As part of the Strategic Plan 2018-2023, WorkSafe Tasmania has established a number of strategies to aid in fulfilling its promise to the Tasmanian community of ‘Safe and Well, Every Day’. These strategies include a focus on Targeted Harm Reduction and Building Culture and Capability. A component of both of these strategies is implementing new ways to engage with and educate the community on injury trends and areas of risk as a tool to improving work health, safety and wellbeing outcomes.

The Industry Overview reports provide an account of the work health and safety (WHS) performance of each industry group across Tasmania. They aim to identify and focus on emerging or existing WHS issues, for evaluation and action. They compare most current WHS performance relative to previous years and, where applicable, to other industries across Tasmania.
The Health Care and Social Assistance (HCSA) industry is key to Tasmania, being the largest employer and provider of vital services. There are an estimated 37,000 employees in this industry which is around 16% of the total Tasmanian workforce.

Beginning with the largest employing group, HCSA is made up of Hospitals, Residential Care, Child Care, Allied Health, Medical, Pathology and Diagnostic Imaging and Other Health Care services. This industry is estimated to be worth over 3.5 billion dollars to the Tasmanian economy annually.

INDUSTRY PROFILE

EMPLOYMENT

HCSA accounts for 16% of total employment in Tasmania. It is the largest employing industry, increasing approximately 29% in the last three years on an hours-worked basis.

This increase in hours-worked is almost nine times the average increase for all industries. This growth may be expected to moderate slightly, as the Department of Treasury estimates spending will become more restrained over the next three years.

However, with an ageing population and increased demand on the sector, the shortage of beds, staff and allied health professionals are being addressed. This may result in employment pressures in this industry increasing ahead of forecasts.

AGE PROFILE

Over half (55%) the workers in HCSA are over the age of 45 (see Figure 1). This industry has the second highest proportion of workers in this age category after the Wholesale Trade industry (where 58% of workers are over the age of 45).

As a comparison, 43% of Tasmanian workers on average are over 45 years in age. This is significant for HCSA as many jobs require some physical capability.

INDUSTRY GROUP BREAKDOWN

HCSA is broken down into eight industry groups, with Hospitals the largest employing group, followed by Residential Care Services as shown in Figure 2 below.
Health Care and Social Assistance (HCSA) reported the highest number of injuries each year for the last five years, with 1,385 injuries in 2017. This is around 20% of all reported injuries that occurred last year.

Injury numbers in the industry have remained stable over the last ten years, compared to a 31% drop statewide over the same period.

The serious injury frequency rate in HCSA is highest among all industry divisions, at an estimated 14 serious injuries per million hours worked in 2017.

There have been two reported work-related fatalities in HCSA in the last ten years.

**INJURY NUMBERS**

In 2017 there were 1,385 people injured in HCSA. This is around 20% of the total reported injuries that occurred last year across all industries.

HCSA reported more injuries in 2017 than any other industry, and has done for the last six years since it overtook manufacturing as the industry with the highest number of injuries in 2012. It has ranked first or second highest every year for the last ten years.

Whereas total injury numbers across all industries have decreased 31% in the last ten years, in HCSA injury numbers were less than 0.5% lower in 2017 than in 2008 (see Figure 3).

The severity of injuries in HCSA compares unfavourably to the statewide performance, with 44% of all injuries in HCSA considered ‘serious’ (that is, resulting in at least one week off work) compared to 39% of injuries across the state as a whole.

**SERIOUS INJURIES**

A serious injury is one that results in the worker requiring at least one week off work due to their injury.

In the last ten years HCSA has averaged 603 serious injuries per year. This industry has the highest proportion of serious injuries as a proportion of all injuries, with 45% of all injuries resulting in at least one week off work.

HCSA reported the highest number of serious injuries of any industry division last year. It accounted for 25% of all serious injuries in 2017.

Figure 3. Total injuries per year
**Serious Injury Frequency Rates**

Frequency rates are calculated as the number of injuries per million hours worked. This gives context to the injury numbers by taking into account the size of an industry’s workforce, and the part time/full time mix of the industry.

This is particularly relevant in industries such as HCSA where a large proportion of the workforce does not work full time (as indicated earlier in this report). The serious injury frequency rate in HCSA is highest among all industry divisions at an estimated 14 serious injuries per million hours worked in 2017 (see Figure 4).

**Trends in Serious Injury Numbers and Frequency Rates Over Ten Years**

The number of serious injuries in HCSA per year increased 7% between 2008 and 2017 while serious injuries for all industries decreased 23% in this period.

The serious injury frequency rate in 2017 (14.0) was 13% lower than in 2008 (15.8).

Using a three year rolling average frequency rate balances the variations in injury numbers and workforce year to year.

HCSA has seen a 7% decrease in the serious injury frequency rate from the beginning of the reporting period (2007-2009) when the rolling average frequency rate was 14.7 serious injuries per million hours worked, to the most recent three years (2015-2017) where the rolling average serious injury frequency rate was 13.6 (see Figure 5).

The rolling average serious frequency rate across all industries has decreased by 18% in the same period from 10.3 to 8.4.

**FATALITIES**

There has been two work-related fatalities in HCSA in the last ten years, both the result of a single drowning incident in 2008.

Statewide, there have been 90 work-related fatalities in the last ten years (2008-2017).

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**Figure 4. Serious injury frequency rate by industry 2017**

- Health Care and Social Assistance
- Public Administration and Safety
- Administrative and Support Services
- Agriculture, Forestry and Fishing
- Transport, Postal and Warehousing
- Construction
- Arts and Recreation Services
- Manufacturing
- Retail Trade
- Other Services
- Accommodation and Food Services
- Education and Training
- Wholesale Trade
- Electricity, Gas, Water and Waste Services
- Professional, Scientific and Technical Services
- Information Media and Telecommunications
- Mining
- Financial and Insurance Services
- Rental, Hiring and Real Estate Services

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**Figure 5. Three year rolling average serious injury frequency rate 2007-2017**

- All Industries
  - 2007-2009
  - 2015-2017
- Health Care and Social Assistance
INJURED WORKER DEMOGRAPHICS

Workers in the 35-44 age group had the highest serious injury frequency rate of all age groups. Workers aged between 35-64 are more likely to be injured than their colleagues.

Personal Carers and Assistants make up the largest proportion of injured workers in HCSA, reporting 42% of all serious injuries. This is three times higher than the next highest proportion, Health and Welfare Support workers.

Over half (55%) of all serious injuries in HCSA occurred in Residential Care Services, followed by Hospitals (27%). Workers in Residential Care Services reported a serious injury frequency rate four times higher than workers in Hospitals.

35-44 year olds had the highest serious injury frequency rate

AGE GROUP ANALYSIS

Workers aged 35-44 in HCSA had the highest serious injury frequency rate with almost 16 serious injuries per million hours worked, while those aged 65 and over had the lowest serious injury frequency rate at approximately seven serious injury claims per million hours worked.

Middle-aged HCSA workers are more likely to make a serious injuries compared with workers under the age of 35.

The serious injury frequency rate increases significantly for age groups above 35 years, except for the 65 years and over age bracket.

HCSA workers aged between 35 and 64 have 40% higher serious injury frequency rates than younger aged groups.

The serious injury frequency rate for workers aged 35 to 54 is almost 15 serious injuries per million hours worked, the average for this industry (see Figure 6).
HEALTH CARE AND SOCIAL ASSISTANCE
INDUSTRY SNAPSHOT 2017

THE WORKFORCE
This industry grouping covers a wide range of activities, separated into eight groups

- Hospitals
- Medical Services
- Pathology and Diagnostic Imaging Services
- Allied Health Services
- Other Health Care Services
- Residential Care Services
- Other Social Assistance Services
- Child Care Services

16% of the total Tasmanian workforce

47% work full time

THE INJURIES
1,385 injuries across the industry in 2017

1 in 5 workers injured in Tasmania in 2017 worked in Health Care and Social Assistance

THE PEOPLE

Occupations with the Highest Percentage of Serious Injuries

- Personal Carers and Assistants: 42%
- Health and Welfare Support Workers: 12%
- Midwifery and Nursing Professionals: 11%
- Cleaners and Laundry Workers: 5%
- Food Preparation Assistants: 5%

35-44 year olds reported the highest serious injury frequency rate

THE CAUSES
The most common causes of injury across the industry

- Body stressing
- Falls, slips and trips
- Being hit by moving objects
- Mental stress
HEALTH CARE AND SOCIAL ASSISTANCE

INDUSTRY SNAPSHOT 2017

THE WORKFORCE

77% higher than the state average of 7.9

55% of serious injuries occur in Residential Care Services

14 serious injuries per million hours worked

29% increase in hours-worked in the last three years

7% lower serious injury frequency rate in 2017 than ten years ago

HIGHEST OF ALL INDUSTRIES

29% increase in hours-worked in the last three years

1,385 injuries across the industry in 2017

14 serious injuries per million hours worked

HIGHEST OF ALL INDUSTRIES

77% higher than the state average of 7.9

55% of serious injuries occur in Residential Care Services

Musculoskeletal disorders

Hazardous manual tasks

Slips, trips and falls

Mental health conditions

ACTION AREAS

Priority conditions and causes identified in the WorkSafe Strategic Plan 2018-2023 relevant to the industry

HCSA is the largest employer and provider of vital services

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DISCLAIMER: The information provided herein was believed correct at the time of publication. The information is made available for general information only and should not be taken as a substitute for professional advice.
**OCCUPATION ANALYSIS**

Personal Carers and Assistants accounted for the largest proportion of workers with serious injuries, with 42% of all HCSA serious injuries.

This proportion is three times higher than the next occupation group of Health and Welfare Support Workers, with 12% of serious injuries in the last ten years. Midwifery and Nursing Professionals were the occupation group with the third largest proportion of serious injuries (11%) followed by Cleaners and Laundry Workers and Food Preparation Assistants (5%).

**INDUSTRY GROUP ANALYSIS**

While Hospitals as a group has the largest number of workers (over 9,500 or 27% of all HCSA), Residential Care Services accounted for well over half (55%) of all serious injuries.

The resulting serious injury frequency rate for Residential Care Services is almost four times the rate of Hospitals, at an estimated 42 serious injuries per million hours worked compared to 12 serious injuries per million hours worked for those working in Hospitals.

![Figure 7. Serious injury frequency rate per industry group](image-url)
The most common cause of serious injury in Health Care and Social Assistance (HCSA) is **Body stressing**, including *Muscular stress due to handling objects other than lifting, carrying or putting down*, and *Muscular stress due to lifting, carrying or putting down objects*.

This is followed by **Mental stress**, including incidents resulting from *Work pressure*, *Work related harassment and/or workplace bullying* and *Exposure to workplace violence*. **Falls, trips and slips of a person** are the third most common cause of serious injury, most commonly **Falls on the same level**.

**Body stressing**, **Mental stress** and **Falls, trips and slips of a person** injuries have all increased as a proportion of serious injuries in recent years.

### MOST COMMON CAUSES OF INJURY

At the broadest level, **Body stressing** was the most common cause of injury in HCSA in 2017, accounting for approximately 46% of all serious injuries, which is consistent with statewide trends.

The second most common serious injury cause were **Mental stress** (18%) and **Falls, trips and slips of a person** (16%).

When breaking incident cause down to a more detailed level, **Muscular stress while handling objects other than lifting, carrying, or putting down** was the main cause (24%) of serious injury followed by **Muscular stress while lifting, carrying, or putting down objects** (15%). **Falls on the same level** was the next most common injury mechanism in HCSA at 14% of all serious injuries (suggesting **Falls from a height** and **Stepping or kneeling on objects** combined make up only 2% of all serious injuries).

Combined, these three injury mechanisms account for slightly over half of all serious injuries (53%).

**Mental stress** injuries are broken down into six groups to cover different circumstances, with each accounting for a small proportion of total serious injuries, but combining to equal 18% of all serious injuries in HCSA in 2017.
TRENDS IN INJURY CAUSE

Body stressing, Falls, trips and slips of a person and Mental stress injury mechanisms have increased as a proportion of serious injuries in HCSA in recent years.

Mental stress serious injuries have increased progressively each year from 2015 through to 2017, from the fifth most reported serious injury in 2014 to the second most reported serious injury in HCSA in 2017. In contrast, Heat, electricity and other environmental factors, Hitting objects with part of the body, Vehicle incidents and Being hit by moving objects have decreased as a proportion of total injuries in the last four years (see Figure 8).

TRENDS IN THE MOST COMMON INJURY CAUSES

Body stressIn recent years, Muscular stress with no objects being handled has increased as a proportion of all Body stressing injuries, from 11% of all serious Body stressing injuries in 2014 to 15% in 2017. Repetitive movement, low muscle loading and Body stressing serious injuries have decreased slightly from 2015 highs.

Mental stress

Work pressure has increased 10% as a proportion of all Mental Stress serious injuries in HCSA in the four years between 2014 and 2017. Work related harassment and/or workplace bullying has decreased 14% from 2015 highs.

In the three recent years to 2017 the proportion of Other mental stress factors serious injuries have increased progressively in HCSA by 11%. Exposure to workplace or occupational violence and Exposure to a traumatic event mechanism classes have decreased in recent years.

Falls, trips and slips of a person

Falls on the same level is the mechanism class contributing to most Falls, trips and slips of a person serious injuries in HCSA. 80% of injuries in this mechanism division can be attributed to this mechanism class.
MOST COMMON INJURY CAUSES BY INDUSTRY GROUP

At an industry group level within Health Care and Social Assistance, injury causes are somewhat consistent with either Falls on the same level or Muscular stress while lifting, carrying or putting down objects the most common cause in each industry group.

The top causes of injury are indicated for each industry group in the graphic below.

**Allied Health Services**
- Falls on the same level 19%
- Muscular stress with no objects handled 14%
- Muscular stress while handling objects other than lifting, carrying or putting down 14%

**Child Care Services**
- Falls on the same level 28%
- Muscular stress while lifting, carrying or putting down objects 21%
- Muscular stress while handling objects other than lifting, carrying or putting down 9%

**Hospitals**
- Muscular stress while lifting, carrying or putting down objects 21%
- Muscular stress while handling objects other than lifting, carrying or putting down 20%
- Falls on the same level 13%

**Medical Services**
- Muscular stress while handling objects other than lifting, carrying or putting down 16%
- Work related harassment and/or workplace bullying 14%
- Muscular stress with no objects handled 12%

**Other Health Care Services**
- Muscular stress while handling objects other than lifting, carrying or putting down 24%
- Muscular stress while lifting, carrying or putting down objects 12%
- Falls on the same level 11%

**Other Social Assistance Services**
- Falls on the same level 16%
- Muscular stress while handling objects other than lifting, carrying or putting down 16%
- Muscular stress while lifting, carrying or putting down objects 11%

**Pathology and Diagnostic Imaging Services**
- Muscular stress while handling objects other than lifting, carrying or putting down 27%
- Falls on the same level 15%
- Work Pressure 12%

**Residential Care Services**
- Muscular stress while handling objects other than lifting, carrying or putting down 28%
- Muscular stress while lifting, carrying or putting down objects 14%
- Falls on the same level 13%
As part of the Strategic Plan 2018-2023, WorkSafe Tasmania will be working to reduce harm in Tasmanian workplaces through targeted harm reduction programs. This includes targeting priority industries and high consequence activities, and focusing on priority conditions and their causes.

As one of the identified priority industries, Health Care and Social Assistance (HCSA) workplaces should expect increased engagement with WorkSafe Tasmania through a range of avenues.

**PRIORITY AREAS AND PLANNED ACTIVITIES**

Through the development of a Compliance Plan to inform inspectorate priorities, a number of awareness campaigns and a variety of other engagement activities, WorkSafe Tasmania will be targeting the following priority conditions and causes of injury identified in the Strategic Plan 2018-2023.

- **Hazardous Manual Tasks**
- **Slips, Trips and Falls**
- **Safe Movement of Vehicles and Plant**
- **Mental Health Conditions**
- **Musculoskeletal Disorders**
- **Asbestos Related Diseases**
Purpose and Scope of Work

This purpose of this report is to provide an account of the work, health and safety performance of Health Care and Social Assistance in Tasmania (HCSA). The aim is to identify and focus on emerging or existing WHS issues, for evaluation and action. It compares most current HCSA WHS performance relative to previous years, and where applicable, to other industries in Tasmania.

Data

The data used in the preparation of this report comes from the WorkSafe Tasmania Information Management System (WIMS). While every effort is taken to ensure the accuracy of this report, all data is provided by Licensed and Self Insurers and the Tasmanian State Service. WorkSafe Tasmania cannot ensure the accuracy of the data.

Denominator data is from Safe Work Australia and the Australian Bureau of Statistics (ABS). Supporting statistics include sources like the Department of Treasury and Finance Tasmania.

WIMS data used in this report was current to 9 March 2018. The latest Safe Work Australia data was at end 2016. ABS data, where applicable, is the most recent available from its website.

This report provides data on a calendar year basis unless otherwise stated.
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