

## ***National Occupational Standards for the Financial Services Sector***

### **General Insurance**

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## GIC01: Process straightforward new insurance claims notifications

### Overview

This unit may be suitable for you if you work for an insurer, or an intermediary or other organisation with authority to handle straightforward claims. Your work must involve processing either new or existing claims. This will involve recording accurate details of the claim and obtaining any missing information. You will need to identify any claims which are not covered by the policy and show that you have taken appropriate action when a claim falls outside your authority. Throughout you will keep the claimant up-to-date with the progress of the claim.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. record details of claims accurately</li> <li>2. inform any party with a legitimate interest of the procedures and requirements for progressing the claim</li> <li>3. obtain any further information and/or documentation to take the claim forward, if necessary</li> <li>4. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>5. identify claims which are not valid and take the appropriate action</li> <li>6. prepare, review and/or update reserves for claims</li> <li>7. ensure that systems used to monitor the progress of claims are kept up to date</li> <li>8. provide information to the claimant or their representative which is clear, accurate and relevant to their needs within the timescales required</li> <li>9. handle problems or complaints associated with the claim in accordance with your organisational procedures</li> <li>10. keep accurate and complete records</li> <li>11. take appropriate action where fraud or potential fraud is suspected</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you act within your authority</li> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you use communication styles that are appropriate to different people and situations</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. sources of information and advice</li> <li>4. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>5. the information needed to process a claim</li> <li>6. the limits of your authority and the action required when a claim falls outside those limits</li> <li>7. your organisation's customer service standards and procedures, including those for dealing with complaints</li> <li>8. your organisation's systems and procedures for accessing, recording and amending information</li> <li>9. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>10. your organisation's policies and procedures for processing claims</li> <li>11. your organisation's procedures for handling late notification of claims</li> <li>12. your organisation's procedures for handling emergency claims situations</li> <li>13. the importance of accurate cause codes and event dates in claims records</li> <li>14. signs of fraud in a claim and the action required</li> </ol>

## GIC02: Settle straightforward insurance claims

### Overview

This unit may be suitable for you if you work for an insurer, or an intermediary or other organisation with authority to settle straightforward claims. Your work will involve progressing the claim application, calculating the claim's estimates, agreeing the amount of settlement, settling the claim and arranging for payment. You will liaise with customers and advise them on the status of their claim application.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. identify and obtain the information you need to assess potential liability and quantum</li> <li>2. provide accurate information on the status of, and procedures for, settling the claim to any party with a legitimate interest</li> <li>3. make decisions up to the limit of your authority</li> <li>4. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>5. take appropriate action where fraud, or potential fraud, is suspected</li> <li>6. review and update estimates and/or record final costs accurately</li> <li>7. apply any terms and conditions correctly</li> <li>8. identify opportunities for recovery and arrange for these to be pursued</li> <li>9. collate and check documentation is valid before proceeding to settlement</li> <li>10. agree the means of settlement</li> <li>11. arrange for the settlement to be completed promptly and in the agreed manner</li> <li>12. keep accurate and complete records</li> <li>13. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you act within the limits of your authority</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>4. your organisation's estimating practices</li> <li>5. your organisation's customer service standards and procedures including those for dealing with complaints</li> <li>6. your organisation's systems and procedures for accessing, recording and amending information</li> <li>7. your organisation's procedures for payment of claims</li> <li>8. the limits of your authority and the action required when a claim falls outside those limits</li> <li>9. your organisation's procedures for recording claims settlements</li> <li>10. how to handle late notification of claims</li> <li>11. your organisation's procedures for handling emergency claims situations</li> <li>12. authorised sources of information, supply or repair used by your organisation to settle claims</li> <li>13. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>14. the effect of claims leakage on insurers</li> <li>15. signs of fraud in a claim and the action required</li> <li>16. Your organisation's procedures for pursuing recoveries</li> </ol>

### GIC03: Deal with straightforward claims for insured losses

#### Overview

This unit may be suitable for you if you work in any type of insurance organisation that does not have claims settlement authority. Your work must involve giving customers guidance on straightforward claims and processing claims settlements received from insurers. Customers often need guidance as to whether a claim will be met in full and the best course of action for them, bearing in mind the need to keep the loss to a minimum and that a claim may have an effect upon their future insurance position. Details of the claim must be obtained and submitted to insurers or their delegated representatives, including any supporting documentation where necessary. You will check the progress of the claim, resolving any queries raised by the insurer. You will notify those concerned of the outcome.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. obtain accurate and complete information required to proceed with the claim, resolving any queries</li> <li>2. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>3. identify any reasons why full settlement may not be made and notify the customer of these</li> <li>4. give clear guidance to customers on any necessary loss mitigation and the actions they need to take to proceed with the claim</li> <li>5. submit details to insurers in a manner and timescale appropriate to the claim</li> <li>6. request any information and/or documentation required to support the claim</li> <li>7. advise the customer of any specialists involved with the claim where appropriate</li> <li>8. monitor the progress of the claim and deal with any delays</li> <li>9. handle problems or complaints associated with the claim in accordance with your organisation's procedures</li> <li>10. arrange for settlement of the claim</li> <li>11. keep accurate and complete records</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you act within the limits of your authority</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>4. sources of information and advice</li> <li>5. your organisation's systems and procedures for accessing, recording and amending information</li> <li>6. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>7. your organisation's customer service procedures including those for dealing with complaints</li> <li>8. the limits of your authority and the action required when a claim falls outside those limits</li> <li>9. your organisation's procedures for processing and recording claims and claims settlements</li> <li>10. the circumstances relevant to your work in which a claims may be repudiated or only partially met</li> <li>11. the actions to be taken by an insured following a loss</li> <li>12. the roles and functions of other parties involved in claims</li> </ol>

## GIC04: Deal with complex claims for uninsured losses

### Overview

This unit may be suitable for you if you work for a legal expenses insurer or any organisation involved in pursuing and recovering uninsured losses. Your work must involve processing and finalising complex uninsured loss claims. An uninsured loss is complex if it is not routine and cannot be dealt with mechanistically, for example, claims involving negotiation of liability, disputes over loss mitigation or personal injury. This unit involves obtaining information on the circumstances and nature of the claim and giving the customer guidance on the best solution, taking into consideration legal principles and the prospects of recovering the customer's loss. It also involves negotiation to settle the claim to give the best result for your customer and your organisation, giving the customer guidance on how best to proceed further should this be necessary.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. record accurate information on the circumstances of the claim</li> <li>2. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>3. offer guidance which will provide the best situation for the customer, given legal principles, loss mitigation and prospects of recovery</li> <li>4. obtain any information and/or documentation required to progress the claim</li> <li>5. deal with any discrepancies in information and/or documentation</li> <li>6. ensure the claim is formulated and submitted to the third party correctly</li> <li>7. negotiate settlement of the claim in the best interests of your customer and your organisation</li> <li>8. make recommendations for further action which will help the customer arrive at the best settlement</li> <li>9. advise all interested parties of the outcome of the claim</li> <li>10. keep accurate and complete records</li> <li>11. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you present information clearly and concisely</li> <li>• you show respect for others in your dealings with them</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you negotiate effectively</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>4. your organisation's procedures for dealing with uninsured losses</li> <li>5. sources of information and advice</li> <li>6. the limits of your authority and the action required when a claim falls outside those limits</li> <li>7. your organisation's customer service procedures including those for dealing with complaints</li> <li>8. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>9. the systems for accessing, recording and amending information</li> <li>10. the information and/or documentation required to progress a claim</li> <li>11. the roles and functions of other parties involved in claims</li> </ol>

## GIC05: Process straightforward claims for uninsured losses

### Overview

This unit may be suitable for you if you work for a legal expenses insurer or any organisation involved in pursuing and recovering straightforward uninsured losses. Your work must involve processing uninsured losses. You assist customers with the recovery of uninsured losses guiding them on the best action to take. You obtain all the information and/or documentation required to deal with the uninsured claim, and notify the third party.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"><li>1. obtain accurate and complete information required to progress the claim, resolving any queries</li><li>2. refer any situations you are not authorised to deal with to the appropriate person/department</li><li>3. offer customers clear guidance on the actions they need to take to proceed with the claim</li><li>4. offer guidance which will provide the best situation for the customer, taking into account legal principles, loss mitigation and prospects of recovery</li><li>5. obtain any documentation and/or information required to progress the claim</li><li>6. notify the third party of the claim</li><li>7. ensure that systems used to monitor the progress of claims are kept up to date</li><li>8. refer problems and claims which are outside your authority to the appropriate person in your organisation</li><li>9. keep accurate and complete records</li><li>10. comply with legal requirements, industry regulations, organisational policies and professional codes</li></ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"><li>• you act within the limits of your responsibility</li><li>• you show understanding of others and deal with them in a professional manner</li><li>• you carry out tasks with due regard to your organisation's policies and procedures</li><li>• you present information clearly and concisely</li><li>• you use communication styles that are appropriate to different people and situations</li><li>• you pay attention to details that are critical to your work</li></ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"><li>1. relevant insurance and legal principles and regulations which affect your activities</li><li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li><li>3. sources of information and advice</li><li>4. the limits of your authority and the action required when a claim falls outside those limits</li><li>5. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li><li>6. your organisation's procedures for dealing with uninsured losses</li><li>7. your organisation's systems and procedures for accessing, recording and amending information</li><li>8. your organisation's customer service procedures, including those for dealing with complaints</li><li>9. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li><li>10. the roles and functions of other parties involved in claims</li><li>11. the information and/or documentation required to progress a claim</li></ol>

## GIC06: Deal with complex claims for insured losses

### Overview

This unit may be suitable for you if you work in any type of insurance organisation that does not have claims settlement authority. Your work must involve giving customers guidance on complex claims and processing claims settlements. Claims are complex when they are not routine and cannot be dealt with mechanically, for example, when a claim involves negotiation or is technically demanding. Customers often need guidance as to whether a claim will be met in full and the best course of action for them, bearing in mind the need to keep the loss to a minimum and that a claim may have an effect upon their future insurance position. Details of the claim must be obtained and submitted to insurers or their delegated representatives, including any supporting documentation where necessary. You will check the progress of the claim, resolving any queries raised by the insurer. You will negotiate settlement and notify those concerned of the outcome.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. confirm that the intimation of the claim is accurate, complete and recorded correctly</li> <li>2. evaluate the circumstances of the claim to assess if it is valid</li> <li>3. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>4. explain the likely outcomes of the claim to the customer within your organisation's timescales</li> <li>5. make sure you have sufficient information to submit the claim to the insurer, requesting missing information or documentation</li> <li>6. dispatch the appropriate correspondence and/or documentation within the timescales required</li> <li>7. obtain all relevant information and/or documentation requested by insurers</li> <li>8. resolve difficulties associated with the claim according to business agreements, legal requirements, market practices and the limit of your authority</li> <li>9. negotiate settlement of the claim in the client's best interests</li> <li>10. arrange interim payment where appropriate</li> <li>11. finalise the claim and advise all interested parties</li> <li>12. keep accurate and complete records</li> <li>13. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you show integrity, fairness and consistency in the assessments and decisions you make</li> <li>• you present information clearly and concisely</li> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you use communication styles that are appropriate to different people and situations</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>4. sources of advice and information</li> <li>5. the limits of your authority and the action required when a claim falls outside those limits</li> <li>6. your organisation's policy and procedures regarding communicating with customers</li> <li>7. your organisation's customer service procedures including those for dealing with complaints</li> <li>8. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>9. how to access and amending customer records</li> <li>10. how to handle late notification of claims</li> <li>11. your organisation's procedures for recording claims settlements</li> <li>12. the roles and functions of other parties involved in claims</li> <li>13. the actions to be taken by the insured following a loss</li> <li>14. the documentation and/or information required to process a claim</li> </ol>

## GIC07: Carry out initial assessment and investigate complex insurance claims

### Overview

This unit may be suitable for you if you work for an insurer, an intermediary or another organisation with authority to handle complex claims. Claims are complex when they are not routine and cannot be dealt with mechanistically, for example, when a claim involves negotiation or is technically demanding. You will assess if the claim is valid and repudiate claims which should not be met. You will identify all relevant policy terms, conditions and warranties. You will identify the potential liability and notify any interested parties. You will instigate enquiries into liability, and/or quantum of damages and will place on notice any parties from whom a potential recovery may be made.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. make an initial assessment of the validity of the claim up to the limit of your authority</li> <li>2. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>3. dispatch the appropriate correspondence and/or documentation within the timescales required</li> <li>4. identify and request missing information and/or documentation</li> <li>5. obtain the information required to assess the potential liability and/or quantum, using specialists where appropriate</li> <li>6. prepare, review and/or update reserves for claims</li> <li>7. notify any interested parties of the progress of the claim</li> <li>8. resolve difficulties or discrepancies associated with the claim in the best interests of the customer</li> <li>9. identify all terms and conditions which may apply to the claim</li> <li>10. repudiate invalid claims, promptly informing the customer and/or their representative of the decision</li> <li>11. identify potential adverse claims features and refer them promptly to the appropriate person</li> <li>12. arrange to place on notice any parties from whom a potential recovery may be made at the earliest possible stage</li> <li>13. take appropriate action where fraud or potential fraud is suspected</li> <li>14. keep accurate and complete records at all times</li> <li>15. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you negotiate effectively</li> <li>• you present information clearly and concisely</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>4. sources of advice and information</li> <li>5. the limits of your authority and the action required when a claim falls outside those limits</li> <li>6. methods of claims assessment and investigation and the resources your organisation has to conduct these activities</li> <li>7. your organisation's procedures for handling emergency claims</li> <li>8. the principles used by your organisation to estimate and set reserves</li> <li>9. your organisation's systems and procedures for accessing, recording and amending information</li> <li>10. your organisation's customer service procedures including those for dealing with complaints</li> <li>11. your organisation's procedures for late notification of claims</li> <li>12. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>13. the roles and functions of other parties involved in claims</li> <li>14. procedures for dealing with adverse features discovered during the claims process</li> <li>15. the actions to be taken by the insured after a loss</li> <li>16. the information and/or documentation required to process a claim</li> <li>17. signs of fraud in a claim and the action required</li> </ol>

## GIC08: Settle complex insurance claims

### Overview

This unit may be suitable for you if you work for an insurer, an intermediary or another organisation with authority to settle complex claims. Claims are complex when they are not routine and cannot be dealt with mechanistically, for example, when a claim involves negotiation or is technically demanding. You will pursue any potential recoveries and will update other interested parties as they require. You will negotiate the claim according to the facts and circumstances involved. You will agree a final settlement figure, obtaining formal discharge of the claim from the claimant where this is required and you will arrange payment of the final settlement.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. obtain all information necessary to make an assessment of the claim</li> <li>2. assess liability and quantum of damages based on the information obtained</li> <li>3. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>4. take appropriate action where fraud or potential fraud is suspected</li> <li>5. make decisions up to the limit of your agreed authority</li> <li>6. evaluate issues effectively and make appropriate decisions</li> <li>7. request missing information or documentation promptly</li> <li>8. provide accurate information and instructions to appropriate specialists</li> <li>9. arrange for potential recoveries to be pursued</li> <li>10. provide interested parties with updated information as required</li> <li>11. negotiate the liability and/or quantum of damages</li> <li>12. agree final settlement and inform interested parties</li> <li>13. arrange for the settlement to be completed promptly and in the agreed manner</li> <li>14. keep accurate and complete records</li> <li>15. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and ethically</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you pay attention to details that are critical to your work</li> <li>• you are vigilant for potential risks</li> <li>• you keep information confidential and secure and disclose it only to those authorised to receive it</li> <li>• you negotiate effectively</li> <li>• you show integrity, fairness and consistency in the assessments and decisions you make</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>4. your organisation's customer service procedures including those for dealing with complaints</li> <li>5. your organisation's procedures for recording claims settlements</li> <li>6. your organisation's estimating practices</li> <li>7. the roles and functions of other parties involved in claims</li> <li>8. sources of advice and information</li> <li>9. the limits of your authority and the action required when a claim falls outside those limits</li> <li>10. the effects of claims leakage on insurers</li> <li>11. methods of claims assessment and investigation and the resources your organisation has to conduct these activities</li> <li>12. your organisation's procedures for handling emergency claims</li> <li>13. your organisation's systems and procedures for accessing, recording and amending information</li> <li>14. your organisation's procedures for late notification of claims</li> <li>15. your organisation's procedures for settlement of claims</li> <li>16. authorised sources of information, supply or repair needed, to settle claims</li> <li>17. the importance of allocating correct cause codes and event dates</li> <li>18. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>19. the options available for settling a claim</li> </ol>

**GIC09: Agree settlement of straightforward claims for uninsured losses**

**Overview**

This unit may be suitable for you if you work for a legal expenses insurer or any organisation involved in agreeing settlement of straightforward uninsured losses. Your work must involve finalising uninsured losses. You assist customers with the recovery of uninsured losses. You check that you have all documentation and/or information required to deal with the uninsured loss aspect of the claim. You pursue others, as necessary, to achieve a recovery.

<b>Performance</b>	<b>Behaviours</b>	<b>Knowledge and understanding</b>
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. identify and obtain the information you need to agree settlement of the claim</li> <li>2. ensure the claim is formulated and submitted to the third party correctly</li> <li>3. monitor the progress of the claim and deal with any delays</li> <li>4. refer problems and claims which are outside your authority to the appropriate person in your organisation</li> <li>5. negotiate with others to resolve problems and finalise the claim in the best interests of your organisation and the customer</li> <li>6. arrange for settlement of the claim</li> <li>7. handle any problems or complaints associated with the claim in accordance with your organisations procedures</li> <li>8. keep accurate and complete records</li> <li>9. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you act within the limits of your responsibility</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> <li>• you present information clearly and concisely</li> <li>• you use communication styles that are appropriate to different people and situations</li> <li>• you pay attention to details that are critical to your work</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. sources of information and advice</li> <li>4. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>5. the limits of your authority and the action required when a claim falls outside those limits</li> <li>6. your organisation's procedures for dealing with uninsured losses</li> <li>7. your organisation's procedures for recording claims settlements</li> <li>8. your organisation's systems and procedures for accessing, recording and amending information</li> <li>9. your organisation's customer service procedures including those for dealing with complaints</li> <li>10. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>11. the roles and functions of other parties involved in claims</li> <li>12. the information and/or documentation required to process a claim</li> </ol>

## **GII10: Evaluate insurance products and services**

### **Overview**

This unit may be suitable for you if the firm in which you work is an intermediary an insurer or an organisation working on their behalf. This unit involves evaluating a product or service offered by your employing firm and comparing it with others available in the market. It also involves identifying cover and premiums your employing firm offers that may not be relevant to the needs of customers, gaps in the products and services offered by your employing firm and any changes in the market or the needs of your customers. After your evaluation, you will prepare your recommendations for improving a product or service offered by your employing firm, and present these to the appropriate person.

<b>Performance</b>	<b>Behaviours</b>	<b>Knowledge and understanding</b>
<p>You must be able to:</p> <ol style="list-style-type: none"><li>1. obtain and assess appropriate information to evaluate a product or service</li><li>2. identify and evaluate the differences in the features, benefits and prices of the products or services offered by your company with others available in the market</li><li>3. identify any cover and premiums your company offers that may not be relevant to the needs of customers</li><li>4. identify any changes in the market or your customers' needs which necessitate changes in products or services</li><li>5. identify and evaluate gaps in the products and services offered by your company</li><li>6. analyse information about products and services and draw conclusions about the products and services you offer</li><li>7. prepare recommendations for improving products and services and support these with sufficient and valid evidence</li><li>8. present your recommendations to the appropriate people, explaining the features, benefits and any disadvantages or risks</li><li>9. comply with legal requirements, industry regulations, organisational policies and professional codes</li></ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"><li>• you recognise changes in circumstances and take these into account</li><li>• you take pride in delivering high quality work</li><li>• you present information clearly and concisely</li><li>• you pay attention to details that are critical to your work</li><li>• you carry out tasks with due regard to your organisation's policies and procedures</li></ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"><li>1. relevant insurance and legal principles and regulations which affect your activities</li><li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li><li>3. sources of advice and information at work</li><li>4. the limits of your authority</li><li>5. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li><li>6. your work role and the responsibilities it places on you</li><li>7. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li></ol>

<b>GII11: Process straightforward insurance business as an intermediary</b>		
<b>Overview</b>		
<p>This unit will be suitable for you only if you work for an intermediary dealing with straightforward new business. Your work must involve both processing requests for and finalising insurance cover. After a quotation has been accepted, details are submitted to underwriters and, as an intermediary, you manage the new business process. Arrangements are then made for the payment of the premium and issue of the policy documentation to the customer.</p>		
<b>Performance</b>	<b>Behaviours</b>	<b>Knowledge and understanding</b>
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. place risks within your agreed level of responsibility, the authority given by the customer and your employer's guidelines</li> <li>2. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>3. submit details to insurers in a manner and timescale appropriate to the risk</li> <li>4. inform the customer of the terms and the cover provided</li> <li>5. process proposals for new business and obtain any relevant supplementary information and documentation required</li> <li>6. refer any issues outside your authority to the appropriate person</li> <li>7. identify and resolve any discrepancies in the information supplied</li> <li>8. keep information confidential</li> <li>9. process the payment correctly and by the appropriate means</li> <li>10. make sure cover documentation is accurate, legible and meets legal and regulatory requirements</li> <li>11. issue insurance documentation to the customer in accordance with your employer's policy</li> <li>12. make complete and accurate records at all stages</li> <li>13. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in the client's best interests</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you identify the information needs of others</li> <li>• you use communication styles that are appropriate to different people and situations</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. your organisation's customer service procedures including those for dealing with complaints</li> <li>4. your organisation's policy and procedures regarding communicating with customers</li> <li>5. methods of payment offered by your organisation including credit and instalment facilities</li> <li>6. your organisation's procedures for contacting underwriters</li> <li>7. the appropriate procedures for referral and advice</li> <li>8. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>9. the limits of your authority and the action required when a situation falls outside those limits</li> <li>10. your organisation's systems and procedures for accessing, recording and amending information</li> <li>11. the information that should be supplied by clients to enable you to process new business</li> <li>12. the features of new business which require investigation by insurers</li> <li>13. sources of information and advice</li> <li>14. your organisation's procedures for checking and correcting policies and associated documentation</li> <li>15. your organisation's procedures for dealing with new business where cover is subject to conditional acceptance</li> <li>16. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GII12: Process straightforward insurance renewals as an intermediary

### Overview

This unit will be suitable for you only if you work for an intermediary firm, dealing with straightforward renewals. Your work must involve both processing and completing renewals. You will process the policies due for renewal in compliance with current regulations. You will assess whether or not to look for an alternative quotation for the customer. The renewal invitation is sent to the customer, once you have received any information or documentation needed to progress the renewal. You will then monitor the progress of the renewal, ensuring there are no delays in the process. You will check renewal documentation is accurate and release it when agreement for payment has been reached.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. deal with renewals as authorised by your employer</li> <li>2. commence dealing with forthcoming renewals within the timescale required by your employer and regulator</li> <li>3. obtain sufficient, accurate information required to proceed with the renewal</li> <li>4. clarify information which is unclear and obtain additional information where required</li> <li>5. identify any features that indicate fresh underwriting should take place and whether to re-broke the risk</li> <li>6. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>7. resolve any queries on renewal documentation</li> <li>8. request any information or documentation required and store it securely</li> <li>9. arrange for the appropriate documentation to be dispatched to the customer in the time required by the regulator and/or your employer</li> <li>10. request renewal instructions from your customer</li> <li>11. monitor the progress of the renewal and deal with any delays</li> <li>12. arrange for the release of renewal documentation when arrangements for payment have been agreed</li> <li>13. keep accurate and complete records</li> <li>14. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in the client's best interest</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>you need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>4. sources of information and advice within your organisation relevant to renewals</li> <li>5. the limits of your authority and the action required when a renewal falls outside those limits</li> <li>6. your organisation's service standards and procedures including those for dealing with complaints</li> <li>7. your organisation's systems and procedures for accessing, recording and amending information</li> <li>8. your organisation's policy and procedures for communicating with customers</li> <li>9. the limits of your own authority and the action required if a renewal is beyond those limits</li> <li>10. how to use rating guides and/or computer systems to calculate premiums</li> <li>11. the information that should be supplied by clients to enable you to process renewals</li> <li>12. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

### **GII13: Process straightforward mid-term insurance amendments**

#### **Overview**

This unit will be suitable for you only if you work for an intermediary. Your work must involve both processing and completing straightforward amendments to cover. This unit covers the work of an intermediary when a customer wishes to amend a policy. After the information has been gathered, details are submitted to underwriters if required and you manage the amendment process. Arrangements are then made for the adjustment of the premium and issue of the amendment documentation to the customer.

<b>Performance</b>	<b>Behaviours</b>	<b>Knowledge and understanding</b>
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. obtain sufficient, accurate information required to proceed with the amendment</li> <li>2. clarify information which is unclear and obtain additional information where required</li> <li>3. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>4. communicate accurate and complete information regarding the adjustment to the insurer or underwriter in the appropriate way</li> <li>5. identify any features that indicate fresh underwriting should take place and decide whether to re-broke the risk</li> <li>6. clarify with the customer any queries raised by the insurers and pass the information back to the insurers</li> <li>7. give customers accurate information which meets their requirements</li> <li>8. monitor the progress of the adjustment and deal with any delays where appropriate</li> <li>9. make arrangements for any adjustment in premium</li> <li>10. arrange to issue amendment documentation to the customer within the time required having checked for and rectified any discrepancies</li> <li>11. keep accurate and complete records at all stages</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in your client's best interests</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you show a clear understanding of the demands and needs of different customers</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's service standards and procedures including those for dealing with complaints</li> <li>4. your organisation's policy and procedures for communicating with customers</li> <li>5. how to use rating guides and/or computer systems to calculate premiums</li> <li>6. your organisation's procedures for straightforward policy alteration, including any associated essential information required from the customer</li> <li>7. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>8. the limits of your authority and the action required when an amendment falls outside those limits</li> <li>9. your organisation's systems and procedures for accessing, recording and amending information</li> <li>10. the limits of your own authority and the action required if an alteration is beyond those limits</li> <li>11. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GII14: Process complex new insurance business as an intermediary

### Overview

This unit will be suitable for you only if you work for an intermediary and if you deal with complex new business. New business is complex where it is not routine and cannot be dealt with mechanistically. Examples of complex new business may include fleets, commercial combined requiring separate underwriting, high net worth personal lines or any risks requiring additional investigation or underwriting. Your work must involve both processing requests for and finalising insurance cover. After a quotation has been accepted, details are submitted to underwriters and, as an intermediary, you manage the new business process. Arrangements are made for the payment of the premium and issue of the policy documentation to the customer.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. place risks within your agreed level of responsibility, the authority given by the customer and your employer's guidelines</li> <li>2. resolve difficulties associated with new business according to business agreements, legal requirements and the limit of your authority</li> <li>3. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>4. request any documentation and/or information required and store it securely</li> <li>5. submit details to insurers in a manner and timescale appropriate to the risk</li> <li>6. identify and resolve any discrepancies in the information supplied</li> <li>7. agree final terms and premium and process the new business for payment</li> <li>8. issue confirmation of cover</li> <li>9. monitor the progress of the new business and deal with any delays</li> <li>10. make sure cover documentation is accurate, legible and meets legal and regulatory requirements</li> <li>11. arrange for the issue of documentation to the client</li> <li>12. keep accurate and complete records at all stages</li> <li>13. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you evaluate situations and information effectively and make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in the client's best interests</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you negotiate effectively</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service procedures including those for dealing with complaints</li> <li>4. your organisation's policy and procedures regarding communicating with customers</li> <li>5. methods of payment offered by your organisation including credit and instalment facilities</li> <li>6. how to calculate premiums using manual and/or automated systems</li> <li>7. your organisation's procedures for contacting underwriters</li> <li>8. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>9. your organisation's systems and procedures for accessing, recording and amending information</li> <li>10. the information that should be supplied by clients to enable you to process new business</li> <li>11. the features of new business which require investigation by insurers</li> <li>12. the action required for processing a risk that is outside your authority</li> <li>13. your organisation's procedures for checking and correcting policies and associated documentation</li> <li>14. your organisation's procedures for dealing with new business where cover is subject to conditional acceptance</li> <li>15. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GII15: Process complex insurance renewals as an intermediary

### Overview

This unit will be suitable for you only if you work for an intermediary firm, and if you deal with complex renewals. Your work must involve both processing and completing renewals. A renewal is complex where it is not routine and cannot be dealt with mechanically. The unit involves identifying policies due for renewal and checking the documentation against information received from insurers. You will solve any difficulties associated with the renewal such as where there have been major changes in terms or premiums, or where there have been changes in the risk, and will provide the best solution for your customer. You will request any documentation or information from the customer necessary to process the renewal. You will send any required documentation or information to insurers to process the renewal and will check the progress of the renewal to ensure there are no delays. You will check the renewal documentation for accuracy and resolve any inaccuracies and ambiguities, and will release the it when agreement for payment has been reached.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. identify accurately forthcoming renewals within the timescale required by your employer and regulator</li> <li>2. request documentary evidence and/or any information required and store this securely</li> <li>3. resolve difficulties associated with the renewal according to business agreements, legal requirements and the limit of your authority</li> <li>4. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>5. identify any features that indicate fresh underwriting should take place and/or whether to re-broke the risks when appropriate</li> <li>6. monitor the progress of the renewal and deal with any delays</li> <li>7. resolve any inaccuracies and/or ambiguities in renewal documentation and/or information</li> <li>8. despatch the renewal documentation to the customer in the time required</li> <li>9. request renewal instructions from your customer</li> <li>10. arrange for the release of renewal documentation when arrangements for payment have been agreed</li> <li>11. explain clearly any delays in completing the renewal and take appropriate action</li> <li>12. keep accurate and complete records of all stages</li> <li>13. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you evaluate situations and information effectively and make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in the client's best interest</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you negotiate effectively</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service procedures including those for dealing with complaints</li> <li>4. your organisation's policy and procedures regarding communicating with customers</li> <li>5. methods of payment offered by your organisation including credit and instalment facilities</li> <li>6. how to calculate premiums using manual and/or automated systems</li> <li>7. your organisation's procedures for contacting underwriters</li> <li>8. the limits of your authority and the action required when a renewal falls outside those limits</li> <li>9. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>10. your organisation's systems and procedures for accessing, recording and amending information</li> <li>11. the information that should be supplied by clients to enable you to process renewals</li> <li>12. how to use rating guides and/or computer systems to calculate premiums</li> <li>13. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GII16: Process complex mid-term insurance amendments

### Overview

This unit may be suitable for you only if the firm in which you work is an intermediary and you deal with complex mid term amendments. The policy may be straightforward; it is the alteration that is complex. Complex alterations are those which are not routine and cannot be dealt with mechanically. This will include any alteration involving significant changes to terms and conditions. This unit covers the work of an intermediary when a customer wishes to amend a policy. Your work must involve both processing requests for and finalising insurance cover. After the information has been gathered, details are submitted to underwriters if required and you manage the amendment processing. Arrangements are made for the adjustment of the premium and issue of the amendment documentation to the customer.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. obtain sufficient information to allow you to assess the customer's needs</li> <li>2. clarify information which is unclear and obtain additional information where required</li> <li>3. communicate accurate and complete information regarding the adjustment to the insurer or underwriter in the appropriate way</li> <li>4. resolve difficulties associated with the amendment according to business agreements, legal requirements and the limit of your authority</li> <li>5. provide the customer with accurate and complete information</li> <li>6. make arrangements for any adjustment in premium</li> <li>7. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>8. monitor the progress of the amendment and deal with any delays</li> <li>9. make sure amendment documentation is accurate, legible and meets legal and regulatory requirements</li> <li>10. check and issue the insurer's documentation to the customer promptly once you have received it</li> <li>11. keep accurate and complete records of all stages</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you evaluate situations and information effectively and make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in the client's best interest</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you negotiate effectively</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service procedures, including those for dealing with complaints</li> <li>4. your organisation's policy and procedures regarding communicating with customer</li> <li>5. how to calculate amendment premiums using manual and/or automated systems</li> <li>6. your organisation's procedures for contacting underwriters</li> <li>7. the limits of your authority and the action required when an amendment falls outside those limits</li> <li>8. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>9. your organisation's systems and procedures for accessing, recording and amending information</li> <li>10. the information that should be supplied by clients to enable you to process amendments</li> <li>11. the features of amendments which require investigation by insurers</li> <li>12. your organisation's procedures for checking and correcting amendment documentation</li> <li>13. your organisation's procedures for dealing with amendments where cover is subject to conditional acceptance</li> <li>14. your organisation's procedures for mid term cancellations including returns of premium and return of documentation</li> <li>15. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GII17: Evaluate risk and advise other insurance intermediaries

### Overview

This unit may be suitable for you only if the firm in which you work is an insurance intermediary. This unit covers the work of an intermediary who is placing business on behalf of other intermediaries, for example acting as a wholesale intermediary or placing business on behalf of an appointed representative. You will assess the needs of the other intermediary and analyse and evaluate all the relevant information provided. You will arrange for further investigations into the risk where these are required and then assess the material facts before proceeding. After making your assessment, you will advise the other intermediary, making sure your proposals and their implications are fully understood, and you will agree the course of action to be taken.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. obtain all required information to assess the needs of the other intermediary and their client</li> <li>2. analyse and evaluate the information</li> <li>3. investigate the risk further, where this is required</li> <li>4. assess the material facts and obtain any relevant documentation</li> <li>5. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>6. give advice in accordance with any agreement to place business on behalf of the intermediary within your agreed limits of responsibility</li> <li>7. give advice which provides the best market situation for the other intermediary given the nature of the request and your employer's policies, procedures and status</li> <li>8. explain your recommendations clearly and confirm that the other intermediary understands your advice</li> <li>9. agree the course of action to be taken with the other intermediary</li> <li>10. confirm your advice in accordance with your organisation's procedures</li> <li>11. maintain confidentiality when giving advice to other intermediaries</li> <li>12. protect the integrity of the relationship with your retail intermediary</li> <li>13. keep accurate and complete records of all stages</li> <li>14. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you evaluate situations and information effectively and make appropriate decisions</li> <li>• you present information clearly and concisely</li> <li>• you encourage the other intermediary to ask questions and seek clarification</li> <li>• you use information and knowledge effectively, efficiently and in the best interests of the other intermediary and their customer</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service and operational standards including those for dealing with complaints</li> <li>4. sources of advice and information relevant to your work</li> <li>5. how to analyse and evaluate information supplied by other intermediaries</li> <li>6. your organisation's requirements for making and recording recommendations to other intermediaries</li> <li>7. legal and organisational requirements for maintaining the confidentiality of information</li> <li>8. the limits of your authority</li> <li>9. your organisation's procedures for contact with insurers</li> <li>10. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>11. the information and material facts that should be supplied by other intermediaries</li> <li>12. your organisation's requirements relating to the application of codes, laws and regulatory requirements, as they impact on your activities</li> </ol>

## GIU18: Underwrite straightforward new risks

### Overview

This unit may be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. Your work must involve you in assessing straightforward new risks and deciding if they can be accepted. You must have the underwriting authority to accept them. This unit involves getting the required information from the customer, matching the customer's requirements to policy cover available, arranging for further investigations into the risk if they are required. All available information should be used to make an assessment of the risk and fix an equitable price. It also involves deciding whether to accept or decline the risk, suggesting (if appropriate) risk improvement measures and applying current underwriting criteria.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. accept only new risks which fall within your authority and pass others to the appropriate person</li> <li>2. gather sufficient information, resolving any discrepancies, to enable you to assess the risk accurately</li> <li>3. inform the customer of any risk improvements required as appropriate</li> <li>4. apply current underwriting criteria to reflect the features of the risk</li> <li>5. identify and clarify any differences between policy cover and the customer's requirements</li> <li>6. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>7. inform the customer promptly of your decision</li> <li>8. agree final terms and premium</li> <li>9. keep accurate and complete records at all times</li> <li>10. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you evaluate issues effectively to make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in your customer's best interest</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it and who are entitled to it</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service standards and procedures including those for dealing with complaints</li> <li>4. sources of advice and information at work</li> <li>5. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>6. your organisation's policy and procedures regarding communicating with customers</li> <li>7. your organisation's procedures and the circumstances for granting cover subject to conditional acceptance</li> <li>8. the limits of your authority and the action required for underwriting a risk outside your authority</li> <li>9. how to apply underwriting criteria</li> <li>10. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU19: Process insurance policy documentation

### Overview

This unit may be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. Your work may involve you in providing customers with a policy or documentation as evidence of alterations. After new business and alterations have been processed, the documentation providing the evidence of the contract of insurance, or of the alteration, is prepared and issued to the customer. You will usually deal with documentation for policies with standard rates and wordings, i.e., those policies/products that are system-driven allowing little, if any, scope for individual judgement to vary the terms and conditions.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. enter correct information in the appropriate location</li> <li>2. produce the correct documentation in accordance with your employer's procedures</li> <li>3. resolve any ambiguities or discrepancies</li> <li>4. issue documentation promptly to those who need it</li> <li>5. incorporate standard clauses and endorsement wordings correctly</li> <li>6. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>7. keep accurate and complete records at all stages</li> <li>8. check that the documentation is accurate</li> <li>9. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in your customer's best interests</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it and who are entitled to it</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. relevant legal principles and regulations which affect your activities</li> <li>4. the structure of the insurance market and the roles and responsibilities of the various parties within it</li> <li>5. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>6. sources of information and advice</li> <li>7. the limits of your authority and the actions required for situations outside your authority</li> <li>8. your organisation's service and timescale standards, including those for dealing with complaints</li> <li>9. your organisation's systems and procedures for recording and amending information</li> <li>10. your organisation's policy and procedures for communicating with customers</li> <li>11. your organisation's procedures for preparing schedules and relevant policy attachments</li> <li>12. your organisation's procedures and timescales for the issue of revised policy schedules and endorsements</li> <li>13. your organisation's procedures for standard policy alteration, including any associated essential information required from the customer</li> <li>14. your organisation's procedures for mid-term cancellations including return of premiums and return of documentation</li> <li>15. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU20: Process straightforward insurance renewals

### Overview

This unit will be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. Your work must include processing straightforward renewals, falling within your authority, with features indicating that fresh underwriting may be required. This may include those where claims have been made or where there are changes in circumstances. You will obtain and clarify information from the customer. You will invite renewals and issue the documentation required to comply with legislation and regulation.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. deal with only those renewals falling within your authority and pass others to the appropriate person</li> <li>2. commence dealing with forthcoming renewals within the timescale required by your employer and regulator</li> <li>3. identify correctly any features which indicate fresh underwriting should take place</li> <li>4. obtain sufficient information and/or documentation required to proceed and decide whether to accept or decline the renewal</li> <li>5. clarify information which is unclear and obtain additional information where required</li> <li>6. take into account the effect a decision to decline renewal will have on others and ensure adequate notification is given</li> <li>7. prepare documentation and/or correspondence</li> <li>8. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>9. invite renewal of risks promptly and confirm any changes in terms and conditions</li> <li>10. keep accurate and complete records</li> <li>11. update or complete any additional records or databases required</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in the client's and the insurer's best interest</li> <li>• you show understanding of others and deal with them professionally</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's service and timescale standards</li> <li>4. sources of advice and information</li> <li>5. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>6. the limits of your authority and the action required when a renewal falls outside those limits</li> <li>7. your organisation's procedures for granting cover subject to conditional acceptance</li> <li>8. how to access existing customer records</li> <li>9. your organisation's policy and procedures for communicating with customers</li> <li>10. how to apply underwriting criteria using manual or automated systems</li> <li>11. your organisation's procedures for the issue of renewal documentation</li> <li>12. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> <li>13. relevant legal principles and regulations which affect your activities</li> <li>14. the structure of the insurance market and the roles and responsibilities of the various parties within it</li> </ol>

## GIU21: Underwrite complex new risks

### Overview

This unit will be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. Your work must involve you in assessing complex new risks within your authority, deciding if they can be accepted. A risk is complex if it is not routine and cannot be dealt with mechanistically. This unit involves getting the required information from the customer, matching the customer's requirements to policy cover available and arranging for further investigations into the risk if they are required. All available information should be used to make an assessment of the risk, and to fix an equitable price. It also involves deciding whether to accept or decline the risk, suggesting risk improvement measures (if appropriate), and applying current underwriting criteria before informing the customer of the premium and terms.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. accept only new risks which fall within your agreed level of responsibility and pass others to the appropriate person</li> <li>2. gather sufficient information, resolving any discrepancies, to enable you to assess the risk accurately</li> <li>3. advise the customer of any risk improvements required</li> <li>4. decide whether to accept or decline the risk, allowing for all features and history of the risk and/or the effect your decision will have on other business</li> <li>5. apply appropriate limitations or extensions of cover to reflect the features of the risk</li> <li>6. identify and clarify any differences between policy cover and the customer's requirements</li> <li>7. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>8. take action to avoid any unnecessary delays in underwriting the risk</li> <li>9. inform the customer promptly of your decision</li> <li>10. agree final terms and premium</li> <li>11. keep accurate and complete records at all times</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional code</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you evaluate issues effectively to make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in your customer's best interests</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you show awareness of the potential risks associated with any proposal</li> <li>• you disclose information only to those who need it and who are entitled to it</li> <li>• you negotiate effectively</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service standards and procedures including those for dealing with complaints</li> <li>4. sources of advice and information</li> <li>5. current market trends and development</li> <li>6. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>7. the limits of your authority and the action required when underwriting falls outside those limits</li> <li>8. your organisation's policy and procedures regarding communicating with customers</li> <li>9. how to determine if a proposal fits your organisation's planned profile of acceptable risk</li> <li>10. your organisation's procedures and the circumstances for granting cover subject to conditional acceptance</li> <li>11. the action required for underwriting a risk that is outside your agreed level of responsibility</li> <li>12. how to apply underwriting criteria</li> <li>13. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU22: Prepare insurance policy documentation for complex new business

### Overview

This unit will be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. This unit will be suitable for you if you prepare policies from source documentation, and/or use a central signing facility. This unit requires you to decide which policy form, wordings and attachments should be used. It involves taking the information from the source document and will require selection of those wordings which have the same meaning and implications as those negotiated. It also involves producing the documentation according to market practices and regulations and by the appropriate method.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. draft policies and endorsements within your competence and authority incorporating all information from the source documentation</li> <li>2. communicate with others to ensure any ambiguities are resolved</li> <li>3. incorporate any alterations made to wordings</li> <li>4. use wordings which are unambiguous and which have the same meaning and implications as those negotiated</li> <li>5. ensure policies meet any legal requirements</li> <li>6. keep accurate and complete records at all stages</li> <li>7. confirm that the documentation is accurate</li> <li>8. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>9. provide policy documentation to those who need it</li> <li>10. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in the customer's best interests</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it and who are entitled to it</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service standards and procedures including those for dealing with complaints</li> <li>4. your organisation's procedures for policy issue.</li> <li>5. sources of advice and information</li> <li>6. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>7. the limits of your authority and the action required when preparation of a policy appears to exceed your authority</li> <li>8. your organisation's procedures and timescales for the issue of documentation</li> <li>9. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU23: Process complex insurance policy alterations

### Overview

This unit will be suitable for you if you work for an insurer or for an intermediary or other organisation with delegated authority to make alterations to policies. The policy may be straightforward; it is the alteration that is complex. Complex alterations are those which are not routine and cannot be dealt with mechanically. You will establish the customer's requirements, request further information as necessary, decide if the alteration can be accepted and process the alteration. You will deal with requests for mid-term alterations to existing business by establishing what changes to the policy are required and determine a revised premium where this is necessary.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. deal with new requests for alterations promptly</li> <li>2. deal only with alterations for which you are authorised and pass others to the appropriate person</li> <li>3. identify the details you need to proceed with the request and confirm that you have all these details</li> <li>4. clarify any information which is unclear and obtain additional information where required to eliminate any ambiguities</li> <li>5. identify and take into account any existing business</li> <li>6. identify any features in the request which indicate it should be declined or referred and proceed accordingly</li> <li>7. apply underwriting criteria</li> <li>8. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>9. provide a quotation with appropriate terms to the customer</li> <li>10. ensure that all requirements are clearly understood and, when necessary, you obtain confirmation that these have been acted upon</li> <li>11. suggest alternative products or actions if the customer declines the quotation</li> <li>12. clearly explain when cover has been granted and confirm any special conditions</li> <li>13. arrange for accurate documentation to be provided to those who need it</li> <li>14. keep accurate and complete records at all stages</li> <li>15. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in the customer's best interest</li> <li>• you present information clearly and concisely and in a way that others will understand</li> <li>• you pay attention to details that are critical to your work</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it</li> <li>• you show awareness of the potential risks associated with any proposal</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. sources of information and advice</li> <li>4. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>5. your organisation's service and timescale standards</li> <li>6. your organisation's systems and procedures for recording and amending information</li> <li>7. how to access existing business customer records</li> <li>8. your organisation's policy and procedures for communicating with customers</li> <li>9. the limits of your authority and the action required when an alteration appears to exceed your authority</li> <li>10. how to apply underwriting criteria</li> <li>11. the information required to carry out the proposed alteration</li> <li>12. your organisation's procedures for processing mid-term adjustments and return of documentation, where appropriate</li> <li>13. your organisation's procedures for granting cover subject to conditional acceptance</li> <li>14. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU24: Process complex insurance renewals

### Overview

This unit will be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. A renewal is complex where it is not routine and cannot be dealt with mechanically. You will determine renewal terms by taking into account fresh underwriting information such as the claims history, making allowance for all features of the risk. This may involve proposing risk improvement measures. You will consult with other interested parties if appropriate to the circumstances and to your job role. You will suggest alternative products and services when these are appropriate. You may negotiate on terms with the customer, invite the renewal and arrange for the customer to be issued with the required documentation.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. review policies and identify risks requiring re underwriting within the limit of your authority and pass others to the appropriate person</li> <li>2. obtain accurate information required including any claims history and estimates for outstanding claims to decide whether to accept or decline renewals</li> <li>3. clarify any information that is ambiguous or unclear</li> <li>4. make allowance for all features and history of the risk and propose appropriate risk improvement measures</li> <li>5. decide whether to accept or decline the risk, allowing for all features and history of the risk and the effect your decision will have on other business</li> <li>6. apply underwriting criteria</li> <li>7. notify and consult with other interested parties when appropriate to the circumstances</li> <li>8. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>9. confirm when cover has been granted and explain clearly any special conditions</li> <li>10. arrange for accurate and complete documentation and correspondence to be prepared and issued</li> <li>11. keep complete and accurate records</li> <li>12. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you evaluate situations and information effectively and make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in the client's and insurer's best interest</li> <li>• you present information clearly and concisely</li> <li>• you pay attention to details that are critical to your work</li> <li>• you negotiate effectively</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. sources of information and advice</li> <li>4. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>5. your organisation's service and timescale standards</li> <li>6. your organisation's policy and procedures for communicating with customers</li> <li>7. the limits of your authority and the action required when a renewal falls outside those limits</li> <li>8. your organisation's procedures for processing renewals and associated documentation</li> <li>9. your organisation's procedures for the issue of revised policy schedules</li> <li>10. how to access existing customer records</li> <li>11. your organisation's procedures and the circumstances for granting cover subject to conditional acceptance</li> <li>12. how to apply underwriting criteria</li> <li>13. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU25: Review underwriting decisions to accept risks

### Overview

This unit will be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. Your work will involve checking quotations given to customers. Quotations which have been provided are checked to make sure that the underwriter's guidelines have been correctly applied, underwriting authority has not been exceeded and that the quotation is valid. Where a quotation is dependent upon the customer supplying documentation or other evidence, this is also checked and any differences between the material facts supplied by the customer at the time of the quote and the information provided by the evidence will be referred to the person able to deal with these.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. promptly review quotations which fall within your authority and pass others to the appropriate person</li> <li>2. confirm that you have all the documentation and information you need to proceed</li> <li>3. identify any differences in the details received from the customer and the material facts on which the quotation was based</li> <li>4. identify quotations which fall outside your organisation's guidelines and take the appropriate action</li> <li>5. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>6. investigate quotations which do not meet standard cover and underwriting guidelines</li> <li>7. validate quotations which meet requirements</li> <li>8. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you evaluate issues effectively and make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in the customer's best interests</li> <li>• you show awareness of the potential risks associated with any proposal</li> <li>• you pay attention to details that are critical to your work</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's service and timescale standards</li> <li>4. sources of advice and information</li> <li>5. the policy cover, terms and conditions relevant to your work including standard and non-standard extensions and/or limitations</li> <li>6. the limits of your authority and the action required when a quotation falls outside those limits</li> <li>7. the underwriting criteria for the quotations you are authorised to review</li> <li>8. your organisation's procedures for granting cover subject to conditional acceptance</li> <li>9. how to access existing customer records</li> <li>10. your organisation's policy and procedures for communicating with customers</li> <li>11. how to determine if a proposal fits your organisation's planned profile of acceptable risk</li> <li>12. how to check the correct premium has been charged</li> <li>13. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GIU26: Underwrite straightforward policy alterations

### Overview

This unit will be suitable for you if you work for an insurer or an intermediary or other organisation with delegated authority. Your work must involve clarifying with customers the nature of the proposed alteration, requesting any further information you may need, deciding if the alteration can be accepted and carrying out the processing of the alteration. Dealing with requests for mid-term alterations to existing business on behalf of the insurer involves establishing what change, if any, to the policy is required, and calculating a revised premium where this is necessary.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. deal promptly with requests for alterations</li> <li>2. check you have sufficient details relating to the request to allow you to proceed</li> <li>3. identify and clarify non-standard requests accurately</li> <li>4. clarify any information which is unclear, and obtain any additional information where required</li> <li>5. disclose confidential information only to those authorised to receive it</li> <li>6. identify appropriate information from the current customer record</li> <li>7. apply all underwriting criteria correctly</li> <li>8. deal with those alterations for which you are authorised and promptly refer all others to the person authorised to deal with them</li> <li>9. inform the customer that you have granted cover once the alteration is accepted and confirm any special conditions</li> <li>10. ensure customers receive any documentation required to meet their needs and legal requirements</li> <li>11. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you evaluate issues effectively to make appropriate decisions</li> <li>• you use information and knowledge effectively, efficiently and in your customer's best interest</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it and who are entitled to it</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant insurance and legal principles and regulations which affect your activities</li> <li>2. the structure of the insurance market and the roles and responsibilities of the various parties within it within it as they impact on your activities</li> <li>3. your organisation's customer service standards and procedures including those for dealing with complaints</li> <li>4. sources of advice and information at work</li> <li>5. the policy cover, terms and conditions relevant to your work including standard extensions and/or limitations</li> <li>6. your organisation's policy and procedures regarding communicating with customers</li> <li>7. how to access existing business customer records</li> <li>8. your organisation's procedures for processing mid-term adjustments and the return of documentation where appropriate</li> <li>9. the limits of your authority and the action required for underwriting a risk outside your authority</li> <li>10. how to apply underwriting criteria using manual or automated systems</li> <li>11. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GFS01: Provide information to customers in a financial services environment

### Overview

This Standard is about enabling you to deal with a variety of requests from customers relating to financial services; for example in a reception area (face to face) or by telephone or correspondence. Such requests might include information about a new product, or altering an existing product or making a claim. Your work must involve you directly in providing information to customers in a financial services environment.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. acknowledge customers promptly and treat them in a courteous manner</li> <li>2. accurately find out what the customer requires to meet his/her information needs about financial services products and/or services</li> <li>3. recognise any requests for information about financial services products and/or services which you are not authorised to deal with</li> <li>4. promptly and accurately pass any requests for information about financial services products and/or services which you are not authorised to deal with to the person authorised by your employer to deal with them</li> <li>5. provide information about financial services products and/or services to customers which is clear, accurate and relevant to their needs</li> <li>6. keep a record of the information about financial services products and/or services provided, as required by your employer</li> <li>7. describe the details of financial services products and/or services clearly and accurately</li> <li>8. make sure the financial products and/or services are sufficient to meet what you believe are the customer's needs</li> <li>9. disclose confidential information only to the people authorised to receive it</li> <li>10. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you effectively identify the information needs of others</li> <li>• you present information about financial services products and/or services clearly and concisely</li> <li>• you encourage customers to ask questions and seek clarification</li> <li>• you use information and knowledge effectively, efficiently and in the customer's best interests</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you pay attention to details that are critical to your work</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant legal principles and regulations which affect your activities</li> <li>2. the structure of financial services and the roles and responsibilities of the relevant parties as they impact on your activities</li> <li>3. your organisation's customer service procedures including those for dealing with complaints</li> <li>4. your organisation's policy and procedures regarding communicating with customers</li> <li>5. sources for providing relevant financial services products and/or services information and advice within your job role</li> <li>6. the difference between providing information and giving advice within your job role</li> <li>7. the types of financial services products and/or services information you are able to provide within your job role</li> <li>8. how to access customer records</li> <li>9. the features, terms and conditions of the financial products and/or services you deal with</li> <li>10. the limits of your own personal authority and the action required if a request for information about financial services products and/or services is beyond those limits</li> <li>11. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>

## GFS02: Deal with requests to cancel financial services products or services

### Overview

This unit may be suitable for you if you work for any type of organisation providing financial services products or services to customers. Your work must involve proactively dealing with requests from customers to cancel a financial services product or service which they have purchased, discussing with them the reasons for cancellation. You will ensure that they fully understand all the features and benefits of the product or service which would be lost, if cancelled. Where the customer wishes to proceed with the cancellation, you will arrange for the customer records to be amended accordingly and for confirmation to be sent to the customer.

Performance	Behaviours	Knowledge and understanding
<p>You must be able to:</p> <ol style="list-style-type: none"> <li>1. acknowledge customers promptly and treat them in a courteous manner</li> <li>2. identify appropriate information from the current customer record</li> <li>3. establish accurately the reasons why the customer wishes to cancel the financial services product or service</li> <li>4. refer any situations you are not authorised to deal with to the appropriate person/department</li> <li>5. provide information to the customer which is accurate and sufficient for an informed decision to be made about whether to cancel the financial services product or services</li> <li>6. ensure that the customer fully understands all the features and benefits of the product or service which will be lost through cancellation</li> <li>7. provide your customer with the opportunity to ask questions about the financial services product/s or services they wish to cancel</li> <li>8. action your organisation's procedures once the customer decides to proceed with the cancellation</li> <li>9. keep accurate and complete records at all stages</li> <li>10. comply with legal requirements, industry regulations, organisational policies and professional codes</li> </ol>	<p>You must demonstrate that:</p> <ul style="list-style-type: none"> <li>• you use information and knowledge effectively, efficiently and in your customer's best interest</li> <li>• you show understanding of others and deal with them in a professional manner</li> <li>• you disclose information only to those who need it and who are entitled to it</li> <li>• you present information clearly and concisely</li> <li>• you show a clear understanding of the demands and needs of different customers</li> <li>• you carry out tasks with due regard to your organisation's policies and procedures</li> </ul>	<p>You need to know and understand:</p> <ol style="list-style-type: none"> <li>1. relevant legal principles and regulations which affect your activities</li> <li>2. the structure of the financial services market and the roles and responsibilities of the various parties within it as they impact on your activities</li> <li>3. your organisation's service standards and procedures including those for dealing with complaints</li> <li>4. your organisation's policy and procedures for communicating with customers</li> <li>5. your organisation's procedures for cancellations</li> <li>6. contract terms and conditions relevant to your work</li> <li>7. the limits of your authority and the action required when a cancellation falls outside those limits</li> <li>8. your organisation's systems and procedures for accessing, recording and amending information</li> <li>9. your organisation's requirements relating to the application of codes, laws and regulatory requirements as they impact on your activities</li> </ol>