Liability and Personal Accident Insurance for Students on Work Experience

Students participating in authorised work experience are covered by a number of insurance policies held by the University of Newcastle.

The work experience <u>must</u> be program or course related and sanctioned by the Head of School, or other authorised officer, of the Faculty. These insurance policies cover most undergraduate and postgraduate courses. School of Medicine and Public Health students are not permitted to undertake work experience. The attached form needs to be completed by all parties and returned to Assurance Services – Insurance prior to the commencement of any work experience.

Details of some of the relevant insurance covers provided for students are summarised below. All insurance policies contain exclusions, conditions and excesses. Insurance claims will therefore depend on the individual circumstances of each case. Any question in relation to the cover should be directed to Assurance Services - Insurance.

Students will not be covered if they are employed by the work experience provider.

Student Personal Accident Policy - The policy provides cover whilst the student is engaged in work experience activities. It is an accident cover only and does not cover illness or pre-existing medical conditions.

The policy includes a \$50.00 excess payable by the student for each claim for Non-Medicare Medical Expenses and responds after claims are made on any private medical insurance held by the student.

The student plan covers:

- death and capital benefit
- weekly injury benefit
- · home tutorial benefit
- injury assistance benefit
- modification benefit
- medical expenses related to injury up to \$100,000 (only those not claimable on Medicare)

Public Liability Insurance - The University has a public liability insurance policy which protects the University and students against claims which may be brought by third parties in those instances in which the University may be proven legally liable. The policy limit for this insurance is in excess of \$20m.

The student plan covers:

- injury to third parties
- property damage to third parties

Professional Indemnity/ Malpractice Insurance - This policy indemnifies the University of Newcastle against legal liability for claims by third parties for breach of professional duty by an employee or any person for whom the University is responsible eg students, by reason of any negligent act, error or omission in conduct of University business. The policy limit for this insurance is in excess of \$20m.

The policy only applies if you are a qualified/licensed professional.

Workers' Compensation Insurance - Students are not deemed to be employees of the University. They would therefore not be entitled to cover under Workers' Compensation Insurance.

Any questions in relation to the above should be directed to Assurance Services on 02 491 38180 or email insurance@newcastle.edu.au .

Work Experience Insurance Cover Request

PART 1: STUDENT TO COMPLETE	
SURNAME	FIRST NAME
PROGRAM ENROLLED	STUDENT NO.
IS THIS YOUR FINAL YEAR OF STUDY?	PHONE NUMBER
EMAIL ADDRESS	
EDUCATION BENEFITS GAINED THROUGH UNDERTAKING WORK EXPERIENCE AND RELEVANCE TO MY STUDIES	
I understand that this work experience is to assist me in the completion of my program or course and that I will not be paid for carrying out these duties. The Student Personal Accident Insurance cover is for accidental injury only. Any incident should be reported within 7 days.	
SIGNATURE	DATE
PART 2: WORK EXPERIENCE PROVIDER TO COMPLETE	
DATES	ТО
APPROXIMATE HOURS	PER:
COMPANY NAME	
NAME OF WORK EXPERIENCE SUPERVISOR	
POSITION	
PHONE NO.	EMAIL
OPERATIONS TO BE OBSERVED DURING WORK EXPERIENCE	
We confirm that we are providing a safe working environment as required by the Workplace Health & Safety Act and will ensure that the student is supervised at all times. We confirm that this work experience placement will comply with the requirements of the Fair Work Act 2009, in that: 1. the student must not be doing productive work; 2. the main benefit of the arrangement should be to the student undertaking the placement; and 3. it must be clear that the student is receiving a meaningful learning experience, training or skill development.	
SIGNATURE	DATE
PART 3: HEAD OF SCHOOL OR OTHER AUTHORISED OFFICER OF THE FACULTY TO COMPLETE	
I CONFIRM THAT THIS WORK EXPERIENCE IS APPROVED BY THE FACULTY AS:	
☐ This experience is not a compulsory component of the program;	
☐ This experience relates to and supports the learning of the enrolled program; and	
☐ The student is currently enrolled	

DATE

SIGNATURE