



United Kingdom

# Liability claims services

# Who we are

Sedgwick's liability claims services resolve the challenges you face every day – caring for your customers, protecting your brand and saving you money.

We're a specialist liability practice trusted by many of the world's leading insurers, brokers and corporate clients to protect their interests – and those of their customers – when the unexpected happens.

Leading our clients expertly through the claims process, we help mitigate risk and claims spend, protecting our clients' brands, reputations and commercial relationships.

Being part of Sedgwick, a leading global provider of technology-enabled claims services, means we're financially secure and able to invest in people, processes and technology to improve the customer experience, settle claims faster and identify fraud. Our digital thinking never stops, we're always developing new technology to make claims more transparent and offer our clients rich data and insight to help them reduce their total cost of risk.

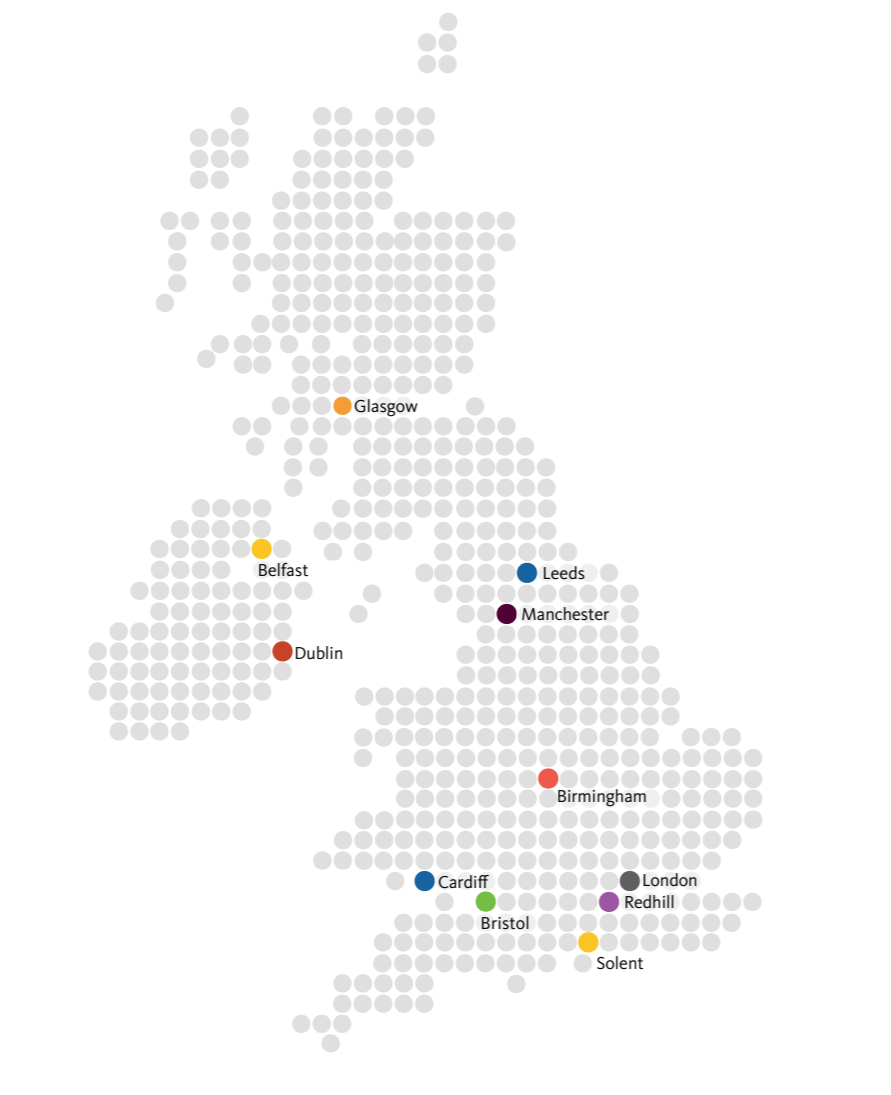
We help our clients future proof their businesses too, navigating them through an ever-evolving legal landscape by offering support, guidance and thought leadership.

Built on two key pillars, our services are third party administration (TPA) and liability adjusting. So whatever situation you're facing, whether it's a life-changing injury to one of your employees, or damage to someone else's property, we have an expert who can help you.



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- 150+ colleagues
- £10m annual fraud savings
- 20,000 annual claims resolved
- 24/7/365 HelpLine
- £350m claims savings

# Our services



Taking care of people is at the heart of everything we do – there truly isn't a claim we can't help you resolve.

## Injury and disease claims

Our specialists are here to help you manage your complete portfolio of injury claims. Whether it's a low value claim, a catastrophic injury with life-changing consequences, or a fatal disease, we're here to help you settle the right claims, for the right sum at the right time.

### Our specialist services include:

- Abuse claims
- Accidents at work
- Asbestos related disease e.g. mesothelioma
- Catastrophic, life-changing injuries
- Contentious or high-profile injury claims with media attention
- Deafness and hearing loss
- Employer's liability
- Failure to educate
- Fatal accidents
- Falls from height
- Food poisoning
- Machinery claims
- Occupier's liability
- Product liability
- Public liability
- Real estate
- Rehabilitation options to help people get back to work
- Slips and trips
- Stress, bullying and harassment
- Tour operator's liability
- Vibration white finger
- Work related upper limb disorder (RSI)

## Third party property claims

Claims for third party property damage can be emotive, particularly when members of the public are involved. When something goes wrong everyone wants a swift resolution before tensions rise and relationships are affected. That's where our team can help. We have unparalleled expertise within our liability team, and access to experts across the world in today's increasingly global marketplace.

### Our specialist services include:

- Agricultural (crop and animal loss)
- Cavity wall insulation
- Construction
- Environmental
- Haulage contamination
- Hot works fires
- Impact damage
- Inevitable damage claims
- Joint Contracts Tribunal (JCT) / minor works
- Motor trader
- Party wall
- Paint overspray
- Plumbing / escape of water
- Product liability and recall
- Property owners
- Subsidence
- Tree root damage
- Underground services
- Utilities

## Third party administration

TPA offers desk-based claims handling and portfolio management. They're your dedicated team within our business here to help you manage risk and protect your claims spend.

### Third party administration (TPA)

- Full end-to-end claims handling and portfolio management
- Highly skilled desk-based team with decades of liability experience
- Delegated authority arrangements – or you can choose to keep control
- White label options for increased brand recognition
- Digital tools to investigate claims from the desk where possible, saving you time and money
- Strong counter-fraud measures to protect you and settle genuine claims quickly
- Ministry of Justice (MOJ) compliant claims processes, ensuring you keep claims in the MOJ portal when you want to
- Escrow accounts – with multi-currency facility that's Brexit compliant, and full sanctions checking. Our partnership with Vitesse PSP means our payments are made within a market-leading two hours of authorisation
- Access to Sedgwick Legal Services team – an independent law firm providing claims services to national insurance and corporate markets
- Management information with interactive dashboards providing insight, not just data
- Full compliance with Lloyd's reporting standards, including latest V5 and conduct risk requirements. We're the pilot firm working with Lloyd's on its Delegated Claims Administrator registration process
- Sub-deductible solutions for corporate clients
- Aggregate tracking and management
- Access to claims online through our web-based client portal
- The ability to create your own personalised reports and interrogate your claims experience
- Robust governance and controls to help you meet your regulatory requirements

### Legal services

Sedgwick Legal Services Limited deliver a truly end-to-end recovery solution to the UK market. The team, led by two well established litigators in the insurance market, are actively involved throughout the claim lifecycle – from first notification of loss through to litigation.

By integrating the legal services business into the wider Sedgwick model, we are able to deliver quicker, simpler, and more effective legal services to our insurance and corporate clients.



## Liability adjusting

Whilst many claims can be handled from a desk, sometimes there's no substitute for a visit. That's when our liability adjusting team comes into its own.

### Our liability adjusting service offers you:

- Total UK coverage delivered through our network of offices
- Fully outsourced services for clients with no field capability, or overflow services for those who need a safety net
- Highly trained loss adjusters, with strong technical capability and communication skills
- The ability to make fast, informed decisions through our loss adjusting team, getting to site quickly to investigate liability
- The ability to question witnesses face-to-face and assess their credibility
- Early evidence capture to protect your position, including documentation or video footage
- A digitally enabled service giving all our adjusters the ability to report from site, capturing statements and documents electronically
- Narrated video recordings and 360 virtual reality
- An empathetic approach to claims, guiding your customers expertly through the claims process when they need it most
- Underwriting insight through risk management feedback
- Education and training programmes, including claims defensibility, for risk improvement
- An end-to-end menu of services approach, including a pricing structure that works for you
- Adjusters who have handled some of the most valuable, contentious, commercially sensitive and high-profile claims in the market

### Previous high profile claims include:

- Motorsport claims including track fires, catastrophic injuries to an F1 driver and accidents at rally circuits
- Worldwide recall of brake pedals for a renowned supercar manufacturer
- Over 100 diners suffering poisoning at a Michelin star Mayfair restaurant, operated by a celebrity chef
- Major accidents at theme park with life-changing consequences
- Multiple significant water mains bursts for different water utilities, affecting hundreds of properties
- Injuries to sports and media personalities
- Abuse claims made against religious organisations, professional football clubs and broadcasting companies

### Client feedback about our field services:

“ When time is against us we need to get to the crux of a claim quickly – to see the whole situation not just part of it. A visit helps us do that, and benefits our MOJ Portal retention rates.

Claims that initially might seem the ones to settle, or conversely defend, can turn out very differently after a visit. A visit helps to glean information about underwriting features and offer the policyholder risk management advice. This can improve the risk for all parties.

Policyholders want their version of events heard. The outcome might be the same, but a visit makes sure that no stone is left unturned. The decision is then made with the full facts, and with the policyholder's buy in. Customer management is key in such a competitive marketplace.

Injury claims can be very emotive, particularly where employees have had life changing injuries. Sometimes policyholders need their hand holding in their hour of need – a skilled investigator can do that, while showing empathy. ”

We apply market leading technology to improve the customer experience, settle claims faster, inform your risk management strategy and identify fraud.

### Notification software

Easy to use for risk managers and safety teams. Tell us about a new claim via our portal. Upload your key data, documents and photographs, straight from your smartphone or PC.

### Remote video

A 'virtual visit' using live video streaming with a customer or third party. Used to enhance triage or as an alternative to a physical visit. It helps us reduce claims' life cycles and avoid the cost of a visit if it's not necessary.

### Drones

Using drones to capture video and photos to give key stakeholders a birdseye view of the loss. Drone footage adds value to the claim – from a fire ravaged structure that's difficult or unsafe to access, to evidencing the scale of damage following a burst water main.

### 360 virtual reality

Unmanned aerial vehicles and radio-controlled cars record 360 degree tours of major losses giving you unparalleled visibility of a loss. The footage is then

edited to use on a computer or with virtual reality goggles – all within 24 hours of an incident. It's as good as you being there.

### Tablet technology

Our liability adjusters use tablets to capture information, prepare reports, take electronic statements and get digital signatures on-site. They can also remotely access all the documents stored on our claims management system.

### iSite narrated videos

Using tablets we record and narrate video footage, which clients and brokers can then stream from a secure cloud-based storage site.

### iValue artificial intelligence

Using deep learning-based artificial intelligence, our iValue tool reads a photograph of the floor, providing an immediate cost for replacement.

### Property repair scoping tool

Our validation tool allows detailed repair scopes to be built up by our handlers and adjusters – it's based on real-time costs that would be charged by our contractor network, if we carried out the repairs. It's a great way of challenging the cost of ongoing, or completed repair projects on liability claims.

### viaOne portal

An easy-to-use online system, with three key features for the insurer, broker and corporate market. viaOne allows you to view your individual claims in real time, create your own MI reports, and see a dashboard view of your portfolio to help identify trends and inform risk improvement strategies.

#### Insurer client feedback:

“ It's been great having access to these virtual tours.

They're so easy to use. These tours are the reliable evidence we need to understand and validate our most costly and complex claims. ”



According to the latest ABI statistics, every five minutes a new insurance fraud is uncovered, that's 300 a day.

We've seen an increasing amount of fraud in liability claims, from manufactured accidents to exaggerated quantum.

The Sedgwick UK liability team saves our clients £10m per year on average, by successfully singling out suspected and proven liability insurance fraud.

We use award-winning Shift Technology, which combines machine learning and AI to accelerate the detection of fraudulent behaviours – from claims exaggeration to sophisticated criminal activity. Shift is fully integrated into our claims management system to automatically ingest and analyse data, and alerts us to suspicious activity as well as providing insight into fraud trends. The screening is discreet and allows us to provide genuine policyholders and third parties with an uninterrupted service.

When a suspect case is identified, it's referred to our team of fraud specialists. They undertake detailed background checks and review the validity of documents and digital metadata to confirm authenticity. Recorded or face-to-face interviews will then be held using conversation based validation technology to get to the bottom of what really happened, leaving no stone unturned.



### Case study

#### Employers liability injury – third party fraud

A claim by a bodybuilder, who alleged he suffered a back injury at work was proved fundamentally dishonest when we were able to demonstrate his claim was falsified.

He litigated his claim and sought to recover £150,000 plus costs. The claim was discontinued and he was ordered to pay £35,000 in costs at a subsequent prosecution.

### Case study

#### Employers liability injury – policyholder fraud

The policyholder ran a firm of mobile caterers where injuries were sustained during a gas explosion.

Our investigations found that while the accident was genuine, the policyholder and her husband aroused suspicions. Close interrogation of the claim and the underwriting records showed that the insurance policy had been taken out online after the explosion had occurred.

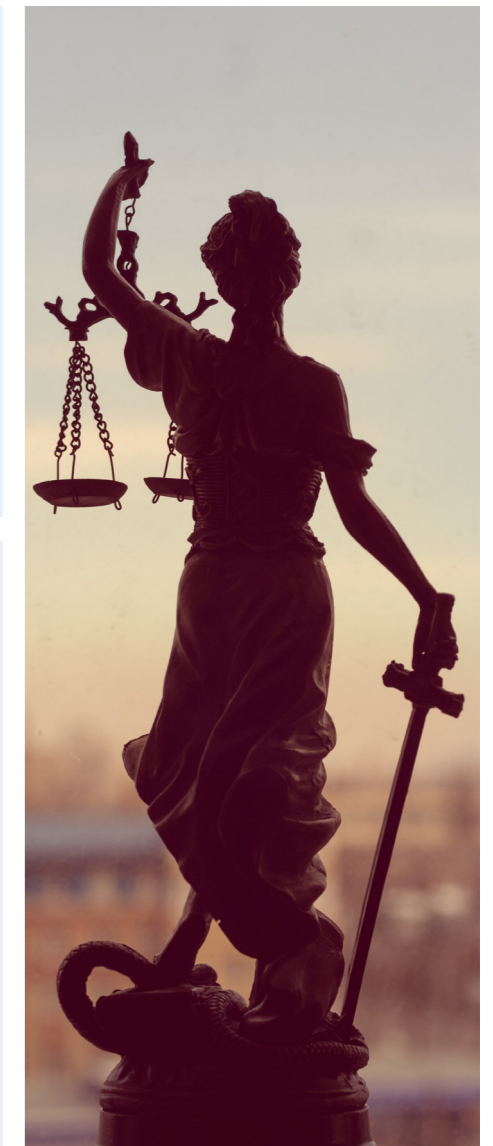
The policy was voided and the City of London Police's Insurance Fraud Enforcement Department (IFED) took up the referral. The policyholder subsequently pleaded guilty in court and was sentenced to a 12-month conditional discharge and had to pay costs.

### Case study

#### Product liability – third party fraud

Following an investigation with IFED, a disc jockey from Newcastle, who tried to bully and abuse staff into processing bogus insurance claims, received a 22-month prison sentence.

The claimant had made a false £1,200 product liability claim. The claim was low value which meant it would have been easy to settle, but thanks to our forensic eye for detail and collaboration with other insurers, we were able to prove that he was a serial fraudster.





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