

The complaint

Mr T, a sole trader, complains about the handling of his commercial vehicle insurance claim by Covea Insurance plc.

What happened

The following is intended only as a brief summary of events. Additionally, for the sake of simplicity, even where other parties have been involved in correspondence, etc. I have largely just referred to Mr T and Covea.

Mr T holds a Motor Trade Road Risks insurance policy underwritten by Covea. In early February 2024, Mr T contacted Covea to make a claim for theft. Covea started to investigate the claim. It requested evidence and information from Mr T, and also had an agent visit Mr T. Mr T has said that he provided all the relevant information that was available to him. Covea told Mr T it was also waiting for a copy of the police report.

Mr T expressed dissatisfaction that Covea was continuing to request information that he had already provided – or that he said was not available. And that no decision had been made on his claim. This was expressed in an email dated 12 June 2024.

Mr T then brought his complaint to the Ombudsman Service. We requested Covea provide its file and chased for this, but it was not received by the relevant deadline. Our Investigator reached his view on Mr T's complaint in early September 2024, without having received Covea's file.

Our Investigator thought that, whilst an insurer is entitled to carry out an investigation of a claim, Covea had not demonstrated that it had progressed matters appropriately. It had not provided evidence that it had made appropriate efforts to obtain the police report. And Mr T had been inconvenienced by the claim process and apparent delay. So, our Investigator thought Covea should pay Mr T £250 compensation and that, if a police report could not be obtained promptly, it should assess the claim based on the evidence available.

Covea then provided its complaint file and issued its response to Mr T's complaint. It said that it was entitled to request the evidence it deemed necessary, and that obtaining a police report can be a long process. Covea's file included a timeline that indicated the police report had been requested in April 2024 and chased in September 2024. But our Investigator was not persuaded to change his view, as he did not consider this was adequate. And that Covea had not demonstrated there hadn't been a period of unavoidable or unreasonable delay.

As our Investigator was unable to resolve the complaint it was passed to me for a decision.

Covea has recently said that the police report is expected soon.

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 am upholding this complaint. I'll explain why.

Insurers are, as Covea has said, entitled to request evidence that is reasonably necessary for them to validate and assess claims. And this includes obtaining police reports where this is relevant to the circumstances of the claim.

However, Covea is required, by specific and more general rules set by the Financial Conduct Authority, to progress claims appropriately. This means that delays should be avoided and/or minimised where possible. In the circumstances of this complaint, that means Covea ought to have requested the police report at an early stage in the claim process.

It appears that Covea met with Mr T on 2 April 2024. However, it doesn't seem that a request for the police report was made until around three weeks after this. It doesn't seem that any further action was then taken by Covea to obtain the police report until after our Investigator had issued his view in September 2024.

Whilst the provision of a police report is somewhat out of the hands of the insurer, I would expect the insurer to request this without delay and to then regularly chase for this if not received within a reasonable timeframe. I don't consider it was reasonable for Covea to just leave this matter for almost five months.

Covea has indicated that a police report ought to be available to it shortly. However, had Covea acted as it should have, it most likely would have already had this report. And it would have been in a position to reach its decision on the claim.

Additionally, whilst I do note that Mr T has not been able to provide Covea with all of the evidence it considers it needs, it seems that Covea repeatedly asked Mr T for the same information. It did not provide adequate clarification of why certain information might not meet its requirements, nor what Mr T might be able to provide as an alternative. I consider Covea also ought to have done more here to assist Mr T in pursuing his claim. And that by not doing this, Covea caused him avoidable distress and inconvenience.

I have considered whether Covea's failure to meet the deadlines set by the Financial Ombudsman Service has caused Mr T further avoidable distress and inconvenience that warrants additional compensation. However, whilst Covea did likely cause a delay in our Investigator reaching his view, Covea did not agree with the outcome anyway. Covea is entitled to ask for an Ombudsman's decision. So, in the round, whilst Covea ought to have met the time limits it was set, I don't think this has caused Mr T material distress or inconvenience in itself.

Putting things right

Covea Insurance plc should put things right by paying Mr T £250 compensation for the distress and inconvenience caused by its claim handling.

Covea Insurance plc should also make an assessment on Mr T's claim within 28 days of this decision being accepted, based on the evidence it has available at that time.

My final decision

My final decision is that I uphold this complaint. Covea Insurance plc should put things right as set out above.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr T to accept or reject my decision before 26 November 2024.

Sam Thomas
Ombudsman