Queensland workers' compensation scheme statistics 2020–21





State of Queensland 2021



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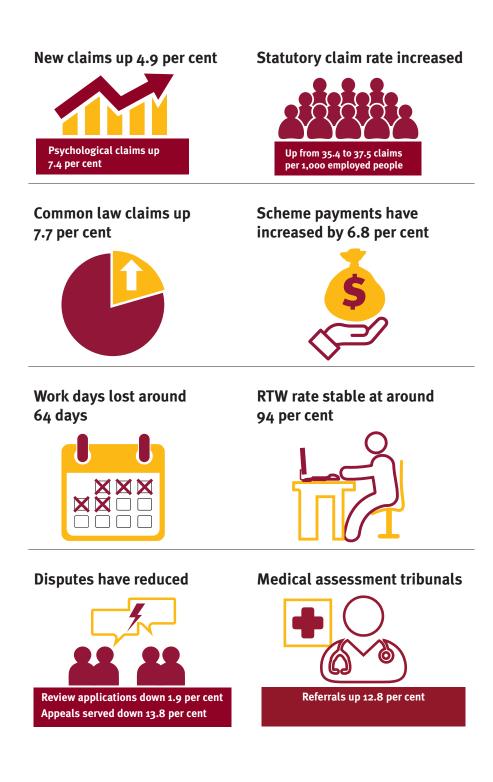
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2020–21 Scheme highlights



Introduction

This is the 22nd 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 the major regulatory services provided by OIR for insurer and medical issues including:
 - administrative review of insurers' decisions
 - appeals to the Queensland Industrial Relations Commission and the Industrial Court
 - Medical assessment tribunals.

All figures reported as at 30 June 2021, 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 Workers' Compensation Regulatory Services (WCRS) in OIR, Queensland Government.

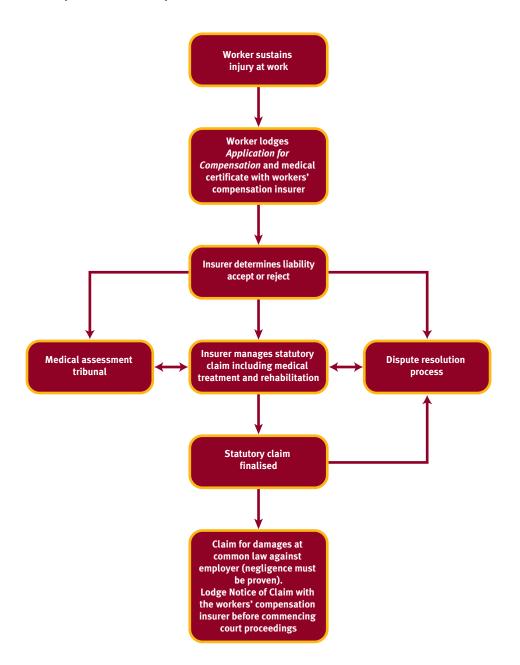
WCRS is responsible for:

- 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 2021 there were 29 insurers in the scheme – WorkCover Queensland and 28 self-insured employers.

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

1 Workers' compensation claims process

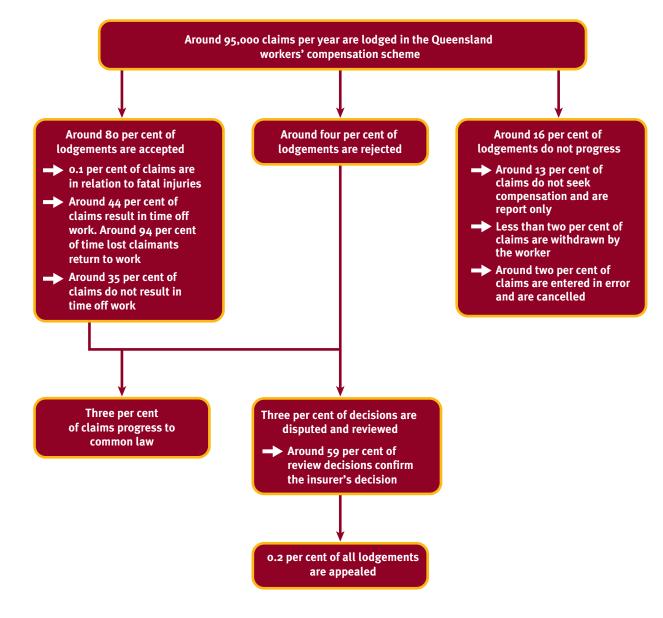


Claim profile

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

As represented in figure 2, there is a gap between the number of claims lodged in the scheme, compared to the number of decisions. This is because 16 per cent of lodgements do not progress as they are either withdrawn by the worker, entered in error, or do not require a statutory decision and are 'report only'.

2 Queensland workers' compensation claim profile



Scheme highlights

Statutory claim lodgements

New statutory claims of 94,502 for 2020–21 were 4.9 per cent higher than 2019–20. While the number of employed people reduced by 1.2 per cent for 2020–21, there was a 5.9 per cent increase in the claim rate. The claim rate for 2020–21 has increased to 37.5 claims per 1,000 employed people. Industries that have increases in claim rates this year include arts and recreation services, accommodation and food services, administrative and support services, other services and construction.

The proportion of psychological and psychiatric statutory claims increased slightly for 2020–21 at 6.0 per cent (5.9 per cent in 2019–20). Psychological and psychiatric claims currently represent 9.1 per cent of total statutory payments (\$118.6 million for 2020–21) and have an average finalised time lost claim cost of \$55,402 (\$48,844 in 2019–20) which is over two times the average time lost claim cost of physical injuries (\$23,439 for 2020–21).

Statutory claim payments

Statutory payments for 2020–21 of \$1,299.3 million were 4.7 per cent higher than in 2019–20 (\$1,240.7 million). Weekly compensation payments, which represent 32.4 per cent of statutory payments, have increased 8.3 per cent for 2020–21 from \$552.5 million to \$598.2 million. Average work days lost increased from 55.8 days in 2019–20 to 63.5 days in 2020–21. The average cost of time lost claims increased by 12.5 per cent from \$21,826 in 2019–20 to \$24,560 in 2020–21.

Fatalities

There were 64 fatal claim lodgements in 2020–21. Fatal claim lodgements due to injuries at work represented just under a third of the 2020–21 figures (n = 18; 28.1 per cent). Construction (n = 9); transport, postal and warehousing (n = 9) and manufacturing (n = 7); industries contributed 39.1 per cent of fatalities in 2020–21.

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

Return to work

In 2020–21, the return to work rate decreased slightly to 93.9 per cent (94.0 per cent for 2019–20).

Dispute resolution

Review applications have reduced by 1.9 per cent, from 2,620 in 2019–20 to 2,570 in 2020–21. The proportion of review applications to statutory claims has reduced to 2.7 per cent for 2020–21 (2.9 per cent for 2019–20). Appeals served in 2020–21 have reduced, down 13.8 per cent from 203 served in 2019–20 to 175 served in 2020–21.

Medical assessment tribunals

In 2020–21, 3,130 referrals were made to the Medical assessment tribunals. This is an increase of 12.8 per cent from the 2,774 referrals received in 2019–20. Of the cases determined by the Medical assessment tribunal, 44.7 per cent were for permanent impairment (PI) assessment (43.9 per cent in 2019–20) and 50.6 per cent were for ongoing capacity to work (51.5 per cent in 2019–20). The proportion of Medical assessment tribunal referrals to statutory claims has increased for 2020–21 to 3.3 per cent (3.1 per cent for 2019–20).

Common law lodgements

Common law lodgements increased by 7.7 per cent from 3,001 in 2019–20 to 3,232 in 2020–21. Strains and sprains accounted for 28.0 per cent of all common law claim lodgements in 2020–21.

Common law average damages

The average cost of finalised common law claims has increased by 2.4 per cent to \$172,472 for 2020–21. The average defendant and plaintiff cost reduced by 1.4 per cent from \$22,359 in 2019–20 to \$20,036 in 2020–21.

3 Scheme at a glance

	Overview								
		2020–21	2019–20	% change from previous year	Page number				
Statutory	New claims	94,502	90,064	4.9	8				
claims	Claims per 1,000 employed people	37.5	35.4	5.9	8				
	New psychological claims (%)	6.0%	5.9%	0.1	13				
	Compensated Fatalities	64	61	-	16				
	Payments (\$M)	\$1,299.3	\$1,240.7	4.7	22				
Statutory	Average time to decide (days)	9.5	8.5	10.7	18				
decisions	Rejection rate – physical (%)	3.7%	3.9%	-0.2	19				
	Rejection rate – psychological and psychiatric (%)	51.5%	53.0%	-1.5	19				
Outcomes	Average work days lost (days) (time lost claims)	63.5	55.8	13.8	33				
	Return to work rate (%)	93.9%	94.0%	-0.1	28				
Common law	New claims	3,232	3,001	7.7	38				
	Payments (\$M)	\$544.5	\$484.9	12.3	42				
	Average damages cost (excluding nil settlements)	\$172,472	\$168,355	2.4	43				
Regulator	Review applications	2,570	2,620	-1.9	45				
functions	Appeals served	175	203	-13.8	48				
	Medical assessment tribunal referrals	3,130	2,774	12.8	51				

Workers' compensation statutory claims

- The majority of employers (almost 90 per cent) covered by the scheme in 2020–21 did not have a claim for workers' compensation.
- The scheme-wide claim rate increased 5.9 per cent.
- The manufacturing industry has the highest claim rate.

As at 30 June 2021, approximately 170,000 employers were covered by the Queensland workers' compensation scheme. During 2020–21, the scheme covered approximately 176,000 employers, taking into account fluctuations in cancelled and new policies.

4 Number of claims lodged by insurance type 2019–20 and 2020–21

Insurance type	2019–20	2020–21	% Variance
Employed people	89,668	94,041	4.9
Volunteers, industrial placement / work experience, contracts of insurance (the Act s26)	280	331	18.2
Workplace personal injury insurance	84	104	23.8
(self-employed, working directors)			
Household workers	32	26	-18.8
Total lodgements	90,064	94,502	4.9

The majority of claims (99.5 per cent) are for 'workers' (as defined in the Act).

5 Number of claims per employer by declared wages 2019-20

Number of	Declared wages									
claims	\$1M or less	\$1.01M to \$2.5M	\$2.51M to \$5M	\$5.01M to \$10M	\$10.01M to \$50M	Over \$50M	Total employers			
No claims	149,175	5,101	1,102	346	165	5	155,894			
1 claim	8,963	1,977	631	237	129	8	11,945			
2 to 5 claims	2,441	1,780	1,020	557	320	34	6,152			
6 to 10 claims	64	175	287	284	276	27	1,113			
11 to 20 claims	13	27	69	164	249	36	558			
Over 20 claims	20	4	9	42	262	197	534			
Total with claims	11,501	3,963	2,016	1,284	1,236	302	20,302			
Total	160,676	9,064	3,118	1,630	1,401	307	176,196			
% without claims	92.8	56.3	35.3	21.2	11.8	1.6	88.5			

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

The majority of employers (88.5 per cent) did not have a claim for workers' compensation in 2020–21. Smaller employers (\$1 million or less in declared wages) were the most likely to have no claims (92.8 per cent).

Claim rate

In 2020–21, 94,502 claims were lodged scheme-wide (excluding cancelled claims). The estimated rates per 1,000 employed people are detailed below.

6 Claim rates (per 1,000 employed people) 2016-17 to 2020-21

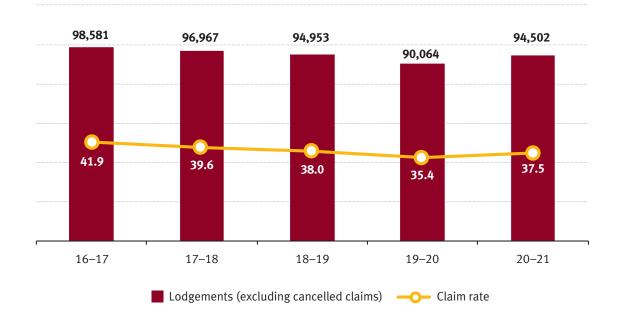
	Annual comparison					
	2016–17	2017–18	2018–19	2019–20	2020–21	
Queensland labour force						
Average number of employed people ('ooo) ^a	2,353.3	2447.6	2,496.1	2,547.7	2,518.4	
Change from previous year (%)	-0.4	4.0	2.0	2.1	-1.2	
Queensland workers' compensation scheme						
Number of lodged claims	98,581	96,967	94,953	90,064 ^b	94,502	
Change from previous year (%)	7.1	-1.6	-2.1	-5.1	4.9	
Claim rate						
Number per 1,000 employed people	41.9	39.6	38.0	35.4	37.5	
Change from previous year (%)	7.4	-5.5	-4.0	-6.8	5.9	

^a Australian Bureau of Statistics, Labour Force, Queensland Average of May Quarter to February Quarter, Cat. No. 6291.0.55.001, May 2021.

^b Claims lodged in 2019–20 has been revised in 2020–21 due to insurer process changes.

Figure 7 shows claim rates and claim lodgements in the scheme for the past five years. Lodgements for 2020–21 of 94,502 have increased by 4.9 per cent from 2019–20 lodgements of 90,064.

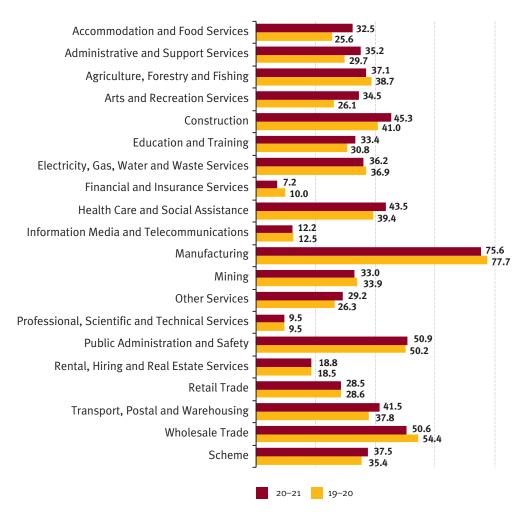
7 Claim rates (per 1,000 employed people) and lodgements 2016-17 to 2020-21



As shown in figure 8, manufacturing had the highest claim rate in the scheme, with 75.6 claim lodgements per 1,000 employed people in the industry. Other industries where the claim rate was larger than the scheme rate of 37.5 include:

- public administration and safety (50.9)
- wholesale trade (50.6)
- construction (45.3)
- health care and social assistance (43.5)
- transport, postal and warehousing (41.5).

8 Claim rates (per 1,000 employed people) by industry 2019-20 and 2020-21



Statutory claim lodgements

- Lodgements (excluding cancelled claims) increased by 4.9 per cent in 2020-21.
- There were 64 fatal claims lodged in 2020–21.

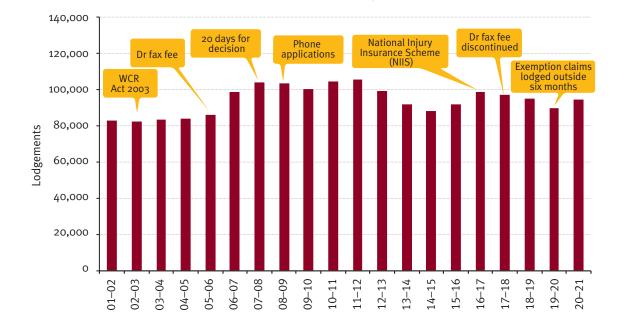
Many factors influence the number of claims lodged in the Queensland workers' compensation scheme. Some of the factors that may have contributed to changes in numbers of lodgements over the years include:

- 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 2020–21, there were 94,502 claims lodged (excluding cancelled), representing a 4.9 per cent increase from 2019–20 (90,064).

9 Statutory claim lodgement history 2001-02 to 2020-21

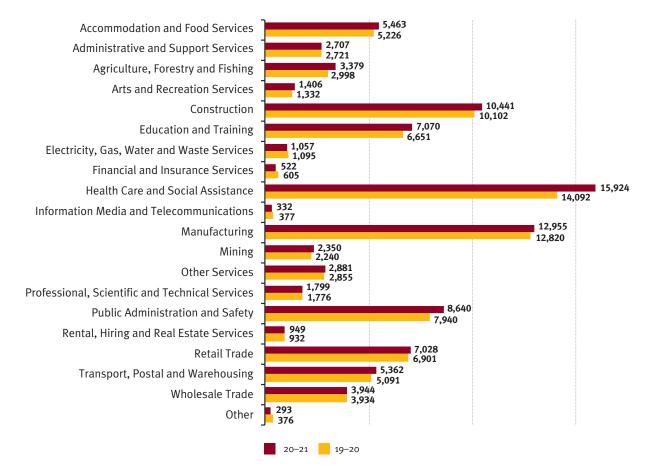


Industry

The health care and social assistance industry accounted for the largest proportion of claim lodgements with 16.9 per cent of all scheme lodgements.

The largest claim increases were in the health care and social assistance industry, up 13.0 per cent from 14,092 to 15,924 and the public administration and safety, up 8.8 per cent from 7,940 to 8,640 (figure 10).

10 Statutory claim lodgements by industry 2019-20 and 2020-21



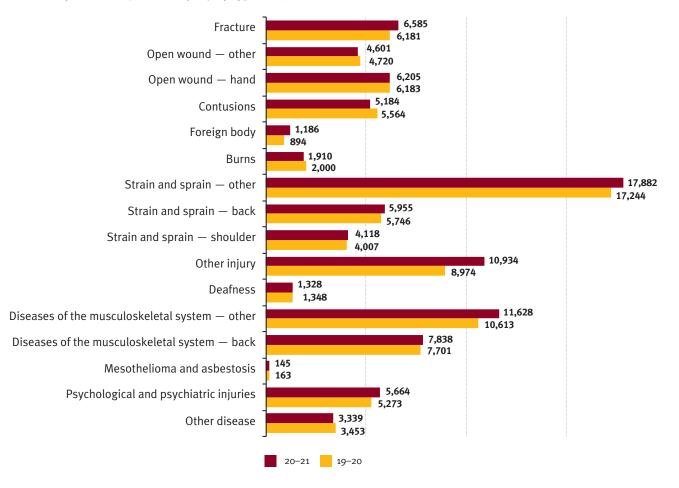
For industry 'Other', this includes injuries pre-July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strain and sprain injury claims accounted for 29.6 per cent of all injuries lodged in 2020–21. Of these, the back was the major bodily location (accounting for 6.3 per cent of all lodgements).

Psychological and psychiatric injuries increased in 2020–21, up 7.4 per cent from 5,273 in 2019–20 to 5,664.

11 Statutory claim lodgements by injury type 2019-20 and 2020-21

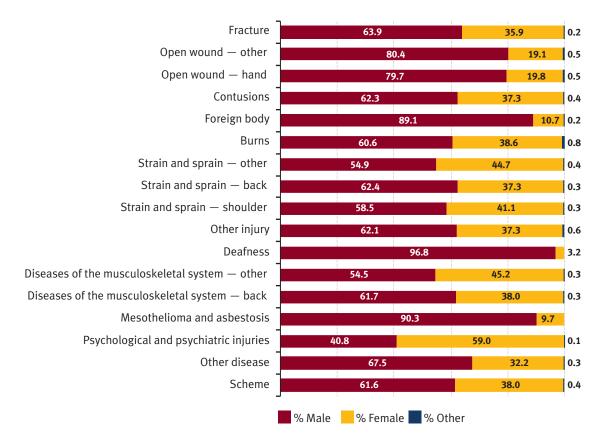


Gender

In 2020–21, males represented just under two-thirds of the 94,502 claims lodged in the Queensland workers' compensation scheme. Injuries where males represented a much higher proportion of claims than females were deafness (96.8 per cent), mesothelioma and asbestosis (90.3 per cent) and foreign body (89.1 per cent).

Psychological and psychiatric injury was the only injury type where females were represented more than males, with females accounting for 59.0 per cent of claims.

12 Proportion of statutory claim lodgements by injury type and gender 2020-21

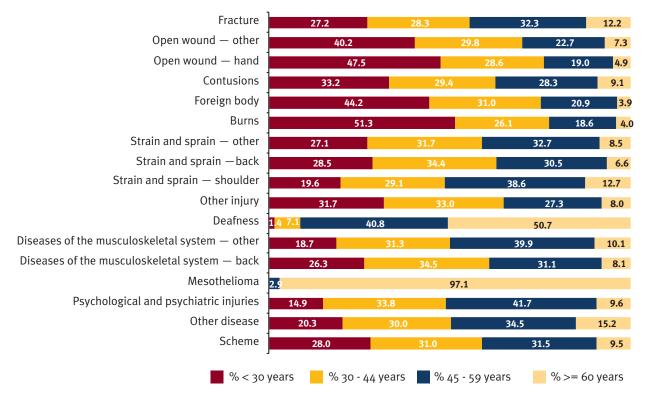


Age

While older workers (60 years or over) represented only 9.5 per cent of all claim lodgements, they have a high representation for injuries such as mesothelioma (97.1 per cent) and deafness (50.7 per cent).

Injury types where younger workers (less than 30 years) represented a greater proportion include burns (51.3 per cent), open wound to the hand (47.5 per cent), foreign body (44.2 per cent) and open wound to a location other than the hand (40.2 per cent).

13 Proportion of statutory claim lodgements by injury type and age group 2020-21



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

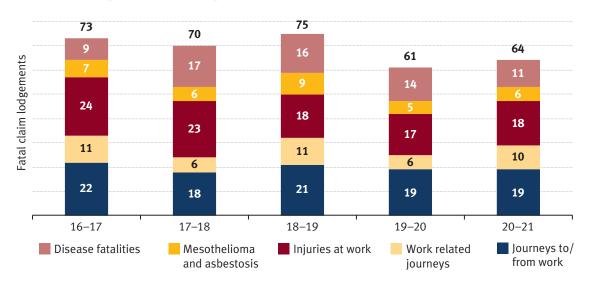
Compensated fatalities

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

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.

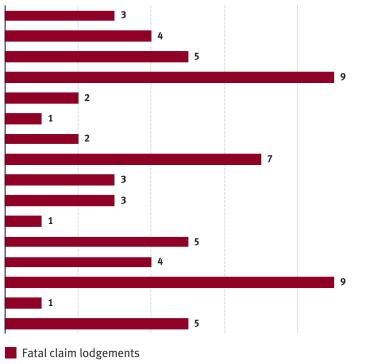
There were 64 fatalities lodged in 2020-21.

14 Fatal claim lodgements (excluding cancelled claims) 2016–17 to 2020–21



15 Fatal claim lodgements by industry 2020–21

Accommodation and Food Services Administrative and Support Services Agriculture, Forestry and Fishing Construction Education and Training Financial and Insurance Services Health Care and Social Assistance Manufacturing Mining Other Services Professional. Scientific and Technical Services Public Administration and Safety **Retail Trade** Transport, Postal and Warehousing Wholesale Trade Other



Statutory claim decision-making process

- Decision timeframes have increased 10.7 per cent in 2020–21.
- Rejections and claims for psychological and psychiatric injuries take longer to decide.
- Claims for psychological and psychiatric injuries have a higher chance of rejection.
- 82.5 per cent of claims are rejected due to the injury not meeting the definition under the Act.
- Claims lodged with the insurer early are, on average, determined more quickly.
- Rejections are more likely to progress to a review than claims that are accepted.

Once the insurer receives a complete application for compensation, they will determine whether or not the claim is compensable under the 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 an injury is medically complex, 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, an independent 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

Worker lodges an application for compensation Where medically complex, claims may be referred to the MAT Figure 17 illustrates the change in decision-making timeframes in 2019–20 and 2020–21.

17 Average time to decide by injury type 2019–20 and 2020–21

Injury type	Average decisi	on time (days)
	2019–20	2020–21
Fracture	4.7	5.2
Open wound – other	4.7	5.2
Open wound – hand	4.2	6.6
Contusions	5.0	5.6
Foreign body	5.7	5.1
Burns	4.7	5.2
Strain and sprain – other	6.0	7.0
Strain and sprain – back	6.3	7.4
Strain and sprain – shoulder	7.5	8.3
Other injury	7.0	7.7
Deafness	13.4	16.4
Diseases of the musculoskeletal system – other	9.8	10.9
Diseases of the musculoskeletal system – back	8.2	9.2
Mesothelioma and asbestosis	42.0	41.7
Psychological and psychiatric injuries	32.4	32.3
Other disease	20.2	20.3
Total average	8.5	9.5

Overall, the average decision-making timeframe has increased to 9.5 days in 2020-21.

The median decision-making timeframe has increased to five days in 2020–21 (four days in 2019–20).

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

Figure 18 illustrates decision-making timeframes and outcomes for claims determined in 2020–21. These timeframes are based on statutory claim decisions.

Injury type	Number of	Proportion	of decisions	Average decision time			
	decisions	Admitted %	Rejected %	Admitted days	Rejected days	Total days	
Fracture	5,938	97.4	2.6	4.9	17.0	5.2	
Open wound – other	3,433	99.0	1.0	5.1	13.3	5.2	
Open wound – hand	4,848	99.6	0.4	6.5	10.6	6.6	
Contusions	3,988	98.7	1.3	5.4	20.3	5.6	
Foreign body	855	99.5	0.5	5.0	16.3	5.1	
Burns	1,375	99.5	0.5	5.2	4.7	5.2	
Strain and sprain – other	14,995	97.6	2.4	6.5	24.6	7.0	
Strain and sprain – back	5,161	97.4	2.6	7.0	25.2	7.4	
Strain and sprain – shoulder	3,598	97.1	2.9	7.7	28.8	8.3	
Other injury	7,552	95.8	4.2	6.7	29.1	7.7	
Deafness	1,062	92.0	8.0	15.7	25.0	16.4	
Diseases of the musculoskeletal system – other	10,137	93.4	6.6	9.4	32.1	10.9	
Diseases of the musculoskeletal system – back	6,748	95.3	4.7	8.2	27.8	9.2	
Mesothelioma and asbestosis	122	96.7	3.3	39.7	102.5	41.7	
Psychological and psychiatric injuries	3,969	48.5	51.5	20.6	43.4	32.3	
Other disease	2,664	84.7	15.3	16.6	40.7	20.3	
Total	76,445	93.8	6.2	7.7	35-4	9.5	

18 Decisions made and average time to decide by decision type and injury type 2020–21

Most claims (93.8 per cent) were accepted by insurers with an average determination time of 9.5 days. On average, decision timeframes tended to be longer for:

- rejected claims determined in 35.4 days on average compared to 7.7 days on average for accepted claims
- diseases particularly psychological and psychiatric injury claims (average 32.3 days to determine), mesothelioma and asbestosis claims (average 41.7 days to determine) and deafness (average 16.4 days to determine).

In 2020-21, 51.5 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 2020–21, 93.8 per cent of the rejected psychological and psychiatric claims were rejected on this basis.

Reasons for claim rejection

Insurers reject claims where the event or the person is not covered under the Act. For 82.5 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 2019-20 and 2020-21

Reason for rejection	2019	9-20	2020–21		
	Number of rejections	% of rejections	Number of rejections	% of rejections	
Not an injury – s.32	3,761	80.2	3,884	82.5	
Not a worker – s.11	274	5.8	276	5.9	
Out of time – excluded under s.131	330	7.0	363	7.7	
Journey – subsequent delay, interruption or deviation – $s.36(2)(B)$	45	1.0	27	0.6	
Invalid application – 5.132	3	0.1	1	0.0	
Industrial deafness – excluded under s.125 – initial application	31	0.7	15	0.3	
Not a journey – s.35	62	1.3	44	0.9	
Other	184	3.9	100	2.1	
Total	4,690	100	4,710	100	

Determination of medically complex claims

Where an insurer is unable to make a determination on a medically complex claim, 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 2020–21, only 65 claims were referred to the Medical assessment tribunal for determination of the worker's injury for an application for compensation. Of these cases, 43 (66.2 per cent) were accepted and the remaining 22 (33.8 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 (0.5 per cent), 30.0 per cent of rejected claims are disputed by either the employer or the injured worker.

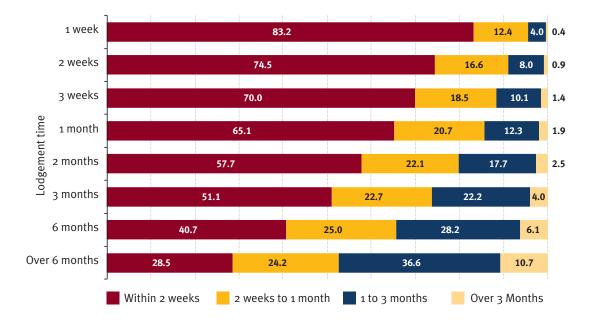
Impact of lodgement time on determination time

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.

83.2 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 to lodge the claim increases. For claims lodged more than six months after an injury, the proportion determined in less than two weeks drops to 28.5 per cent.

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

20 Decision-making timeframes for claims decided in 2020-21 by the time taken to lodge the claim



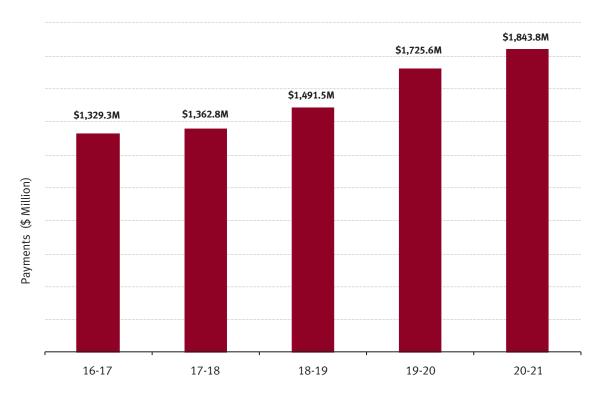
Claim payments

- Total scheme payments increased 6.8 per cent in 2020–21.
- There was a 12.3 per cent increase in common law payments made in 2020-21.
- Statutory payments increased by 4.7 per cent between 2019–20 and 2020–21.

Workers' compensation payments

Overall, the total scheme payments increased 6.8 per cent in 2020–21, with common law payments increasing by 12.3 per cent and statutory payments increasing by 4.7 per cent. Total payments for workers' compensation claims in 2020–21 were \$1,843.8 million. Common law payments made up 29.5 per cent (\$544.5 million) and statutory claim payments made up 70.5 per cent (\$1,299.3 million).

21 Scheme payments 2016-17 to 2020-21

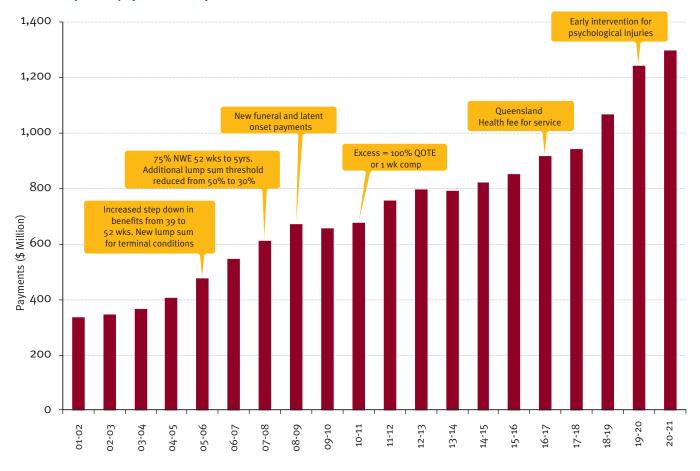


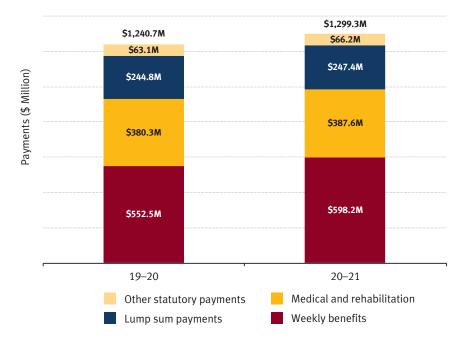
Statutory claim payments

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 2020-21



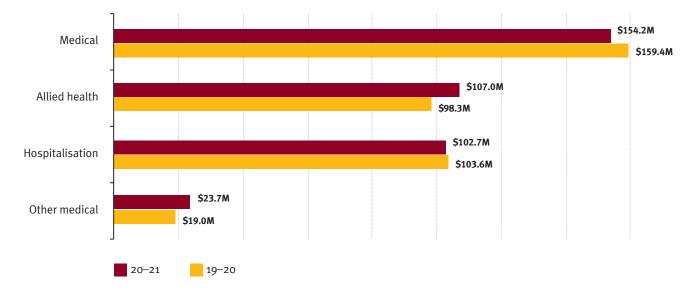


23 Statutory claim payments by payment type 2019-20 and 2020-21

The total payments made on claims for the year have increased by 4.7 per cent from \$1,240.7 million in 2019–20 to \$1,299.3 million in 2020–21 (figure 23).

The largest payments increase was for weekly benefits, up 8.3 per cent from 2019–20.

24 Medical and rehabilitation payments 2019-20 and 2020-21



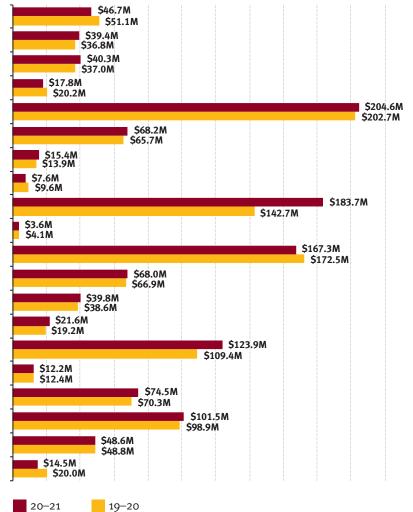
Medical and rehabilitation payments represent 21.0 per cent of statutory payments. Payments for medical treatment accounted for 39.8 per cent of all payments for medical and rehabilitation fees paid in the scheme in 2020–21. Allied health payments increased 8.8 per cent in 2020–21 from \$98.3 million in 2019–20 to \$107.0 million.

Payments by industry

Claims from the construction industry accounted for the largest proportion (15.7 per cent) of statutory claim payments in 2020–21. Health care and social assistance accounted for 14.1 per cent of statutory payments, while manufacturing accounted for 12.9 per cent (figure 25).

25 Statutory claim payments by industry 2019-20 and 2020-21

Accommodation and Food Services Administrative and Support Services Agriculture, Forestry and Fishing Arts and Recreation Services Construction Education and Training Electricity, Gas, Water and Waste Services Financial and Insurance Services Health Care and Social Assistance Information Media and Telecommunications Manufacturing Mining Other Services Professional, Scientific and Technical Services Public Administration and Safety Rental, Hiring and Real Estate Services **Retail Trade** Transport, Postal and Warehousing Wholesale Trade Other

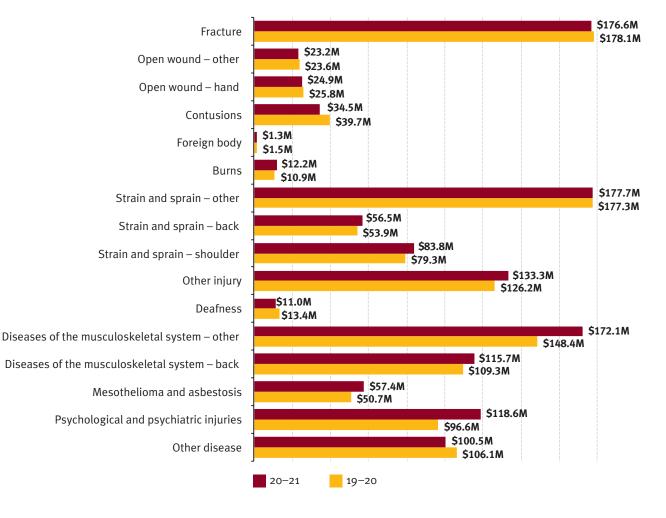


Payments by injury

As shown in figure 26, claims from strain and sprain injuries accounted for the largest proportion (24.5 per cent) of statutory claim payments in 2020–21 (4.3 per cent to the back, 6.5 per cent to the shoulder and 13.7 per cent to a location other than the back or shoulder). Diseases of the musculoskeletal system claims accounted for 22.1 per cent of statutory claim payments made in 2020–21 (8.9 per cent to the back). Fractures accounted for 13.6 per cent of claim injuries in 2020–21.

The injury type that experienced the largest percentage increase in statutory claim payments from 2019–20 to 2020–21 was psychological and psychiatric injuries (22.8 per cent).

26 Statutory claim payments by injury type 2019–20 and 2020–21



Finalised claims and outcomes

- In 2020–21, 87.0 per cent of workers with claims finalised returned to their same job with the same employer.
- The average costs of finalised medical expense only claims increased by 11.2 per cent.
- The average costs of finalised time lost claims increased by 12.5 per cent and the duration increased 13.8 per cent.

Work related impairment/degree of permanent impairment

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

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

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

Figure 27 below shows the number of claims finalised and those that had a WRI/DPI in 2019–20 and 2020–21.

27 Finalised claims with a WRI/DPI 2019-20 and 2020-21

	2019–20	2020–21	Variance %
Finalised claims	76,470	72,834	-4.8
WRI/DPI	8,661	9,049	4.5
Proportion of finalised claims with WRI/DPI	11.3%	12.4%	1.1
Work related impairment/Degree of permanent impairment range			
0%	2,024	2,224	9.9
0.1%-4.9%	2,864	2,783	-2.8
5%-9.9%	2,455	2,611	6.4
10%–14.9%	630	681	8.1
15%–19.9%	268	284	6.0
>=20%	420	466	11.0

For 2020–21, 12.4 per cent of claims were finalised with a PI. Of these, the majority of claims (94.9 per cent) had a WRI/DPI of less than 20 per cent and 24.6 per cent were calculated as having a zero per cent impairment.

Return to work (RTW) outcomes

Returning an injured worker to the same job with the same employer is the best outcome that can be achieved on a claim. The following figure analyses the RTW outcome of claims reported at the time the claim closed. As figure 28 illustrates, this is the outcome achieved in most cases, with 87.0 per cent of injured workers who had time off work returning to the same job and the same employer.

	201	9-20	202	0–21
	Number	% of time lost claims	Number	% of time lost claims
Fit for work: same job/tasks with same employer	40,633	88.0	39,837	87.0
Fit for work: same job/tasks with different employer	646	1.4	684	1.5
Fit for work: different job/tasks with same employer	552	1.2	582	1.3
Fit for work: different job/tasks with different employer	1,602	3.4	1,899	4.1
Fit for work: no job	810	1.8	899	2.0
Fit for work: worker does not return	1,061	2.3	914	2.0
Not fit for work	780	1.7	878	1.9
Alternative outcome not claim related	114	0.2	75	0.2
Total	46,198	100	45,768	100

28 Return to work status of finalised time lost claims 2019–20 and 2020–21

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

In 2020–21, 93.9 per cent of injured workers returned to some type of employment (94.0 per cent in 2019–20). In a small number of cases, the worker is deemed fit to return to work but there is no job for the worker to return to (2.0 per cent of time lost claims) or the worker chooses not to return (2.0 per cent of claims).

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

		2019–20 Pl Assessed			2020–21 PI Assessed		
	% No	% Yes	Number	% No	% Yes	Number	
Fit for work: same job/tasks with same employer	90.6	9.4	40,633	90.2	9.8	39,837	
Fit for work: same job/tasks with different employer	67.8	32.2	646	67.7	32.3	684	
Fit for work: different job/tasks with same employer	53.6	46.4	552	51.0	49.0	582	
Fit for work: different job/tasks with different employer	55.4	44.6	1,602	51.4	48.6	1,899	
Fit for work: no job	36.4	63.6	810	29.6	70.4	899	
Fit for work: worker does not return	48.3	51.7	1,061	42.2	57.8	914	
Not fit for work	26.7	73.3	780	22.4	77.6	878	
Alternative outcome not claim related	49.1	50.9	114	54.7	45.3	75	
Total	85.5	14.5	46,198	84.2	15.8	45,768	

29 Return to work status of finalised time lost claims with/without a PI assessed 2019-20 and 2020-21

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

Workers with claims assessed for PI are less likely to return to the same job with the same employer. In 2020–21, 9.8 per cent of workers returning to the same job with the same employer had a PI assessed.

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

30 Return to work status of finalised time lost claims by injury nature 2019-20 and 2020-21

		2019–20			2020-21	
	Physical only %	Psych only %	Psych and Physical %	Physical only %	Psych only %	Psych and Physical %
Fit for work: same job/tasks with same employer	90.5	63.5	46.2	89.9	62.7	44.2
Fit for work: same job/tasks with different employer	1.3	3.5	2.8	1.4	3.3	2.9
Fit for work: different job/tasks with same employer	1.1	2.7	3.2	1.1	3.4	2.6
Fit for work: different job/tasks with different employer	2.9	11.0	11.8	3.3	11.5	15.6
Fit for work: no job	1.4	3.9	7.9	1.5	4.4	9.4
Fit for work: worker does not return	1.8	6.8	10.2	1.5	5.7	8.8
Not fit for work	0.9	7.9	15.4	1.1	8.5	15.2
Alternative outcome not claim related	0.1	0.7	2.5	0.1	0.5	1.2
Total	100	100	100	100	100	100
Number	43,121	1,318	1,759	42,295	1,437	2,036

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

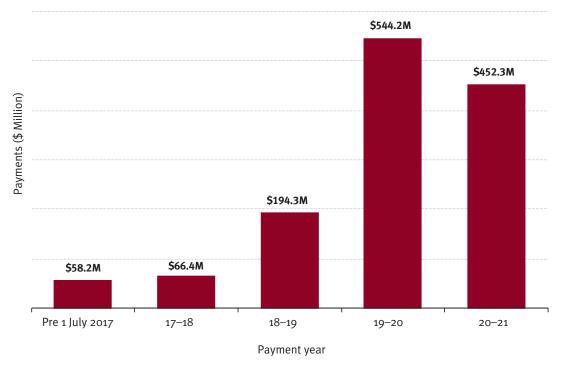
Workers having claims with both a physical and psychological or psychiatric component are the least likely to return to employment and in 2020–21, 15.2 per cent were not fit for work at the end of their claim.

Average claim costs

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

Figure 31 below illustrates the payments made on claims finalised in 2020–21. Over 65 per cent of the payments for these claims occurred in previous years. Only 34.4 per cent of the statutory payments made on claims finalised in 2020–21 were also paid in that financial year. A further 41.4 per cent of payments were made in the 2019–20 financial year. The remaining 24.2 per cent of the payments were made in 2018–19 or earlier.

31 Payments by payment year for claims finalised in 2020-21



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

The average cost (time lost claims and medical expenses only claims) has increased for the financial year (up 16.3 per cent from \$14,478 in 2019–20 to \$16,832 in 2020–21).

The number of claims finalised in the past two financial years, and the average claim costs by claim type for time lost claims and medical expense only claims is represented in figure 32 below. These two claims types represent 97.5 per cent of all finalised claims during 2020–21.

Claim type	Number of claims			Average claim cost		
	2019–20	2020–21	Variance %	2019–20 \$	2020–21 \$	Variance %
Time lost claim	46,216	45,783	-0.9	21,826	24,560	12.5
Medical expense only claim	28,411	25,233	-11.2	2,527	2,809	11.2
Total	74,627	71,016	-4.8	14,478	16,832	16.3

32 Finalised claims and average claim costs by claim type 2019-20 and 2020-21

The median claim costs for time lost and medical expense only claims has increased from \$2,090 in 2019–20 to \$2,629 in 2020–21.

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 2020-21

Indicator	% change from previous year	
Average finalised time lost claim cost	12.5	
Average finalised medical expense only claim cost	11.2	
Consumer price index		
Average of all groups, Brisbane (excluding GST) ^a	1.7	
Health, Brisbane (excluding GST) ^b	3.9	
Full time adult ordinary earnings ^c	0.4	

^a Australian Bureau of Statistics, consumer price index, Australia Cat. No. 6401.0 - Consumer Price Index, Australia, March 2021, Tables 1 and 2 CPI - all groups, index numbers and percentages changes changes, Index Numbers; All groups; Brisbane. [Percentage change from March 2020 to March 2021.]

^b Australian Bureau of Statistics, Australia Cat. No. 6401.0 - Consumer Price Index, Australia, March 2021, Table 5 CPI - groups, index numbers by capital city, Index Numbers; Health; Brisbane. [Percentage change from March 2020 to March 2021.]

^c Australian Bureau of Statistics, average weekly earnings, Australia Cat. No 6302.0 - Average weekly earnings Australia, November 2020. Table 13C Average weekly earnings Queensland (dollars) - Original Earnings; Queensland; Persons; Full Time; Adult; Ordinary time earnings. [Percentage change from November 2019 to November 2020.]

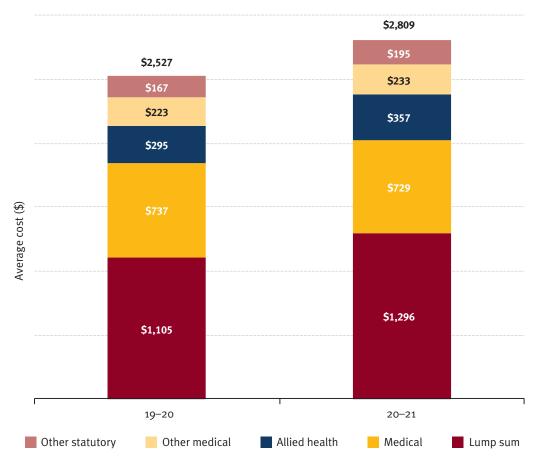
Average finalised medical expense only claim costs

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

The average cost of finalised medical expense only claims has increased by 11.2 per cent from \$2,527 in 2019–20 to \$2,809 in 2020–21 (figure 34).

The breakdown of the average cost for 2020–21 shows 46.1 per cent of the cost is made up of lump sum payments followed by medical and rehabilitation payments of 25.9 per cent. Allied health payments account for 12.7 per cent and other medical payments (including hospitalisation) account for 8.3 per cent. The remaining 6.9 per cent of the average cost is made up of other statutory payments.

34 Average finalised medical expense only claim costs by payment type 2019-20 and 2020-21



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 reduced in 2020–21, down 0.9 per cent from 46,216 in 2019–20 to 45,783.

Durations for finalised time lost claims including the excess paid period by the employer (where applicable) have increased from 55.8 days in 2019–20 to 63.5 days in 2020–21.

Two thirds of time lost claims have 40 or less workdays lost (66.0 per cent), while the median workdays lost for all time lost claims is 18 days. This illustrates how the small number of long term claims impact the average duration. Only 13.8 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 (the Act s150).

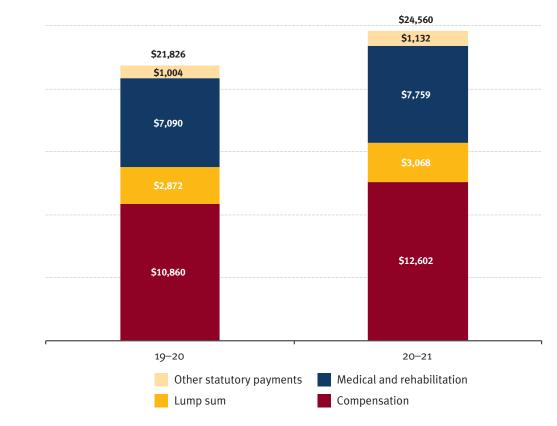
35 Number of time lost claims by workdays lost time band 2019-20 and 2020-21

Workdays lost	201	9–20	2020–21		
	Number of claims	% of claims	Number of claims	% of claims	
1–5 days	14,284	32.6	12,879	28.1	
6–10 days	5,551	12.0	5,459	11.9	
11-20 days	5,831	12.6	5,708	12.5	
21–40 days	6,148	13.2	6,149	13.4	
41–65 days	4,110	8.9	4,224	9.2	
66–130 days	4,873	9.9	5,047	11.0	
131–260 days	3,177	6.6	3,596	7.9	
> 260 days	2,242	4.2	2,721	5.9	
Total time lost claims	46,216	100	45,783	100	

Average finalised time lost claim costs

The average cost of finalised time lost claims increased by 12.5 per cent from \$21,826 in 2019–20 to \$24,560 in 2020–21 (figure 36). The breakdown of the average cost in 2020–21 shows half (51.3 per cent) of the cost is made up of weekly compensation payments. In 2020–21, medical and rehabilitation payments accounted for a third (31.6 per cent) of the average cost and lump sum payments accounted for 12.5 per cent. The remaining 4.6 per cent of the average cost was made up of other statutory payments.





Average cost by industry

Of all industry claims, those from the mining industry had the highest average finalised time lost claim cost (\$57,491) partially due to the higher wages paid in the industry (figure 37). Being the highest of all industries, the Australian average weekly earnings (full time adult ordinary time earnings) for workers within the mining industry is \$2,633.20*.

Similarly, industries that tended to have a lower average finalised time lost claim cost (e.g. accommodation and food services and retail trade) – also had the lowest Australian average weekly earnings of all industries – \$1,161 and \$1,289 respectively.

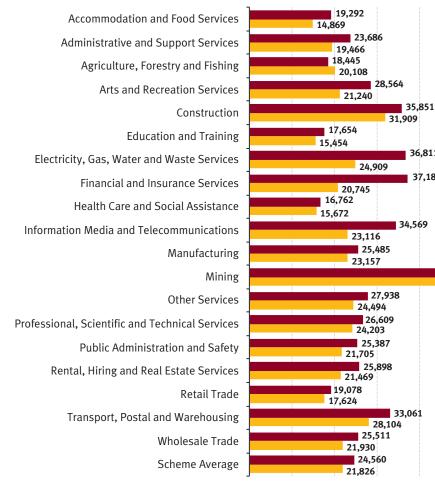
36,811

37.184

57,491

56,020

37 Average finalised time lost claim costs by industry 2019-20 and 2020-21



20-21 19-20

*Source: ABS, Average Weekly Earnings, Cat. No. 6302.0, May 2021, Table 10G. Average Weekly Earnings, Industry, Australia (Dollars) - Original - Persons, Full Time Adult Ordinary Time Earnings.

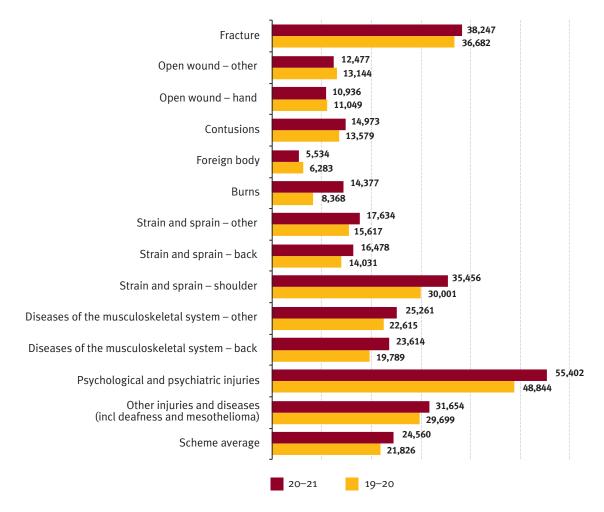
Average cost by injury type

Although psychological and psychiatric injury claims account for only 3.5 per cent of all time lost claims finalised, they are the most expensive with an average finalised time lost claim cost of \$55,402 in 2020–21.

In 2020–21, the average duration of a psychological or psychiatric injury claim was 168.5 days (151.3 days in 2019–20) compared with the overall scheme average of 63.5 days. It is the long duration of psychological and psychiatric injury claims that impacts on the average finalised time lost claim cost for these claims.

As shown in figure 38, the second most expensive injury type was fractures with an average cost of \$38,247 (\$36,682 in 2019–20).

38 Average finalised time lost claim cost by injury type 2019-20 and 2020-21



Claims for damages at common law

- Common law lodgements have increased 7.7 per cent over the last year.
- The majority of lodgements are for injuries that occurred two to three years prior.
- Over half (58.3 per cent) of common law lodgements have a work related impairment of less than five per cent.
- Psychological and psychiatric injury claims represent 10.6 per cent of common law lodgements. They represent only 6.0 per cent of statutory claim lodgements.
- In 2020–21, the average settlement cost of a finalised common law claim was \$172,472.

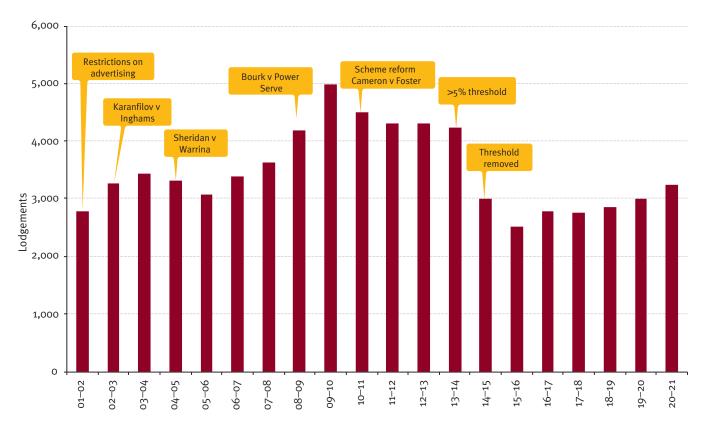
Legislative amendments in 2013 introduced a threshold to restrict access to common law damages. This threshold required workers with injuries on or after 15 October 2013 to have a degree of permanent impairment (DPI) greater than five per cent to access common law damages.

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

Lodgements

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

39 Common law lodgements history 2001-02 to 2020-21



In 2020–21, common law claim lodgements increased by 7.7 per cent, increasing from 3,001 in 2019–20 to 3,232 in 2020–21. Figure 40 shows common law claim lodgements over the past eight years by the date of injury.

Injury year				Lodgem	ent year			
	2013–14	2014–15	2015–16	2016–17	2017–18	2018–19	2019–20	2020–21
Pre 01/07/2005	68	40	28	30	21	23	28	14
2005–06	6	5	2	1	2	2	0	2
2006–07	5	4	3	0	4	3	1	2
2007–08	16	12	6	4	4	4	1	1
2008–09	22	13	10	3	4	0	4	2
2009–10	53	18	12	4	3	1	0	0
2010–11	948	44	21	13	8	4	1	2
2011–12	1,436	866	40	12	12	2	6	5
2012–13	1,526	1,237	855	27	12	11	8	6
2013–14	148	716	852	634	47	11	6	6
2014–15	0	41	576	940	672	35	20	7
2015–16	0	0	108	1,008	1,003	739	61	28
2016–17	0	0	0	116	866	1,048	772	122
2017–18	0	0	0	0	96	863	1,075	786
2018–19	0	0	0	0	0	96	915	1,195
2019–20	0	0	0	0	0	0	103	961
2020–21	0	0	0	0	0	0	0	93
Total	4,228	2,996	2,513	2,792	2,754	2,842	3,001	3,232

40 Common law claim lodgements 2013-14 to 2020-21 by injury year

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

Figure 41 shows the breakdown of common law claim lodgements in 2020–21 by the injured worker's WRI/DPI.

41 Common law claim lodgements by WRI/DPI 2020-21

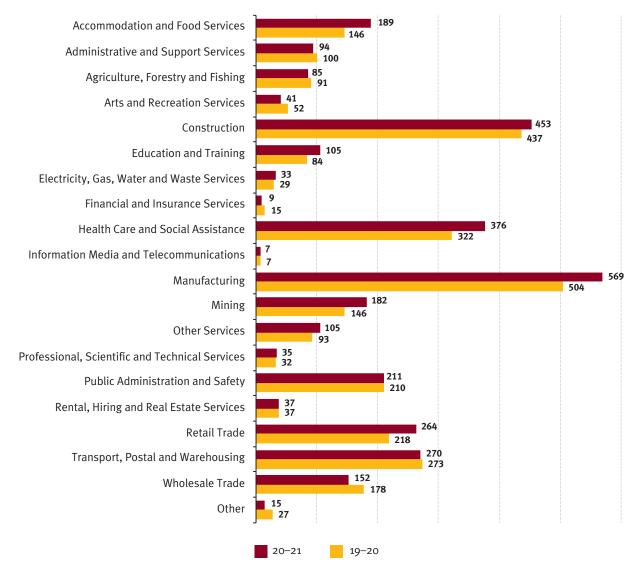
WRI/DPI	Common law lodgements	% of common law lodgements
No impairment assessed	409	12.6
0%	735	22.7
0.1%-4.9%	740	22.9
5%-9.9%	868	26.9
10%–14.9%	198	6.1
15%–19.9%	86	2.7
>=20%	196	6.1
Total	3,232	100

If the injured worker's work related impairment/degree of permanent impairment is less than 20 per cent, the worker has to make an irrevocable decision to either accept a payment of the statutory lump sum compensation for the injury or seek damages at common law. If the work related impairment/degree of permanent impairment is 20 per cent or more, the injured worker can accept a lump sum payment and seek damages. Only a small proportion of common law claims (6.1 per cent) are able to access lump sum payment and pursue common law.

Industry

The manufacturing (17.6 per cent), construction (14.0 per cent), and health care and social assistance (11.6 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 2019-20 and 2020-21



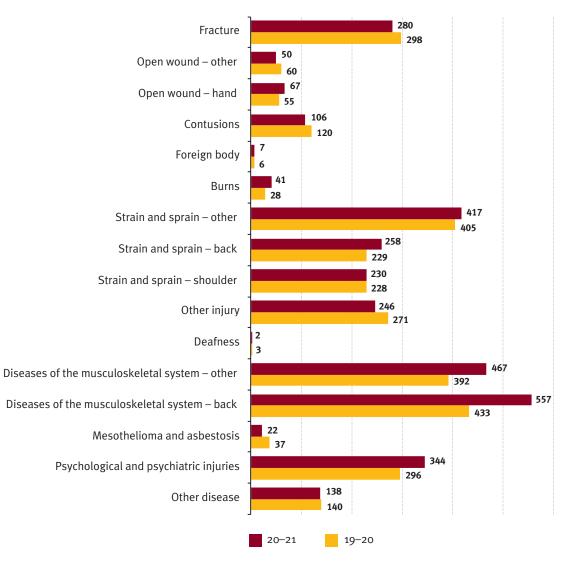
For industry 'Other', this includes injuries pre July 1997 (pre ANZSIC classifications), household workers, workplace personal injury insurance (self-employed, working directors) and volunteers.

Injury type

Strains and sprains accounted for 28.0 per cent of all common law claim lodgements in 2020–21.

Although psychological and psychiatric injury claims represented only 6.0 per cent of statutory claim lodgements, they represented 10.6 per cent of all common law claim lodgements in 2020–21.



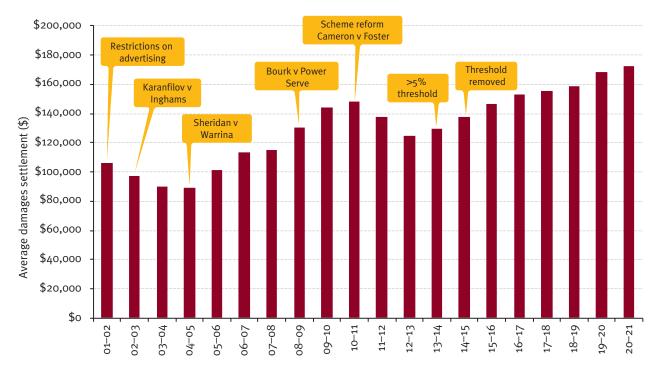


Total common law payments

In 2020–21, common law claims cost a total of \$544.5 million. This represents a 12.3 per cent increase from the 2019–20 cost of \$484.9 million.

Average costs

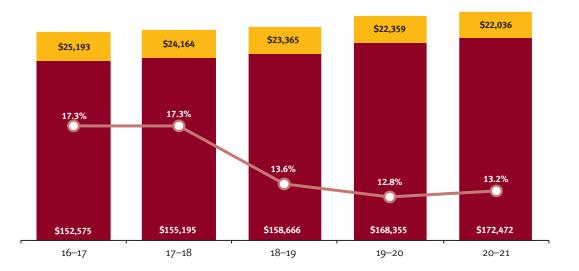
A history of the average damages settlement for finalised common law claims and key events in the Queensland workers' compensation scheme is shown in figure 44. For a comprehensive list of key events in the Queensland workers' compensation scheme please refer to Appendix 3.



44 Common law average damages settlement history 2001-02 to 2020-21

Over the last year, the average settlement cost of a finalised common law claim (excluding nil settlements) has increased 2.4 per cent from \$168,355 in 2019-20 to \$172,472 in 2020-21. The average defendant and plaintiff cost reduced 1.4 per cent from \$22,359 in 2019-20 to \$22,036 in 2020–21. Figure 45 shows average cost fluctuations between 2016–17 and 2020–21.

In 2020-21, there were 400 common law claims finalised with a nil settlement.



45 Average costs for finalised common law claims by payment type 2016-17 to 2020-21

Average defendant and plaintiff cost Average settlement cost (excluding nil) - Nil settlements as a % of total finalised

Heads of damage

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

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

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

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

46 Heads of damage average cost 2019–20 and 2020–21

	2019)-20	202	0–21
	\$	%	\$	%
General damages	20,676	8.1	22,346	8.2
Past economic loss	60,860	23.8	65,564	24.0
Future economic loss	136,590	53.3	141,445	51.7
Rehabilitation	33,647	13.1	37,005	13.5
Gratuitous care	2,292	0.9	4,504	1.6
Other	2,143	0.8	2,796	1.0
Gross settlement	256,209	100	273,659	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 remained stable (2.27 years in 2019–20; 2.25 years in 2020–21).

For claims finalised in the financial year, the average time from the lodgement of a common law claim to finalisation has remained stable at 0.94 years in 2020–21 (0.98 years in 2019–20).

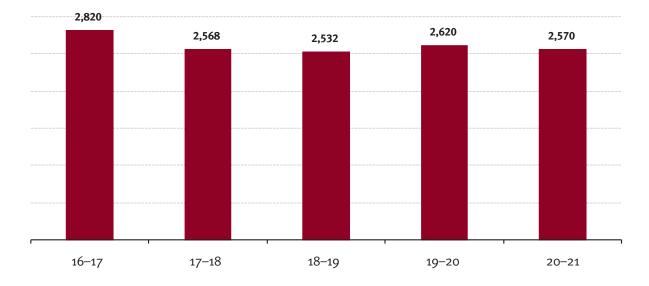
Review of insurer decisions

Applications received

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

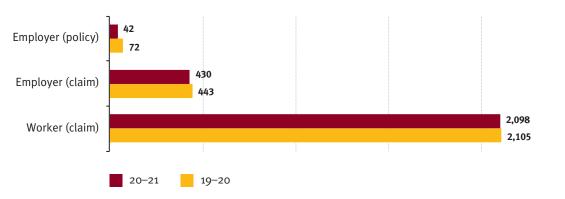
Review applications received have reduced (1.9 per cent) in 2020–21, down from 2,620 in 2019–20 to 2,570 in 2020–21. Figure 47 shows the number of applications for review received over the last five years.

47 Review applications received 2016-17 to 2020-21



Types of applications

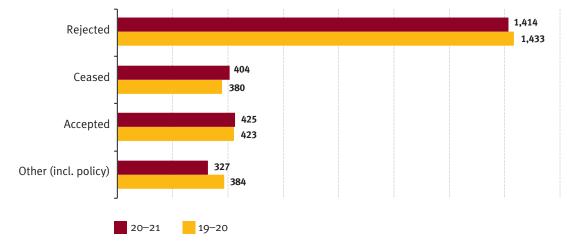
Of the applications lodged in 2020–21, 81.6 per cent were lodged by workers, up 1.3 per cent from 80.3 per cent in 2019–20. Employers lodged 16.7 per cent of reviews in 2020–21, down from 16.9 per cent in 2019–20. The remaining 1.6 per cent of applications were lodged by employers having a policy decision reviewed.



48 Review applications received by type 2019-20 and 2020-21

Over half (55.0 per cent) of all review applications received in 2020–21 related to the insurer decision to reject the claim, 16.5 per cent were lodged after the claim had been accepted and a further 15.7 per cent were following the cessation of the claim.

49 Review applications received by insurer decision 2019-20 and 2020-21



Outcomes

As shown in figure 50, in 2020–21, 91.2 per cent of reviews finalised were decided (as compared to 90.1 per cent in 2019–20), 4.6 per cent were cancelled (5.1 per cent in 2019–20), and the remaining 4.3 per cent were withdrawn (4.8 per cent in 2019–20).

50 Review outcomes 2019-20 and 2020-21

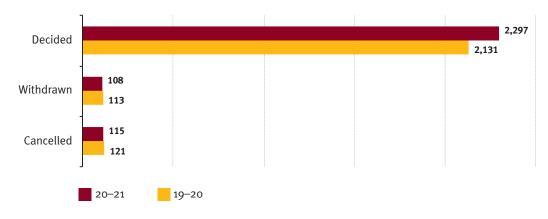
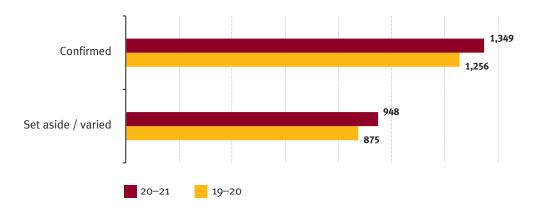


Figure 51 demonstrates that in 2020–21, the original decision of the insurer was confirmed by the Review Unit in 58.7 per cent of review decisions made, compared to 58.9 per cent in 2019–20.



51 Decided review outcomes 2019-20 and 2020-21

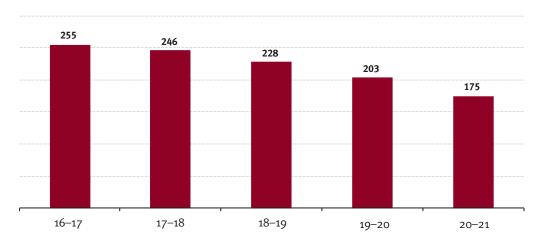
Appeals of review decisions

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 2020–21, 175 appeals were lodged with the QIRC. Of these, two further appealed in the Industrial Court (IC).

Appeal lodgements have experienced a reduction of 13.8 per cent in 2020–21 compared with 2019–20 (figure 52).

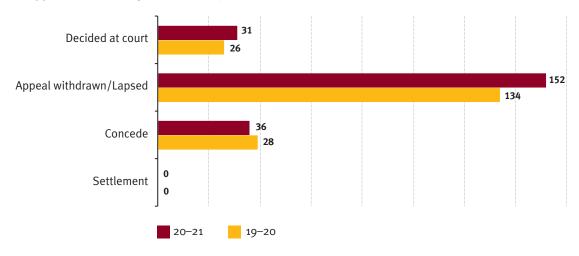


52 Appeals lodged 2016–17 to 2020–21

Appeal outcomes

In 2020–21, 85.8 per cent of appeals were finalised before reaching the QIRC. Of these, 80.9 per cent of cases were withdrawn by the appellant and 19.1 per cent were conceded (figure 53).

53 Appeals finalised by outcome 2019-20 and 2020-21



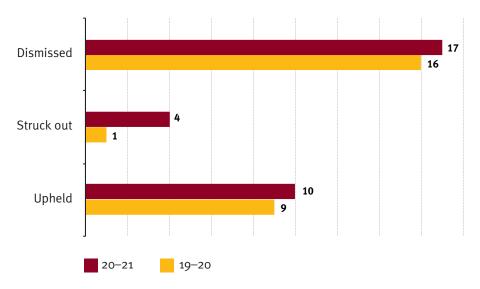
Non-judicial resolution

In 2020–21, 188 appeals were finalised before reaching the court or commission. This is an increase of 16.0 per cent when compared to 162 in 2019–20.

Judicial resolution

The total percentage of cases determined by a court or commission in 2020–21 was 14.2 per cent which has increased compared to 2019–20 (13.8 per cent). Of these, 21 cases (67.7 per cent) were dismissed or struck-out and 10 cases (32.3 per cent) were upheld in favour of the appellant (figure 54).

54 Appeals finalised judicially by outcome 2019–20 and 2020–21



Medical assessment tribunals

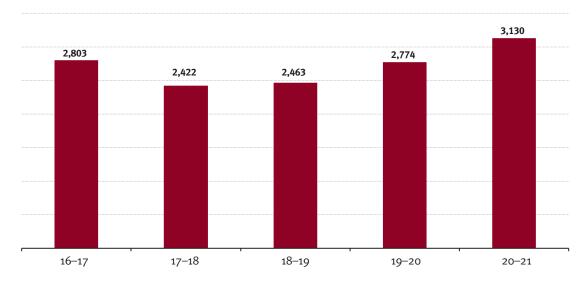
Referrals

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

In 2020–21, 3,130 cases were referred to a Medical assessment tribunal. This is a 12.8 per cent increase on the 2,774 cases referred in 2019–20.

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

55 Medical assessment tribunal referrals received 2016-17 to 2020-21



Cases determined

In 2020–21, 2,293 cases were determined by a Medical assessment tribunal. This represented a 12.4 per cent increase from 2019–20 (2,214 determinations).

Of the cases heard in 2020–21, 81.4 per cent (1,867) were heard at a General medical assessment tribunal (GMAT) – Psychiatric compared to 78.0 per cent (1,727) in 2019–20.

A further 12.4 per cent (284) of cases in 2020–21 were determined at an Orthopaedic Tribunal as compared to 16.6 per cent (367) in 2019–20 (figure 56).

56 Cases determined by tribunal type 2019-20 and 2020-21

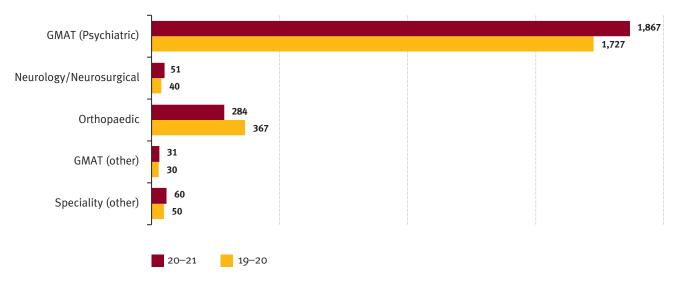


Figure 57 shows the average number of cases heard per tribunal in 2019–20 and 2020–21.

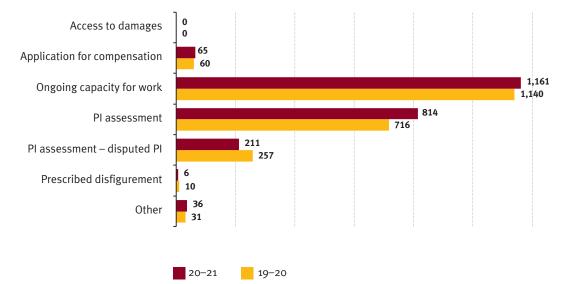
57 Average number of cases heard per tribunal by tribunal type 2019-20 and 2020-21

Tribunal	Average number of ca	ses heard per tribunal
	19–20	20–21
GMAT (Psychiatric)	1.9	1.9
Neurology/Neurosurgical	1.4	1.4
Orthopaedic	2.0	1.8
GMAT (other)	1.3	1.4
Speciality (other)	2.0	2.4
Total	1.9	1.9

Referral reason

In 2020–21, 44.7 per cent of the cases determined by the Medical assessment tribunal were for PI assessment, compared to 43.9 per cent in 2019–20.

58 Cases determined by referral reason 2019-20 and 2020-21



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 2019–20 and 2020–21

	Clair	n lodgem	ents	Clai	im payme	nts		e finalise t claims c			e finalise aims dura	
	19–20	20–21	Vari- ance	19–20	20-21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Accommodation and Food Services	5,226	5,463	4.5	51.1	46.7	-8.6	14,869	19,292	29.7	52.5	64.3	22.5
Accommodation	1,236	1,168	-5.5	12.4	11.1	-10.7	13,523	18,623	37.7	48.9	67.0	37.0
Food and Beverage Services	3,868	4,155	7.4	37.5	34.9	-7.1	15,373	19,480	26.7	53.5	63.4	18.5
Labour Hire	122	140	14.8	1.1	0.7	-36.1	13,723	19,529	42.3	57.8	66.5	15.1
Administrative and Support Services	2,721	2,707	-0.5	36.8	39.4	7.0	19,466	23,686	21.7	63.2	74.5	17.9
Administrative Services	809	610	-24.6	10.3	8.8	-14.7	22,868	31,712	38.7	62.6	82.6	31.9
Building Cleaning, Pest Control and Other Support Services	1,873	2,053	9.6	25.7	29.6	15.2	18,574	22,320	20.2	63.6	73.2	15.1
Labour Hire	39	44	12.8	0.8	1.0	21.6	15,319	11,397	-25.6	46.7	43.3	-7.3
Agriculture, Forestry and Fishing	2,998	3,379	12.7	37.0	40.3	8.9	20,108	18,445	-8.3	47.0	46.1	-1.9
Agriculture	2,304	2,490	8.1	27.4	28.5	3.8	20,782	20,660	-0.6	48.6	51.3	5.6
Agriculture, Forestry and Fishing Support Services	341	388	13.8	5.3	6.4	21.0	20,780	19,172	-7.7	50.2	43.8	-12.7
Aquaculture	43	37	-14.0	0.4	0.5	30.0	13,343	11,264	-15.6	38.5	45.8	19.0
Fishing, Hunting and Trapping	48	48	0.0	2.3	1.6	-28.8	15,818	24,907	57.5	54.0	51.4	-4.8
Forestry and Logging	29	22	-24.1	0.5	0.4	-24.1	23,217*	48,550*	109.1	56.6*	115.5*	104.1
Labour Hire	233	394	69.1	1.1	2.8	164.8	11,941	5,082	-57.4	19.0	17.3	-8.9
Arts and Recreation Services	1,332	1,406	5.6	20.2	17.8	-11.8	21,240	28,564	34.5	62.9	78.6	25.0
Creative and Performing Arts Activities	188	167	-11.2	2.3	1.8	-22.8	22,082	37,610	70.3	68.3	123.7	81.1
Gambling Activities	144	141	-2.1	2.7	2.2	-20.0	18,326	30,956	68.9	40.8	50.0	22.5
Heritage Activities	229	213	-7.0	1.9	1.9	2.9	12,351	20,387	65.1	37.9	52.5	38.5

	Clair	n lodgem	ents	Clai	im payme	ents		e finalise t claims c			e finalise aims dura	
	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20-21	Vari- ance	19–20	20–21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Sports and Recreation Activities	769	879	14.3	13.4	11.9	-11.1	24,460	28,540	16.7	74.4	81.3	9.3
Labour Hire	2	6	200.0	0.0	0.1	4979.1	0	0	-	0.0	0.0	-
Construction	10,102	10,441	3.4	202.7	204.6	0.9	31,909	35,851	12.4	73.2	83.5	14.1
Building Construction	1,618	1,708	5.6	34.4	34.5	0.5	27,425	33,415	21.8	60.4	73.7	22.0
Construction Services	6,583	6,699	1.8	128.5	136.6	6.3	31,073	36,368	17.0	74.3	87.0	17.1
Heavy and Civil Engineering Construction	1,127	1,201	6.6	23.2	17.6	-24.3	50,443	41,657	-17.4	92.7	86.8	-6.4
Labour Hire	774	833	7.6	16.5	15.8	-4.1	25,370	30,182	19.0	66.7	71.2	6.7
Education and Training	6,651	7,070	6.3	65.7	68.2	3.7	15,454	17,654	14.2	36.9	42.8	16.0
Adult, Community and Other Education	165	156	-5.5	2.0	1.7	-16.6	20,696	23,731	14.7	60.9	70.9	16.4
Preschool and School Education	5,294	5,821	10.0	52.7	56.7	7.5	15,495	17,420	12.4	36.0	41.9	16.4
Tertiary Education	1,184	1,084	-8.4	10.6	9.6	-9.6	14,315	18,347	28.2	36.5	45.2	23.8
Labour Hire	8	9	12.5	0.3	0.2	-34.2	20,206*	13,252*	-34.4	82.0*	67.0*	-18.3
Electricity, Gas, Water and Waste Services	1,095	1,057	-3.5	13.9	15.4	11.2	24,909	36,811	47.8	64.5	87.4	35.5
Electricity Supply	439	363	-17.3	4.8	5.1	5.7	20,992	34,015	62.0	53.3	72.5	36.0
Gas Supply	24	17	-29.2	0.1	0.2	101.6	12,149*	10,427*	-14.2	33.4*	28.0*	-16.2
Waste Collection, Treatment and Disposal Services	444	447	0.7	6.6	8.0	21.1	28,022	36,813	31.4	77.5	90.4	16.6
Water Supply, Sewerage and Drainage Services	134	164	22.4	1.4	1.2	-12.7	21,478	29,403	36.9	45.4	84.8	86.8
Labour Hire	54	66	22.2	0.9	0.9	-5.0	28,703	60,569	111.0	65.4	137.3	109.9
Financial and Insurance Services	605	522	-13.7	9.6	7.6	-21.0	20,745	37,184	79.2	44.1	84.4	91.4
Auxiliary Finance and Insurance Services	126	105	-16.7	1.7	1.2	-28.7	21,578	35,397	64.0	49.1	94.6	92.7
Finance	215	176	-18.1	2.9	3.4	16.2	19,371	39,534	104.1	47.5	76.4	60.8

	Clair	n lodgem	ents	Clai	im payme	ents		e finalise t claims c			e finalise aims dura	
	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Insurance and Superannuation Funds	259	238	-8.1	4.9	3.0	-39.7	22,004	35,761	62.5	41.3	85.3	106.5
Labour Hire	5	3	-40.0	0.1	0.0	-93.8	4,844*	70,169*	1348.6	11.0*	110.0*	900.0
Health Care and Social Assistance	14,092	15,924	13.0	142.7	183.7	28.7	15,672	16,762	7.0	50.9	55.0	8.1
Hospitals	5,466	5,931	8.5	59.2	76.5	29.3	17,379	18,318	5.4	49.5	52.8	6.7
Medical and Other Health Care Services	1,645	1,966	19.5	16.9	20.3	20.1	15,338	20,324	32.5	43.9	53.0	20.7
Residential Care Services	3,259	3,692	13.3%	31.6	40.3	27.5%	14,840	14,465	-2.5	58.7	59.2	0.9
Social Assistance Services	3,597	4,160	15.7	33.0	44.2	33.8	14,151	15,059	6.4	48.1	53.8	11.9
Labour Hire	125	175	40.0	2.0	2.4	23.0	16,132	25,122	55.7	45.5	79.8	75.4
Information Media and Telecommuni- cations	377	332	-11.9	4.1	3.6	-11.5	23,116	34,569	49.5	57.8	82.1	42.0
Broadcasting (except Internet)	47	37	-21.3	0.7	0.7	1.7	32,249	19,393	-39.9	94.5	39.5	-58.2
Internet Publishing and Broadcasting	1	3	200.0	0.0	0.0	2019.6	0.0	0.0	-	0	0	-
Internet Service Providers, Web Search Portals and Data Processing Services	7	7	0.0	0.0	0.0	35.8	5,682*	0	-100.0	14.4*	0.0	-100.0
Library and Other Information Services	12	15	25.0	0.3	0.3	27.7	24,295*	34,422*	41.7	32.0*	49.5*	54.7
Motion Picture and Sound Recording Activities	84	225	167.9	1.8	1.4	-21.2	21,141	32,484	53.7	47.5	80.4	69.3
Publishing (except Internet and Music Publishing)	37	20	-45.9	0.6	0.5	-14.3	25,217	44,008*	74.5	51.7	123.3*	138.5
Telecommunica- tions Services	183	18	-90.2	0.6	0.5	-14.9	15,462	59,844*	287.0	41.8	122.5*	193.1
Labour Hire	6	7	16.7	0.2	0.1	-34.7	23,987*	46,191*	92.6	117.4*	98.8*	-15.8
Manufacturing	12,820	12,955	1.1	172.5	167.3	-3.0	23,157	25,485	10.1	49.4	57-5	16.4
Basic Chemical and Chemical Product Manufacturing	305	339	11.1	4.0	4.0	-0.4	20,903	27,984	33.9	55.7	66.9	20.1

	Clair	n lodgem	ents	Clai	m payme	nts		e finalise t claims c			e finalise aims dura	
	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Beverage and Tobacco Product Manufacturing	158	147	-7.0	1.2	1.6	30.7	15,203	19,717	29.7	38.7	58.7	51.7
Fabricated Metal Product Manufacturing	2,463	2,520	2.3	29.9	28.6	-4.2	19,502	21,386	9.7	48.0	51.3	6.9
Food Product Manufacturing	3,180	3,253	2.3	34.4	36.7	6.7	18,118	20,016	10.5	46.3	49.3	6.5
Furniture and Other Manufacturing	408	442	8.3	6.8	5.5	-19.9	31,827	22,560	-29.1	70.9	63.3	-10.7
Machinery and Equipment Manufacturing	1,092	1,004	-8.1	11.4	12.0	5.4	19,072	26,575	39.3	46.1	58.0	25.8
Non-Metallic Mineral Product Manufacturing	822	838	1.9	38.1	29.6	-22.4	89,125	82,145	-7.8	83.0	107.2	29.2
Petroleum and Coal Product Manufacturing	36	34	-5.6	0.8	0.9	20.4	69,096	57,135	-17.3	114.4	108.1	-5.5
Polymer Product and Rubber Product Manufacturing	502	563	12.2	4.5	5.5	20.8	25,987	19,809	-23.8	55.1	50.3	-8.7
Primary Metal and Metal Product Manufacturing	533	421	-21.0	4.8	5.8	19.9	30,371	26,313	-13.4	47.6	54.0	13.4
Printing (including the Reproduction of Recorded Media)	108	87	-19.4	1.5	1.7	15.7	15,522	27,578	77.7	41.4	86.9	109.9
Pulp, Paper and Converted Paper Product Manufacturing	108	97	-10.2	1.1	1.1	1.8	24,101	37,421	55.3	50.2	76.6	52.6
Textile, Leather, Clothing and Footwear Manufacturing	163	155	-4.9	1.4	1.7	23.2	17,988	16,871	-6.2	54.8	53.2	-2.9
Transport Equipment Manufacturing	1,177	1,146	-2.6	13.4	12.7	-4.7	17,994	21,078	17.1	43.8	50.4	15.1
Wood Product Manufacturing	902	965	7.0	10.2	10.3	0.7	16,303	25,972	59.3	38.6	69.1	79.0
Labour Hire	863	944	9.4	9.0	9.6	7.5	17,540	17,216	-1.8	49.4	51.8	4.9
Mining	2,240	2,350	4.9	66.9	68.0	1.6	56,020	57,489	2.6	99.8	108.0	8.2
Coal Mining	880	883	0.3	29.7	28.7	-3.2	68,252	68,374	0.2	116.0	113.7	-2.0

	Clain	n lodgem	ents	Clai	im payme	nts		e finalise t claims c			e finalise aims dura	
	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Exploration and Other Mining Support Services	353	328	-7.1	9.3	9.6	3.4	46,185	51,538	11.6	103.0	121.0	17.5
Metal Ore Mining	473	637	34.7	12.1	10.6	-12.0	47,141	38,601	-18.1	66.4	57.5	-13.4
Non-Metallic Mineral Mining and Quarrying	157	210	33.8	5.8	6.5	11.4	54,301	67,517	24.3	86.7	100.9	16.4
Oil and Gas Extraction	17	14	-17.6	0.6	0.5	-16.5	44,447*	59,621*	34.1	93.0*	176.0*	89.2
Labour Hire	360	278	-22.8	9.4	12.0	27.7	53,638	58,394	8.9	107.2	130.4	21.6
Other Services	2,855	2,881	0.9	38.6	39.8	3.0	24,494	27,938	14.1	59.7	72.2	20.9
Personal and Other Services	1,014	959	-5.4	12.8	14.1	10.9	19,838	25,302	27.5	63.8	76.3	19.6
Repair and Maintenance	1,760	1,784	1.4	22.2	24.4	10.0	28,264	29,015	2.7	57.6	68.6	19.1
Labour Hire	81	138	70.4	3.7	1.2	-66.5	17,775	35,552	100.0	49.6	89.1	79.6
Professional, Scientific and Technical Services	1,776	1,799	1.3	19.2	21.6	12.3	24,203	26,609	9.9	49.6	60.4	21.8
Computer System Design and Related Services	183	154	-15.8	1.8	2.3	28.3	24,682	20,715	-16.1	32.1	34.1	6.2
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	1,582	1,636	3.4	17.3	18.7	7.8	24,342	27,561	13.2	52.1	64.2	23.2
Labour Hire	11	9	-18.2	0.1	0.6	675.0	8,449*	5,503*	-34.9	14.9*	8.3*	-44.3
Public Administration and Safety	7,940	8,640	8.8	109.4	123.9	13.3	21,705	25,387	17.0	52.1	59.7	14.6
Defence	3	-	-	0.1	-	-	81,808*	-	-	204.0*	-	-
Public Administration	3,056	3,060	0.1	37.4	42.2	12.8	18,201	21,287	17.0	43.5	48.8	12.2
Public Order, Safety and Regulatory Services	4,692	5,431	15.8	68.7	79.2	15.3	24,375	27,789	14.0	58.2	66.1	13.6
Labour Hire	189	149	-21.2	3.2	2.5	-22.1	21,689	29,026	33.8	57.4	70.1	22.1
Rental, Hiring and Real Estate Services	932	949	1.8	12.4	12.2	-1.2	21,469	25,898	20.6	59.6	68.7	15.3

	Clain	n lodgem	ents	Clai	im payme	nts		e finalise t claims c			e finalise aims dura	
	19–20	20-21	Vari- ance	19–20	20-21	Vari- ance	19–20	20-21	Vari- ance	19–20	20-21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Property Operators and Real Estate Services	452	479	6.0	6.0	7.4	24.4	19,742	28,137	42.5	56.0	73.5	31.3
Rental and Hiring Services (except Real Estate)	469	459	-2.1	6.3	4.7	-25.3	23,515	23,476	-0.2	63.9	63.5	-0.6
Labour Hire	11	11	0.0	0.1	0.1	-20.3	17,683*	3,161*	-82.1	53.3*	16.0*	-70.0
Retail Trade	6,901	7,028	1.8	70.3	74.5	6.0	17,624	19,078	8.3	55.2	58.1	5.3
Food Retailing	2,596	2,685	3.4	25.2	27.0	7.1	18,689	15,518	-17.0	56.9	49.7	-12.7
Fuel Retailing	270	248	-8.1	2.6	3.4	33.4	13,161	19,365	47.1	52.2	65.6	25.7
Motor Vehicle and Motor Vehicle Parts Retailing	1,197	1,180	-1.4	12.2	12.4	1.8	17,270	21,056	21.9	49.1	57.8	17.7
Non-Store Retailing and Retail Commission- Based Buying and/or Selling	93	91	-2.2	1.3	1.3	-3.2	36,773	27,120	-26.3	106.9	91.0	-14.9
Other Store- Based Retailing	2,640	2,604	-1.4	28.2	28.7	1.8	16,593	21,930	32.2	54.8	65.7	19.9
Labour Hire	105	220	109.5	0.8	1.7	103.9	21,090	9,971	-52.7	59.3	37.9	-36.1
Transport, Postal and Warehousing	5,091	5,362	5.3	98.9	101.5	2.6	28,104	33,061	17.6	68.7	82.4	19.9
Air and Space Transport	245	198	-19.2	3.8	3.1	-19.1	13,883	27,017	94.6	27.8	59.3	113.3
Other Transport	174	148	-14.9	2.3	1.8	-21.4	20,674	30,965	49.8	66.2	79.4	19.9
Postal and Courier Pick-up and Delivery Services	249	283	13.7	3.9	4.5	14.3	29,692	34,368	15.7	89.6	98.9	10.4
Rail Transport	445	546	22.7	7.7	9.9	29.9	34,011	32,010	-5.9	51.9	52.6	1.3
Road Transport	2,687	2,756	2.6	63.7	64.3	1.0	31,743	36,200	14.0	77.6	90.1	16.1
Transport Support Services	606	578	-4.6	6.9	7.1	3.7	20,460	29,575	44.6	50.3	77.6	54.3
Warehousing and Storage Services	228	268	17.5	3.0	3.3	8.1	28,797	31,582	9.7	71.7	81.8	14.1
Water Transport	90	103	14.4	2.0	1.5	-27.4	30,333	47,371	56.2	80.8	115.8	43.3
Labour Hire	367	482	31.3	5.6	5.9	6.4	19,333	18,798	-2.8	53.6	54.1	0.9
Wholesale Trade	3,934	3,944	0.3	48.8	48.6	-0.4	21,930	25,511	16.3	55.0	62.2	13.1
Basic Material Wholesaling	1,172	1,116	-4.8	15.8	16.6	5.0	23,041	25,992	12.8	54.3	61.5	13.3

	Clair	n lodgem	ents	Claim payments			Average finalised time lost claims cost			Average finalised time lost claims durations		
	19–20	20–21	Vari- ance	19–20	20-21	Vari- ance	19–20	20–21	Vari- ance	19–20	20–21	Vari- ance
	No.	No.	%	\$M	\$M	%	\$	\$	%	Days	Days	%
Commission- Based Wholesaling	53	62	17.0	0.9	0.8	-18.1	26,601	28,955	8.8	74.6	56.3	-24.5
Grocery, Liquor and Tobacco Product Wholesaling	735	758	3.1	11.0	10.6	-3.8	24,010	29,318	22.1	67.2	71.4	6.3
Machinery and Equipment Wholesaling	1,034	1,006	-2.7	10.1	10.1	0.1	21,153	25,489	20.5	45.0	57.6	28.0
Motor Vehicle and Motor Vehicle Parts Wholesaling	377	359	-4.8	4.8	3.8	-20.8	17,008	28,798	69.3	50.2	75.4	50.2
Other Goods Wholesaling	455	442	-2.9	5.1	5.3	4.1	19,643	20,021	1.9	49.6	52.0	4.8
Labour Hire	108	201	86.1	1.1	1.4	34.7	24,720	15,916	-35.6	76.5	54.4	-28.9
Other	376	293	-22.1	20.0	14.5	-27.4	38,983	48,491	24.4	98.5	103.1	4.7
Total	90,064	94,502	4.9	1,240.7	1,299.3	4.7	21,826	24,560	12.5	55.8	63.5	13.8

*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 2020-21

	Cla	im decisio	ons				Time los	t claim fina	alisation			
	Admit	Reject- ed	Total claims decided	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	94.6	5.4	4,224	2,440	84.3	2.4	1.8	5.3	2.4	2.3	1.4	0.1
Accommodation	94.4	5.6	917	539	84.4	1.5	1.1	6.5	2.4	2.8	0.7	0.6
Food and Beverage Services	94.6	5.4	3,204	1,825	84.5	2.6	2.0	4.8	2.4	2.1	1.5	0.1
Labour Hire	96.1	3.9	103	76	78.9	5.3	1.3	9.2	2.7	1.3	1.3	0.0
Administrative and Support Services	92.5	7.5	2,142	1,612	87.8	1.2	0.6	4.3	2.7	2.0	1.4	0.0
Administrative Services	88.6	11.4	421	246	78.9	4.5	0.0	8.5	3.3	2.8	2.0	0.0
Building Cleaning, Pest Control and Other Support Services	93.5	6.5	1,699	1,356	89.5	0.7	0.7	3.3	2.6	1.9	1.3	0.0
Labour Hire	95.5	4.5	22	10	70.0	0.0	0.0	30.0	0.0	0.0	0.0	0.0
Agriculture, Forestry and Fishing	97.6	2.4	2,652	1,829	84.6	2.6	0.5	5.6	2.3	3.0	1.3	0.1
Agriculture	98.1	1.9	1,906	1,308	83.3	2.3	0.5	6.1	2.6	3.7	1.5	0.0
Agriculture, Forestry and Fishing Support Services	95.8	4.2	310	214	80.4	7.0	0.0	8.4	1.9	1.8	0.5	0.0
Aquaculture	96.4	3.6	28	27	81.5	0.0	7.4	3.7	0.0	3.7	3.7	0.0
Fishing, Hunting and Trapping	80.6	19.4	31	16	75.0	0.0	6.3	6.2	12.5	0.0	0.0	0.0
Forestry and Logging	94.4	5.6	18	13	69.2	0.0	0.0	7.7	15.4	0.0	0.0	7.7
Labour Hire	98.3	1.7	359	251	96.8	0.8	0.0	1.2	0.0	0.4	0.8	0.0
Arts and Recreation Services	94.2	5.8	1,167	662	87.5	1.5	1.8	4.8	1.2	1.2	1.7	0.3
Creative and Performing Arts Activities	97.2	2.8	144	58	84.5	3.4	0.0	8.7	0.0	3.4	0.0	0.0
Gambling Activities	83.3	16.7	126	62	80.6	0.0	12.9	0.0	0.0	0.0	6.5	0.0
Heritage Activities	94.0	6.0	182	81	88.9	0.0	1.3	4.9	0.0	1.2	2.5	1.2

	Cla	im decisio	ons	Time lost claim finalisation										
	Admit	Reject- ed	Total claims decided	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		
	%	%			%	%	%	%	%	%	%	%		
Sports and Recreation Activities	95.5	4.5	710	461	88.5	1.7	0.7	5.0	1.7	1.1	1.1	0.2		
Labour Hire	100.0	0.0	5	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Construction	95.6	4.4	8,139	4,733	79.8	3.0	0.7	7.3	3.9	2.4	2.8	0.1		
Building Construction	95.3	4.7	1,330	841	82.3	3.3	0.5	6.2	3.0	1.5	3.0	0.2		
Construction Services	95.6	4.4	5,173	3,162	79.3	3.0	0.6	7.5	4.0	2.6	2.9	0.1		
Heavy and Civil Engineering Construction	95.9	4.1	959	397	82.7	1.3	0.8	4.3	5.8	2.3	2.5	0.3		
Labour Hire	95.6	4.4	677	333	75.1	4.5	1.8	11.4	3.3	2.1	1.8	0.0		
Education and Training	92.9	7.1	6,087	3,525	94.8	0.8	0.6	1.8	0.4	0.9	0.6	0.1		
Adult, Community and Other Education	85.7	14.3	119	52	76.9	3.8	3.9	13.5	0.0	0.0	0.0	1.9		
Preschool and School Education	93.7	6.3	5,020	2,923	96.3	0.5	0.3	1.4	0.2	0.7	0.5	0.1		
Tertiary Education	89.6	10.4	942	547	88.8	2.0	2.0	2.9	1.2	2.2	0.9	0.0		
Labour Hire	100.0	0.0	6	3	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
Electricity, Gas, Water and Waste Services	94.0	6.0	889	408	84.3	0.5	2.0	6.9	2.0	0.7	3.4	0.2		
Electricity Supply	92.4	7.6	302	131	92.4	0.0	2.3	1.5	0.7	0.8	2.3	0.0		
Gas Supply	87.5	12.5	16	3	0.0	0.0	33.3	66.7	0.0	0.0	0.0	0.0		
Waste Collection, Treatment and Disposal Services	95.7	4.3	375	191	84.3	1.0	1.0	7.9	2.1	0.0	3.2	0.5		
Water Supply, Sewerage and Drainage Services	93.1	6.9	144	49	85.7	0.0	2.0	0.0	4.1	0.0	8.2	0.0		
Labour Hire	96.1	3.9	52	34	58.9	0.0	2.9	26.5	2.9	5.9	2.9	0.0		
Financial and Insurance Services	77.4	22.6	380	248	83.9	2.4	1.2	2.4	2.4	4.0	3.7	0.0		
Auxiliary Finance and Insurance Services	77.6	22.4	76	58	82.8	0.0	0.0	5.2	5.2	3.4	3.4	0.0		

	Cla	im decisio	ons		Time lost claim finalisation										
	Admit	Reject- ed	Total claims decided	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	73.0	27.0	152	90	86.7	2.2	2.2	0.0	1.2	4.4	3.3	0.0			
Insurance and Superannuation Funds	81.3	18.7	150	99	82.8	4.0	0.0	3.0	2.0	4.2	4.0	0.0			
Labour Hire	100.0	0.0	2	1	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0.0			
Health Care and Social Assistance	91.9	8.1	13,416	8,933	92.4	0.9	0.9	2.1	0.5	1.6	1.4	0.2			
Hospitals	92.3	7.7	5,052	3,492	95.3	0.3	1.0	0.7	0.2	0.9	1.4	0.2			
Medical and Other Health Care Services	91.7	8.3	1,548	807	88.8	1.6	1.1	3.7	0.9	1.5	2.4	0.0			
Residential Care Services	91.5	8.5	3,175	2,313	91.7	0.8	1.0	2.0	0.5	2.3	1.1	0.6			
Social Assistance Services	91.8	8.2	3,497	2,226	90.1	1.3	0.5	3.8	0.9	2.0	1.3	0.1			
Labour Hire	95.1	4.9	144	95	86.3	4.2	0.0	4.2	1.1	1.1	3.1	0.0			
Information Media and Telecommuni- cations	97.0	3.0	265	113	75.1	6.2	0.0	13.3	2.7	0.9	0.9	0.9			
Broadcasting (except Internet)	88.9	11.1	27	19	89.5	5.3	0.0	5.2	0.0	0.0	0.0	0.0			
Internet Publishing and Broadcasting	100.0	0.0	3	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Internet Service Providers, Web Search Portals and Data Processing Services	85.7	14.3	7	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Library and Other Information Services	100.0	0.0	15	2	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Motion Picture and Sound Recording Activities	99.5	0.5	187	65	75.4	6.2	0.0	12.3	4.6	0.0	0.0	1.5			
Publishing (except Internet and Music Publishing)	82.4	17.6	17	12	66.8	8.3	0.0	8.3	0.0	8.3	8.3	0.0			
Telecommunica- tions Services	100.0	0.0	4	10	50.0	10.0	0.0	40.0	0.0	0.0	0.0	0.0			

	Cla	im decisio	ons	Time lost claim finalisation									
	Admit	Reject- ed	Total claims decided	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	0.0	5	5	80.0	0.0	0.0	20.0	0.0	0.0	0.0	0.0	
Manufacturing Basic Chemical and Chemical Product Manufacturing	95.8 94.7	4.2 5.3	10,778 281	5,674 115	84.9 84.3	1.4 0.9	1.5 0.9	4.6 6.1	2.6 3.5	3.0 2.6	1.9 1.7	0.1	
Beverage and Tobacco Product Manufacturing	90.5	9.5	126	48	81.3	0.0	0.0	10.4	8.3	0.0	0.0	0.0	
Fabricated Metal Product Manufacturing	96.8	3.2	2,081	1,079	86.9	1.5	1.1	3.1	3.2	2.4	1.8	0.0	
Food Product Manufacturing	94.8	5.2	2,682	1,456	85.2	1.1	2.8	3.2	1.3	4.3	1.8	0.3	
Furniture and Other Manufacturing	95.8	4.2	359	203	83.7	0.5	0.5	8.4	3.4	2.0	1.5	0.0	
Machinery and Equipment Manufacturing	95.9	4.1	832	463	86.6	1.3	0.9	3.6	2.8	3.7	1.1	0.0	
Non-Metallic Mineral Product Manufacturing	94.2	5.8	711	345	72.5	1.2	1.7	10.1	6.4	3.5	4.3	0.3	
Petroleum and Coal Product Manufacturing	92.3	7.7	26	15	66.6	6.7	0.0	0.0	13.3	6.7	6.7	0.0	
Polymer Product and Rubber Product Manufacturing	95.7	4.3	466	239	89.1	1.7	2.1	2.1	0.4	3.3	1.3	0.0	
Primary Metal and Metal Product Manufacturing	94.6	5.4	349	134	91.8	1.5	1.5	0.0	2.2	2.2	0.8	0.0	
Printing (including the Reproduction of Recorded Media)	94.6	5.4	74	53	81.1	0.0	0.0	5.7	7.5	1.9	3.8	0.0	
Pulp, Paper and Converted Paper Product Manufacturing	93.9	6.1	82	26	88.5	0.0	0.0	7.7	3.8	0.0	0.0	0.0	
Textile, Leather, Clothing and Footwear Manufacturing	94.6	5.4	129	68	82.4	1.5	0.0	8.8	2.9	1.5	2.9	0.0	

	Cla	im decisio	ons		Time lost claim finalisation										
	Admit	Reject- ed	Total claims decided	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	97.0	3.0	946	482	88.0	2.1	0.2	3.2	2.3	1.9	1.9	0.4			
Wood Product Manufacturing	96.6	3.4	804	432	84.0	1.9	0.5	4.4	3.5	2.5	3.2	0.0			
Labour Hire	97.5	2.5	830	516	83.1	1.6	1.7	9.1	1.4	2.3	0.8	0.0			
Mining	93.4	6.6	1,998	893	80.5	1.6	3.0	6.3	2.7	1.3	4.4	0.2			
Coal Mining	92.9	7.1	758	300	79.6	0.7	6.7	1.7	2.3	1.0	7.7	0.3			
Exploration and Other Mining Support Services	95.3	4.7	276	189	77.8	2.6	1.1	11.1	2.1	1.6	3.7	0.0			
Metal Ore Mining	94.7	5.3	552	158	92.4	0.0	2.5	2.5	1.4	0.0	0.6	0.6			
Non-Metallic Mineral Mining and Quarrying	94-4	5.6	162	69	84.2	2.9	0.0	10.1	0.0	1.4	1.4	0.0			
Oil and Gas Extraction	80.0	20.0	10	8	75.0	0.0	0.0	12.5	12.5	0.0	0.0	0.0			
Labour Hire	90.0	10.0	240	169	72.8	3.0	0.6	10.7	5.8	3.0	4.1	0.0			
Other Services	93.9	6.1	2,210	1,229	82.6	2.3	0.9	6.9	3.3	2.3	1.5	0.2			
Personal and Other Services	90.1	9.9	756	441	79.4	2.2	0.5	8.6	3.6	3.9	1.3	0.5			
Repair and Maintenance	95.9	4.1	1,376	740	85.1	2.3	1.1	5.8	3.0	1.1	1.6	0.0			
Labour Hire	96.1	3.9	78	48	75.0	2.1	2.1	8.2	6.3	6.3	0.0	0.0			
Professional, Scientific and Technical Services	90.1	9.9	1,328	634	85.4	3.0	0.9	4.7	2.4	1.9	1.4	0.3			
Computer System Design and Related Services	86.4	13.6	125	69	88.4	2.9	0.0	5.8	0.0	2.9	0.0	0.0			
Professional, Scientific and Technical Services (Except Computer System Design and Related Services)	90.5	9.5	1,195	559	85.0	2.9	1.1	4.7	2.5	1.8	1.6	0.4			
Labour Hire	87.5	12.5	8	6	83.3	16.7	0.0	0.0	0.0	0.0	0.0	0.0			
Public Administration and Safety	93.0	7.0	6,507	4,128	92.8	0.7	1.0	1.5	0.8	1.0	2.0	0.2			

	Cla	im decisio	ons		Time lost claim finalisation										
	Admit	Reject- ed	Total claims decided	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			
	%	%			%	%	%	%	%	%	%	%			
Defence	0.0	0.0	-	-	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Public Administration	91.3	8.7	2,783	1,547	93.1	0.6	1.4	1.1	0.6	1.4	1.4	0.4			
Public Order, Safety and Regulatory Services	94.2	5.8	3,584	2,468	93.1	0.5	0.6	1.6	0.7	0.9	2.5	0.1			
Labour Hire	95.0	5.0	140	113	80.5	6.2	1.8	5.3	4.4	0.9	0.9	0.0			
Rental, Hiring and Real Estate Services	91.3	8.7	723	474	81.6	1.8	0.4	6.8	4.6	2.5	1.9	0.4			
Property Operators and Real Estate Services	89.3	10.7	365	255	81.6	2.0	0.4	5.8	4.3	3.5	2.0	0.4			
Rental and Hiring Services (except Real Estate)	93.4	6.6	347	217	81.6	1.4	0.5	7.8	5.1	1.4	1.7	0.5			
Labour Hire	90.9	9.1	11	2	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Retail Trade	93.8	6.2	5,657	3,421	85.6	1.0	3.2	4.1	1.9	1.8	2.3	0.1			
Food Retailing	93.2	6.8	2,130	1,215	85.1	0.5	7.0	2.1	0.9	1.2	3.1	0.1			
Fuel Retailing	90.9	9.1	198	125	85.6	0.8	1.6	5.6	3.2	0.0	3.2	0.0			
Motor Vehicle and Motor Vehicle Parts Retailing	96.6	3.4	958	554	85.0	1.4	1.1	5.1	4.1	2.2	1.1	0.0			
Non-Store Retailing and Retail Commission- Based Buying and/or Selling	93.1	6.9	73	49	83.7	2.0	2.0	8.2	0.0	0.0	4.1	0.0			
Other Store- Based Retailing	93.1	6.9	2,107	1,359	85.8	1.3	1.1	5.4	1.9	2.3	2.1	0.1			
Labour Hire	97.4	2.6	191	119	91.6	0.8	1.7	1.7	1.7	2.5	0.0	0.0			
Transport, Postal and Warehousing	94.3	5.7	4,459	2,872	80.5	1.9	2.3	5.5	3.0	2.9	3.7	0.2			
Air and Space Transport	92.8	7.2	180	114	86.0	0.0	7.8	1.8	0.9	0.0	3.5	0.0			
Other Transport	89.8	10.2	108	57	75.4	0.0	3.5	12.3	1.8	3.5	3.5	0.0			
Postal and Courier Pick-up and Delivery Services	91.8	8.2	194	150	76.0	2.7	2.7	8.0	3.3	1.3	5.3	0.7			

	Cla	im decisio	ons	Time lost claim finalisation									
	Admit	Reject- ed	Total claims decided	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	
	%	%			%	%	%	%	%	%	%	%	
Rail Transport	90.7	9.3	506	166	91.0	0.0	2.4	1.2	0.0	1.8	2.4	1.2	
Road Transport	94.7	5.3	2,364	1,680	78.2	2.4	1.9	5.9	3.8	3.6	4.0	0.2	
Transport Support Services	94.2	5.8	450	220	88.3	0.0	1.8	2.7	0.9	1.8	4.5	0.0	
Warehousing and Storage Services	97.3	2.7	187	109	80.8	1.8	1.8	6.4	3.7	1.8	3.7	0.0	
Water Transport	98.8	1.2	81	63	76.2	4.8	1.6	6.3	4.8	1.6	4.7	0.0	
Labour Hire	97.2	2.8	389	313	83.6	1.3	1.9	6.4	2.6	3.2	1.0	0.0	
Wholesale Trade	94.6	5.4	3,214	1,834	86.6	1.0	0.9	5.0	2.6	2.0	1.8	0.1	
Basic Material Wholesaling	95.2	4.8	897	533	86.5	0.6	1.5	3.9	2.3	3.5	1.5	0.2	
Commission- Based Wholesaling	96.1	3.9	52	29	72.4	0.0	0.0	13.8	0.0	10.4	3.4	0.0	
Grocery, Liquor and Tobacco Product Wholesaling	94.5	5.5	636	375	86.6	1.6	0.3	5.3	2.4	1.1	2.7	0.0	
Machinery and Equipment Wholesaling	92.9	7.1	807	400	90.0	0.8	1.0	4.7	1.5	0.7	1.3	0.0	
Motor Vehicle and Motor Vehicle Parts Wholesaling	97.5	2.5	281	162	85.8	1.2	1.2	3.1	3.1	2.5	3.1	0.0	
Other Goods Wholesaling	93.2	6.8	369	221	86.9	1.8	0.0	6.3	3.2	0.9	0.9	0.0	
Labour Hire	98.3	1.7	172	114	80.6	0.9	1.8	7.0	7.0	0.9	1.8	0.0	
Other	89.5	10.5	210	106	78.4	3.8	0.9	7.5	2.8	3.8	2.8	0.0	
Total	93.8	6.2	76,445	45,768	87.0	1.5	1.3	4.1	2.0	2.0	1.9	0.2	

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

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

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

Appendix 2: Industry classification codes

All industry codes are based on the workers' compensation insurers' coding of industry to the divisions from the Australian and New Zealand BS. Below are the ANZSIC divisions and subdivisions with corresponding ANZSIC codes.

Sta	naara industry classification (ANZSIC 2006), ABS. Below are
Н	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
Ρ	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

- Waste Collection, Treatment and Disposal Services 29
- Water Supply, Sewerage and Drainage Services 28

Financial and Insurance Services Κ

- Auxiliary Finance and Insurance Services 64
- Finance 62

Insurance and Superannuation Funds 63

Health Care and Social Assistance Q

- Hospitals 84
- 85 Medical and Other Health Care Services

- **Residential Care Services** 86
- Social Assistance Services 87

Information Media and Telecommunications I

- Broadcasting (except Internet) 56
- Internet Publishing and Broadcasting 57
- Internet Service Providers, Web Search Portals and Data 59 **Processing Services**
- Library and Other Information Services 60
- Motion Picture and Sound Recording Activities 55
- Publishing (except Internet and Music Publishing) 54
- **Telecommunications Services** 58

С Manufacturing

- 18 Basic Chemical and Chemical Product Manufacturing
- 12 Beverage and Tobacco Product Manufacturing
- Fabricated Metal Product Manufacturing 22
- Food Product Manufacturing 11
- Furniture and Other Manufacturing 25
- Machinery and Equipment Manufacturing 24
- Non-Metallic Mineral Product Manufacturing 20
- Petroleum and Coal Product Manufacturing 17
- Polymer Product and Rubber Product Manufacturing 19
- Primary Metal and Metal Product Manufacturing 21
- Printing (including the Reproduction of Recorded Media) 16
- Pulp, Paper and Converted Paper Product Manufacturing 15
- Textile, Leather, Clothing and Footwear Manufacturing 13
- Transport Equipment Manufacturing 23
- Wood Product Manufacturing 14

В Mining

- Coal Mining 06
- Exploration and Other Mining Support Services 10
- Metal Ore Mining 08
- Non-Metallic Mineral Mining and Quarrying 09
- Oil and Gas Extraction 07
- **Other Services** S
- Personal and Other Services 95
- 96 Private Households Employing Staff and Undifferentiated Goods- and Service- Producing Activities of Households for Own Use
- 94 Repair and Maintenance

M Professional, Scientific and Technical Services

- 70 Computer System Design and Related Services
- 69 Professional, Scientific and Technical Services (Except Computer System Design and Related Services)

O Public Administration and Safety

- 76 Defence
- 75 Public Administration
- 77 Public Order, Safety and Regulatory Services

L Rental, Hiring and Real Estate Services

- 67 Property Operators and Real Estate Services
- 66 Rental and Hiring Services (except Real Estate)

G Retail Trade

- 41 Food Retailing
- 40 Fuel Retailing
- 39 Motor Vehicle and Motor Vehicle Parts Retailing
- 43 Non-Store Retailing and Retail Commission-Based Buying and/ or Selling
- 42 Other Store-Based Retailing

I Transport, Postal and Warehousing

- 49 Air and Space Transport
- 50 Other Transport
- 51 Postal and Courier Pick-up and Delivery Services
- 47 Rail Transport
- 46 Road Transport
- 52 Transport Support Services
- 53 Warehousing and Storage Services
- 48 Water Transport

F Wholesale Trade

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

Appendix 3: Critical events history

Pre-1997

- 1. Irrevocable election to access common law was introduced by *Workers' Compensation Amendment Act (no 2) 1995* provisions commenced 1 Jan 1996.
- 2. Interest on general damages (i.e. for pain and suffering and loss of impairment of the enjoyments of the amenities of life) was abolished.
- 3. Gratuitous care awards (Griffiths v Kerkmeyer) were abolished as a head of damage at common law and provision was made that a statutory lump sum payment of a maximum of \$150,000 be awarded (in lieu of gratuitous care awards in common law).
- 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.
- 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

- 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.
- 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 Ac*t 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.

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

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

Plaintiff's costs: Costs incurred by the plaintiff.

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

Medical assessment tribunal definitions

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

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

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

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

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

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

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

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