

Staff Absence 2017

Significant Features and Benefits

This policy summary is to help you understand the cover that your insurance provides. It details the key features, benefits, limitations, and exclusions, but you still need to read the policy wording, schedule and any endorsements for a full description of the terms of the insurance. The levels of cover and excesses which apply to your insurance are detailed on your schedule. This policy summary does not form part of the policy wording.

Policy Cover

- Bodily Injury or Sickness: from the first day of absence after the claim-waiting period for up to 190 days.
- Maternity Benefit: as a lump sum benefit upon return to work of the Insured Person or as a Daily Benefit paid during maternity leave.
- Bereavement Benefit: due to the death of a Direct Relative up to five working days.
- Jury Service and attendance at court as a witness: up to five working days.
- Adoption and Paternity Benefit: for paternity or adoption leave up to five consecutive working days.
- Blood / Organ Donation Cover.
- Stranded Staff: up to five days.
- Death in service: up to 30 days.
- Union Duties/ LEA training: one day per term.
- Phased Returns: payment of 50% of the daily benefit for 10 working days after the commencement of a phased return of an Insured Person, providing that the absence exceeds 30 term days after deduction of the Waiting Days.

Further details of the cover options available to you, including maximum benefit amounts, are given in the specimen policy.

Stress Cover

Staff Cover is based on the following option chosen:

0 Days Stress Cover

all stress related claims will be excluded.

30 Days Stress Cover

includes 30 day stress cover for every person insured.

190 Days Stress Cover

stress cover for the duration of the policy for every Insured Person.

Full details of the benefits and exclusions concerning stress related illness are set out in the specimen policy.

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Significant Exclusions

- Any condition or ailment, where the Insured Person has been Absent from work or study for more than five Working Days in the last 12-month period immediately preceding their Start Date of Cover for the related condition. This does not include Minor Ailments or non-recurring conditions.
- The undergoing of any planned or recommended Medical Procedure for which an Insured Person, had not been symptom/treatment free in relation to the condition for a period of 24 months prior to their Start Date of Cover or the last Renewal Date. This does not include routine screening.
- Absence claims for five Working Days or longer where the Absence relates to a Stress Related Illness, where not reported to the Claims Administrator within 14 Calendar Days after the first full date of Absence.
- Maternity claims not reported to the Claims Administrator within 26 weeks from the conception date.
- Absence claims where the Insured Person is undergoing or facing the prospect of undergoing any disciplinary, competency, capability, appraisal or suspension procedures.
- Absence claims not reported to us within 20 Working Days after the first full date of Absence.
- Absence claims where all the claims information (self-certification, fitness for work certification and Section C forms from the Insured Person's Doctor).

Significant Limitations - Staff Absence

- If any claim for an Insured Person exceeds 100 Working Days, the Daily Benefit will be reduced by 50% for the remainder of the Benefit Period.
- Medical Conditions arising directly or indirectly from the provision of care for Direct Relatives or Medical Conditions caused or contributed to by the illness or injury of Direct Relatives shall be limited to 10 days.

Insurer Details

Great Lakes Reinsurance (UK) SE.

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

These details may be checked on the Financial Services Register at: www.fsa.gov.uk/register/home.do

Cancellation Provisions

You may cancel this Policy within 14-days of the date that You instruct the Scheme Administrators to proceed with arranging Your cover and if no claim has been made Your Premium will be refunded in full.

Complaints Provision

It is always the intention to provide a first class service. However, if the Insured or the Insured Person has cause for complaint the procedure described here should be followed and Absence Protection Limited will be pleased to give any additional information or advice that may be needed.

The complaint should be addressed to:

The Compliance Officer, Absence Protection Ltd, 2 Regent Street, Knutsford, Cheshire, WA16 6GR.
