



## **Significant Features and Policy Benefits**

This policy summary is to help you understand the cover your insurance provides. It details the key features, benefits, limitations and exclusions, but you are still required to read the full policy wording, schedule and any endorsements for a full description of the terms and conditions 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**

The following benefits are included within the policy as standard:

- Health and wellbeing services included as standard within the cost of your policy.
- Bodily Injury or Sickness: from the first full day of absence after the Claim Waiting Period for up to 190 days.
- Accident Cover
- Bereavement and Bereavement Reaction Benefit: due to the death of a Direct Relative up to five Working Days and a further 10 Working Days if certified by a Doctor as absent due to a reaction to the bereavement.
- Compassionate Leave: up to 10 Working Days.
- Jury Service and attending court as a witness: up to 10 Working Days.
- Adoption and Paternity Benefit: up to 10 consecutive Working Days.
- Stranded Staff: up to five Working Days.
- Death in Service: up to 30 Working Days (up to a maximum of £2,000)
- Phased Returns: 100% of the daily benefit for 35 Working Days after the commencement of a phased return for an Insured Person, providing that the absence exceeds 20 term days after the deduction of the Claim Waiting Period.

## **Optional Policy Benefits**

**Maternity Benefit up to £10,000 (Non-return dependent):** If chosen, cover shall be provided for insured persons who become pregnant a) after the start date of cover b) following their appointment to the list of insured persons c) within the 30 calendar days immediately preceding the start date cover.

**Pre-existing Condition Cover:** If chosen, cover shall be provided for recurrence of absence whereby the member of staff has been absent for the same condition for more than five days in the 12 month period preceding the Start Date of Cover.

**COVID-19 Cover:** If chosen, cover shall be provided from the date of a positive COVID-19 test result (of a type recommended by the United Kingdom or devolved government) after the Claim Waiting Period.

**Stress Cover:** If chosen, cover shall be provided based on the following option chosen:

No Stress Cover- all stress related claims will be excluded.

Standard Stress Cover- includes 30 days stress cover for a wide range of stress causes.

Premium Stress Cover- includes 190 days stress cover for a wide range of stress causes.

Full details of the benefits and exclusions of the policy cover, and optional policy benefits noted above, are set out in the specimen policy document.

## **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 12-month period immediately preceding their Start Date of Cover for a related condition. This does not include Minor Ailments or non-recurring conditions.
- The undergoing of any planned or recommended Medical Procedure for a medical condition for which an Insured Person has not been free of symptoms, not received Treatment or Advice for 18 months prior to the last Policy Renewal Date or Start Date of Cover, whichever is later.
- Absence claims for five Working Days or longer where the Absence relates to a Stress Related Illness and is not reported to the Claims Administrator within 14 Calendar Days after the first full date of Absence.
- Absences where any requested claims information is not received.
- Absences where the Doctor had failed to respond to enquiries from the Claims Administrators regarding an Insured Persons Absence.
- Absences where an Occupational Health Consent Form and an Occupational Health Report is requested and is not received.
- Absence claims where the Insured Person is undergoing or facing the prospect of undergoing any disciplinary, competency, capability, appraisal or suspension procedures.



### **Significant Limitations**

- If any claim for an Insured Person exceeds 100 Working Days, the Daily Benefit will be reduced by fifty percent (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.
- Absence claims caused or contributed to or by, any Chronic Condition that existed prior to the Start Date of Cover is limited to 10 Working Days per condition for each Insured Person.

### **Insurer Details**

The Insurers for this Policy are Astrenska Insurance Limited trading as Collinson Insurance is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Financial Services Number 202846). Registered within the United Kingdom.

### **Cancellation**

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

All insurance under each section of this contract will terminate on the first of the following:

- Expiry of the contract, except where this Policy is renewed, in which case cover will continue under this Policy as per the terms and conditions agreed at Renewal;
- Cancellation of this contract;
- Non-payment of Premium within the credit terms stated.

### **Complaints Provision**

You should notify Us of Your Complaint as soon as possible to the address in the policy wording. Any delay in notifying Us of Your complaint may mean We are unable to consider it in full or part. We will acknowledge Your complaint within five Working Days providing information on the complaints process, and update You if We have been unable to respond after four weeks. We will issue Our final response in writing within eight weeks of Us receiving Your complaint.

If We are unable to resolve your complaint to your satisfaction, then one of the alternative routes is available:

- a) If You are an eligible small business, You will be referred to the Financial Ombudsman Service (FOS).
- b) You will be referred to an independent mediation service, at Our expense, who will assist by bringing both parties together to make arrangements to see whether a resolution can be achieved.



Send us a message  
[info@harringtonbates.com](mailto:info@harringtonbates.com)



Give us a call  
0800 862 0960



Write to us  
8 Brunel Court, Gadbrook Park, Cheshire, CW9 7LP