

County Insurance Services Complaints Procedure

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Definition & Scope

Whilst it may not always be easy to distinguish between day to day account management issues with clients and genuine complaints, intended as such by the complainant, we believe that the definition should be sufficiently widely drawn to ensure that all complaints are captured.

The FCA definition- 'Any expression of dissatisfaction, whether oral or written, and whether justified or not, from or on behalf of an eligible complainant about the firm's provision of, or failure to provide, a financial service'.

Therefore, we define a complaint as an issue that is raised which has any of the following features, howsoever it was raised;

- It constitutes an expression of dissatisfaction with the services provided
- The client or policyholder is conveying dissatisfaction because they require action whether or not that involves any form of redress.

In certain instances, we may also receive complaints in relation to the obligations of other parties; e.g. insurers or coverholders. In those circumstances, all complaints will be recorded irrespective of whether the content of the complaint is in relation to the services, products, or actions of County Insurance Services Limited. Where complaints advised to **us** are in respect of other parties they shall be addressed in the manner set out below.

This Policy and its associated procedures applies to all of our and broker activities involved in the provision of services to clients and policyholders.

Complaints can be received by us from any of the following sources:

- Policyholders;
- Coverholders;
- Insurers;
- Third Party Claimants.

Complaints Handling

Complaints must be responded to promptly within the following timeframes:

- All complaints acknowledged within three working days in writing which may include email and including complaints resolved by the end of the working day following receipt.

- Complainants, other than complaints resolved by the end of the third working day will be advised of our complaints procedure if it has not already been provided, and where relevant, their right to refer a complaint to the Financial Ombudsman Service if they are dissatisfied with our final response.
- Complaint responses and communications, other than complaints referred to other responsible parties, will incorporate clear and comprehensive information in relation to the investigation into the matters raised, and clear indications of the expected timeframes for further response or resolution.
- By the end of 4 weeks the firm will issue a final response or state that the firm is still investigating the complaint, and that if the complainant is not satisfied with the progress of the investigation, they may refer the complaint to the Financial Ombudsman Service (FOS). The correspondence will show the full name, address and telephone number of FOS and will enclose a FOS leaflet which explains the FOS arrangements.
- Where a complaint has been made orally, we will write a letter of acknowledgement stating our understanding as to the nature of the complaint being made. The complainant will be invited to confirm the accuracy of the statement in writing.
- If practical to do so, the complaint will be investigated by a person of sufficient experience and competence, who was not directly involved in the subject matter giving rise to the complaint.
- At the conclusion of an investigation we will produce a written report explaining clearly;
 - (i) the outcome of the investigation; and
 - (ii) the nature and terms of any offer of redress which we may consider appropriate, or
 - (iii) the reasons for not upholding the complaint.

Within 5 business working days of completion of an investigation, we will send the complainant a letter explaining clearly;

- (i) the outcome of the investigation and,
- (ii) if the complaint is upheld, the nature of any offer of compensation which we are prepared to make in satisfaction of the complaint;

In the absence of the compliance officer another experienced and competent person will investigate the complaint.

Financial Ombudsman Service

Where the complaint has been raised by a policyholder or their representative in respect of a policyholder that is a consumer or a micro-business, they must also be advised that they may be entitled to refer their complaint to FOS in the event that they are dissatisfied with our final response.