

Key Work Health and Safety Statistics, Australia





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Key work health and safety statistics

- In 2007–08, there were 134 835 workers' compensation claims for serious work-related injuries or illnesses. This equates to an incidence rate of 13.8 serious claims per 1000 employees.
- Preliminary data for 2008–09 show there were 128 735 serious workers' compensation claims, which equates to 13.0 serious claims per 1000 employees. While the final number of accepted claims for this year is likely to be around 3% higher, this will still represent an improvement from 2007-08.
- Male employees experienced nearly twice the rate of serious injury or disease compared with female employees.
- Incidence rates of serious workers' compensation claims increase with employee age.
- The highest incidence rates were recorded by Labourers & related workers, nearly three times the rate for all occupations.
- The Agriculture forestry & fishing; Transport & storage and Manufacturing industries recorded the highest incidence rates of all industries, all with nearly twice the rate for all industries.
- A typical serious workers' compensation claim involves four weeks absence from work
- One-quarter of serious claims require 12 or more weeks off work.
- One in four serious claims involved the use of non-powered handtools or equipment.
- One in five serious claims involved an injury to the back.
- The Australian Bureau of Statistics' Work Related Injury Survey showed 53 out of every 1000 workers experienced an injury or illness in the workplace in 2009-10. However, half of these incidents involved less than one day or shift absent from work.
- Work related injury and illness were estimated to cost \$57.5 billion in the 2005-06 financial year. This represented 5.9% of GDP.

¹ Serious claims involve a death, a permanent incapacity or a temporary incapacity requiring an absence from work of one working week or more

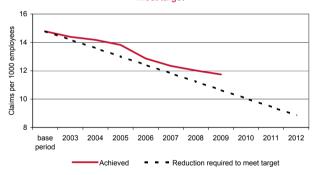
National OHS Strategy 2002–2012

Injury and musculoskeletal claims

Target: 40% reduction in the incidence of work-related injury by 30 June 2012 with 20% improvement required to meet the 2006–07 interim target.

Result: There was a 22% decrease in the injury incidence rate up to 2008–09 (Figure 1). This is only slightly higher than the 20% improvement which was to be met by 2006–07. A much greater rate of improvement is required to meet the 2012 target.

Figure 1 Incidence of serious claims: achieved versus reduction required to meet target

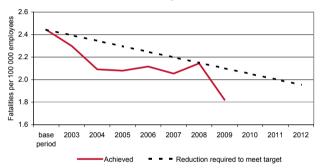


Fatalities

Target: 20% reduction in the incidence of compensated work-related fatalities by 30 June 2012 with 10% improvement required to meet the 2006-07 interim target.

Result: The interim target was achieved and a 25% decrease was recorded up to 2008-09. However, as Figure 2 shows, the volatility in this measure means that consistent improvement is still required to ensure the 2012 target is achieved.

Figure 2 Incidence of fatalities: achieved versus reduction required to meet target

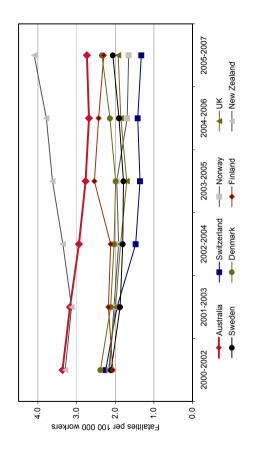


Aspirational target

Target: Australia to have the lowest work-related traumatic injury fatality rate in the world by 2009.

Result: While Australia has one of the fastest falling fatality rates among the best performing countries world wide, it has remained in 7th place (Figure 3). Australia is unlikely to have met this aspirational goal.

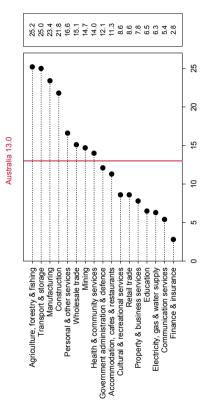
Figure 3 Comparison of Australia's work-related injury fatality rate with the best performing countries



Industry

Construction) had incidence rates substantially above the all industries rate of 13.0 serious claims per In 2008–09, four industries (Agriculture, forestry & fishing; Transport & storage; Manufacturing and 1000 employees (Figure 4). These industries, with the addition of the Health & community services industry, were identified as priority industries under the National OHS Strategy 2002-2012.

Figure 4 Incidence rates of serious claims by industry, 2008-09p



Types of workers' compensation claims

In 2008–09, injury or poisoning accounted for 74% of serious workers' compensation claims, with disease claims accounting for the balance. However, the number of disease claims is likely to be underestimated due to difficulties associated with linking the disease to workplace exposure

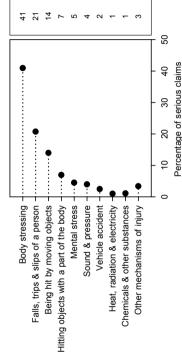
The most common work-related injuries were sprains and strains (43% of all serious claims).

20 6 Figure 5 Serious claims: percentage by nature of injury or disease, 2008-09p 20 9 Sprains & strains of joints & adjacent muscles Fractures Mental disorders Deafness Hernia Burns Dislocation Other injuries Other diseases Open wound not involving traumatic amputation Contusion with intact skin surface excluding fractures Disorders of muscle, tendons & other soft tissues Dorsopathies - disorders of the spinal vertebrae

Percentage of serious claims

Body stressing, Falls, trips & slips of a person and Being hit by a moving object were the mechanisms of priority mechanisms in the National OHS Strategy 2002–2012. There was little change in the proportion work-related injury or illness responsible for 76% of serious workers' compensation claims in 2008–09 (Figure 6). These mechanisms, together with Hitting objects with part of the body, were identified as of claims due to these mechanisms of injury or illness in the last six years.

Figure 6 Serious claims: Percentage by mechanism of injury / disease, 2008-09p



Work-related fatalities

- Preliminary data for 2008–09 shows there were 223 accepted workers' compensation claims for work-related deaths, down from the 286 recorded for 2007–08
- Three-quarters of compensated fatalities were due to injury (170 in 2008–09), with the remainder due to disease.
- However, workers' compensation data do not include fatalities
 where there are no dependants to lodge a claim or where the
 worker was self-employed. Therefore, workers' compensation data
 underestimate the total number of work-related fatalities.
- The Work-related Traumatic Injury Fatalities report combines information on fatalities from a number of sources. The 2007–08 report showed there were 289 worker fatalities, 98 commuting fatalities and 55 bystanders killed as a result of someone else's work activity.
- Table 1 shows that the highest fatality rate and the second highest number of worker fatalities occurred in the Agriculture, forestry & fishing industry. The Transport & storage industry had the highest number of fatalities and the second highest fatality rate.
- More recent data on work-related fatalities can be found in the Notified Fatalities Statistical Report for 2009–10. This report only includes those deaths notified to work health and safety authorities and generally does not include work-related deaths due to traffic incidents on public roads. This report shows that the number of notifiable worker fatalities increased from 134 in 2007–08 to 151 in 2008–09, but then decreased considerably in 2009–10 to 111 fatalities.

The increase and subsequent decrease in the number of notifiable work-related fatalities in 2008–09 and 2009–10 respectively may be reflected in future editions of *Work-related Traumatic Injury Fatalities*. However, because of the more comprehensive methodology used when compiling *Work-related Traumatic Injury Fatalities*, the figures for 2008–09 and 2009–10 will differ from those presented in the *Notified Fatalities Statistical Report*.

Table 1 Worker fatalities: number and fatality rate (fatalities per 100 000 workers), 2007-08

Industry	Number	Fatality Rate
Agriculture, forestry & fishing	67	18.6
Transport & storage	72	14.4
Mining	8	5.5
Construction	40	4.2
Cultural & recreational services	8	2.8
Wholesale trade	10	2.2
Manufacturing	23	2.1
Property & business services	27	2.1
Personal & other services	7	1.7
Retail trade	11	0.7
Other industries	16	0.4
All industries	289	2.7

Source: Work-related Traumatic Injury Fatalities, 2007-08

- The total number of work-related disease fatalities has been conservatively estimated to be at least 2000 deaths per year².
- In 2007, there were 551 registered deaths attributed to mesothelioma: an increase on the 486 deaths registered in 2006. It has been estimated that the numbers will not peak until after 2014^3 .

² Kerr et al. 1996. Best Estimate of the Magnitude of Health Effects of Occupational Exposure to Hazardous Substances, Worksafe Australia Developmental Grant Final Report, April 1996.

³ Clements et al. 2007. Actuarial projections for mesothelioma: an epidemiological perspective. Presented to the Actuaries of Australia XIth Accident Compensation Seminar.

Occupational disease indicators

- Safe Work Australia has identified eight priority occupational disease groups to receive attention. These disease groups have been chosen because they have a high attribution to the work environment
- Workers' compensation data are complemented, where possible, by information from the other sources⁴ to better identify occupational disease trends.
- Table 2 presents the trends in the incidence of occupational disease between 2000–01 and 2006–07. Decreasing trends were observed for five of the eight priority disease groups. Noiseinduced hearing loss; Respiratory diseases and Occupational cancers did not display a clear overall trend of increase or decrease

Table 2 Occupational disease indicators: trend from 2000–01 to 2006–07

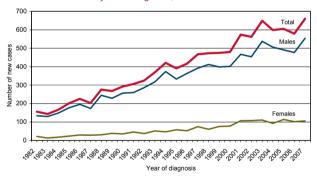
Trend over time	Occupational Disease	
•	Musculoskeletal disorders	
V	Mental disorders	
→	Noise-induced hearing loss	
V	Infectious and parasitic diseases	
→	Respiratory diseases	
V	Contact dermatitis	
V	Cardiovascular diseases	
→	Occupational cancers	

⁴ National Hospital Morbidity Database, National Notifiable Diseases Surveillance System, National Cancer Statistics Clearing House

Mesothelioma

- Data on the number of new cases of mesothelioma are collected nationally by the Australian Institute of Health and Welfare (AIHW).
- The number of new cases of mesothelioma diagnosed increased from 156 in 1982 to a peak of 660 in 2007. Based on a number of projections, the incidence of mesothelioma is not expected to peak until after 2014
- The age standardised rate of new cases of mesothelioma has increased from 1.1 new cases per 100 000 population in 1983 to 3 0 in 2007
- The majority (80-90%) of mesothelioma cases involve males.

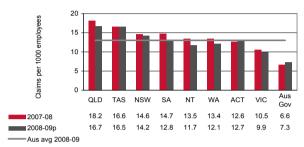
Figure 7 The number of new cases of mesothelioma by sex and year of diagnosis, 1982 to 2007



Jurisdictional comparison

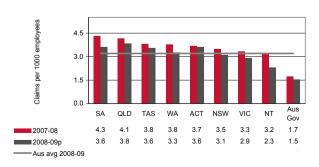
 In 2007–08 the lowest incidence rate of serious workers' compensation claims was recorded by the Australian Government (Figure 8) with Queensland and Tasmania recording the highest rates. The preliminary data for 2008–09 show a similar pattern.





 Long term claims are those involving 12 or more weeks of compensation. The lowest rate of long term claims in 2007–08 was recorded by the Australian Government. The highest rates were recorded by South Australia and Queensland (Figure 9). Preliminary data for 2008–09 should be used with caution as they are likely to increase as claims already lodged are accepted by the jurisdictions.

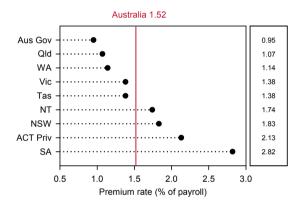
Figure 9 Incidence of long term claims: jurisdiction by year



Premium rates

- The standardised average premium rate⁵ in Australia has decreased 30%, from 2.15% of payroll in 2004-05 to 1.52% in 2008-09.
- Standardised premium rates across the jurisdictions range from 0.95% of payroll in Australian Government to 2.82% in South Australia

Figure 10 Standardised premium rates by jurisdiction, 2008–09



Source: Comparative Performance Monitoring Report 12th Edition

⁵ Standardisation takes into account differences in remuneration, employer excess and journey claim coverage. Figures include self-insurers.

Sources

All workers' compensation statistics regarding claims have been sourced from the National Dataset for Compensation-based Statistics (NDS). An on-line database is available at http://nosi.ascc.gov.au/

Safe Work Australia produces an annual comprehensive statistical bulletin, the *Compendium of Workers' Compensation Statistics*, *Australia*, in which many of the national statistics in this booklet can found. Additional information on fatalities can be found in the reports *Work-related Traumatic Injury Fatalities* and *Notified Fatalities Statistical Report*.

Jurisdictional data, workers' compensation scheme data and more information on progress towards the *National OHS Strategy 2002–2012* targets is available in the *Comparative Performance Monitoring* (CPM) report.

Information on occupational disease can be found in the publication, *Occupational Disease Indicators*.

Information on Mesothelioma can be found in the publication Mesothelioma in Australia.

Information on the cost of occupational injury and disease can be found in the report *The Cost of Work-related Injury and Illness for Australian Employers, Workers and the Community.*

All of these reports can be found on the Safe Work Australia website at www.safeworkaustralia.gov.au.

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