

# **UNIMUTUAL LIMITED**

**ABN: 45 106 564 372**

**AFS Licence No.: 241142**

## **UNIMUTUAL CODE OF PRACTICE**

For further information about Unimutual, this Code or for any other details, please visit the Unimutual website: [www.unimutual.com.au](http://www.unimutual.com.au)

Unimutual Limited, (Unimutual) ABN: 45 106 564 372 is an Australian Financial Services Licence Holder

## **About Unimutual**

Unimutual Limited ('Unimutual', the 'Mutual', 'Us', 'Our' or 'We') is a not-for-profit, Discretionary Mutual offering higher education and research institutions across Australia and New Zealand a commercially feasible alternative to insurance.

Owned and controlled by its Members for the benefit and interest of Members, Unimutual is governed by a Board drawn principally from the Membership managed by a dedicated team with strong knowledge of the risks and issues specific to the education sector.

By joining forces with higher education and research institutions across Australia and New Zealand, Unimutual draws on collective strength to provide cost-effective protections for a range of risks particular to the sector.

## **Membership of the Mutual**

Membership of the Mutual is open to higher education or research institutions or entities associated with higher education or research of 20 employees or more. Granting of applications for Membership is at the discretion of the Unimutual Board.

Copies of the Mutual's Rules and Constitution are available on request or may be viewed at [www.unimutual.com.au](http://www.unimutual.com.au)

## **Unimutual Board**

The Board of Unimutual (Board) is drawn largely from the Membership with a maximum of ten (10) Directors and up to three (3) Independent Directors on the Board at any one time. The positions of Chairman of the Board and Chairman of the Finance and Audit Committee are normally held by independent Directors.

The Board has a thorough understanding of the higher education sector and the risks faced by Members.

As a Discretionary Mutual, the Board retains unfettered discretion to decide whether or not to admit a Member to the Mutual and whether or not to accept a Member's claim. In exercising its discretion, the Board is bound by principles of fairness and natural justice.

A Member of the Mutual is entitled to have claims for protection considered by the Board. Members can reasonably expect to have all valid claims falling within the terms and conditions of the Mutual's protection wordings paid in full.

## **Our Commitment to Members**

**Unimutual prides itself on core values of mutuality, integrity, responsiveness, innovation and commitment.**

We have adopted this voluntary Code of Practice (Code) to ensure consistently high standards of practice and service are provided to our Members by our staff, employees, authorised representatives and other professionals we rely upon. We strongly support this Code and are committed to complying with it.

Members' reciprocal obligations include fair and honest dealing with the Mutual and compliance and with the Mutual's Rules and Constitution.

## **Objectives of the Code**

The objectives of this Code are to: -

- Promote better and informed relations between Unimutual and You, its Members
- Improve Member confidence in Unimutual's product and service offerings
- Provide transparent mechanisms for the management of claims
- Provide resolution of complaints and disputes between Unimutual and its Members and
- Commit Unimutual, its staff, employees, representatives and other parties to high standards of service to Members

## **Becoming a Member & Buying Protection**

We will adopt the following standards in respect of an initial enquiry about becoming a Member, taking out protection and renewals thereof: -

- Our processes will be conducted in a fair, honest and transparent manner
- We will only seek and take account of relevant information when assessing applications for membership and protection
- Members and prospective Members will have access to information that we have relied upon in assessing applications and the opportunity to correct any errors or inaccuracies
- In limited circumstances, we may decline to release information however we will not do so unreasonably
- Where any errors or inaccuracies in assessing an application are identified, we will take immediate action to correct it

## **Making a Claim**

When you make a claim we will keep you informed of the progress of your claim.

Where further information of the claim is required, within **10** working business days of receiving your claim we will notify you of the information required.

Where necessary we may appoint a loss adjuster and provide an initial estimate of the time required to make a decision.

We will respond to your routine requests for information within **2** business days.

When we have all the necessary information and have completed all investigations required to assess the claim, we will decide to accept or reject the claim and notify you of the decision within **10** working business days. In certain circumstances it may be necessary for the matter to be considered by the Board. We will advise you if this is the case and the timeframe in which a decision is expected.

If these timeframes are not practical, we will agree reasonable alternative timeframes with you.

## **Standards of Employees, Staff and Authorised Representatives**

We require the following standards of our employees, staff and authorised representatives offering products and services and managing claims:-

- Our employees, staff and authorised representatives will conduct their services in an honest, efficient, fair and transparent manner
- Our employees, staff and authorised representatives will be competent to provide services to Members and not perform functions that do not match their expertise
- Our employees, staff and authorised representatives will notify the Complaints Manager of any complaints they receive against them

## **Responding to Disasters & Catastrophes**

We will respond to catastrophes and disasters in a responsive, timely, professional and practical way establishing internal processes for response and action.

We will co-operate, support and work closely with Members and other interested parties in coordinating a response to catastrophes and disasters.

We will assign a dedicated person to handle your claim so that you have a single point of contact.

## **Standards in Complaints Handling**

We will apply the same standards to all complaints handling as apply to becoming a Member, taking out protection and renewals thereof.-

### **Complaint Management (Stage 1)**

If you have a complaint, you should first speak with the Complaints Officer, whose contact details appear below. The Complaints Officer will attempt to address and resolve your concern or refer it to an appropriate member of staff.

If your complaint relates to a Membership application, buying or accessing risk protection cover or claims handling, in the first instance, your complaint will be directed to the person dealing with your matter.

Where we have all of the information required to resolve your complaint, we will aim to resolve it within 2 business days from the time your complaint is first lodged and provide you with a written response.

If the matter still cannot be resolved, you will be asked to submit your complaint in writing to the Complaints Officer who will treat the matter as a dispute and refer it to an internal panel not involved in the initial process for review.

### **Dispute Resolution (Stage 2)**

Where all of the information required to deal with the dispute is available, the internal dispute resolution panel will review the dispute and provide a written response to you within 15 business days.

### **Board Review (Stage 3)**

If the dispute is still unable to be resolved to your satisfaction, you are entitled to have your dispute referred for review by the Board who will consider the matter as provided for by Rule 30 of the Rules of Unimutual Limited:

#### ***Rule 30 Disputes and Differences***

*Any disputes arising shall be solely dealt with initially by the Board or as set out below.*

#### ***Adjudication 30(1)***

*If any difference or dispute between any person and the Mutual relating to any loss, claim or demand made by that person shall arise out of, or in connection with, these Rules or a Certificate of Entry, such difference or dispute shall, in the first instance, be referred to the Mutual's internal complaint resolution officers.*

### **Dispute Resolution 30(2)**

*Subject to Rule 30(1), a dispute or difference between a Member and the Mutual may at the Member's discretion be referred to and adjudicated by the Board.*

*This will take place even if the Board has already considered the matter before any such difference or dispute arose. An application to have the Board adjudicate a matter must be in writing. The Board will deliver its decision in writing.*

### **Sole remedy 30(3)**

*No Member is entitled to maintain any action, suit or other legal proceedings against the Mutual unless in accordance with the procedures laid down in this Rule 30. In the case of a difference or a dispute which proceeds to legal proceedings, the Mutual's only obligation to a Member under these Rules and any Certificate of Entry issued will be to pay such sum as may be directed by an award or judgment.*

Unimutual is not a member of an External Dispute Resolution Scheme as the Board cannot surrender its unfettered discretion on claims – which would be required under a binding external dispute resolution process. For this reason the decision of the Board is final.

### **How We Handle Personal Information**

In the event that we receive personal information, we will collect, store and disclose this in accordance with the Ten National Privacy Principles, the *Privacy Act 1988* and our Privacy Policy.

If you would like to receive further information relating to our privacy policy, or to submit a complaint, please write to or contact:-

The Privacy Officer, Unimutual Limited, PO Box H96, Australia Square, NSW 1215 or contact us on telephone: 02 9247 7333.

### **If you have a complaint**

If you have a complaint in relation to any of our products or services, please address these in writing to:-

The Complaints Officer, Unimutual Limited, PO Box H96, Australia Square, NSW 1215 or contact us on telephone: 02 9247 7333.

The Complaints Officer will acknowledge receipt of your complaint within 5 business days, enter the Complaint in the Complaints Register and provide you with information relating to the process.

### **We accept Compliments**

We would like to hear from you about positive experiences you might have had with us. Please contact:-

The Chief Operating Officer - Unimutual Limited, PO Box H96, Australia Square, NSW 1215 or contact us on telephone: 02 9247 7333.

### **Code Monitoring Enforcement & Review**

The Compliance Officer will monitor and enforce compliance with the Code.

The Compliance and Governance sub-committee will review the Complaints register at each of its meetings and report to the Board

The Code will be subject to annual review by the Compliance Officer reporting to the Board of Unimutual Limited through the Compliance and Governance sub-committee.