



WORKERS' COMPENSATION in Western Australia



ANNUAL STATISTICAL REPORT

2015/16 to 2018/19

A workers' compensation and injury
management scheme that works for all




Business Intelligence Services
Corporate Services Division

2 Bedbrook Place
Shenton Park WA 6008

 workcover.wa.gov.au

 communications@workcover.wa.gov.au

 1300 794 744

 @WorkCoverWA

WorkCover WA is the government agency responsible for overseeing the WA workers' compensation and injury management scheme. WorkCover WA undertakes a range of educational, advisory, enforcement and performance monitoring activities to ensure the WA workers' compensation scheme is fair, accessible and cost-effective for all participants.

Annual Statistical Report - 2015/16 - 2018/19
Published: August 2020

© WorkCover WA, Government of Western Australia

There is no objection to this publication being copied in whole or part, provided there is due acknowledgment of any material quoted from the publication.

	About This Report 4 Purpose of report, data source, timeframe and data classifications		Scheme Exits 24 Finalised claims exiting the scheme, settlements, and settlement payments
	Scheme Overview 5 Overview summary of the number and type of claims lodged		Claimant Characteristics 29 Gender comparison, age groups, industry divisions, occupations, and region of occurrence
	Premium Rates 6 Recommended and actual premium rates calculated by WorkCover WA		Injury Attributes 38 Nature of injury/disease, extent of incapacity, fatalities mechanism of incident, bodily location, and agency of injury/disease
	Claim Activities 9 Detailed claim activities, including number of claims, payments, and costs		Glossary 44 An alphabetical list of terms and definitions used
	Claim Management 17 Timeframe of income claims, claims with weekly payments, continuance rates, return to work rate		Disclaimer 48
	Disputes 21 Dispute numbers, disputation rates, dispute resolution timeframes, and arbitrations.		



PURPOSE OF REPORT

WorkCover WA's annual statistical report is designed to provide stakeholders with an understanding of the overall activity and key trends within the workers' compensation scheme of WA. The report contains information about:

- workers' compensation premium rates
- claim activities (numbers and payments)
- claim management
- disputes
- scheme exits
- claimant characteristics
- injury and disease attributes.

For the purposes of this report, only work-related injury and disease claims are reported.



CLAIMS DATA SOURCE

WorkCover WA collects data from approved insurers and self-insurers about all workers' compensation claims lodged in the WA scheme. This includes data from all current and former approved insurers, self-insurers and the Insurance Commission of Western Australia as at 27 August 2020.

Claim statistics are derived from data supplied by insurers and self-insurers in accordance with the Q2 data specification, which is available on the WorkCover WA website:

workcover.wa.gov.au/service-providers/insurers

Note: The COVID-19 pandemic is anticipated to have a significant effect on economic activity and implications to workers' compensation in WA. However, the statistics in this report precede the pandemic, and therefore the information presented is not expected to be affected.



TIMEFRAME & DATA CLASSIFICATIONS

Premium rates

- Average recommended premium rates data is reported between 2011/12 and 2020/21
- Average actual premium rates data is reported between 2009/10 and 2018/19.

Claim statistics

- Claims include both finalised and unfinalised claims lodged between 2015/16 and 2018/19
- There is a higher proportion of unfinalised claims particularly in the most recent year, which is subject to change due to the evolving nature of claims. The 'p' indicates preliminary data for the latest year (2018/19p).

Claimant characteristics

- Industry classification is based on the *Australian and New Zealand Standard Industrial Classification (ANZSIC) system 2006* published by the Australian Bureau of Statistics
- Occupational classification is based on the *Australian and New Zealand Standard Classification of Occupations (ANZSCO)* published by the Australian Bureau of Statistics.

Injury/disease attributes

- Injury/disease attributes are classified according to *Type of Occurrence Classification System (TOOCS) 3rd edition* published by Australian Safety and Compensation Council.

WORK-RELATED INJURY AND DISEASE CLAIMS



In 2018/19, there were 27,682 claims lodged within the WA workers' compensation scheme, which comprised of 26,239 work-related injury and disease claims, 73 asbestos-related disease and journey claims and 1,370 disallowed claims.



26,239

Work-related injury & disease claims

For the purposes of this report, only work-related injury and disease claims are reported.

>

43%

11,373

NO LOST-TIME CLAIMS

Claims with treatment and expenses only



73

Asbestos-related diseases & journey claims

57%

14,866

LOST-TIME CLAIMS

Claims with an absence of a day/shift or more from work



1,370

Disallowed claims

11%

DISEASE CLAIMS

89%

INJURY CLAIMS

RECOMMENDED PREMIUM RATES



On an annual basis, WorkCover WA determines the recommended premium rates, taking into account the latest available data on claims experience provided by insurers, as well as broader economic factors, including movements in wages, employment rate, interest rates and inflation.

2020/21

Average recommended premium rate



1.638%
of total wages



-0.4%
from last year

Factors

The small decrease in premium rates was driven by...



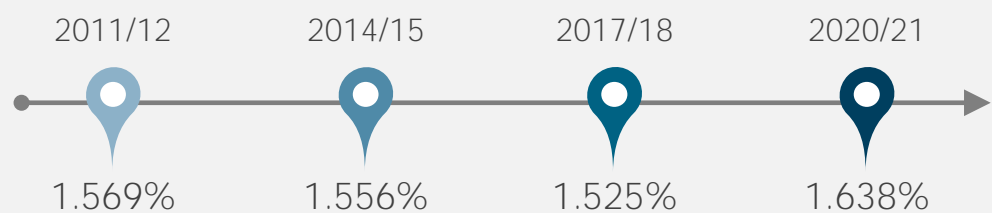
lower
incurred claim
numbers



increase
in forecasted
wages

Trends

Over a ten year period...



▲ 4.4% in average recommended premium rates

Recommended premium rates average percentage of wages

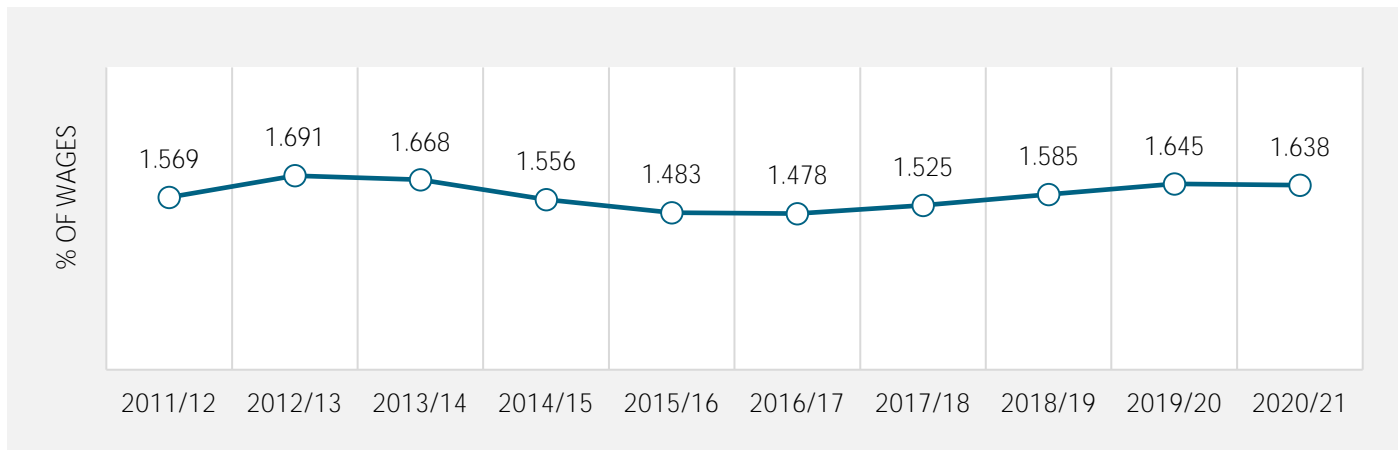
PERCENTAGE	2017/18	2018/19	2019/20	2020/21	4-year trend
Recommended premium rates	1.525	1.585	1.645	1.638	▲
Annual % change	3.2%	4.0%	3.7%	-0.4%	

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

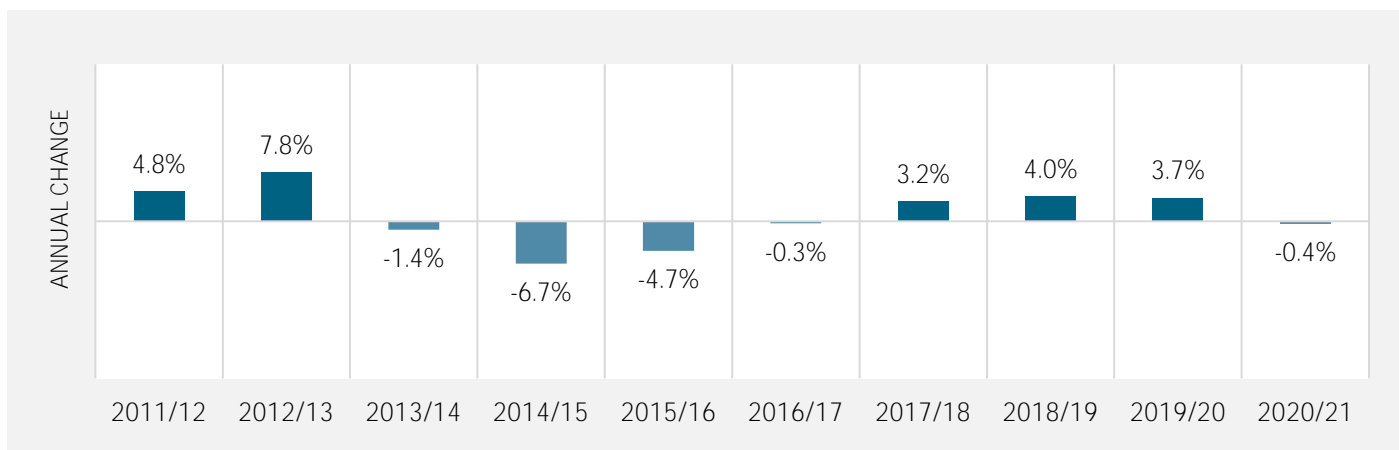


Recommended premium rates are expressed as a percentage of wages. An average premium rate of 1.64% means, on average, employers pay a premium of \$1.64 for every \$100 of wages paid to their employees.

Recommended premium rates



Recommended premium rates annual percentage change



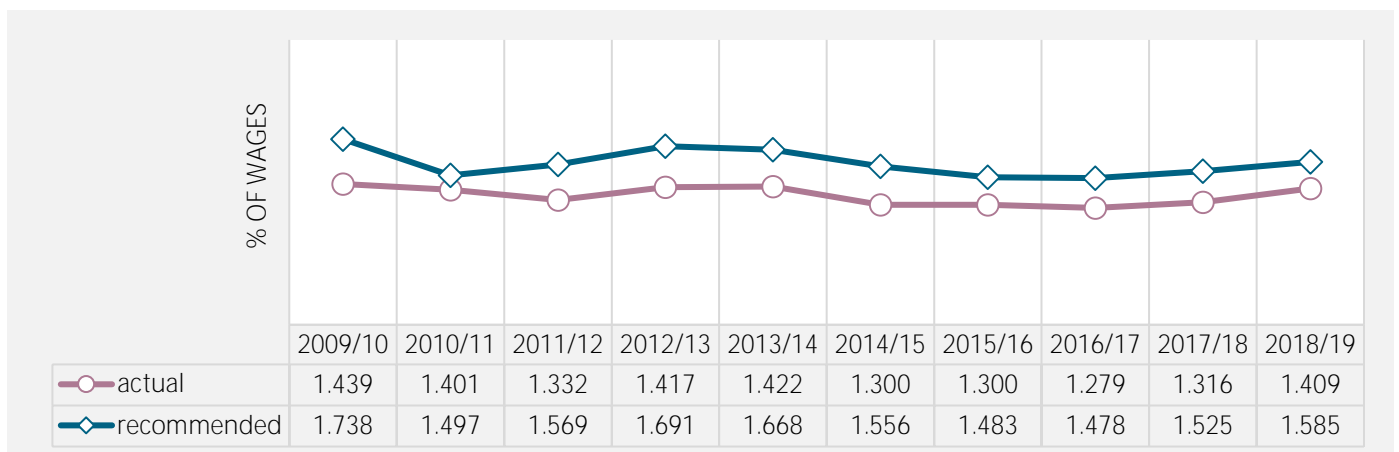
Actual premium rates average percentage of wages

PERCENTAGE	2015/16	2016/17	2017/18	2018/19	4-year trend
Actual premium rates	1.300	1.279	1.316	1.409	▲
Annual % change	0.0%	-1.6%	2.9%	7.1%	

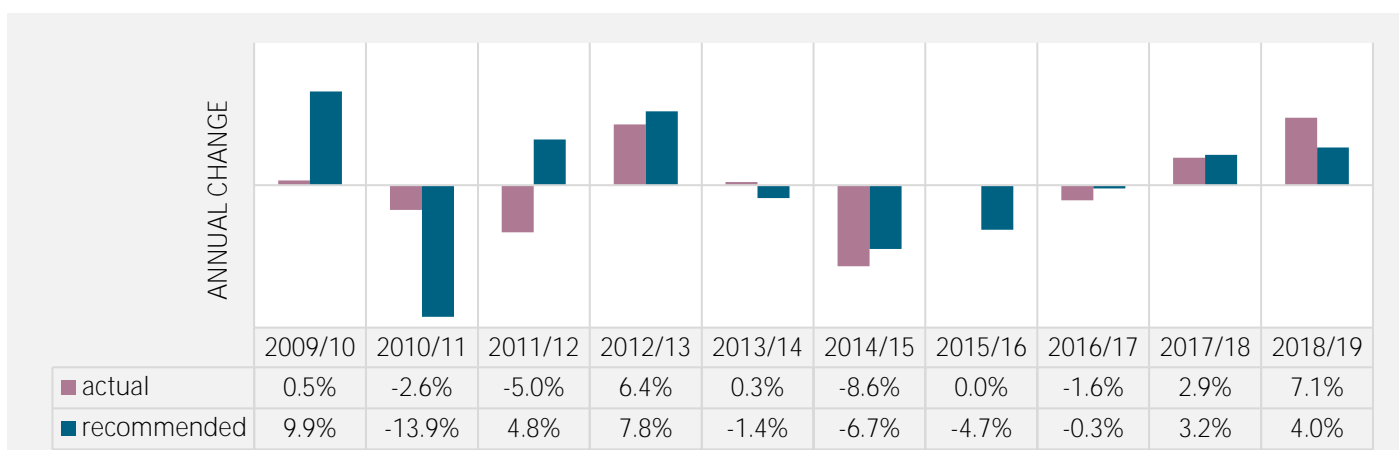
▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

 In addition to recommended premium rates, WorkCover WA annually calculates the average actual premium rate. The average actual rate is the total premiums paid as a percentage of the total wages paid by employers in a given year.

Actual premium rates vs. recommended premium rates



Actual premium rates annual percentage change



CLAIM NUMBERS



26,239 claims

lodged in 2018/19



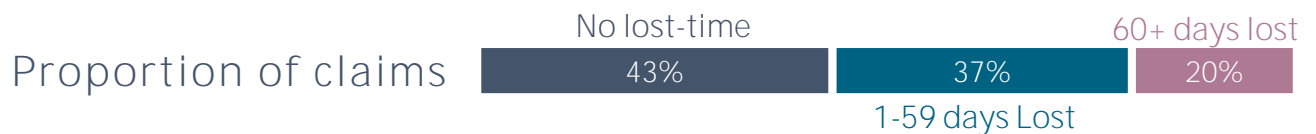
7.0 Frequency rate

lost-time claims per million hours worked in 2018/19



Between 2015/16 to 2018/19, the number of claims lodged decreased by 15% to 26,239 claims.

Claims with no lost-time decreased by 23% and lost-time claims fell by 8% over the same period.



CLAIM PAYMENTS | 2018/19



66%

Direct compensation



59% income payment

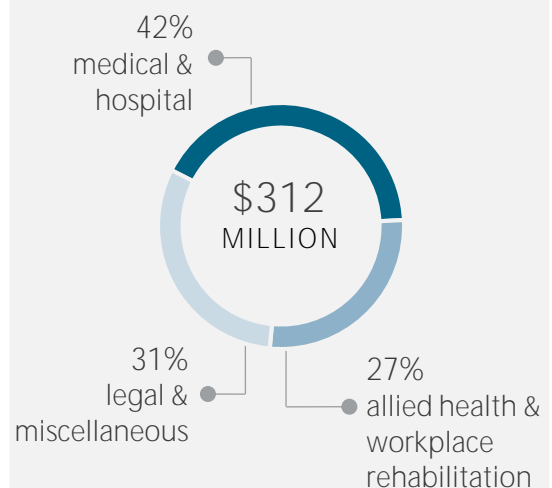
▼ Total payments decreased by 12% over four years



34%

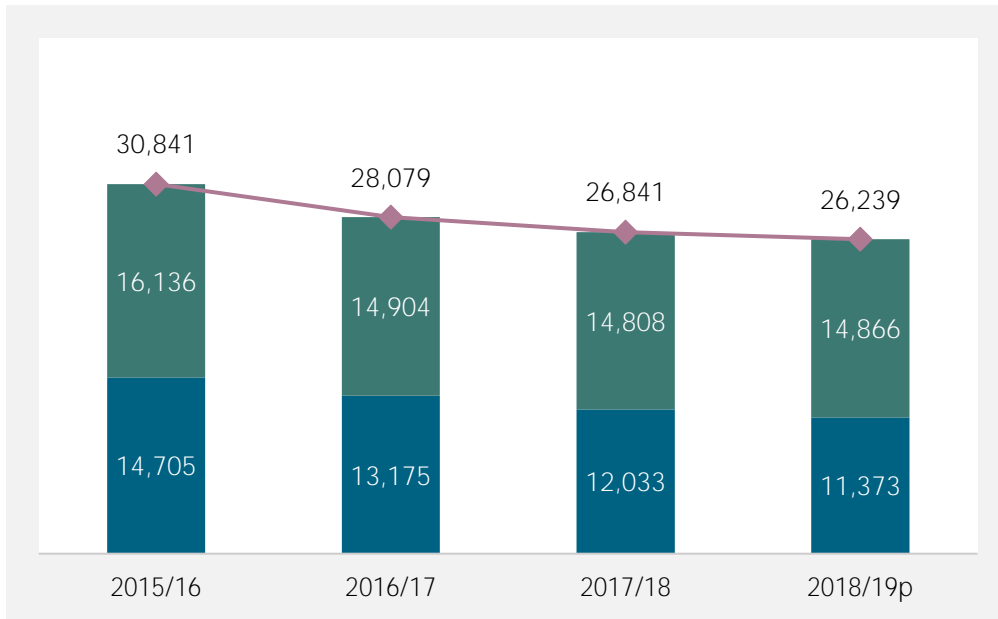


Service payments



▼ Total payments decreased by 5% over four years

Claim numbers number of claims lodged by lost-time



All claims

The number of claims lodged over the last four years decreased by 15% from 30,841 to 26,239 claims.

Lost-time claims

There has been a drop (8%) in the number of lost-time claims over the last four years, falling from 16,136 lost-time claims in 2015/16 to 14,866 lost-time claims in 2018/19.

No lost-time claims

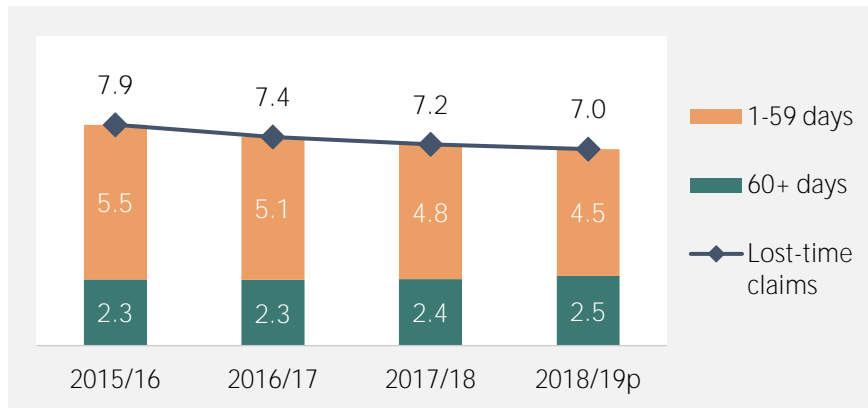
Claims with no time off work reduced by 23% between 2015/16 and 2018/19.

Claim numbers number of claims lodged by days lost

CLAIMS	2015/16	2016/17	2017/18	2018/19p	4-year trend
0 days	14,705	13,175	12,033	11,373	▼
1 - 4 days	3,515	3,115	2,866	2,735	▼
5 - 19 days	4,585	4,001	3,981	3,795	▼
20 - 59 days	3,207	3,090	3,064	3,057	■
60 - 119 days	1,737	1,654	1,724	1,752	■
120 - 179 days	793	806	827	862	▲
180+ days	2,299	2,238	2,346	2,665	▲
All claims	30,841	28,079	26,841	26,239	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

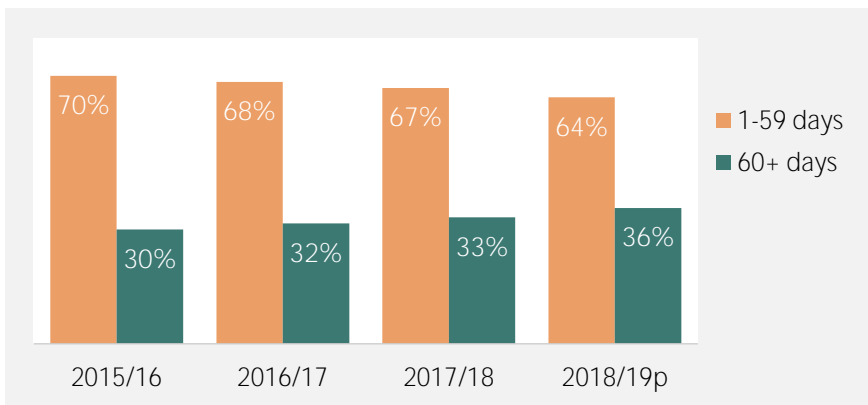
Frequency rate lost-time claims per million hours worked



The frequency rate for lost-time claims decreased by 11%, from 7.9 in 2015/16 to 7.0 in 2018/19.

The frequency rate for claims with 1-59 days lost decreased over four years. However, the rate for claims with 60+ days lost increased over the same period.

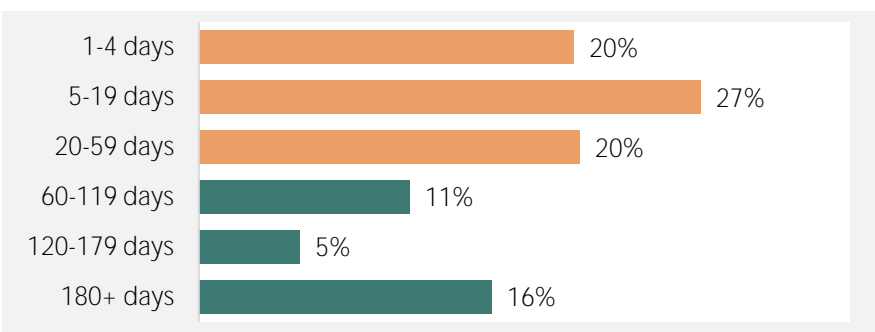
Lost-time claims by days lost



Over the last four years, the proportion of 1-59 days lost claims to all lost-time claims reduced from 70% to 64%.

In contrast, the proportion of claims with 60+ days lost increased from 30% to 36% over four years.

Lost-time claims 2015/16 to 2018/19p




Within the last four years, the highest proportion of days lost were for claims resulting in 5 to 19 days off work (27%).

Claim payments unadjusted

\$MILLION	2015/16	2016/17	2017/18	2018/19p	4-year trend
DIRECT COMPENSATION					
Income payments	\$372.9	\$362.3	\$343.0	\$348.8	▼
Lump sums	\$282.8	\$274.2	\$261.9	\$247.1	▼
SERVICE PAYMENTS					
Medical & hospital	\$132.5	\$132.9	\$132.9	\$128.6	■
Allied health*	\$43.4	\$44.7	\$45.7	\$48.2	▲
Workplace rehabilitation	\$33.3	\$33.9	\$37.7	\$35.8	▲
Legal & miscellaneous	\$102.6	\$97.2	\$96.1	\$95.6	▼
Total claim payments	\$967.4	\$945.2	\$917.4	\$904.1	▼

▲ Increasing (≥ +5%) ■ Stable (within +/-5%) ▼ Decreasing (≤ -5%)

* Allied health includes 'other treatment services'.

 **Claim payments (unadjusted)**
Unadjusted payments do not factor in inflation and care should be taken when comparing over time.


Income replacement payments continue to be the highest payment type (39% of total claim payments) and stands at \$348.8 million in 2018/19.

Claim payments adjusted

\$MILLION	2015/16	2016/17	2017/18	2018/19p	4-year trend
DIRECT COMPENSATION					
Income payments	\$390.9	\$378.9	\$352.3	\$353.0	▼
Lump sums	\$296.5	\$286.7	\$269.0	\$250.1	▼
SERVICE PAYMENTS					
Medical & hospital	\$138.9	\$139.0	\$136.5	\$130.1	▼
Allied health*	\$45.5	\$46.7	\$46.9	\$48.7	▲
Workplace rehabilitation	\$34.9	\$35.5	\$38.7	\$36.2	■
Legal & miscellaneous	\$107.5	\$101.6	\$98.7	\$96.8	▼
Total claim payments	\$1,014.2	\$988.5	\$942.0	\$914.9	▼

▲ Increasing (≥ +5%) ■ Stable (within +/-5%) ▼ Decreasing (≤ -5%)

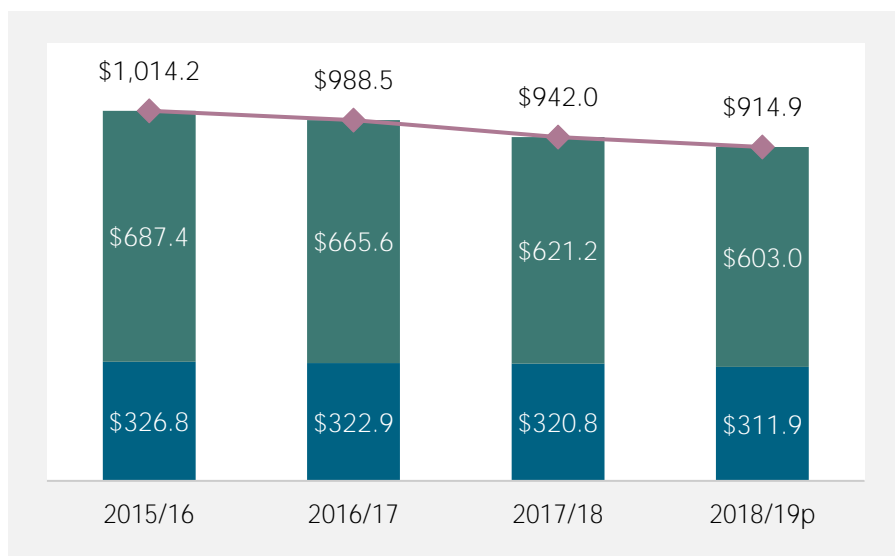
* Allied health includes 'other treatment services'.

 **Claim payments (adjusted)**
Payments are adjusted for inflation to allow for meaningful comparisons over time.

Over the last four years, total claim payments decreased by 10%, mainly driven by direct compensation payments to workers.

Between 2015/16 and 2018/19, allied health service payments was the only payment group to experience an increase (7%).

Total claim payments (\$million) (adjusted) by payment group

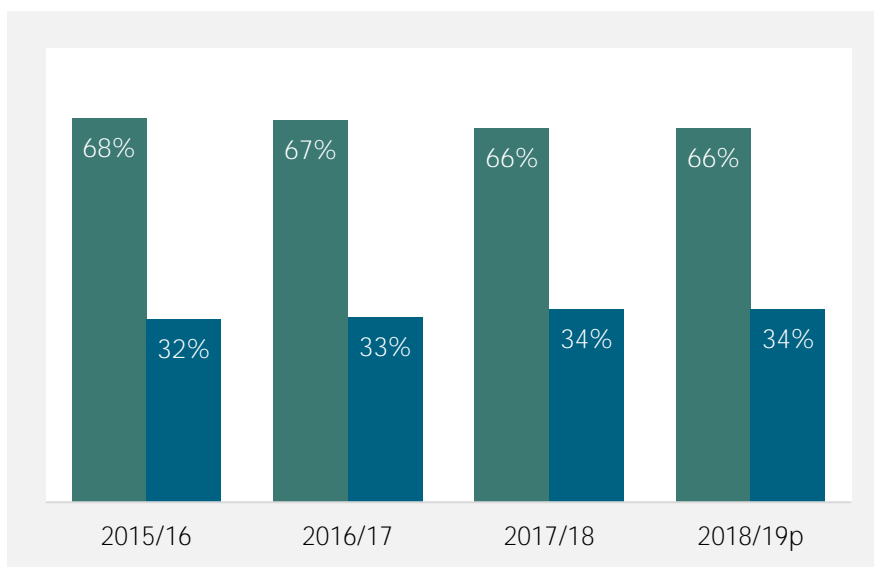


\$ Total claim payments adjusted for inflation decreased (10%) over the last four years.

••• Direct compensation payments made directly to the worker (either by income replacement or lump sums) decreased by 12% since 2015/16.

+ Service payments decreased by 5% over the last four years to \$311.9 million.

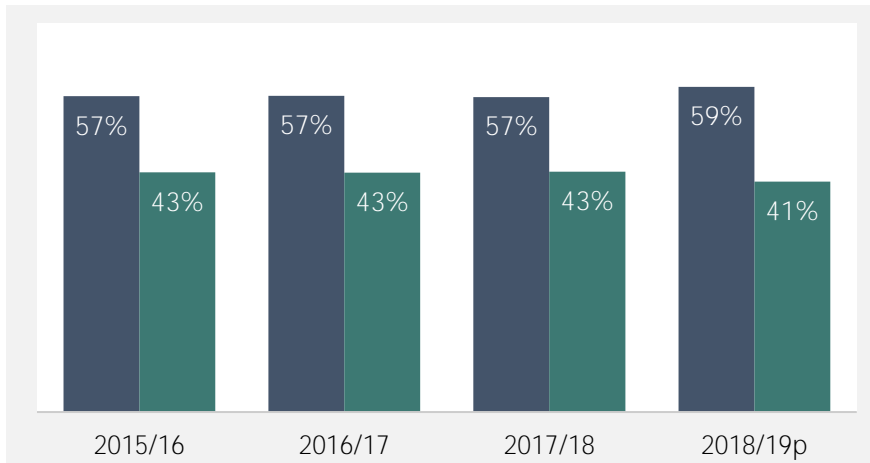
Total claim payments proportions by payment group





••• Direct compensation payments to workers accounted for the majority of claim payments, and shows a stable trend across four years.

+ Service payments remained stable over the last four years, accounting for around a third of claim payments.

Direct compensation payments proportions by payment type



 **Income payments**
accounted for more than half of direct compensation payments to workers over four years.

 **Lump sums**
accounted for 41% to 43% of direct compensation payments to workers over the last four years.

Service payments proportions by payment type



Medical & hospital
service payments accounted for 42% to 43% of total service payments.



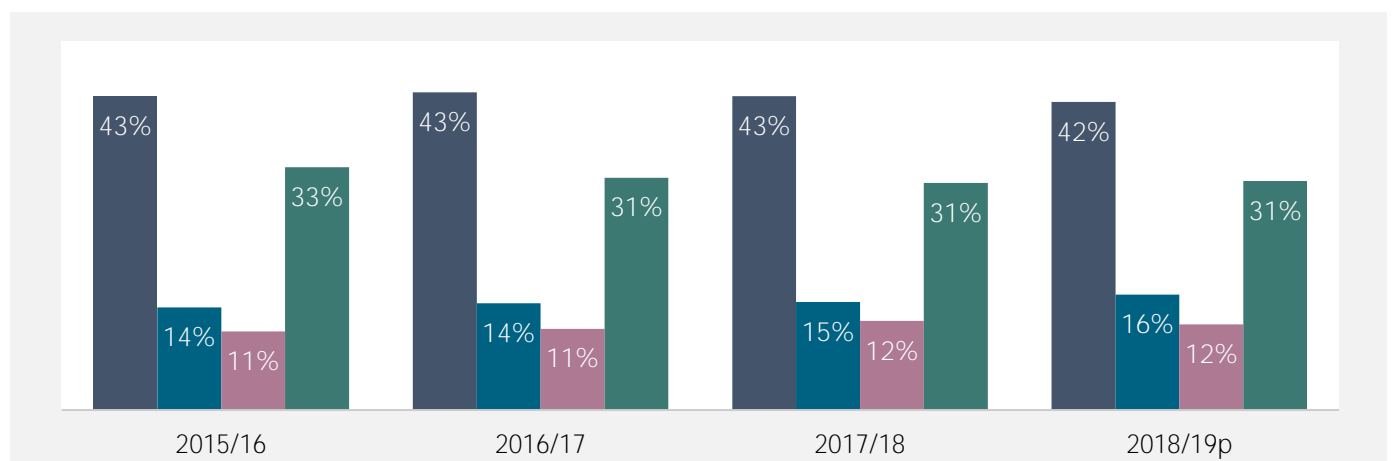
Allied health
and other treatment service payments attributed 14% to 16% of total service payments.



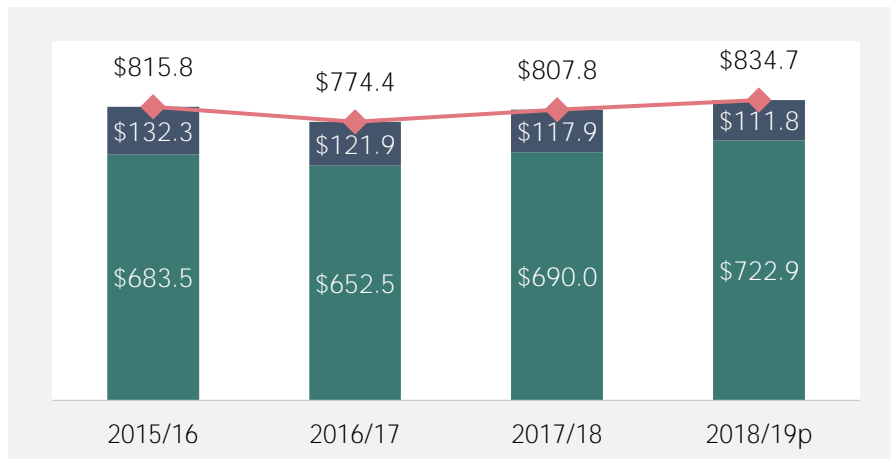
Workplace rehabilitation
service payments accounted for the lowest proportion of service payments.



Legal & miscellaneous
service payments attributed 31% to 33% of total service payments.



Claim costs (\$million) by days lost



Long duration claims

are claims commonly defined as workers' compensation claims which involve 60 or more days/shifts off work. Although these claims represent only a minor proportion of total claims, these claims account for the majority of costs.



Total claim costs

for lost-time claims remained stable over four years, with the exception of a decrease in 2016/17.



1-59 days lost

The total claim costs for claims with shorter duration (less than 60 days lost) decreased by 15% between 2015/16 and 2018/19.

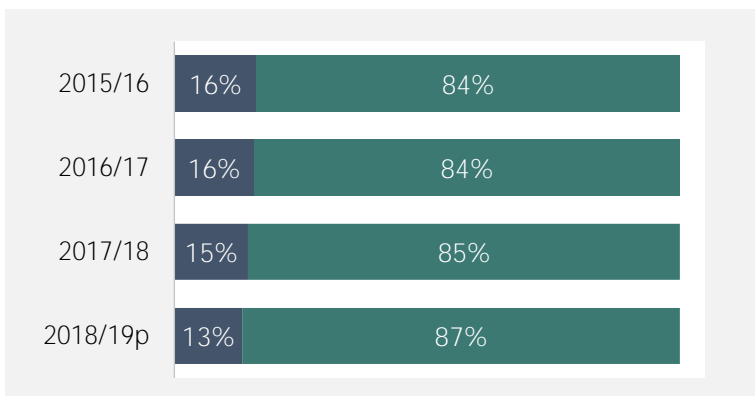


60+ days lost

The total claim costs for long duration claims increased by 6% over the last four years.

Claim costs proportion by days lost

1-59 days 60+ days



In 2018/19, claims with shorter duration accounted for 13% of total claim costs, while 87% of claim costs were associated with long duration claims.



Over the past four years, the proportion of short duration claims has continued to fall.

Claim costs* total claim costs by days lost

\$MILLION	2015/16	2016/17	2017/18	2018/19p	4-year trend
1-4 days	\$11.8	\$10.9	\$10.2	\$8.7	▼
5-19 days	\$37.7	\$33.8	\$34.8	\$30.6	▼
20-59 days	\$82.9	\$77.2	\$72.9	\$72.5	▼
60-119 days	\$100.2	\$94.7	\$93.5	\$92.1	▼
120-179 days	\$76.9	\$74.4	\$72.7	\$77.3	■
180+ days	\$506.4	\$483.5	\$523.8	\$553.6	▲
Lost-time claims	\$815.8	\$774.4	\$807.8	\$834.7	■

▲ Increasing (≥ +5%) ■ Stable (within +/-5%) ▼ Decreasing (≤ -5%)

* Due to the evolving nature of claims, data is subject to change particularly the most recent year.



Total claim costs for lost-time claims remained stable over the last four years.

Claims with lost-time of 180 days or more increased (9%) over four years, whereas claims with lost-time of less than 120 days off decreased over the same period.

Claim costs* average claim costs by days lost

\$	2015/16	2016/17	2017/18	2018/19p	4-year trend
1-4 days	\$3,348	\$3,488	\$3,561	\$3,186	■
5-19 days	\$8,215	\$8,459	\$8,747	\$8,057	■
20-59 days	\$25,839	\$24,983	\$23,780	\$23,730	▼
60-119 days	\$57,694	\$57,228	\$54,210	\$52,561	▼
120-179 days	\$96,957	\$92,300	\$87,909	\$89,624	▼
180+ days	\$220,252	\$216,026	\$223,274	\$207,714	▼
Lost-time claims	\$50,555	\$51,961	\$54,555	\$56,151	▲

▲ Increasing (≥ +5%) ■ Stable (within +/-5%) ▼ Decreasing (≤ -5%)

* Due to the evolving nature of claims, data is subject to change particularly the most recent year.



Average claim costs for all lost-time claims increased by 11% over four years, and currently stands at \$56,151 for 2018/19.

Claims with 60-119 days lost experienced the largest movement (-9%) in average claim costs between 2015/16 and 2018/19.

TIMEFRAME FOR INCOME CLAIMS

2018/19



Over the last four years, timeframes for claim lodgement by employers to insurers improved, and the average days for insurers to make a decision regarding liability remained stable at 14 days.

Overall, it took slightly longer for insurers to finalise income claims (claims with weekly income replacement), increasing from a median of 5.7 months to 5.9 months over the last four years.

Worker sustains work-related injury/illness and submits claim

3
days

average between employer receiving claim and lodging with insurer

14
days

average for insurers to make a liability decision for the claim

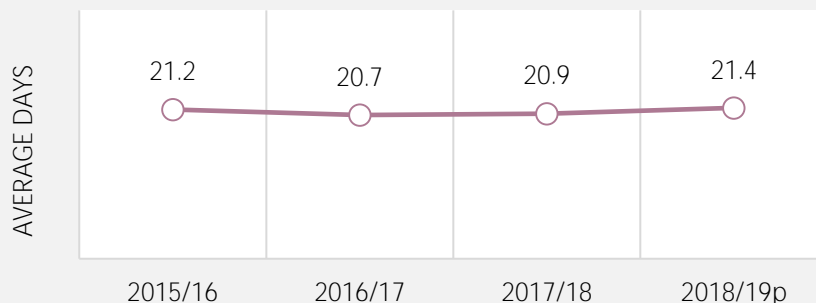
AVERAGE
10.7
MEDIAN
5.9

months between insurer lodgement and finalisation of claim

Claim management income claims

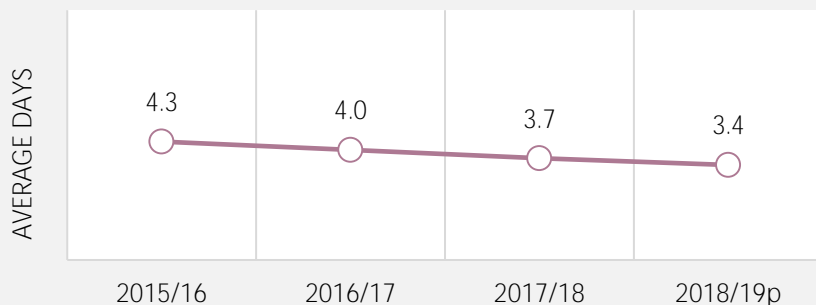
WORKER TO EMPLOYER LODGEMENT

average days between injury occurrence and lodgement of claim with employer



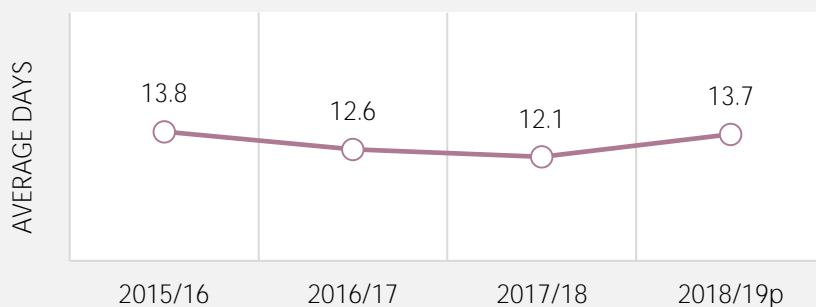
EMPLOYER TO INSURER LODGEMENT

average days between employer receiving and lodging claim with insurer



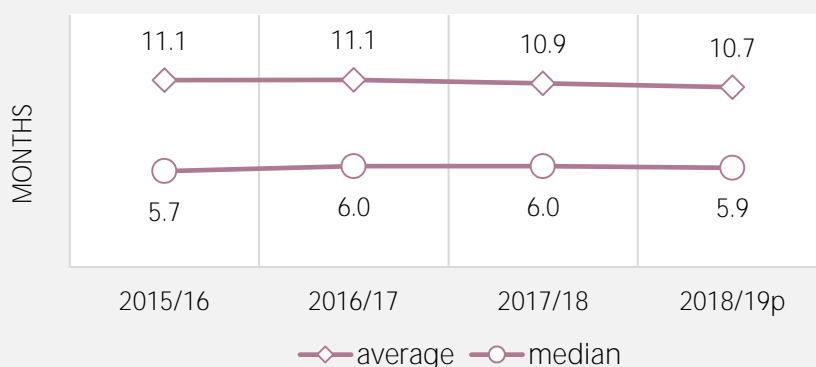
LIABILITY DECISIONS

average days for insurer to make a liability decision for the claim



CLAIM DURATION

number of months between insurer lodgement and finalisation of claim



Claims with weekly payments income claims

CLAIMS	2015/16	2016/17	2017/18	2018/19p	4-year trend
at 1 month	6,731	6,651	6,770	6,933	■
at 3 months	4,655	4,479	4,540	4,635	■
at 6 months	3,294	3,139	3,125	3,207	■
at 12 months	2,109	1,974	1,876	n/a*	▼

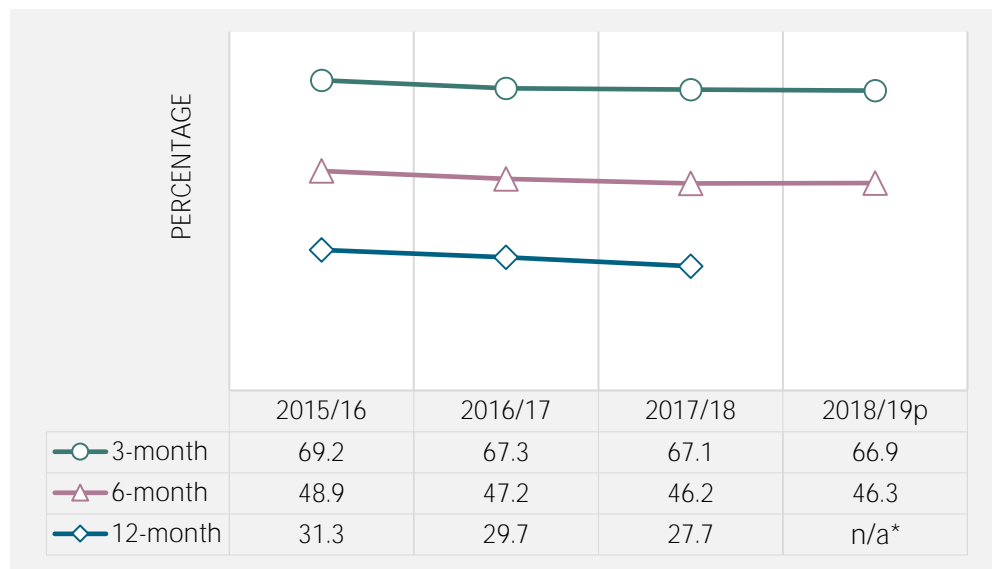
▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

* The 12-month figure for 2018/19 was not available at the time of publication.



Claims with weekly payments at one, three, and six months remained stable over four years.

Continuance rates income claims



* The 12-month figure for 2018/19 was not available at the time of publication.



Continuance rate provides insight into claim duration and scheme exits. It shows the number of claims involving weekly income replacement payments at three, six and 12 months as a proportion of claims involving weekly income replacement payments at one month. Continuance rates at three and six months decreased between 2015/16 and 2018/19.

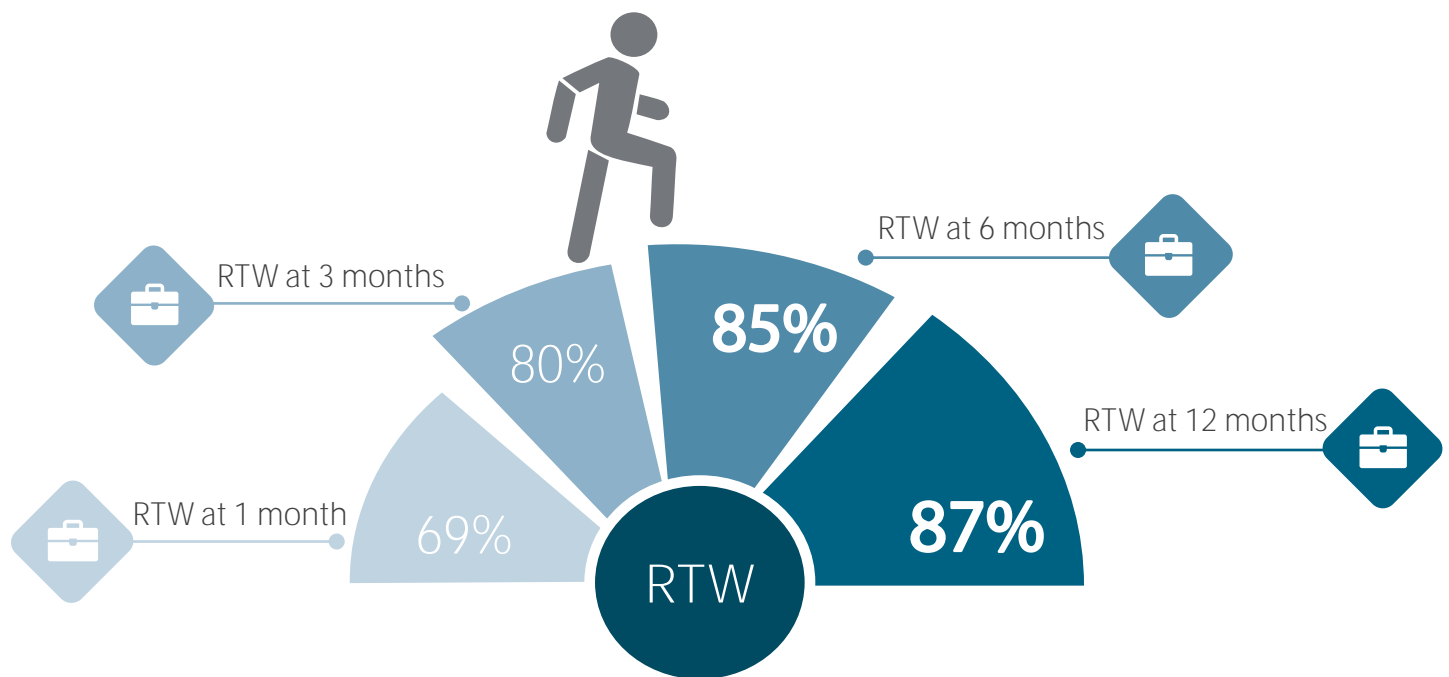
RETURN TO WORK RATE



This measure reports the proportion of workers who have been off work for at least one day as a result of their work-related injury or disease and have returned to work in any capacity at one month, three months, six months and 12 months from the date of claim lodgement.

This measure is based on claim lodgement date as it is the date from which an insurer can influence return to work (RTW).

WORK STATUS MEASURE



Work status rate

Return to work rate	2015/16	2016/17	2017/18	2018/19p	4-year trend
at 1 month	65.4%	64.3%	64.5%	68.6%	■
at 3 months	77.8%	76.7%	77.0%	79.9%	■
at 6 months	84.2%	83.0%	83.6%	85.1%	■
at 12 months	87.1%	86.4%	87.2%	87.2%	■

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



The work status rate measures the proportion of claimants who returned to work at some capacity at one, three, six and 12 months from claim lodgement.



In 2018/19, 87.2% of claimants returned to worked at some capacity 12 months after the claim was lodged.



The **majority of workers' compensation claims progress to the satisfaction of all parties involved**, including the injured worker, the employer and their associated insurer. Occasionally, parties need assistance to resolve disputes about a claim, so WorkCover WA provides conciliation and arbitration services (CAS).

WorkCover WA's conciliation and arbitration services aim to provide an independent and transparent system for the fair, timely and cost-effective **resolution of workers' compensation disputes in WA**.

Disputes can occur at any stage of a claim and arise over a broad range of matters, including the liability to pay compensation, the amount of weekly benefits to be paid, medical and related expenses, and return to work programs.



DISPUTATION RATE

The disputation rate for 2018/19 was 4.4%, higher than the previous year (4.2%).



DISPUTE RESOLUTION TIMEFRAMES

In 2018/19, 85% of dispute matters were resolved within six months, higher than the previous year (84%).

2,082

DISPUTES
accepted
in 2018/19

ARBITRATION

In 2018/19, there were 626 accepted arbitration applications (increase of 115 applications) between 2015/16 and 2018/19.



SUBSEQUENT ARBITRATION

In 2018/19, 30% of conciliations proceeded to arbitration, higher than the previous year (29%).



Dispute applications number of accepted conciliations

DISPUTES	2015/16	2016/17	2017/18	2018/19p	4-year trend
Conciliations	2,132	2,084	2,051	2,082	■
Disputation rate	3.8%	4.1%	4.2%	4.4%	▲

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

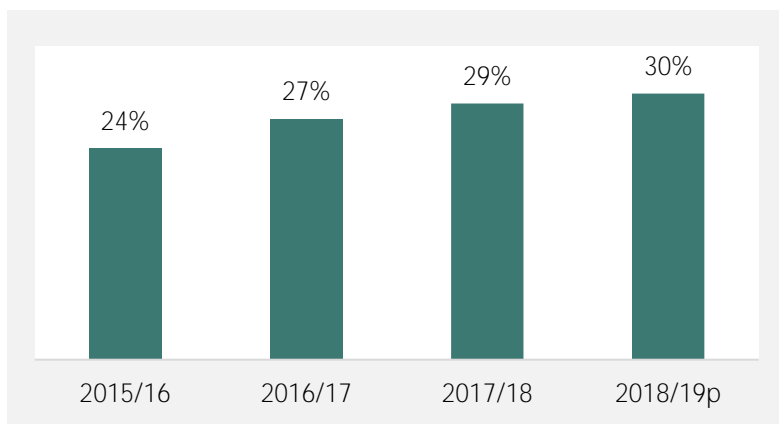
**Conciliation**

involves parties in dispute reaching an agreement, with the assistance of an independent and impartial Conciliation Officer.

**Disputation rate**

measures the number of dispute applications per 100 active claims (claims with at least one transaction payment within the financial year).

Subsequent arbitration proportion of conciliations with subsequent arbitration

**Subsequent arbitrations**

Disputes must have been conciliated by the Workers' Compensation Conciliation Service (or a certificate issued by the Director of Conciliation advising the matter is not suitable for conciliation) before an application can be made to the Workers' Compensation Arbitration Service.

Arbitration number of accepted arbitration applications

NUMBER	2015/16	2016/17	2017/18	2018/19p	4-year trend
Arbitration applications	511	554	586	626	▲

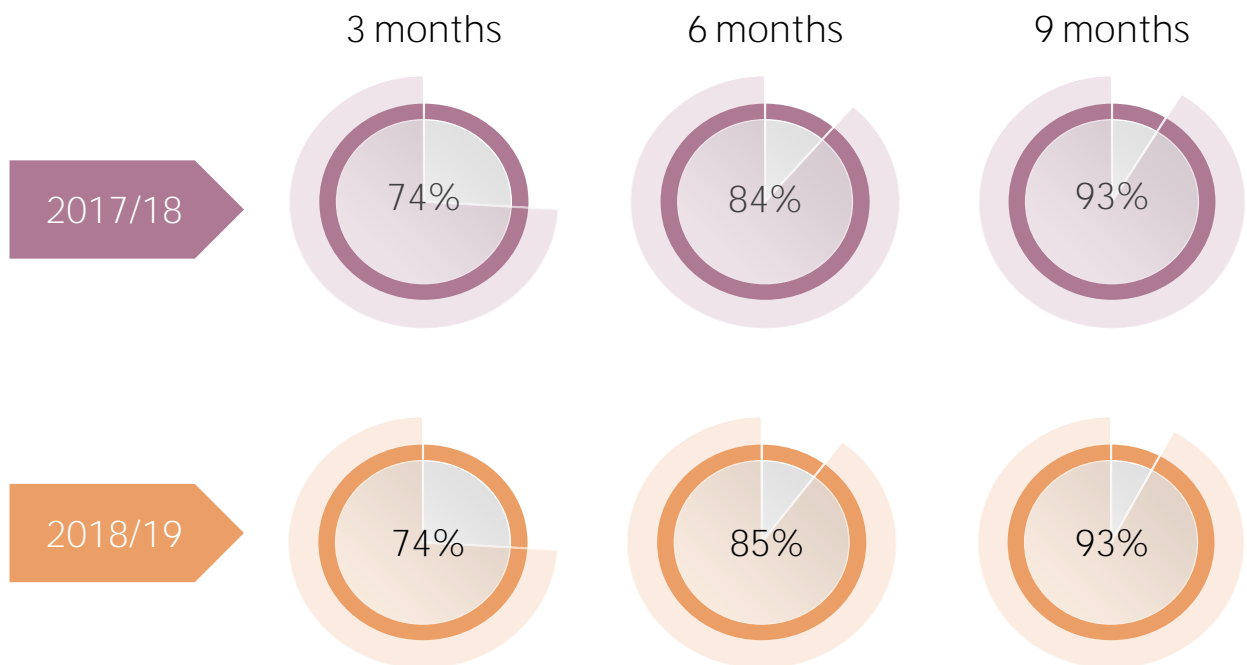
▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

**Arbitration**

is a formal proceeding at which evidence is heard and a legally qualified Arbitrator makes a final determination. However, some matters are settled before a formal arbitration hearing is required.

Dispute resolution timeframes proportion of matters

Disputes in the WA workers' compensation scheme were resolved within...



Overall, both 2017/18 and 2018/19 show a similar trend in dispute resolution timeframes.

In the latest year, 85% of matters were resolved within 6 months, a slight increase compared to 2017/18 (84%).

The proportion of disputes resolved within 9 months remained stable for both years at 93%.

SCHEME EXITS BY PAYMENT GROUPS



Over a four-year period, the total number of finalised claims that exited the scheme decreased by 19% to 27,095 claims in 2018/19.

The number of claims finalised without lump sum payments decreased by 19% and claims finalised with lump sum payments decreased by 18% over the same period.

The number of settlements and settlement payments also decreased between 2015/16 and 2018/19.

27,095

claims exiting the scheme in 2018/19 of which...

15%

incurred legal payments



31%

utilised workplace rehabilitation services



54%

received weekly income replacement



Settlements Pathways

A settlement finalises a worker's compensation claim by way of Memorandum of Agreement (MoA) or Section 92(f) deed.

In 2018/19, the proportion of claims finalised for both pathways (MoA or 92(f) deeds) was 20.8%.



Settlement rate	92(f)	MoA
2017/18	8.7%	13.3%
2018/19	8.8%	12.0%

Finalised claims numbers by exit type

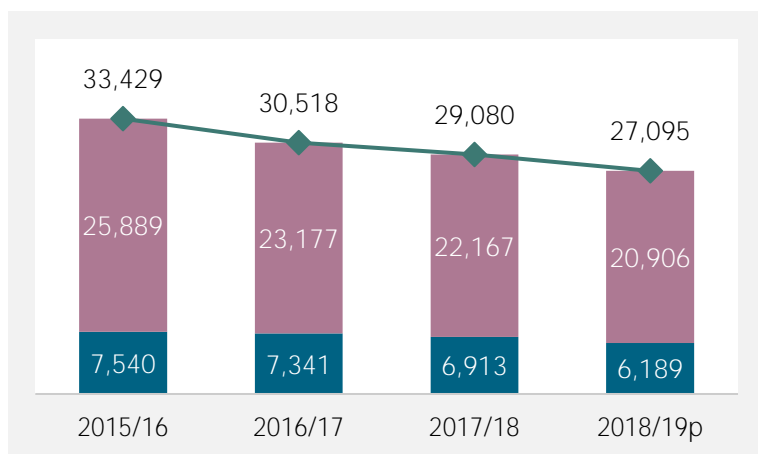
NUMBER	2015/16	2016/17	2017/18	2018/19p	4-year trend
Without lump sums	25,889	23,177	22,167	20,906	▼
With lump sums	7,540	7,341	6,913	6,189	▼
Total finalised claims	33,429	30,518	29,080	27,095	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Lump sum is a single payment made for all outstanding liabilities, as opposed to having a number of smaller payouts or instalments. Acceptance of a lump sum generally finalises a claim.

Finalised claims numbers by exit type



■ All finalised claims

Overall, the number of finalised claims across four years decreased by 19%.

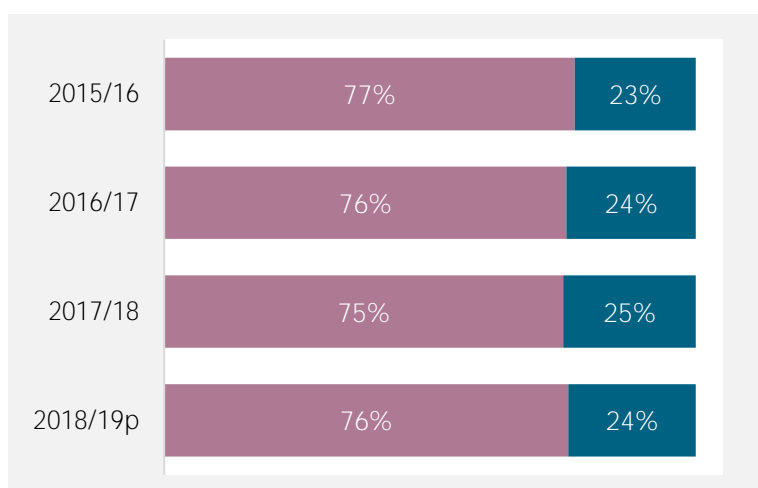
■ Finalised claims without lump sums

Over four years, the number of finalised claims without lump sum payments decreased by 19%.

■ Finalised claims with lump sums

Claims finalised with lump sum payments decreased by 18% from 2015/16 to 2018/19.

Finalised claims proportions by exit type



■ Finalised claims without lump sums

The majority of claims were finalised without lump sums. This proportion decreased slightly from 77% in 2015/16 to 76% in 2018/19.

■ Finalised claims with lump sums

In turn, the proportion of claims finalised with lump sum payments increased slightly from 23% in 2015/16 to 24% in 2018/19.

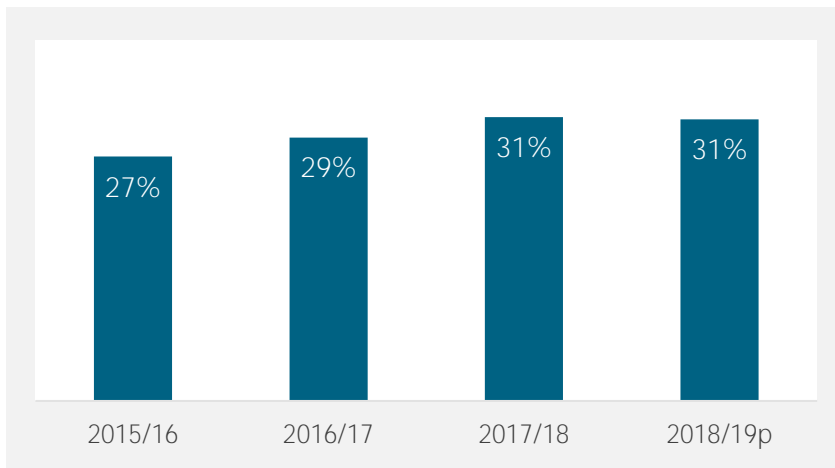
Workplace rehabilitation proportion of lost-time claims



Workplace rehabilitation

The proportion of lost-time claims utilising workplace rehabilitation services shows an increasing trend, from 27% in 2015/16 to 31% in 2018/19.

Workplace rehabilitation includes services such as case management, workplace activities, reports (general), and travel.

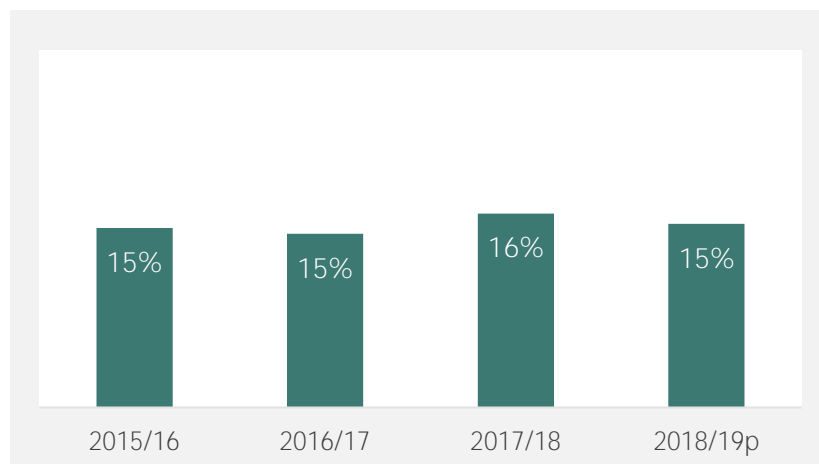


Legal payments proportion of all claims



Legal payments

The proportion of all claims exiting the scheme with legal payments ranges between 15% to 16% over four years.



SETTLEMENTS



The *Workers' Compensation and Injury Management Act 1981* provides different pathways for settling workers' compensation claims depending on whether the settlement relates to a statutory compensation claim or a common law action.

Section 92(f) deeds allow for resolution of common law actions that do not proceed to judgement in a Court.

A Memorandum of Agreement (MoA) is a legal instrument which, if registered with the Conciliation and Arbitration Services of WorkCover WA, records a statutory settlement of a worker's compensation claim.

Settlements number of settlements

PROPORTION	2015/16	2016/17	2017/18	2018/19p	4-year trend
MoA	4,327	4,116	3,859	3,264	▼
92(f) deeds	2,207	2,206	2,523	2,380	▲
Total settlements	6,534	6,322	6,382	5,644	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Settlements
decreased by 14% between 2015/16 and 2018/19 for both pathways (MoA and 92(f) deeds) to settle workers' compensation claims.

Settlement rate proportion of settlements to finalised claims

RATE	2015/16	2016/17	2017/18	2018/19p	4-year trend
MoA	12.9%	13.5%	13.3%	12.0%	▼
92(f) deeds	6.6%	7.2%	8.7%	8.8%	▲
Total settlements	19.5%	20.7%	21.9%	20.8%	▲

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



The settlement rate
for MoAs decreased by 7% and the settlement rate for section 92(f) deeds increased by 33% over the last four years.

**Settlement rate**

the number of settlements as a proportion of finalised claims.

Settlement payments \$million

\$MILLION	2015/16	2016/17	2017/18	2018/19p	4-year trend
MoA	\$133.1	\$121.0	\$110.6	\$94.1	▼
92(f) deeds	\$149.4	\$163.1	\$168.4	\$161.6	▲
Total settlements	\$282.5	\$284.1	\$279.0	\$255.7	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Settlement payments from 2015/16 to 2018/19 decreased by 9%, as a result of a decrease in MoA payments (29%), slightly offset by the increase in 92(f) deeds payments (8%).

Settlement payments as a proportion of finalised claim payments

PROPORTION	2015/16	2016/17	2017/18	2018/19p	4-year trend
MoA	12.9%	12.0%	11.8%	10.9%	▼
92(f) deeds	14.5%	16.2%	18.0%	18.7%	▲
Total settlements	27.4%	28.3%	29.8%	29.6%	▲

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Settlement payments as a proportion of finalised claim payments increased by 8% from 2015/16 to 2018/19.

GENDER COMPARISON | 2018/19

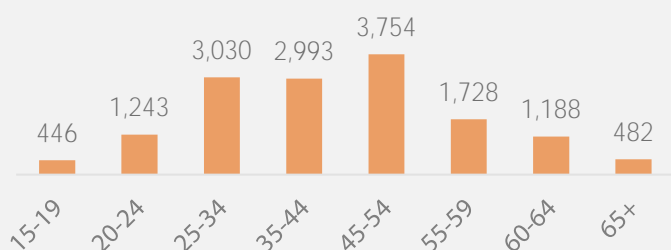
MALES
9,564
lost-time claims
frequency rate 7.4



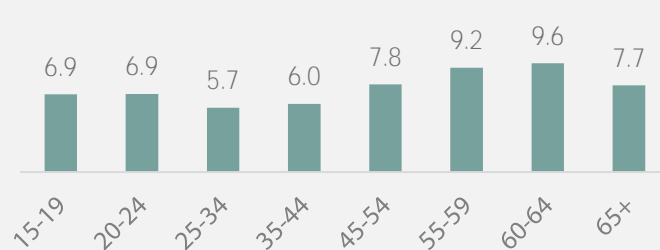
FEMALES
5,302
lost-time claims
frequency rate 6.4

AGE GROUPS | 2018/19

CLAIM NUMBERS



FREQUENCY RATE



TOP FOUR INDUSTRIES | 2018/19

CLAIM NUMBERS



Health care & social assistance
2,260



Construction
1,779



Manufacturing
1,611



Mining
1,420

FREQUENCY RATE



Arts & recreation services
13.8



Agriculture, forestry & fishing
11.1



Health care & social assistance
10.0



Manufacturing
9.7

Males lost-time claims by days lost

MALES	2015/16	2016/17	2017/18	2018/19p	4-year trend
1-4 days	2,200	1,856	1,698	1,634	▼
5-19 days	3,131	2,700	2,675	2,492	▼
20-59 days	2,304	2,144	2,057	2,050	▼
60-119 days	1,158	1,125	1,129	1,153	■
120-179 days	525	493	527	538	■
180+ days	1,442	1,440	1,453	1,697	▲
Lost-time claims	10,760	9,758	9,539	9,564	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Males

The overall trend for lost-time claims lodged by males decreased by 11% from 2015/16 to 2018/19.

The largest portion of claims lodged by males were for 5-19 days off work (26% in 2018/19).

Females lost-time claims by days lost

FEMALES	2015/16	2016/17	2017/18	2018/19p	4-year trend
1-4 days	1,315	1,259	1,168	1,101	▼
5-19 days	1,454	1,301	1,306	1,303	▼
20-59 days	903	946	1,007	1,007	▲
60-119 days	579	529	595	599	■
120-179 days	268	313	300	324	▲
180+ days	857	798	893	968	▲
Lost-time claims	5,376	5,146	5,269	5,302	■

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

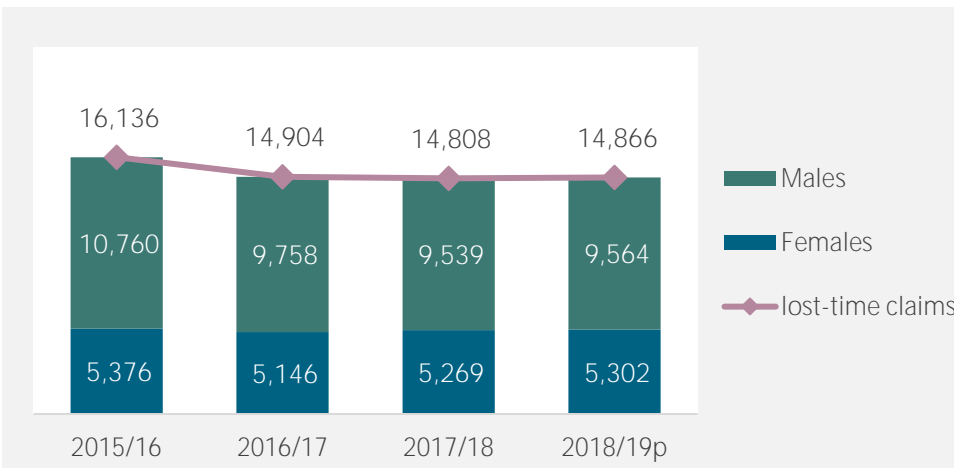


Females

Claims lodged by females over the last four years continues to remain stable.

Similar to males, the largest portion of claims were for 5-19 days lost across four years (25% in 2018/19).

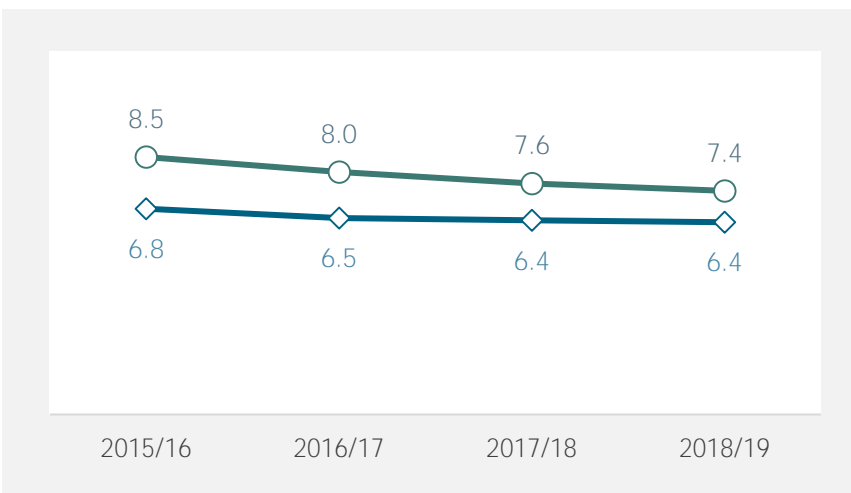
Lost-time claims by gender



Males lodged around two-thirds of lost-time claims with the remaining third of lost-time claims were lodged by females. This pattern is consistent across four years.

In 2018/19, males lodged 64% of claims, compared to 36% of claims lodged by females.

Frequency rate by gender



Frequency rate is the number of lost-time claims per million hours worked based on employed persons covered by workers' compensation.



Males

The frequency rate of males lodging a lost-time claim shows a decreasing trend over four years.



Females

The frequency rate of females lodging lost-time claims also shows a decreasing trend from over four years. However, females consistently had lower frequency rates than males.

Lost-time claims by age group

AGE GROUP	2015/16	2016/17	2017/18	2018/19p	4-year trend
15-19 years	613	473	463	446	▼
20-24 years	1,457	1,301	1,333	1,243	▼
25-34 years	3,531	3,089	3,032	3,030	▼
35-44 years	3,339	3,012	2,901	2,993	▼
45-54 years	3,984	3,908	3,809	3,754	▼
55-59 years	1,668	1,621	1,741	1,728	■
60-64 years	1,107	1,071	1,098	1,188	▲
65+ years	431	428	428	482	▲
Unknown	6	1	3	2	▼
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Age groups

Within the last four years, the 45-54 year old age group lodged the most lost-time claims.

The youngest age group (15-19 year olds) had the largest movement in lost-time claims (27%) over four years. However, this age group generally had the least number of lost-time claims between 2015/16 to 2018/19.

Frequency rate by age group

AGE GROUP	2015/16	2016/17	2017/18	2018/19p	4-year trend
15-19 years	8.7	7.9	7.5	6.9	▼
20-24 years	7.4	6.9	7.4	6.9	▼
25-34 years	6.5	5.9	5.6	5.7	▼
35-44 years	7.1	6.3	5.8	6.0	▼
45-54 years	8.8	8.8	8.4	7.8	▼
55-59 years	9.5	9.1	9.6	9.2	■
60-64 years	10.7	10.3	10.4	9.6	▼
65+ years	9.3	10.3	8.0	7.7	▼
Lost-time claims	7.9	7.4	7.2	7.0	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Age groups

From 2015/16 to 2018/19, 60-64 year olds had the highest frequency rate (9.6), followed by 55-59 year olds (9.2).

The largest decrease in frequency rate between 2015/16 to 2018/19 was the 15-19 year old age group (20%), followed by the 65+ year old age group (17%).

Lost-time claims by industry division

INDUSTRY	2015/16	2016/17	2017/18	2018/19p	4-year trend
Accommodation & food services	770	703	725	695	▼
Administrative & support services	350	327	340	327	▼
Agriculture, forestry & fishing	586	591	608	558	■
Arts & recreation services	391	400	385	397	■
Construction	2,679	2,024	1,950	1,779	▼
Education & training	1,237	1,340	1,312	1,402	▲
Electricity, gas, water & waste services	206	233	160	135	▼
Financial & insurance services	49	27	41	24	▼
Health care & social assistance	2,309	2,244	2,228	2,260	■
Information media & telecommunications	42	34	41	27	▼
Manufacturing	1,775	1,573	1,632	1,611	▼
Mining	1,228	1,218	1,298	1,420	▲
Other services	441	471	454	474	▲
Professional, scientific & technical services	238	231	256	275	▲
Public administration & safety	838	822	810	909	▲
Rental, hiring & real estate services	116	103	123	140	▲
Retail trade	1,249	1,076	1,044	995	▼
Transport, postal & warehousing	1,027	964	886	883	▼
Wholesale trade	605	523	515	555	▼
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

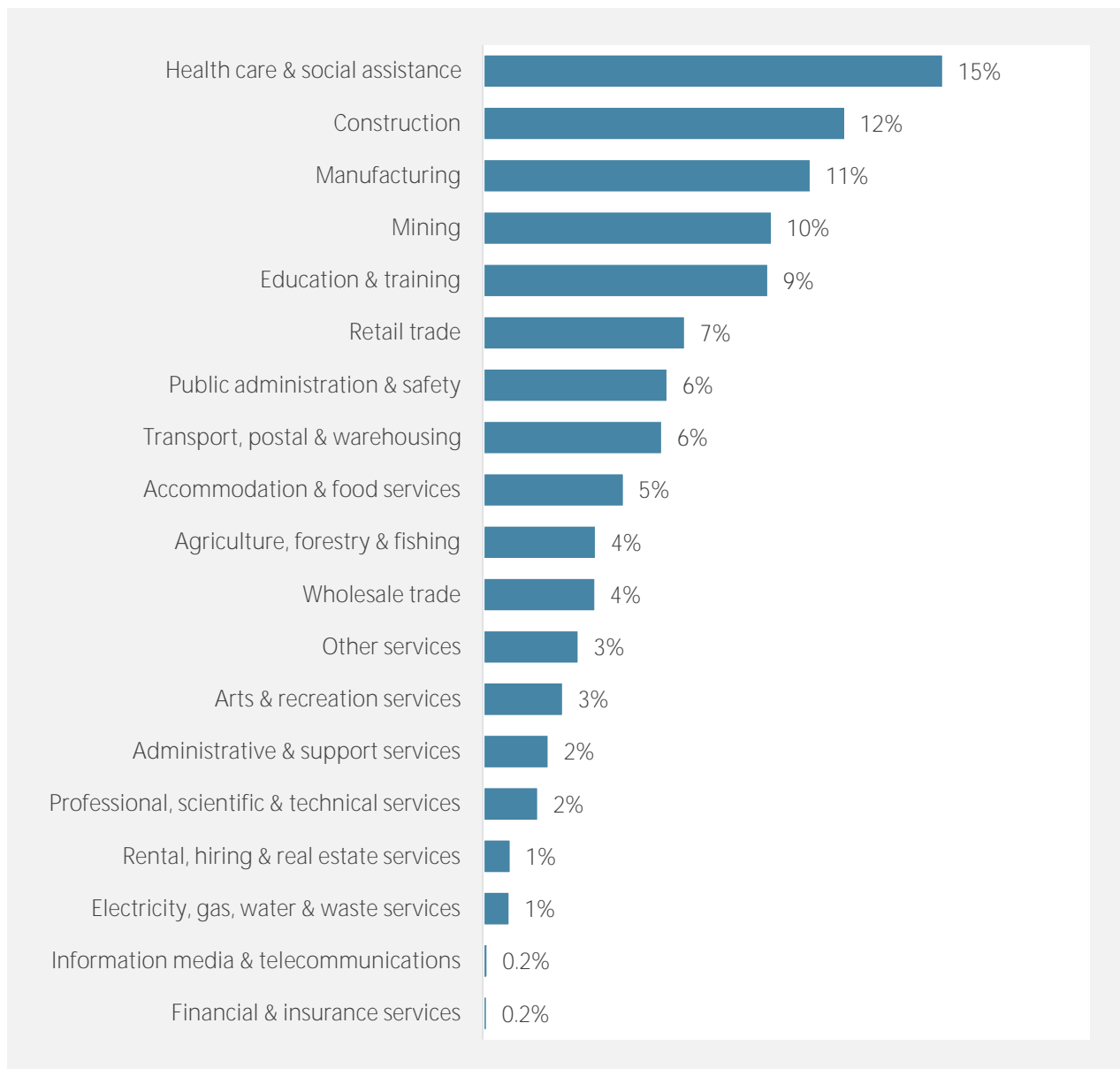


The industry with the highest number of lost-time claims over four years was Health care and social assistance. For 2018/19, 2,260 lost-time claims were lodged.



Financial and insurance services was the industry with the lowest number of lost-time claims across four years. In 2018/19, 24 lost-time claims were lodged.

Lost-time claims proportions by industry division 2018/19p

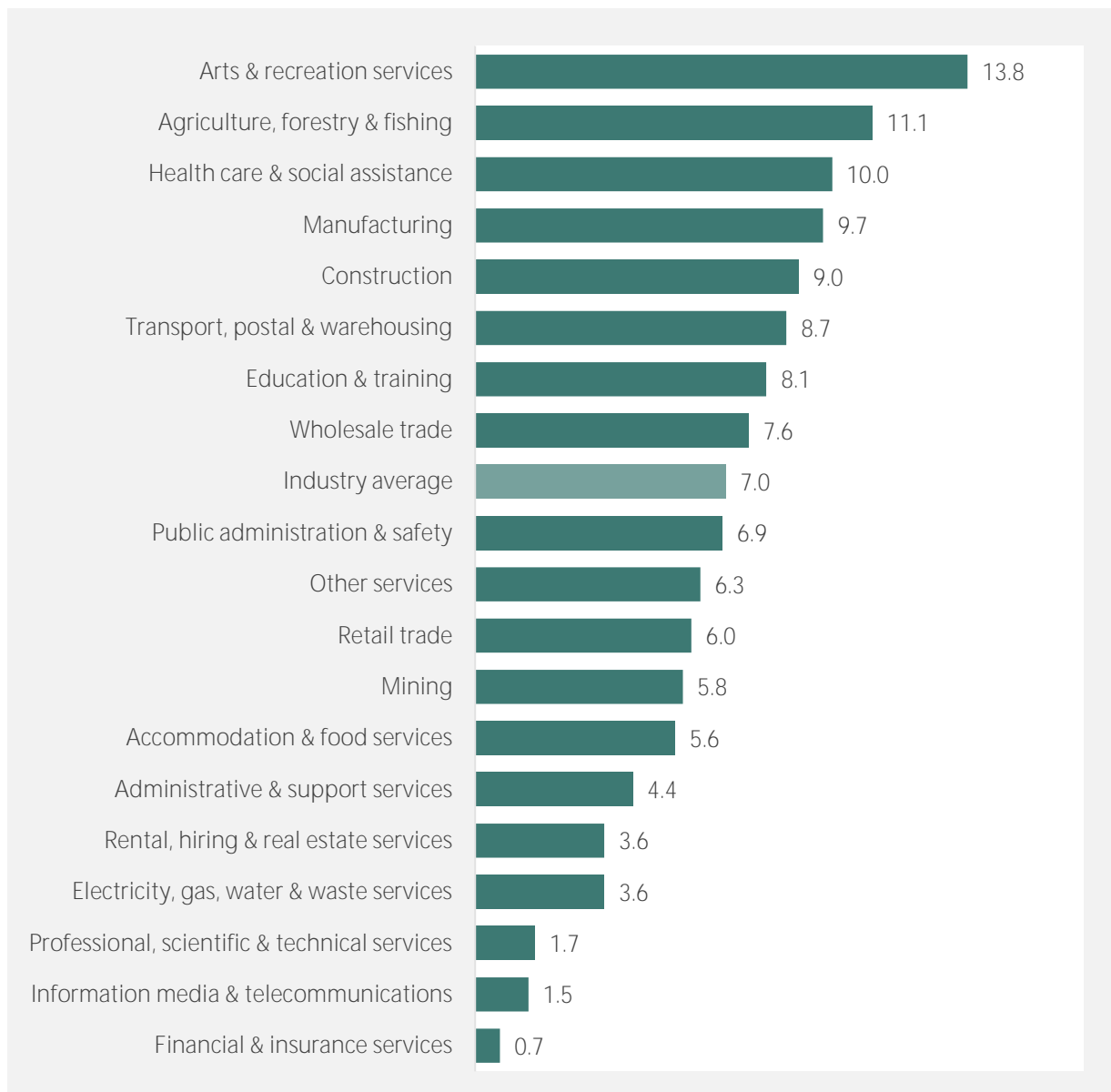


The highest proportion of lost-time claims were associated with manual labour and high risk industries.



In 2018/19, the industries with the highest proportion of lost-time claims were Health care and social assistance (15%), Construction (12%) and Manufacturing (11%).

Frequency rate by industry division 2018/19p



The risk associated with different industries is evident in frequency rates. For 2018/19, the average industry rate was 7 claims per million hours worked.



In 2018/19, industries with the highest frequency rates were Arts and recreation services (13.8), Agriculture, forestry and fishing (11.1), and Health care and social assistance (10.0).

Lost-time claims by occupation

OCCUPATION	2015/16	2016/17	2017/18	2018/19p	4-year trend
Clerical & administrative workers	566	536	560	507	▼
Community & personal service workers	2,608	2,709	2,667	2,864	▲
Labourers	3,621	3,065	3,030	2,893	▼
Machinery operators & drivers	2,669	2,482	2,403	2,480	▼
Managers	408	448	426	508	▲
Professionals	1,381	1,277	1,315	1,345	■
Sales workers	826	679	641	625	▼
Technicians & trades workers	4,057	3,708	3,766	3,644	▼
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Technicians and trades workers had the highest number of lost-time claims across four years.



Labourers had the second highest number of lost-time claims from 2015/16 to 2018/19.



Managers had the least amount of lost-time claims lodged between 2015/16 and 2018/19.

Lost-time claims proportions by occupation 2018/19p



In 2018/19, Technicians and trades workers accounted for the highest proportion (25%) of lost-time claims across all occupations, followed by Labourers (19%), and Community and personal service workers (19%).

Lost-time claims proportions by region

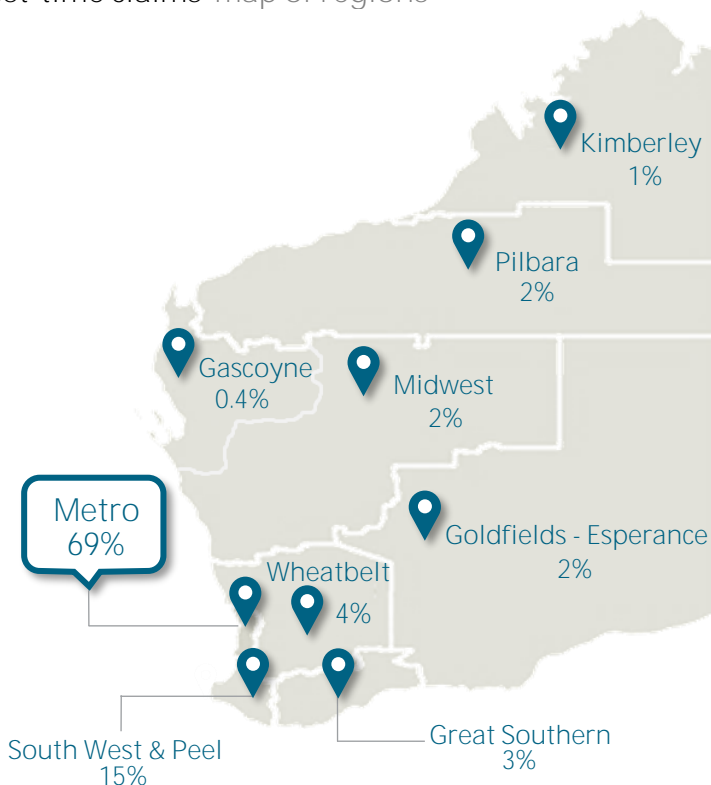
REGION	2015/16	2016/17	2017/18	2018/19p	4-year trend
Metropolitan	70%	70%	69%	69%	■
South West	8%	9%	9%	8%	■
Peel	6%	6%	7%	7%	▲
Wheatbelt	4%	4%	4%	4%	■
Great Southern	3%	3%	3%	3%	■
Goldfield - Esperance	2%	3%	2%	2%	■
Midwest	2%	2%	3%	2%	▼
Pilbara	2%	2%	2%	2%	▲
Kimberley	2%	2%	2%	1%	▼
Gascoyne	0.4%	0.4%	0.4%	0.4%	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)



Region is based on the occurrence address where the work-related incident occurred.

Lost-time claims map of regions



The map illustrates the geographic distribution of lost-time claims lodged in 2018/19 across the state.

The majority of lost-time claims occurred in the Perth metropolitan area (69%). The South West and Peel region had the second highest number of lost-time claims lodged (15%), followed by the Wheatbelt (4%).

The distribution of lost-time claims across the state is reflective of population and employment density in Western Australia.

EXTENT OF INCAPACITY



Over the last four years, around three-quarters of work-related injuries and diseases resulted in temporary incapacity for claimants.

Injuries resulting in permanent incapacity and work-related fatalities decreased over the same period.



77%

of workers who lodged lost-time claims resulted in TEMPORARY INCAPACITY

and



22%

of workers who lodged lost-time claims resulted in PERMANENT INCAPACITY

The most common types of work-related injury/disease in

2018/19



51%

Traumatic joint/ligament & muscle tendon injury



21%

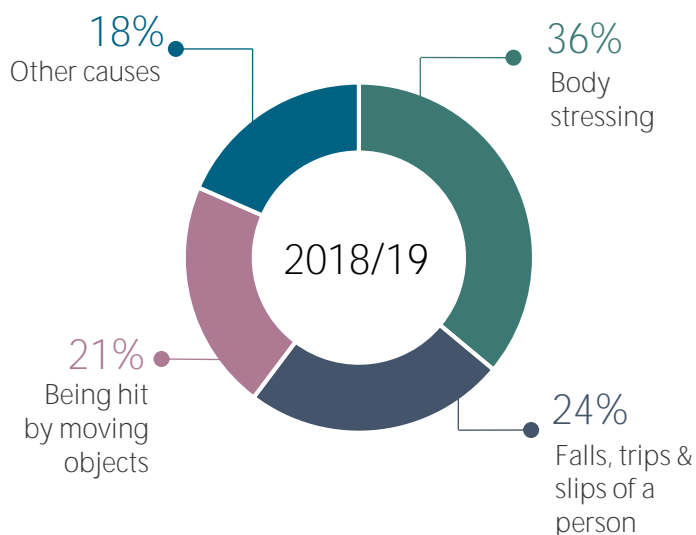
Wounds, lacerations, amputations & internal organ



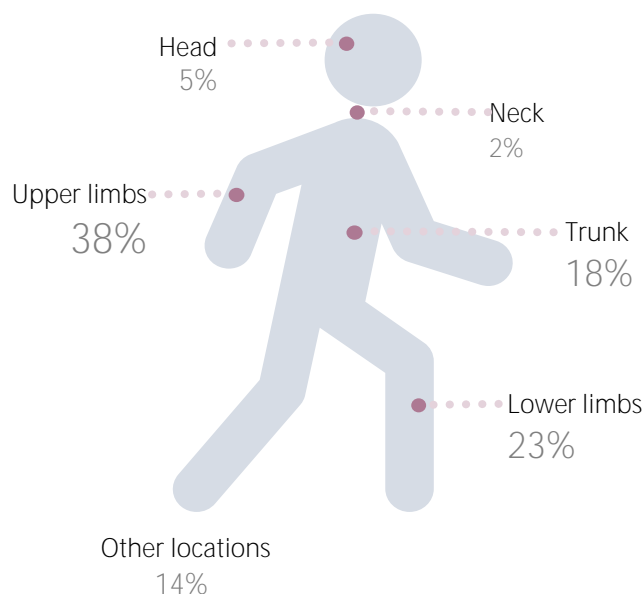
12%

Fractures

MECHANISM OF INCIDENT



BODILY LOCATION



Level of incapacity* lost-time claims

CLAIMS	2015/16	2016/17	2017/18	2018/19p	4-year trend
Temporary incapacity	11,046	10,204	10,557	11,494	■
Permanent incapacity - partial	4,996	4,582	4,145	3,296	▼
Permanent incapacity - total	74	91	74	47	▼
No incapacity at any time	16	27	26	27	▲

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

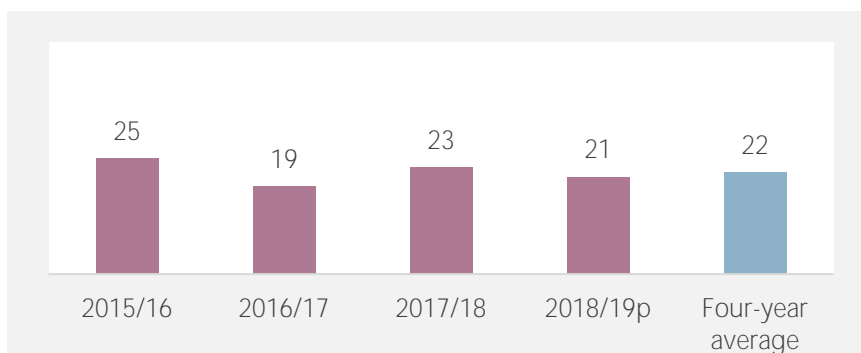
* Due to the evolving nature of claims, level of incapacity data is subject to change particularly the most recent year.

Level of incapacity proportion of lost-time claims

PROPORTION	2015/16	2016/17	2017/18	2018/19p	4-year trend
Temporary incapacity	68%	68%	71%	77%	▲
Permanent incapacity - partial	31%	31%	28%	22%	▼
Permanent incapacity - total	0.5%	0.6%	0.5%	0.3%	▼
No incapacity at any time	0.1%	0.2%	0.2%	0.2%	▲

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

Workplace fatalities number of compensated fatalities



⚠ Over four years, the number of compensated work-related fatalities in WA ranged from 19 to 25, averaging 22 fatalities per year.

Nature of injury/disease lost-time claims

	2015/16	2016/17	2017/18	2018/19p	4-year trend
INJURY					
Traumatic joint/ligament and muscle/tendon injury	8,768	7,755	7,584	7,583	▼
Wounds, lacerations, amputations and internal organ damage	3,375	3,243	3,139	3,141	▼
Fractures	1,783	1,688	1,792	1,753	■
Burn	315	294	338	361	▲
Intracranial injuries	135	122	166	165	▲
Other injuries	404	333	315	275	▼
DISEASE					
Musculoskeletal & connective tissue diseases	545	652	669	615	▲
Mental diseases	416	397	426	546	▲
Digestive system diseases	200	195	182	183	▼
Nervous system & sense organ diseases	86	104	100	107	▲
Skin & subcutaneous tissue diseases	40	40	23	30	▼
Infectious and parasitic diseases	23	24	11	25	▲
Respiratory system diseases	12	13	11	20	▲
Circulatory system diseases	8	6	8	6	▼
Other diseases	26	38	44	56	▲
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing (≥ +5%) ■ Stable (within +/-5%) ▼ Decreasing (≤ -5%)



The nature of injury or disease classification is intended to identify the most serious injury/disease suffered by the worker.



Traumatic joint/ligament and muscle/tendon injury was the most common injury over four years. In 2018/19, this injury type accounted for 51% of lost-time claims.



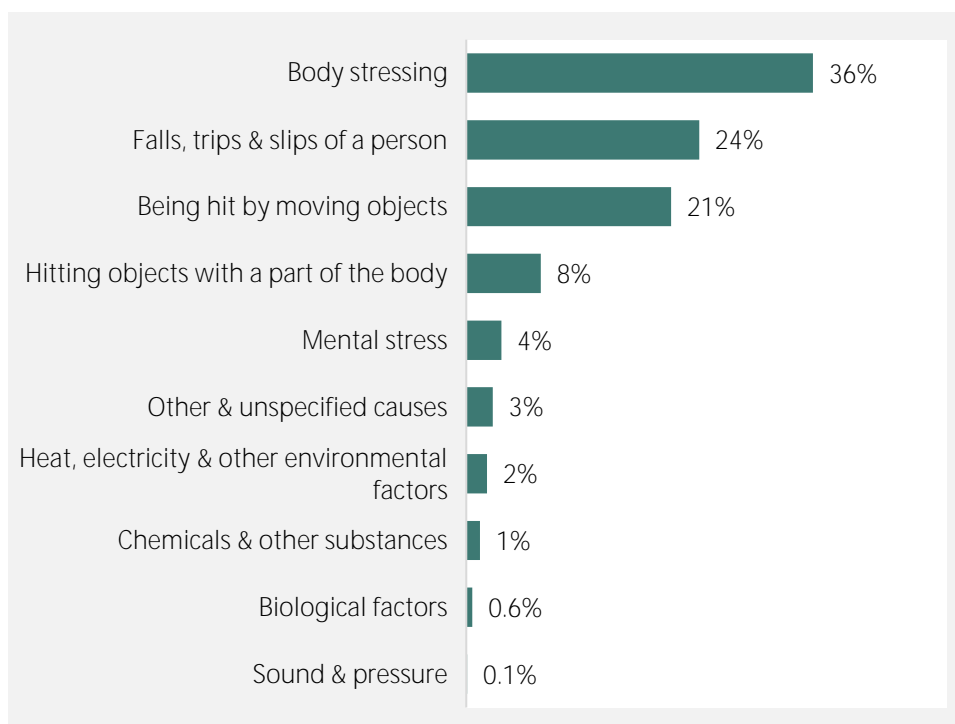
Musculoskeletal and connective tissue diseases were the most common type of disease for lost-time claims lodged between 2015/16 and 2018/19.

Mechanism of incident lost-time claims

	2015/16	2016/17	2017/18	2018/19p	4-year trend
Body stressing	6,105	5,625	5,447	5,359	▼
Falls, trips & slips of a person	3,948	3,734	3,622	3,601	▼
Being hit by moving objects	3,300	3,085	3,206	3,165	■
Hitting objects with a part of the body	1,363	1,132	1,161	1,149	▼
Mental stress	413	392	423	543	▲
Other & unspecified causes	409	359	346	410	■
Heat, electricity & other environmental factors	279	257	294	319	▲
Chemicals & other substances	241	220	232	211	▼
Biological factors	62	86	52	95	▲
Sound & pressure	16	14	25	14	▼
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing (≥ +5%) ■ Stable (within +/-5%) ▼ Decreasing (≤ -5%)

Mechanism of incident proportion of lost-time claims in 2018/19p



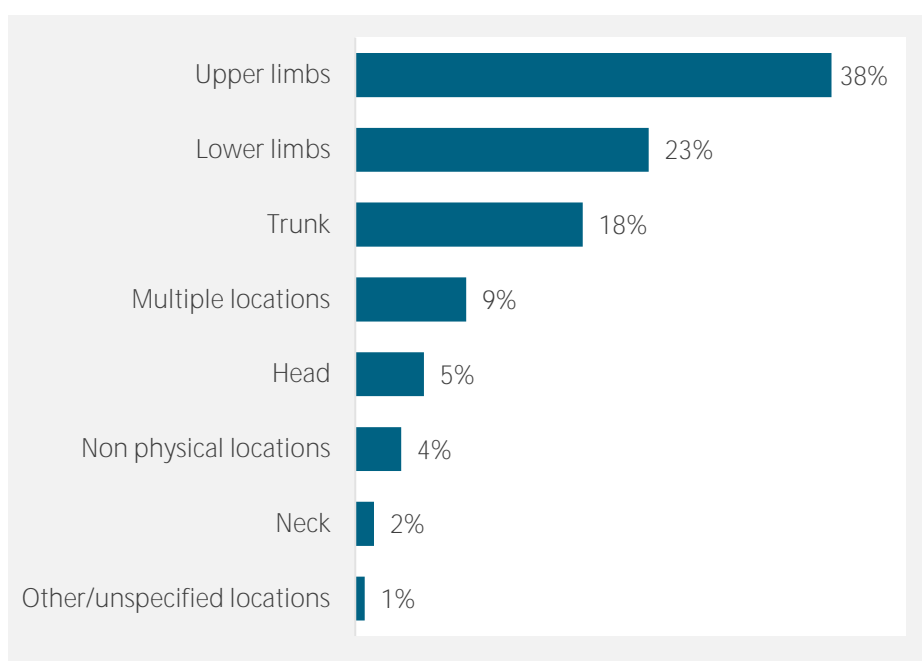
In 2018/19, the predominant causes of work-related injuries or diseases were due to body stressing (36%), falls, trips and slips of a person (24%), and being hit by moving objects (21%).

Bodily location of injury/disease lost-time claims

	2015/16	2016/17	2017/18	2018/19p	4-year trend
Upper limbs	6,140	5,661	5,762	5,659	▼
Lower limbs	3,776	3,503	3,482	3,487	▼
Trunk	3,348	3,023	2,756	2,703	▼
Multiple locations	1,222	1,205	1,215	1,318	▲
Head	906	782	843	817	▼
Non physical locations	416	397	426	546	▲
Neck	220	235	200	223	■
Other/unspecified locations	108	98	124	113	■
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

Bodily location of injury/disease proportion of lost-time claims in 2018/19p



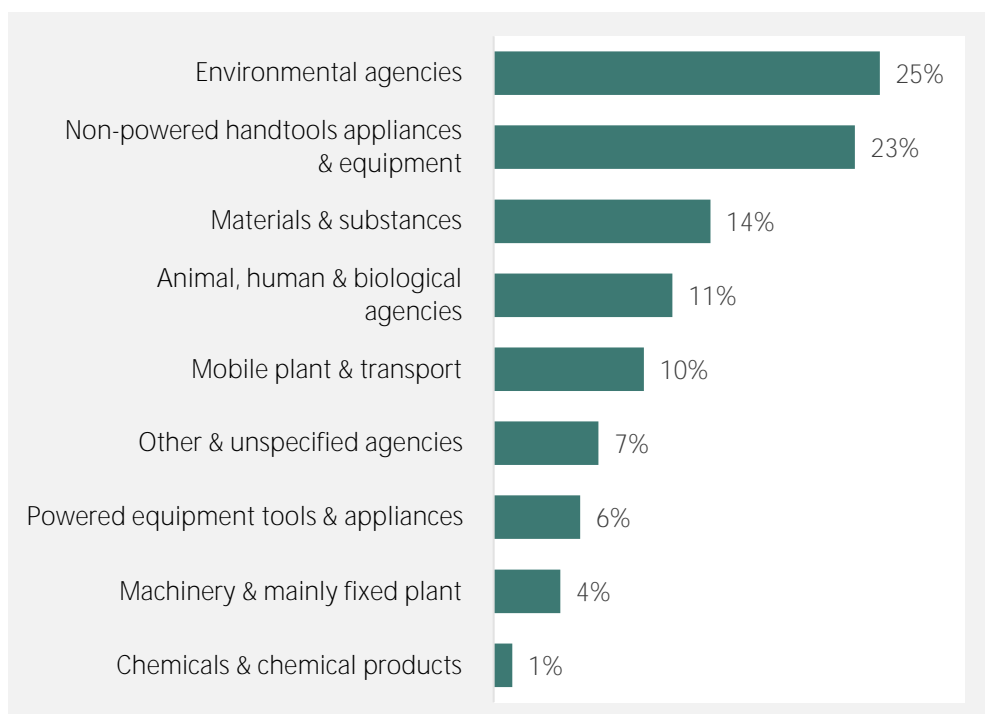
In 2018/19, work-related injuries or diseases predominantly occurred to the upper limbs (38%), lower limbs (23%), and trunk (18%).


Agency of injury/disease lost-time claims


	2015/16	2016/17	2017/18	2018/19p	4-year trend
Environmental agencies	3,931	3,632	3,612	3,657	▼
Non-powered handtools appliances & equipment	3,716	3,556	3,384	3,422	▼
Materials & substances	2,701	2,080	2,168	2,053	▼
Animal, human & biological agencies	1,625	1,631	1,660	1,694	■
Mobile plant & transport	1,341	1,422	1,369	1,424	▲
Other & unspecified agencies	1,078	966	875	992	▼
Powered equipment tools & appliances	869	861	828	818	▼
Machinery & mainly fixed plant	694	609	726	630	▼
Chemicals & chemical products	181	147	186	176	■
Lost-time claims	16,136	14,904	14,808	14,866	▼

▲ Increasing ($\geq +5\%$) ■ Stable (within $\pm 5\%$) ▼ Decreasing ($\leq -5\%$)

Agency of injury/disease proportion of lost-time claims in 2018/19p



 The agency of injury or disease identifies the object, substance, or circumstance which was the direct cause of the most serious injury or disease.

 In 2018/19, environmental agencies accounted for 25% of work-related injuries or diseases, followed by non-powered handtools, appliances, and equipment (23%).

Act

The *Workers' Compensation and Injury Management Act 1981*.

Age

Chronological age (in years) of the worker at the date of injury or disease.

Agency of injury or disease

The object, substance or circumstance that was principally involved in or most closely associated with the point at which things started to go wrong and which ultimately led to the most serious injury or disease. The agency classification is based on the *Type of Occurrence Classification System 3rd edition* published by Safe Work Australia (safeworkaustralia.gov.au).

Arbitration

If an agreement cannot be reached through a conciliation, the dispute can proceed to a more formal process where an independent and impartial lawyer (arbitrator) will assess evidence presented by the worker and other parties at a formal hearing or series of hearings.

Bodily location of injury or disease

The part of the body affected by the most serious injury or disease. The bodily location is based on the *Type of Occurrence Classification System 3rd edition* published by Safe Work Australia (safeworkaustralia.gov.au).

Claimant

A person who lodges a claim in the WA workers' compensation scheme.

Claim costs

An estimate of costs for unfinalised claims, and total cost of finalised claims attributed to the year in which a claim was lodged. Due to the evolving nature of claims, data is subject to change particularly the most recent year. Claim costs are not adjusted for inflation.

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 with the insurer. For the purposes of this report, certain types of claims were excluded:

- ▲ lost-time journey claims between home and work
- ▲ asbestos-related diseases, including mesothelioma and pneumoconiosis, caused by asbestos exposure
- ▲ duplicated or disallowed (by an insurer).

Due to the evolving nature of claims, data is subject to change particularly the most recent year.

Claim management

The *Workers' Compensation and Injury Management Act 1981* requires:

- ▲ an employer to lodge a claim with the insurer within five working days of receiving a claim form and first medical certificate.
- ▲ an approved insurer to give a worker and the respective employer notice of a decision on a lodged workers' compensation claim within 14 days.
- ▲ a self-insurer to give a worker and the respective employer notice of a decision on a lodged workers' compensation claim within 17 days.

Claim payments

Categories are based on WorkCover WA's Guidelines for Completing Form WC 101. Claim payments are in contrast with claim costs 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 with the insurer. In this report, claim payments are reported both in adjusted and unadjusted formats. In relation to the former, payments are adjusted for inflation to allow for meaningful comparisons over time.

Conciliation

Involves parties in dispute coming to their own agreement, with the assistance of an independent and impartial Conciliation Officer.

Continuance rate

Monitors claims over time from the date a claim was lodged with an insurer. The continuance rate shows the number of claims involving weekly income replacement payments at three months, six months and twelve months as a proportion of claims involving weekly income replacement payments at one month. This indicator provides insight into claim duration and scheme exits.

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.

Direct compensation

Payments made directly to the worker either by income replacement (payments made for absences from work) or lump sums such as:

- ▲ redemption payments made under Schedule 1
- ▲ specific injury payments made under Schedule 2
- ▲ fatal payments including funeral expenses
- ▲ common law and other Acts payments.

Dispute

A dispute over a workers' compensation claim by parties involved (e.g. insurer, employer, worker). A dispute can occur at any stage of a claim in relation to a number of matters.

Disputation rate

The number of dispute applications per 100 active claims for the reference year.

Extent of incapacity

The outcome of the injury or disease as assessed by the insurer and the treating doctor. Categories include:

- ▲ temporary incapacity
- ▲ permanent incapacity - partial
- ▲ permanent incapacity - total.

Frequency rate

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.

Income claims

Refers to claims with weekly income replacement (weekly benefits).

Industry

Based on the *Australian and New Zealand Standard Industrial Classification (ANZSIC) 2006* published by the Australian Bureau of Statistics. The ANZSIC system groups together businesses that carry out similar economic activities and structured into a hierarchy of units reflecting different levels of description (abs.gov.au).

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.

Liability decision period

The number of calendar days between the date the claim was lodged with the insurer and the first date on which the insurer made a decision (accepted or rejected) about liability for the claims.

Lodgement year

The financial year in which the claim was lodged with the insurer.

Long duration claims

Claims for which the injury or disease results in an absence from work of at least 60 days or shifts.

Lost-time claims

Claims for which the work-related injury or disease results in an absence from work of at least one day or shift.

Mechanism of incident

The action, exposure or event that best describes the circumstances that resulted in the most serious injury or disease. The mechanism classification is based on the *Type of Occurrence Classification System 3rd edition* published by Safe Work Australia (safeworkaustralia.gov.au).

Nature of injury or disease

The most serious injury or disease suffered by the worker. The nature of injury or disease classification is based on the *Type of Occurrence Classification System 3rd edition* published by Safe Work Australia (safeworkaustralia.gov.au).

Occupation

Based on the *Australian and New Zealand Standard Classification of Occupations (ANZSCO)* published by the Australian Bureau of Statistics. It is a skill-based classification which encompasses all occupations in the Australian workforce (abs.gov.au).

Region

Based on the address where the incident of injury or disease occurred.

Service payments

Service payments include:

1. medical and hospital payments:
 - ▲ medical practitioner and specialist payments (consultation and treatment expenses rendered by general practitioners and medical specialists)
 - ▲ hospital expenses (hospital accommodation and hospital treatment)
2. allied health payments:
 - ▲ other treatment and appliance payments (includes payments made under clauses 17(1)(3), (4), (5) and (6) of Schedule 1 of the Act, other than medical and hospital expenses)
3. workplace rehabilitation payments:
 - ▲ workplace rehabilitation payments (includes payments made under clause 17 (1a) of Schedule 1 of the Act in respect to counselling, occupational training, work assessment, aids and appliances)
4. legal and miscellaneous:
 - ▲ 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)
 - ▲ miscellaneous (includes general items that do not fit in any other category, for example travelling, meals and lodgings, under clause 19 of Schedule 1).

Settlement

A pathway to finalising a worker's compensation claim depending on whether the settlement relates to a statutory compensation claim or a common law action. If a worker enters into a settlement, they will not be entitled to any further compensation under the *Workers' Compensation and Injury Management Act 1981*.

Settlement rate

The number of settlements recorded as a proportion of finalised claims.

Work status

The work status rate measures the proportion of workers who have been off work for at least one day as a result of their work-related injury/disease and have returned to work in any capacity at 1 month, 3 months, 6 months and 12 months from the date of claim lodgement.

Worker

As defined in Section 5 of the *Workers' Compensation and Injury Management Act 1981*, a worker is defined as:

- a) any person to whose service any industrial award or industrial agreement applies; and
- b) any person engaged by another person to work for the purpose of the other person's trade or business under a contract with him for service, the remuneration by whatever means of the person so working being in substance for his personal manual labour or services.

- 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 and self-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.**