

Section 18 - Personal Accident Insurance Scheme

Note – the Personal Accident Scheme is inclusive of Club Quest.

The Scheme provides you with financial benefits in certain circumstances by virtue of an insurance policy with Insurers Aviva Insurance Limited, and benefits are dependent on acceptance of any claim you make by the Insurers.

The Scheme is arranged and managed by Partners& Limited on your behalf if you decide to participate.

A summary of what the insurance policy covers is contained below. The policy document is available upon request from Partners& Limited

What is Personal Accident insurance?

By joining the Scheme, you will be provided with personal accident insurance. The insurance provides you with essential financial support and compensation, in the instance of genuine occupational accidents that occur whilst working at authorised contract sites of Quest or whilst commuting to and from the site.

The policy is designed to pay benefits following major accidents that prevent you from working for periods in excess of 4 weeks. No benefits are payable for the first four weeks, known as the initial period.

Temporary total disablement benefits are payable up to a maximum of 48 weeks, after the initial period expires. The scheme is arranged and managed by Partners& Limited on your behalf. If you have previously joined the Scheme but you wish to leave, please request and complete the Club Quest Opt-out Form from your local branch. (Link provided in the handbook, page 31)

Why do I need the cover?

Workplace accidents killed 135 people between 2022 - 2023.

Around 581,000 other injuries occurred at work according to the Labour Force Survey as a result of a workplace accident in the same year and around 69,208 of these were classed as major accidents causing over 7 days absence from work.

Personal Accident Insurance Policy Summary Key Facts

The purpose of this policy summary is to help you understand the insurance policy by setting out the significant features, benefits and limitations.

The policy is held by Quest Employment.

You should read the policy document for a full description of the terms of the insurance, including the policy definitions, and refer to the policy schedule for the specific policy benefits, sums insured and the operative time. The policy document is available upon request from Quest and Partners& Limited.

This summary does not form part of the policy document.

Insurance provider

This insurance is provided by Aviva Insurance Limited.

Group policyholder

Quest Employment

Group policy number

Purpose of the insurance

This insurance provides cover for accidental bodily injury which occurs during the operative time of cover and which results in death, loss of limbs or sight, hearing and speech, temporary disability or permanent disability.

Insured persons

Any person that is provided by Quest Employment to work for an employer on a temporary basis who has agreed to pay the required fee.

Operative time of cover

All occupational related cover including commuting.

Significant product features, benefits and limitations

The cover provided is subject to certain provisions, conditions and limitations. The information below sets out the significant features of the cover and the provisions, conditions and limitations that apply. To ensure the policy is suitable, you are advised to read the policy wording which sets out all of the features, provisions, conditions, limitations and what is not covered. You should review the cover from time to time to ensure that it still fulfils your needs.

Significant covers

Section A – Personal Accident

Death by an accident

An amount of £50,000

Significant features and benefits

Provides lump sum amount following death caused by bodily injury resulting from an accident.

Significant policy limitations

If accidental bodily injury does not immediately result in death then no payment will be made until at least 13 weeks after the date of the accident.

Permanent loss of limbs

An amount of £50,000

Significant features and benefits

Provides lump sum amount following physical severance or permanent loss of use of one or more limbs following bodily injury resulting from an accident.

Permanent loss of sight, speech or hearing

An amount of £50,000

Significant features and benefits

Provides lump sum amount following disablement caused by bodily injury resulting from an accident which causes total and permanent loss of sight, speech and hearing.

Significant policy limitations

Loss of hearing in one ear is limited to £6,250 of the amount payable for both ears.

Permanent partial disability

An amount of up to £50,000.

Significant features and benefits

Provides lump sum compensation following disablement caused by bodily injury resulting from an accident which prevents an insured person from working in any occupation for which they are fitted by way of training, education or employment which in all probability will continue for the rest of their life.

Significant policy limitations

No benefit is payable if the insured person dies within 13 weeks of sustaining permanent total disability when the death benefit will be payable instead.

Permanent total disability

An amount of up to £50,000.

Significant features and benefits

Provides lump sum compensation following disablement caused by bodily injury resulting from an accident which prevents an insured person from working in any occupation for which they are fitted by way of training, education or employment which in all probability will continue for the rest of their life.

Significant policy limitations

No benefit is payable if the insured person dies within 13 weeks of sustaining permanent total disability when the death benefit will be payable instead.

Temporary total disability

Up to £500 per week

Significant features and benefits

Weekly compensation resulting from bodily injury resulting from an accident injury which temporarily prevents an insured person from carrying out the whole of their occupational duties.

Significant policy limitations

The amount payable is limited to 52 weeks and is not payable for the first 4 weeks and will not exceed 75% of the insured person's average gross weekly wage from all sources of income.

What is not covered

The following limitations apply to the policy as a whole:

1. Intoxicating liquor or drugs

bodily injury sustained while under the influence of intoxicating liquor or drugs taken by the Insured Person other than drugs taken in accordance with treatment prescribed and directed by a qualified registered medical practitioner but not for the treatment of drug addiction

2. Pre-existing Medical Condition

Any physical defect infirmity medical condition or chronic or recurring sickness which existed at or prior to the date of entry of an Insured Person into this insurance unless it has been declared to and accepted by the Insurer in writing

3. Offshore work

Any Insured Person while working on or in transit by sea or air to or from offshore installations

Policy reference

Page 17 – What is not covered?

There is no cover for any person aged 75 years of age or over.

If an insured person is under 18 years of age the insurer will pay all claims to a parent or a legal guardian of the insured person.

Policy reference

Page 1 – Claims procedure.

Law and jurisdiction

This policy will be governed by English law, and the group policyholder, the insured persons and Aviva Insurance Limited agree to submit to the courts of England and Wales to determine any dispute arising under or in connection with it, unless the relevant insured person resides in Scotland, Northern Ireland or the Isle of Man, in which case the law applicable to that jurisdiction will apply and its courts will have exclusive jurisdiction, unless agreed to the contrary by the group policyholder and Aviva Insurance Limited before the start date of cover.

Period of insurance

The premium is paid by the group policyholder according to how they administer the benefits process and how often insured persons are paid.

- A weekly premium buys cover for the week in which it is paid.

The cover remains in force from the start date of an insured person's inclusion or stops earlier as shown in the 'Start, and finish of cover for an insured person' section of the group policy.

Rights of cancellation and cooling off period

The insurer may cancel this group policy by giving 30 days written notice to the group policyholder at their last known address. The group policyholder can cancel the group policy by giving 30 days written notice to us.

An insured person has no rights to cancel the group policy, only the right not to be included. If an insured person decides that they no longer wish to be included, they should advise the group policyholder who will arrange for a proportionate return premium for the unused proportion of the cover, provided a claim has not been made by the insured person.

If within 15 days of the commencement of the insurance for an insured person or their receipt of the policy documentation that they decide that the cover is not required, they should notify the group policyholder.

Claim notification

A claim can be made on the policy by the group policyholder or by an insured person (or parent or legal guardian if the insured person is under 18 years of age).

You should contact Partners& Limited on 01494 455 615 or alternatively:
please call Aviva's claims line on 08000 516 583. Aviva's line operates 9am to 5pm, Monday to Friday.
Please have your policy number to hand when calling.

Your right to complain

Every effort is made to ensure that the group policyholder or insured person (or a parent or legal guardian if the insured) We hope that you will be very happy with the service that we provide. However, if for any reason you are unhappy with it, we would like to hear from you. In the first instance, please contact your insurance adviser or usual Aviva point of contact.

If you remain unhappy with the decision received, you may write to

Chief Executive UK Insurance,
Aviva,
8 Surrey Street,
Norwich,
NR1 3NS

Or e-mail details of your complaint to ukgiceo@aviva.co.uk

Aviva is covered by the Financial Ombudsman Service. If you have complained to us and we have been unable to resolve your complaint, you may be entitled to refer it to this independent body. Following the complaints procedure does not affect your right to take legal action.

Is the insurer Covered by the Financial Services Compensation Scheme (FSCS)?

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

Further information about the scheme is available from the FSCS website www.fscs.org.uk, or write to

Financial Services Compensation Scheme
10th Floor,
Beaufort House,
15 St Botolph Street
London
EC3A 7QU

What happens if I have an accident?

You should contact Partners& Limited on 01494 455 615 or alternatively:
please call Aviva's claims line on 08000 516 583. Aviva's line operates 9am to 5pm, Monday to Friday.
Please have your policy number to hand when calling.

Complaints

Our aim is always to provide our customers with a first-class service. However, we are aware that, occasionally, it is possible that we may fail to meet your expectations. If for any reason we have not met your expectations, please let us know as soon as possible, by calling our main office telephone 01494 450011 or write to our Complaints Officer: Charles Bettinson, MRIB House, Amersham Hill, High Wycombe, Buckinghamshire HP13 6NU.