

Withdrawn

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Code of Practice for Tracing Employers' Liability Insurance Policies

Department for Work and Pensions

04/2010

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Ministerial foreword

I am very pleased that this new Code of Practice is being launched. Its appearance honours a commitment given by my predecessor, to work with the insurance industry to tackle a problem which prevents certain employees from seeking compensation from their employer for an industrial injury or disease.

The recent review of the Employers' Liability (Compulsory Insurance) Act 1969 found that some employees suffering from industrial diseases which took a long time to develop could not trace their employer's insurance policy. This was most likely to happen where the employer had ceased to trade by the time a disease became apparent. The Government views with concern instances where proceedings are unable to be taken only for this reason. It therefore wants to see improvements in the tracing of such policies. That is what this voluntary Code aims to achieve.

The Code sets out the procedures which insurers will follow, and the standards they will meet, when dealing with enquiries from employees or their representatives. There are some gaps in insurers' records which it is now too late to fill. But this Code commits insurers to keep, and do their best to search, those employers' liability policy records which do exist. And to keep future policy records in ways which will make it much easier to answer future enquiries from employees.

The Code has been developed by DETR and the insurance industry, working together in full co-operation. I am grateful to all of those who contributed to its preparation, and to those who responded to a public consultation earlier this year on a draft version.

I know that some would have liked the Government to take a more regulatory approach. But I believe that the industry deserves a chance to show what it can do to solve this problem. Its commitment to the Code is evident in the Statement by the Association of British Insurers and the Non-Marine Association at Lloyd's, which appears in this document.

Arrangements for monitoring the effectiveness of the Code have been put in place insurers' performance will be subject to independent review. The Review Body includes representatives of an employees' organisation and the legal profession, bodies which can reflect the views of those the Code is designed to help. The Review Body's Annual Statement on how well the Code is working will be published by DETR.

I hope very much that by improving the identification of relevant policies, this Code will be of real help to those employees who need to seek compensation.

Lord Whitty

Parliamentary Under-Secretary of State

1999

Statement by the insurance industry

The growth of the "compensation culture" in the UK has had a huge impact on insurers. But one group of potential claimants has been held back, through no fault of their own. These are the victims of industrial injury and illness, whose condition may not have developed until many years after they left the job which caused it.

The business they worked for may no longer exist and, even if it does, may not have kept a record of its insurance arrangements. If the details of the employers' liability insurer who covered their employer during the appropriate time cannot be traced, a compensation claim has a reduced chance of being satisfied.

Insurers and the Government have, quite rightly, become increasingly concerned about this problem. Although the number of people affected is small, it is wrong that they cannot be compensated where a liability exists in law.

Working with the Government, insurers have been looking at how arrangements could be put into place to resolve the difficulties, and provide easy and quick access for claimants. We are pleased to launch today the Codes of Practice for Tracing Employers' Liability Insurance Policies to meet this objective.

The whole of the insurance industry – insurers, Lloyd's syndicates and insurance brokers – are committed to working together so that we can respond more effectively to compensation claims from ill and injured employees.

ABI
Association of British Insurers

Lloyd's NMA
Non-Marine Association
Serving the market

Contacting the ABI, NMA or DWP

1. The Association of British Insurers (ABI)

Employers' Liability Enquiry Unit, Association of British Insurers,
51, Gresham Street,
London
EC2V 7HQ
Fax: 0171 367 8612
Email: info@abi.org.uk
Website: <http://www.abi.org.uk>

2. Non-Marine Association (NMA)

Lloyd's of London
One Lime Street
London
EC3M 7DQ
Tel: 020 7327 3333
Fax: 020 73274443
Email: lma@lmalloyds.com
Website: <http://www.lmalloyds.com>

3. Department for Work and Pensions (from February 2003)

Health, Work and Wellbeing Directorate
Occupational Compensation Scheme
Level 2B
Caxton House
Tothill Street
London
SW1H 9NA

Tel: Peter Schutterlin on **020 7449 5578** or Bobby Towers on **0191 225 2567**

The full text of the Code is also on the DWP website at –
<http://www.dwp.gov.uk/publications/policy-publications/tracing-elci-policies.shtml>

The electronic enquiries for Tracing Employers' Liability Compulsory Insurance (ELCI) can be obtained on-line from the ABI websites on www.abi.org.uk

Part 1 – DWP Guidance Notes

A – Introduction

Background

In law, an employer may be liable to pay compensation to an employee who suffers injury or disease sustained during their employment¹.

Employers are required by law to insure against this potential liability. The current relevant legislation is the Employers' Liability (Compulsory Insurance) Act 1969 – which came into force on 1 January 1972 – and associated Regulations². The aim of the 1969 Act is to ensure that funds are available to pay any compensation for which an employer is liable.

The Act does not guarantee an employee compensation for injury or disease sustained during their employment – they would need to prove the employer's liability. But it is intended to protect employees.

An employee claiming damages from their employer will normally need to trace the insurance policy their employer held at the relevant time. A recent review of the Act showed that this can be a problem, particularly for employees suffering from industrial diseases which have taken a long time to develop. The greatest difficulties are experienced where the relevant employer is no longer in business. (The employee may need to trace a policy for a period before 1972; many employers had such insurance in earlier decades.) There are also instances where relevant insurance records have been lost, or have not been retained, by an employer who is still trading³. In all of these cases, the only surviving information about a policy may be that held by the insurer.

An employee who cannot identify their employer's insurance policy may be unable to seek compensation⁴. The Government is concerned about this unsatisfactory situation. It wants insurers to do everything practicable to help employees to trace policies.

The press release accompanying the new Employers' Liability (Compulsory Insurance) Regulations announced on 27 October 1998, that this Department would work with the insurance industry to draw up a Code of Practice to help in tracing employers' liability policies. This Code has been developed by DETR (DWP will have responsibility from February 2003) and the industry in consultation with each other; its evolution was greatly assisted by the comments

¹ The employee would need to show that the employer had been negligent, or in breach of a statutory duty of care.

² The Employers' Liability (Compulsory Insurance) Regulations 1998 (SI 1998/2573), which came into force on 1 January 1999.

³ An employer who is required by law to be insured, is now required to retain for 40 years any certificate of insurance issued to him on/after 1 January 1999; also the certificate for any previous policy which was current on 31 December 1998 or 1 January 1999.

⁴ Inability to trace an insurance policy can also be a problem for an employer. If they cannot establish their right to be indemnified, claims will have to be met from their own resources.

received on a draft version, which was distributed during spring 1999 to those with an interest – employees' and employers' organisations, the legal profession and the different parts of the insurance industry.

Purpose of the Code

Its purpose is two-fold: to help employees needing to trace insurance policies taken out by employers in the past; and to ensure that insurers keep future records in ways which will make tracing such policies much easier. The Code should help employees and their representatives – normally it is the employee's solicitor who will try to identify the employer's insurance policy.

Legal status

This is a voluntary Code entered into by insurance companies and Syndicates at Lloyd's. It does not provide potential claimants, or employers, with any rights which do not already exist in law. This is not a statutory code.

Content

This Code sets out the procedures insurers will follow, and the standards they will meet, if they are asked to help trace an employer's insurance policy. It also contains commitments on record keeping.

Two Parts to the Code

An employer may buy employers' liability insurance from:

- i) – an insurance company, or
- ii) – an underwriting Syndicate at Lloyd's.

Because these two types of organisation operate in different ways, there are two parts to this Code: the ABI Code, and the NMA Code. But each has the same purpose, approach and standards.

Most insurance companies in the United Kingdom belong to the Association of British Insurers (the ABI, a trade association. The ABI's Code for its members is Part 2 of this document.

Lloyd's is a marketplace in which many Syndicates transact various kinds of business; some Syndicates underwrite the insurance of employers' liability risks⁵. Most Syndicates belong to the Non-Marine Association (the NMA), a trade association. The NMA's Code for its members is Part 3 of this document⁶.

Scope

The purpose of the Code is to improve the tracing of employers' insurance policies.

Whether a particular employer was liable for an injury or disease suffered by an employee, is a separate issue – which should be pursued in the normal way.

⁵ Lloyds itself is not an insurer.

⁶ Neither the ABI nor the NMA are insurers.

There is no provision under the Code for accepting claims for compensation, or for evaluating or negotiating such claims⁷.

Compulsory policies and voluntary policies

Employers who are not obliged by law to have employers' liability insurance may nevertheless choose to buy this type of cover – for instance, some public sector employers do so. Insurers will follow the Code in dealing with enquiries about voluntary employers' liability policies, in the same way as for they would for policies taken out in order to comply with the law.

Effective date

This Code was launched in November 1999.

B. Making an enquiry

Do you need to ask an insurer for information?

Before putting forward an enquiry under this Code, you should make every effort to trace your employer and submit a claim to them. The Code is really intended to help those who cannot obtain information about a relevant insurance policy from their employer or former employer.

Questions which insurers may ask

You may conclude that you need to put an enquiry to an insurer. Under the Code, insurers undertake to search their records when given a minimum amount of information. This minimum is described in paragraph 2(ii) of each Code⁸.

You may be asked to provide more information than this – an insurer may ask you to complete an enquiry form like the one at the end of this document. You are not obliged to provide this information. But if you do, the prospects of a policy being traced could be significantly improved.

For instance, telling the insurer where your employer was located may enable the insurer to identify their branch office which dealt with the insurance. Insurers' historical records are often held by intermediaries rather than by the insurers themselves; some intermediaries specialise in dealing with particular types of trades or businesses. So telling the insurer about your employer's business, or about the nature of your injury or disease, may enable the insurer to identify the relevant intermediary.

Another possible problem could be that a relevant policy was held in a name which is not the name of your employer. For instance, you may have worked for a subsidiary company of the main policyholder. A search made by an insurer using your employer's name, might not identify this policy. Insurers appreciate that you may not know the name in which a policy was held, but you should

⁷ A claim for compensation should be made against the employer, whose responsibility it is to deal with such claims. The employer will then involve its insurers. They will take over the control of the claim, investigate the circumstances, and – where there is a liability upon the employer – negotiate a settlement of the claim with the employee or their representative.

⁸ See Part 2 and Part 3 of this document.

provide any information you can on this. For instance, Companies House records might help in tracing parent company and subsidiary relationships. Or if an employer has been taken over or merged with another organisation, they might help to identify the company which is now responsible for past trading.

Providing as much information as you possibly can could therefore help the insurer to help you.

Contacting the right person

Contact an insurer

The insurance broker who arranged your employer's insurance is not the insurer who provided the insurance policy. Your enquiry needs to be addressed to an insurer.

Which insurer?

If you think you know which insurance company or Syndicate at Lloyd's provided the insurance, submit your enquiry directly to them.

If you know the name of the insurance company, you can get its address from the ABI. Information on how to contact the ABI is at the front of this document.

An enquiry to a Lloyd's Syndicate should be sent to:

[Syndicate name]
Lloyd's
One Lime Street
London EC3M 7HA.

If you think the insurance was provided by a Syndicate at Lloyd's but do not know which one, send your enquiry to the Non-Marine Association at Lloyd's (NMA) whose contact details are at the front of this document.

If there are no clues as to whom the insurer might have been, submit your enquiry to the Association of British Insurers (ABI), whose contact details are at the front of this document. They will circulate your request for information to all their members who provide this type of insurance. They will also copy it on your behalf to the Non-Marine Association at Lloyd's, for circulation to relevant Syndicates there.

C. How insurers will deal with enquiries

Most of the information about this is in the ABI and NMA Codes – Parts 2 and 3 of this document. These Notes provide additional background.

Insurers' ability to search records Advances in technology mean that insurers now find it simple and cost-effective to maintain permanent policy records, which can be readily searched to identify whether an employers' liability insurance policy was in force at a particular time.

However, when such record keeping systems were developed, it was not always possible to capture data on policies which had lapsed earlier, and some records had already been destroyed. So the database which each insurer has

at present is not necessarily a complete record of the policies they have issued. Progressively, it will become a complete record.

Surviving paper records for earlier periods can be difficult and time consuming to search effectively: for instance, where they are arranged according to the date when the policy expired, or by policy number.

The situation will vary from insurer to insurer so – as section 4 of the ABI and NMA Codes explains – each will draw up a statement about what historical data they have, and how they can search it. These statements will be made available on request. Historic record statements will be covered in the ABI and NMA Annual Reports on their members' performance under the Code.

Information held by insurance brokers etc.

Information which can help to identify a policy may be held by an intermediary – such as an insurance broker – rather than by the insurer. Insurers will make suitable arrangements, so that when they receive a query they can obtain relevant data from intermediaries. The British Insurance Brokers Association (BIBA) will bring this Code to the attention of its members.

D. Independent review body

Composition

The Review Body is chaired by the Department for Work and Pensions from February 2003. It has members drawn from the insurance industry, organisations representing employees and employers, and members of the legal profession who specialise in personal injury work and dealing with insurance claims.

Functions

At the end of each year, the Review Body will receive an Annual Report from the Association of British Insurers (ABI), giving an overview of all aspects of insurers' performance under the Code during that period. A parallel report will be provided by the Non-Marine Association at Lloyd's (NMA), covering the performance of relevant Lloyd's Syndicates.

Following its consideration of these reports, the Review Body will draw up an Annual Statement commenting on the insurance industry's performance under the Code. DETR will publish the Annual Statement, which will include the Annual Reports from the ABI and NMA.

E. Complaints to DWP (from February 2003)

The complaints system

If you need to make a complaint about the performance of an insurer or Syndicate under the Code, Section 7 in the ABI and NMA Codes (Parts 2 and 3 of this document) explains what to do. Consideration of a complaint by DWP is the final stage of the complaints process.

DWP will only consider a complaint, if:

- in the case of an insurer, the insurer and the Association of British Insurers, or

- in the case of a Lloyd's Syndicate, the Syndicate and Lloyd's Complaints Department, have first been given the opportunity to resolve it.

Contacting DWP (effective from February 2003)

Complaints should be sent to:

Health, Work and Wellbeing Directorate
Occupational Compensation Scheme
Level 2B
Caxton House
Tothill Street
London
SW1H 9NA

Tel: Peter Schutterlin on **020 7449 5578** or Bobby Towers on **0191 225 2567**

You may wish to contact us for information before sending in a complaint. But the complaint itself must be submitted in writing.

How your complaint will be dealt with

DWP will acknowledge the complaint within 5 working days of receipt. DWP will decide if the insurer or Syndicate acted in accordance with the Code or not, on the basis of written evidence from the complainant⁹ and the insurer. The complainant should state clearly what aspect of the Code they believe has not been observed, and provide supporting evidence. The insurer or Syndicate will be asked to explain their view of the case and provide relevant supporting evidence.

Where DWP concludes that a complaint is justified

It will inform the insurer or Syndicate in writing (with a copy to the ABI or Lloyd's Complaints Department as appropriate), giving the reasons for its decision. DWP will give the insurer or Syndicate one calendar month in which to rectify the situation.

If the insurer or Syndicate does not do so, DWP report to the Review Body on the complaints it has received that year will highlight the case, and recommend that the Review Body should draw attention to it in its published Annual Statement – naming the insurer or Syndicate concerned¹⁰.

DWP will inform the complainant of its final decision on their complaint, and the reasons for this.

Where DWP concludes that a complaint is unjustified

It will inform the complainant and the relevant insurer or Syndicate (with a copy to the ABI or Lloyd's Complaints Department as appropriate), and give reasons for its conclusion.

⁹ This can be the potential claimant or their representative.

¹⁰ DWP will report to the Review Body each year on the number of complaints which have been referred to it and their nature, the numbers which were found to be justified, and the numbers which were not justified.

F. Sanctions

DWP will report to the Review Body on any complaint which it has found to be justified, And where the insurer or Syndicate has failed to provide a remedy within one calendar month of being notified of DWP's view.

DWP will recommend that the Review Body draw attention to the case in its next Annual Statement, and that it name the insurer or Syndicate concerned. The Review Body's Annual Statement will be published by DWP.

Part 2 – Association of British Insurers (ABI)

1. Introduction

This Code of Practice applies in respect of potential claims made against employers who hold, or may have held, employers' liability insurance at the time of an injury, or during the period of exposure to a cause of occupational illness or disease.

The intention of this Code is to:

- (i) help current claimants to trace past employers' insurers more effectively;
- (ii) ensure future claimants (those at work now who may need to claim in the future) have access to insurers' details, particularly where the employer goes out of business.

The Code is applicable to all members of the Association of British Insurers ("ABI") which transact employers' liability business or have transacted such insurance in previous years.

Guidance Notes on its application, issued by the Department for Work and Pensions (DWP), can be found in Part 1 of this document.

2. Procedural steps to be taken on an enquiry being made to an insurer

(i) On receipt of an enquiry from a potential claimant or their representative, it will be referred to a central contact point within the Insurer.

(ii) The enquirer must provide the following minimum information for the Insurer to undertake a search:

- name of employee;
- name and address (including postcode) of employer and/or the policyholder;

- type of injury and when caused, or type of illness/disease and period of exposure which caused that illness/disease.

(iii) The Insurer may ask the enquirer for additional information such as:

- whether the employer is still in existence;
- whether the enquirer is aware of the employer's insurers;
- whether enquiries have been made of the employer regarding insurance arrangements (including details of any broker involvement).

If the Insurer does ask for such additional information, they will explain that it is being sought in order to increase the likelihood of a record of insurance being traced.

(iv) The Insurer will make every practical effort within reasonable bounds to try to establish whether they were on risk at the time of the injury or during the period of exposure.

(v) The Insurer will respond to the enquirer within 20 working days of receipt of the enquiry, irrespective of whether or not any search has found a successful match.

(iv) If – having made extensive enquiries of their own records and exhausted other avenues of enquiry – the Insurer is unable to trace any record of relevant insurance, they will advise the enquirer that the matter will be referred to ABI. The Insurer must advise the enquirer of all steps that it has taken during the course of its search and of all relevant information that has been discovered.

3. Procedural steps to be taken on an enquiry being referred to ABI

(i) On referral of an enquiry to ABI by an Insurer, or on receipt of an enquiry directly from a potential claimant or their representative, a designated contact point at ABI will confirm to the enquirer within 5 working days of receipt of the enquiry that the matter is being dealt with.

(ii) ABI will circulate details of referred and directly received enquiries every 20 working days (by e-mail or fax) to all Insurers participating in this Code, for them to investigate the enquiry in accordance with the procedures set out in Section 2 above. Details will also be sent to the Non-Marine Association at Lloyd's at the same time.

(iii) Each Insurer will respond to ABI within 20 working days of receipt of the e-mail/fax circular, irrespective of whether or not any search has found a successful match.

(iv) When an Insurer(s) has been found, ABI will inform the enquirer within 5 working days of being notified by the Insurer(s), giving the name, address and telephone number of the designated contact at the Insurers(s).

(v) In the event that no Insurer can be traced within 20 working days of receipt of the e-mail/fax circular, ABI will contact the enquirer within 5 working days of being notified by the Insurers(s), explaining all the steps that have been taken, including all Insurers contacted.

4. Record keeping

(I) HISTORICAL DATA

On becoming a signatory to the Code, each Insurer will make a statement as to the date from and the manner in which they can search historical data.

(II) CURRENT/FUTURE DATA

On becoming a signatory to the Code, each Insurer will undertake to record and maintain all current and future policies for a period of 60 years in a form that facilitates ready searches, i.e. by name of employer and/or policyholder (after the start date of the Code).

In the event of an Insurer acquiring a new subsidiary, the Insurer must use best endeavours to ensure that all future Employers' Liability records of that subsidiary comply with the terms of the Code.

5. Training

Each Insurer will undertake to train all relevant staff in the procedures for handling Employers' Liability Code enquiries. All enquiries must be handled in an efficient and courteous manner.

6. Independent review

(i) The ABI will produce an annual report giving an overview of the performance of the Code, including details of complaints received under the complaints procedure.

(ii) The report will be subject to an independent review. The Review Body will be chaired by the Department for Work and Pensions (DWP). Further information about the Review Body is given in section D of DWP Guidance Notes, which are in Part 1 of this document.

7. Complaints procedure

If an enquirer has a complaint about the conduct of a particular Insurer in relation to their operation of the Code, this should in the first instance be referred in writing to that Insurer.

Action by the insurer

The Insurer must acknowledge a written complaint within 5 working days of receipt, giving details of its complaints handling procedure. A definitive response will be provided within 40 working days.

If the enquirer is not satisfied with the explanation provided They may refer the complaint in writing to ABI, who will take up the matter with the company concerned.

Action by ABI

A complaint which is referred to ABI, will be acknowledged within 5 working days of receipt.

ABI will forward correspondence to the senior management of the Insurer concerned, for their review and action as appropriate.

If the enquirer is not satisfied with the explanation provided They may refer the complaint in writing to the Department for Work and Pensions (DWP)

Action by DWP

Information on this stage of the complaints process is given in section E of DWP Guidance Notes, which are in Part 1 of this document.

8. Sanctions

See section F of DWP's Guidance Notes, which are in Part 1 of this document.

Part 3 – Underwriters at Lloyd's: NMA

1. Introduction

This Code of Practice applies in respect of potential claims made against employers, who hold or may have held employers' liability insurance at the time of an injury or during a period of exposure to a cause of occupational illness or disease.

The intention of this Code is to:

- (i) help current claimants to trace past employers' insurers more effectively
- (ii) ensure future claimants (those at work now who may need to claim in the future) have access to insurers' details, particularly where the employer goes out of business.

This Code is applicable to all Syndicates at Lloyd's which transact employers' liability insurance or which have transacted such insurance in previous years. Your attention is drawn to the guidance notes in Part 1 of this document, which have been issued by the Department for Work and Pensions.

2. Procedural steps to be taken on receipt of an enquiry by a Syndicate

- (i) On receipt of an enquiry from a potential claimant or their representative, it will be referred to a central contact within the Syndicate.
- (ii) The enquirer must provide the following minimum information for the Syndicate to commence a search:
 - a. name of the employee
 - b. name of the employer and/or the policyholder (if different)
 - c. type of injury and when caused, or the type of illness/disease and the period of exposure which caused that illness/disease
- (iii) The Syndicate may ask for further information or may ask the enquirer to complete an Enquiry Form. In doing so, the Syndicate should explain to the enquirer that this additional information is being requested in order to increase the likelihood of a record being traced.
- (iv) The Syndicate will make every effort within reasonable bounds to establish whether it was the insurer on risk at the time of the injury or exposure.
- (v) The Syndicate will respond to the enquirer within twenty (20) working days of receipt of the enquiry, irrespective of the result of the search.
- (vi) If – after having made extensive enquiries of their own records and exhausted any other avenues of enquiry – the Syndicate is unable to trace any record of a relevant insurance; the Syndicate must inform the enquirer and tell the enquirer that the enquiry is being referred to NMA. In doing so, the Syndicate must tell enquirer of all steps which were taken during the course of search and of all relevant information which has been discovered.

3. Procedural steps to be taken on referral of an enquiry to the NMA (or on receipt of an enquiry directly by the NMA)

(i) On referral of an enquiry by a Syndicate to the NMA, or on receipt of an enquiry directly by the NMA, a designated contact point at the NMA will confirm to the enquirer within five (5) working days of receipt of the enquiry that their enquiry is being dealt with.

(ii) Each twenty (20) working days, the NMA will circulate details of all referred or received enquiries to all Syndicate participating in this Code who will undertake a search of their records in accordance with the procedures outlined in 2. above.

(iii) Each Syndicate will respond to the NMA within 20 working days of receipt of the circular, irrespective of the result of the search.

(iv) When the Syndicate is found to be the relevant insurer, the NMA will inform the enquirer within five (5) working days giving the name, address and telephone number of the designated contact at the Syndicate.

(v) In the event that no insurer can be traced within twenty (20) working days of the date of receipt of the circular, the NMA will contact the enquirer within five (5) working days explaining the steps which have been taken.

4. Record keeping

(i) Historical data

On becoming a signatory to the Code, each Syndicate will make a statement as to the date from and the manner in which they can search historical data.

(ii) Current and future date

On becoming a signatory to the Code, each Syndicate will undertake to record and maintain all current and new policies for a period of sixty (60) years in a form which facilitates ready searches (i.e. a search by employer's/policy holder's name).

In the event of a Syndicate acquiring the business of another employers' liability insurer, the Syndicate must use its best endeavours to ensure that the records of such business comply with the provisions of this Code.

5. Training

Each Syndicate will undertake to train all relevant staff in the procedures for handling enquiries under the Code. All enquiries must be handled in an efficient and courteous manner.

6. Independent Review

The NMA will produce an annual report giving an overview of the performance of the Code, including details of complaints received under the Complaints procedure.

The report will be subject to an independent review. The Review Body will be chaired by the Department for Work and Pensions (DWP).

7. Complaints procedure

Any complaint made by an enquirer about the conduct of a particular Syndicate subscribing to the Code should, in the first instance, be referred in writing to that Syndicate. Every Syndicate at Lloyd's is required to have written procedures to enable the prompt and proper handling of complaints.

If it is felt a Syndicate has failed to resolve the matter, the dispute can be referred to Lloyd's Complaints Department.

Correspondence should be addressed to:

The Manager
Lloyd's Complaints Department
One Lime Street
London
EC3M 7HA

The Lloyd's Complaints Department will acknowledge the complaint within 5 working days of receipt, and will initially refer the matter to a senior representative of the Syndicate concerned and allow them a final 14 working days to review the matter. Lloyd's Complaints Department can be asked to investigate the matter if it still remains unresolved after that time.

In the unlikely event that the matter remains unresolved after investigation by Lloyd's Complaints Department, the dispute may be referred to the Department for Work and Pensions (DWP). The Guidance Notes in Part 1E of this document explain how DWP would deal with such a complaint.

8. Sanctions

See the Guidance Notes in Part 1F of this document.

More information

ABI online tracing service

The ABI declines all enquiries sent in by letter, email or fax. As the tracing service is fully automated the ABI cannot accept queries to chase up or track the progress of a search.

Responses from insurers will be sent via email so it is essential you correctly enter a contact email address.

Please follow the ABI hyperlink for tracing ELCI Policies enquiries –

http://www.abi.org.uk/EL_Code/Employers_Liability_Tracing_Service.aspx

DWP website

The full text of the Code is also on the DWP website at –

<http://www.dwp.gov.uk/publications/policy-publications/tracing-elci-policies.shtml>