

Workers' compensation in Queensland



Insurers must give this statement to an employer if a workers' compensation claim is lodged.

In Queensland, it's mandatory to have workers' compensation insurance to cover workers who suffer work-related injuries or illnesses. This insurance offers financial support and assistance, allowing affected workers to focus on recovery and returning to work.

Helping injured workers return to work safely benefits your business by reducing retraining costs, lowering claims expenses and premiums, minimising staff turnover, and boosting staff morale. Most employers in Queensland are insured through WorkCover Queensland, while self-insured employers manage their own claims.

Employer rights and responsibilities

Your rights

- Be treated with courtesy and respect.
- Seek advice from a workplace advisor, lawyer, registered industrial organisation, or free support service.
- Seek an independent review of insurer or regulator decisions.
- Appoint a rehabilitation and return to work coordinator to support claims management and return to work.
- Request information from your insurer about how your premium is calculated.
- Report any non-compliances with workers' compensation laws including fraud.
- Apologise or express regret to the injured worker about their injury and under Queensland law. This is not treated as admitting liability.

Your responsibilities

- Treat insurer and regulator staff with courtesy and respect.
- Insure your workers against work-related injury and illness.
- Do not interfere with your worker's right to choose their own treating doctor.
- Do not attend your worker's medical treatment or contact their doctor without their genuine and informed consent.
- Do not prohibit your worker from seeking advice from a lawyer or their union.
- Do not influence a worker in deciding to make a workers' compensation claim by threatening to disadvantage or offering rewards to the worker or another person.
- Take all reasonable steps to provide rehabilitation for an injured worker including providing suitable and meaningful work duties where possible.
- Cooperate with the insurer by taking all reasonable steps to support the insurer's rehabilitation obligations.
- Do not dismiss a worker because they have a work-related injury, within 12 months of that injury.
- Do not obtain or use documents about a person's workers' compensation claim to decide whether to employ them or whether their employment should continue.

| Who can access workers' compensation?

Any worker can apply for compensation if they've been injured due to their work, no matter who or what caused the injury or illness. This is called a statutory claim, or a "no fault" claim.

If you're a sole trader, partner in a partnership, director of your own company, or employed by a Trust where you're a trustee, you're not considered a worker so you're not covered by your accident insurance policy.

| What type of work-related injuries are covered?

What is included?

- ✓ All types of injury or illness including a psychological injury.
- ✓ Aggravated injuries or ongoing symptoms.
- ✓ Respiratory diseases or diseases contracted while working (e.g. Q fever, silicosis).
- ✓ Industrial deafness.
- ✓ Fatalities.
- ✓ Some injuries travelling to or from work or on scheduled breaks.

What is not included?

- ✗ Injuries and illnesses that are not work-related.
- ✗ Psychological injury caused by [reasonable management action taken in a reasonable way](#).
- ✗ Injury caused by serious and wilful misconduct.
- ✗ Intentionally self-inflicted injuries.
- ✗ Injuries during travel to or from work if major delays, interruptions or deviations occurred during the journey.

What to expect if your worker is injured at work

Reaching out to an injured worker early on can promote a safe and timely return to work. A simple phone call or text message can make a big difference. When workers feel supported by their workplace, they are more likely to return to work, leading to better health and wellbeing outcomes for them and reduced costs for your business.

You can apologise or express regret to the injured worker about their injury. Under Queensland law this is not treated as admitting liability.

You cannot give a worker a benefit (financial or otherwise) or cause detriment to a worker (e.g. threaten to dismiss or disadvantage them) to influence them not to apply for compensation.

Both you and your worker have a right to seek advice and support from a workplace advisor, lawyer, union or other support service.

| Early medical treatment

Encourage your worker to get treatment early. Let your worker choose their treating doctor. It's the law.

Remember you cannot be present during your worker's medical treatment unless you have their genuine and informed consent. It's the law.

| Report work-related injuries

Report work-related injuries to your insurer if the worker may need treatment or time off work.

Reporting the injury is not the same as making a claim for workers' compensation. You must report within eight business days of becoming aware of the injury. Not doing so is an offence.

A serious injury or dangerous incident must also be reported to [Workplace Health and Safety Queensland](#).

How a claim is decided

Decisions are typically made within 20 business days. Your insurer will let you know if more information and time is needed.

Your insurer will talk to you, your worker, the treating doctor and any witnesses in relation to the circumstances of the injury.

Your insurer will review the medical and factual evidence to determine if the individual was a worker and if work significantly contributed to the injury. For psychological injury claims, the insurer will also assess whether the injury resulted from [reasonable management action](#).

What if you disagree with an insurer's decision?

If you disagree with the insurer's decision on a claim, you can ask for a free independent review by the Workers' Compensation Regulator within three months of receiving the insurer's written decision.

To apply for a review visit [worksafe.qld.gov.au](https://www.worksafe.qld.gov.au) or call 1300 738 197.

If you disagree with the Regulator's decision, you can appeal to the [Queensland Industrial Relations Commission](#) within 20 business days of receiving the decision. There may be costs involved, so it's a good idea to get independent legal advice.

Return to work support

Research shows if workers can return to work earlier, they are more likely to recover quicker from their injury.

Your insurer will develop a Rehabilitation and Return to Work (RRTW) plan with you, your worker and their doctor within 10 business days of accepting the claim.

This must be reviewed and updated as new information becomes available.

Your insurer may appoint a workplace rehabilitation provider to assist with your worker's recovery. A worker can request a different one if they are not happy with the provider selected by the insurer.

Provide suitable duties

You must provide suitable and meaningful work duties to support a worker to recover at work. This means work that is safe for your worker to do while they recover.

The details of any suitable duties will be set out in your worker's RRTW plan.

If suitable duties aren't possible (e.g. for safety or practical reasons), you must put this in writing to your insurer and include supporting evidence about your decision.

Your insurer may arrange alternative work with a host employer while your worker recovers.

Access to common law

A worker may make a common law claim for damages if they can show that their employer's negligence caused or contributed to their injury.

If you are insured by WorkCover, its legal panel will represent you if a common law claim is lodged.

If you receive a Notice of Claim for Damages in respect of an injured worker, you must notify your insurer immediately.

Requests for information

Respond to your insurer's request for wage or other information within five business days. Failing to do so without a valid reason is an offence. Additionally, your insurer may impose a penalty to recover any overpayment of compensation.

False or misleading information or documents

A person must not give the Workers' Compensation Regulator or an insurer information that is false or misleading. This is an offence.

Dismissal because of injury

Within 12 months after a worker sustains an injury, an employer must not dismiss the worker solely or mainly because the worker is not fit for employment because of the injury. Penalties apply. Other laws may also apply.

Reporting non-compliance or fraud

The Workers' Compensation Regulator monitors compliance with workers' compensation laws. If you notice that rules aren't followed, you can [report it](#).

Let your insurer know if you suspect fraud or misleading information related to a claim and provide supporting information.

Support and further information

Workers' Compensation Helpline for Employers:

A free and independent service for employers.

Call 1300 365 855, or visit

www.wcias-for-employers.com.au.

Registered industrial organisations:

A list of [employer organisations](#).

Lifeline: 24-hour crisis support and suicide prevention service.

Call 13 11 14 or visit www.lifeline.org.au.

For more information, visit:

www.worksafe.qld.gov.au

This statement aligns with section 132AA of the *Workers' Compensation and Rehabilitation Act 2003*.



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