

## **Group Personal Accident and Sickpay Schedule**

		Group Policy Details	5	
Policy Number:	CQ8420AHA235			
Insured:	Lincolnshire Police Group Insurance Benefit Scheme			
Address:	Police Headquarters, PO Box 999, Nettleham, Lincoln, LN5 7PH			
Business description	Police Federation			
Period of Insurance	Effective: Issue Date:	01 October 2023 27 September 2023	Expiry Date:	30 September 2024
Insurer:	The policy is underwritten by Millstream Underwriting Ltd, Registration No. 3896220. Registered Office: 52-56 Leadenhall Street, London, EC3A 2EB on behalf of: Arch Insurance Company (UK) Limited, 5 <sup>th</sup> Floor, Plantation Place South, 60 Great Tower Street, London, EC3R 5AZ. Financial Conduct Authority Firm reference number: 229887			
Premium:	Premiums are calculated in accordance with rates agreed between Millstream Underwriting Limited and the <b>Insured.</b> These will be included as part of the premium for the <b>Insured</b> Benefit Scheme paid by the Member to the <b>Insured.</b>			
Intermediary Name:	Philip Williams Insurance Management			

Insured Persons and Operative Times				
	Insured Persons	Sections Covered	Operative Time	
Category A	Any Member serving as a police officer or police staff up to the age of 70	A, B and all Endorsements listed	24 Hours	



Policy Limitations			
Accumulation Limit	Maximum Limit per Insured Person		
Any one event	£10,000,000		
Per event for all Insured Persons travelling in a multi-engine aircraft	£1,000,000		
Per event for all insured persons travelling in any other aerial device other than a multi-engine aircraft	£1,000,000		

Section A: Personal Accident				
		Insured Persons		
	Benefit Description	Category A – Limits Per Person		
1.	Death	Not Covered		
2.	Permanent Total Disablement	£100,000		
3.	Permanent Disabling Injury: Maximum Benefit	£50,000		
4.	Loss of sight in one eye	£50,000		
5.	Loss of sight in both eyes	£50,000		
6.	Loss of one limb	£50,000		
7.	Loss of two or more limbs	£50,000		
8.	Loss of hearing in one ear	£12,500		
9.	Loss of hearing in both ears	£50,000		
10.	Temporary total disablement	Not Covered		
	Deferment Period	N/A		
	Benefit Period	N/A		
	Section A: Exter	nsions		
	a. Un-planned Hospital Confinement (per overnight stay)	£50 per night up to a maximum of £350		
11.	b.Planned Hospital Confinement (per overnight stay	Not Covered		
	Deferment Period - Planned	3 nights		
12.	Unsociable Hours Benefit	£1 per USH		
13.	Emergency Dental Treatment	Up to £500		
14.	Criminal Court Compensation Award	Up to £500		
15.	On Duty Assault Firearm/Stabbing	£1,500/£750		
16.	Burns causing Disfigurement or Scarring	Up to £5,000		
17.	On Duty Acquired HIV or Hepatitis B	Not Covered		
18.	Convalescent Benefit	£70		

Section B: Sickpay			
Romofit Docavintian	Insured Persons		
Benefit Description	Category A – Limits Per Person		
Benefit	20% of monthly salary		
Qualifying Period	182 Days		
Benefit Period	182 Days		
Section Limitation	20% of the Chief Inspectors Gross Basic Pay at the Highest Pay Point		



lorsement 1: Permanent Disabling Injuries – Scale of Benefits			
nefit 3. Permanent Disabling Injuries is extended to include the fol	owing benefit:		
	Catego	ry A	
Maximum Benefit	£50,0	000	
	Percentage of Maxim	um Benefit payable	
Total loss of use of:	Left	Right	
i) The back or spine below the neck with no damage to the spinal cord	40%		
ii) The neck or cervical spine with no damage to the spinal cord	30%		
iii) Shoulder or elbow	25%	30%	
iv) Wrist	20%	25%	
iv) Hip, knee or ankle	25%	6	
Total loss of or total le	oss of use of:		
i) Foot below the level of the ankle (talo-tibial joint)	50%	6	
ii) a thumb	20%	25%	
iii) a forefinger	15%	20%	
iv) any other finger	10%	15%	
v) a big toe	10%		
vi) any other toe	3%		
Fractured leg or foot with established non-union	25%		
Fractured knee cap with established non-union	20%		
Shortening of leg by at least 3 centimetres	15%		
Removal of lower jaw by surgical operation	30%		
Complete and irrecoverable loss of:			
i) Sense of smell	10%		
ii) Speech	100%		
	Maximum Benefit  Total loss of use of:  i) The back or spine below the neck with no damage to the spinal cord  ii) The neck or cervical spine with no damage to the spinal cord  iii) Shoulder or elbow  iv) Wrist  iv) Hip, knee or ankle  Total loss of or total ledition in the spinal cord in the spin	Maximum Benefit 3. Permanent Disabling Injuries is extended to include the following benefit:    Catego	

For a **Permanent Disability** not listed above, the benefit payable will be based on **Our** medical assessment of the degree of disability in relation to the above scale and without reference to **the Insured Person**'s occupation Provided that:

- a. The total benefit payable shall not exceed 100% of the Maximum Benefit for each **Insured Person** in respect of any one **Accident**.
- b. If benefit is payable for Loss of or Loss of use of a Limb then benefits for parts of that limb cannot be claimed.