

DUAL Social Care

Care risks

Proposal form

DUAL

We would remind **you** that **you** must answer **our** questions **we** ask **you** honestly and with reasonable care. The answers provided to **our** questions affect **our** assessment or acceptance of this insurance. **You** must tell **us** immediately of any facts or changes which might affect those answers. If **you** do not disclose all relevant facts **you** may invalidate **your** Policy or **your** Policy may not operate fully.

In deciding to accept this insurance and in setting the terms and premium, **we** have rely on the information **you** have given **us**. **You** must take care when answering any questions **we** ask by ensuring that all information provided is accurate and complete ("Your Obligations").

If **you** have fraudulently misrepresented any answer to **our** questions **we** ask **we** shall have the right to avoid this Policy. A fraudulent misrepresentation is one that is false or misleading in any respect and which the insured either knows to be false or misleading or consciously disregards whether it is false or misleading.

If **you** have negligently misrepresented any answer to **our** questions before entering into this Policy, what **we** do will depend on what **we** would have done if **you** had given the correct information, as follows:

1. If **we** would not have entered into the Policy, **we** will avoid it. This means **we** will:
 - a. treat the Policy as if it never existed and **we** will not cover any claims or losses under it;
 - b. require **you** to repay any payments already made by **us** under the Policy; and
 - c. return the premium to **you**.
2. If **we** would have entered into the Policy but on different terms (other than as to the premium), the Policy will remain in force as if those other terms had been in force from the start of the Period of Insurance. This may result in **us** not covering a claim or loss, or reducing the amount **we** pay.
3. If **we** would have entered into the Policy but charged a higher premium, **we** will reduce the amount **we** pay for a claim or loss. The amount **we** pay will be the proportion of the claim or loss that the premium **we** charged bears to the premium **we** would have charged if **you** had given a fair presentation.

Both 2 and 3 above can apply at the same time.

Your Obligations also apply when the Policy is varied or renewed. It is important when answering **our** questions at each variation or renewal that **you** provide to **us** any relevant information, including any new information or responses previously provided, if it remains relevant to answer **our** questions.

The above is provided for illustrative purposes and is not intended to amend or disapply any of the statutory rights or duties that apply under the Consumer Insurance Contract Act 2019.

Part A | You and your services

A1. Insured name

A2. Period of insurance

A3. Correspondence address

A4. Business trading addresses

Premises 1

Premises 2

Premises 3

Premises 4

Premises 5

Premises 6

Premises 7

Premises 8

Premises 9

Premises 10

A5. Year business established

A6. Current insurer/MGA

A7. Current broker

Premises 1

A8. Is the business registered with the Health Information and Quality Authority or equivalent regulatory body? Yes No

If you have answered 'yes' to question A9 above, please provide score achieved

A9. Date of last inspection

A10. Are there any outstanding requirements? Yes No

If you have answered 'yes' to A11, what are they?

A11. Please provide details of any regulation action planning to support any outstanding requirements

A12. What services is your business registered for?

A13. Residents minimum age

A14. Registered number of beds provided

A15. Number of beds currently occupied

A16. Is it the homes intention to accommodate residents:

a. Displaying, or with potential to display aggressive or violent behaviour? Yes No

b. With a history (actual or attempted) of sexual offences, arson, or attacks on people or property Yes No

If you have answered 'yes' to A16a or A16b, please provide details

Part B | Experience/qualifications in the sector

B1. Qualifications of the registered manager

B2. Owner experience in the sector

Part C | Employees and safeguarding

C1. In respect of all employees, are Garda Vetting checks completed? Yes No

C2. What training is provided to monitor and handle violent and aggressive behaviour?

C3. Are necessary checks carried out regarding employees' qualifications, past employment and health? Yes No

C4. Do you provide induction training incorporating company policy and procedures and provide a system that can evidence employee training and development? Yes No

C5. Do you operate a system in respect of recording instances or allegations of abuse or assault on employees or service users and the subsequent actions taken? Yes No

If you have answered 'no' to C3, C4 or C5, please provide details

C6. Do you have a health and safety system in place, as well as a written protection policy to guard against abuse of your service users? Yes No

C7. How is accident reporting undertaken and controlled?

C8. If applicable, can a view be taken across more than one site to establish any trends? Yes No

Part D | Insurance cover required

D1. Is cover for computer and electronic office equipment required? Yes No

Premises 1

D2. Is buildings, tenants' improvements or debris removal only cover required? Yes No

Please select

Sum insured

D3. Is contents cover required? Yes No

Sum insured

D4. Does this include residents contents? Yes No

Sum insured

D5. Does this include stock? Yes No

Sum insured

D6. Is business all risks cover required, including any computer equipment away from the premises? Yes No

Sum insured

Part E | Premises details

Premises 1

E1. Approximate year of construction of property

E2. Is the premises purpose built for the current usage? Yes No

If you have answered 'no' to E2,
please provide details

E3. Are the buildings external walls are built of brick or stone and roof constructed of slate or tiles? Yes No

If you have answered 'no' to E3,
please provide details

E4. What % of the roof is flat?

E5. Do you or any other staff members live at the premises?	Yes	No
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E6. Is the premises occupied solely as a care home?	Yes	No
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If you have answered 'no' to E6,
please provide details

E7. Are staff in attendance 24 hours per day?	Yes	No
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If you have answered 'no' to E7,
please provide details

E8. Is the property on a site that has suffered from flooding at any time over the past 10 years	Yes	No
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If you have answered 'yes' to E8,
please provide details

E9. Is the building in a good state of repair?	Yes	No
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If you have answered 'No' to E9,
please provide details

E10. Is the property a listed building?	Yes	No
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If you have answered 'yes' to E10,
please state grade

E11.	Has the property been affected by movement, for example subsidence, heave or landslip, any drainage issues or situated on made up ground, near underground workings or near a cliff?	Yes	No
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If you have answered 'yes' to E11, please provide details

E12.	Are all frying and other cooking range flues, exhaust ducting, grease traps, sumps & filters inspected at least monthly and cleaned as necessary (min annual requirement)?	Yes	No
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If you have answered 'no' to E12, please provide details

E13.	Are Regulators in place to restrict the temperature of hot water and radiator / water pipes surface to a maximum of 43°C?	Yes	No
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E14.	Are there any interested parties to be noted?	Yes	No
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If you have answered 'yes' to E14, please provide details

E15. Is there any deep fat frying undertaken at the premises?	Yes	No
<p>If you have answered 'yes' to E15, please confirm the following:</p> <ul style="list-style-type: none"> • Size of deep fat fryer (litres) • Any fire suppression system in place • Fire alarm level and monitoring • They are cleaned to a TR-19 standard (please provide sight of the latest report) • Average usage – i.e. daily / once a week etc • How long are they left to cool whilst supervised • Location of the kitchen within the premises 		

Part F | Business interruption

F1. Do you require cover for business Interruption?	Yes	No
F2. Cover type		

Premises 1

F3. If gross revenue is selected, what is your annual fee income?		
Limit of indemnity		
F4. If increased cost of working is selected, what annual cost is required?		
Limit of indemnity		

F5.	If loss of rent is selected, what is the rent received?		
	Limit of indemnity		
F6.	What indemnity period is required?		
F7.	Do you require cover for loss of registration?	Yes	No
	Limit for loss of registration		

Part H | Liabilities

H1.	Do you require employer's liability cover?	Yes	No
H2.	What are the estimated wage rolls for		
	Clerical/management		
	Nurses/carers		
	Maintenance/auxiliary staff		
	Dom care wageroll		
H3.	Do you require public/products liability cover?	Yes	No
	Public liability basis of cover		
	Public liability retroactive date		
	Limit of indemnity required		
H4.	Is abuse cover required?	Yes	No
	Abuse basis of cover		
	Abuse retroactive date		
H5.	What is the estimated annual revenue for the coming year?		

H6.	Do you require malpractice cover?	Yes	No
	Malpractice & Professional Indemnity limit of liability		
	Basis of cover for Malpractice & Professional Indemnity		
	Malpractice & Professional Indemnity retroactive date		

Part I | Personal accident

I1.	Is Group Personal Accident cover required?	Yes	No
I2.	Are all persons to be insured in a good physical and mental condition?	Yes	No
I3.	Are all persons to be insured under the age of 75?	Yes	No

Part K | General

In respect of the risks to be insured, whether at these premises or elsewhere

K1.	Has an insurer, in respect of all sections to be Insured, declined to issue or renew a policy or imposed special terms or conditions?	Yes	No
K2.	Are you aware of any incidents that may give rise to a claim specifically in relation to abuse?	Yes	No
K3.	Have you or any of your employees (past and present) ever received any disciplinary action or sanctions from any outside agency or been subject to any criminal proceedings within the last 3 years?	Yes	No
K4.	Have any of the Directors, Governors, Officers or Partners of the business ever been declared bankrupt and/or been a Director/Partner of a company which has gone into liquidation, administration, receivership or been subject of a County Court judgement?	Yes	No

If you have answered 'yes' to K1, K2, K3, or K4, please provide details

K5.	Has the business taken technical and organisational measures to comply with GDPR legislation?	Yes	No
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Part L | Claims

L1. In respect of the risks to be insured have there been any losses, damage, injury or liability incidents during the past 5 years, whether insured or not? Yes No

If you have answered 'yes' to L1, please provide full details

A. Premises

Date

Detail

Paid Amount

Reserve Amount

B. Premises

Date

Detail

Paid Amount

Reserve Amount

C. Premises

Date

Detail

Paid Amount

Reserve Amount

Coronavirus declaration

You have complied with the current guidance issued by the government and the Health Service Executive concerning the management of COVID-19 risks including but not limited to:

1.	COVID-19 risk assessments have been completed and communicated to their workforce	Yes	No
2.	Documented procedures which comply with all aspects of the current guidance that are relevant to your business are in place and are being enforced	Yes	No
3.	Risk assessments and procedures will be kept under continual review and will be updated as soon as reasonably practicable should the guidance change or adjustments be required to improve their effectiveness.	Yes	No

Signed

Date

Position

Data Protection and Privacy Statement

How we use information

For the purpose of data protection, the Controller of personal data is DUAL.

DUAL regularly collect and use information which may identify individuals ("personal data") and understand the responsibilities to handle personal data with care, to keep it secure and to comply with applicable data protection laws.

DUAL may share personal data with third parties where DUAL have a valid reason to do so.

Full details on how information is processed, who DUAL may share information with and details about data rights can be found in full at <https://www.dualgroup.com/privacy-and-data-protection-policy>

Full details on how information is processed by us:

Carbon Underwriting Limited protection statement can be found on their website via <https://www.carbonuw.com/legal/privacy-policy> or at <https://lloydseurope.com/privacy-notice/>

Helping you do more

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