



## COMPLAINT HANDLING POLICY

### Our Commitment

Emirates Insurance Company is committed to providing a high standard of client service and to maintaining our reputation for honesty and integrity. Our objective is to deliver a consistent, high-quality and accountable response to complaints across Emirates Insurance Company.

We believe that complaint resolution is important and it is incumbent upon us to respond to complaints promptly, accurately and with the utmost courtesy. We will provide our stakeholders with accessible means with which to communicate their complaint and will employ our best efforts to respond and resolve these complaints where possible. All complaints and personal information collected will be handled in a timely, professional and confidential manner.

### 1. Purpose

The purpose of this policy is to provide any stakeholder of Emirates Insurance Company with a clear policy on how to lodge a complaint with the company and what to expect from the company once the complaint has been lodged.

Further to the above, this policy is designed to:

- Recognize, promote and protect stakeholders' rights, including the right to comment and complain.
- Provide an efficient, fair and accessible mechanism for resolving stakeholder complaints.
- Provide information to stakeholders on the company's handling process.
- Monitor complaints in an endeavor to improve the quality of products and services.
- Increase the level of customer satisfaction with the delivery of services.
- Provide transparency.

### 2. Scope

- Identify & Register: ensure that all complaints are captured by the organization and classified for escalation, review and action as required.
- Training: complaint management training to be conducted for all Emirates Insurance Company staff to ensure awareness and adherence to the complaint management procedure.
- Complaints Champion: departments to nominate a complaint champion who will be the point of contact for internal updates and follow up.
- Reporting: monthly dashboard.
- Review & Remediation: monthly complaint review meeting to review, discuss and monitor remediation plan.
- This policy is effective for Insurance as well as Investor complaints and information.

### 3. Whistleblowing

Emirates Insurance Company has a separate Whistleblowing Policy. The CONFIDENTIAL REPORTING POLICY CGP-06 has been developed to deal with Whistle Blowing reporting process.

### 4. Definitions

**Complaint** means:

- i. A genuine expression of dissatisfaction or concern regarding the company's services or the complaints handling process itself, made to the company by, or on behalf of:
  - a customer;
  - a broker;
  - third party claimant;
  - a group or member of the public;
  - the regulator or any government department.
- ii. Any issue raised by a Customer/ Broker is treated as a complaint by EIC. This includes any unreasonable long delay for the company or representative to deal with:
  - an official enquiry;
  - processing a policy;
  - delay in settlement of a claim; and
  - settling an amount different to what is expected from the policyholder.
- iii. A complaint about the behavior or conduct of an employee.
- iv. A dispute regarding the assessment of liability (i.e. fault) with respect to a claim.

**Complainant** means the person or organization making the complaint.

**Claimant** means a person who has a claim with the Company.

**Dispute** means a customer's formal disagreement leading to some type of internal or external review or determination.

**Organization** means a company, firm, enterprise or association, or part thereof, whether incorporated or not, public or private, that has its own function(s) and administration.

### 5. Commitment

We are committed to efficient and effective complaints management. Our commitment involves:

- all levels of the Company, particularly the organization's Executive Committee;
- encouraging an organizational culture that welcomes complaints as an opportunity to improve services;
- the adoption and dissemination of this policy – 'Complaints Handling Policy'; and
- reporting information about complaints management in our Annual Report, including the number of complaints received, the amount of time taken to resolve the complaints and service improvements made because of the complaints received.

## 6. Fairness

We recognize the need to be fair to both the complainant and the Company or employee against whom the complaint is made.

If a stakeholder complains, we will:

- treat the complainant with discretion, courtesy and fairness at all times;
- maintain appropriate confidentiality of the complaint at all times;
- not victimize or harass the complainant as a result of any complaint he/she makes against us;
- not discriminate against the complainant because of any disability, his/her color, race, religion, age or sex.

We will provide a response to the complainant and inform the complainant of our decision and the reasons for that decision.

## 7. Complaints About Employees

If you have a complaint about one of our employees, please lodge your complaint against 'person' on the Complaint Form if you are completing it online. If you are lodging your complaint in another way (e.g. phone call, letter, fax) please address it to, or ask to speak to, the Human Resources Department. If you do not know the employee's full name, please provide their first name, department and mobile number if you know it.

All complaints about employees are referred on to the relevant Manager. Where and when appropriate, the employee will be:

- given the opportunity to comment;
- informed of the final resolution/decision and the reason for that decision;
- provided with a copy of the final reply to the complainant; and
- provided appropriate training and/or counselling.

## 8. Access to the complaints process

A person wishing to make a complaint may do so in person, by telephone, by letter, by e-mail or via our website by completing a 'Complaint Form'.

A complaint may be made to the Compliance Officer (as detailed below) – in person, by phone, email, or in writing.

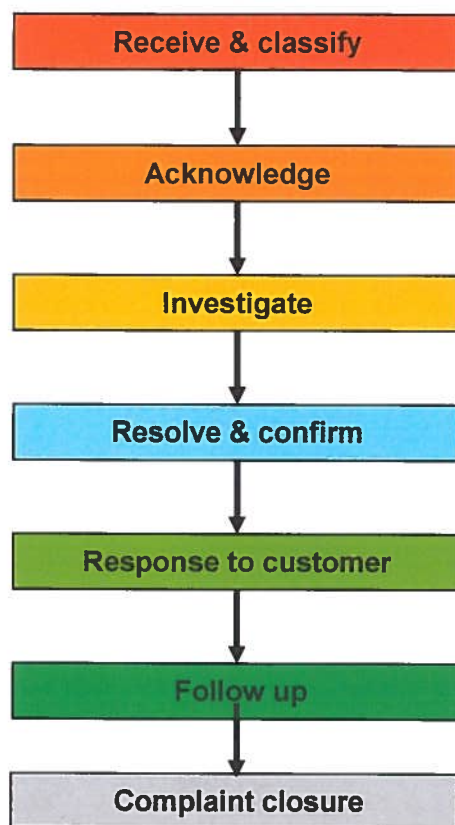
Verbal complaints will be documented immediately by the employee who receives the complaint with a complete description of the complaint via email on the contact center mailbox – [contactcenter@eminsco.com](mailto:contactcenter@eminsco.com) along with the Complaint Champion marked on it. Also, attach any associated correspondence that has been received (e.g letter or email).

Where a complaint is made in person at the Company, we will respect that the customer may wish to make the complaint in a private area where he/she may feel more comfortable.

Complaints are best made to the member of staff with whom the customer has been dealing. They can, however, be directed to the Compliance Officer.

## 9. Process Overview

The following key steps are to be adhered to for complaints received at Emirates Insurance Company.



The requirements for each of these steps is detailed below

### A. Receive and classify

- Any issue or negative customer interaction (whether this is formally logged by the customer or not), must be logged and classified for action.
- Email to be sent to the contact center at [contactcenter@eminsco.com](mailto:contactcenter@eminsco.com) with a copy to customer service champion [rmathias@eminsco.com](mailto:rmathias@eminsco.com).
- All complaints must be formally logged in complaint management online tool (Premia) by customer service.

All complaints must be prioritized as follows:

**Priority 1** – urgent, potential high business impact. The SLA requires a response to the customer within 1 working days.

- This should be used (sparingly) for major issues where the customer may hold a large portfolio/ A category broker, or any customer who is considering moving their business. HNW client, or major claim or complaint related to any fraudulent activity.
- All Priority 1 complaints must be escalated immediately to the Department Manager / Pillar Head.

- Also, this could be used in a situation where the customer may be able to influence or make public statements that would impact upon the Company's brand or reputation.

**Priority 2** – All other business. The SLA requires a response to the customer within 2 working days.

- This should be used for most complaints with individual customers, as this allows a reasonable time to collect information and produce a balanced response.
- Discretion and flexibility should be exercised in prioritizing all complaints.
- The staff member logging the complaint should review the complaint and its priority with the line manager before proceeding to the next step.
- Respective department manager will decide on the appropriate person(s) to carry out subsequent steps, including the investigation.

#### **B. Acknowledge**

- Ensure that every complaint receives a formal written acknowledgement, containing an expectation of when they will receive a response and the person dealing with it.
- All complaints, regardless of priority, should receive an acknowledgement on the day of receipt.

#### **C. Investigate**

- Follow up all aspects of the complaint, both internal and external, to ensure that the key facts are identified and clarified.
- All areas of interaction and communication should be established (who, what, where, when, why etc.) and documented where possible.

#### **D. Resolve & Confirm**

- Ensure that the final resolution is clear and fair. Also confirm the proposed action and resolution with Department Manager / Pillar Head for Priority 1 complaints.
- Ensure that the proposed resolution meets corporate guidelines and does not prejudice Emirates Insurance Company in any unnecessary legal or financial manner.
- Document the proposed action and discuss and agree with the Pillar head.
- Discuss and review the solution from both Emirates Insurance Company and the complainant viewpoint to ensure fairness and clarity.
- The review should include recognition and documentation of any underlying issues that have contributed to the complaint and recommendations for actions to prevent further occurrence.
- Remedies

We will endeavor to resolve all complaints received as fairly as possible and in a timely manner. Some of the remedies that we may use to help resolve complaints include:

- **Rectify Mistakes**  
Where we have made a mistake, taken too long to follow up a matter, or simply overlooked a matter, we will take immediate action to rectify the mistake or situation as soon as practicable.
- **Root Cause Analysis (RCA)**  
For every complaint received, EIC would undertake an RCA to understand the cause and also the trend of a complaint. This is to identify the problem at the concerned department level and address the same at the root of the complaint at hand.

- **Employee Training and Counselling**

Where a complaint is made about an employee, whether it is about the employee's general manner or about the employee providing wrong information and after investigation if we consider the complaint is justified, the employee will be provided with training and/or counselling.

- **Referral**

As outlined in this Complaints Policy, if a complaint cannot be resolved by us, the complainant will be referred to the Insurance Authority (IA). For any complaints received on the Insurance Authority website; the feedback is shared with the responsible department and a resolution is updated on the website. Based on the resolution provided; the Insurance Authority updates the responsible department and closes the complaints.

- This should then be reviewed as part of the Monthly Complaint Review Meeting.

#### **E. Response to Customer/Complainant**

- Provide the customer with the resolution within the timescales promised.
- The details of the findings and proposed resolution should be clearly explained (in written or verbal form as appropriate) to the customer within the agreed timescales.
- If this cannot be done on time, the customer should be contacted by telephone to request further time/ update IA website for complaints received via IA.

#### **F. Follow up**

- Ensure that complaints are followed up to confirm that customers are satisfied with the response given.
- Outbound calls to be made by the department managers to customers on a monthly basis.
- All Priority 1 complaints and 50% of Priority 2 complaints must be followed up within a month.
- The follow up should identify the following:
  1. Is the customer satisfied with the response?
  2. Did they feel that their complaint was properly and fairly handled?
- Any negative responses to these questions should be referred to the COO for action and direct follow up with customers.

#### **G. Closure**

- Complaint closure email to be sent to all customers (ref closure email template)
- Ensure that the organization is aware of complaints and any underlying issues.
- Preventive actions taken at monthly meetings.
- All complaints should be reviewed monthly as part of the review meetings.
- Any complaints where action can be taken to avoid recurrence must be acted upon and raised with the responsible managers/teams across the organization.



## Complaint logging: key details required

▪ Raised by	▪ Emirates Insurance Company staff member receiving and logging the complaint
▪ Date /channel	▪ Date and time received via customer call/email/walk in/IA
▪ Priority	▪ Priority 1/2
▪ Customer Name	▪ Customer Name
▪ Customer Address/contact	▪ Emirate/mobile & email
▪ Policy / Claim details	▪ Customer's policy/ claim number
▪ Product or service referred to	▪ Nature of complaint
▪ Description	▪ Detailed description of complaint
▪ Business Impact	▪ Description of impact on customers' business/operation

**10. Responsible departments**

All insurance related enquiries and complaints will be handled by the Customer Service Department while the Investor Relationship Officer will handle any Investor enquiry or complaint.

**11. Storage of complaint records**

Records of all complaints will be retained in our Complaints System, both for reasons for confidentiality and for monitoring and evaluation purposes. For example, complaints received from claimants will not be kept on the Claims File, instead they will be retained in the Complaints System. Access to the complaints records will be restricted to authorized staff.

## 12. Enquiries

Please direct enquiries about the Complaints Policy to:

Customer Service  
Rubaina Daruwalla  
Emirates Insurance Company  
P.O. Box 3856  
Abu Dhabi

Tel No: +9712644 0400  
Fax No: +9712644 5227  
Email: [contactcenter@eminsco.com](mailto:contactcenter@eminsco.com)

Compliance and Investor Relationship Officer  
Mazen Tarmoom  
Emirates Insurance Company  
P.O. Box 3856  
Abu Dhabi

Tel No: +971 26981 664  
Email: [mtarmoom@eminsco.com](mailto:mtarmoom@eminsco.com)

## 13. Review

The Complaints Policy will be reviewed at regular intervals to ensure it meets the needs of the Company and its customers.

Approved by



Chief Executive Officer



Chief Operating Officer



Chief Financial Officer