

# Dru Professional Network Affinity Scheme - UK



## BALENS HEALTH PROFESSIONALS COMBINED LIABILITY INSURANCE

Thank you for your enquiry and welcome to Balens.

This pack will help you assess if the Balens Health Professionals Combined Liability Insurance product is suitable for your needs and guide you through the process to get insured.

Our team is on hand to help if you need us – just call 01684 580771 or email [info@balens.co.uk](mailto:info@balens.co.uk)

### WHAT'S IN THE PACK?

- **Guidance notes** to help you through the process of getting insured
- The **declaration form** you need to complete to apply for cover
- An **activities list** of common therapies/activities we insure
- A **price guide** which may enable you to work out how much you will need to pay
- Our **Key Points & Terms of Business** document summarising who we are, who regulates us, the service we offer, insurance companies we use and other important information such as the complaints process
- A summary of the **Important Regulatory Information**, that includes **your responsibilities** to make a fair presentation of the risk at inception, renewal and whenever you request changes to your policy

### SOME IMPORTANT LEGAL INFORMATION BEFORE YOU GET STARTED:

Please note the completion and submission of the declaration form does not bind you or us to enter a contract of insurance. More information may be required from you. In order to minimise the need for further clarification please answer all questions fully.

#### Fair Presentation of the Risk

- You must clearly disclose every material circumstance which you, your senior management, or persons responsible for arranging your insurance, know or ought to know following a reasonable search, before your cover is placed, when it is renewed and at any time it is varied.
- The policy wording may also stipulate that this duty continues throughout the period of insurance cover.
- A material circumstance is one that may influence the insurer's decision over whether to take the risk and, if so, on what terms.
- If you are in any doubt as to whether a circumstance is material, you are advised to disclose it.
- Failure to disclose a material circumstance may entitle an insurer to impose different terms on your cover or reduce the amount of a claim payable, and in some cases your cover could be invalidated which would mean that a claim would not be paid.

The cover offered is based on the information we obtain from you and reflects your demands and needs as a customer looking for insurance to cover risks associated with your health, wellbeing, fitness and/or beauty business along with protection against commercial legal costs and access to legal advice.

The quotation you will be able to ascertain at the end of this Proposal Form is provided on a non-advised basis, which means we have not made a personal recommendation on the suitability of the product for you.

**Market Selection – Single Insurer** – Balens Professional Liability Insurance Policy comprises of two elements.

- The Professional Liability Cover has been obtained from one Insurer, Zurich Insurance Company Ltd (Zurich)
- The Legal Expenses Cover has been provided by one Insurer – ARAG Legal Expenses Insurance Company Ltd (ARAG)

For both insurers we have a delegated authority arrangement with a long and established relationship. They secure Insurers with a good claims service. We will act as their agent for the sourcing and placing of the policy. We will act as your agent in the event of a claim.

*"We care for the Carers"*  
*Established 1950 – 75 years of Service & Support for our clients*

**Balens Limited** is authorised and regulated by the Financial Conduct Authority, Firm Reference Number 305787.  
Balens Limited is registered in England and Wales. Company Registration Number 04931050. Registered Office: Rossington's Business Park, West Carr Road, Retford, Nottinghamshire, United Kingdom, DN22 7SW. Balens Limited is part of the PIB Group.

# GUIDANCE NOTES

The service we provide is on a non-advised basis. Therefore, you are responsible for deciding if the cover is suitable/right for you and your businesses requirements.

## IS THIS THE RIGHT INSURANCE FOR ME?

This policy is to cover you, and you alone, as a practicing health and wellbeing practitioner, irrespective of whether your business is set up as sole trader, partnership or limited company.

If you employ or use other Health and Wellbeing Professionals, or take payments, bookings or advertise for them you will need a different type of policy – please contact Balens for guidance on 01684 580771 or [info@balens.co.uk](mailto:info@balens.co.uk)

## HOW DO I GET INSURED?

Easily – in a few simple steps:

### 1) Complete the declaration form and read the Key Points and Balens terms of business document:

- Answer all questions in full
- List all activities you:
  - currently perform
  - are a student in and for which you require cover for case study work
- Confirm agreement to the Balens terms & conditions
- You must be a current member of the Dru Professional Network in order to take out this policy. If you are not your insurance cover could be declared void.

### 2) Get a price:

#### Send the declaration form to us for a quote if:

- Any activity you perform is **NOT** on the activities list, **and/or**
- The list states an endorsement applies, **and/or**
- You have non-UK qualifications
- You practice an activity for which there is no recognised qualification and you would like us to consider insuring you on the basis of your experience

We will get back to you to confirm if we can offer cover, the price and if any special terms/endorsements will apply – we may request more information to do this

If you have non-UK qualifications we will need you to complete an additional form

#### OR Use the price guide to calculate your price if:

- All your activities are on the **activities list**, and
- No endorsements apply, and
- all your qualifications were taken in the UK

Your price will be based on:

- The limit of indemnity you select; and
- Whether you select the optional sections of cover for Personal Accident and/or Business Equipment 'All Risks' cover.

### 3) Sign the declaration form and where relevant send to us with copies of your qualifications

#### *Important things to note:*

- Make sure you have answered all questions fully and agreed the terms & conditions
- In the event that you have answered 'Yes' to all of the Qualifications statements, we will not need to see copies of your qualifications at this stage.
- In the event of a claim, we will need copies of your qualifications for ALL activities performed
- If you are currently insured elsewhere we must receive your documentation BEFORE the expiry date of your current policy to ensure continuous cover.

#### *You can provide documents:*

- Scanned and emailed to [info@balens.co.uk](mailto:info@balens.co.uk) – remember to sign the declaration before scanning, OR
- By post to Balens Limited, Bridge House, Portland Road, Malvern, WR14 2TA

### 4) Get confirmation of cover:

We will start your policy from the date we receive your documents subject to your declaration being complete, agreeing the price and (if applicable) special terms/endorsements.

### 5) Payment: your payment options are:

**PAYMENT LINK** – when we receive your form, if there are no additional questions, we will send you a payment link

**TELEPHONE** – you can call us on 01684 580771 once we have received your form, and we can:

- Take a single payment by debit/credit card, or
- Set up an annual or monthly Direct Debit facility – please contact us for more information on these options

# Dru Professional Network Affinity Scheme - UK

## Price Information

- BALENS HEALTH PROFESSIONALS COMBINED LIABILITY INSURANCE: SECTION A: PROFESSIONAL LIABILITY AND MALPRACTICE INSURANCE
- COMMERCIAL LEGAL PROTECTION INSURANCE

As an ethical, regulated business we wish to be clear and transparent about the breakdown of the cost of your insurance policy arranged through us. The tables below aim to achieve this.

£6,000,000 Full practitioner (First Year Discounted Rate)	Malpractice Premium	Legal Expenses	Net Insurance Cost	Insurance Premium Tax (IPT) @ 12%	Balens Admin Fee	Total Premium Payable
Annual Premium	£10.00	£10.67	£20.67	£2.48	£15.00	<b>£38.15</b>

£6,000,000 Full practitioner (Renewal/Restart Rate)	Malpractice Premium	Legal Expenses	Net Insurance Cost	Insurance Premium Tax (IPT) @ 12%	Balens Admin Fee	Total Premium Payable
Annual Premium	£18.00	£10.67	£28.67	£3.44	£15.00	<b>£47.11</b>

- BALENS HEALTH PROFESSIONALS COMBINED LIABILITY INSURANCE: SECTION B: PERSONAL ACCIDENT INSURANCE (OPTIONAL COVER)

Personal Accident Premium	Insurance Premium Tax (IPT) @ 12%	Total Price Payable
£10.00	£1.20	<b>£11.20</b>

- BALENS HEALTH PROFESSIONALS COMBINED LIABILITY INSURANCE: SECTION C: BUSINESS EQUIPMENT 'ALL RISKS' INSURANCE (OPTIONAL COVER)

Value of Equipment	'All Risks' Premium	Insurance Premium Tax (IPT) @ 12%	Total Price Payable
£1,500	£28.00	£3.36	£31.36
£3,000	£45.00	£5.40	£50.40
£5,000	£62.50	£7.50	£70.00

# ACTIVITIES LIST

## STANDARD ACTIVITIES COVERED, STRICTLY SUBJECT TO SUITABLE QUALIFICATIONS HELD.

Please note, the below list of activities is not exhaustive – it is only an example of the types of activities we cover on this scheme for no additional cost. If you have received a quote from Balens but you cannot see your activity listed below, please do not worry as the list is only a small selection of the techniques we cover.

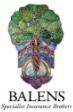
Abs/Core Classes	Active Isolated Stretching and Strengthening
Acupressure	Aerobics/Exercise to Music
Aqua Aerobics	Aqua Fitness
Ballet/Fitness Workout	Belly Dance Teacher
Body Attack	Body Combat (Non Contact)
Body Conditioning Exercise	Body Control Pilates
Bokwa (Fitness)	Boxercise
Breath Coach	Cardio Kickboxing (Non Combat)
Chek Exercise	Chi Ball
Chi Exercise	Chi Gong
Chi Kung - Excluding martial arts	Circuit Classes
Dance	Dance Movement Therapy
Deep Tissue Massage	Exercise Advice
Exercise and Fitness	Exercise and Health Studies
Exercise Coach	Exercise for the Older Person
Exercise Instructor for Cardiac Rehabilitation	Exercise to Music
Exercise with Disabled People	Exercise, Health Studies and Personal Training
Exercise/Rehabilitation	Fitball
Fitboxe Training	Fitness and Sports Therapy
Fitness Classes	Fitness Instructor
Fitness Testing	Fitness Training
Flexercise	Food Intolerance Testing
Healthy Living Advice	Indoor Cycling
Injuries and Rehabilitation Programmes	Kenku Jutsu
Kettlebells	Khai-Bo
Manual Lymphatic Drainage	Orthotics
Personal Fitness Training	Personal Training
Pre and Postnatal Exercise	Rehabilitation Therapy
Spin Cycling	Sports First Aid
Sports Injury Massage	Sports Massage
Sports Nutrition	Sports Therapy (excludes Manipulative Techniques)
Stability Ball Training	Step-aerobics
Strapping and Taping	Strength and Conditioning Specialist
Stretching	Studio Cycling

TENS	Ultrasound
Weight Lifting	Weight Loss Coaching
Weight Loss Consultancy	Yoga
Zumba Instructor	

### **STUDENT COVER**

Provides cover for case studies and other work performed prior to gaining your qualification. The conditions of cover are as follows: Ongoing case consultation with your tutor, clients must be told that you are not qualified, you cannot practice outside the scope of what you have been taught and any charges/expenses made must be less than a qualified therapist.

# DECLARATION FORM



This policy is to cover you, and you alone, as a practicing health and wellbeing practitioner, irrespective of whether your business is set up as sole trader, partnership or limited company.

If you employ or use other Health and Wellbeing Professionals, or take payments, bookings or advertise for them you will need a different type of policy – please contact Balens for guidance.

Please tick to confirm you require cover as an individual practitioner:		<input type="checkbox"/>
I can confirm I am a current member of Dru Professional Network and understand it is a condition of my insurance I maintain my membership.		<input type="checkbox"/>

Sole Trader <input type="checkbox"/>	Limited Company (Ltd) <input type="checkbox"/>	Public Limited Company (Plc) <input type="checkbox"/>
Partnership <input type="checkbox"/>	Limited Partnership (LP) <input type="checkbox"/>	Limited Liability Partnership (LLP) <input type="checkbox"/>

**What is the name of your Business?**

*Please leave blank if this does not apply to you.*

Title (Mr./Mrs./Dr. etc.):	Name of the practicing individual:	
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**Address:**

Postcode:	Tel:	Mob:
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**Email:**

Date of Birth:	Date you require the policy to start:
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## Your Activities

Please state in the boxes below the activities you require insurance cover for and please provide us with copies of your qualifications. Cover will be provided subject to suitable qualifications held (unless you are still a student as qualifications are unavailable until you are fully trained).

Please note, we will list your activities practiced as per your qualification(s) supplied, this will cover you to practice the modalities of your training, as assessed by your course tutor or training provider. The insurance policy will not provide cover for you to practice outside of the techniques covered by your training in order to gain the qualification(s) supplied.


If there is an activity you practice that is not listed on the 'Activities List', please provide us with as much information as you can in the space below.

## Qualifications

We do not need to see a copy of your qualification, providing that you meet the criteria below:

- *The activity you require cover for is the core activity of your membership scheme.*

OR

- *Your qualification was obtained in the UK*
- *Your qualification included practical training – we cannot accept a qualification that was obtained solely via distance learning/correspondence courses.*
- *Your training included a final competency exam*
- *For bodywork qualifications, your qualification included Anatomy and Physiology (A&P)*

If you do not hold a formal qualification in the activity, you are performing or your qualification was taken outside of the UK, please submit your declaration form along with your experience in the activity or your qualification (if taken overseas). Balens will then review and get back to you.

You may be asked to provide a copy of your qualification if your activity falls outside of standard underwriting criteria, for example where an endorsement applies.

Where qualifications are not received, they will be required in the event of a claim. The policy wording states that you 'should be suitably qualified to perform the treatment/activities noted in the Schedule of Insurance and provide a formal qualification in the event of a claim, if not previously supplied'.

Where you are unsure if your qualification is suitable, please contact Balens for guidance.

Please tick to confirm that you understand the above statement

## Your Price

### Section A: Professional Liability & Malpractice Insurance

Please tick to confirm the option you require	Please enter total premium payable
£5,000,000 Full practitioner (First Year Discounted Rate) <input type="checkbox"/>	
£5,000,000 Full practitioner (Renewal/Restart Rate) <input type="checkbox"/>	

### Section B: Personal Accident Insurance (optional cover)

Do you require Personal Accident Insurance?	Yes/No
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### Section C: Business Equipment 'All Risks' Insurance (optional cover)

Do you require Business Equipment 'All Risks' Insurance?	Yes/No
<b>Please tick to confirm the level of cover required:</b>	
£1,500	<input type="checkbox"/>
£3,000	<input type="checkbox"/>

£5,000

**Total Price**

Please calculate your total premium payable:

£

Questions	Yes	No
Have you ever been convicted of, or charged (but not yet tried) with any criminal offence, other than motoring offences, or offences that are spent under the Rehabilitation of Offenders Act 1974?		
Have you ever had a proposal or renewal for insurance declined or cancelled; a policy voided, withdrawn or suspended, or special terms imposed by an insurer?		
Have you ever had any claims, or are you aware of any circumstances which could give rise to a claim, under the policy involving negligence, error or omission?		
Have you ever had any disciplinary hearings made against you, or are you aware of any circumstances which may result in a claim or suit being made against you?		
Have you or any director or partner been the subject of, or have proceedings or applications pending for, any winding up order, receivership, debt relief, liquidation, administration, county court judgement (CCJ), company or individual voluntary agreement, bankruptcy or insolvency?		

**If the answer is Yes to any of the above questions, please disclose full information to us in a clear and accessible manner below:**

Questions	Yes	No
Are you ordinarily resident in Great Britain, Northern Ireland, the Channel Islands and/or the Isle of Man?		
Is your business registered in and operating solely from Great Britain, Northern Ireland, the Channel Islands and/or the Isle of Man?		
<i>For students who do not yet have a registered business, please confirm if you are training in Great Britain, Northern Ireland, the Channel Islands and/or the Isle of Man?</i>		
Have you read, understood and agree to accept the Balens Terms of Business letter enclosed?		

*By signing the form below I declare that the statements and particulars in this proposal are true and complete. I have made a fair presentation of the risk and have not misrepresented or suppressed any material facts. I agree to the contract of insurance being prepared using the information I have supplied in this form along with any associated information I have supplied. I shall inform you of any material alteration to those facts and/or the information supplied before completion of the contract of Insurance.*

*A copy of the policy wording is attached for your attention.*

Signed:

Dated:

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**RETURNING YOUR FORM**

PLEASE COMPLETE AND RETURN THE DECLARATION FORM ALONG WITH COPIES OF YOUR QUALIFICATIONS TO:  
BALENS LTD, BRIDGE HOUSE, PORTLAND ROAD, MALVERN, WR14 2TA  
OR EMAIL: [INFO@BALENS.CO.UK](mailto:INFO@BALENS.CO.UK)

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