

APRIL

2026

POLICY

COMPLAINTS POLICY
SA COMPOSITE

CONFIDENTIAL

SOUTH AFRICA



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1 | INTRODUCTION

The purpose of the Policy is to ensure that all Discovery Limited South African domiciled subsidiaries that provides financial services and/or provide financial products to Discovery clients, have the necessary controls, systems, support, and operational processes in place to pro-actively identify market conduct risks. These will assist in improving client engagements, interactions, and service offering, as well as preventing recurrences of product, distribution, and service delivery failures.

This policy sets out the minimum requirements for the establishment of a fully functional Complaints Management Framework (CMF) within each of the applicable entities within the South African composite. These requirements will enable fair and effective recording, handling, and resolution of complaints (in a timely, efficient, and standardised manner), provide for the necessary redress actions to be taken and for the appropriate communication and reporting structures.

Discovery recognises complaints as a valuable source of insight into client experience and conduct risk. Discovery commits to fostering a positive complaints culture that encourages feedback, does not discourage complaints, and uses complaints data proactively to improve products, services, systems, advice processes and customer outcomes. Complaints data will form part of ongoing risk assessments and business improvement initiatives.

The CMF must provide for the limitation of post-sale barriers possibly experienced by furnishing complainants with information and the processes that will efficiently and effectively resolve their complaint in a fair and timeous manner.

For purposes of this policy, financial services include financial advice and services relating to financial and non-financial products, financial products include life, non-life, medical insurance, investments, and banking. Non-financial products are loyalty programmes, wellness programmes, such as Vitality.

2 | APPLICATION AND IMPLEMENTATION

This policy is applicable to all Discovery's South African domiciled licensed Insurers and authorised Financial Services Providers (FSPs) including other subsidiaries that provides financial services financial products or wellness programmes to clients, collectively referred to as "Discovery". This policy is applicable to the following list of entities:

- Discovery Life Limited as licensed insurer under the Insurance Act, 2017, 13B Pension Fund Administrator under the Pension Funds Act, 1956 (PFA) and authorised financial services providers in terms of the Financial Advisory and Intermediary Services (FAIS) Act, (FSP 18147).
- Discovery Insure Limited as licensed under the Insurance Act, 2017 and authorised financial services providers in terms of the (FAIS Act), (FSP 43064).
- Discovery Life Collective Investments Pty Ltd as Collective Investment Scheme (CIS) Manager licensed under the Collective Investments Scheme Control Act, 2002.
- Discovery Life Investment Services (Pty) Ltd as 13B pension funds administrator under PFA and as authorised financial services providers in terms of the (FAIS Act (FSP 30277).
- Discovery Health (Pty) Ltd (FSP 18564), Discovery Connect Distribution Services (Pty) Ltd (FSP 46336), Cogence (Pty) Ltd (FSP 52242, Discovery Bank Ltd (FSP 48657), as authorised financial services providers in terms of the (FAIS Act.
- Discovery Vitality (Pty) Ltd.



Each respective Discovery subsidiary must facilitate the adoption of this policy by its boards or its relevant governance structure (committee) and ensure the implementation of robust processes that aligns with its core principles and purposes. The committee is responsible for oversight of adherence to this policy.

The policy owner is responsible for:

- ensuring the policy is approved by the Discovery Limited Board committee.
- a biennial review of the policy or update it as necessary in response to any regulatory changes that may affect its content.

3 | REQUIREMENTS OF THE COMPLAINTS MANAGEMENT POLICY

Discovery must establish, maintain, and operate an adequate and effective CMF, which align to the principles in this policy to ensure the effective resolution of complaints and the fair treatment of complainants.

3.1 GENERAL CMF PRINCIPLES

The CMF must at a minimum:

- be proportionate to the nature, scale and complexity of Discovery's business and risks;
- be appropriate for the business model, financial products, financial services, clients, and beneficiaries;
- enable complaints to be considered after taking reasonable steps to gather and investigate all relevant and appropriate information and circumstances, with due regard to the fair treatment of complainants;
- must not impose unreasonable barriers to complainants; and
- be reviewed on an annual basis and document any amendments to it.

The CMF must also provide for the following:

3.1.1 RESPONSIBLE PERSONS

All complaints handling staff and any person responsible for making decisions or recommendations in respect of complaints generally or in terms of a specific complaint are:

- adequately trained;
- knowledgeable on the business financial products and financial services, associated legal or regulatory requirements, processes (including the recording of complaints);
- must not be subject to any conflict of interest; and
- be adequately empowered to make impartial decisions or recommendations.

Proper delegation of authority, segregation of duties, adequate manpower and other resources for the complaint resolution system must be provided for.

3.1.2 REMUNERATION AND REWARD STRATEGIES

Appropriate performance standards, remuneration and reward strategies for complaints management to ensure objectivity and impartiality that:

- is cognisant of- and promotes the fair treatment of clients;
- recognises and rewards compliance with regulatory requirements; and



- assesses the quality of complaints handling and not merely volumes of complaints or complaint outcomes.

Remuneration strategies must be formalised and appropriately documented, clearly setting out the criteria upon which remuneration and rewards will be determined.

The principle of remuneration and reward strategies for complaints handling is also applicable in instances where any function of complaints handling is outsourced to a third party. Where complaints handling involves outsourced third-party providers, formal service level agreements must be established to ensure their practices remain fully aligned with this policy.

3.1.3 THE COMPLAINTS PROCESS MUST BE CLEAR, FAIR AND COMPLIANT

The complaints handling process must be documented and must:

- demonstrate adherence to the complaints management principles and complaints handling requirements as set out in this policy;
- stipulate clear requirements for the appropriate management and escalation of complaints;
- enable complaints to be considered after taking reasonable steps to gather and investigate all relevant and appropriate information and circumstances, with due regard to the fair treatment of complainants.
- include sufficient information to inform complainants of the complaints handling process, ensuring -
 - that access to the procedures is always available to complainants at any relevant office or branch of Discovery or by electronic medium; and that such availability is appropriately made known by public press or electronic announcements or separate business communications to existing clients (include in the details a reference to the duties of Discovery),
 - that the processes on how to lodge a complaint are clear and simple;
 - timeframes and the circumstances under which any of the timeframes may be extended; and
 - that complainants can escalate complaints not resolved to their satisfaction.
- provide that the receipt of complaints is promptly acknowledged in writing to the complainant, with communication particulars of contact references of the complaints department and staff to be involved in the resolution of the complaint and are properly internally recorded by the relevant staff for record keeping and timeous processing.
- must make provision that after the receipt and recording of a particular complaint, the complaint will as soon as practically possible be forwarded to the relevant staff appointed to consider its resolution, and that-
 - the complaint receives proper consideration;
 - appropriate management controls are available to exercise effective control and supervision of the consideration process;
 - the complainant is informed of the outcome of the complaint within six weeks of receipt of the complaint. Provided that if the outcome is not favorable to the complainant, full written reasons must be furnished to the complainant. Furthermore, the complainant must be advised that the complaint may, within six months, be pursued with the Ombud whose name, address and other contact details must simultaneously be provided to the complainant.
- If within six weeks of receipt of a complaint Discovery is unable to resolve the complaint to the satisfaction of the complainant, Discovery must inform the complainant that;
 - the complaint may be referred to the Ombud or Regulator if the complainant wishes to pursue the matter;
 - the complainant must do so within six months of receipt of such notification;



- include the escalation details which will apply whenever the complainant, after dismissal of a complaint, wishes to pursue further proceedings with the applicable Ombud or Regulator including the name and contact details of such Ombud or Regulator; and
- where possible, the complaint should be submitted in writing and must contain all relevant information, together with the copies of all relevant documentation.

The complaints handling process must provide for the following:

- the safekeeping and storing of specific records and specific analysis of complaints referred to the insurer by the Ombud and the outcomes of such complaints;
- internal escalation of complex or unusual complaints at the instance of the initial complaint handler;
- include the categorisation of complaints and consider additional categories relevant to its chosen business model;
- monitor determinations, publications and guidance issued by any relevant Ombud with a view to identifying failings or risks in their own policies, services, or practices;
- monitoring, oversight, and review of processes;
- identified risks, trends and actions taken in response thereto;
- have appropriate standards for engagement between Discovery and a relevant Ombud, authority and/or regulator for the resolution of a complaint where applicable;
- ensure appropriate engagement with the applicable authority and/or regulator for reporting requirements and public reporting; and
- a documented process for managing complaints relating to Discovery's service and/or third-party providers that must:
 - enable reasonable satisfaction that the service and/or third-party provider has adequate complaints management processes in place to ensure the fair treatment of complainants;
 - provide for monitoring and analysis of aggregated complaints data in relation to complaints received by the service and/or third-party provider and their outcomes;
 - include effective referral processes between Discovery and the service and/or third-party provider for handling and monitoring complaints that are submitted directly to either of them and require referral to the other for resolution;
 - include processes to ensure that complainants are appropriately informed of the process being followed and the outcome of the complaint; and
 - communicate any system upgrades or updates to the process to clients in writing.

3.2 THE CATEGORISATION OF COMPLAINTS

Reportable complaints must be categorised in the following minimum categories:

- complaints relating to the design of a financial product, financial service, or related service, including the fees, premiums or other charges related to that financial product or financial service;
- complaints relating to information provided to clients;
- complaints relating to advice;
- complaints relating to financial product or financial service performance;



- complaints relating to a service to clients, including complaints relating to premium or investment contribution collection or lapsing of a financial product;
- complaints relating to financial product accessibility, changes, or switches, including complaints relating to redemptions of investments;
- complaints relating to complaints handling;
- complaints relating to insurance risk claims, including non-payment of claims; and
- other complaints.

In addition to the above, Discovery must consider additional categories relevant to its chosen business model, financial products, financial services, and client base that will support the effectiveness of managing conduct risks and effecting improved outcomes and processes for its clients.

Discovery must categorise, record and report on reportable complaints by identifying the category contemplated above to which a complaint most closely relates and categorised complaints accordingly.

3.3 COMPLAINTS ESCALATION AND REVIEW PROCESS

The CMF must provide for an appropriate and simplified internal complaints escalation and review process that should:

- follow a balanced approach, bearing in mind the legitimate interests of all parties involved including the fair treatment of complainants;
- provide for the internal escalation of complex or unusual complaints such as those involving high severity impact, recurring themes, potential systemic issues, reputational risk, or legal threats, where applicable;
- ensure that responsibilities and mandates are delegated to facilitate complaints resolution of a routine nature and to ensure that there is provision for the escalation of non-routine complaints and the handling thereof by people with adequate skills and expertise (see Delegation of Authority for Discovery Life Limited, Discovery Insure Limited and Discovery Health Limited);
- provide for internal follow-up procedures to ensure avoidance of occurrences giving rise to complaints or to improve services and complaint systems and procedures where necessary;
- provide for complainants to escalate complaints not resolved to their satisfaction; and
- be allocated to an impartial, senior functionary within Discovery or appointed by Discovery for managing the escalation or review process where applicable.

3.4 REDRESS

Where a complaint is upheld, any commitment made by Discovery to make either goodwill or a compensation payment or take any other action must be fulfilled timeously as agreed with the complainant. Redress decisions must be guided by documented criteria to ensure fairness, consistency and proportionality. Goodwill/Ex-gratia and compensation payments must be approved in accordance with business unit delegated authority.

- An *ex-gratia* payment is a gesture, not limited to a monetary payment, by Discovery to a complainant, as an expression of goodwill. It is aimed at resolving a complaint where Discovery does not accept liability for any financial loss as a result of the matter complained about.
- A *compensation* payment is a payment by Discovery to a complainant where Discovery accepts liability for having caused the financial loss incurred or prejudice as a result of its actions, omissions or maladministration. . It may include, but is not limited to financial loss, distress, inconvenience, interest as a result of any action or failure by Discovery to act, or unfair treatment of the complainant. Compensation payments exclude any *ex-gratia* payments, goodwill gestures or payments made in terms of a contract



between Discovery and the complainant or any refund of an amount paid by or on behalf of the complainant to Discovery where such payment was not due (including any late payment of amounts).

3.5 RECORD KEEPING, MONITORING AND ANALYSIS

Discovery must ensure the accurate, efficient, and secure recording of reportable complaints and complaints related information in terms of the following:

- all relevant details of the complainant and subject matter of the complaint;
- copies of all relevant evidence, correspondence, and decisions;
- the complaint categorisation in terms of Treating Customers Fairly outcomes; and
- progress of the status of the complaint, including whether such progress was achieved within the set timeframes.

In addition, the following data in respect of reportable complaints must be maintained, where applicable, on an on-going basis to identify any specific trends or practices that need to be reviewed to ensure products, services, operational processes, and advice rendered are structured correctly and performing:

- number of complaints received;
- number of complaints upheld wholly or partially;
- number of rejected complaints and reasons for the rejection;
- number of complaints escalated by complainants to the internal complaint's escalation process;
- number of complaints referred to an Ombud, authority and/or regulator and their outcome;
- number and rand value of goodwill (ex-gratia) or compensation payments made, including reasons;
- total number of pending complaints and reasons;
- average turn-around time for the resolution of complaints; and
- number of complaints resolved outside of agreed timeline.

This data must be processed in a reportable format that can be distributed to the appropriate stakeholders on a regular basis (see Data Governance and Data Management Policy).

3.6 COMMUNICATION WITH COMPLAINANTS

Discovery must ensure that the management of complaints provides for a single point of contact that is easily accessible to all Discovery clients and consumers and must clearly indicate the complaints process, contact details for complaints and applicable timelines per business entity. This must be provided in clear and easily understandable language and at no cost to the complainant.

The following disclosures must be made, where applicable, to a complainant upon receipt of a complaint:

- the type of information required from a complainant;
- where, how and to whom a complaint and related information must be submitted;
- expected turnaround times in relation to complaints; and
- any other relevant responsibilities of a complainant.

At the earliest reasonable opportunity (preferably within 3 working days) after the receipt of a complaint, acknowledgement, and communication regarding the process to be followed with respect to the handling of the complaint must be provided, where applicable, to the complainant including:

- contact details of the person or department that will be handling the complaint;



- indicative timelines for addressing the complaint;
- details of the internal complaint's escalation and review process if the complainant is not satisfied with the outcome of a complaint; and
- details of escalation of complaints to the office of a relevant applicable Ombud, authority and/or regulator where applicable.

Discovery has a duty to keep complainants adequately informed by providing feedback timeously on:

- the progress of their complaint;
- causes of any delay in the finalisation of a complaint and revised timelines; and
- Discovery's decision in response to the complaint; and
- alternative options or redress available to clients.

3.6.2 OMBUD OR REGULATOR ENGAGEMENT

In order to facilitate an appropriate level of interaction with the applicable Ombud, and/or regulator that is open and honest, Discovery must:

- have appropriate documented processes in place for engagement with any relevant Ombud, authority and/or regulator in relation to its complaints;
- clearly and transparently communicate the availability and contact details of the relevant Ombud, authority and/or regulator services to complainants at all relevant stages of the relationship, including at point of sale, in relevant periodic communications, and when a complaint is rejected or in terms of an insurance policy, when a claim is repudiated or partially rejected/declined;
- display and/or make available information regarding the availability and contact details of the relevant Ombud, authority and/or regulator services on the Discovery website;
- maintain accurate and complete records and carry out structured analysis of complaints referred to them by the Ombud, authority and/or regulator and the outcomes of such complaints;
- monitor determinations, publications and guidance issued by any relevant Ombud, authority and/or regulator with a view to identifying failings or risks in Discovery's own financial products, financial services, or practices; and
- endeavour to resolve a complaint before a final determination or ruling is made by an Ombud, authority and/or regulator, or through its internal escalation process, without impeding or unduly delaying a complainant's access to an Ombud, authority and/or regulator.

Please refer to [Annexure A](#) for a list of applicable Ombuds, Authorities and Regulators.

3.7 GOVERNANCE AND REPORTING

Complaints information and analysis must be reported to the relevant governance forums as required by internal governance and oversight processes.



4 | ADDITIONAL REQUIREMENTS FOR SPECIFIC BUSINESSES

4.1 GUERNSEY FINANCIAL SERVICES COMMISSION

The Insurance Business Rules and Guidance, 2021 (Business Rules) is specifically applicable to Discovery Life and Discovery Life Investment Services (Pty) Limited that issue policies under Discovery Life's Guernsey Branch.

For purposes of applying the Business Rules the following terminology should be applied:

- "Complaint Response Date" means three months from the date which the complaint is first received by Discovery or first becomes aware of the complaint (whichever date is earlier).
- "Significant Complaint" means a complaint alleging a breach of the law, mala fides, malpractice or impropriety, or repetition or recurrence of a matter previously complained of (whether significant or otherwise).

4.1.1 TIMELY AND FAIR MANNER COMPLAINTS HANDLING

Discovery, as a licensed insurer, must:

- handle complaints in a timely and fair manner;
- have in operation, and ensure compliance with, a written procedure for the effective consideration and fair and proper handling of any complaints relating to Discovery's insurance business, howsoever received;
- ensure that each of its officers and employees responsible for dealing with clients is at all times aware of this procedure and of the obligation to follow it;
- make information on their financial products, financial services and procedures on complaints handling available to its clients;
- respond to complaints without unnecessary delay; complainants should be kept informed about the handling of their complaint;
- send a written final response in relation to the complaint prior to the complaint response date. A 'final response' must:
 - accept the complaint and offer any appropriate redress and/or remedy; or
 - offer redress and/or remedy without accepting the complaint; or
 - reject the complaint and give clear reasons for doing so.
- in the 'final response' also advise the complainant in writing that, if the complainant remains dissatisfied, it can refer the complaint to the Ombud and advise the complainant that they may inform the Commission directly of the complaint;
- inform the Commission within fourteen days after the complaint response date, in the event that Discovery fails to issue a 'final response' by the complaint response date;
- the Commission within fourteen days of it first becoming aware of a significant complaint and shall also advise the complainant that it may inform the Commission directly of the complaint;
- maintain a register in which it records any complaints received, along with sufficient details to allow it to be able to demonstrate that it has dealt (or is dealing) with such complaints in accordance with these Business Rules and any other applicable provisions of the law;
- analyse the complaints they receive to identify failures, trends, and recurring risks and to identify, and enable them to correct, common root causes; and



- analyse complaints that they receive against intermediaries in respect of products that the intermediaries have distributed on their behalf, to enable them to assess the complete client experience and identify any issues that need to be addressed.

Please refer to Annexure A for a list of Ombuds, Authorities and Regulators.

4.2 THE CONSUMER PROTECTION ACT 2008 (CPA)

The Consumer Protection Act is applicable to Vitality (Pty) Limited and Healthy Company (a business unit of Discovery Corporate and Employee Benefits).

4.2.1 PROTECTION OF CLIENT RIGHTS

Where a client has exercised, asserted, or sought to uphold any right set out in the CPA, or in an agreement or transaction with Discovery, Discovery must not:

- discriminate directly or indirectly against that client, compared to Discovery's treatment of any other client who has not exercised, asserted, or sought to uphold such a right;
- penalise the client;
- alter, or propose to alter, the terms or conditions of a transaction or agreement with the client, to the detriment of the client; or
- take any action to accelerate, enforce, suspend, or terminate an agreement with the client.

4.2.2 ENFORCEMENT OF RIGHTS BY CLIENT

A client may seek to enforce any right in terms of the CPA or in terms of a transaction or agreement, or otherwise resolve any dispute with Discovery, by:

- referring the matter directly to the Tribunal, if such a direct referral is permitted by the CPA in the case of the dispute; or
- referring the matter to the applicable Ombud with jurisdiction, if Discovery is subject to the jurisdiction of any such Ombud.

Please refer to Annexure A for a list of Ombuds, Authorities and regulators.

5 | TRAINING AND ATTESTATION

5.1 TRAINING

Where training in relation to this policy is not provided by the policy owner each subsidiary must develop training programmes for affected individuals and ensure that individuals complete such training.

5.2 ATTESTATIONS

Each subsidiary and/or individuals as identified by the policy owner must attest to the adherence of this policy as required by Discovery.



6 | COMPLIANCE WITH THIS POLICY

Discovery views any non-compliance with this as well as any non-compliance with its obligations in terms of legislation in a serious light. Any deliberate action by an employee to contravene the above will be subject to disciplinary action.

Compliance with this policy will be monitored by the SA Risk & Compliance Committee (SA RCC). Any breach of, or non-compliance with this policy must be communicated to the policy owner as soon as reasonably practical. The policy owner, with input from key stakeholders, will consider the appropriate action(s) required to address non-compliance. If agreement on the appropriate action(s) cannot be reached, the matter will be escalated to the chair of Discovery SA RCC. The chair of SA RCC will decide whether the breach or non-compliance is sufficiently material to be escalated further, and if so, to which Board/committee/person.

All instances of non-compliance with this policy will be included within the regular compliance reporting process.

7 | DEFINITIONS AND KEY TERMS

CLIENT	A policyholder, member, or retail financial customers (collectively referred to as clients).
CLIENT QUERY	Means a request to the provider (Discovery) or the provider's service supplier by or on behalf of a client, for information regarding the provider's financial products, financial services or related processes, or a transaction or action in relation to any such product or service.
COMPENSATION PAYMENT	Means a payment, whether in monetary form or in the form of a benefit or service, by or on behalf of a provider to a complainant to compensate the complainant for a proven or estimated financial loss incurred as a result of the provider's contravention, non-compliance, action, failure to act, or unfair treatment forming the basis of the complaint, where the provider accepts liability for having caused the loss concerned, but excludes any: ▪ Goodwill/ex-gratia payment; ▪ payment contractually due to the complainant in terms of the financial product or financial service concerned (and includes any interest on late payment); or refund of an amount paid by or on behalf of the complainant to the provider where such payment was not contractually due.
COMPLAINANT	Provides for a broader definition of who is considered as a complainant and includes a: ▪ client;



	▪ person nominated as the person in respect of whom a product supplier should meet financial product benefits or that persons' successor in title (i.e., policy owner or beneficiary); ▪ person whose life is insured under a financial product that is an insurance policy (i.e., life insured); ▪ person that pays a premium or an investment amount in respect of a financial product (i.e., premium payer); ▪ member ▪ person whose dissatisfaction relates to the approach, solicitation marketing or advertising material or an advertisement in respect of a financial product, financial service, or related service of the provider (i.e., general public or client); ▪ person who has a direct interest in the agreement, financial product, or financial service to which the complaint relates, or a person acting on behalf of a person referred to above (i.e., client or person nominated by the client).
ESCALATED COMPLAINT	Means the extension of a complaint relating to the outcome of the initial complaint, or the complaint is so complex or unusual that it requires intervention by an impartial senior functionary appointed to deal with escalated complaints, or the resolution of the initial complaint is not to the complainant's satisfaction and is then referred to the appropriate Regulator or Ombud scheme by the complainant
FINANCIAL PRODUCT	Refers to: ▪ a participatory interest in one or more collective investment schemes; ▪ a long-term or a short-term insurance contract or policy; ▪ a benefit provided by - ○ a pension fund organisation ▪ a foreign currency denominated investment instrument, including a foreign currency deposit; ▪ a bank deposit; ▪ a health service benefit;



	▪ a provision of credit, warranty, guarantee or credit support; or ▪ short- and long-term deposits; and any loyalty or wellness programmes linked to a financial product.
FINANCIAL SERVICE	Refers to professional services involving the advice, intermediation, investment, lending, and management of money and assets in relation to a financial product including: ▪ offering, promoting, marketing, or distributing; ▪ providing advice, recommendations, or guidance; ▪ providing intermediary services; ▪ operating or managing; ▪ providing administration services; ▪ provision of credit and debt collection services; and ▪ a service provided to a financial services provider through an outsourcing arrangement.
GOODWILL/EX-GRATIA PAYMENT	Means a payment, whether in monetary form or in the form of a benefit or service, by or on behalf of a provider to a complainant as an expression of goodwill aimed at resolving a complaint, where the provider does not accept liability for any financial loss to the complainant as a result of the matter complained about.
INTERNAL COMPLAINTS RESOLUTION SYSTEMS AND PROCEDURES	Refers to the system and procedures established and maintained by Discovery for the resolution of complaints.
OMBUD RESOLUTION OR INTERNAL RESOLUTION	Refers to the process of resolving a complaint through and in accordance with the internal complaints resolution system and procedures of Discovery.
PRIVACY COMPLAINT	A complaint where any person either alleges interference or infringement with personal information or privacy rights. Interference with the protection of information of a person consists of: Failure: ▪ to comply with any of the conditions for lawful processing of personal information;



	▪ to report to the applicable authority and/or affected person/s in the event of a security compromise; ▪ to comply with the electronic direct marketing requirements; ▪ to inform and allow a person an opportunity to object prior to including information about them in a directory; ▪ to allow a person to exercise their rights in terms of applicable data privacy legislation; ▪ to comply with the provisions relating to automated decisions which result in legal consequences for a person, or which affects them to a substantial degree; ▪ to adhered to the cross-border transfer of personal information requirements; and A breach of any provision of applicable data privacy legislation requirements.
REPORTABLE COMPLAINT	A complaint other than a complaint that has been: ▪ upheld immediately by the person who initially received the complaint; ▪ upheld within the ordinary processes for handling client queries, provided that it does not take more than five business days to complete; or ▪ submitted to or brought to the attention of Discovery in such a manner that Discovery does not have a reasonable opportunity to record the details of the complaint in the prescribed manner.
REGULATOR	Refers to a person and/or organisation having legislative, regulatory and/or administrative power, and control within a defined jurisdiction.
REJECTED COMPLAINT	A complaint that was not upheld. Discovery regards the complaint as finalised after advising the complainant that it does not intend to take any further steps or actions to resolve the complaint. This includes complaints regarded by Discovery as unjustified or invalid, or where the complainant does not accept or respond to Discovery's proposals to resolve the complaint.
UPHELD COMPLAINT	Means a complaint has been finalised wholly or partially in favour of the complainant and that:



	- the complainant has explicitly accepted that the matter is fully resolved; or - it is reasonable for the provider to assume that the complainant has so accepted; and - all undertakings made by the provider to resolve the complaint have been met or the complainant has explicitly indicated its satisfaction with any arrangements to ensure such undertakings will be met by the provider within a time acceptable to the complainant.
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8 | ACRONYMS

CGSO	Consumer Goods and Services Ombudsman
CIS	Collective Investment Scheme
CMF	Complaints Management Framework
CMS	Council of Medical Schemes
CPA	Consumer Protection Act, 2008
FAIS	Financial Advisory and Intermediaries Act, 2002
FSCA	Financial Sector Conduct Authority
FSP	Financial Service Provider
IR	Information Regulator
NCC	National Consumer Commission
NCR	National Credit Regulator
PA	Prudential Authority
PFA	Pension Funds Act, 1956
PFA	Pension Funds Adjudicator
SA RCC	South African Composite Risk and Compliance Committee



9 | ANNEXURE A

OMBUDS AND AUTHORITIES

SOUTH AFRICA	
FAIS OMBUDSMAN	Tel: 012 762 5000 Email: info@faisombud.co.za Website: www.faisombud.co.za Physical Address: Kasteel Park Office Park, Orange Building, 2nd Floor, 546 Jochemus Street, Erasmus Kloof, Pretoria, 0048 Postal Address: PO Box 74571, Lynwood Ridge, 0040
NATIONAL FINANCIAL OMBUD SCHEME SOUTH AFRICA	Tel: 086 800 900 Email: info@nfosa.co.za Website: http://www.nfosa.co.za Physical Address: Head Office - 110 Oxford Road, Houghton Estate, Illovo, Johannesburg, 2198 CPT Office - Claremont Central Building, 6th Floor, 6 Vineyard Road, Claremont, 7708 Postal Address: 110 Oxford Road, Houghton Estate, Illovo, Johannesburg, 2198
CONSUMER GOODS AND SERVICES OMBUDSMAN (CGSO)	Tel: 0860 000 272 Fax: 086 206 1999 Email: complaints@cgso.org.za Website: https://www.cgso.org.za Physical Address: 292 Surrey Avenue, Ferndale, Randburg Postal Address: PO Box 3815, Randburg, 2125
NATIONAL CREDIT REGULATOR (NCR)	Tel: 011 554 2700 or 0860 627 627 E-mail: complaints@ncr.org.za Website: www.ncr.org.za Physical Address: 127-15th Road, Randjespark, Midrand, Johannesburg, 1685 Postal Address: PO Box 209, Halfway House, 1685
FINANCIAL SECTOR CONDUCT AUTHORITY (FSCA)	Tel: 0800 20 3722 Switchboard: 012 428 8000 Fax: 012 346 6941 Email: info@fsca.co.za Website: www.fsca.co.za Physical Address: Riverwalk Office Park, Block B, 41 Matroosberg Road, (Corner Garsfontein and Matroosberg Roads), Ashlea Gardens, Extension 6, Menlo Park, Pretoria, South Africa, 0081
OFFICE OF THE PENSION FUNDS ADJUDICATOR (PFA)	Tel: 012 748 4000 Switchboard: 086 066 2837 Fax: 086 693 7472 Email: enquiries@pfa.org.za Website: www.pfa.org.za Physical Address: Riverwalk Office Park, Block B, 41 Matroosberg Road, (Corner Garsfontein and Matroosberg Roads), Ashlea Gardens, Extension 6, Menlo Park, Pretoria, South Africa, 0081



PRUDENTIAL AUTHORITY (PA)	Switchboard: 012 313 3911 Email: PA-resbank.co.za/PrudentialAuthority Website: www.resbank.co.za Physical Address: South African Reserve Bank, 370 Helen Joseph Street, Pretoria, 0002 Postal Address: P.O. Box 8432, Pretoria, 0001
NATIONAL CONSUMER COMMISSION (NCC)	Tel: 012 761 3200/3000/3400 Fax: 086 758 4990 E-mail: complaints@thence.org.za Website: www.thence.gov.za
COUNCIL FOR MEDICAL SCHEMES (CMS)	Tel: 0861 123 267 Fax: 086 673 2466 E-mail: complaints@medicalschemes.com Website: www.medicalschemes.com Physical address: Block A, Eco Glades 2 Office Park, 420 Witch - Hazel Avenue, Eco Park, Centurion, 0157 Postal address: Private Bag X34, Hatfield, 0028
INFORMATION REGULATOR SOUTH AFRICA (IR)	Tel: 010 023 5200 E-mail: PAIAComplaints@infoeregulator.org.za or POPIAComplaints@infoeregulator.org.za Website: www.infoeregulator.org.za Physical address: Woodmead North Office Park, 54 Maxwell Drive, Woodmead, Johannesburg, 2191
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OFFICE OF THE DATA PROTECTION AUTHORITY	Tel: +44 (0) 1481 742074 Email: infor@odpa.gg Website: https://www.odpa.gg/ Physical Address: Block A, Lefebvre Court, Lefebvre Street, St Peter Port, GY1 2JP



POLICY CONTROL

DETAILS

POLICY OWNER | GROUP COMPLIANCE FUNCTION

POLICY LEVEL | SA COMPOSITE

LEVEL OF APPROVAL | SA RCC

FREQUENCY OF REVIEW | EVERY TWO YEARS OR AS AND WHEN LEGISLATIVE CHANGES OCCUR

REVISION HISTORY

REVISION DATE	VERSION	SUMMARY OF CHANGES	AUTHOR
JANUARY 2017	V1	CREATE NEW DOCUMENT	GROUP COMPLIANCE
JULY 2018	V2	REVIEW AND UPDATE REGULATORY/OMBUD DETAILS	GROUP COMPLIANCE
JULY 2019	V3	RE – DRAFT TO ADDDDRESS TCF COMMITTEE COMMENTS, BUSINESS CONCERNS AND REGULATORY DEVELOPMENTS TRANSFERRED TO NEW BOARD- APPROVED POLICY TEMPLATE.	GROUP COMPLIANCE
AUGUST 2021	V4	SCHEDULED REVIEW	GROUP COMPLIANCE
OCTOBER 2023	V5	RE – DRAFT TO LIMIT APPLICATION TO SA STRAND ONLY TRANSFERRED TO NEW SA TEMPLATE	GROUP COMPLIANCE
APRIL 2026	V6	UPDATE OMBUD & AUTHORITIES CONTACT DETAILS, PRIVACY COMPLAINT DEFINITION. CLARITY TO CERTAIN SECTION	GROUP COMPLIANCE SOUTH AFRICA



POLICY GOVERNANCE APPROVAL PROCESS

THIS POLICY HAS BEEN APPROVED AS FOLLOWS:

FORUM	DOCUMENT VERSION
CHIEF COMPLIANCE OFFICER	V3
RISK AND COMPLIANCE COMMITTEE	V3
RISK AND COMPLIANCE COMMITTEE	V4
SA RISK AND COMPLIANCE COMMITTEE	V5
SA RISK AND COMPLIANCE COMMITTEE	V6

POLICY REFERENCES

THIS POLICY SHOULD BE READ IN CONJUNCTION WITH THE FOLLOWING DOCUMENTS:

NUMBER	DOCUMENT NAME	DOCUMENT OWNER
01	THE TREATING CUSTOMERS FAIRLY FRAMEWORK	GROUP COMPLIANCE
02	DISCOVERY LIFE DELEGATION OF AUTHORITY	GROUP COMPANY SECRETARY
03	DISCOVERY INSURE DELEGATION OF AUTHORITY	GROUP COMPANY SECRETARY
04	DISCOVERY HEALTH DELEGATION OF AUTHORITY	GROUP COMPANY SECRETARY
03	DATA GOVERNANCE AND DATA MANAGEMENT POLICY	GROUP DATA GOVERNANCE

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