

May 2025

WHS Profile

Nursing, Care and Support Workforce

Safe Work Australia is exploring the WHS profile of different occupations to help illustrate the risks workers most frequently encounter while performing their duties.



There are more than 657,000 people currently employed in the Nursing, care and support workforce in Australia. According to recent data from Jobs and Skills Australia, the healthcare sector faces an ongoing shortage of all occupations in the Nursing, care and support workforce, driven by long training gaps and retention gaps*. Research suggests these skills shortages could impact the quality and availability of essential health services across Australia and place additional pressures on this workforce*.

The Nursing, care and support workforce is exposed to a range of physical and psychosocial hazards, as well as greater job demands when compared to other occupations. This includes dealing with workplace violence and aggression, exposure to biological hazards, and engaging in physically demanding tasks such as lifting and positioning patients or clients. Unfortunately, exposure to these hazards contribute to higher injury and illness rates among this workforce compared to other workers.

Safe Work Australia's National Data Set for Compensation-based Statistics (NDS) shows that, over the past decade, the Nursing, care and support workforce has experienced a significantly higher frequency rate[±] of serious claims for musculoskeletal injuries (2.3 times the national average in 2022-23).

Additionally, the number of serious claims related to Mental health conditions has been steadily rising, a total increase of over 500 serious claims (a workers' compensation claim that involves more than one week of time lost from work) over the last 10 years.

Persons conducting a business or undertaking (PCBU) have WHS duties to identify hazards, assess risks, and implement effective control measures to protect workers from harm.

Within this factsheet, the occupations 'Registered nurses', 'Aged and disabled carers', 'Nursing support and personal care workers', 'Enrolled and mothercraft nurses' & 'Midwives' have been grouped together as the 'Nursing, care and support workforce' to provide a work health and safety (WHS) perspective on roles that share some common job demands, challenges, and workplace hazards.

While each of these occupations involve delivering patient or client services and providing care and support services, the settings where work takes place varies, as well as the necessary skills required. Nonetheless, the work health and safety risks associated with the important work they do are often similar.

* Jobs and Skills Australia. (2024). Occupation Shortage List. [online] Available at: <https://www.jobsandskills.gov.au/data/occupation-shortages-analysis/occupation-shortage-list?level=4>.

+ Nursing Supply and Demand Study. (2023). Available at: <https://hwd.health.gov.au/resources/primary/nursing-supply-and-demand-study-2023-2035.pdf>.

± Frequency rates are defined as the number of serious claims per million hours worked, using estimates of the working population covered under a workers' compensation scheme.

There are significant differences in the number of hours worked by different groups of employees, and employees at different points in time. These differences in the number of hours worked mean that employees' exposure to work-related risks vary considerably. A frequency rate accounts for these differences and allows more accurate comparisons between industries and/or different groups of workers.



Workforce overview



Latest census data shows that there were over

657,000

people employed in the Nursing, care and support workforce in Australia in 2021.

The age distribution of those employed in the Nursing, care and support workforce was similar to the general working population, however, it is getting younger over time.



Getting younger

44%

are aged over 45 in 2021 years, compared to 51% in 2006.



Predominantly female

85.2%

are Female, compared to 48% for all occupations.



Work longer hours

42 hrs per week

compared to an average of 38 hrs a week for all occupations



From non-English speaking background

33%

compared to an average of 22.6% for all occupations



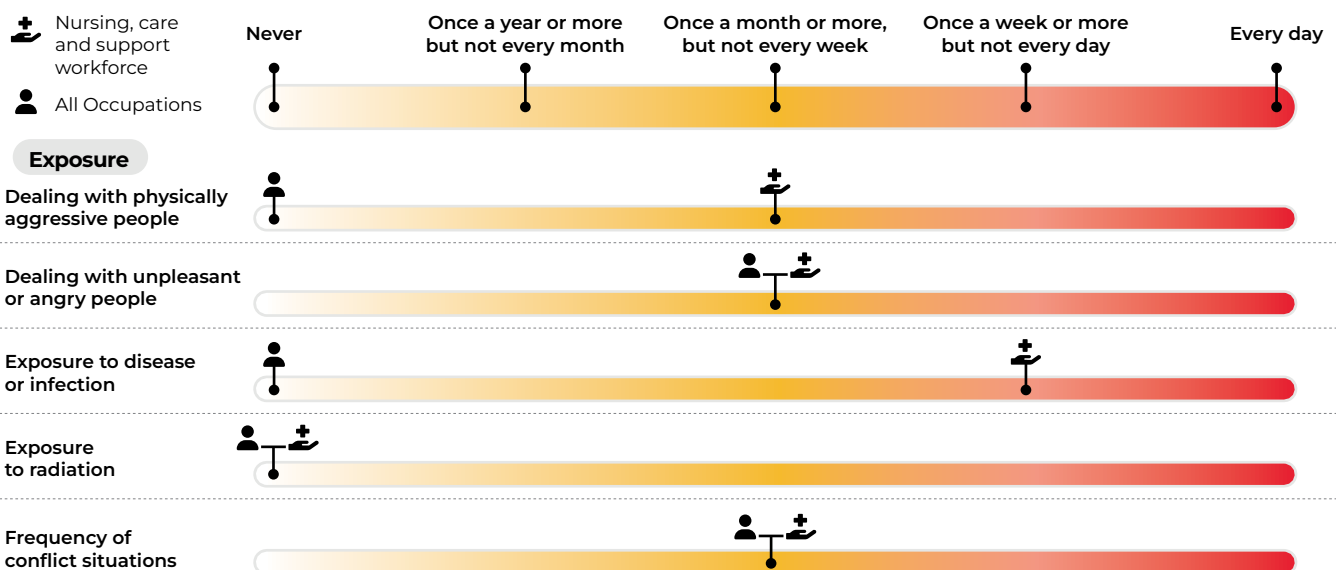
Occupational risk profile


Many day-to-day tasks for workers in the Nursing, care and support workforce are physically demanding and technically complex.

According to Safe Work Australia's Beta Occupational Hazards Dataset, Nursing, care and support workers are exposed to various hazards on a weekly or monthly basis, including 'Dealing with physically aggressive and unpleasant people', 'Exposure to disease or infection' and 'Hazardous body positions' compared to all other occupations*.

Evidence from the People at Work Survey (2024) shows workers in the Health care and social assistance industry were more likely to report bullying in the workplace (31% compared to 29% across all industries), and much more likely to experience workplace violence. In particular, workers were most likely to report experiencing Angry or hostile behaviour (50%, compared to 41% across all industries), Shouting and swearing (41%, compared to 35% across all industries), and Intimidation and insults (35%, compared to 28% across all industries).

Figure 1: Beta Occupational Hazards Dataset - Exposure Scores⁺



 Nursing, care and support workers are typically exposed to dangerous job and environmental hazards on a weekly or monthly basis when performing their duties, and more frequently than workers in other occupations.

* 'All other occupations' is defined as all occupations that are covered within the Beta Occupational Hazards Dataset. For more information about this data, see <https://data.safeworkaustralia.gov.au/analysis/insights-bohd>

⁺ Exposure scores range between 0 and 100, which are an average of responses that workers provided for their occupation. For further information about interpreting exposure scores in the Beta Occupational Hazards Dataset, see <https://data.safeworkaustralia.gov.au/analysis/insights-bohd>



Figure 2: Number of serious claims and serious claim frequency rate[±] by Year, Nursing, care and support workforce compared to All occupations

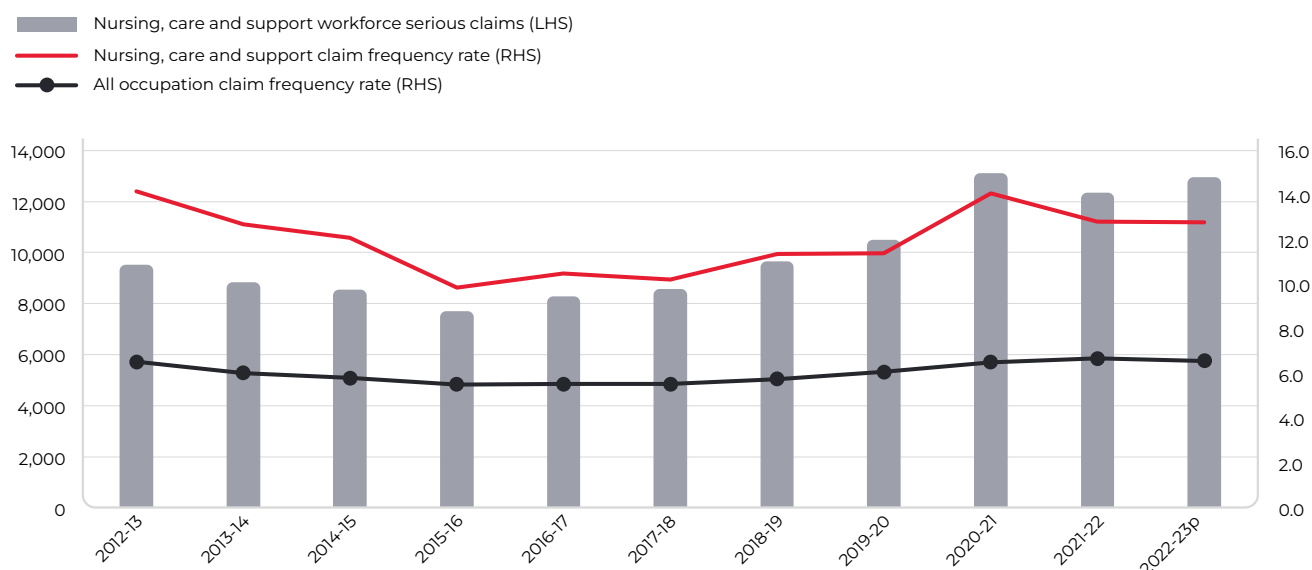


Figure 2 shows that the frequency rate of workers' compensation claims for workers in the Nursing, care and support workforce is consistently and significantly higher compared to the average across All occupations over the last 10 years.

Table 1: Serious claim frequency rates for All occupations and the Nursing, care and support workforce by Sex and Age group (2012-13 to 2022-23p*)

Age group	Under 25	25-34	35-44	45-54	55-64	65 and over
All Occupations						
Female	4.1	3.7	4.9	6.8	8.3	7.4
Male	7.3	5.6	5.7	6.9	8.2	6.7
Total	5.9	4.8	5.4	6.9	8.2	7.0
Nursing, Care and Support Workforce						
Female	8.3	8.5	12.0	14.9	16.1	15.5
Male	6.1	6.2	8.2	12.6	14.7	16.8
Total	7.9	8.0	11.2	14.6	15.9	15.7

The highest frequency rates of serious workers' compensation claims are observed in older female workers, with this figure more than double the frequency rate observed for female workers across All occupations and most age groups.

Further, Nursing support and personal care workers exhibit a much larger serious claim frequency rate when compared to both Registered nurses and Aged and disabled carers. The serious claims frequency rate for these workers was 29.1 per million hours worked and 18.5 per million hours worked for Females and Males within this occupation, respectively.

* The 2022-23 NDS data are preliminary (denoted by 'p'). The data are likely to rise as revisions occur in future years.

± Frequency rates are defined as the number of serious claims per million hours worked, using estimates of the working population covered under a workers' compensation scheme.



The Nature of injury or disease refers to the most serious injury or disease sustained or suffered by the worker.

For example –

“While a worker was handling a patient to assist them out of their hospital bed, the worker fell and suffered a dislocated shoulder”

The nature of the shoulder injury would be classified as a ‘Traumatic joint/ligament and muscle/tendon injury’.



The Mechanism of injury or disease identifies the overall action, exposure or recent that best described the circumstances that resulted in the most serious injury or disease

For example –

“A worker slipped on a wet floor and spilt hot water being carried, causing a burn.”

The mechanism of injury or disease would be identified as ‘Falls on the same level’.

The Nursing, care and support workforce encounter specific risk factors that centre around their interactions with patients or clients.



During the height of the COVID-19 pandemic in Australia, the Nursing, care and support workforce were on the front-line delivering care to those who were affected by the virus – as a result, these workers were disproportionately exposed to COVID-19 and other infections/diseases (8.6 serious claims per 10 million hours worked for Novel coronavirus, compared to the national average of 2.3).



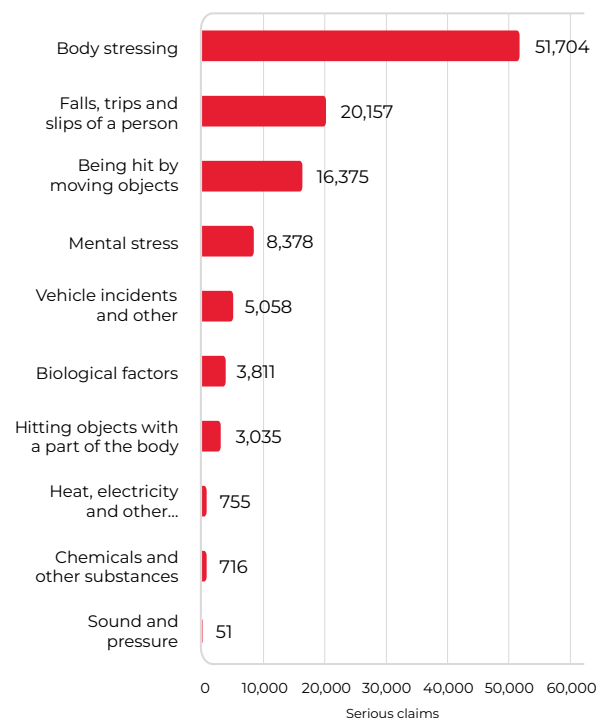
Since 2012-13, injuries resulting from Body stressing activities have consistently been the most common type of work-related injury or illness for the Nursing, care and support workforce (an average of 47.6% of all serious claims during the period, compared to 37.8% for All occupations).

Mental health conditions are the 4th most prevalent nature of injury for this workforce but have been increasing steadily over time, almost doubling over the last 10 years. This has resulted in an increase of over 500 serious Mental health claims from 2012-13. However, according to the 2020 Mental Health Productivity Commission Inquiry, not all people dealing with negative mental health seek treatment – this is especially true in the workplace*. Thus, many more incidents that negatively impact mental health may go unreported or uncompensated.



‘Anxiety/stress disorder’, ‘Reactions to stressors’ and ‘Post-traumatic stress disorders’ account for 82% of these serious claims for Mental health conditions.

Figure 3: Serious claims for the Nursing, care and support workforce by Mechanism (2012-13 to 2022-23p)



* Productivity Commission Inquiry Report. (2020) Available at: <https://www.pc.gov.au/inquiries/completed/mental-health/report/mental-health-volume2.pdf>.

Case study 1

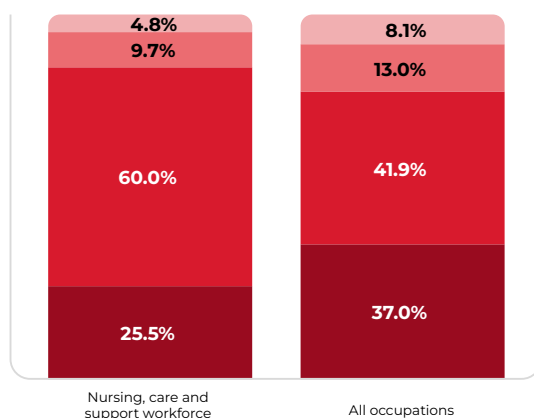
Interactions with patients and clients can involve challenging circumstances that may lead to work-related injuries. Available data shows a high proportion of claims resulting from 'Body stressing'.



In 2003, an experienced female nurse and another hospital worker were lifting and transporting a male patient in a NSW hospital when they fell to the ground unexpectedly, with both the patient and nurse suffering injuries as a result. The nurse had fallen on her back in a twisting motion due to the weight of the patient she was carrying, suffering prolonged back pain as a result.*

Figure 4 – 'Body stressing' Mechanism of injury serious claims by Occupation (2022-23p)

- Repetitive movement, low muscle loading
- Muscular stress with no objects being handled
- Muscular stress while handling objects other than lifting, carrying or putting down
- Muscular stress while lifting, carrying, or putting down objects

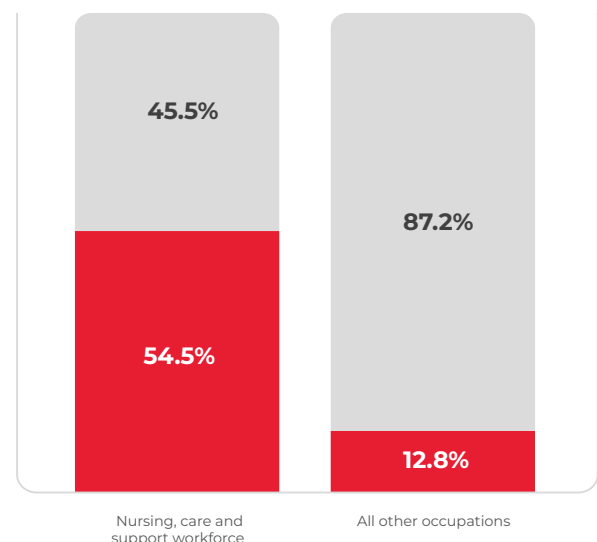


Latest data* show that approximately 1 in 4 serious workers' compensation claims for the Nursing, care and support workforce predominantly involved 'Muscular stress while handling objects other than lifting, carrying or putting down'. These claims are more costly with respect to both compensation payments and time lost from work.

- Median time lost for serious claims involving 'Muscular stress while handling objects other than lifting, carrying or putting down' is 2.6 weeks longer than the average for other types of injuries.
- The median compensation paid† for serious claims involving 'Muscular stress while handling objects other than lifting, carrying or putting down' is \$3,609 greater than the average for other types of injuries.

Figure 5 – Causes of 'Body stressing' serious claims (2022-23p)

- Human agencies
- Other agencies



- In 2023-23p, over half of the Body stressing claims (54.5%) made by workers in the Nursing, care and support workforce cited 'Human agencies' (where another 'human' was the direct cause of the most serious injury or disease) as the primary agency involved in the injury. This is significantly greater than the result seen for All other occupations, just 12.8%, as seen in Figure 5.
- Investigating these Human agency claims in more detail, we find that more than 1 in 3 serious claims involving Human agencies principally involved 'Adults – patients and residents in care'. These cases often involve an injury that is the result of moving a patient, leading to a musculoskeletal injury.

* New South Wales (2023), Smith v Sydney West Area Health Service - NSW Caselaw. [online] Available at: <https://www.caselaw.nsw.gov.au/decision/549fe20a3004262463c1de28>.

† Latest non-preliminary data are 2021-22 results. Median time lost and compensation payments calculations exclude preliminary data (2022-23p) because claims from the preliminary year are likely to be open and claimants are likely to accrue more time off work/compensation payments over future years.

‡ Median compensation calculations exclude no cost compensation claims.

Case study 2

Interactions with patients and clients often involve challenging circumstances that can lead to work-related injuries. The data shows a rising incidence of assaults as a mechanism of injury among Nursing, care and support workers.

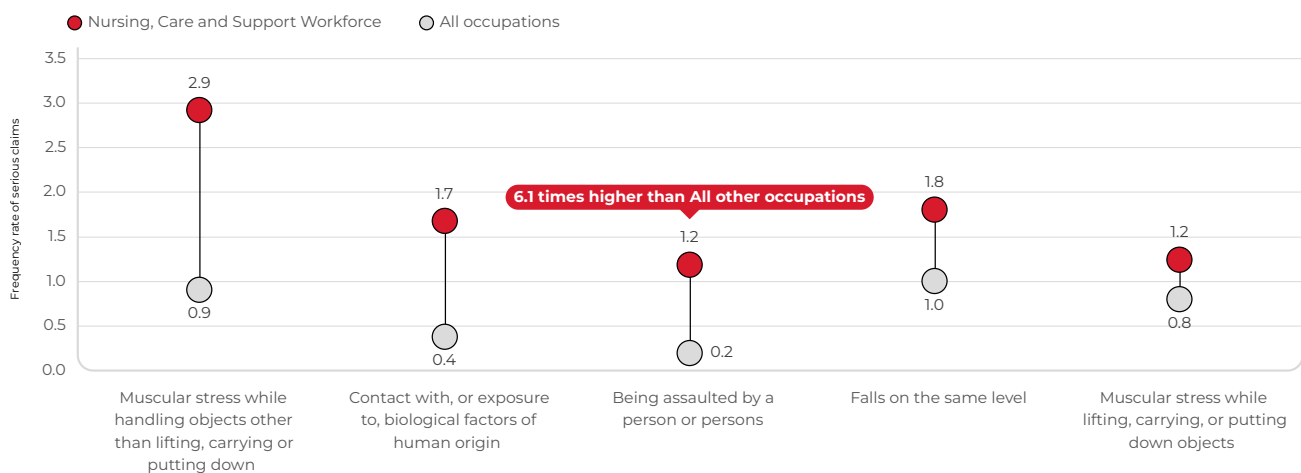


In 2019, multiple criminal charges were laid against a Victorian hospital (the Employer), after a psychiatric nurse was assaulted in the hospital's secure extended care unit.

A patient at the ward assaulted the nurse, inflicting head, face and body injuries, requiring hospital treatment. The Employer failed to alert the nurse to the risk of physical violence that they faced, and to provide them with the option to leave work, or be redeployed, until the risk no longer presented, in accordance with the offender's own policies and procedures.

The Employer pleaded guilty and was sentenced to pay a fine of \$30,000 and to pay costs of \$5,683*.

Figure 6 – Composition of 'Body stressing' Mechanism of injury serious claims by Occupation (2022-23p)



The frequency rate of serious claims due to 'Being assaulted by a person or persons' is approximately 6.5 times higher for workers in the Nursing, care and support workforce' than it is for All other occupations and has increased over the last 10 years.

* [www.worksafe.vic.gov.au. \(n.d.\). Prosecution Result Summaries and Enforceable Undertakings - WorkSafe.](https://www.worksafe.vic.gov.au/prosecution-result-summaries-enforceable-undertakings) [online] Available at: <https://www.worksafe.vic.gov.au/prosecution-result-summaries-enforceable-undertakings>.

Conclusions



'Body stressing' and 'traumatic joint/ligament and muscle/tendon injuries' are significant risks

Especially when manually handling patients and clients in care.



The frequency rate of serious claims due to 'Being assaulted by a person or persons' is 6.5 times higher

Compared to all other occupations



Mental health conditions, and serious claims related to mental stress, have almost doubled over the last 10 years



Insights from Safe Work Australia's data show that Nursing, care and support workers are exposed to hazards such as dealing with physically aggressive people, performing hazardous manual tasks, and exposure to diseases, infections and radiation.

Appendix

Data Sources







The Nursing, Care and Support Workforce Overview has been derived from Australian Bureau of Statistics (ABS) 2021 Census data counting persons by place of usual residence as well as a four-quarter average of 2023 ABS Labour Force Survey data.

- The Census is conducted every five years, collecting important data about the Australian population, including demographics, social factors, and economic information. See the [ABS census methodology](#) page for further detail.
- The monthly Labour Force Survey (LFS) provides information about the labour market activity of Australia's resident civilian population aged 15 years and over.

The Nursing, Care and Support Workforce – occupational risk profile is derived from Safe Work Australia's National Data Set for Compensation-based Statistics (NDS) and the Beta Occupational Hazards Dataset (BOHD).

- Safe Work Australia compiles national workers' compensation statistics using data obtained from workers' compensation authorities in each state, territory, and the Commonwealth government. These data are collated into the NDS, which is Safe Work Australia's primary source of information on work-related injuries and diseases. See [Explanatory Notes: National Data Set for Compensation-based Statistics](#) for detailed information.
- The BOHD contains information on the 'work context' of occupations. Part of this includes information on how often occupations are exposed to, or involve doing, things which may result in injury or illness. Safe Work Australia constructed this dataset by mapping selected fields from the United States' O*NET database onto the Australian occupational classification (ANZSCO) and combining this contextual information about the nature of work that occurs in different occupations with Safe Work Australia's workers' compensation claims data, alongside ABS employment levels for each occupation to reflect the composition of the Australian labour market.

Relevant Resources

-  [Model Code of Practice: Sexual and gender-based harassment](#)
-  [Model Code of Practice: Managing psychosocial hazards at work](#)
-  [Model Code of Practice: Hazardous manual tasks](#)
-  [Model Code of Practice: Managing the work environment and facilities](#)
-  [Workplace violence and aggression resource\(s\)](#)
-  [Workplace violence is not ok – keeping emergency departments safe](#)