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 in order to work towards better 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.

This industry includes Hospitals, Social Assistance services, Residential Care services, Child Care services, Pathology and Diagnostic Imaging. This industry is estimated to be worth over 3.6 billion annually to the Tasmanian economy.

**INDUSTRY BACKGROUND**

**Employment**

HCSA accounts for 15% of total employment. It is the largest employing industry and has increased approximately 22% in the last three years on an hours-worked basis. This increase in hours-worked is almost five times the average increase for all other Tasmanian industries. This growth may moderate as forward estimates suggest restrained expenditure.

This industry has a lower proportion of full time workers (51%) compared to the state average (63%).

**Age Profile**

Over half of workers (53%) in HCSA are over the age of 45 (see Figure 1). This industry has the second highest proportion of workers in this age category.

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

**Industry Group Breakdown**

The majority of workers in HCSA are in the Hospitals (26%), Other Social Assistance (20%), Residential Care (19%), Allied Health Care (11%) and Child Care services (8%) groups. These five groups alone make up to 84% of the HCSA workforce.

There are ten active industry groups within HCSA (see Figure 2).

Employment trends at an industry group level show some movement in recent times. There has been an increase in Hospital, Other Social Assistance, Residential Care and Pathology hours and a decrease in hours in Medical Services in the 12 months to November 2018.
Health Care and Social Assistance (HCSA) reported the highest number of injuries over the last ten years. Injury numbers have increased 23% in the last ten years, whereas the statewide trend has been a decrease of 18% over the same period.

The serious injury frequency rate was highest of all industries at over 13.6 serious injuries per million hours worked in 2018.

There has been one work related fatality in HCSA in the last ten years.

INJURY NUMBERS

There were 1,615 injuries in Health Care and Social Assistance in 2018. This is 21% of the total injuries across the state and the highest number of any industry.

The number of injuries in HCSA has increased by 23% in last ten years (see Figure 3), while injuries in all industries reduced 18% between 2009 and 2018.

Around 45% of injuries result in one week or more off work, notably higher than the statewide average of around 37%.

SERIOUS INJURIES

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

On average there have been 621 serious injuries per year per year over the last ten years (45% of all HCSA injuries).

HCSA reported the highest number of serious injuries in 2018 among all industries (26% of all serious injuries).

Serious injuries increased 27% between 2009 and 2018 while serious injuries for all industries decreased 12% in this period.

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.

The serious injury frequency rate in HCSA is highest among all industry divisions, estimated at approximately 13.6 serious injuries per million hours worked (see Figure 4 over page).
**Trends in Serious Injury Frequency Rates over 10 Years**

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

HCSA’s industry serious injury frequency rate has decreased in the last ten years, approximately 4% on a three year rolling average basis from 14.7 to 14.1 serious injuries per million hours worked.

The serious injury frequency rate for all industries in Tasmania reduced considerably more over this period, decreasing approximately 18.5% (from 10.3 to 8.7 serious injuries per million hours worked).

On a non-rolling (actual) basis, the serious injury frequency rate for HCSA has declined 6% between 2009 and 2018 from 14.5 to 13.6 serious injuries per million hours worked. The all industry serious injury frequency rate declined 14% from 9.8 to 8.4 serious injuries per million hours worked for this same period.

**Fatalities**

There has been one work related fatality in HCSA in the last ten years. Statewide, there have been 87 work related fatalities in the last ten years (2009-2018).
HCSA workers aged in the 55-64 age group had the highest serious injury frequency rate of all age groups, although variance in frequency rate between the three highest age groups is minimal.

Personal Carers and Assistants make up the largest proportion of injured workers, at 41% of the total.

Residential Care Services workers make up 54% of all injuries and have the highest serious injury frequency rate at 44 serious injuries per million hours worked.

Workers with 13% of serious injuries in the last ten years. Midwifery and Nursing professionals were the occupation group with the next largest proportion of serious injuries at 11%, followed by Food Preparation Assistants (5%).

While Hospitals as a group has the largest number of workers (over 9,500 or 26% of all HCSA workers), Residential Care services workers accounted for over half (54%) of all serious injuries in HCSA in the last ten years.

This was followed by Hospitals at 28% of the total and Other Social Assistance services at 8%.

The serious injury frequency rate for Residential Care services workers is 3.3 times the rate of Hospital workers, at an estimated 44 serious injuries per million hours worked. Hospitals in comparison reported 13 serious injuries per million hours worked (see Figure 7 below).
HEALTH CARE AND SOCIAL ASSISTANCE
INDUSTRY SNAPSHOT 2018

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

THE INJURIES

1,615 injuries across the industry in 2018

1 in 5 workers injured in Tasmania in 2018 worked in Health Care and Social Assistance

THE PEOPLE

Personal Carers and Assistants accounted for 2 in 5 injured workers.

41% Personal Carers and Assistants
13% Health and Welfare Support Workers
11% Midwifery and Nursing Professionals

THE CAUSES

The most common causes of injury across the industry:

- Body stressing
- Falls, slips and trips
- Being hit by moving objects
- Mental stress
HIGHEST OF ALL INDUSTRIES

4% lower serious injury frequency rate in 2018 than ten years ago

14.1 serious injuries per million hours worked

62% higher than the state average of 8.7

51% of workers are employed full time

The largest employing industry in the state

55-64 year olds reported the highest serious injury frequency rate

1 in 5 workers injured in Tasmania in 2018 worked in Health Care and Social Assistance

54% of serious injuries occur in Residential Care Services

Musculoskeletal disorders

Hazardous manual tasks

Slips, trips and falls

Mental health conditions

Priority conditions and causes identified in the WorkSafe Strategic Plan 2018-2023 relevant to the industry
The most common cause of serious injury in Health Care and Social Assistance (HCSA) is Body stressing, including Muscular stress while handling objects without lifting, carrying or putting down objects, and incidents involving Muscular stress while lifting, carrying or putting down objects. This is followed by Falls, trips and slips of a person, Being hit by moving objects (including assaults) and Mental stress.

Body stressing and Mental stress have increased as a proportion of serious injuries in recent years. Being hit by moving objects and Falls, trips and slips of a person have reduced as a proportion of serious injuries over the same period.

MOST COMMON CAUSES OF INJURY

At the broadest level, Body stressing is the most common injury cause, resulting in 41% of all injuries in HCSA over the last ten years. Being hit by moving objects and Falls, trips and slips were the next two most common causes of injuries recording 17% and 16% of injuries respectively between 2009 and 2018.

At a serious injury mechanism class level, Muscular stress while handling objects other than lifting, carrying, or putting down was the main cause of serious injuries (23%), followed by Muscular stress while lifting, carrying, or putting down objects (15%).

Falls on the same level was the next most common injury cause, resulting in 13% of all serious injuries in HCSA.

These top three injury causes account for just over half of all serious injuries in this industry (51%).

TRENDS IN INJURY CAUSE

In 2018, Body stressing accounted for 46% of serious injuries in HCSA, twice as high as the next most common cause of serious injuries; Mental stress at 20%.

The next most common causes of serious injury were Being hit by moving objects and Falls, trips and slips injuries.

Mental stress serious injuries have increased the most in percentage terms between 2014 and 2018 (8%).

Vehicle incidents have reduced approximately 10% from 2015 highs (see Figure 8).
TRENDS IN THE MOST COMMON INJURY CAUSES

**Body stressing**
The most common serious Body stressing injury is *Muscular stress while handling objects other than lifting, carrying or putting down* (47% of all Body stressing injuries in 2018).

In recent years, *Muscular stress with no objects being handled* has increased as a proportion of all Body stressing injuries, from 11% of serious Body stressing injuries in 2014 to 15% in 2018.

Repetitive movement, low muscle loading serious Body stressing injuries have continued to decrease from 2015 highs.

**Falls, trips and slips of a person**
Falls on the same level contributes the major portion to Falls, trips and slips of a person serious injuries in HCSA. 83% of injuries in this mechanism can be attributed to Falls on the same level in 2018.

**Mental stress**
Work related harassment and/or workplace bullying and Work pressure are the two most common Mental stress serious injuries, together totaling 65% in 2018. Exposure to a traumatic event serious injuries have in contrast, decreased slightly in recent years.

**Being hit by moving objects**
Being assaulted by a person or persons is the most common Being hit by moving objects serious injury for HCSA in 2018 (51% of all serious Being hit by moving objects injuries). This injury class has increased progressively over the past three years.
MOST COMMON INJURY CAUSES BY INDUSTRY GROUP

At an industry group level, injury causes are somewhat consistent with either Falls on same level or Muscular stress while lifting, carrying or putting down objects the most common cause in most industry groups.

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

**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: 13%
- Falls on the same level: 12%

**Hospitals**
- Muscular stress while lifting, carrying, or putting down objects: 21%
- Muscular stress while handling objects other than lifting, carrying, or putting down: 19%
- Falls on the same level: 12%

**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: 10%
- Work pressure: 8%

**Child Care Services**
- Falls on the same level: 28%
- Muscular stress while lifting, carrying, or putting down objects: 23%
- Muscular stress while handling objects other than lifting, carrying, or putting down: 8%
- Work pressure: 8%
**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%

**ALLIED HEALTH SERVICES**
- Muscular stress while handling objects other than lifting, carrying, or putting down 19%
- Falls on the same level 16%
- Muscular stress with no objects being handled 11%

**MEDICAL SERVICES**
- Work related harassment and/or workplace bullying 14%
- Muscular stress with no objects being handled 13%
- Muscular stress while handling objects other than lifting, carrying, or putting down 12%

**PATHOLOGY AND DIAGNOSTIC IMAGING SERVICES**
- Muscular stress while handling objects other than lifting, carrying, or putting down 25%
- Falls on the same level 16%
- Work pressure 12%
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 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. The aim is to identify and focus on emerging or existing WHS issues, for evaluation and action. It compares most current Health Care and Social Assistance 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 February 2019. The latest Safe Work Australia data was at end 2017. ABS data, where applicable, is the most recent available from its website.

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