



Program

THE CHARTERED INSTITUTE
OF LOSS ADJUSTERS

09:50-10:25	Update on FOS Views and Procedures John Quinlan and Nial Jeewoonarain FOS
10:25-11:00	The View of a Local Authority Insurance Officer in Respect of Tree Root Claims Andrea Plucknett, Welwyn Hatfield Council
11:00-11:30	Break
11:30-12:10	Natural and Man-Made causes of Ground Instability Leading to Subsidence Claims Dr Clive Edmonds, Partner of Peter Brett Associates LLP
12:10-12:50	Landslip – Slip Circles Professor Edward Bromhead, Kingston University
12:50-13:00	Question and Answer Session
13:00-14:00	Lunch



Program(Cont)

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14:00-15:20	Question Time –Topical Issues in the Subsidence Market: <ul style="list-style-type: none">•Supplier Network•No Surge this year•Corporate Manslaughter – H and S Investigations•Subsidence qualification•Matching items•ABI C of I Subs Agreement•ABI Tree Root Agreement•TPO's and level monitoring•Remote crack width monitoring•Contents Insurer & Alt Accomm contribution
15:20-16:00	RICS Update on Technical Standards with Particular Reference to Insurance Claims Martin Russell-Croucher
16:00-16:30	BREAK
16:30-17:30	CILA Annual General Meeting
17:30-17:45	CILA Extraordinary General Meeting
17.45-18:30	SPONSORED BAR
19.30-LATE	SPONSORS' DINNER



CILA Conference
John Quinlan & Niall Jeewoonarain
15 9 09

the ombudsman's role

- to be an independent service for resolving disputes between consumers and financial firms
- to achieve the earliest possible resolution where reasonable and fair
- to promote dispute avoidance
- publication today on line of outcome data

what is expected of firms ...

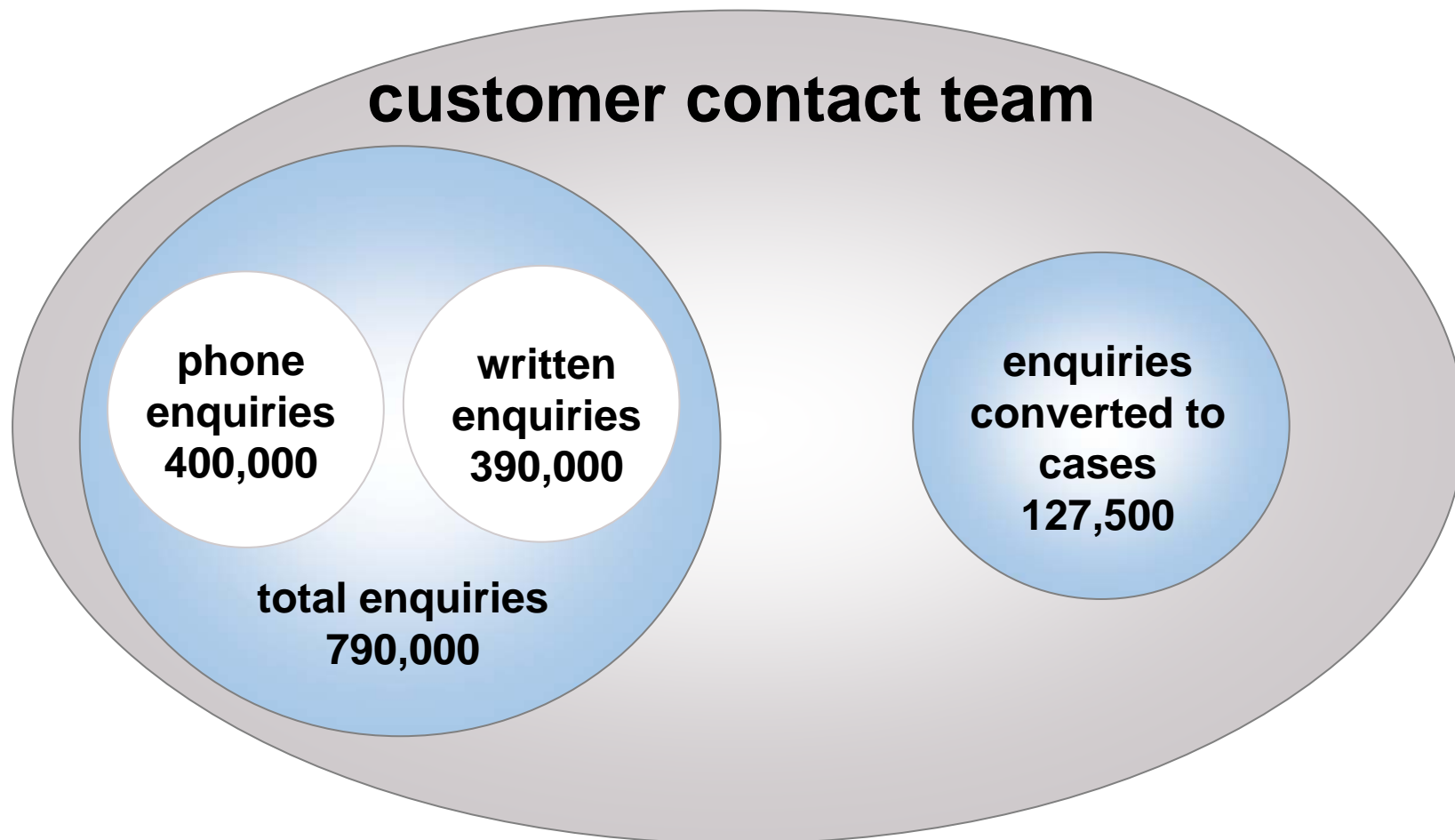
- cooperate with the ombudsman
- learn from their complaints:
 - “take reasonable steps to ensure that any recurring or systematic problems are identified and remedied”
- play an active part in the complaint process when the case is being considered by the ombudsman

what is an ombudsman complaint?

- any expression of dissatisfaction (oral or written, justified or not)
- involves an allegation that the complainant has suffered, or may suffer, financial loss, material distress or material inconvenience
- not resolved by close of business on business day following receipt

2 key principles

- inquisitorial remit – ‘levelling the playing field’
- ‘fair and reasonable’ outcome - in all the circumstances of the individual case - having regard to relevant:
 - *law / regulations*
 - *regulator’s rules, guidance and standards*
 - *codes of practice*
 - *good industry practice*



insurance complaints - by product

type of complaint	2008/09	2007/08	2006/07
loan protection (PPI)	31,066	10,652	1,832
motor	6,267	6,009	4,230
building	3,447	2,669	1,951
travel	1,973	1,628	1,670
contents	1,671	1,363	1,238
income protection	774	832	891
critical illness	586	638	680
other	4,384	3,495	3,238
total	50,168	27,286	15,730

how do adjudicators decide?

- **follow the approach likely to be taken by an ombudsman**
- **consider what is fair and reasonable...**
- **on balance of the available evidence (balance of probabilities – civil standard of proof)**
- **set out view of appropriate conclusion of case, initially to the ‘losing’ party either:**
 - **over the phone (in straightforward cases); or**
 - **in writing (from brief ‘view letter’ to formal report**

- **the final stage in the ombudsman service process**
- **available if either party do not agree with adjudicator**
- **based on review of papers by single ombudsman**
- **final and binding if complainant accepts**
- **no appeal to another ombudsman**

- **financial loss (+ interest)**
- **non-financial loss: distress and inconvenience, pain and suffering or damage to reputation**
- **£100,000 limit**
- **recommendation above £100,000 not binding**
- **ombudsman may direct a firm to take what s/he considers to be 'just and appropriate' action**
- **costs awarded only in exceptional circumstances**

complaints about GI brokers/adjusters/assessors

- **payment protection insurance and motor are the main product areas of complaints about brokers**
- **otherwise - maladministration issues (e.g. delays)**
- **premium issues (e.g. failing to pass premiums on to insurers, time taken to return premiums, mis-quotes)**
- **non-disclosure issues – did the intermediary/adjuster fail to pass on information to the insurer?**
- **client dissatisfaction with firm’s complaint handling**
- **but few trends, themes or concerns identified so far**

motor (12.5%) – why do consumers complain?

- **total loss valuations**
- **thefts – keys in car**
- **poor quality of repairs / approved repairers**
- **non-disclosure**

household buildings & contents (10.5%)

- **quality of repairs / delays**
- **insured peril or wear and tear?**
- **repair, replace or cash?**
- **matching sets**
- **allegations of fraud**
- **non-disclosure**

travel (4%) – why do consumers complain?

- **pre-existing medical conditions**
- **cancellation / curtailment**
- **baggage & money**
- **allegations of fraud / substantiation of claim**

payment protection insurance (PPI) – (62%)

- massive increase in our workload
- pre-existing medical conditions – including non disclosure, the use of clearly worded questions and customer awareness
- sold rather than purchased (“*tick box*”)
- suitability of product: strict criteria only eligible for certain parts of cover – self employed
- tied into premiums upfront – part of loan
- intense media and regulatory interest

why do complaints arise – the firms view?

- **media**
- **friends and family**
- **‘ambulance chasers’**
- **malicious**

why are complaints referred? – our view

- **how the complaint was handled**
- **missing the point**
- **quality of investigation**
- **quality of final response**
- **never learn – repeating the same errors again and again**

informal guidance for community and advice workers

- our remit
- approaches to cases
- process and procedures



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any questions?

