

Complaints Management Framework

Innovation Group South Africa

Date:	11 May 2022	Prepared by: Customer Service	Version:	1.3

Revision history

Version	Status	Date	Ву	Summary
1.0	Effective	31 January 2020	Customer Service	Approved by Customer Service GM & Executive
1.1	Reviewed / Approved	1 April 2021	Customer Service	Annual Review
1.2	Updated / Approved	06 May 2021	Customer Service	Updated Resolution Turnaround times
1.3	Reviewed / Approved	11 July 2022	Customer Service	Annual Review

Sign-off

Version	Date	Ву	Title	Signature
1.1	24 April 2021	Aldrin Luthuli	GM: Customer Service	Approved
1.1	24 April 2021	Karin Kruger	Executive: Operations	Approved
1.2	06 May 2021	Aldrin Luthuli	GM: Customer Service	Approved
1.2	06 May 2021	Karin Kruger	Executive: Operations	Approved
1.3	05 October 2022	Aldrin Luthuli	GM: Customer Service	Aldrin Luthuli
1.3	05 October 2022	Karin Kruger	Executive: Operations	Karin Marie Kruger

Disclaimer

Innovation Group does not assume any responsibility for incidental or consequential damages. This publication is provided on the basis that no warranty or representations (express or implied) are made concerning the contents of the publication. It is not intended that the contents of this publication form part of the projects of any agreements. Any reference to Innovation Group products, programming or services, shall not impose an obligation on Innovation Group to provide such products, programming or services to a particular person or at a particular location.

This publication may include inaccuracies or errors and should not be relied on without independent verification. Further, Innovation Group may alter this publication, produce a new edition or version of the publication, or modify, improve or change any products or programs described in this publication without prior notice

Contents

1.	Purpose
2.	Scope
3.	Principles
4.	Definitions
5.	Allocation of responsibilities
6.	Approach4
7.	Complaint categories
8.	Complaints escalation and review process
9.	Decisions relating to complaints
10.	Complaint upheld
11.	Complaint channels and acknowledgement turnaround times
11.1.	The below table illustrates the various channels including the response time:
11.2.	The below table illustrates the various channels including the resolution turnaround times:
12.	Complainant Responsibilities
13.	Reporting of complaints
14.	Recordkeeping of complaints
15.	Engagement with the Ombudsman

1. Purpose

- 1.1. The purpose of this framework is to establish the principles of and commitment to the management of complaints by Innovation Group South Africa ("Innovation Group").
- 1.2. This framework sets out the principles, standards, and guidelines for the continuous and effective management of complaints.

2. Scope

- 2.1. This framework aims to foster a culture of compliance, as well as optimizing relations with stakeholders which warrant a multidisciplinary approach that can only be effective once all relevant role-players support the complaints process.
- 2.2. This framework governs the management of complaints across all legal entities of Innovation Group namely, Innovation FSP(Pty) Ltd, Innovation Group Distribution (Pty) Ltd, Innovation Risk Services (Pty) Ltd and Innovation Group Services (Pty) Ltd.

3. Principles

The aim is to ensure the effective resolution of all complaints and the framework is designed in conjunction with the below mentioned principles:

- Customer focus
- Accessibility and transparency
- Responsiveness
- Alignment to the TCF Outcomes including Policyholder Protection Rules
- Continuous learning and improvement; and
- · Risk awareness and risk tracking including mitigating factors thereof

4. Definitions

Complaint

An expression of dissatisfaction by a person to a service provider, to the knowledge of the service provider, relating to a policy or service provided or offered by that service provider which indicates or alleges, regardless of whether such an expression of dissatisfaction is submitted together with or in relation to a policyholder query

Complainant:

- a. A person who submits a complaint and includes a -
- b. Policyholder or the policyholder's successor in title.
- c. Beneficiary or the beneficiary's successor in title; or
- d. Person that pays a premium in respect of a policy.
- e. Potential customer whose dissatisfaction relates to the application, approach, solicitation or advertising or marketing material.
- f. A person on behalf of policyholder/customer, who has a direct interest in the agreement, policy or service to which the complaint relates, or a person acting on behalf of a person referred to a) to e)

Policyholder Query

Means a request to the service provider by or on behalf of a policyholder, for information regarding the service provider's policies, services, or related processes, or to carry out a transaction or action in relation to any such policy or service

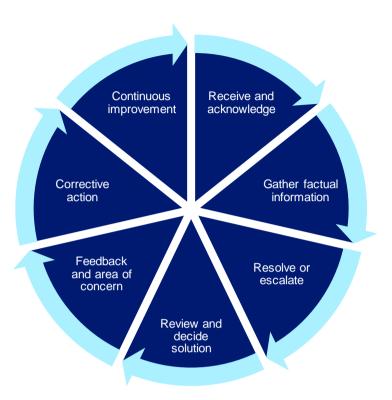
5. Allocation of responsibilities

Any person that is responsible for deciding or recommending in respect of complaints must-

- a. be adequately trained.
- b. should have correct knowledge, experience, and skill in complaints handling, should understand the fair treatment of customers, the subject matter of the complaints concerned and relevant legal and regulatory matters.

- c. not be subject to a conflict of interest; and
- d. sufficiently authorised to make impartial decisions or recommendations

6. Approach



The approach in handling complaints is outlined in the model above.

6.1. Receive and Acknowledge

On receipt of a customer complaint, feedback is provided to the complainant acknowledging receipt of the complaint. The complaints management process is explained to the customer to manage the customers' expectation. The acknowledgement times vary based on the channel of choice by the complainant.

6.2. Gather factual information

It is imperative that information is obtained prior to the resolution of the complaint. The complainant is informed of all information required beforehand that is essential to the complaint. Depending on the nature of the complaint and period, this will inform the time that it will take to gather all the necessary information.

6.3. Resolve or escalate

Given the factual information provided, this will inform on whether the complaint is within the mandate of the Complaints Function to resolve, or escalation to the responsible discipline to resolve.

6.4. Review and decide solution

All decisions made adhere to the TCF objectives, as such beneficial to the complainant including mitigating of the organisation's reputational risk.

6.5. Feedback and area of concern

Once a decision and a solution has been achieved, feedback is provided to all the relevant stakeholders and the outcome of the complaint is clearly communicated and actioned were required. The area of concern is highlighted to relevant stakeholder(s) to ensure mitigation is put in place

6.6. Corrective Action

After receipt of feedback and area of concern, the relevant stakeholder(s) commit by providing an action plan to correct behaviour and/or enhance processes

6.7. Continuous Improvement

Feedback on all complaints is presented to the different areas to ensure continuous improvement to enhance customer experience.

7. Complaint categories

- 7.1. All complaints are categorised in accordance with the following minimum categories:
 - a. complaints related to design policy or service, including premiums or other fees charged to the policy or service.
 - b. complaints relating to information provided to policy holders.
 - c. complaints relating to policy performance.
 - d. complaints related to the service rendered to policy holders, including complaints related to premium collection or lapsing of policies.
 - e. complaints related to complaints handling.
 - f. complaints related to policy accessibility, changes, or switches; and
 - g. complaints related to insurance risk claims, including non-payment of claims and other complaints.
- 7.2. There are additional categories that is relevant to the business, policies, services including the policyholder base. This will ensure efficiency of handling of complaints to manage risks and improving outcomes and processes for policyholders.
- 7.3 The complaints logged are classified in various categories namely:
 - a. Product;
 - b. Agent at fault;
 - c. Related institute;
 - d. Area of concern;
 - e. Root cause;
 - f. Issue type;
 - g. Party at fault;
 - h. Channel / Medium;
 - i. Area of concern;
 - j. Financial impact;
 - k. Customer information; and
 - I. Outcome of complaint linked to TCF

The above categories assist in analysing the complaints to identify trends and issues.

8. Complaints escalation and review process

- 8.1. There is a formal complaints process that covers the following:
 - a. there is a non-bias view on complaints, keeping in mind the authentic interests of all parties involved including fair treatment of complainants.
 - b. provide an internal escalation process on complex or rare complaints at occurrence of the initial complaint handler.
 - c. provide for complainants to escalate complaints not resolved to their satisfaction.
 - d. clear communication with complainants / authorised representatives on the complaints and the complaint process and procedures; and

e. regular monitoring of complaints management framework generally.

9. Decisions relating to complaints

There are various factors considered when the outcome of the complaint is achieved, the factors listed below contribute to the outcome:

9.1. Compensation payment

This refers to a payment in monetary form, benefit, or service, by administrator /insurer to a complainant to compensate the complainant for a proven financial loss, incurred as a result of administrator or insures' contravention, action, failure to act, service failure that has impact on TCF or details of requirements that are outstanding.

9.2. Goodwill payment

This refers to a payment in monetary of benefit or service, by or on behalf of an insurer / underwriter as an expression of goodwill in order to resolve a complaint.

9.3. Rejected (Invalid) complaint

This relates to a complaint that has not been upheld, the complaint is regarded as being finalised by the administrator / insurer. The complaint is regarded as invalid, or where the complainant does not respond or accept proposals from the administrator / insurer to resolve the complaint.

10. Complaint upheld

10.1. This means a complaint has been finalised wholly or partially in favour of the complainant and that.

- a. the complainant has clearly accepted the matter has been fully resolved; or
- b. it is reasonable for the administrator / insurer to assume that the complainant has so accepted.
- c. all commitments made by the administrator / insurer to the complainant have been met.

11. Complaint channels and acknowledgement turnaround times

The complaints management framework ensures that there is presence across multiple customer touchpoints. The formal method of communication with the complainant is conducted via email and/or telephone and in plain language.

Channel	Description	Response Time
Phone Call	Complainant opts to contact our offices telephonically	Immediate
Social Media	Complaint logged on any social media platform, which included but not limited to: Facebook Hello Peter Twitter	30 minutes within working hours (08:00 - 16:30)
Innovation Group Website	Complainant opts to log a complaint on the Innovation Group Website	30 minutes within working hours (08:00 -16:30)
E-mail	Complainant opts to log complaint via e-mail to either one of the complaints e-mail address	1 hour within working hours (08:00 - 16:30)

11.1. The below table illustrates the various channels including the response time:

11.2. The below table illustrates the various channels including the resolution turnaround times:

Channel	Description	Resolution Times
Phone Call	Complainant opts to contact our offices telephonically	Normal complaints -48 working hours Sales dispute - 7 working days
Social Media	Complaint logged on any social media platform, which included but not limited to: • Facebook • Hello Peter,	Facebook 24-48 working hours Hello Peter - 48 working hours
Innovation Group Website	Complainant opts to log a complaint on the Innovation Group Website	Normal Complaints - 48 working hours Sales disputes -7 working days
E-mail	Complainant opts to log complaint via e-mail to either one of the complaints e-mail address	Normal Complaints -48 working hours Sales disputes -7 working days

12. Complainant Responsibilities

- 12.1. The complaints management framework's objective is to have a clear and transparent process communicated to the complainant; the process entails factors mentioned below to be clearly articulated to the complainant:
 - a. Provide all relevant information when logging the complaint; and
 - b. Understand that a complex complaint requires ample time to resolve, however the complainant will be communicated with in respect of the progress of the complaint.

13. Reporting of complaints

Weekly, monthly, quarterly, and yearly reports are distributed to all relevant areas to understand concerns raised. All concerns raised provides an opportunity for the business to improve on our customers experience through training, correcting behaviour, coaching / disciplinary action and enhancing processes.

The complaints handling process is further supported by our inhouse quality framework that seeks to improve, quality, compliance and process through ongoing assessments and coaching initiatives to remedy any issues identified. Detailed analysis is conducted on all Legal/Ombudsman complaints raised and proactive mitigating measures are adopted within the complaints team to address any future complaints resulting into a Legal/Ombudsman matter.

In the event where the complainant is unhappy with the outcome given by Innovation Group. The complainant may approach the Short-Term Insurance Ombudsman, Innovation Group does not impose any barriers to the complainant during and after the internal complaints process.

Particulars of the Short-term Insurance Ombudsman

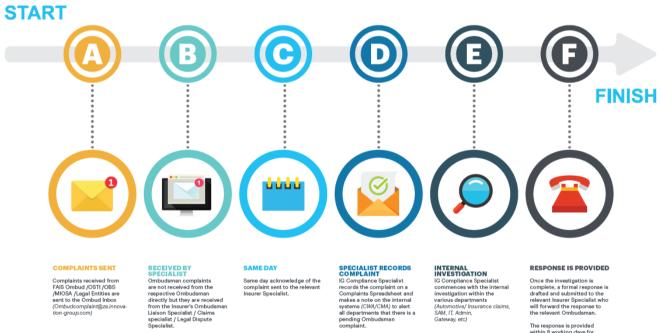
The Short-term Insurance Ombudsman Postal address: PO Box 32334, Braamfontein, 2017 Tel: 011 726 8900 / 0860 726 890 Fax: 011 726 5501 Website: <u>www.osti.co.za</u> Email:info@osti.co.za

14. Recordkeeping of complaints

Complaints are logged on our complaints system which provides a single view of all complaints logged irrespective of area. The system provides for the classification of complaints on several categorise which includes but not limited to the following:

- Complaint type •
- Nature of complaint •
- Area of concern •
- Party at fault •
- Related company
- Complaint specialist handling complaint •
- Date of complaint logged •
- Date of last update on complaint
- Outcome of complaint •
- Root cause of complaint •
- TCF outcome related complaint
- Description /detail on complaint •
- Policy information
- Customer information
- Complaint reference number •
- Status on complaint •

15. Engagement with the Ombudsman



Complaints received from FAIS Ombud /OSTI /OBS /MIOSA /Legal Entities are sent to the Ombud Inbox (Ombudcomplaint@za.inno tion-group.com)

Same day acknowledge of the complaint sent to the relevant Insurer Specialist.

COMPLAINT IG Compliance Specialist records the complaint on a Complaints Spreadsheet and makes a note on the internal systems (CMA/CMA) to alert all departments that there is a pending Ombudeman complaint.

INVESTIGATION IC Compliance Specialist commences with the internal investigation within the various departments (Automotive) (Insurance claims, SAM, IT, Admin, Gateway, etc)

Once the investigation is complete, a formal response is drafted and submitted to the relevant Insurer Specialist who will forward the response to the relevant Ombudaman.

The response is provided within 8 working days for Nedbank, ABSA, Standard Bank, Telesure and 5 workings days for Guardrisk.