

## **The complaint**

Mr B, Mrs B and Miss B are unhappy with how Great Lakes Insurance SE handled a claim on their travel insurance policy.

For ease I'll refer to Mr B and his family.

## **What happened**

Mr B and his family had a travel insurance policy underwritten by Great Lakes. They'd booked a family holiday abroad that included a nine-day adventure tour of the country – participating in physical activities such as hiking on various different tours.

They had a connecting flight on their outward journey. After departing on their first flight Mr B suffered a medical emergency on the plane - he lost consciousness and suffered seizures. An off-duty doctor on the flight assisted him and suspected he had suffered a stroke. When the flight landed Mr B was taken to hospital and stayed there for the rest of the day having tests. As a result, his family missed their connecting flight to their adventure tour destination.

The doctors concluded Mr B had suffered 'convulsive syncope'. They discharged him and Mr B says they were satisfied he could continue with his trip if he felt well enough. He called Great Lakes to let them know. However, when Mr B began to feel ill again, he called Great Lakes the next day to say he was too unwell to continue with his tour and he'd be returning home with his family in a few days.

Mr B continued to feel tired when he returned home and booked an appointment with his GP. He also made a claim on his travel insurance policy for the curtailment of his trip and the additional costs he'd incurred. Great Lakes declined cover. They said the curtailment hadn't been medically necessary based on the advice from the doctor abroad. And although Mr B provided additional medical evidence from his GP, to support he was unable to continue on his planned adventure tour trip due to fatigue, Great Lakes maintained their position.

The complaint was referred to this Service. Our investigator considered what had happened and upheld it. He was persuaded the GP evidence showed the curtailment was medically necessary. He asked Great Lakes to reconsider the claim and pay £200 compensation to Mr B and his family for their poor communication during the claim.

Mr B accepted this outcome. Great Lakes disagreed. In summary they said:

- The evidence from the GP doesn't provide any diagnosis for Mr B or follow up investigation for an underlying condition.
- The customer could have chosen to rest and recuperate once at this holiday destination – he didn't have to take on high altitude trekking.

The case has now been passed to me to decide.

## **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 the insurer has a responsibility to handle claims promptly and fairly. And they shouldn't reject a claim unreasonably.

### Claims handling

Mr B is unhappy about Great Lakes' delays and communication throughout the claim. It's not in dispute the claim could've been handled better and that Great Lakes' communication was poor at times – they left questions unanswered and there were missed opportunities to provide meaningful advice.

The situation would have been particularly worrying given Mr B's health episodes were suspected strokes and he couldn't be sure if his onward travel and additional costs would be covered, due to a lack of response from Great Lakes. So I agree that £200 compensation is reasonable here to reflect the additional stress and frustration caused by Great Lakes during what was an already difficult time for Mr B and his family.

### Claim decline

On balance, following the additional medical evidence provided by Mr B's GP, I don't think it was reasonable for Great Lakes to continue to conclude that the curtailment wasn't medically necessary. I'll explain why:

- I appreciate why Great Lakes initially placed weight on the treating doctor abroad. He said Mr B was fit to continue with his trip if he didn't suffer any symptoms within 24 hours. But I agree with the investigator that Mr B's symptoms had clearly worsened by the next day. He contacted Great Lakes to explain his change in health and that he felt too unwell to continue on to his adventure tour trip. And I think it was unfair that Great Lakes then failed to advise him he needed to seek a further medical opinion in the circumstances.
- The additional medical evidence provided by Mr B's GP says he would have been advised not to continue with an adventure tour holiday because he was suffering from fatigue following two episodes of convulsions - so he required rest. Fatigue is a common symptom after convulsion syncope so I'm persuaded by this evidence. And I think it's likely, if Mr B had been seen by a medical professional again when his symptoms had worsened, he'd have been advised not to continue with his planned trip and walking excursions.
- Great Lakes has commented that the evidence from the GP doesn't provide any diagnosis for Mr B or follow up investigation. But I don't think it needs to. In their professional medical opinion, the GP has explained they would've advised rest for a patient who was suffering from fatigue, rather than trekking at altitude. And we know that Mr B had planned an adventure tour that included trekking amongst other physical activities. So I think it was unreasonable for Great Lakes not to have given this additional medical evidence more weight. And it was unfair they continued to conclude it wasn't medically necessary for Mr B to curtail his touring holiday.
- I note Great Lakes have said Mr B could've chosen to rest once he reached his

destination and not participated in physical activities. But, as explained above, the purpose of the majority of his trip was a nine-day tour of the country with his family which included walking excursions (amongst other activities). So I don't think this is a fair and reasonable conclusion by Great Lakes in these circumstances.

### Summary

It's clear the holiday was important to the family and I think Mr B would've continued with the planned tour trip if he hadn't felt unwell again following his discharge from hospital. And I'm persuaded by the evidence from Mr B's GP that it's most likely curtailment was medically necessary for that type of trip due to his fatigue. So I think Great Lakes unfairly considered the claim.

### **Putting things right**

Great Lakes Insurance SE need to put things right by:

- Reassessing the claim, against the remaining terms of the policy
- Pay £200 compensation for the impact of their delays and poor communication during the claim

### **My final decision**

I uphold this complaint against Great Lakes Insurance SE and direct them to put things right in the way I've outlined above.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr B, Mrs B and Miss B to accept or reject my decision before 26 January 2024.

Georgina Gill  
**Ombudsman**