



COMPLAINTS HANDLING

The information contained in this document is intended to provide you with the information you need to understand how the Church of Scotland Insurance Services Ltd (COSIS) will handle your complaint.

We recognise the importance of service and set ourselves high standards. Should there be an occasion when we do not meet your expectations, we are equally committed to dealing with any complaint in a thorough and professional manner, in accordance with the rules set out by the Financial Conduct Authority.

HOW CAN YOU MAKE A COMPLAINT?

You can make a complaint by contacting us by any of the following means:

- In writing addressed to: The Chief Executive
- By telephone on: 0131 220 4119
- By fax on: 0131 220 3113
- By email to: enquiries@cosic.co.uk

ACKNOWLEDGING YOUR COMPLAINT

If your complaint is relatively straightforward it may be possible to resolve it very quickly. If we are able to resolve your complaint before the end of the third working day after it is received by us, we will send you a 'Summary Resolution Communication' promptly, with confirmation of the action we took to resolve your complaint.

In all other cases we will send you a written acknowledgement of your complaint promptly, normally within five working days of receiving it. If you have made your complaint to us verbally, we will confirm to you our understanding of this and ask you to advise us if you do not agree.

INVESTIGATING YOUR COMPLAINT

Your complaint will then be investigated by a senior official of the firm who is not directly or indirectly the subject matter of the complaint and we will not charge you for this work.

In order to reach a fair conclusion, we will review the information available to us, which will include all records on our files along with a report from the individual to whom the complaint relates.

We will endeavour to complete our investigation and reach a conclusion as soon as possible. The length of time this will take will be determined by the complexity of the complaint and the extent of the investigation required. During our investigation we may ask you for additional information to help us to reach a conclusion.

We will keep you updated as to the progress of your complaint and the steps being taken to resolve it. In the unlikely event that we are unable to complete our investigation and issue a final response letter to you within eight weeks of the date of receiving your complaint, we will write explaining why we are still not in a position to make a final response, giving



reasons for the further delay and indicating when we expect to be able to make a final response.

If you are an eligible complainant for the purposes of the Financial Ombudsman Service (FOS), we will also inform you that you may at this stage refer the complaint to the FOS if you are dissatisfied with the delay and we will provide you with a copy of the FOS's explanatory leaflet.

Eligible complainants include:

- all personal insurance customers
- commercial customers with an annual business turnover and/or balance sheet value of less than €2m, with fewer than 10 employees
- charities with an annual turnover of less than £1m
- trusts which have a net asset value of less than £1m

PROVIDING OUR FINAL RESPONSE

Once we have completed our investigation, we will write to you with the results of our investigation and explain our conclusion.

If you are dissatisfied with our response, and you are an eligible complainant as described above, you may refer your complaint to the FOS, details of which will be provided to you.

The FOS will review our investigation and the response which you have received, providing you with an independent assessment of your complaint without any charge to you.

If you are a consumer and your complaint relates to insurance purchased from us via electronic means (e.g. on-line or via email or mobile 'phone) then you will be able to use the EC On-line Dispute Resolution (ODR) platform at <http://ec.europa.eu/consumers/odr/> who will notify the FOS on your behalf.

COMPLAINTS ANALYSIS

We take all complaints seriously and regularly analyse any complaints received to identify root causes and any trends. We also review decisions made by the FOS against any decisions that we have made on similar cases. We use the resulting information to improve our services and the way that we handle future complaints through amended processes and staff training.