Key OSH Statistics, Western Australia

Work-related lost time injuries and diseases in Western Australia
2016–17 preliminary data
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A number of issues affect the data quality of statistical information based on claims data, as provided by the Department of Mines, Industry Regulation and Safety (DMIRS). It is important to be aware of these issues when interpreting claims statistics, to ensure that the conclusions drawn from the information take into account known inconsistencies and omissions.

More information about the data can be found in the Explanatory notes section at the end of this report.

2018 Data Note
Due to re-benchmarking of Labour Force estimates based on revisions to the Estimated Resident Population following the 2016 census; denominator data (total number of employees covered by workers’ compensation and total number of hours worked) provided by the Australian Bureau of Statistics (ABS) in 2018 include data revisions for 2014–15 and 2015–16.

Workers’ compensation claims data has been revised back to 2000–01.

The revisions have affected rate calculations and caution is advised for all reported rates. As such, incidence and frequency rates may differ from previous publications in respect to these years and should not be used. Revised data is denoted by ‘r’.

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Work-related injuries and diseases summary

Two employees are injured every hour seriously enough to take one or more days/shifts off work\(^1\).

On average every one person is fatally injured at a workplace every\(^2\) 22 days

13 work-related traumatic injury fatalities were recorded in Western Australia in 2017–18


15,594 lost time injuries and diseases of one or more day/shifts lost recorded in WA during 2016–17p — This equates to an incidence rate of 1.29 LTI/Ds per one hundred employees, a 4.8 per cent reduction compared to 2015–16.

On average, 5,002 employees are hurt each year to the extent they require 60 or more days/shifts off work, equating to an average of 240 days lost per incident

A frequency rate of 7.73 LTI/Ds per one million hours worked was recorded during 2016–17p. A 3.9 per cent reduction compared to the revised rate of 8.05 recorded in 2015–16.

One in 104 women (of those employees covered by workers’ compensation) experienced a work-related lost time injury or disease requiring an absence of one or more days/shifts in 2016–17p (the same ratio as the previous year).

1:59 male employees experienced a work-related lost time injury or disease requiring an absence of one or more days/shift during 2016–17p, the same ratio as the previous year.

The top industry divisions to record the highest frequency rate during 2016–17p were:

Arts and Recreation Services (13.23)
Agriculture, Forestry and Fishing (12.94)
Manufacturing (12.15)

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\(^1\) Based on workers’ compensation claims data for 2016–17p
\(^2\) Based on a five year average from 2013–14 to 2017–18
Frequency and incidence rates

Chart 1: Frequency rates (LTI/Ds per million hours worked): 2000–01 to 2016–17p

![Chart showing frequency rates from 2000-2016](chart.png)

Table 1: Frequency of work-related lost time injuries and diseases (LTI/Ds per million hours worked)

<table>
<thead>
<tr>
<th>Financial year</th>
<th>Frequency rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000–01r</td>
<td>13.85</td>
</tr>
<tr>
<td>2001–02r</td>
<td>12.93</td>
</tr>
<tr>
<td>2002–03r</td>
<td>12.81</td>
</tr>
<tr>
<td>2003–04r</td>
<td>12.96</td>
</tr>
<tr>
<td>2004–05r</td>
<td>12.75</td>
</tr>
<tr>
<td>2005–06r</td>
<td>11.62</td>
</tr>
<tr>
<td>2006–07r</td>
<td>11.04</td>
</tr>
<tr>
<td>2007–08r</td>
<td>10.69</td>
</tr>
<tr>
<td>2008–09r</td>
<td>10.00</td>
</tr>
<tr>
<td>2009–10r</td>
<td>9.28</td>
</tr>
<tr>
<td>2010–11r</td>
<td>9.61</td>
</tr>
<tr>
<td>2011–12r</td>
<td>9.28</td>
</tr>
<tr>
<td>2012–13r</td>
<td>8.76</td>
</tr>
<tr>
<td>2013–14r</td>
<td>8.19</td>
</tr>
<tr>
<td>2014–15r</td>
<td>7.86</td>
</tr>
<tr>
<td>2015–16r</td>
<td>8.05</td>
</tr>
<tr>
<td>2016–17p</td>
<td>7.73</td>
</tr>
</tbody>
</table>

- Consistent falls recorded in frequency rate since 2011–12 were interrupted by a 2.4 per cent increase during 2015–16 compared to 2014–15. Preliminary data for 2016–17 indicate a return to a downward trend with a 3.9 per cent decrease in rate to 7.73 LTI/Ds per million hours worked. However, subsequent revisions to data may result in future adjustments to these figures.

- It should be noted that 2009–10 is an unusual year in that it is the lowest recording year on record in terms of work-related injury/disease and traumatic work-related fatality statistics in Western Australia (actual numbers and frequency and incidence rates); thus perhaps exaggerating the rise in 2010–11.

- In Western Australia the total rate of improvement in the frequency of lost time injuries and diseases (LTI/D) since the *Occupational Safety and Health Act 1984* came into effect in 1988–89 is 78.1 per cent.

- The rate of improvement over the five years from July 2012 to June 2017 is 11.7 per cent.
Chart 2: Lost time injury and disease incidence rates (LTI/Ds per hundred employees) by sex: 2000–01 to 2016–17p

- 1.29 LTI/Ds per hundred employees was recorded during 2016–17p, a 4.8 per cent reduction compared to the previous year.

- The number of male employees (covered by the *Workers’ Compensation and Injury Management Act 1981*) in Western Australia reduced 4.7 per cent during the three year period from 2014–15 to 2016–17, from 671,392 to 641,150. Conversely, female employees increased 0.7 per cent during the same comparative period, from 566,484 to 570,619.

- Preliminary data indicates male incidence rates have fallen 50.3 per cent from 3.22 LTI/Ds per hundred employees in 2000–01 to 1.60 in 2016–17p. A 15.6 per cent rate reduction was recorded between the five year period from 2012–13 (1.89) and 2016–17p.

- Though not as large as the reduction in male incidence rates, female incidence rates also recorded a fall of 32.2 per cent from 1.38 in 2000–01 to 0.94 in 2016–17p. A 13.2 per cent fall in rate was recorded during the five year period from 2012–13 (1.08) and 2016–17p.

**LTI/Ds 60+ days lost**

Preliminary data for severe LTI/Ds is to be used as an indication only due to the amount of claims still to be finalised. Figures shown for earlier years provide a more stable, reliable picture.

**Table 2: Lost time injuries and disease by number, total days lost and average duration: 2012–13 to 2016–17p**

<table>
<thead>
<tr>
<th>Financial year</th>
<th>LTI/Ds (60+ days lost)</th>
<th>Frequency rate</th>
<th>Incidence rate</th>
<th>Avg duration (days)</th>
<th>Proportion of all LTI/Ds</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012–13r</td>
<td>4,823</td>
<td>2.27</td>
<td>0.39</td>
<td>249</td>
<td>25.9%</td>
</tr>
<tr>
<td>2013–14r</td>
<td>4,972</td>
<td>2.31</td>
<td>0.40</td>
<td>248</td>
<td>28.1%</td>
</tr>
<tr>
<td>2014–15r</td>
<td>4,768</td>
<td>2.23</td>
<td>0.39</td>
<td>242</td>
<td>28.4%</td>
</tr>
<tr>
<td>2015–16r</td>
<td>5,038</td>
<td>2.45</td>
<td>0.41</td>
<td>240</td>
<td>30.4%</td>
</tr>
<tr>
<td>2016–17p</td>
<td>5,409</td>
<td>2.68</td>
<td>0.45</td>
<td>222</td>
<td>34.7%</td>
</tr>
</tbody>
</table>

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*based on unpublished data obtained from the Australian Bureau of Statistics*
• Annual fluctuations in frequency rate for severe LTI/Ds are evident between 2012–13 and 2015–16, with rates increasing during 2015–16 compared to the previous year. Preliminary data for 2016–17 indicate the frequency rate will continue to rise at 2.68 severe LTI/Ds per one million hours worked (a 9.7 per cent increase compared to 2015–16) and may result in the highest severity rate since 2003–04. Figures may change with future data revisions.

• The proportion of severe LTI/Ds continues to increase. More than a quarter of all LTI/Ds during 2012–13 were classified as severe injuries (60 days/shifts lost or more) increasing to 30.4 per cent during 2015–16. Preliminary data for 2016–17 indicate this figure will increase again and currently accounts for 34.7 per cent (figure may change with future data revisions).

• The Construction, Health Care and Social Assistance and Manufacturing industry divisions continue to account for the highest numbers of severe LTI/Ds during 2015–16. Preliminary data for 2016–17 indicate a change in ranking with Construction recording the highest number of severe LTI/Ds followed by Health Care and Social Assistance, with the Mining industry replacing Manufacturing as the third highest recording industry division.

• Severe LTI/Ds in female employees accounted for 28 per cent of total female LTI/Ds in 2012–13 growing to 33 per cent in 2015–16. Preliminary data for 2016–17 suggest this figure will rise higher still to 35 per cent.

• In 2012–13 one in every 334 female employees sustained a severe LTI/D; the situation has improved to one in 318 female employees during 2015–16. Data for 2016–17p indicate a ratio of 1:304\(^1\).

• Severe male LTI/Ds accounted for 25 per cent of all male LTI/Ds in 2012–13 compared to 29 per cent in 2015–16. Preliminary data for 2016–17 suggest this figure will rise higher still to 34 per cent.

• In 2012–13 one in every 211 male employees sustained a severe LTI/D; the situation has improved to one in 202 male employees during 2015–16. Data for 2016–17p indicate a ratio of 1:182\(^1\).

Industry rates

• At 13.23 the Arts and Recreation Services division had the highest frequency rate of all the divisions during 2016–17p, followed by Agriculture, Forestry and Fishing industry at 12.94 and Manufacturing at 12.15.

• In terms of numbers it was the Health Care and Social Assistance division that recorded the highest number of LTI/Ds (2,314) during 2016–17p followed by the Construction and Manufacturing divisions (2,111 and 1,697 respectively).

• The subdivision to record the highest frequency rate during 2016–17p was Coal Mining with 56.60 LTI/Ds per million hours worked. Second highest was Private Households Employing Staff and Undifferentiated Goods-Producing and Service-Producing Activities of Households for Own Use at 50.84, followed by Public Order, Safety and Regulatory Services at 35.00. It should be noted that all three mentioned subdivisions recorded substantial falls in the total number of hours worked and employees in 2016–17 compared to previous years which may have disproportionately inflated frequency and incidence rates.

• The following subdivisions recorded the most LTI/Ds during 2016–17p: Construction Services (1,347), Preschool and School Education (1,246), Hospitals (953), Public Order, Safety and Regulatory Services (742), and Residential Care Services (590).
In terms of incidence rate the highest recording subdivisions during 2016–17p were Coal Mining, Private Households Employing Staff and Undifferentiated Goods- and Service-Producing Activities of Households for Own Use, Heritage Activities, Fabricated Metal Product Manufacturing, and Public Order, Safety and Regulatory Services (incidence rates of 13.78, 6.71, 5.80, 5.42 and 5.33 respectively).

Chart 3: Frequency rate (LTI/Ds per million hours worked) by ANZSIC 2006 industry division: 2016–17p

Chart 4: Incidence rate (LTI/Ds per hundred employees) by ANZSIC 2006 industry division: 2016–17p
Types of injuries and diseases

- Nature of injury group *Traumatic joint/ligament and muscle/tendon injury* continues to record the highest proportion of work-related lost time injuries. During 2016–17p these types of injuries were responsible for more than half of all incidences at 51.5 per cent (or 8,028 LTI/Ds).

- The group *Wounds, lacerations, amputations and internal organ damage* recorded the second highest proportion of LTI/Ds at 21.8 per cent (or 3,395).

- The bulk of LTI/Ds during 2016–17p are attributable to these two groups each recording frequency rates of 3.98 (a reduction from 4.35 in 2015–16) and 1.68 (a fall from 1.70 in 2015–16) respectively.

- Like the previous four years, industry subdivisions to record the largest number of *Traumatic joint/ligament and muscle/tendon injury* LTI/Ds during 2016–17p were Preschool and School Education, Construction Services, and Hospitals accounting for 7.4, 7.4 and 7.2 per cent respectively.

- Drilling down further to the subgroup classifications, the highest numbers of LTI/Ds were predictably recorded against *Soft tissue injuries due to trauma or unknown mechanisms with insufficient information to code elsewhere* (4,423), *Trauma to muscles and tendons, unspecified* (2,611), and *Laceration or open wound not involving traumatic amputation* (1,679). Comparative to 2012–13, all three subgroup classifications recorded respective variances of -32.8, +3.0, and -18.0 per cent in 2016–17p.

**Chart 5: Proportion of LTI/Ds by nature of injury: 2016–17p**

Data recorded for the groups *Neoplasms (Cancer)*, *Injury to nerves and spinal cord*, and *Other diseases* were too low to show a percentage or recorded zero LTI/Ds and have been excluded from the chart.
The greatest proportion of all work-related lost time injuries in 2016–17 is attributable to the mechanism of incident group *Body stressing*. However, LTI/Ds have decreased consistently since 2012–13 (from 7,259 LTI/Ds in 2012–13 to 6,329 in 2014–15 to 5,837 in 2016–17).

A frequency rate of 2.89 body stressing LTI/Ds per million hours worked was recorded during 2016–17, a fall of 15.3 per cent from 3.61 in 2012–13 and a 4.5 per cent reduction compared to 2015–16.

Two mechanism of incident groups recorded an increase in frequency rate during 2016–17 compared to 2012–13; these were *Mental stress* (up 14.5 per cent from 0.21 to 0.24) and *Biological factors* (up 29.9 per cent from 0.03 to 0.04).

During 2016–17 the subdivisions to record the largest number of *Body stressing* LTI/Ds were Hospitals (-23 per cent from 612 LTI/Ds in 2012–13 to 471 in 2016–17), Construction Services (-23.1 per cent from 581 to 447), and Preschool and School Education (-14.3 per cent from 357 to 306 LTI/Ds). These three subdivisions accounted for 8.1, 7.7, and 5.2 per cent of total body stressing LTI/Ds in 2016–17 (respectively).

Drilling down further to the subgroup classifications, the highest numbers of LTI/Ds during 2016–17 were recorded against *Muscular stress while handling objects other than lifting, carrying or putting down* (-25 per cent from 3,812 in 2012–13 to 2,860 LTI/Ds in 2016–17) – accounting for 18.3 per cent of total LTI/Ds. This was followed by *Falls on the same level* (-6.8 per cent to 2,758 LTI/Ds), and *Muscular stress while lifting, carrying or putting down objects* (-11.4 per cent to 2,154 LTI/Ds). The first and third ranked classifications mentioned belong to the *Body stressing* group.

The second highest proportion of LTI/Ds during 2016–17 was attributable to the group *Falls, trips and slips of a person*, accounting for 24.6 per cent of total LTI/Ds in the state. A 5.6 per cent reduction in frequency rate was recorded over the five year period, from 2.01 LTI/Ds per million hours worked in 2012–13 to 1.90 in 2016–17.

The Preschool and School Education, Construction Services, and Hospitals industry subdivisions recorded the largest volumes of such LTI/Ds during 2016–17; accounting for 12.7, 6.6, and 6.2 per cent respectively.

**Chart 6: Proportion of LTI/Ds by mechanism of incident: 2016–17**

Some groups recorded comparatively low data and therefore may not show as clearly in the chart.
Work-related traumatic injury fatalities

Work-related traumatic injury fatalities data is collected by the department and covers all work-related deaths due to injury including self-employed workers and bystanders. Unlike workers’ compensation claims data which has a one time lag due to the necessary maturity of claims (the latest preliminary data available being 2016–17); department fatalities data are available to the present day, enabling the most recent year of data reporting, being 2017–18.

It is important to recognise that fatality rates (and numbers) are volatile and fluctuate considerably over time.

- There is an overall downward trend in fatality rates since the Occupational Safety and Health Act 1984 came into effect in 1988–89, an 80.6 per cent reduction recorded since that year.
- The number of work-related traumatic injury fatalities per million workers during 2017–18 was 9.7, an 18.8 per cent increase from a rate of 8.2 recorded in 2016–17.
- Due to the volatility of work related fatalities on an annual basis, averages over five years are used to provide clear trend data. Based on the most recent five year average data, the downward trend continues.
- The average fatality incidence rate for the five year period from 2013–14 to 2017–18 is 12.5, compared to an average fatality incidence rate for the five year period from 2012–13 to 2016–17 of 13.4 – a 7.1 per cent decrease. The five year average fatality incidence rate for the period from 1996–97 to 2000–01 was 22.9.
- Thirteen work-related traumatic injury fatalities were recorded in Western Australia during 2017–18. 2009–10 recorded the lowest level of fatalities since records began in 1988–89 (nine fatalities). Such low levels are historically uncharacteristic.
- The industry division or workplace to record the highest number of work-related traumatic injury fatalities during 2017–18 was the Mining industry division with four fatalities. This was followed by the Agriculture, Forestry and Fishing, Transport, Postal and Warehousing, and Other Services industry divisions (each recording two deaths); with the Construction, Public Administration and Safety, and the Arts and Recreation Services industry divisions each recording one death.

Chart 7: Incidence rate (number of incidences per million workers) for work-related traumatic injury fatalities in WA: 2000–01 to 2017–18 (provisional)

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Data is subject to revision pending further information and coronial reports
National data

Western Australia recorded the fifth lowest incidence and sixth lowest frequency rates in 2015–16 (preliminary) for lost time injuries and diseases with an absence of one working week or more (excluding New Zealand). Western Australia incidence rates have recorded consecutive falls since 2011–12. Frequency rates in the state also recorded consecutive falls, until 2015–16 where rates remained steady, and have been consistently below the national rate since 2011–12.


Chart 8: Indicator 1 – Incidence rates of serious* injury and disease claims by jurisdiction

[Graph showing incidence rates by jurisdiction]

Chart 9: Indicator 2 – Frequency rates of serious* injury and disease claims by jurisdiction

[Graph showing frequency rates by jurisdiction]

*A serious claim is one that results in compensation being paid for an absence from work of one working week or more. This definition excludes claims arising from a work–related fatality, claims for injuries that occurred during a recess period away from the workplace, and claims for injuries incurred on a journey to or from work.
Explanatory notes

A number of issues affect the data quality of statistical information based on claims data, as provided by the Department of Mines, Industry Regulation and Safety (DMIRS). It is important to be aware of these issues when interpreting claims statistics, to ensure that the conclusions drawn from the information take into account known inconsistencies and omissions.

Injury and disease claim data

The data used in this report is derived from workers’ compensation claims lodged in accordance with the Workers’ Compensation and Injury Management Act 1981 (the Act). Claims may be lodged by any person who is a ‘worker’, as defined by section 5 of the Act. This includes working directors who are deemed ‘workers’ under the Act and have some ownership of the company, as well as employed family members and private household workers (for whom workers’ compensation cover is optional). Self-employed persons, Commonwealth Government workers (including defence service personnel), workers covered by Comcare, police officers (except for work-related fatalities), unpaid volunteers and students on work experience are excluded from workers’ compensation data.

In addition, the following claim types are excluded from lost time claim data:

- journey claims between home and work;
- asbestos-related diseases, including mesothelioma and pneumoconiosis;
- duplicated or disallowed claims;
- claims with less than one working day absence from work;
- claims with less than one whole shift absence from work; and
- injuries and diseases that are treated in the health system (i.e. invalid pensions and sickness and unemployed benefits).

Claim data represents information on claims by the financial year in which the claim was lodged with the insurer. This is in contrast to claim payments, which reflect actual payments during a financial year regardless of when the claim was lodged. A claim may typically take a number of months to be finalised (particularly in the case of occupational disease). As claims information is dynamic in nature, reports should be considered as a snapshot in time of the workers’ compensation system in Western Australia. Data are subject to revision as claims information matures. A one year time lag exists in relation to workers’ compensation claim data.

Due to the high percentage of un-finalised claims concerning payments and days lost, data is subject to revision and likely under reported. This is especially true in relation to the latest snapshot of preliminary data (denoted by “p”) as it is extracted at a far earlier stage resulting in a higher proportion of immature claims. Consequently, when looking at changes over time particularly in respect to LTI/Ds 60+ days/shifts lost (severe cases), time lost from work and claim costs, the reader is advised to focus on the older more stable years and treat the preliminary data year as an indication.

Unless otherwise stated in this report, data refers to lost time injuries and diseases (LTI/Ds) in Western Australia where one or more days/shifts are lost from work. The latest snapshot of preliminary data is denoted by “p”. To ensure confidentiality of workers’ compensation claims information, incidences that total less than five are denoted by the data symbol ‘<5’.

Caution needs to be exercised when using workers’ compensation payments data as a measure of the cost of workplace injury and disease. The costs data collected are only those paid by the workers’ compensation authority and will not include payments made by the injured worker which are not reimbursed by the workers’ compensation authority.
‘Total estimated cost’ takes into account estimated and actual claim payments made for un-finalised claims and actual claim payments made for finalised claims in relation to compensation (such as weekly payments, lump sum payments, treatments etc.) and non-compensation payments (such as legal costs, transport etc.).

Claim payment information represents aggregated expenses attributed to the financial year in which a payment is made, regardless of the year in which the relevant claim is lodged.

The total number of days lost takes into account estimated and actual days lost for un-finalised claims and actual days lost for finalised. Estimates of days lost for un-finalised claims are revised as claims progress, therefore, as claims mature, the estimates are more reflective of the finalised days lost.

Legislative amendments may also impact on statistical information. WorkCover WA provide information regarding relevant legislative amendments on their website, at www.workcover.wa.gov.au

Frequency and incidence rates require knowledge of the number of employees and the number of hours worked for the time frame being considered. The employment data used to calculate frequency and incidence rates in department statistical publications is derived from unpublished data estimates produced by the Australian Bureau of Statistics (ABS).

Classification systems

The industry classification codes used are in accordance with the Australian and New Zealand Standard Industrial Classification (ANZSIC) published by the Australian Bureau of Statistics. The classification codes are based on a hierarchal structure consisting of one digit codes (broadest level) down to four digit codes (finest level). For more information visit www.abs.gov.au

The occupation classifications used are in accordance with the Australian Standard Classification of Occupations 2nd Edition (ASCO), for data reported up to and including the year 2008–09, and the Australian and New Zealand Standard Classification of Occupations First Edition (ANZSCO), for data reported from the year 2009–10 onward. Both are published by the ABS. For more information visit www.abs.gov.au

The injury and disease classification groupings and descriptions are the standard terms taken from the National Occupational Health & Safety Commission publication: Type of Occurrence Classification System (TOOCS). For more information visit www.safeworkaustralia.gov.au

Due to the differences in structure and definitions between each version/edition of the three coding classifications a break in time series has occurred. To ensure data integrity direct comparisons should not be made between classification versions.

Work-related traumatic injury fatalities

Work-related traumatic injury fatality information used in this report is derived from information recorded and published by DMIRS and relates to fatalities that result from a physical trauma or poisoning in Western Australia in accordance with the Occupational Safety and Health Act 1984, Energy Safety Act 2006, Electricity Act 1945, Gas Standards Act 1972, Mines Safety and Inspection Act 1994, Petroleum (Submerged Lands) Act 1982, Petroleum and Geothermal Energy Resources Act 1967 and the Petroleum Pipelines Act 1969. In scope are employees, self-employed workers, volunteers and bystanders. Diseases and most disorders that would be seen as ‘diseases’, such as cancers and heart attacks, are out of scope. Other exclusions include: road traffic accidents, unless there is a clear nexus with work; self-inflicted injuries, Commonwealth Government workers, workers covered by Comcare and defence personnel.
For completeness, DMIRS includes in its statistics those work-related fatalities covered by the *Civil Aviation Act 1988* and *Transport Safety Investigation Act 2003* under the respective jurisdictions of the Civil Aviation Safety Authority (CASA) and the Australian Transport Safety Bureau (ATSB); and where possible, those covered under the *Australian Maritime Safety Authority Act 1990* under the jurisdiction of the Australian Maritime Safety Authority (AMSA). The former named agencies are common examples of valid jurisdictional boundaries however, the list is not exhaustive. For more information see [Recording of traumatic work–related fatalities by WorkSafe](#).

Information on data definitions, rate calculations and terms used can be found on the [WA Data Definitions and Calculations](#) and [FAQs](#) pages on our website.