

# OLD MUTUAL INSURE LIMITED

Complaints Management Policy  
An Internal Process for the Resolution of Complaints

OLDMUTUAL



**INSURE**

DO GREAT THINGS EVERY DAY



## INSURE

We at Old Mutual Insure value our clients/brokers/3<sup>rd</sup> parties/suppliers (herein after referred to as the 'Complainant' and we hereby state our commitment to handling **all** complaints effectively and timeously.

First and foremost, the General Code of Conduct issued under the Financial Advisory and Intermediary Services Act 37 of 2002 (FAIS Act) sets out the requirements for the maintenance of a complaints policy.

Secondary to this, the SAIA Code of Conduct requires from its members to adhere to certain minimum standards regarding complaints handling procedures.

In addition to this, the Financial Services Board (FSB) introduced a policy of Treating Customers Fairly (TCF). This regulation will ensure that the following fairness outcomes are delivered.

**Outcome 1:** Customers are confident that they are dealing with firms where the fair treatment of customers is central to the firm culture.

**Outcome 2:** Products and services marketed and sold in the retail market are designed to meet the needs of identified customer groups and are targeted accordingly.

**Outcome 3:** Customers are given clear information and are kept appropriately informed before, during and after the time of contracting.

**Outcome 4:** Where customers receive advice, the advice is suitable and takes account of their circumstances.

**Outcome 5:** Customers are provided with products that perform as firms have led them to expect, and the associated service is both of an acceptable standard and what they have been led to expect.

**Outcome 6:** Customers do not face unreasonable post-sale barriers to change product, switch provider, submit a claim or make a complaint.

This document, in line with the applicable regulatory and industry requirements, serves to establish an effective internal complaints management system and procedures.

## Policy Statement

Old Mutual Insure is committed to:

- dealing with complaints in a timely and fair manner, with each complaint receiving due consideration in a process that is managed appropriately and effectively;
- providing complainants with easy access to our complaints resolution process via any of our branches, postal and fax services, telephone, e-mail and the Old Mutual Insure website;
- ensuring that the internal complaints process is transparent and visible so that complaints have full knowledge of what procedures to follow in order for their complaints to be resolved;
- ensuring that where a complaint is resolved in favour of the complainant, a full and appropriate level of redress is offered to the complainant, without delay;
- making available adequately trained staff that possess the necessary skills and expertise to handle complaints effectively;
- Establishing a mechanism for the escalation of complaints up to Senior Management and Board level. These complaints will be monitored by the Compliance Department;

- implementing internal follow-up procedures to ensure improvement of service and avoidance of those occurrences that give rise to complaints (Senior Management and Board will be regularly informed on trends);
- Ensuring that records of complaints are maintained for a period of 5 years.

Old Mutual Insure defines a complaint and a query as follows:

**A complaint** is an expression of dissatisfaction by a complainant, oral or written, about the service or product that we have/are providing to them. We will use the following as guidelines to establish if an issue is a complaint

1. Are we outside our SLA? Have we fallen short of the standards that we have set ourselves and communicated to our clients?
2. Does the issue require escalation of decision?
3. Does the complainant clearly state that they are dissatisfied or want to complain?
4. When our clients tell us that they are not happy about our service or product and want a response from us.
5. When the complainant uses any of the complaints channels? E.g. [complaints@ominsure.co.za](mailto:complaints@ominsure.co.za), Called the MD office to complain, Hellopeter, Formal letter of complaint, called the complaint number, logged a complaint on our website.

#### **A query**

1. Involves client/broker asking about details on a policy (e.g. wrong address, errors in the policy) and is dealt with and resolved immediately
2. A question? e.g. when will my claim be paid? How long will it take to resolve my issue? How far are you in processing my claim? How did you arrive at the settlement amount?
3. An Inquiry
4. A follow up

When does a query turn into a complaint?

1. When a complainant clearly states that they are now dissatisfied and complain.

## **Categories of Complaints**

There are two categories of complaints:

### **1. A General Complaint as defined above.**

### **2. In particular, the FAIS Act defines a complaint as follows:**

A specific complaint relating to a financial service rendered by a financial services provider or representative to the complainant on or after the date of commencement of the Act, and where it is alleged that the provider or representative has:

- (a) contravened or failed to comply with a provision of the Act and that as a result thereof the complainant has suffered or is likely to suffer financial prejudice or damage;
- (b) wilfully or negligently rendered a financial service to the complainant which has caused prejudice or damage to the complainant or which is likely to result in such prejudice or damage;
- (c) Treated the complainant unfairly.

A complaint will therefore only qualify as a **FAIS Complaint** if it complies with one or more of the requirements in the above definition. These complaints will most likely have to do with matters relating to the giving of advice and rendering of intermediary services that are covered in the FAIS General Code of Conduct.

## **Summary of Complaints Resolution Requirements for Old Mutual Insure**

Old Mutual Insure's complaints resolution procedure is published on our website under the "Contact Us" menu item for complainants to view (refer to "Annexure A"). Should a complainant not have access to the internet, a copy of the document can be faxed, e-mailed or collected from any Old Mutual Insure branch.

complainants may submit their complaints via any one of the following options, together with any relevant supporting documentation:

- The Old Mutual Insure website: [www.ominsure.co.za](http://www.ominsure.co.za) under the "**Contact Us**" option.
- E-Mail: [complaints@ominsure.co.za](mailto:complaints@ominsure.co.za)
- Fax: (011) 374-3089
- Telephone: 0860 634357
- Walk-in at Branches (Branch staff must, on behalf of the complainant, complete the Complaint Form that is available on the intranet and on Old Mutual Insure's website)
- Post: Old Mutual Insure Customer Experience Centre, PO Box 1120, Johannesburg, 2000

Old Mutual Insure's acknowledgement of and responses to the complainant will be made in writing and sent to the complainant either via post, e-mail or fax depending on the communication method preferred by the complainant.

### Procedure

The following table describes the required procedures that will be followed when complaints are received:

Complaints Handlers – Located in the Client Care Centre

Manager – Business Unit Manager where the complaint will be resolved.

Nominated Person – Appointed by the Business Unit Manager to resolve the Complaint

Step	Activity	Person Responsible
1.	<b>Complaints received</b>  All complaints received by any Old Mutual Insure employee, must be forwarded to the Client Care Centre immediately upon receipt thereof (via fax or e-mail). All relevant information and copies of relevant documentation must be included with the complaint.	All Staff
1.1	Complaints received by the Client Care Centre (via telephone, fax, e-mail, website or post) will be captured on the complaints management system within 24 hours of receipt.	Complaints Handlers
1.2	Identify the correct business area which will be responsible for resolving the complaint.	Complaints Handlers; Manager
1.3	Send written acknowledgement of receipt of the complaint to the complainant within 2 business days of receipt thereof, including the name and contact details of the person who is responsible for resolving the complaint.	Complaints Handlers
1.4	Diarise a first follow-up date of <b>3 business days</b> from date of receipt of the complaint. <b>Note:</b> <ul style="list-style-type: none"> <li>▪ If no confirmation has been received that the complaint has been resolved (in terms of the above</li> </ul>	Complaints Handlers

	procedures) by the first follow-up date, obtain details of the current status and planned action from the Nominated person and diarise a weekly follow-up date until such a confirmation is received that the complaint has been resolved.	
1.5	Identify the root cause of the complaint and update the complaints management system.	Nominated Person; Complaints Handlers
1.6	Take all actions necessary to resolve the complaint.  <b>Note:</b> <ul style="list-style-type: none"> <li>▪ In cases where routine resolution of complaints is not possible, or if the complaint cannot be resolved within <b>15 business days</b>, or if the complainant is still dissatisfied with the outcome, then the complaint must be brought to the attention of the Compliance Division.</li> <li>▪ If the outcome of the complaint is not favourable to the complainant, full written reasons must be provided to the complainant and update the complaints management system.</li> </ul>	Nominated Person; Complaints Handlers
1.7	For complaints that have been effectively resolved, give feedback to the complainant in writing and update the complaints management system.	Complaints Handlers
1.8	Record the complaint outcome in the complaints management system and close off the case.	Complaints Handlers
1.9	Compile and distribute a monthly summary of the complaints received, with an illustration of the root causes and trends to the Complaints Steering Committee. Discuss trends and or root causes with the relevant business areas. Escalate issues to the Complaints Steering Committee.	Client Care Centre
<b>2.</b>	<b>Complaints received by Branches</b>	
2.1	Assist the complainant by obtaining all relevant information and copies of relevant documentation for the complaint and forward to the Client Care Centre or capture on the intranet.	All staff in the Branch
2.2	Where the Branch is able to immediately assist the client with their complaint then details of the complaint and resolution thereof must be sent to the Client Care Centre for capturing on the complaints management system.	All staff in the Branch, Complaints Handlers
2.3	Complaints received must follow steps 1.2 to 1.9.	
<b>3.</b>	<b>Telephonic Complaints</b> (Call Centre, Switchboard, Direct Extension)	
3.1	While receiving calls in the usual course of business, should any complaint arise, the complaint must be forwarded to the Client Care Centre to be captured in the complaint	All staff, Complaints Handlers

	management system together with all relevant details of the complaint.	
3.2	Complaints received must follow steps 1.2 to 1.9.	
<b>4.</b>	<b>Complaints received via the OMinure Website Complaints Form</b>	
4.1	Follow steps 1.2 to 1.9.	Complaints Handlers

For all other complaints received via "Hello Peter" or any other area not mentioned above, it is important to note that these complaints must be captured on the complaints management system and, where appropriate, finalised in their respective areas.

## "ANNEXURE A" – COMPLAINTS RESOLUTION PROCEDURE

### **OLD MUTUAL INSURE COMPLAINTS RESOLUTION PROCEDURE**

#### **Customer Complaints**

Old Mutual Insure recognises that every client/broker/3<sup>rd</sup> party/supplier (herein after referred to as the 'Complainant' has a right to complain. Our complaints handling process affords you the opportunity to do so. Your feedback is valued as it allows us to continuously improve our service and processes, and affords us the opportunity to change bad experiences into positive ones.

#### **How to complain to Old Mutual Insure**

- Your complaint must be in writing (letter, fax, e-mail or website) or telephonically with an official of Old Mutual Insure.
- Provide: Name and Address Details and Policy Number, Claim Number or ID number of the insured.
- Be specific about the complaint and provide all the important facts (including events) that may have a bearing on the complaint.
- Provide copies of all documents that have relevance to the complaint (i.e. letters, quotations, previous correspondence etc).
- Provide proof of any losses sustained where applicable.
- Specify a solution / remedial action you believe is required to resolve your complaint.

#### **Our Contact Details**

The contact details for the Old Mutual Insure Client Care Centre are as follows:

Postal address: PO Box 1120, Johannesburg, 2000

E-mail: [complaints@ominsure.co.za](mailto:complaints@ominsure.co.za)

Telephone: 0860 634357

Fax number: +27 (0)11 374-3089

Website: [www.ominsure.co.za](http://www.ominsure.co.za) under the "**Contact Us**" option.

#### **Our Complaint Process**

All complaints will be acknowledged in writing and sent to you either via post, e-mail or fax, depending on the communication method chosen by yourself.

1. Once the complaint has been received, it will be allocated to the appropriate area for resolution. A letter of acknowledgement for the receipt of the complaint will be despatched within two (2) business days.  
Please note that as delivery of e-mails to Old Mutual Insure cannot be guaranteed, should no acknowledgement of a complaint submitted be received within three (3) business days, kindly contact Old Mutual Insure's Client Care Centre in the Customer Experience Area (details above) in order that Old Mutual Insure may follow up on the matter.
2. Where a complaint cannot be addressed within fifteen (15) business days of receipt thereof, Old Mutual Insure will inform you accordingly.

3. You will be notified of the outcome of your complaint in writing. If the outcome of the complaint is not favourable to yourself, full written reasons will be provided within six (6) weeks of receipt of your complaint.

4. If within six weeks of receipt of your complaint Old Mutual Insure has been unable to resolve the complaint to the satisfaction of yourself, and if you wish to pursue the matter further, your complaint may be lodged with the **Ombudsman for Short- term Insurance**.

4.1. The contact details for the Ombudsman for Short Term Insurance are as follows:

Postal Address	Tel. :	(011) 726-8900
P O Box 32334	Tel. :	0860 726 890
Braamfontein	Fax :	(011) 726-5501
2017	E-mail :	<a href="mailto:info@osti.co.za">info@osti.co.za</a>

5. In the same circumstances as per the above, but **specifically** where complaints:

5.1. relate to a financial service rendered by Old Mutual Insure or a representative of Old Mutual Insure and where it is alleged that Old Mutual Insure or our representative:

- (a) has contravened or failed to comply with a provision of the FAIS Act and that as a result thereof the complainant has suffered or is likely to suffer financial prejudice or damage; or
- (b) has wilfully or negligently rendered a financial service to the complainant which has, or which is likely to, cause prejudice or damage to the complainant; or
- (c) has treated the complainant unfairly;

**And**

5.2. Does not constitute a monetary claim in excess of R800,000 unless Old Mutual Insure has agreed in writing to this limitation being exceeded, or the complainant has abandoned the amount in excess of R800,000. Then:

- (a) The complaint may be referred to the **FAIS Ombudsman**; and
- (b) The complainant should:
  - I. refer the matter to the FAIS Ombudsman within six months of receipt of Old Mutual Insure's notification; and
  - II. Produce to the Ombudsman Old Mutual Insure's final response as well as the complainant's reasons for disagreeing with such final response.

5.3. The contact details for the FAIS Ombudsman are as follows:

Customer Contact Division, The FAIS Ombudsman  
Celtis House, Eastwood Office Park  
Lynnwood, Pretoria

Postal Address:	Tel. :	(012) 470-9080
PO Box 74571	Tel. :	0860 324 766
Lynnwood Ridge	Fax :	(012) 348-3447
0040	E-mail :	<a href="mailto:info@faisombud.co.za">info@faisombud.co.za</a>