	74	49	-33.8%	0.7	0.5	-22.0%	33,221	36,934	11.2%	75.4	97.7	29.6%
Labour Hire	169	195	15.4%	2.4	3.6	53.9%	48,073	31,118	-35.3%	67.8	73.6	8.6%
Other Services	3,280	2,723	-17.0%	21.5	21.1	-1.6%	16,004	17,197	7.5%	47.2	50.4	6.8%
Personal and Other Services	1,064	1,045	-1.8%	7.3	7.8	7.7%	14,485	15,513	7.1%	48.7	56.9	16.8%
Repair and Maintenance	1,637	1,425	-13.0%	12.3	12.1	-0.9%	18,022	19,016	5.5%	48.2	46.9	-2.7%
Labour Hire	579	253	-56.3%	2.0	1.2	-40.1%	11,130	12,706	14.2%	33.9	38.0	12.1%
Professional, Scientific and Technical Services	1,663	1,608	-3.3%	13.6	15.0	10.4%	22,634	22,800	0.7%	56.3	57.3	1.8%
Computer System Design and Related Services	117	129	10.3%	0.7	0.9	18.7%	13,137	17,568	33.7%	37.6	38.6	2.7%
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	1,525	1,464	-4.0%	12.4	13.9	12.5%	23,561	23,066	-2.1%	58.3	58.7	0.7%
Labour Hire	21	15	-28.6%	0.5	0.2	-58.6%	27,191*	31,544*	16.0%	60.1*	55.4*	-7.8%
Public Administration and Safety	6,868	6,675	-2.8%	63.2	64.0	1.2%	16,581	17,363	4.7%	45.5	45.6	0.2%
Defence	70	23	-67.1%	0.4	0.3	-18.7%	11,936	8,445*	-29.2%	36.2	32.3*	-10.8%
Public Administration	3,426	3,315	-3.2%	31.4	29.9	-4.7%	13,861	14,566	5.1%	39.5	38.8	-1.8%

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Public Order, Safety and Regulatory Services	3,265	3,214	-1.6%	30.3	32.4	6.9%	19,977	21,021	5.2%	52.5	54.2	3.2%
Labour Hire	107	123	15.0%	1.1	1.3	23.5%	14,732	13,855	-6.0%	48.2	41.8	-13.3%
Rental, Hiring and Real Estate Services	1,027	1,113	8.4%	7.1	7.8	10.0%	18,514	14,368	-22.4%	54.8	46.6	-15.0%
Property Operators and Real Estate Services	406	498	22.7%	3.0	3.9	30.4%	15,173	14,289	-5.8%	53.9	45.8	-15.0%
Rental and Hiring Services (except Real Estate)	606	603	-0.5%	4.0	3.9	-3.3%	20,925	14,729	-29.6%	55.7	48.0	-13.8%
Labour Hire	15	12	-20.0%	0.1	0.0	-83.1%	14,641*	6,377*	-56.4%	47.3*	24.8*	-47.6%
Retail Trade	7,971	7,575	-5.0%	50.8	51.5	1.4%	11,417	12,704	11.3%	38.4	43.0	12.0%
Food Retailing	3,147	2,978	-5.4%	18.5	20.0	8.2%	11,734	11,346	-3.3%	37.5	39.4	5.1%
Fuel Retailing	239	223	-6.7%	1.6	1.6	0.0%	18,206	18,375	0.9%	71.6	58.6	-18.2%
Motor Vehicle and Motor Vehicle Parts Retailing	1,248	1,183	-5.2%	7.2	8.3	15.5%	12,822	14,391	12.2%	35.0	43.7	24.9%
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	46	54	17.4%	0.4	0.3	-34.5%	15,441	16,035	3.8%	60.3	33.2	-44.9%
Other Store-Based Retailing	3,113	3,002	-3.6%	21.7	19.9	-8.3%	10,394	12,606	21.3%	37.9	43.9	15.8%
Labour Hire	178	135	-24.2%	1.3	1.3	1.9%	7,584	15,101	99.1%	33.8	56.0	65.7%
Transport, Postal and Warehousing	6,316	5,577	-11.7%	69.8	74.6	6.8%	19,811	22,096	11.5%	56.5	59.6	5.5%
Air and Space Transport	553	472	-14.6%	4.6	4.9	6.1%	12,686	10,146	-20.0%	42.7	36.1	-15.5%
Other Transport	193	180	-6.7%	1.3	1.5	11.4%	12,830	18,139	41.4%	39.7	53.8	35.5%
Postal and Courier Pick-up and Delivery Services	175	174	-0.6%	1.8	1.7	-9.1%	27,575	16,658	-39.6%	74.8	59.8	-20.1%
Rail Transport	642	547	-14.8%	7.2	6.9	-3.8%	26,046	28,221	8.4%	35.9	35.6	-0.8%
Road Transport	3,207	2,796	-12.8%	42.7	45.4	6.1%	21,691	25,234	16.3%	64.1	69.5	8.4%
Transport Support Services	699	564	-19.3%	6.4	6.4	0.5%	17,637	22,491	27.5%	48.8	56.3	15.4%

	Claims lodgements			Claims payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance	13-14	14-15	Vari- ance
	no.	no.	%	\$M	\$M	%	\$	\$	%	days	days	%
Warehousing and Storage Services	365	381	4.4%	2.4	2.7	12.1%	16,454	20,106	22.2%	46.3	54.7	18.1%
Water Transport	78	103	32.1%	0.6	1.7	201.2%	17,959	18,251	1.6%	57.2	60.9	6.5%
Labour Hire	404	360	-10.9%	2.8	3.5	25.1%	15,301	16,385	7.1%	44.0	44.4	0.9%
Wholesale Trade	4,406	4,149	-5.8%	29.6	32.0	8.2%	14,508	16,118	11.1%	41.5	44.7	7.7%
Basic Material Wholesaling	1,253	1,183	-5.6%	7.6	8.5	11.6%	14,537	15,267	5.0%	40.3	42.1	4.5%
Commission-Based Wholesaling	63	47	-25.4%	0.5	0.3	-35.9%	11,766	12,797	8.8%	45.4	45.0	-0.9%
Grocery, Liquor and Tobacco Product Wholesaling	661	694	5.0%	5.5	5.3	-4.6%	13,803	13,917	0.8%	45.7	50.2	9.8%
Machinery and Equipment Wholesaling	1,304	1,136	-12.9%	8.5	10.0	17.7%	14,209	21,646	52.3%	32.7	46.8	43.1%
Motor Vehicle and Motor Vehicle Parts Wholesaling	373	369	-1.1%	2.0	2.1	2.9%	15,525	10,976	-29.3%	39.0	35.5	-9.0%
Other Goods Wholesaling	663	624	-5.9%	4.9	5.6	13.8%	14,648	16,378	11.8%	48.8	45.8	-6.1%
Labour Hire	89	96	7.9%	0.6	0.3	-43.7%	17,403	10,875	-37.5%	55.9	40.5	-27.5%
Other	826	579	-29.9%	48.2	49.9	3.5%	38,576	36,316	-5.9%	101.3	118.2	16.7%
Total	92,007	88,165	-4.2%	793.3	819.2	3.3%	16,358	17,228	5.3%	47.8	49.1	2.7%

*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 14-15

	Claim decisions			Time lost claim finalisation								
	% Admit	% Rejected	Total claims decided	Total time lost claims finalised	% Fit for work : same job / tasks with same employer	% Fit for work : same job / tasks with diff employer	% Fit for work : diff job / tasks with same employer	% Fit for work : diff job / tasks with diff employer	% Fit for work : no job	% Fit for work : worker does not return	% Not fit for work	% Alternative outcome not claim related
Accommodation and Food Services	94.9%	5.1%	4,806	2,873	90.4%	1.4%	0.5%	2.8%	1.0%	2.4%	1.3%	0.2%
Accommodation	96.1%	3.9%	1,213	778	89.8%	1.3%	0.8%	3.3%	0.6%	2.1%	1.8%	0.3%
Food and Beverage Services	94.7%	5.3%	3,395	2,032	90.6%	1.5%	0.3%	2.4%	1.2%	2.6%	1.2%	0.2%
Labour Hire	91.9%	8.1%	198	63	90.5%	1.6%	0.0%	6.3%	0.0%	1.6%	0.0%	0.0%
Administrative and Support Services	90.8%	9.2%	2,076	1,480	89.9%	1.0%	0.4%	3.1%	1.8%	1.7%	2.1%	0.0%
Administrative Services	85.4%	14.6%	488	257	85.6%	1.6%	0.8%	3.9%	3.1%	2.7%	2.3%	0.0%
Building Cleaning, Pest Control and Other Support Services	92.7%	7.3%	1,553	1,202	90.9%	0.9%	0.3%	3.0%	1.4%	1.5%	2.0%	0.0%
Labour Hire	80.0%	20.0%	35	21	85.7%	0.0%	4.8%	0.0%	9.5%	0.0%	0.0%	0.0%
Agriculture, Forestry and Fishing	95.1%	4.9%	1,795	1,298	86.1%	1.2%	0.5%	4.3%	1.8%	4.5%	1.6%	0.0%
Agriculture	96.3%	3.7%	1,438	1,057	86.8%	1.0%	0.7%	4.5%	1.2%	4.4%	1.4%	0.0%
Agriculture, Forestry and Fishing Support Services	91.3%	8.7%	173	121	79.3%	2.5%	0.0%	5.0%	3.3%	7.4%	2.5%	0.0%
Aquaculture	80.0%	20.0%	35	20	95.0%	0.0%	0.0%	5.0%	0.0%	0.0%	0.0%	0.0%
Fishing, Hunting and Trapping	73.3%	26.7%	30	16	81.2%	0.0%	0.0%	6.3%	12.5%	0.0%	0.0%	0.0%
Forestry and Logging	100.0%	0.0%	6	10	60.0%	0.0%	0.0%	0.0%	20.0%	0.0%	20.0%	0.0%
Labour Hire	95.6%	4.4%	113	74	89.2%	1.4%	0.0%	1.3%	2.7%	4.1%	1.3%	0.0%
Arts and Recreation Services	94.7%	5.3%	1,212	684	89.2%	1.2%	1.0%	3.7%	1.5%	2.0%	1.4%	0.0%
Creative and Performing Arts Activities	98.4%	1.6%	122	59	81.3%	3.4%	1.7%	5.1%	3.4%	3.4%	1.7%	0.0%
Gambling Activities	87.6%	12.4%	185	84	91.6%	1.2%	1.2%	3.6%	1.2%	1.2%	0.0%	0.0%
Heritage Activities	96.0%	4.0%	152	77	93.5%	0.0%	0.0%	3.9%	1.3%	0.0%	1.3%	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	95.6%	4.4%	749	463	89.2%	1.1%	1.1%	3.4%	1.3%	2.2%	1.7%	0.0%
Labour Hire	100.0%	0.0%	4	1	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%
Construction	92.5%	7.5%	8,381	4,486	84.1%	2.0%	0.7%	4.6%	2.9%	3.2%	2.4%	0.1%
Building Construction	93.8%	6.2%	1,206	663	85.4%	2.4%	0.6%	5.1%	2.9%	1.5%	2.1%	0.0%
Construction Services	93.9%	6.1%	5,154	2,804	85.2%	1.8%	0.7%	4.0%	2.5%	3.5%	2.2%	0.1%
Heavy and Civil Engineering Construction	88.4%	11.6%	1,521	768	80.5%	2.6%	0.5%	6.0%	4.5%	2.9%	3.0%	0.0%
Labour Hire	88.6%	11.4%	500	251	80.4%	1.2%	2.0%	6.0%	2.8%	4.8%	2.8%	0.0%
Education and Training	92.1%	7.9%	5,925	3,210	96.5%	0.5%	0.4%	0.7%	0.2%	1.1%	0.6%	0.0%
Adult, Community and Other Education	91.3%	8.7%	161	103	94.2%	0.0%	0.0%	3.9%	0.0%	1.9%	0.0%	0.0%
Preschool and School Education	93.2%	6.8%	4,184	2,292	96.8%	0.4%	0.5%	0.4%	0.3%	1.1%	0.5%	0.0%
Tertiary Education	89.5%	10.5%	1,570	813	96.1%	1.0%	0.0%	1.2%	0.1%	0.9%	0.7%	0.0%
Labour Hire	90.0%	10.0%	10	2	50.0%	0.0%	50.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Electricity, Gas, Water and Waste Services	93.3%	6.7%	1,072	476	91.4%	0.4%	1.3%	1.3%	1.7%	1.0%	2.1%	0.8%
Electricity Supply	94.1%	5.9%	437	181	94.5%	0.0%	0.5%	0.5%	0.0%	1.7%	2.8%	0.0%
Gas Supply	100.0%	0.0%	19	8	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Waste Collection, Treatment and Disposal Services	92.0%	8.0%	374	193	87.1%	1.0%	2.6%	1.0%	3.6%	1.0%	2.1%	1.6%
Water Supply, Sewerage and Drainage Services	92.6%	7.4%	190	63	93.6%	0.0%	0.0%	3.2%	0.0%	0.0%	1.6%	1.6%
Labour Hire	96.1%	3.9%	52	31	93.6%	0.0%	0.0%	3.2%	3.2%	0.0%	0.0%	0.0%
Financial and Insurance Services	88.1%	11.9%	587	318	92.8%	0.6%	1.6%	0.6%	0.3%	1.6%	2.2%	0.3%
Auxiliary Finance and Insurance Services	92.3%	7.7%	91	54	88.9%	1.9%	0.0%	0.0%	1.9%	1.8%	3.7%	1.8%

	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
Finance	85.9%	14.1%	256	120	92.5%	0.8%	2.5%	0.0%	0.0%	3.3%	0.9%	0.0%
Insurance and Superannuation Funds	88.6%	11.4%	237	141	95.1%	0.0%	1.4%	1.4%	0.0%	0.0%	2.1%	0.0%
Labour Hire	100.0%	0.0%	3	3	66.7%	0.0%	0.0%	0.0%	0.0%	0.0%	33.3%	0.0%
Health Care and Social Assistance	92.9%	7.1%	9,675	6,812	93.7%	0.4%	0.7%	0.7%	0.6%	1.9%	1.8%	0.2%
Hospitals	93.1%	6.9%	3,723	2,783	94.5%	0.3%	1.1%	0.4%	0.3%	1.3%	1.8%	0.3%
Medical and Other Health Care Services	92.0%	8.0%	1,124	702	92.9%	0.5%	0.8%	1.3%	1.0%	2.3%	0.9%	0.3%
Residential Care Services	93.7%	6.3%	2,513	1,739	93.8%	0.2%	0.6%	0.8%	0.4%	2.3%	1.8%	0.1%
Social Assistance Services	91.9%	8.1%	2,253	1,540	92.5%	0.6%	0.3%	1.1%	1.0%	2.3%	2.1%	0.1%
Labour Hire	90.3%	9.7%	62	48	89.6%	0.0%	0.0%	0.0%	2.1%	4.1%	4.2%	0.0%
Information Media and Telecommunications	97.1%	2.9%	408	166	85.6%	1.8%	0.6%	3.0%	4.2%	2.4%	1.8%	0.6%
Broadcasting (except Internet)	94.9%	5.1%	59	29	86.2%	0.0%	0.0%	6.9%	3.5%	0.0%	3.4%	0.0%
Internet Publishing and Broadcasting	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	100.0%	0.0%	12	10	90.0%	0.0%	0.0%	0.0%	10.0%	0.0%	0.0%	0.0%
Library and Other Information Services	100.0%	0.0%	9	8	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Motion Picture and Sound Recording Activities	99.5%	0.5%	203	45	84.5%	4.5%	0.0%	2.2%	2.2%	2.2%	2.2%	2.2%
Publishing (except Internet and Music Publishing)	95.1%	4.9%	61	40	82.5%	0.0%	2.5%	2.5%	5.0%	7.5%	0.0%	0.0%
Telecommunications Services	94.2%	5.8%	52	30	86.7%	3.4%	0.0%	3.3%	3.3%	0.0%	3.3%	0.0%

	Claim decisions			Time lost claim finalisation								
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Labour Hire	83.3%	16.7%	12	4	75.0%	0.0%	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%
Manufacturing	95.4%	4.6%	11,859	5,813	92.5%	0.5%	1.0%	1.4%	1.7%	1.8%	0.9%	0.2%
Basic Chemical and Chemical Product Manufacturing	96.0%	4.0%	274	112	92.8%	0.0%	0.0%	0.9%	2.7%	0.9%	1.8%	0.9%
Beverage and Tobacco Product Manufacturing	94.4%	5.6%	161	57	80.7%	1.7%	7.0%	3.5%	3.5%	1.8%	0.0%	1.8%
Fabricated Metal Product Manufacturing	96.8%	3.2%	2,467	1,164	92.5%	0.6%	0.6%	1.3%	2.0%	1.7%	1.1%	0.2%
Food Product Manufacturing	93.8%	6.2%	3,039	1,652	92.9%	0.4%	1.2%	0.8%	1.2%	2.5%	0.8%	0.2%
Furniture and Other Manufacturing	97.9%	2.1%	378	202	92.5%	0.0%	2.5%	4.0%	0.0%	0.5%	0.5%	0.0%
Machinery and Equipment Manufacturing	96.7%	3.3%	1,011	474	90.7%	0.6%	0.9%	1.7%	2.7%	1.5%	1.7%	0.2%
Non-Metallic Mineral Product Manufacturing	94.9%	5.1%	621	266	93.2%	0.0%	0.7%	1.5%	0.8%	1.5%	2.3%	0.0%
Petroleum and Coal Product Manufacturing	95.7%	4.3%	69	20	90.0%	0.0%	0.0%	5.0%	0.0%	0.0%	5.0%	0.0%
Polymer Product and Rubber Product Manufacturing	94.9%	5.1%	394	176	94.3%	0.6%	0.6%	1.1%	1.1%	1.7%	0.6%	0.0%
Primary Metal and Metal Product Manufacturing	93.5%	6.5%	556	183	90.2%	1.1%	0.5%	1.1%	3.8%	2.2%	1.1%	0.0%
Printing (including the Reproduction of Recorded Media)	95.8%	4.2%	144	79	94.9%	1.2%	0.0%	0.0%	1.3%	1.3%	0.0%	1.3%
Pulp, Paper and Converted Paper Product Manufacturing	95.4%	4.6%	110	53	96.2%	0.0%	1.9%	0.0%	0.0%	1.9%	0.0%	0.0%
Textile, Leather, Clothing and Footwear Manufacturing	90.8%	9.2%	120	87	88.5%	0.0%	2.3%	0.0%	3.4%	4.6%	1.2%	0.0%

	Claim decisions			Time lost claim finalisation								
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Transport Equipment Manufacturing	97.1%	2.9%	978	493	94.3%	0.6%	0.0%	1.4%	2.5%	0.8%	0.2%	0.2%
Wood Product Manufacturing	97.2%	2.8%	757	389	94.3%	0.3%	0.8%	2.3%	1.3%	0.5%	0.5%	0.0%
Labour Hire	93.5%	6.5%	780	406	91.4%	0.8%	1.7%	1.7%	1.5%	2.2%	0.7%	0.0%
Mining	87.1%	12.9%	2,086	951	84.5%	1.5%	1.0%	2.4%	3.8%	2.1%	4.1%	0.6%
Coal Mining	86.5%	13.5%	885	370	84.9%	1.4%	0.8%	1.6%	4.6%	1.6%	4.0%	1.1%
Exploration and Other Mining Support Services	90.8%	9.2%	304	221	81.0%	1.3%	0.9%	2.7%	5.0%	3.2%	5.0%	0.9%
Metal Ore Mining	84.8%	15.2%	508	154	88.3%	3.2%	0.6%	1.3%	2.6%	0.7%	3.3%	0.0%
Non-Metallic Mineral Mining and Quarrying	90.2%	9.8%	193	107	84.1%	0.9%	1.9%	2.8%	1.0%	2.8%	6.5%	0.0%
Oil and Gas Extraction	73.9%	26.1%	46	13	84.6%	0.0%	0.0%	7.7%	0.0%	0.0%	7.7%	0.0%
Labour Hire	90.7%	9.3%	150	86	86.0%	0.0%	1.2%	5.8%	3.5%	3.5%	0.0%	0.0%
Other Services	89.1%	10.9%	2,261	1,093	89.3%	0.6%	0.3%	3.4%	2.0%	2.4%	1.6%	0.4%
Personal and Other Services	87.3%	12.7%	896	445	89.4%	0.7%	0.2%	2.7%	1.3%	2.7%	2.5%	0.5%
Repair and Maintenance	91.4%	8.6%	1,235	580	89.5%	0.7%	0.2%	3.8%	2.6%	2.2%	0.7%	0.3%
Labour Hire	80.0%	20.0%	130	68	86.8%	0.0%	1.5%	4.4%	1.5%	2.9%	2.9%	0.0%
Professional, Scientific and Technical Services	90.0%	10.0%	1,376	715	88.2%	1.5%	0.7%	2.7%	2.0%	2.2%	2.0%	0.7%
Computer System Design and Related Services	93.7%	6.3%	95	50	90.0%	4.0%	0.0%	0.0%	0.0%	4.0%	2.0%	0.0%
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	89.8%	10.2%	1,271	655	88.1%	1.4%	0.8%	2.7%	2.1%	2.1%	2.0%	0.8%
Labour Hire	90.0%	10.0%	10	10	90.0%	0.0%	0.0%	10.0%	0.0%	0.0%	0.0%	0.0%
Public Administration and Safety	91.1%	8.9%	5,531	3,371	94.0%	0.4%	0.9%	0.7%	0.6%	1.1%	2.1%	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
Defence	85.7%	14.3%	21	24	91.6%	0.0%	0.0%	4.2%	0.0%	4.2%	0.0%	0.0%
Public Administration	91.9%	8.1%	3,055	1,788	94.9%	0.4%	1.1%	0.6%	0.4%	0.9%	1.4%	0.3%
Public Order, Safety and Regulatory Services	89.8%	10.2%	2,343	1,491	93.2%	0.3%	0.6%	0.8%	0.6%	1.4%	3.0%	0.1%
Labour Hire	96.4%	3.6%	112	68	91.2%	2.9%	0.0%	0.0%	4.4%	1.5%	0.0%	0.0%
Rental, Hiring and Real Estate Services	93.9%	6.1%	890	488	90.2%	0.4%	0.6%	2.9%	1.6%	2.7%	1.6%	0.0%
Property Operators and Real Estate Services	89.7%	10.3%	389	211	87.2%	0.9%	1.0%	4.3%	2.4%	2.8%	1.4%	0.0%
Rental and Hiring Services (except Real Estate)	97.1%	2.9%	491	267	92.5%	0.0%	0.4%	1.9%	1.1%	2.2%	1.9%	0.0%
Labour Hire	100.0%	0.0%	10	10	90.0%	0.0%	0.0%	0.0%	0.0%	10.0%	0.0%	0.0%
Retail Trade	93.3%	6.7%	6,828	3,860	90.5%	0.9%	1.4%	2.0%	1.2%	1.7%	2.1%	0.2%
Food Retailing	94.4%	5.6%	2,817	1,404	90.3%	0.9%	1.9%	1.7%	0.6%	1.7%	2.8%	0.1%
Fuel Retailing	92.3%	7.7%	183	125	88.0%	0.8%	0.8%	0.8%	3.2%	1.6%	4.0%	0.8%
Motor Vehicle and Motor Vehicle Parts Retailing	94.2%	5.8%	1,031	603	90.4%	0.5%	1.7%	2.1%	2.3%	1.0%	1.8%	0.2%
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	89.6%	10.4%	48	25	88.0%	4.0%	0.0%	4.0%	0.0%	0.0%	4.0%	0.0%
Other Store-Based Retailing	91.8%	8.2%	2,634	1,598	90.8%	1.0%	1.0%	2.3%	1.3%	2.0%	1.4%	0.2%
Labour Hire	94.8%	5.2%	115	105	92.4%	0.0%	1.9%	1.0%	0.0%	1.9%	2.8%	0.0%
Transport, Postal and Warehousing	92.9%	7.1%	4,798	3,116	90.6%	1.0%	0.8%	2.7%	1.1%	1.8%	1.7%	0.3%
Air and Space Transport	92.3%	7.7%	443	331	96.7%	0.0%	0.6%	1.2%	0.6%	0.6%	0.0%	0.3%
Other Transport	90.8%	9.2%	142	101	92.1%	1.0%	0.0%	2.9%	0.0%	2.0%	2.0%	0.0%
Postal and Courier Pick-up and Delivery Services	89.2%	10.8%	139	94	85.1%	2.1%	0.0%	6.4%	2.1%	3.2%	1.1%	0.0%
Rail Transport	95.5%	4.5%	514	158	90.5%	0.0%	4.4%	3.2%	0.7%	0.0%	0.6%	0.6%

	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
Road Transport	92.7%	7.3%	2,422	1,739	89.4%	1.3%	0.7%	2.6%	1.5%	2.1%	2.1%	0.3%
Transport Support Services	92.6%	7.4%	471	309	93.2%	0.7%	0.6%	1.6%	0.7%	1.3%	1.6%	0.3%
Warehousing and Storage Services	93.7%	6.3%	272	116	84.5%	1.7%	0.0%	6.0%	0.9%	4.3%	2.6%	0.0%
Water Transport	94.9%	5.1%	78	43	83.7%	2.3%	0.0%	4.7%	2.3%	0.0%	7.0%	0.0%
Labour Hire	93.4%	6.6%	317	225	93.3%	0.9%	0.5%	3.1%	0.0%	1.3%	0.5%	0.4%
Wholesale Trade	93.0%	7.0%	3,638	2,079	89.7%	0.6%	0.7%	2.9%	2.5%	1.9%	1.4%	0.3%
Basic Material Wholesaling	93.5%	6.5%	1,041	578	89.3%	0.3%	0.7%	2.4%	2.6%	3.3%	1.2%	0.2%
Commission-Based Wholesaling	92.7%	7.3%	41	37	91.9%	0.0%	0.0%	2.7%	2.7%	0.0%	2.7%	0.0%
Grocery, Liquor and Tobacco Product Wholesaling	92.8%	7.2%	625	407	91.4%	0.2%	0.5%	2.2%	2.5%	1.5%	1.0%	0.7%
Machinery and Equipment Wholesaling	92.5%	7.5%	987	491	88.0%	1.0%	1.2%	3.9%	2.4%	1.2%	2.3%	0.0%
Motor Vehicle and Motor Vehicle Parts Wholesaling	96.0%	4.0%	324	191	90.6%	1.0%	1.6%	0.5%	1.6%	2.1%	1.6%	1.0%
Other Goods Wholesaling	92.2%	7.8%	540	316	90.2%	0.3%	0.0%	4.4%	2.2%	1.6%	1.3%	0.0%
Labour Hire	90.0%	10.0%	80	59	88.1%	1.7%	0.0%	5.1%	5.1%	0.0%	0.0%	0.0%
Other	87.2%	12.8%	281	95	84.2%	2.1%	1.0%	7.4%	0.0%	3.2%	1.0%	1.1%
Total	92.9%	7.1%	75,485	43,384	90.9%	0.9%	0.8%	2.1%	1.4%	2.0%	1.7%	0.2%

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

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

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

Appendix 2: Industry classification codes

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

H Accommodation and Food Services
44 Accommodation
45 Food and Beverage Services
N Administrative and Support Services
72 Administrative Services
73 Building Cleaning, Pest Control and Other Support Services
A Agriculture, Forestry and Fishing
01 Agriculture
05 Agriculture, Forestry and Fishing Support Services
02 Aquaculture
04 Fishing, Hunting and Trapping
03 Forestry and Logging
R Arts and Recreation Services
90 Creative and Performing Arts Activities
92 Gambling Activities
89 Heritage Activities
91 Sports and Recreation Activities
E Construction
30 Building Construction
32 Construction Services
31 Heavy and Civil Engineering Construction
P Education and Training
82 Adult, Community and Other Education
80 Preschool and School Education
81 Tertiary Education
D Electricity, Gas, Water and Waste Services
26 Electricity Supply
27 Gas Supply
29 Waste Collection, Treatment and Disposal Services
28 Water Supply, Sewerage and Drainage Services
K Financial and Insurance Services
64 Auxiliary Finance and Insurance Services
62 Finance
63 Insurance and Superannuation Funds

Q Health Care and Social Assistance
84 Hospitals
85 Medical and Other Health Care Services
86 Residential Care Services
87 Social Assistance Services
J Information Media and Telecommunications
56 Broadcasting (except Internet)
57 Internet Publishing and Broadcasting
59 Internet Service Providers, Web Search Portals and Data Processing Services
60 Library and Other Information Services
55 Motion Picture and Sound Recording Activities
54 Publishing (except Internet and Music Publishing)
58 Telecommunications Services
C Manufacturing
18 Basic Chemical and Chemical Product Manufacturing
12 Beverage and Tobacco Product Manufacturing
22 Fabricated Metal Product Manufacturing
11 Food Product Manufacturing
25 Furniture and Other Manufacturing
24 Machinery and Equipment Manufacturing
20 Non-Metallic Mineral Product Manufacturing
17 Petroleum and Coal Product Manufacturing
19 Polymer Product and Rubber Product Manufacturing
21 Primary Metal and Metal Product Manufacturing
16 Printing (including the Reproduction of Recorded Media)
15 Pulp, Paper and Converted Paper Product Manufacturing
13 Textile, Leather, Clothing and Footwear Manufacturing
23 Transport Equipment Manufacturing
14 Wood Product Manufacturing
B Mining
06 Coal Mining
10 Exploration and Other Mining Support Services
08 Metal Ore Mining
09 Non-Metallic Mineral Mining and Quarrying
07 Oil and Gas Extraction

S Other Services	
95	Personal and Other Services
96	Private Households Employing Staff and Undifferentiated Goods- and Service- Producing Activities of Households for Own Use
94	Repair and Maintenance
M Professional, Scientific and Technical Services	
70	Computer System Design and Related Services
69	Professional, Scientific and Technical Services (Except Computer System Design and Related Services)
O Public Administration and Safety	
76	Defence
75	Public Administration
77	Public Order, Safety and Regulatory Services
L Rental, Hiring and Real Estate Services	
67	Property Operators and Real Estate Services
66	Rental and Hiring Services (except Real Estate)
G Retail Trade	
41	Food Retailing
40	Fuel Retailing
39	Motor Vehicle and Motor Vehicle Parts Retailing
43	Non-Store Retailing and Retail Commission-Based Buying and/or Selling
42	Other Store-Based Retailing
I Transport, Postal and Warehousing	
49	Air and Space Transport
50	Other Transport
51	Postal and Courier Pick-up and Delivery Services
47	Rail Transport
46	Road Transport
52	Transport Support Services
53	Warehousing and Storage Services
48	Water Transport

F Wholesale Trade	
33	Basic Material Wholesaling
38	Commission-Based Wholesaling
36	Grocery, Liquor and Tobacco Product Wholesaling
34	Machinery and Equipment Wholesaling
35	Motor Vehicle and Motor Vehicle Parts Wholesaling
37	Other Goods Wholesaling

Appendix 3: Critical events history

Pre-1997

1. Irrevocable election to access common law was introduced by Workers' Compensation Amendment Act (no 2) 1995 - provisions commenced 1 Jan 1996.
2. Interest on general damages (i.e. for pain and suffering and loss of impairment of the enjoyments of the amenities of life) was abolished.
3. Gratuitous care awards (Griffiths V 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 5% to 1% hearing loss.
12. The 'reasonable person' and 'ordinary susceptibility' tests for stress claims were removed.
13. Claims must be decided in three months not six months.
14. Establishment of a Review unit.

1 Jul 2001 - WorkCover Queensland Amendment Act 2001

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

16 Jun 2002 – Restrictions of advertising from plaintiff lawyers

19. Personal Injuries Proceedings Act 2002 (Qld) places a restriction on lawyers advertising in Queensland. Specifically, it prohibits a lawyer from: "advertising personal injury services except by means of a statement that includes only the lawyers

name and contact details, together with information as to any areas of practice or speciality of the lawyer that is published by an 'allowable publication method'. An example of advertising that is restricted is advertising personal injury services on a 'no win, no fee' or other speculative basis.

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

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

1 Jul 2003 - Workers' Compensation & Rehabilitation Act 2003

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

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

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

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

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

1 Jul 2006 – Dr Fax Fee

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

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

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

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

33. New payment introduced for reasonable funeral expenses (2% of maximum death benefit).

- 34. New entitlement of 15% maximum death benefit for dependents of an injured worker with a terminal latent onset condition.

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

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

1 Dec 2008 - Transport and Other Legislation Amendment Act 2008

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

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

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

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

29 Sep 2010 - Cameron v Foster & Anor QSC 372

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

6 Jun 2011 - Work Health and Safety Act 2011

- 46. Introduced a key structural review recommendation to review the workers' compensation scheme every five years.

- 47. Allowed for a worker to accrue leave while off work on workers' compensation.

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

- 48. Abolished the statutory body Q-COMP as the workers' compensation regulator. These functions are now the responsibility of the Workers' Compensation Regulator within the Office of Industrial Relations.
- 49. Introduced a threshold of greater than 5% 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 & Anor.

Appendix 4: Definitions

Statutory definitions

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

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

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

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

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

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

Workers covered – Workers covered for Queensland is obtained from the Australian Bureau of Statistics labour force survey. This definition includes employees and 'own account' workers (Cat no. 6291.0.55.003 - Labour Force, Queensland, 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, 2006.

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

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

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

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

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

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

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

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

Statutory claim 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 (if one common law claim is associated with three statutory claims, the common law lodgement has been counted three times).

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

Defendant's costs – Costs incurred by the defendant.

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

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

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

Plaintiff's costs – Costs incurred by the plaintiff.

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

Medical assessment tribunal definitions

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

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

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

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

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

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

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

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

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

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

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

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.

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

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