

Australian Government

Seafarers Safety, Rehabilitation and Compensation Authority

2016–17 Compendium of Seacare statistics







Contents

1.	Introduction	4
	1.1 Data sources1.2 Calculation of data	4 5
2.	Coverage	6
	2.1 Seafarers Act coverage	6
3.	Occupational health and safety	9
	3.1 Workers' compensation data3.2 Claim characteristics3.3 Ratio of reported incidents to seafarers	9 10 17
4.	Workers' compensation	18
	 4.1 Claims summary 4.2 Timeliness of decision making 4.3 Claim payments 4.4 Reconsiderations 4.5 Disputation 	18 19 20 20 21
5.	Return to work	24
	5.1 Duration of claims5.2 Median lost time	24 24

1. Introduction

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.

1.1 Data sources

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 results 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 where there was an injury at 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.

1.2 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. While this may be an accurate reflection of the absolute number of seafarers covered by the scheme throughout the year, in order to provide a 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:

(number of berths) x (days operated in the period/total days in period) x (standard shift hours per day x standard work days per week)

(average weekly working hours-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:

(number of berths) x (days operated in period) x (daily hours of operation)

2. Coverage

2.1 Seafarers Act coverage

Figure 1 shows the total number of employees, FTE employees and hours worked under the Seafarers Act—as reported by scheme employers from 2012–13 to 2016–17. The raw data is provided in Table 1.

Employers provide information on employee numbers and hours worked biannually for the periods 1 January to 30 June and 1 July to 31 December. 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 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.

Over the past five years, there has been a downward trend in the number of FTE in the scheme. Over the past four years, the total number of employees and total hours worked also reduced.

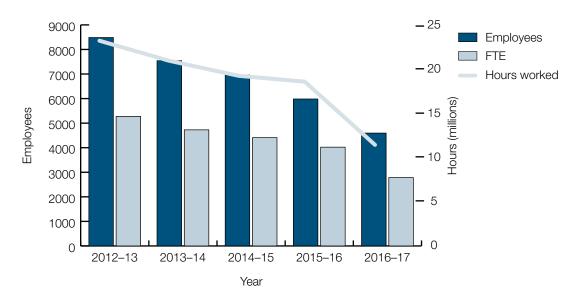


Figure 1: Seafarers Act-Employee numbers, FTE employees and hours worked (2012-13 to 2016-17)

Table 1: Seafarers Act-Employee numbers, FTE employees and hours worked¹

	2012–13	2013–14	2014–15	2015–16	2016–17
Total Employees	8,486	7,541	6,960	5,984	4,596
Total FTE	5,273	4,727	4,410	4,022	2,785
Total hours worked	22,965,466	21,315,138	19,495,844	18,023,548	11,941,378

1 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.

Table 2 and Table 3 provide a breakdown of the total number of employees by age range and occupational grouping.

Table 2 shows that for the past five years almost 50 per cent of employees within the Seacare scheme were aged 45 or older.

	2012–13	2013–14	2014–15	2015–16	2016–17
<20	44	35	16	34	46
20–24	385	331	289	204	185
25–29	850	738	698	573	394
30–34	877	818	819	647	557
35–39	1013	814	809	673	580
40-44	1130	967	944	741	630
45–49	1183	934	949	735	607
50–54	1168	1000	878	769	623
>55	1686	1442	1382	1131	918
Total	8336	7079	6784	5507	4540

Table 2: Employees by Age Range under the Seafarers Act²

Table 3 shows that for the past five years approximately one third of seafarers were employed as integrated ratings.

Table 3: Employees by Occupational Grouping under the Seafarers Act

	2012–13	2013–14	2014–15	2015–16	2016–17
Deck Officers	1947	1697	1726	1560	1249
Engineers	1717	1578	1425	1229	971
Integrated Ratings	2961	2440	2144	1606	1317
Catering	1361	1050	1226	963	878
Trainees	350	314	263	149	125
Total	8336	7079	6784	5507	4540

2 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.

2.2 OHS(MI) coverage

Figure 2 shows the total number of FTE employees and total hours worked under the OHS(MI) Act—as reported by scheme employers, between 2012–13 and 2016–17. The raw data is provided in Table 4.

Similar to the Seafarers Act, over the past five years there has been a downward trend in the total number of FTE employees and total hours worked under the OHS(MI) Act.

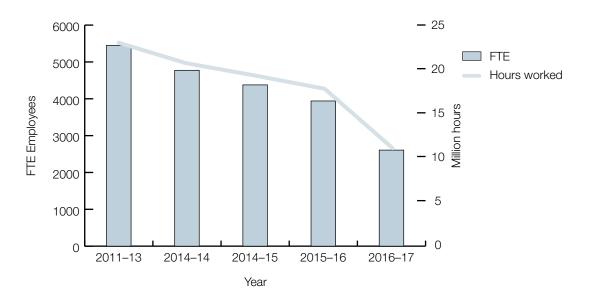


Figure 2: OHS(MI) Act-FTE employees and Hours Worked-2012-13 to 2016-17

Table 4: OHS(MI) Act-FTE employees and hours worked

	2012–13	2013–14	2014–15	2015–16	2016–17
Total FTE	5,451	4,773	4,377	3,941	2,607
Total hours worked	23,781,106	21,561,704	19,343,400	17,681,248	11,178,058

3. Occupational health and safety

3.1 Workers' compensation data

The injury (and disease) incidence and frequency rates are two nationally recognised, high-level OHS outcome indicators. The incidence rate is derived from the number of claims (accepted claims, excluding journey claims, which result in one week of compensation) 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. In addition, most employers generally use a 24 hour divisor in calculating enterprise OHS performance indicators such as lost time injury frequency rates. Therefore, the injury frequency rate data provided in this report is generally comparable with indicators used by many scheme employers.

Figure 3 and Table 5 provide the incidence rate of claims resulting in one, four and 12 weeks incapacity, as well as the frequency rate of claims resulting in one week incapacity. They show that there has been an increase in the incidence rates for claims with one and four weeks incapacity as well as the frequency rate for claims with one week incapacity but a slight decrease in the incidence of claims with 12 or more weeks incapacity. However the incidence and frequency rates for 2016-17 still remain lower than those of 2012-13.

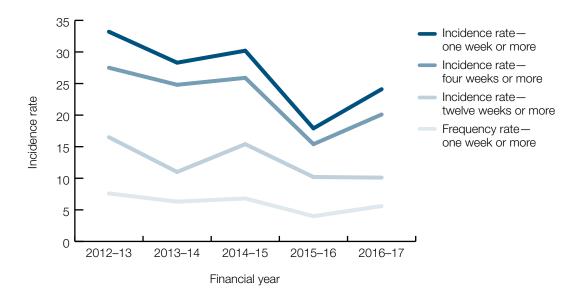


Figure 3: Injury incidence and frequency rates (2012–13 to 2016–17)

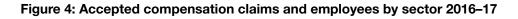
Table 5: Injury incidence and frequency rates (2012-13 to 2016-17)

	2012–13	2013–14	2014–15	2015–16	2016–17					
Incidence rates—per 1000 FTE										
One week or more duration	33.2	28.3	30.2	17.9	24.1					
Four weeks or more duration	27.5	24.8	25.9	15.4	20.1					
Twelve weeks or more incapacity	16.5	11.0	15.4	10.2	10.1					
Frequency rate-per 1,000,000 hours worked										
One week or more incapacity	7.6	6.3	6.8	4.0	5.6					

3.2 Claim characteristics

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

Figure 4 provides a breakdown of accepted claims by sector in 2016–17. The offshore sector accounted for the largest proportion of employees, however the blue water sector accounted for the highest proportion of accepted claims.



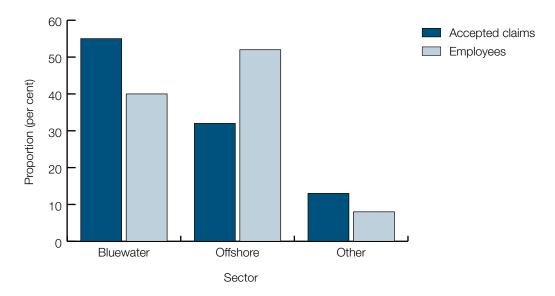
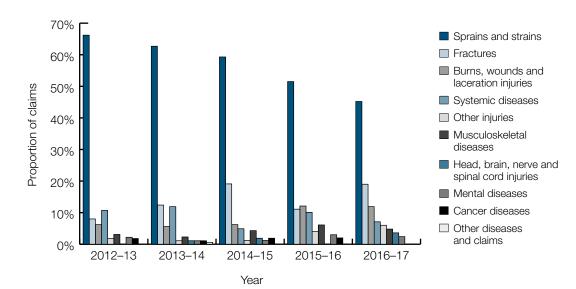


Figure 5 and Table 6 provide a breakdown of claims by the condition claimed (nature) for claims accepted between 2012–13 and 2016–17. Sprains and strains continue to be the most prevalent type of injury, accounting for approximately 45 per cent of all injuries recorded.



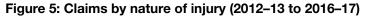


Table 6: Number and proportion of claims by nature of injury (2012–13 to 2016–17)

	2012	2–13	2013	3–14	2014–15		2015–16		2016–17	
Nature of injury	Claims	%	Claims	%	Claims	%	Claims	%	Claims	%
Sprains and Strains	149	66.2	111	62.7	96	59.3	51	51.5	38	45.2
Fractures	18	8.0	22	12.4	31	19.1	11	11.1	16	19.0
Burns, Wounds and Laceration Injuries	14	6.2	10	5.6	10	6.2	12	12.1	10	11.9
Systemic Diseases	24	10.7	21	11.9	8	4.9	10	10.1	6	7.1
Other Injuries	4	1.8	2	1.1	2	1.2	4	4.0	5	6.0
Musculoskeletal Diseases	7	3.1	4	2.3	7	4.3	6	6.1	4	4.8
Head, Brain, Nerve and Spinal Cord Injuries	0	0.0	2	1.1	3	1.9	0	0.0	3	3.6
Mental Diseases	5	2.2	2	1.1	2	1.2	3	3.0	2	2.4
Cancer Diseases	4	1.8	2	1.1	3	1.9	2	2.0	0	0.0
Other Diseases and Claims	0	0.0	1	0.6	0	0.0	0	0.0	0	0.0

Figure 6 and Table 7 provide a breakdown of claims by the mechanism of incident for claims accepted between 2012–13 and 2016–17. The mechanism of incident identifies the overall action, exposure or event that best describes the circumstances that resulted in the most serious injury or disease. As has been the case for the previous four reporting periods, body stressing continues to be the most prevalent cause of injury within the Seacare scheme in 2016-17, followed by falls, slips and trips.

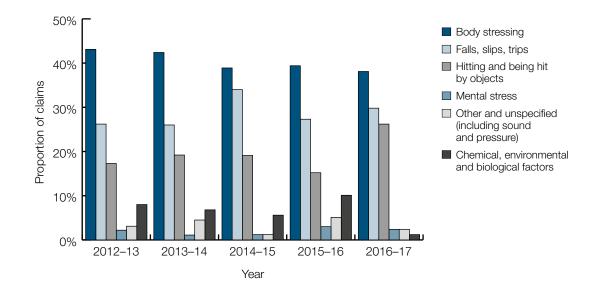


Figure 6: Claims by mechanism of injury (2012–13 to 2016–17)

Mechanism	2012	2012–13		2013–14		2014–15		2015–16		2016–17	
of injury	Claims	%									
Body Stressing	97	43.1	75	42.4	63	38.9	39	39.4	32	38.1	
Falls, slips, trips	59	26.2	46	26.0	55	34.0	27	27.3	25	29.8	
Hitting and being hit by objects	39	17.3	34	19.2	31	19.1	15	15.2	22	26.2	
Mental stress	5	2.2	2	1.1	2	1.2	3	3.0	2	2.4	
Other and unspecifed (including sound and pressure)	7	3.1	8	4.5	2	1.2	5	5.1	2	2.4	
Chemical, environmental and biological factors	18	8.0	12	6.8	9	5.6	10	10.1	1	1.2	

Table 7: Number and proportion of claims by mechanism of injury (2012–13 to 2016–17)

Figure 7 and Table 8 provide a breakdown of claims by body location for claims accepted between 2012–13 and 2016–17. Injuries to the upper limbs were the most common injury in 2016–17, followed by injuries to the lower limbs and trunk.

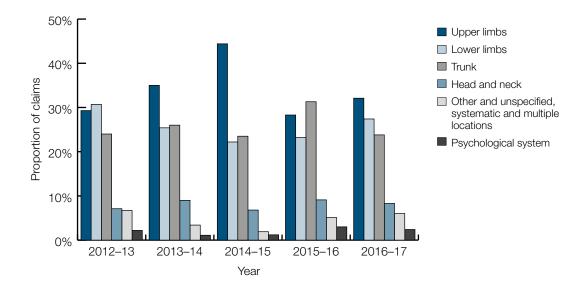
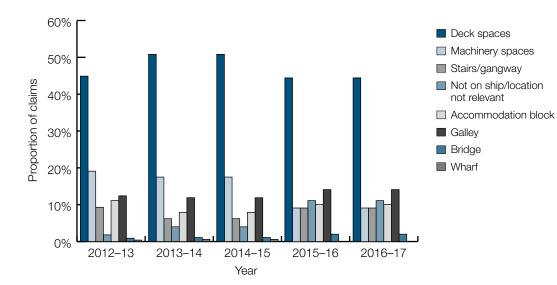




Table 8: Number and proportion of claims by body location (2012–13 to 2016–17)

De de la cation	2012	2–13	2013	2013–14		2014–15		2015–16		2016–17	
Body location	Claims	%	Claims	%	Claims	%	Claims	%	Claims	%	
Upper Limbs	66	29.3	62	35.0	72	44.4	28	28.3	27	32.1	
Lower Limbs	69	30.7	45	25.4	36	22.2	23	23.2	23	27.4	
Trunk	54	24.0	46	26.0	38	23.5	31	31.3	20	23.8	
Head and Neck	16	7.1	16	9.0	11	6.8	9	9.1	7	8.3	
Other and unspecified, systematic and multiple locations	15	6.7	6	3.4	3	1.9	5	5.1	5	6.0	
Psychological System	5	2.2	2	1.1	2	1.2	3	3.0	2	2.4	

Figure 8 and Table 9 provide a breakdown of the most common areas on a ship for injuries to occur for claims accepted between 2012–13 and 2016–17. In 2016–17, most of the injuries recorded occurred on deck spaces; consistent with the previous four years.



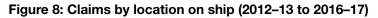


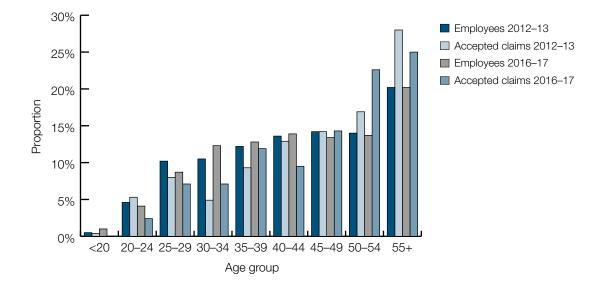
Table 9: Number and proportion of claims by location on ship (2012-13 to 2016-17)

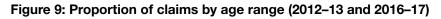
	2012	2–13	2013	2013–14		2014–15		2015–16		2016–17	
Location on ship	Claims	%	Claims	%	Claims	%	Claims	%	Claims	%	
Deck Spaces	101	44.9	90	50.8	81	50.0	44	44.4	44	52.4	
Machinery Spaces	43	19.1	31	17.5	25	15.4	9	9.1	14	16.7	
Stairs/gangway	21	9.3	11	6.2	17	10.5	9	9.1	10	11.9	
Not on ship/ location not relevant	4	1.8	7	4.0	6	3.7	11	11.1	7	8.3	
Accommodation Block	25	11.1	14	7.9	15	9.3	10	10.1	5	6.0	
Galley	28	12.4	21	11.9	11	6.8	14	14.1	4	4.8	
Bridge	2	0.9	2	1.1	4	2.5	2	2.0	0	0.0	
Wharf	1	0.4	1	0.6	3	1.9	0	0.0	0	0.0	

14

In order to provide a view into how the scheme's claims experience has changed over the last five years, comparisons of claims by age range and claims by occupational category in 2012–13 and 2016–17 are reported.

Figure 9 and Table 10 compare the proportion of accepted claims in 2012–13 and 2016 17 across a range of age groups. Employees aged 45 or over make up 47.3 per cent of the scheme and 61.9 per cent of accepted claims. This is comparable to 2012–13 in which 48.4 per cent of employees and 59.1 per cent of claimants were aged 45 or older.





		2012	2–13		2016–17				
Age range	Emple	oyees	Cla	ims	Emple	oyees	Claims		
	Number	%	Number	%	Number	%	Number	%	
<20	44	0.5	1	0.4	46	1.0	0	0.0	
20–24	385	4.6	12	5.3	185	4.1	2	2.4	
25–29	850	10.2	18	8.0	394	8.7	6	7.1	
30–34	877	10.5	11	4.9	557	12.3	6	7.1	
35–39	1,013	12.2	21	9.3	580	12.8	10	11.9	
40–44	1,130	13.6	29	12.9	630	13.9	8	9.5	
45–49	1,183	14.2	32	14.2	607	13.4	12	14.3	
50–54	1,168	14.0	38	16.9	623	13.7	19	22.6	
55+	1,686	20.2	63	28.0	918	20.2	21	25.0	

Figure 10 and Table 11 compare the proportion of accepted claims in 2012–13 and 2016 17 across the five key occupational groupings. Integrated ratings account for the highest percentage of employees (29.0 per cent) and make up the highest proportion of accepted claims (61.9 per cent). This has remained unchanged since 2012–13. However deck officers account for the second highest proportion of employees (27.5 per cent) but made up only 7.1 per cent of accepted claims.

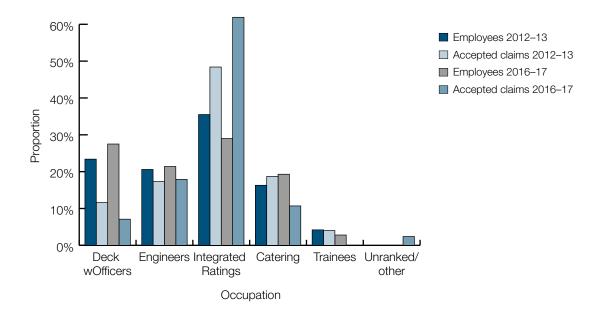




Table 11: Number and proportion of claims by occupational category (2012–13 and 2016–17)

	2012–13				2016–17				
Occupational category	Employees		Claims		Employees		Claims		
	Number	%	Number	%	Number	%	Number	%	
	Number	%	Number	%	Number	%	Number	%	
Deck Officers	1947	23.4	26	11.6	1249	27.5	6	7.1	
Engineers	1717	20.6	39	17.3	971	21.4	15	17.9	
Integrated Ratings	2961	35.5	109	48.4	1317	29.0	52	61.9	
Catering	1361	16.3	42	18.7	878	19.3	9	10.7	
Trainees	350	4.2	9	4.0	125	2.8	0	0.0	
Unranked/ other	0	0.0	0	0.0	0	0.0	2	2.4	

16

3.3 Ratio of reported incidents to seafarers

Table 12 shows that the ratio of incidents reported and incidents involving five days or more incapacity, as reported to the Australian Maritime Safety Authority, have decreased from that recorded for the previous two years.

Table 12: Ratio of reported incidents to seafarers
--

	2012–13	2013–14	2014–15	2015–16	2016–17
Number of seafarers (FTE employees) under the OHS(MI) Act	5451	4773	4377	3941	2607
All incidents reported	63	46	54	52	30
Ratio (incidents per 1000 seafarers)	11.6	9.6	12.3	13.2	11.5
Incidents reported involving an incapacity of five or more days	53	38	43	42	22
Ratio (incidents involving five or more days incapacity per 1000 seafarers)	9.7	8.0	9.8	10.7	8.4

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 13 below.

Table 13: Claims data

	2012–13	2013–14	2014–15	2015–16	2016–17
Claims lodged			<u> </u>	<u>.</u>	
Claims accepted	225	177	162	99	84
Claims rejected	16	23	20	14	12
Claims pending	0	0	1	0	3
Total	241	200	183	113	99
Claims accepted					
Claims accepted—on duty	204	168	155	90	77
Claims accepted—off duty	13	6	6	5	5
Journey claims	4	3	1	3	1
Claims while studying	0	0	0	1	0
Property claims	0	0	0	0	0
Other	4	0	0	0	1
Total	225	177	162	99	84
Claims accepted—summary and dura	ation				<u>.</u>
Claims accepted—excluding property claims	225	177	162	99	84
Claims accepted—excluding journey and property claims	221	174	161	96	83
Claims accepted—one week or more duration (excluding journey claims)	175	134	133	72	67
Claims accepted—four weeks or more duration (excluding journey claims)	145	117	114	62	56
Claims accepted—twelve weeks or more duration (excluding journey claims)	87	52	68	41	28
Medical accepted claims					
(no lost time)	34	28	10	11	9
Claims accepted involving lost time	182	140	141	80	71
Claims accepted—work related fatalities	0	0	0	1	0
Claims accepted involving lost time (excluding journey claims)	178	137	140	77	71

The 99 claims lodged in 2016–17 is less than half the number lodged in 2013-14 where 200 claims were lodged.

4.2 Timeliness of decision making

The data indicates that, in general, well over half of claims made are lodged within a month.

Table 14: Tir	ne from	injury to	lodgement
---------------	---------	-----------	-----------

	2011–12	2012–13	2013–14	2014–15	2015–16
Within first month	59%	60%	69%	64%	65%
Between 1 and 3 months	28%	25%	21%	23%	20%
Between 4 and 12 months	10%	13%	6%	8%	10%
After 12 months	2%	3%	4%	4%	5%

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 15 shows the average time taken to determine new claims, from date of receipt by the employer for all claims determined in the period 2012-13 to 2016-17.

This data shows that 66 per cent of claims were determined within the relevant statutory time frames in 2016-17; which is the lowest it has been in the last five years.

Table 15: Claims determined within statutory timeframes

	2012–13	2013–14	2014–15	2015–16	2016–17
Proportion determined within statutory timeframes	78%	78%	76%	70%	66%

The Seafarers Act states that if an injury lasts, or is expected to last, 28 days or more, the employer must arrange an assessment of the employees' capacity to undertake a rehabilitation program.

The data for 2016-17 indicates that 35 per cent of the assessments carried out by employers of an injured employee's capability for undertaking rehabilitation occurred within 31 days from the date of injury. This is lower than the previous year in which 50 per cent of assessments occurred within 31 days from the date of injury.

Table 16: Time from injury to rehabilitation assessment

	2012–13	2013–14	2014–15	2015–16	2016–17
1 to 7 days	15%	25%	26%	13%	11%
8 to 14 days	18%	9%	14%	19%	8%
15 to 21 days	5%	4%	7%	9%	0%
22 to 31 days	4%	9%	8%	9%	16%
1 to 3 months	35%	26%	26%	28%	35%
4 to 12 months	21%	26%	15%	16%	24%
> 12 months	3%	0%	5%	6%	5%

4.3 Claim payments

A summary of total claim payments during 2016–17 indicates that weekly benefits to injured seafarers (time off work) accounts for more than half (58 per cent) of total claims costs.

While there was an increase in the amount of weekly compensation paid in 2016-17 compared to 2015-16, there was a decrease in the total claims costs over the same period.

	2012–13	2013–14	2014–15	2015–16	2016–17
Weekly compensation	\$12,550,111	\$9,234,239	\$8,396,553	\$5,783,035	\$6,185,302
Lump Sum	\$2,196,459	\$3,807,409	\$5,035,258	\$3,725,116	\$2,741,133
Medical	\$1,739,889	\$1,542,496	\$1,110,515	\$973,684	\$677,628
Rehabilitation	\$398,791	\$425,758	\$373,953	\$285,175	\$326,228
Legal Costs	\$544,222	\$805,081	\$641,713	\$593,158	\$523,895
Medical Report	\$87,852	\$68,475	\$71,135	\$43,787	\$41,947
Investigation	\$97,427	\$79,055	\$105,901	\$110,277	\$39,086
Other	\$195,517	\$164,883	\$421,527	\$141,743	\$125,461
Total	\$17,810,268	\$16,127,396	\$16,156,556	\$11,655,975	\$10,660,681

Table 17: Breakdown of claim payments

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 reviews requested by employers for assistance to reconsider a determination.

In 2016-17, 15 determinations were reviewed on behalf of eight employers. Of these, Comcare made recommendations to vary the determinations of the employer in just two cases (13 per cent), compared with recommendations to vary or revoke in 10 cases (29 per cent) in 2014-15.

In one instance Comcare made a recommendation that the employer investigate further to gain confirmation of information in order to make a decision.

Table 18: Reconsideration assistance provided by Comcare

	2012–13	2013–14	2014–15	2015–16	2016–17
Determinations reviewed	29	43	34	13	15
Recommendations affirming determination	18	20	20	11	12
Recommendations varying determination	4	5	1	0	2
Recommendations revoking determination	5	12	10	1	0
Investigate	0	0	0	0	1
Number of employers	17	19	19	9	8

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 11 and Table 19 show both the rejection rate and the disputation rate for the scheme. In previous years, the disputation rate for the Seacare scheme was calculated by taking the total number of AAT applications lodged in the period as a percentage of claims lodged and determined in the period. However the disputation rate methodology has been updated to take the total number of AAT applications lodged in the period as a percentage of active claims in the period where an active claim is defined as a claim with a payment of any kind made in the reporting period. This new methodology has been adopted as, in capturing all active claims in the relevant period, it provides a more acceptable proxy of claims from which an AAT application can originate and, as such, is a more appropriate methodology than that previous used. It should be noted that an AAT application can be lodged in relation to any determination made on a claim received in any year that is still active. The disputation rate would ideally measure the number of AAT applications lodged in relation to the total number of determinations made in a year, however this information is not currently collected. The disputation rates for all years in Figure 11 and Table 19 have been calculated using the new methodology and show that the disputation rate for 2016-17 is lower than in the previous three reporting periods. The rejection rate of the primary determination (calculated as the claims rejected in a financial year divided by the claims received in the same year) has remained relatively stable over the same period.

Figure 11: Rejection rate and disputation rate

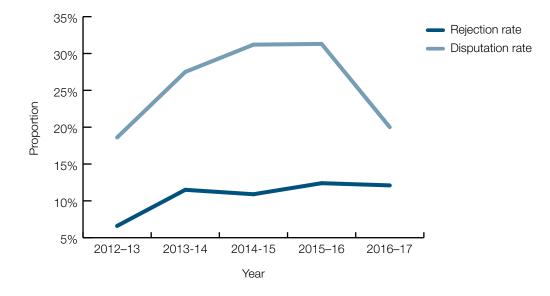


Table 19: Rejection rate and disputation rate

	2012–13	2013–14	2014–15	2015–16	2016–17
Claims lodged	241	200	183	113	99
Claims rejected	16	23	20	14	12
Rejection rate (%)	6.6	11.5	10.9	12.4	12.1
Active claims by payment year	344	309	266	195	185
AAT applications lodged	64	85	83	61	37
Disputation rate (%)	18.6	27.5	31.2	31.3	20.0

Table 20 provides a breakdown of all AAT lodgements between 2012–13 and 2016–17.

Table 20: Outcome of AAT review of decisions

	2012–13	2013–14	2014–15	2015–16	2016–17
Applications lodged	64	85	83	61	37
Applications finalised					
Applications finalised by consent of the parties					
Decision of employer affirmed in accordance with terms of agreement lodged by the parties under subsection 34D or 42C of the AAT Act*	24	20	46	34	31
Decision of employer varied in accordance with terms of agreement lodged by the parties under subsection 34D or 42C of the AAT Act*	2	4	5	1	6
Decision of employer set aside in accordance with terms of agreement lodged by the parties under subsection 34D or 42C of the AAT Act*	11	13	13	16	9
Application dismissed by consent of the parties under section 42A(1) of the AAT Act*	0	2	0	0	0
Application withdrawn by the applicant under section 42A(1A) of the AAT Act*	12	6	17	7	14
Subtotal	49	45	81	58	60
Applications heard and determined by the AAT under section	n 43 of the A	AT Act*		·	
Decision of employer affirmed by decision of the AAT following a hearing	3	0	0	2	1
Decision of employer varied by decision of the AAT following a hearing	0	0	0	0	0
Decision of employer set aside by decision of the AAT following a hearing	3	2	3	3	1
Subtotal	6	2	3	5	2
Other					
Application dismissed by the AAT under section 42A(2)(a) of the AAT Act* because applicant failed to appear	0	0	1	1	0
Application dismissed for lack of jurisdiction under section 42A(4) of the AAT Act* or by determination of the AAT following a hearing	0	2	4	1	0
Application dismissed under section 42A(5) of the AAT Act* because applicant failed to comply with a direction or to proceed with application	0	0	0	0	0
Applications dismissed under section 42B(1) of the AAT Act* as frivolous or vexatious	0	0	0	0	1
Extension of time to lodge application refused under section 29(7) of the AAT Act*	0	1	0	0	0
Other-not specified	0	0	0	0	1
Subtotal	0	3	5	2	2
Total	55	50	89	65	64
Timeframes					
Average time take from lodgment to finalisation (days)	288	259	287	396	350

* Administrative Appeals Tribunal Act 1975

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.

	2012–13	2013–14	2014–15	2015–16	2016–17
1 to 14 days	15%	18%	17%	16%	20%
15 to 31 days	10%	10%	8%	10%	24%
1 to 3 months	30%	39%	31%	32%	32%
4 to 12 months	34%	26%	35%	40%	24%
More than 12 months	11%	8%	10%	1%	0%

Table 21: Receipt of claim to end of compensation

In 2016–17, compensation had been finalised within one month of the date of a claim being received by the employer in 44 per cent of cases, and within three months in 76 per cent of cases. Claims finalised within one month and three months in 2016-17 is higher than in previous years.

5.2 Median lost time

Figure 12 and Table 22 show the median duration of lost time claims accepted between 2012–13 and 2016–17. The median lost time is the middle point of incapacity weeks for accepted claims that have had one week or more lost time with an injury date between three and 21 months prior to the reporting period.

The results for claims received in 2016–17 show a reduction in the median lost time as compared to the previous year. It should be noted that data for more recent periods is relatively immature and the median duration is likely to change from year to year.

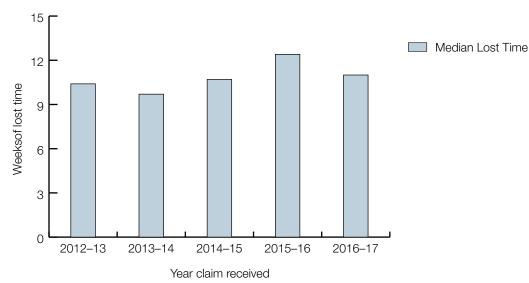


Figure 12: Median lost time

Table 22: Median lost time 2011–12 to 2015–16

	2012–13	2013–14	2014–15	2015–16	2016–17
Weeks	10.4	9.7	10.7	12.4	11.0

5.3 Rehabilitation and return to work

	2012–13	2013–14	2014–15	2015–16	2016–17
Accepted claims	225	176	162	99	85
Claims of 28 days or more lost time	148	120	115	65	58
Percentage of claimants assessed for a rehabilitation program	46%	37%	52%	43%	53%
Percentage of claimants assessed that commenced a rehabilitation program	91%	98%	90%	89%	94%
Percentage of claimants that commenced a rehabilitation program who returned to work	71%	81%	67%	80%	69%

Table 23: Rehabilitation and return to work outcomes (percentage against claims of 28 days or more lost time).

Table 23 shows that in 2016–17 there were 58 accepted claims with 28 days or more lost time. Of these, approximately 53 per cent were assessed for a rehabilitation program. Of those assessed for a rehabilitation program, 94% commenced a rehabilitation program. Of those who commenced a rehabilitation program following a rehabilitation assessment, 69 per cent returned to work.

The smaller claim numbers in more recent years mean the results are more susceptible to variation.

5.4 Nature of duties on return to work

Table 24 reports the number of employees who lodged a claim and subsequently returned to work, irrespective of the length of time off work.

Table 24: Return to work trend data

	2012–13	2013–14	2014–15	2015–16	2016–17
Number of employees who lodged a claim in the period that returned to work	162	110	105	53	49
Full duties	90%	88%	94%	87%	84%
Light duties	9%	12%	6%	13%	16%
Same position	93%	91%	95%	87%	84%
Other position	7%	9%	5%	13%	16%
Full-time	96%	95%	98%	94%	98%
Part-time	3%	5%	2%	6%	2%
Ship	94%	91%	94%	87%	92%
Land	5%	9%	6%	13%	8%

Whilst relative proportions have fluctuated over time, the majority of seafarers that return to work after injury do so to full duties, to full time work and/or to work on ship-based duties.