

The complaint

Mrs M is unhappy with the service she received from Inter Partner Assistance SA (IPA) when she claimed on her travel insurance policy.

What happened

Mrs M was on a ski holiday when she had an accident and sustained a significant fracture. She was unable to contact IPA via their emergency assistance number and resorted to social media. IPA got in touch with Mrs M and asked her to complete some initial paperwork. Mrs M didn't hear anything further and made her own arrangements to get home. She says that the 14-hour journey home, shortly after she'd had surgery, affected her recovery and her mental health.

Mrs M complained to IPA. They upheld her complaint and offered £400 compensation. They accepted there had been an administrative error which meant the case hadn't been referred to the medical team. This meant Mrs M didn't receive any assistance whilst abroad or support with returning home. Mrs M didn't think this was fair compensation and referred her complaint to the Financial Ombudsman Service.

Our investigator looked into what had happened. She thought the compensation offered by IPA was fair and reasonable. She didn't think IPA were aware that Mrs M was due to be discharged so soon after they spoke to her. She also noted that Mrs M hadn't contacted IPA again when she was discharged so they weren't able to offer assistance.

Mrs M asked an ombudsman to review her complaint. She doesn't think that £400 compensation fairly reflected the distress and anxiety she experienced. She explained that she only undertook the journey home to get back home for emotional reasons. Mrs M also explained that her surgeon has said that she was at high risk of Deep Vein Thrombosis (DVT) and this wasn't advisable. In summary she didn't agree that £400 compensated her fairly for the mental scars of her experience.

So, I need to make a 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.

The relevant rules and industry guidelines say that IPA has a responsibility to handle claims promptly and fairly.

There were clearly failings in the service Mrs M received. She couldn't contact the emergency number despite trying a number of times. Her case wasn't passed to the medical team and she didn't get any help or assistance. So, there's no dispute that IPA didn't handle the case as they should have done.

The key issue for me to decide is whether the £400 compensation offered is fair and

reasonable. I think it is because:

- Mrs M explained she was in a hospital, where she didn't speak the language and felt frightened and alone. I can understand this was a difficult time and that Mrs M felt she wasn't supported as she wasn't able to contact IPA. However, Mrs M didn't discuss with IPA how she was feeling when they spoke to her on 17 February to open the case. She didn't explain this until after she'd returned to the UK and so IPA didn't have the chance to address those concerns whilst she was abroad.
- Mrs M was able to access emergency treatment and this was covered by the Global Health Insurance Card (GHIC). So, even though Mrs M wasn't able to get in touch with IPA, she was able to access the emergency medical treatment she needed.
- The call on the 17 February included some discussion about next steps. At that time Mrs M hadn't seen a doctor following her surgery and she didn't know whether she would be able to get her original flight as planned. Given that her surgery had only taken place the previous day I think IPA reasonably considered it was unlikely Mrs M would be discharged in time to make her original flight. The medical team got in touch with Mrs M on the 19 February for an update and were clearly surprised to hear she'd returned home.
- I appreciate that Mrs M wanted to get home for emotional reasons. But I still think it would have been reasonable for her to contact IPA to update them on her discharge and plans to catch her original flight. Mrs M said that she tried to call once, and the call cut off. However, she acknowledged that she wasn't in an area with good signal. I think it would have been reasonable for Mrs M to discuss her plans with IPA before travelling. IPA would have then had the opportunity to discuss what assistance they could offer her with her original flight or to get her home at a later date. So, I don't think I can fairly say that IPA were responsible for Mrs M's difficult journey home in the circumstances of this case.
- Mrs M has mentioned that her consultant has said it was risky that she flew and there was a high risk of DVT. These are some of the risks IPA would have typically discussed with the treating team before repatriating Mrs M, particularly after surgery. However, as I've outlined above IPA weren't aware that Mrs M was travelling home on her original flight so were not able to assess those risks.

My final decision

Inter Partner Assistance SA has already made an offer to pay £400 to settle the complaint and I think this offer is fair in all the circumstances.

So, my decision is that Inter Partner Assistance SA should pay £400 if it hasn't done so already.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs M to accept or reject my decision before 10 October 2023.

Anna Wilshaw
Ombudsman