



Customer Service Standards and Complaint-Handling Procedure

Service standards – what you should expect

We undertake to:

- be polite, courteous and efficient at all times
- respond to all emails, letters and faxes within 5 working days, or sooner for urgent matters
- return all telephone calls within 24 hours, or sooner for urgent matters
- answer 90% of all telephone calls within 15 seconds
- return all calls to any of our helplines within 2 hours
- send an acknowledgement to any claim by the end of the next working day after it is received
- contact the party reporting the claim within 5 working days of us having all the information needed to assess cover, advising whether or not the claim is covered and what we have done to progress the matter
- try to resolve any complaint by the end of the third working day after it was received. If that is not possible, we will send an acknowledgement within five working days, and aim to provide ARAG's Final Response within eight weeks of it being reported to us.

Explaining our complaint handling procedure.

We promise to deal with all complaints:

-  promptly
-  objectively
-  fairly
-  sympathetically
-  thoroughly

We aim to provide a standard of service to our customers and business partners that is second to none, but occasionally things can still proceed in a way that was not intended. Should this occur, as part of our commitment to excellence, our complaint handling procedure is designed to resolve any problems quickly and easily.

Step 1

When first reporting a complaint, please provide your policy number, our reference, full details of your dissatisfaction, and what you would like us to do in order to resolve the matter.

In the first instance, we would encourage you, by whichever method is most convenient to you, to contact either the person who is dealing with the matter, or if this is not appropriate for whatever reason, you can contact our Customer Relations Department directly, using any of the following methods:

 0117 917 1561 (hours of operation are 9am - 5pm, Monday to Friday excluding bank holidays).
For our mutual protection and training purposes, calls may be recorded.

 customerrelations@arag.co.uk

 ARAG plc, 9 Whiteladies Road, Clifton,
Bristol, BS8 1NN

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 have taken 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 the reasons for your dissatisfaction 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 Company who is not directly or indirectly the subject matter of the complaint.

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 party 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 reach a conclusion.

We will keep you updated as to the progress of your complaint and the steps being taken to resolve it. Once we have completed our investigation, we will write to you with the results of that and explain our conclusion. This will normally be within eight weeks of receiving your complaint.

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 issue a final response, giving reasons for the further delay and indicating when we expect to be able to issue 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

Step 2

If you remain dissatisfied, and you are an eligible complainant, then you can refer the matter to the Financial Ombudsman Service. They can be contacted at:



0207 964 1000



enquiries@financial-ombudsman.org.uk



The Financial Ombudsman Service,
Exchange Tower, Harbour Exchange Square,
London, E14 9SR

Alternatively, 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.

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. Their decision is binding upon the insurer, but you are free to reject it without affecting your legal rights.

You can find more information on the FOS at www.financial-ombudsman.org.uk