



# Dispute Resolution and Complaints Handling Policy

## Purpose

This policy will explain what IPS Insurance Brokers Pty Ltd ("IPS Insurance Brokers") must do to have an internal dispute resolution (IDR) system in place that meets ASIC's standards and requirements.

In accordance with RG 271 *Internal dispute resolution*, AS/NZS 10002-2014 and the National Insurance Brokers Association of Australia (NIBA) Insurance Brokers Code of Practice (the Code, the Licensee's complaint handling procedure reflects the following standards:

- Commitment and culture
- Enabling complaints
- Resourcing
- Responsiveness
- Objectivity and fairness
- Policy and procedures
- Data collection, analysis and internal reporting
- Continuous improvement
- Comply with the IDR reporting framework

Consumer and small business access to fair, timely and effective dispute resolution is an essential part of the financial services consumer protection framework. An effective IDR provides IPS Insurance Brokers the opportunity for redress to customers and small businesses.

## Scope

IPS Insurance Brokers must have a dispute resolution system that consists of:

- an internal dispute resolution (IDR) procedure that meets the standards or requirements made or approved by ASIC, and
- membership of the Australian Financial Complaints Authority (AFCA)

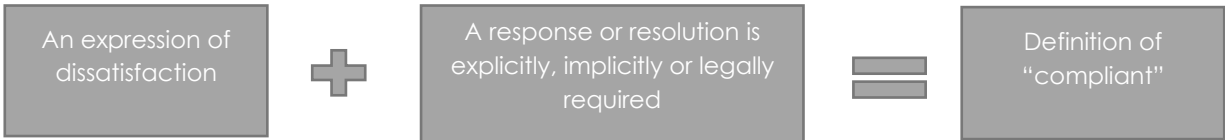


NOTE: a financial firm that outsources part, or all, of its IDR process remains responsible for ensuring the service providers' IDR process complies with the requirements of RG 271.

## Definitions

### What is a complaint?

An expression of dissatisfaction made to or about an organisation, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected or legally required.



The following expressions of dissatisfaction are complaints:

- posts on a social media channel or account owned or controlled by the financial firm that is the subject of the post, where the author is both identifiable and contactable,
- an objection to a proposed decision about how and to whom to pay a superannuation death benefit distribution,
- complaints about a matter that is the subject of an existing remediation program or about the remediation program itself (e.g. delays, lack of communication), and
- complaints about the handling of an insurance claim (e.g. excessive delays or unreasonable information requests).

### What is *not* a complaint?

For avoidance of doubt, ASIC does not consider the following to be 'complaints':

- (a) employment-related complaints raised by financial firm staff, and
- (b) comments made about a firm where a response is not expected, such as:
  - (i) feedback provided in surveys (if there is no indication on the survey that the business will respond to feedback), or
  - (ii) reports intended solely to bring a matter to a financial firm's attention—for example, that an email address was bouncing back as not available, or a telephone number was disconnected.

### Who is a Complainant?

The person who has made the complaint or to whom the complaint pertains to.

## How to Manage a Compliant

**Acknowledge the complaint** IPS Insurance Brokers should acknowledge receipt of each complaint promptly, within 24 hours (or one business day) of receiving it or as soon as practicable possible.

Complaints can be acknowledged verbally or in writing (email, post or social media channels). When responding, it is expected that IPS Insurance Brokers will take into account the method used

by the complainant to lodge their complaint and any preference they may have expressed about communication methods.

What an IDR response must contain

An IDR response must be a written communication from IPS Insurance Brokers to the complainant within 30 days, informing them of:

- The final outcome of their complaint at IDR (either confirmation of actions taken by the firm to fully resolve the complaint or reasons for rejection or partial rejection of the complaint);
- Their right to take the complaint to AFCA if they are not satisfied with the IDR response; and
- The contact details of AFCA.

Rejecting or partially rejecting the complaint

If IPS Insurance Brokers rejects or partially rejects the complaint, the IDR response must clearly set out the reasons for the decision by:

- Identifying and addressing the issues raised in the complaint,
- Setting out IPS Insurance Brokers findings on material questions of fact and referring to the information that supports those findings, and
- Providing enough detail for the complainant to understand the basis of the decision and to be fully informed when deciding whether to escalate the matter to AFCA or another forum.

Level of Detail in the IDR

The level of detail in an IDR response should reflect the complexity of the complaint and the nature and extent of any investigation conducted by IPS Insurance Brokers. It is not expected that IPS Insurance Brokers will provide information in an IDR response that would breach the company's privacy or legislative obligations (e.g. AML/CTF provisions)

Timeframe for providing an IDR

IPS Insurance Brokers must provide an IDR response to a complainant no later than **30 calendar days** after receiving the complaint.

There are many variables that can affect complaint response times, including complexity of the issue raised and the availability of information (including from third parties). However, it is considered that the pursuit of best practice should result in IPS Insurance Brokers regularly meeting or outperforming the maximum IDR timeframes.

Complaints management delays

IPS Insurance Brokers is not required to provide a complainant with an IDR response within the maximum IDR timeframe in the following circumstances:

- Resolution of the individual complaint is particularly complex. (For example, an individual complaint is about a transaction or event that occurred more than 6 years ago and requires reconstruction of account information)

- Circumstances beyond IPS Insurance Brokers' control are causing complaint management delays. For example:
  - the complainant is unable to respond to IPS Insurance Brokers due to illness or absence
  - information must be obtained from third parties to a complaint (excluding an authorised representative who is a party to the complaint)

IDR Delay  
Notification

If there is a delay, before the relevant maximum IDR timeframe expires IPS Insurance Brokers must give the complainant an 'IDR Delay Notification' that informs the complainant about:

- the reason for the delay,
- their right to complain to AFCA if they are dissatisfied, and
- the contact details for AFCA

Complaints  
closed within 5  
business days  
of receipt

IPS Insurance Brokers does not need to provide an IDR response to a complainant if IPS Insurance Brokers closes the complaint by the end of the fifth business day after receipt because it has:

- resolved the complaint to the complainant's satisfaction; or
- given the complainant an explanation and/or apology when IPS Insurance Brokers can take no further action to reasonably address the complaint

A written IDR response is still required for complaints closed within the fifth business day if:

- the complainant requests a written response; or
- the complaint is about:
  - hardship;
  - a declined insurance claim;
  - the value of an insurance claim; or
  - a decision of a superannuation trustee.

Determining  
whether the  
complaint has  
been  
satisfactorily  
resolved

When determining whether the complaint has been resolved to a complainant's satisfaction, it is expected that IPS Insurance Brokers will consider whether:


- the complainant has confirmed (verbally or in writing) that they are satisfied with the actions taken by IPS Insurance Brokers in response to the complaint or do not wish to take the matter further; or
- other circumstances exist that make it reasonable for IPS Insurance Brokers to form the view that the complaint has been resolved to the complainant's satisfaction.

## How to Manage Systemic Issues

IPS Insurance Brokers' Board must set clear accountabilities for complaints handling functions, including the management of systemic issues identified through consumer complaints. To manage systemic issues, IPS Insurance Brokers will:

- encourage and enable staff to escalate possible systemic issues they identify from individual complaints,
- regularly analyse complaints data sets to identify systemic issues,
- promptly escalate possible systemic issues to the appropriate areas within IPS Insurance Brokers for investigation and action, and
- report internally on the outcome of investigations, including actions taken, in a timely manner.

If an investigation confirms that a systemic issue exists, IPS Insurance Brokers must take prompt action to identify affected customers and provide fair remediation.

 NOTE: AFCA has a statutory responsibility to identify, refer and report systemic issues to a regulator where it considers there is a systemic issue arising from its consideration of a complaint. AFCA must report as soon as practicable – but no later than 15 days – after AFCA considers there is a systemic issue.

## Who is IPS Insurance Brokers' Nominated Complaints Manager?

Complaints are to be directed to Frank Cusmano immediately upon receipt. Frank Cusmano is expected to manage the complaint and handle all responses in accordance with the Complaints Management process outlined above.

## Enabling Complaints

IPS Insurance Brokers encourages complaints and make it easy for people to voice their concerns in the following ways:

1. Publicising how and where complaints may be made on customer accessible material including as their FSG and website
2. Providing complaints training to all staff, not just those who directly manage complaints, so that they are adequately equipped to identify, support and assist people who have a complaint
3. Offering multiple ways to lodge a complaint – including telephone, email, letter, social media, in person and online
4. Enabling authorised representatives of the Complainant (such as financial counsellors, legal representatives, family, friends and members of parliament) to lodge a complaint on their behalf (refer to RG 271.139 for further information)
5. Continuously review the effectiveness of IDR communications and process

6. Making the IDR process free of charge to the complainant, both in the process and any materials distributed to the complainant.

## **Record Keeping and Reporting**

All complaints must be captured and recorded by the Compliance Manager in Complaints Register maintained in the GRCPlus CRM (refer to Appendix A).

The following details must be recorded in the Complaints Register:

- the complainant's name;
- the date the complaint was received;
- the product or service complained about;
- brief details of the complaint;
- whether there is any evidence of a breach of the financial services laws or our licence;
- whether a complaint has been made to AFCA;
- whether there is a need to notify our PI insurer and whether this has been done;
- any action taken and decisions made (remedy, determination, result);
- the date the complaint was resolved;
- whether any training needs have been identified as a result of the complaint; and
- whether the complaint gives rise to a risk that should be included in our Risk Register.

The Responsible Person must ensure that information relating to complaints is properly recorded in the Complaints Register throughout the lifecycle of each complaint.

IPS Insurance Brokers has an obligation to report its IDR data to ASIC every six months on an ongoing basis. The data must cover the following reporting period and lodges to ASIC;

- Reporting period covering 1 January to 30 June and lodged to ASIC by 31 January; and
- Reporting period covering 1 July to 31 December and lodged to ASIC by 31 July.

IPS Insurance Brokers is required to provide ASIC with its IDR information in CSV format (refer to the [IDR Data Reporting Excel Template](#)). The [ASIC IDR data reporting handbook](#) includes practical guides (including how to collate, format and submit IDR data) and checklists developed to assist entities with their reporting requirements.

## **Related Laws and Regulations**

- *RG 267 Oversight of the Australian Financial Complaints Authority*
- *RG 271 Internal Dispute Resolution*
- IDR Data Reporting Handbook

- Australian Standard AS/NZS 10002:2014 Guidelines for complaint management in organizations (AS/NZS 10002:2014)
- s912A(1)(g) and 1017G(1) of the Corporations Act
- NIBA Insurance Brokers Code of Practice

### **Consultation processes**

This policy shall be updated, reviewed, or further developed in consultation with the stakeholders of the organisation on an annual basis.

The Responsible Manager is responsible for the operational controls outlined in this policy and for the coordination of the annual review of the policy.

### **Approvals**

This policy is approved for use by the Compliance Committee/Board and takes effect immediately.

# Appendix A – Complaints Register

The Compliance Manager is to record all complaints in accordance with the definition of a complaint as defined in this policy in the Complaints Register on the GRCPlus CRM.

The Complaints Register records all complaints as per IPS Insurance Brokers' obligations under the Corporations Act, ASIC Regulatory Guides, AFS licence conditions, and internal policies and procedures. This register is managed by the Compliance Manager and Responsible Manager.

## New Complaint

### Information

<p>* Complaint Title</p> <input type="text"/> <p>Complete this field.</p>	<p>* Licensee</p> <input type="text" value="Adams Financial Advisory"/>
<p>Representative</p> <input type="text" value="Search Contacts..."/>	<p>CAR</p> <input type="text" value="Search Accounts..."/>
<p>Report Date</p> <input type="text"/>	<p>Related to Support Request</p> <input type="text" value="Search Support Requests..."/>
	<p>Applicable Jurisdiction</p> <input type="text" value="Search Licensee Jurisdictions..."/>

### Complaint Log

<p>Name of Complainant</p> <input type="text"/>
<p>* Date Complaint Received</p> <input type="text" value="14/12/2022"/>
<p>Date Acknowledged</p> <input type="text"/>
<p>Date response sent</p> <input type="text"/>





## Insurance and legal notification

Date PI Insurer / Broker Notified



Date Coverage Confirmed



Policy: Insurer

Policy: Period

Deductible Amount

Legal Advice Retained?

Date Retained



Legal Adviser/Firm

## Comments

Comments

## Resolution

Was assistance offered?

Date assistance offered

Resolution Offered

Resolution accepted date

## Breach Assessment

Is this a Breach?

Breach - Basis of Assessment

## Risk Assessment

Is this a Business Risk

Risk - Basis of Assessment

## Escalation

Has complaint been escalated to EDR

EDR Scheme

Date Lodged

EDR Stage

EDR Stage Other

EDR Stage Additional Comments

## Complaint Status

Complaint Status

Pending

Status Additional Comments

Who has current control of the complaint

--None--

Next Action Due

Are there Funds Recoverable?

--None--

Last Review Date

Notes

Action Item Outstanding

Cancel

Save & New

Save