

The complaint

Mr and Mrs B have complained about the way HDI Global Speciality SE handled a claim they made on their buildings insurance policy.

Reference to HDI includes its agents and representatives. As Mr B has primarily dealt with things, I'll refer to him only for ease of reading.

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.

Our investigator thought HDI had acted unfairly and should pay £750 compensation. Mr B accepted this. HDI responded after the deadline. It didn't say whether it agreed with our investigator, but it didn't challenge her recommendation. I agree with our investigator, and for the same reasons. In these circumstances, I don't think there's a benefit for me to go over everything again in detail. Instead, I'll summarise the main points:

- In April 2024, Mr B got in touch with HDI to make a claim for storm damage. HDI accepted the claim and settled it by carrying out repairs, which were fully complete in February 2025.
- Mr B complained about the way the claim had been handled, including:
 - Mr B was initially left to take steps to make the roof watertight, before HDI later carried out a temporary repair. That allowed for further water damage.
 - A lack of communication, which meant Mr B often had to chase for progress and updates. And HDI didn't provide a clear schedule of work, despite Mr B asking for one numerous times – and taking steps to create one himself.
 - The overall time taken to complete the work, in part due to a lack of oversight and management of contractors, and poor workmanship.
 - HDI appointed a number of different agents and representatives, including contractors with significant travel times, and wasn't directly involved.
 - As a result, Mr B and his family have suffered an emotional and practical impact over a long period of time. He didn't think his wife's disability had been taken into account, though HDI was aware of it throughout. And he had to spend a lot more time engaged with the claim than he should have done.
- HDI agreed with most of the points Mr B made and accepted it had caused avoidable distress and inconvenience during the claim. It offered £500 compensation. Mr B didn't think went far enough to put things right.
- HDI is required to handle claims promptly and fairly, and act fairly and reasonably at all times. It's accepted it failed to meet these requirements – so that's not in dispute.
- Where an insurer has accepted it made mistakes, my role is to consider what it should do to put things right. In this case, that means considering what a fair and

reasonable amount of compensation. To do that, I've taken into account Mr B's specific circumstances, including the length of the claim, the way it was handled, the complaint points he made, and the impact on him and his family.

- I've considered the claim history but, as the circumstances aren't in question, I don't see a need to set out the details here. It's quite clear there were avoidable delays, in part due to poor claim management and poor workmanship, as well as poor communication. All of this would inevitably have made a difficult experience more distressing and inconvenient than it ought to have been for Mr B.
- Bearing all of this in mind, I'm satisfied a total of £750 compensation is fair and reasonable in the circumstances.
- I understand HDI has already paid £500 compensation. If so, it need only pay the remaining £250.

My final decision

I uphold this complaint.

I require HDI Global Speciality SE to pay a total of £750 compensation.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs B and Mr B to accept or reject my decision before 20 June 2025.

James Neville
Ombudsman