

Complaint report for H1 2022

Type	No. of complaints opened per 1,000 policies in-force	No. of complaints opened	No. of complaints closed	Percentage closed within 3 days	Percentage closed after 3 days but within 8 weeks	Percentage upheld	Main cause of complaints opened
Hospital Plan, Convalescence Plan & Other*	1.58	225	228	84.65%	15.35%	27.63%	Other general admin / customer service
Death Benefit	0.30	17	17	76.47	23.53	41.18%	Other general admin / customer service

What this means

Between 31 December 2021 and 30 June 2022, we received 242 complaints. Representing a less than 0.3 percent of our current insurance policy holders†. The Financial Conduct Authority (FCA) requires insurers to resolve complaints within eight weeks from the date they receive it. Our Complaints Team responded to customers within 3 days on average. The concerns raised by customers are reviewed on a monthly basis and where possible, changes are implemented to improve the overall service our customers receive.

* These are a small group of historical plans that we no longer provide

† Policy holder data accurate as of 01/07/2022