



Australian Government

Seafarers Safety, Rehabilitation
and Compensation Authority

SCHEME DATA 2021–22

SEACARE

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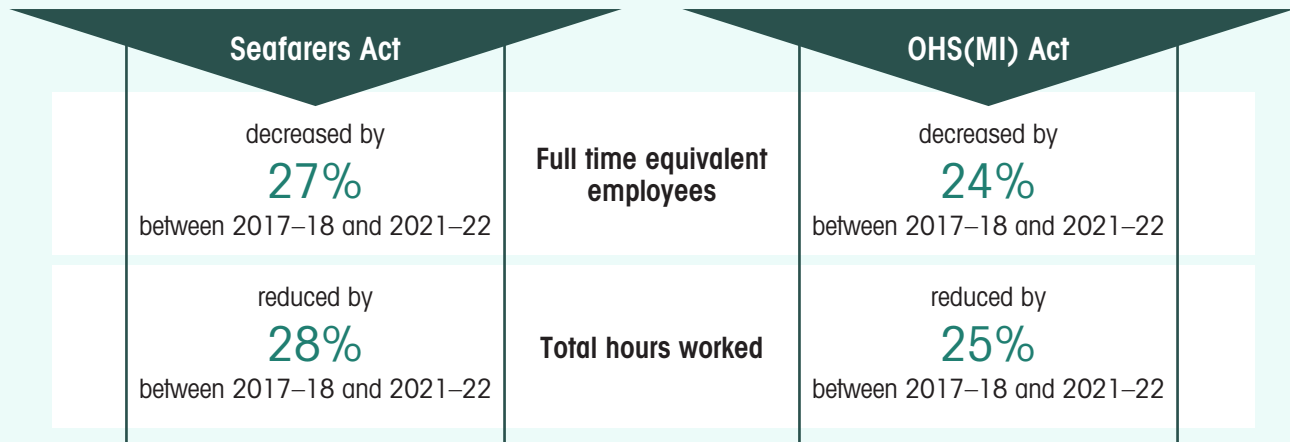
1 *Seafarers Rehabilitation and Compensation Act 1992*

2 *Occupational Health and Safety (Maritime Industry) Act 1993*

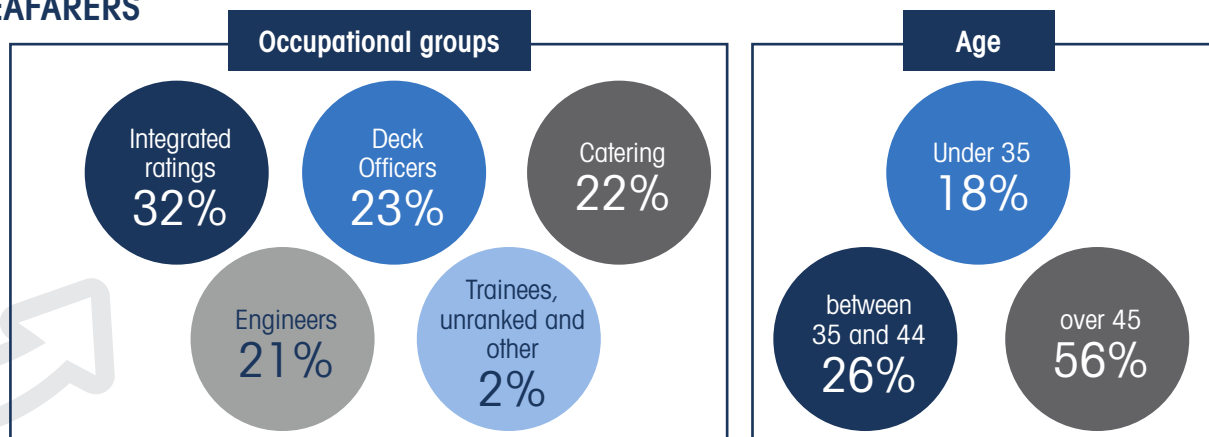
Seacare Scheme Overview 2021–22



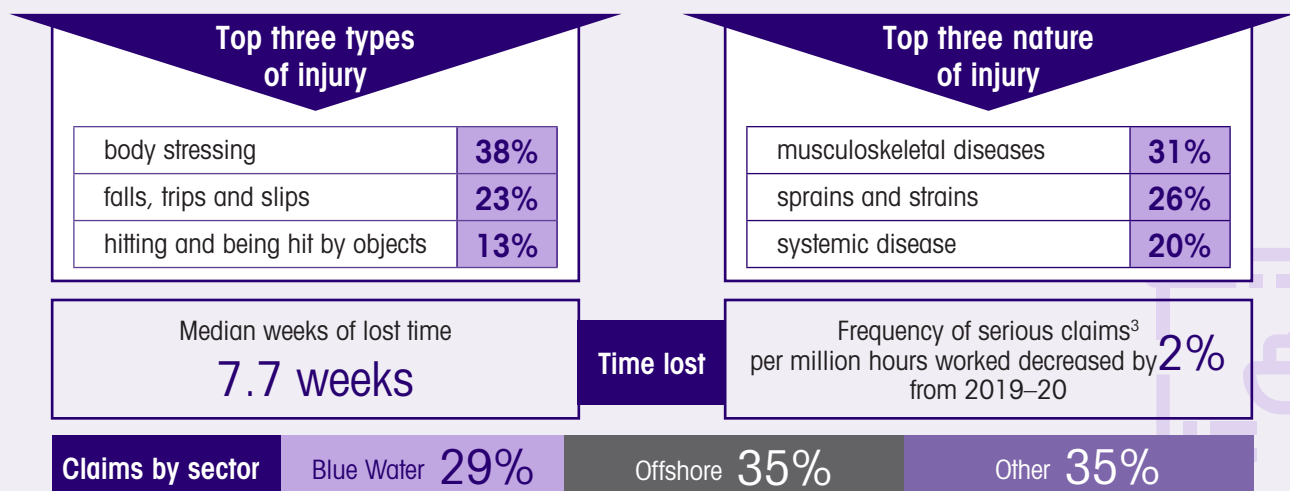
SCHEME COVERAGE



SEAFARERS



CLAIMS PERFORMANCE



³ Serious claims have one week or more of lost time

1. Introduction

1.1. Purpose

The Seacare scheme is a national scheme of occupational health and safety (OHS), rehabilitation and workers' compensation arrangements for employees on prescribed ships or units. The *Occupational Health and Safety (Maritime Industry) Act 1993* (OHS(MI) Act) covers seafarers for OHS, and the *Seafarers Rehabilitation and Compensation Act 1992* (Seafarers Act) covers seafarers for rehabilitation and workers' compensation arrangements.

The Seacare scheme is overseen by the Seafarers Safety, Rehabilitation and Compensation Authority (Seacare Authority). The Seacare Authority is a statutory body established under the Seafarers Act and oversees both the Seafarers Act and OHS(MI) Act, however the Australian Maritime Safety Authority (AMSA) has regulatory (inspectorate) functions conferred on it under the OHS(MI) Act.

This document presents an overview of the Seacare scheme and includes statistical data on the scheme's performance. The Seacare Authority has published this document as part of its legislative functions under the Seafarers Act.

1.2. Key findings

At the scheme level, for the five years from 2017–18 to 2021–22:

- The number of full time equivalent (FTE) employees covered under the Seafarers Act has reduced from 3,506 to 2,566 (refer to Figure 1).
- The total hours worked under the Seafarers Act has reduced from 15,019,942 to 10,850,826.
- The number of FTE employees covered under the OHS(MI) Act has reduced from 3,392 to 2,568 (refer to Figure 3).
- The frequency rate of claims with one week or more of time lost has increased from 7.1 claims per million hours worked to 7.7 claims per million hours worked. (Refer Figure 4).
- The ratio of reported incidents under the OHS(MI) Act per 1,000 seafarers has decreased from 8.8 to 2.7 (refer Table 11).
- There has been an improvement in the dispute rate, from 19 per cent to 15 per cent (refer Figure 12).

It should be noted that the data and information presented in this report should be considered in the context of the relatively small employee and claim numbers. This has an impact on the volatility of both the injury and frequency rates, with small changes in the number of claims having a relatively significant impact on outcomes.

2. Coverage

2.1. Seafarers Act coverage

Figure 1 and Table 1 provide the total number of employees (headcount), FTE employees and hours worked under the Seafarers Act as reported by scheme employers from 2017–18 to 2021–22.

The head count figure includes full-time and part-time employees as well as those who may have worked on limited term contracts and for multiple employers at different times throughout the year.

There has been an overall decline in the size of the Seacare scheme over the five reporting periods, with the 2020–21 year presenting the lowest recorded headcount, FTE employees and hours worked for the scheme. There was a slight recovery in the 2021–22 financial year total FTE, however there was an ongoing reduction in the total headcount.

Figure 1: Seafarers Act – Employee numbers, FTE employees and hours worked (2017–18 to 2021–22)

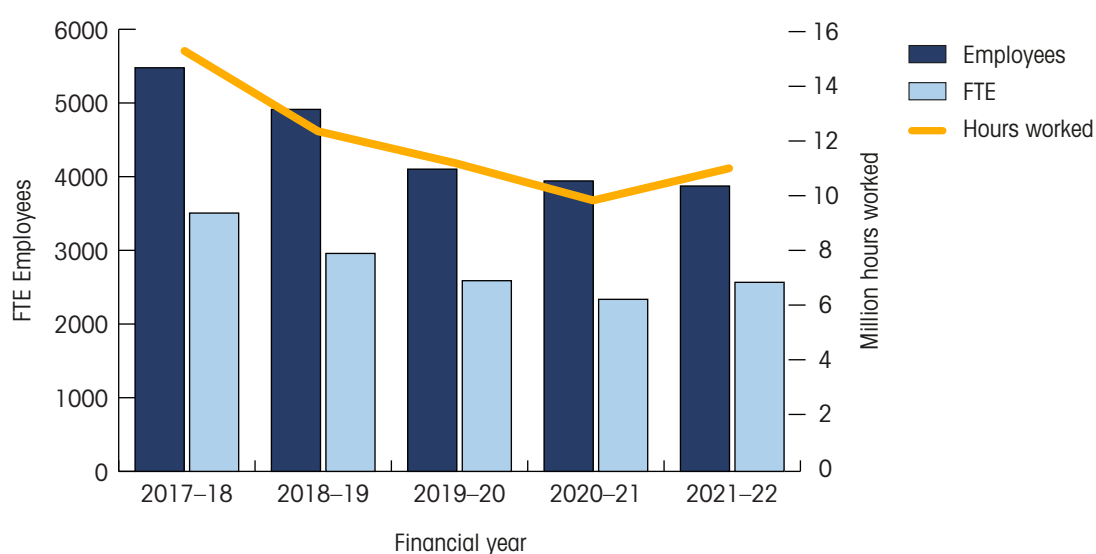


Table 1: Seafarers Act – Employee numbers, FTE employees and hours worked⁴

	2017–18	2018–19	2019–20	2020–21	2021–22
Total Employees	5,478	4,913	4,102	3,942	3,873
Total FTE	3,506	2,958	2,588	2,335	2,566
Total hours worked	15,019,942	12,117,730	11,164,178	9,989,716	10,850,826

⁴ Employers provide information on employee numbers and hours worked biannually. As such, the figures reported in Table 1 are an average of the employee and hours worked figures provided over the relevant financial year.

The past five years has seen a gradual increase in the proportion of employees aged 45 years and over, from 49 per cent in 2017–18 to 56 per cent in 2021–22 (Figure 2). Over the same period, the proportion of employees aged under 35 years has decreased from 24 per cent to 18 per cent, with no workers under 20 years of age in the past three reporting periods.

Figure 2: Employees by Age Range under the Seafarers Act^{5,6}

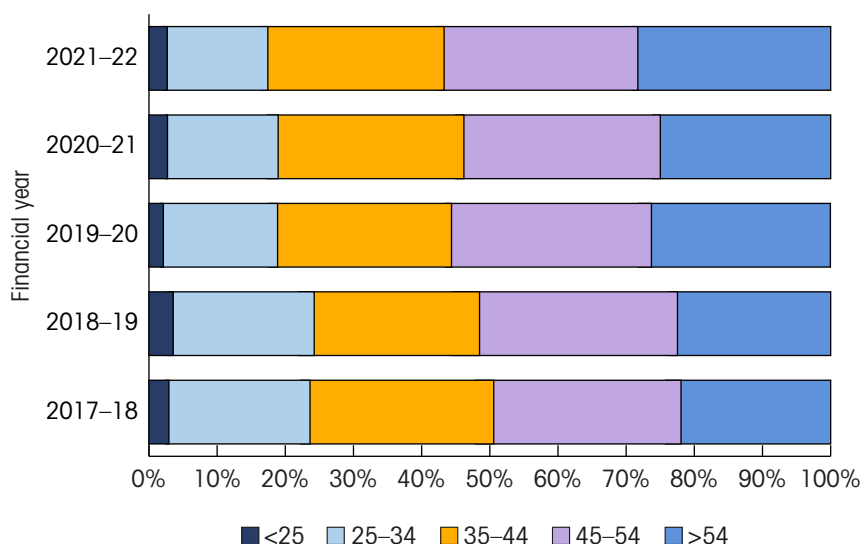


Table 2 shows that for the past five years approximately one third of seafarers were employed as Integrated Ratings. This has remained the leading occupational grouping over time, while the relative proportion of employees in the Deck Officers, Engineers and Catering groupings have experienced an overall decrease.

Table 2: Employees by Occupational Grouping under the Seafarers Act³

	2017–18	2018–19	2019–20	2020–21	2021–22
Integrated Ratings	26%	30%	31%	31%	32%
Deck Officers	24%	22%	23%	23%	23%
Engineers	22%	22%	23%	21%	21%
Catering	26%	24%	21%	23%	22%
Trainees	2%	2%	3%	2%	2%

⁵ The employee figures reported in Table 2 and 3 are based on the employees who were engaged at the conclusion of the relevant financial year.

⁶ Totals may not sum from components due to rounding.

2.2 OHS(MI) coverage

Figure 3 shows the total number of FTE employees and total hours worked under the OHS(MI) Act, as reported by scheme employers, between 2017–18 and 2021–22. The raw data is provided in Table 3.

Similar to the Seafarers Act, there has been a slight recovery in the total number of FTE employees and total hours worked under the OHS(MI) Act in the 2021–22 financial year as compared to the previous year. The five year trend is also broadly similar to the Seafarers Act, with the 2020–21 outcomes being the lowest of the five year period.

Figure 3: OHS(MI) Act – FTE employees and Hours Worked – 2017–18 to 2021–22

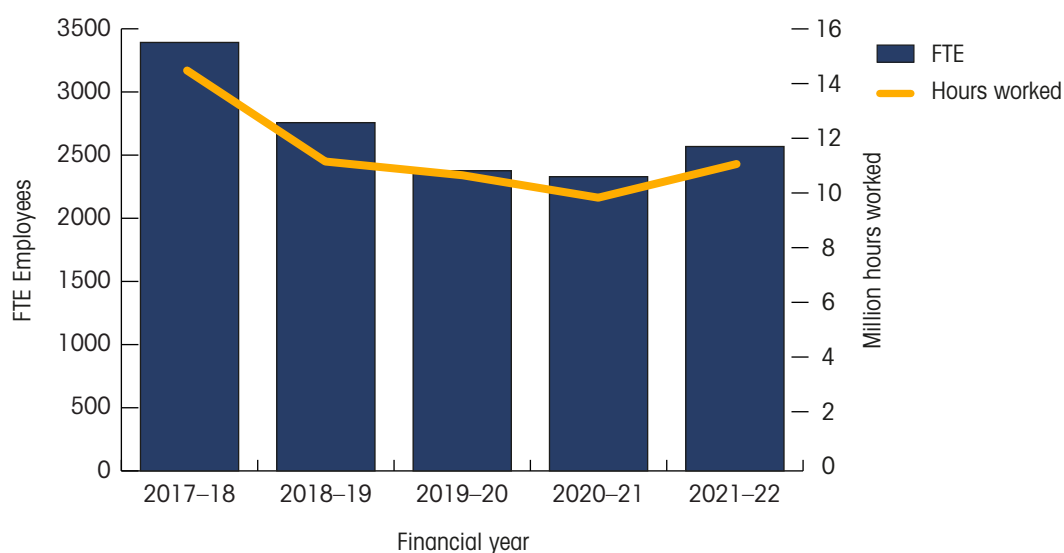


Table 3: OHS(MI) Act – FTE employees and hours worked

	2017–18	2018–19	2019–20	2020–21	2021–22
FTE	3,392	2,757	2,376	2,329	2,568
Hours worked	14,410,558	11,277,244	10,319,642	9,975,424	10,853,218

3. Occupational health and safety

3.1. Workers' compensation data

The injury (and disease) incidence and frequency rates are derived from the number of claims (accepted claims, excluding journey claims) per 1000 FTE employees while the frequency rate is based on accepted claims per one million hours worked.

Using the frequency rate reflects the 24 hour a day nature of seafaring work and the fact that injuries occurring at any time while on board are potentially compensable.

Figure 4 and Table 4 provide the incidence rates of claims resulting in one, four and 12 weeks of time off work, as well as the frequency rate of claims resulting in one week of time off work. They show that there has been a decrease in incidence rates since the 2019–20 determination year for claims resulting in one, four and 12 weeks of incapacity, as well as a decrease in the frequency rate.

The relatively small overall employee numbers in the scheme have an impact on the volatility of both the injury and frequency rates, with small changes in the number of claims resulting in relatively significant increases to both measures.

Figure 4: Injury incidence and frequency rates (2017–18 to 2021–22)

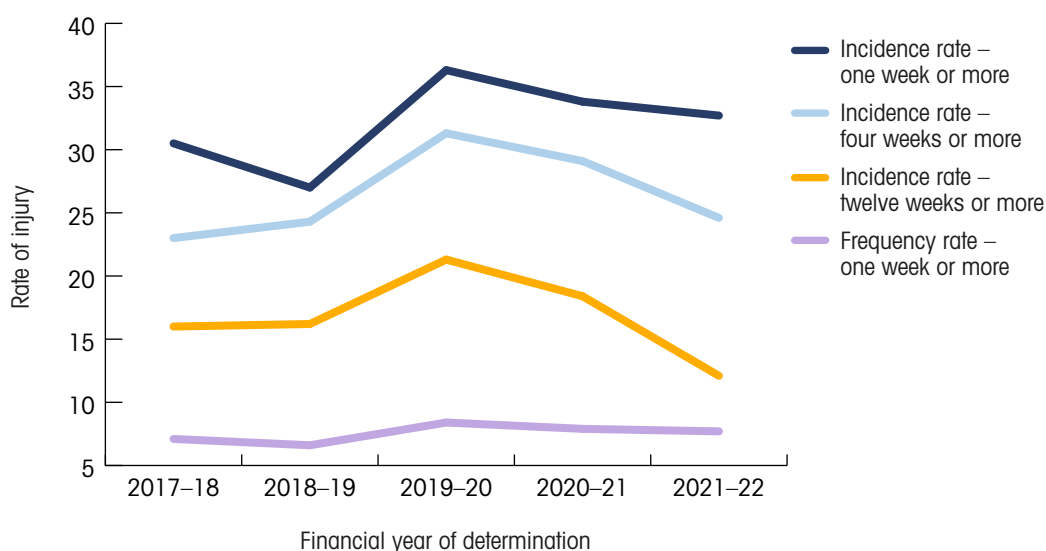


Table 4: Injury incidence and frequency rates (2017–18 to 2021–22)

	2017–18	2018–19	2019–20	2020–21	2021–22
Incidence rates – per 1000 FTE					
One week or more duration	30.5	27.0	36.3	33.8	32.7
Four weeks or more duration	22.2	24.3	31.3	29.1	24.6
Twelve weeks or more incapacity	16.0	16.2	21.3	18.4	12.1
Frequency rate – per 1,000,000 hours worked					
One week or more incapacity	7.1	6.6	8.4	7.9	7.7

3.2. Claim characteristics

This section provides a breakdown of claims based on a number of key characteristics: sector, types and cause of injuries, location on the ship where the injury occurred and the age and occupation of the employee.

Claims by sector

Figure 5 provides a breakdown of accepted claims by sector in 2021–22. While the Offshore sector accounted for the largest proportion of employees under the Seafarer's Act, the employees employed in the 'other'⁷ sector had a significantly higher proportion of accepted claims compared to the proportion of employees.

Figure 5: Accepted compensation claims and employees by sector – 2021–22

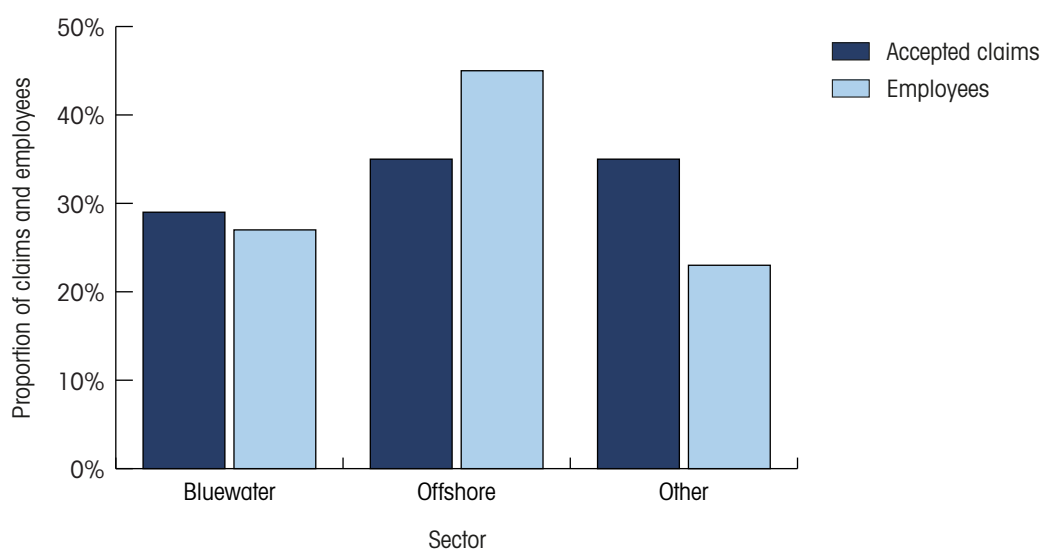


Table 5: Accepted compensation claims and employees by sector – 2021–22

	Bluewater	Offshore	Other	Total
Accepted claims	34	41	41	116
Employees (headcount)	1087	1731	883	3873

⁷ Sectors align with vessel types – 'other' includes tugs, dredging, and passenger/touring vessels.

Nature of injury

Figure 6 and Table 6 provide a breakdown of claims by the condition claimed (nature) for claims accepted between 2017–18 and 2021–22. Musculoskeletal Diseases were the most prevalent type of injury, accounting for approximately 31 per cent of all injuries recorded in 2021–22, a decrease on the 36 per cent recorded in 2020–21.

Figure 6: Claims by nature of injury (2017–18 to 2021–22)

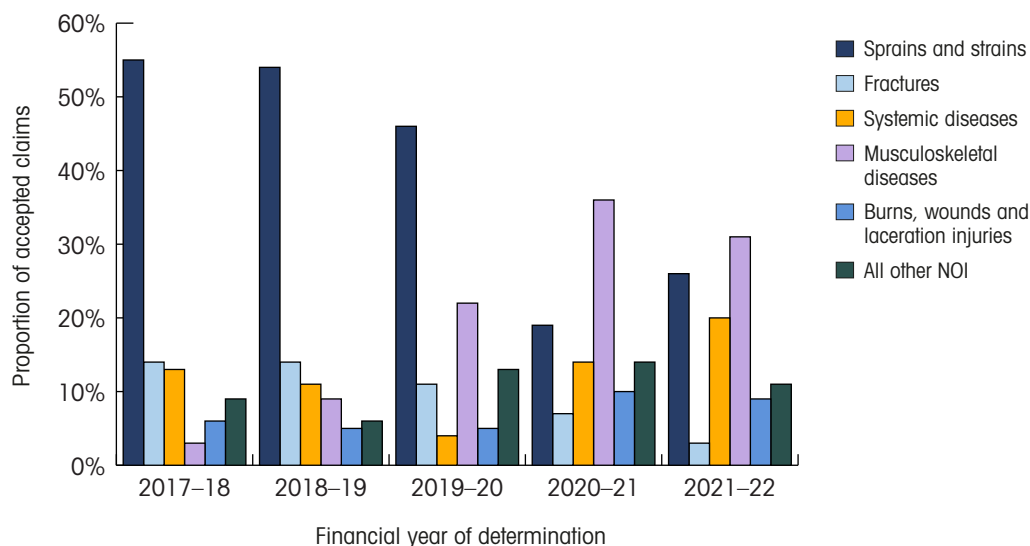


Table 6: Number and proportion of claims by nature of injury (2017–18 to 2021–22)⁸

Nature of injury	2017–18		2018–19		2019–20		2020–21		2021–22	
	Claims	%	Claims	%	Claims	%	Claims	%	Claims	%
Sprains and Strains	69	55%	50	54%	48	46%	17	19%	30	26%
Fractures	17	14%	13	14%	11	11%	6	7%	4	3%
Systemic Diseases	16	13%	10	11%	4	4%	12	14%	23	20%
Musculoskeletal Diseases	4	3%	8	9%	23	22%	32	36%	36	31%
Burns, Wounds and Laceration Injuries	8	6%	5	5%	5	5%	9	10%	10	9%
Other Injuries	5	4%	0	0%	8	8%	6	7%	8	7%
Mental Diseases	4	3%	4	4%	3	3%	6	7%	5	4%
Head, Brain, Nerve and Spinal Cord Injuries	1	1%	2	2%	1	1%	0	0%	0	0%
Cancer Diseases	0	0%	0	0%	0	0%	0	0%	0	0%
Other Diseases and Claims	1	1%	0	0%	1	1%	0	0%	0	0%

⁸ Totals may not sum from components due to rounding.

Mechanism of Incident

Figure 7 and Table 7 provide a breakdown of claims by the mechanism of injury for claims accepted between 2017–18 and 2021–22. The mechanism of injury identifies the overall action, exposure or event that best describes the circumstances that resulted in the most serious injury or disease. Body stressing continues to be the most prevalent cause of injury within the Seacare scheme, followed by Falls, slips and trips.

Figure 7: Claims by mechanism of injury (2017–18 to 2021–22)

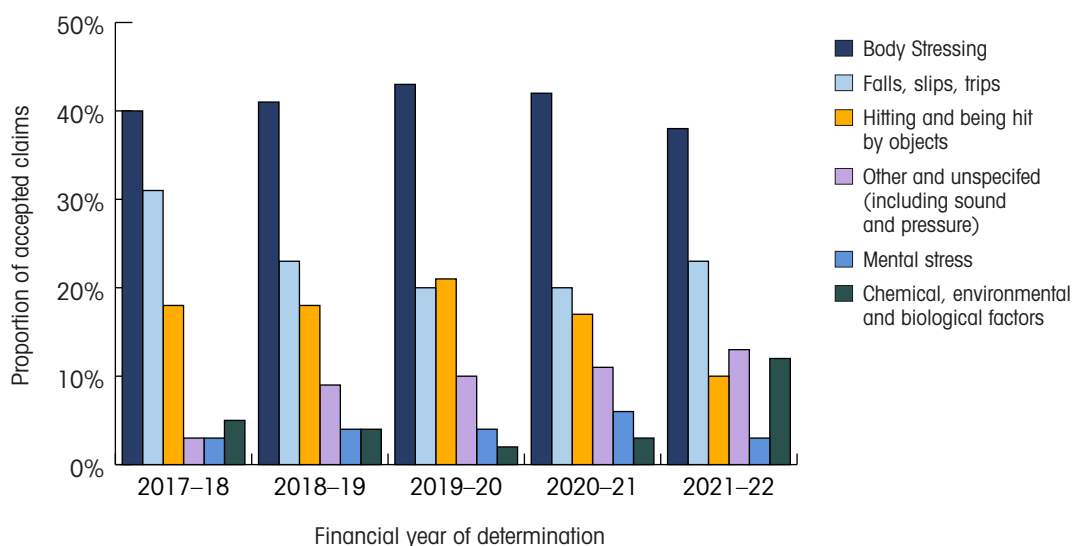


Table 7: Number and proportion of claims by mechanism of injury (2017–18 to 2021–22)⁹

Mechanism of injury	2017–18		2018–19		2019–20		2020–21		2021–22	
	Claims	%	Claims	%	Claims	%	Claims	%	Claims	%
Body Stressing	50	40%	38	41%	45	43%	37	42%	44	38%
Falls, slips, trips	39	31%	21	23%	21	20%	18	20%	27	23%
Hitting and being hit by objects	22	18%	17	18%	22	21%	15	17%	12	10%
Other and unspecified (including sound and pressure)	4	3%	8	9%	10	10%	10	11%	15	13%
Mental stress	4	3%	4	4%	4	4%	5	6%	4	3%
Chemical, environmental and biological factors	6	5%	4	4%	2	2%	3	3%	14	12%

⁹ Totals may not sum from components due to rounding.

Work location

Figure 8 and Table 8 provide a breakdown of the most common ship locations or work areas for injuries to occur. These both show that Deck Spaces continue to be the leading ship location of injury across the scheme, which is consistent with the previous four years. There has also been an ongoing increase in the number of claims occurring either not on a ship or where the location was not relevant – this can be attributed to claims where a single location may not be relevant to the condition being claimed for, such as diseases.

Figure 8: Claims by top five work locations (2017–18 to 2021–22)

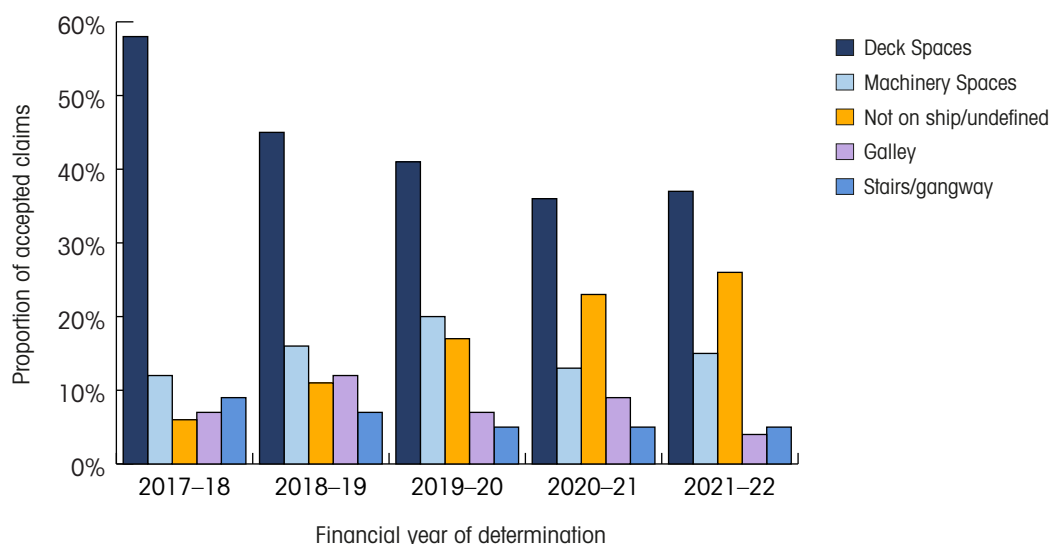


Table 8: Number and proportion of claims by work location (2017–18 to 2021–22)¹⁰

Location on ship	2017–18		2018–19		2019–20		2020–21		2021–22	
	Claims	%	Claims	%	Claims	%	Claims	%	Claims	%
Deck Spaces	72	58%	41	45%	43	41%	32	36%	43	37%
Machinery Spaces	15	12%	15	16%	21	20%	11	13%	17	15%
Not on ship/undefined	8	6%	10	11%	18	17%	20	23%	30	26%
Galley	9	7%	11	12%	7	7%	8	9%	5	4%
Accommodation Block	9	7%	6	7%	8	8%	12	14%	14	12%
Stairs/gangway	11	9%	6	7%	5	5%	4	5%	6	5%
Bridge	1	1%	0	0%	1	1%	0	0%	0	0%
Wharf	0	0%	3	3%	1	1%	1	1%	1	1%

¹⁰ Totals may not sum from components due to rounding.

Claims by age and employment category

A comparison of claims by the age of the employee at the time of injury and by occupational category provides a view of how the scheme's claims experience has changed over the last five years.

Figure 9 and Table 9 compare the proportion of accepted claims and employees in 2017–18 and 2021–22 by age grouping. In 2021–22, employees aged 45 or over made up approximately 56 of per cent employees within the scheme and 70 per cent of accepted claims.

Figure 9: Proportion of claims and employees by age grouping (2017–18 to 2021–22)

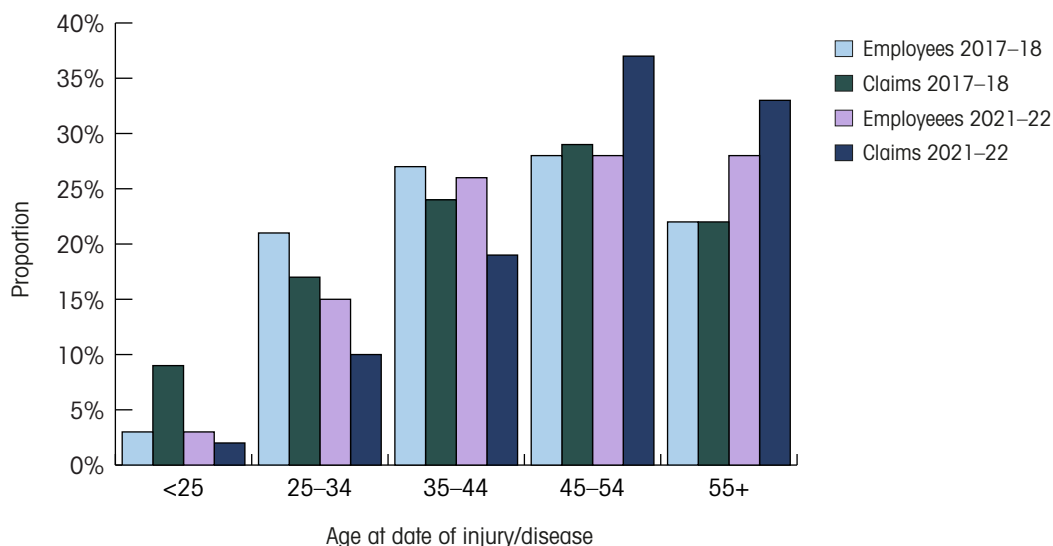


Table 9: Proportion of claims and employees by age grouping (2017–18 to 2021–22)¹¹

Age range	2017–18		2021–22	
	Employees	Claims	Employee	Claims
<20	0%	4%	0%	0%
20–24	3%	5%	3%	2%
25–29	8%	6%	5%	2%
30–34	13%	11%	10%	8%
35–39	13%	11%	13%	9%
40–44	14%	13%	13%	10%
45–49	14%	16%	14%	18%
50–54	14%	13%	14%	19%
55+	22%	22%	28%	33%

¹¹ Totals may not sum from components due to rounding.

Claims by occupational grouping

Figure 10 and Table 10 compare the proportion of accepted claims in 2017–18 and 2021–22 across the five key occupational groupings. Integrated ratings account for the highest percentage of employees (32 per cent) and make up the highest proportion of accepted claims (53 per cent) in the 2021–22 financial year. Engineers and Catering employees had the second highest proportion of claims (19 per cent each).

Figure 10: Proportion of claims by occupational category (2017–18 to 2021–22)

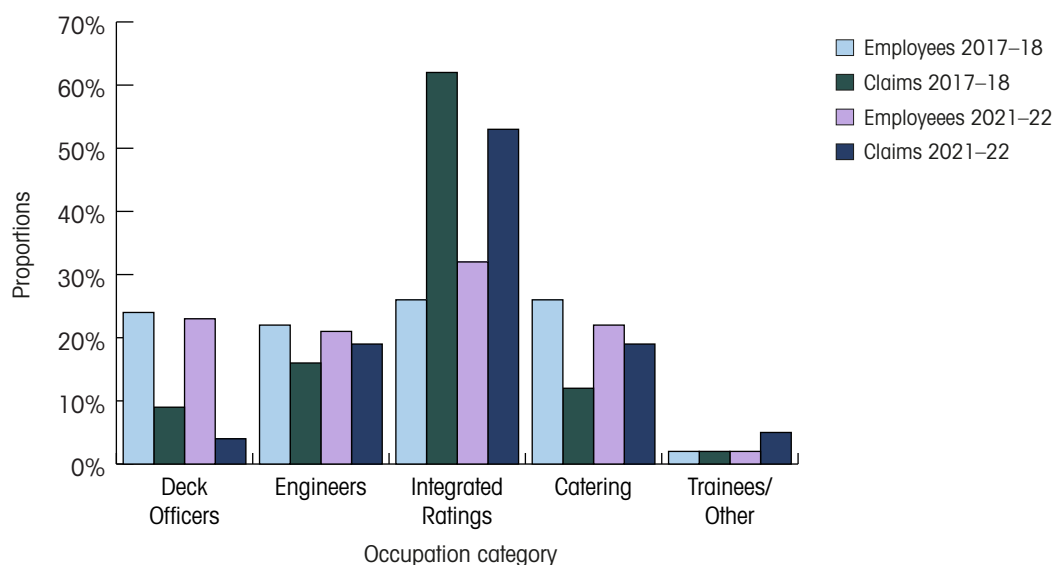


Table 10: Number and proportion of claims by occupational category (2017–18 to 2021–22)¹²

Occupational category	2017–18		2021–22	
	Employees	Claims	Employee	Claims
Deck Officers	24%	9%	23%	4%
Engineers	22%	16%	21%	19%
Integrated Ratings	26%	62%	32%	53%
Catering	26%	12%	22%	19%
Trainees/Other	2%	2%	2%	5%

¹² Totals may not sum from components due to rounding.

3.3. Ratio of reported incidents to seafarers

The ratio of incidents reported and incidents involving five days or more incapacity, as reported to the Australian Maritime Safety Authority, are provided in Table 11 below. This shows that the 2020–21 reporting year, while having the lowest FTE employees under the OHS(MI) Act over the five-year period, experienced the highest ratio of incidents reported (9.9 per 1000 FTE employees), and the highest ratio of incidents involved five or more days of incapacity per 1000 FTE employees.

The 2021–22 year, by comparison, had the lowest number of incidents reported over the five years, despite a slight increase in FTE. These outcomes are reflective of the volatility of small variances in both FTE and incident counts.

Table 11: Ratio of reported incidents to seafarers

	2017–18	2018–19	2019–20	2020–21	2021–22
Number of seafarers (FTE employees) under the OHS(MI) Act	3,392	2,757	2,376	2,329	2,568
All incidents reported	30	16	9	23	7
Ratio (incidents per 1000 seafarers)	8.8	5.8	3.8	9.9	2.7
Incidents reported involving an incapacity of five or more days	22	16	5	17	5
Ratio (incidents involving five or more days incapacity per 1000 seafarers)	6.5	5.8	2.1	7.3	1.9

4. Workers' compensation

4.1. Claims summary

Workers' compensation claims data reported by Seacare scheme employers to the Seacare Authority in accordance with the Seafarers Act is summarised in Table 12 below.

Table 12: Claims data 2017–18 to 2021–22

	2017–18	2018–19	2019–20	2020–21	2021–22
Claims lodged					
Claims accepted	125	92	104	88	116
Claims rejected	6	14	12	11	10
Claims pending	0	0	0	1	9
Total	131	106	116	100	135
Claims accepted					
Claims accepted – on duty	113	81	100	86	110
Claims accepted – off duty	7	6	2	1	5
Journey claims	3	2	2	1	0
Claims while studying	1	2	0	0	0
Property claims	0	0	0	0	0
Other	1	1	0	0	1
Total	125	92	104	88	116
Claims accepted – summary and duration					
Claims accepted – excluding property claims	125	92	104	88	116
Claims accepted – excluding journey and property claims	122	90	102	87	116
Claims accepted – one week or more duration (excluding journey claims)	103	77	91	76	83
Claims accepted – four weeks or more duration (excluding journey claims)	74	69	79	66	62
Claims accepted – twelve weeks or more duration (excluding journey claims)	53	47	53	43	30
Medical accepted claims (no lost time)	12	7	8	4	14
Claims accepted involving lost time	112	81	96	81	90
Claims accepted – work related fatalities	1	0	0	0	0
Claims accepted involving lost time (excluding journey claims)	109	79	94	80	90

4.2. Timeliness of decision making

The proportion of claims that are lodged within one month of the date of injury in 2021–22 (61 per cent) is slightly lower than the proportion lodged within the same period in the 2020–21 reporting period (67 per cent).

Table 13: Time from injury to lodgement¹³

	2017–18	2018–19	2019–20	2020–21	2021–22
Within first month	72%	68%	64%	67%	61%
Between 1 and 3 months	20%	19%	25%	22%	29%
Between 4 and 12 months	4%	8%	8%	6%	8%
After 12 months	5%	6%	3%	4%	2%

The Seafarers Act requires that all claims for injury or disease are determined within 12 days from the date that the claim is lodged with the employer. Claims for permanent impairment and those relating to deceased employees are required to be determined within 30 and 60 days respectively. Table 14 shows that 77 per cent of claims were determined within the relevant statutory time frames in 2021–22 – this is an improvement on the 2020–21 outcome of 73 per cent.

Table 14: Claims determined within statutory timeframes¹³

	2017–18	2018–19	2019–20	2020–21	2021–22
Proportion determined within statutory timeframes	73%	73%	78%	73%	77%
Within 4 weeks	17%	15%	13%	10%	10%
More than 4 weeks	11%	12%	9%	17%	13%

Where an injury lasts, or is expected to last, 28 days or more, the Seafarers Act states that the employer must arrange an assessment of the employees' capacity to undertake a rehabilitation program. In any given year, approximately 40 per cent of claims will require a rehabilitation assessment. During 2021–22, the most likely timeframe for rehabilitation assessments to occur was one to three months from date of injury. This is not unexpected given the length of time between injury date and lodgement of claims (see Table 13 above)

Table 15: Time from injury to rehabilitation assessment¹³

	2017–18	2018–19	2019–20	2020–21	2021–22
1 to 7 days	9%	5%	3%	3%	10%
8 to 14 days	5%	4%	1%	5%	3%
15 to 21 days	2%	1%	2%	2%	2%
22 to 31 days	1%	4%	4%	3%	8%
1 to 3 months	14%	14%	21%	23%	19%
4 to 12 months	10%	15%	9%	7%	3%
> 12 months	3%	1%	1%	2%	2%

¹³ Totals may not sum from components due to rounding.

4.3. Claim payments

Of the total claim payments during 2021–22, weekly compensation (time off work) accounts for approximately 54 per cent of all claim payments. The total amount paid as Lump Sum payments has increased significantly in the 2021–22 payment year and is the highest for this category of payment over the five financial years.

Table 16: Claims payments by financial year of payment¹⁴

	2017–18	2018–19	2019–20	2020–21	2021–22
Weekly compensation	\$7,410,332	\$7,946,626	\$9,034,239	\$8,664,456	\$7,044,222
Lump Sum	\$2,766,266	\$2,750,500	\$1,452,873	\$1,286,900	\$3,801,098
Medical	\$889,846	\$1,405,094	\$1,355,079	\$1,342,909	\$981,662
Rehabilitation	\$463,262	\$719,851	\$514,593	\$468,996	\$434,970
Legal Costs	\$506,084	\$323,448	\$242,001	\$461,909	\$559,960
Medical Report	\$139,815	\$37,699	\$119,354	\$147,270	\$74,735
Investigation	\$50,954	\$130,424	\$61,790	\$53,310	\$23,189
Other	\$128,427	\$490,326	\$370,616	\$941,700	\$59,101
Total	\$12,354,987	\$13,803,968	\$13,150,546	\$13,367,450	\$12,978,938

Table 17 and Figure 11 show that by mechanism of injury, Falls, slips and trips accounts for the largest proportion of payments made in the 2021–22 financial year (44 per cent) followed by Body Stressing (31 per cent).

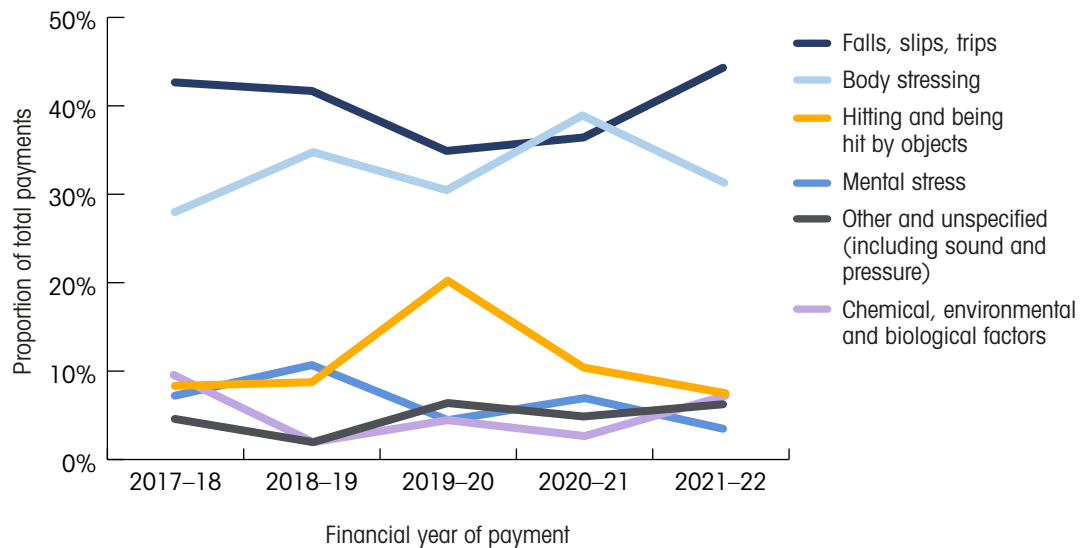
Table 17: Claims payments by financial year of payment – mechanism of injury¹⁵

	2017–18	2018–19	2019–20	2020–21	2021–22
Body Stressing	28%	35%	30%	39%	31%
Chemical, environmental and biological factors	9%	2%	4%	3%	7%
Falls, slips, trips	42%	42%	35%	37%	44%
Hitting and being hit by objects	9%	9%	20%	10%	7%
Mental stress	7%	11%	4%	7%	4%
Other and unspecified (including sound and pressure)	5%	2%	6%	5%	6%

¹⁴ The year of payment is irrespective of year of determination

¹⁵ Totals may not sum from components due to rounding.

Figure 11: Claims payments by financial year of payment – mechanism of injury



4.4. Reconsiderations

Under subsection 78(4) of the Seafarers Act an employer must, upon receipt of a written request from an employee for a reconsideration of a claim determination, arrange for an industry panel or a Comcare officer to assist in reconsidering the determination. This review is the first stage of the review process under the Seafarers Act. As there is no industry panel in place in accordance with section 78 of the Seafarers Act, Comcare conducts all requests by employers for assistance to reconsider a determination.

In 2021-22, 28 determinations were reviewed on behalf of 15 employers. Of these, recommendations were made to affirm the determinations of the employer in 14 cases (approximately 70 per cent). This was an increase on the 2020-21 financial year's result of 55 per cent.

Table 18: Reconsideration assistance provided by Comcare

	2017-18	2018-19	2019-20	2020-21	2021-22
Determinations reviewed	17	21	35	20	28
Recommendations affirming determination	4	11	18	11	14
Recommendations varying determination	6	0	3	0	1
Recommendations revoking determination	6	4	13	4	2
Investigate	1	6	1	5	11
Number of employers	8	11	17	10	15

4.5. Disputation

The Administrative Appeals Tribunal (AAT) is the second tier of review for disputed claims. The AAT review process usually begins with a conference to enable applicants to discuss with their employer, in the presence of an AAT official, the reasons for challenging the employer's determination of their claim. The conference provides an opportunity for the parties to agree on a decision. If, following the conference process, the matter has not been settled, a compulsory conciliation conference will be listed. If the matter fails to settle at the conciliation conference it will go to a hearing unless both parties and the AAT agree on mediation.

Figure 12 and Table 19 show both the rejection rate and the disputation rate for the scheme. The disputation rate is taken as the total number of AAT applications lodged in the period as a percentage of active claims in the period (an active claim is defined as a claim with a payment of any kind made in the reporting period).

The disputation rates for all years have been calculated using the above methodology and show that the disputation rate for 2021–22 (15 per cent) is consistent with the previous year's outcome, and equal lowest of the five-year reporting period.

Figure 12: Rejection rate and disputation rate

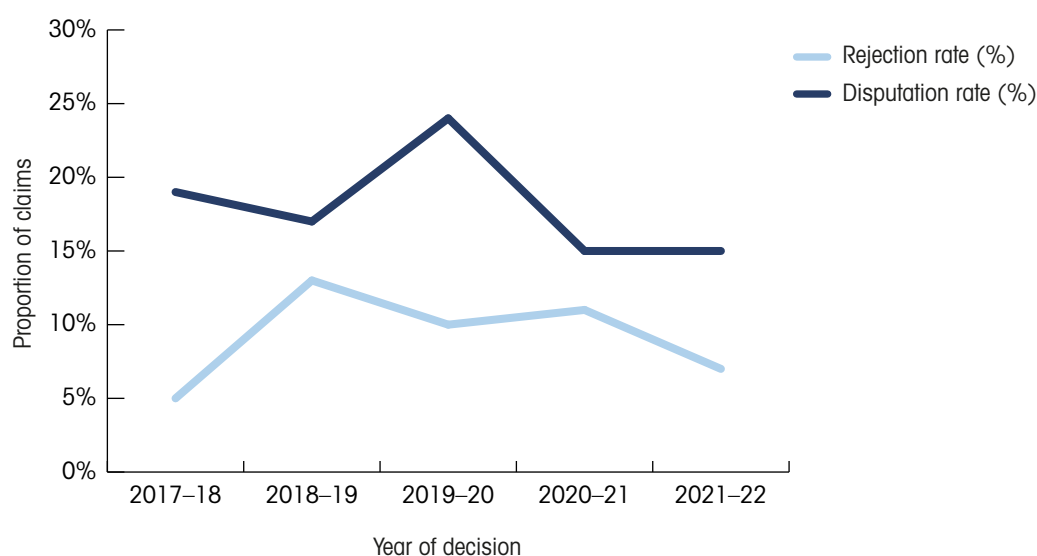


Table 19: Rejection rate and disputation rate

	2017–18	2018–19	2019–20	2020–21	2021–22
Claims lodged	131	106	116	100	135
Claims rejected	6	14	12	11	10
Rejection rate (per cent)	5%	13%	10%	11%	7%
Active claims by payment year	211	179	201	200	212
AAT applications lodged	40	31	48	29	31
Disputation rate (per cent)	19%	17%	24%	15%	15%

Data supplied by the AAT on outcomes of the review of decisions on Seacare claims is provided in Table 20. This shows that the number of AAT applications lodged in 2021–22 was marginally higher than 2020–21, with the number of applications finalised by consent the equal lowest. Of the 23 cases finalised in 2021–22, 10 were related to one another, having the same applicant. This can have an impact on timeliness figures.

Table 20: Outcome of AAT review of decisions

	2017–18	2018–19	2019–20	2020–21	2021–22
Applications lodged	40	31	48	29	31
Applications finalised					
Applications finalised by decision of the AAT following a hearing ^a					
Decision affirmed	0	0	0	4	2
Decision varied or set aside	2	0	1	0	0
Subtotal	2	0	1	4	2
Applications finalised by consent of the parties					
Decision affirmed ^b	21	21	12	33	15
Decision varied or set aside ^b	7	7	6	4	3
Application dismissed ^c	0	0	0	0	0
Subtotal	28	28	18	37	18
Other					
Application withdrawn by the applicant ^d	1	15	8	4	2
Dismissed by Tribunal ^e	1	0	1	0	0
No jurisdiction ^f	4	2	2	1	1
Subtotal	6	17	11	5	3
Total	36	45	30	46	23
Timeframes					
Average time taken from lodgement to finalisation (days)	444	376	463	417	411

^a Applications finalised by a decision of the AAT under section 43 of the Administrative Appeals Tribunal Act.

^b Applications finalised by the AAT in accordance with terms of agreement reached by the parties either in the course of an alternative dispute resolution process (section 34D) or at any stage of review proceedings (section 42C).

^c Applications dismissed by consent under section 42A(1).

^d Applications withdrawn by the applicant under section 42A(1A).

^e Applications dismissed under section 42A(2) (non-appearance at a case event), section 42A(5) (failure to proceed with an application or to comply with a direction of the AAT) and section 42B(1) (application is frivolous, vexatious, misconceived, lacking in substance, has no reasonable prospect of success or is an abuse of the process of the AAT).

^f Applications finalised on the basis that the decision is not subject to review by the AAT, the applicant does not have standing to apply for a review, the application has not been made within a prescribed time limit, the AAT has refused to extend the time for applying for a review or the application fee has not been paid.

5. Return to work

5.1. Duration of claims

Duration indicators provide an insight into the performance of employers in claims management processes. Duration data can also provide an indication of return-to-work outcomes.

Table 21: Receipt of claim to end of compensation¹⁶

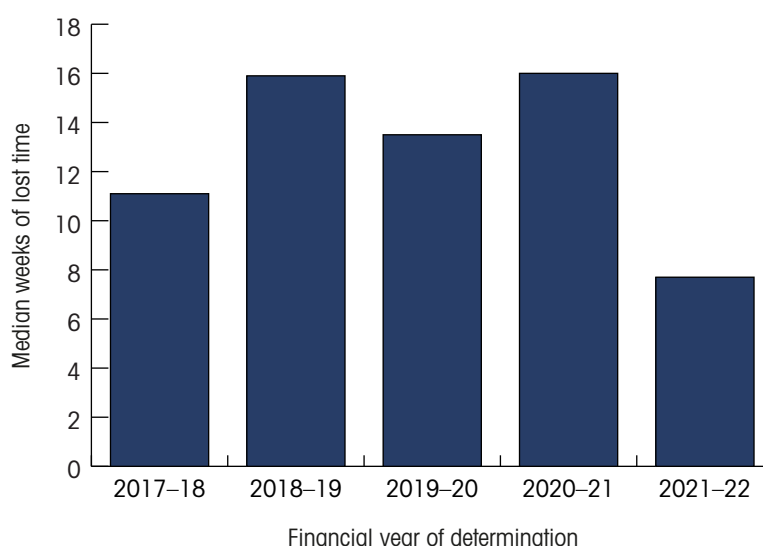
	2017–18	2018–19	2019–20	2020–21	2021–22
1 to 14 days	19%	10%	13%	13%	17%
15 to 31 days	5%	7%	9%	7%	9%
1 to 3 months	18%	20%	19%	18%	16%
4 to 12 months	22%	23%	20%	31%	11%
More than 12 months	35%	41%	39%	31%	47%

In 2021–22, compensation had been finalised within one month of the date of a claim being received by the employer in approximately 17 per cent of cases and within three months in 16 per cent of cases. Of the claims where compensation was finalised in the 2021–22 reporting year, approximately 47 per cent of these were received by the employer more than 12 months prior.

5.2. Median lost time

The median lost time is the middle point of lost time for accepted claims that have had one week or more lost time with an injury date between three and 21 months prior to the end of each financial year. Figure 13 and Table 22 show that as at 30 June 2022, the median weeks of time lost for claims determined was 7.7 weeks for the 2021–22 determination year, less than half the 2020–21 outcome of 16 weeks.

Figure 13: Median lost time



¹⁶ Totals may not sum from components due to rounding.

Table 22: Median lost time 2017–18 to 2021–22

	2017–18	2018–19	2019–20	2020–21	2021–22
Weeks	11.1	15.9	13.5	16.0	7.7

5.3. Rehabilitation and return to work

Table 23: Rehabilitation and return to work outcomes (claims with 28 days or more lost time)

	2017–18	2018–19	2019–20	2020–21	2021–22
Accepted claims	125	92	104	88	116
Claims of 28 days or more lost time	77	71	80	66	62
Percentage of claimants assessed for a rehabilitation program	69%	59%	54%	65%	69%
Percentage of claimants assessed that commenced a rehabilitation program	91%	90%	88%	93%	79%
Percentage of claimants that commenced a rehabilitation program who returned to work	83%	87%	66%	88%	79%

Table 23 shows that in 2021–22, there were 62 accepted claims with 28 days or more lost time. Of these, approximately 69 per cent were assessed for a rehabilitation program. Of those assessed for a rehabilitation program, 79 per cent commenced a rehabilitation program.

Of those who commenced a rehabilitation program following a rehabilitation assessment, 79 per cent had returned to work as at 30 June 2022. The smaller claim numbers in more recent years mean the results are more susceptible to variation. It is also likely that with maturity, the final outcomes for the 2021–22 year will vary in future reporting.

6. Data sources and related information

6.1. Advice to reader on the data

Claims based data can be subject to development and may therefore differ to future updates of the data provided in this document.

The relatively small employee and claim count for the scheme has an influence on the incidence rate of claims.

Where percentages are used to detail outcomes, total may not sum from components due to rounding.

6.2. Data sources used in this publication

Workers' compensation data

The primary source of data used for reporting on Seacare scheme performance, including OHS performance, is from workers' compensation claims. Compensation claims data is nationally recognised as the most reliable available proxy for reporting OHS performance outcomes.

Seacare claims data is derived from copies of the claim forms forwarded to the Seacare Authority by scheme employers. There is no obligation on an injured seafarer to lodge a Seacare Claim for Workers' Compensation form so not every injury will result in a claim. Also, it is possible employers do not advise all employee claims to the Seacare Authority or the employer's insurer, although most probably do.

In most cases, the claims data used for reporting Seacare OHS performance is for claims accepted during the year that result in one or more weeks compensation. While this excludes claims that are pending, in dispute, withdrawn or rejected, it includes claims lodged in previous years that have been accepted in this reporting year. This approach provides consistency and stability in reporting from year to year. Accepted claims are further adjusted by excluding 'journey claims' and 'property only' claims. Consequently, the data best reflects claims arising from work or training, including both on and off duty.

Accident and incident data

The Seacare Authority monitors data on accidents and dangerous occurrences (incidents) that are reported by employers and operators to the OHS inspectorate, AMSA. Accidents resulting in death or a serious injury that requires immediate medical treatment or could result in incapacity for five days or more, or where there was a dangerous occurrence, must be reported to AMSA. Operators and employers covered by the OHS(MI) Act and its regulations are required to notify AMSA of any accident or dangerous occurrence within four hours by submitting an OHS incident alert. The OHS incident report must be completed within 72 hours.

The *Seacare Report on the Employer Determination of a Claim for Workers' Compensation form* includes questions on injuries that arise from a notifiable incident, and on whether a report has been lodged with AMSA. This mechanism provides a means of monitoring and comparing the number of incidents reported against the number of claims made.

Employee and ship details

The Seacare Authority collects employee and ship detail reports from employers in January and July each year.

Employee numbers, as well as full time equivalent (FTE) values and hours worked data are used in calculating injury frequency and incident rates (the denominator data that is combined with workers' compensation claims data). Ship details – including ships covered by the Seacare scheme, the number of days a ship is operational under the scheme's legislation over the year, and standard crew numbers – are also recorded.

6.3. Calculation of data

Employee numbers

Employee data in this report includes total number of employees covered by the Seafarers Act derived from the numbers declared by each employer. To enable comparison with other Australian jurisdictions, a full time equivalent (FTE) employee value is used as a seafarer number denominator for calculating incidence rates. Seacare FTE employee numbers are calculated using the formula:

$$\frac{(\text{number of berths}) \times (\text{days operated in the period/total days in period}) \times (\text{standard shift hours per day} \times \text{standard work days per week})}{(\text{average weekly working hours} - \text{taken to be } 40.4)}$$

Hours worked

Hours worked data is based on a formula agreed by the Seacare Authority and first applied in 2003–04. The formula takes into account the continuous nature of Seafarers Act coverage during a voyage where seafarers, who are generally on board a ship for 24 hours a day, are exposed to the risk of injury for the entire time on board a vessel whether on or off duty. The formula is:

$$(\text{number of berths}) \times (\text{days operated in period}) \times (\text{daily hours of operation})$$

6.4. Related data sources

Seacare Authority published information

[Seacare Authority Annual Reports](#)

[Seacare Authority – Scheme Performance](#)

Safe Work Australia

[Australian Work Health and Safety Strategy 2012–2022](#)

[Safe Work Australia's Comparative Performance Monitoring Reports](#)

[Comparison of Workers' Compensation Arrangements in Australia and New Zealand](#)

[National Return to Work Survey – published reports](#)

[Type of Occurrence Classification System \(TOOCS\)](#)



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