

The complaint

Miss T complained about how Royal & Sun Alliance Insurance Limited (RSA) dealt with a claim under a home insurance policy in the name of Miss T and Mr R.

As Miss T dealt with the claim and complaint, for ease, I will only refer to her.

References to RSA include companies acting on its behalf.

What happened

Miss T contacted RSA to make a claim following a water leak. Miss T needed to arrange trace and access in order to deal with the leak. RSA said it would appoint a company to carry out repair works.

Miss T later complained about RSA's poor service and communication. When RSA replied, it explained what had happened during the claim. It accepted there had been service failings during the claim, including poor communication. It offered £100 compensation.

When Miss T complained to this Service, our Investigator upheld the complaint. He said there were occasions where RSA didn't proactively progress the claim, including when Miss T requested a cash settlement. He said there were unnecessary delays of five to six weeks. He said RSA should pay a total of £300 compensation, which included the £100 previously offered, to reflect the impact of its failings.

As Miss T didn't agree the compensation fairly reflected the impact on her, the complaint was referred to me.

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, I uphold this complaint. I will explain why.

When Miss T found a leak in her home, she arranged for a plumber to stop the leak. A couple of days after this, Miss T reported the claim to RSA. During that call, RSA asked Miss T to submit her plumber's invoice so it could review it.

Looking at RSA's records, I can see that a month later RSA tried to phone Miss T. However, it reached her voicemail. The call was to apologise that it hadn't appointed a company to deal with the claim and to request photos and a cause of damage report. About two weeks later, Miss T phoned for an update. She said she wasn't aware she needed to provide a cause of damage report. She said she would arrange this. A couple of weeks later, Miss T's plumber completed the leak repair. So, I think there were some unnecessary delays caused by RSA at this stage. It didn't appoint a company when it should have. I think it could also have more clearly explained to Miss T what it needed from her and done so more promptly.

Following this, the claim seemed to progress over the next few weeks. Miss T then asked RSA for a cash settlement. RSA didn't seem to respond to deal with this until Miss T phoned just over a week later and said she wanted to make a complaint. I note that RSA then paid the cash settlement just under two weeks later.

Miss T has described the impact and distress that RSA's handling of the claim caused her. She also said that sometimes when she spoke to RSA the call would disconnect and RSA didn't phone her back. She would then end up in a call queue again. She also described the impact of not having a fully functional bathroom and that she would visit family and friends in order to have a shower. She also explained that she was going through difficult personal circumstances at the time.

So, I've thought about compensation. I'm mindful an incident that leads to a claim is always likely to cause a certain level of inconvenience to a policyholder, even where a claim is dealt with well. Miss T also needed to arrange for the full trace and access to be completed, although I'm aware she was unclear about what RSA needed her to do, including because of its poor communication. I also think there were unnecessary delays that appear to have added a few weeks to the claim up to the point when RSA made the cash settlement payment.

RSA offered £100 compensation. Thinking about this, I think a total of £300 more fairly reflects the impact on Miss T because of how RSA dealt with the claim and its poor communication. I'm aware Miss T doesn't think this fairly reflects the impact on her. But having looked at the full circumstances of what happened and the level of compensation I would normally expect to be paid in situations like these, I think this is a fair amount.

My final decision

For the reasons I have given, it is my final decision that I uphold this complaint. I require Royal & Sun Alliance Insurance Limited to pay £300 compensation. This includes the £100 it previously offered.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr R and Miss T to accept or reject my decision before 20 February 2025.

Louise O'Sullivan
Ombudsman