

Important Notice

These are examples only. You should read them only as a guide. They do not form part of any policy. Every claim is different. We always determine indemnity decisions and claim payments on an individual basis, after we have assessed the claim. Information provided is general only and has been prepared without taking into account any person's particular objectives, financial situation or needs. Insurance cover and whether a policy responds to a claim is subject to the terms, conditions, limits and exclusions of the policy. When making a decision to buy or continue to hold a financial product, you should review the relevant policy wording and any applicable endorsements.

Social Worker

The insured is a Social Worker and a complaint was made by a client to Health Care Complaints Commission (HCCC) alleging that the insured mislead clients and lacked the necessary qualifications/experience to provide the treatments that they offer and provide. The HCCC issued an investigation report detailing its findings in respect of the investigation. In summary, the HCCC made a number of findings against and recommendations in relation to the insured including failing to maintain accurate, legible and up-to-date clinical records for each client, and the insured must inform HCCC of the steps taken to implement a suitable system for recording and maintaining client records. Total expenses paid were approx. \$24,000.

Pre-Employment/Periodic Medical Assessments

The insured provides clients with pre-placement health/medical screening of workers. The insured contracts Doctors who carry out the physical assessments. The insured received a complaint from one of its clients, regarding a pre-placement medical assessment for a worker. It is alleged that the worker stated that at no time during the medical did the worker (claimant) see a doctor. Despite this, the medical assessment was signed by a Doctor. The insured confirmed that it appeared the particular worker had not been personally examined by the Doctor named in the report. Over \$20,000 spent on inquiry costs.

Private Hospital

The insured operates a private hospital. The claimant was admitted to the hospital for the purpose of rehabilitation and treatment following a knee replacement operation. The claimant had been undertaking hydrotherapy when they exited the pool and attempted to put on a gown, the claimant lost balance and fell, sustaining an injury and required surgery to the arm. Matter settled for over \$200,000 including expenses.

Radiographer

Claimant attended the insured for an x-ray of their elbow (which was in a sling). The insured (Radiographer) in the course of trying to remove the sling with a pair of scissors accidentally pierced the Claimant in the neck. First aid was provided and an ambulance took the Claimant to hospital where surgery was undertaken to treat the puncture wound. The matter was settled for approx. \$60,000 including expenses.

Berkley Insurance Company (limited company incorporated in Delaware, USA) ABN 53 126 559 706 | AFSL 463129 is an APRA authorised general insurer. BIA 08/09/2023 A



1300 800 772 berkleyinaus.com.au