

The complaint

Mr R complains about the way Inter Partner Assistance SA (IPA) handled a medical assistance claim he made on a travel insurance policy.

Mr R is represented by Ms L.

What happened

The background to this complaint is well-known to both parties. So I've simply set out a summary of what I think are the key events.

Mr R was abroad on holiday. Unfortunately, he became very unwell and was admitted to hospital for treatment. A claim was made on Mr R's policy for his medical expenses.

IPA accepted the claim and it concluded that Mr R needed to be repatriated back to the UK along with a medical escort. It spoke with the treating hospital on 10 October 2023 to let it know that it planned to repatriate Mr R on 12 October 2023. At this point, the treating hospital told IPA that Mr R was medically ready to be discharged but that it had kept him on the ward, without medical care, for social reasons.

On 11 October 2023, Ms L called IPA because she said the treating hospital was trying to force Mr R out, even though it had agreed he could remain there until his repatriation. She said the treating hospital had told her that Mr R needed to be transferred to a private hospital. IPA told Ms L that the nurse escort was on their way and that if the treating hospital was adamant that Mr R needed to be discharged, it would make arrangements for him to be moved. It seems that the treating hospital did allow Mr R to stay until the following day, to allow repatriation.

It appears that the repatriation ran smoothly. However, Ms L was very unhappy with the way IPA had handled Mr R's medical assistance claim. She said that the hospital had failed to provide adequate care for Mr R, including leaving him in dirty conditions, with inadequate toilet facilities; with little food; and she said items of jewellery had gone missing. Ms L also told IPA that the hospital had caused Mr R an injury. She said this had had a real impact on Mr R's physical and mental health. She felt IPA should have arranged for Mr R to be moved to a private hospital and that the British Consulate had been of the same view. She added that she'd often had difficulties in getting through to IPA and had faced long waits on calls.

IPA accepted it could have taken steps to put Mr R in a private hospital and that this had caused him distress and upset. It also acknowledged that some of the calls hadn't been handled as well as they should have been and that call times were excessive. So it offered to pay Mr R £300 compensation.

Mr R was unhappy with IPA's offer and so Ms L asked us to look into his complaint.

Our investigator thought IPA had already made a fair offer of compensation. He acknowledged that Mr R had been through a very difficult time. But he didn't think IPA was responsible for any failings by the treating hospital. And he didn't think IPA had been made

aware that there was an issue with Mr R's care until the day before the repatriation. Overall, he considered £300 was a fair award to reflect the impact of IPA's mistakes on Mr R.

Ms L disagreed on Mr R's behalf and so the complaint's been passed to me to decide.

What I've decided – and why

I've considered all the available evidence and arguments to decide what's fair and reasonable in the circumstances of this complaint.

Having done so, whilst I'm very sorry to disappoint Mr R, I think IPA has already made a fair offer of compensation and I'll explain why.

First, I'd like to reassure Mr R and Ms L that while I've summarised the background to this complaint, I've carefully considered all that's been said and sent. It's clear that Mr R suffered a serious illness abroad and I don't doubt what a worrying and stressful time this was for him and his family. I do hope he's made a good recovery.

It's important I make clear our role. We're not the industry regulator and so we have no power to tell a business to change its processes or procedures. Nor can we fine or punish the businesses we cover. Our role is to consider whether a financial business' error has caused a consumer to suffer financial loss and/or material distress and inconvenience. And, if we think it has, we'll then decide what we think fair compensation should be, taking into account the individual circumstances of each complaint.

The relevant regulator's rules say that insurers must handle claims promptly and fairly. I've taken those rules into account, together with other relevant considerations, such as the regulator's principles, industry guidance and the available evidence, to decide whether I think IPA treated Mr R fairly.

IPA accepts it didn't handle Mr R's claim as well as it should have done. So it's offered £300 compensation to reflect the impact of its claims handling on him. This means I need to decide whether I think this offer is fair and reasonable.

I've looked carefully at IPA's claims handling notes, which set out details of the interactions between Ms L and IPA and the treating hospital and IPA. I can see that on 9 October 2023, IPA spoke with the treating doctor, who told them that it was making arrangements to repatriate Mr R. While the treating doctor said Mr R was fit to be discharged, they don't appear to have indicated that the hospital was planning to ask Mr R to leave or that IPA needed to make arrangements to transfer Mr R elsewhere until the date of his repatriation. And on 10 October 2023, IPA spoke with the treating hospital again to confirm that it was planning to repatriate Mr R on 12 October 2023. While the doctor told IPA Mr R had been medically discharged, it also said he was remaining in the hospital for social reasons. Again, I don't think there's enough persuasive evidence to show that the treating hospital told IPA that Mr R needed private medical treatment or that it had required him to leave.

On 11 October 2023, the day before Mr R's repatriation, I can see that both the British Consulate and Ms L got in touch with IPA. It was at this point that Ms L told IPA the treating hospital was forcing Mr R to leave and asked for him to be transferred to the private hospital. It seems IPA considered doing so, but it decided to wait until the medical escort had arrived at the hospital later that day to confirm whether or not Mr R could remain there until the following day. Based on the evidence I've seen, including a discussion between IPA and the treating doctor about the medication the hospital would prescribe up until 12 October 2023, it seems that the hospital did allow Mr R to remain there until the repatriation took place.

Based on all I've seen; I don't think IPA was made aware of how bad the situation was until 11 October 2023 – the day before the repatriation. I don't think the evidence shows IPA ought reasonably to have been put on notice either that the treating hospital was potentially trying to make Mr R leave or that there were problems with the overall standard of the hospital and Mr R's care.

IPA acknowledges that it could have taken steps to move Mr R to a private facility and I think this might have been appropriate in the circumstances. It appears that once Ms L had notified it about the situation on 11 October 2023, it did consider moving Mr R to a private facility. I think it would have been helpful if it had done so. It's clear from all Ms L has told us that Mr R was very upset by the situation and that this had a real effect on him physically and mentally. I think that had IPA taken steps to move Mr R, the impact on him could have been mitigated and his distress and inconvenience could have been lessened.

But I also need to bear in mind that Mr R was repatriated the day after IPA learned about the situation from Ms L. And I need to bear in mind too that IPA isn't responsible for the care the treating hospital provided or for any loss of Mr R's jewellery items. So while I think IPA could have moved Mr R sooner, ahead of his repatriation, it seems to me that many of Ms L's and Mr R's understandable concerns are about the hospital itself.

IPA accepts that there were issues with the way Ms L's calls were handled and that there were excessive wait times. While Ms L herself wasn't insured by this policy, I don't doubt that waiting for updates and information about what was happening did cause Mr R some additional, unnecessary trouble and upset.

Overall, in the round, whilst I know how strongly Ms L and Mr R feel about this matter, I find that the £300 compensation IPA has already offered is a fair, reasonable and proportionate award in all the circumstances, to reflect what I think is the likely impact of its claims handling errors on Mr R. IPA must now pay this amount to Mr R if it hasn't already done so.

Ms L told us that she was still waiting for full payment of the claim. It doesn't appear that IPA has had a chance to look into any concerns about this particular issue though and so it wouldn't be appropriate for me to comment on it here. If Ms L and Mr R feel that the claim hasn't been fully or properly settled, they'll need to make a new complaint to IPA about that issue alone before we can potentially look into it.

My final decision

For the reasons I've given above, my final decision is that Inter Partner Assistance SA has already made a fair offer to settle this complaint and I direct it to pay Mr R £300 compensation if it hasn't already done so.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr R to accept or reject my decision before 8 November 2024.

Lisa Barham
Ombudsman