

INSURANCE: COVER AND LIMITATIONS

PROCEDURE[®]

DOCUMENT SUMMARY/KEY POINTS

- The hospital's insurance coverage is provided through the NSW Treasury Managed Fund (TMF) – a self-insurance scheme.
- TMF coverage includes: Property; Liability; Miscellaneous; Motor Vehicle and Workers Compensation.
- Property claims incur an excess of 50% of the value of each claim up to a claim value of \$6,000 (maximum excess \$3,000).
- Liability claims incur an excess of 50% of the value of each claim up to a claim value of \$10,000 (maximum excess \$5,000)
- The claim excess will be borne by the relevant cost centre.
- Claims below \$300 will be referred to the cost centre/department manager for review. Approval of this claim will be at the discretion of the cost centre/department manager as the costs will be borne by the originating cost centre.
- Claim Forms are available on the intranet under [Resources – Risk Management and Insurance](#).
- Special events/activities are subject to approval by the Chief Executive (or authorised delegate), and will require completion of an [Approval of Activities for Indemnity Purposes](#) form and a [NSW Health Risk Management Plan \(for Certificate of Currency\)](#).
- Personal property is not covered unless lost or damaged during official travel, and must be >\$300.
- Use of personal vehicle for official business is subject to special provisions.
- **For enquiries regarding insurance coverage and limitations email SCHN-Insurance@health.nsw.gov.au or for further information go to [Risk Management and Insurance](#) on the SCHN intranet.**

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
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Team Leader:	Network Manager	Area/Dept: Medical Administration

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This Policy/Procedure may be varied, withdrawn or replaced at any time. Compliance with this Policy/Procedure is mandatory.

CHANGE SUMMARY

Updated links to revised Treasury Managed Fund Statement of Cover

Updated claim forms and links to same

Updated information regarding indemnity coverage for Visiting Medical Officers (VMOs), Visiting Dental Officers (VDOs), Honorary Medical Officers (HMOs), Honorary Dental Officers (HDOs), Oral and Maxillofacial Surgeons, Staff Specialists Levels 2 – 5 and Clinical Academics.

Updated Miscellaneous coverage, particularly Volunteers, Work Experience Participants/ Students, Observers

Updated information on insurance exclusions.

READ ACKNOWLEDGEMENT

- Read Acknowledge Only – Department Managers, Clinical Program Directors, Medical and Dental Practitioners [Visiting Medical Officers (VMOs), Visiting Dental Officers (VDOs), Honorary Medical Officers (HMOs), Honorary Dental Officers (HDOs), Oral and Maxillofacial Surgeons, Staff Specialists Levels 2 – 5 and Clinical Academics].

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Introduction

Insurance coverage is provided through the NSW Government's self-insurance scheme known as the **Treasury Managed Fund (TMF)**. The [Statement of Cover](#) is the explanatory document of the self-insurance scheme.

The self-insurance scheme covers the assets and liabilities risks of TMF Agencies (most NSW Government Agencies), including NSW Health and the Sydney Children's Hospitals Network (Randwick and Westmead) (incorporating the Royal Alexandra Hospital for Children) (the Network).

Currently, there are five (5) lines of insurable risks:

1. Liability
 - i. Health Liability (for NSW Department of Health) – includes public liability, products liability, professional indemnity, directors/officers liability, contract liability and medical negligence.
 - ii. Non-Health Liability (for all other TMF Agencies)
2. Property
3. Miscellaneous, including personal accident and protection for overseas travel and coverage for Volunteers.
4. Motor Vehicles
5. Workers' Compensation

The Suncorp Group (including GIO) currently provide the claims management services for the first four lines of insurable risks outlined above for TMF Agencies. Employers Mutual Limited (EML) provides workers compensation claims management services for the Network.

To rationalise the clerical cost of submitting and dealing with small claims, amounts less than \$300 (known as a franchise) will be borne by the originating cost centre and are not covered by the Statement of Cover, with the exception of Worker's Compensation. The operation of a franchise provides that the amount of the claim is paid in full, as opposed to an excess where the excess amount is deducted from the claim total. Where an excess is payable, the originating cost centre will bear the cost of the excess.

The extensive protection provided through the [Statement of Cover](#) is based on an obligation by protected entities, which is "accountability" through the implementation and practice of risk management principles. Refer to NSW Health's [NSW Health's Risk Management Policy and Framework](#).

Liability

TMF will indemnify the Network for:

- All Board members and members of other organisational governance committees, including Audit and Risk Management, Finance and Performance, Health Care Quality, Medical and Dental Appointments, Families and Consumer Council and so on, are covered by the Statement of Cover for “any legal liability” alleged or actual, as long as the action is not based on an illegal and/or criminal act, or outside the scope of their duties.
- Liability coverage is also provided for all employees and approved volunteers for any liabilities arising from the performance of their duties.
- TMF will pay all sums which the Network shall become legally liable to pay by way of compensation in respect to claims made, and which were caused by an occurrence in connection with hospital activities worldwide.

Medical and Dental Practitioners

- Dental Officers, Junior Medical Officers, Career Medical Officers, Dental Specialists, Post Graduate Fellows and Staff Specialists Level 1 are provided liability coverage for **both public and private patients** as part of their employment contract.
- Staff Specialists Level 2 -5 and, where applicable, Clinical Academics, are provided liability coverage for **public patients only** as part of their employment contract and are eligible to obtain liability coverage for private patients by signing a Contract of Liability Coverage for Private Patients.
- Visiting Medical Officers (VMOs), Honorary Medical Officers (HMOs) and Staff Specialists Levels 2 -5 (SS 2- 5), Clinical Academics and Oral and Maxillofacial Surgeons who sign a contract of liability coverage and satisfy the conditions for indemnity, such as a current service contract with the organisation are **eligible** for liability coverage in the treatment of **private patients** in public health facilities.
- Coverage is provided for the term of the contract unless terminated earlier in accordance with the Contract of Liability Coverage.
- A [Fact Sheet](#) is available on the intranet to provide further information on coverage for senior medical and dental practitioners.
- Detailed information is contained in TMF’s [Statement of Cover](#). You can also contact the Office of the Director of Clinical Governance on 9845 3475 for further information on indemnity coverage for medical and dental practitioners.

Note: If **non-standard contract arrangements** have been made with a VMO **and** where approval has not been obtained from the Director-General, NSW Health imposes a \$50,000 claims excess on all claims for medical indemnity. If the cost of any claim is less than \$50,000, the value of excess will not exceed the cost of the claim.

Coverage for Clinical Trials

The commercial sponsor of the clinical trial must provide indemnity for their liabilities that arise in the course of the clinical trial, and provide evidence of this insurance (which includes public and products liability).

If the trial site is part of the Network, and the principal investigator of the clinical trial is a Network employee, then TMF coverage is provided for civil liabilities that arise from the conduct of clinical trials and coverage applies to all employed non-specialist medical practitioners (interns, registrars, CMOs) and Staff Specialists Level 1 and non-medical practitioners (nurses, allied health) that arise from their conduct in carrying out clinical trials in the course of their employment. Coverage is provided to Staff Specialists Levels 2 – 5 for private patients if they have signed the Contract of Liability Coverage for private patients. Aspects of clinical trial activity which constitute health care will be covered under these contracts.

For investigator initiated trials or experimental therapy, approval must be given by the Human Research Ethics Committee (HREC) and the relevant approval must be given by the Therapeutic Goods Administration (TGA). Aspects of the clinical trial or experimental therapy which constitute health care will be covered under the TMF as described above.

Further information is provided in NSW Health's PD2011_006 [Clinical Trials – Insurance and Indemnity](#).

Special events liability coverage

The Network-run special events must be approved by the Chief Executive (or authorised delegate) in order for organisation's liability coverage to be extended to these events. A request for a "**Certificate of Currency**" (insurance certificate) identifying the hospital's liability coverage also requires approval by the Chief Executive (or authorised delegate)

Requests for special events liability coverage must be processed through the respective Department Manager by completing the [Approval of Activities for Indemnity Purposes](#) form and a [NSW Health Risk Management Plan \(for a Certificate of Currency\)](#).

Please note that processing of applications for special events liability coverage can take up to two weeks, so it is requested that applications are submitted in a timely manner. Failure to secure appropriate liability coverage may result in TMF's refusal to cover any future liability claims arising from the event.

If you are unsure as to whether an event requires special events liability coverage, contact SCHN-Insurance@health.nsw.gov.au.

Liability Claims

- Liability claims incur an excess of 50% of the value of each claim up to a claim value of \$10,000 (maximum excess is \$5,000). Network facilities and activities must be constantly assessed to ensure exposure to potential liability is minimised.
- The [Health Liability Claim Notification Form](#) is available on the intranet. The form needs to be completed with relevant supporting documentation (such as an IIMS report, images, Security report, statement of claim) included as part of the claim submission.

- If an incident report has been completed on 'Safety at Kids' /Incident Information Management System (IIMS), the incident identification number also needs to be included when completing the Liability Claim Notification Form.
- Forward the completed Health Liability Claim Notification Form AND supporting documentation/evidence to SCHN-Insurance@health.nsw.gov.au.
- Once information has been reviewed, the claim form and supporting documentation will then be forwarded to TMF for processing the claim.
- For medico legal claims or notifications, contact the Director of Clinical Governance and Medical Administration, and for other liability claims or notifications, contact the Director of Finance and Corporate Services.

Property

TMF will indemnify the Network for:

- Loss and/or damage to all real property it owns or has an interest in (such as leased property) provided the loss and/or damage is unexpected or accidental, real and can be quantified in monetary terms
- Loss and/or damage to the property in the care, custody or control of the Network for any reason and for which the Network is responsible for, provided the loss and/or damage is unexpected or accidental, real and can be quantified in monetary terms
- Consequential loss and increased costs of operation as a direct result of the physical loss of or damage sustained by the property as described above.
- Loss of revenue and/or reasonable additional costs incurred with TMF's approval if the business or operation of the Network is interrupted as a result of loss and/or damage to any property.

In the case of loss or damage to property is for full replacement or reinstatement (new for old).

Principles of risk management are to be applied to property protection to eliminate, or at least minimise, theft and damage.

Note that Property coverage does **not** include motor vehicles or personal effects/personal property.

Property Claims

- Property claims incur an excess of 50% of the value of each claim up to a claim value of \$6,000 (maximum excess \$3,000). The excess is to be borne by the relevant cost centre.
 - For example: if the cost of replacing a stolen laptop is \$2500, the cost centre would pay an excess of \$1250.

- For example: if the cost of replacing or repairing medical equipment was \$7000, the cost centre would pay an excess of \$3000.
- Property losses (theft) must be reported to NSW Police via the Police Hot Line 131444 and the event number recorded for the insurance claim. The appropriate Security Department (CHW/SCH-R) must also be notified
- Incident details are to be recorded on 'Safety at Kids' /Incident Information Management System (IIMS), under "Property, Security, Hazard" and a [Property and Miscellaneous Claim Notification Form](#) needs to be completed.
- Replacement or repairs should only be initiated after confirmation of claim acceptance by the TMF. Assumptions should not be made that the claim will be accepted.
- If a claim is accepted by TMF, evidence of replacement or repairs (copy of invoice) must be provided before the TMF will finalise claim reimbursement. Invoice copies are to be forwarded with an indication of the Cost Centre into which the insurance cheque should be paid. This cost centre will also cover the cost of property excess payments. Payment will be made directly to SCHN General Fund for the full amount. NSW Health via Finance will then recoup excess payments from the respective Cost Centre.

Miscellaneous

Coverage for Volunteers

Injury to Volunteer Worker

- Coverage for volunteers who are injured while actively engaged in voluntary work is for out of pocket medical expenses, after initially claiming from Medicare and/or private health funds.
- Injuries arising out of the use of a motor vehicle would normally be covered under motor vehicle insurance. For SCHN vehicles where there is damage to a vehicle, notification to the appropriate Fleet Manager is also required. Refer to instructions under [Motor Vehicle](#) for damage to vehicle.

Injury to Volunteer Worker Claims

- The Department Manager Volunteers (or appropriate manager) needs to complete the [Property and Miscellaneous Claim Notification](#) form available on the intranet.

Theft/Loss of Personal Belongings

- The hospital takes no responsibility for volunteer's personal belongings; all volunteers must be security conscious and ensure their belongings are kept in a safe place.

Injury to a Patient whilst being assisted by a Volunteer

- If a patient is injured whilst in the care of a volunteer, liability cover is provided for the patient.
- Follow instructions under [Liability Claims](#).

Travel – Official Visits of Employees Abroad

Tourists and Travellers personal accident protection automatically covers employees and approved persons against injury or death by accident while travelling abroad. The coverage is in accordance with and equivalent to the benefits payable under *the NSW Workplace Injury Management and Workers Compensation Act 1998*, as amended. In addition, medical expenses of up to \$1,000,000 are covered while outside of Australia. Refer to NSW Health's Policy Directives for [Official Travel](#) or [Training, Education and Study Leave \(TESL\) for Staff Specialists](#) for further information.

The workers compensation entitlements are limited and may be considered inadequate for those on high salaries. Supplementary personal accident coverage may need to be considered but this remains a personal choice and responsibility. The workers compensation rates are indexed quarterly and are available through the Work Health, Safety and Rehabilitation Manager.

Coverage is available 24 hours per day whilst on official business. However, if recreation, long service or leave without pay is taken whilst abroad, private arrangements should be made to obtain any insurance coverage for that period.

Coverage is also provided for baggage and personal effects lost or damaged whilst travelling in Australia and Overseas on official business. Claim value is limited to \$10,000 per claim and must be greater than \$300.

If an employee is injured or seeks medical treatment overseas whilst on official business they need to obtain medical certificates, invoices or receipts from the country where the injury occurred and upon return to Australia they will still need to consult their General Practitioner to obtain a NSW WorkCover medical certificate (this documentation is required by the Network's Workers Compensation Insurer).

Coverage for personal accident protection for family members (spouse and children) accompanying **Network employees on official overseas business** is provided. If the Network employee takes recreation, long service or leave without pay is taken whilst abroad, **private arrangements should be made to obtain any insurance coverage for accompanying family members for that period.**

NOTE: Coverage does not extend to unforeseen costs incurred by flight cancellations and schedule changes except where the employee is injured or seeks medical treatment overseas while on official business.

Travel (Miscellaneous) Claims

- For personal effects loss or damage, including lost/damage baggage, complete the [Miscellaneous – Travel Claim Form](#) on the intranet.
- For baggage related claims, the employee must notify the airline in the first instance, then provide supporting documentation when making a claim.

- For personal effects loss or damage, the employee must include supporting documentation when making a claim. Supporting documentation can include copies of authorization for approved travel, incident/police reports, proof of original ownership, quotes for repair/replacement, invoices/receipts and credit card statements.

Dynamiq (Medical, Security and Evacuation Services)

TMF has a contract with Dynamiq to provide emergency medical advice, security advice and emergency evacuation and repatriation services to Network staff that are overseas on **approved official Network business**. For further information go to Dynamiq's [Travel Protection for the TMF](#) or to [Dynamiq's website](#).

Dynamiq provides access to medical, security and travel assistance 24 hours a day, 7 days a week and can be contacted (reverse charge) anywhere in the world on:

Emergency Hotline: +61 2 9978 6682

Fax: +61 2 9888 3609

SMS: +61 416 907 493

Email: assistance@dynamiq.com.au

Web: <http://dynamiqglobal.com>

Event Cancellation

Under the Statement of Cover, “**Event**” means any organized activity attended by members of the general public or a particular group of the public and includes an attraction, celebration, contest, display, fundraiser, performance, spectacle, play, drama, match, game, meet, exhibition or curtain raiser. Examples of events include Bandaged Bear Day and Teddy Bear’s Picnic.

TMF will indemnify the Network for losses due to the cancellation of a Network-organised event, provided the loss is fortuitous and beyond the control of the Network.

Losses include losses as a result of an occurrence that makes the venue unusable, such as fire or earthquake; severe or life threatening weather conditions such as flood, tropical cyclones or lightning; power failures; mechanical breakdown; and equipment delays.

Event Cancellation Claims

- Complete the [Miscellaneous/Travel Claim Form](#) which is available on the intranet.
- Provide any relevant supporting documentation to assist with processing the claim.

Work Experience Participants/Students Engaged in Education Work

Most work experience placements result from Universities, Technical and Further Education (TAFE) Institutes, Registered Training Organisations (RTOs) and Public Schools with liability

and personal accident insurance provided by the parent organisation –**therefore insurance coverage is not provided by the Network.**

However, there may be a number of work experience requests from individuals, independent of any parent organisation, where the individual does not have, or is unable to purchase suitable coverage. In considering a work experience placement for a person who does not have personal accident and liability insurance, Department Heads must weigh up the risks and benefits to the hospital.

If there are **no** benefits to the Network, then the decision should be not to accept the risk.

If there are benefits to the Network, and the Department Head decides to approve the work experience placement without personal insurance, coverage shall be provided the same as for volunteers.

All work experience participants/students engaged in education work **must complete** the relevant [Applicant Information](#) which includes:

1. Applicant's Declaration Form
2. National Criminal Record Check Consent Form
3. Volunteer/Student Declaration Form

The completed forms must be forward to Workforce Services.

Motor Vehicle

TMF provides full comprehensive coverage for vehicles owned and leased by the Network, including third party legal liability property damage. TMF will indemnify the Network against loss or damage to a motor vehicle sustained while the motor vehicle was being used for the purpose of or in connection with Network business. TMF will repair, reinstate or replace the vehicle or parts thereof or pay an amount not exceeding the actual replacement cost, new for old.

TMF must replace the covered vehicle if the cost of repairs is fifty-one (51%) or more of the actual market value of the vehicle prior to the loss or damage.

All motor vehicle damage and motor vehicle accidents are to be reported to the respective hospital's Fleet Manager who will then process any necessary insurance claim.

Drivers of hospital vehicles are to observe motor vehicle management policies issued by the Transport Department/Fleet Management and are to take all reasonable measures to avoid damage to vehicles under their care. Personal and hospital property should not be left in an unattended vehicle unless unavoidable or impracticable to remove at the time.

TMF defines motor vehicle as "a mechanically propelled vehicle designed for use on land only, its standard tools and accessories and extends to include trailers, caravans and any vehicle used in substitution of a vehicle covered by this Statement of Cover, similar to the vehicle which it replaces, whilst that vehicle is not in use as a result of a claim under this [Statement of Cover](#)."

Use of Motor Vehicles within NSW Health (including the Network)

Refer to NSW Health Policy Directive PD2014_051 [Motor Vehicles – Use of Within NSW Health](#) for further details.

There are 3 types of arrangements in NSW Health for use of motor vehicles:

1. Health Executive Service (SES/SES Equivalent, Non-Award Salary Remunerated Employees and NSW Health Senior Officers)

Employees who have been appointed to positions in the Health Executive Service have been allocated a motor vehicle for business and private use. Annual registration, insurance (including repairs), roadside service arrangements, maintenance, repairs and running costs, including fuel will be paid for by the Transport Department/Fleet Management.

2. Award Employees (NSW Health Service/Network employees only)

Employees who require the use of an official motor vehicle for official purposes during the normal course of their duties may be offered the allocation of a motor vehicle for private use. Private use of a motor vehicle is only permitted following authorisation by the Chief Executive or delegate.

Annual registration, insurance (including repairs), roadside service arrangements, maintenance, repairs and running costs, including fuel will be paid for by the Transport Department/Fleet Management. Employees are responsible for the payment of any insurance excess if damage occurs whilst the vehicle is being used for private purposes.

Cost for cleaning of vehicles is to be met by the employee and is not to form a charge against the organisation. Any tolls incurred during private travel/personal use must be met by the employee.

3. Official (pool) vehicles

Vehicles are available for business purposes and which compromise part of the Network fleet and are not allocated for private use. Annual registration, insurance (including repairs), roadside service arrangements, maintenance, repairs and running costs, including fuel will be paid for by the Transport Department/Fleet Management. If the vehicle has been donated or is fully funded, costs associated with annual registration, insurance (including repairs), roadside service arrangements, maintenance, repairs and running costs, including fuel will be paid for by the delegated cost centre.

Use of Private Motor Vehicles on Official Business

Where particular awards/determinations have specific motor vehicle allowance provisions, those awards/determinations take precedence (refer to 'Use of Motor Vehicles within NSW Health' above). Refer to NSW Health's Policy Directive PD2016_010 [Travel – Official](#) and Information Bulletin IB2009_049 [Private Motor Vehicle use on Official Business – Transport Rate](#) for further details.

An employee requires **prior approval** from the Network (or authorised delegate) to use a private motor vehicle on official business.

In general, private vehicles are only to be approved for use by employees in the performance of their duties when the following conditions are met:

1. A staff member is directed, and agrees, to use their private vehicle and
2. Prior written approval has been obtained from the Network and
3. No other transport is available.

Staff members who are unable to use other transport due to a disability require prior approval from the Network (or authorised delegate) to use their private vehicle for official business.

Note that all of these requirements must be documented.

If a private motor vehicle is to be used the following insurance requirements are to be met:

1. The motor vehicle must be covered by a policy as required by the Motor Vehicles (Third Party Insurance) Act 1942 (NSW) (as amended).
2. The employee must have in force, at the time the vehicle is being used on official business, a comprehensive policy of insurance or policy of indemnity, providing insurance or indemnity against:
 - i. Liability of the hospital and the employee to pay for loss or damage to property arising out of the use of the vehicle by the employee.
 - ii. Liability of the hospital to pay for loss or damage to the vehicle.

Evidence of employee's insurance coverage must be provided to the employee's manager/supervisor upon request.

Note that if an employee has declared on their motor vehicle insurance policy that the vehicle is for 'private use' only, the employee has a duty of disclosure to inform the insurer that the vehicle is being used for business purposes [s21, *Insurance Contracts Act 1984 (Cth)*]. Failure to disclose this information to the insurer could result in the insurer refusing to pay a claim, the insurance on the vehicle could be cancelled, the insurer may avoid the contract or the liability is reduced [s28, *Insurance Contracts Act 1984 (Cth)*].

Private Motor Vehicles Damaged on Official Business or Other Approved Activities

If a private vehicle is damaged while used for official business, the Network will **consider** applications from employees for reimbursement of excess insurance charges where prescribed by insurers provided:

- The staff member must submit a copy of the authorised request for approval for use of a private vehicle for official business with any reimbursement of normal excess insurance charges, and
- The use of the motor vehicle the accident or damage is not due to gross negligence by the staff member and
- The charges claimed by the staff member are not the charges prescribed by the insurer as punitive excess charges.

If a claim is not made on the insurer, for example, to avoid loss of a no-claim bonus, the maximum reimbursement is the prescribed excess that would have been paid had a claim been made, or the actual cost of repair, whichever is the lesser.

Broken or damaged windscreens

A staff member shall be reimbursed the costs of repairs to a damaged windscreen or replacement of a broken windscreen where:

- The use of a private motor vehicle had been approved for official business
- The damage or breakage was sustained in the course of that official business
- The costs cannot be met under insurance policies due to excess clauses, and
- The damage is not the fault of the staff member.

The maximum amount to be reimbursed is the cost of replacing the broken windscreen with one of the same type as that broken, or the amount of the prescribed excess, whichever is the lesser.

Use of private motor vehicles - temporary work locations (TWL)

Where approval is given by the Network for a staff member to proceed to a temporary work location for two days or more, approval may also be given for the staff member to take their private car to the temporary work location.

If approval has been given, motor vehicle allowances are to be paid in accordance with NSW Health PD2016_10 [Official Travel](#).

Motor Vehicle Claims

Network owned or lease vehicles

- If a Network employee is involved in an incident or accident, and the subject motor vehicle is used in accordance with [Use of Motor Vehicles within NSW Health \(including the Network\)](#), then the employee must immediately contact the Transport Department/ Fleet Manager and notify of them of the incident or accident.
- Complete a [Motor Vehicle Claim Form](#) available on the intranet or by contacting the Transport Department/Fleet Manager.
- If a Network employee is involved in an accident while travelling for work then they may be able to lodge a claim for workers compensation - contact the SCHN Work Health and Safety Coordinator/ Work Health and Safety Manager for further information or go to the [Workers Compensation](#) section in this document.

Privately owned vehicles

If a Network employee is involved in an incident or accident in their private vehicle while on official business, refer to [Private Motor Vehicles Damaged on Official Business or Other Approved Activities](#) above.

Injury in a motor vehicle accident

If a Network employee is injured in a motor vehicle accident travelling between the workplace and home, they may be entitled to compensation under the Compulsory Third Party (CTP) Scheme. Further information is available on the [Motor Accidents Authority](#) website.

Workers Compensation

TMF will indemnify the Network for its workers or deemed workers in accordance with the [Workplace Injury Management and Workers Compensation Act 1998](#) (NSW), as amended. All work injuries must be documented as soon as possible after the incident by entering related details into Safety at Kids/Incident Information Management System (IIMS). The Occupational Health and Safety Coordinator/Workplace Safety Manager must also be notified to ensure all compensable injuries are reported to our insurer within the required 48 hours. Reference should be made to the local Injury Management Procedures.

Employees are also covered by Workers Compensation if they have been authorised to participate in a NETS (Newborn and paediatric Emergency Transport Service) retrieval or participate in a medical team as part of disaster response (medical, nursing or other specialty/profession).

Employees from other organisations

Employees from other Health services, government agencies or other organisations are covered by their employers' workers compensation while performing work-related duties on the Network's premises, for example when attending meetings or participating in the transfer of patients.

Contractors

In the event that THE NETWORK engages contractors (individuals, companies or other organisations), evidence of appropriate insurance must be provided (current Certificate of Currency) to THE NETWORK.

The **contractor must take out and keep in force during the life of the contract:**

1. Statutory Workers Compensation Insurance for all personnel
2. Public Liability Insurance in the amount not less than \$20 Million for any one occurrence and in the aggregate for any one period of cover.
3. Professional Indemnity Insurance in the amount of not less than \$20 Million for any one occurrence and in the aggregate for any one period of cover.
4. Products Liability Insurance in the amount not less than \$20 Million for any one occurrence and in the aggregate for any one period of cover.

What is not covered under the Network's insurance?

Personal Effects Coverage (Personal Property)

The Department of Health's policy is that personal property of employees is **not** covered, with the **only** exception is for employees on official travel, and the coverage is for costs greater than \$300.

Consideration may be given if there are extenuating circumstances involved, however, in the majority of cases, personal property of employees will not be covered under insurance. The following questions are usually asked in the event of a claim/loss:

- Was the staff member/employee instructed/requested to bring this item to work by senior management or the Executive?
- Did the hospital give an undertaking that they would cover this item in the event of theft or damage?
- Is there any documentary evidence of this arrangement?

If you have personal insurance such as 'Home and Contents', check with your insurer to see if you are eligible to make an insurance claim under your personal policy.

Certain travel-related expenses (not including personal effects loss or damage)

Coverage for purchase of incidental items, food, and accommodation is not available under Insurance as employees are usually provided with a living allowance.

Personal payment for purchase of additional tickets or fees associated with changing departure/arrival times for airline/train/bus travel or accommodation due to unforeseen circumstances and so on are not covered under insurance. Wherever possible, employees are encouraged to contact air/train/bus/hotel companies directly to seek compensation or reimbursement for additional costs incurred.

Student/Work Experience Placements

As documented previously, most work experience placements result from Universities, TAFE and Public Schools where liability and personal accident insurance provided by the parent organisation – and **therefore insurance coverage is not provided by the Network**. Where this occurs, the following documentation must be completed:

1. NSW Health IB2016_024 [NSW Health Student Placement Agreement for Entry into a Health Occupation](#).
2. A copy of the parent organisation's Certificate of Currency must be provided (a NSW Health requirement)
3. Evidence of vaccination as required by NSW Health
4. [Applicant Information](#) which includes:

- i. Applicant's Declaration Form
- ii. National Criminal Record Check Consent Form
- iii. Volunteer/Student Declaration Form

The completed forms must be forward to Workforce Services.

Event Cancellation – certain circumstances

TMF will **not** provide coverage for losses associated with event cancellation under these circumstances:

- Event would not be financially viable, for example, due to lack of ticket sales or lack of sponsorship
- The Network failed to make all necessary arrangements to ensure the event could be held on time and at appropriate venue
- Assumed by contract, warranty or agreement (that is, a valid contract or agreement was assumed to have been obtained, however this did not occur and THE NETWORK become liable for costs and associated losses)
- Connection with any illegal activity
- Arising from pollution, other than sudden or accidental.

Refer to the [Statement of Cover](#) for further information on exclusions of coverage.

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