



Long duration claims in the WA workers' compensation scheme 2009/10 to 2012/13

Statistical report
June 2014

Data used in this report was extracted from the WorkCover WA claims database on 17 October 2014, and reflects workers' compensation claim activity that occurred between 2009/10 and 2012/13.

WorkCover WA

Long duration claims in the WA workers' compensation scheme: 2009/10 to 2012/13

Perth, Western Australia: Western Australian Government

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Long duration claims statistical report

Long duration claims are commonly defined as workers' compensation claims which involve 60 days/shifts or more off work. Although these claims represent only a minor proportion of total claims within a workers' compensation scheme, these claims account for the majority of costs. Reviews of workers' compensation literature highlight a typical reporting pattern of 20% of workers on long term claims accounting for 80% of workers' compensation claim costs. As a result, long duration claims have been identified as a focal point for the management of costs within workers' compensation schemes. As shown in Figure 1.0 (p. 5), the "80/20" pattern is also evident in the Western Australian (WA) scheme, with an average of 26% of lost-time claims accounting for 83% of lost-time claim costs over the period 2009/10 to 2012/13.

For the purposes of this report, journey claims between home and work, asbestos-related diseases and fatalities are excluded.

This report provides an analysis of long duration claims within the WA workers' compensation scheme at four levels:

- overall scheme (claim numbers, costs, frequency and incidence rates).
- claimant information (age, gender, occupation).
- injury attributes (nature and mechanism of injury, bodily location and agency of occurrence).
- employer information (industry, business size).

Summary of key findings: 2009/10 to 2012/13

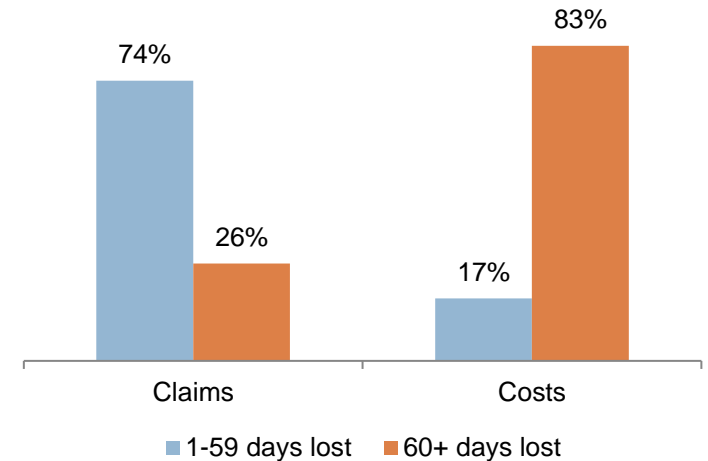
- The number of long duration claims increased by 33% between 2009/10 to 2012/13. There was also an increase in the frequency (number of claims per one million hours worked) and incidence (number of claims per 100 employees) rates during the period (as there are higher proportions of unfinalised claims in recent years, figures for 2012/13 should be regarded as preliminary).
- Whilst the proportion of long duration claims increased from 24% in 2009/10 to 28% in 2012/13, the proportion of costs* associated with long duration claims increased from 82% to 84% (Figure 1.5).
- Over the four year period, real payments increased by 4%. The most notable increases in real payment types were for income payments (up 20%) and allied health and vocational rehabilitation (up 16%).
- Comparison of claim numbers and costs highlight that claims of 180+ days duration incurred the greatest costs. Between 2009/10 and 2012/13, these claims represented 13% of all lost time claims but accounted for 64% of all costs.
- In 2012/13, the 60-64 and 65+ year age groups had the highest rates of long duration claims per million hours worked (frequency rate).
- The most common type of injury associated with long duration claims is sprains and strains, accounting for around 60% of long duration claims each year.
- Health care and social assistance and the Construction industry had the highest number of long duration claims over the four year period.
- Larger sized businesses (50+ employees) had the most growth in long duration claims (40%) from 2009/10 to 2012/13. Smaller sized businesses (less than 50 employees) had an increase in long duration claims by 23%.

* Total estimated costs are subject to significant development as claims mature, therefore information for the most recent year is still preliminary.

Section 1: Overall scheme
Scheme overview

Key scheme indicators	2009/10	2010/11	2011/12	2012/13	Trend^
Long duration claim numbers*					
Long duration claim numbers	3,875	4,357	4,766	5,142	▲
Proportion of lost time claims	24%	25%	26%	28%	▲
Frequency rate	2.12	2.30	2.33	2.42	▲
Incidence rate	0.36	0.40	0.41	0.42	▲
Long duration claim costs* - based on insurer received date					
Long duration claim costs (\$m)	442.9	533.6	615.8	647.5	▲
Proportion of lost time claim costs	82%	83%	84%	84%	■
Long duration claim (real) payments - based on transaction date					
Allied Health and Voc Rehab (\$m)	46.7	47.1	49.9	54.0	▲
Common Law (\$m)	75.9	58.0	54.1	42.6	▼
Income Payments (\$m)	224.4	230.0	241.0	269.7	▲
Lump Sums (\$m)	107.9	95.5	100.3	104.6	■
Medical or Hospital (\$m)	64.9	63.4	69.3	71.3	▲
Misc (\$m)	52.9	53.8	56.3	55.6	▲
<i>Total payments (\$m)</i>	<i>572.7</i>	<i>547.8</i>	<i>570.9</i>	<i>597.8</i>	■

Figure 1.0: Proportions of numbers and costs for claims received by insurers between 2009/10 and 2012/13



^Legend

- ▲ Increasing
- Stable
- ▼ Decreasing

* Data for claim numbers and costs is subject to revision as claims mature.

Section 1: Key indicators
Claim numbers

Summary:

- Between 2009/10 to 2012/13, the number of long duration claims rose by 33% despite the number of lost time claims* increasing by only 10%.
- As shown in Figure 1.2, all but the 1-4 days lost duration groups increased in claim numbers between 2009/10 to 2012/13, particularly the 120-179 days (30%) and 180+ days groups (40%).

Figure 1.1: Long duration claim numbers and total lost time claims

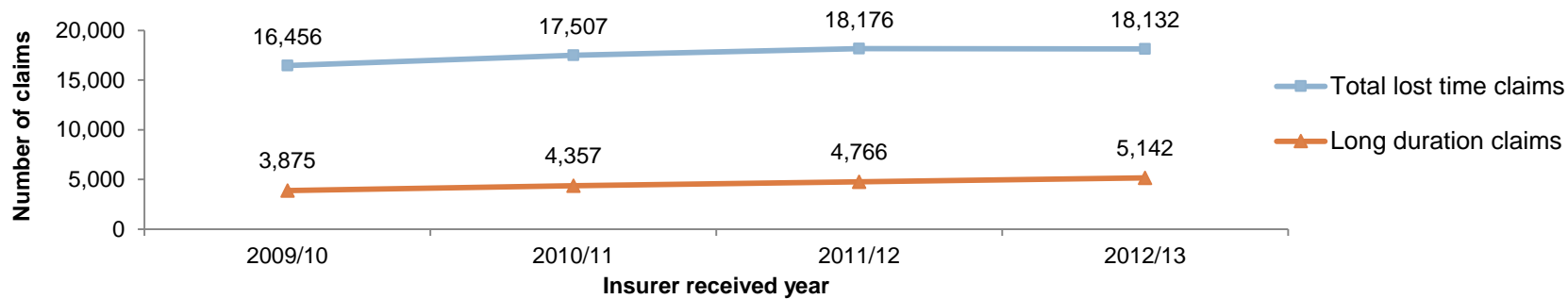
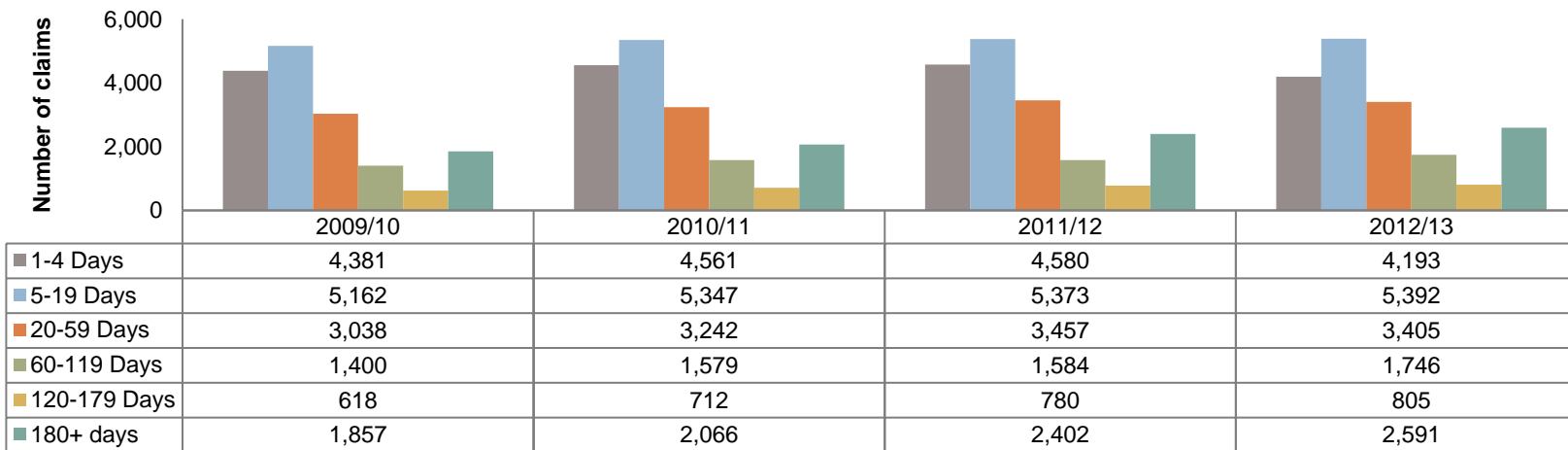


Figure 1.2: Total lost time claim numbers by days lost group



* See Definitions for further explanation.

Section 1: Key indicators
Frequency and incidence

Summary:

- Between 2009/10 and 2012/13, the number of long duration claims per million hours worked (frequency rate*) rose from 2.12 to 2.42 while the frequency rate for claims of short duration claims (1-59 days lost) decreased from 6.90 to 6.12.
- During this time, the rate of long duration claims per 100 employees (incidence rate*) slightly increased, as shown in Figure 1.4.

Figure 1.3: Frequency rates for short and long duration lost time claims

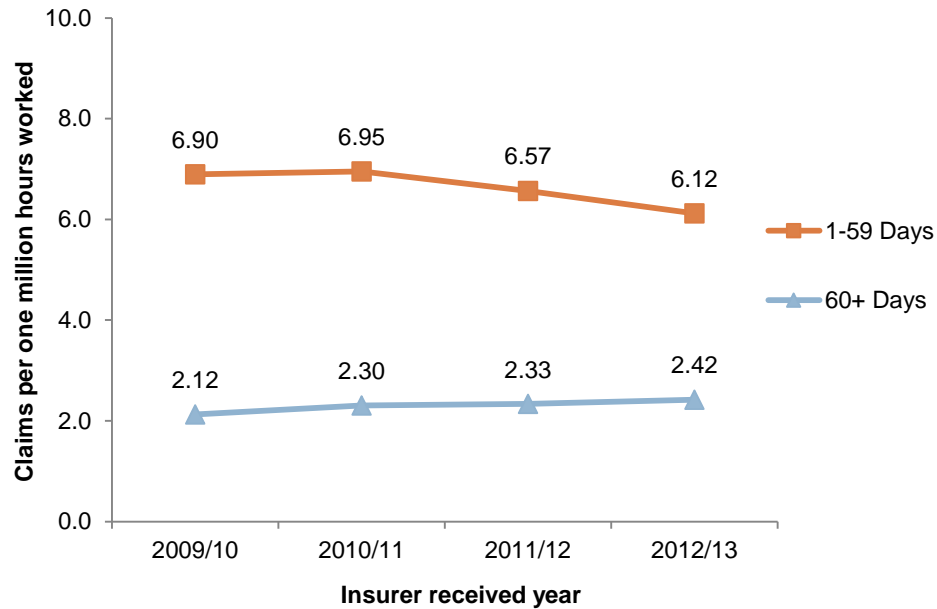
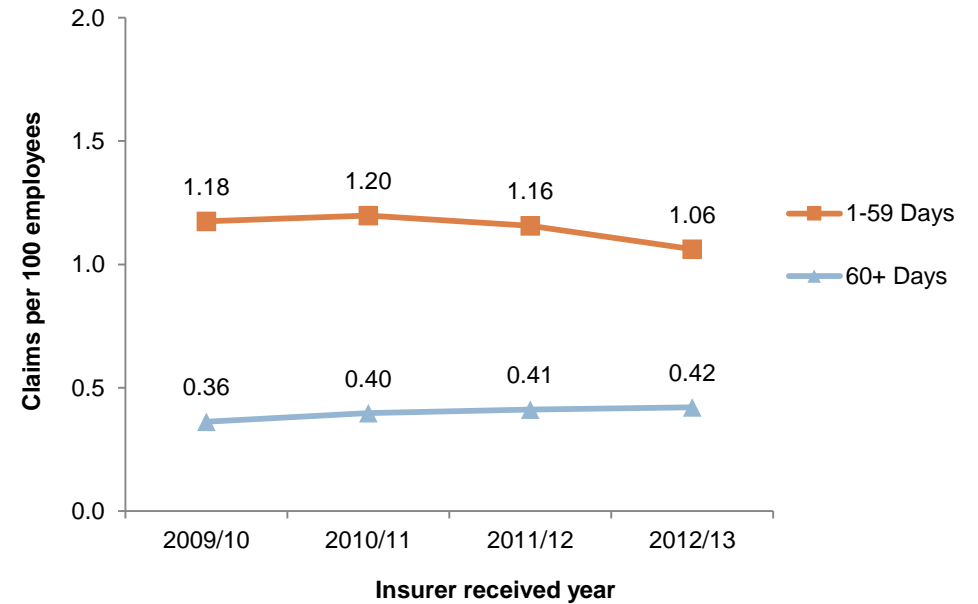


Figure 1.4: Incidence rates for short and long duration lost-time claims



* See Definitions for further explanation.

Section 1: Key indicators
Proportion of claims and costs

Summary:

- Figure 1.5 illustrates that long duration claims accounted for the majority of lost time claim costs (84%) for 2012/13.
- Between 2009/10 and 2012/13, Figure 1.6 highlights that 180+ day duration claims accounted for 13% of lost time claim numbers but accounted for 64% of total lost time claim costs.

Table 1.1: Number and costs of lost time claims: 2009/10 to 2012/13

Data	Claim numbers				Claim costs (\$m)			
	2009/10	2010/11	2011/12	2012/13	2009/10	2010/11	2011/12	2012/13
Long duration claims	3,875	4,357	4,766	5,142	442.9	533.6	615.8	647.5
All lost time claims	16,456	17,507	18,176	18,132	542.1	642.0	729.4	769.4
Proportion of long duration claims to all lost time claims	23.5%	24.9%	26.2%	28.4%	81.7%	83.1%	84.4%	84.2%

Figure 1.5: Proportion of long duration claims to all lost time claims: 2009/10 to 2012/13

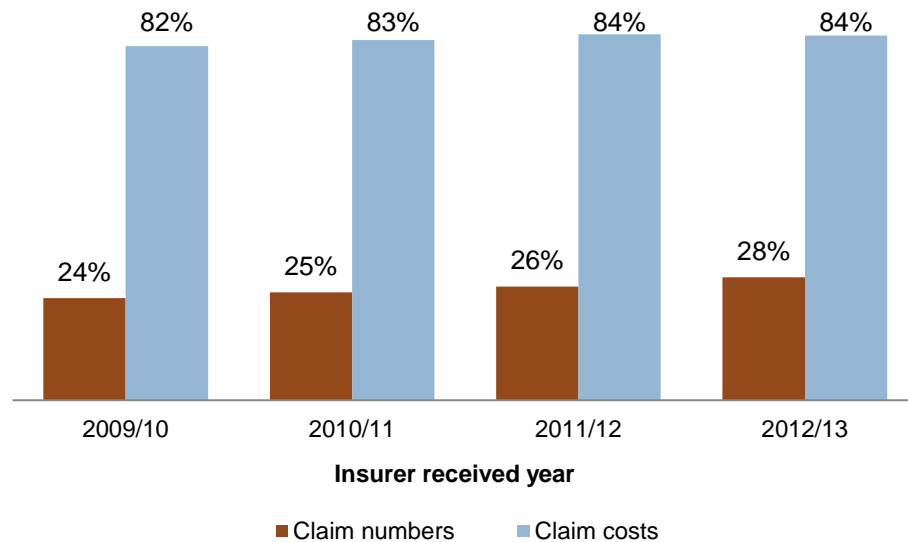
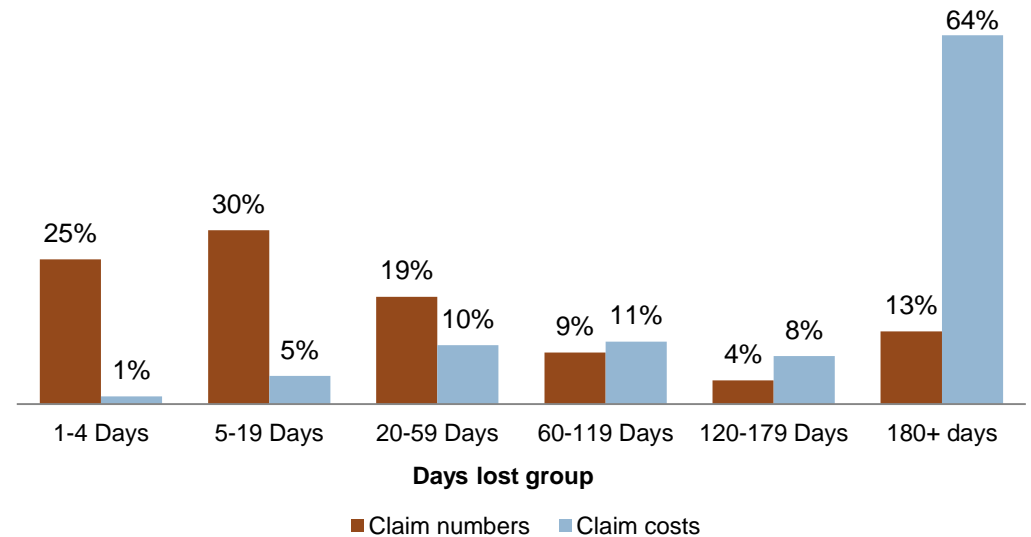


Figure 1.6: Proportion of lost time claims and costs by days lost group: 2009/10 to 2012/13



Section 1: Key indicators
Claim payments

Summary:

- Total payments associated with long duration claims increased by 4% between 2009/10 to 2012/13. Note that these figures have been adjusted for inflation.
- As shown in Figure 1.7, there was a significant decrease in common law payments (44%) over the four year period. Income payments experienced the largest increase (20%) between 2009/10 and 2012/13.
- In 2012/13, 45% of payments for long duration claims were for income replacement, 18% for lump sums and 7% for common law, as illustrated in Figure 1.8.

Figure 1.7: Long duration claim (real) payments

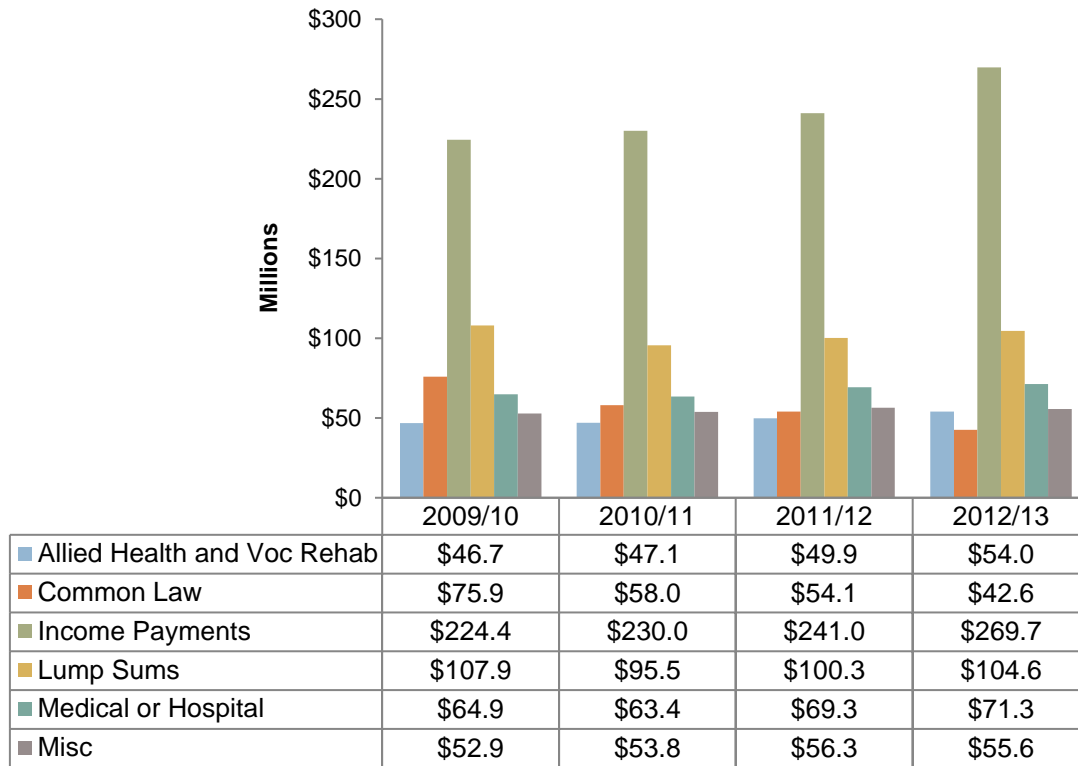
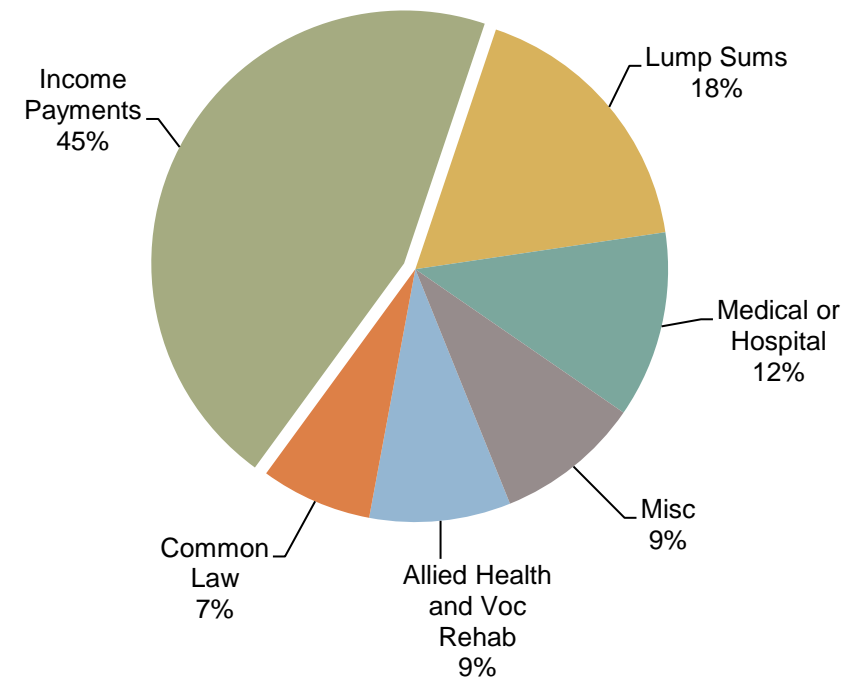


Figure 1.8: Long duration claim (real) payments: 2012/13

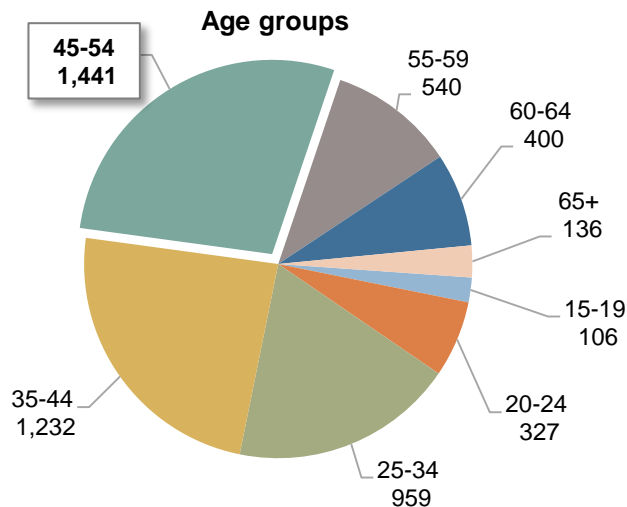
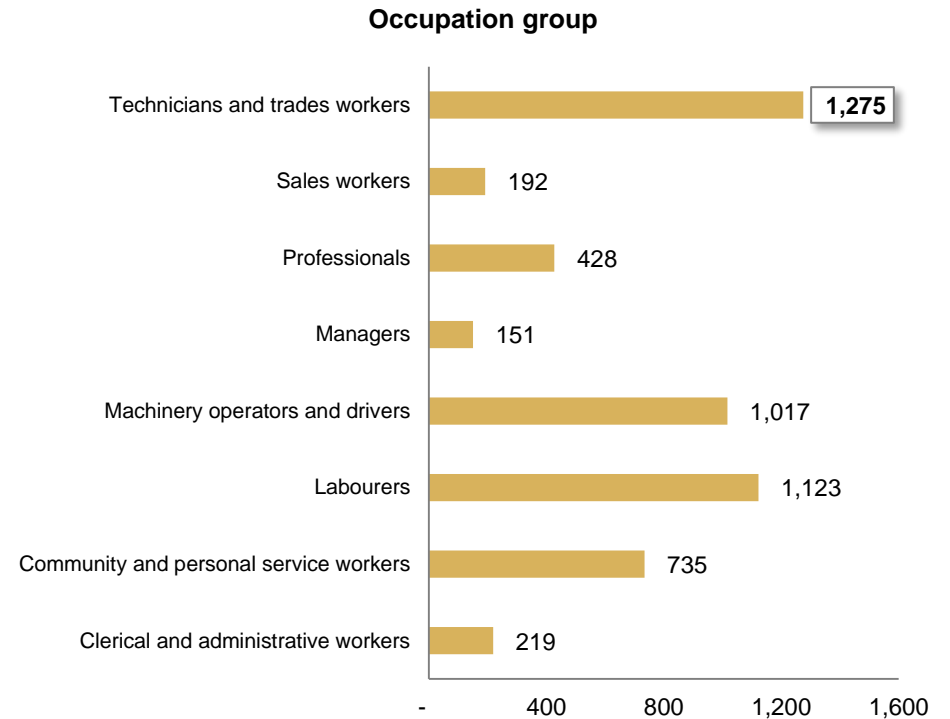
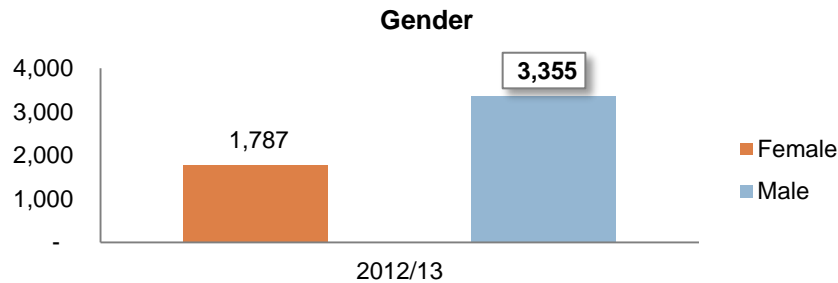


Section 2: Claimant characteristics
Overview

Table 2.1: Highest proportion of long duration claims by claimant characteristics: 2009/10 to 2012/13

	Gender		Age		Occupation	
2009/10	Male	62%	45-54 age group	33%	Labourers	25%
2010/11	Male	64%	45-54 age group	33%	Labourers	25%
2011/12	Male	64%	45-54 age group	32%	Labourers	23%
2012/13	Male	65%	45-54 age group	29%	Technicians and trades workers	25%

Highest long duration claim numbers by claimant characteristics: 2012/13



Section 2: Claimant characteristics
Gender

Summary:

- Males incurred the largest numbers of long duration claims, which is reflective of the proportion of males to females within the workforce. The number of long duration claims for males and females have steadily grown between 2009/10 and 2012/13, as shown in Figure 2.1.
- For 2012/13, males had a higher rate of long duration claims per million hours worked (frequency rate) than females, as illustrated in Figure 2.2.

Figure 2.1: Number of long duration claims by gender: 2009/10 to 2012/13

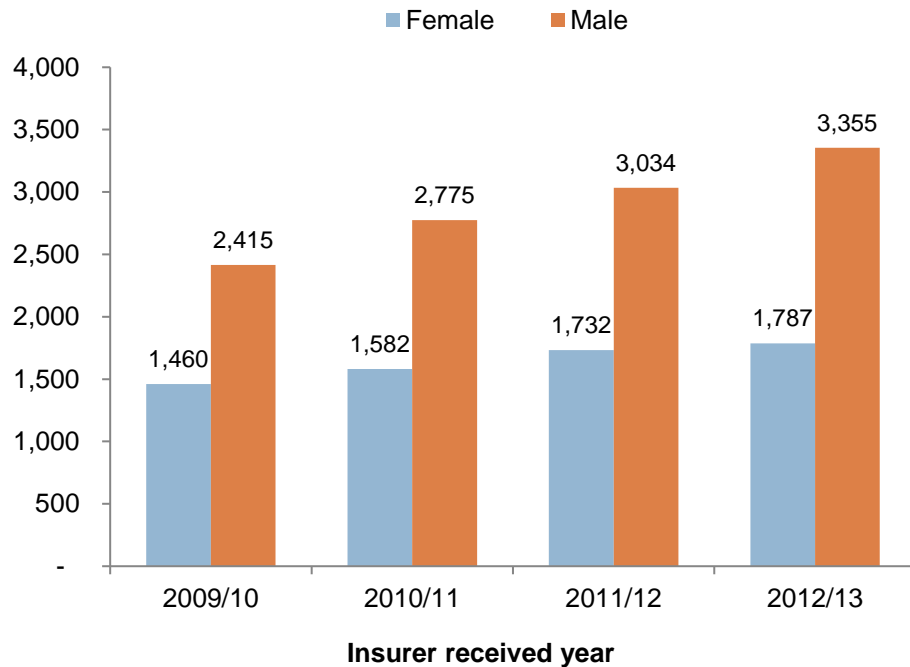
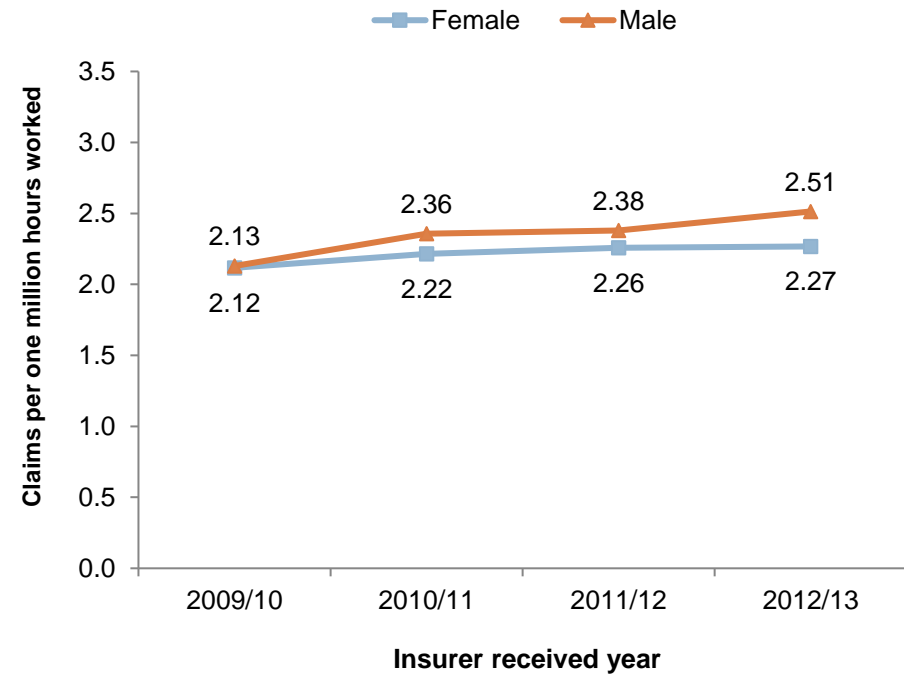


Figure 2.2 Frequency rate of long duration claims by gender: 2009/10 to 2012/13



Section 2: Claimant characteristics
Gender

Summary:

- Males consistently had the highest average long duration claim costs from 2009/10 to 2012/13. In 2012/13, average long duration claim costs for males was \$133,661.
- In 2012/13, males accounted for 69% of total long duration claim costs, as shown in Figure 2.4.
- Total long duration claim costs increased by 59% for males and increased by 24% for females between 2009/10 and 2012/13.

Figure 2.3: Average long duration claim costs by gender: 2009/10 to 2012/13

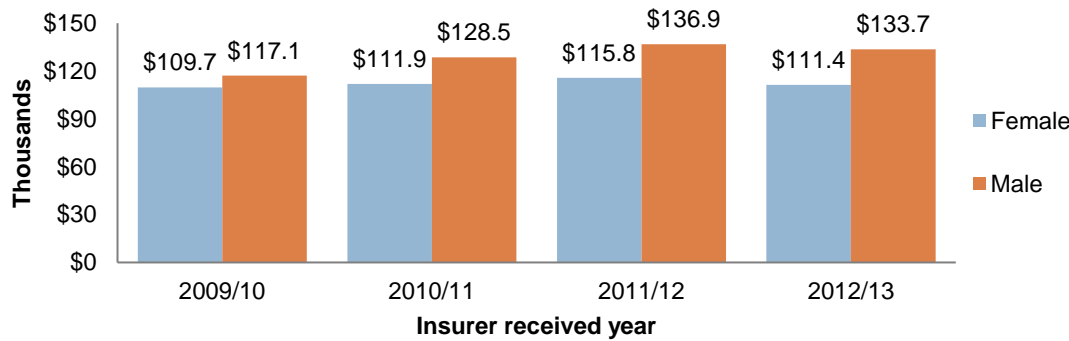


Figure 2.4: Proportion of total long duration claim costs by gender: 2012/13

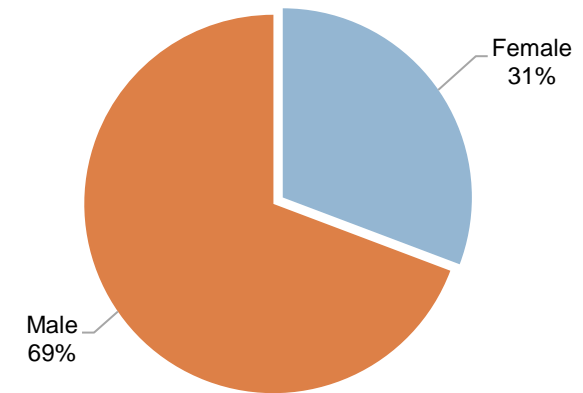
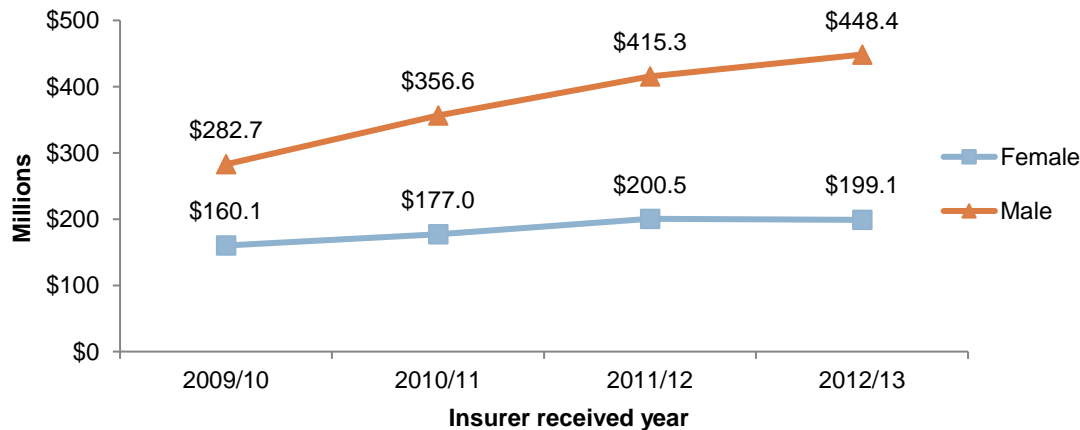


Figure 2.5: Total cost of long duration claims by gender: 2009/10 to 2012/13



Section 2: Claimant characteristics
Age

Summary:

- As shown in Figure 2.6, all age groups had an increase in the number of long duration claims over the four year period. The 25-34, 60-64, and 65+ age groups experienced the highest increase in the number of long duration claims (51%, 45% and 55% respectively).
- In 2012/13, the 60-64 age group had the highest frequency rate (3.96) followed by the 65+ age group (3.63). The 15-19 and 20-24 age groups had the lowest frequency rates (1.17 and 1.42 respectively) in 2012/13.

Figure 2.6: Number of long duration claims by age group: 2009/10 to 2012/13

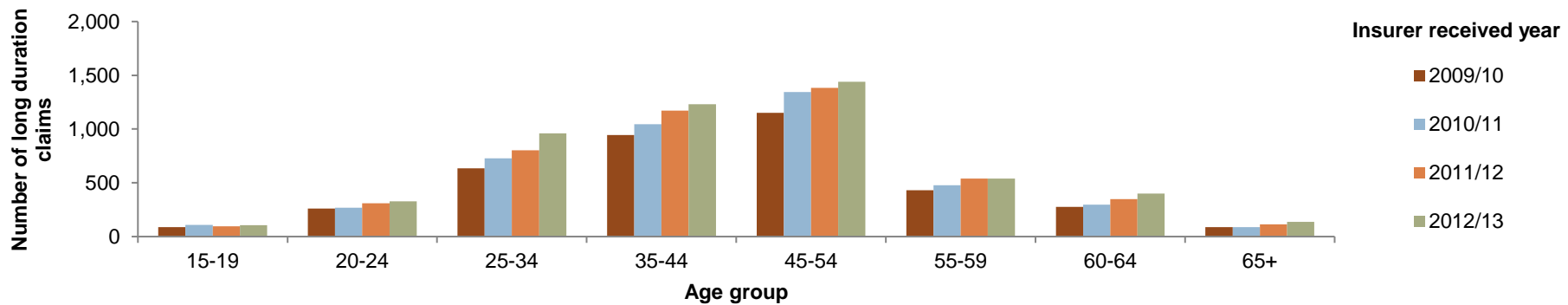
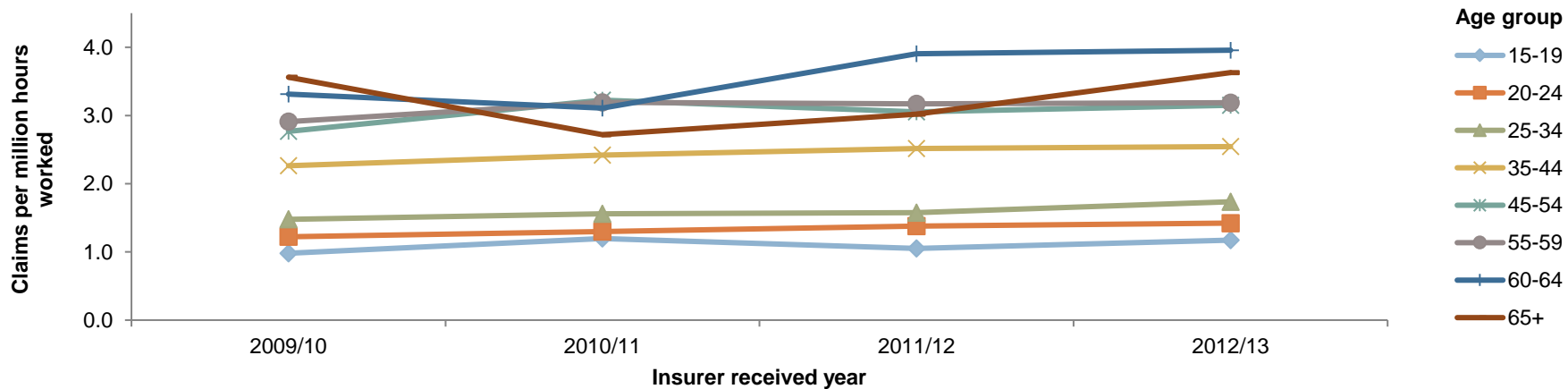


Figure 2.7: Frequency rate of long duration claims by age group: 2009/10 to 2012/13



Summary:

- Figure 2.8 shows that the 35-44 year age group had the highest average long duration claim costs in 2012/13 (\$136,741).
- As illustrated in Figure 2.9, in 2012/13, the 45-54 year age group accounted for the highest proportion of total long duration claims costs (29%). The 35-44 and 25-34 year age groups accounted for 26% and 18% of total long duration claim costs respectively.

Figure 2.8: Average long duration claim costs by age group: 2009/10 to 2012/13

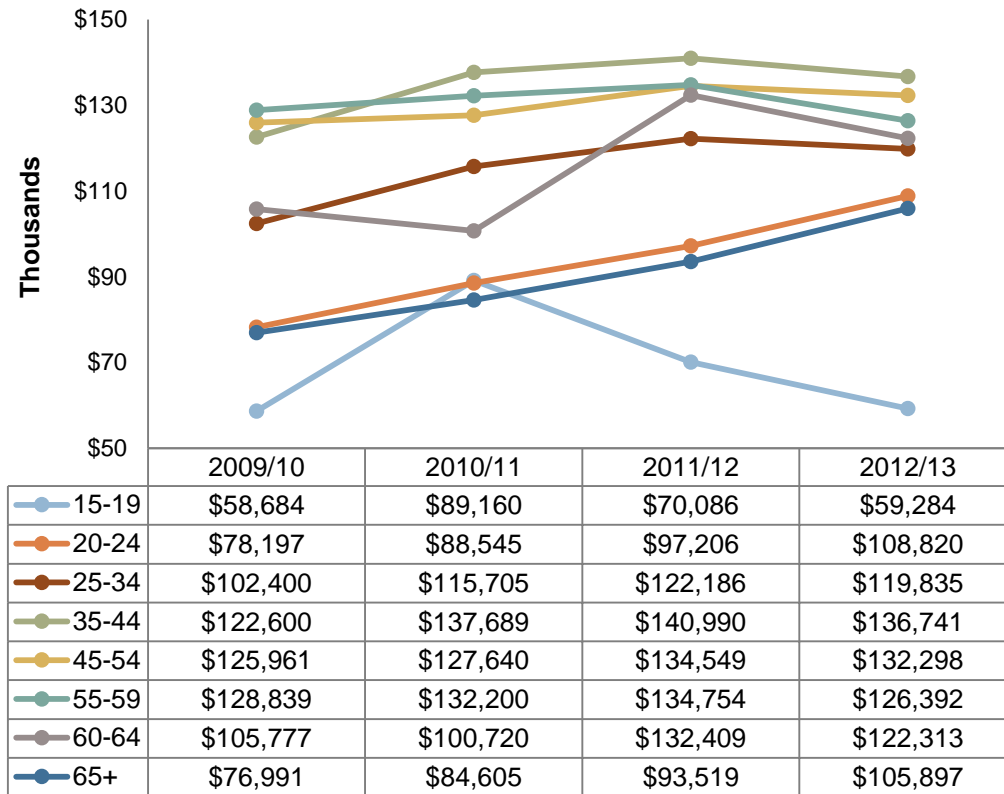
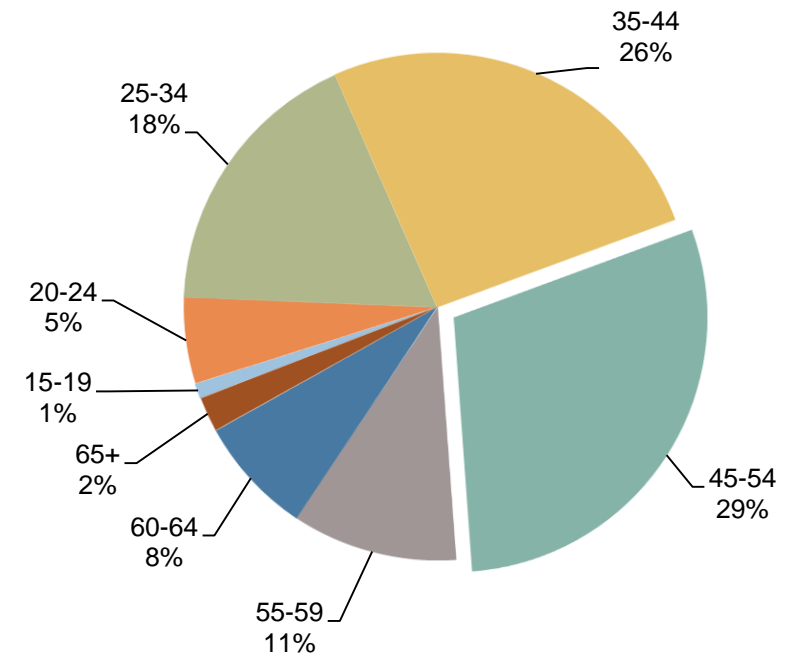


Figure 2.9: Proportion of total long duration claim costs by age group: 2012/13



Section 2: Claimant characteristics
Occupation

Summary:

- As shown in Figure 2.10, all occupation groups had an increase in the number of long duration claims from 2009/10 to 2012/13 (33% overall). Technicians and trade workers had the greatest growth in long duration claims for this period (67%).
- Technicians and trade workers also had the highest proportion of long duration claims for 2012/13 (25%) followed by Labourers (22%) and Machinery operators and drivers (20%), as illustrated in Figure 2.11.

Figure 2.10: Long duration claims by occupation group: 2009/10 to 2012/13

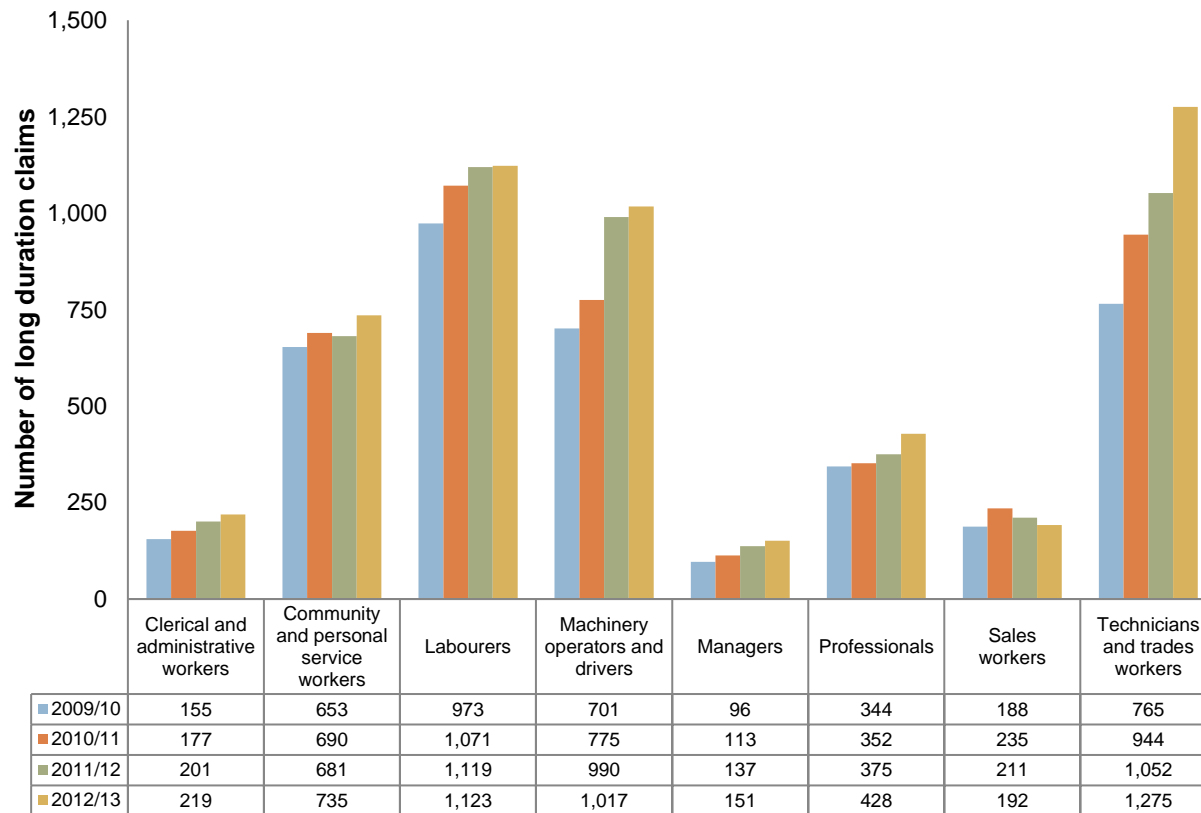
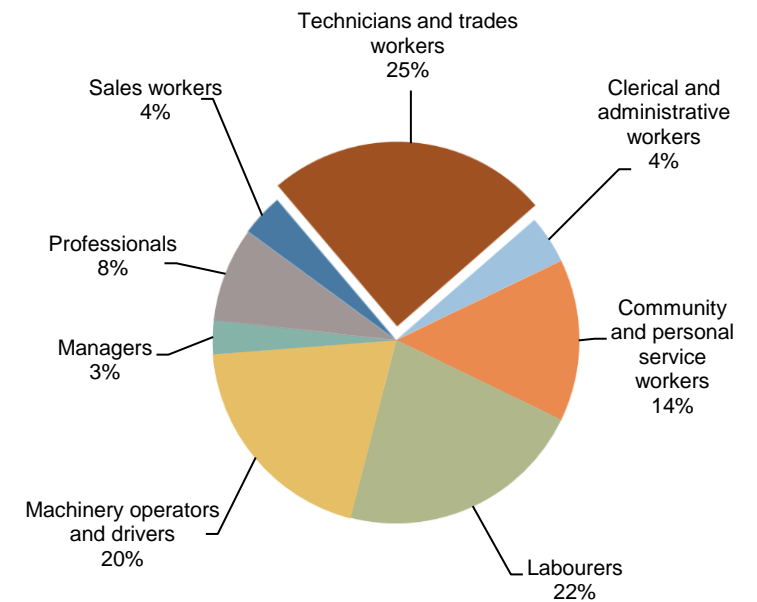


Figure 2.11: Proportion of number of long duration claims by occupation group: 2012/13



Section 2: Claimant characteristics
Occupation

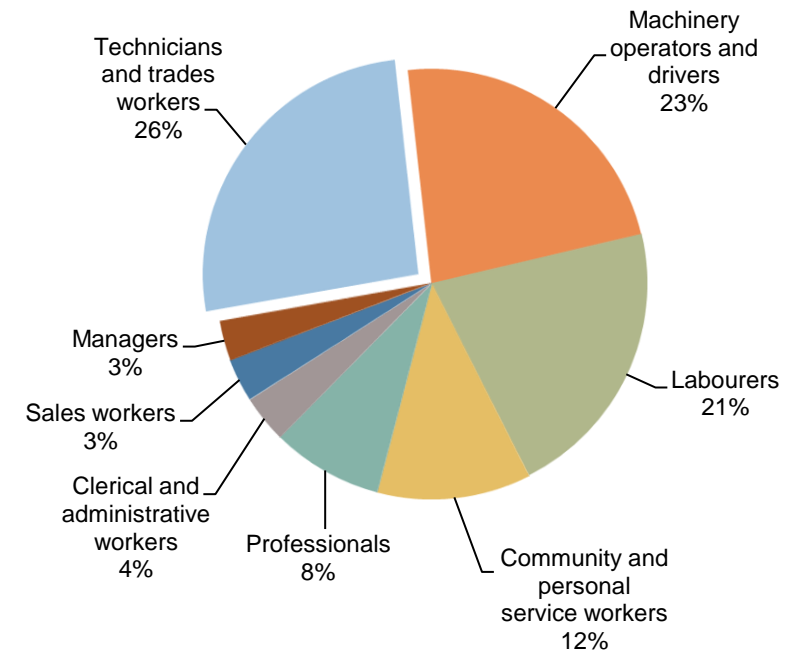
Summary:

- As shown in Figure 2.12, Technicians and trades workers had the greatest long duration claim costs in 2012/13.
- Technicians and trades workers had the largest increase in total long duration claim costs from 2009/10 to 2012/13 (86%) followed by Managers (70%).
- Figure 2.13 illustrates that Technicians and trades workers accounted for the highest proportion of long duration claim costs (26%) followed by Machinery operators and drivers (23%) and Labourers (21%) in 2012/13.

Figure 2.12: Total long duration claim costs by occupation group: 2009/10 to 2012/13



Figure 2.13: Proportion of total long duration claim costs by occupation group: 2012/13



	Clerical and administrative workers	Community and personal service workers	Labourers	Machinery operators and drivers	Managers	Professionals	Sales workers	Technicians and trades workers
2009/10	\$19.3	\$62.8	\$105.6	\$89.3	\$11.3	\$41.2	\$22.8	\$90.6
2010/11	\$21.7	\$70.7	\$129.2	\$101.3	\$17.8	\$42.5	\$23.4	\$127.0
2011/12	\$24.0	\$75.5	\$134.9	\$145.4	\$19.0	\$46.6	\$23.6	\$146.9
2012/13	\$23.1	\$74.8	\$137.3	\$149.3	\$19.3	\$53.9	\$21.1	\$168.4

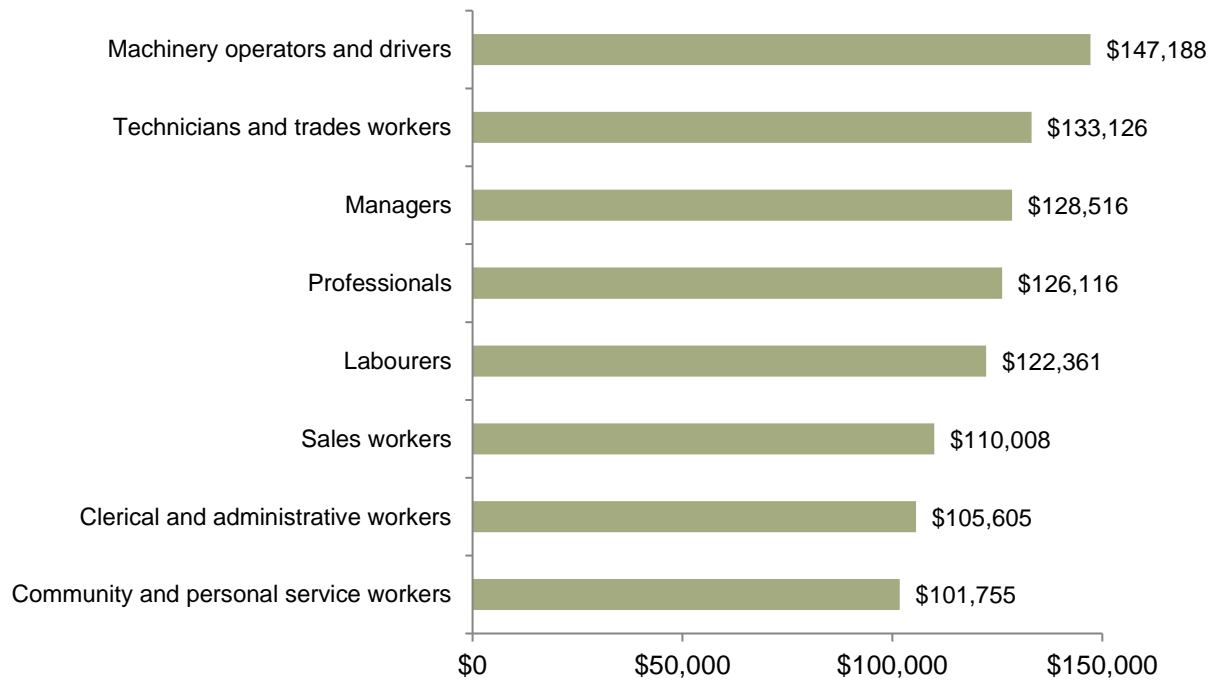
Millions

Section 2: Claimant characteristics
Occupation

Summary:

- Machinery operators and drivers had the highest average long duration claim costs at \$146,814 followed by Technicians and trades workers at \$132,115 for 2012/13.

Figure 2.14: Average long duration claim costs by occupation group: 2012/13

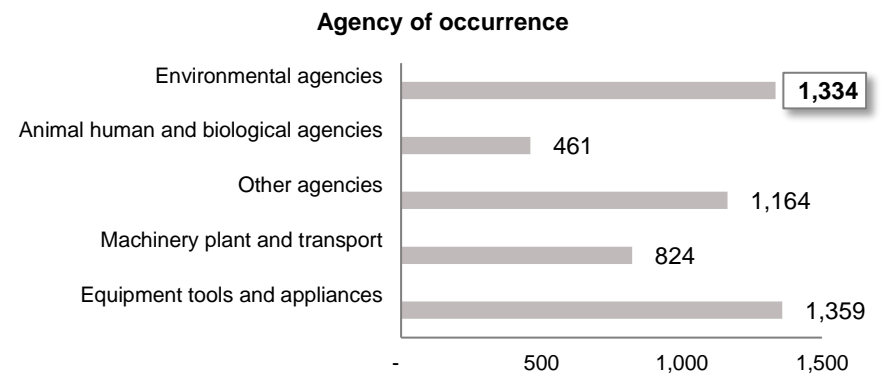
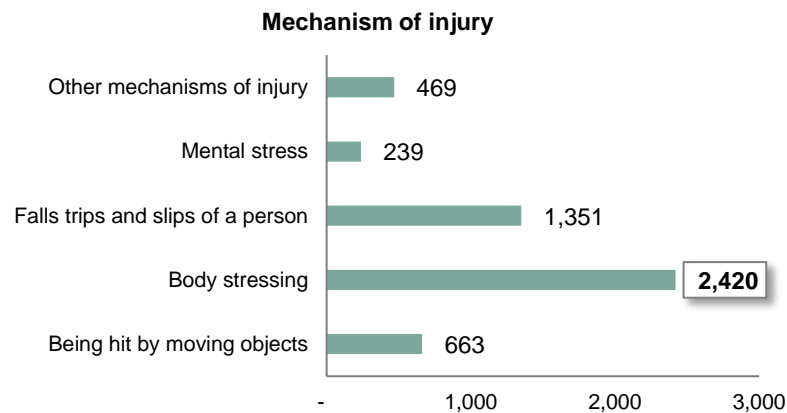
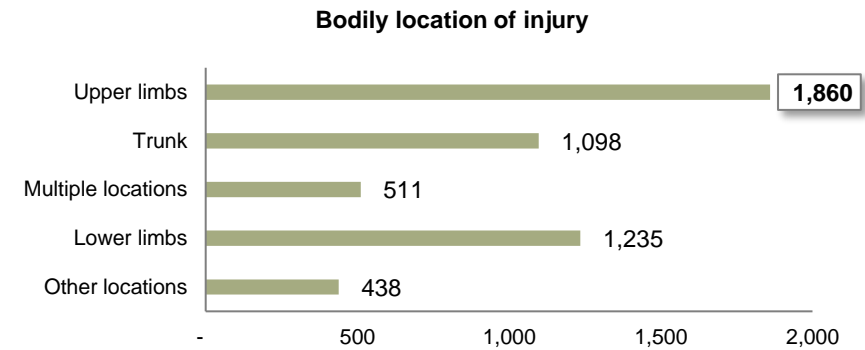
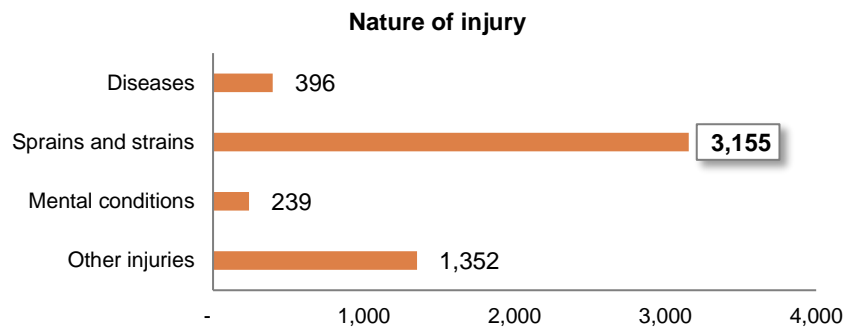


Section 3: Injury attributes
Overview

Highest proportion of long duration claims: 2009/10 to 2012/13

Injury attributes	Nature of injury		Mechanism of injury		Bodily location		Agency of occurrence	
2009/10	Sprains and strains	60%	Body stressing	48%	Upper limbs	37%	Environmental agencies	24%
2010/11	Sprains and strains	61%	Body stressing	48%	Upper limbs	37%	Environmental agencies	25%
2011/12	Sprains and strains	62%	Body stressing	46%	Upper limbs	36%	Environmental agencies	26%
2012/13	Sprains and strains	61%	Body stressing	46%	Upper limbs	36%	Environmental agencies	25%

Highest proportion of long duration claims: 2012/13



Section 3: Injury attributes
Nature of injury

Summary:

- Sprains and strains are the most common cause of long duration claims between 2009/10 and 2012/13 (Figure 3.1).
- Sprains and strains accounted for 61% of total long duration claim costs for 2012/13, as shown in Figure 3.2.
- Long duration claims resulting in mental conditions had the highest average long duration claim costs of \$131,000 in 2012/13.

Figure 3.1: Number of long duration claims by nature of injury: 2009/10 to 2012/13

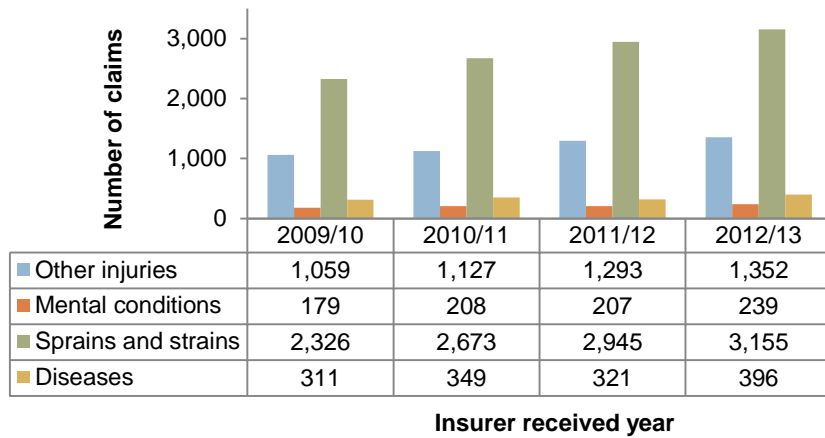


Figure 3.2: Proportion of total long duration claim costs by nature of injury: 2012/13

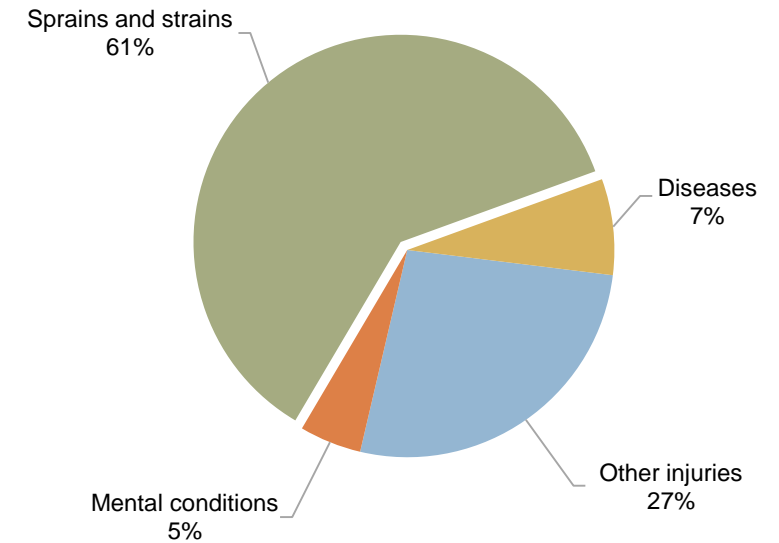
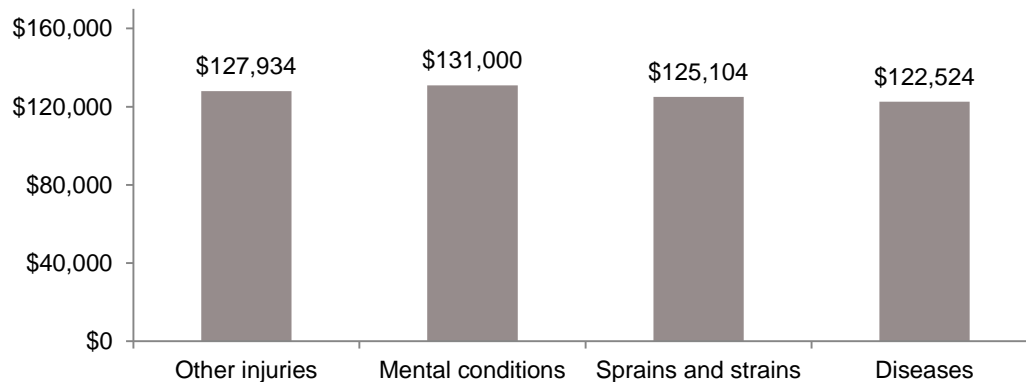


Figure 3.3: Average long duration claim costs by nature of injury: 2012/13



Section 3: Injury attributes
Mechanism of injury

Summary:

- Body stressing is the most common cause of injury for long duration claims from 2009/10 to 2012/13.
- Body stressing also had the highest total long duration claim costs for 2012/13, accounting for 47% of total costs (Figure 3.5).
- The highest average long duration claim costs for 2012/13 was associated with being hit by moving objects (\$136,971) followed by mental stress (\$131,000).

Figure 3.4: Number of long duration claims by mechanism of injury: 2009/10 to 2012/13

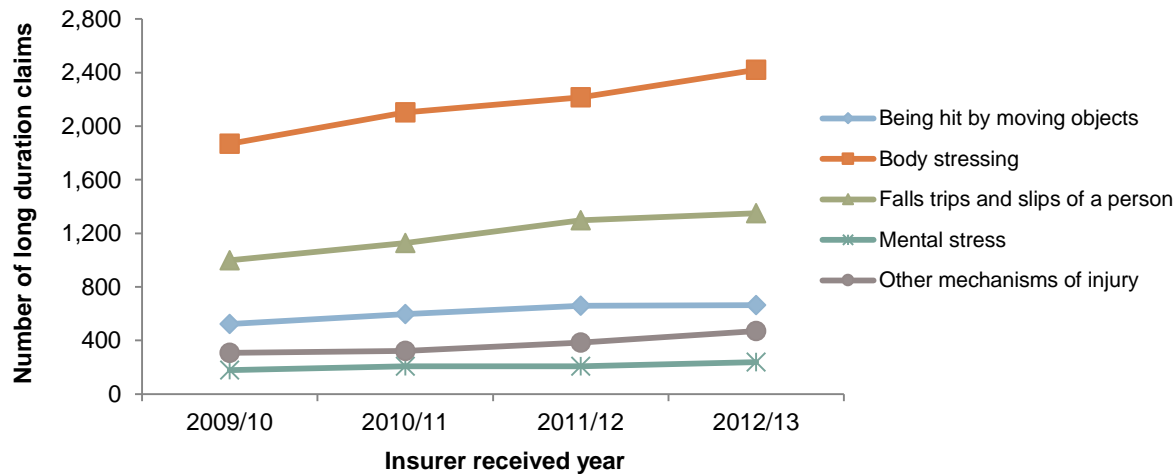


Figure 3.5: Proportion of total long duration claim costs by mechanism of injury: 2012/13

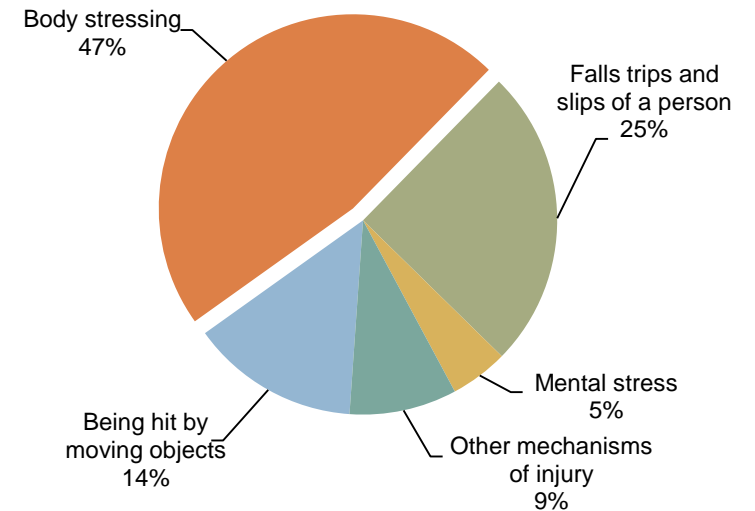


Table 3.1: Average long duration claim costs by mechanism of injury: 2012/13

Mechanism of injury	Average cost
Being hit by moving objects	\$136,971
Mental stress	\$131,000
Other mechanisms of injury	\$123,565
Body stressing	\$126,298
Falls trips and slips of a person	\$119,753

Section 3: Injury attributes
Bodily location

Summary:

- As shown in Figure 3.6, long duration claims most commonly involve injuries to the upper limbs from 2009/10 to 2012/13.
- In 2012/13, the highest total long duration claim costs were associated with injuries to upper limbs (32%).
- Long duration claims involving multiple bodily locations had the highest average long duration claim costs of \$157,773 in 2012/13.

Figure 3.6: Number of long duration claims by bodily location: 2009/10 to 2012/13

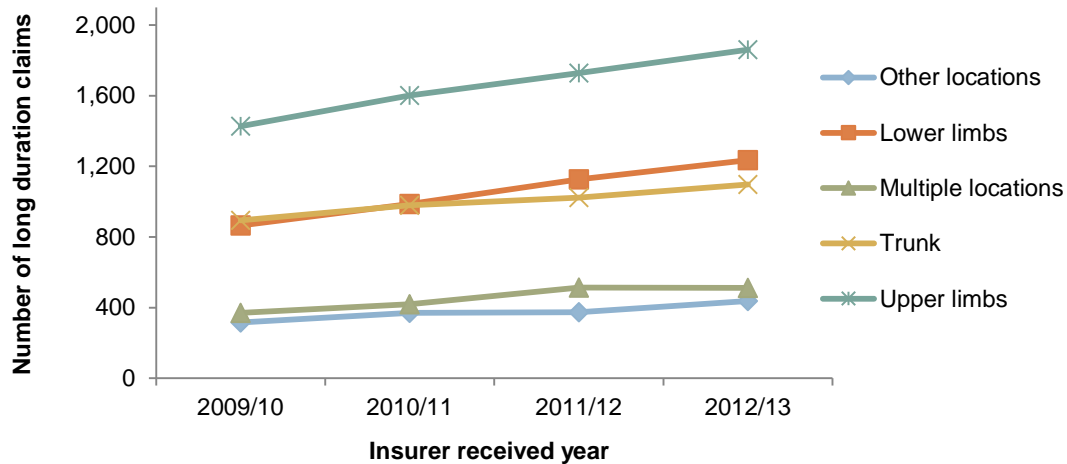


Figure 3.7: Proportion of total long duration claim costs by bodily location: 2012/13

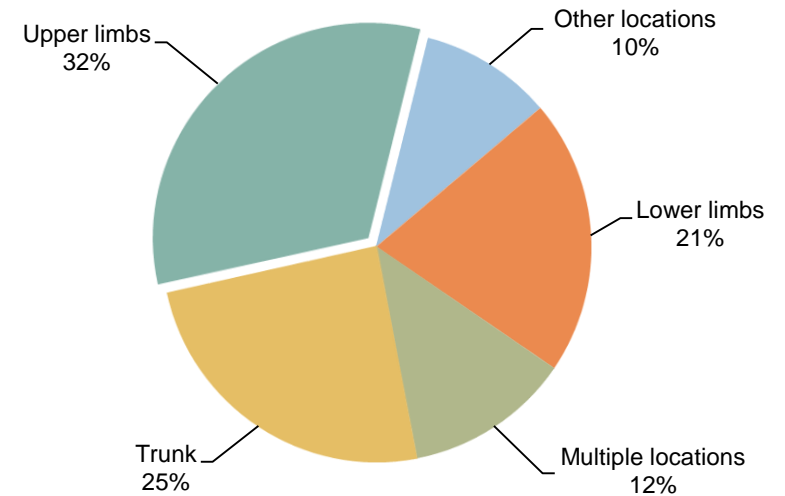


Table 3.2: Average long duration claim costs by bodily location: 2012/13

Bodily location	Average cost
Multiple locations	\$157,773
Other locations	\$146,601
Trunk	\$144,824
Upper limbs	\$112,620
Lower limbs	\$108,644

Section 3: Injury attributes
Agency of occurrence

Summary:

- The use of equipment tools and appliances had the highest number of long duration claims for 2012/13, closely followed by environmental agencies (Figure 3.8).
- Equally, both environmental agencies and the use of machinery plant and transport had the highest growth of long duration claims (43% and 42% respectively) over the four year period.
- The largest proportion of total long duration claim costs was for the use of equipment tools and appliances accounting for 26% of total costs in 2012/13 (Figure 3.9).
- The use of machinery plant and transport had the highest average long duration claim costs (\$143,319) in 2012/13.

Figure 3.8: Number of long duration claims by agency: 2009/10 to 2012/13

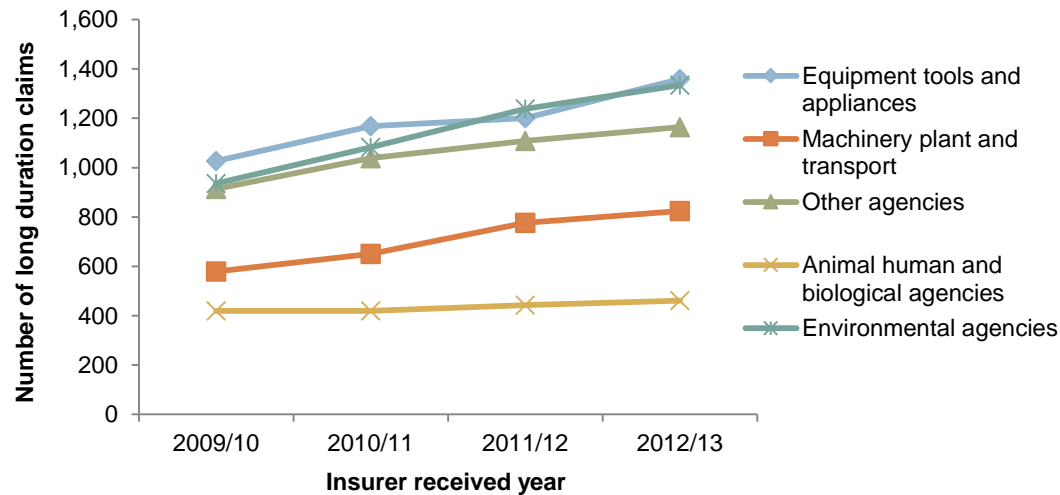


Figure 3.9: Proportion of total long duration claim costs by agency: 2012/13

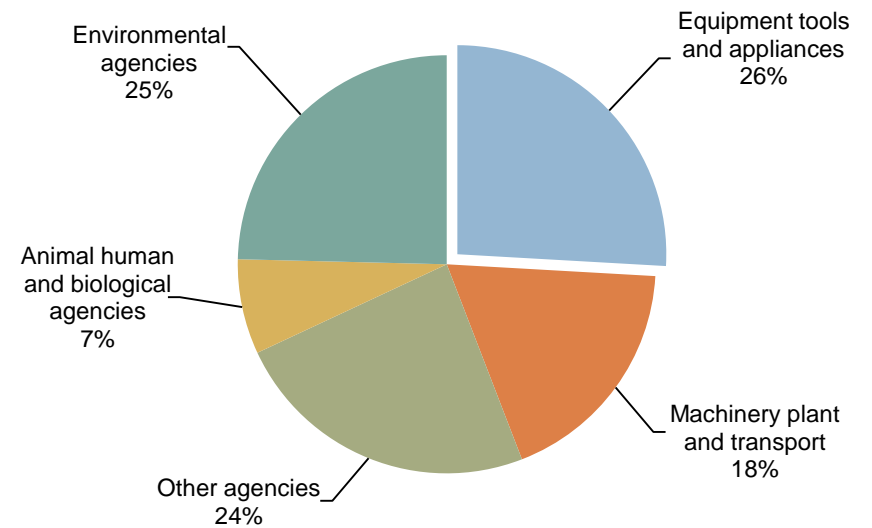


Table 3.3: Average long duration claim costs by agency: 2012/13

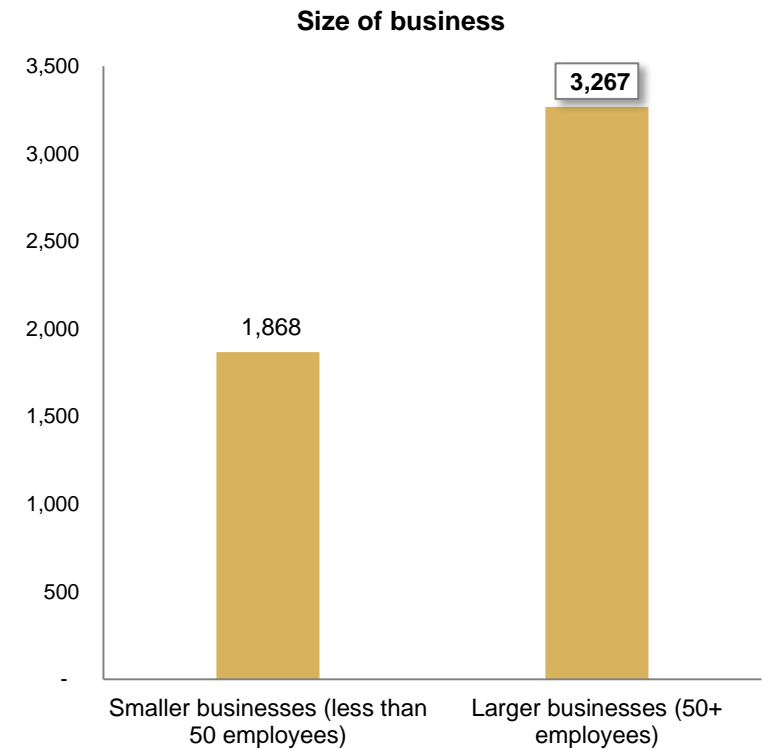
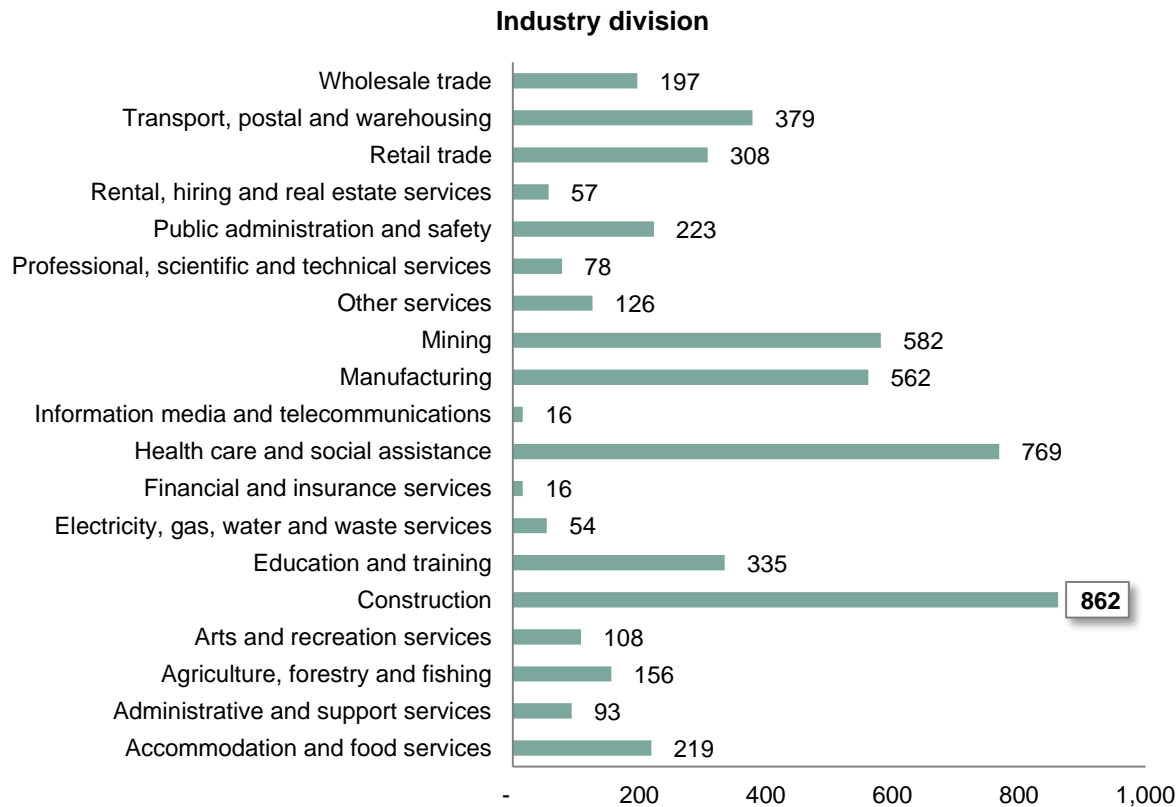
Agency of occurrence	Average cost
Machinery plant and transport	\$143,319
Other agencies	\$132,978
Equipment tools and appliances	\$123,402
Environmental agencies	\$119,472
Animal human and biological agencies	\$103,119

Section 4: Employer characteristics
Overview

Table 4.1: Highest proportion of long duration claims by claimant characteristics: 2009/10 to 2012/13

	Industry		Size of business	
2009/10	Health care and social assistance	17%	Larger sized businesses	61%
2010/11	Health care and social assistance	16%	Larger sized businesses	61%
2011/12	Health care and social assistance	15%	Larger sized businesses	62%
2012/13	Construction	17%	Larger sized businesses	64%

Highest long duration claim numbers by claimant characteristics: 2012/13

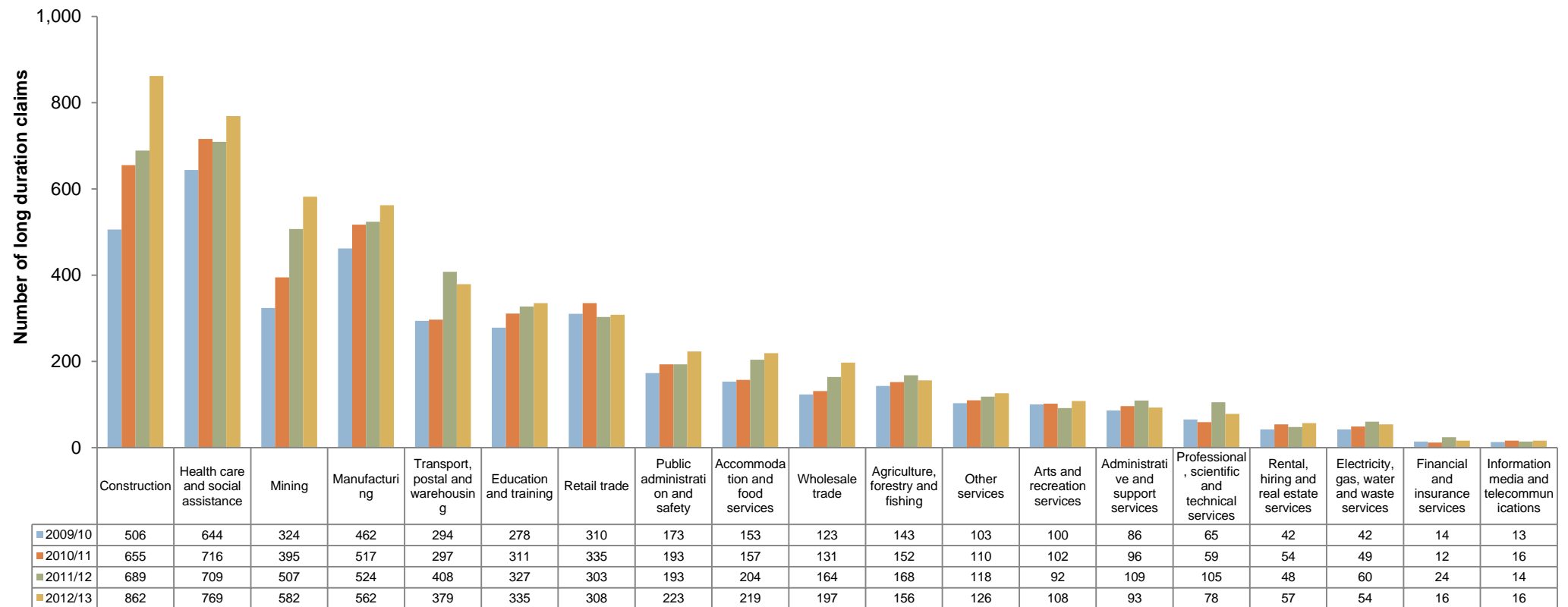


Section 4: Employer characteristics
Industry

Summary:

- The Construction and Health care and social assistance industries reported the highest number of long duration claims over the four year period.
- Mining recorded the greatest rate of change in long duration claim numbers, increasing by 80% from 2009/10 to 2012/13.

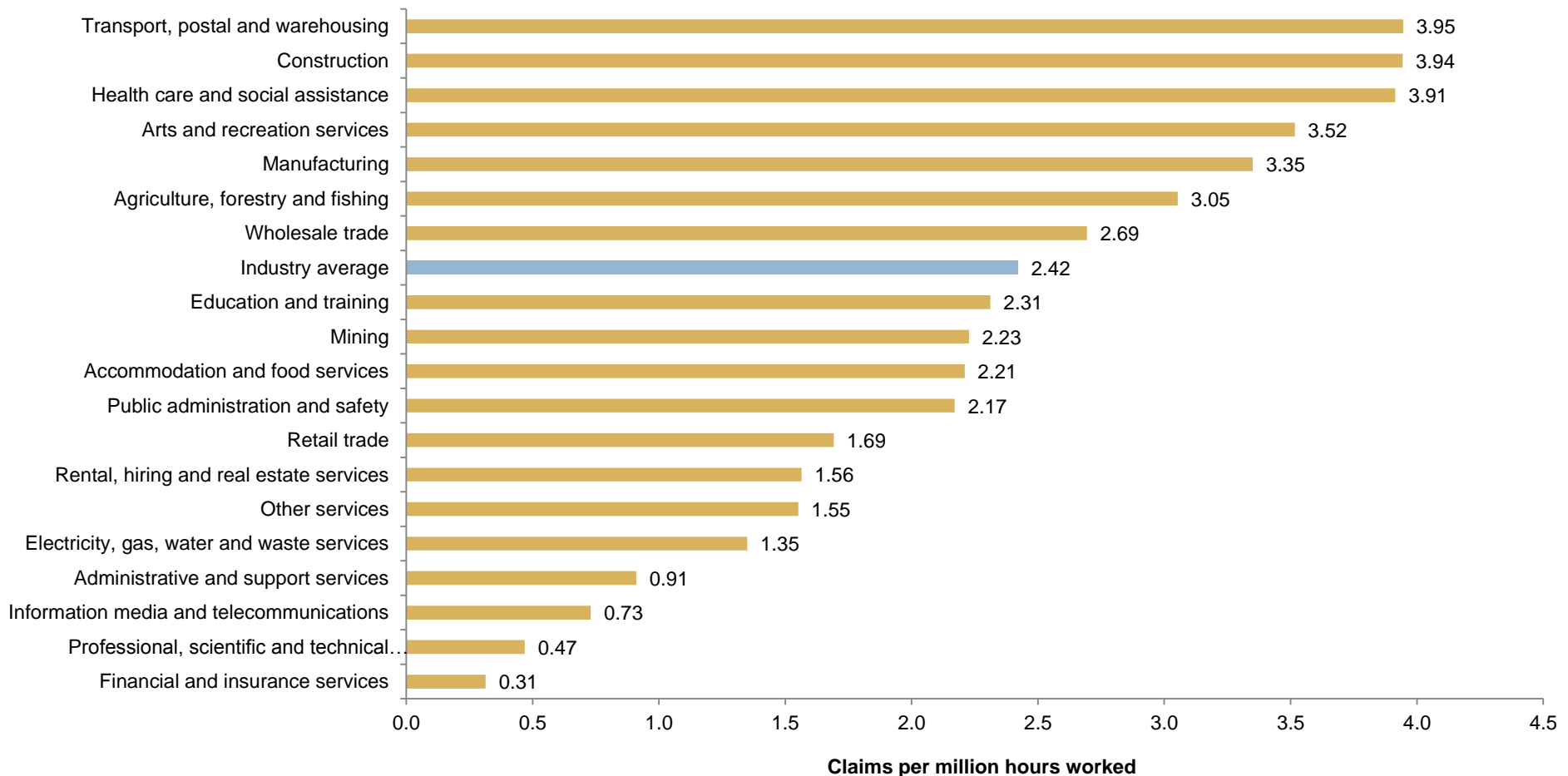
Figure 4.1: Number of long duration claims by industry division: 2009/10 to 2012/13



Summary:

- In 2012/13, the Transport, postal and warehousing industry had the highest rate of long duration claims per million hours worked (frequency rate of 3.95) closely followed by Construction (3.94) and Health care and social assistance (3.91).

Figure 4.2: Frequency of long duration claims by industry division: 2012/13

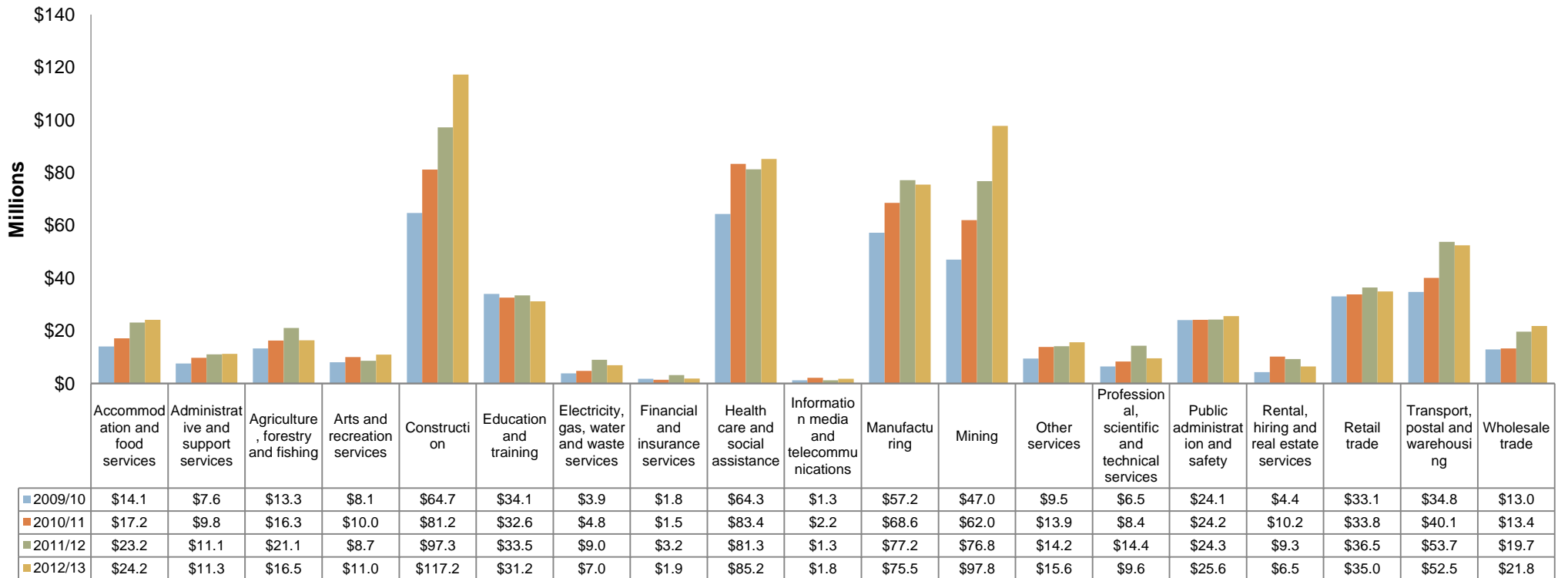


Section 4: Employer characteristics
Industry

Summary:

- In 2012/13, the Construction industry had the highest total long duration claim costs (\$117,232,821) followed by the Mining industry (\$97,830,312).
- The Construction industry had the greatest increase in the total long duration claim costs (108%) from 2009/10 to 2012/13, whereas Education and training had the largest decrease in total long duration claim costs (8%).

Figure 4.3: Total costs for long duration claims by industry division: 2009/10 to 2012/13



Section 4: Employer characteristics
Industry

Summary:

- In 2012/13, the Construction industry had the largest proportion of total long duration claim costs (18%) (Figure 4.4).
- The Mining industry had the highest average long duration claim cost (\$168,093) followed by Transport, postal and warehousing (\$138,534) and Construction (\$136,001) in 2012/13. The lowest average long duration claim cost was for Education and training (\$93,066) for the same period.

Figure 4.4: Proportion of total long duration claim costs by industry: 2012/13

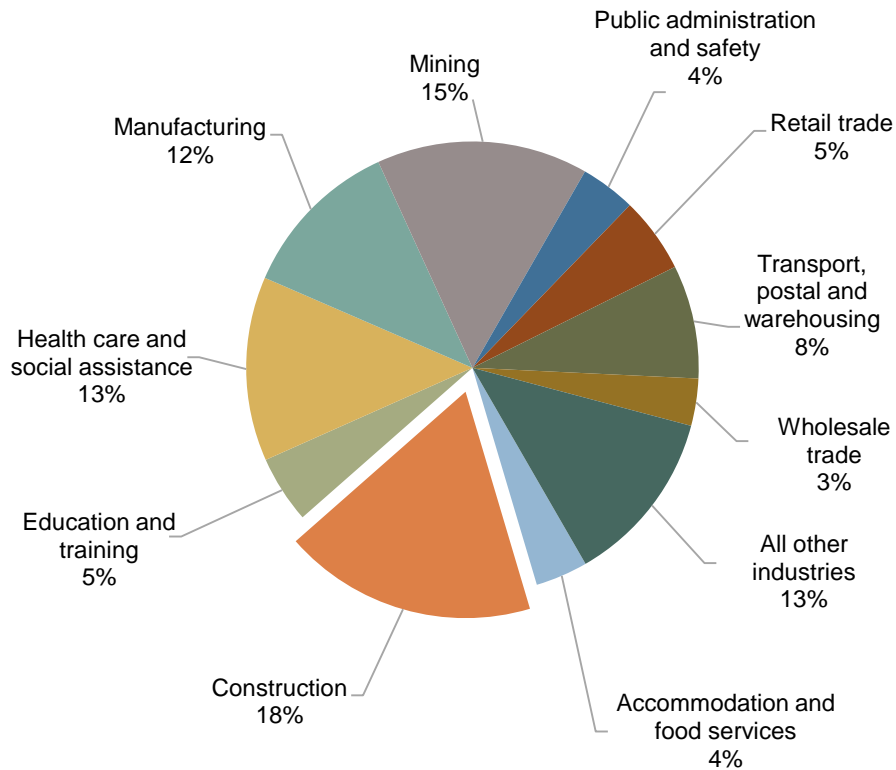
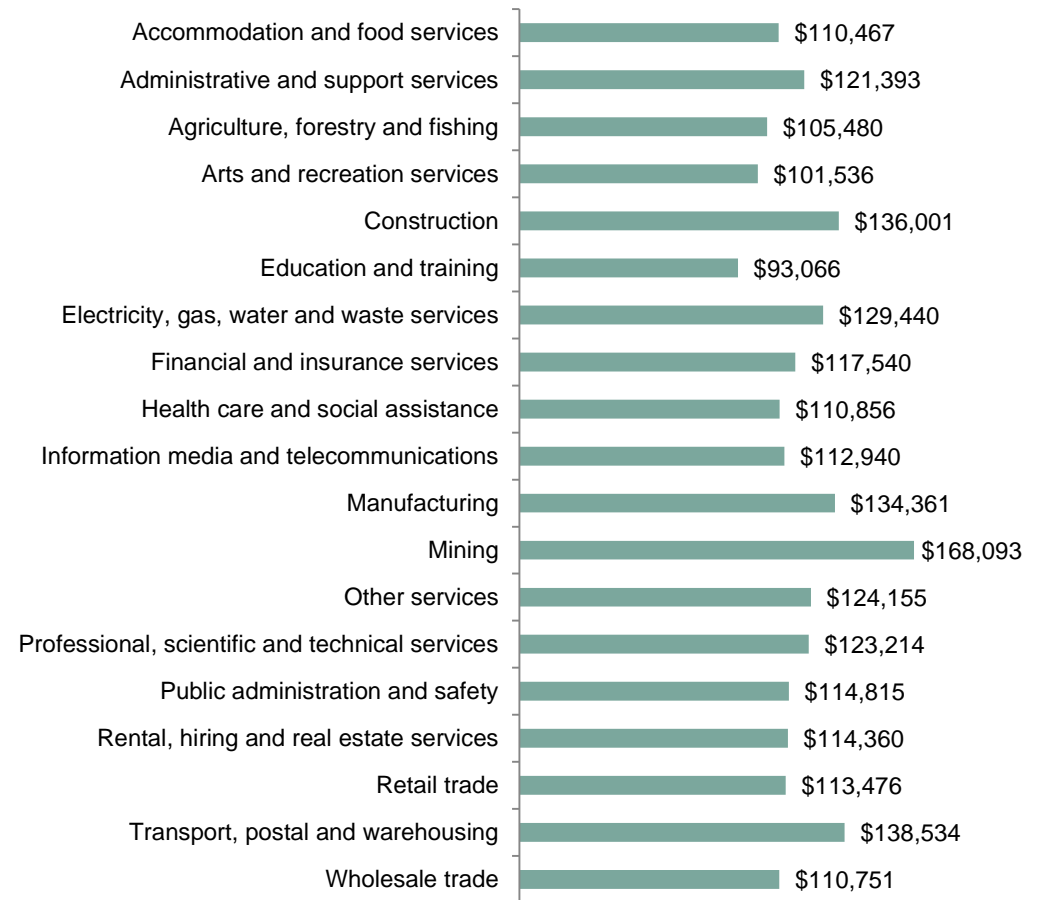


Figure 4.5: Average long duration claim costs by industry division: 2012/13



Section 4: Employer characteristics
Size of business

Summary:

- Over the four year period, larger businesses (50+ employees) had the higher number of long duration claims compared to smaller businesses (less than 50 employees).
- For 2012/13, larger businesses accounted for 63% of long duration claim costs (Figure 4.7).
- As shown in Figure 4.8, smaller businesses had a slightly higher average long duration claim costs (\$126,792) in 2012/13.
- The incidence rates for both smaller and larger businesses slightly increased from 2009/10 to 2012/13. Larger business consistently had a higher incidence rate over the four year period.

Figure 4.6: Number of long duration claims by size of business group: 2009/10 to 2012/13

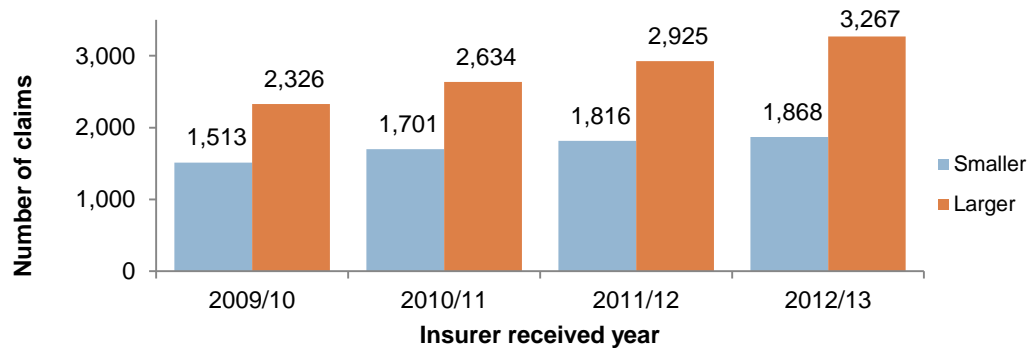


Figure 4.7: Proportion of total long duration claim costs by size of business group: 2012/13

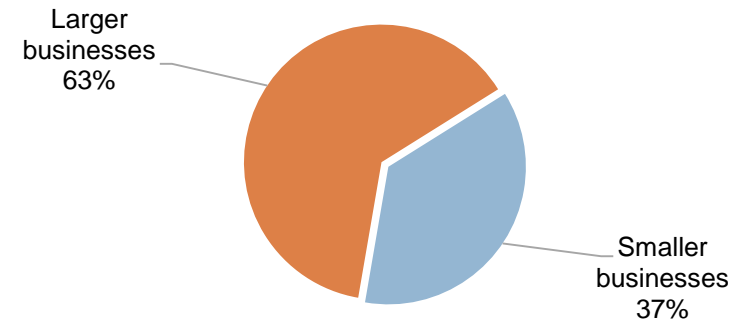


Figure 4.8: Average long duration claim costs by size of business group: 2012/13

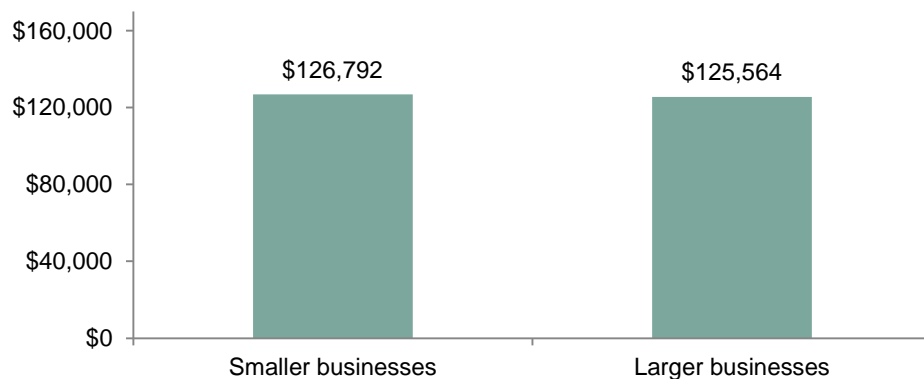
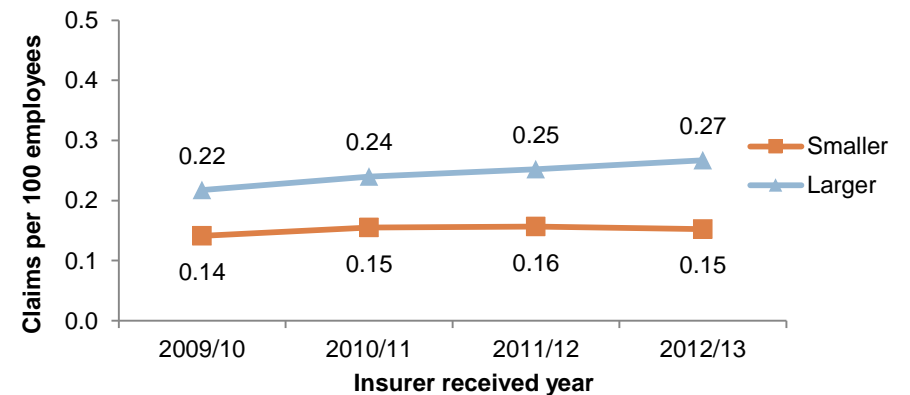


Figure 4.9: Incidence rate by size of business group: 2009/10 to 2012/13



Section 4: Definitions

TERM	DEFINITION / EXPLANATION OF TERM
Accident quarter	Accident quarter refers to the financial quarter in which the occupational injury occurred or when symptoms of the occupational illness or disease were first recognised, 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 long duration claims (see definition below). 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>Australian Safety and Compensation Council Type of Occurrence Classification System (TOOCS) 3rd edition, version 1</i> (available online at safeworkaustralia.gov.au) for data from 2009/10 onwards and TOOCS v2.1 for data between 2006/07 to 2008/09.
Body stressing	Injuries or disorders that result from stress placed on muscles, tendons, ligaments and bones. For further information refer to the <i>Australian Safety and Compensation Council Type of Occurrence Classification System (TOOCS) 3rd edition, revision 1</i> (available online at safeworkaustralia.gov.au).
Claim costs	The claims cost represents an estimate of costs for unfinalised claims, and the total cost of finalised claims attributed to the year in which a claim was lodged. It should be noted that claim costs are subject to revision as claims experience matures; this is especially true for more recent years. Claim costs are not adjusted for inflation or claim development; this is in contrast with claim payments.
Claims data	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. For the purposes of this report, certain types of claims were excluded from claims data: <ul style="list-style-type: none"> • journey claims between home and work • asbestos-related diseases, including mesothelioma and pneumoconiosis • fatalities It should be noted that claim numbers are subject to revision as claims experience matures; this is especially true for more recent years.

Section 4: Definitions

TERM	DEFINITION / EXPLANATION OF TERM
Claim payments	<p>Categories are based on WorkCover WA's Guidelines for Completing Form WC 101. 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, regardless of when the claim was lodged 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) • 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 payment	Represents the total economic loss component of a common law settlement or judgement after deduction of amounts for contingencies and contributory negligence. Includes any amount for pain and suffering, permanent impairment, loss of superannuation, legal expenses and future medical costs.
Days lost	The number of hours off work divided by the number of hours usually worked each day. If the claim is finalised, actual hours off work are used, otherwise if the claim is not finalised, estimated hours off work are used.
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).
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.
Gender	Represents the culturally and socially constructed difference between men and women.
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.

Section 4: Definitions

TERM	DEFINITION / EXPLANATION OF TERM
Industry	Industry classification is based on the <i>Australian and New Zealand Standard Industrial Classification (ANZSIC)</i> system 2006 for claims lodged on or after 1 July 2009 and ANZSIC 1993 for claims lodged prior to 1 July 2009. The ANZSIC system published by the Australian Bureau of Statistics which 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).
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.
Long duration claims	Workers' compensation claims for which the injury or disease results in an absence from work of at least 60 days or shifts. See also "claims data".
Mechanism of injury or disease	The mechanism of incident classification is intended to identify the mechanism or process that best describes the circumstances in which the injury/disease occurred. The full list of inclusions/exclusions for each of the categories used in this report is available from the <i>Australian Safety and Compensation Council Type of Occurrence Classification System (TOOCS) 3rd edition</i> , revision 1 (available online at safeworkaustralia.gov.au) for data from 2009/10 onwards and TOOCS v2.1 for data between 2006/07 to 2008/09.
Nature of injury or disease	The nature of injury or disease classification is intended to identify the most serious injury or disease suffered by the worker. The full list of inclusions/exclusions for each of the categories used in this report is available from the <i>Australian Safety and Compensation Council Type of Occurrence Classification System (TOOCS) 3rd edition</i> , revision 1 (available online at safeworkaustralia.gov.au) for data from 2009/10 onwards and TOOCS v2.1 for data between 2006/07 to 2008/09.
Occupation	Occupational classification is based on the <i>Australian and New Zealand Standard Classification of Occupations (ANZSCO)</i> for claims lodged on or after 1 July 2009 and <i>Australian Standard Classification of Occupations (ASCO) 2nd edition</i> for claims lodged prior to 1 July 2009. These occupational classifications published by the Australian Bureau of Statistics are a skill based classification which encompasses all occupations in the Australian and New Zealand workforce.
Size of business	The size of business is grouped into two categories: <ol style="list-style-type: none"> 1. Smaller sized businesses are those with less than 50 employees. 2. Larger sized businesses are businesses with 50 or more employees.

Disclaimer

- 1 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 cautioned to consider carefully 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.
- 2 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.
- 3 Neither WorkCover WA, or its agencies or representatives are responsible for data that is misinterpreted or altered in any way. Derived conclusions and analysis generated from this data are not to be considered attributable to WorkCover WA.
- 4 This data is provided as is and in no event shall WorkCover WA, its agencies or representatives be liable for any damages, including, without limitation, damages resulting from lost data or lost profits or revenue, the costs of recovering such data, the costs of substitute data, claims by third parties or for other similar costs, or any special, incidental, punitive or consequential damages, arising out of the use of the data.
- 5 Information concerning the accuracy and appropriate uses of the data or concerning other workers' compensation data may be obtained by contacting WorkCover WA.