

The complaint

Ms S complains about the way St Andrew's Insurance Plc has handled a claim she made on her home insurance policy for damage caused by subsidence.

Any reference to St Andrew's includes its appointed agents.

What happened

In 2019 Ms S noticed damage in her home, she thought it might have been caused by subsidence. She contacted St Andrew's who accepted the claim; repair works were completed in early 2021.

In late 2021 Mrs S noted more cracks in the property, she contacted St Andrew's again. She said it took a long time for anyone to respond, but in 2023 St Andrew's suggested more monitoring at the property should take place over the summer.

However, in September 2023 St Andrew's said it hadn't been able to gain access to the property over the summer to carry out readings as Ms S had been away. She complained to St Andrew's, she said she was told as the monitoring points were on the outside of the building, it should have still been able to take the results. She wanted another firm appointed to complete the monitoring, which was due to end in October 2023. She also wanted a different team appointing to carry out repairs and an apology from St Andrew's.

In November 2023 St Andrew's issued a complaint final response letter (FRL). It said it was sorry it hadn't provided a better service in relation to the monitoring, and it issued £150 compensation. But it said it couldn't ask another company to take over the monitoring. It said Ms S could appoint her own supplier to do the monitoring, but it would only pay her what it would cost it to carry out the readings.

Unsatisfied with the response, Ms S referred her complaint to the Financial Ombudsman Service for an independent review. Our Investigator thought St Andrew's had delayed the monitoring for around 13 months, given Ms S had been in touch with it about cracks worsening in 2022. He felt, to recognise the distress and inconvenience caused during that period, St Andrew's should pay £700 compensation.

St Andrew's accepted the outcome. Ms S didn't. She gave reasons why she felt the compensation should be higher. These included that during that time she'd become a carer for a relative, which was challenging whilst working full time. She also said she'd done the insurer's job of chasing the monitoring team over thirteen months. She said compared to the cost of her insurance, £700 wasn't enough.

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.

As this is an informal Service, I'm not going to respond to every point made or piece of evidence referred to by the parties. But I'd like to reassure both that I have read, and considered, everything provided. Like our Investigator I've only considered matters up to

November 2023. If the claim is still ongoing and there are further concerns for Ms S, she'll need to raise them with St Andrew's in the first instance.

St Andrew's has accepted the compensation, so it isn't in dispute that it did cause the delays and resultant upset set out by our Investigator. So, I won't revisit those in detail, I agree with out Investigator that St Andrew's handling likely delayed the claim by around 13 months. As such I'll consider whether the compensation fairly reflects the impact of those mistakes.

Our compensation awards are to reflect the additional distress and inconvenience (over and above that which will always be experienced when having to make a claim) as a result of a business' mistake, or mistakes.

St Andrew's mistake was in not starting the monitoring earlier, and not taking readings over the summer, which extended the monitoring period. An award of £700 is appropriate where the impact of a business's mistake has caused considerable distress, upset and worry – and/or significant inconvenience and disruption that needs a lot of extra effort to sort out. Ms S said she felt she, at times, was doing the insurer's job in chasing matters up. I can see that was the case at points, but I'm satisfied the award of £700 accounts for that. Whilst I understand that Ms S's situation means she may have been more impacted than others who might experience similar issues with an insurer, I'm satisfied the £700 award is fair and reasonable in Ms S's circumstances.

I'm sorry to hear it's been a difficult time for Ms S, I've no doubt becoming a carer whilst working full time would be stressful and challenging. We generally award higher levels of compensation where daily life has been seriously disrupted over a sustained period, due to mistakes made by a business. It seems from what Ms S is saying that her life was seriously disrupted, but this was mainly down to family matters, rather than owing to St Andrew's not starting the monitoring earlier. Whilst I understand Ms S has been left with a damaged property for longer than she likely would have otherwise been, I'm not satisfied this has impacted her daily life such that St Andrew's needs to make a higher award of compensation.

My final decision

My final decision is that I uphold this complaint and I direct St Andrew's Insurance Plc to pay a total of £700 compensation, less any amount already paid.

Under the rules of the Financial Ombudsman Service, I'm required to ask Ms S to accept or reject my decision before 27 March 2025.

Michelle Henderson Ombudsman