

## **The complaint**

Mr R and the estate of Mrs R are unhappy with the assistance Mr and Mrs R received from U K Insurance Limited (UKI) under their travel insurance policy.

All reference to UKI includes its medical assistance team and other agents.

## **What happened**

Mr and Mrs R were on a cruise when Mrs R became unwell. She was ultimately diagnosed as having had a heart attack. The cruise operator decided that she should be disembarked at the next port so that she could be hospitalised and receive specialist treatment.

Mr R contacted UKI to inform it of what had happened. UKI set up a case reference and said it would make its medical team aware. However, it also said there wasn't much it could do until it had received a medical report from the cruise's medical team and Mr and Mrs R been disembarked so that Mrs R could receive specialist medical treatment.

Having been disembarked, Mr and Mrs R travelled to a medical facility which Mr R says wasn't suitable. They travelled back to the port to try to re-board the cruise ship but say they weren't allowed to do so.

They ended up travelling to the airport and booked tickets for an internal connecting flight to the capital city of the country the cruise ship had docked at.

UKI had been in contact with Mr and Mrs R's relatives (in the UK) as since disembarking the cruise, Mr and Mrs R couldn't use their phone due to a lack of coverage and having no access to WIFI.

Upon landing, and on the advice of UKI, Mr and Mrs R travelled by taxi to the nearest hospital.

Mr R says this hospital wasn't suitable for the treatment Mrs R needed and they returned to the airport. After speaking to a doctor at the airport, they were told of the name of a hospital which was the most suitable for Mrs R.

They travelled by taxi to this hospital and eventually Mrs R was admitted for treatment. Very sadly, Mrs R died the following day.

Mr R raised concerns about the assistance received from UKI. It considered these and partially upheld the complaint. It accepted that there had been some service issues and offered £750 compensation. However, it said it wasn't responsible for what happened after Mr and Mrs R were disembarked from the cruise ship.

Unhappy, Mr R and the estate of Mrs R then brought a complaint to the Financial Ombudsman Service. Our investigator looked into what happened. She recommended that UKI pay additional compensation in the sum of £2,500 (so, £3,250 in total).

Mr R and the estate of Mrs R accepted our investigator's recommendation. UKI did not and raised further points in reply. These didn't change our investigator's opinion, so this complaint was passed to me to consider everything to decide.

I requested further information from the parties and in November 2025, I issued a provisional decision explaining in more detail why I was intending to direct UKI to pay Mr R and the estate of Mrs R more compensation in the sum of £2,500.

An extract of my provisional decision is set out below:

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I've considered all the available evidence and arguments to decide what's fair and reasonable in the circumstances of this complaint. That includes relevant law, UKI's regulatory obligations (including its obligation to handle insurance claims promptly and fairly) and good industry practice.

At the outset I want to pass on my condolences to Mr R and his family. I have every empathy for the situation he and Mrs R found themselves in whilst abroad. I can see this was an extremely distressing situation.

I've considered all points made by the parties (along with all other evidence). I won't be responding to each of these. I hope they understand that no discourtesy is intended by this.

Instead, I've focussed on what I think are the key issues here. The rules that govern the Financial Ombudsman Service allow me to do this as we are an informal dispute resolution service. If there's something I've not mentioned, it isn't because I've overlooked it. I haven't. I'm satisfied I don't need to comment on every point to fulfil my statutory remit.

Medical assistance whilst abroad: on the cruise and immediately after disembarkation

I'm satisfied that UKI was first contacted for assistance on 17 January 2024 in line with the policy terms.

I've listened to the call recording between Mr R and UKI's representative. Mr R told them:

- Mrs R had experienced a heart attack;
- the country where the cruise ship would be next stopping at; and
- it looked like Mrs R will be disembarked and taken to medical facility "which will hopefully save her life" but he didn't yet know the details of the medical facility.

Having taken Mr R's email address, UKI's representative also emailed Mr R after the call, and asked for the cruise operator's medical team to send over details of the medical treatment Mrs R had received to date. And, once known, the name of the hospital Mrs R would be taken to when disembarked from the cruise ship.

I've also seen Mr R's emailed response. He provides the name of the country that the cruise will "probably" stop at but that he was "unsure where we are going at this stage". And that he will "advise as soon as I know".

Early the next morning on 18 January 2024, I'm also satisfied that one of the cruise operator's representatives contacted UKI to say that Mr and Mrs R had been disembarked at a named port, was being taken to a named medical facility, that the hospital was small and Mrs R needed intensive care treatment. They asked whether UKI could do something to transfer Mrs R to a better facility. UKI's representative responded that it would assist once

the medical report had been received from the cruise operator and reviewed.

I've thought about whether UKI should've put in place alternative arrangements at the time – including a plan to evacuate Mrs R from the cruise ship.

From what I've seen, I'm satisfied that the first time UKI had been made aware of the port and name of the planned facility was on the morning of 18 January 2024. So, I don't think UKI had a reasonable opportunity to assist Mr and Mrs R further before they were disembarked from the cruise ship.

In the circumstances of this case, I don't think UKI had any control over the plan that was put in place. It wasn't made aware of the details by Mr R or the cruise operator before Mr and Mrs R were disembarked from the cruise ship. Had it been, UKI says it would've looked into alternative options rather than disembarkation at the named port.

So, whilst I've taken into account what Mr R says about what happened immediately after he and Mrs R were disembarked from the cruise ship – including travelling to an unsuitable hospital facility with no medical equipment, travelling back to the port in an attempt to reboard the cruise ship (without success), the time waiting before making their own travelling arrangements to the airport and travelling to the capital city by internal flight – I'm not persuaded that it would be fair and reasonable for me to hold UKI responsible for this in the circumstances of this particular case.

After Mr and Mrs R were disembarked from the cruise ship (until they landed at the airport), they weren't contactable by telephone or other means. So, UKI didn't know what was happening or the extent of the difficulties they were experiencing accessing suitable and emergency treatment for Mrs R.

When making this finding, I've thought very carefully about UKI being made aware by the cruise operator that Mr and Mrs R did want to return to the cruise ship, having attended the hospital near the port which was unsuitable. However, from the detailed submissions made by Mr R about the crew not wanting to let him back on the cruise ship – even to access WIFI – I think it's unlikely that UKI would've been in a position to facilitate or influence that (to either consider arranging a helicopter evacuation directly from the cruise or for Mr and Mrs R to travel to the next intended port where more suitable medical facilities may have been available).

Further, as noted above, Mr and Mrs R weren't contactable during this time, so I'm not persuaded that UKI could've reasonably done anything more, particularly as its medical team needed to review the cruise's medical report to agree a safe repatriation plan.

From what I've seen, I'm satisfied that UKI acted promptly 'behind the scenes' putting a potential repatriation plan in place, which included repatriating Mrs R by air ambulance to a nearby country once she'd been admitted to hospital and a referral letter had been prepared by the treating doctor. However, this couldn't be finalised without knowing the whereabouts of Mr and Mrs R, and they weren't contactable.

I'm satisfied that UKI's representatives were in contact with Mr and Mrs R's family about these potential plans. And because the family received a notification that airline tickets had been purchased – and through their own research – could find out where Mr and Mrs R were travelling to, UKI was aware that they were travelling to the capital city.

UKI told Mr and Mrs R's relatives that once they had landed at the airport they should travel to the nearest hospital for medical treatment.

Medical assistance whilst abroad: landing at the airport in the capital city

In the circumstances of this case, I'm persuaded that having been informed by Mr and Mrs R's family of where Mr and Mrs R were flying to, UKI should've done reasonably more to assist them when landing. Those circumstances include the urgency of the situation, the seriousness of Mrs R's condition, how long she'd gone without treatment and its conclusion that she needed emergency and suitable medical care.

In the circumstances of this case, I'm satisfied it should've reasonably researched the most suitable hospital for Mr and Mrs R to travel to when landing. Rather, than advising their family that Mr and Mrs R should attend the nearest hospital – and repeating that advice after landing.

UKI's own internal notes reflect that Mrs R needed to be treated at a centre of excellence, so I think they reasonably should've done more here to assist Mr and Mrs R, rather than simply directing them to go to the nearest hospital, which might not have been suitable (as ended up being the case).

Mr R has said that many hours were wasted travelling to and from the nearest hospital which wasn't suitable and couldn't provide Mrs R with the urgent medical care she needed, only to end up back at the airport (where they had to spend further time waiting).

Mr R has shared with the Financial Ombudsman Service the conversations he and Mrs R were having at that time, the discomfort Mrs R was in and her fears about what was happening. He says that she was in significant pain during the taxi journey back to the airport and describes how she'd resigned herself that she wasn't now going to survive, having attended a second unsuitable hospital. I thank him for sharing his account of what happened, in what must still be very difficult circumstances. I find his submissions on this point to be plausible, consistent and persuasive. And in the absence of any evidence to the contrary, I accept what he says.

I'm satisfied that Mr and Mrs R then needed to make their own alternative arrangements to attend another hospital, which UKI's internal notes from the time reflect was a preferred acute hospital in the area.

I've seen evidence that UKI did promptly provide that hospital with a guarantee of payment. However, in the circumstances of this case, I also think it would've been reasonable for UKI to have arranged for the hospital to be contacted in advance of Mr and Mrs R travelling there, to ensure they had capacity to admit her and to inform them of the reason why Mrs R had been disembarked from the cruise ship.

Mrs R had experienced a heart attack, had been disembarked from the cruise ship for over ten hours without any medical help and she and Mr R had been left to make their own arrangements and taken an internal flight with escort. Throughout this time, I accept that Mrs R was in significant discomfort, and this would've been very worrying and distressing for her and Mr R.

On the balance of probabilities, I'm satisfied that taking proactive steps would've prevented the issues Mr and Mrs R first experienced when arriving at this hospital. That includes Mr R initially being told there was "no bed" for Mrs R, so she couldn't be treated and issues around advanced payment. I'm satisfied this would've been unnecessarily distressing and frustrating and caused subsequent delays having Mrs R admitted and being treated.

This was made harder by there being a language barrier at the hospital she was eventually admitted to and Mr R not being able to access WIFI, or obtain a medical report to help with

repatriation plans. Not understanding what was going on, I accept would've also contributed to an already worrying situation.

For reasons explained above, I'm persuaded that it isn't fair and reasonable to hold UKI responsible for what happened before Mr and Mrs R boarded the internal flight and landed at the airport. However, from that point onwards, I do think they should've reasonably done more to provide more meaningful assistance. Mr and Mrs R were in very vulnerable situation and UKI's errors would've needlessly and significantly exacerbated an already very distressing and worrying situation. That includes doing more to assist - and at an earlier stage - after Mrs R had been admitted to hospital.

I'm currently satisfied that UKI should pay an additional £2,500 as compensation for the severe distress and inconvenience both Mr and Mrs R experienced because of UKI's errors (so, £1,250 each).

That's on top of the sum of £750 which UKI has already offered in its final response letter dated July 2024 as it accepts that:

- one of its representatives acted unprofessionally during a phone call with their daughter.
- it hadn't made clear that one of its agents had contacted the hospital by email rather than by telephone.
- it hadn't reasonably managed expectations around whether Mr R would be allowed to travel with Mrs R in the air ambulance.
- it had incorrectly sent an email saying that Mr R had passed away.
- it didn't provide proactive updates.

I'm satisfied that this would've caused unnecessary distress to Mr R, in particular.

Mr and Mrs R's relatives didn't travel with them and aren't beneficiaries under the policy. So, they aren't eligible complainants for the purpose of this complaint, and I have no power to direct UKI to pay any compensation to Mr and Mrs R's family personally for the impact UKI's errors had on them. However, I do accept that having been told of their experience during the call (which UKI accepts should've been handled better), Mr and Mrs R would've been upset.

When considering the impact on Mr and Mrs R and fair compensation, I've also taken into account the care Mrs R experienced after she was eventually admitted to hospital. Although Mr R explains that the care she first received was good, after she experienced cardiac arrest at the hospital, he says there was a catalogue of errors made by hospital staff. I accept this would've been very distressing. However, I don't think it would be fair and reasonable to hold UKI responsible for the standard of care Mrs R received from medical professionals.

I'm satisfied that UKI was reasonably trying to arrange for an air ambulance but there were certain requirements that had to be met in the country they were in which made this more difficult, including obtaining specific permission, landing permits and having a hospital referral letter. And it could take up to 24 hours to arrange after receiving the referral letter from the hospital.

So, even if there were delays arranging the air ambulance after Mrs R had been admitted to hospital, based on the timeline I've seen and on the balance of probabilities, I don't think an air ambulance is likely to have been in place for Mrs R to be repatriated to another country by the time she sadly died.

I've also thought about whether UKI should've arranged an air ambulance to directly repatriate Mrs R from the airport to a nearby country instead of advising them to go to a hospital. I don't think UKI's suggestion was unreasonable for a number of reasons. There were special requirements to arrange an air ambulance, and it could've taken up to 24 hours to arrange. And Mrs R was in severe ill health (which was deteriorating) and required specialist, critical medical care that only a hospital could provide.

#### Other issues

For completeness, I want to confirm that I make no finding about whether UKI's errors in this case caused or contributed to Mrs R's eventual death. There are many variables. I'm not a medical expert. And although I've been provided with some medical evidence, I've not been provided with medical evidence or expert opinion about whether – and how likely – UKI's errors caused or contributed to Mrs R's death.

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I invited both parties to provide any further information in response to my provisional decision.

UKI said it didn't agree with the conclusions reached or the resulting provisional outcome. It referred back to previous correspondence setting out its position. UKI also explained why it was unhappy with the section of my provisional decision headed 'other issues'. It said UKI was only one company involved amongst several in the timeline of events.

Mr R and the estate of Mrs R didn't agree with some of my provisional findings. They said UKI should've been in contact with Mr R whilst still on the cruise ship to understand the situation. And that UKI should've understood that the medical facilities near the port wouldn't have been suitable for Mrs R and UKI should've been in contact with the cruise operator to make alternative arrangements for Mrs M to be taken to a specialist medical facility.

#### **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.

That includes the points received from both parties in response to my provisional decision. Having done so, I'm satisfied that there's no compelling reason for me to depart from my provisional decision.

I explained in my provisional decision why I was satisfied that the first time UKI had been made aware of the port and name of the planned facility was on the morning of 18 January 2024. So, I don't think UKI had a reasonable opportunity to assist Mr and Mrs R further before they were disembarked from the cruise ship. Mr R had previously informed UKI of the country the cruise would "probably" stop at but that he was "unsure where we are going at this stage". And that he will "advise as soon as I know". So, I'm not persuaded in the circumstances of this particular case that it would be fair and reasonable to hold UKI responsible for Mrs R being disembarked from the cruise ship for treatment at a facility which wasn't suitable.

In the circumstances of this case, I don't think UKI had any control over the plan that was put in place. It wasn't made aware of the details by Mr R or the cruise operator before Mr and Mrs R were disembarked from the cruise ship. Had it been, UKI says it would've looked into alternative options rather than disembarkation at the named port.

I'd previously taken into account all of UKI's previous submissions when making my provisional decision. And I don't agree with UKI that the section of my provisional decision under the heading 'other issues' is in any way inappropriate. I'm making clear that I haven't made any finding about whether UKI's errors caused or contributed to Mrs R's eventual death and the reasons for this.

So, for these reasons and for reasons set out in my provisional decision (an extract of which is set out above and forms part of this final decision), I uphold this complaint.

### **Putting things right**

I direct UKI to pay to Mr R and the estate of Mrs R an additional £2,500 compensation for distress and inconvenience. That's on top of the sum of £750 UKI had already offered to pay.

### **My final decision**

I uphold this complaint to the extent set out above and direct U K Insurance Limited to put things right as set out above.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr R and the estate of Mrs R to accept or reject my decision before 31 December 2025.

David Curtis-Johnson  
**Ombudsman**