

Queensland workers' compensation scheme statistics 2022–23

State of Queensland 2024



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2022–23 Scheme highlights

New claims up 2.3 per cent



Statutory claim rate decreased



Common law claims up 7 per cent



Scheme payments have increased by 2.3 per cent



Average work days lost around 72 days



Average cost of a time lost claim around \$28,000



Disputes



Review applications up 9.9 per cent
Appeals lodged down 20.3 per cent

Medical assessment tribunals



Referrals up 10.5 per cent

Introduction

This is the 24th annual statistical report published by the Office of Industrial Relations (OIR) 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 workers' compensation regulatory services provided by OIR including:
 - administrative review of insurers' decisions
 - appeals to the Queensland Industrial Relations Commission and the Industrial Court
 - Medical assessment tribunals.

All figures reported as at 30 June 2023 are true and correct as supplied by insurers.

Queensland's workers' compensation scheme

The *Workers' Compensation and Rehabilitation Act 2003* (the Act) is administered by OIR, Queensland Government.

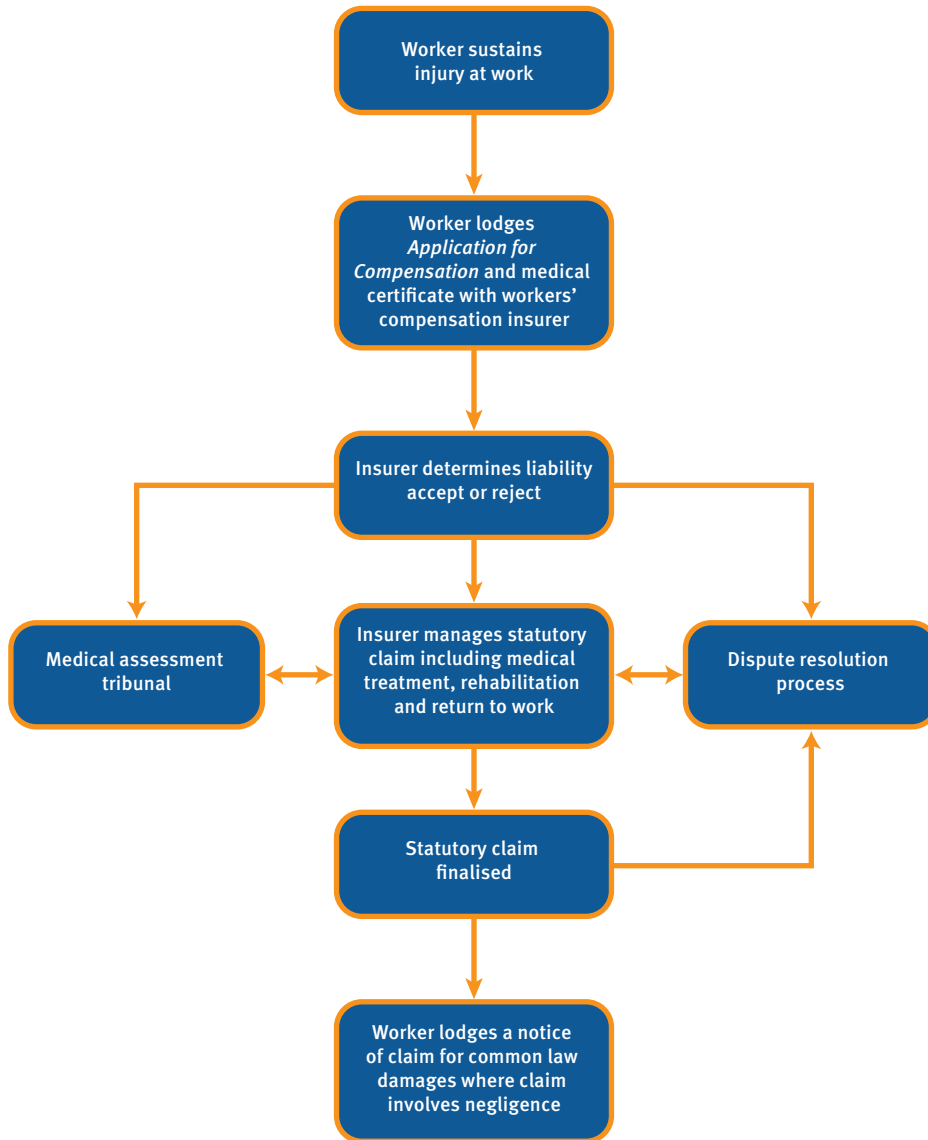
Workers' Compensation Regulatory Services in OIR is responsible for:

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

As at 30 June 2023 there were 28 insurers in the scheme—WorkCover Queensland and 27 self-insured employers.

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

1 Workers' compensation claims process



Claim profile

2 Queensland workers' compensation claim profile

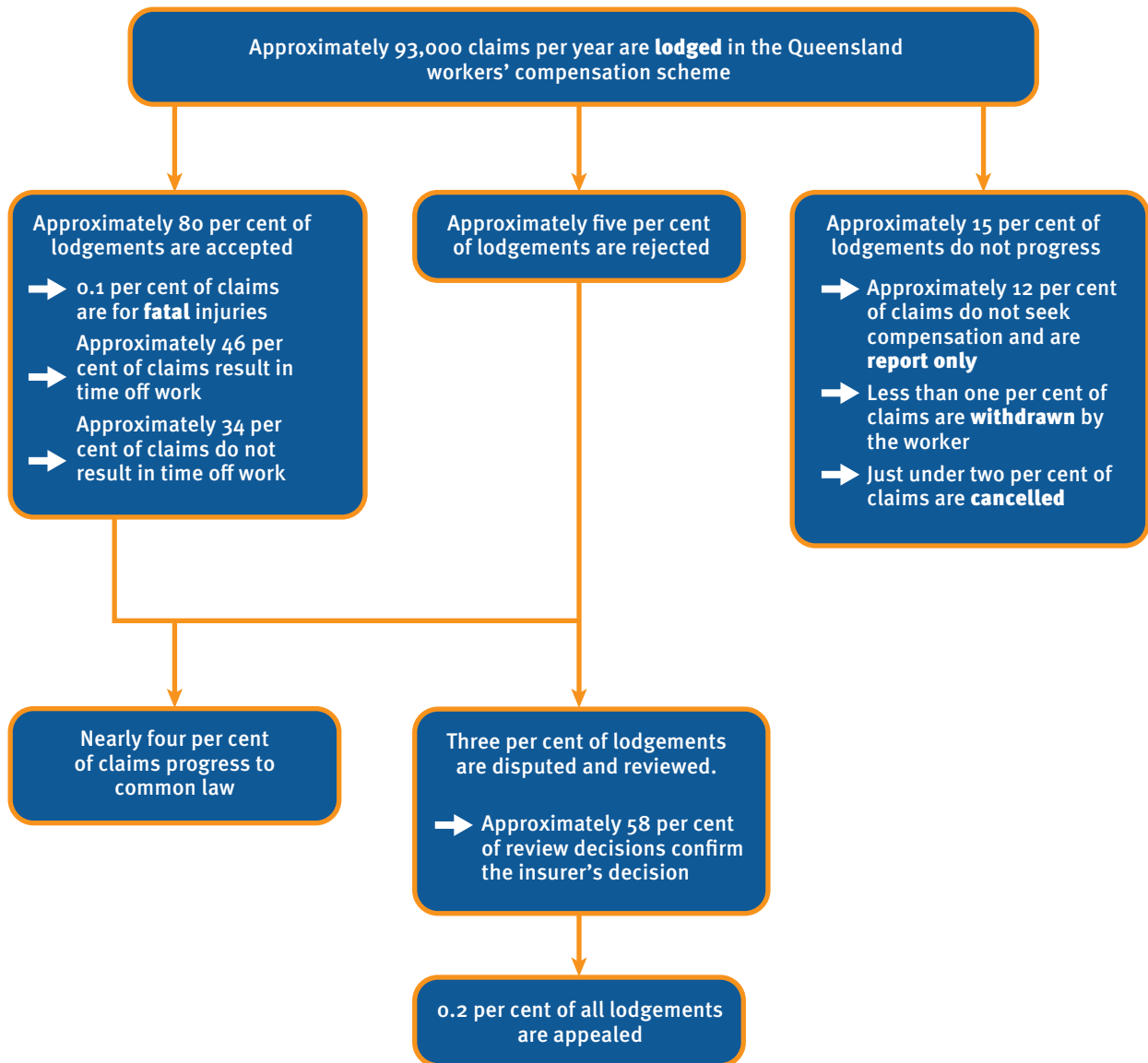


Figure 2 illustrates the progression of a workers' compensation claim through the statutory claims process to common law and dispute resolution. There is a gap between the number of claims lodged in the scheme, compared to the number of decisions, as 15% of claim lodgements do not progress as they are withdrawn by the worker, entered in error, or are "report only" (do not require a decision).

Scheme highlights

Statutory claim lodgements

New statutory claims of 92,547 for 2022–23 were 2.3 per cent higher than 2021–22. The number of employed people increased by 4.2 per cent for 2022–23, this saw the claims rate for 2022–23 decrease by 1.8 per cent to 33.1 claims per 1000 people. Some industries that have experienced decreases in claim rates this year include administrative and support services, health care and social assistance, electricity, gas, water and waste services, retail trade and public administration and safety.

The proportion of psychological and psychiatric statutory claims increased slightly for 2022–23 at 6.8 per cent (6.1 per cent in 2021–22). Psychological and psychiatric claims currently represent 12.3 per cent of total statutory payments (\$173.6 million for 2022–23) and have an average finalised time lost claim cost of \$68,136 (\$61,047 in 2021–22) which is over two times the average time lost claim cost of physical injuries (\$25,701 for 2022–23).

Statutory claim payments

Statutory payments for 2022–23 of \$1,411 million were 1.3 per cent lower than in 2021–22 (\$1,429 million). Weekly compensation payments, which represent 47.3 per cent of statutory payments, have increased 3.4 per cent for 2022–23 from \$646.1 million to \$667.8 million. Average work days lost increased from 72 days in 2021–22 to 72.3 days in 2022–23. The average cost of time lost claims decreased by 1.8 per cent from \$28,163 in 2021–22 to \$27,643 in 2022–23.

Fatalities

There were 73 fatal claim lodgements in 2022–23. Fatal claim lodgements due to injuries at work represented just over a third of the 2022–23 figures (n = 26; 35.6 per cent). Transport, postal and warehousing (n = 12); manufacturing (n = 12); construction (n = 8); and public administration and safety (n = 8) industries contributed 54.8 per cent of fatalities in 2022–23.

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

Return to Work

The Return to Work (RTW) rate for the 2022–23 financial year is 91.9 per cent. This is greater than the RTW rate for the 2021–22 financial year, which is likely to be less than 91.7 per cent.

During the 2021–22 financial year, WorkCover Queensland identified errors in recording the RTW outcome (for more information refer to the WorkCover Queensland Annual Report 2021–22). WorkCover Queensland self-reported this compliance issue to Workers' Compensation Regulatory Services and has actioned improvements to address this issue.

Dispute resolution

Review applications have increased by 9.9 per cent, from 2506 in 2021–22 to 2753 in 2022–23. The proportion of review applications to statutory claims has increased to 3 per cent for 2022–23 (2.8 per cent for 2021–22). Appeals served in 2022–23 have decreased, down 20.3 per cent from 236 served in 2021–22 to 188 served in 2022–23.

Medical assessment tribunals

In 2022–23, 3387 referrals were made to the Medical assessment tribunals. This is an increase of 10.5 per cent from the 3066 referrals received in 2021–22. Of the cases determined by the Medical assessment tribunal, 49.9 per cent were for permanent impairment (PI) assessment (47.4 per cent in 2021–22) and 45.8 per cent were for ongoing capacity to work (47.8 per cent in 2021–22). The proportion of Medical assessment tribunal referrals to statutory claims has increased for 2022–23 to 3.7 per cent (3.4 per cent for 2021–22).

Common law lodgements

Common law lodgements increased by 7 per cent from 3275 in 2021–22 to 3503 in 2022–23. Strains and sprains accounted for 26.4 per cent of all common law claim lodgements in 2022–23.

Common law average damages

The average cost of finalised common law claims has increased by 7.2 per cent to \$188,794 for 2022–23. The average defendant and plaintiff cost increased by 4.7 per cent from \$22,087 in 2021–22 to \$23,135 in 2022–23.

3 Scheme at a glance

Overview					
		2022-23	2021-22	% change from previous year	Page number
Statutory claims	New claims	92,547	90,424	2.3	11
	Claims per 1000 employees	33.1	33.7	-1.8	9
	New psychological claims (%)	6.8%	6.1%	0.7	13
	Compensated fatalities	73	65		16
	Payments (\$M)	\$1411	\$1429	-1.3	24
Statutory decisions	Average time to decide (days)	10.7	11.4	-5.8	18
	Rejection rate – physical (%)	4.8%	3.8%	1	19
	Rejection rate – psychological (%)	47.2%	50.3%	-3.1	19
Outcomes	Average work days lost (days) (time lost claims)	72.3	72	0.4	33
	Return to work rate (%)	91.9%	< 91.7%*	> 0.2	28
Common law	New claims	3503	3275	7	38
	Payments (\$M)	\$582.3	\$520.2	11.9	42
	Average damages cost (excluding nil settlements)	\$188,794	\$176,138	7.2	43
Regulator functions	Review applications	2753	2506	9.9	45
	Appeals served	188	236	-20.3	48
	MAT referrals	3387	3066	10.5	51

*Please refer to page 27 for further information on the return to work rate.

Workers' compensation statutory claims

- The majority of employers (89.1 per cent) covered by the scheme in 2022–23 did not have a claim for workers' compensation
- The scheme-wide claim rate decreased 1.8 per cent
- The manufacturing industry had the highest claim rate.

As at 30 June 2023, approximately 177,000 employers were covered by the Queensland workers' compensation scheme. During 2022–23, the scheme covered approximately 189,000 employers, taking into account fluctuations in cancelled and new policies.

4 Number of claims lodged by insurance type 2021–22 and 2022–23

Insurance type	2021–22	2022–23	% Variance
Employed people	89,854	92,036	2.4
Volunteers, industrial placement/work experience, contracts of insurance (the Act s26)	425	348	-18.1
Workplace personal injury insurance (self-employed, working directors)	120	131	9.2
Household workers	25	32	28
Total lodgements	90,424	92,547	2.3

The majority of claims (99.4 per cent) are for 'workers' (as defined in the Act).

5 Number of claims per employer by declared wages 2021–22

Number of claims	Declared wages						Total employers
	\$1M or less	\$1.01M to \$2.5M	\$2.51M to \$5M	\$5.01M to \$10M	\$10.01M to \$50M	Over \$50M	
No claims	159,424	6429	1491	548	197	16	168,105
1 claim	8624	2280	721	314	143	6	12,088
2 to 5 claims	2106	1845	1167	669	389	28	6204
6 to 10 claims	69	129	253	323	331	45	1150
11 to 20 claims	19	18	54	124	330	41	586
Over 20 claims	12	3	10	34	231	213	503
Total with claims	10,830	4275	2205	1464	1424	333	20,531
Total	170,254	10,704	3696	2012	1621	349	188,636
% without claims	93.6	60.1	40.3	27.2	12.2	4.6	89.1

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

The majority of employers (89.1 per cent) did not have a claim for workers' compensation in 2022–23. Smaller employers (\$1 million or less in declared wages) were the most likely to have no claims (93.6 per cent).

Claim rate

In 2022–23, 92,547 claims were lodged scheme-wide (excluding cancelled claims). The estimated rates per 1000 employed people are detailed below.

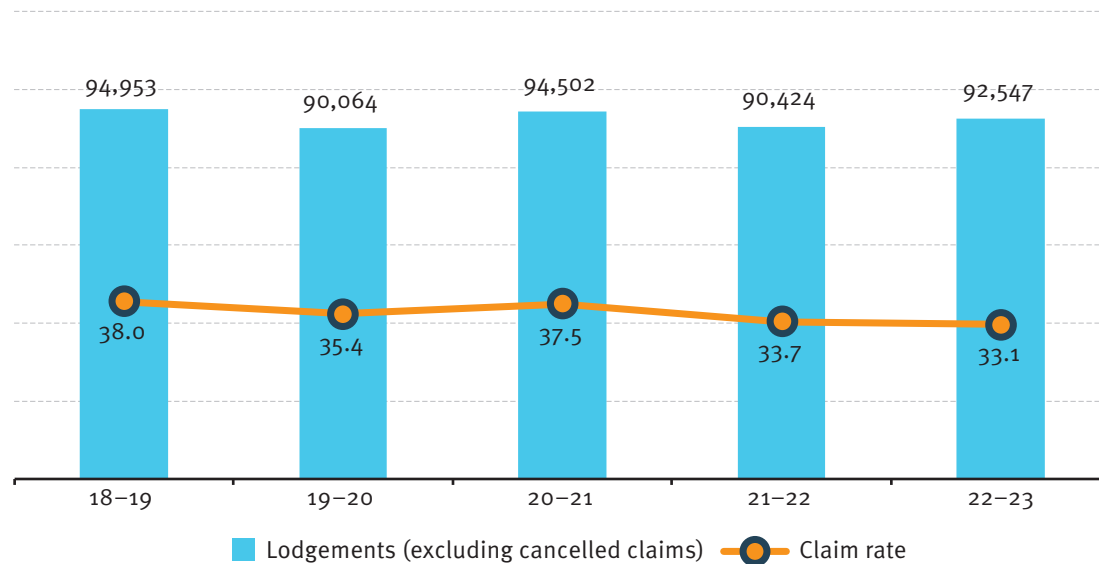
6 Claim rates (per 1000 employed people) 2018–19 to 2022–23

	Annual comparison				
	2018–19	2019–20	2020–21	2021–22	2022–23
Queensland labour force					
Average number of employed people ('000) ^a	2496.1	2547.7	2518.4	2680.7	2794
Change from previous year (%)	2	2.1	-1.2	6.4	4.2
Queensland workers' compensation scheme					
Number of lodged claims	94,953	90,064	94,502	90,424	92,547
Change from previous year (%)	-2.1	-5.1	4.9	-4.3	2.3
Claim rate					
Number per 1,000 employed people	38	35.4	37.5	33.7	33.1
Change from previous year (%)	-4	-6.8	5.9	-10.1	-1.8

^a Australian Bureau of Statistics, Labour Force, Queensland Average of May Quarter to February Quarter, Cat No. 6291.0.55.001, May 2023.

Lodgements for 2022–23 of 92,547 have increased by 2.3 per cent from 2021–22 lodgements of 90,424. Figure 7 shows claim rates and claim lodgements in the scheme for the past five years.

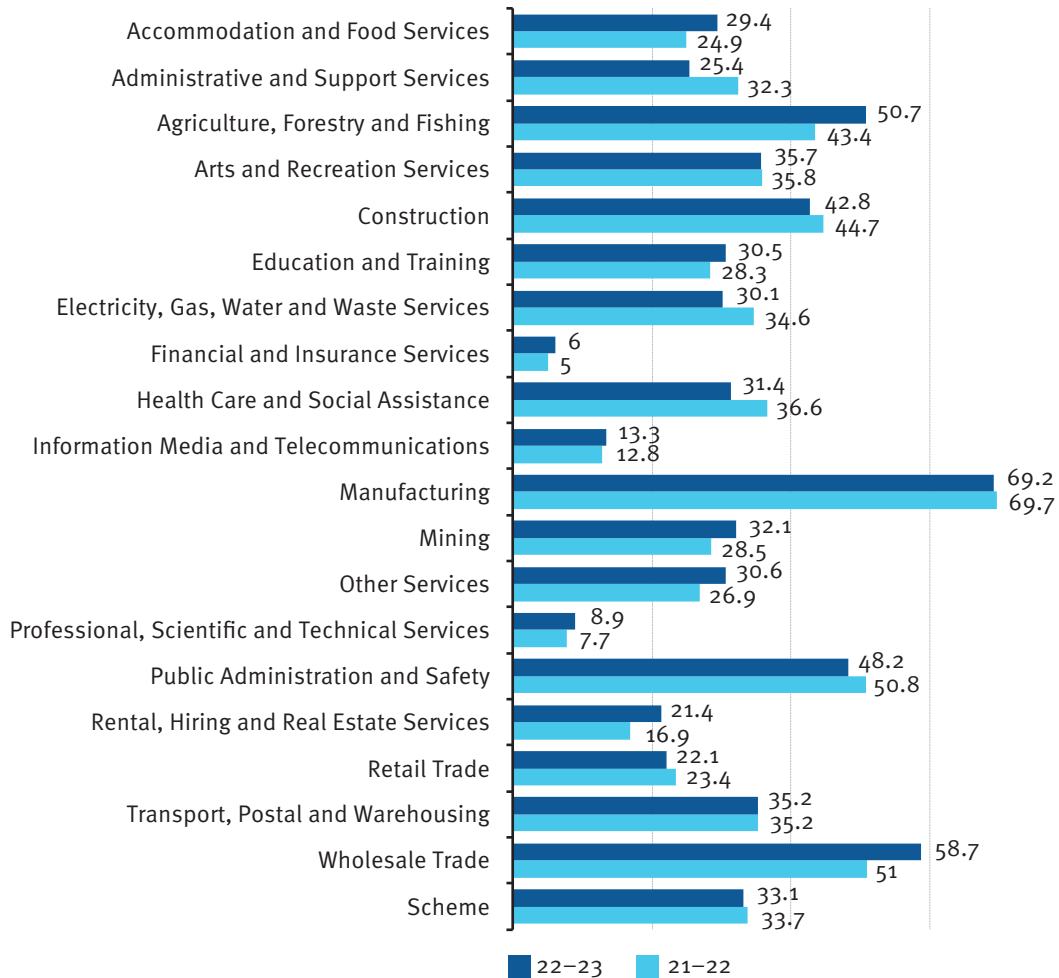
7 Claim rates (per 1000 employed people) and lodgements 2018–19 to 2022–23



Manufacturing had the highest claim rate in the scheme, with 69.2 claim lodgements per 1000 employed people in the industry. Other industries where the claim rate was larger than the scheme rate of 33.1 include:

- wholesale trade (58.7)
- agriculture, forestry and fishing (50.7)
- public administration and safety (48.2)
- construction (42.8)
- arts and recreation services (35.7)
- transport, postal and warehousing (35.2).

8 Claim rates (per 1000 employed people) by industry 2021–22 and 2022–23



Statutory claim lodgements

- Lodgements increased by 2.3 per cent in 2022–23
- Cancelled claims have been excluded from the lodgements reported
- There were 73 fatal claims lodged in 2022–23.

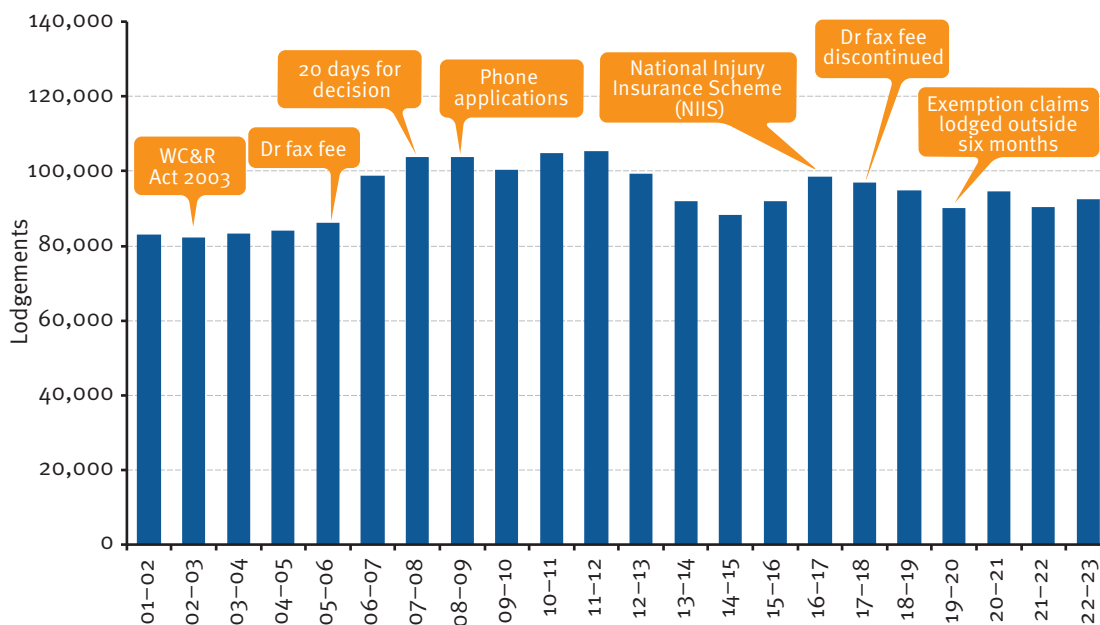
Many factors influence the number of claims lodged in the Queensland workers' compensation scheme. Some of the factors that may have contributed to changes in numbers of lodgements over the years include:

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

Figure 9 shows a history of statutory claim lodgements and key events in the Queensland workers' compensation scheme. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

In 2022–23, there were 92,547 claims lodged (excluding cancelled), representing a 2.3 per cent increase from 2021–22 (90,424).

9 Statutory claim lodgement history 2001–02 to 2022–23

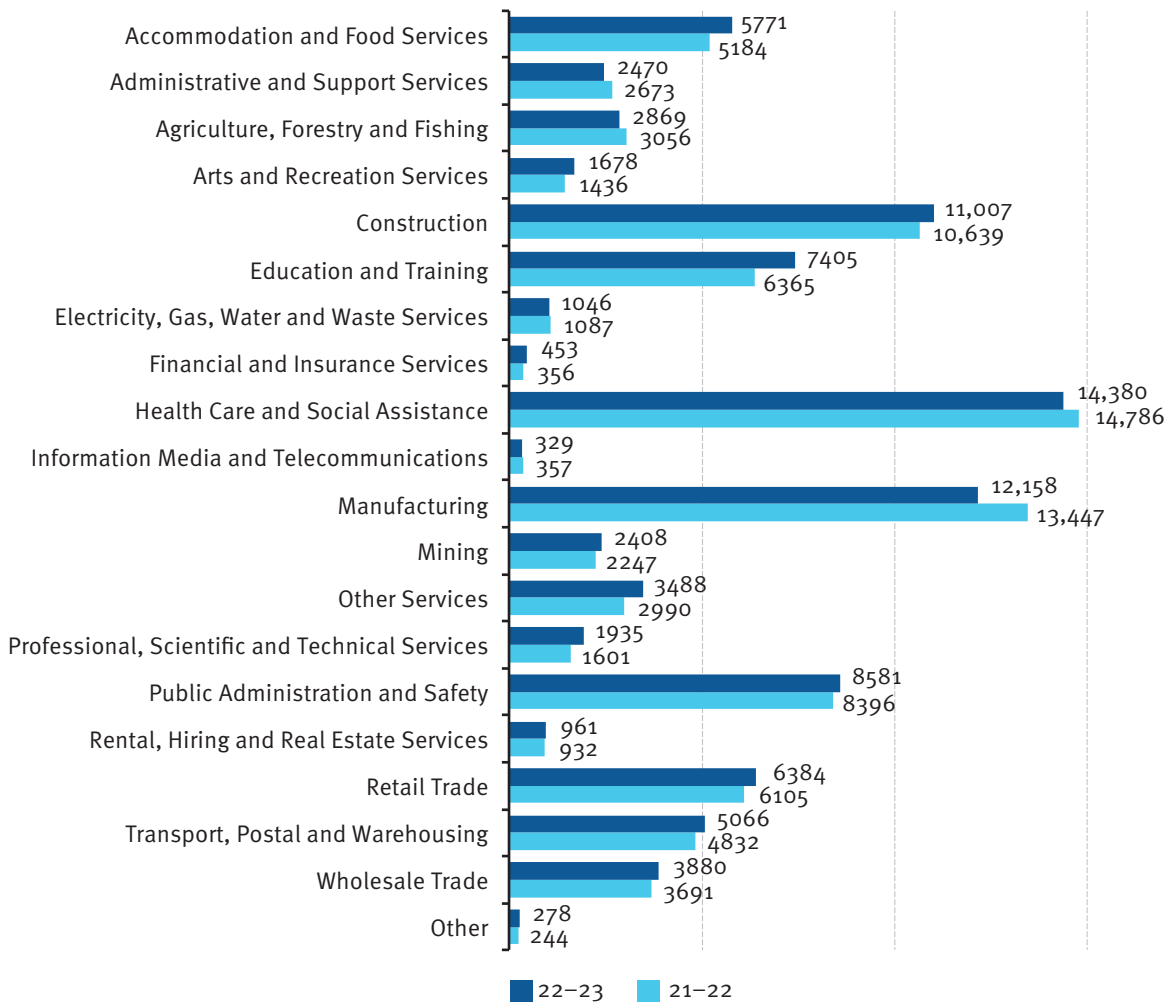


Industry

The health care and social assistance industry accounted for the largest proportion of claim lodgements with 15.5 per cent of all scheme lodgements.

The largest claim increases were in education and training, up 16.3 per cent from 6365 to 7405, and accommodation and food services, up 11.3 per cent from 5184 to 5771 (figure 10).

10 Statutory claim lodgements by industry 2021–22 and 2022–23



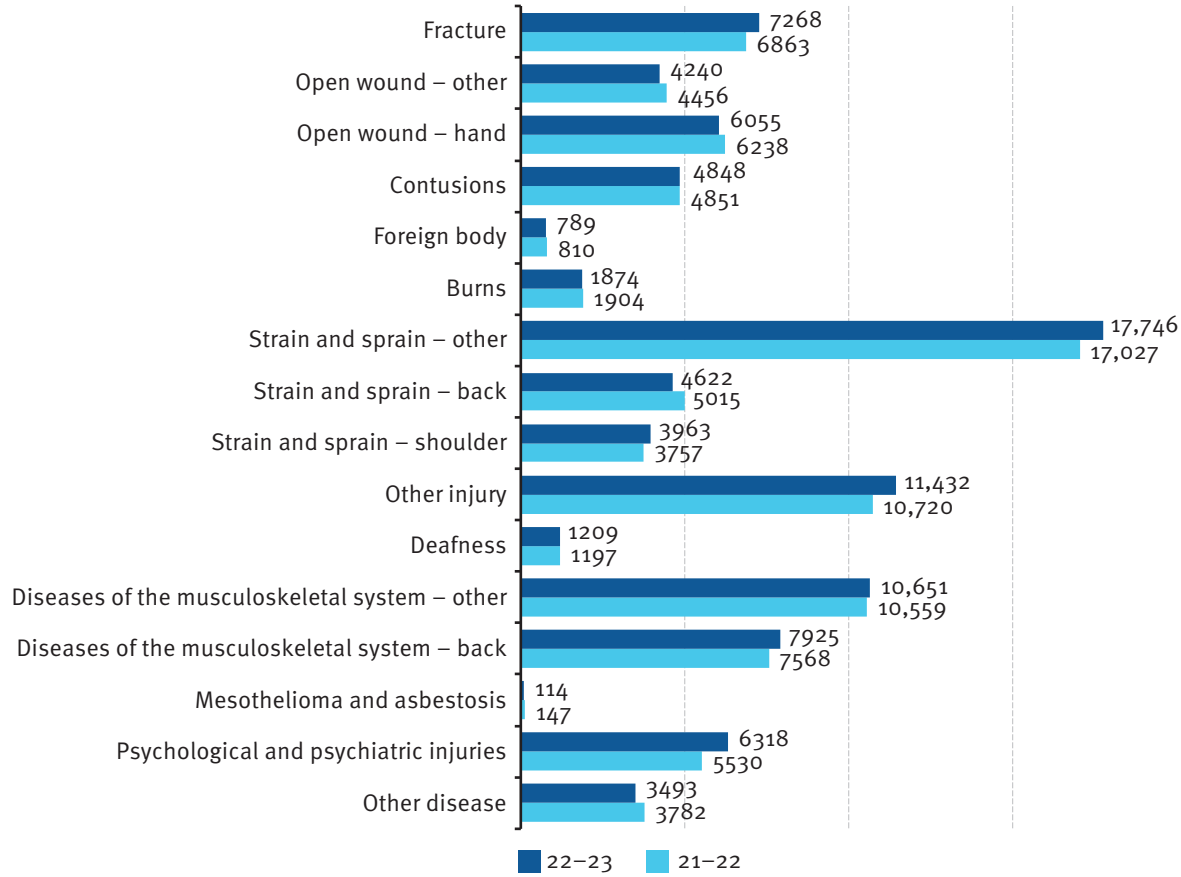
For industry 'Other', this includes injuries pre-July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strain and sprain injury claims accounted for 28.5 per cent of all injuries lodged in 2022–23. Of these, the back was the major bodily location (accounting for 5 per cent of all lodgements).

The proportion of psychological and psychiatric statutory claims increased slightly for 2022–23 at 6.8 per cent (6.1 per cent in 2021–22).

11 Statutory claim lodgements by injury type 2021–22 and 2022–23

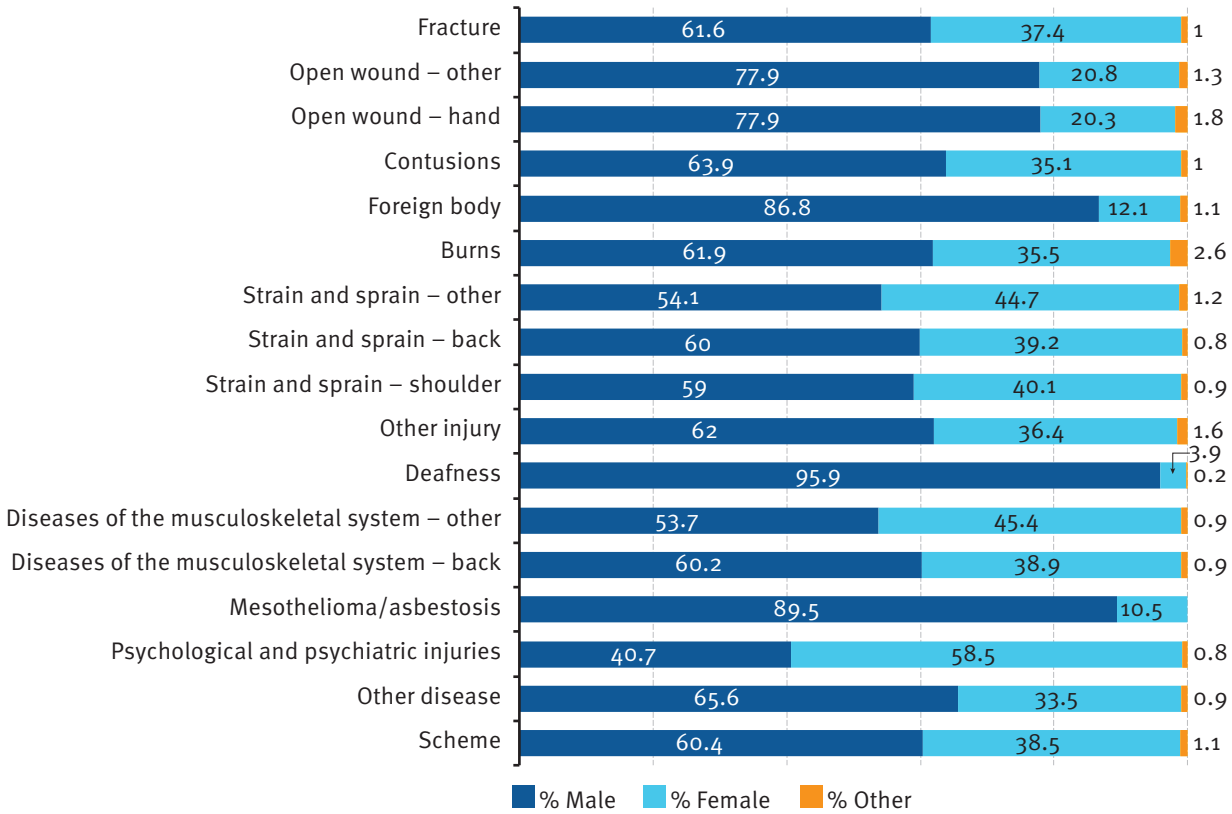


Gender

In 2022–23, males represented 60.4 per cent of the 92,547 claims lodged in the Queensland workers' compensation scheme. Injuries where males represented a much higher proportion of claims than females were deafness (95.9 per cent), mesothelioma and asbestosis (89.5 per cent) and foreign body (86.8 per cent).

Psychological and psychiatric injury was the only injury type where females were represented more than males, with females accounting for 58.5 per cent of claims.

12 Proportion of statutory claim lodgements by injury type and gender 2022–23

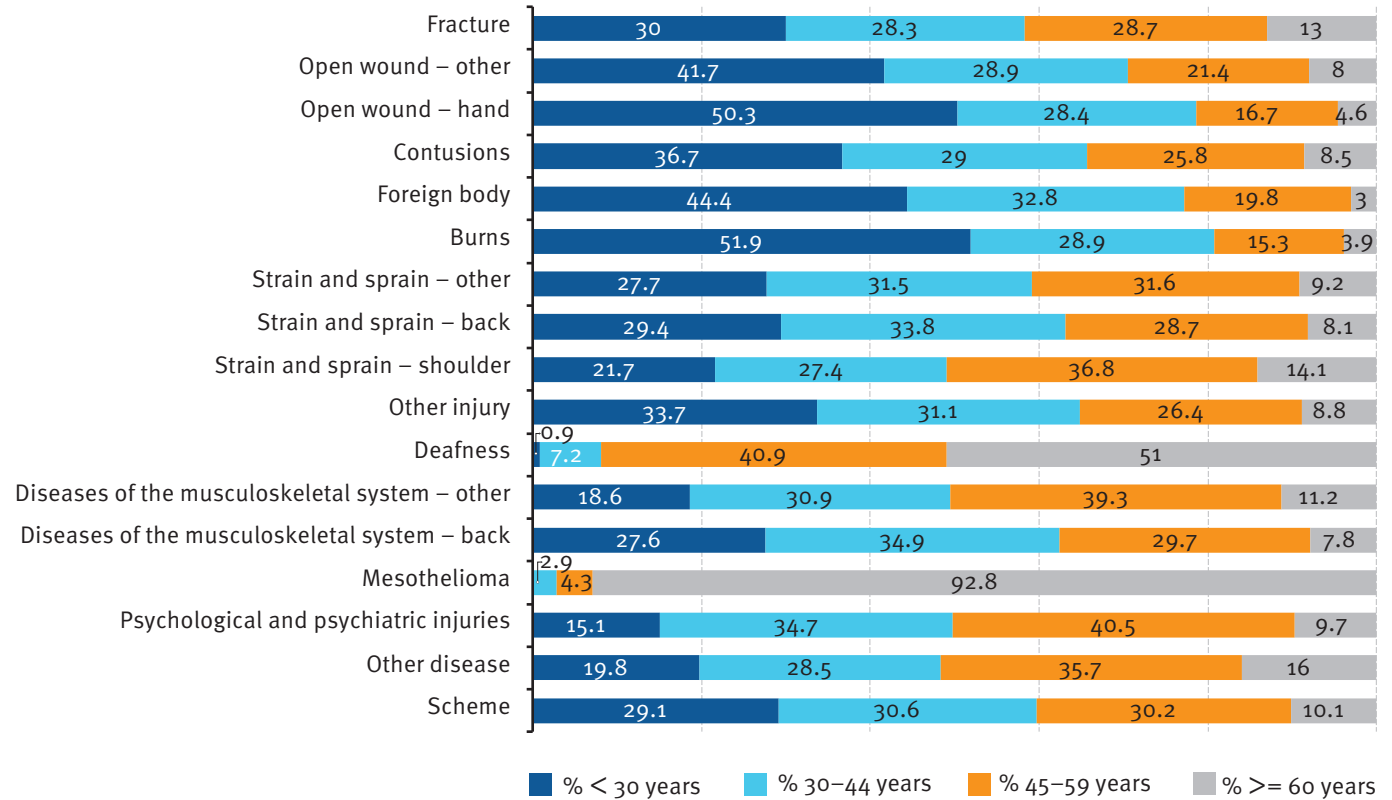


Age

While older workers (60 years or over) represented only 10.1 per cent of all claim lodgements, they have a high representation for injuries such as mesothelioma (92.8 per cent) and deafness (51 per cent).

Injury types where younger workers (less than 30 years) represented a greater proportion include burns (51.9 per cent), open wound to the hand (50.3 per cent), foreign body (44.4 per cent) and open wound to a location other than the hand (41.7 per cent).

13 Proportion of statutory claim lodgements by injury type and age group 2022–23



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

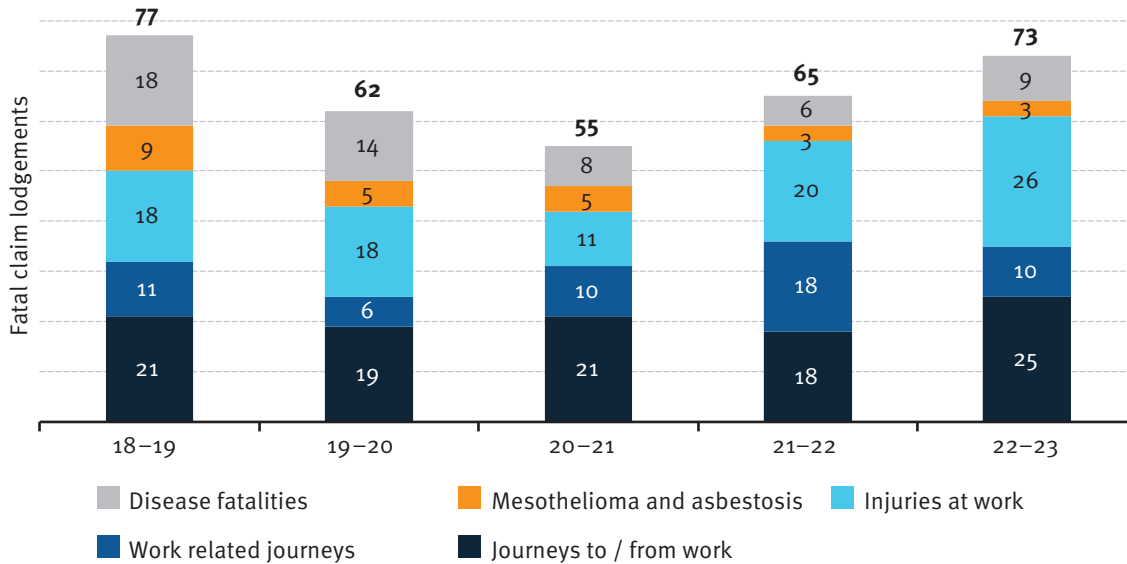
Compensated fatalities

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

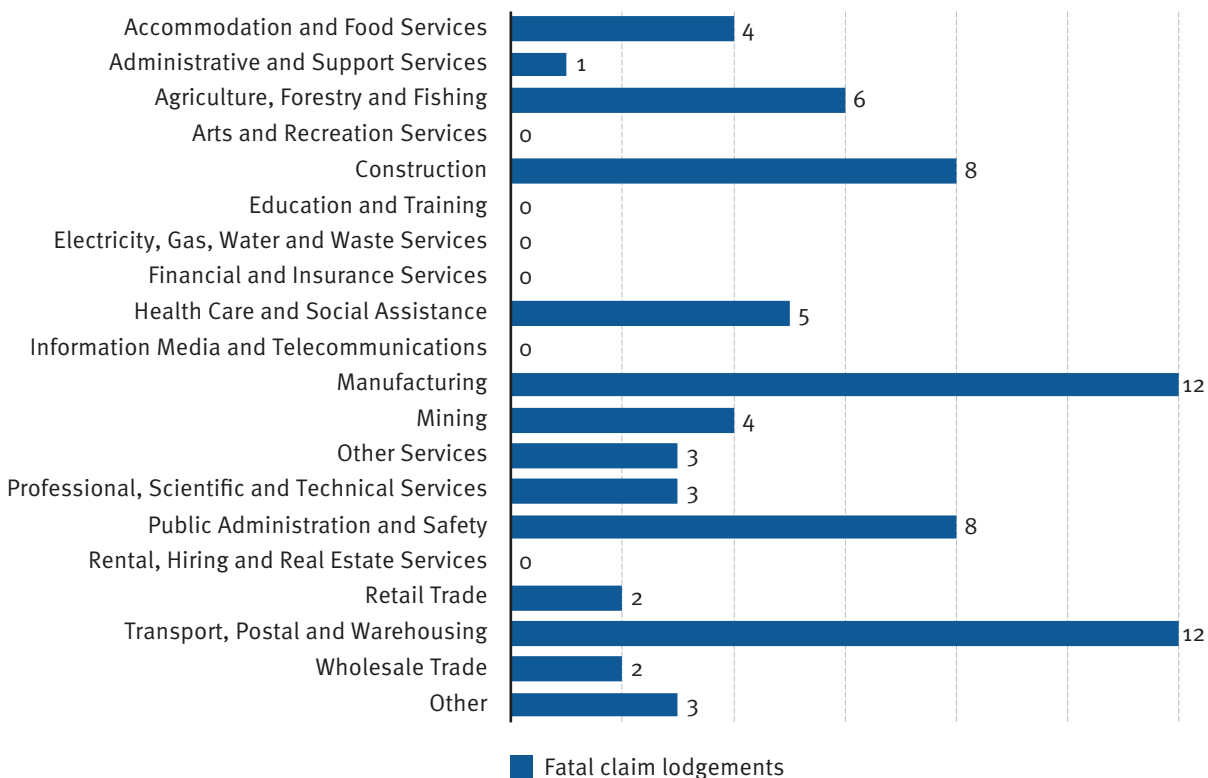
OIR reports the claim as a fatality if the claim is indicated by the insurer as a fatality under the Act on the individual application, taking into account the definitions of a worker, event and injury under the Act (s11, s31 and s32). Figure 14 below shows the fatal claim lodgement numbers.

There were 73 fatalities lodged in 2022–23.

14 Fatal claim lodgements (excluding cancelled claims) 2018–19 to 2022–23



15 Fatal claim lodgements by industry 2022–23



Statutory claim decision-making process

- Decision timeframes have decreased 5.8 per cent in 2022–23
- Claims that are rejected and claims for psychological and psychiatric injuries take longer to decide
- Claims for psychological and psychiatric injuries have a higher chance of rejection
- Of all rejected claims, 76.7 per cent of are rejected due to the injury not meeting the definition under the Act
- Claims lodged with the insurer early are, on average, determined more quickly
- Claims that are rejected are more likely to progress to a review than claims which are accepted.

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

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

If 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 OIR, followed by an appeal to the Queensland Industrial Relations Commission (QIRC) if the parties are dissatisfied with OIR review decision. The court or QIRC decision may be appealed in the Industrial Court (IC).

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

16 Claims decision-making process



Overall, the average decision-making timeframe has decreased to 10.7 days in 2022–23.

The median decision-making timeframe has decreased to five days in 2022–23 (seven days in 2021–22).

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

17 Average time to decide by injury type 2021–22 and 2022–23

Injury type	Average decision time (days)	
	2021–22	2022–23
Fracture	6.5	5.7
Open wound – other	7	5.5
Open wound – hand	6.6	4.9
Contusions	7.4	6
Foreign body	7.4	5.8
Burns	7	5.4
Strain and sprain – other	8	7.6
Strain and sprain – back	8.8	8.1
Strain and sprain – shoulder	9.3	9
Other injury	9.3	8.2
Deafness	44.3	33.9
Diseases of the musculoskeletal system – other	12	11.6
Diseases of the musculoskeletal system – back	10.9	10.1
Mesothelioma and asbestosis	39.3	47.2
Psychological and psychiatric injuries	35.5	34.4
Other disease	22.2	23.8
Total average	11.4	10.7

Figure 18 illustrates decision-making timeframes and outcomes for claims determined in 2022–23. These timeframes are based on statutory claim decisions.

Most claims (92.5 per cent) were accepted by insurers with an average determination time of 10.7 days. On average, decision timeframes tended to be longer for:

- rejected claims—determined in 37.1 days on average compared to 8.6 days on average for accepted claims
- diseases—particularly psychological and psychiatric injury claims (average 34.4 days to determine), mesothelioma and asbestosis claims (average 47.2 days to determine) and deafness (average 33.9 days to determine).

In 2022–23, 47.2 per cent of psychological and psychiatric claims were rejected.

One reason the rejection rate of psychological and psychiatric claims is so high is that workers cannot receive compensation for certain psychological and psychiatric injuries that arise out of or in the course of reasonable management action, as they are excluded from the definition of an injury under the Act. In 2022–23, 91.5 per cent of the rejected psychological and psychiatric claims were rejected on this basis.

18 Decisions made and average time to decide by decision type and injury type 2022–23

Injury type	Number of decisions	Proportion of decisions		Average decision time		
		Admitted %	Rejected %	Admitted days	Rejected days	Total days
Fracture	6748	96.6	3.4	5.2	19.2	5.7
Open wound – other	3444	97	3	5.1	16.2	5.5
Open wound – hand	5138	98.3	1.7	4.7	14.6	4.9
Contusions	4031	98	2	5.7	22.4	6
Foreign body	624	97.1	2.9	5.4	19.2	5.8
Burns	1349	98.2	1.8	5.2	13.8	5.4
Strain and sprain – other	15,957	96.9	3.1	7	26.4	7.6
Strain and sprain – back	4225	96.8	3.2	7.4	29	8.1
Strain and sprain – shoulder	3661	96.4	3.6	8	35.2	9
Other injury	8942	94.4	5.6	7.2	26.3	8.2
Deafness	1294	88.8	11.2	31.3	54.8	33.9
Diseases of the musculoskeletal system – other	9706	92.9	7.1	9.9	35	11.6
Diseases of the musculoskeletal system – back	7124	94.6	5.4	8.8	33	10.1
Mesothelioma and asbestosis	83	95.2	4.8	41.8	154.3	47.2
Psychological and psychiatric injuries	5176	52.8	47.2	25	44.9	34.4
Other disease	2936	81.4	18.6	19.3	43.3	23.8
Total	80,438	92.5	7.5	8.6	37.1	10.7

Reasons for claim rejection

Insurers reject claims where, for some reason, the event or the person is not covered under the Act. For 76.7 per cent of rejected claims, the reason for rejection was that the injury did not meet the definition under the Act.

Figure 19 details the main reasons claims were rejected.

19 Rejected claims by reason for rejection 2021–22 and 2022–23

Reason for rejection	21–22		22–23	
	Number of rejections	% of rejections	Number of rejections	% of rejections
Not an injury – s.32	3918	80.5	4611	76.7
Not a worker – s.11	328	6.8	681	11.3
Out of time – excluded under s.131	334	6.9	434	7.2
Journey – subsequent delay, interruption or deviation – s.36(2)(B)	22	0.5	40	0.7
Invalid application – s.132	5	0.1	2	0
Industrial deafness – excluded under s.125 - initial application	70	1.4	67	1.1
Not a journey – s.35	66	1.4	63	1
Other	115	2.4	122	2
Total	4858	100	6020	100

Determination of medically complex claims

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

In 2022–23, only 54 claims were referred to the Medical assessment tribunal for determination of the worker's injury for an application for compensation. Of these cases, 35 (64.8 per cent) were accepted and the remaining 19 (35.2 per cent) cases were rejected.

Disputation of insurer claim determination decisions

Both the injured worker and employer are able to dispute an insurer's claim determination decision. While only a small percentage of accepted claims are disputed by employers (0.6 per cent), 24.2 per cent of rejected claims are disputed by either the employer or the injured worker.

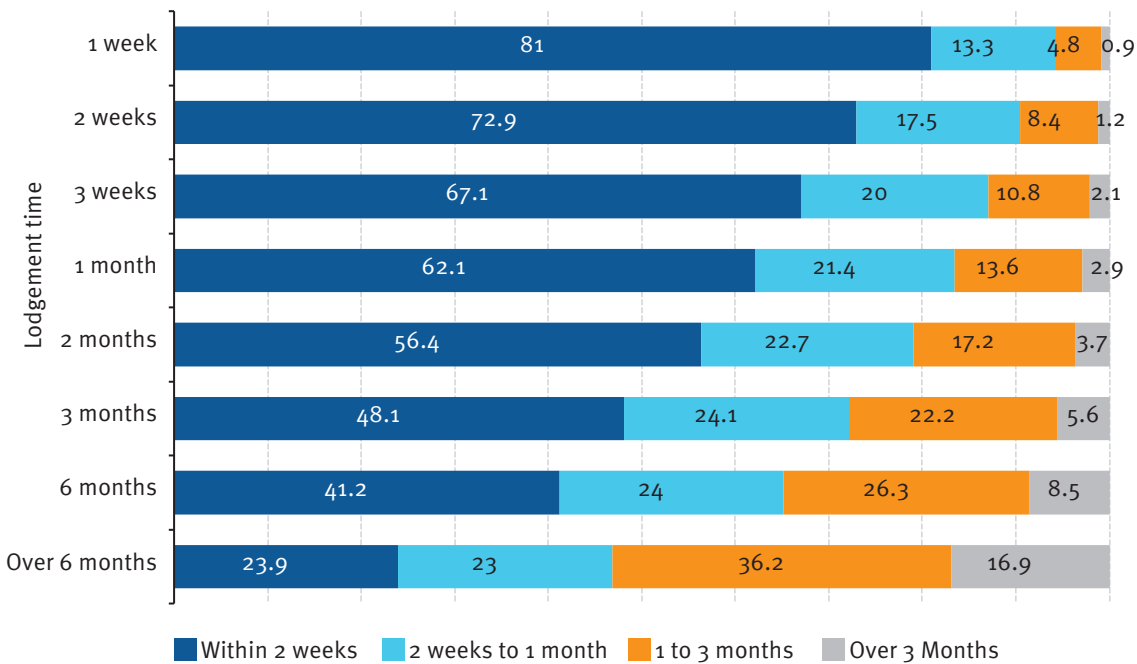
Impact of lodgement time on determination time

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

81 per cent of claims lodged within the first week of the injury are determined by the insurer within two weeks. The proportion decided within two weeks reduces as the time taken to lodge the claim increases. For claims lodged more than six months after an injury, the proportion determined in less than two weeks drops to 23.9 per cent.

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

20 Decision-making timeframes for claims decided in 2022–23 by the time taken to lodge the claim



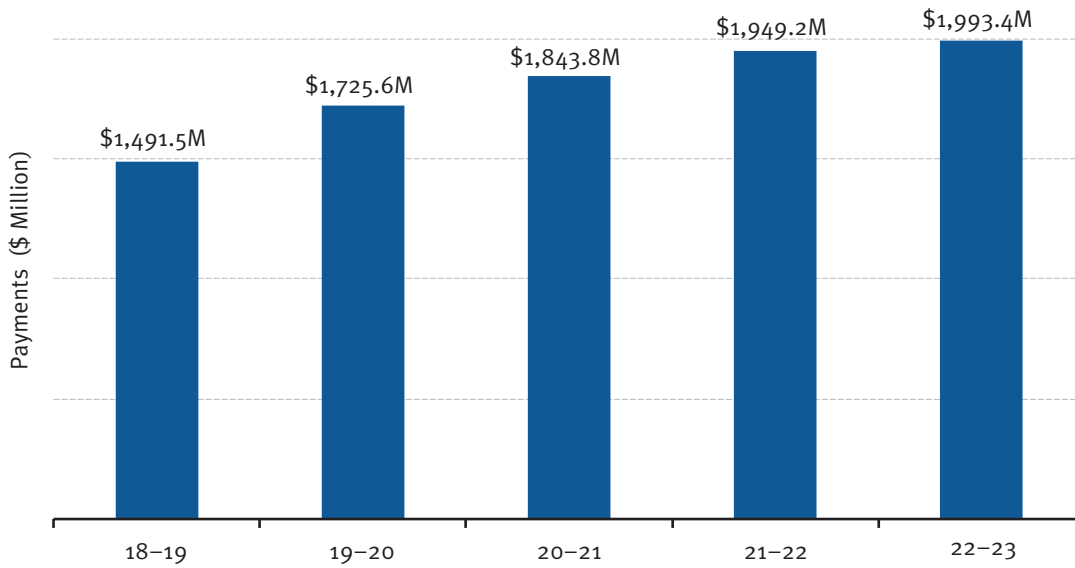
Claim payments

- Total scheme payments increased 2.3 per cent in 2022–23
- There was an 11.9 per cent increase in common law payments made in 2022–23
- Statutory payments decreased by 1.3 per cent between 2021–22 and 2022–23.

Workers' compensation payments

Overall, the total scheme payments increased 2.3 per cent in 2022–23, with common law payments increasing by 11.9 per cent and statutory payments decreasing by 1.3 per cent. Total payments for workers' compensation claims in 2022–23 were \$1,993.4 million. Common law payments made up 29.2 per cent (\$582.3 million) and statutory claim payments made up 70.8 per cent (\$1,411 million).

21 Scheme payments 2018–19 to 2022–23

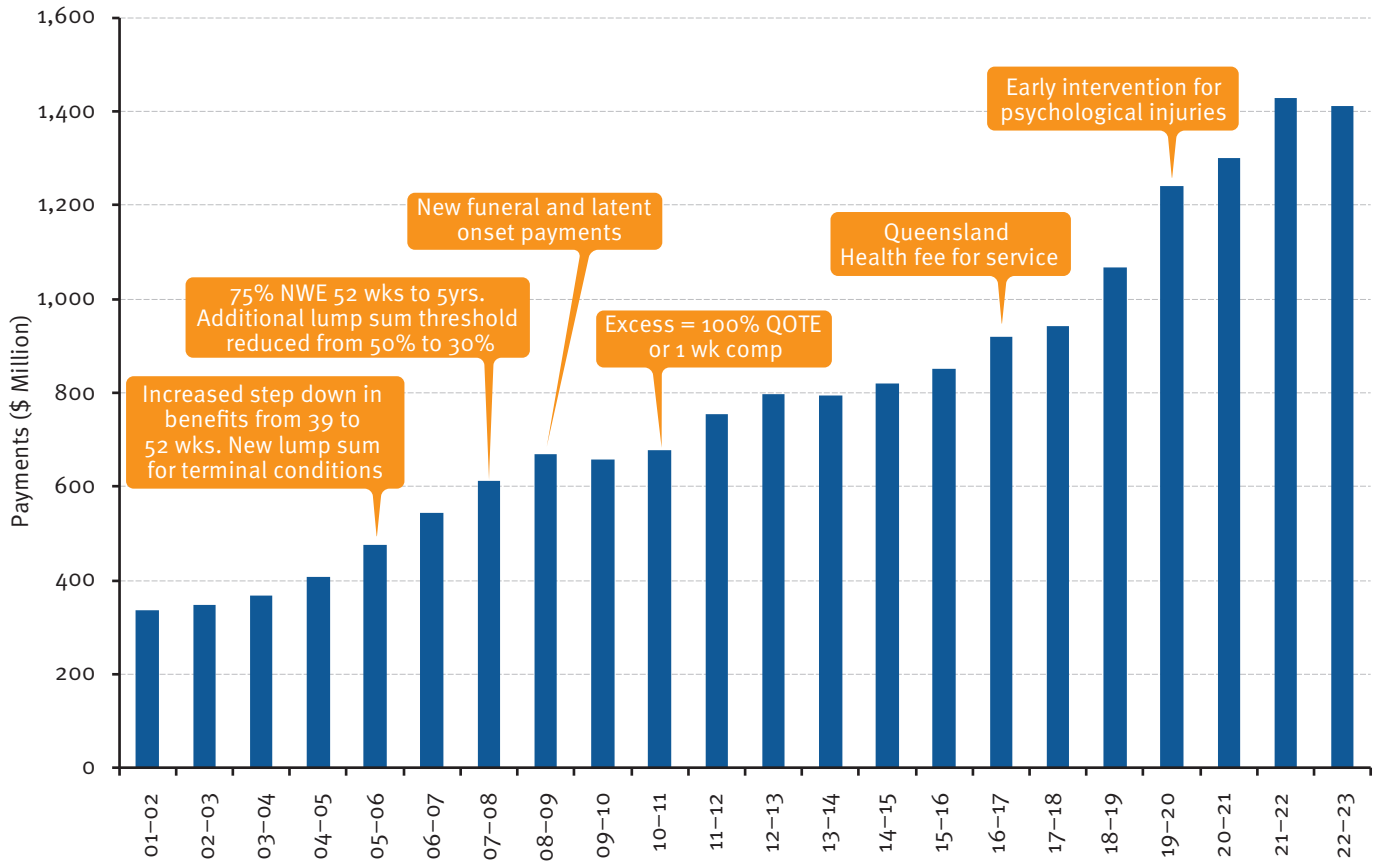


Statutory claim payments

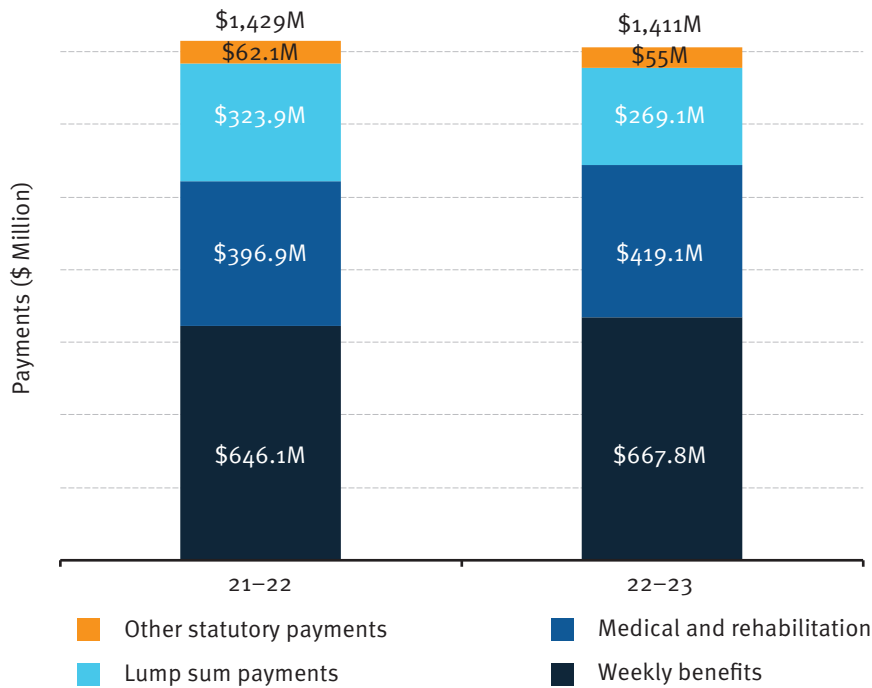
During the management of a claim, payments are made to the worker for weekly compensation to replace wages, lump sums for permanent impairment (PI) and a broad range of services such as medical treatment and rehabilitation.

Figure 22 below shows a history of statutory claim payments and key events in the Queensland workers' compensation scheme. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.

22 Statutory claim payment history 2001–02 to 2022–23



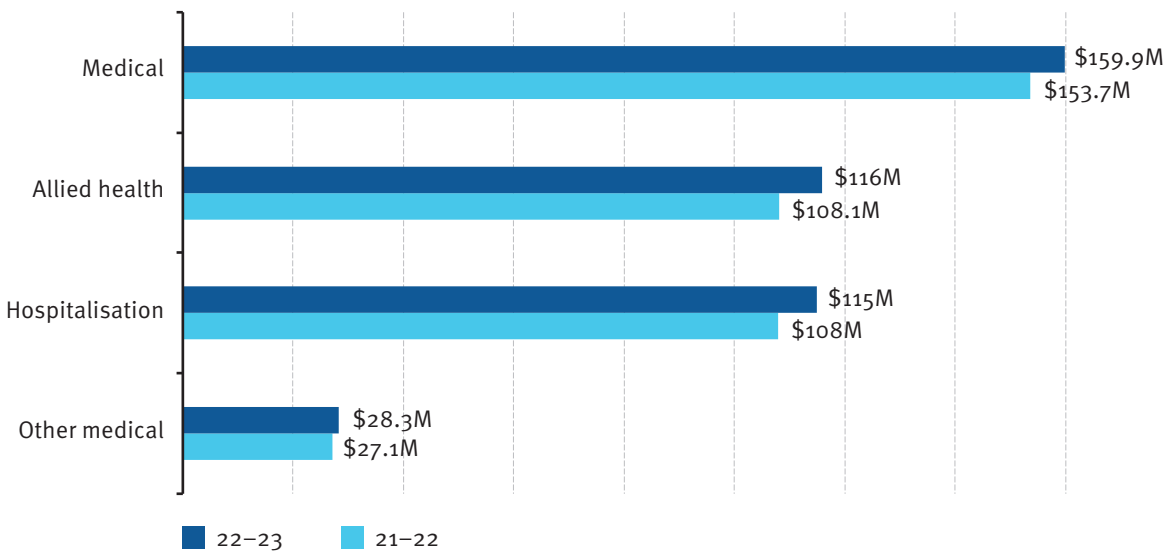
23 Statutory claim payments by payment type 2021–22 and 2022–23



The total amount spent on claims for the year has decreased by 1.3 per cent from \$1,429 million in 2021–22 to \$1,411 million in 2022–23 (figure 23).

The largest payments decrease was for lump sum payments, down 16.9 per cent from 2021–22.

24 Medical and rehabilitation payments 2021–22 and 2022–23

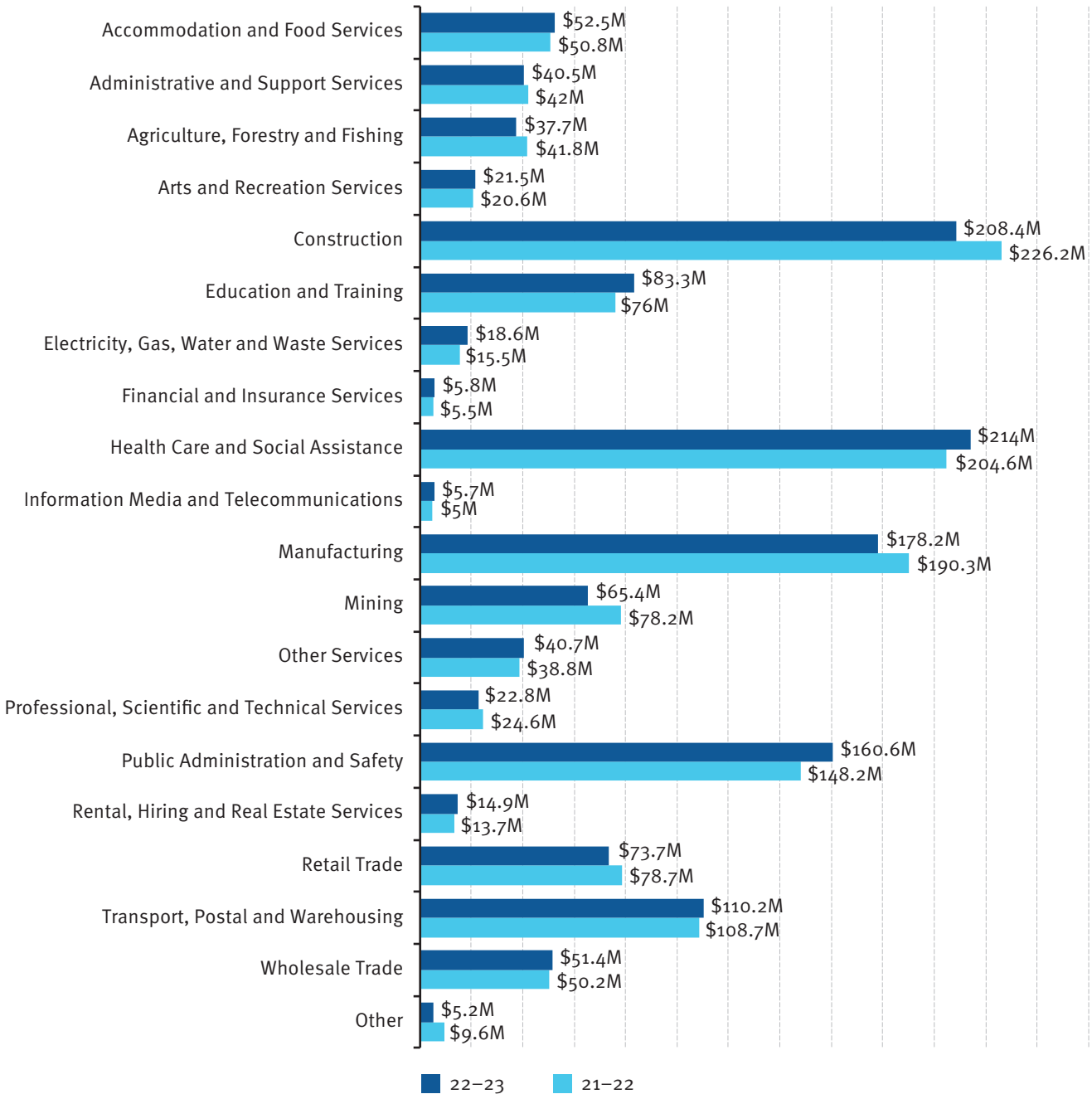


Medical and rehabilitation payments represent 29.7 per cent of statutory payments. Payments for medical treatment accounted for 38.1 per cent of all payments for medical and rehabilitation fees paid in the scheme in 2022–23. Allied health payments increased 7.3 per cent in 2022–23 from \$108.1 million in 2021–22 to \$116 million.

Payments by industry

Claims from the health care and social assistance industry accounted for the largest proportion (15.2 per cent) of statutory claim payments in 2022–23. Construction accounted for 14.8 per cent of statutory payments, while manufacturing accounted for 12.6 per cent (figure 25).

25 Statutory claim payments by industry 2021–22 and 2022–23

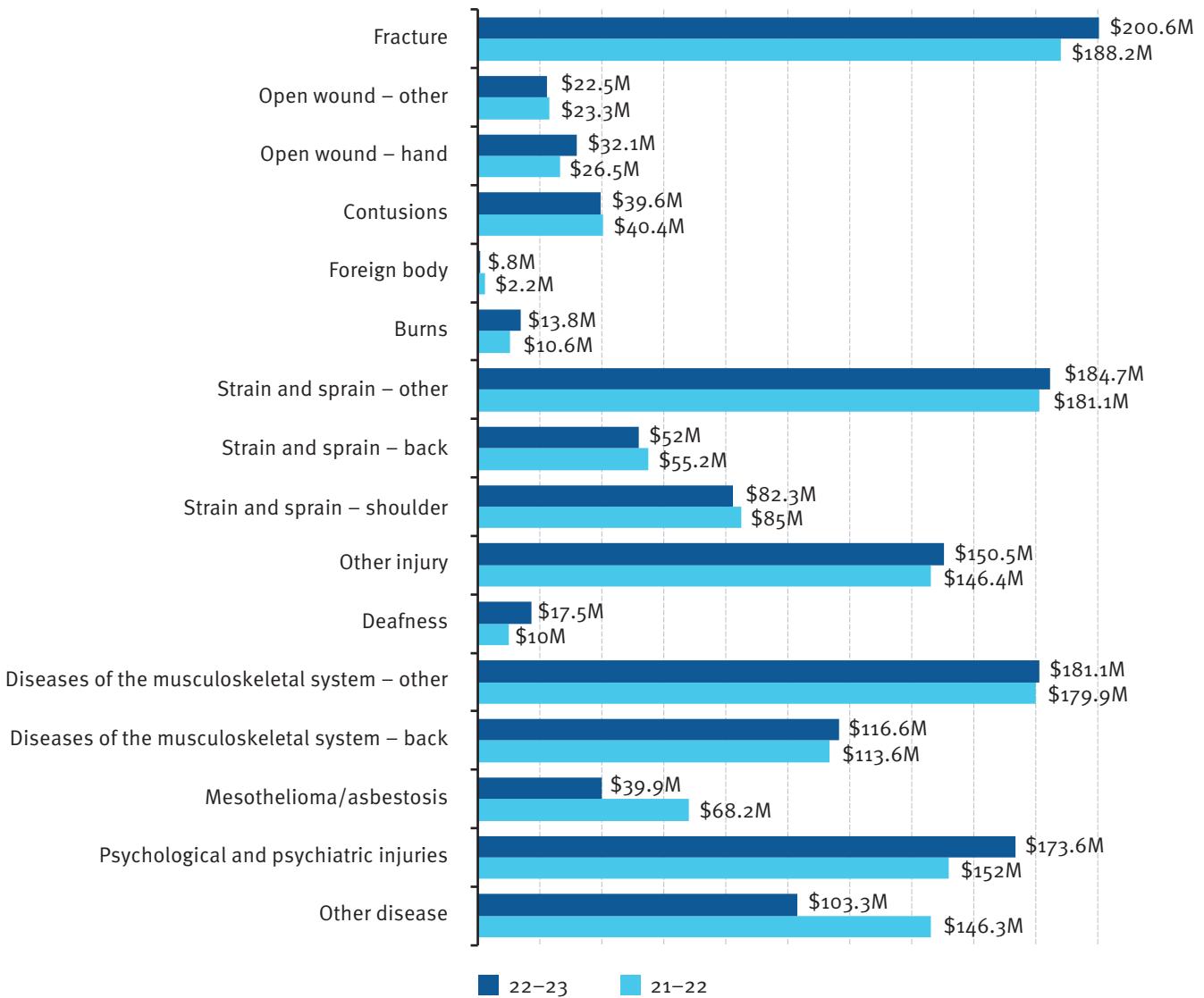


Payments by injury

Claims from strain and sprain injuries accounted for the largest proportion (22.6 per cent) of statutory claim payments in 2022–23 (3.7 per cent to the back, 5.8 per cent to the shoulder and 13.1 per cent to a location other than the back or shoulder). Diseases of the musculoskeletal system claims accounted for 21.1 per cent of statutory claim payments made in 2022–23 (8.3 per cent to the back and 12.8 per cent to a location other than the back). Fractures accounted for 14.2 per cent of claim injuries in 2022–23.

The injury type that experienced the largest percentage increase in statutory claim payments from 2021–22 to 2022–23 was deafness injuries (74.3 per cent).

26 Statutory claim payments by injury type 2021–22 and 2022–23



Finalised claims and outcomes

- The average costs of finalised medical expense only claims decreased by 11.9 per cent
- The average costs of finalised time lost claims decreased by 1.8 per cent and the duration increased 0.4 per cent.

Work related impairment/degree of permanent impairment

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

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

Injured workers receive an offer of lump sum compensation based on their WRI or DPI. Figure 27 shows the number of claims finalised and those that had a WRI/DPI in 2021–22 and 2022–23.

27 Finalised claims with a WRI/DPI 2021–22 and 2022–23

	21–22	22–23	Variance %
Finalised claims	74,562	75,629	1.4
WRI/DPI	10,283	10,544	2.5
Proportion of finalised claims with WRI/DPI	13.8%	13.9%	0.1
Work related impairment/Degree of permanent impairment range			
0%	2213	2421	9.4
0.1%–4.9%	3187	3337	4.7
5%–9.9%	3040	3138	3.2
10%–14.9%	804	742	-7.7
15%–19.9%	413	353	-14.5
≥20%	626	553	-11.7

For 2022–23, 13.9 per cent of claims were finalised with a PI. Of these, the majority of claims (94.8 per cent) had a WRI/DPI of less than 20 per cent and 23 per cent were calculated as having a zero per cent impairment.

Return to work outcomes

Returning an injured worker to the same job with the same employer is the best outcome that can be achieved on a claim. The following figure analyses the RTW outcome of claims reported at the time the claim closed. As figure 28 illustrates, this is the outcome achieved in most cases, with 82 per cent of injured workers who had time off work returning to the same job and the same employer.

In 2022–23, 91.9 per cent of injured workers returned to some type of employment. In a small number of cases, the worker is deemed fit to return to work but there is no job for the worker to return to (2 per cent of time lost claims) or the worker chooses not to return (3.1 per cent of claims).

Note: During the 2021–22 financial year, WorkCover Queensland identified errors in recording the return to work (RTW) outcome (for more information refer to the WorkCover Queensland Annual Report 2021–22). WorkCover Queensland self-reported this compliance issue to Workers' Compensation Regulatory Services and has actioned improvements to address this issue.

28 Return to work status of finalised time lost claims 2022–23

	2022–23	
	Number	% of time lost claims
Fit for work: same job/tasks with same employer	39,090	82
Fit for work: same job/tasks with different employer	801	1.7
Fit for work: different job/tasks with same employer	1172	2.5
Fit for work: different job/tasks with different employer	2746	5.8
Fit for work: no job	958	2
Fit for work: worker does not return	1485	3.1
Not fit for work	1354	2.8
Alternative outcome not claim related	58	0.1
Total	47,664	100

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

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

Workers with claims assessed for PI are less likely to return to the same job with the same employer. In 2022–23, 10.5 per cent of workers returning to the same job with the same employer had a PI assessed.

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

29 Return to work status of finalised time lost claims with/without a PI assessed 2022–23

	22–23		
	PI Assessed		
	% No	% Yes	Number
Fit for work: same job/tasks with same employer	89.5	10.5	39,090
Fit for work: same job/tasks with different employer	69.4	30.6	801
Fit for work: different job/tasks with same employer	49.7	50.3	1172
Fit for work: different job/tasks with different employer	53.8	46.2	2746
Fit for work: no job	35.1	64.9	958
Fit for work: worker does not return	53.4	46.6	1485
Not fit for work	28.1	71.9	1354
Alternative outcome not claim related	55.2	44.8	58
Total	82.2	17.8	47,664

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

Workers having claims with both a physical and psychological or psychiatric component are the least likely to return to employment and in 2022–23, 16.2 per cent were not fit for work at the end of their claim.

30 Return to work status of finalised time lost claims by injury nature 2021–22 and 2022–23

	22–23		
	Physical only %	Psych only %	Psych and Physical %
Fit for work: same job/tasks with same employer	86	49.2	37.8
Fit for work: same job/tasks with different employer	1.5	3.6	3.7
Fit for work: different job/tasks with same employer	2.2	5.7	5.3
Fit for work: different job/tasks with different employer	4.7	15.3	17.3
Fit for work: no job	1.5	5	9.6
Fit for work: worker does not return	2.5	9.2	9.6
Not fit for work	1.7	11.7	16.2
Alternative outcome not claim related	0.1	0.4	0.5
Total	100	100	100
Number	43,293	1957	2414

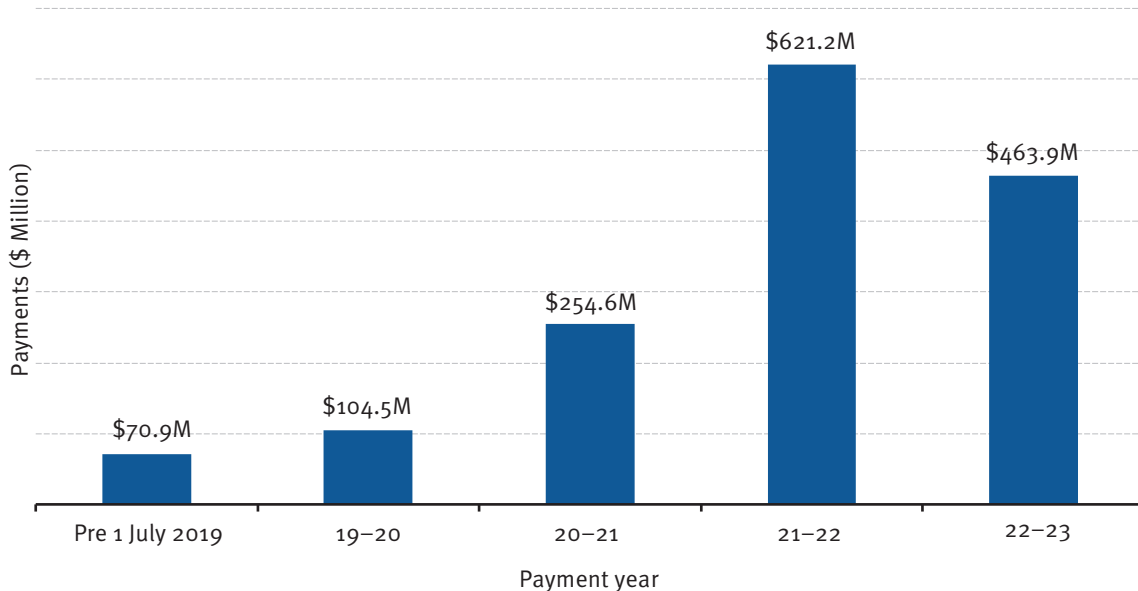
Note: For the purpose of the above figure only, all deceased injured workers have been excluded.

Average claim costs

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

Figure 31 below illustrates the payments made on claims finalised in 2022–23. Over 69 per cent of the payments for these claims occurred in previous years. Only 30.6 per cent of the statutory payments made on claims finalised in 2022–23 were also paid in that financial year. A further 41 per cent of payments were made in the 2021–22 financial year. The remaining 28.4 per cent of the payments were made in 2020–21 or earlier.

31 Payments by payment year for claims finalised in 2022–23



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 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 decreased for the financial year (down 3.4 per cent from \$19,756 in 2021–22 to \$19,087 in 2022–23).

The number of claims finalised in the past two financial years, and the average claim costs by claim type for time lost claims and medical expense only claims is represented in figure 32 below. These two claim types represent 97.4 per cent of all finalised claims during 2022–23.

32 Finalised claims and average claim costs by claim type 2021–22 and 2022–23

Claim type	Number of claims			Average claim cost		
	21–22	22–23	Variance %	21–22	22–23	Variance %
Time lost claim	47,554	47,681	0.3	\$28,163	\$27,643	-1.8
Medical expense only claim	25,063	25,928	3.5	\$3,805	\$3,352	-11.9
Total	72,617	73,609	1.4	\$19,756	\$19,087	-3.4

The median claim costs for time lost and medical expense only claims has increased from \$2788 in 2021–22 to \$3043 in 2022–23.

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

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

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

33 Changes in average finalised claim costs and economic indices 2022–23

Indicator	% change from previous year
Average finalised time lost claim cost	-1.8
Average finalised medical expense only claim cost	-11.9
Consumer price index	
Average of all groups, Brisbane (excluding GST) ^a	7.4
Health, Brisbane (excluding GST) ^b	6.9
Full time adult ordinary earnings ^c	5.3

^a Australian Bureau of Statistics, consumer price index, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2023, Tables 1 and 2 CPI - all groups, index numbers and percentages changes, Index Numbers; All groups; Brisbane. [Percentage change from March 2022 to March 2023].

^b Australian Bureau of Statistics, Australia Cat No. 6401.0 - Consumer Price Index, Australia, March 2023, Table 5 CPI - groups, index numbers by capital city, Index Numbers; Health; Brisbane. [Percentage change from March 2022 to March 2023].

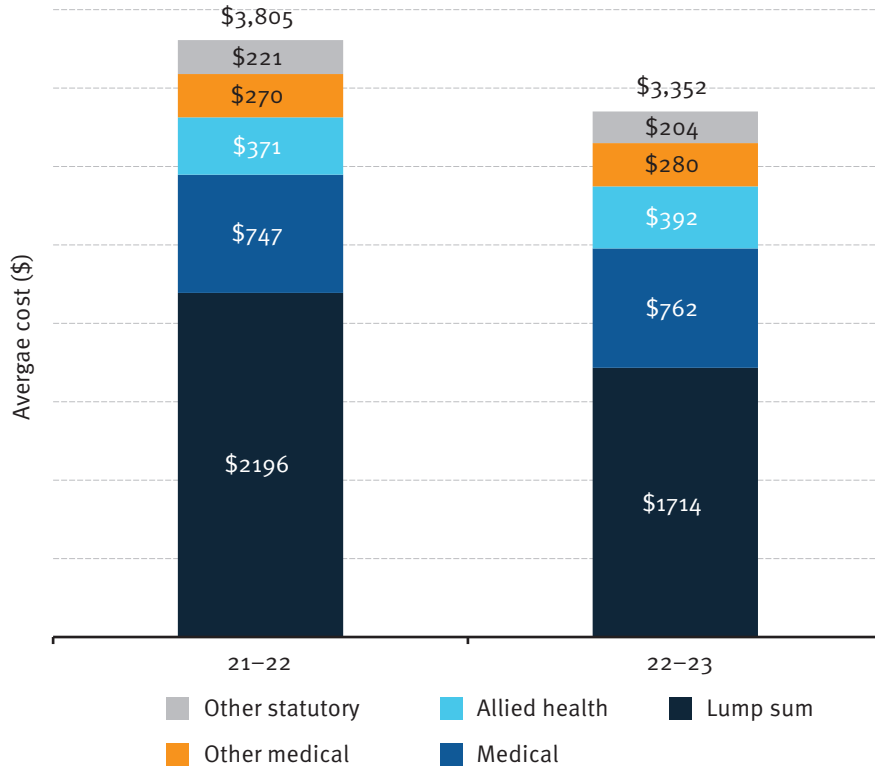
^c Australian Bureau of Statistics, average weekly earnings, Australia Cat No. 6302.0 - Average weekly earnings Australia, November 2022. Table 13C Average weekly earnings Queensland (dollars) - trend, Earnings ; Queensland ; Persons ; Full Time ; Adult ; Ordinary time earnings. [Percentage change from November 2021 to November 2022].

Average finalised medical expense only claim costs

The average cost of finalised medical expense only claims has decreased by 11.9 per cent from \$3805 in 2021–22 to \$3352 in 2022–23 (figure 34).

The breakdown of the average cost for 2022–23 shows 51.1 per cent of the cost is made up of lump sum payments followed by medical and rehabilitation payments of 22.7 per cent. Allied health payments account for 11.7 per cent and other medical payments (including hospitalisation) account for 8.4 per cent. The remaining 6.1 per cent of the average cost is made up of other statutory payments.

34 Average finalised medical expense only claim costs by payment type 2021–22 and 2022–23



Average finalised time lost claim durations

Average finalised time lost claim durations are calculated using finalised time lost claims over a financial year. The number of finalised time lost claims increased in 2022–23, up 0.3 per cent from 47,554 in 2021–22 to 47,681.

Durations for finalised time lost claims including the excess paid period by the employer (where applicable) have increased from 72 days in 2021–22 to 72.3 days in 2022–23.

Almost two thirds of time lost claims have 40 or less workdays lost (63.3 per cent), while the median workdays lost for all time lost claims is 21 days. This illustrates how the small number of long term claims impact the average duration. Only 15.8 per cent of time lost claims had more than 130 workdays lost. It is at the 26 week point that the level of compensation benefits payable first begins to decrease (section 150 of the Act).

35 Number of time lost claims by workdays lost time band 2021–22 and 2022–23

Workdays lost	21–22		22–23	
	Number of claims	% of claims	Number of claims	% of claims
1–5 days	12,162	25.6	12,067	25.3
6–10 days	5485	11.5	5653	11.9
11–20 days	5921	12.5	6107	12.8
21–40 days	6380	13.4	6373	13.4
41–65 days	4570	9.6	4421	9.2
66–130 days	5566	11.7	5512	11.6
131–260 days	4121	8.7	4117	8.6
> 260 days	3349	7	3431	7.2
Total time lost claims	47,554	100	47,681	100

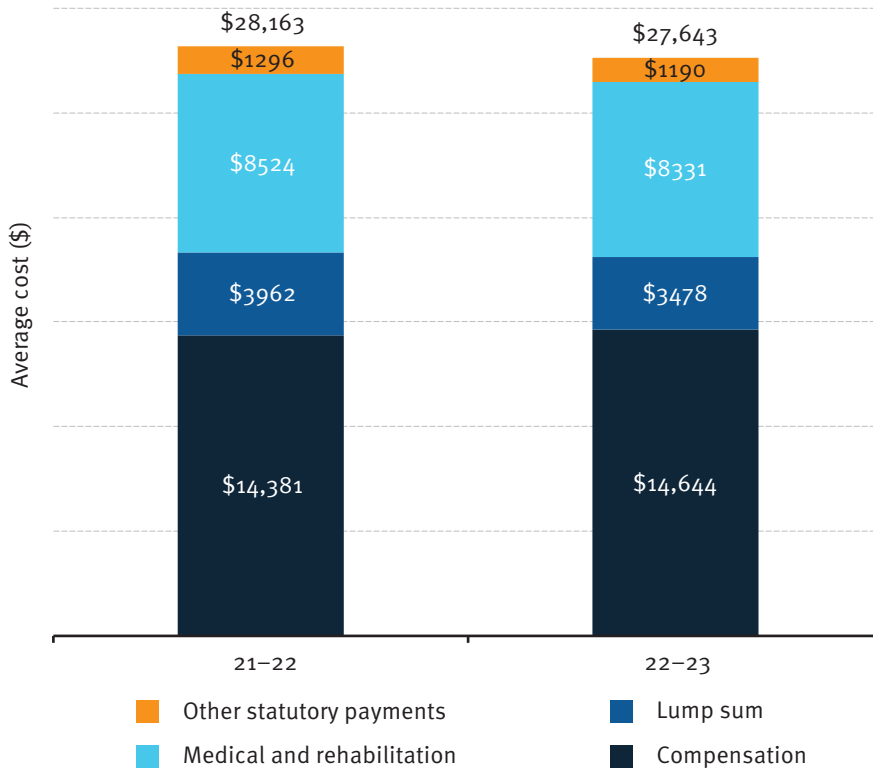
Average finalised time lost claim costs

The average cost of finalised time lost claims decreased by 1.8 per cent from \$28,163 in 2021–22 to \$27,643 in 2022–23 (figure 36).

The breakdown of the average cost in 2022–23 shows over half (53 per cent) of the cost is made up of weekly compensation payments.

In 2022–23, medical and rehabilitation payments accounted for almost a third (30.1 per cent) of the average cost and lump sum payments accounted for 12.6 per cent. The remaining 4.3 per cent of the average cost was made up of other statutory payments.

36 Average finalised time lost claim costs by payment type 2021–22 and 2022–23

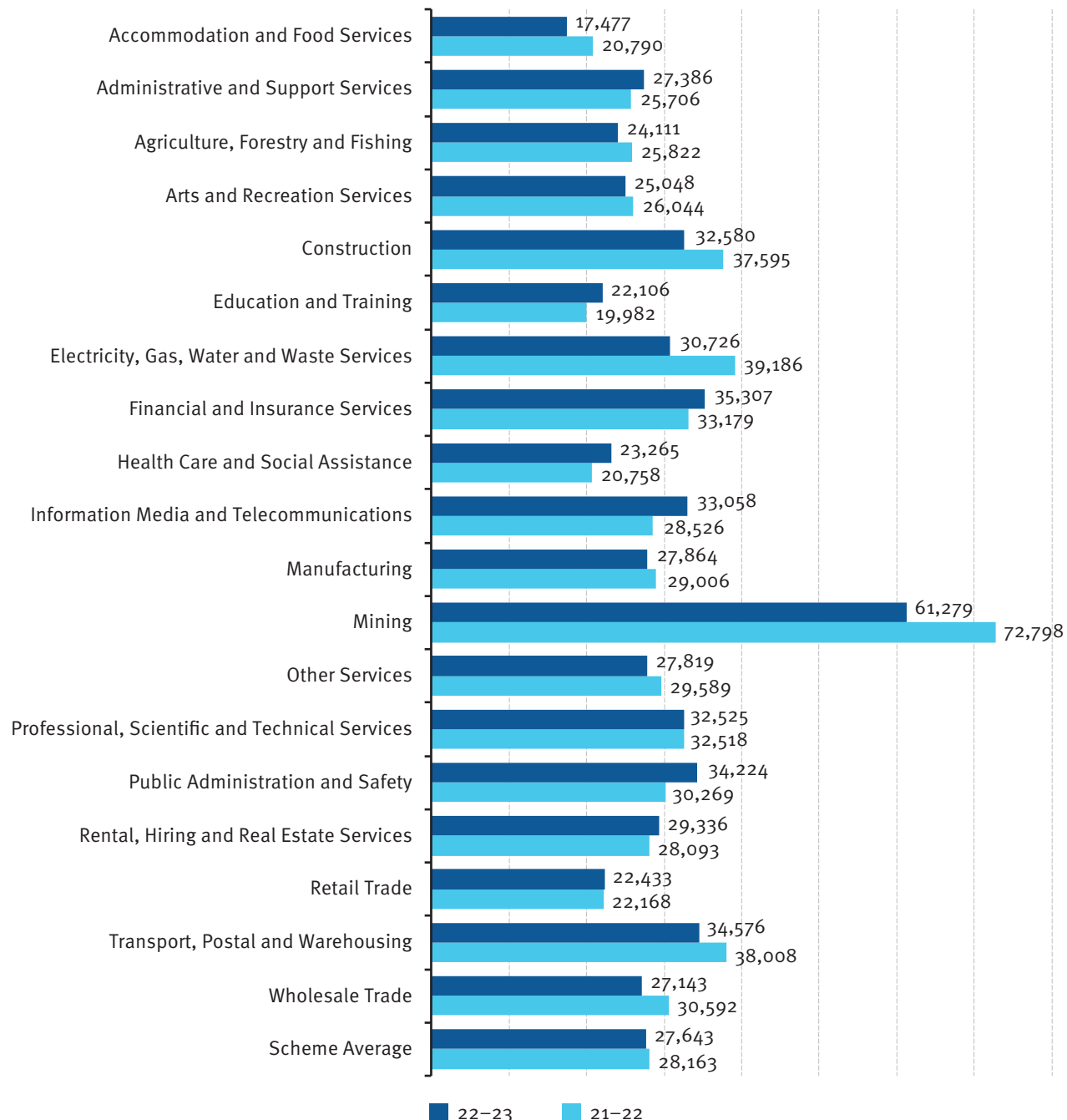


Average cost by industry

Of all industry claims, those from the mining industry had the highest average finalised time lost claim cost (\$61,279), partially due to the higher wages paid in the industry (figure 37). Being the highest of all industries, the Australian average weekly earnings (full time adult ordinary time earnings) for workers within the mining industry is \$2812*.

Similarly, industries that tended to have a lower average finalised time lost claim cost (e.g. accommodation and food services and retail trade) also had the lowest Australian average weekly earnings of all industries—\$1294 and \$1354 respectively.

37 Average finalised time lost claim costs by industry 2021–22 and 2022–23



*Source: ABS, Average Weekly Earnings, Cat. No. 6302.0, November 2022, Table 10G. Average Weekly Earnings, Industry, Australia (Dollars) - Original - Persons, Full Time Adult Ordinary Time Earnings.

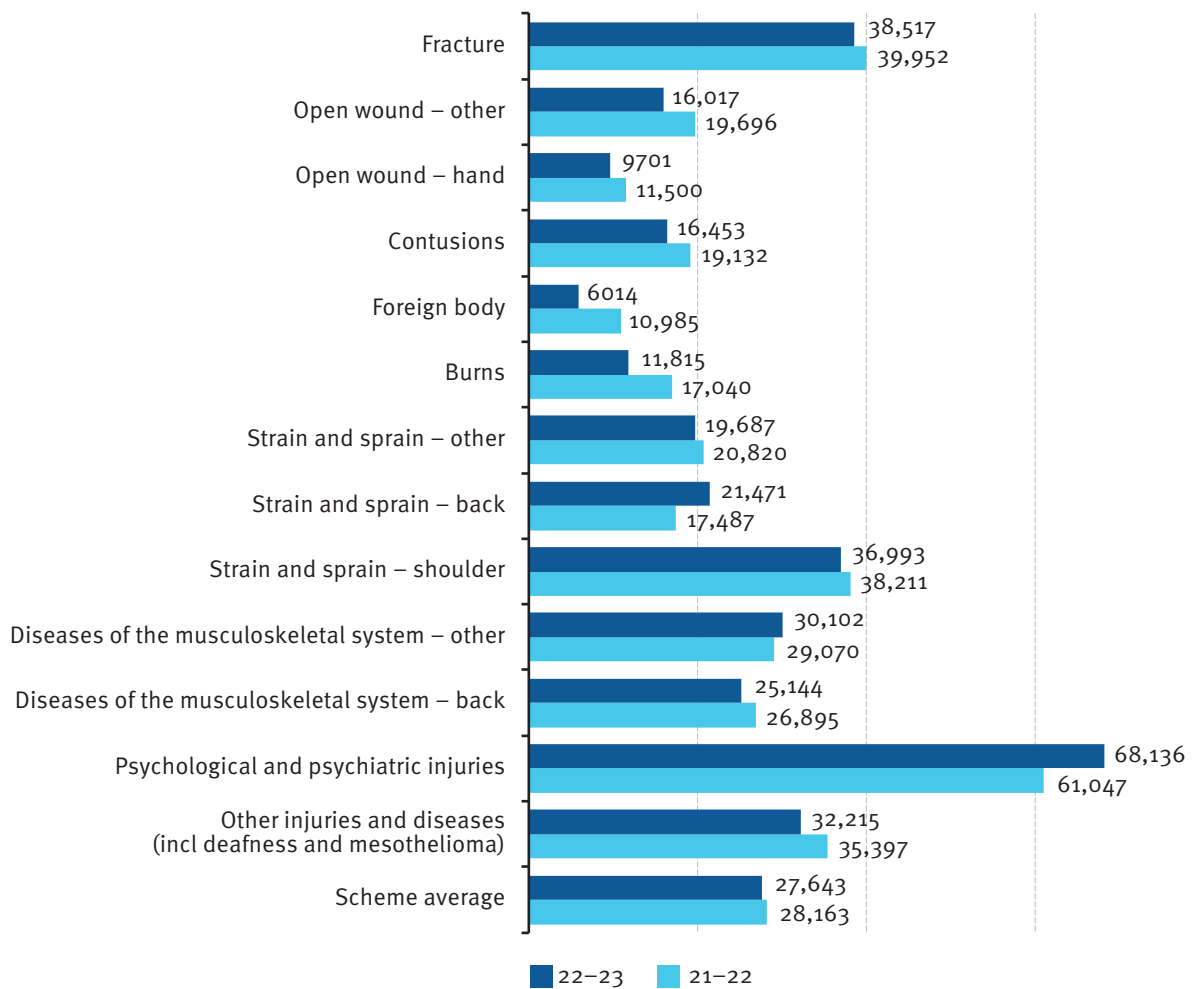
Average cost by injury type

Although psychological and psychiatric injury claims account for only 4.6 per cent of all time lost claims finalised, they are the most expensive with an average finalised time lost claim cost of \$68,136 in 2022–23.

In 2022–23, the average duration of a psychological or psychiatric injury claim was 199.7 days (181.4 days in 2021–22) compared with the overall scheme average of 72.3 days. It is the long duration of psychological and psychiatric injury claims that impacts the average finalised time lost claim cost for these claims.

As shown in figure 38, the second most expensive injury type was fractures with an average cost of \$38,517 (\$39,952 in 2021–22).

38 Average finalised time lost claim cost by injury type 2021–22 and 2022–23



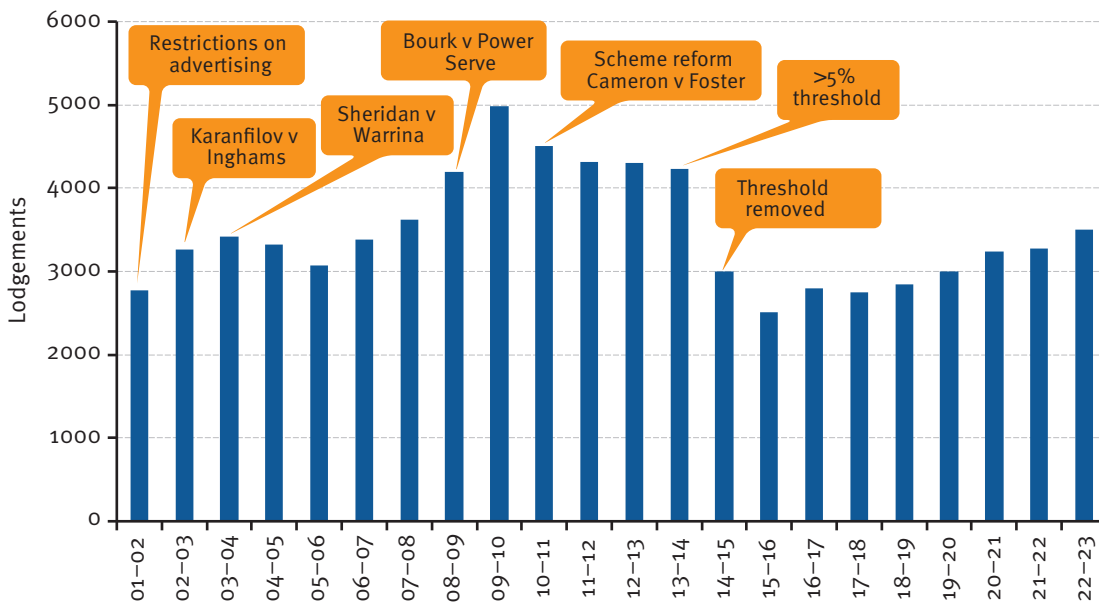
Claims for damages at common law

- Common law lodgements have increased 7 per cent over the last year
- The majority of lodgements are for injuries that occurred one to three years prior
- Over half (54 per cent) of common law lodgements have a work related impairment of less than 5 per cent
- Psychological and psychiatric injury claims represent 13.9 per cent of common law lodgements. They represent only 6.8 per cent of statutory claim lodgements
- In 2022–23, the average settlement cost of a finalised common law claim was \$188,794.

Lodgements

Figure 39 shows a history of common law lodgements and key events in the Queensland workers’ compensation scheme. For a comprehensive list of key events in the Queensland workers’ compensation scheme please refer to Appendix 3.

39 Common law lodgements history 2001–02 to 2022–23



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

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

In 2022–23, common law claim lodgements increased by 7 per cent, increasing from 3275 in 2021–22 to 3503 in 2022–23. Figure 40 shows common law claim lodgements over the past eight years by the date of injury.

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

40 Common law claim lodgements 2015–16 to 2022–23 by injury year

Injury year	Lodgement year							
	2015–16	2016–17	2017–18	2018–19	2019–20	2020–21	2021–22	2022–23
Pre 01/07/2006	30	33	25	28	33	33	34	8
2006–07	3	0	4	3	1	2	0	1
2007–08	6	4	4	4	1	1	1	0
2008–09	10	3	4	0	4	2	4	2
2009–10	12	4	3	1	0	0	1	0
2010–11	21	13	8	4	1	2	1	1
2011–12	40	12	12	2	6	5	3	1
2012–13	855	27	12	10	8	6	5	2
2013–14	852	634	47	11	6	6	4	2
2014–15	576	939	671	35	20	7	8	5
2015–16	108	1008	1003	737	61	28	15	4
2016–17	0	115	866	1048	771	121	45	29
2017–18	0	0	96	863	1074	781	126	39
2018–19	0	0	0	96	915	1194	913	224
2019–20	0	0	0	0	103	958	1222	965
2020–21	0	0	0	0	0	91	826	1356
2021–22	0	0	0	0	0	0	67	807
2022–23	0	0	0	0	0	0	0	57
Total	2513	2792	2755	2842	3004	3237	3275	3503

Figure 41 shows the breakdown of common law claim lodgements in 2022–23 by the injured worker’s WRI/DPI.

If the injured worker’s work related impairment/degree of permanent impairment is less than 20 per cent, the worker has to make an irrevocable decision to either accept a payment of the statutory lump sum compensation for the injury or seek damages at common law. If the work related impairment/degree of permanent impairment is 20 per cent or more, the injured worker can accept a lump sum payment and seek damages. Only a small proportion of common law claims (7.2 per cent) are able to access lump sum payment and pursue common law.

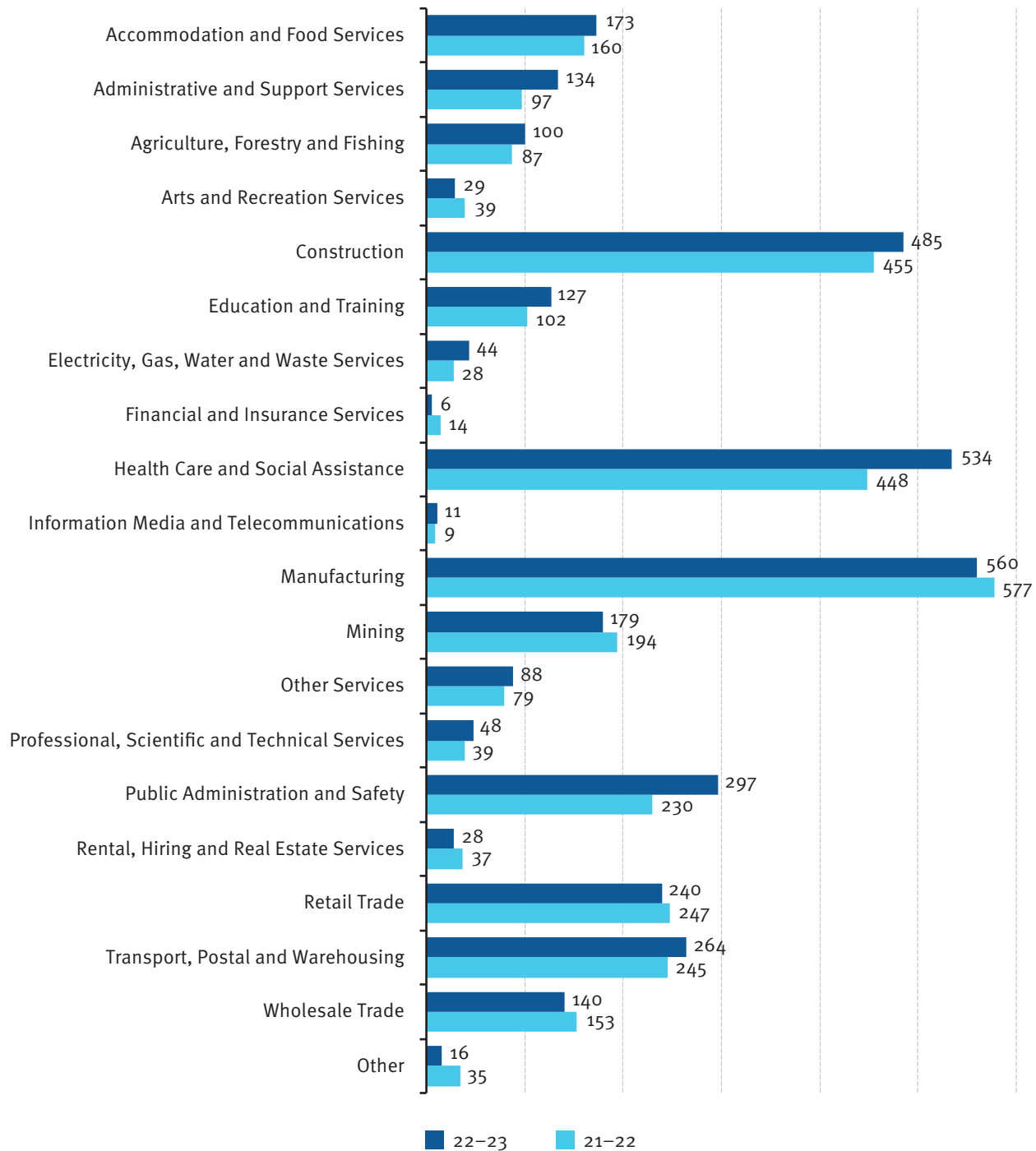
41 Common law claim lodgements by WRI/DPI 2022–23

WRI/DPI	Common law lodgements	% of common law lodgements
No impairment assessed	335	9.6
0%	698	19.9
0.1–4.9%	859	24.5
5–9.9%	1034	29.5
10–14.9%	221	6.3
15–19.9%	104	3
≥20%	252	7.2
Total	3503	100

Industry

The manufacturing (16 per cent), health care and social assistance (15.2 per cent), and construction (13.8 per cent) industries represented the highest proportion of common law claims lodged in the Queensland workers' compensation scheme (figure 42).

42 Common law claim lodgements by industry 2021–22 and 2022–23



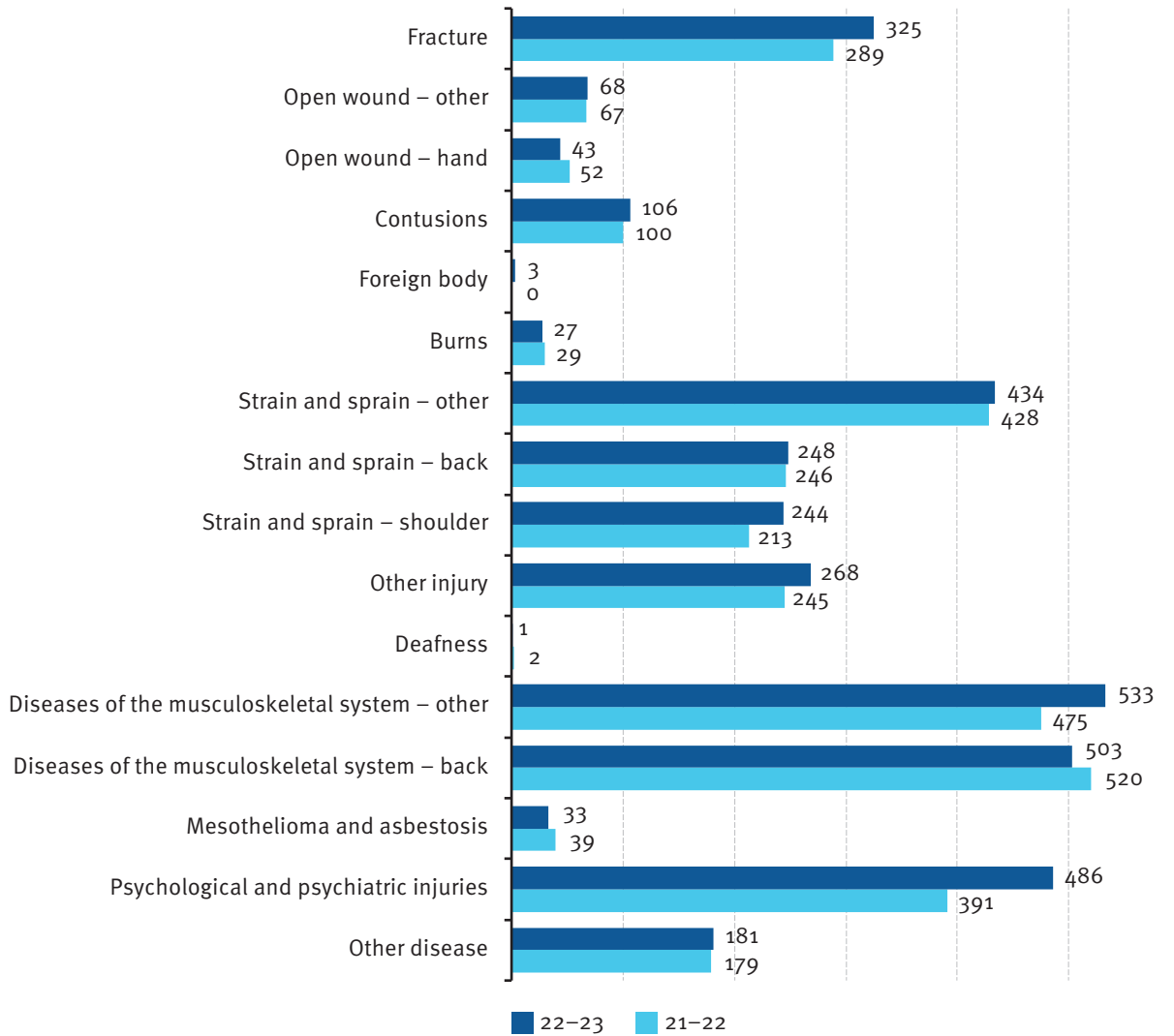
For industry 'Other', this includes injuries pre-July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strains and sprains accounted for 26.4 per cent of all common law claim lodgements in 2022–23.

Although psychological and psychiatric injury claims represented only 6.8 per cent of statutory claim lodgements, they represented 13.9 per cent of all common law claim lodgements in 2022–23.

43 Common law claim lodgements by injury type 2021–22 and 2022–23



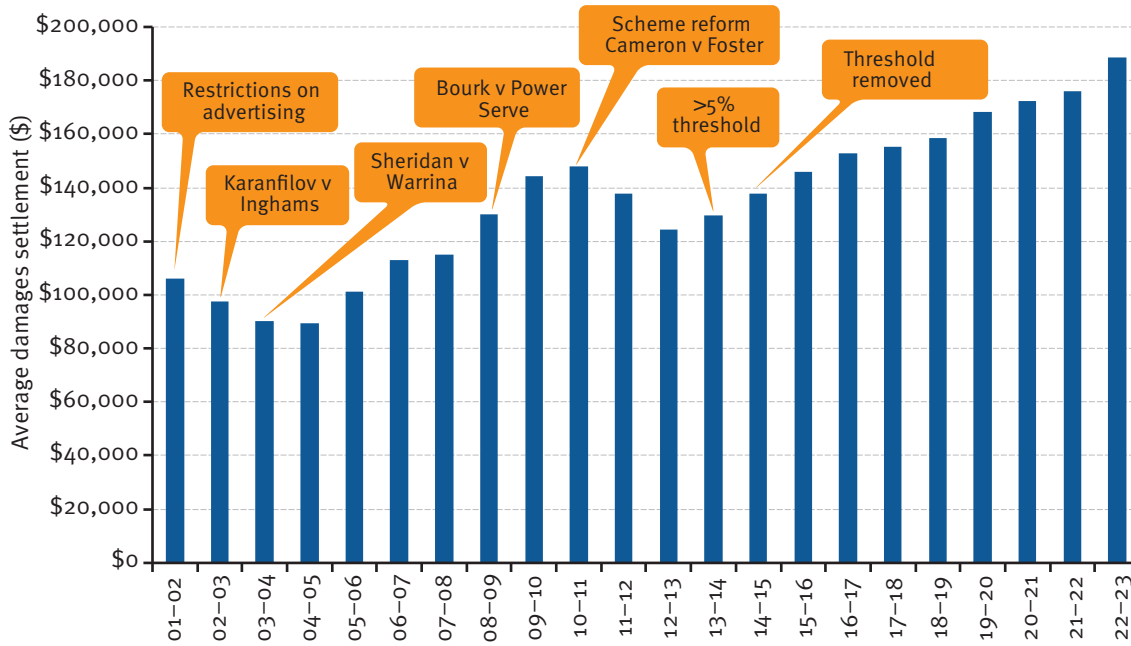
Total common law payments

In 2022–23, common law claims cost a total of \$582.3 million. This represents an 11.9 per cent increase from the 2021–22 cost of \$520.2 million.

Average costs

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

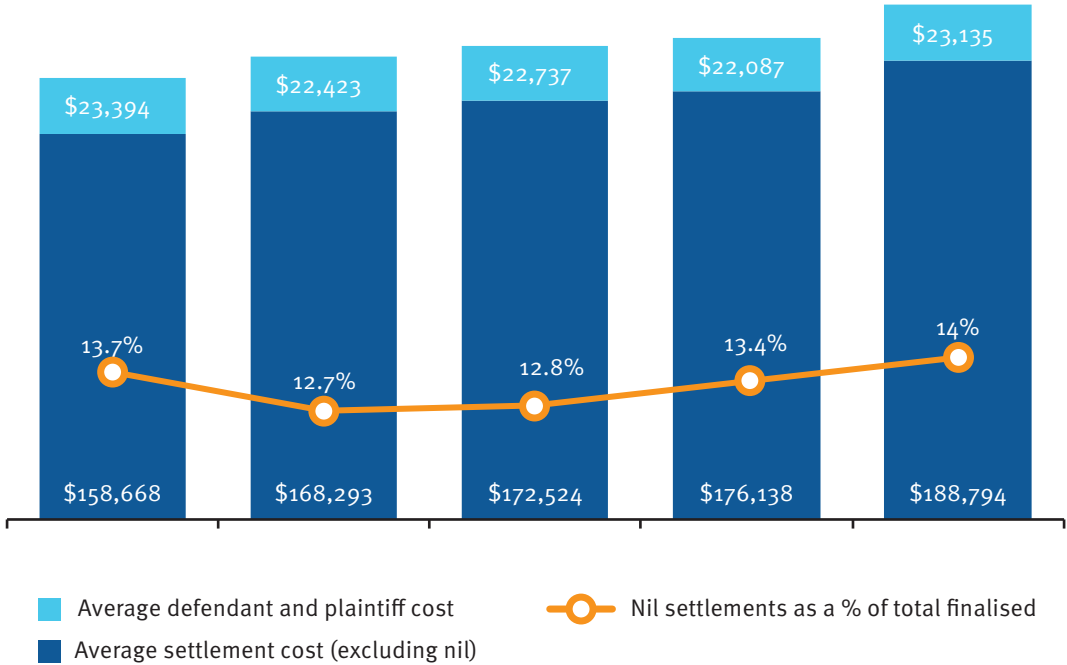
44 Common law average damages settlement history 2001–02 to 2022–23



Over the last year, the average settlement cost of a finalised common law claim (excluding nil settlements) has increased 7.2 per cent from \$176,138 in 2021–22 to \$188,794 in 2022–23. The average defendant and plaintiff cost increased 4.7 per cent from \$22,087 in 2021–22 to \$23,135 in 2022–23. Figure 45 shows average cost fluctuations between 2018–19 and 2022–23.

In 2022–23, there were 444 common law claims finalised with a nil settlement.

45 Average costs for finalised common law claims by payment type 2018–19 to 2022–23



Heads of damage

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

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

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

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

46 Heads of damage average cost 2021–22 and 2022–23

	21–22		22–23	
	\$	%	\$	%
General damages	25,378	8.6	25,715	8.3
Past economic loss	69,945	23.7	76,390	24.6
Future economic loss	148,374	50.2	158,151	51
Rehabilitation	39,236	13.3	39,792	12.8
Gratuitous care	7771	2.6	5905	1.9
Other	4797	1.6	4427	1.4
Gross settlement	295,500	100	310,380	100

Average timeframes

For claims lodged in the financial year, the average time from date of injury to lodgement of a common law claim has decreased by 5 per cent (2.42 years in 2021–22; 2.30 years in 2022–23).

For claims finalised in the financial year, the average time from the lodgement of a common law claim to finalisation has increased by 7 per cent (1 year in 2021–22; 1.07 year in 2022–23).

Review of insurer decisions

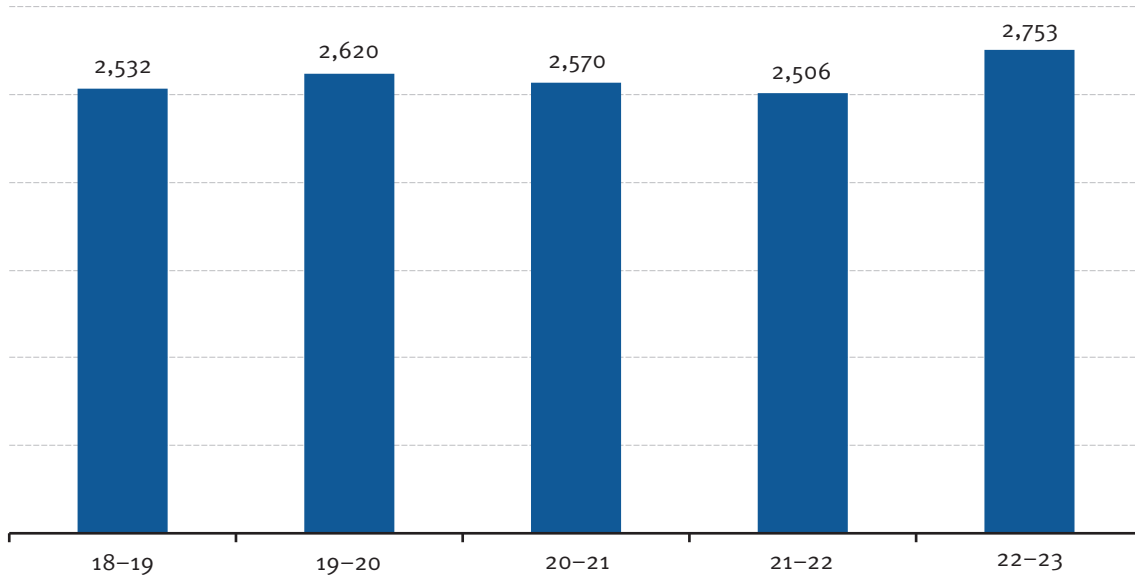
Applications received

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

Review applications received have increased (9.9 per cent) to 2753 in 2022–23, up from 2506 in 2021–22.

Figure 47 shows the number of applications for review received over the last five years.

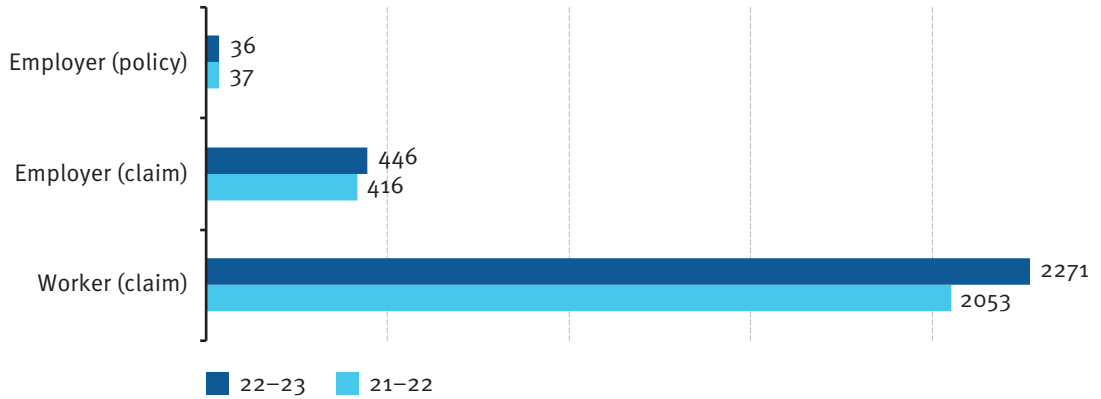
47 Review applications received 2018–19 to 2022–23



Types of applications

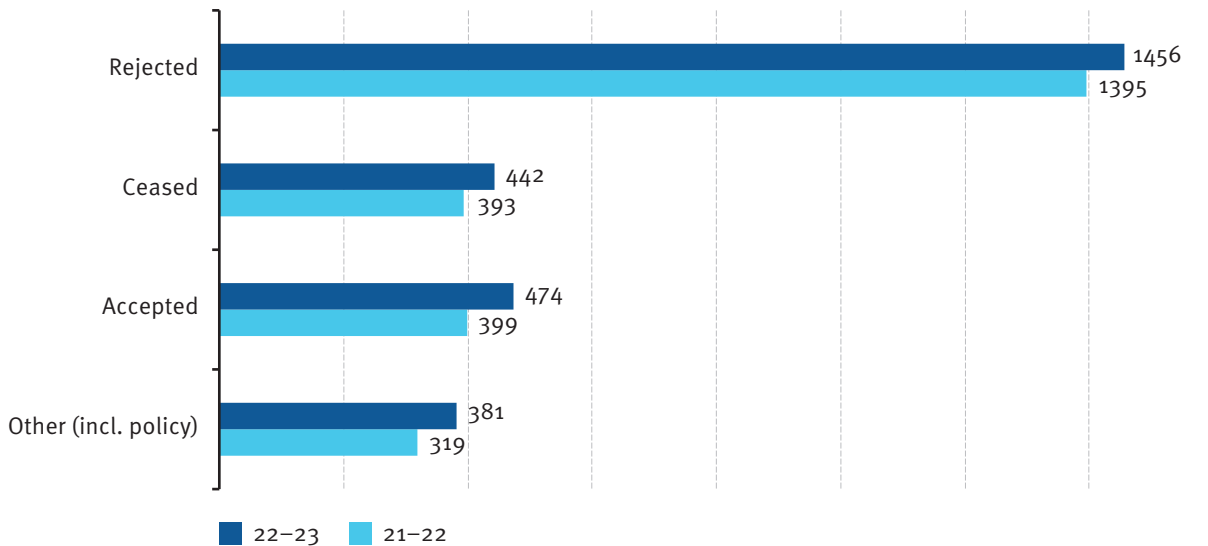
Of the applications lodged in 2022–23, 82.5 per cent were lodged by workers, up from 81.9 per cent in 2021–22. Employers lodged 16.2 per cent of reviews in 2022–23, down from 16.6 per cent in 2021–22. The remaining 1.3 per cent of applications were lodged by employers having a policy decision reviewed.

48 Review applications received by type 2021–22 and 2022–23



Over half (52.9 per cent) of all review applications received in 2022–23 related to the insurer decision to reject the claim, 17.2 per cent were lodged after the claim had been accepted and a further 16.1 per cent were following the cessation of the claim.

49 Review applications received by insurer decision 2021–22 and 2022–23



Outcomes

As shown in figure 50, in 2022–23, 90.7 per cent of reviews finalised were decided (as compared to 90.9 per cent in 2021–22), 4.9 per cent were cancelled (4.6 per cent in 2021–22), and the remaining 4.4 per cent were withdrawn (4.5 per cent in 2021–22).

50 Review outcomes 2021–22 and 2022–23

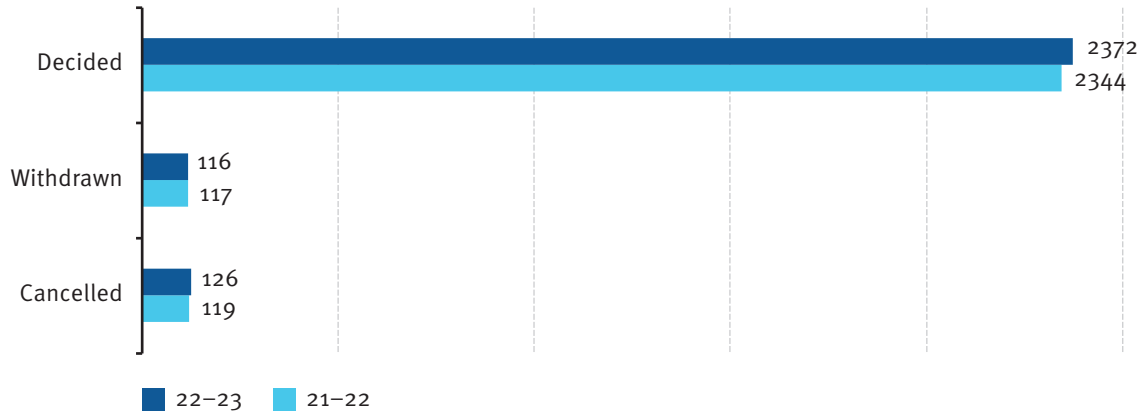
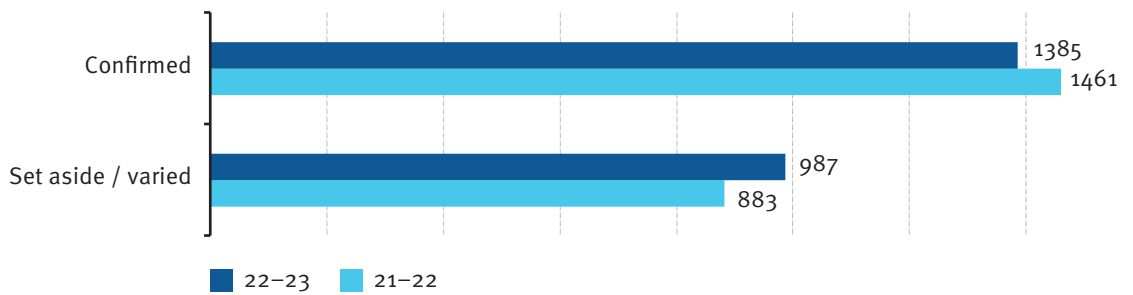


Figure 51 demonstrates that in 2022–23, the original decision of the insurer was confirmed by the Review Unit in 58.4 per cent of review decisions made, compared to 62.3 per cent in 2021–22.

51 Decided review outcomes 2021–22 and 2022–23



Appeals of review decisions

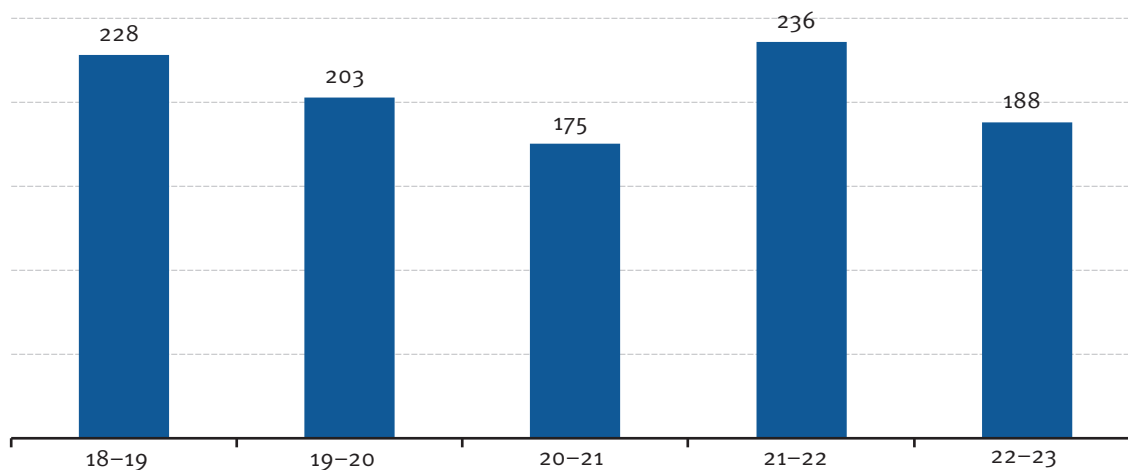
Appeal lodgements

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

In 2022–23, 188 appeals were lodged with the QIRC. Of these, three further appealed in the Industrial Court (IC).

Appeal lodgements have experienced a decrease of 20.3 per cent in 2022–23 compared with 2021–22 (figure 52).

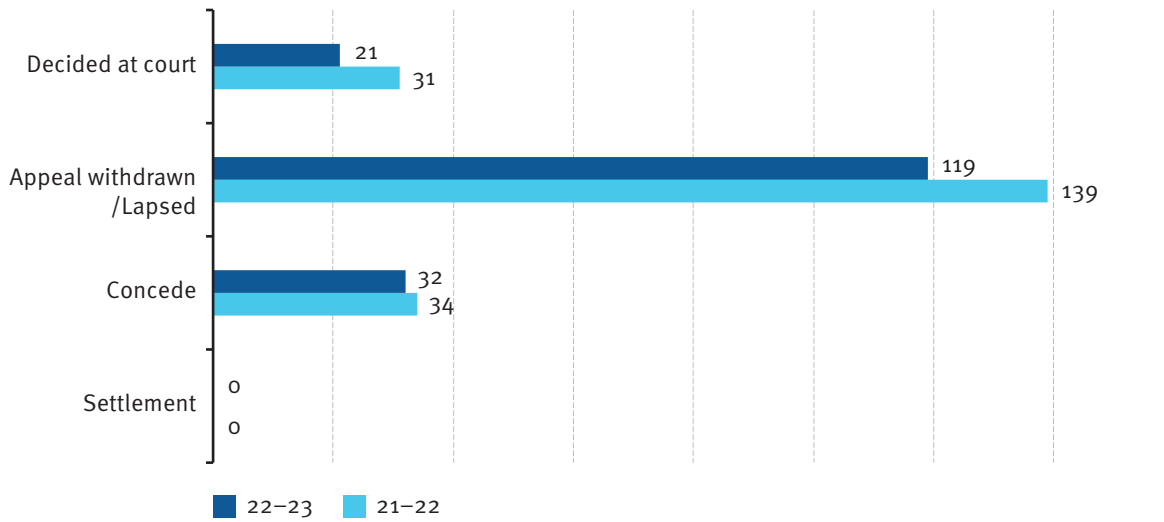
52 Appeals lodged 2018–19 to 2022–23



Appeal outcomes

In 2022–23, 87.8 per cent of appeals were finalised before reaching the QIRC. Of these, 78.8 per cent of cases were withdrawn by the appellant and 21.2 per cent were conceded (figure 53).

53 Appeals finalised by outcome 2021–22 and 2022–23



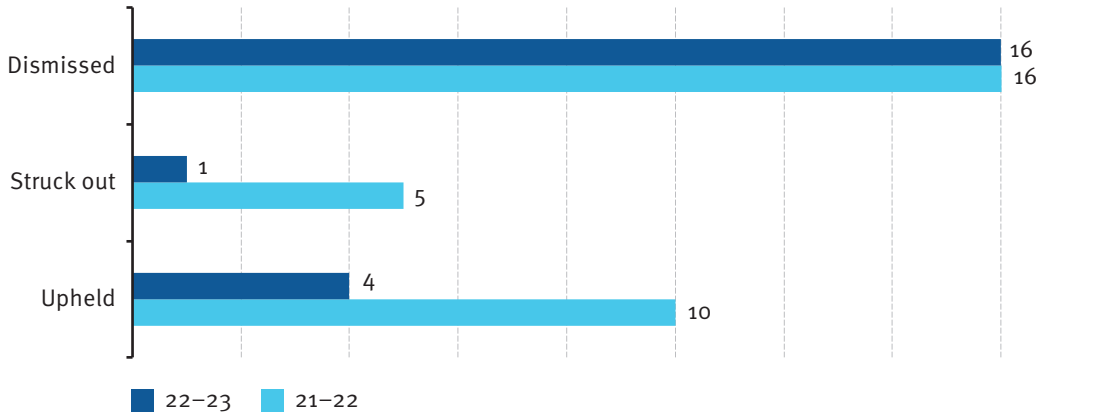
Non-judicial resolution

In 2022–23, 151 appeals were finalised before reaching the court or commission. This is a decrease of 12.7 per cent when compared to 173 in 2021–22.

Judicial resolution

The total percentage of cases determined by a court or commission in 2022–23 was 12.2 per cent, which has decreased compared to 2021–22 (15.2 per cent). Of these, 17 cases (81 per cent) were dismissed or struck-out and 4 cases (19 per cent) were upheld in favour of the appellant (figure 54).

54 Appeals finalised judicially by outcome 2021–22 and 2022–23



Medical assessment tribunals

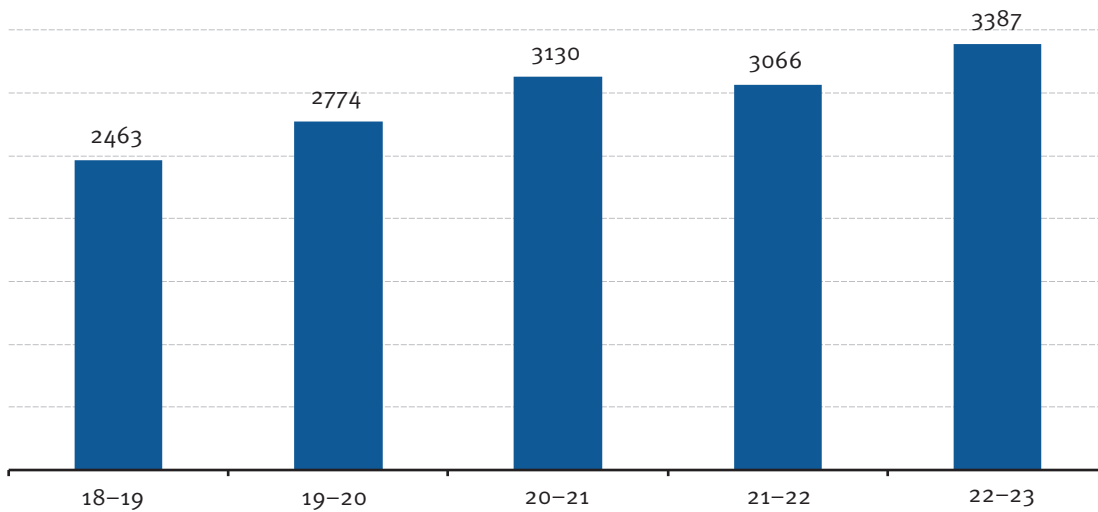
Referrals

Medical assessment tribunals are coordinated by OIR to determine ongoing incapacity of an injured worker, make a permanent impairment assessment or determine whether an injury is work related.

In 2022–23, 3387 cases were referred to a Medical assessment tribunal. This is a 10.5 per cent increase on the 3066 cases referred in 2021–22.

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

55 Medical assessment tribunal referrals received 2018–19 to 2022–23



Cases determined

In 2022–23, 2861 cases were determined by a Medical assessment tribunal. This represented a 13.4 per cent increase from 2021–22 (2524 determinations).

Of the cases heard in 2022–23, 86.2 per cent (2467) were heard at a General medical assessment tribunal (GMAT) – Psychiatric compared to 85 per cent (2146) in 2021–22.

A further 10.1 per cent (290) of cases in 2022–23 were determined at an Orthopaedic Tribunal as compared to 10.7 per cent (270) in 2021–22 (figure 56).

56 Cases determined by tribunal type 2021–22 and 2022–23

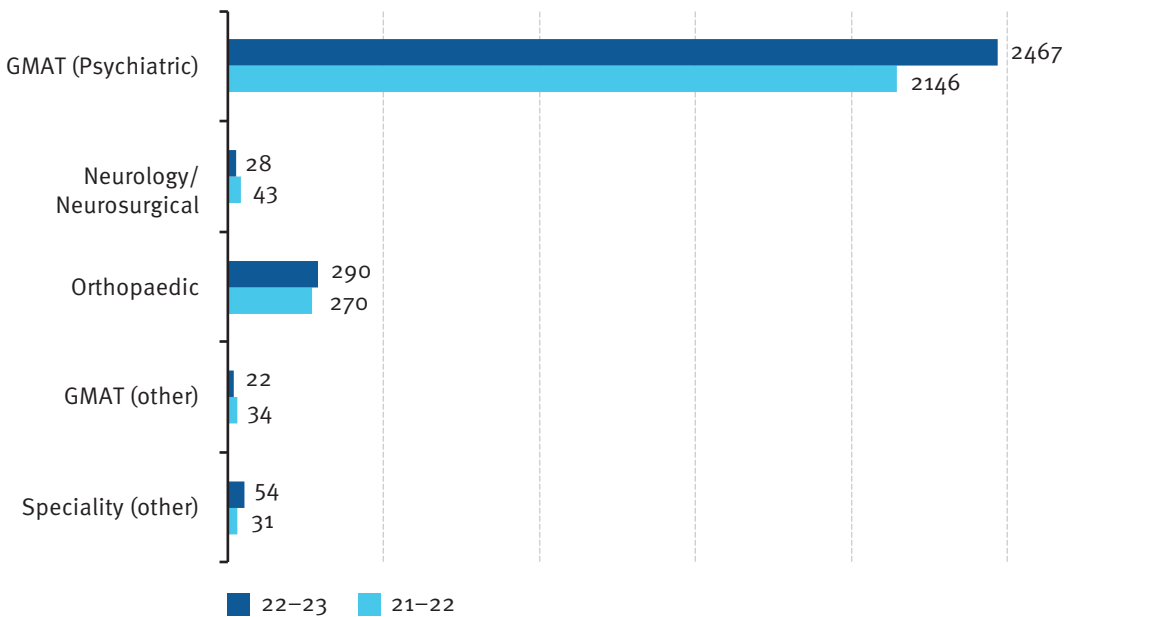


Figure 57 shows the average number of cases heard per tribunal in 2021–22 and 2022–23.

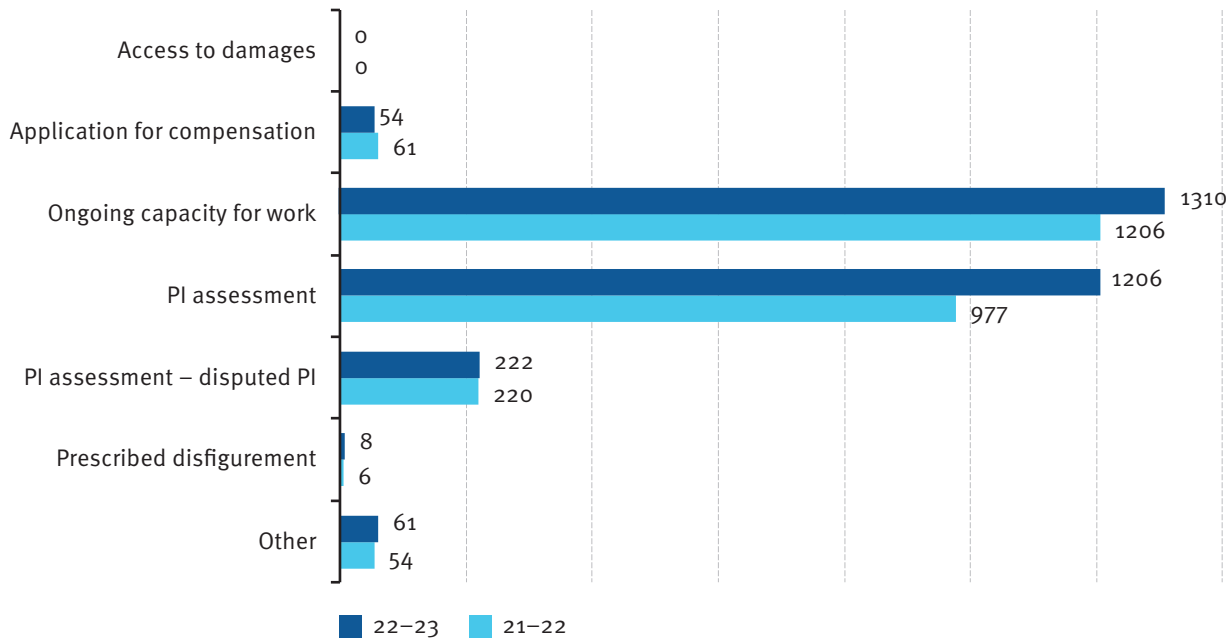
57 Average number of cases heard per tribunal by tribunal type 2021–22 and 2022–23

Tribunal	Average number of cases heard per tribunal	
	21–22	22–23
GMAT (Psychiatric)	1.9	1.9
Neurology/Neurosurgical	1.4	1.2
Orthopaedic	1.8	2.2
GMAT (other)	1.4	1.6
Speciality (other)	1.8	1.7
Total	1.9	1.9

Referral reason

In 2022–23, 49.9 per cent of the cases determined by the Medical assessment tribunal were for PI assessment, compared to 47.4 per cent in 2021–22.

58 Cases determined by referral reason 2021–22 and 2022–23



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 2021–22 and 2022–23

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	21–22	22–23	Variance	21–22	22–23	Variance	21–22	22–23	Variance	21–22	22–23	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Accommodation and Food Services	5184	5771	11.3	50.8	52.5	3.4	20,790	17,477	-15.9	67	58.3	-13
Accommodation	1155	1437	24.4	13.4	13.3	-0.5	21,552	23,957	11.2	71	76.1	7.2
Food and Beverage Services	3888	4168	7.2	36.6	38.1	4.2	20,800	15,805	-24	66.3	53.8	-18.9
Labour Hire	141	166	17.7	0.8	1.1	26.8	15,138	11,585	-23.5	56.9	38.2	-32.9
Administrative and Support Services	2673	2470	-7.6	42	40.5	-3.6	25,706	27,386	6.5	84.5	88.1	4.3
Administrative Services	633	530	-16.3	10.4	7	-32.9	27,334	33,764	23.5	76.4	97.2	27.2
Building Cleaning, Pest Control and Other Support Services	1981	1891	-4.5	31.3	33.1	5.4	25,077	26,194	4.5	85.6	86.7	1.3
Labour hire	59	49	-16.9	0.3	0.5	69.8	46,962	20,441	-56.5	160.3	60.8	-62.1
Agriculture, Forestry and Fishing	3056	2869	-6.1	41.8	37.7	-10	25,822	24,111	-6.6	58.9	61	3.6
Agriculture	2110	1970	-6.6	31.5	28.4	-9.7	27,676	26,009	-6	62.2	63.8	2.6
Agriculture, Forestry and Fishing Support Services	358	366	2.2	6.4	5.4	-16.1	30,430	28,163	-7.4	81.1	82.2	1.4
Aquaculture	45	43	-4.4	0.4	0.6	69.3	27,146	18,098	-33.3	89.2	54.8	-38.6
Fishing, Hunting and Trapping	33	36	9.1	1.1	0.8	-26.5	45,922	53,829	17.2	91.4	131.5	43.9
Forestry and Logging	26	11	-57.7	0.5	0.4	-32.7	13,987*	43,797*	213.1	33.4*	99.3*	197.3
Labour Hire	484	443	-8.5	1.8	2	8.1	11,790	8494	-28	21.2	21.4	0.9
Arts and Recreation Services	1436	1678	16.9	20.6	21.5	4.6	26,044	25,048	-3.8	73	74.1	1.5
Creative and Performing Arts Activities	194	221	13.9	1.8	1.9	3.4	20,486	21,486	4.9	56.3	65.6	16.5
Gambling Activities	157	194	23.6	2.7	3.2	16.4	25,872	13,029	-49.6	65.2	48.1	-26.2
Heritage Activities	218	259	18.8	2.7	1.4	-48.7	22,569	17,481	-22.5	51.9	44.2	-14.8
Sports and Recreation Activities	864	998	15.5	13.3	15.1	13.7	27,682	29,812	7.7	82.5	87.5	6.1

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Labour Hire	3	6	100	0.1	0.1	-51.4	34,664*	3884*	-88.8	61.8*	25*	-59.5
Construction	10,639	11,007	3.5	226.2	208.4	-7.9	37,595	32,580	-13.3	86.9	77.6	-10.7
Building Construction	1842	1882	2.2	38.3	30.8	-19.5	33,135	29,349	-11.4	73.6	65.5	-11
Construction Services	6597	6821	3.4	136.8	128.4	-6.1	36,837	33,975	-7.8	88	82.6	-6.1
Heavy and Civil Engineering Construction	1258	1271	1	22.7	23.5	3.5	52,055	36,616	-29.7	101.9	77.3	-24.1
Labour Hire	942	1033	9.7	28.4	25.6	-9.7	36,583	24,692	-32.5	88.8	65.9	-25.8
Education and Training	6365	7405	16.3	76	83.3	9.6	19,982	22,106	10.6	46.8	52.6	12.4
Adult, Community and Other Education	175	174	-0.6	1.9	2.1	14.9	30,176	22,330	-26	88.9	63.1	-29
Preschool and School Education	5190	6014	15.9	63.9	71	11.1	19,600	22,663	15.6	44.5	53	19.1
Tertiary Education	984	1190	20.9	10.1	9.9	-1.3	20,451	18,639	-8.9	53.6	47.6	-11.2
Labour Hire	16	27	68.8	0.2	0.3	10.8	32,987*	48,309*	46.4	68.1*	108*	58.6
Electricity, Gas, Water and Waste Services	1087	1046	-3.8	15.5	18.6	20.4	39,186	30,726	-21.6	93.1	73.2	-21.4
Electricity Supply	417	337	-19.2	6	6.9	14.8	34,650	40,310	16.3	79.9	86.6	8.4
Gas Supply	21	15	-28.6	0.2	0.1	-48.3	47,162*	12,027*	-74.5	92.2*	38*	-58.8
Waste Collection, Treatment and Disposal Services	480	501	4.4	7.1	7.5	6.7	44,889	22,500	-49.9	108.4	59.9	-44.7
Water Supply, Sewerage and Drainage Services	118	153	29.7	1.5	3	102.5	30,290	41,492	37	73.1	93.6	28
Labour Hire	51	40	-21.6	0.7	1.1	50.6	27,584	32,225	16.8	63.5	80.5	26.8
Financial and Insurance Services	356	453	27.2	5.5	5.8	6.2	33,179	35,307	6.4	74.7	80.4	7.6
Auxiliary Finance and Insurance Services	62	91	46.8	1.5	1.3	-15	29,647	39,578	33.5	71.2	84.2	18.3
Finance	103	137	33	2	2	-0.4	40,006	33,615	-16	86.4	81.5	-5.7
Insurance and Superannuation Funds	185	217	17.3	1.9	2.5	29.1	28,752	35,608	23.8	66.2	80	20.8
Labour Hire	6	8	33.3	0	0	82.8	21,475*	2,741*	-87.2	47.3*	2*	-95.8
Health Care and Social Assistance	14,786	14,380	-2.7	204.6	214	4.6	20,758	23,265	12.1	68.2	75.8	11.1
Hospitals	5324	4873	-8.5	81.8	84.2	3	23,329	27,084	16.1	66.9	80.3	20
Medical and Other Health Care Services	1860	1874	0.8	25.4	29.9	17.8	24,396	24,294	-0.4	63.1	62.9	-0.3

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Residential Care Services	3471	3224	-7.1	42.4	41.2	-2.7	18,652	19,290	3.4	72.8	74.5	2.3
Social Assistance Services	3924	4122	5	51.4	54.4	5.9	18,042	21,146	17.2	66.8	75.9	13.6
Labour Hire	207	287	38.6	3.7	4.2	13.3	23,137	23,591	2	76.7	69.8	-9
Information Media and Telecommunications	357	329	-7.8	5	5.7	12.3	28,526	33,058	15.9	66.1	67.1	1.5
Broadcasting (except Internet)	27	33	22.2	0.6	0.7	16.2	44,928*	31,051	-30.9	104.5*	49.5	-52.6
Internet Publishing and Broadcasting	2	0	-100	0	0	-47.8	15,147*	0*	-100	36.3*	0*	-100
Internet Service Providers, Web Search Portals and Data Processing Services	11	21	90.9	0	0.1	177.5	17,608*	3,972*	-77.4	20.3*	12.8*	-36.9
Library and Other Information Services	34	10	-70.6	0.3	0.1	-64	33,778	78,549*	132.5	97.5	207.8*	113.1
Motion Picture and Sound Recording Activities	225	222	-1.3	2.8	4.2	46.1	15,328	26,709	74.2	37.9	55.9	47.5
Publishing (except Internet and Music Publishing)	30	16	-46.7	0.5	0.5	6.4	39,022	33,337*	-14.6	124.8	75.9*	-39.2
Telecommunications Services	24	23	-4.2	0.8	0.1	-93.5	158,908*	114,677*	-27.8	227.9*	189.8*	-16.7
Labour Hire	4	4	0	0	0	70.2	73,813*	7,897*	-89.3	210*	14.5*	-93.1
Manufacturing	13,447	12,158	-9.6	190.3	178.2	-6.3	29,006	27,864	-3.9	64	61.4	-4.1
Basic Chemical and Chemical Product Manufacturing	307	316	2.9	5.1	4.6	-9.8	32,109	34,345	7	65.1	68.3	4.9
Beverage and Tobacco Product Manufacturing	165	163	-1.2	2.1	1.7	-17.1	15,297	36,390	137.9	35.1	85.1	142.5
Fabricated Metal Product Manufacturing	2665	2298	-13.8	29.9	30.9	3.4	26,692	24,307	-8.9	67.2	57.4	-14.6
Food Product Manufacturing	3518	2989	-15	37.3	41.4	11.2	20,862	22,153	6.2	50.4	57.3	13.7
Furniture and Other Manufacturing	388	369	-4.9	6.9	5.6	-19.1	36,228	23,829	-34.2	72.3	64.3	-11.1
Machinery and Equipment Manufacturing	1055	1058	0.3	12	12.7	5.1	30,807	22,800	-26	68.6	54	-21.3

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Non-Metallic Mineral Product Manufacturing	833	779	-6.5	43.3	25.8	-40.5	91,163	83,077	-8.9	119.9	105	-12.4
Petroleum and Coal Product Manufacturing	27	18	-33.3	0.7	1.3	78.8	53,948*	79,193*	46.8	99.7*	101.6*	1.9
Polymer Product and Rubber Product Manufacturing	501	445	-11.2	6.7	5.7	-14.7	24,102	30,621	27	60.8	75.2	23.7
Primary Metal and Metal Product Manufacturing	432	420	-2.8	7.3	5.3	-27.1	31,777	29,695	-6.6	48.8	39.7	-18.6
Printing (including the Reproduction of Recorded Media)	86	75	-12.8	1.5	1	-29.5	44,980	39,789	-11.5	117.2	91.5	-21.9
Pulp, Paper and Converted Paper Product Manufacturing	100	120	20	2.2	1.5	-32.7	33,879	49,396	45.8	77.3	101.8	31.7
Textile, Leather, Clothing and Footwear Manufacturing	123	103	-16.3	2.3	1.5	-34.5	22,997	26,566	15.5	78.4	86.5	10.3
Transport Equipment Manufacturing	1223	1212	-0.9	11.6	14.9	29	20,425	22,715	11.2	53.6	54.6	1.9
Wood Product Manufacturing	939	855	-8.9	10.8	12.2	13.6	26,143	22,507	-13.9	63.8	55	-13.8
Labour Hire	1085	938	-13.5	10.5	12	13.6	20,798	20,260	-2.6	59.7	54.7	-8.4
Mining	2247	2408	7.2	78.2	65.4	-16.4	72,798	61,279	-15.8	130.5	114	-12.6
Coal Mining	796	933	17.2	36.4	30.5	-16.3	85,847	78,592	-8.5	136	118.9	-12.6
Exploration and Other Mining Support Services	324	391	20.7	10.3	9.8	-5.2	58,675	44,278	-24.5	129.5	96.9	-25.2
Metal Ore Mining	655	603	-7.9	14.2	11.3	-20.3	67,174	47,684	-29	92.1	98.9	7.4
Non-Metallic Mineral Mining and Quarrying	150	176	17.3	6.4	3.1	-51.8	51,320	54,112	5.4	95	128.6	35.4
Oil and Gas Extraction	30	13	-56.7	0.4	1.2	170.7	125,311	37,221*	-70.3	477.4	68.1*	-85.7
Labour Hire	292	292	0	10.5	9.5	-9.1	77,469	60,062	-22.5	169.2	127.2	-24.8
Other Services	2990	3488	16.7	38.8	40.7	4.9	29,589	27,819	-6	76.8	69.2	-9.9
Personal and Other Services	983	1259	28.1	12.6	14.2	12.8	30,663	28,192	-8.1	89.8	82.8	-7.8
Repair and Maintenance	1645	1704	3.6	25	24.1	-3.5	29,775	28,886	-3	69.7	62.4	-10.5
Labour Hire	362	525	45	1.2	2.4	99.2	17,959	18,169	1.2	60.1	52	-13.5

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Professional, Scientific and Technical Services	1601	1935	20.9	24.6	22.8	-7.3	32,518	32,525	0	68.3	82.8	21.2
Computer System Design and Related Services	112	137	22.3	2.4	2	-14.5	38,533	46,327	20.2	73.3	97.4	32.9
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	1477	1786	20.9	22.1	20.7	-6.3	31,788	31,462	-1	67.6	82	21.3
Labour Hire	12	12	0	0.1	0.1	-45.4	24,187*	16,074*	-33.5	73.8*	21.2*	-71.3
Public Administration and Safety	8396	8581	2.2	148.2	160.6	8.4	30,269	34,224	13.1	73	81	11
Defence	0	0	0	0	0	0	0*	0*	0	0*	0*	0
Public Administration	2667	2810	5.4	50.5	49.8	-1.3	24,553	31,418	28	59.1	76.2	28.9
Public Order, Safety and Regulatory Services	5624	5643	0.3	95.2	108.4	13.8	33,838	35,991	6.4	81.4	83.5	2.6
Labour Hire	103	128	24.3	2.5	2.4	-1.9	27,609	31,568	14.3	74.5	89.2	19.7
Rental, Hiring and Real Estate Services	932	961	3.1	13.7	14.9	9.1	28,093	29,336	4.4	78.1	76.3	-2.3
Property Operators and Real Estate Services	487	426	-12.5	7.8	7.9	2.3	29,764	33,228	11.6	88.8	92.4	4.1
Rental and Hiring Services (except Real Estate)	434	528	21.7	5.5	6.9	26.5	25,273	24,696	-2.3	65.1	60.2	-7.5
Labour Hire	11	7	-36.4	0.4	0.1	-87.2	55,178*	85,040*	54.1	134.1*	194.1*	44.7
Retail Trade	6105	6384	4.6	78.7	73.7	-6.3	22,168	22,433	1.2	67.1	67.6	0.7
Food Retailing	2291	2318	1.2	27.8	27.4	-1.5	21,229	22,675	6.8	64.8	73.5	13.4
Fuel Retailing	206	201	-2.4	4.6	3.4	-24.8	30,591	32,632	6.7	101	97.9	-3.1
Motor Vehicle and Motor Vehicle Parts Retailing	998	1085	8.7	10.8	10.5	-2.8	22,869	20,901	-8.6	62.1	56.4	-9.2
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	120	113	-5.8	1.5	1	-33.1	18,111	21,122	16.6	63.3	64.7	2.2
Other Store-Based Retailing	2320	2504	7.9	32.8	29.9	-9	23,376	23,002	-1.6	71	66.4	-6.5

	Claim lodgements			Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance	21-22	22-23	Variance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Labour Hire	170	163	-4.1	1.2	1.5	28.9	12,211	11,002	-9.9	43	43	0
Transport, Postal and Warehousing	4832	5066	4.8	108.7	110.2	1.3	38,008	34,576	-9	89.7	85.7	-4.5
Air and Space Transport	162	207	27.8	3.3	3.1	-6.4	29,722	20,524	-30.9	55.8	37.5	-32.8
Other Transport	127	158	24.4	2	3.3	68.9	37,174	24,078	-35.2	100.8	81	-19.6
Postal and Courier Pick-up and Delivery Services	234	243	3.8	4.6	4.2	-8.8	30,308	41,948	38.4	84.4	100.8	19.4
Rail Transport	460	476	3.5	11.9	11.4	-4	35,566	29,755	-16.3	62.4	65.1	4.3
Road Transport	2470	2553	3.4	67.7	65.8	-2.8	43,575	38,702	-11.2	102.3	97.8	-4.4
Transport Support Services	546	580	6.2	8.8	8.3	-6	31,992	33,149	3.6	81.1	81.2	0.1
Warehousing and Storage Services	253	239	-5.5	2.5	2.7	6.3	29,541	20,464	-30.7	73	55	-24.7
Water Transport	96	141	46.9	1.4	2.4	72.7	36,788	23,973	-34.8	99.7	67	-32.8
Labour Hire	484	469	-3.1	6.4	8.9	38.1	23,405	28,193	20.5	59.4	67.3	13.3
Wholesale Trade	3691	3880	5.1	50.2	51.4	2.4	30,592	27,143	-11.3	74.4	69.4	-6.7
Basic Material Wholesaling	1068	1113	4.2	17.5	17.7	0.6	35,273	28,715	-18.6	76	76.2	0.3
Commission-Based Wholesaling	58	75	29.3	0.9	1.5	81.5	46,800	28,319	-39.5	90.9	62.3	-31.5
Grocery, Liquor and Tobacco Product Wholesaling	694	737	6.2	11.5	10	-12.7	31,319	25,857	-17.4	83.8	70.8	-15.5
Machinery and Equipment Wholesaling	939	911	-3	10.3	9.9	-3.8	29,916	33,456	11.8	70.6	75.4	6.8
Motor Vehicle and Motor Vehicle Parts Wholesaling	337	381	13.1	3.7	4.8	30.7	31,423	21,891	-30.3	85.9	45.9	-46.6
Other Goods Wholesaling	419	449	7.2	5.1	5.6	11.5	24,238	26,788	10.5	66.4	74.4	12
Labour Hire	176	214	21.6	1.3	1.9	39.9	13,627	16,437	20.6	41.4	49.4	19.3
Other	244	278	13.9	9.6	5.2	-46.1	37,972	40,658	7.1	104.1	101.1	-2.9
Total	90,424	92,547	2.3	1429	1411	-1.3	28,163	27,643	-1.8	72	72.3	0.4

*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 2022–23

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native out-come not claim related
	%	%			%	%	%	%	%	%	%	%
Accommodation and Food Services	93.2	6.8	4696	2892	82	1.8	1.9	7.2	1.7	3.5	1.8	0.1
Accommodation	91.8	8.2	1005	634	79.8	2.8	0.6	8.2	2.1	3.5	2.5	0.5
Food and Beverage Services	93.7	6.3	3568	2179	82.8	1.5	2.3	6.8	1.5	3.5	1.6	0
Labour Hire	92.7	7.3	123	79	81	1.3	1.3	10.1	2.5	2.5	1.3	0
Administrative and Support Services	90.6	9.4	2176	1604	79.2	1.9	1.2	6.8	2.9	3.7	4.2	0.1
Administrative Services	83.3	16.7	430	267	75	2.6	1.1	9.7	3.7	3.4	4.5	0
Building Cleaning, Pest Control and Other Support Services	92.4	7.6	1720	1318	80.4	1.7	1.3	5.8	2.7	3.7	4.2	0.2
Labour Hire	88.5	11.5	26	19	47.3	5.3	0	36.8	5.3	5.3	0	0
Agriculture, Forestry and Fishing	95.6	4.4	2457	1598	79.5	2.6	0.8	7.6	2.9	4.1	2.4	0.1
Agriculture	95.6	4.4	1664	1079	77.1	3	0.6	9.1	3.2	4.6	2.4	0
Agriculture, Forestry and Fishing Support Services	94.6	5.4	316	210	76.8	1.9	1.4	7.1	3.3	5.7	3.3	0.5
Aquaculture	91.9	8.1	37	19	63.1	10.5	5.3	10.5	5.3	5.3	0	0
Fishing, Hunting and Trapping	84.4	15.6	32	26	73.1	3.8	0	7.7	7.7	0	7.7	0
Forestry and Logging	100	0	9	16	81.2	0	0	12.5	0	0	6.3	0
Labour Hire	97.2	2.8	399	248	94	1.2	0.8	1.2	0.8	0.8	1.2	0
Arts and Recreation Services	94.1	5.9	1535	834	85.6	1.9	2.3	6	0.8	2.4	1	0
Creative and Performing Arts Activities	94.2	5.8	206	74	81	1.4	2.7	10.8	2.7	1.4	0	0
Gambling Activities	94.1	5.9	187	113	86.6	2.7	8.9	0.9	0	0	0.9	0
Heritage Activities	93.3	6.7	240	114	92.1	0	0.9	3.5	0	2.6	0.9	0

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native outcome not claim related
	%	%			%	%	%	%	%	%	%	%
Sports and Recreation Activities	94.3	5.7	897	531	84.6	2.3	1.1	7	0.9	3	1.1	0
Labour Hire	100	0	5	2	100	0	0	0	0	0	0	0
Construction	94.3	5.7	9419	5458	78.3	2.6	1.4	8.1	3.4	3.4	2.7	0.1
Building Construction	95.1	4.9	1629	933	81.2	2.8	1.3	8	2.4	2.6	1.6	0.1
Construction Services	94.1	5.9	5772	3486	78	2.5	1.4	8.1	3.6	3.4	2.9	0.1
Heavy and Civil Engineering Construction	94.3	5.7	1099	532	79.6	2.6	1.3	6.8	3	4.1	2.4	0.2
Labour Hire	94.4	5.6	919	507	72.9	3.2	1.4	9.9	4.5	4.3	3.4	0.4
Education and Training	92.7	7.3	6891	3405	91.5	0.9	1.4	1.8	0.7	2.1	1.4	0.2
Adult, Community and Other Education	92.8	7.2	139	82	79.4	1.2	1.2	12.2	2.4	2.4	1.2	0
Preschool and School Education	93.3	6.7	5673	2763	92.5	0.8	1.3	1.1	0.7	2	1.5	0.1
Tertiary Education	89.2	10.8	1060	547	88.9	1.1	1.8	3.8	0.7	2.6	0.7	0.4
Labour Hire	94.7	5.3	19	13	92.3	0	0	0	0	0	7.7	0
Electricity, Gas, Water and Waste Services	92.2	7.8	941	457	78.8	1.8	2.8	4.8	2.6	5.3	3.7	0.2
Electricity Supply	89.9	10.1	327	134	88.2	0	2.2	0.7	2.2	3	3.7	0
Gas Supply	85.7	14.3	14	1	100	0	0	0	0	0	0	0
Waste Collection, Treatment and Disposal Services	94.2	5.8	428	236	75.4	2.1	3.4	5.1	3	5.9	4.7	0.4
Water Supply, Sewerage and Drainage Services	91.2	8.8	137	59	79.6	0	3.4	5.1	0	10.2	1.7	0
Labour Hire	97.1	2.9	35	27	59.3	11.1	0	22.2	7.4	0	0	0
Financial and Insurance Services	82.6	17.4	384	174	83.4	1.1	2.3	6.9	0.6	1.1	4	0.6
Auxiliary Finance and Insurance Services	82.9	17.1	76	33	72.8	3	0	9.1	3	0	9.1	3

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native out-come not claim related
	%	%			%	%	%	%	%	%	%	%
Finance	80.5	19.5	118	59	86.4	1.7	3.4	5.1	0	1.7	1.7	0
Insurance and Superannuation Funds	83.8	16.2	185	80	84.9	0	2.5	7.5	0	1.3	3.8	0
Labour Hire	80	20	5	2	100	0	0	0	0	0	0	0
Health Care and Social Assistance	90.4	9.6	12,976	9215	84.8	1.6	2.7	3.8	1.2	2.9	2.9	0.1
Hospitals	89.5	10.5	4468	3407	89.4	0.6	2.7	1.7	0.4	2.3	2.8	0.1
Medical and Other Health Care Services	88.9	11.1	1614	930	83.4	2.2	3.4	4.8	1.2	1.9	2.9	0.2
Residential Care Services	91.6	8.4	2895	2156	83.7	1.8	3	4.1	1.6	3.2	2.6	0
Social Assistance Services	91.4	8.6	3771	2566	81	2.5	2.3	5.8	1.9	3.5	2.9	0.1
Labour Hire	89.9	10.1	228	156	78.2	1.9	1.3	7.1	1.9	3.8	5.8	0
Information Media and Tele-communications	92	8	286	160	71.9	15	1.3	4.4	3.1	0.6	3.1	0.6
Broadcasting (except Internet)	87.5	12.5	32	14	71.5	14.3	7.1	0	7.1	0	0	0
Internet Publishing and Broadcasting	0	0	0	0	0	0	0	0	0	0	0	0
Internet Service Providers, Web Search Portals and Data Processing Services	80	20	20	5	80	0	0	20	0	0	0	0
Library and Other Information Services	100	0	5	4	75	0	0	0	0	0	25	0
Motion Picture and Sound Recording Activities	94.4	5.6	196	109	70.5	19.3	0	3.7	2.8	0	2.8	0.9
Publishing (except Internet and Music Publishing)	94.1	5.9	17	15	73.2	0	6.7	6.7	6.7	6.7	0	0
Telecommunications Services	76.9	23.1	13	9	77.8	0	0	11.1	0	0	11.1	0

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native out-come not claim related
	%	%			%	%	%	%	%	%	%	%
Labour Hire	100	0	3	4	75	25	0	0	0	0	0	0
Manufacturing	95.3	4.7	10,727	5902	82.5	1	2.6	5.7	2.3	3.4	2.4	0.1
Basic Chemical and Chemical Product Manufacturing	95.2	4.8	291	112	83.8	0	1.8	6.3	2.7	2.7	2.7	0
Beverage and Tobacco Product Manufacturing	93.3	6.7	150	62	74.2	3.2	0	8.1	3.2	4.8	6.5	0
Fabricated Metal Product Manufacturing	96.6	3.4	2083	1124	84.4	1.4	1.9	5.8	2	2.6	1.8	0.1
Food Product Manufacturing	94.6	5.4	2504	1531	80.9	0.7	4.5	4.8	1.6	4.3	3	0.2
Furniture and Other Manufacturing	95.7	4.3	299	164	82.3	0	2.4	7.9	3.7	3.7	0	0
Machinery and Equipment Manufacturing	96.3	3.7	938	493	86.5	0.6	2.4	4.9	1.8	2	1.8	0
Non-Metallic Mineral Product Manufacturing	93.4	6.6	702	380	74.9	1.3	2.9	8.7	3.2	4.5	4.5	0
Petroleum and Coal Product Manufacturing	100	0	16	11	72.7	0	9.1	0	18.2	0	0	0
Polymer Product and Rubber Product Manufacturing	93.9	6.1	394	207	82.2	0	1.4	7.2	1	4.8	3.4	0
Primary Metal and Metal Product Manufacturing	93	7	386	161	84.5	0.6	3.1	4.3	1.9	3.7	1.9	0
Printing (including the Reproduction of Recorded Media)	98.6	1.4	74	45	82.3	0	0	8.9	0	2.2	4.4	2.2
Pulp, Paper and Converted Paper Product Manufacturing	95.3	4.7	106	44	90.9	0	0	2.3	2.3	0	4.5	0
Textile, Leather, Clothing and Footwear Manufacturing	91.7	8.3	97	77	76.6	0	1.3	10.4	5.2	5.2	1.3	0

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native out-come not claim related
	%	%			%	%	%	%	%	%	%	%
Transport Equipment Manufacturing	96.1	3.9	1084	481	87.1	1	1.2	4	2.3	2.3	2.1	0
Wood Product Manufacturing	95.2	4.8	735	448	86	1.6	1.3	4.2	2.9	3.3	0.7	0
Labour Hire	95.5	4.5	868	562	78.9	1.6	1.8	7.8	3.9	3	3	0
Mining	90.9	9.1	2177	885	74	1	5.7	6.4	2.8	1.8	8.2	0.1
Coal Mining	90.4	9.6	856	321	70	0.3	10.3	3.1	2.2	1.6	12.2	0.3
Exploration and Other Mining Support Services	94.1	5.9	341	173	79.7	1.2	2.9	6.9	3.5	1.2	4.6	0
Metal Ore Mining	89.3	10.7	543	123	78.9	0.8	4.9	1.6	3.3	2.4	8.1	0
Non-Metallic Mineral Mining and Quarrying	92	8	151	77	74	3.9	1.3	10.4	2.6	2.6	5.2	0
Oil and Gas Extraction	84.6	15.4	13	7	100	0	0	0	0	0	0	0
Labour Hire	90.8	9.2	273	184	70.6	1.1	2.7	13.6	3.3	2.2	6.5	0
Other Services	90.9	9.1	2679	1388	80.6	1.9	2	9	1.9	1.9	2.6	0.1
Personal and Other Services	86.6	13.4	959	514	78.1	2.1	2.9	9.8	2.1	2.1	2.7	0.2
Repair and Maintenance	94.9	5.1	1458	769	82.8	1.8	1.6	8.3	1.6	1.3	2.5	0.1
Labour Hire	84.3	15.7	262	105	76.1	1.9	1	10.4	2.9	4.8	2.9	0
Professional, Scientific and Technical Services	88.3	11.7	1526	682	79.1	2.5	1	7.9	4	2.9	2.5	0.1
Computer System Design and Related Services	81.7	18.3	115	54	79.5	0	0	7.4	1.9	9.3	1.9	0
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	88.9	11.1	1400	623	79	2.7	1.1	8	4	2.4	2.6	0.2
Labour Hire	72.7	27.3	11	5	80	0	0	0	20	0	0	0

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native out-come not claim related
	%	%			%	%	%	%	%	%	%	%
Public Administration and Safety	91.1	8.9	6931	4185	85.3	0.7	3.3	3	1	2.9	3.7	0.1
Defence	0	0	0	1	0	0	100	0	0	0	0	0
Public Administration	89.1	10.9	2645	1528	85.5	0.5	4.5	2.4	0.7	3.2	3	0.2
Public Order, Safety and Regulatory Services	92.3	7.7	4169	2570	85.8	0.7	2.6	3	1.1	2.7	4	0.1
Labour Hire	94	6	117	86	65.1	3.5	2.3	15.1	4.7	3.5	5.8	0
Rental, Hiring and Real Estate Services	89.7	10.3	825	479	78.5	1.3	1	7.1	3.5	4.6	3.8	0.2
Property Operators and Real Estate Services	83.8	16.2	358	211	74.9	0.9	1.4	7.1	4.3	5.7	5.2	0.5
Rental and Hiring Services (except Real Estate)	94.1	5.9	460	261	82	1.5	0.8	6.9	2.7	3.4	2.7	0
Labour Hire	100	0	7	7	57.1	0	0	14.3	14.3	14.3	0	0
Retail Trade	93.3	6.7	5583	3347	78.8	1.3	4.8	7.3	1.5	3.4	2.7	0.2
Food Retailing	93.2	6.8	2009	1190	78	0.9	9.1	5	0.8	2.5	3.4	0.3
Fuel Retailing	90.4	9.6	177	120	69.3	2.5	3.3	13.3	3.3	3.3	5	0
Motor Vehicle and Motor Vehicle Parts Retailing	94.9	5.1	937	528	81.8	2.7	1.7	6.8	1.5	2.1	3.4	0
Non-Store Retailing and Retail Commission-Based Buying and/or Selling	92.7	7.3	96	77	80.5	1.3	1.3	9.1	2.6	1.3	3.9	0
Other Store-Based Retailing	92.6	7.4	2211	1314	78.2	1.1	2.8	9.1	1.9	4.9	1.8	0.2
Labour Hire	98.7	1.3	153	118	87.4	0	1.7	4.2	1.7	4.2	0.8	0
Transport, Postal and Warehousing	91.5	8.5	4498	2918	76	2.9	2.8	8	3.1	3.4	3.7	0.1
Air and Space Transport	93.7	6.3	191	133	96.2	0	1.5	1.5	0.8	0	0	0
Other Transport	89.1	10.9	129	75	74.8	1.3	5.3	9.3	2.7	5.3	1.3	0

	Claim decisions			Time lost claim finalisation								
	Admit	Re-jected	Total claims decid-ed	Total time lost claims final-ised	Fit for work: same job / tasks with same em-ployer	Fit for work: same job / tasks with diff em-ployer	Fit for work: diff job / tasks with same em-ployer	Fit for work: diff job / tasks with diff em-ployer	Fit for work: no job	Fit for work: worker does not return	Not fit for work	Alter-native out-come not claim related
	%	%			%	%	%	%	%	%	%	%
Postal and Courier Pick-up and Delivery Services	85.9	14.1	205	154	65.7	3.9	0	14.3	3.9	7.1	4.5	0.6
Rail Transport	92.5	7.5	451	223	85.7	1.8	2.7	1.8	0.9	1.3	5.4	0.4
Road Transport	90.8	9.2	2261	1616	74	3.3	3.4	8.3	2.9	3.7	4.3	0.1
Transport Support Services	91.9	8.1	508	273	77.2	2.6	3.7	7	4.4	2.9	2.2	0
Warehousing and Storage Services	94.5	5.5	200	84	85.6	2.4	0	3.6	0	4.8	3.6	0
Water Transport	92.4	7.6	118	50	78	2	2	4	4	6	4	0
Labour Hire	94	6	435	310	72.9	2.9	1.3	12.6	5.5	1.9	2.9	0
Wholesale Trade	93	7	3528	1973	79.5	1.7	2.6	7.5	2.5	3.6	2.5	0.1
Basic Material Wholesaling	93.2	6.8	1020	580	81.8	1.7	1.9	6	3.1	3.1	2.4	0
Commission-Based Wholesaling	88.9	11.1	72	55	80.1	0	1.8	10.9	3.6	1.8	1.8	0
Grocery, Liquor and Tobacco Product Wholesaling	94.6	5.4	664	437	77.7	1.8	4.8	7.3	2.1	3.4	2.7	0.2
Machinery and Equipment Wholesaling	92.6	7.4	830	341	78.3	1.2	2.6	9.1	2.9	4.1	1.8	0
Motor Vehicle and Motor Vehicle Parts Wholesaling	93.3	6.7	329	198	83.4	3	1	6.1	1	4	1.5	0
Other Goods Wholesaling	89.8	10.2	410	227	75.3	1.3	1.8	9.3	2.2	4.8	5.3	0
Labour Hire	96.1	3.9	203	135	78.5	2.2	3	8.1	3	3.7	1.5	0
Other	88.7	11.3	203	108	80.5	2.8	0.9	2.8	3.7	2.8	6.5	0
Total	92.5	7.5	80,438	47,664	82	1.7	2.5	5.8	2	3.1	2.8	0.1

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

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

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

Appendix 2: Industry classification codes

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

H Accommodation and Food Services

- 44 Accommodation
- 45 Food and Beverage Services

N Administrative and Support Services

- 72 Administrative Services
- 73 Building Cleaning, Pest Control and Other Support Services

A Agriculture, Forestry and Fishing

- 01 Agriculture
- 05 Agriculture, Forestry and Fishing Support Services
- 02 Aquaculture
- 04 Fishing, Hunting and Trapping
- 03 Forestry and Logging

R Arts and Recreation Services

- 90 Creative and Performing Arts Activities
- 92 Gambling Activities
- 89 Heritage Activities
- 91 Sports and Recreation Activities

E Construction

- 30 Building Construction
- 32 Construction Services
- 31 Heavy and Civil Engineering Construction

P Education and Training

- 82 Adult, Community and Other Education
- 80 Preschool and School Education
- 81 Tertiary Education

D Electricity, Gas, Water and Waste Services

- 26 Electricity Supply
- 27 Gas Supply
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- 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
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- 36 Grocery, Liquor and Tobacco Product Wholesaling
- 34 Machinery and Equipment Wholesaling
- 35 Motor Vehicle and Motor Vehicle Parts Wholesaling
- 37 Other Goods Wholesaling

Appendix 3: Critical events history

Pre-1997

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

1 Jul 1997: *WorkCover Queensland Act 1996*

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

1 Jul 1999: *WorkCover Queensland Amendment Act 1999*

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

1 Jul 2001: *WorkCover Queensland Amendment Act 2001*

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

16 Jun 2002: *Restrictions of advertising from plaintiff lawyers*

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

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

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

1 Jul 2003: *Workers' Compensation and Rehabilitation Act 2003*

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

27 Aug 2004: *Sheridan v Warrina Community Co-Operative Ltd and Anor QCA 308*

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

1 Nov 2005: *Workers' Compensation and Rehabilitation and Other Acts Amendment Act 2005*

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

1 Jul 2006: *Dr Fax Fee*

28. WorkCover Queensland introduced the doctor fax fee, a small financial incentive to encourage doctors to submit claim information quicker.

1 Jan 2008: *Workers' Compensation and Rehabilitation and Other Acts Amendment Bill 2007*

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

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

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

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

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

1 Dec 2008: Transport and Other Legislation Amendment Act 2008

36. Enabled injured workers to lodge applications by phone.

1 Jul 2010: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act

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

These provisions apply to injuries arising after 1 July 2010 or if the date of diagnosis of a latent onset injury is on or after 1 July 2010.

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

29 Sep 2010: Cameron v Foster and Anor QSC 372

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

6 Jun 2011: Work Health and Safety Act 2011

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

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

29 Oct 2013: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act

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

17 September 2015: Workers' Compensation and Rehabilitation and Other Legislation Amendment Act

57. Removed the common law threshold of greater than five per cent degree of permanent impairment (DPI) to access common law damages. Applicable to injuries on or after 31 January 2015.
58. Established the ability to provide additional compensation to particular workers impacted by the common law threshold, for injuries on or after 15 October 2013 and before 31 January 2015.
59. Introduced provisions for firefighters diagnosed with one of 12 specified diseases that deem their injury to be work related.
60. Removed the entitlement prospective employers had to obtain a copy of a prospective worker's compensation claims history from the Queensland Workers' Compensation Regulator.

1 January 2016: Change in administration process of Queensland Health

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

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

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

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

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

1 December 2017: *Doctor fax fee*

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

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

69. Amended the meaning of injury for a psychiatric or psychological disorder to remove 'the major' as a qualifier for employment's 'significant contributing factor' to the injury.
70. Required insurers to take all reasonable steps to provide claimants with psychiatric or psychological injuries access to reasonable support services relating to their injury during claim determination.
71. Exempted expressions of regret and apologies provided by employers following a workplace injury from being considered in any assessment of liability for damages brought under the *Workers' Compensation and Rehabilitation Act 2003* to align with the approach taken in the *Civil Liability Act 2003*.
72. Required insurers to provide ongoing rehabilitation and return to work services if the injured worker has been unable to return to work after their entitlement to weekly benefits and medical expenses ceases.
73. Clarified that insurers have a discretion to accept claims submitted more than six months after the injury is diagnosed, if the injured worker has lodged a claim within 20 days of developing an incapacity for work from their injury.
74. Clarified WorkCover Queensland's ability to fund and provide programs and incentives that support employers improving health and safety performance, after consulting with the regulator under the *Work Health and Safety Act 2011* or any other relevant health and safety regulator.

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

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

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

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

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

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

Appendix 4: Definitions

Statutory definitions

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Common law definitions

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

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

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

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

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

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

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

Defendant's costs: Costs incurred by the defendant.

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

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

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

Plaintiff's costs: Costs incurred by the plaintiff.

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

Medical assessment tribunal definitions

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

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

Cases determined: All cases heard and determined by the Medical assessment tribunals.

GMAT (Other): General medical assessment tribunals including the medical, vascular, surgical, urology, gynaecology, thoracic and rheumatology specialties. Excludes general medical assessment tribunal—Psychiatric.

GMAT (Psychiatric): General medical assessment tribunal—Psychiatric.

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.

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

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

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

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

Withdrawn: Appeals withdrawn by the appellant prior to hearing.

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