

**PERSONAL ACCIDENT INSURANCE SCHEME**  
**Arranged by Naylor Wright Limited**  
**for staff of HILL MCGLYNN & ASSOCIATES LTD**  
**POLICY NO: 23999857CSN/110197**

Underwritten by Aviva Insurance Limited

**SUMMARY OF COVER**

**This is a Summary of Cover only and is not proof of insurance. Cover starts as soon as regular premium deductions are made from your wages. A copy of the policy wording is available from the policyholder – Hill McGlynn & Associates Ltd**

**IMPORTANT NOTE**

As an opt-out policy all employees of Hill McGlynn and Associates Ltd are automatically covered. Employees who do not exercise their right to opt-out will have the cost of this accident insurance deducted from earnings each week. Should any employee wish to opt-out please put this in writing to Hill McGlynn and Associates Ltd, Second Floor, Forum Four, Solent Business Park, Parkway, Whiteley, Fareham, Hampshire, PO15 7AD

**WHEN YOU ARE COVERED**

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

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

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

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

6. Temporary total disablement  
**£300 per week** payable for up to 26 weeks, thereafter reducing to **£250 per week** payable for up to a further 26 weeks, in the event of an accident resulting in an Insured Person being unable to perform any part of his/her work.  
 The benefit payable will be the sum shown or 75% of normal gross weekly earnings, whichever is lower.  
 Benefit is payable for up to a maximum of up to 52 weeks.  
**No benefit is payable for the first 14 days of disablement**
7. Lump sum payment of **£1500** upon medical confirmation of: a fracture of a leg, arm, shoulder, wrist, hand (but

excluding fingers or thumb), foot (but excluding toes), skull, dislocation of shoulder, hip, ankle or elbow.  
This benefit is in addition to any amount payable under benefit 6 – Temporary total disablement

#### **HOSPITALISATION BENEFIT**

The Insurer will pay £30 for each complete 24 hour period that the Insured Person spends as a hospital in-patient as a direct result of an injury covered under this policy up to a maximum of 365 consecutive nights arising from any one accident. This is payable in addition to benefit 4 Temporary Total Disablement

#### **HOSPITAL TRANSFER**

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

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

#### **ELECTROCUTION**

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

#### **COMA BENEFIT**

The Insurer will pay £30 per day if an Insured Person sustains accidental bodily injury in the course of their employment with the Insured which results in that person being in a continuous state of unconsciousness for up to 365 days

#### **EMERGENCY DENTAL TREATMENT**

This policy is extended to cover the cost of:

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

Maximum payment £500 any one accident

#### **FUNERAL EXPENSES**

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

#### **PHYSIOTHERAPY TREATMENT**

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

Exclusions:

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

#### **RETRAINING EXPENSES**

If a claim is paid for loss of limb, loss of sight or permanent total disablement, the Insurer will also indemnify The Insured Person for reasonable expenses incurred in retraining the Insured Person for an alternative occupation up to a maximum of £5,000

#### **EXCLUSIONS:**

This policy excludes:

- 1 **Intoxicating liquor or drugs**  
bodily injury sustained while under the influence of intoxicating liquor or drugs taken by the Insured Person other than drugs taken in accordance with treatment prescribed and directed by a qualified registered medical practitioner but not for the treatment of drug addiction
- 2 **Self-Inflicted Injury, Sickness and Insanity**
  - a. Suicide or intentionally inflicting self injury
  - b. any gradually operating cause
  - c. any naturally occurring condition or degenerative process
  - d. sickness or disease
  - e. Insanity
- 3 **Criminal Act**  
bodily injury as a result of the Insured Person's own criminal act.
- 4 **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.
- 5 **Pregnancy or childbirth**  
Normal pregnancy unless it develops into a complication diagnosed by a consultant in obstetrics

- 6 Age limit  
Bodily injury sustained after the Insured Person's 75<sup>th</sup> birthday
- 7 Residence  
The Insured Person while permanently resident outside the United Kingdom Channel Islands or Isle of Man
- 8 War Risks  
Any consequence whether direct or indirect of war invasion act of foreign enemy hostilities or a warlike operations or operations (whether war be declared or not) civil war rebellion revolution insurrection civil commotion assuming the proportions of or amounting to an uprising military or usurped power
- 9 Offshore work  
Any Insured Person while working on or in transit by sea or air to or from offshore installations
- 10 Back Injuries and Strains  
Back injuries and strains due to lifting twisting turning or wrenching
- 11 Terrorism  
Cover for acts of terrorism is limited to £10,000,000 per event and excludes harm by nuclear, chemical, biological and radiological means

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

**NAYLOR WRIGHT LIMITED**  
**46/47 BROOK STREET**  
**TAVISTOCK**  
**DEVON**  
**PL19 0HE**  
**Claims Line: 0845 600 5143**

**Claims conditions**

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

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

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**LAW APPLICABLE TO CONTRACT**

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

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

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**FINANCIAL SERVICES COMPENSATION SCHEME**

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We are covered by the Financial Service Compensation Scheme (FSCS). If we can not meet our obligations you may be entitled to compensation from the scheme, depending on the type of insurance and circumstances of any claim.

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**COMPLAINTS PROCEDURE**

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

## What will happen if you complain

- Your complaint will be acknowledged within 2 working days of receipt
- We aim to resolve complaints within 5 working days
- Once an assessment and full investigation of your concerns has been made, we will respond with a decision

Most of our customers' concerns can be resolved quickly but occasionally more detailed enquiries are needed. If this is likely, we will contact you with an update and give you an expected date of response. This will not be beyond 20 working days from when you first made your complaint

If you remain unhappy with the decision you receive from the local branch you may write to the Chief Executive. If you are dissatisfied with our final decision, you can refer the matter to the Financial Ombudsman Service (FOS)

The FOS will only consider your complaint if you have given us the opportunity to resolve it and you are a private policyholder, a business with a group annual turnover of less than £1 million, a charity with an annual income of less than £1 million or a trustee of a trust with a net asset value of less than £1 million. Please follow the steps below. If, however, we do not resolve your complaint within 40 working days, the FOS will accept a direct referral

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

## What should I do?

### The steps you should take if dissatisfied

#### Step 1 Seek resolution by your insurance adviser or usual Norwich Union point of contact.

If you are disappointed with any aspect of the handling of your insurance we would encourage you, in the first instance, to contact Naylor Wright Limited. You can write or telephone, whichever suits you, and ask them to review the problem

#### Step 2 Refer your complaint to our Chief Executive

If you remain unhappy with the decision you receive, please write with full details including Policy number and/or claim number, to:

The Chief Executive  
Norwich Union Insurance  
Surrey Street  
Norwich  
NR1 3NS

A review of the matter will then be carried out at a senior level and a final decision given.

#### Step 3 Refer your complaint to the Financial Ombudsman Service

If after making a complaint to us you are still unhappy and you feel the matter has not been resolved to your satisfaction please contact the FOS at:

Financial Ombudsman Service  
South Quay Plaza  
183 Marsh Wall  
London  
E14 9SR

Underwritten by Aviva Insurance Limited  
Registered in Scotland No 2116  
Registered Office: Pitheavlis, Perth, Scotland, PH2 0NH  
An Aviva company.  
Authorised and regulated by the Financial services Authority



**PERSONAL ACCIDENT INSURANCE for HILL MCGLYNN and ASSOCIATES LTD**  
 arranged by Naylor Wright Ltd

**Policy Summary**

This is a summary of the policy and does not contain the full terms and conditions of the cover, which can be found in the policy document. A copy of the policy wording is available from the Hill McGlynn and Associates Ltd, Second Floor, Forum Four, Solent Business Park, Parkway, Whiteley, Fareham PO15 7AD

**Name of the Insurer:**

Aviva Insurance Limited trading as Norwich Union

**Type of Insurance and Cover**

The policy provides cover for you against accidental bodily injury which results in death. It also covers you for disablement which entirely prevents you from following your usual occupation.

**Key Covers, Features and Exceptions**

Your policy includes the following key covers, features and exceptions, which are detailed in your policy documentation.

Cover, Features and Benefits	Exceptions
<p><b>What is covered:</b></p> <p>Accidental Bodily Injury that causes:</p> <ul style="list-style-type: none"> <li>• Death</li> <li>• Loss of sight</li> <li>• Loss of limbs</li> <li>• Permanent total disablement</li> <li>• A benefit expressed as an amount per week payable as a result of Accidental Bodily Injury that causes <b>Total disablement</b> entirely preventing the Insured from engaging in their usual occupation</li> </ul> <p>There are additional benefits payable as a result of an accident covered under this policy:</p> <ul style="list-style-type: none"> <li>• Specified broken bones and dislocations</li> <li>• Emergency dental treatment necessary incurred</li> <li>• Physiotherapy treatment</li> <li>• Hospital in-patient benefit</li> <li>• Funeral Expenses</li> <li>• Retraining benefits in the event of loss of limbs, sight or permanent total disablement</li> <li>• Coma benefit</li> </ul> <p><b>Cover operates:</b> while in the employment of the insured including direct travel from home to place of work and from place of work to home or if you do not travel home, to your first destination after leaving work</p>	<p><b>Please refer to the your Certificate</b></p> <ul style="list-style-type: none"> <li>• Pre existing Medical Conditions</li> <li>• Intoxicating liquor or drugs</li> <li>• Self-inflicted injuries</li> <li>• Injury sustained if permanently resident outside the United Kingdom</li> <li>• War Risks</li> <li>• Cover for acts of terrorism is limited to £10,000,000 per event and excludes harm by nuclear, chemical, biological and radiological means</li> <li>• The first 14 days of each period of disablement</li> <li>• Back injuries and strains due to lifting twisting turning or wrenching</li> <li>• Offshore work</li> <li>• Any sickness disease or naturally occurring condition</li> </ul>

#### Conditions

- Cover ceases on your 75<sup>th</sup> birthday, when you stop paying premiums by deduction from wages/salary or when you stop working the Insured, whichever is the earlier
- Temporary total disablement benefit is payable for up to a maximum of 52 weeks
- Claims should be notified as soon as possible and not later than 90 days after disablement commenced
- In the event of a claim, you must provide a fully completed claim form, medical certificates, payslips for the three weeks preceding the date of occurrence of the claim showing deduction for premium, including the deduction of premium in the week of work during which the accident giving rise to the claim arises and a copy of the entry in the Site Accident Book to evidence an on site accident
- The benefit is payable at the end of the period of disablement or on request four weekly in arrears

#### General Information

##### Duration of Policy

The Policy will remain in force for the period shown on your certificate and while you continue to pay premiums by deduction from wages.

##### How to Claim

If you need to make a claim please contact Naylor Wright Independent Insurance Advisers, 46/47 Brook Street, Tavistock, Devon, PL19 0HE. Telephone Claims Line: 0845 600 5143. Please have your policy number to hand when calling.

##### Complaints

We hope that you will be very happy with the service we provide. However, if for any reason you are unhappy about this, we would like to hear from you.

In the first instance, please contact Naylor Wright Ltd. Full details of our complaints procedure will be set out in your policy document.

We are a member of the Financial Ombudsmen Service. If you have complained to us and we have been unable to resolve your complaint, you may then be entitled to refer it to this independent body. The Financial Ombudsman Service is available to individuals, certain small businesses, charities and trusts.

##### Financial Services Compensation Scheme

We are covered by the Financial Service Compensation Scheme (FSCS). If we can not meet our obligations you may be entitled to compensation from the scheme, depending on the type of insurance and circumstances of any claim.

# GROUP PERSONAL ACCIDENT INSURANCE SCHEME

Arranged by  
NAYLOR WRIGHT LTD

## INTRODUCTION

We welcome you as a policyholder of the Norwich Union Insurance Group a worldwide organisation offering you an extensive insurance service.

### On receipt of your policy

To ensure that your policy gives you the protection you need, we recommend that you read it carefully and return it immediately if not in accordance with your requirements. The policy specifies the cover you have selected. It is your evidence of insurance and may be required in the event of a claim.

If you decide within 14 days of receipt that you do not wish to accept this policy, return it, and provided no claims have been made, we will refund the premium.

## DEFINITIONS

- "Bodily Injury" - Bodily Injury caused by an accident and which solely and independently of any other cause (except illness directly resulting from medical or surgical treatment rendered necessary as a result of such injury) occasions the death of or loss or disablement to the person within 24 months from the date of the accident by which such injury is caused
- "Geographical Limits" - (a) Bodily Injury - Worldwide See Exclusion 5
- "Loss of all Sight" - shall include total and irrecoverable loss of all sight which shall be deemed to have occurred  
(a) in both eyes when the condition is shown to the Insurer's satisfaction to be permanent and without expectation of recovery and the Insured Person's name has been added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist  
(b) in one eye when the degree of sight remaining after correction is 3/60 or less on the Snellen scale and the Insurer is satisfied that the condition is permanent and without expectation of recovery
- "Wages" - shall mean the average gross basic weekly wage including overtime paid over the three weeks immediately preceding date of injury from which the claim arises or if this is not available evidence of contracted hours
- "Fracture of leg" - means a breakage of the femur, tibia, fibula or patella
- "Fracture of arm" - means a break in the humerus, ulna or radius bones
- "Fracture of shoulder" - means a breakage in the scapula
- "Fracture of wrist" - means a breakage in any of the carpal bones, (including the scaphoid) or lower end of the radius or ulna bone
- "Fracture of hand" - means a breakage of the metacarpals but excluding breakage of the phalanges
- "Fracture of foot or heel" - means breakage of the os calcis, talus, the tarsus bones, metatarsus but excluding breakage of phalanges
- "Closed fracture of skull (including hairline fractures)" - means a simple fracture with little damage to surrounding tissues and no break in the overlying skin and includes fractures of the jaw and cheekbone
- "Open fracture of the skull" - means a compound fracture where the bone ends have pierced the overlying skin with significant damage to surrounding tissues and includes fracture of the cheekbone or jaw

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### DEFINITIONS (continued)

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- "Dislocation of shoulder" - means displacement from its normal position of the head of the humerus from the glenoid fossa or dislocation at the acromio-clavicular
- "Dislocation of hip" - means displacement from its normal position of the head of the femur from the acetabulum
- "Dislocation of ankle" - means the displacement from its normal position of the talus bone from the socket formed by the lower end of the tibia and fibula
- "Dislocation of elbow" - means displacement from the normal position of the ulna or radius bone in relation to the lower end of the humerus

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### OPERATION OF COVER

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The Insured having paid or agreed to pay the premium the Insurer will in the terms of this policy pay the sum(s) shown in the Schedule of Benefits in the event of any Insured Person described in the Schedule

(a) sustaining accidental bodily injury which independently of any other cause results in death or disablement or

(b) contracting sickness declaring itself which results in disablement

within the Geographical Limits during the period of insurance and all subsequent periods for which further payments of premium are accepted

