



DOCUMENTATION OF PROCESSES/ PROCEDURES AND RELEVANT WORKFLOW FOR ALL SERVICES IN THE SERVICE DELIVERY CHARTER.

SERVICE: REGISTRATION OF INSURANCE BROKERS AND INSURANCE SERVICE PROVIDERS

(Documented Processes & Workflow)

1. Purpose

The purpose of this procedure is to ensure systematic, effective and timely registration of insurance intermediaries and insurance service providers.

2. Scope

This procedure applies to the registration of intermediaries and insurance service providers from receiving the application, processing and communicating with the applicant.

3. References

4. Terms/Definitions

- **Service Providers** – persons licensed under section 150 of the Insurance Act.
- **Intermediary** - means a person who in the course of any business or profession invites other persons to make offers or proposals or to take other steps with a view to entering into contracts of insurance with an insurer but does not include a person who merely publishes invitations on behalf of, or to the order of, some other person.
- **RO/RD**-Records Office/ Records Database.

Responsibility

The Manager Supervision shall be responsible for ensuring that the procedure is complied with.

PROCESS

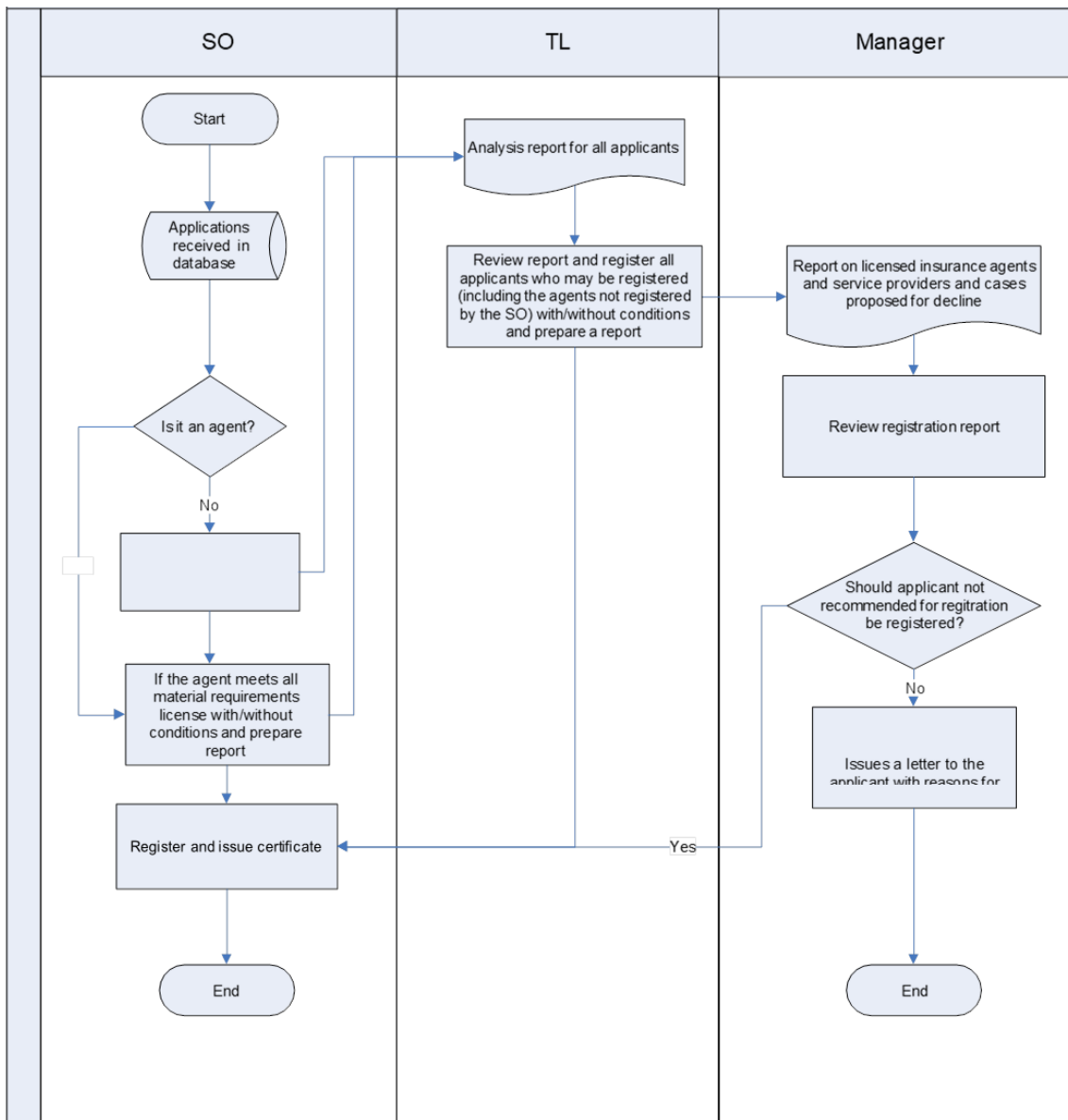
1. The applicant shall submit the application through the online registration portal.
2. In case the applicant is an agent, the Supervision Officer shall review the application and confirm that the applicant has paid the requisite fee and met the requirements for registration.
3. If the applicant has met the requirements, the Supervision Officer issues a license. Otherwise, the Supervision Officer rejects the application with reasons and communicates to the applicant within 1 day.

NOTE: New agents who meet the requirements for registration will be licensed within 3 days and agents renewing their registration will be registered within 15 days.

4. In case of brokers and other service providers, the Supervision Officer shall analyze the applications against the requirements check-list and make a report to the Team Leader. The report shall specify the applicants recommended/not recommended for registration. The report shall include the reasons underlying the recommendation. This shall be done within (3) days in the case of a new broker and/or service provider and within (10) days an existing broker and/or service providers.
5. The Team Leader shall within 3 days review the analysis done by the Supervision Officer and approve for registration applications that meet the requirements.
6. The Team Leader shall within 1 day make a report to the Manager clearly identifying brokers and service providers that have been registered/not recommended for registration. The Manager shall consider the report and within 1 day make a determination and communicate to the intermediaries that are not being registered clearly specifying the reasons for non-registration and any conditions to be fulfilled before registration.

WORKFLOW

Registration of intermediaries and service Providers



SERVICE: LIEN APPROVAL: CREATION, LIQUIDARION, ROLL-OVER, CANCELLATION

(Documented process & workflow)

1. Purpose

The purpose of this procedure is to ensure effective, systematic and timely processing of deposits required under sections 32 and 156 of the Insurance Act.

2. Scope

This procedure covers lien creation, roll-over, cancellation and liquidation for insurers, brokers and medical insurance providers.

3. References

4. Terms/Definitions/Abbreviations/Acronyms

- **Lien** – deposits kept by insurers and insurance brokers with Central Bank of Kenya in Government securities as provided for under Sections 32 and 156 of the Insurance Act.
- **Lien creation** – process of making deposits with CBK held in favour of IRA.
- **Lien roll-over** – the process of reinvesting a maturing treasury bill/bond.
- **Lien Cancellation** – process of lifting the charge on an existing treasury bill/bond before maturity.
- **Lien Liquidation** – is a process where applicants

request to utilize funds from matured treasury bills/bonds.

- **Prescribed Forms** – standard lien creation/roll-over/cancellation forms provided by the CBK
- **Authorized Signatories** – Officers approved by CBK to sign Lien related documents on behalf of IRA

Responsibility

The CMT shall be responsible for ensuring that this procedure is complied with.

PROCESS

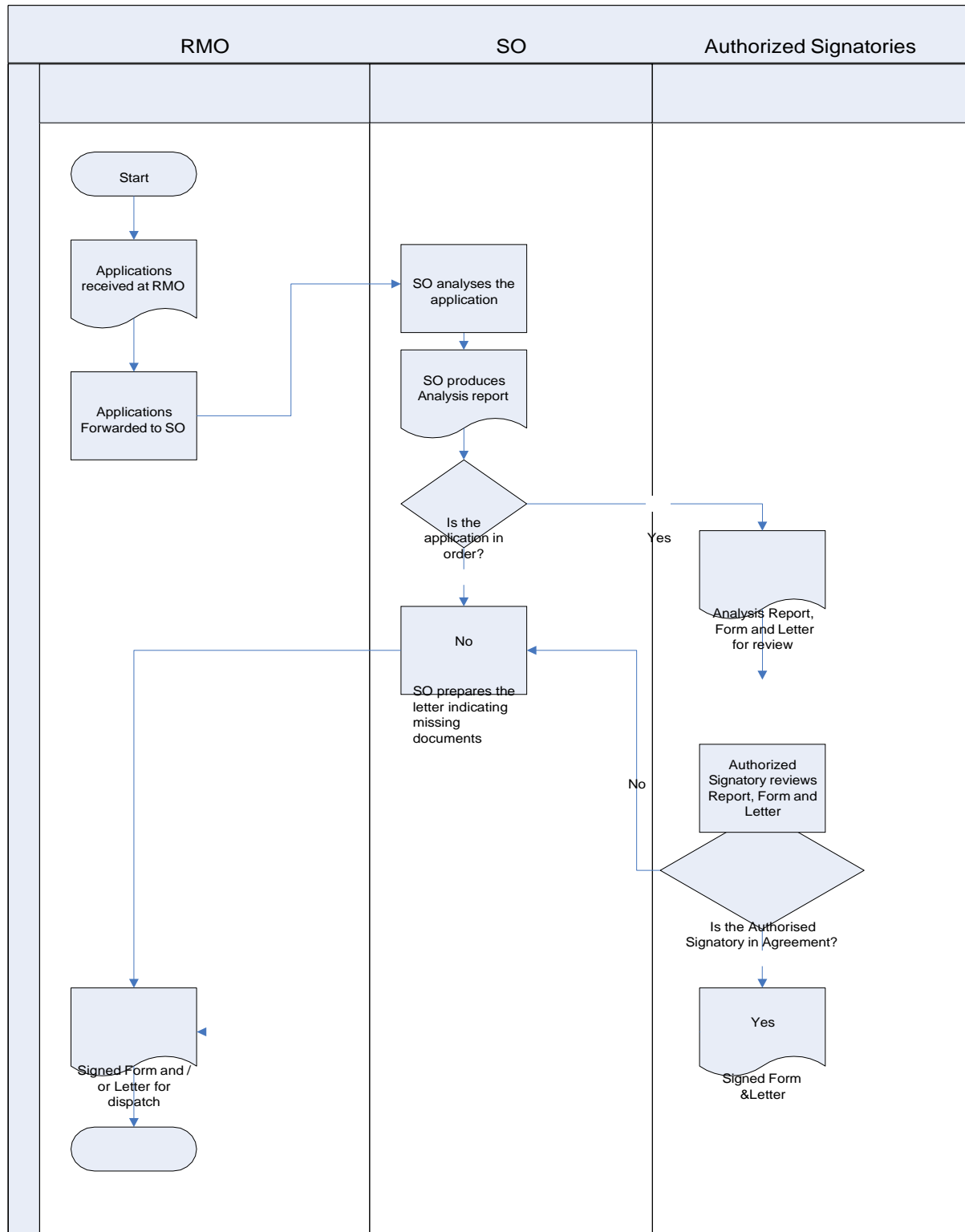
1. Applications are received by RMO, registered and forwarded to the SO for analysis within 1 day.
2. The SO shall analyse the application within 1 day of receipt of application and if it meets the requirements, the SO shall complete the prescribed forms. Otherwise, the SO drafts a letter indicating reasons for declining the approval to the applicant.

NOTE: There shall be no analysis of lien for brokers and medical insurance providers. There are also no prescribed forms in the case of lien liquidation.

3. The SO shall forward the analysis report, completed prescribed forms and/or no-objection letter to the signatories within the same day.
4. The Authorised signatories shall then review the analysis and check the forms and/or no-objection letter and if in agreement, sign within the same day. Otherwise, the report, prescribed forms and/or no-objection letter, will be returned to the SO for correction or further analysis and completion within the same day.

Work flow

Lien Approval: Creation, Liquidation, Roll-over, Cancellation



PROCESS OF PAYMENT

1. After receipt of goods, works or services, an inspection team shall conduct an inspection within 6 days. If the goods are accepted, they shall be received. HODs shall request a payment and submit supporting documents to the Assistant Accountant (AA). The Inspection Report shall form part of the supporting documents from the Procurement Section.
2. AA shall verify the documents against the terms of payment and prepare a payment voucher within 1 day. If the payment documents are inadequate to fully support the payment, they shall be referred back to the HOD within the same day.
3. The AA shall forward the payment voucher to the Assistant Manager Finance (AMF) for checking within 1 day. Once checked, the AMF shall forward to the Chief Manager Finance (CMF) for approval of payment within 1 day.
4. After approval of the Payment Voucher, a payment instruction/cheque shall be prepared by the AA and entered in the cheque register.
5. The signatories shall sign the payment instructions/cheque and the cheque register appropriately within 2 days of receipt.
6. The AA shall record the approved cheques in the cheque dispatch register. The cheque is dispatched to the payee(s)/bank and advises the payee within 1 day.

SERVICE: PRODUCT APPROVALS

(Documented processes & workflows)

1. Purpose

The purpose of this procedure is to ensure efficient, timely and systematic analysis of proposed insurance products by insurers.

2. Scope

This procedure covers analysis of new and re-packaged insurance products.

3. References

4. Terms/Definitions/Abbreviations/Acronyms

- **Product** - means insurance cover that an insurer intends to offer to the market.

- **Repackage** – means changing or modifying the salient features of existing products.
- **MA** - Manager Actuarial
- **MS** – Manager Supervision

Responsibility

The CMT shall be responsible for ensuring that the procedure is complied with.

PROCESS

1. The applicant shall submit the application through the online application portal.
2. The AO shall check the documents for completeness within 1 day.
3. If the documents are complete, the AO shall analyse the application and submit a report to the MA and MS for review and consultation within an additional five (5) days.
4. Where documentation is incomplete, the AO shall advise the applicant within 1 day.
5. The MS shall then assess the report and make a determination of whether the product should be approved/not approved within 2 days and the decision is communicated to the applicant vide a letter.

SERVICE: INQUIRIES & COMPLAINTS

(Documented Inquiries/Complaints)

1. Purpose

The purpose of this procedure is to guide on handling of complaints received at IRA.

2. Scope

This procedure applies to all complaints received against IRA or its employees in the course of their duties and covers their receipt, registration, acknowledgment and resolution.

3. Reference

ISO 10002 International Standard-Customer Satisfaction-Guidelines for complaints handling in organizations

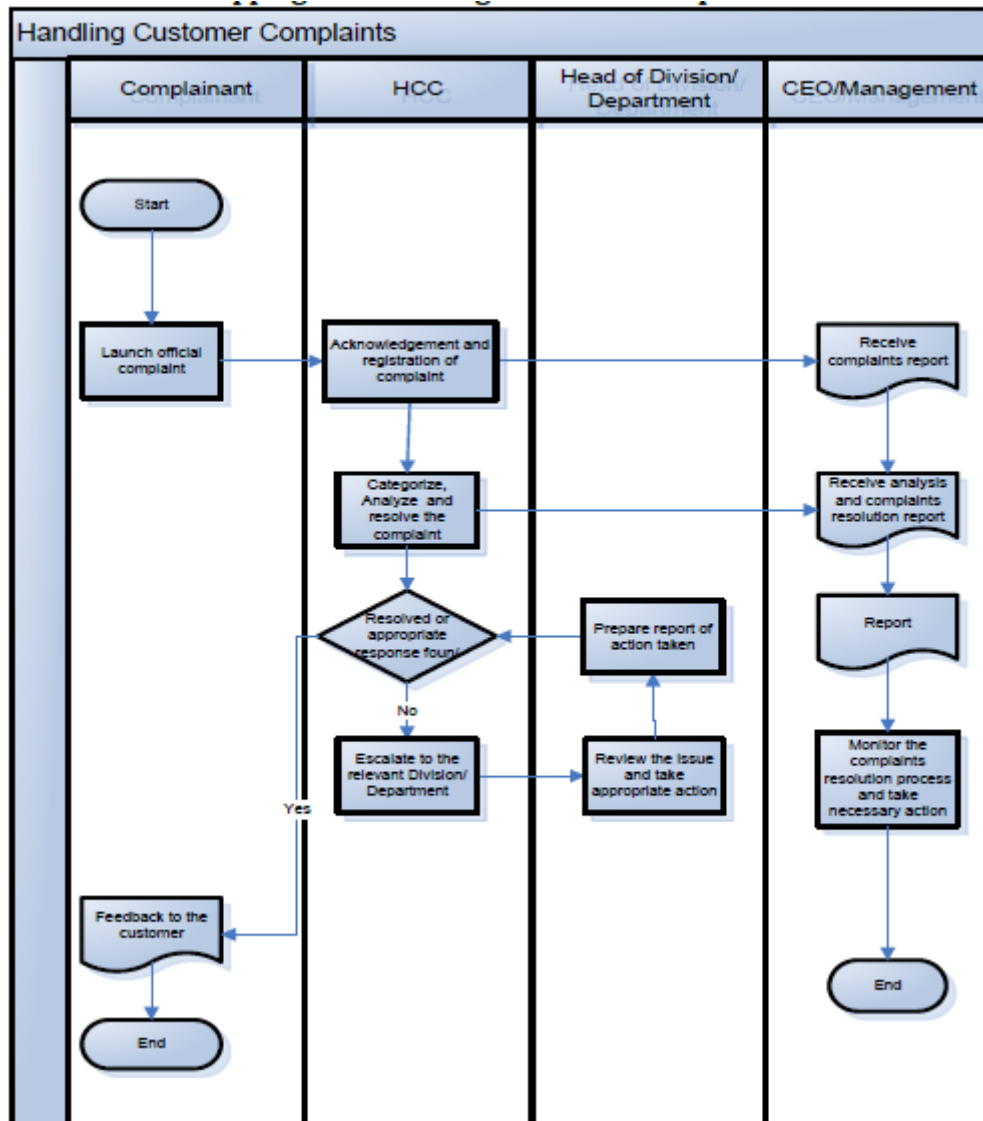
4. Terms, definitions, abbreviations and acronyms

- **CRO:** Customer Relations Officer
- **Complainant:** person, organization or its representative making the complaint
- **Complaint:** expression of dissatisfaction made to IRA relating to its services or the complaints-handling process itself, where a response or resolution is explicitly or implicitly expected.
- **Customer:** organization or person that receives a service.

Responsibility

The HCC shall be responsible for ensuring that this procedure is complied with.

Workflow



SERVICE: RESOLUTION OF CONSUMER COMPLAINTS AND DISPUTES

(Documented processes & workflow)

1. Purpose

The Purpose of this procedure is to guide the resolution of consumer complaints.

2. Scope

The consumer protection procedure will apply to complaints from policy holders and beneficiaries received in the Authority.

3. References

The Insurance Act

Consumer Protection Policy

4. Terms/ Definitions

- **MCP:** Manager Consumer Protection
- **CPO:** Consumer Protection Officer
- **LO:** Logistics Officer

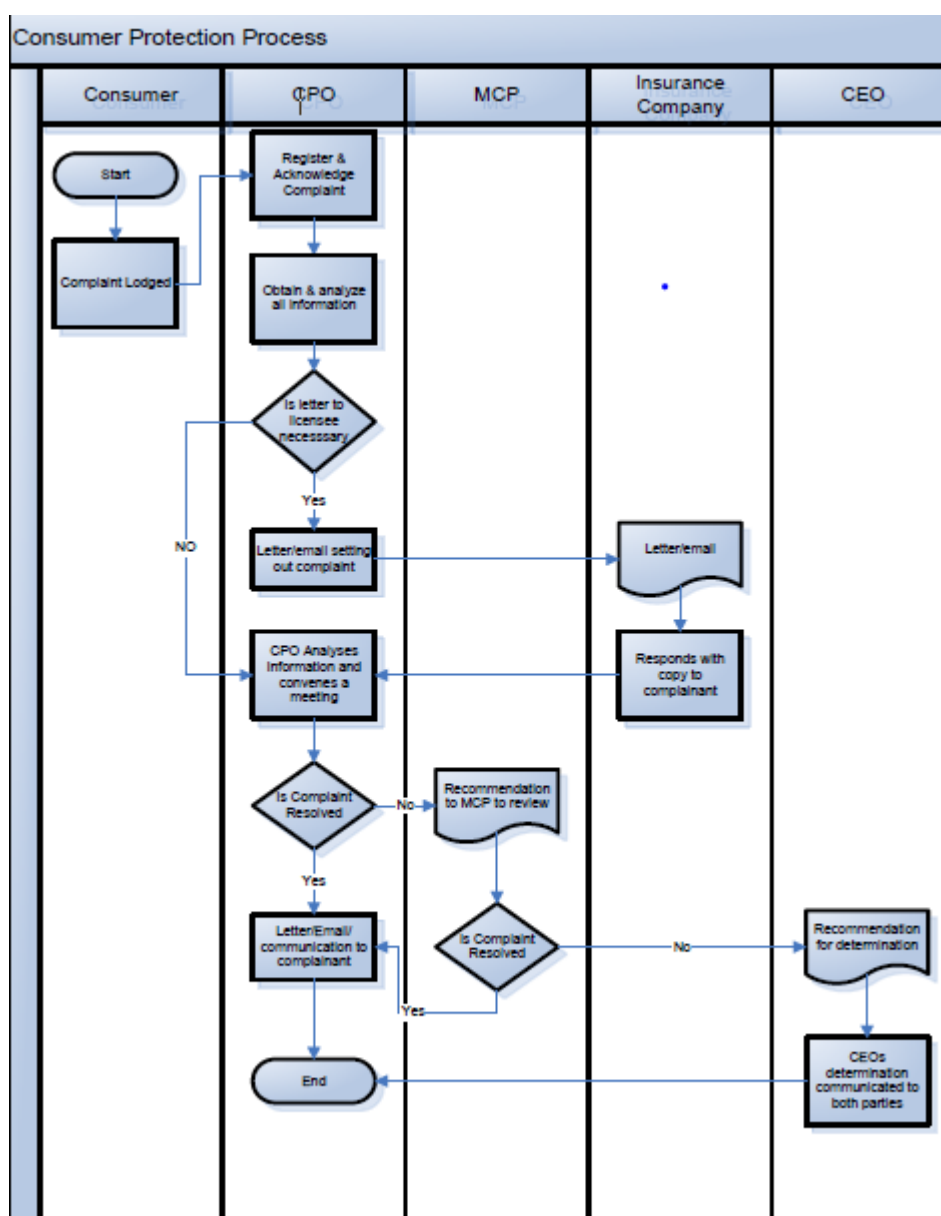
Responsibility

The MCP is responsible for ensuring that the process is complied with.

PROCESS

1. The MCP shall upon receipt of a complaint, allocate within two (2) days to the CPO for action.
2. The CPO shall within three (3) days of receipt, register and acknowledge the complaint and send a letter to the insurance company concerned.
3. The CPO shall within twenty five (25) days, obtain and analyse all the necessary information from all parties, including convening meetings between parties to resolve the complaint.
4. Decision of the CPO shall be communicated within five (5) days of the meeting.
5. Where the complainant is dissatisfied with the decision by the CPO, the CPO shall prepare a brief within five (5) days for MCP's consideration. determination and advice to the parties.

6. The MCP shall review the complaint including convening meetings between parties where necessary and communicate the decision to all parties within five (5) days.
7. Where the complainant is dissatisfied with the decision by MCP, MCP shall prepare a brief within five (5) days for consideration and guidance by the CEO.
8. The CEO will give guidance within five (5) days of receiving the brief.
9. The MCP shall communicate CEO's determination to all parties involved within five (5) days of guidance. The complaints data base shall be updated to reflect the decision.



The documentation of the two services below is in progress.

1. Miscellaneous approval for Expatriate/Directors/ PO/Mgt Staff
2. Notification of Procurement outcome