



Workers' Compensation in Western Australia Statistical Report 2005/06 to 2008/09

June 2010



WorkCoverWA

Workers' Compensation in Western Australia Statistical Report 2005/06 to 2008/09

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<http://www.workcover.wa.gov.au>

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Foreword

WorkCover WA is pleased to present the annual statistical report covering workers' compensation claim statistics for the period 2005/06 to 2008/09. This report is published electronically, and is part of a series of reports that provide information on claims, claims cost and the frequency of workplace injuries and diseases in Western Australia.

Part A of this document provides an overview of workers' compensation issues. WorkCover WA is the statutory authority responsible for regulating and administering the *Workers' Compensation and Injury Management Act 1981* (the Act) on behalf of the State. The primary role and objective of WorkCover WA is to lead a contemporary, healthy, integrated workers' compensation scheme that is fair, accessible and cost effective for all participants.

Part B of this document provides information on the characteristics of lost-time workers' compensation claims to assist individuals and organisations in their endeavours to prevent workplace injury and disease. The WorkSafe division of the Department of Commerce (WorkSafe) is the Western Australian Government agency responsible for the administration of the *Occupational Safety and Health Act 1984* (OSH Act). The principal objective of the OSH Act is to promote and secure the safety and health of persons in the workplace.

WorkCover WA trusts that the information contained in the report is of interest and assistance to parties not only in Western Australia, but also other occupational safety and health and workers' compensation jurisdictions.

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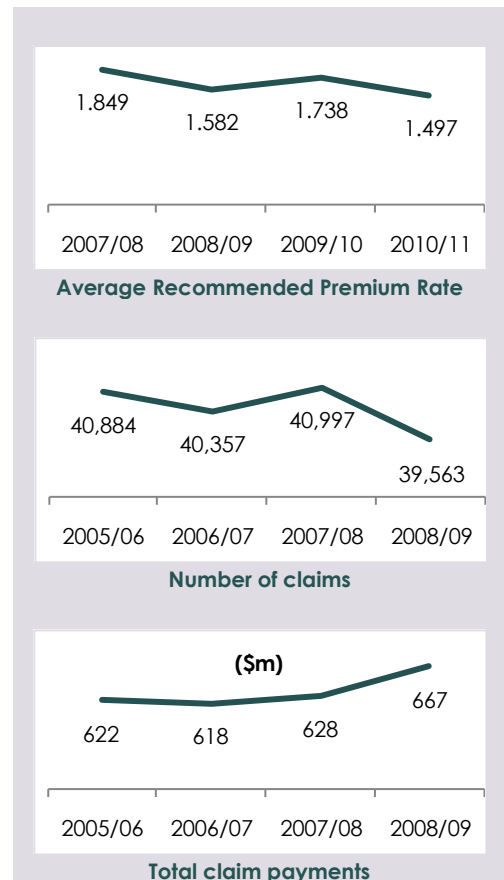
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Executive Summary

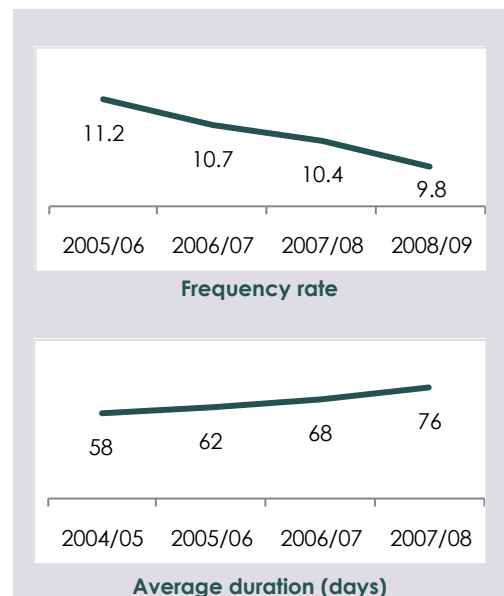
Workers' compensation

- The average recommended premium rate for 2010/11 is 1.497% of payroll, which is a 13.9% decrease from the previous year. An average premium rate of 1.497% means that employers on average pay a premium of just under \$1.50 for every \$100 in wages paid to their employees.
- 39,563 claims were lodged in 2008/09, a decrease of 3.5% from 2007/08.
- Total claim payments (adjusted) have been increasing for the period between 2005/06 and 2008/09, with stable trends in proportions of direct compensation and payments for services to the worker.



Lost-time claims

- The numbers of lost-time claims and the frequency rate (the number of claims per million hours worked) have been continually decreasing between 2005/06 and 2008/09.
- The average duration of claims has increased between 2004/05 and 2007/08 to 76 days.



Explanatory notes

Nature of the information

The data used in this report is derived from workers' compensation claims lodged in accordance with the *Workers' Compensation and Injury Management Act 1981* (the Act). Claims may be lodged by any person who is a 'worker', as defined by section 5 of the Act. This includes working directors who are deemed 'workers' under the Act and have some ownership of the company, as well as employed family members and private household workers (for whom workers' compensation cover is optional).

Self-employed persons, Commonwealth Government workers (including defence service personnel), workers covered by Comcare, police officers (except for work-related fatalities), unpaid volunteers and students on work experience are excluded from workers' compensation data.

WorkCover WA collects information about claims from approved insurers and self-insurers (see Appendix A: Glossary) for definition. This report is based on two fundamentally different types of information:

1. Claim payments – Sections 2 - 7
2. Claim data – Sections 8 - 11

Claim payments

Claim payment information represents aggregated expenses attributed to the financial year in which a payment is made, regardless of the year in which the relevant claim is lodged. Claim payment information includes the expenses for all workers' compensation claims lodged in Western Australia in accordance with the Act. Readers should note that claim payment information in this report is adjusted for inflation unless otherwise stated.

Claim data

Claim data represents information on lost-time claims by the financial year in which the claim was lodged with the insurer. This is in contrast to claim payments, which reflect actual payments during a financial year regardless of when the claim was lodged.

As claim data is dynamic in nature, this report should be considered as a snapshot of the workers' compensation system in WA as at 31 January 2010. For further information on claim data please see Part B of this report.

Part A – Workers' compensation summary

- The average recommended premium rate for 2010/11 is 1.497% of payroll, which is a 13.9% decrease from the previous year. An average premium rate of 1.497% means that employers on average pay a premium of just under \$1.50 for every \$100 in wages paid to their employees.
- 39,563 claims were lodged in 2008/09, excluding journey claims between home and work, asbestos related diseases, and duplicated or disallowed claims.
- Total claim payments (adjusted) have been increasing for the period between 2005/06 and 2008/09.
- The average overall cost for lost-time claims in 2007/08 was \$28,605.
- For 86% of claims, approved insurers provided liability notifications to the injured worker within the required time.
- For other statistical reports produced by WorkCover WA, please visit www.workcover.wa.gov.au

Data Note

Estimates of claim costs for unfinalised claims are revised as claims progress. Therefore, as claims mature, the estimates are more reflective of the final amounts. To present the most accurate and comparable data, costs for the most recent financial year (2008/09) are not included, due to the high percentage of unfinalised claims at the date of extract (31 January 2010).

Section 1: Premium rates

Data note

The key drivers of average recommended premium rates are:

- number of claims incurred
- average claim size
- expense and margin loading
- wagheroll returned
- estimated incurred cost of claims.

Section 152 of the Act stipulates that recommended premium rates can be surcharged by a maximum of 75% of the applicable rate before approval is required from the WorkCover WA Board, however, there are no limitations on discounting. The WorkCover WA Board seeks actuarial advice in determining the recommended premium rate for each industry classification.

Average recommended premium rates

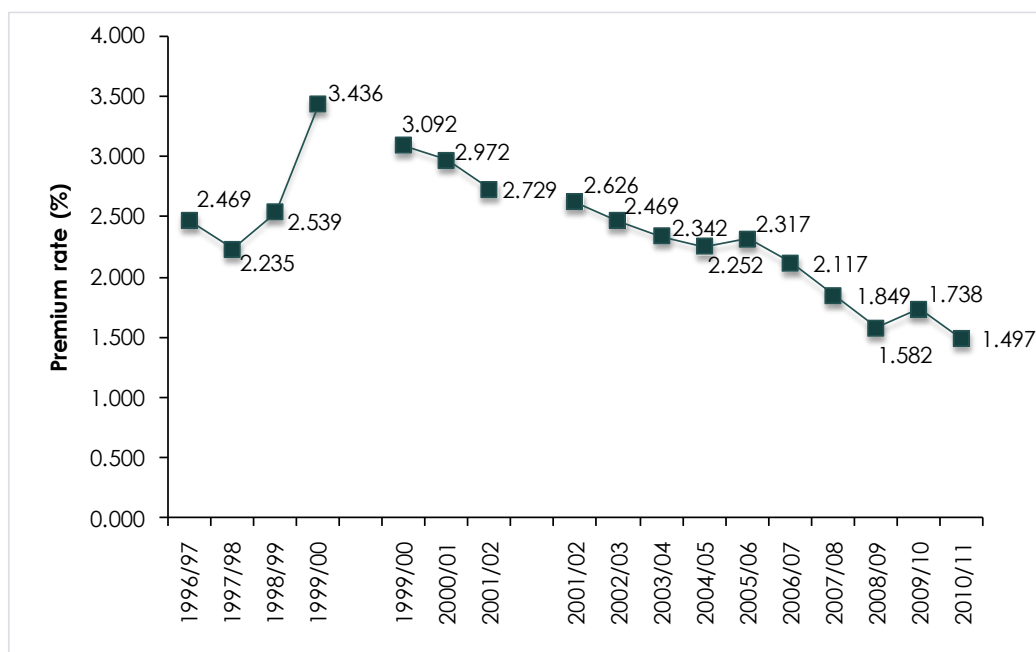


Figure 1.1: - Recommended premium rates by underwriting year

Note:

- In 1999-2000 the recommended premium rates were revised as a result of legislative change (October 1999 amendments). Both the original and revised rates are presented in Figure 1.1, with a break to show the revision.
- In 2001-02 a one-off reduction of 3.5% occurred with the removal of brokerage from premiums. Both the rates inclusive and exclusive of the allowance are presented in Figure 1.1, with a break to show the revision.

Variation in premium rates

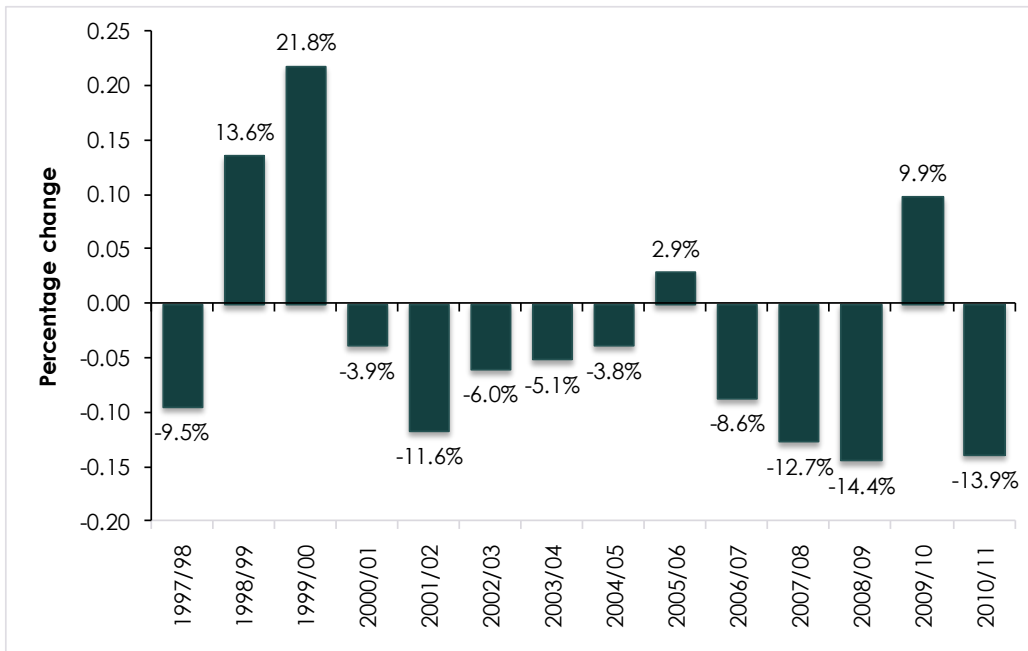


Figure 1.2: - Variation in average recommended premium rates

Average recommended premium rates by industry for 2010/11

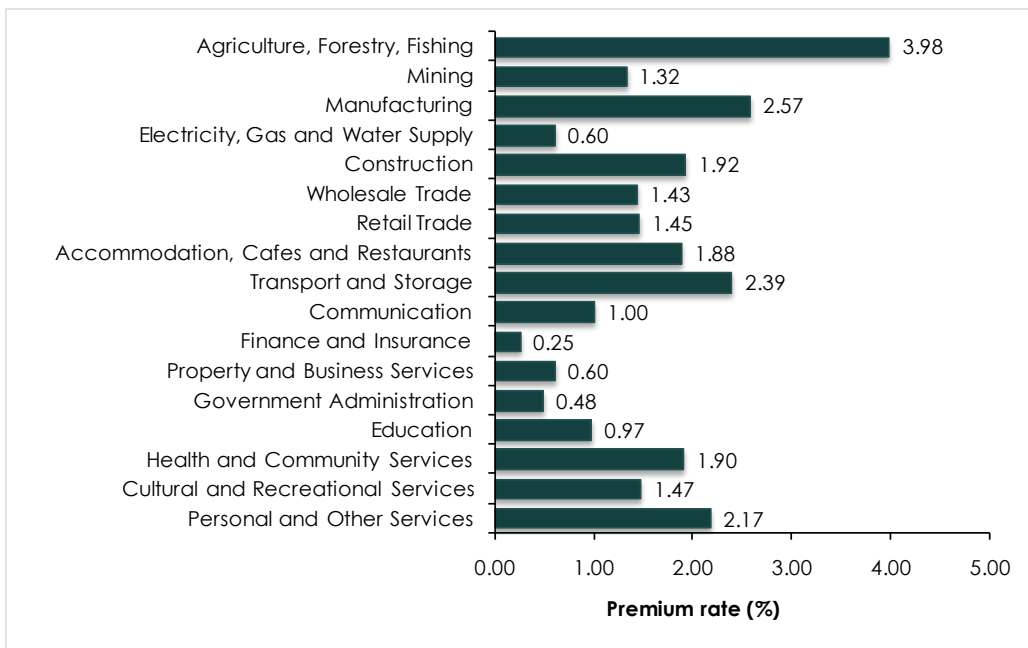


Figure 1.3: - Average recommended premium rates by industry for 2010/11

Section 2: Lodgement of claims

Data note

Claim data represents information on claims by the financial year in which the claim was lodged.

WorkCover WA continuously updates its claims database as information is received from approved insurers and self-insurers. As claims data is dynamic in nature, this report should be considered a snapshot of the workers' compensation system in WA as at 31 January 2010.

To maintain consistency with previous reports, the following types of claims have been excluded from the analysis of claims:

- journey claims between home and work
- asbestos related diseases, including mesothelioma and pneumoconiosis
- duplicated or disallowed (rejected) claims

Number of claims lodged

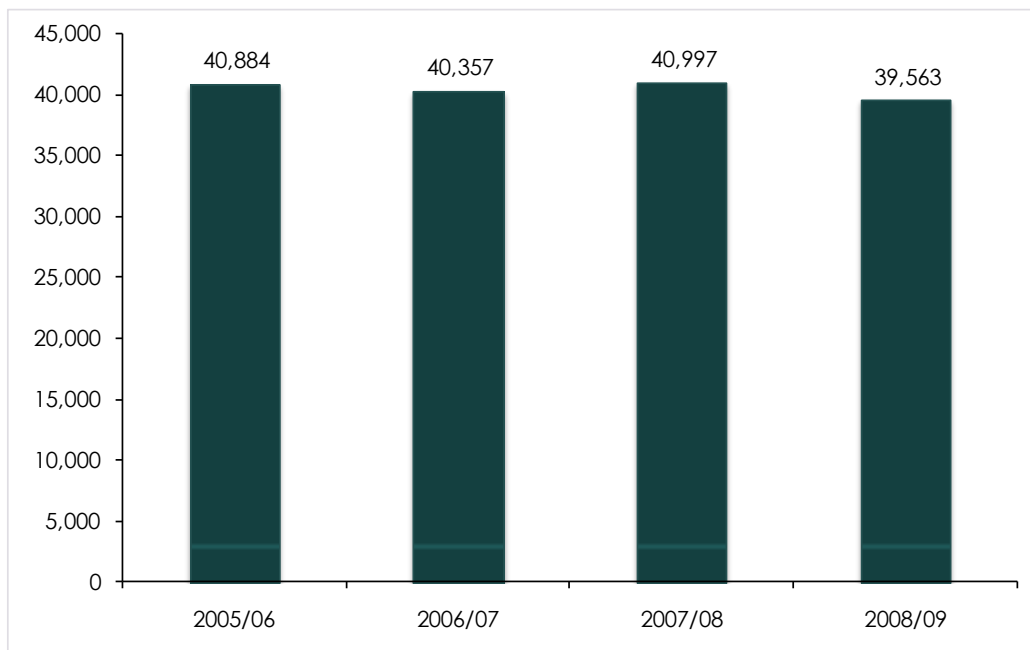


Figure 2.1: -
Number of claims
lodged

Section 3: Claim payments

Data note

Claim payment information consists of aggregated expenses attributed to the financial year of payments, regardless of the year in which the claims were lodged. Claim payment information includes the expenses for all workers' compensation claims reported by approved and formerly approved insurers, the Insurance Commission of Western Australia and self-insurers.

Claim payments by year (unadjusted)

Table 3.1: - Claim payments by type of payment (unadjusted)

	2005/06		2006/07		2007/08		2008/09	
	Payments (\$m)	% of Total	Payments (\$m)	% of Total	Payments (\$m)	% of Total	Payments (\$m)	% of Total
Allied Health and Voc Rehab	41.977	9.3%	42.674	8.9%	45.969	8.8%	52.259	8.7%
Other Treatment or Appliance Payment	24.556	5.4%	25.593	5.3%	29.289	5.6%	32.906	5.5%
Vocational Rehabilitation Payment	17.422	3.9%	17.081	3.6%	16.680	3.2%	19.354	3.2%
Weekly payments	146.560	32.4%	161.201	33.5%	182.717	34.8%	213.867	35.8%
Common Law or Other Act Payment	60.059	13.3%	65.895	13.7%	75.320	14.4%	84.433	14.1%
Fatal Payment	1.614	0.4%	1.313	0.3%	2.359	0.4%	3.209	0.5%
Legal Expense Payment	27.174	6.0%	26.945	5.6%	24.667	4.7%	29.857	5.0%
Redemption Payment	62.787	13.9%	63.905	13.3%	64.244	12.2%	69.466	11.6%
Specific Injury Payment	17.871	4.0%	17.413	3.6%	17.698	3.4%	21.174	3.5%
Medical or Hospital	72.417	16.0%	76.703	16.0%	87.467	16.7%	93.994	15.7%
Hospital Expense Payment	23.253	5.1%	25.112	5.2%	29.242	5.6%	31.655	5.3%
Medical Practitioner or Specialist Payment	49.165	10.9%	51.591	10.7%	58.225	11.1%	62.339	10.4%
Miscellaneous Payment	21.350	4.7%	24.553	5.1%	24.434	4.7%	29.224	4.9%
Total	451.809		480.601		524.874		597.484	

Note: Medical or Hospital expenses are the sum of medical practitioners and specialists, hospital expenses and all other treatments

To help provide useful time series comparisons, the data in Table 3.2 has been adjusted for inflation.

It should be noted that from the statistical report published in 2005 onwards, claim payments are adjusted to the value of the year in which the report refers (2010), i.e. payments are provided in, what would be, today's figures. Payment values are therefore updated in each annual statistical report and will not be the same as the values published in other years. Appendix D of the *WorkCover WA Actuarial Assessment of the Recommended Premium Rates for 2010-11*, PricewaterhouseCoopers Actuarial Pty Ltd, available on the WorkCover WA website, contains information about the indexing procedure.

Adjustment figures used in statistical reports published prior to 2005 were adjusted using the ABS Consumer Price Index.

Claim payments by year (adjusted)

Table 3.2: - Claim payments by type of payment (adjusted)

	2005/06		2006/07		2007/08		2008/09	
	Payments (\$m)	% of Total	Payments (\$m)	% of Total	Payments (\$m)	% of Total	Payments (\$m)	% of Total
Allied Health and Voc Rehab	57.761	9.3%	54.879	8.9%	54.979	8.8%	58.321	8.7%
Other Treatment or Appliance Payment	33.789	5.4%	32.913	5.3%	35.030	5.6%	36.723	5.5%
Vocational Rehabilitation Payment	23.972	3.9%	21.966	3.6%	19.949	3.2%	21.599	3.2%
Weekly payments	201.666	32.4%	207.304	33.5%	218.529	34.8%	238.675	35.8%
Common Law or Other Act Payment	82.641	13.3%	84.741	13.7%	90.083	14.4%	94.227	14.1%
Fatal Payment	2.221	0.4%	1.689	0.3%	2.821	0.4%	3.581	0.5%
Legal Expense Payment	37.391	6.0%	34.651	5.6%	29.501	4.7%	33.321	5.0%
Redemption Payment	86.395	13.9%	82.182	13.3%	76.836	12.2%	77.524	11.6%
Specific Injury Payment	24.591	4.0%	22.393	3.6%	21.167	3.4%	23.630	3.5%
Medical or Hospital	99.646	16.0%	98.640	16.0%	104.610	16.7%	104.898	15.7%
Hospital Expense Payment	31.996	5.1%	32.294	5.2%	34.973	5.6%	35.327	5.3%
Medical Practitioner or Specialist Payment	67.651	10.9%	66.346	10.7%	69.637	11.1%	69.570	10.4%
Miscellaneous Payment	29.377	4.7%	31.575	5.1%	29.223	4.7%	32.614	4.9%
Total	621.689		618.053		627.750		666.792	

Note: Medical or Hospital expenses are the sum of medical practitioners and specialists, hospital expenses and all other treatments

Direct compensation and service payments as a percentage of total claim payments

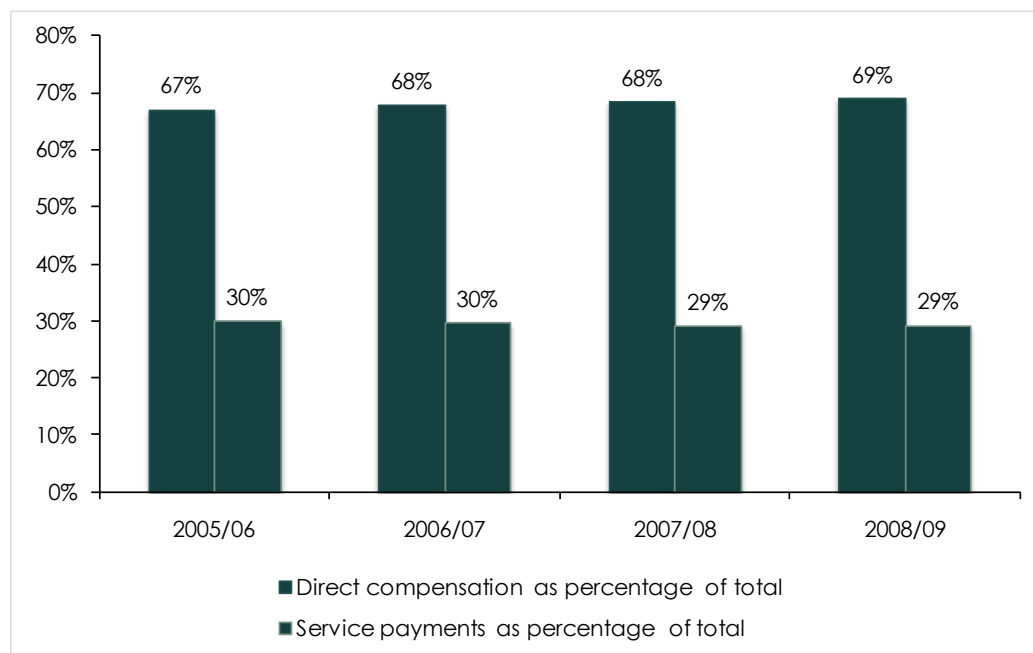


Figure 3.1: - Direct compensation and service payments as a percentage of total claim payments

Proportion of direct compensation by type

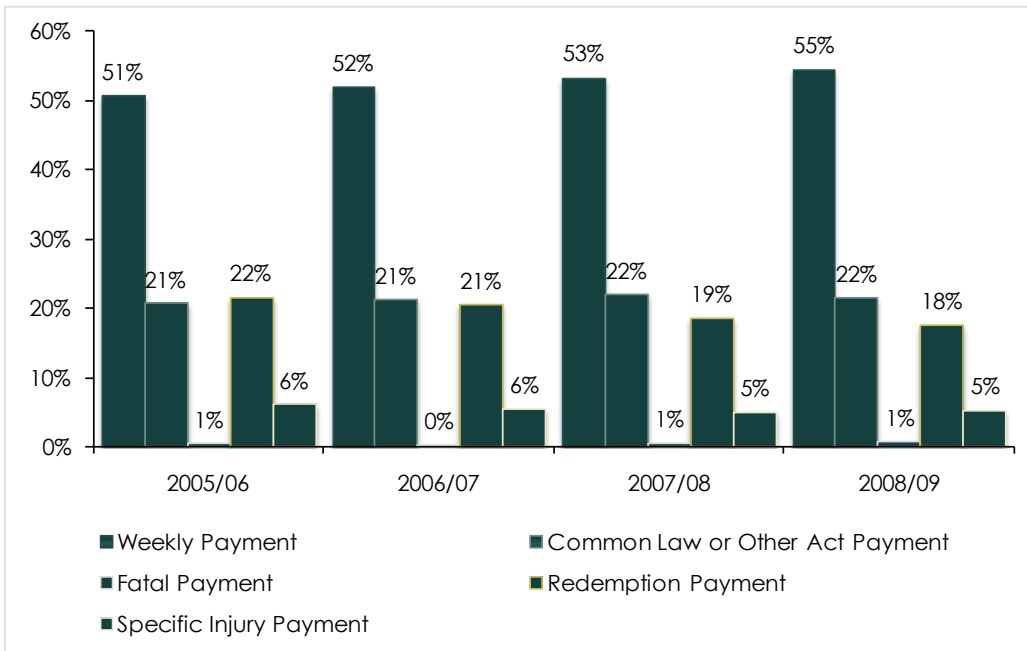


Figure 3.2: - Proportion of direct compensation by type

Proportion of service payment by type

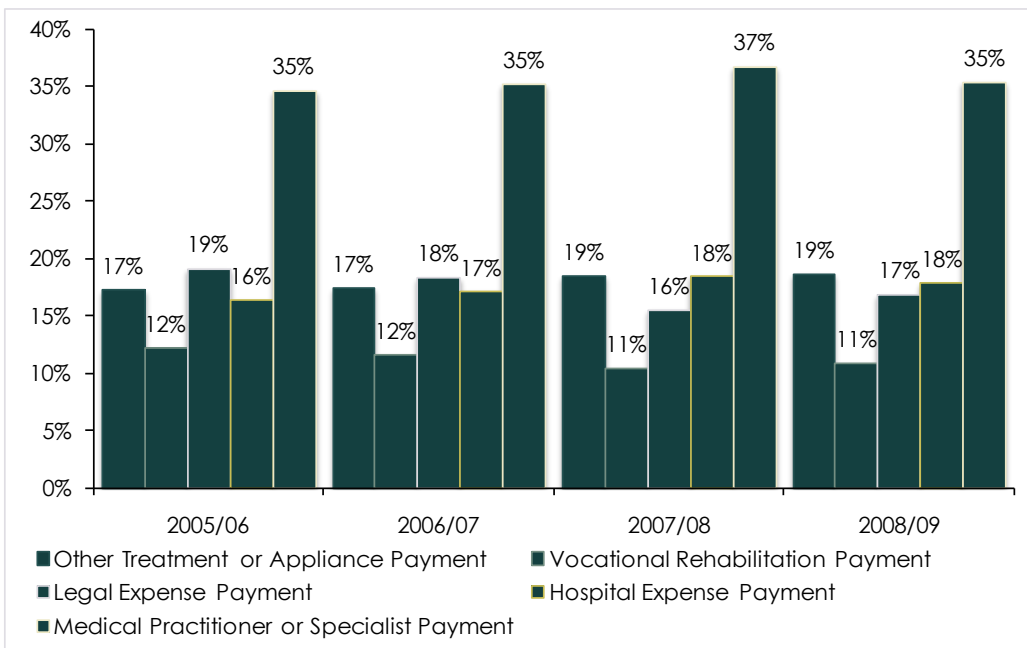


Figure 3.3: - Proportion of service payment by type

Section 4: Claim costs

Data note

Claim costs information represents aggregated expenses attributed to the financial year in which a claim is lodged, regardless of the year in which the payment is made. Claim costs takes into account estimated and actual costs for unfinalised claims, and actual costs for finalised claims.

Estimates of costs for unfinalised claims are revised as claims progress, therefore, as claims mature, the estimates are more reflective of the finalised costs.

To present the most accurate and comparable data, the most recent financial year (2008/09) on costs is not included, due to the high percentage of unfinalised claims.

Average cost of lost-time claims

Table 4.1: - Average claim cost by year

	2004/05	2005/06	2006/07	2007/08
	Average cost	Average cost	Average cost	Average cost
All persons				
1 day	\$1,305	\$865	\$952	\$1,267
2-5 days	\$1,560	\$1,656	\$1,688	\$1,786
6-20 days	\$4,739	\$5,119	\$5,235	\$5,710
21-59 days	\$14,661	\$15,749	\$17,365	\$17,418
60-120 days	\$31,683	\$36,220	\$36,936	\$39,878
121+ days	\$138,131	\$136,090	\$134,709	\$140,180
Average overall	\$22,150	\$23,633	\$24,668	\$28,605
Total lost-time cost	\$422,493,590	\$431,464,206	\$450,544,051	\$525,069,089
Males				
1 day	\$1,399	\$814	\$895	\$1,238
2-5 days	\$1,556	\$1,608	\$1,647	\$1,746
6-20 days	\$4,936	\$5,091	\$5,477	\$5,910
21-59 days	\$15,080	\$15,541	\$17,386	\$18,280
60-120 days	\$32,769	\$38,449	\$39,125	\$41,595
121+ days	\$145,522	\$145,548	\$145,684	\$152,323
Average overall	\$21,227	\$22,432	\$23,875	\$28,785
Total lost-time cost	\$288,118,691	\$286,481,887	\$303,351,903	\$365,802,504
Females				
1 day	\$1,070	\$990	\$1,093	\$1,327
2-5 days	\$1,571	\$1,776	\$1,789	\$1,876
6-20 days	\$4,185	\$5,192	\$4,620	\$5,210
21-59 days	\$13,529	\$16,286	\$17,316	\$15,196
60-120 days	\$29,249	\$31,366	\$32,283	\$36,446
121+ days	\$125,722	\$121,825	\$117,951	\$119,370
Average overall	\$24,427	\$26,428	\$26,483	\$28,199
Total lost-time cost	\$134,374,899	\$144,982,319	\$147,192,148	\$159,266,585

Percentage of claims and costs by days lost

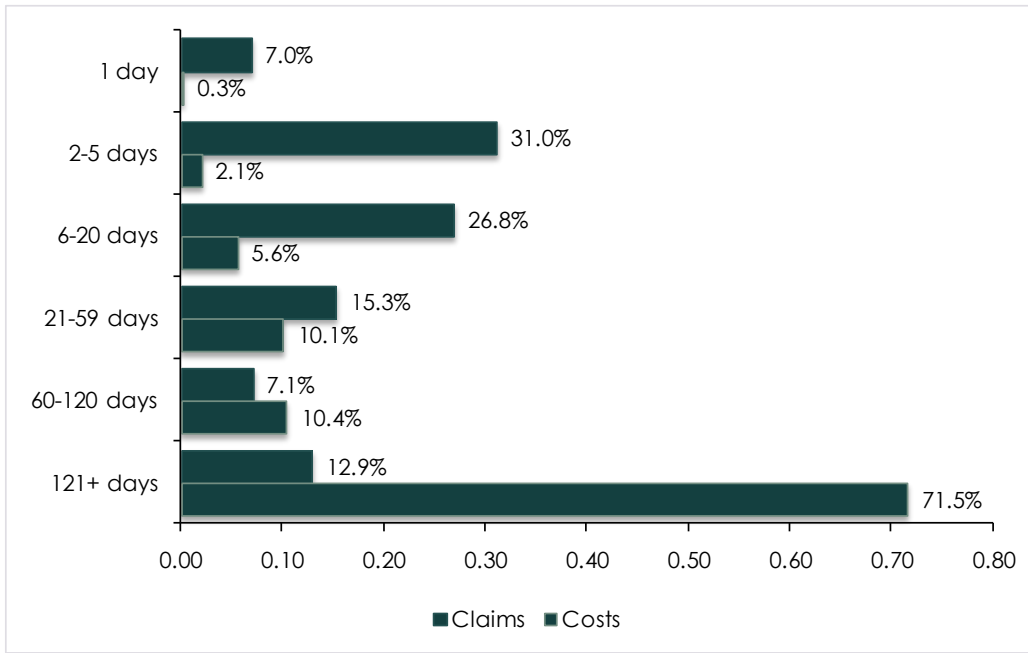


Figure 4.1: - Percentage of claims cost by days lost 2004/05-2007/08

Claims and costs by days lost

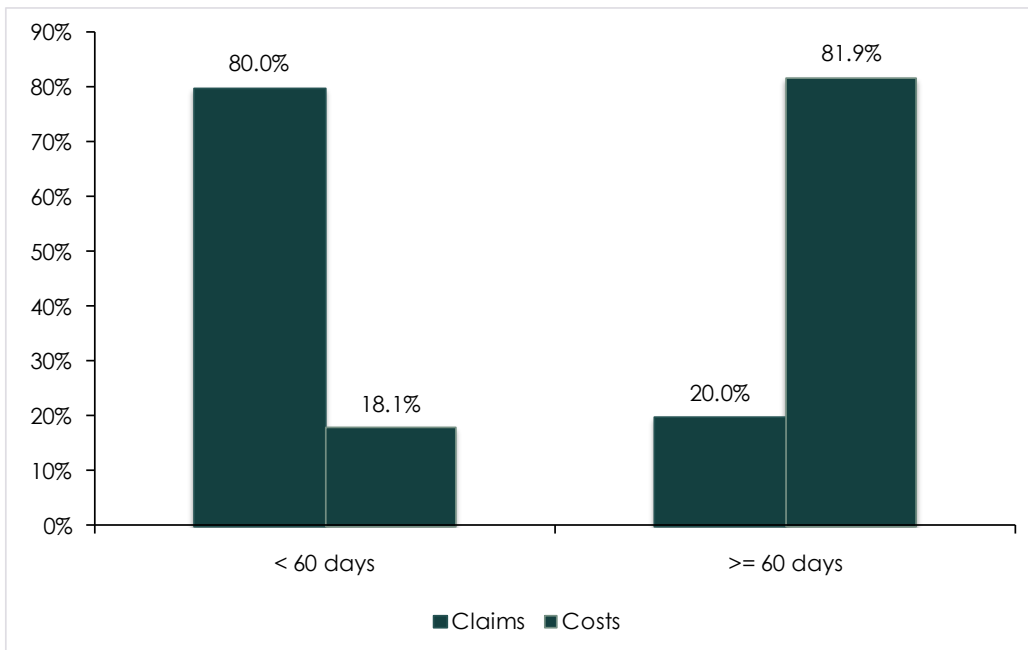


Figure 4.2: - Claims cost by days lost 2004/05-2007/08

Section 5: Disputes

Data note

Dispute data represents information on disputes by the financial year in which the dispute application was registered by the WorkCover WA Dispute Resolution Directorate. The disputation rate is the number of disputes registered as a proportion of new claims lodged in the reference year.

Disputation rate by year

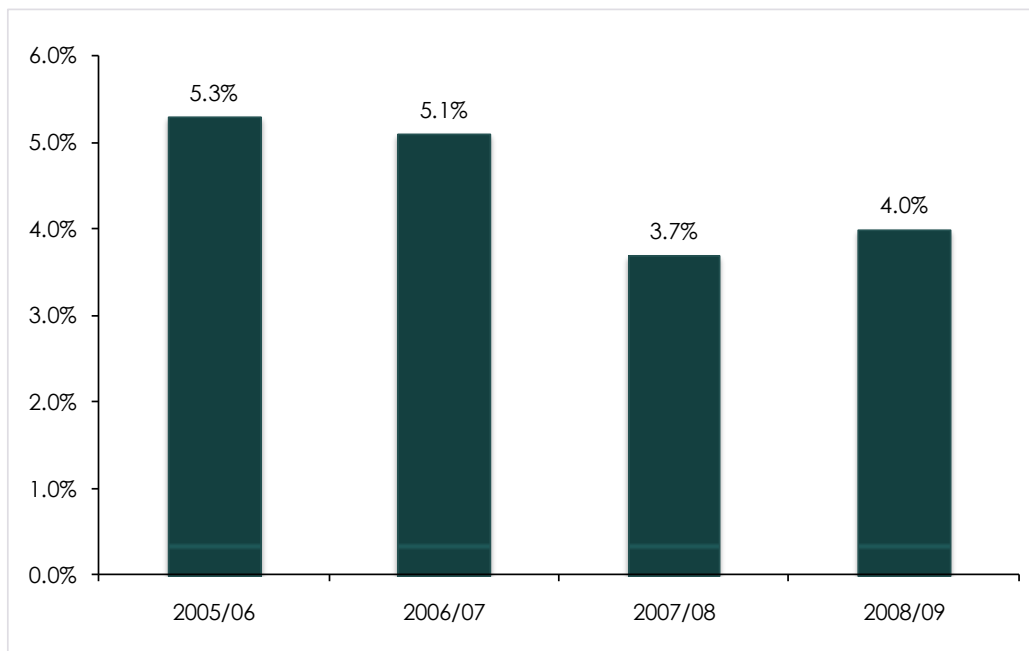


Figure 5.1: -
Disputation rate by
year

Section 6: Compensated fatalities

Data note

While both WorkCover WA and WorkSafe report on work-related fatalities, it should be noted that the data collection methods differ.

WorkSafe's data is based on the financial year in which the fatality occurred, and includes fatalities of self-employed persons and employers working in WA. WorkCover WA reports fatalities by the date the workers' compensation claim is lodged.

The number of compensated fatalities for each year may differ from previous reports as:

- WorkCover WA's statistics for each financial year may include claims that were lodged for fatalities that occurred in previous years, and fatalities that occurred after the claim was lodged
- Fatality claims that are subsequently rejected will reduce the number of fatalities recorded for previous years.

Compensated fatalities

Table 6.1: - Number of compensated fatalities by industry

	2005/06	2006/07	2007/08	2008/09	Total
Agriculture, Forestry, Fishing	2		3	2	7
Mining	6	3	3	8	20
Manufacturing	4	4	3	1	12
Electricity, Gas and Water Supply				1	1
Construction	3	3	5	5	16
Wholesale Trade		3	1	1	5
Retail Trade	1		1		2
Accommodation, Cafes and Restaurants		1			1
Transport and Storage	3	6	4	4	17
Property and Business Services	3	1	3	4	11
Government Administration		2			2
Education		1		1	2
Cultural and Recreational Services	1	1			2
Personal and Other Services		1			1
Total	23	26	23	27	99

Section 7: Timeliness of claim progress

Data note

If a claim involves weekly payments, the *Workers' Compensation and Injury Management Act 1981* (the Act) requires:

- an employer to lodge a claim with the insurer within three working days of receiving the claim form.
- an approved insurer to give the worker and the employer notice that liability is accepted, disputed or pending within 14 days.
- a self-insurer to give the worker notice that liability is accepted, disputed or pending within 17 days.

For further details on the above please refer to sections 57A and 57B of the Act.

Average days taken for an injured worker to lodge a claim with their employer by year

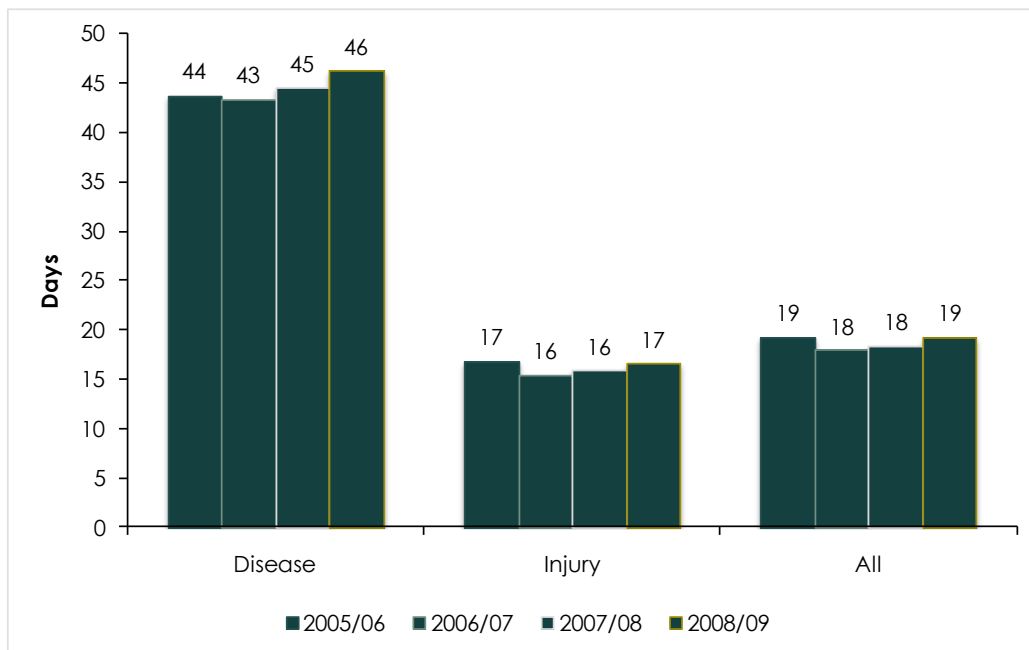


Figure 7.1: - Average days taken for an injured worker to lodge a claim with their employer by year

Percentage of liability notifications provided within the required time

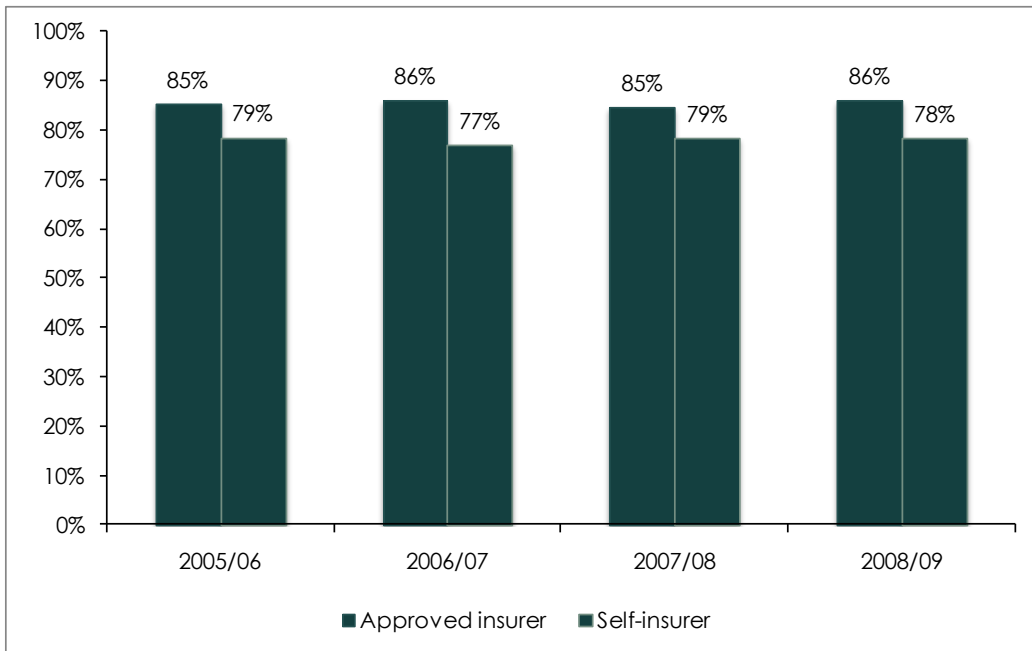


Figure 7.2: - Percentage of notifications provided within the required time

Average claim progress for an injury income claim to an approved insurer

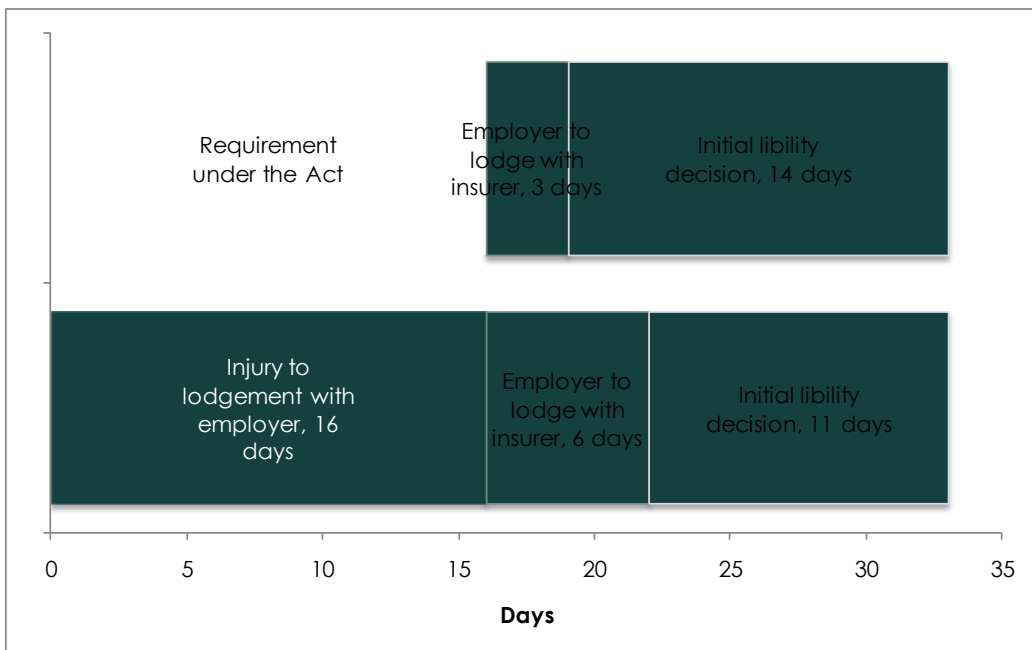


Figure 7.3: - Average claim progress 2005/06 – 2008/09

Part B – Lost-time claims summary

- The number of lost-time claims and the frequency rate have decreased between 2005/06 and 2008/09.
- The average duration of claims has increased between 2004/05 and 2007/08.
- The longest average duration of claims in 2007/08 was for the mining industry at 135 days.
- The most common type of injury in 2008/09 was sprains and strains at 48.3% of the total number of lost-time claims.

Data note

Days lost takes into account estimated and actual days lost for unfinalised claims and actual days lost for finalised. Claim data represents information on lost-time claims by the financial year in which the claim was lodged with the insurer.

Estimates of days lost for unfinalised claims are revised as claims progress, therefore, as claims mature, the estimates are more reflective of the finalised days lost.

To present the most accurate and comparable data, the most recent financial year (2008/09) on days lost is not included, due to the high percentage of unfinalised claims.

Frequency rates reflect the number of claims per million hours worked.

Section 8: Gender

Lost-time claims and frequency rates

Table 8.1: - Number of lost-time claims and frequency rates

	Number lost-time claims				Frequency rate *			
	2005/06	2006/07	2007/08	2008/09	2005/06	2006/07	2007/08	2008/09
Female	5,390	5,461	5,570	5,693	8.8	8.6	8.3	8.3
Male	12,678	12,593	12,622	12,093	12.7	11.9	11.6	10.8
Total	18,068	18,054	18,192	17,786	11.2	10.7	10.4	9.8

*Number of lost-time injury/disease claims per million hours worked

Frequency of lost-time claims

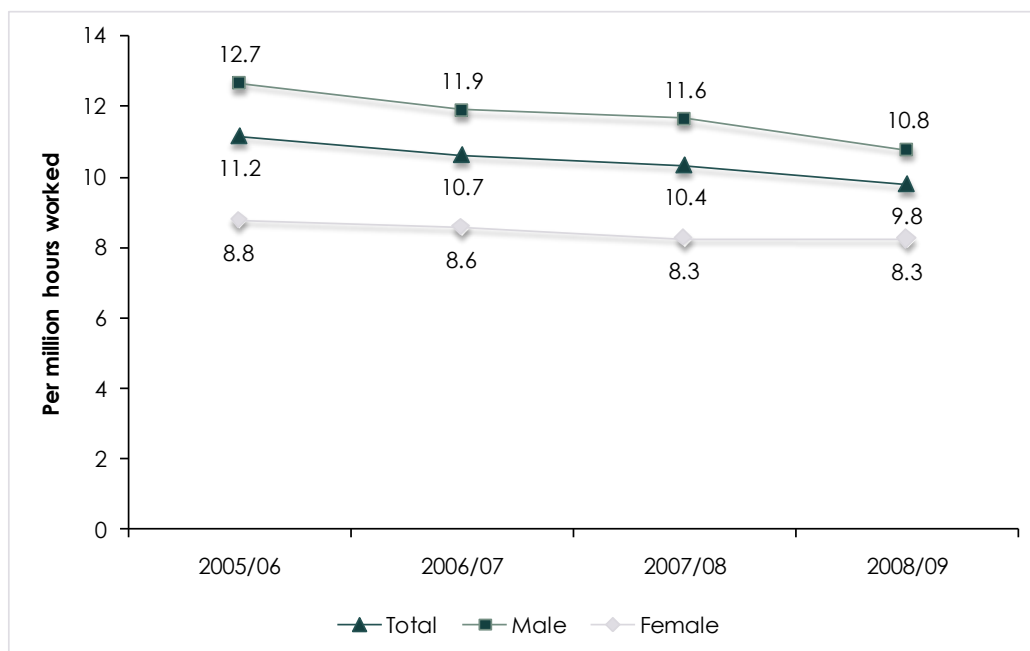


Figure 8.1: - Frequency of lost-time claims by gender

Lost-time claims by days lost

Table 8.2: - Number of lost-time claims by days lost

	2004/05		2005/06		2006/07		2007/08	
	Lost-time claims	% of lost-time claims	Lost-time claims	% of lost-time claims	Lost-time claims	% of lost-time claims	Lost-time claims	% of lost-time claims
All persons								
1 day	1,490	7.9%	1,337	7.4%	1,131	6.3%	1,174	6.5%
2-5 days	6,146	32.6%	5,881	32.5%	5,632	31.2%	5,114	28.1%
6-20 days	5,101	27.1%	4,703	26.0%	4,850	26.9%	4,932	27.1%
21-59 days	2,718	14.4%	2,662	14.7%	2,835	15.7%	2,876	15.8%
60-120 days	1,179	6.3%	1,247	6.9%	1,294	7.2%	1,429	7.9%
121+ days	2,200	11.7%	2,238	12.4%	2,312	12.8%	2,667	14.7%
Total lost-time claims	18,834		18,068		18,054		18,192	
Males								
1 day	1,064	7.9%	954	7.5%	807	6.4%	794	6.3%
2-5 days	4,392	32.7%	4,201	33.1%	3,996	31.7%	3,576	28.3%
6-20 days	3,775	28.1%	3,382	26.7%	3,496	27.8%	3,522	27.9%
21-59 days	1,988	14.8%	1,930	15.2%	2,014	16.0%	2,085	16.5%
60-120 days	817	6.1%	860	6.8%	881	7.0%	957	7.6%
121+ days	1,378	10.3%	1,351	10.7%	1,399	11.1%	1,688	13.4%
Total lost-time claims	13,414		12,678		12,593		12,622	
Females								
1 day	426	7.9%	383	7.1%	324	5.9%	380	6.8%
2-5 days	1,754	32.4%	1,680	31.2%	1,636	30.0%	1,538	27.6%
6-20 days	1,326	24.5%	1,321	24.5%	1,354	24.8%	1,410	25.3%
21-59 days	730	13.5%	732	13.6%	821	15.0%	791	14.2%
60-120 days	362	6.7%	387	7.2%	413	7.6%	472	8.5%
121+ days	822	15.2%	887	16.5%	913	16.7%	979	17.6%
Total lost-time claims	5,420		5,390		5,461		5,570	

Average days lost

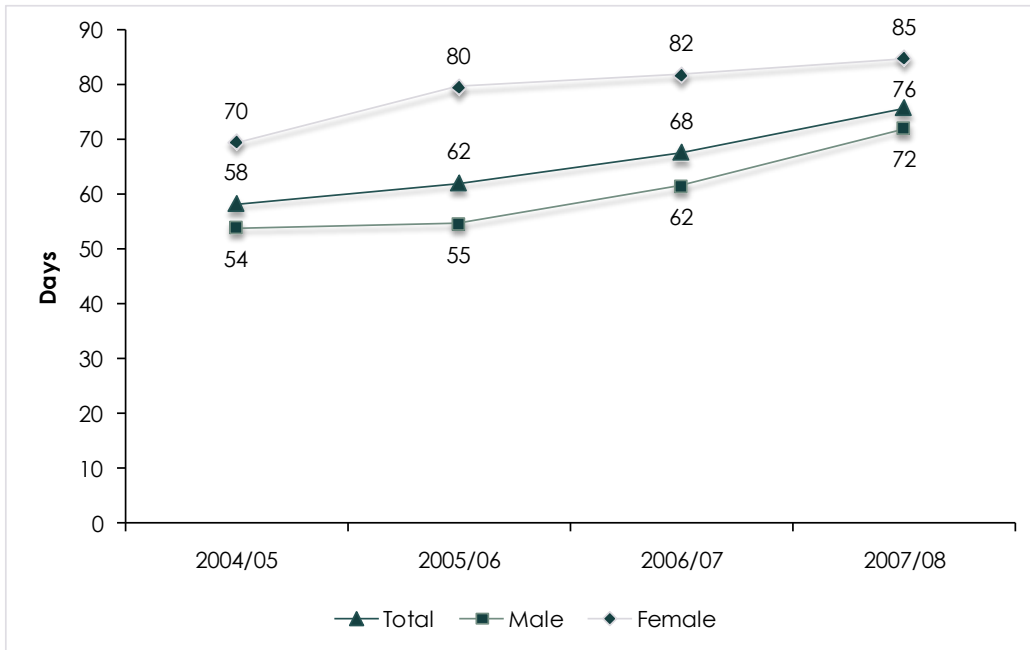


Figure 8.2: - Average number of days lost for lost-time claims

Section 9: Industry and occupation

Data note

Industry classifications are based on the *Australian and New Zealand Standard Industrial Classification (ANZSIC) 1993*, published by the Australian Bureau of Statistics (ABS). Details of the classification can be found on the ABS website.

The occupation classifications are based on the *Australian Standard Classification of Occupations (Second Edition)* published by the ABS. Details of the classification can be found in the ABS website.

Incidence and frequency rates for claims lodged in 2008/09 should be used with caution. Claims lodged in 2008/09 were coded, by WorkCover WA, to the 1993 version of the Australian and New Zealand Standard Industrial Classification (ANZSIC), while the number of employed persons were collected by the Australian Bureau of Statistics in the 2006 version of ANZSIC. The incompatibility of the versions means that there may be a greater margin of error in the rates provided.

Frequency rate of lost-time claims by industry

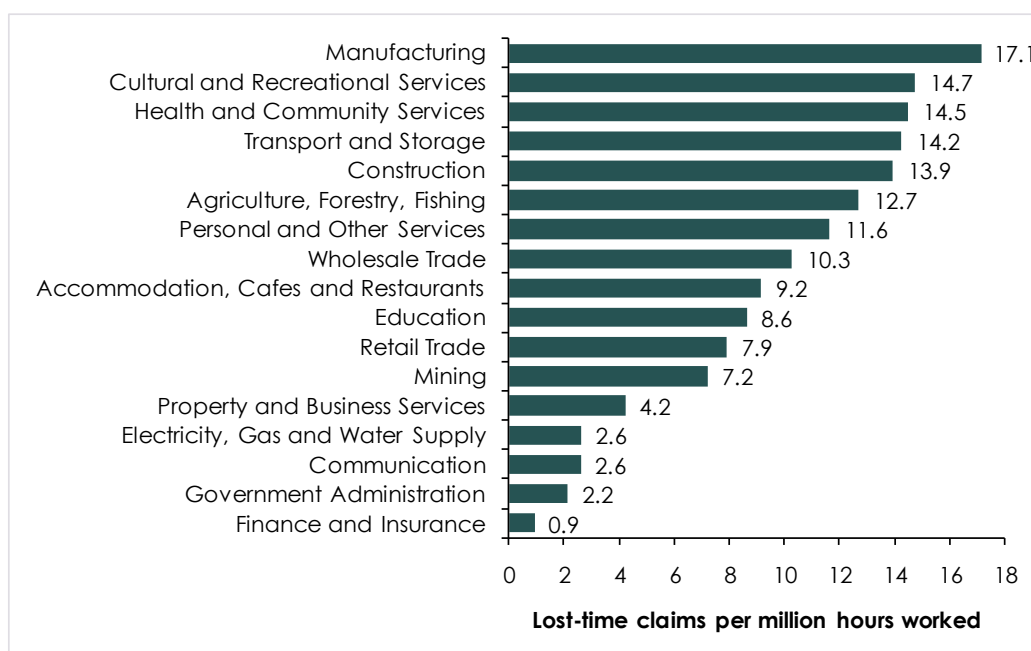


Figure 9.1: -
Number of lost-time injury/disease claims per million hours worked by industry 2008/09

Average days lost for lost-time claims by industry

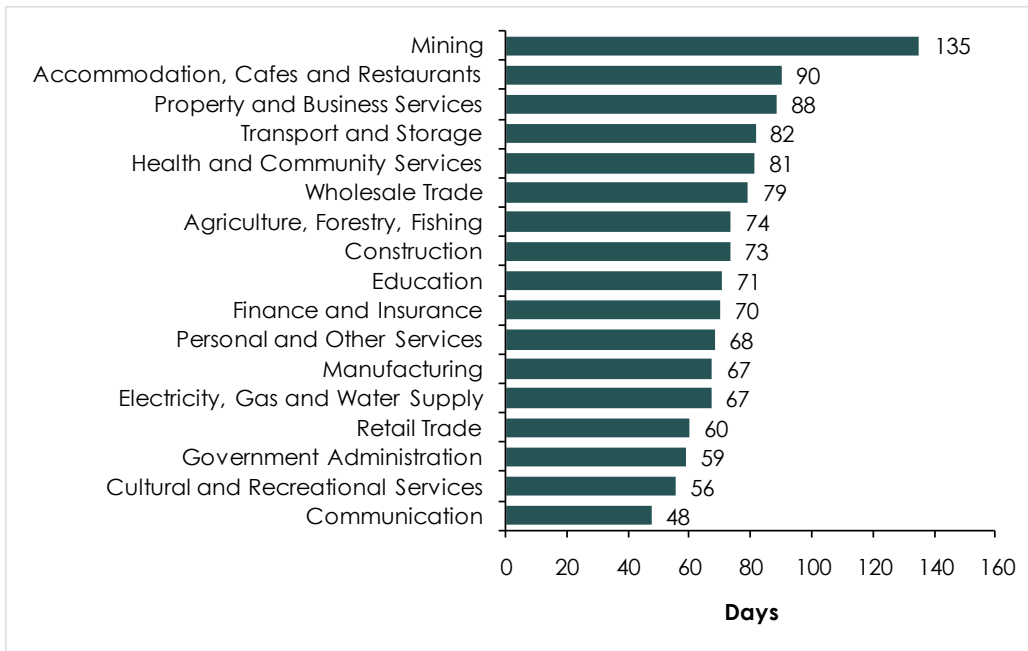


Figure 9.2: - Average days lost for lost-time claims by industry 2007/08

Average days lost for lost-time claims by occupation 2007/08

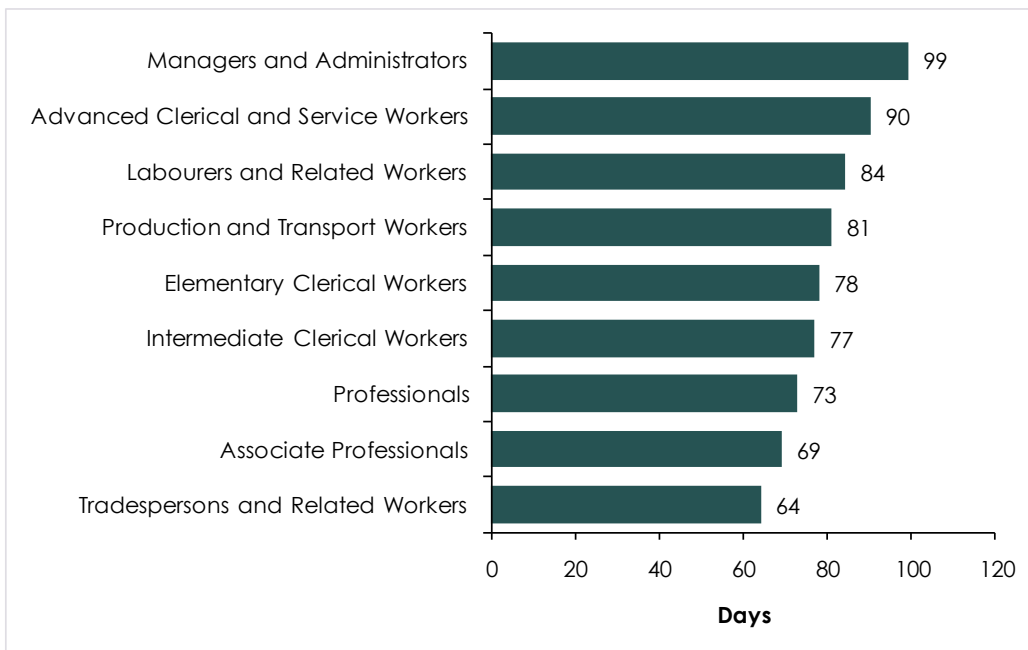


Figure 9.3: - Average days lost for lost-time claims by occupation 2007/08

Section 10: Type of occurrence

Data note

The classifications used in this section are defined in detail in the National Occupational Health and Safety Commission's *Type of Occurrence Classification System 2.1* available from www.safeworkaustralia.gov.au.

The *Type of Occurrence Classification System* was developed for use in coding details of workers' compensation cases. There are four types of classifications used to describe the type of injury or disease sustained by the worker.

- Nature of injury or disease identifies the most serious injury or disease sustained or suffered by the worker.
- Bodily location of injury or disease identifies the part of the body affected by the most serious injury or disease.
- Mechanism of injury or disease identifies the action, exposure or event which was the direct cause of the most serious injury or disease.
- Agency of injury or disease identifies the object, substance or circumstance directly involved in inflicting the injury or disease.

Percentage of lost-time claims and average duration by nature of injury or disease

Table 10.1: - Percentage of lost-time claims and average duration by nature of injury or disease

	Percentage of lost-time claims				Average duration (days)			
	2005/06	2006/07	2007/08	2008/09	2004/05	2005/06	2006/07	2007/08
All persons								
Sprain\strain	49.0%	47.8%	48.4%	48.3%	68.7	73.2	79.8	84.7
Open wound	13.4%	13.5%	12.7%	12.6%	19.9	19.9	19.6	26.5
Contusion & crushing	11.3%	11.7%	11.1%	11.3%	38.1	41.1	53.6	62.2
Fractures	8.0%	8.6%	9.6%	9.6%	83.3	85.7	92.9	108.9
Musculoskeletal system disorders	3.2%	3.3%	3.2%	3.7%	108.5	133.8	140.4	144.9
Other injuries nec *	3.4%	3.7%	3.8%	3.5%	52.2	61.2	65.9	79.7
Mental disorders	2.1%	1.9%	2.2%	2.5%	105.3	112.6	127.9	135.3
Burns	2.3%	2.5%	2.3%	2.4%	14.9	20.7	19.5	24.6
Superficial injury	1.2%	1.7%	1.4%	1.4%	28.3	8.3	22.4	37.4
Other diseases	1.8%	1.9%	1.6%	1.4%	70.2	62.4	59.1	82.1
Foreign body	2.1%	1.6%	1.5%	1.3%	3.4	5.3	5.0	12.8
Hernia	1.3%	1.2%	1.3%	1.2%	32.8	59.0	62.4	41.5
Skin disorders	0.7%	0.6%	0.7%	0.8%	49.7	51.9	28.6	24.7
Multiple injuries	0.1%	0.0%	0.1%	0.0%	379.6	629.8	439.4	345.4

Table 10.1 (continued over)

*not elsewhere classified

Table 10.1: - Percentage of lost-time claims and average duration by nature of injury or disease (continued)

	Percentage of lost-time claims				Average duration (days)			
	2005/06	2006/07	2007/08	2008/09	2004/05	2005/06	2006/07	2007/08
Males								
Sprain\strain	46.0%	44.7%	45.8%	45.5%	65.8	65.3	72.6	81.0
Open wound	16.2%	16.1%	15.2%	15.4%	20.3	20.0	20.7	27.9
Fractures	8.8%	9.3%	10.4%	10.5%	86.8	91.2	96.8	112.3
Contusion & crushing	10.9%	11.4%	10.4%	10.3%	34.3	31.9	47.7	59.9
Other injuries nec *	3.3%	3.9%	4.0%	3.8%	49.0	58.8	72.6	82.1
Musculoskeletal system disorders	2.5%	2.8%	2.8%	3.2%	101.0	125.7	134.5	150.7
Burns	2.4%	2.6%	2.4%	2.4%	16.4	26.0	14.3	25.0
Foreign body	3.0%	2.1%	2.2%	1.8%	3.4	4.6	5.0	13.1
Hernia	1.8%	1.7%	1.8%	1.7%	33.6	59.2	58.1	36.9
Superficial injury	1.5%	2.0%	1.6%	1.6%	26.4	8.3	20.1	37.3
Mental disorders	1.0%	0.9%	1.2%	1.5%	94.8	93.6	128.5	137.4
Other diseases	1.8%	1.8%	1.5%	1.4%	67.9	55.8	65.6	76.1
Skin disorders	0.7%	0.6%	0.8%	0.9%	48.8	56.6	27.0	29.4
Multiple injuries	0.1%	0.1%	0.1%	0.1%	265.8	917.0	501.9	384.9
Females								
Sprain\strain	56.1%	55.0%	54.4%	54.1%	74.6	88.5	93.2	91.7
Contusion & crushing	12.3%	12.4%	12.7%	13.4%	46.5	60.2	66.0	66.4
Fractures	6.2%	6.9%	7.9%	7.9%	71.3	67.2	80.8	98.7
Open wound	6.8%	7.3%	7.0%	6.5%	17.5	19.1	13.6	19.6
Mental disorders	4.5%	4.0%	4.4%	4.7%	111.2	122.9	127.5	134.0
Musculoskeletal system disorders	4.9%	4.5%	4.3%	4.6%	119.3	143.8	149.0	136.6
Other injuries nec *	3.5%	3.2%	3.4%	3.0%	62.5	66.6	47.4	73.4
Burns	2.2%	2.5%	2.2%	2.2%	10.8	7.1	32.0	23.4
Other diseases	1.9%	2.0%	1.8%	1.4%	75.1	77.4	45.6	93.6
Superficial injury	0.7%	1.1%	1.0%	1.1%	36.9	8.2	32.1	37.5
Skin disorders	0.6%	0.6%	0.5%	0.6%	52.4	38.7	32.5	9.0
Foreign body	0.2%	0.2%	0.1%	0.3%	2.2	36.4	5.4	2.7
Hernia	0.1%	0.3%	0.3%	0.2%	21.5	52.2	117.8	114.6
Multiple injuries	0.1%	0.0%	0.0%	0.0%	1745.0	127.3	2.0	148.0

*not elsewhere classified

Percentage of lost-time claims and average duration by bodily location of injury or disease

Table 10.2: - Percentage of lost-time claims and average duration by bodily location of injury or disease

	Percentage of lost-time claims				Average duration (days)			
	2005/06	2006/07	2007/08	2008/09	2004/05	2005/06	2006/07	2007/08
All persons								
Upper limbs	35.3%	36.0%	35.4%	34.9%	56.8	58.7	58.5	72.7
Trunk	24.6%	23.9%	24.3%	23.5%	63.3	67.2	76.7	79.4
Lower limbs	20.8%	21.3%	21.6%	22.2%	51.1	55.4	66.6	72.2
Multiple	7.5%	7.5%	7.5%	8.0%	82.7	97.2	115.2	111.2
Head	7.1%	6.6%	6.4%	6.3%	19.1	19.2	26.4	38.9
Non-physical	2.1%	1.9%	2.2%	2.5%	108.1	112.6	127.5	135.0
Neck	1.7%	1.6%	1.7%	1.7%	61.1	103.6	51.1	72.2
Systemic	0.7%	1.1%	1.0%	1.0%	42.2	57.7	41.8	34.8
Unspecified	0.0%	0.0%	0.0%	0.0%	39.6	68.9	15.0	216.6
Males								
Upper limbs	36.9%	37.2%	37.0%	36.1%	51.0	49.0	51.8	65.4
Trunk	24.2%	23.7%	24.0%	23.6%	63.0	61.3	74.0	76.5
Lower limbs	21.7%	22.3%	22.2%	23.1%	49.7	53.7	63.7	73.5
Head	8.2%	7.8%	7.4%	7.2%	17.0	15.3	26.7	38.1
Multiple	5.8%	5.6%	5.6%	6.1%	78.2	96.2	110.3	129.4
Non-physical	1.0%	0.9%	1.2%	1.5%	102.7	93.6	127.5	136.6
Neck	1.6%	1.4%	1.6%	1.5%	58.8	121.3	37.8	64.6
Systemic	0.6%	0.9%	1.0%	1.0%	57.7	74.3	53.7	38.3
Unspecified	0.0%	0.0%	0.1%	0.0%	11.9	185.7	15.0	216.6
Females								
Upper limbs	31.7%	33.2%	31.9%	32.2%	73.4	85.4	75.8	91.8
Trunk	25.6%	24.3%	24.8%	23.4%	64.1	80.5	82.8	85.8
Lower limbs	18.8%	19.0%	20.2%	20.3%	55.3	60.1	74.5	69.0
Multiple	11.8%	12.1%	11.8%	12.2%	88.8	98.3	120.4	91.6
Non-physical	4.5%	4.0%	4.4%	4.7%	111.1	123.0	127.5	134.0
Head	4.5%	4.0%	4.1%	4.3%	28.8	36.3	25.0	42.1
Neck	2.0%	1.9%	1.8%	2.1%	65.2	70.1	73.9	86.7
Systemic	1.0%	1.4%	0.9%	0.8%	11.1	35.9	23.5	26.5
Unspecified	0.1%	0.0%	0.0%	0.0%	67.3	10.5	0.0	0.0

Percentage of lost-time claims and average duration by mechanism of injury or disease

Table 10.3: - Percentage of lost-time claims and average duration by mechanism of injury or disease

	Percentage of lost-time claims				Average duration (days)			
	2005/06	2006/07	2007/08	2008/09	2004/05	2005/06	2006/07	2007/08
All persons								
Body Stressing	37.9%	37.4%	37.4%	37.6%	72.6	79.3	83.6	90.5
Falls, Trips and Slips	21.0%	20.4%	21.0%	21.8%	64.1	67.6	77.1	82.3
Being Hit	20.7%	23.4%	22.3%	21.6%	41.3	39.8	51.9	62.1
Hitting Objects	10.8%	8.9%	9.1%	9.0%	20.9	25.5	23.7	34.5
Other and Unspecified	2.6%	2.8%	3.1%	2.6%	96.6	132.4	97.3	117.7
Mental Stress	2.1%	1.8%	2.2%	2.5%	106.2	112.4	129.2	134.9
Heat, Radiation & Electricity	2.3%	2.2%	2.1%	2.0%	17.2	22.8	20.7	26.2
Chemical Substances	1.9%	2.0%	1.8%	1.9%	27.0	19.0	22.0	16.5
Biological Factors	0.5%	0.8%	0.9%	0.9%	21.2	18.5	44.2	37.6
Sound and Pressure	0.1%	0.1%	0.1%	0.1%	11.4	23.4	59.9	45.0
Males								
Body Stressing	35.5%	35.1%	35.2%	35.7%	65.8	69.0	75.2	84.7
Being Hit	23.5%	27.0%	25.9%	24.6%	39.9	34.8	48.0	61.6
Falls, Trips and Slips	20.0%	18.6%	19.3%	20.3%	65.3	65.5	76.9	85.0
Hitting Objects	12.4%	10.2%	10.1%	10.2%	20.4	23.4	23.4	32.0
Other and Unspecified	2.7%	3.0%	3.2%	2.7%	101.3	152.8	104.4	114.6
Heat, Radiation & Electricity	2.4%	2.3%	2.2%	2.1%	20.1	23.3	14.0	26.5
Chemical Substances	1.9%	2.1%	1.8%	2.0%	21.9	16.3	15.5	16.3
Mental Stress	1.0%	0.9%	1.2%	1.5%	101.3	92.3	130.7	137.4
Biological Factors	0.4%	0.7%	0.9%	1.0%	27.9	25.1	63.3	51.1
Sound and Pressure	0.1%	0.1%	0.1%	0.1%	13.8	27.9	90.4	19.3
Females								
Body Stressing	43.4%	42.9%	42.5%	41.8%	86.3	99.3	99.3	101.3
Falls, Trips and Slips	23.5%	24.3%	24.7%	25.0%	61.7	71.7	77.3	77.6
Being Hit	14.1%	15.2%	14.0%	15.3%	47.0	59.4	67.9	64.3
Hitting Objects	7.1%	5.9%	6.7%	6.4%	23.2	34.3	25.2	42.8
Mental Stress	4.5%	4.0%	4.4%	4.7%	109.0	123.3	128.5	133.4
Other and Unspecified	2.6%	2.4%	3.1%	2.4%	81.4	84.1	77.3	125.0
Heat, Radiation & Electricity	2.2%	2.1%	1.8%	1.9%	8.6	21.3	37.2	25.5
Chemical Substances	1.8%	1.8%	1.8%	1.6%	46.0	25.8	39.5	17.1
Biological Factors	0.7%	1.1%	0.9%	0.7%	14.7	10.1	15.2	7.2
Sound and Pressure	0.1%	0.2%	0.1%	0.1%	3.3	15.7	9.1	122.0

Percentage of lost-time claims and average duration by agency of injury or disease

Table 10.4: - Percentage of lost-time claims and average duration by agency of injury or disease

	Percentage of lost-time claims				Average duration (days)			
	2005/06	2006/07	2007/08	2008/09	2004/05	2005/06	2006/07	2007/08
All persons								
Non-Powered Handtools & Appliances	23.9%	23.9%	21.8%	22.1%	52.8	59.4	57.7	66.0
Environmental	15.5%	16.2%	20.2%	21.0%	58.9	66.2	75.0	83.0
Material & Substances	17.3%	18.1%	18.6%	17.6%	48.5	52.9	56.1	61.5
Animal, Human & Biological	10.3%	9.7%	9.4%	10.1%	64.0	67.7	75.3	77.6
Mobile Plant & Transport	10.4%	11.0%	10.0%	9.5%	74.6	78.8	86.0	97.5
Others & Unspecified	5.9%	6.6%	7.0%	7.2%	83.4	81.3	87.6	99.7
Machinery & Fixed Plant	7.5%	7.2%	6.0%	5.5%	56.8	58.1	68.9	74.5
Powered Tools & Appliances	7.1%	5.3%	5.2%	5.2%	41.5	45.9	62.9	77.1
Chemicals & Chemical Products	1.9%	1.9%	1.7%	1.7%	53.7	42.2	35.4	48.1
Males								
Non-Powered Handtools & Appliances	24.3%	23.9%	22.3%	22.4%	50.1	50.9	53.6	63.0
Material & Substances	20.4%	21.3%	21.7%	20.7%	46.2	46.9	51.7	58.2
Environmental	13.6%	13.8%	18.5%	19.3%	58.9	63.1	69.5	86.6
Mobile Plant & Transport	12.4%	13.0%	11.4%	11.1%	71.7	76.3	82.1	92.5
Animal, Human & Biological	6.4%	6.2%	6.2%	6.9%	54.6	57.3	68.4	76.3
Machinery & Fixed Plant	8.9%	8.8%	7.2%	6.6%	56.2	54.1	69.9	69.4
Others & Unspecified	4.3%	5.2%	5.5%	5.9%	67.2	67.2	69.1	94.1
Powered Tools & Appliances	7.8%	5.8%	5.4%	5.4%	31.0	33.7	48.7	56.2
Chemicals & Chemical Products	2.0%	2.0%	1.8%	1.8%	60.7	40.6	29.8	50.6
Females								
Environmental	20.1%	21.7%	23.8%	24.5%	59.0	71.1	83.3	76.6
Non-Powered Handtools & Appliances	23.1%	23.8%	20.7%	21.4%	59.5	80.6	67.0	73.4
Animal, Human & Biological	19.5%	17.9%	16.9%	17.1%	71.5	75.7	80.9	78.8
Material & Substances	10.1%	10.5%	11.7%	11.2%	63.7	81.7	76.6	75.1
Others & Unspecified	9.8%	10.0%	10.5%	10.1%	102.3	95.6	109.7	106.5
Mobile Plant & Transport	5.8%	6.5%	6.9%	6.2%	88.7	91.3	103.8	116.6
Powered Tools & Appliances	5.7%	4.3%	4.8%	4.7%	82.2	85.4	106.4	129.9
Machinery & Fixed Plant	4.3%	3.7%	3.3%	3.3%	60.5	77.7	63.0	99.2
Chemicals & Chemical Products	1.7%	1.7%	1.5%	1.4%	27.1	46.6	50.7	40.9

Section 11: Age

Lost-time claims by age group

Table 11.1: - Number of lost-time claims and average working days lost by age group

	Number lost-time claims				Average working days lost			
	2005/06	2006/07	2007/08	2008/09	2004/05	2005/06	2006/07	2007/08
All persons								
15-19	1403	1515	1422	1211	18.9	22.2	24.7	33.1
20-24	2184	2186	2103	1988	32.4	30.9	29.4	46.8
25-34	3925	3793	3628	3682	49.3	54.8	57.9	60.8
35-44	4422	4225	4298	4152	71.5	71.2	79.1	85.1
45-54	4030	4069	4275	4157	75.9	85.0	95.2	98.0
55-59	1328	1420	1486	1525	76.7	75.7	82.8	102.4
60-64	605	661	779	845	61.3	69.0	81.8	86.5
65+	164	173	189	220	40.4	53.2	44.5	62.1
Unknown	7	12	12	6	15.7	27.0	13.3	10.8
Total	18068	18054	18192	17786	58.4	62.1	67.7	76.0
Male								
15-19	1095	1159	1107	914	17.7	19.4	26.3	30.1
20-24	1670	1708	1606	1501	31.4	28.3	28.9	48.4
25-34	3036	2936	2773	2798	47.1	49.3	55.9	59.0
35-44	3095	2919	2994	2851	65.9	66.8	71.8	84.1
45-54	2381	2405	2573	2398	70.7	73.2	88.6	94.1
55-59	840	889	899	871	76.6	72.5	75.9	99.1
60-64	434	448	522	585	64.2	61.9	78.1	81.5
65+	123	120	144	171	42.8	55.1	47.1	64.7
Unknown	4	9	4	4	7.0	40.5	12.8	19.3
Total	12678	12593	12622	12093	53.9	54.7	61.5	72.1
Female								
15-19	308	356	315	297	23.1	32.1	19.5	43.5
20-24	514	478	497	487	36.1	39.3	31.1	41.6
25-34	889	857	855	884	57.7	73.8	64.9	66.3
35-44	1327	1306	1304	1301	84.2	81.5	95.4	87.4
45-54	1649	1664	1702	1759	83.9	102.0	104.6	104.0
55-59	488	531	587	654	76.9	81.2	94.5	107.5
60-64	171	213	257	260	52.7	87.1	89.5	96.5
65+	41	53	45	49	34.3	47.6	38.6	53.9
Unknown	3	3	8	2	21.9	9.0	15.0	6.5
Total	5390	5461	5570	5693	69.5	79.5	81.9	84.8

*The provision of a date of birth is not mandatory

Table 11.2: - Incidence and frequency rates by age group

	Incidence rate*				Frequency rate**			
	2005/06	2006/07	2007/08	2008/09	2005/06	2006/07	2007/08	2008/09
All persons								
15-19	1.5	1.6	1.6	1.3	13.7	14.0	13.6	11.6
20-24	1.9	1.8	1.7	1.6	11.7	10.9	10.1	9.6
25-34	2.0	1.8	1.7	1.7	10.5	10.0	9.3	8.7
35-44	2.1	1.9	1.9	1.8	11.6	10.6	10.2	10.0
45-54	2.0	1.9	2.0	1.8	10.9	10.4	10.8	10.0
55-59	1.9	2.0	1.9	1.9	10.8	10.8	11.1	10.8
60-64	1.7	1.7	1.7	1.8	10.3	10.6	9.9	10.6
65+	1.2	1.2	1.1	1.1	8.6	8.7	7.8	9.2
Total	1.9	1.8	1.8	1.7	11.2	10.6	10.4	9.8
Male								
15-19	2.4	2.5	2.5	2.0	18.9	18.7	18.8	15.2
20-24	2.9	2.8	2.6	2.3	15.9	15.1	14.2	12.2
25-34	2.7	2.6	2.4	2.2	13.0	12.3	11.3	10.4
35-44	2.7	2.4	2.4	2.3	12.6	11.1	10.8	10.6
45-54	2.3	2.2	2.4	2.1	10.7	10.0	11.0	9.9
55-59	2.2	2.3	2.1	2.0	10.5	10.7	10.6	10.1
60-64	2.0	2.0	2.0	2.0	11.1	10.4	10.4	10.8
65+	1.3	1.2	1.2	1.2	7.7	8.0	7.6	9.5
Total	2.5	2.4	2.3	2.1	12.7	11.9	11.7	10.8
Female								
15-19	0.7	0.8	0.7	0.6	7.0	7.7	6.8	6.8
20-24	0.9	0.8	0.8	0.9	6.3	5.4	5.3	5.8
25-34	1.0	0.9	0.9	0.9	6.4	6.2	5.9	5.7
35-44	1.3	1.3	1.3	1.2	9.9	9.5	9.1	8.9
45-54	1.6	1.6	1.6	1.6	11.1	10.9	10.4	10.2
55-59	1.6	1.6	1.7	1.7	11.6	10.8	12.2	11.7
60-64	1.2	1.4	1.2	1.4	9.0	11.2	8.9	10.4
65+	1.0	1.1	0.9	0.8	13.7	10.6	9.0	8.2
Total	1.2	1.2	1.2	1.2	8.8	8.6	8.3	8.3

*Number of lost-time injury/disease claims per one hundred employees

** Number of lost-time injury/disease claims per million hours worked

Appendix A: Glossary

Accident year	Accident year refers to the financial year in which the accident event leading to a claim occurred, irrespective of when the claim was reported, paid or finalised.
Age	A worker's age is based on chronological age (in years) at the date of injury.
Agency of occurrence	The agency of occurrence refers to the object, substance or circumstance directly involved in inflicting the injury or disease. A comprehensive list of inclusions and exclusions for each classification used in this report is available from the <i>National Occupational Health and Safety Commission's Type of Occurrence Classification System 2.1</i> (available online at safeworkaustralia.gov.au)
Average cost	The average cost represents an estimate of costs for unfinalised claims, plus the total cost of finalised claims, divided by the number of lost-time claims. Average cost is attributed to the year in which a claim was lodged and is associated with claims data.
Bodily location	The bodily location of injury/disease identifies the part of the body affected by the most serious injury or disease. A comprehensive list of inclusions and exclusions for each classification used in this report is available from the <i>National Occupational Health and Safety Commission's Type of Occurrence Classification System 2.1</i> (available online at safeworkaustralia.gov.au)
Claims data	<p>Information pertaining to workers' compensation claims is reported to WorkCover WA by approved insurers and self-insurers. Information is collated based on the financial year in which a claim was lodged and is in contrast to claim payments. More information can be found in the 'Nature of the information' section on page 7 of this report. For the purposes of time-series comparisons, certain types of claims were excluded from claims data:</p> <ul style="list-style-type: none"> • journey claims between home and work • asbestos-related diseases, including mesothelioma and pneumoconiosis • duplicated or disallowed (rejected) claims <p>Lost-time claims (for claims data only) also exclude:</p> <ul style="list-style-type: none"> • claims with less than one working day absence from work • claims with less than one whole shift absence from work.

Claims payments	<p>Categories are based on WorkCover WA's <i>Guidelines for Completing Form WC 101</i>. Claims payments are in contrast with claims data as they do not reflect liabilities incurred but not yet paid. Claim payment information is collated based on the financial year during which payment was made, and includes:</p> <ul style="list-style-type: none"> • weekly payments (payments made for absences from work) • redemptions (lump sum payments made under Schedule 1) • specific injuries (lump sum payments made under Schedule 2) • fatal (including funeral expenses) • medical practitioners and specialists (consultation and treatment expenses rendered by general practitioners and medical specialists) • hospital expenses (hospital accommodation and hospital treatment) • other treatment (comprises payments made under clauses 17(1)(3), (4), (5) and (6) of Schedule 1 of the Act, other than medical and hospital expenses) • vocational rehabilitation (comprises payments made under clause 17 (1a) of Schedule 1 of the Act in respect of counselling, occupational training, work assessment, aids and appliances) • miscellaneous (includes general items that do not fit in any other category, for example travelling, meals and lodgings, under clause 19 of Schedule 1) • legal expenses (comprises the cost of legal advice and representation incurred by approved insurers or exempt employers, witness fees and the costs of these services incurred by the worker where the approved insurer or exempt employer is ordered to meet the costs) • common law and other Acts.
Common law claim	A workers' compensation claim in which a worker seeks damages against their employer in respect of a disability, if the disability was caused by negligence of the employer or other tort and compensation has been paid or is payable.
Days lost	The days lost of a claim is the average time lost (working days) for workers' compensation claims and is calculated based on days lost estimates for unfinalised claims and actual days lost for finalised claims.
Dispute	Disputes can occur at any stage of a claim in relation to a number of matters. For example, once a claim has been submitted by a worker, an insurer may dispute liability.
Disease	Subsection 5(1) of the Act defines disease as including any physical or mental ailment, disorder, defect, or morbid condition whether of sudden or gradual development. (See also Injury).
Exempt employer	See self-insurer.
Frequency rate	Frequency rate is the number of lost-time claims per million hours worked and indicates the prevalence of workers' compensation claims. It is based on the number of hours worked by employed persons in Western Australia as supplied by the Australian Bureau of Statistics.

Incidence rate	The incidence rate is the number of lost-time claims per hundred employees (part-time, full-time, casual, and seasonal) in Western Australia.
Industry	Industry classification is based on the <i>Australian and New Zealand Standard Industrial Classification (ANZSIC) 1993</i> , published by the Australian Bureau of Statistics. The ANZSIC system groups together businesses that carry out similar economic activities and is structured into a hierarchy of units reflecting different levels of description.
Injury	Injury is defined under subsection 5(1) of the Act as: <ol style="list-style-type: none"> 1. A personal injury by accident arising out of or in the course of employment or while acting on the employer's instructions. 2. A disabling industrial disease (for example, poisoning, lung disease, etcetera). 3. A disease contracted in the course of employment or the recurrence or aggravation of a pre-existing disease where the employment contributed to a significant degree. (See also Disease).
Injury management	Injury management is a legislated framework involving the injured worker, employer and treating medical practitioner working together to assist the worker to stay at work or return to work following a workplace injury.
Insurer	Insurers comprise of those who are approved under section 161 of the Act to underwrite WorkCover policies, and also includes the Insurance Commission of Western Australia (formerly the State Government Insurance Commission).
Journey claims	Up to 24 December 1993, workers' compensation claims could be lodged for injuries sustained while travelling to and from work. Journey claims have since been excluded from claims data.
Lost-time claims	Lost-time claims are claims for which the injury or disease results in an absence from work of at least one day or shift.
Manual handling injuries	Manual handling injuries are a component of the 'body stressing' group in the mechanism of injury or disease classification. Manual handling includes muscular stress while lifting, carrying or putting down objects, muscular stress while handling objects other than lifting, carrying or putting down, and repetitive movements with low muscle loading.
Mechanism of injury or disease	The mechanism of injury or disease refers to the action, exposure or event that best describes the circumstances that resulted in the most serious injury or disease. A comprehensive list of inclusions and exclusions for each classification used in this report is available from the <i>National Occupational Health and Safety Commission's Type of Occurrence Classification System 2.1</i> (available online at safeworkaustralia.gov.au)

<p>Nature of injury or disease</p>	<p>The nature of injury or disease classification is intended to identify the most serious injury or disease suffered by the worker. The injury or disease suffered is generally physical, although the classification includes categories for mental illness. Injury results from a single traumatic event where the harm or hurt is immediately apparent (for example, burns resulting from an acid splash) or conversely, disease resulting from repeated or long-term exposure to an agent (for example, noise induced hearing loss). The full list of inclusions/exclusions for each of the categories used in this report is available from the <i>National Occupational Health and Safety Commission's Type of Occurrence Classification System 2.1</i> (available online at safeworkaustralia.gov.au)</p>
<p>Recommended premium rates (average)</p>	<p>The average recommended premium rate is calculated using recommended premium rates for all industry classifications and not the actual premium rates charged by approved insurers (which may be surcharged or discounted).</p>

Appendix B: Legislative amendments affecting 2005/06 – 2008/09 data

Legislative amendments may have a direct or indirect effect on statistical information presented in this report. A summary of the major legislative amendments affecting workers' compensation in Western Australia are presented below as a guide in order from the most recent amendments to the oldest amendments. For a complete understanding of the legislative amendments readers should refer to the Act.

Workers' Compensation Reform Act 2004 (Commenced 4 January 2005)

- Cap on statutory weekly payments of compensation increased from 1.5 to 2 times the Australian Bureau of Statistics Average Weekly Earnings.
- The period before step-down in weekly payments increased from 4 to 13 weeks.
- From week 14, the step-down for award workers was amended to include allowances paid on a regular basis and non-award workers payments to be calculated at 85% of their average weekly payments over the 12 months prior to their injury.
- Shift of focus for WorkCover WA from promoting rehabilitation to injury management and the Act renamed accordingly.
- Statutory authority for workers' compensation in Western Australia transferred from the Workers' Compensation and Rehabilitation Commission to the WorkCover WA.
- The Premium Rates Committee and the Insurers Advisory Committee were abolished and responsibility for the premium rating process was transferred to the WorkCover WA Board.
- The definition of 'industrial award' was changed to include enterprise bargaining agreements and enterprise orders.
- The total amount available for funeral expenses increased.
- Payment of medical and other expenses can be approved if they are "likely to be incurred", rather than just those actually incurred.
- Workers may apply for a possible extension of medical and related entitlements when 60% of their entitlement has been exhausted.

Workers' Compensation and Rehabilitation Amendment Act 2000 (commenced November 2000).

- Injured workers are not precluded from making an election where a question regarding the degree of disability, properly referred, has not been agreed or determined before the termination day.

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PricewaterhouseCoopers Actuarial Pty Ltd (April 2010). **WorkCover WA Actuarial Assessment of the Recommended Premium Rates for 2010/11**, Perth, Western Australia. Available on www.workcover.wa.gov.au

Workers' Compensation and Injury Management Act 1981. Available on www.slp.wa.gov.au, or by contacting the State Law Publisher.

Disclaimer

Due to the dynamic nature of workers' compensation claims, the interpretation of data contained within this report (the data) must be undertaken with some caution. Data users are advised to carefully consider the provisional nature of the data before using it for decisions that concern personal or public safety or the conduct of business that involves substantial monetary or operational consequences.

The accuracy or reliability of the data is not guaranteed or warranted in any way. WorkCover WA has made a reasonable effort to ensure that the data is up-to-date, accurate, complete, and comprehensive at the time of disclosure. This data reflects data reported to this agency by insurers for the reporting periods indicated. Data users are responsible for ensuring by independent verification its accuracy, currency or completeness.

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Information concerning the accuracy and appropriate uses of the data or concerning other workers' compensation data may be obtained by contacting WorkCover WA.

Further statistical information

WorkCover WA and WorkSafe produce a number of statistical publications each year. These are made publicly available and can be located at, www.workcover.wa.gov.au and www.worksafe.wa.gov.au respectively.

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