

## **The complaint**

Mrs O is unhappy with the assistance received under a travel insurance policy underwritten by Zurich Insurance Plc when her husband required emergency medical treatment whilst abroad.

All reference to Zurich includes its agents and medical assistance team.

## **What happened**

Mr and Mrs O were abroad on holiday when Mr O sadly had a stroke. He was taken to hospital and then transferred to another hospital (a public hospital) for specialist treatment.

Mrs O notified Zurich and requested assistance. She's unhappy with the level of service received, including not transferring Mr O to a private hospital believing he would receive a higher standard of care and not receiving any support from a local agent.

Unfortunately, Mr O's health deteriorated, and the treating hospital advised that he needed emergency heart surgery. A few days after heart surgery Mr O died.

Mrs O feels that Zurich's errors contributed to Mr O's death and had it been more proactive in trying to arrange a transfer to a private hospital or repatriation to the UK, Mr O may have survived.

Zurich issued its final response to this complaint in October 2023. It felt its medical assistance team acted fairly overall. It said there were difficulties communicating with the treating hospital and the local agent which it wasn't responsible for, and it tried liaising with the treating hospital directly. However, it did accept that it should've better communicated with Mrs O and provided clearer expectations as to its role. It apologised and offered £375 compensation for distress and inconvenience.

Our investigator looked into what happened and partially upheld the complaint. He recommended Zurich pay Mrs O a total of £750 compensation to reflect the impact of its errors.

Mrs O didn't agree that the compensation amount recommended by the investigator was fair. Zurich didn't reply. So, this complaint was passed to me to consider everything afresh to decide.

I issued my provisional decision in July 2024 and said:

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Zurich as an obligation to handle insurance claims fairly and promptly.

Zurich accepts that it should've better communicated with Mrs O about what was going on and provided clearer information. Looking at the information the parties have given, I'm also satisfied that there were times when Zurich wasn't proactively looking to support Mr and Mrs

O and at other times, I'm satisfied it took too long for it to act. For example, it doesn't look like Zurich took any substantive action at the start of the claim after its local agent confirmed it wasn't able to obtain any information from the treating hospital or provide assistance, as they weren't recognised by the treating hospital.

The local agents did provide Zurich with details of two hospitals which could be suitable for international patients and from what I've seen, I'm not persuaded that Zurich proactively followed this up.

I understand why Zurich required a medical report from the treating hospital, so that it knew of the diagnosis, prognosis and the treating hospital's recommendations. And, in principle, I don't think that was unreasonable. It's also in line with standard industry practice.

But in the circumstances of this case, I would've reasonably expected Zurich to have more promptly considered alternative ways to communicate with the treating hospital to get the medical report it needed and to advise Mrs O that if Mr O was to be moved to a private hospital, the treating hospital would need to arrange a transfer – even if at that stage it was unable to verify cover.

Although Zurich has said in its final response that it was seeking alternative local agents to help Mr and Mrs O, I'm not persuaded that the contemporaneous evidence I've been provided supports that it was as proactive as it reasonably ought to have been in the circumstances of this case. I think it should've reasonably done more here. And in the particular circumstances of this case consider other ways to assist Mrs O communicating with the hospital staff.

From the email correspondence from around this time, I'm satisfied that Mr and Mrs O were very worried about the lack of information they were being given and say at one point: "it is now day 4 in an emergency critical situation that could impact [Mr O's] life forever...this is really disappointing...".

I think it's reasonable for Mr and Mrs O to have felt like this. They were in a very difficult and worrying situation and I think had Zurich provided a better service at this early stage, it would've eased some of Mr and Mrs O's worry and distress. Instead, Zurich was asking for information it had already been provided by Mrs O – such as the name of the hospital Mr O had been admitted to two days after she first contacted it for assistance and had already provided that information.

Further, I'm satisfied that Mrs O was put to the trouble of having to contact Zurich for updates at already difficult time when her husband had been urgently admitted to hospital. Ultimately Mrs O was able to obtain a medical report from the treating hospital and provided it to Zurich on the morning of 4 May 2023. It concluded that "the patient is suggested to be treated as an inpatient...for at least 14 days. He is currently not advisable to fly back on a commercial plane to his country at least 30 days after his stroke".

The day after receiving the medical report, Mrs O informed Zurich that that the treating hospital planned to move him to the cardiology department to have urgent heart surgery unless he started showing improvement with antibiotics. Mr and Mrs O said their preferred option was for Mr O to be repatriated to the UK for heart surgery.

At that stage I'm satisfied that Zurich acted more promptly looking at options of potentially moving Mr O to a private hospital for potential surgery without yet receiving the GP records to enable it to verify cover, exploring the option of repatriating Mr O by air ambulance and liaising with the hospital Mr O had previously been treated at in the UK to see if they had availability for him to be transferred there by air ambulance.

Zurich – I think reasonably – also emailed a form to Mrs O for the treating doctor to complete to confirm whether Mr O would be fit to fly by air ambulance. However, this was never completed and returned by the treating doctor. Given the developments since the last medical report – and the possibility of Mr O requiring emergency heart surgery – I think it's reasonable for Zurich to have wanted further medical information from the treating doctor including their opinion on possible repatriation plans. So, I think it was reasonable for Zurich not to make any firm plans around repatriation until it had that information from the treating doctor.

Mr O ended up having emergency heart surgery a few days later. Even if I concluded that Zurich ought to have taken more positive steps to see whether it was medically appropriate for the treating hospital to transfer Mr O to a private hospital – and this had happened – I've seen no medical evidence to persuade me that this would've resulted in a more positive outcome for Mr O.

Mrs O says she is left feeling guilty about the things she could've done which may have resulted in Mr O still being alive. I can of course understand why she feels that way and I have much empathy for her, and the situation she and Mr O were in at the time. However, even if the treating hospital had advised - and explained why - it was medically safe and necessary for Mr O to be repatriated by air ambulance, the situation was very fluid at that time and the advice could've changed. Further, in my experience, it often takes a number of days to arrange repatriation by air ambulance.

After Mr O died, and arrangements were made to repatriate his body to the UK, I think Zurich could've – at times - provided better service to Mrs O, at a time when she would've been feeling very distressed and vulnerable. For example, it didn't reply to her queries about whether she could be on the same return flight to the UK as Mr O's body. So, she ended up having to book her own flight. I think this would've been upsetting for Mrs O and as she said in an email at the time: "further to phone call yesterday and email below, I'm very disappointed that I still haven't heard back from anyone. Nobody seems bothered about my situation and its impact... I'm already in a stressful and distressing situation and have lain awake all night, waiting for your email or call to arrange my flight booking".

Whilst I'm satisfied that this was an incredibly difficult time for Mrs O, which would've otherwise affected her sleep, I'm satisfied that the errors made by Zurich in this case unnecessarily and unreasonably exacerbated her upset and have contributed to her ongoing trauma about what happened abroad. However, for reasons set out above, I don't think it would be fair and reasonable for me to hold Zurich responsible for Mr O's death.

Zurich has agreed to pay Mrs O £375 compensation. I don't think that fairly and reasonably reflects the impact Zurich's errors had on Mr and Mrs O at a particularly difficult time when they were both vulnerable.

I'm intending to direct Zurich to pay total compensation in the sum of £1,400 for distress and inconvenience (£800 compensation to reflect the total impact on Mrs O and £600 compensation to reflect the impact on Mr O before he sadly died).

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I invited both parties to provide any further information for me to consider in response to my provisional decision. Neither party responded.

### **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 neither party as provided anything further for me to consider, I'm satisfied that there's no compelling reason for me to depart from my provisional findings.

For this reason 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 Zurich to pay total compensation in the sum of £1,400 for distress and inconvenience (£800 compensation to reflect the total impact on Mrs O and £600 compensation to reflect the impact on Mr O before he sadly died).

### **My final decision**

I uphold this complaint to the extent set out above and direct Zurich Insurance Plc to put things right as set out above.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs O to accept or reject my decision before 2 October 2024.

David Curtis-Johnson  
**Ombudsman**