

COMPLAINTS MANAGEMENT POLICY AND PROCEDURES
NMS INSURANCE SERVICES (SA) LIMITED

DOCUMENT CONTROL

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1 **APPLICABILITY**

- 1.1 This policy is applicable to all permanent employees, fixed term contractors and temporary staff of MSS, the juristic representative and outsourced service provider of the Company, to which complaints management is outsourced.

2 **PURPOSE**

- 2.1 The purpose of this policy is to provide guidelines for the effective and efficient management and resolution of complaints to ensure regulatory and service level compliance as well as to treat customers fairly.

3 **GUIDING PRINCIPLES**

- 3.1 The objective when dealing with policyholders on a day-to-day basis is to avoid the incidence of complaints as far as possible by ensuring that all processes that touch the policyholder directly or indirectly are performed in line with regulatory requirements, including Treating Customer Fairly outcomes, the FAIS General Code of Conduct and the Policyholder Protection Rules.
- 3.2 All complaints relating to alleged regulatory non-compliance must be handled by the Company's Risk and Compliance officer.
- 3.3 All complaints relating to governance structures and / or processes must be handled by the Company's CEO.
- 3.4 All other complaints must be handled centrally by the Company's Senior Manager.
- 3.5 All persons who are responsible for making decisions or recommendations in respect of complaints shall be:
- i. adequately trained;
 - ii. have an appropriate mix of experience, knowledge and skills in complaints handling, fair treatment of customers, the subject matter of the complaints concerned and relevant legal and regulatory matters;
 - iii. not subject to a conflict of interest; and
 - iv. adequately empowered to make impartial decisions or recommendations.

4 PROCEDURES

- 4.1 Transparency, visibility and accessibility of the complaints procedures
 - 4.1.1 The FAIS disclosure notice details the procedures to follow in the event of a complaint and is published on the DStv website.
 - 4.1.2 The FAIS disclosure notice is included in the correspondence pack sent to the policyholder.
- 4.2 Complainants must submit their complaints in writing to the Company in one of the following ways
 - 4.2.1 Handed in at any of the MultiChoice Service Centres (scanned and escalated via eGain);
 - 4.2.2 Faxed to (011) 577 4908 (eGain);
 - 4.2.3 E-mailed to dcc@multichoice.co.za (eGain); and
 - 4.2.4 However, if the complainant contacts the Company telephonically and is unable to submit his / her complaint in writing, the inbound FAIS representative does so on the complainant's behalf via the eGain system.
- 4.3 The administrator checks the eGain folder on a daily basis and logs the complainant's details in the complaints register.
- 4.4 The complaints Key Individual electronically assigns the logged complaint to the complaints handler or appropriate person to resolve the complaint (refer section 3). The complaints Key Individual will prioritise the resolution of the complaints with the complaints handlers where needed.
- 4.5 The complaints Key Individual or complaints handler or administrator acknowledges receipt of the complaint via email or telephonically within five business days of receipt and the following information advised:
 - 4.5.1 Contact details of the complaints handler or department that will be handling the complaint (the assigned complaints handler is copied in on the email);
 - 4.5.2 Indicative timelines for addressing the complaint;
 - 4.5.3 Details of the internal complaints escalation and review process if the complainant is not satisfied with the outcome of the complaint; and
 - 4.5.4 Details of escalation of complaints to the office of a relevant ombud where applicable.

- 4.6 Complaints will be resolved by the complaints handler or appropriate person within seven business days, if at all possible. The maximum period of time for a complaint to be resolved by the complaints handler or appropriate person is ten business days. This time frame is extended where complaints are escalated by either the complainant or complaints handler. The maximum extended period of time must be no longer than six weeks from the date of original receipt of the complaint to final resolution.

- 4.7 Complainants are kept adequately informed of
 - 4.7.1 The progress of their complaint;
 - 4.7.2 Causes of any delay in the finalisation of a complaint and revised timelines; and
 - 4.7.3 The Company's decision in response to the complaint; and
 - 4.7.4 Where the Company rejects the complaint, the reasons for the decision, the applicable escalation process and the relevant time frames.

- 4.8 The complaints handler logs the following information in the complaints register during the complaints resolution process and uploads copies of all relevant evidence, correspondence and decisions
 - 4.8.1 All relevant details of the complainant not logged initially by the administrator;
 - 4.8.2 The subject matter of the complaint;
 - 4.8.3 The complaint findings;
 - 4.8.4 The complaint categorisation;
 - 4.8.5 Received date, first and final communication dates;
 - 4.8.6 Escalation details where applicable;
 - 4.8.7 The outcome of the complaint including reasons where applicable; and
 - 4.8.8 The progress and status of the complaint.

- 4.9 Complaints are categorised in accordance with the following minimum categories
 - 4.9.1 Policy or related service design;
 - 4.9.2 Information provided to policyholders;
 - 4.9.3 Advice;
 - 4.9.4 Policy performance;
 - 4.9.5 Service;
 - 4.9.6 Policy accessibility, changes or switches;

- 4.9.7 Complaints handling;
- 4.9.8 Claims;
- 4.9.9 Other; and
- 4.9.10 Additional categories needed to further support the effectiveness of this complaints management framework, better manage conduct risks and effect improved outcomes and processes for the Company's policyholders.

- 4.10 The complaints register electronically tracks the progress of the complaints including whether such progress is within or outside the set timelines.

- 4.11 The complaints Key Individual or the Senior Manager where applicable reviews responses to complex complaints prior to the complaints handlers communicating these to the complainants.

- 4.12 The complaints Key Individual reviews the logged complaint and supporting documentation for completeness prior to closing the complaint in the complaints register.

- 4.13 Escalation procedure
 - 4.13.1 In the event that the complaints handler is unable to resolve the complaint him / herself, the complaints handler may escalate the complaint to the appropriate senior person to assist with the resolution.
 - 4.13.2 In the event that a complainant is not satisfied with the response to his / her complaint or the progress of the complaint or the complaint handler the complainant may escalate the complaint to the complaints Key Individual or Senior Manager or CEO where applicable for further resolution.

- 4.14 Ombuds
 - 4.14.1 A complainant may at any stage refer a complaint to the office of the applicable Ombud or take such other steps as he / she may be advised. Such referral must be done in accordance with the provisions of relevant regulations and rules.
 - 4.14.2 Any complaint not resolved internally by the Company within six weeks after receipt of the complaint, can be referred to the applicable Ombud by the complainant.
 - 4.14.3 The Company provides documentation to the Ombud via email when requested, in a timely manner.

- 4.14.4 Senior management monitors determinations, publications and guidance issued by any relevant Ombud with a view to identifying failings or risk in their own policies, services or practices.
- 4.15 Complaints are monitored by Senior management
 - 4.15.1 The complaints Key Individual checks the eGain folder on a weekly basis for complaints not yet logged and follows up with the administrator where needed.
 - 4.15.2 The complaints Key Individual checks the progress timelines on a daily basis and follows up with the complaints handlers where needed.
 - 4.15.3 The Senior Manager reviews the complaints register on a weekly basis and follows up with the appropriate persons where needed.
 - 4.15.4 Quality checks are performed by the Senior Manager or where applicable by the CEO on a monthly basis in line with the risk tolerances.
- 4.16 Management of complaints relating to the Company's service providers, insofar as such complaints relate to services provided in connection with the Company's policies or related services
 - 4.16.1 The Company administers and resolves all MSS and MultiChoice related complaints as part of its complaints management process.
 - 4.16.2 The Senior Manager has regular meetings with the Company's third parties, complaints are discussed at these meetings.
 - 4.16.3 The Senior Manager performs third party checks in line with the risk tolerances.
 - 4.16.4 The third parties refer complaints via email to the Company and visa versa where needed.

5 REPORTING OF COMPLAINTS

- 5.1. Complaints are further monitored and discussed by Senior management at the DI Steercom Committee.
- 5.2. The complaints information discussed is as follows:
 - 5.1.1 Number of complaints received;
 - 5.1.2 Number of complaints per category;
 - 5.1.3 Number of complaints upheld;
 - 5.1.4 Number of complaints and reasons for the rejection;

- 5.1.5 Number of complaints escalated by complainants to the internal complaints escalation process;
 - 5.1.6 Number of complaints referred to an ombud and their outcome;
 - 5.1.7 Number and amounts of compensation payments made;
 - 5.1.8 Number and amounts of goodwill payments made;
 - 5.1.9 Service levels; and
 - 5.1.10 Total number of complaints outstanding.
- 5.2 The complaints information recorded are scrutinised and analysed by the Senior management and DI Steercom on an ongoing basis and utilised to manage conduct risks and effect improved outcomes and processes for the policyholders, and to prevent recurrences of poor outcomes and errors. The material results of this analyses and resulting management action are reported to the Risk Committee and Board. The Risk Committee and Board provide the necessary oversight.
- 5.3 Complaints information is reported to the Authority as required.

6 **OTHER**

- 6.1 The persons responsible for making decisions or recommendations in respect of complaints are remunerated under the Company's remuneration policy which requires that Senior management oversee the performance standards and remuneration and reward strategies for all individuals responsible for complaints management to ensure it promotes objectivity and impartiality.
- 6.2 The compliance programme is executed per the compliance control function policy which requires a risk based compliance monitoring plan to be documented based on an approved universe (including compliance with this policy). The fraud risk management policy addresses insurance fraud.
- 6.3 The Company regularly (at least annually) reviews this complaints management framework and documents any changes thereto.