

The complaint

Ms K is unhappy with the service provided by Fortegra Europe Insurance Company Ltd (Fortegra) when trying to make a claim on her furniture protection plan insurance policy.

What happened

Following damage to her sofa, Ms K contacted Fortegra to make a claim on 3 August 2023. On the same day, Ms K emailed Fortegra saying *'Poor service. Not happy with the way I was spoken to. I told him I was having issues with link and he just tried to get me off the phone.'*

Fortegra didn't accept Ms K's complaint. Fortegra explained *'Having reviewed our telephone call records we have been unable to locate a call from [the number] that we have registered against your policy to be able to comment fully on the service that you have been provided'*. Ms K rejected these findings, and referred her complaint to this service.

The investigator found that there wasn't enough evidence to support Ms K's complaint, and so didn't ask Fortegra to do anything in settlement of the complaint. Ms K didn't agree. During our investigation Ms K complained to Fortegra about the time it was taking to deal with her claim. Fortegra acknowledged this complaint. Fortegra's case notes recorded *'complaint left open until claim is resolved in case of further delays, which this retailer are experiencing at present.'*

As the complaint couldn't be resolved, it has been passed to me for decision.

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.

I thank Ms K for taking the time to explain everything that's happened since trying to make a claim on her policy. I understand it has been a stressful time for Ms K. I'd like to reassure the parties that although I've only summarised the background to this complaint, so not everything that's happened or been argued is set out above, I've read and considered everything that has been provided.

I've carefully considered Ms K's extensive representations about how the communication from the adviser during her call on 3 August 2023 was poor. I've seen the number provided in the terms and conditions confirms the number to call for making a claim. Ms K has provided a screenshot from her phone showing two calls to this number on 3 August 2023. The first call is for approximately 28 minutes, and the second call for approximately 7 minutes. The case notes provided by Fortegra support that Ms K called to make a claim on 3 August 2023, as this is the date the claim was set up on its system.

However Fortegra say it has been unable to locate this call, so it hasn't been able to provide a call recording. Fortegra has provided a screenshot from its call recording system using the numbers provided by Ms K, however, there is no trace of any calls to or from any numbers provided by Ms K.

When evidence is contradictory or inconclusive (or both) I have to make a finding on the balance of probabilities. And on balance, I'm satisfied that it's more likely than not that Ms K did contact Fortegra to register a claim on the date that she has explained. The case notes and Ms K's screenshot supports this. However, there isn't enough evidence to support what Ms K has explained about the way this call was handled by the adviser. And with the evidence I have seen, I won't be asking Fortegra to do anything more in settlement of Ms K's complaint. I can understand this is likely to come as a disappointment to Ms K but I hope my findings go some way in explaining why I've reached this decision.

I appreciate Ms K feels strongly about what happened when she called to make a claim, and has provided detailed representations about the way the adviser spoke to her. But the evidence I've seen doesn't support this. That's not to say I disbelieve Ms K's testimony. But when thinking about our remit of fair and reasonable, as it stands, I don't think there is enough evidence to say that the service provided by Fortegra was poor, and that it needs to do more to put things right.

Ms K received a response to her complaint two weeks after making her complaint. Our records show Ms K contacted this service around the same time to escalate her complaint as she wasn't happy with Fortegra's response. Fortegra provided its business file to this service in October 2023. At the same time Ms K raised a further complaint with Fortegra about the delay in her claim being resolved. I have seen that Fortegra acknowledged this complaint on 9 October. The case notes provided to this service show on receipt of Ms K's complaint, Fortegra recorded '*complaint left open until claim is resolved in case of further delays, which this retailer are experiencing at present.*'

Our rules say businesses have eight weeks to issue a final response, or tell a customer they can refer their complaint to this office. Fortegra has not issued a final response to Ms K's complaint about delay. The case notes suggest this is because it has decided to leave this complaint '*open until claim is resolved in case of further delays.*' In response to the investigator's findings Ms K has expressed dissatisfaction with continued delays on the claim. In line with our rules we can now consider this complaint. It is for Ms K to determine whether she'd like this service to set up a new complaint about the delays on her claim at this time, or wait until her claim has been resolved before bringing this complaint to us.

I can appreciate Ms K's disappointment with the outcome of her current complaint about poor communication from the adviser she spoke to. This situation has clearly left Ms K feeling stressed, and upset. But I haven't seen any evidence to persuade me that Fortegra's actions have been wrong, or unfair. So I won't be asking Fortegra to do anything in settlement of this complaint.

My final decision

My final decision is that I don't uphold this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Ms K to accept or reject my decision before 14 February 2024.

Neeta Karelia
Ombudsman