

## **The complaint**

Mrs D has complained about how Zurich Insurance PLC (Zurich) dealt with a claim under a home insurance policy.

## **What happened**

Mrs D contacted Zurich to make a claim following a theft at her home. She later complained about how long Zurich was taking to investigate the claim. When Zurich replied, it outlined what had happened so far during the claim, including the enquiries that were ongoing about it and the information Mrs D had been asked to provide. It also said Mrs D had later raised concerns that she had been racially profiled by Zurich. It said Mrs D had been asked to provide more information about this and it would then investigate further.

A couple of months later, Zurich issued another complaint response. It said it was still awaiting information from Mrs D so it could assess the claim further. It also hadn't received any further information about the racial profiling and asked again that Mrs D provide this. It said its review hadn't identified any avoidable delays or unnecessary information requests and that it didn't have evidence of the allegation that she was profiled.

When Mrs D complained to this service, our investigator didn't uphold it. She didn't find evidence of delays that were down to Zurich's actions and said the information it requested was reasonable. She also didn't find evidence Mrs D had been discriminated against.

As Mrs D didn't agree, 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.

My decision is only about any delays and the discrimination allegation covered by the two complaints that were referred to this service. I am aware the claim continued after that time, but anything that happened after this doesn't form part of my decision.

I've looked at how the claim was handled. From Zurich's records, I saw that after the claim was submitted, Mrs D was asked to provide further information about the claim. Following this, the claim was assessed, including the value of the items claimed for. A claims investigator was then appointed who interviewed Mrs D on a video call. During that call, the investigator discussed the circumstances of the claim and explained that further information would be required, including any photos and any written communications with the police. The investigator also found a County Court Judgement (CCJ) in Mrs D's name and asked for further information on this. I also saw an email the investigator sent Mrs D the following day, which explained the further information she had been asked to provide.

Based on what I've seen, Zurich followed up with the police on a few occasions to try and obtain the information it needed for the claim. It also had to ask Mrs D to sign a consent form to allow it to get the information from the police. While this continued, Mrs D seemed to be in

the process of finding out about the CCJ and a couple of months later provided evidence that she had now settled the debt. She also explained that a CCJ in her husband's name was nothing to do with her, as he lived elsewhere.

Having looked at what happened, I don't think there was anything unusual about the way Zurich investigated the claim, including it requesting further information from the police and about the CCJs it found when it carried out searches. I can understand Mrs D might have wanted the claim to progress more quickly, but I didn't see anything that caused me to think Zurich unnecessarily or deliberately delayed dealing with the claim, despite the time it took to progress it.

Mrs D was also concerned that she had been discriminated against because of her race, including because of questions asked about her husband, who she said had no relation to the claim. She said the loss adjuster had cultural biases that she believed were linked to their respective countries of origin. I note there wasn't a loss adjuster on the claim. The person was an investigator for Zurich. I've watched the full video call between Mrs D, her husband and Zurich's investigator, as well as reviewing email correspondence. Having done so, I'm satisfied Mrs D wasn't treated any differently than any other claimant in terms of what was discussed. Based on what I heard in that conversation, Zurich's investigator also didn't appear to be from the place Mrs D thought they were. The investigator named a different country.

I'm also aware that when Mrs D told Zurich she was concerned she had been racially profiled, she was asked on at least three occasions to provide further details so it could be investigated. However, I haven't seen evidence that further information was provided to Zurich. So, I think Zurich's investigation, which was based on the information available to it at the time, was reasonable in the circumstances and that it was fair for it decide there wasn't evidence to support the discrimination allegation.

Having looked at the circumstances of this claim, I don't uphold the complaint or require Zurich to do anything further in relation to it.

### **My final decision**

For the reasons I have given, it is my final decision that this complaint is not upheld.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs D to accept or reject my decision before 8 November 2023.

Louise O'Sullivan  
**Ombudsman**