

Futurewise Education (Pty) Ltd "Futurewise Education"

Complaints Resolution Policy

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1. Introduction

Futurewise Education (Pty) Ltd ("Futurewise", "we" or "our") are authorised financial services providers ("FSP") in terms of the Financial Advisory and Intermediary Services ("FAIS") Act and we therefore have a responsibility to treat all clients fairly with honesty and integrity.

We are committed to a high service standard, rendering financial services with integrity, the speedy resolve of complaints and the overall improvement of processes even in the instance where a complaint may be viewed as 'invalid' in terms of the relevant policy wording.

In this regard, we consider all complaints as valuable feedback that requires addressing in a meaningful manner.

Important and guiding material/bodies applicable to this Complaints Management Framework include all six Treating Customers Fairly (TCF) Outcomes, the Financial Sector Conduct Authority (FSCA) and the Policyholder Protection Rules (PPR). A copy of this document is available for viewing and download on our website.

2. Objective

The objective of the Complaints Management Framework is to formalize the process in which dissatisfaction is lodged, acknowledged, investigated, resolved, and leads to overall improvement/s.

Fundamental to the successful operation of Futurewise, we ensure that all core team members, call center agents and representatives receive extensive training in this regard, that the Complaints Management Framework is made easily accessible to all policyholders and that this document is continuously reassessed by senior management, so that overall improvement/s are actioned as a consequence of feedback received from policyholders.

It is noted that Treating Customers Fairly Outcomes ("TCF outcomes") as well as Policyholder Protection Rules, ("PPR") especially with regards to complaints, form part of our core team member's annual performance evaluation report, which is to be completed prior to any potential salary increase and/or promotion.

3. The Definition of a Complaint

A Complaint as defined in terms of PPR means, an expression of dissatisfaction by a person to an insurer or, to the knowledge of the insurer, to the insurer's service provider relating to a policy or service provided or offered by that insurer which indicates or alleges, regardless of whether such an expression of dissatisfaction is submitted together with or in relation to a policyholder query, that -



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

All complaints lodged with the Ombudsman/ FAIS/ FSCA are to be dealt with by Guardrisk exclusively.

All documents and information relating to such a complaint, must be sent to Guardrisk within 24 (twenty-four) hours of receipt of the complaint.

Please note that there is no service fee charged for the registering of a complaint.

The Treating Customers Fairly (TCF) Outcomes include:

- That customers need to feel confident that TCF is central to our culture;
- That products are designed, marketed and sold to the right customer, meeting their required needs;
- That customers receive clear information that is timely and relevant to them;
- That customers receive suitable product/sales advice that takes their personal circumstances into account;
- That our products and services perform as expected and that the service is of an acceptable standard;
- That there are no unreasonable barriers for customers to change or switch products.

4. The definition of a Complainant – who may complain?

A complainant is a person who has a direct interest in the policy/service or someone acting on behalf of a person with a direct interest in the policy/service. For example: a policyholder/person that pays a premium, his/ her beneficiary, a policyholder's spouse or registered dependents, a potential policyholder whose satisfaction relates to the relevant application, approach, solicitation, advertising or marketing material.

5. Outcomes of a Complaint



- 1. **Rejected:** means a complainant's complaint which was rejected, and we regard the complaint as been finalised after having advised the complainant that we do not intend to take any further action. A formal repudiation letter with all the complaint details will be sent to the complainant. Please note that there are 2 (two) variations of a rejected complaint:
 - a) Invalid: which mean the complainant does not accept or respond to proposals to resolve the complaint within 7 (seven) days. This includes sending relevant documentation, acting upon our advice as well as not being able to reach the complainant via telephone and/or e-mail;
 - b) Unjustified: which means the policy has been met, the complainant has been treated fairly as far as possible, there is no legal leg to stand on to assist the complainant, complainant refuses to accept outcome of the merit assessment and nothing further can be done to assist the complainant.
- 2. Upheld: means your complaint was successful, either:
 - a) **Wholly,** which means the outcome was rendered in favor of the complainant and the complainant received exactly what he/she was looking for; or
 - b) **Partially,** which means both the complainant and Futurewise were able to find a mutual resolution in respect to the compalint.

There are 2 (two) variations of a 'wholly' or an 'partial' complaint:

- a) **Compensation Payment:** which means to compensate a successful complainant for a proven financial loss incurred as a result of our wrongdoing, a payment which is either:
 - i. Contractually due: which means the complainant should have received the assistance and help from us from the start, therefore rendering it a justified complaint;



- ii. Not contractually due: which means the complainant does not have a legal standing or a legal argument, however, due to the poor handling of the complaint by us, in the form of negligence, we would, for example refund the complainant his/her premiums and cancel the complaint.
- b) **Goodwill Payment:** which means the complainant is not covered in terms of the policy, but we are willing and able to assist the complainant due to extraordinary circumstances, which we will determined in our sole discretion.

6. The Category/Categories of Complaints

- a. The design of a policy or related service;
- b. Information provided to the policyholders or lack of information and feedback provided to a policyholder;
- c. Advice provided by the sales representative;
- d. Policy performance and/or servicing including negligence;
- e. Admin services such as premium collection;
- f. Policy accessibility, ability to change or switch;
- g. The handling of a complainant's complaint, which not in accordance with this policy;
- h. Complaints relating to insurance claims, such as a rejection of a merit assessment for litigation (in-Court) cover;
- i. Other complaints.

7. The process to lodge a complaint:

Futurewise Education Pty Ltd Complaints Officer: Thato Ramashala

Email: info@futurewise.co.za

Contact: 0800 388883

We have the following processes in place when attending to a complaint:

1) When logging a complaint online via our platform, please ensure that you include all the relevant information for a speedy resolution; this includes your case or product details, any supporting documents and the relevant dates/times relevant to your dissatisfaction. The reason for your



- dissatisfaction must be clear in order for our team to investigate your complaint diligently.
- 2) You may also send your complaint directly via our website www.futurewise.co.za, alternatively, you may lodge a complaint telephonically by calling our dedicated customer service line on: 0800 388883 and speaking to our Complaints Officer: Thato Ramashala
- 3) Please note that complaints logged using a telephone voice recording will be reduced to writing by the officer assigned to attend to your complaint;
- 4) Regardless of the method chosen to lodge a complaint, you will receive an immediate email after logging your complaint on our platform which will confirm:
 - a) That your complaint has been received;
 - b) A summary of the details of the complaint; and
 - c) The direct email address to be used to follow-up on your complaint.

8. The Internal Complaints Handling Process

- 1) Should you choose to lodge your complaint via our dedicated customer service line, the person dealing with your complaint ("handler") will introduce him/herself and:
- 2) Ask you what your preferred outcome of the complaint would be? We ask that you please refer to the Outcomes of a Complaint mentioned in section 5 above, but do not be discouraged by the terminology, as the person dealing with your complaint will listen to whatever reason you have for your dissatisfaction:
- 3) Answer any and all questions to the best of his/her ability;
- 4) Request your availability/preferred times for follow-up calls and preferred communications medium for feedback, whether by e-mail or phone call;
- 5) Advise you to kindly expect feedback within 7 (seven) days, alternatively 3 (three) days where time is of the essence, such as where a court date is involved, or as soon as reasonably possible;
- 6) Inform you that our claims reporting and handling process will commence immediately, and the handler will undertake to diarise the file for the periods outlined in paragraph v above in order to provide feedback to you;
- 7) It is important that you co-operate by providing copies of all relevant evidence and correspondence as requested by the handler;



- 8) Should the matter remain unresolved after either 3 (three) or 7 (seven) days (as applicable) and feedback has been provided to you by the handler, then our claims handling team will continue to provide you with feedback for as long as the complaint(s) remains unresolved. s;
- 9) You may escalate the matter on our platform or via a telephone call where the handler did not attend to your complaint as per the timeless indicated in paragraph v, vi or vii above. We kindly request that you follow the same steps as set out in section 7 above and advise the representative that you wish to escalate the matter:
- 10) Should the matter be rejected as an Outcome of the Complaint as set out in section 5 above, you will then be provided with all the reference numbers/information and contact numbers of the relevant Ombud and/or Regulatory Body, should you elect to take the matter further.

9. Complaints Escalation and Review Process

a. Referral to Guardrisk Life:

In the event that your matter/complaint is rejected and you wish to escalate the matter, you may contact Guardrisk directly or the matter may be escalated on your behalf:

Guardrisk Life

Tel: 0860 333 361

Email: complaints@guardrisk.co.za
Address: 129 Rivonia Road, Sandton, 2196
Postal Address: PO Box 786015, Sandton, 2146

b. Referral to the Ombuds Man:

Should your complaint be against us or Guardrisk, please lodge your complaint with the relevant Ombudsman.

When the complaint is pertaining to a Long-term (life) product; the matter will then be referred to the **Ombud for Long-Term Insurance**. The procedure for lodging a complaint may be found on the website for the Ombud for Long-term Insurance (**www.ombud.co.za**) or you may obtain it directly from the Ombud at the following contact details:

 Tel:
 (021) 657 5000

 Share call:
 0860 103 236

 E-mail address:
 info@ombud.co.za

Address: 3rd Floor Sunclare Building, 21 Dreyer Street,

Claremont, Cape Town, 7700

Postal Address: Private Bag X45, Claremont, 7735

c. Referral to Financial Services Conduct Authority (FSCA):



Should you have a complaint against an/the intermediary (e.g. a broker/sales person selling you the product) the complaint may be lodged with the FSCA online via www.fsca.co.za/Pages/Contact-Us

d. Referral to the FAIS Ombud:

If a complaint hasn't been resolved within the stipulated time frames or where the complaint has been dismissed or where you are not satisfied with the results of the investigation into your complaint, you may (within 6 months of such feedback from the FSP) refer your complaint to the FAIS Ombud.

A complaint form needs to be completed, which can be downloaded from the FAIS Ombud's website (**www.faisombud.co.za**). The complaints registration form is also available from the FAIS Ombud at the following contact numbers:

Telephone: (012) 762 5000 / (012) 470 9080

E-mail address: info@faisombud.co.za

Address: Sussex Office Park; Ground Floor, Block B;

473 Lynnwood Road Cnr Lynnwood Road &

Sussex Ave, Lynnwood, 0081

Postal address: PO Box 74571, Lynnwood Ridge, 0040