



COMPLAINTS MANAGEMENT AND RESOLUTION POLICY

THE FOLLOWING COMPANIES WITHIN THE GROUP ARE REGISTERED WITH THE FSCA

COMPANY NAME	REG NO	FSP NO
DIGICALL SOUTH AFRICA (PTY) LTD	1994/005987/07	46358
DIGICALL SOLUTIONS (PTY) LTD	2000/003801/07	26898
DIGICALL CLAIMS ADMINISTRATION SOLUTIONS (PTY) LTD	2005/023531/07	46323
AFRICA AND WORLDWIDE MEDICAL ASSISTANCE SERVICES (PTY) LTD	1997/013679/07	44376

AN AUTHORISED FINANCIAL SERVICES PROVIDER

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1. Applicability and Purpose

This Complaints Management and Resolution Policy is applicable to Digicall Holdings (Pty) Ltd and its subsidiary companies, collectively referred to as (“Digicall”).

The policy formalises the practices required for effective management and handling of customer complaints within the Digicall Group of companies.

The objective is to ensure effective standards of complaints management in order to:

- Ensure fair outcomes for customers.
- Protect and enhance Digicall’s reputation.
- Provide a simple and accessible complaints handling procedure.
- Allow for effective reporting, detailed analysis and identification of trends related to complaints.
- Achieve effective and timely resolution of complaints in respect of acceptable turn-around times.
- Provide guidelines for acknowledging complaints and for recording customer complaints in a centralised manner.
- Improve organisational effectiveness through learning from client feedback and root cause analysis.
- Ensure effective management of complaints, in line with this policy.
- Restore and enhance relationships with complainants and non-complainants for the purpose of on-going business retention and growth.

2. Introduction

This policy provides general principles to guide the way complaints are handled, processed and escalated to ensure fair outcomes, manage business risk and conform to regulatory obligations.

Where a company or business within Digicall has a policy or process or procedural guide or training manual relating to complaints management, all such documents must comply with, and not contradict, this policy.

This policy sets out Digicall’s philosophy concerning the way complaints are handled, resolved, and maximised. (Maximised refers to conducting analysis of complaints for root cause analysis to ensure processes are improved to reduce complaints where necessary).

3. Scope

Where any business units within Digicall have agreements with third parties and other financial services providers (FSPs) that have any part to play in the complaints handling or resolution or record keeping process, it is recommended that those agreements may state minimum standards necessary for complaints management.

4. Definitions

client query - means a request to the provider or the provider’s service supplier by or on behalf of a client, for information regarding the provider’s financial products, financial services, or related processes, or to carry out a transaction or action in relation to any such product or service.

complainant means a person who submits a complaint and includes a—

- a. client.
- b. person nominated as the person in respect of whom a product supplier should meet financial product benefits or that persons’ successor in title.

- c. person whose life is insured under a financial product that is an insurance policy.
- d. person that pays a premium or an investment amount in respect of a financial product.
- e. member.
- f. person whose dissatisfaction relates to the approach, solicitation marketing or advertising material or an advertisement in respect of a financial product, financial service or related service of the provider,

who has a direct interest in the agreement, financial product or financial service to which the complaint relates, or a person acting on behalf of a person referred to in (a) to (f);

complaint means an expression of dissatisfaction by a person to a provider or, to the knowledge of the provider, to the provider's service supplier relating to a financial product or financial service provided or offered by that provider which indicates or alleges, regardless of whether such an expression of dissatisfaction is submitted together with or in relation to a client query, that—

- a. the provider or its service supplier has contravened or failed to comply with an agreement, a law, a rule, or a code of conduct which is binding on the provider or to which it subscribes.
- b. the provider or its service supplier's maladministration or wilful or negligent action or failure to act, has caused the person harm, prejudice, distress or substantial inconvenience; or
- c. the provider or its service suppliers has treated the person unfairly.

compensation payment means a payment, whether in monetary form or in the form of a benefit or service, by or on behalf of a provider to a complainant to compensate the complainant for a proven or estimated financial loss incurred as a result of the provider's contravention, non-compliance, action, failure to act, or unfair treatment forming the basis of the complaint, where the provider accepts liability for having caused the loss concerned, but excludes any—

- a. goodwill payment.
- b. payment contractually due to the complainant in terms of the financial product or financial service concerned; or
- c. refund of an amount paid by or on behalf of the complainant to the provider where such payment was not contractually due.

and includes any interest on late payment of any amount referred to in (b) or (c);

goodwill payment means a payment, whether in monetary form or in the form of a benefit or service, by or on behalf of a provider to a complainant as an expression of goodwill aimed at resolving a complaint, where the provider does not accept liability for any financial loss to the complainant as a result of the matter complained about.

member in relation to a complainant means a member of a—

- a. pension fund as defined in the Pension Funds Act 52 of 1956.
- b. friendly society as defined in of the Friendly Societies Act 25 of 1956.
- c. medical scheme as defined in of the Medical Schemes Act 131 of 1998) or
- d. group scheme as contemplated in the Policyholder Protection Rules made under section 62 of the Long-term Insurance Act, 1998, and section 55 of the Short-term Insurance Act, 1998.

rejected in relation to a complaint means that a complaint has not been upheld and the provider regards the complaint as finalised after advising the complainant that it does not intend to take any further action to resolve

the complaint and includes complaints regarded by the provider as unjustified or invalid, or where the complainant does not accept or respond to the provider’s proposals to resolve the complaint;

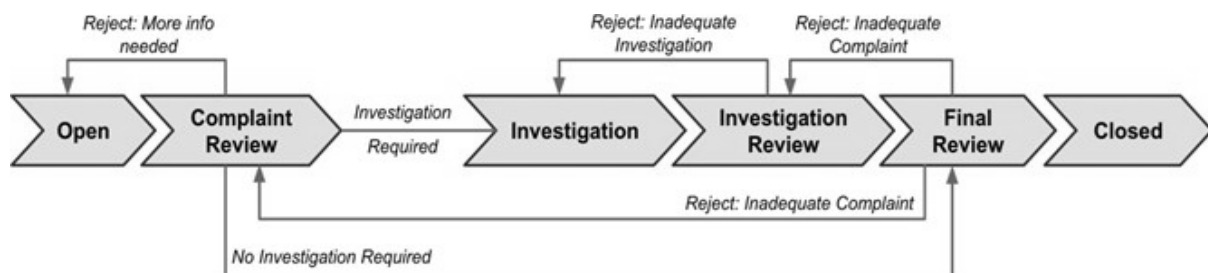
reportable complaint means any complaint other than a complaint that has been—

- (a) upheld immediately by the person who initially received the complaint.
- (b) upheld within the provider’s ordinary processes for handling client queries in relation to the type of financial product or financial service complained about, provided that such process does not take more than five business days from the date the complaint is received: or
- (c) submitted to or brought to the attention of the provider in such a manner that the provider does not have a reasonable opportunity to record such details of the complaint as may be prescribed in relation to reportable complaints; and

upheld means that a complaint has been finalised wholly or partially in favour of the complainant and that—

- (a) the complainant has explicitly accepted that the matter is fully resolved; or
- (b) it is reasonable for the provider to assume that the complainant has so accepted; and
- (c) all undertakings made by the provider to resolve the complaint have been met or the complainant has explicitly indicated its satisfaction with any arrangements to ensure such undertakings will be met by the provider within a time acceptable to the complainant.

5. Complaints Handling Process



5.1. Submission of Complaints

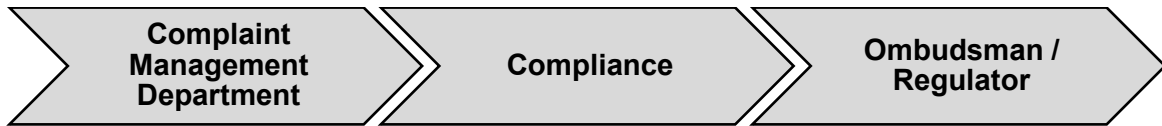
Complainants have the right to lodge a complaint should they feel that any representative, employee, supplier, or service provider of Digicall has contravened or failed to comply with regulatory requirements or where you have suffered or is likely to suffer:

- financial prejudice or damage.
- or where the representative, employee, supplier or service provider of Digicall has willfully or negligently rendered a service to you which has or is likely to cause prejudice or damage to you.
- or where you believe that you have been treated unfairly.

Your complaint must be lodged verbally or in writing with the suitable complaints management department and the following information must be provided with the complaint:

- Name and Surname
- Contact number or contact details.
- Details of the complaint or query
- Reference number or policy number as applicable

Complaints should be submitted in the following order:



5.1.1. Complaint Management Department

Initial complaint is submitted to the Complaint Management Department within Digicall.

- Complaint lodged with a specific department or services and handled by a case manager or team leader or supervisor or manager of the respective area.
- Service complaint logged onto the complaints management system for further investigation.
- Includes complaints from email address complaints@digicallgroup.co.za;
- Complaints from Hellopeter.com and other social media e.g.: Facebook, Twitter etc.
- Incoming calls from reception/switchboard/call center.
- Assigned to applicable person to handle and investigate.
- Written or Verbal (formal) response required confirming outcome of matter.

5.1.2. Compliance

The client is not satisfied with the complaint management department’s decision and escalates the matter.

- Your complaint must be lodged in writing with the External Compliance Officer of Digicall:

External Compliance Officer Contact Details

Company name and contact person:	Oracle Compliance (Pty) Ltd Mr Leonardo d’Onofrio
Telephone:	+27 10 100 2551
Facsimile:	+27 86 664 8448
E-mail Address:	info@oraclecompliance.com or leonardo@oraclecompliance.com
Physical Address:	3 rd Floor, 34 Whiteley Boulevard, Melrose Arch, Birnam, Johannesburg, 2196

- The complaint must contain all relevant information relating to the case and all attachments thereto.
- The Compliance Officer must acknowledge receipt of your complaint in writing to you within 1 business day as stipulated below.
- The Complaint must be recorded into a “complaints register” at Digicall and all relevant facts and supporting documentation must be kept on record too.
- The complaint will receive reasonable consideration within proper management controls.
- A decision will be communicated to the client within **6 weeks** and full written explanation provided with reasons should the outcome not be favorable to the client.
- Should the decision be in the clients favor appropriate measures of redress will be provided to client without further delay.
- The complaint must be resolved **within six (6) weeks of receipt**.

5.1.3. Ombudsman / Regulator

Should you not be entirely satisfied with the resolution of the complaint you may now complain to the Ombud for Financial Services Providers within **6 months** whose particulars are provided below. The Office of the Ombud will not investigate a complaint unless it has been lodged with the Compliance Officer of the Financial Services Provider first.

Ombud Contact Details

FAIS Ombud

Telephone:	012 762 5000
Sharecall:	086 066 3274
E-mail Address:	info@faisombud.co.za
Website:	www.faisombud.co.za
Physical Address:	Menlyn Central Office Building, 125 Dallas Avenue, Waterkloof Glen, Pretoria 0010
Postal Address:	FAIS Ombud, P.O. Box 41, Menlyn Park, 0063

National Financial Ombud Scheme

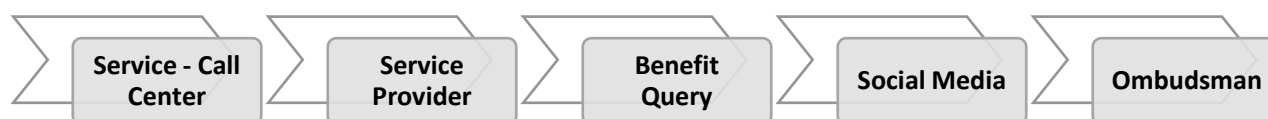
Telephone:	0860 800 900
WhatsApp:	+27 (0) 66 473 0157
E-mail Address:	info@nfosa.co.za
Website:	www.nfosa.co.za
Physical Address:	110 Oxford Rd, Houghton Estate, Johannesburg, Gauteng, 2198

5.2. Recording Complaints

- Regardless of where the complaint is received from, all reportable complaints must be recorded on the complaints management system and assigned appropriately.
- All written and oral interaction in connection with the complaint must be recorded on the complaints management system.
- One central control point means that all complaints are in one centralized place and can be extracted easily.
- The end conclusion, or determination (the 'finding' or 'outcome') must be confirmed on the complaints management system.

NB: All complaint responses (written) must reflect the complaint number as issued by the complaints management system.

5.3. General Hierarchy of Complaints – Types of Complaints (1 – 5)



5.3.1. Complaints procedures per type

Complaints are ranked as described under the 'general complaints hierarchy' with type 1 being an initial enquiry or a relatively easy complaint to a type 5 being an ombudsman (or regulator) complaint. The 'type' will dictate the complexity of a complaint or seriousness and therefore a type 5 complaint will be the most complicated or problematic.

5.3.1.1. Type 1 & 2 – Procedure

Service – Call Center and/or Contractor/Service Provider

- Client writes (via email or letter) or calls into to Digicall complaining.
 - Complaint is logged into the complaints management system and assigned to the relevant Group Complaints Specialist for investigation and then referred it to the relevant business unit for relevant information, Call Center management or Procurement management.
 - The complaint is allocated to a Complaints Specialist.
 - The complaint is acknowledged by the Complaints Specialist **within 1 business day** and thereafter resolved or investigated further.
 - A response is sent where necessary – a phone call or reply via email with detailed summary may be all that is required to resolve this type of matter.
 - The complaints management system is updated with ongoing feedback on the investigation of the complaint.
 - Complaint is resolved/closed on the complaints management system.

Note: if the matter is merely a query, then this will also be dealt with telephonically or on email and will be captured onto the complaints management system as a query.

5.3.1.2. Type 3 – Procedure

Benefit Query:

- Client writes (via email or letter) or calls into Digicall complaining. CSI feedback:
 - Benefit Query is logged onto the complaints management system, which is assigned to a Complaints Specialist for investigation, and if identified as a benefit query referred to the corporate client to address the policy benefit with the client.
 - The complaint is allocated to Complaints Specialist.
 - The complaint is acknowledged by the Complaints Specialist **within 1 business day** and thereafter resolved or investigated further
 - A response is sent where necessary.
 - A phone call or reply via email with detailed summary may be all that is required to resolve this type of matter.
 - The complaints management system is updated with ongoing feedback on the investigation of the complaint.
 - Complaint is resolved/closed on the complaints management system.

5.3.1.3. Type 4 – Procedure

Hello Peter and Social Media.

- Client writes (via email or letter) or calls into Digicall complaining.
 - Complaint is logged onto the complaints management system which is assigned to a Complaints Specialist for investigation.
 - Hello Peter and Social Media complaints will be dealt with by the Complaints Specialist who is responsible for logging the complaints onto the complaints management system, as well as liaising.
 - with the division involved to acknowledge the complaint **within 2 hours** and respond with an update **within 4-6 hours**.
 - Regular updates over **a 24-hour period, no longer than 2 business days**.
 - The complaint is allocated to a Complaints Specialist.
 - The complaint is acknowledged within **1 business day** and thereafter resolved or investigated further.

- A response is sent where necessary – a phone call or reply via email with detailed summary may be all that is required to resolve this type of matter.
- The complaints management system is updated with ongoing feedback on the investigation of the complaint.
- Complaint is resolved/closed on the complaints management system.

5.3.1.4. Type 5 – Procedure

- Ombudsman/regulator complaints (eg. OSTI)
 - This should be the last option available to the complainant.
 - By this time, we should have a complete history of the client’s complaint where calls and any previous correspondence are readily available:
 - When a case is received from the ombudsman/regulator, it will be recorded onto the complaints management system and assigned to a Complaints Specialist for investigation.
 - Within **3-5 working days** final feedback must be provided.
 - If the above time is exceeded, relevant updates need to be provided to set expectations.
 - Comprehensive Incident Report to be completed.

5.3.2. Reportable Complaints

5.3.2.1. Categorisation of reportable complaints:

The organisation will categorise its complaints according to the categories below and will in addition include any other relevant categories unique to its product offering, business, and industry. This will allow for the appropriate recording, documentation, reporting and analysis of trends for the purpose of grouping complaints received by the FSP and appropriate formulation of responses and remediation processes. The complaints will be categorised in the following manner in accordance with the GCoC and in conformity with the product provisions of the FSP and business activities. These will be outlined in a register of complaints relating to:

- to the design of a financial product, financial service or related service, including the fees, premiums or other charges related to that financial product or financial service.
- to information provided to clients.
- to financial product or financial service performance.
- to a service to clients, including complaints relating to premium or investment contribution collection or lapsing of a financial product.
- to financial product accessibility, changes or switches, including complaints relating to redemptions of investments.
- to complaints handling
- to insurance risk claims, including non-payment of claims; and

These complaints will be handled by Digicall group or channelled to the relevant product supplier for investigation and feedback and the complainant will be informed accordingly. Digicall Group has no influence or contribution to any decision making around complaints escalated to the product supplier. The product supplier has full discretion to share responses in relation to these complaints.

Digicall group may take necessary action against any representative found guilty of such a complaint, this must be shared with the Product supplier and authorities where necessary.

5.3.2.2. Categorisation of reportable complaints:

The categorisation of complaints will also determine the nature of the risk and risk exposure of the FSP and inform the processes of risk management on an ongoing basis. The complaints will assist with data recording and compilation in compliance with the GCoC. The information obtained will be analysed and reported to the risk committee/executive management to allow for a holistic review of the process and to reduce the number of valid or reportable complaints received by the business. Digicall group will also conduct an audit of the repository of reportable complaints received to determine and ensure the accuracy, efficiency of the record keeping process which may include the following information extracted from the complaints register:

- number of complaints received.
- number of complaints upheld ie valid
- number of rejected complaints and reasons for the rejection ie invalid
- number of complaints escalated by complainants to the internal complaint’s escalation process.

- number of complaints referred to an ombud and their outcome.
- number and amounts of compensation payments made.
- number and amounts of goodwill payments made; and
- total number of complaints outstanding.
- recordings for telephonic conversations, and emails confirming electronic communication.
- Where complaints were received in hard copy, such evidence must be scanned and saved to cloud.

5.4. In Summary

- If a client wants to lodge a fresh/new complaint, this must be logged and allocated to a Complaints Specialist.
 - Should a complaint reside within more than one area, both areas will work the complaint simultaneously and the Complaints Specialist will compile one response.
 - Any complaint received must be identified per the Type (1 – 5);
 - Any history on the complaints management system must be accessible.
 - Each business unit: call center or service provider must be given first chance to resolve the matter and provide their feedback to compile final feedback to the complainant.
 - Any comeback must be escalated as per the stipulated escalation process.
 - Delays in responding will not be tolerated.
 - Timely execution of all investigations is expected.
 - Detailed and clear responses to every complainant is expected.
 - Objectivity is to be demonstrated, and decisions are to be made on fact;
 - Fairness principles and Treating Customers Fairly need to be applied at all times;
 - Due dates are to be adhered to all times.
 - Update to be provided to a complainant during the investigative process; at **least every 2 business days**.
 - If additional time is required to conclude an investigation, the complainant must be informed timeously.
 - For Type 4 & 5 complaints, a formal incident report is to be drafted.
 - All responses, information, calls etc. must be captured/loaded onto the complaints management system.
 - Reporting of complaints is vital and will aid root cause analysis and submission of data to business heads/shareholders.
 - Where gaps in processes are identified, this must be brought to the attention of the respective business heads/shareholders by way of a feedback report.
 - Issues raised by a complainant must be considered and considered when a response is being drafted;
 - Full complaints process/hierarchy should be accessible on our website.

6. Turn-around Times

6.1. Complaints Lodging

- All complaints received by the divisions must be logged within **1 business day of receipt** i.e.: Corporate Clients for Digicall / Hello Peter / Facebook.

6.2. Acknowledging Complaints

- An automated response is generated via email to the sender upon receipt of a complaint which advises the sender to expect an update within **2 business days**.
- All complaints logged must be acknowledged in writing or telephonically **within 1 business day** of being logged.

6.3. Investigating Complaints

- During the investigation phase of the complaint all correspondence or evidence received must be attached in the complaints management system. This will ensure that all documents or correspondence received or sent remains on the system for future reference.

6.4. Resolving/Closing Complaints

- The current turn-around-time on resolution is **3-5 business days to resolve** a complaint.
 - Should we be unable to resolve the client's complaint **within the 3-5 business days** we will communicate by an email or telephone call to the client informing him/her on the reason for delay at least **every 2 business days**.
 - Should we not resolve the client's complaint within 15 days maximum, we will communicate with an email or telephone call to the client informing him/her on the reason for delay.
 - Once a complaint is resolved we must communicate resolution in writing or telephonically to the client and then resolve/close the complaint on the complaints management system.

6.5. Responsibility for Responding to Complaint

- Contracted services – Service Providers
 - In-house and external contract complaints are assigned to a Complaints Specialist for investigation.
 - Contact the service provider twice daily within **2 business days**.
 - If no response is received, the complaint is escalated to the contract/procurement manager to resolve with the contractor **within 1 business day**.
 - It is the responsibility of the contract/procurement manager to receive and handle these escalated service complaints and provide their feedback to a Complaints Specialist who will compile final feedback for the complainant.
- Non-contracted services – Call Center
 - These complaints are assigned to a Complaints Specialist for investigation.
 - Contact the Call Centre Management team twice daily **within 2 business days**.
 - If no response is received, the complaint is escalated to the Operations Manager to resolve with the call center **within 1 business day**.
 - It is the responsibility of the Operations Manager to receive and handle these escalated service complaints and provide feedback to Complaints Specialist who will compile final feedback to the complainant.

7. Analysis and Tracking of Complaints

- All complaints must be categorized and ranked correctly within the complaints management system, to allow for further analysis and decisions to eradicate certain complaints within the control of Digicall. Where complaints result from actions taken by a Service Provider, such analysis with recommendations may be shared with the Service Provider for their review and change.
- The complaints management system reports should differentiate the complaints resolved within timelines from those that exceeded the timeline. Where complaints exceed the timeline for resolution such complaints must include feedback on the actual cause for the delay in the resolution.
- Management must monitor the complaints management system monthly reports to identify any trends in complaints reporting.
- Complaints should be measured and tracked monthly by business metrics set, for instance number of valid complaints vs incidents-, sales- or calls recorded. Management must determine thresholds for each department and monitor performance against these thresholds.
- A summary of complaints, trends identified, and any other significant matters must be reported to the Risk Committee/Board/KI on a regular basis.
- Any complaint lodged through a client, or the ombudsman must be tracked, documented, and stored for safe keeping in line with legislation to ensure that such complaint can allow Digicall to implement further processes to alleviate such complaints in future. Such complaints are to be reported to the Risk Committee/Board/KI as and when it is lodged in the complaints management system. Subsequent progress with regard to the resolution of the complaint is to be communicated on a regular basis.

8. Engagement and Reporting to Authorities

Digicall will ensure compliance with any prescribed requirements for reporting information relating to complaints to any relevant designated authority or to the public as may be required.

- All written communication during the complaint's resolution process must include the details of the financial services Ombudsman.
- Digicall personnel dealing with the client complaint calls will ensure to provide the complainant with details of the financial services ombudsman. This can also be provided in follow-up emails to complainants.
- In the event the complaint has been attended to on behalf of a Product Supplier, the relationship between Digicall and the Product Supplier must be shared with the complainant.
- The Complaints manager will adhere to honest and reasonable communication with the Ombudsman, ensure they cooperate with the Ombudsman, product supplier and client. This includes acting fairly, and without prejudice when dealing with complaints, to avoid delays in the process or the outcome of the complaint. Digicall will endeavor to resolve a complaint before a final determination or ruling is made by an ombud, or through its internal escalation process, without impeding or unduly delaying a complainant's access to an ombud.
- The decisions of the Ombudsman are binding on the FSP/product supplier but not the complainant.
- The Ombudsman decisions may be based on law or equity.
- The service of the Ombudsman is free to insured people.
- The Ombudsman does not provide legal advice.
- Where a report or analysis was provided by the Ombudsman, Digicall will ensure that findings and suggestions are implemented in the business process as required.

9. Review Process

This policy and compliance there to, will be reviewed internally at such intervals as required depending on the changes or requirements within the group which will be reviewed by Management. Whenever changes are made to this policy the final draft will be shared with the KI for review and approval before publication. Policy review will be undertaken by the risk and compliance department.