

Work Experience & Community Placement Insurance Guide

This guide outlines the insurance available for undergraduate and postgraduate students participating in University approved work experience or community placements while under the direction and supervision of a Host Organisation.

Pre-conditions to this cover:

- The work experience placement is <u>a requirement</u> of the student's course of study.
 - Please note: if the work experience is not a requirement refer to the Voluntary Placement Guide.
- The student's participation has been approved by the Head of School.
- The student is not employed by the Host Organisation where the placement is being undertaken.
- The student is not paid for the work performed.
- The student is supervised by experienced personnel throughout the placement.
- The University is not liable for any negligent act, error or omission on the part of the Host Organisation that results in injury to a student, or loss or damage to the student's personal property.

If you require assistance, please contact the Legal & Risk Branch

• Email: helpdesklegal@adelaide.edu.au

Phone: (08) 8313 4539

Legal and Risk Branch
Division of University Operations
http://www.adelaide.edu.au/legalandrisk
helpdesklegal@adelaide.edu.au

Tel: + 61 8 8313 4539



The University's Insurance Cover

The University obtains insurance to provide protection (indemnity) to the University in the event of a claim made by a third party. Students undertaking approved work experience placements are provided with:

- Public Liability Insurance to a limit of \$20M per any one event for an act, error or omission on the
 part of the student that results in injury loss or damage to the Host Organisation.
- Travel Insurance while undertaking approved University travel.
- Personal Accident Insurance.

Please note that the University's insurance cover does not extend to students working in paid employment.

Steps to obtain cover

- 1. The student must complete Part A of this guide the *Student Placement Agreement* and submit it to the Host Organisation along with copies of the University's certificates of currency for Public Liability, Personal Accident and Travel Insurance (which are attached to this guide).
- 2. The Host Organisation is asked to complete Parts B and D, and note the conditions in Part C, and to return the completed *Student Placement Agreement* to the School Administration Office.
- 3. The Head of School (or delegate) must complete Part E approving the student placement with the Host Organisation and retain the documentation on file.
- 4. To ensure cover remains valid the student or School must report any adverse or notifiable events as soon as they occur the steps to do this are outlined on the next page.



Reporting adverse or notifiable events

A <u>Notifiable Event</u> is any incident that could result in a claim made against the University. It may be a consequence, fact, situation, error, omission, occurrence, activity or failure to do something.

Examples:

- Threat of legal action
- Fraud or fraudulent activity
- Accidental release of toxic vapour in a laboratory
- Injury to a patient during treatment
- Damage or vandalism of property or equipment

THE UNIVERSITY MUST NOTIFY
OUR INSURERS OF EVERY
NOTIFIABLE EVENT TO ENSURE
WE **REMAIN INSURED**

It is essential that notifiable events are reported to the Legal & Risk Branch as soon as they occur or become evident. Any change in the circumstances of a previously reported notifiable event must also be reported.

A failure to report may mean the denial of a claim.

How to make a report

To report a notifiable event, please complete the report form in **Part F** at the end of this guide and email it to helpdesklegal@adelaide.edu.au.

Alternatively, please ring the Legal & Risk Branch on (08) 8313 4539 to discuss the matter.



| 0 | |
|---|--|
| Part A - Student Details | |
| Family Name | Given Names |
| Student ID No. | Student Phone No. |
| Degree/Program enrolled | |
| | |
| Faculty | Campus |
| Emergency contact | |
| Name | Relationship |
| Phone No. (home) | |
| Mobile No. | |
| School contact | |
| Name | Phone No. |
| As a student on work placement, I agree | |
| To attend the workplace to which I have b B). | een assigned at the agreed times and days (stated in part |
| 2. To notify both my workplace supervisor (na | nmed in Part B) and the School Contact above if I am unable |
| to attend for reasons of ill health or any ot3. To present myself in an appropriately dres | her reason. sed fashion ensuring I am wearing any protective clothing |
| which may be required by the Host Organi | sation. |
| To familiarise myself and comply with wo and obey all lawful directions of the workp | rkplace policies and procedures brought to my attention place to which I have been assigned. |
| E To work to my full canacity with due regar | ed for my responsibilities in the workplace |

- 5. To work to my full capacity, with due regard for my responsibilities in the workplace.
- 6. To work under the supervision of a qualified officer of the Host Organisation at all times, acknowledging that I am not qualified to practice my discipline independently in any capacity.
- 7. To adhere to privacy and confidentiality requirements of the workplace.
- 8. To comply with all Occupational Health & Safety requirements of the Host Organisation.
- 9. To inform the Host Organisation workplace supervisor and the School Administration Office of any accident, injury or emergency which I have been involved in.
- 10. That if I do not comply with these obligations or act in a way that is detrimental to the Host Organisation, my placement may be suspended or terminated by the Host Organisation and/or may be considered as student misconduct for the purposes of the University's policies.

| Student's Signature | Date | |
|---------------------|------|--|
| | - | |
| | | |



Part B - Host Organisation Details

| Name | Phone No. |
|--|-----------|
| Street Address | |
| | |
| <u></u> | |
| Contact Person | Phone No. |
| Email Address | 5 |
| Location of placement | |
| | |
| | |
| Supervisor Name | |
| Date of placement (from) | (+a) |
| Hours of work (start) | (5) |
| Description of task to be performed | |
| | |
| | |
| | |
| Special Conditions (clothing, safety equipment, parking) | |
| | |
| | |
| | |
| | |
| | |
| | |



Part C - Conditions

We (the Host Organisation) agree to accept the named student on work experience and to plan an appropriate program for their placement, providing suitably qualified and experienced personnel to supervise the student.

We agree to provide the student with a workplace induction that will prepare them to undertake the tasks and duties of the work placement safely. All reasonable precautions will be taken to ensure the workplace is non-discriminatory and harassment free.

The University/School Administration Office will be notified by our organisation in the case of a student's illness, injury or unexplained absence. The student will not receive any form of reward or stipend for work performed during the placement and will not be used to replace paid workers or be used during any form of industrial dispute. The student is not to be required to undertake any task prohibited by the University, Legislation or insurance requirements.

It is understood by all parties that the University, the Host Organisation or the student may, without notice, cancel the work placement.

Part D - Insurance

The University maintains a Public Liability insurance policy that will indemnify the Host Organisation for any negligent act, error or omission by the student during the period of the work experience placement. Certificates of Currency for Public Liability, Personal Accident and Travel Insurance are attached to this Placement Agreement.

It is the Host Organisation's responsibility to ensure that the placement does not give rise to an employment relationship. The Host Organisation understands and agrees that the insurance coverage provided by the University for the Student for the placement will not apply in the event the placement is determined at law to give rise to an employment relationship.

The Host Organisation agrees to indemnify the University and the student for any negligent act, error or omission by its employees, agents or contractors that results in any injury, loss or damage to the student or to University property being used by agreement with the Host Organisation.

The Host Organisation's liability to indemnify the University or the student is reduced proportionately to the extent that any negligent act, error or omission by the University or the student contributed to the injury, loss or damage.



Part D – Insurance

| The Host Organisation is required to provide the Univ | versity/School Administration Office with proof of |
|---|--|
| A copy of a valid Certificate of Currency is attached | (please tick) |
| Signed by the Host Organisation's Authorising Office | cer |
| | |
| Name | |
| Signature | Date |
| | |
| Part E – Head of School Authorisati | on |
| I grant permission for the above named student to u | ndertake the placement with the above named Host |
| Organisation in accordance with the conditions and g | guidelines above. |
| | |
| Signed by the Head of School (or delegate) | |
| Name | |
| Signature | Date |
| Distribution | |
| 1. School Administration Office | |
| 2. Host Organisation | |
| 3. Student | |
| | |
| | |
| | |



Reporting Adverse Events

Part F – Notifiable Event Summary

To report a notifiable event, the student or School should complete this report form and email it to helpdesklegal@adelaide.edu.au

Alternatively, please ring the Legal & Risk Branch on (08) 8313 4539 to discuss the matter.

| NAME OF STUDENT | | | | |
|---|--------|--|--|--|
| STUDENT NUMBER | | | | |
| DATE OF EVENT | | | | |
| LOCATION OF EVENT | | | | |
| NAME OF HOST ORGANISATION | | | | |
| ADDRESS OF HOST ORGANISATION | | | | |
| | Name: | | | |
| HOST ORGANISATION | Title: | | | |
| CONTACT | Email | | | |
| | Phone | | | |
| BACKGROUND / DESCRIPTION OF EVENT | | | | |
| ENQUIRIES / INVESTIGATIONS UNDERTAKEN | | | | |
| CURRENT STATUS | | | | |
| ASSESSMENT OF RISK | | | | |



16 December 2020

Marsh Pty Ltd ABN 86 004 651 512

> Level 1 148 Frome Street ADELAIDE SA 5000 GPO Box 1693 ADELAIDE SA 5001

Tel +61 8 8418 0288 Fax +61 8 8223 6903

Our Ref: 045853

www.marsh.com.au

To Whom it May Concern,

Certificate of Currency

Insurance Class: Public & Products Liability

Insured: The University of Adelaide (ABN 61 249 878 937)

Period of Insurance: From: 31 December 2020 at 4 PM Local Time (SA).

To: 31 December 2021 at 4 PM Local Time (SA).

Interest: This Policy will indemnify the Insured for Public & Products

Liability as more fully described within the Policy

Limit of Indemnity: Public Liability - \$20,000,000 any one occurrence

Product Liability - \$20,000,000 any one occurrence and in the

annual aggregate

Territorial Limits: Worldwide as per policy wording

INSURERPROPORTIONPOLICY NUMBERLloyd's of London & others100.000%B1262 F10732419

This certificate of currency provides a summary of the policy cover and is current on the date of issue. It is not intended to amend, extend, replace or override the policy terms and conditions contained in the actual policy document. This certificate of currency is issued as a matter of information only and confers no rights upon the certificate holder. We accept no responsibility whatsoever for any inadvertent or negligent act, error or omission on our part in preparing these statements or in transmitting this certificate by email or for any loss, damage or expense thereby occasioned to any recipient of this letter.



David Clarke Senior Specialist, Corporate Broking



17 December 2020

Marsh Pty Ltd ABN 86 004 651 512

Level 1 148 Frome Street ADELAIDE SA 5000 GPO Box 1693 ADELAIDE SA 5001

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Our Ref: 051697

www.marsh.com.au

To Whom it May Concern,

Certificate of Currency

INSURED

Group Personal Accident

INSURANCE CLASS Group Personal Accident

·

GEOGRAPHICAL SCOPE World Wide

PERIOD OF INSURANCE From: 31 December 2020 at 4 PM Local Time (SA)

The University of Adelaide

To: 31 December 2021 at 4 PM Local Time (SA)

INSURED PERSON(S):

4. Students undertaking work experience

Cover under this Policy applies to all those hazards to which a Covered Person is exposed whilst actually engaged in Work Experience Activities including necessary direct travel to and from such work experience

on behalf of the Policyholder.

PROVIDED ALWAYS that the Policy shall only apply in respect of such work experience officially organised by

and under the control of the Policyholder

POLICY BENEFITS: As per schedule of benefits including Capital Benefits up to

\$1000,000 and weekly Benefits up to \$300

INSURER PROPORTION POLICY NUMBER

AIG Australia Limited 100.000% 2300110172

This certificate of currency provides a summary of the policy cover and is current on the date of issue. It is not intended to amend, extend, replace or override the policy terms and conditions contained in the actual policy document. This certificate of currency is issued as a matter of information only and confers no rights upon the certificate holder. We accept no responsibility whatsoever for any inadvertent or negligent act, error or omission on our part in preparing these statements or in transmitting this certificate by email or for any loss, damage or expense thereby occasioned to any recipient of this letter.



David Clarke Senior Specialist, Corporate Broking



09 December 2020

Marsh Pty Ltd ABN 86 004 651 512

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www.marsh.com.au

Mrs Celine McInerney To Whom it May Concern,

Certificate of Currency

Our Ref: 051696

INSURANCE CLASS Travel

INSURED The University of Adelaide and travellers as declared and agreed

ABN AND ITC DETAILS ABN 61 249 878 937 ITC 100.00%

TERRITORIAL LIMIT Worldwide

JURISDICTIONAL SCOPE As per the Policy Wording / PDS

GOVERNING LAW

OF CONTRACT Australian

POLICY PERIOD From: 31 December 2020 at 4 PM Local Time (SA)

To: 31 December 2021 at 4 PM Local Time (SA)

SCHEDULE OF BENEFITS As provided in the policy document

INSURED PERSON(S) Various Categories of traveller as declared from time to time

INSURERPROPORTIONPOLICY NUMBERAIG Australia Limited100.000%2300110171

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