Ontario Personal Support Worker

## Certificate of Insurance

# JONES DESLAURIERS

## (Claims Made Coverage)

Policy No(s): Healthcare – BC08605-2300 & BerkleyOne CGL – BC08606-2300 Certificate Number: 24.920 By Berkley Canada

Named Insured	Julie-Anne	Malette-Mauno
Registration Number	24.920	
Mailing Address		
Policy Period	From time of purcha	se for 12 months duration (12:01am Standard
	Time at the Insured	Location) Purchased: 04/17/2024
Professional Services	Personal Support V	Vorker Services

This document is a certificate of insurance under Master Policy Number BC08605-2300 & BC08606-2300 and is evidence of the contract of insurance between the insurer and the insured, whom is a Registered Member(s) in good standing of the Ontario Personal Support Workers Association, and whom a Certificate of Insurance has been issued by the Insurer with respect to the insurance as described herein:

Coverages – Healthcare Services Errors and Omissions Liability Form	Limits of Liability
Medical Malpractice Liability - Individual	\$3,000,000 Per Occurrence or Accident/\$5,000,000 Aggregate Limit
Deductible	NIL
Amended Extending Reported Period Endorsement	Included
Libel and Slander Extension (From Professional Services)	\$1,000,000 Aggregate
Defence Costs for Alleged Criminal Acts Excluding Abuse	\$75,000 Per Claim / \$150,000 Aggregate
Disciplinary Expense Coverage	\$75,000 Aggregate
Defence Costs for Abuse Endorsement	\$75,000 Per Claim / \$150,000 Aggregate
Loss of Earnings Endorsement	\$1,000/Day
Therapy and Counselling Extension	\$25,000 Per Occurrence or Accident/\$25,000 Aggregate Limit
Punitive Damages (where applicable by law)	\$100,000 Aggregate Limit
Sanction Limitation and Exclusion Clause	Included



90 Day Cancellation Endorsement	Included
Good Samaritan Act Endorsement	Included
Out of Country Extension (90 days)	Included
Subpoenaed to Appear Extension	\$10,000 Per Proceeding/ \$10,000 Aggregate
Breach of Copyright Endorsement	Included
Loss of Documents Extension	\$10,000 Aggregate Limit
Employee Dishonesty Endorsement	Included
E-Services Extension Endorsement	Included
Extended Reporting Period Endorsement	1 year included (2 years for 100% of premium, 3 years for 125% of premium, 5 years for 200%)
Spam Exclusion Endorsement	Included
Non Stacking of Limits Endorsement	Included
Coronavirus Vaccine Administration Endorsement	Included
Data Breach Exclusion	Included

Coverages – Healthcare Services / General Liability Form	Limits of Liability
Form of Business	Individual
Bodily Injury and Property Damage – Per Occurrence	\$3,000,000 Per Occurrence or Accident/\$5,000,000 Aggregate Limit
Personal and Advertising Injury Liability – Any One Person or Organization	\$3,000,000 Per Occurrence or Accident/\$5,000,000 Aggregate Limit
Bodily Injury and Property Damage Deductible	NIL
Medical Payments	\$25,000 Per Person Limit
Tenants Legal Liability	\$500,000 Limit
Communicable Disease Exclusion	Included
Date Breach Exclusion	Included
Economic and Trade Sanctions Endorsement	Included
Electronic Spam Exclusion Endorsement	Included
Employee Benefits Endorsement	Included
Employer's Liability Coverage Extension	Included
Good Samaritan Act Exclusion	Included
Lead Exclusion	Included
Non-Accumulation of Limits	Included

Revised Notice of Termination	Included
SEF 99 – Excluding Long Term Leased Vehicle Endorsement	Included
SEF No 94 – Legal Liability for Damage to Hired Automobiles	\$75,000 Limit
Contractual Liability Endorsement	Included
SEF No 6 – Standard Non-Owned Automobile Policy	\$3,000,000 Limit

#### **CLAIMS REPORTING**

Please contact our team at psw@lloydsadd.com or 1.800.665.5243

### **LEGAL ADVICE SERVICES**

Miller Thomson On Call - Critical Incident Report Program - 24/7 Legal Advice - 1-800-387-4452

This is not the policy. A copy of the master policy is available upon request from the insurer or its authorized representative. The policy may contain terms, conditions and exclusions, which may limit the amount payable. Please read the policy carefully. Insurance is provided for only those coverages for which an amount of insurance is shown on this certificate. No terms of this contract shall be waived, in whole or in part, by the insurer unless the waiver is expressed in writing and signed by a person authorized for that purpose by the insurer. This certificate is not valid unless signed by a representative of the Insurer.

Dated: 04/17/2024 Authorized Representative:

Hailey Taskey

