



TRISURA GUARANTEE INSURANCE COMPANY

COMPLAINT HANDLING PROCEDURES

2019

The purpose of this document is to outline the procedures to be followed by staff of Trisura Guarantee Insurance Company, and Richard Grant, Trisura's Chief Risk Officer, in his capacity as the company's Complaint Liaison Officer ("CLO"), with respect to the handling of complaints from consumers of the company's products and services.

1. COMPLAINTS RECEIVED BY FIELD STAFF/BRANCH OPERATIONS

a) Verbal complaints

In the event a consumer voices a complaint to a frontline staff member, *and the complaint is not of a nature that it can be, and is, readily resolved to the satisfaction of the consumer*, the staff member must advise the consumer that Trisura takes such matters seriously and, in order to be in a position to investigate the matter thoroughly, must request that the complaint be made in writing to the attention of, as applicable, the branch manager or the senior product line manager for the respective province. The staff member must document the complaint in detail and advise his or her direct supervisor and the branch or product line manager of the matter.

The manager must enter the pending complaint on a watch list, a copy of which, with status updates, must be filed quarterly with the CLO. If a written complaint is not received from the consumer within one (1) year of the original verbal complaint, the pending complaint may be considered closed.

b) Written complaints

Once the complaint is received in writing (or in the event the initial consumer contact is in writing), *and the complaint is not one of the six types noted in 2(a), below*, the branch or product line manager must, with the appropriate staff members, determine a course of action to resolve the complaint and open a file that should include all correspondence pertaining to the matter. The manager must also immediately send an email to the CLO identifying the consumer, the nature of the complaint, the dates of the original and written communication, and the proposed action plan. The CLO must confirm receipt of this email and copy other relevant personnel.

The manager should also update the watch list (from pending to active, or active if the initial complaint is in writing) for the quarterly filing with the CLO.

c) Disposition of complaints

In the event the complaint is one that can be handled by the "front line", and if any necessary investigation can be concluded promptly, the manager must send a letter to the consumer setting out the company's position on the matter within ten (10) business days of receipt of the written complaint. *This letter must be approved by the CLO, or a person designated by him, before it is sent, and must be sent by registered mail.*

Should the complaint require a more lengthy investigation, or if additional information is required from the consumer, the manager must send an acknowledgement letter to the consumer within five (5) business days of receipt of the written complaint. This letter should summarize the nature of the complaint and, if no additional information is required, advise the consumer that the manager will be conducting an investigation and will respond with the company's position on the matter within thirty (30) business days.

In the event that additional information is required, this should be clearly set out in the acknowledgement letter along with a statement that the manager will respond within thirty (30) days of receiving the information.

If the complaint pertains to a consumer provision under the *Insurance Companies Act* (Canada) as discussed in the accompanying Complaint Handling Policy, the acknowledgement letter should also direct the consumer on how to contact the Financial Consumer Agency of Canada, as follows:

Financial Consumer Agency of Canada
Enterprise Building
427 Laurier Avenue West, 6th Floor
Ottawa, Ontario K1R 1B9
Phone: Toll-free, English (866) 461-3222; Toll-free French (866) 461-2232
Fax: (613) 941-1436; Toll-free (866) 814-2224
Email: compliance@fcac.gc.ca
Web site: www.fcac.gc.ca

In all cases, the acknowledgement letter and the manager's subsequent response must be approved by the CLO, or a person designated by him, before being sent, and must be sent by registered mail.

d) Subsequent steps

Once the position letter has been issued, the manager must update the watch list accordingly. If the consumer does not respond within one (1) year of the letter being issued, the complaint may be considered closed. If the consumer accepts the company's position in writing, the manager should send a copy of the letter to the CLO and the complaint may also be considered closed. In the event the consumer refuses in writing to accept the company's position the complaint must be escalated to the CLO.

2. ESCALATION OF COMPLAINTS TO THE CLO

a) Written complaints

If any of the following are received *in writing*, they must be referred immediately to the CLO:

- i) Any complaint received from a consumer in Quebec;
- ii) An expression of dissatisfaction with the company's business practices, or an allegation of unfair treatment by the company;
- iii) A complaint made directly to, and referred to the company by, a regulator;
- iv) An allegation of breach of fiduciary duty or acting in bad faith;
- v) A statement of claim outside of the ordinary course of business; or,
- vi) A refusal to accept the company's position letter as described under 1(d), above.

b) Complaints made directly to the CLO or head office staff

In the event a verbal or written complaint is made directly to the CLO or a head office staff member, the CLO will review the matter and decide whether it should be referred to the appropriate branch or product line manager for investigation and resolution.¹

c) Disposition by the CLO

General

In the six situations listed under (a), above, the CLO must commence his investigation immediately and send a letter to the consumer within five (5) business days stating that he is handling the matter and will be responding within thirty (30) business days. A copy of this Complaint Handling Procedure should be attached to the letter.

In the event the CLO requires additional information, he should specify his requirements in his acknowledgement letter and state that he will respond within thirty (30) days of receiving the information.

If the consumer complained directly to a regulator, the CLO must keep the regulator informed as the investigation proceeds.

Quebec-based complaints

In the case of complaints received from consumers in Quebec, the CLO must also state in his acknowledgement letter that if the consumer is dissatisfied with the complaint examination procedure or with the answer following the examination, he or she may ask that a copy of the complaint file be transferred to the Autorité des marchés financiers (“AMF”) for examination and possible mediation. The CLO should provide the AMF’s contact details, which are as follows:

Autorité des marchés financiers
Service du traitement des plaintes
800, square Victoria, 22^e étage
C.P. 246, tour de la Bourse
Montréal (Québec) H4Z 1G3
Phone: Montréal (514) 395-0337; Québec City (418) 525-0337; Toll-free (877) 525-0337
Fax (toll-free): (877) 285-4378

3. FINAL POSITION LETTER

Once the CLO has completed his investigation and has made a final determination with respect to the company’s position on the matter, he must set out the company’s position in a “final position letter” to the consumer.

a) Quebec requirements

In addition to those noted above under 2(a) and (c), the CLO must transfer the consumer’s file to the AMF if so requested by the consumer because he or she is dissatisfied with the examination of the complaint or the answer obtained.

¹ Refer to 4(c) at page 4, below, if the complaint pertains to a consumer provision under the *Insurance Companies Act* (Canada).

b) Other than Quebec requirements

The final position letter must state that if the consumer is not satisfied with the company's final position, the consumer may contact the General Insurance OmbudService ("GIO"), an independent industry organization established to handle unresolved complaints. If the consumer chooses to contact the GIO to resolve the complaint, the GIO will arrange a two hour mediation session between the consumer and the insurance company, following which a report with non-binding recommendations will be issued if the complaint remains unresolved.

The GIO's contact details are as follows:

General Insurance OmbudService
4711 Yonge Street, 10th Floor
Toronto, Ontario M2N 6K8
Phone: (416) 299-6931; Toll free: (877) 225-0446
Fax: (416) 299-4261
Email: info@gio-scad.org
Website: English www.giocanada.org; French www.scadcanada.org

4. REPORTING REQUIREMENTS

a) Ontario complaints

Complaints made by consumers in Ontario that are escalated to the CLO for resolution must be reported to the Financial Services Commission of Ontario. Reporting is semi-annual and must be made within 30 days of June 30 and December 31. Rebekah Alberga, as the company's Compliance Liaison Officer, is responsible for this reporting requirement.

b) Quebec complaints

Complaints made by consumers in Quebec that are escalated to the CLO for resolution must be reported to the AMF. As in Ontario, reporting is semi-annual and must be made within 30 days of June 30 and December 31.

c) Federal complaints

In the unlikely event a complaint pertains to a consumer provision under the *Insurance Companies Act* (Canada) as discussed under the accompanying Complaint Handling Policy, the complaint must be reported to the Financial Consumer Agency of Canada within sixty (60) days of the complaint being elevated to the CLO for handling or received by him (or a board member) directly.

5. STAFF COMPLIANCE

All staff members are expected to comply with the procedures outlined in this document. Please contact Richard Grant, CLO, in the event you have any questions.