

PERSONAL ACCIDENT INSURANCE SCHEME
Arranged by Sutton Winson Ltd t/a Naylor Wright
for staff of Limited t/a Randstad Inhouse Services
POLICY NO: SUP24151550ECA/1200002

Underwritten by Aviva Insurance Limited

SUMMARY OF COVER

This is a Summary of Cover only and is not proof of insurance. Cover starts as soon as regular premium deductions are made from your wages. A copy of the policy wording is available from the policyholder – Randstad Solutions Limited t/a Randstad Inhouse Services

IMPORTANT NOTE

All employees / operatives registered with or placed on temporary assignment by Randstad Solutions Limited t/a Randstad Inhouse Services are automatically covered. Services are automatically covered. Employees/operatives who do not exercise their right to opt-out will have the cost of this accident insurance deducted from earnings each week. Should any employee/operative wish to opt-out please put this in writing to Randstad Solutions Limited t/a Randstad Inhouse Services, 142 Hartlebury Trading Estate, Hartlebury, Worcestershire, DY10 4JB. This will not affect an employees rights with Randstad Solutions Limited t/a Randstad Inhouse Services.

WHEN YOU ARE COVERED

Cover is restricted to accidents sustained by the Insured Person while in the employment of the insured and including direct travel from home to place of work and from place of work to home or if the insured person is not travelling directly home to their first destination after leaving work.

Policy benefits and sums insured are set out in the table below:

1.	Accidental death	£125,000	or
2.	a) Loss of one or more limbs	£125,000	or
	b) Loss of one or both eyes	£125,000	or
	c) Permanent total disablement	£125,000	or
	d) Loss of internal organ (a lung, a kidney, the spleen or liver)	£ 31,250	or
3.	Total loss by physical severance or total and permanent loss of use of:		
	(i) One thumb	- £ 25,000	
	(ii) One index finger	- £ 18,750	
	(iii) One finger other than an index finger -	- £ 12,500	
	(iv) One great toe	- £ 12,500	
	(v) Other toe	- £ 3,750	
4.	Total and permanent loss of use of:		
	(i) One shoulder	- £ 37,500	
	(ii) One elbow	- £ 37,500	
	(iii) One wrist	- £ 31,250	
	(iv) One hip	- £ 31,250	
	(v) One knee	- £ 31,250	
	(vi) One ankle	- £ 31,250	
5.	Total and permanent loss of:		
	(i) Hearing in both ears	- £125,000	
	(ii) Hearing in one ear	- £ 31,250	
	(iii) Speech	- £ 62,500	

The maximum amount payable in respect of one or more losses is £125,000

6. Temporary total disablement
The lower of (i) £300 or (ii) 75% of normal gross weekly Wages, per week payable for up to 52 weeks, in the event of an accident resulting in an Insured Person being totally disabled from following his/her usual occupation.

No benefit is payable for the first 14 days of disablement

7. **Lump sum payment of £1500** upon medical confirmation of: a fracture of a leg, arm, shoulder, wrist, hand (but excluding fingers or thumb), foot (but excluding toes), skull, dislocation of shoulder, hip, ankle or elbow.
This benefit is in addition to any amount payable under benefit 6 – Temporary total disablement

HOSPITALISATION BENEFIT

The Insurer will pay £50 for each complete 24 hour period that the Insured Person spends as a hospital in-patient as a direct result of an injury covered under this policy up to a maximum of 365 consecutive nights arising from any one accident. This is payable in addition to benefit 4 Temporary Total Disablement

HOSPITAL TRANSFER

If an Insured Person is being treated as a hospital in-patient which is outside a radius of 25 miles from his/her usual place of residence following accidental bodily injury covered by this policy the Insurer will pay up to £2,000 in respect of reasonable costs of hire of a private ambulance to transfer the Insured Person to a local hospital subject to:

- (a) the expected hospital stay to last for at least 7 days
- (b) the transfer is made with the approval of the Consultant treating the Insured Person
- (c) a bed being available at the nearest suitable local hospital

ELECTROCUTION

In the event of a claim being paid for death or permanent total disablement as a result of electrocution the sum will be increased by 25%

COMA BENEFIT

The Insurer will pay £50 per day if an Insured Person sustains accidental bodily injury in the course of their employment with the Insured which results in that person being in a continuous state of unconsciousness for up to 365 days

EMERGENCY DENTAL TREATMENT

This policy is extended to cover the cost of:

1. Repair or provision of dentures
2. Dental treatment which is reasonable and necessary as a result of Bodily Injury covered by this policy

Maximum payment £500 any one accident

FUNERAL EXPENSES

The Insurer will pay up to £10,000 in respect of funeral expenses incurred after payment of benefit for Accidental Death

PHYSIOTHERAPY TREATMENT

The Policy is extended to cover the cost of physiotherapy treatment recommended by a Qualified Registered Medical Practitioner and provided by a Chartered Physiotherapist up to a maximum sum insured of £500.00 any one claim or claims directly arising out of an accident covered by this policy and provided that there is a valid claim under benefit 5 Temporary Total Disablement.

Exclusions:

1. Physiotherapy will end once the physiotherapist believes any further treatment will not benefit the Insured Person or if the £500 limit has been reached, whichever happens first.
2. The Company will not pay for treatment given more than 12 months after the date of accident causing the claim.

RETRAINING EXPENSES

If a claim is paid for loss of limb, loss of sight or permanent total disablement, the Insurer will also indemnify The Insured Person for reasonable expenses incurred in retraining the Insured Person for an alternative occupation up to a maximum of £10,000

POST TRAUMATIC STRESS DISORDER

If during the Period of Insurance the Insured Person directly witnesses an act of Terrorism on a publicly licensed conveyance and without sustaining physical injury suffers post-traumatic stress disorder resulting in Temporary Total Disablement within six months of the act the Insurer will pay 50% of the Temporary Total Disablement benefit for up to a maximum of 13 weeks.

ANIMAL ATTACK BENEFIT

We will pay out for cosmetic surgery up to a maximum of £5,000 if attacked by an animal

DAMAGE TO PERSONAL PROPERTY

Damage to their personal property as a result of unprovoked assault up to a maximum of £1,500.

HOME AND WORKPLACE ALTERATION EXPENSES

In the event that an Insured Person sustains Paraplegia or Quadriplegia we pay 80% of the costs for the reasonable expenses incurred to make physical changes necessary at home up to a maximum of £20,000.

In the event that an Insured Person sustains Loss of Limbs, Loss of Sight, Loss of Speech, Loss of Hearing or Permanent Total Disablement following Accidental Bodily Injury, We pay reasonable expenses incurred to make reasonable adjustments necessary normal place of work to cater for the physical changes required while living with the permanent disablement, up to a maximum of £25,000.

INDEPENDENT FINANCIAL ADVICES

In the event an Insured Person sustains Death or Permanent Disablement from Accidental Bodily Injury, We will pay You on behalf of the Insured Person or the Insured Person's Partner up to £2,500 for the fees charged by an Independent Financial Consultant who is authorised and regulated by the Financial Conduct Authority, to provide the Insured Person's legal representatives with professional financial advice.

PROSTHESIS COVER

In the event of Accidental Bodily Injury being sustained by an Insured Person that results in a valid Capital Benefits claim for Loss of Limb and the benefit amount is £50,000 or more, We will pay You on behalf of the Insured Person up to a maximum of £10,000 in all for the costs of providing a prosthesis recommended by the treating Qualified Medical Practitioner.

PSYCHOLOGICAL ASSISTANCE

In the event of Accidental Bodily Injury being sustained by an Insured Person that results in a valid claim for Permanent Total Disablement or Permanent Partial Disablement, We will pay You up to £5,000 in all for the cost of professional psychological counselling treatment for the Accidental Bodily Injury provided that such treatment is started within 12 months of the date of the Accident and it is prescribed by the treating Qualified Medical Practitioner.

EXCLUSIONS:

This policy excludes:

- 1 **Intoxicating liquor or drugs**
bodily injury sustained while under the influence of intoxicating liquor or drugs taken by the Insured Person other than drugs taken in accordance with treatment prescribed and directed by a qualified registered medical practitioner but not for the treatment of drug addiction
- 2 **Self-Inflicted Injury and Sickness**
 - a. Suicide or intentionally inflicting self injury
 - b. any gradually operating cause
 - c. any naturally occurring condition or degenerative process
 - d. sickness or disease
 - e. Insanity
- 3 **Criminal Act**
bodily injury as a result of the Insured Person's own criminal act.
- 4 **Pregnancy or childbirth**
Normal pregnancy unless it develops into a complication diagnosed by a consultant in obstetrics
- 5 **Age limit**
Bodily injury sustained after the Insured Person's 75th birthday
- 6 **Residence**
The Insured Person while permanently resident outside the United Kingdom Channel Islands or Isle of Man
- 7 **War Risks**
Any consequence whether direct or indirect of war invasion act of foreign enemy hostilities or a warlike operations or operations (whether war be declared or not) civil war rebellion revolution insurrection civil commotion assuming the proportions of or amounting to an uprising military or usurped power
- 8 **Offshore work**
Any Insured Person while working on or in transit by sea or air to or from offshore installations
- 9 **Back Injuries and Strains**
Back injuries and strains due to lifting twisting turning or wrenching
- 10 **Terrorism**
Cover for acts of terrorism is limited to £10,000,000 per event and excludes harm by nuclear, chemical, biological and radiological means
- 11 **Insanity**
The Insured Person being in a state of insanity

To make a claim please ask for a claim form from the Brokers who administer the Scheme:

**SUTTON WINSON LTD t/a NAYLOR WRIGHT
First Floor, Greenacre Court,
Station Road,
Burgess Hill,
RH15 9DS
Claims Line: 020 8891 9831**

Claims conditions

1. Written notice of a claim must be given to Sutton Winson Ltd without unnecessary delay and in any event not later than 90 days after the injury which is the subject of the claim.
2. All evidence and information to support a claim shall be provided at the Insured Person's expense and shall be in a form as required by the Insurer. The information required includes (but is not limited to):
 - a. fully completed claim form
 - b. medical certificates
 - c. payslips for the three weeks preceding the date of occurrence of the claim showing deduction for premium, including deduction of premium for the week of work during which the accident giving rise to the claim arises
 - d. copy of the entry in the Site Accident Book to evidence a site accident where appropriate
3. The Insured Person shall as often as required submit to medical examiner's report at the Insurer's expense.

In the event of an accident to yourself, we are sure you will appreciate the financial assistance this policy provides.

LAW APPLICABLE TO CONTRACT

The appropriate law as set out below will apply unless you and the insurer agree otherwise:

1. The law applying in that part of the UK, Channel Islands or Isle of Man in which you normally live or (if applicable) the first named policyholder normally lives; or
2. In the case of a business, the law applying in that part of the UK, Channel Islands or Isle of Man where it has its principal place of business; or
3. Should neither of the above be applicable, the law of England and Wales will apply

FINANCIAL SERVICES COMPENSATION SCHEME

We are members of the Financial Services Compensation Scheme (FSCS). You may be entitled to compensation from this scheme if we cannot meet our obligations, depending on the type of insurance and the circumstances of your claim.

Further information about the scheme is available from the FSCS website www.fscs.org.uk, or write to Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU.

CUSTOMERS WITH DISABILITIES

This policy and other associated documentation are also available in large print, audio and Braille. If You require any of these formats please contact Sutton Winson Ltd.

USE OF LANGUAGE

Unless otherwise agreed, the contractual terms and conditions and other information relating to this contract will be in English.

COMPLAINTS PROCEDURE

Complaints Procedure

Our Promise of Service

Our goal is to give excellent service to all our customers but we recognise that things do go wrong occasionally. We take all complaints we receive seriously and aim to resolve all our customers' problems promptly. To ensure that we provide the kind of service you expect we welcome your feedback. We will record and analyse your comments to make sure we continually improve the service we offer.

What will happen if you complain

- We will acknowledge your complaint promptly.
- We aim to resolve all complaints as quickly as possible.

Most of our customers' concerns can be resolved quickly but occasionally more detailed enquiries are needed. If this is likely, we will contact you with an update within 10 working days of receipt and give you an expected date of response.

What to do if you are unhappy

If you are unhappy with any aspect of the handling of your insurance we would encourage you, in the first instance, to seek resolution by contacting Sutton Winson Ltd, Town Hall Chambers, Heath Road, Petersfield, Hants GU31 4TF

If you are unhappy with the outcome of your complaint you may refer the matter to the Financial Ombudsman Service (FOS) at:

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone:
0800 023 4567 (free from landlines) or
0300 123 9123

Or simply log on to their website at www.financial-ombudsman.org.uk.

Whilst we are bound by the decision of the FOS, you are not. Following the complaints procedure does not affect your right to take legal action.

DATA PROTECTION ACT – INFORMATION USERS

For the purposes of the Data Protection Act 1998, the Data Controllers in relation to any personal data You supply is Aviva Insurance Limited

INSURANCE ADMINISTRATION

Information You or the Insured Person supplied may be used for the purposes of insurance administration by Us, its associated companies and agents, by reinsurers and Your intermediary. It may be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing of Our compliance with any regulatory rules/codes. Your and the Insured Person(s) information may also be used for offering renewal, research and statistical purposes and crime prevention. It may be transferred to any country, including countries outside the European Economic Area for any of these purposes and for systems administration. In assessing any claims made, We or Our agents may undertake checks against publicly available information (such as electoral roll, county court judgements, bankruptcy orders or repossessions). Information may also be shared with other insurers either directly or via those acting for Us (such as loss adjusters or investigators). With limited exceptions, and on payment of the appropriate fee, You or the Insured Person have the right to access and if necessary rectify information held.

SENSITIVE DATA

In order to assess the terms of the insurance contract or administer claims that arise, We may need to collect data that the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this application You will signify Your consent to such information being processed by Us or its agents. You must also ensure that You make this fact known to the Insured Person(s) and obtain their consent to pass this information to Us for these purposes.

FRAUD PREVENTION & DETECTION

In order to prevent and detect fraud We may at any time:

- Share information about You or the Insured Person(s) with other organisations and public bodies including the Police;
- Check and/or file Your or the Insured Person(s) details with fraud prevention agencies and databases, and if You or the Insured Person give Us false or inaccurate information and We suspect fraud, We will record this. We and other organisations may also search these agencies and databases to:
 - o Help make decisions about the provision and administration of insurance, credit and related Services for You or the Insured Person and members of Your or their household;
 - o Trace debtors or beneficiaries, recover debt, prevent fraud and to manage Your or the Insured Person(s) accounts or insurance policies;
 - o Check Your or the Insured Person(s) identity to prevent money laundering, unless You or the Insured Person(s) furnish Us with other satisfactory proof of identity;
- Undertake credit searches and additional fraud searches.

We can supply on request further details of the databases We access or contribute to.

Aviva Insurance Limited

Registered in Scotland No.2116.

Registered Office: Pitheavlis, Perth PH2 0NH.

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority