



## **HORIZON UNDERWRITING MANAGERS (PTY) LTD**

### **COMPLAINTS PROCEDURE**

The following are the procedures to be followed in the handling of complaints received by Horizon Underwriting Managers (Pty) Ltd (Horizon).

Horizon views complaints as a serious issue and all interactions with a complainant are to be conducted with the highest possible level of courtesy and professionalism.

Internally all complaints will be managed by the Branch Manager with the full involvement of Horizon's Compliance Officers, Associated Compliance. Head office should be notified at the same time. Between the Branch and Associated Compliance, they will be responsible for ensuring the complaint is brought to an effective, speedy and fair resolution.

The primary objective of these procedures is to:

- 1 Resolve the matter at hand,
- 2 Avoid escalation to the Ombud or litigation,
- 3 Identify the aspects that led to the complaint and ensure procedures are improved or established to prevent a reoccurrence

We anticipate that the major areas that lead to a compliant are:

- 1 Representations made regarding the product or service being factually incorrect or fraudulent
- 2 Inappropriate administration of the product (including the claim)
- 3 Benefits of the product to the customer and/or cost thereof the customer
- 4 A breach of any relevant legislation
- 5 A breach of the customer mandate
- 6 Any complaint of bad faith, malpractice, impropriety, repetition or reoccurrence of any matter about which there has been a recent complaint.

The actual procedure we be following is as follows:

- 1 If the initial complaint is received verbally it must be immediately be escalated to the Branch Manager and Managing Director who has primary responsibility for management of all Horizon's complaints.
- 2 All verbal complaints are to be reduced to writing immediately by the person who initially handled the phone call or visit. If the complaint is received in writing it must immediately be passed to the Branch Manager and Managing Director.
- 3 A separate file must be created for the ongoing control and subsequent retention of the complaint.
- 4 The complaint is to be entered on the Complaints Register by the Managing Director.

The Managing Director will immediately advise Horizon's Compliance Officers of the incident with a classification whether the complaint warrants immediate Compliance Officer intervention or simple monitoring.

Further action required:

- 1 A formal written acknowledgement is to be sent to the complainant within 2 (two) working days. If you wish to investigate the matter further or cannot respond to the client within this time frame, a formal written acknowledgement must be sent to the complainant within 15 (fifteen) working days. If the complaint was verbal, a request should be made to the complainant to confirm the details in writing.  
  
However, if the complaint is such a simple investigation into the matter will resolve the problem there will be no need to ask the complainant to put the details in writing if the complaint was verbal.  
  
The incident must still be logged as a formal complaint and all other aspects of the procedure are to be followed.
- 2 The specific incident is to be investigated by Branch Manager, unless the complaint involves the Branch Manager, in which case either the Managing Director or Horizon's external compliance officer will conduct the investigation.
- 3 Where appropriate the insurer involved should be formally notified in writing as to the nature and extent of the complaint. Any insurer not licensed under FAIS will be subject to the Policyholder Protection Rules. Those licensed will be bound by a similar complaints procedure.
- 4 If the incident is minor and quickly resolved, to the satisfaction of the complainant, a formal written note is to be sent to the complainant confirming the action taken. A file note is to be drawn up on the nature of the complaint, what the cause was and how the matter was resolved. Any recommendation that systems be upgraded or changed should be recorded and submitted to senior management and our Compliance Officer.
- 5 Any offer to rectify the complaint must be made formally in writing and a formal written response should be asked for in return to close the file.

- 6 If is investigated and the complaint is found to be without foundation or based on incorrect or poor facts a formal response is to be sent to the complainant detailing that we will not be taking the matter further and most importantly “why”. This report should be submitted within a reasonable time taking into consideration the complexity of the matter. Should resolution not be reached internally within 7 (seven) working days the complainant should be contacted and advised of the situation.
- 7 If the complainant does not accept the decision, we should make an offer to mediation. This mediation should initially involve our Compliance Officer. Other interested parties may also need to be involved depending upon the nature of the complaint.
- 8 Should mediation not achieve resolution with 30 (thirty) working days from receipt of the complaint then the complainant must be advised that they have the right to escalate the matter to the relevant Ombud. This right must be communicated in writing and details of the Ombud and the complaint registration form should be supplied to the the client.
- 9 Once totally resolved the complaints register is to be completed as required.
- 10 Once a month the Branch Manager and/or the Compliance Officer shall submit a full report of all the complaints received in the past period and the status of any resolved incidents. This form part of the Compliance Officers report as well.
- 11 All filing to be filed alphabetically in a separate system to the underwriting and claims files, by year of complaint to facilitate the 5 (five) year retention of these records.