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Group Policy Schedule



Schools' £1m Personal Accident (Incorporating Dental) Insurance

Policy Number:	UKBCHD05098
The Group Policyholder:	Witham Hall School
Address:	Witham on the Hill, Bourne, Lincolnshire, PE10 oJJ, United Kingdom
Renewal Date:	01 September 2022
Period of Insurance:	 a) i) From: 1st September 2021 (the Start Date) ii) To: 31st August 2022 (both dates inclusive) If the term commences before the 1st September 2021 cover will commence from 00.01 hours local standard time on the earliest date. Cover will expire on 24.00 hours local standard time on 31st August 2022 b) Any subsequent period for which We shall agree to accept a renewal premium
Period of Cover:	Cover in respect of each Insured Person will commence on the Start Date or the date which the Insured Person is advised by the Group Policyholder that their cover is operative if after the Start Date
Premium (inclusive of Insurance Premium Tax at the applicable rate):	To be declared
Applicable Policy Wording:	C1507/06 0321
Date of issue:	28th July 2021

Insure	d Persons		
Category A	Any Pupil enrolled at the Group Policyholder's school.	Insured	
Category B	Any Employee	Not Insured	
Category C	Any member of the board of governors (school governor) of the Group Policyholder's school.	Insured	
Category D	Any person who is acting in a capacity as a volunteer, assistant or helper under the direction of the Group Policyholder .	Insured	
Effective	e Time		
Category A	24 hours a day for the duration of each Term Insurance, including;	during the Period of	
	a. the uninterrupted journey to the Group Policyholder's school prior to the commencement of a Term; and		
	b. the holiday break that immediately follows the end of Term .		
	If a Pupil is not returning to the Group Policyholder's school at the start of a Term due to;		
	a. the Pupil transferring to another primary or secondary school within the United Kingdom , cover will continue until the commencement of the uninterrupted journey to the new school; or		
	 b. the Pupil completing their secondary education or transferring to a school outside the United Kingdom, cover will continue during the holiday break following the end of Term, but only whilst the Pupil is participating in official organised activities under the auspices of the Group Policyholder, including uninterrupted travel between the location of the activity and their home; or 		
	c. any reason other than in a. or b. above, cover ceases at the end of the Pupil's uninterrupted journey home at the end of their last day at the Group Policyholder's school.		
Category B	24 hours a day anywhere in the world.		
Categories C	Whilst undertaking duties of the Group Poli	cyholder;	
& D a. in the United Kingdom excluding travel directly between he location the school duties are being undertaken; or			
	b. outside the United Kingdom including the location the school duties are being un		

Schedule of Benefits – £1,000,000 Plan

The maximum amount payable for any one Claim under Sections 1, 3 and 4 in total is; £1,000,000 for Pupils and Employees £100,000 for school governors, volunteers, assistants or helpers See Section 4 Supplemental Benefit for full details of cover

Cover only applies to those Categories of Insured Persons stated as 'Insured' in the Group Policy Schedule.

SECTION 1.

Serious Injury

		Benefit Amount	
Item	Benefit Description	Insured Persons Categories A & B	Insured Persons Categories C & D
1	Organic paralysis	£300,000	£100,000
2	Loss of intellectual capacity	£300,000	£100,000
3	Loss of sight in both eyes	£300,000	£100,000
4	Loss of upper limbs (both)	£300,000	£100,000
-	Loss of lower limbs (both)	£300,000	£100,000
5	Loss of upper limb (one) and Loss of lower limb	£300,000	2100,000
6	(one)	£300,000	£100,000
7	Loss of sight in one eye	£144,000	£48,000
8	Loss of upper limb (one)	£144,000	£48,000
9	Loss of lower limb (one)	£144,000	£48,000
10	Loss of hearing in both ears	£144,000	£48,000
11	Total loss of or total loss of use of:		
	a. lung	£144,000	£48,000
	b. a hip, knee or ankle	£120,000	£40,000
	c. the back or spine below the neck with no damage to the spinal cord	£120,000	£40,000
	d. the neck or cervical spine with no damage to the spinal cord	£90,000	£30,000
	e. a shoulder or elbow	£90,000	£30,000
	f. a thumb or wrist	£78,000	£26,000
	g. the jaw	£50,000	£17,000
	h. a kidney	£42,000	£14,000
	i. a big toe	£42,000	£14,000
	j. a finger	£30,000	£10,000
	k. spleen	£24,000	£8,000
	l. any other toe	£12,000	£4,000
12	Loss of hearing in one ear	£30,000	£10,000
13	Loss of smell and Loss of taste	£30,000	£10,000

14 To ensure an **Insured Person** is provided with a payment for a **Permanent Disability** that is not listed above, Chubb will assess medical evidence to calculate the degree of disablement relative to this scale. No account shall be taken of the **Insured Person's** occupation. For example if **Bodily Injury** results in 25% of the loss of sight in one eye, Chubb will pay 25% of the **Benefit Amount** for item 7 in this Scale.

SECTION 2. Accidental death		
Item	Benefit Description	Benefit Amount
1	Accidental death – Category A (Pupils)	£10,000
2	Accidental death – Category B (Employees) aged under 18 years	£10,000
3	Accidental death – Category B (Employees) aged 18 years and over	£100,000
4	Accidental death – Category C & D (School Governors / Volunteers/ Helpers / Assistants) aged under 18 years	£10,000
5	Accidental death – Category C & D (School Governors / Volunteers/ Helpers / Assistants) aged 18 years and over	£100,000

SECTION 3.

Disfigurement or scarring of the Face and Body **Benefit Description Insured Persons** 1 A. Face i. Minimum Benefit at least one square centimetre or two £300 centimetres in length ii. Maximum Benefit whole area of the Face £6,000 **B.** Body 4% or more of the Total Body Surface Area £3,000 15% or more of the Total Body Surface Area £6,000 25% or more of the Total Body Surface Area £10,000

SECTION 4.

Supplemental Benefit -Cover for Category A (Pupils) & Category B (Employees) only

		Benefit Amount
Item	Benefit Description	Insured Persons Categories A & B
1	 Supplemental Benefit If an Insured Person described in Category A (Pupil) or Category B (Employee) sustains Bodily Injury resulting in a Permanent Disability insured under Items 1 to 14 of Section 1 (Serious Injury) and/or Section 3 (Disfigurement or scarring of the Face and Body) and the total Benefit Amount payable reaches £300,000, a Supplemental Benefit of £700,000 is also payable making a total Benefit Amount payable of £1,000,000. This Section does not apply to Insured Persons described in Categories C (school governors) and D (volunteers, assistants or helpers). The Supplemental Benefit is not payable to those Insured 	£700,000
	Persons.	

SECTION 5.

Dental Injury and Dental Emergency Treatment - Cover for Category A (Pupils) & Category B (Employees) only

			Benefit Amount
Item	Be	nefit Description	Insured Persons
			Categories A & B
1	De	ental Injury	
	То	tal loss of permanent natural teeth	
	a.	Total permanent physical loss of anterior tooth (canine or incisor)	£2,000 per tooth
	b.	Total permanent physical loss of posterior tooth (molar or pre-molar)	£1,250 per tooth
	Pa	rtial loss of natural teeth	
	c.	Partial loss of anterior and / or posterior tooth	Up to £600 per tooth
	Lo	ss of Vitality	
	d.	The total Loss of Vitality of a permanent natural tooth	£600 per tooth
	To	tal amount payable in respect of any one Claim under Items c & d	£2,400
	e.	Dental Treatment following Dental Injury (Insured Persons under age 18 years)	Up to £10,000
	f.	Dental Treatment following Dental Injury (Insured Persons age 18 years and over)	Up to £10,000
		tal amount payable for any one Claim under Items e & f ental Treatment that exceeds £750 must first be approved by Chubb)	£10,000
	g.	Dental Treatment following Dental Injury requiring Dental Implant(s)	Up to £2,500 per Dental Implant
	To	tal amount payable for any one Claim under Item g	£10,000

2	Emergency Dental Treatment	Up to £2,000
3	Surgical Extraction of Third Molars (Wisdom Teeth)	£125 per tooth
4	In-patient Hospital Stay (up to 365 nights maximum)	£125 per night
5	Mouth Cancer treatment	Up to £12,000
6	Incidental Expenses	Up to £125

Section 6.

Fractures - Cover for Category A (Pupils) & Category B (Employees) only		
Benefit		mount
Item	Benefit Description	Insured Persons Categories A & B
1	Hip or pelvis (excluding coccyx or thigh)	£1,000
2	Femur or heel	£500
3	Skull (excluding jaw and nose) lower leg, collar bone, ankle, elbow, upper or lower arm (including the wrist, but not a colles' fracture)	£500
4	Spine (vertebrae, but excluding coccyx)	£1,500
	Maximum amount payable for all Fractures due to one Accident	£5,000

SECTION 7.

Additional Benefits payable following certain valid claims under Section 1. Serious Injury or Section 2 Accidental Death

		Benefit Amount		
		Insured Persons		
Item	Benefit Description	Category A	Category B	Categories C & D
1	Catastrophic Accident	Not Insured	Up to £1,000,000	Not Insured
2	Chauffeur or Taxi	Up to 10% of benefit paid under Section 1	Up to 10% of benefit paid under Section 1	Not Insured
3	Child / children	Not Insured	£8,000	Not Insured
4	Cosmetic Surgery	Up to £10,000	Up to £10,000	Not Insured
5	Dependent Adult	Not Insured	£25,000	Not Insured
6	Estate Administration	Up to £2,000	Up to £2,000	Up to £2,000
7	Funeral Expenses	Up to £10,000	Up to £10,000	Not Insured
8	Home Adaption / Relocation	£50,000	£50,000	Not Insured
9	Home Help & Childcare	Not Insured	Up to £10,000	Not Insured
10	Independent Financial Advice	Not Insured	Up to £2,500	Not Insured
11	Injury Medical Expenses	Up to £30,000	Up to £30,000	Up to £30,000
12	Prosthesis	Up to £10,000	Up to £10,000	Not Insured
13	Psychological Counselling	Up to £2,000	Up to £2,000	
14	Rehabilitation Case Management & Treatment	Not Insured	Up to £5,000	Not Insured
15	Retraining for a Partner	Not Insured	Up to £15,000	Not Insured
SECTI(Autom	ON 8. atic Additional Benefits			
			Benefit Amount	
Item	Benefit Description	Category A	Insured Persons Category B	Categories C & D
1	Coma within Country of Domicile (Up to 7 days maximum)	730 £100 a day	£100 a day	Not Insured
2	Hospital Stay within Country of Domicile (Up to 365 days maximum)	£50 a day	£75 a day	Not Insured
3	Hospital Transfer	Up to £5,000	Up to £5,000	Not Insured
4	Hospital Visiting	Up to £100 a day	Up to £100 a day	Not Insured
	Maximum amount payable for any one Claim	£5,000	£5,000	
5	Lifesaver**	£25,000	£25,000	£25,000
6	Loss of or Damage to Personal Belongings	Up to £2,000	Up to £2,000	Not Insured

7	Recruitment Expenses following suicide**	Not Insured	Up to £15,000	Not Insured
8	Return Home	Up to £2,000	Up to £2,000	Not Insured
9	Trauma Counselling	Up to £2,000	Up to £2,000	Not Insured
10	Workplace Assault	Not Insured	Up to £5,000	Not Insured

** Note that in respect of Item 5 (Lifesaver) and Item 7 (Recruitment Expenses following suicide) the **Benefit Amount** is payable to the **Group Policyholder** only and cover applies regardless of whether Insured Persons Category B (Employees) in the **Group Policy Schedule** is stated as 'Insured' or Not Insured'.

SECTION 9 Assistance			
Item	n Benefit Description		
1	Assistance Services		
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Item	Benefit Description	Benefit Amount	
1	Crisis Management	Up to £75,000 per Crisis	
	Aggregate Limit in any one Period of Insurance	£75,000	

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