



INSURANCE

This note is intended to summarise insurance cover for pupils at Elizabeth College, making clear what is included and excluded, thus highlighting the areas of parental responsibility. Further detail is included within the Annexes. It is important to emphasise two key points, namely:

- a. Any incident, which may lead to a potential claim on the College's insurance, should be notified to the College as early as practical, so they can register the matter with the Insurance Company, even if details and costs are not yet known.
- b. Potential claims can vary on the specific circumstances, so the College will often seek early guidance from the Insurance Company on the way ahead and potential eligibility of a potential claim, once sufficient detail is known.

Personal Accident Insurance

All pupils are covered by the Personal Accident Scheme at a cost of £4.85 per term. Cover is provided both at school and during holiday periods. It is worldwide with very few exclusions. Maximum benefit, including supplemental benefit, is £1 million. Further details are at Annex A and the policy covers compensation for permanent disability, not medical expenses.

Denplan

All pupils are covered by the Denplan Dental Insurance Scheme at a cost of £2.30 per term. In the event of a dental injury suffered anywhere (at home, on holiday, playing at the park) parents or guardians can make a claim directly via www.denplan.co.uk/schools.

School Trips off the Island

Pupils on College trips are covered by the College Travel Insurance policy as outlined below, based on a contribution automatically included within their trip fee. The insurance covers:

- a. Medical and Emergency Travel Expenses (incurred off-Island)
- b. Public Liability
- c. Cancellation and Curtailment
- d. Baggage and Money

Any pre-diagnosed conditions or any psychiatric conditions¹ are excluded. If in doubt parents or guardians should declare and discuss this with the trip organiser before commencing the trip, and where possible before any deposit is paid. Parents or guardians sign a generic Consent Form (shown at Annex B) for emergency medical treatment which is further supported by Consent Forms for individual trips and activities as they arise.

In relation to medical costs whilst on school trips, the travel insurance provides cover for emergency medical treatment as necessary as a result of an emergency or bodily injury per the below definition:

- **Medical Expenses**

The costs arising outside of the insured person's country of residence, for medical, surgical or other attention or treatment given or prescribed by a medical practitioner and all hospital, nursing home and ambulance charges up to the amount shown in the schedule.

¹ An insured person having neuroses; psychoneuroses; psychopathies or psychosis; significant anxiety, stress, fatigue or mental or emotional diseases or disorders of any type.



- **What Is Covered**

If an insured person suffers bodily injury or illness during the operative time the Insurance Company will pay them or the insured person for medical expenses, emergency travel expenses and rescue expenses reasonably charged as a direct result. They will pay this for up to 2 years from the date of the injury or illness up to the sum insured shown in the schedule. They will pay up to £2,500 for dental expenses if they result from an emergency or bodily injury.

- **Medical Practitioner**

Any suitably qualified medical person other than an insured person; a member of the insured person's immediate family; or any person under a contract of service, or apprenticeship, or work experience with you.

Personal Property

The College does **not** accept liability for loss or damage to personal property. Parents/Guardians are advised to seek advice from their insurance brokers about suitable cover for their sons/daughters property, including musical instruments, mobile phones, tablets, BYODs etc. There are a number of options available for parents/guardians to purchase such covers, including on-line options. The College is not able to recommend any particular company or type of cover.

Private Medical Insurance (On-Island)

The College does **not** insure pupils for medical expenses whether incurred as the result of an accident or through illness unless negligence is admitted or proven against the College. Parents/Guardians are advised to seek advice about Private Medical Insurance.

Confidential Health Record and Consent Form

This form should be completed prior to a pupil entering the College and should be updated if any of the information changes. College staff will only refer to the most current form held. An example is at Annex C.

Annexes:

- A. Pupils' Personal Accident Insurance Scheme
- B. Medical Consent Form for Activities and Off-Island Trips
- C. Confidential Health Record & Consent Form



SFS

INSURANCE FOR INDEPENDENT SCHOOLS

ANNEX A

Pupils' Personal Accident Insurance Scheme

Scheme Information and Key Facts Effective from Autumn Term 2017

General Information

This insurance scheme will provide a financial benefit to insured persons should they suffer a permanent disability as a result of an insured accident.

How the insurance scheme is operated

This is an inclusive insurance and all pupils at the school are insured.

When cover commences

Provided that the premium has been paid, cover commences for each pupil from the first day of the first term, including the duration of the uninterrupted journey to the school. Cover is continuous until the pupil leaves the school, provided the school continues to renew the scheme at the beginning of each autumn term.

Definitions

Accident — shall mean a sudden, single, external, unforeseen and identifiable event rather than a gradual process occurring over a period of time and the word Accidental shall be construed accordingly.

Bodily Injury — physical injury that is caused solely by Accidental means and that, independently of any other cause and not by operation of any degree of degenerative process, results within 24 months from the date of the Accident in the Insured Person's death, or permanent disability as specified in the scale of benefits.

Effective time — the duration of each term for which the premium has been paid. If the Insured Person is not returning to the school because of transferring to another school or because of the completion of secondary education, the cover will terminate after the uninterrupted journey home at the end of the Insured Person's last day as a pupil of the school.

Insured Person — any pupil, attending the school, for whom the appropriate premium has been paid and accepted by SFS Group Ltd on behalf of the insurers. School staff can also be insured and are included as Insured Persons provided that a premium has been paid.

Term — the duration of one of the three periods of attendance at the school during a school year, including the uninterrupted journey to and from the school.

Data Protection

Your information (including information we already hold and may receive now and in the future as well as information about lapsed policies) will be shared with the insurers. Your information will be used by us and the insurers for general insurance administration purposes, for offering renewal, for statistical purposes and for crime prevention.

You have a right to access (subject to limited exceptions) and if necessary rectify the information that we hold about you. The insurers will pass information to the Claims and Underwriting Exchange Register. This register has been established to help check the information provided and also to reduce fraudulent claims. This register may be searched when dealing with your request for insurance. Under the conditions of your policy, you must declare all incidents whether or not they may result in a claim. This information may be passed to the register.



Summary of Benefits

Cover

If during the effective time the Insured Person sustains Bodily Injury the insurers will pay, subject to the terms and conditions, the benefit specified to the Insured Person.

	ITEM	SUM INSURED
1	Death due to an accident (pupil)	£5,000
	Death due to an accident (staff)	£10,000
2	Quadriplegia	£300,000
3	Paraplegia	£300,000
4	Permanent total disability	£300,000
5	Permanent total loss of sight in both eyes due to an accident	£250,000
6	Permanent total loss of one arm, hand, foot or leg due to an accident	£125,000
7	Permanent total loss of both arms, hands, feet or legs due to an accident	£250,000
8	Permanent total loss of speech due to an accident	£125,000
9	Permanent total loss of hearing in one ear due to an accident	£50,000
10	Permanent total loss of hearing in both ears due to an accident	£125,000
11	Permanent total loss of one thumb due to an accident	£50,000
12	Permanent total loss of one index finger due to an accident	£37,500
13	Permanent total loss of any other finger due to an accident	£25,000
14	Permanent total loss of one big toe due to an accident	£25,000
15	Permanent total loss of any other toe due to an accident	£7,500
16	Permanent total loss of use of shoulder or elbow due to an accident	£62,500
17	Permanent total loss of wrist, hip, knee or ankle due to an accident	£50,000
18	Permanent facial disfigurement to an extent of not less than an area of one square centimetre or at least two centimetres in length by accident	Up to £5,000
19	Removal of lower jaw by surgical operation following accident	£75,000
20	Shortening of at least 5 centimetres of lower limb following accident	£37,500
21	In the event of the insured person sustaining any permanent disablement not specified under benefits 1 to 20, the compensation payable will be calculated by assessing the degree of disablement in relation to the benefits shown in above	Up to £300,000
22	Supplemental Benefit – In the event of the insured person sustaining one, or more than one, form of permanent disability where total compensation of £300,000 becomes payable under benefits 1 to 21, a supplemental benefit of £700,000 will be paid making the total compensation payable £1,000,000	£700,000

Specific Conditions Applicable to the Personal Accident Insurance

Disappearance – if the Insured Person disappears and after 12 months it is reasonable to believe that such an Insured Person has died as a result of Bodily Injury, the death benefit shall become payable subject to an undertaking that if the Insured Person is later found to be alive, the death benefit paid shall be refunded to the insurers.

Exposure – injury to the Insured Person as a result of unavoidable exposure to the elements shall be deemed to have been caused by Bodily Injury.



ELIZABETH COLLEGE

ANNEX B

MEDICAL CONSENT FORM FOR ACTIVITIES AND OFF-ISLAND TRIPS

PLEASE SIGN THE CONSENT FORM BELOW AND RETURN IT AS SOON AS POSSIBLE TO THE SCHOOL OFFICE

As parent/guardian I hereby consent for my son/daughter

.....

(Block capitals, please)

to travel on official school trips and I also consent to my son/daughter receiving any emergency medical treatment deemed necessary when on such a trip.

Name of/Parent/Guardian.....

(Block capitals, please)

Date..... Signature.....

I further consent to my son's/daughter's participation in all Guernsey-based school activities* and to receiving any emergency medical treatment deemed necessary should it be impossible or impracticable to make prior contact with me.

In addition to this generic consent for emergency medical treatment a specific Consent Form for each trip or activity will also need to be completed by parents or guardians, in order for information relative to the proposed activity to be disclosed and parents or guardians to consent to the proposed activity.

I note that Medical cover excludes any pre-informed diagnosed conditions and also excludes any psychiatric conditions, whether pre-informed or not.

Date..... Signature.....

(Block capitals, please)

****Please state any exceptions here:***



ELIZABETH COLLEGE

CONFIDENTIAL HEALTH RECORD & CONSENT FORM

Annex C

Please return to College Office

NAME

COLLEGE NO

DATE OF BIRTH

1 Please indicate whether your son/daughter is on long-term medication for any health condition

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2 Does your son/daughter have any allergies? YES/NO

If yes, please explain.....

3 Is he/she asthmatic? YES/NO

If yes, does he/she use an inhaler? Does he/she have any other breathing problems?

If yes, please explain.....

4 Has he/she ever suffered with heart problems? YES/NO

If yes, please explain.....

5 Does he/she have any recurring injury, such as frequent sprains or strains, or cartilage or ligament trouble? YES/NO

If yes, please explain.....

6 Are there any other conditions about which we should know, especially with regard to physical activities? YES/NO

If yes, please explain.....

7 Have you any other medical concerns about your son/daughter? YES/NO

If yes, please explain.....

It is important that you keep us informed of any changes in your son/daughter's medical condition.

It is imperative, in the event of any emergency that we have on record CURRENT daytime contact numbers and the name and telephone of your Family Doctor.

Name of Father.....

Daytime Contact Number.....

Name of Mother.....

Daytime Contact Number.....

Name of Family Doctor.....

Number of Medical Practice.....

In the event of a medical emergency, whether it takes place in College or during an official educational activity, and only when it has proved impossible for either parent/guardian to be contacted, I herewith give the senior College administrator or teacher present, the prerogative to act in loco parentis and authorise surgical intervention on the advice of hospital doctors.

Signed.....

Date.....