

KEY INSURANCE COMPANY LIMITED COMPLAINTS MANAGEMENT POLICY

Key Insurance Company Limited has established an appropriate and effective set of procedures that will endeavour to treat any complaint fairly, objectively, and expeditiously. Our dedicated team is available to listen and respond expeditiously to expressions of dissatisfaction of all our customers.

The Company prides itself in delivering high levels of customer satisfaction for its products and services. Consequently, it will address all complaints in a professional manner and ensure that our products and services attain and exceed the expectations of our clients. In line with our beliefs, we have a clear and concise complaint handling process, which aims to:

- Treat each complaint with the highest level of professionalism
- Maintain our status at the helm of the General Insurance Industry
- Help us learn from our mistakes
- Preserve our good relationships with current and potential clients

Our clients include but are not limited to:

- Insureds
- Intermediaries
- Competing Insurers
- Attorneys-at-Law
- Repairers
- Assessors & Adjusters
- Investigators
- Wrecking Companies

STEPS FOR HANDLING COMPLAINTS

Step 1.

Complaints are referred to the Supervisor of the Department that it concerns. The Supervisor is expected to investigate the complaint within 24 hours and contact the client within 36 hours (excluding the weekend). A notation of the findings and the action taken must be made in the complaint section of 4D.

The following information is required to log the complaint

- 1. The name of the complainant
- 2. The date the complaint was lodged
- 3. The date the complaint was received in Office (if written)

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Board Chairman: Donald Wehby



- 4. The Nature of the complaint
- 5. The person who received the complaint
- 6. Internal action Taken
- 7. Date the complaint is resolved

NB. If a complaint is made via telephone, the complainant should be encouraged to make the complaint in writing for recording and handling purposes.

Step 2.

How to log the Complaints in 4D

- Go into the claims/policy on which the complaint is to be placed
- Go into Activities at the bottom of the screen and then choose Follow Up
- When you get to the follow up screen press arrow at the type of Follow Up and choose the type of complaint (verbal or formal complaint)
- Give a summary of what the complaint is about, and the steps taken and or intended to be taken to address the complaint.
- Enter action notes with efforts taken to resolve the complaint
- When the complaint has been fully addressed, indicate how same was resolved and click completed on the follow up.

Step 3.

- I. If the client is still not satisfied, the Manager of the Department must be advised of the complaint and the steps taken to date. The Manager must contact the client within 24hrs of notification of the complaint. If further investigations are required these must be undertaken and a decision communicated to the client. A notation of the findings and the action taken must be made in the complaint section of 4D.
- II. If the client remains dissatisfied the matter should be brought to the attention of the General Manager who will then make contact with the client within 24 hours of the matter being referred. A decision must then be communicated to the client within 24 hours of the matter being referred to the GM.

Further Recommendations/Options

In the event the complainant is not satisfied with the final response they have the option to take the matter further by using any of the following options:

- The IAJ Claims Arbitration Process
- FSC Complaints Unit
- Arbitration
- Mediation/Court



Timing

Complaints will inevitably be varied depending on the nature and complexity. With this in mind, the time taken to handle a particular case may vary. We do however endeavour to respond within the timelines mentioned above.

Complaint Officers Manager – Claims & Legal Legal Officer