LONDON UNIVERSITY PURCHASING CONSORTIUM (LUPC)

Group Personal Accident & Business Travel Policy
This Policy is a contract between the Insured and Royal & Sun Alliance Insurance plc (herein called the Company).

This Policy and any Schedule (including any issued in substitution) and any Endorsements and Policy Extensions should be read as if they are one document.

The Company's acceptance of this risk is based on the information presented to them as being a fair presentation of the Insured's business including any unusual or special circumstances which increase the risk and any particular concerns which have led the Insured to seek insurance.

Any reference to the singular will include the plural or vice versa.

Any reference to any statute or statutory instrument will include any modifications or re-enactment thereto.

Any heading in this Policy is for ease of reference only and does not affect its interpretation.

The Company will provide the insurance described in this policy (subject to the terms set out herein) for the Period of Insurance shown in the Schedule and any subsequent period for which the Insured shall pay and the Company shall agree to accept the premium.
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General Policy Definitions

Certain words in this policy have a specific meaning. They have this specific meaning wherever they appear in the policy, schedule, endorsements or memoranda and are shown in bold type with Initial Capital Letters. They are described in the general policy definitions and in the definitions within certain sections of the policy.

Please read sections A, B, C, and Additional Endorsements of the policy for additional definitions applicable to those sections and subsections.

Accident
A sudden, unexpected and specific event, external to the body which occurs at an identifiable time and place including Exposure.

Annual Salary
The total gross basic annual salary excluding payments for overtime, commission or bonus payable by the Insured to the Insured Person at the date accidental Bodily Injury is sustained. For weekly paid Insured Persons, Annual Salary will be calculated by taking the average gross basic weekly salary of the Insured Person for the thirteen weeks prior to sustaining accidental Bodily Injury and multiplying this amount by fifty-two.

Any One Accident Limit
The maximum amount the Company will pay in the aggregate under this and any other Policy of Personal Accident Insurance issued by the Company in the Insured’s name in respect of all Insured Persons suffering accidental Bodily Injury in the same accident or series of accidents contributed to, caused by, or consequent upon the same original cause, event, or circumstance.

The duration of Any One Accident will be limited to 72 hours and no loss which occurs outside this period shall be included in that Accident.

Associated Company
A company or organisation of the Insured whose name has been advised to and accepted by the Company.

Biological Agent
Biological Agent shall mean any pathogenic micro-organism or biologically produced toxin(s) including genetically modified organisms and chemically synthesised toxins.

Bodily Injury
Identifiable physical injury to the Insured Person’s body which is caused directly and solely by an Accident, is not intentionally self-inflicted, does not result from sickness or disease and is not as a result of a Gradually Operating Cause.

Business Trip
Any trip undertaken primarily for the purpose of the Insured’s business which commences during the Period of Insurance and is scheduled to last for a maximum duration of eighteen months. Non-business activities are covered when incidental to a Business Trip.

Chemical Agent
Any artificially created, produced or synthesised chemical toxin or compound or a substance derived from a genetically modified organism.

Child
Any person who is unmarried and under 18 years of age or 23 years of age if in full-time education.

Director
Any person who is on the management committee or executive board of the Insured but excluding persons who act in a non-executive capacity unless otherwise agreed in writing with the Company.

For clarity this definition includes Principals.

Domestic staff
Any person, employed in one or more of the following capacities: nanny, house-keeper, au-pair, butler, driver, chauffeur, maternity nurse, tutor, personal trainer.

Employee
Any person under a contract of service or apprenticeship with the Insured who is not a Director.

Exposure
The deliberate emission, discharge, dispersal, release, spread or escape of any Nuclear Agent, Biological Agent or Chemical Agent as a result of Terrorism or other cause.

Gradually Operating Cause
A cause that is the result of a series of events which occur or develop over time that cannot be wholly attributable to a single Accident.

Gross Weekly Wage
For weekly paid Insured Persons this means the average weekly gross basic salary excluding payments for overtime, commission or bonuses for the thirteen weeks prior to sustaining accidental Bodily Injury. For monthly paid Insured Persons this will be calculated by dividing the Insured Person’s Annual Salary by fifty-two.

Insurance
The insured company, organisation or individual shown on the Schedule.

Insured Person
Any person shown on the Schedule as being an Insured Person. Cover applies for the duration of the Operative Time or where the Operative Time is 24 Hours a Day Worldwide Cover, then until the end of the Period of Insurance or the date upon which the Insured Person ceases their employment with the Insured, whichever occurs first.

Channel Islands
Jersey, Guernsey, Alderney, Sark, Herm, Jethou, Brecqhou and Lihou.
Insured Trip
Any educational trip which commences during the Period of Insurance and is scheduled to last for a maximum duration of eighteen months.

Medical Practitioner
A medically qualified person other than an Insured Person, a relative of an Insured Person, or an Employee of the Insured who is currently registered with the General Medical Council in the United Kingdom (or foreign equivalent) to practise medicine.

Medical Consultant
A Medical Practitioner or Medical Specialist (other than, an Insured Person, a relative of an Insured Person, or an Employee of the Insured) who either holds a substantive NHS Consultant post or holds a current Certificate of Completion of Specialist Training (CCST), or is on the Specialist Register held by the General Medical Council (GMC) and holds a specialist accreditation issued by the General Medical Council in accordance with EC Medical Directives (or foreign equivalents). In respect of dental treatment only, a dental practitioner who is registered with the British Dental Association (or foreign equivalent) and who either holds an NHS Consultant post (or foreign equivalent) or who specialises in a specific branch of dentistry.

Medical Specialist
A person who is not an Insured Person, or related to an Insured Person, who currently holds a recognised qualification and all the required accreditation to practise in a specific medical field in the United Kingdom, including, but not limited to, audiology or optometry, from a recognised body registered in the United Kingdom (or foreign equivalent).

Nuclear Agent
Any fissile material emitting ionizing radiation or radioactivity.

Operative Time
The period of time during which the Insured or an Insured Person is covered by this policy (as outlined on the Schedule and described later in this policy wording).

Partner
The spouse, common-law spouse or civil partner of an Insured Person or any other person who is not a Child whom the Insured consents to be covered by this policy.

Period of Insurance
The period shown on the Schedule.

Permanent Country of Residence
A country in which an Insured Person resides, has resided or intends to reside for a period of 12 months or longer for reasons of employment, self-employment or education.

Secondee
An Insured Person who is not an expatriate and who is resident in a country which is neither their country of nationality or origin and who:
A has been temporarily assigned to that country for employment purposes; and
B is resident and it is intended that they will working in that country for a period in excess of 12 months in duration; and
C has a known date of return or it is known that they will be returning; and
D is working in that country under a permit or work visa and has not taken residency in the designated country (unless local law requires them to do so); and
E is employed by the Insured in a position for a specified contractual period.

Schedule
The document showing details of the cover the Insured has bought.

Scheduled Aircraft
An aircraft which flies from an internationally recognised airport on a published schedule and which has more than 18 seats.

Sum Insured
The maximum amount of cover up to which the Insured or an Insured Person can claim.

Terrorism
Any act including but not limited to the use of force or violence or threat thereof of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political religious ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear.

Trip
A Business Trip or an Insured Trip covered during the Operative Time.

United Kingdom
England, Scotland, Wales, Northern Ireland, the Isle of Man and the Channel Islands.

Valid Claim
Any claim under this policy in respect of which, according to the terms of the policy, the Insured or an Insured Person is entitled to a payment from the Company.

War
War, invasion, act of foreign enemy hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
General Policy Conditions

1 Acceptance of Benefit
If the Company has paid a claim under this policy and the Insured or an Insured Person has accepted full and final payment then the Company will not have to make any further payments for the same claim.

2 Assignment
The Company will not be bound to accept or be affected by any trust, charge, lien, assignment or other dealing with or relating to this policy.

3 Associated Companies and Change in Risk
If relevant and subject to the prior written consent of the Company, this policy will cover Associated Companies as long as a list of these companies has been provided to and accepted by the Company. If the Insured changes its business activities from those described in the Business Description on the Schedule during a Period of Insurance it must tell the Company immediately.

4 Cancellation of Cover
The Company can cancel this Policy by giving 30 days' written notice to the Insured at the Insured’s last known address.

The Insured can cancel this Policy by giving 30 days' written notice to the Company at ASH Team, Profin, RSA, Level 5, Castlemead, Lower Castle Street, Bristol, BS1 3AG. If this happens, provided no claim has been paid or is payable and no incident has occurred which could give rise to a claim under this policy, the premium for the period up to the date when the cancellation takes effect will be calculated and any unearned portion of the premium paid will be returned, subject to a minimum retention by the Company of one third of the annual premium.

An Insured Person has no rights of cancellation under this policy.

The Company can cancel any cover provided by this Policy for War or Terrorism by sending seven days' notice to the Insured at the Insured’s last known address.

5 Claims Evidence
In connection with any claim:
A all medical certificates, reports, information and evidence required by the Company to substantiate that claim must be supplied at the Insured Person's own expense and in such form as the Company may reasonably require;
B the Insured Person must undergo a medical examination and provide medical evidence to the Company (at the Company’s expense) as often as the Company may reasonably require following receipt of that claim; and
C no benefit shall be payable in respect of that claim where the Insured Person fails to undergo such medical examination or provide such medical evidence as referred to in B above.

6 Claims Notification
Conditions that apply to the policy and in the event of a claim are set out in this policy wording. It is important that you comply with all policy conditions and you should familiarise yourself with any requirements.

Directions for claim notification are included under General Claims Settlement Conditions and Claims Settlement Conditions applying to each Section.

Please be aware that events that may give rise to a claim under the insurance must be notified to us as soon as reasonably possible although there are some situations where immediate notice is required. Further guidance is contained in this policy wording.

Claims Conditions require you to provide us with any reasonable assistance and evidence that we require concerning the cause and value of any claim. Ideally, as part of the initial notification, you will provide:
- Your name, address, and your home and mobile telephone numbers
- Personal details necessary to confirm your identity
- Policy number
- The date of the incident
- The cause of the loss damage or injury
- Details of the loss damage or injury together with the claim value, if known
- Names and addresses of any other parties involved or responsible for the incident

This information will enable us to make an initial evaluation on policy liability and claim value. We may, however, request additional information depending upon circumstances and value which may include the following:
- Original purchase receipts invoices instruction booklets or photographs
- Purchase dates and location of lost or damaged property
- For damaged property confirmation from a suitably qualified expert that the item you are claiming for is beyond repair

Sometimes we, or someone acting on our behalf, may wish to meet with you to discuss the circumstances of the claim, or to undertake further investigations.

Preferred Suppliers
We take pride in the claims service we offer to our customers. Our philosophy is to repair or replace lost or damaged property, where we consider it appropriate, and we have developed a network of contractors, repairers and product suppliers dedicated to providing claim solutions.

Where we can offer repair or replacement through a preferred supplier but we agree to pay our customer a cash settlement, then payment will normally not exceed the amount we would have paid our preferred supplier.

Initially a notification of any claim should be sent to:
Accident and Health Claims
15 York Street
Glasgow
G2 8LA

Telephone: 0330 102 4093

(dedicated Personal Accident and Business Travel claim telephone number open between 9am and 5pm Monday to Fridays excluding Bank Holidays)
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Fax: 01403 325 562
To request a claim form email travel.claimforms@uk.rsagroup.com
For general correspondence email glasgow.accidentandhealthclaims@uk.rsagroup.com

Medical Assistance
Telephone: +44 (0) 2086 084 100
E-mail: rsa@healix.com
The services can be accessed 24 hours a day 365 days a year.
For your protection telephone calls may be recorded or monitored.
For full details on Medical Assistance, please refer to page 16 of this policy.

7 Failure to comply with policy conditions
Where the Insured or an Insured Person does not comply with any obligation to act in a certain way specified in this policy, this may prejudice the Insured or an Insured Person’s position to recover under any claim.

8 Insurance Act 2015
In respect of any:
A) duty of disclosure
B) effect of warranties
C) effect of acts of fraud
the rights and obligations applying to the Insured and the Company shall be interpreted in accordance with the provisions of the Insurance Act 2015.

9 Interest on Benefit Payable
Other than where required by the Enterprise Act 2016, interest will not be added to any amount paid.

10 Law and Jurisdiction
Under the laws of the United Kingdom (England Scotland Wales and Northern Ireland) both parties may choose the law which applies to this contract to the extent permitted by those laws. Unless the parties agree otherwise in writing the Company has agreed with the Insured that the law which applies to this contract is the law which applies to the part of the United Kingdom in which the Insured is based or if based in the Channel Islands or the Isle of Man the law of whichever of those two places in which the Insured is based.
The parties have agreed that any legal proceedings between them in connection with this contract will only take place in the courts of the part of the United Kingdom in which the Insured is based or if the Insured is based in either the Channel Islands or the Isle of Man the courts of whichever of those two places in which the Insured is based.

11 Notices
Any notice served by the Insured or an Insured Person under this policy must be sent to the following address unless otherwise agreed in writing by the Company:

A&H Team, Profin, RSA, 5th Floor Louer Castle Street Bristol BS1 3AG or email LUPC.A&H@uk.rsagroup.com

12 Other Insurances
If at the time of a claim there is another insurance policy in the Insured’s name which covers the Insured or the Insured Person for the same expense or loss, the Company will only pay a proportion of the claim, determined by reference to the cover provided by each of the policies, except for Section A, items 1 – 6 on the Schedule, which are payable in full.

13 Other Interests
No person other than the Insured (or an Insured Person with the express permission of the Insured) can make a claim under this policy.

14 Payment of Benefit
In respect of any section of the policy where the Company agrees to pay the Insured for the benefit of the Insured Person, the Insured agrees to forward any payments received under the policy to the Insured Person to the extent that the Insured Person has suffered the loss, damage or expense recoverable under the policy or is otherwise entitled to a policy benefit either contractually or implied.
The Insured’s receipt of a payment shall discharge the Company’s liability to pay any amount directly to the Insured Person. The Insured Person or their legal representative shall have no right to claim or sue the Company. Upon the receipt of such payment by the Insured Person or their legal representative it shall discharge the Company in respect of their liability to indemnify, or pay the benefits concerned.

15 Reasonable Care
The Insured and each Insured Person must take all reasonable steps to avoid and/or minimise any loss or damage and must also make every effort to recover any property covered by this policy which has been lost or stolen.

16 Rights of Third Parties
No person other than the Insured or the Company may enforce any terms of this policy and the provisions of the Contract (Rights of Third Parties) Act 1999 do not apply.

17 Financial or Trade Sanctions
The Company shall not provide coverage or be liable to provide any indemnity or payment or other benefit under this Policy if and to the extent that doing so would breach any Prohibition.
If any Prohibition takes effect during the Policy period the Insured or the Company may cancel that part of this Policy which is prohibited or restricted with immediate effect by giving written notice to the other at their last known address.
If the whole or any part of the Policy is cancelled the Company shall, if and to the extent that it does not breach any Prohibition, return a proportionate amount of the premium for the unexpired period subject to minimum premium requirements and provided no claims have been paid or are outstanding.
For the purposes of this clause a Prohibition shall mean any prohibition or restriction imposed by law or regulation.
Operative Times

Personal Accident
24 Hours a Day Worldwide Cover
At any time.

All Occupational Related Cover
- While an Insured Person is carrying out their occupational duties for the Insured either on or away from the Insured’s premises.
- At any time while an Insured Person is on the Insured’s premises.
- While an Insured Person is travelling between their place of residence and place of work.
- While an Insured Person is travelling between their places of work where the travel is at the expense of the Insured.
- While an Insured Person is getting in and out of, travelling in, loading or unloading, carrying out emergency road-side repairs to and re-fuelling a motor vehicle owned, hired by, or leased to the Insured or an Insured Person (in respect of an Insured Person, where travel is at the expense of the Insured), or any vehicle temporarily replacing it.
- At any time where accidental Bodily Injury is suffered by an Insured Person and is the direct result of an unprovoked malicious assault by another person or where accidental Bodily Injury is the direct result of theft or attempted theft of the Insured’s or an Insured Person’s property.

Travel

Business Travel
- Whilst an Insured Person is on a Business Trip, cover starting from the time of leaving their place of residence or place of work whichever occurs last, until return to their place of residence or place of work whichever occurs first. If an All Occupational Related Cover Operative Time also applies, it is extended to “at any time between leaving an Insured Person’s place of residence at the start of the Insured Trip and return to place of residence at the end of the Insured Trip.”
- Extension to Business Travel where Directors are noted on the Schedule as being covered under this Operative Time, cover under Section B (Travel) is automatically extended to include their Partners, Children and one salaried Domestic Staff.

Business and Leisure Travel
- Whilst an Insured Person is on any Trip, cover starting from the time of leaving their place of residence or place of work whichever occurs last, until return to their place of residence or place of work whichever occurs first. If an All Occupational Related Cover Operative Time also applies, it is extended to “at any time between leaving an Insured Person’s place of residence at the start of the Insured Trip and return to place of residence at the end of the Insured Trip.”
- Extension to Business and Leisure Travel where Directors are noted on the Schedule as being covered under this Operative Time, cover under Section B (Travel) is automatically extended to include their Partners, Children and one salaried Domestic Staff.
Section A - Personal Accident

If an Insured Person sustains accidental Bodily Injury during the Operative Time which within two years solely and independently of any other cause results in death, Disablement or the incurring of Accident Medical Expenses, the Company will pay the Insured or, in the case of Accident Medical Expenses, the Insured or an Insured Person the amount appropriate to the benefit shown on the Schedule.

Definitions applicable to Section A

Accident Medical Expenses
The cost of medical, surgical or other remedial attention or treatment given or prescribed by a Medical Practitioner and all hospital, nursing home and ambulance charges connected with a valid claim under Items 1-6 on the Schedule. This will not exceed 15% of any amount paid under Items 1-4b or 30% under Items 5 or 6, whichever is the greater, up to a maximum of £15,000 per Insured Person.

Deferment Period
The initial period of Temporary Total Disablement or Temporary Partial Disablement during which the Benefit under Items 5 or 6 on the Schedule is not payable for each and every claim as a result of the same Bodily Injury

Disablement


Full Thickness Burns
Burns which result in the destruction of both the epidermis (the outer layers of the skin) and dermis (the layers of the skin that contain hair follicles, nerve endings, sweat and sebaceous glands), and which require surgery or skin grafting to treat.

Hemiplegia
The permanent, total and irrecoverable paralysis of one leg below the hip and one arm below the shoulder on the same side of the body.

Loss of Hearing
Permanent, total and irrecoverable loss of hearing resulting in the Insured Person being classified as Profoundly Deaf.

Loss of Limb
In the case of a leg or lower limb
A loss by permanent physical severance at or above the ankle or
B permanent and total loss of use of a complete foot or leg.
In the case of an arm or upper limb
A loss by permanent physical severance of the four fingers at or above the meta carpo phalangeal joints (where the fingers join the palm of the hand) or
B permanent and total loss of use of a complete arm or hand.

Loss of Sight
The permanent, total and irrecoverable physical loss of one or both eyes or the permanent, total and irrecoverable loss of a substantial part of the sight of one or both eyes. The Company will consider loss of sight to be substantial if the loss of sight:
A in both eyes results in the Insured Person’s name being added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist; or
B remaining in one eye is assessed at 3/60 or less on the Snellen scale after correction with spectacles or contact lenses. (At 3/60 on the Snellen scale a person can see at 3 feet something that a person who has not suffered loss of sight should be able to see at 60 feet).

Loss of Speech
Permanent, total and irrecoverable loss of the ability to speak.

Non-Scheduled Aircraft Accumulation Limit
The maximum amount the Company will pay in the aggregate under this and any other Policy of Personal Accident Insurance issued by the Company in the Insured’s name in respect of all Insured Persons suffering Bodily Injury in the same aircraft accident (this not being a Scheduled Aircraft Accident) or series of aircraft accidents contributed to, caused by, or consequent upon the same original cause, event, or circumstance.

The duration of a series of aircraft accidents contributed to, caused by, or consequent upon the same original cause, event, or circumstance will be limited to 72 consecutive hours and no loss which occurs outside this period shall be included in that same aircraft accident.

Paraplegia
The permanent, total and irrecoverable paralysis of both legs below the hip, the bladder and rectum.

Payment Period
The maximum period of time either or both Temporary Total Disablement or Temporary Partial Disablement is payable. This period of time commences at the end of any Deferment Period and is not necessarily consecutive. This period of time applies for each and every claim that is the result of same Bodily Injury.

Permanent Facial Disfigurement
A permanent physical disfigurement or scarring of the facial area from the hairline to the neck normally exposed to view.

Permanent Partial Disablement
A disability that is described under the extension to Permanent Total Disablement is beyond hope of recovery and will in all probability continue for the remainder of the Insured Person’s life.

Permanent Total Disablement
For an Insured Person who is an Employee or Director
Disability which totally prevents an Insured Person from working in their usual occupation for the Insured which in all probability will continue for the remainder of their natural life as determined by a Medical Consultant.
For all other Insured Persons other than a Child
Disability which totally prevents an Insured Person from working in gainful employment for which they are fitted by way of training, education or employment which in all probability will continue for the remainder of their natural life.
For a Child who is not a Director or Employee
Disability which totally prevents an Insured Person from working in gainful employment of any and every kind whatsoever which in all probability will continue for the remainder of their natural life as determined by a Medical Consultant.

Profoundly Deaf
The inability to hear sounds when tested by a qualified audiologist quieter than 90 decibels across frequencies between 500 Hz and 3,000 Hz.

Quadriplegia
The permanent, total and irrecoverable paralysis of both arms below the shoulder and both legs below the hip.

Scheduled Aircraft Accumulation Limit
The maximum amount the Company will pay in the aggregate under this and any other Policy of Personal Accident Insurance issued by the Company in the Insured’s name in respect of all Insured Persons suffering Bodily Injury in the same Scheduled Aircraft accident or series of Scheduled Aircraft accidents contributed to, caused by, or consequent upon the same original cause, event, or circumstance.

The duration of a series of Scheduled Aircraft accidents contributed to, caused by, or consequent upon the same original cause, event, or circumstance will be limited to 72 consecutive hours and no loss which occurs outside this period shall be included in that same aircraft accident.

Temporary Partial Disablement
Temporary disablement which prevents an Insured Person from carrying out the majority of their usual occupation for the Insured.

Temporary Total Disablement
Temporary disablement which prevents an Insured Person from carrying out all parts of their usual occupation for the Insured.

Triplegia
The permanent, total and irrecoverable paralysis of both legs below the hip and one arm below the shoulder or both arms below the shoulder and one leg below the hip.

Condition applicable to Section A
If a claim exceeds the Scheduled Aircraft Accumulation Limit, the Non-Scheduled Aircraft Accumulation Limit or the Any One Accident Limit shown on the Schedule, the Company will pay an amount which is proportionately reduced until the total does not exceed the limit shown on the Schedule.

Automatic Extension to Permanent Total Disablement
Permanent Partial Disablement
In the event an Insured Person suffers Bodily Injury which does not result in a payment under items 1-4a of section A and item 4b of section A is shown as being operative on the Schedule, the Company will pay an amount for Permanent Partial Disablement for the amount shown under this extension or as a percentage of the Sum Insured for item 4a of section A, shown on the Schedule, depending on the degree of permanent disability following a medical assessment. The percentages of the Sum Insured payable under 4a of section A for specific disabilities are:

Specific Disabilities
A Permanently severed or permanent, total and irrecoverable loss of use of:
   i) one thumb 30%
   ii) forefinger 20%
   iii) any finger other than forefinger 10%
   iv) big toe 15%
   v) any toe other than big toe 5%
   vi) shoulder or elbow 25%
   vii) wrist, hip, knee or ankle 20%
   viii) jaw by surgical operation 30%
   ix) the back or spine (vertebral column) with no injury to the spinal cord 35%

Non-Specified Disabilities
B A permanent partial disability which is not provided for under items 2-4a of section A as shown on the Schedule or any of the specific disabilities noted under A (i)-(ix) above up to a maximum of 100% of item 4a of the Schedule (please see non-specified injury assessment below).

Additional Payments
C Paraplegia £25,000
D Quadriplegia £125,000
E Hemiplegia £25,000
F Triplegia £50,000

Non-specified injury assessment
A If the Insured Person suffers Bodily Injury to a part of the body that is listed on the Schedule, items 2-4a of section A or listed under the specific disabilities table above items A (i)-(ix):

   The Company will ask the Medical Consultant, Medical Practitioner or Medical Specialist who treated the Insured Person’s injury to assess the degree of their post-Accident impairment and disability and explain their assessment. If they are unable or unwilling to do this in a timely manner or if they are unable to provide the Company with justifiable evidence to support their assessment, the Company will appoint an independent Medical Specialist to make this assessment. This may require them to examine the Insured Person and/or review their medical records and other medical reports and/or refer to medical assessment guides so that an assessment can be made.

   The Company may also ask an independent Medical Specialist to examine the Insured Person and/or review their medical records and/or refer to medical assessment guides so that an assessment can be made.

   The Company may also ask the Insured Person’s treating Medical Consultant, Medical Practitioner or Medical Specialist to review and comment on the assessment made by the independent Medical Specialist the Company appoints to reach a joint agreement.

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Once the **Company** is in receipt of the assessment(s) it will then calculate as a percentage disablement to the nearest **Permanent Disability** item shown on the **Schedule** to arrive at a claim payment amount. The **Insured Person's** occupation or age will not be a relevant factor in assessing the relevant percentage.

If the **Insured Person** suffers **Bodily Injury** to a part of the body that is not listed in section A on the **Schedule** under items 2-4a or cannot be assessed by reference to the stated percentages of the Specific Disabilities table above items A (i)-x): The **Company** will assess the injury as a percentage of the body as a whole and apply this to the amount shown for item 4a of section A. To do this the **Company** will ask the treating **Medical Consultant**, **Medical Practitioner** or **Medical Specialist** that treated the **Insured Person's** injury to review the impairment and disability and provide the **Company** with their assessment. If they are unable or unwilling to do this in a timely manner or if or they are unable to provide the **Company** with justifiable evidence to support their assessment, the **Company** will appoint an independent **Medical Specialist** to make this assessment. This may require them to examine the **Insured Person** and/or review their medical records and other medical reports and/or refer to medical assessment guides so that an assessment can be made.

The **Company** may also ask an independent **Medical Specialist** to examine the **Insured Person** and/or review their medical records and other medical reports to obtain a second opinion. The **Company** may also ask the **Insured Person's** treating **Medical Consultant**, **Medical Practitioner** or **Medical Specialist** to review and comment on the assessment made by the independent **Medical Specialist** the **Company** appoints to reach a joint agreement.

Once the **Company** is in receipt of the assessment(s) it will then calculate a percentage disablement of the body as a whole and apply this to the amount shown for item 4a to arrive at a claim payment amount. The **Insured Person's** occupation or age will not be a relevant factor in assessing the relevant percentage.

When more than one form of **Disablement** results from one **Accident** the percentages from each will be added together, but the **Company** will not pay more than 100% of the **Sum Insured** under item 4a of section A of the **Schedule** other than for **Permanent Partial Disablement** items C-F which will be payable in addition to the amount payable under item 4a.

Other than as provided for above, if a claim is payable for loss of, or loss of use of a whole part of the body, a claim for any component of that whole part cannot also be made.

**Provisions applicable to Section A**

1. If an **Insured Person** goes missing and after a suitable period of time it is reasonable to believe that death resulted from accidental **Bodily Injury**, the benefit as shown on the **Schedule** will be paid providing the **Insured** signs an agreement that if it later transpires that an **Insured Person** has not died, any amount paid will be refunded to the **Company**.

2. Death or disablement resulting from exposure to severe weather conditions will be considered to have been caused by accidental **Bodily Injury**.

3. If an **Insured Person** is not a **Director** or **Employee** of the Insured (excludes a **Child**, see below), then item 4a as shown on the **Schedule** will be defined as **Permanent Total Disablement** which totally prevents an **Insured Person** from working in gainful employment for which they are fitted by way of training, education or employment which in all probability will continue for the remainder of their natural life: In addition, no claim for **Temporary Total Disablement** or **Temporary Partial Disablement** will be payable under items 5 and 6 as shown on the **Schedule**, other than where cover is extended and shown on the **Schedule** to include an **Insured Person** who is a **Student**, where the following restrictions will apply:

   A) The amount payable will be the **Sum Insured** shown on the **Schedule** or £250 per week whichever is the lesser, and,

   B) The amount payable for item 5 **Temporary Total Disablement** will be limited to incidental costs incurred for **Out of Pocket Expenses** as a consequence of accidental **Bodily Injury** resulting in **Temporary Total Disablement** and

   C) No benefit will be payable under item 6 **Temporary Partial Disablement**.

For the purposes of this provision, **Out of Pocket Expenses** shall mean the additional costs incurred by an **Insured Person** for food and drink (other than alcoholic beverages) expenses, telephone calls and taxi fares as a result of the accidental **Bodily Injury** for which the benefit is being claimed.

If an **Insured Person** is a **Child** who is not a **Director** or **Employee**, then item 4a as shown on the **Schedule** will be defined as **Permanent Total Disablement** which totally prevents an **Insured Person** from working in gainful employment of any and every kind whatsoever which in all probability will continue for the remainder of their natural life as determined by a **Medical Consultant** and no benefit will be payable under item 5 **Temporary Total Disablement** or item 6 **Temporary Partial Disablement**.

4. The **Sum Insured** under item 1 for an **Insured Person** who is a **Child** will be limited to £20,000 except where an **Insured Person** aged between 16 and 18 years of age at the time of sustaining accidental **Bodily Injury** is a **Director** or **Employee** or student of the **Insured**

5. The amount the **Company** will pay will be reduced to 10% of the **Sum Insured** shown on the **Schedule** or £50,000, whichever is less, in respect of items 1-3 and no benefit will be payable in respect of items 4a, 4b, 5 and 6 for any **Insured Person** after expiry of the **Period of Insurance** during which the **Insured Person** reaches age 75.

6. If an **Insured Person** is not covered under item 1 as shown on the **Schedule** the **Company** will not pay for items 2 - 4b as shown on the **Schedule** until at least 13 weeks after the date of the accident and the **Company** will only then pay if the **Insured Person** has not in the meantime died as a result of the accident.

7. If an **Insured Person** is covered under item 1 as shown on the **Schedule** but the benefit payable is less than for items 2 - 4b as shown on the **Schedule** the **Company** will not pay more than the amount of the death benefit if accidental **Bodily Injury** does not immediately result in death until at least 13 weeks after the date of the accident.

**Extensions applicable to Section A**

The following extensions apply during the **Period of Insurance** and respective **Operative Time** for each category of **Insured Persons** shown on the **Schedule**. Any amount paid under these extensions will be in addition to any benefit paid under the Personal Accident Section items 1 - 7 as shown on the **Schedule**, subject to the terms of each extension, and the maximum payable under the Any One Accident Limit, Scheduled Aircraft Accumulation Limit or the Non-Scheduled Aircraft Accumulation Limit.
1 Bereavement Counselling
In the event of Bodily Injury being sustained by an Insured Person that results in death, for which the benefit is paid, the Company will at the request of the Insured pay necessary expenses with the Company’s prior written consent for the Insured Person’s Partner and/or Child to receive either
- telephone counselling or
- face to face counselling or
- cognitive behavioural therapy
up to £250 per week up to a maximum £5,000 any one incident.

2 Burns benefit
In the event of Bodily Injury being sustained by an Insured Person that results in Full Thickness Burns, the Company will pay at the request of the Insured the amount specified below dependent on the extent of the injury:

i) 27% or more of the body surface £10,000
ii) between 18 – 26% of the body surface £5,000
iii) between 9 – 17% of the body surface £1,500

Up to a maximum payment of £10,000 for all Full Thickness Burns. The Company will not pay this benefit in addition to extension 18 – Permanent Facial Disfigurement.

3 Catastrophe
If any single incident results in payment of the death benefit for five or more Directors or Employees of the Insured who are covered under the Personal Accident Section of this Policy the Company will pay to the Insured an additional 25% of the total Sum Insured payable relative to those five or more Directors or Employees.

4 Catastrophe Critical Response Counselling
If any single incident results in payment of the death benefit for five or more Directors or Employees of the Insured who are covered under the Personal Accident Section of this Policy the Company will pay at the request of the Insured necessary expenses with the Company’s prior written consent for specialist counselling support services for any Director or Employee of the Insured up to a maximum £5,000 any one incident.

5 Commuting Expenses
In the event of Bodily Injury being sustained by an Insured Person (who is either a Director or Employee of the Insured) that results in the Insured Person’s disablement from at least 50% of their usual occupation in the Insured’s business the Company will pay at the request of the Insured necessary expenses for additional commuting costs necessitated to aid the Insured Person’s return to work at the Insured’s request up to £250 per week up to a maximum £5,000 any one Insured Person.

6 Coma benefit
In the event of Bodily Injury being sustained by an Insured Person which results in the continuous unconscious state of the Insured Person, the Company agree to pay the Insured or the Insured Person £50 per day or part thereof of continuous unconsciousness, up to a maximum period of 730 days. This benefit will be in addition to any amount paid under extension 16 – Hospitalisation benefit.

7 Counselling
In the event of Bodily Injury being sustained by an Insured Person that results in payment under Loss of Limb, Loss of Eye, Loss of Speech, Loss of Hearing, Permanent Total Disablement, Temporary Partial Disablement or Temporary Total Disablement the Company will pay at the request of the Insured necessary expenses with the Company’s prior written consent for either
- telephone counselling or
- face to face counselling or
- cognitive behavioural therapy
up to £250 per week up to a maximum £5,000 any one Insured Person.

8 Damage to Clothing
In the event of Bodily Injury being sustained by an Insured Person that results in payment under Loss of Limb, Loss of Eye, Loss of Speech, Loss of Hearing, Permanent Total Disablement, Temporary Partial Disablement or Temporary Total Disablement and the Insured Person’s clothing is lost damaged or destroyed as a direct or indirect result the Company will pay at the request of the Insured the cost of replacement as new or repair up to £1,000 per Insured Person subject to this not being included in any claim under the Personal Property Section.

9 Dental and Optical Expenses
In the event of Bodily Injury being sustained by an Insured Person that results in the Insured Person incurring dental or optical expenses, the Company will pay at the request of the Insured up to 25% of any amount paid under Loss of Limb, Loss of Eye, Loss of Speech, Loss of Hearing, Permanent Total Disablement, Temporary Partial Disablement or Temporary Total Disablement subject to a maximum of £2,500 any one Insured Person.

10 Dependent children additional payment
A) In the event of a claim being paid for accidental death, the benefit payable under item 1 will be increased by 5% per dependent Child up to a maximum of 25% of the benefit but no less than £5,000 subject to a maximum cumulative benefit payable of £500,000 per Insured Person and dependent Child or Children.
B) In the event that an Insured Person and their Partner suffer fatal injury in the same accident resulting in a claim being paid for accidental death and leave dependents, the Company agree to double the benefit under item 1, subject to a maximum benefit payable for an Insured Person or their Partner (if also insured) of £500,000 per person.

11 Disability Assistance
In the event of Bodily Injury being sustained by an Insured Person who is a Director or Employee of the Insured, and such injury results in Permanent Total Disablement for which the benefit is paid, the Company will pay at the request of the Insured, necessary expenses incurred with the Company’s prior written consent to make alterations to the Insured Person’s home car or usual place of work as a direct and necessary result of the disablement suffered up to a maximum of £25,000.
12 Domestic Help
In the event of a claim being paid for any of Items 2 to 6, and where the Insured Person is a Director or Employee, the Company agrees to pay up to 5% of the total benefit claimed, subject to a maximum of £10,000, for an in–home domestic service while recovery is in progress, as well as a chauffeur service to and from an Insured Person’s usual place of work if an Insured Person recovers sufficiently to return to work but is medically certified as being unable to drive a vehicle or travel on public transport.

13 Executor Expenses
In the event of Bodily Injury being sustained by an Insured Person that results in death the Company will pay at the request of the Insured the necessary costs incurred as a direct consequence of the death requiring immediate payment by the executor to the estate of the Insured Person whilst the administration is being arranged up to a maximum of £2,000 any one Insured Person.

14 Fracture benefit
In the event of Bodily Injury being sustained by an Insured Person that results in a Fracture that does not result in a claim payment under items 3–4b of section A, the Company will pay the Insured at their request the amount specified below dependent on the Fracture sustained. Fracture of the:

   i) hip or pelvis (excluding coccyx or thigh) £1,000
   ii) femur or heel £500
   iii) skull (excluding jaw and nose), lower leg, collar bone, ankle, elbow, upper or lower arm (including the wrist but not a Colles’ fracture) £500
   iv) spine (vertebrae but excluding coccyx) £1,000

Up to a maximum payment of £5,000 for all Fractures. The Company will pay a Fracture benefit only once during the lifetime of the policy if the Insured Person is diagnosed with osteoporosis prior to or as a result of the Accident that results in a claim under this policy.

15 Funeral expenses
In the event of a claim being paid for accidental death the Company will pay reasonable funeral expenses incurred up to a maximum of £10,000 any one Insured Person, subject to the total amount payable under Section A and Section B1.2 not exceeding £10,000 in the aggregate.

16 Hospitalisation benefit
The Company agree to pay the Insured on behalf of an Insured Person £50 per day or part thereof up to a maximum of 365 days in the event of an Insured Person being admitted to a hospital as an in–patient as a result of Bodily Injury. The benefit will be increased to £100 per day or part thereof on public or bank holidays. Benefit will not be payable in addition to Section B11 – Extension Hospitalisation benefit.

17 Partners & Children of Employees
Cover is automatically extended under each category shown on the Schedule to include Partners and Children provided an Insured Person shown on the Schedule is a Director or Employee of an Insured. The Operative Time and benefits payable are:

Operative Time: 24 Hours a Day Worldwide Cover –

   At any time.

   Benefits: Paraplegia: £ 25,000
   Quadriplegia: £100,000

18 Permanent Facial Disfigurement
In the event of accidental Bodily Injury being sustained by an Insured Person which results in Permanent Facial Disfigurement, the Company will pay for total disfigurement or scar length or area:

   A) between 1.0 centimetres and 2.4 centimetres £500
   B) between 2.5 centimetres and 4.9 centimetres £1,000
   C) between 5.0 centimetres and 7.4 centimetres £4,000
   D) between 7.5 centimetres and 9.9 centimetres £6,000
   E) between 10.0 centimetres and 12.4 centimetres £8,000
   F) between 12.5 centimetres and 14.9 centimetres £10,000
   G) 15.0 centimetres and over £12,000

The maximum the Company will pay under this extension is £25,000.

19 Post-traumatic stress disorder – terrorism
If during the Operative Time an Insured Person directly witnesses an act of Terrorism occurring to and whilst traveling on publicly licensed transport (other than an aircraft or sea vessel) which results in the Temporary Total Disablement of the Insured Person solely as a result of Post-Traumatic Stress Disorder (as diagnosed by a Medical Practitioner or Medical Consultant whom is a specialist in diagnosing such a condition), and which occurs within 6 months of the act of Terrorism, the Company will pay an additional 50% of the amount specified on the Schedule for item 5, or £350 per week, whichever is the lesser, but not exceeding 13 weeks in all.

20 Relocation Expenses
In the event of Bodily Injury being sustained by an Insured Person who is a Director or Employee of the Insured, and such injury results in Permanent Total Disablement for which the benefit is paid, the Company will pay at the request of the Insured, necessary expenses incurred with the Company’s prior written consent for stamp duty payments solicitors’ and estate agents’ fees and removal costs necessitated as a direct and necessary result of the Insured Person having to relocate as a direct result of the disablement suffered up to a maximum of £25,000 any one Insured Person subject to there not being any claim being paid under extension 11 – Disability Assistance extension.

21 Retraining expenses
In the event of a claim being paid for Permanent Total Disablement or Loss of Limb(s) or Loss of Eye(s), and where the Insured Person is a Director or Employee, the Company agrees to indemnify the Insured for reasonable expenses incurred in retraining the Insured Person for an alternative occupation with the Insured up to a maximum of £25,000.

22 Visiting expenses
In the event of an Insured Person being hospitalised in the United Kingdom or an Insured Person’s Permanent Country of Residence, beyond a 10 mile distance from their normal place
of residence, the Company will pay the cost of transporting any person whom the Insured consents to be covered by this policy to visit an Insured Person, up to a maximum of £2,500, payable in addition to any other claimable expense.

23 Visitors cover
In the event that a third party visits an Insured's premises in a business capacity and sustains accidental Bodily Injury which would have the visitor been an Employee, result in a valid claim under items 1 to 3a, the Company agrees to pay a benefit of £25,000 to the Insured.

24 Corporate Event cover
It is agreed by the Company that cover under this policy is automatically extended to provide cover for Employees and Guests of the Insured whilst on any Corporate Event:

Definitions applicable to this specific extension

Corporate Event
Any event arranged by the Insured with the primary function of entertaining Employees and/or Guests of the Insured in a business or leisure capacity.

Guest
Any person whom the Insured consents to be covered by this policy whilst on a Corporate Event.

Operative Time:
Cover applies whilst an Insured Person is travelling to and from and participating in any Corporate Event arranged by the Insured. Cover starts from the time of leaving their place of residence or place of work whichever occurs last, until return to their place of residence or place of work whichever occurs first.

Benefits:

Section A – Personal Accident

Employees: Items 1-4b: £25,000 or the Sum Insured shown on the Schedule, whichever is the greater.

Guests: Items 1-4b: £25,000

Section B – Travel

Employees & Guests:
Cover applies under Section B – Travel, for the Sums Insured shown in the policy wording, where a flight or an overnight stay occurs within the United Kingdom or an Insured Person’s Permanent Country of Residence, or a Trip outside the United Kingdom or an Insured Person’s Permanent Country of Residence takes place. Cover starts from the time of leaving their place of residence or place of work whichever occurs last, until return to their place of residence or place of work whichever occurs first.

Exclusions applicable to Section A

1 The Company will not pay any claim which is the result of Bodily Injury, death, Disablement or the incurring of Medical Expenses, or any benefit under the Extensions applicable to Section A, caused by:
   A) intentional self-injury,
   B) suicide or attempted suicide other than for authorised and documented recruitment costs incurred in engaging a replacement Insured Person up to a maximum of £10,000,
   C) flying as a pilot,

2 The Company will not pay any benefit where Bodily Injury or death, Disablement or the incurring of Medical Expenses, or any of the Extensions applicable to Section A which is the result of or is contributed to by:
   A) sickness or disease (not resulting from accidental Bodily Injury), or
   B) any naturally occurring condition or degenerative process which is known to an Insured Person and their General Practitioner, or
   C) any Gradually Operating Cause.
Section B – Travel

Section B1.1 – Medical and other Emergency Travel Expenses
If an Insured Person is injured or becomes ill during the Period of Insurance and Operative Time, the Company will reimburse the Insured or an Insured Person for any Medical Expenses and Emergency Travel Expenses reasonably and necessarily incurred as a direct result within two years of the date of injury or first diagnosis of illness, but then only for any Medical Expenses or Emergency Travel Expenses incurred within 12 months of the incurring of either the first expense or the date that the need for treatment arose (whichever occurs first).

Definitions applicable to Section B1.1

Medical Expenses
The costs incurred outside the United Kingdom (but including costs incurred within the Channel Islands), or an Insured Person’s Permanent Country of Residence, for medical, surgical or other remedial attention or treatment given or prescribed by a Medical Practitioner and all hospital, nursing home and ambulance charges. Optical, Pregnancy/Childbirth and Dental expenses are covered if incurred in an emergency or if they are the result of an injury.

Emergency Travel Expenses
The additional transport and accommodation expenses (less any possible recovery or saving) incurred by an Insured Person and any person who needs to travel to, remain with, or escort an Insured Person.

Condition applicable to Section B1.1
The Insured or an Insured Person must contact Healix as soon as possible if injury or illness results in the need for in-patient hospital treatment.

Emergency Helpline: +44 (0) 2086 084 100 (24 Hour)

Extensions applicable to Section B1.1

1 Family visit
In the event of the hospitalisation of an Insured Person of more than 5 days as a result of serious injury or illness (as determined by the treating Medical Practitioner), the Company will pay for the reasonable additional transport and accommodation expenses incurred by the Insured Person’s Partner and up to three dependent Children or two other persons who are the Insured Person’s immediate relatives to visit the Insured Person. Cover will also be provided under section B for the same benefits as the Insured Person. In the event that only the Insured Person’s Partner travels, the Company will pay for the necessary additional cost incurred to engage the services of a registered childcare provider for their dependent Children during the period of the visit.

2 Home country ongoing medical treatment
In the event of a valid claim under this section the Company will pay the costs of hospital in-patient medical charges necessarily incurred within the twelve months immediately following the date of return to the United Kingdom or an Insured Person’s Permanent Country of Residence, up to a maximum of £50,000, excluding any expenses which can be recovered from any national insurance programme which is applicable to the Insured Person.

3 Hospitalisation benefit
The Company will pay the Insured on behalf of an Insured Person £50 per day or part thereof up to a maximum of 365 days in the event of an Insured Person being admitted to a hospital as an in-patient outside their Permanent Country of Residence as a result of illness or accidental bodily injury. The benefit will be increased to £100 per day or part thereof on public or bank holidays.

4 Petcare
In the event that an Insured Person is hospitalised as an inpatient and this results in a delayed return for more than 24 consecutive hours at the end of the original pre-booked Trip, the Company will pay at the specific request of the Insured up to £300 for the additional costs necessarily incurred by the Insured Person for additional domestic cattery or kennel fees for pets owned by the Insured Person.

5 Search and Rescue expenses
If during the Period of Insurance whilst on a Trip outside the United Kingdom or Permanent Country of Residence an Insured Person is reported as missing and it becomes necessary for the rescue or police authorities to instigate a search and rescue operation where

A) it is known or believed that the Insured Person may have sustained injury or suffered illness; or
B) local weather or safety conditions are such that it becomes necessary to do so in order to prevent the Insured Person from sustaining injury or suffering illness.

the Company will reimburse the Insured or Insured Person up to £25,000 for each Trip but not exceeding £100,000 overall for all Insured Persons arising out of any one event and not exceeding £250,000 in total during any one Period of Insurance in respect of the necessary and reasonable costs incurred by RSA’s assistance providers and/or levied by recognised rescue coastguard, police authority or other authority with specific responsibility in searching for such Insured Person and for bringing them to a place of safety.

Specific conditions applicable to search and rescue extension

A The Insured and Insured Persons must comply at all times with local safety advice and adhere to recommendations prevalent at the time of the Trip or the excursion/activity whilst on a Trip.
B Insured Persons must not knowingly endanger either their own life or the life of any other Insured Persons or engage in activities where their experience or skill levels fall below those reasonably required for them to participate in such activities.
C Healix and/or Drum Cussac must be informed immediately or as soon as reasonably possible of any emergency that may potentially give rise to a claim.
D Where it is reasonable and practical to do so, the Insured and/or Insured Person must make arrangements for search and rescue only with the involvement and/or agreement of Healix and/or Drum Cussac.
E The Company will only pay the Insured Person’s proportion of any search and rescue operation.
F The Company will only pay up to the point where the Insured Person is recovered by search and rescue operation or at the time when the search and rescue authorities advise that continuing the search is no longer viable.

G A written statement from the rescue authorities involved in the search and/or rescue must be obtained and provided to the Company in the event of a claim.

Exclusions applicable to Section B1.1
The Company will not be liable for any claim:

1. where an Insured Person is travelling against the advice of a Medical Practitioner;
2. where the purpose of the Trip is to receive medical treatment or advice;
3. as a result of the use by an Insured Person of a non-prescribed drug or drugs which cannot be legally obtained from a pharmacy;
4. as a result of suicide, attempted suicide or self-inflicted injury;
5. any expenses in excess of £50,000 incurred as the result of treatment to a Child who has been born outside the United Kingdom during an Insured Trip:
   A) while such Child is under the age of six months; or
   B) unless, on the attaining of the age of six months, the Child has been declared healthy by a Medical Practitioner;
6. the amount of the excess (if any) shown on the Schedule;
7. any expenses incurred 12 months or more after the time of incurring the first expense or after the need for treatment first arose;
8. any expenses which are recovered from any national insurance programme which is applicable to the Insured Person.
9. any expenses incurred where a trip is undertaken against the advice of a Medical Practitioner or where the purpose of the trip is to receive medical treatment or advice.

Please see endorsement No 1 on page 27 for additional exclusions applying to Long Term Secondees.

Section B1.2 – Repatriation Expenses
If an Insured Person is injured or becomes ill during the Operative Time, the Company will reimburse the Insured or an Insured Person for any Rescue Expenses reasonably and necessarily incurred as a direct result, for up to two years from the date of injury or first diagnosis of illness up to the Sum Insured on the Schedule.

Definition applicable to Section B1.2
Rescue Expenses
The cost of transportation by any suitable means to an appropriate medical facility or to an Insured Person’s home in the United Kingdom or Permanent Country of Residence as recommended by the Company’s appointed medical advisor in conjunction with the local attending Medical Practitioner. In the event of death the costs of transportation of the body or ashes and the Insured Person’s personal effects back to the United Kingdom or Permanent Country of Residence are covered. The costs of funeral expenses outside the United Kingdom or an Insured Person’s Permanent Country of Residence are covered up to a maximum of £10,000.

Condition applicable to Section B1.2
The Insured or Insured Person must contact Healix as soon as possible if injury or illness results in the need for in-patient hospital treatment or the possible need for emergency rescue otherwise the costs may not be reimbursed.

Emergency Helpline: +44 (0) 2086 084 100 (24 Hour)

Extension applicable to Section B1.2
If an Insured Person commits suicide on a Trip, the Company will pay any costs, up to a maximum of £5,000, necessarily incurred to transport the body back to the United Kingdom or an Insured Person’s Permanent Country of Residence.

Exclusions applicable to Section B1.2
The Company will not be liable for any claim:

1. where an Insured Person is travelling against the advice of a Medical Practitioner;
2. where the purpose of the Trip is to receive medical treatment or advice;
3. as a result of the use by an Insured Person of a non-prescribed drug or drugs which cannot be legally obtained from a pharmacy;
4. as a result of suicide, attempted suicide or self-inflicted injury other than where costs are incurred in transporting the body back to the United Kingdom or an Insured Person’s Permanent Country of Residence.

Please see endorsement No 1 on page 27 for additional exclusions applying to Long Term Secondees.

Section B1.3 – Medical and Security Assistance Services supporting this Policy
RSA Assistance Services supporting this Policy
This RSA policy is supported by specialists in the provision of Medical and Security Assistance Services

• Healix and Drum Cussac are third party service providers approved by RSA

The advice and assistance provided by both Healix and Drum Cussac can be accessed as follows:

Telephone: +44 (0) 2086 084 100
E-mail: rsa@healix.com

The services can be accessed 24 hours a day 365 days a year

For your protection telephone calls may be recorded or monitored

A full description of their services supporting this Policy, both insured and uninsured, are as follows:

Travel and Medical Assistance from Healix
Healix employs a multinational team of highly skilled and experienced professionals who provide travel and medical assistance services required by today’s traveller.

We have customised the services Healix provide to protect the health of all travellers insured under this Policy

When a traveller falls ill or suffers an accident whilst overseas or requires travel or medical-related help, Healix’s dedicated in-house teams of doctors, nurses and case managers are on hand 24/7.
Their highly experienced specialists provide travellers with the highest quality of advice, support and assistance and an immediate response including emergency evacuation and repatriation.

Healix Pre Travel Advice

Even before the Trip commences Healix can help with the following advice on:

- customs regulations
- currency limits and rules
- banking procedures and hours
- health matters and inoculation requirements
- visa requirements and procedures

For no additional cost, Healix can provide a high level Country Travel Advice Report, which provides a generic overview of the medical facilities and care available for a given location along with the logistics involved in the provision of evacuation or repatriation procedures. (Please note that where an agent’s fee is incurred to obtain, this information will be chargeable.)

For a fee and at the Insured’s expense, Healix can provide a more detailed Medical Risk Briefing Report that provides an in depth evaluation of the available healthcare, resources, assets and logistics. These reports can be used to help address the Insured’s duty of care obligations.

Healix Medical Assistance

The Insured or an Insured Person can obtain immediate assistance by telephoning Healix. The 24/7 operations centre has:

- in house doctors and nursing staff
- a network of doctors and nurses throughout the world
- multi-lingual assistance case managers
- specialist travel agencies for immediate repatriation arrangements in the event of a medical problem

Healix Travellers Helpline

As well as medical assistance the Healix Travellers Helpline will provide the following assistance:

- advice on replacement of lost or stolen tickets passport or travel documents
- assistance in liaison with carrier on location of lost luggage items
- uninsured motoring assistance if the Insured Person’s vehicle breaks down on the way to an airport in the UK
- uninsured domestic assistance for the duration of the Trip - Healix will call out a tradesman to attend to an emergency at home but repairs and services necessary are payable by the Insured Person (with the exception of the cover provided under the Lost Keys Extension applicable to the B2.1 Personal Property and B2.2 Business Equipment Section) This service only applies where the Insured Person’s home is in the UK
- emergency message relay to family

Identity Theft Helpline

Over the phone preventative advice, to help an Insured Person safeguard their identity including guidance on measures to take to re-establish identity and credit rating.

To make a claim please go to page 6 for further information.

Essential Information Storage

To enable an Insured Person to securely store important text based information from documents such as passports, driving licence, travel and debit / credit card details and retrieve these details from a secure website in the event of the loss of these documents whilst travelling.

To subscribe to this service please go to www.myessentialinfo.com

Bereavement Advice and Counselling following an Insured Person’s death

Practical information and advice on how to:

- register a death and the documentation required by the Registrar
- locate a will
- obtain Grant of Probate or Letters of Administration
- decide whether to consult a solicitor
- select a funeral director
- obtain appropriate counselling for the family left behind and explain the role of the Coroner

Counselling following an insured Death or Disablement claim

With the prior written consent of the Company telephone or face to face counselling sessions are included as part of the claims service.

State Benefit Advice following an insured Disablement claim

Information and advice on the financial implications of long term absence from work due to injury

Information on entitlement to State Benefits

To make a claim for any of the Counselling benefits or for State Benefit Advice, please contact RSA claims as shown on page 6.

Travel and Security Assistance from Drum Cussac

Drum Cussac offer a range of services to meet the spectrum of travel and personal security challenges, ensuring every Insured Person is well prepared, has 24/7 access to security advice when travelling and an emergency response capability in the event of a crisis.

Drum Cussac is a specialist risk consultancy with offices on 4 continents. They provide advice and solutions that enable our Policyholders to manage and mitigate their business risks.

Recognised for their specialist expertise, innovative intelligence led approach and track record, their services and solutions deliver security improvements to business operations worldwide.

Drum Cussac Travel Security Advice

Even before you start planning an Trip. Drum Cussac can provide detailed advice about your destination via RiskMonitor Traveller, an advanced online country/city risk intelligence service.

Any of your employees will be able to self-register (so long as their email addresses include the pre-registered domain names or the University), to log on please follow this process:

1. Point your browser at https://www.drum-cussac.net/self-registration to begin the registration process. On this page you will be required to enter your full email address.

2. Once entered and submitted (so long as your email address matches the domain names registered by your parent organisation) you will receive an email reply from Drum Cussac, which includes a verification link.

3. On clicking the link, you will be taken to a new page to complete the self-registration process and then logged into the platform.
If you require any other security advice before travelling, or whilst in-country, please call the assistance line
+ 44 (0) 2086 084 100 and ask to speak with a security advisor.

**Drum Cussac Emergency Security Assistance**
In support of the following covers in this Policy:
- Political and Natural Disaster Evacuation
- Hijack, Kidnap and Ransom
- Crisis Containment Management

Assistance and support is given to our policyholders through:
- In house expert crisis management and response consultants
- In house security analysts
- A network of response teams and security professionals throughout the world
- In country assistance and deployable resources in support and response to any emergency situation
- Specialist agencies for immediate repatriation in the event of a non-medical emergency, natural disaster, terrorist attack or life threatening situations.
- Dedicated hijack kidnap and detention teams
- A variety of in house specialist security service resources

Our Policyholders can also access a range of uninsured services from Drum Cussac including:
- Crisis and Incident Response planning workshops and exercises
- Preparation of travellers undertaking travel to high risk areas
- General security related travel advice
- Close protection, planning and operational delivery

**Healix Travel Oracle App**
The Healix Travel Oracle provides a one touch assistance call button to put business travellers in touch with our 24/7 Medical and Security experts wherever they are in the world.

The App also provides:
- details of pre-travel advice, including personal and property security and identity protection
- access to Country Profiles
- a facility to receive alerts for specific countries
- a handy reminder of what information you will need to quote whenever you need support or assistance

To download the Travel Oracle App go to the Apple App Store or Google Play Store and search for Healix Travel Oracle.

Once downloaded please register using the following policy number: RTT306251

For more information ask your Insurance Broker for a copy of ‘A Guide to Travel Oracle Mobile App’.

**Second Medical Opinion Service**
In the event that an Insured Person (or their Partner or their Child) sustains an injury during the Period of Insurance, or contracts an illness which is diagnosed during the Period of Insurance, such Insured Person (or their Partner or their Child) can obtain a medical second opinion by telephoning the RSA Assistance Services on +44 (0) 2086 084 100.

Details of the current Medical Practitioner of the Insured Person (or their Partner or their Child) will be required. The Insured Person (or their Partner or their Child) is then required to request that their medical file be forwarded to the Service Provider by their Medical Practitioner (this may require the written authorisation). In the event that the service provider consider it is necessary for an Insured Person (or their Partner or their Child) they will pay for the cost of the first consultation (excluding the cost of travel and accommodation).

**Section B1.4 – Legal Expenses**

**The Cover**
If an Insured Person sustains injury during an Insured journey the Company will pay to the Insured on behalf of the Insured Person. Legal Expenses incurred by the Insured Person or their Legal Personal Representative in pursuit of compensation against the third party who has caused the injury.

The Company will pay up to a maximum of £50,000 Any One Claim to one Insured Person.

**Definitions applicable to Section B1.4**

Any One Claim
All Legal Proceedings including appeals arising from or relating to the same original cause or event.

Cigna Insurance Services (Europe) Limited (‘CISL’) handle claims on behalf of the Company.

Cigna Insurance Services (Europe) Limited is a third party service provider approved by Royal & Sun Alliance Insurance plc

Cigna Insurance Services (Europe) Limited 1st Floor, Chancery House St Nicholas Way Sutton, Surrey SM1 1JB Telephone: 0330 100 9516

**Injury**
Physical injury to or death disease or illness of the Insured Person.

**Legal Expenses**

A Any fees (other than those charged only on the successful outcome of the Legal Proceedings) expenses or other disbursements including costs and fees of expert witnesses reasonably incurred by the Legal Personal Representative in connection with the Legal Proceedings or in appealing or resisting an appeal against the judgement of any court in connection with any Legal Proceedings.

B Any costs payable by the Insured Person following an award of costs by any court and any costs payable following an out of court settlement to which CISL has agreed and which is made in connection with any Legal Proceedings.

Legal Personal Representative
A solicitor or other suitably qualified person appointed to act for the Insured Person or their legal personal representatives in any Legal Proceedings.

Legal Proceedings
The pursuit of a legal action in a civil court.
Claims Settlement Conditions applicable to Section B1.4

Arbitration
If there is a dispute between the Insured Person and the Company or CISL about this Section of the Policy it can be taken to an independent arbitrator. The arbitrator will be a solicitor or barrister whom the Insured Person and CISL agree to if CISL cannot agree with the Insured Person to an arbitrator the President of the Law Society (or similar organisation) will choose the arbitrator. The side that loses the arbitration will pay the costs of the arbitration if the decision is not totally in favour of one side the arbitrator will decide who pays the costs if the Insured Person loses or is asked to pay a share of the costs these costs will not be covered under this Section.

Co-operation
CISL must be able to contact the Legal Personal Representative. The Insured Person and the Legal Personal Representative must co-operate with CISL about developments concerning the Insured Person’s case. CISL must be able to have access to the Legal Personal Representatives files if CISL requests this. The Insured Person owes the same obligation to CISL as to the Legal Personal Representative.

Notification
The Company will have no liability in respect of Legal Expenses in respect of any matter which the Insured does not notify to the Company in accordance with the requirements of this condition.

As a condition precedent to the Insured’s right to be indemnified under this Policy the Insured must inform CISL by filing in a claim form immediately that the Insured is aware of any occurrence or event that may give rise to a claim, and sending the claim form to CISL at the address shown. The Insured must give CISL a full and truthful account of the details of the claim. Until CISL have been told about the claim and CISL has given its agreement, the Company will not be responsible for any Legal Expenses.

Payment of Bills
The Insured Person must send CISL all bills for the Legal Personal Representative’s Legal Expenses as soon as the Insured Person receives them. The Insured Person must confirm that any charges to be paid are acceptable and that CISL may pay the bill for the Insured Person if CISL asks the Insured Person to ask the Legal Personal Representative to submit the bill of costs for assessment or audit.

Recovery
The Insured Person and the Legal Personal Representative must take every step to recover Legal Expenses if the Company pays Legal Expenses up to the maximum for Any One Claim and the Insured Person pays more Legal Expenses to end the case. The Company and the Insured Person will share any Legal Expenses that are recovered. The Company and the Insured Person will each receive the same percentage as was paid.

Selection of the Legal Personal Representative
1. Outside the European Union: CISL shall have complete control over the Legal Proceedings and the selection appointment and control of any Legal Personal Representative.
2. For claims within the European Union:
   i) Where Court papers have been issued (or received) or where there is a conflict of interest, the Insured Person is free to choose a suitably qualified Legal Personal Representative.

   In selecting the Legal Personal Representative the Insured Person shall have a duty to minimise the cost of Legal Proceedings.

   CISL may choose not to accept a Legal Personal Representative chosen by the Insured Person if this occurs.

CISL will explain why if there is a disagreement over the choice in these circumstances the Insured Person may choose another suitably qualified person and submit the name of that person to CISL for consideration.

   ii) In all circumstances except those described in ii) above CISL shall choose a Legal Personal Representative to act on the Insured Person’s behalf.

If the Insured Person’s choice of Legal Personal Representative has to undertake work to familiarise themselves with the work already undertaken on the case the Insured Person will not be covered for this work to be done. The Insured Person must also confirm that their choice of Legal Personal Representative will not charge more than CISL’s choice of Legal Personal Representative. Unless the Insured Person agrees to pay this difference personally.

Any Legal Personal Representative is appointed in the Insured Person’s name to act on behalf of the Insured Person.

In the period before CISL agree that Legal Proceedings are necessary, CISL reserve the right to seek to obtain a settlement on the Insured Person’s behalf. The settlement will be subject to the Insured Person’s agreement which the Insured Person will not unreasonably refuse or withhold.

Settlement
The Insured Person must tell CISL if an offer is made to settle the Legal Proceedings and must not negotiate or agree to settle the dispute without having CISL’s agreement beforehand. If the Insured Person does not accept a reasonable offer the Company may not continue to support the claim.

Exclusions applicable to Section B1.4

The Company will not pay any Legal Expenses in respect of:
1. any Legal Expenses incurred either prior to the granting of support by CISL or without CISL’s written consent.
2. costs in excess of £100,000 where the same original cause event or circumstance gives rise to claims by more than two Insured Persons.
3. Legal Proceedings between any Insured Person and the Insured Person or any other Insured Person.
4. any claim where:
   a) there are not reasonable prospects of successfully pursuing or defending the Legal Proceedings or achieving a reasonable settlement or
   b) a reasonable estimate of the Insured Person’s total irrecoverable Legal Expenses is greater than the amount in dispute.

However where it is fair and reasonable to do so the Company may at CISL’s sole discretion offer the Insured Person a cash settlement in substitution for the reimbursement of Legal Expenses:
5. any costs relating to a claim or counterclaim made against the Insured Person by any other party.
6. fines damages or penalties of any nature.
7. any claim against CISL or the Company or any person or business acting on their behalf in respect of the cover terms conditions and limitations of this Policy or any service advice or arrangements given in connection with this policy.
8. any claim arising out of any wilful deliberate reckless or intentional action taken by an Insured Person.
9 **Legal Proceedings** undertaken in more than one country

10 any **Legal Proceedings** directly or indirectly caused by contributed to or arising from or in connection with any accident involving a mechanically propelled vehicle or trailer owned by the **Insured Person**

11 any **Legal Proceedings** in respect of which the **Insured** is or but for the existence of this Policy would be entitled to indemnity under any other insurance policy held by the **Insured** or any policy which the **Insured** is required to hold by law

12 the pursuit or defence of any action alleging defamation or malicious falsehood

13 the defence of civil **Legal Proceedings** made or brought against the **Insured** that arise out of or relate to

   a) the death disease or illness of or bodily injury to any person

   b) the actual or alleged breach of any duty owed as a Director or officer of any company

   c) the **Insured**’s profession trade or occupation

   d) the loss destruction or damage of or to any property This also includes loss of use of property which cannot be used because of the loss destruction or damage

14 **Legal Proceedings** in constitutional international or supranational Courts or tribunals other than the European Court of Justice and the Commission or Court of Human Rights

15 any consequence of **War**

16 **Terrorism** occasioned by **Nuclear Agent, Chemical Agent** or **Biological Agent**

**Section B1.5 – Personal Liability**

The **Company** will indemnify an **Insured Person** up to the **Sum Insured** on the **Schedule** for any legal liability incurred by that **Insured Person** during the **Operative Time** as the result of:

A) bodily injury, sickness or disease of any person, or

B) accidental loss or damage to the property of any person.

In addition the **Company** will pay all costs and expenses incurred with its written consent in connection with the defence of any claims against an **Insured Person** that are covered under this section of the policy.

**Provisions applicable to Section B1.5**

1 No admission of liability, offer, promise or payment will be made without the written consent of the **Company**.

2 The **Company** will, if it considers it necessary, take over and conduct the defence or settlement of any claim against an **Insured Person** and for that purpose can use the **Insured Person**’s name. The **Company** can conduct the defence however it sees fit. The **Company** can prosecute at its own expense and for its own benefit any claim for indemnity or damages against any other persons.

3 The **Insured Person** will give the **Company** full assistance in defending or prosecuting any claim and will provide the **Company** with any information and documents available to him.

**Exclusions applicable to Section B1.5**

The **Company** will not pay for any liability which is the result of:

1 **Bodily Injury** to, or sickness or disease of, any person who is under a contract of employment, service or apprenticeship with the **Insured** or an **Insured Person** when injury results from their employment by the **Insured** or an **Insured Person**;

2 **Bodily Injury** to, or sickness or disease of a travelling companion of the **Insured Person** on the same trip or journey;

3 liability arising directly or indirectly by or through, or in connection with, any mechanically propelled vehicle, aircraft or watercraft;

4 liability arising directly or indirectly by or through or in connection with:

   A) the ownership, possession or occupation of land, or buildings, immobile property or caravans other than occupying a temporary residence;

   B) any wilful, malicious or unlawful act;

   C) the carrying on of any trade, business or profession;

   D) any racing;

   E) through the use of firearms (other than sporting guns being used for sport);

5 accidental loss or damage to property belonging to, held in trust by, or in the custody or control of the **Insured** or an **Insured Person** or any of their employees or any member of an **Insured Person**’s family or household;

6 liability attaching to the **Insured** or an **Insured Person** under an express term of any contract, unless liability would attach to any **Insured Person** whether the express term existed or not;

7 liability for which payment should be more specifically claimed under any other contract of insurance in the name of the **Insured** or an **Insured Person**;

8 any claim where an **Insured Person** is suffering from a psychological condition or which results from an **Insured Person** being under the influence of or affected by a drug or drugs (other than drugs taken under the direction of a **Medical Practitioner**), alcohol, or solvents.

9 any claim resulting from sexually transmitted diseases.

**Section B2.1 – Personal Property and B2.2 Business Equipment**

The **Company** will reimburse the **Insured** the amount paid by the **Insured** to an **Insured Person** (or pay the **Insured Person** at the **Insured’s** request) for the cost of replacement or repair up to the **Sum Insured** on the **Schedule** if an **Insured Person** loses, has stolen or accidentally damages **Personal Property** or **Business Equipment** during the **Period of Insurance** and **Operative Time**. For **Business Equipment** the **Company** will only pay the **Insured**

**Provisions applicable to Section B2.1 and 2.2**

1 The **Company** will not pay more than £3,000 for any item unless the **Insured** or the **Insured Person** bears the first 25% of any amount in excess of £3,000 up to the replacement value of the item or the **Sum Insured**, if less.

2 The **Company** may at its discretion

   A) provide a direct replacement for electrical items, lost stolen or damaged; or

   B) request that the **Insured Person** sends a damaged electrical item to the **Company** (or an organisation appointed by the **Company** to act on their behalf) to undertake the repair
using new parts or refurbished parts that are equivalent to new in performance and reliability.

If a replacement is provided then, the Company

A) may provide the same model, not necessarily the same colour, that is equivalent to new in performance and reliability; or

B) an upgraded model for that item; and

C) if applicable install the latest standard manufacturer software and/or operating system.

If a repair is provided by the Company the Insured Person must follow the shipping instructions provided by the Company (or the organisation appointed by the Company to act on our behalf). If applicable the Insured Person must also ensure that software and data on the item is backed up as the Company will not be responsible for any loss of software or data on the item that may be lost as part of the repair process. The Insured Person will be responsible for re-installing software, data and passwords once the item is returned to them.

Definitions applicable to Section B2.1 and 2.2

Business Equipment

Any property (other than money, vehicles, vehicle parts or accessories) required for the Insured Person to undertake their duties for the Insured that are the property of the Insured and for which the Insured Person is responsible that are taken on or obtained during the Business Trip.

Personal Property

Property owned by or in the custody or control of an Insured Person other than Business Equipment.

Extensions applicable to Section B2.1 and 2.2

1. Lost keys

If an Insured Person loses or has stolen the keys to their main home or motor vehicle in the United Kingdom or their Permanent Country of Residence whilst on a Trip the Company will pay for the cost of replacement keys or the cost (parts and labour) of replacing the lock(s) up to a maximum of £250. The Company can help in sourcing tradesman, however the Company will not arrange for the work to be carried out. Please refer to section B1.3 for contact details.

2. Replacement travel documents

If the Insured Person loses, has stolen or damages their passport, visa, travel tickets or other essential travel documents whilst on a Trip the Company will pay the Insured or an Insured Person up to £500 for the reasonable and necessary additional travel and accommodation and the costs of replacing the lost or damaged items. The Company can help with replacement passports and visas plus travel and accommodation alterations. Please refer to section B1.3 for contact details.

3. Temporary loss of personal property

If the Insured Person’s Personal Property is temporarily lost for more than four hours during the outward or onward journeys of the Trip, the Company will pay up to £1,000 towards the cost of buying essential and reasonable replacement items. If the Personal Property which has been temporarily lost becomes permanently lost and this results in a claim, the Company will deduct the amount already paid for temporary loss from the payment.

Exclusions applicable to Section B2.1 and 2.2

The Company will not pay claims for:

1. Loss due to chipping, scratching or breakage of glass, china or other fragile articles, unless due to fire, theft or accident to the conveyance in which they were being transported.

2. Loss or damage due to:

   A) moth, vermin, wear and tear, atmospheric or climatic conditions or gradual deterioration,

   B) mechanical or electrical failure or breakdown,

   C) any process of cleaning, dying, restoring, repairing or alteration,

3. Loss of Money (as defined under Section B3), bonds, negotiable instruments and securities of any kind.

4. Loss or damage caused by delay, detention or confiscation by order of any Government or Public Authority.

5. Loss of or damage to vehicles (other than bicycles), their accessories or spare parts (other than keys extension above),

6. Loss of or damage to Personal Property (as defined under Section B2.1) sent as freight or under an airway-bill or bill of lading.

Section B3 – Personal Money

The Company will indemnify the Insured or an Insured Person for loss or theft of Money, or financial loss suffered as the result of fraudulent use of credit, debit or charge cards during the Operative Time, up to the Sum Insured on the Schedule.

Definition applicable to Section B3

Money

Coins, bank or currency notes, bankers drafts, bills of exchange, letters of credit, luncheon vouchers, credit, debit or charge cards, phone cards, postal or money orders, traveller’s cheques, travel tickets, petrol or other coupons with a monetary value, or credit vouchers which belong to or are in the custody and control of an Insured Person and are intended for travel, meals, accommodation and personal expenditure only.

Extension applicable to Section B3

Foreign currency and travellers cheques purchased for a Trip are covered from the time of collection or 120 hours prior to departure on the Trip whichever occurs last and up to 120 hours after completion of a Trip or until deposited or cashed, whichever happens first.

Exclusions applicable to Section B3

The Company will not pay any claim for:

1. Any loss of cash in excess of £3,000 unless the Insured or an Insured Person bears the first 25% of any amount in excess of £3,000, up to the value of the cash loss or the Sum Insured if less.

2. Loss or theft of a credit card, charge card or cash card, which results in fraudulent use, unless the Insured or an Insured Person has complied with all the terms and conditions under which the card was issued.

3. Shortages of Money due to confiscation or detention by Customs or other Officials, error, omission and depreciation in value.
Section B4.1 – Cancellation, Curtailment, Rearrangement, Replacement, Missed Departure & Travel Delay

The Company will reimburse the Insured up to the Sum Insured on the Schedule for this section if a Trip during the Operative Time and Period of Insurance is cancelled, curtailed, rearranged, is altered or disrupted as specified below as a direct result of any cause outside the Insured’s or Insured Person’s control, unless the cause is a Natural Catastrophe, in which case the terms of the cover under section B4.2 will apply.

Cancellation or Curtailment

Where the Trip has to be cancelled prior to departure or cut short following departure the Company will pay the cost of irrecoverable deposits and advanced payments for transport and accommodation costs which have been paid or will be payable, or become payable under contract, or cannot be recovered elsewhere.

Rearrangement

When pre-booked travel arrangements in connection with a Trip have to be altered, including Missed Departure and Missed International Connection, the Company will pay for the additional costs of travel and accommodation that are reasonably and necessarily incurred to enable the Insured Person to continue the Trip or return to the United Kingdom or Permanent Country of Residence.

Replacement

Where a Trip has to be cut short, the Company will pay for the additional costs necessarily incurred for travel and accommodation up to the Sum Insured shown on the Schedule less any amount recoverable elsewhere:

A. to return an Insured Person to the United Kingdom or Permanent Country of Residence; and

B. to send one replacement person to assume the duties of the original Insured Person.

Travel Delay

If the departure of the ship, aircraft or train on which an Insured Person is booked to travel in order to get to their planned destination at the commencement or completion of a Trip is delayed due to strike, industrial action, adverse weather conditions or mechanical breakdown, the Company will pay £50 per hour in excess of 4 hours delay up to a maximum of £500 to the Insured or an Insured Person for additional reasonable expenses incurred for travel, accommodation, food and drink costs, that are not recoverable elsewhere or under any other section (or sub-section) of this policy.

Extension applicable to section B4.1

If a Director or Employee of the Insured resigns or has their employment terminated more than 31 days prior to a pre-booked Trip, the Company will reimburse the Insured for all deposits and advance payments in respect of transport and accommodation costs incurred due to the cancellation of the Trip, less any expenses recoverable elsewhere.

Definitions applicable to Section B4.1

Conveyance

An aircraft, ship, train, coach, or similar means of transport which operates under a scheduled published timetable.

Missed Departure

The failure of a Conveyance in which an Insured Person is travelling in order to reach the departure point at the beginning of a Trip for a journey that involves travel outside the United Kingdom or the Insured Person’s Permanent Country of Residence.

Missed International Connection

The failure of a Conveyance in which an Insured Person is travelling to arrive at its destination airport, port or station outside the United Kingdom or an Insured Person’s Permanent Country of Residence at the published expected time of arrival which results in an Insured Person arriving too late to board an onward connecting aircraft, ship or train on which an Insured Person is booked to travel.

Natural Catastrophe

Volcanic eruption, flood, tsunami, earthquake, landslide, hurricane, tornado and wildfire.

Exclusions applicable to Section B4.1

The Company will not pay any claim as the result of:

1. a Natural Catastrophe.

2. the Insured Person deciding not to travel prior to commencement, unless this decision is made as a result of Foreign and Commonwealth Office advising against all but essential travel (or other similar advice for Insured Persons not resident in the United Kingdom) and the advice had not been given before the Trip was booked;

3. the Insured Person if on a Trip, deciding not to continue;

4. redundancy of an Insured Person or the termination of an Insured Person’s contract of employment within 31 days of the Trip departure date or once a Trip has started;

5. the Insured’s or an Insured Person’s financial circumstances;

6. the default of any provider (or their agent) of transport or accommodation acting for the Insured or an Insured Person;

7. regulations made by any public authority or government or persons with the authority under legislation or licence to make regulations;

8. a claim that is recoverable under section B7 – Political and Natural Disaster Evacuation;

9. for the delayed departure of the ship, aircraft or train on which an Insured Person is booked to travel, due to strike, labour dispute, mechanical breakdown or failure of a means of transport, where the delay lasts for less than 24 hours;

10. for the delayed departure of the ship, aircraft or train, due to strike or industrial action which existed or for which advance warning had been given before the date on which the Trip was booked;

11. curtailment on medical grounds that is not based on the recommendation of a Medical Practitioner and which does not also result in a valid claim under sections B1.1 or B1.2.
12. The delay of a ship, aircraft or train, if
   A) the Insured Person fails to check in according to the itinerary supplied unless the failure was itself due to strike or industrial action or
   B) the delay is due to the withdrawal from service temporarily or permanently of any ship, aircraft or train on the orders or recommendation of any port authority, rail authority or the Civil Aviation Authority or any similar body in any country.

Section B4.2 - Cancellation, Curtailment, Rearrangement & Travel Delay due to a Natural Catastrophe
The Company will reimburse the Insured up to the Sum Insured on the Schedule for this section if a Trip during the Operative Time and Period of Insurance is cancelled, curtailed, rearranged, altered or disrupted as specified below as a direct result of a Natural Catastrophe.

Cancellation or Curtailment
Where the Trip has to be cancelled prior to departure or cut short following departure the Company will pay the cost of irrecoverable deposits and advanced payments for transport and accommodation costs which, have been paid or will be payable, or become payable under contract, or cannot be recovered elsewhere.

Rearrangement
When pre-booked travel arrangements in connection with a Trip have to be altered following departure, the Company will pay for the irrecoverable additional costs of travel and accommodation that are reasonably and necessarily incurred to enable the Insured Person to continue the Trip or return to the United Kingdom or Permanent Country of Residence.

Travel Delay
If the departure of the scheduled ship, aircraft, vehicle or train on which an Insured Person is booked to travel in order to get to their planned destination at the start, during or on completion of a Trip is delayed as a result of a Natural Catastrophe, the Company will pay £50 per hour in excess of 4 hours delay up to a maximum of £500 to the Insured or an Insured Person for additional reasonable expenses incurred for travel, accommodation, food and drink costs, that are not recoverable elsewhere or under any other section (or sub-section) of this policy.

Extension applicable to section B4.2
Any costs in respect of the rental of a motor vehicle and/or chartering of a non-scheduled ship and/or aircraft will be covered up to the Sum Insured stated on the Schedule, provided the Insured or the Insured Person bears 50% of any amount in excess of the first £500 for each Insured Person.

Definitions applicable to section B4.2
Natural Catastrophe
Volcanic eruption, flood, tsunami, earthquake, landslide, hurricane, tornado and wildfire.

Exclusions applicable to section B4.2
The Company will not pay any claim as the result of:
1. a Natural Catastrophe that has occurred during the 30 days immediately prior to the Insured or an Insured Person pre-booking travel arrangements in connection with a Trip, if the Trip is cancelled, altered or delayed during the 14 days immediately following the date on which the Trip is booked as a result of that or a related Natural Catastrophe.
2. a claim made under section B4.2 if the Insured or an Insured Person makes a Valid Claim under section B4.1 which originates from the same loss.
3. a claim that is recoverable under section B7 - Political and Natural Disaster Evacuation.
4. the Insured Person deciding not to travel or, if on a Trip, deciding not to continue.
5. the Insured's or an Insured Person's financial circumstances;
6. the default of any provider (or their agent) of transport or accommodation acting for the Insured or an Insured Person;
7. strike or labour dispute.

Section B5 - Hijack
The Company will pay £500 for each complete day that an Insured Person is forcibly or illegally detained as the result of a Hijack which starts during the Period of Insurance up to a maximum of £25,000.

Definitions applicable to Section B5
Hijack
The unlawful seizure of, or wrongful taking control of, an aircraft, ship, bus, licenced taxi or train in which an Insured Person is travelling.

Section B6 – Kidnap and Ransom
The Company will reimburse the Insured for any Ransom Monies and Consultant Costs incurred solely and directly as a result of Kidnap or Kidnap for Ransom or Hostage of an Insured Person occurring during the Period of Insurance. In addition the Company will pay reasonable and necessary expenses incurred and paid by the Insured or an Insured Person solely and directly as a result of Kidnap, Kidnap for Ransom or Hostage.

The maximum payable under this section is £250,000 in the annual aggregate for all losses under this policy occurring during each Period of Insurance in respect of Ransom Monies and expenses, and £50,000 in the annual aggregate in respect of Consultant Costs.

Conditions applicable to Section B6
1. The Company shall not be deemed to provide cover and the Company shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the Company, the Company's parent company or the Company's ultimate controlling entity to any sanction, prohibition, restriction or any applicable anti-terrorism legislation or regulation under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, or the United States of America or the United Kingdom.
2 Any benefit or claim under this section will not be covered to the extent that the provision of cover, payment of a claim or provision of a benefit would be contrary to the laws of any country where cover is provided.

3 If an incident occurs which may result in a covered event the Insured must contact the Assistance phone line available globally twenty-four hours a day, seven days a week on the following number:

WORLDWIDE: +44 (0) 2086 084 100

If the phone line has not been contacted, then no claim will be paid.

Definitions applicable to Section B6

Consultant Costs

Reasonable fees and expenses of the Company’s chosen Consultants incurred during response to a Kidnap for Ransom, including but not limited to costs of travel, accommodation, qualified interpretation, communication, and payments to informants.

Hostage

The detention of an Insured Person by a third party who threatens to kill, injure or continue to detain an Insured Person in order to compel a state, international organisation or person to do or abstain from doing any act.

Kidnap

The seizing, detaining or carrying away by force or fraud of one or more Insured Persons (except a child by its parent or guardian) by a third party without the consent of an Insured Person and without lawful excuse.

Kidnap for Ransom

Any event or connected series of events of seizing, detaining or carrying away by force or fraud of one or more Insured Persons (except a child by its parent or guardian) for the purpose of demanding cash, monetary instruments, bullion, or the fair market value of any securities, property or services.

Ransom Monies

Cash, monetary instruments, bullion, or the fair market value of any securities, property or services.

Exclusions applicable to Section B6

The Company will not be liable for any claim that is the result of:

1 The fraudulent, dishonest, or criminal acts of the Insured, or any person authorised by the Insured to have custody of Ransom Monies. This exclusion will not apply to the payment of Ransom Monies by the Insured in a situation where local authorities have declared such payment illegal.

2 An Insured who has had kidnap insurance cancelled or declined in the past.

3 Any claim for an Insured Person within their Permanent Country of Residence.

4 Any Kidnap or Kidnap for Ransom which occurs in Afghanistan, Colombia, Iraq, Mexico, Nigeria, Pakistan, Philippines, Somalia, Venezuela or Yemen.

5 Any amount of money that the Insured becomes legally liable to pay as the result of any legal action for damages including legal costs incurred by the Insured in defence of such action, resulting from alleged negligence or incompetence in Hostage retrieval operations or negotiations following the Kidnap of an Insured Person or alleged negligence in not preventing the Kidnap of an Insured Person.

6 Any amount of money, property or other consideration surrendered to any person other than those responsible for making a previously communicated Ransom demand to an Insured or any person authorised to act on behalf of an Insured.

Section B7 – Political and Natural Disaster Evacuation

The Company will reimburse the Insured for Evacuation and Repatriation Costs and for Expenses due to Political Evacuation, Natural Disaster or Political Instability for an Insured Event which occurs during the Period of Insurance and Operative Time. The maximum the Company will pay under this section is £50,000 for any one event and £100,000 in all (aggregate limit) in any one 12 month Period of Insurance for Evacuation and Repatriation Costs and a further £150 per Insured Person per day for a maximum of thirty days for Expenses.

Additional condition applicable to section B7

If an incident occurs which may result in an Insured Event the Insured has the option to contact the Assistance phone line available globally twenty-four hours a day, seven days a week on the following number:

WORLDWIDE: +44 (0) 2086 084 100

Definitions applicable to section B7

Advisory

A formal recommendation by the Appropriate Authorities that an Insured Person specifically leave the Host Country or that a class of persons which include an Insured Person leave the Host Country.

Appropriate Authorities

Any legally empowered regulatory, governmental or local authority of the Home Country.

Evacuation and Repatriation Costs

Reasonable costs incurred by the Insured or an Insured Person for the emergency evacuation of an Insured Person within thirty days prior to an Insured Event and ten days after an Insured Event to the nearest place of safety, or for the repatriation of an Insured Person to their Home Country and returning the Insured Person back to the Host Country when the situation has stabilised and when the Local Authorities advise it is safe to do so. Evacuation costs will be paid once per Insured Person per Insured Event.

Expenses

The costs of accommodation, transportation, food, and any other reasonable and necessary expenses for up to thirty days until such time as an Insured Person can be repatriated to their Home Country.

Home Country

The country in which the Insured is based as specified on the Schedule or the country of citizenship of the Insured Person.

Host Country

Any countries in which an Insured Person is employed or has travelled to.

Insured Event

Any occurrence described under Political Evacuation, Natural Disaster or Political Instability.
Natural Disaster
A volcanic eruption, flood, tsunami, earthquake, landslide, hurricane, tornado and wildfire in the particular country or region in which the Insured Person is travelling.

Political Evacuation
An Insured Person being expelled or declared “persona non grata” (an unwelcome person) on the written authority of the recognised government of a Host Country, or the wholesale seizure, confiscation or expropriation of the property, plant or equipment of the Insured.

Political Instability
Political or military events involving a Host Country such that the Appropriate Authorities issue an Advisory ordering the departure of all Home Country governmental personnel in non-emergency positions and their dependants from the Host Country, or such that the Insured receives direct instructions or recommendation to evacuate from the Appropriate Authorities. All such interrelated events will be considered a single event and all losses arising from it will be considered a single loss.

Provisions applicable to section B7
1 Where the Insured Person is entitled to a refund on an unused ticket, the Company will be entitled to deduct the value of the unused portion from any claim.
2 Where the Insured Person holds a valid return ticket to the United Kingdom or Permanent Country of Residence or to another place of safety that could be reasonably used, the Company will only pay for any additional costs necessarily incurred to evacuate the Insured Person.

Exclusions applicable to section B7
The Company will not be liable for any claim:
1 arising from or attributable to an alleged violation of the laws of the Host Country by the Insured or by an Insured Person.
2 which results from failure of the Insured or an Insured Person to maintain and possess duly authorised and issued required documents and visas, if it is found that such allegations were intentionally false, fraudulent and malicious and made solely to achieve a political, propaganda and/or coercive effect upon or at the expense of the Insured or an Insured Person.
3 arising from or attributable, in whole or in part, to a debt, insolvency, commercial failure, the repossession of any property by any title holder or lien holder or any other financial cause.
4 arising from or attributable, in whole or in part, to non-compliance by the Insured or an Insured Person with any obligation specified in a contract or license or failure by the Insured or an Insured Person to provide bond or other security because of any liability assumed by the Insured or an Insured Person under any contract, whether written or oral, unless the Company’s specific consent is endorsed on this policy prior to an Insured Event.
5 arising from or attributable, in whole or in part, to the implementation of currency exchange rates by a legally constituted authority.
6 if an Insured Person is a citizen of the Host Country.
7 where an Insured Person has travelled to a country or region where the United Kingdom Foreign and Commonwealth Office has prior to the start of the Trip advised against “all but essential travel” (or other similar advice for Insured Persons not resident in the United Kingdom);
8 after the commencement of a Trip where an Insured Person has not reasonably complied with any warnings to leave or evacuate the country or region to which they have travelled where such warnings have been provided by the United Kingdom Foreign and Commonwealth Office (or other similar advice for Insured Persons not resident in the United Kingdom) or any legally empowered, regulatory, governmental or local authority for the country or region to which the Insured Person has travelled and such failure has resulted in a claim under this section.

Section B8 – Vehicle Rental Excess
The Company will reimburse the Insured up to the amount shown on the Schedule if an Insured Person whilst on a Trip during the Operative Time and Period of Insurance loses by theft, or damages a Rental Vehicle for their legal liability to pay the excess or deductible amounts stated in the Rental Agreement.

Additional definitions applicable to section B8
Rental Agreement
A licensed rental vehicle hire agreement and associated insurance policy supplied by a company licensed by the appropriate legal body in the country in which they operate to offer vehicles for rent.

Rental Vehicle
Any vehicle rented by an Insured Person under a Rental Agreement for a period of less than 60 consecutive days outside the United Kingdom or an Insured Person’s Permanent Country of Residence.

Additional provision applicable to section B8
The maximum the Company will pay under this section of the policy is £1,000 for each event and £25,000 in all (aggregate limit) in any one Period of Insurance.

Additional condition applicable to section B8
The Insured Person must inspect the Rental Vehicle before taking charge of it for existing damage.

Exclusions applicable to section B8
This section of the policy does not cover any claim:
1 arising out of the use of the Rental Vehicle outside the terms of the Rental Agreement.
2 where an Insured Person has elected not to take out any insurance offered to cover the Rental Vehicle as part of the Rental Agreement.
3 for any damage to the Rental Vehicle where it cannot be proven that the damage arose during the course of the Rental Agreement.
4 for loss or damage caused deliberately by an Insured Person.
5 for loss or damage caused to the tyres of the Rental Vehicle.
6 for loss or damage arising out of failure to maintain the Rental Vehicle according to the manufacturer’s service schedule: wear and tear, gradual deterioration, mechanical or electrical failure not attributable to accidental damage and damage that existed at the commencement of the rental period.
7 Section C – Crisis Containment Management

The Company will reimburse the Insured for Crisis Consultant fees and costs incurred as a direct result of a Crisis which starts during the Period of Insurance and is reported to the Company in accordance with this cover. Any fees and costs will be approved and paid by the Insured and submitted to the Company for approval and reimbursement under this policy. Crisis Consultant costs are limited to fees or costs which are incurred within the Crisis Coverage Period subject to an aggregate limit of £50,000 per Crisis or all Crises which start during the Period of Insurance.

Definitions applicable to Section C

Adverse Publicity

Any negative reporting of an Insured Event in local, regional or national media (including but not limited to radio, television, newspaper and/or magazines) which has potential to cause a Material Interruption.

Crisis

Any decisive, unstable or crucial time in the Insured’s affairs or business resulting from an Insured Event that:

i) has directly caused a Material Interruption or;

ii) has the potential to cause:

A) imminent Financial Loss, or

B) Adverse Publicity

for the Insured if left unmanaged.

Crisis Consultant

Drum Cussac, third party service providers approved by the Company for use by the Insured in connection with a Crisis.

Crisis Coverage Period

The period of time commencing when the Crisis is first reported to the Company and ending not later than thirty days thereafter.

Financial Loss

i) within a 48 hour period, the price per share of the Insured’s common stock decreases by 10% net of the change in the Standard & Poor’s Composite Index or any other comparable index used to measure the stock exchange in which the Insured lists its common stock; or

ii) a decrease greater than 20% in the consolidated revenues of the Insured.

Insured Event

A notification of a potential claim under Section A or B of this policy.

Material Interruption

A disruption or break in the continuity of the Insured’s normal business operations, which:

i) requires the direct involvement of all of the Insured’s board of directors or senior executives and diverts their concentration from their normal operating duties; and

ii) is likely to have a significant negative impact on the Insured’s revenues, earnings or net worth.

Conditions applicable to Section C

1 Any Crisis arising out of, based upon or attributable to related, continuous or repeated notifications under Sections A & B of the policy will be considered a single Crisis.

2 The Insured must give immediate notice to the Company of any Crisis by telephoning the Assistance phone line available globally twenty-four hours a day, seven days a week on the following number:

WORLDWIDE +44 (0) 2086 084 100 (24 Hour)

Any event that meets the following conditions must be reported to the Company in the time period indicated:

A) any event that results in regional or national media coverage (print, radio or television) and relates to an Insured Event must be reported to the Company within 24 hours of the media coverage, if the Company has not previously been notified of the event by the Insured.

B) any event that results in the filing of a claim or litigation against the Insured and relates to an Insured Event must be reported to the Company within 48 hours of the claim/litigation filing, if the Company has not previously been notified of the event by the Insured.

No claim will be paid if the Company is not notified as described above.

Provision applicable to Section C

The Insured will bear 20% of the cost of each Crisis which will remain uninsured. The Company will reimburse the Insured subject to the aggregate limit of liability after deducting 20% from the amount of the incurred Crisis Consultant costs.

Exclusions applicable to Section C

The Company will not be liable for any claim directly or indirectly caused by or resulting from:

1 Circumstances that affect the industry in which the Insured conducts its business activities;

2 Governmental regulations which affect another country or the industry in which the Insured conducts its business activities;

3 Changes in population, customer tastes, economic conditions, seasonal sales variations, or competitive environment;

4 Any fraudulent act committed by any of the Insured’s senior executives;

5 a crisis occurring in Afghanistan, Colombia, Iraq, Mexico, Nigeria, Pakistan, Philippines, Somalia, Venezuela, Yemen or any other region or country to which the Insured Person has travelled where the United Kingdom Foreign and Commonwealth Office has advised against “all travel” (or other similar advice for Insured Persons not resident in the United Kingdom) prior to the commencement of the Trip.
Additional Endorsements

Unless specifically agreed otherwise, the following endorsements to the policy will apply when the policy includes cover for the Insured Persons specified.

1 Long Term Secondees

Where cover extends to include cover for an Insured Person on Trip scheduled to last for more than 12 months, the following additional restrictions will apply in respect of Section B, benefit items B1.1 - Medical And Emergency Travel Expenses and B1.2 - Rescue Expenses.

The Company will not be liable for any claim directly, indirectly or attributable to:

1. Any condition from which the Insured Person is known to be suffering and/or for which an in Insured Person has received professional treatment or consultation during the 24 months preceding the date of the incident.
2. Service or treatment at any long term care facility, Spa, Hydro Clinic or sanatorium that is not a hospital.
3. Routine medical examinations (including vaccinations, the issue of medical certificates and attestations).
4. Routine eye and ear examinations including the cost of spectacles, contact lenses and hearing aids.
5. Any dental treatment which is not emergency dental treatment, prosthesis, corrective devices and medical appliances, false teeth, crowns, inlays and bridges, orthodontic and endodontic dental care.
7. Treatment of mental illness or psychiatric disorders.
8. Progressive or congenital disorders or corrective disorders which were known to exist at the cover commencing date.
9. Treatment by a family member.
10. Treatment that is not scientifically recognised.
11. Treatment resulting from participation in War, riot, civil commotion or any illegal act including resultant imprisonment.
12. All costs relating to pregnancy or childbirth or resultant sickness or illness other than where necessitated by Bodily Injury or for emergency treatment following either pregnancy related illness or complications.
13. Insured Trip or Business Trip taken against advice of a qualified Medical Practitioner.
14. Where an Insured Trip or Business Trip is specifically undertaken to have treatment.
15. Any claim where the Insured Person is suffering from a psychological disorder or which results from an Insured Person being under the influence of or affected by a drug(s) or alcohol (other than that taken under the direction of a Medical Practitioner) or solvents.
16. Flying other than as a passenger.

17. Intentional self-inflicted injury or any attempt thereat.
18. Elective cosmetic surgery.
19. The first £100 of each and every claim.

2 Temporary Total Disablement and Temporary Partial Disablement for Students

Where cover extends to include cover for an Insured Person who is a Student and Section A – Personal Accident, item 5 Temporary Total Disablement and/or item 6 Temporary Partial Disablement is shown as being included on the Schedule the following will apply

1. The amount payable will be the Sum Insured shown on the Schedule or £250 per week whichever is the lesser.
2. The amount payable for item 5 Temporary Total Disablement will be limited to incidental costs incurred for Out of Pocket Expenses as a consequence of accidental bodily injury resulting in Temporary Total Disablement.
3. No benefit will be payable under item 6 Temporary Partial Disablement.

For the purposes of this endorsement, the following definition is added to the Definitions applicable to Section A:

Out of Pocket Expenses

Additional costs incurred by an Insured Person.
Complaints Procedure

Our Commitment to Customer Service

At RSA we are committed to going the extra mile for our customers. If you believe that we have not delivered the service you expected, we want to hear from you so that we can try to put things right.

Our promise to you

We will:

• Acknowledge all complaints promptly
• Investigate quickly and thoroughly
• Keep you informed of progress
• Do everything possible to resolve your complaint
• Ensure you are clear on how to escalate your complaint, if necessary

Step 1

If your complaint relates to your policy, then please contact Alison Payne on 0117 927 4753 or Val Corrigan on 0117 9274875. If your complaint relates to a claim, then please call our Claims Manager on 0330 102 4093.

We aim to resolve your concerns on an informal basis, within three business days. Where we have been able to, we will send you a letter confirming this. We'll also explain how you may be able to refer the matter to the Financial Ombudsman Service if you subsequently decide that you are unhappy with the outcome.

Step 2

In the unlikely event that we are unable to resolve your concerns through our informal complaints process, our Customer Relations Team will then review the matter on behalf of our Chief Executive. Once our Customer Relations Team have reviewed your complaint they will send you a final decision in writing within 8 weeks of the date we received your complaint.

Our Customer Relations Team’s contact details are as follows:

Post: RSA Customer Relations Team
P O Box 255
Wymondham
NR18 8DP

Email: crt.halifax@uk.rsagroup.com

If you are still not happy

If you are still unhappy after our Customer Relations Team’s review, or you have not received a written offer of resolution within 8 weeks of the date we received your complaint, you may be eligible to refer your case to the Financial Ombudsman Service. The Financial Ombudsman Service is an independent body that arbitrates on complaints. They can be contacted at:

Post: Financial Ombudsman Service
Exchange Tower
Harbour Exchange Square
London
E14 9SR

Telephone: 0800 0234567 (free from standard land line, mobiles may be charged)
0300 1239123 (same rate as 01 or 02 numbers, on mobile phone tariffs)

Email: complaint.info@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk

You have six months from the date of our final response to refer your complaints to the Financial Ombudsman Service. This does not affect your right to take legal action, however, the Financial Ombudsman Service will not adjudicate on any case where litigation has commenced.
Fair Processing Notice

How we use your Information
Please read the following carefully as it contains important information relating to the details that you have given us. You should show this notice to any other party related to this insurance.

Who we are
This product is underwritten by Royal & Sun Alliance Insurance plc. You are giving your information to Royal & Sun Alliance Insurance plc, which is a member of the RSA Group of companies (the Group). In this information statement, ‘we’ ‘us’ and ‘our’ refers to the Group unless otherwise stated.

How your information will be used and who we share it with
Your information comprises of all the details we hold about you and your transactions and includes information obtained from third parties.

We may use and share your information with other members of the Group to help us and them:

• Assess financial and insurance risks;
• Recover debt;
• Prevent and detect crime;
• Develop our services, systems and relationships with you;
• Understand our customers’ requirements;
• Develop and test products and services

We do not disclose your information to anyone outside the Group except:

• Where we have your permission; or
• Where we are required or permitted to do so by law; or
• To credit reference and fraud prevention agencies and other companies that provide a service to us, our partners or you; or
• Where we may transfer rights and obligations under this agreement.

Sensitive Information
Some of the information we ask you for may be sensitive personal data, as defined by the Data Protection Act 1998 (such as information about health or criminal convictions). We will not use such sensitive personal data about you or others except for the specific purpose for which you provide it and to carry out the services described in your policy documents. Please ensure that you only provide us with sensitive information about other people with their agreement.

How to contact us
On payment of a small fee, you are entitled to receive a copy of the information we hold about you. If you have any questions, or you would like to find out more about this notice you can write to: Data Protection Liaison Officer, Customer Relations Office, RSA, Bowling Mill, Dean Clough Industrial Estate, Halifax HX3 SWA