

Current aggregate complaints data

Highlights for 2011 H2

Total overall number of complaints increased by 21% to 2,256,172 in 2011 H2 (Table 2.1 and Figure 1 below).

The main driver for this increase was a rise in the volume of complaints about 'general insurance and pure protection' which increased by 49% to 1,280,940 (Table 2.1 and Figure 2 below). Most notably within this product group were the number of complaints about payment protection insurance (PPI) which rose by 85% to 977,510 (Table 2a and Figure 3).

The number of banking complaints were at their lowest level since 2006 H2 at 787,096. This is a 2% decrease on the previous half year and is 13% down on a year ago (Table 2.1 and Figure 2 below). Within banking products, the percentage of complaints about current accounts dropped by 6% and there was a 12% reduction in the percentage of complaints about savings and other banking products (Table 2a and Figure 3). Complaints about credit cards and unregulated loans increased.

There were small reductions in the volume of complaints about decumulation, life and pensions products and investments (Table 2.1 and Figure 2 below). The volume of complaints about endowments fell by 6% and the volume of complaints about investment bonds fell by 12% (Table 2a and Figure 3).

Figure 1: Total complaints over time

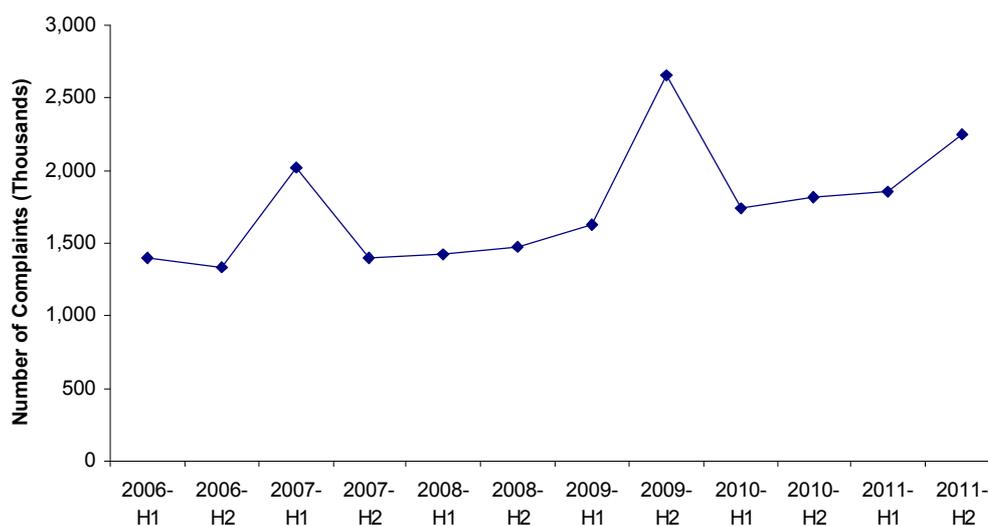


Figure 2: Number of complaints by type of product

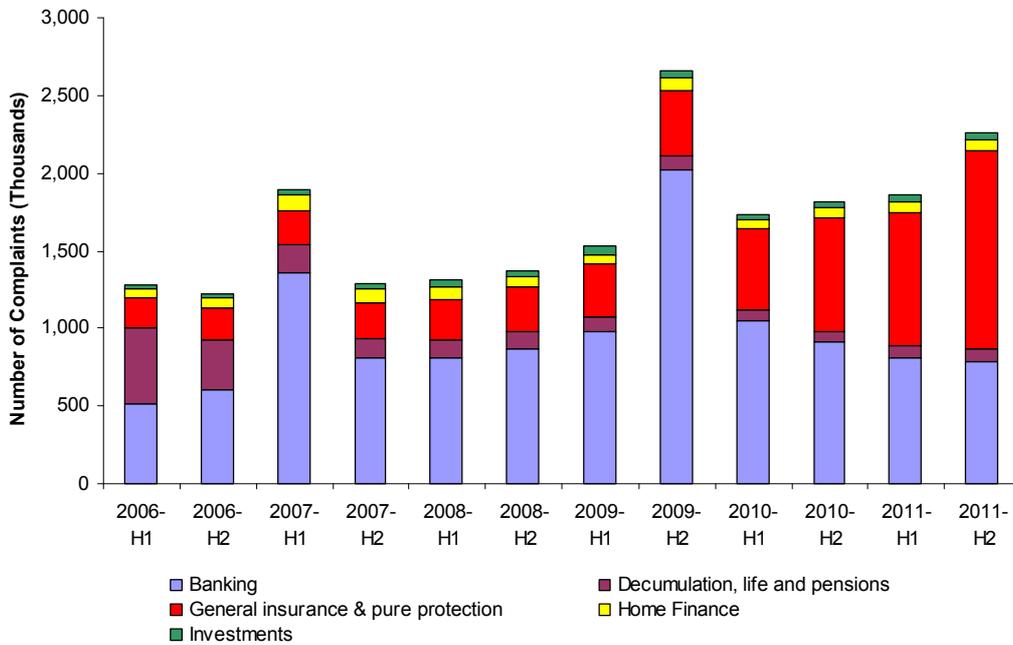
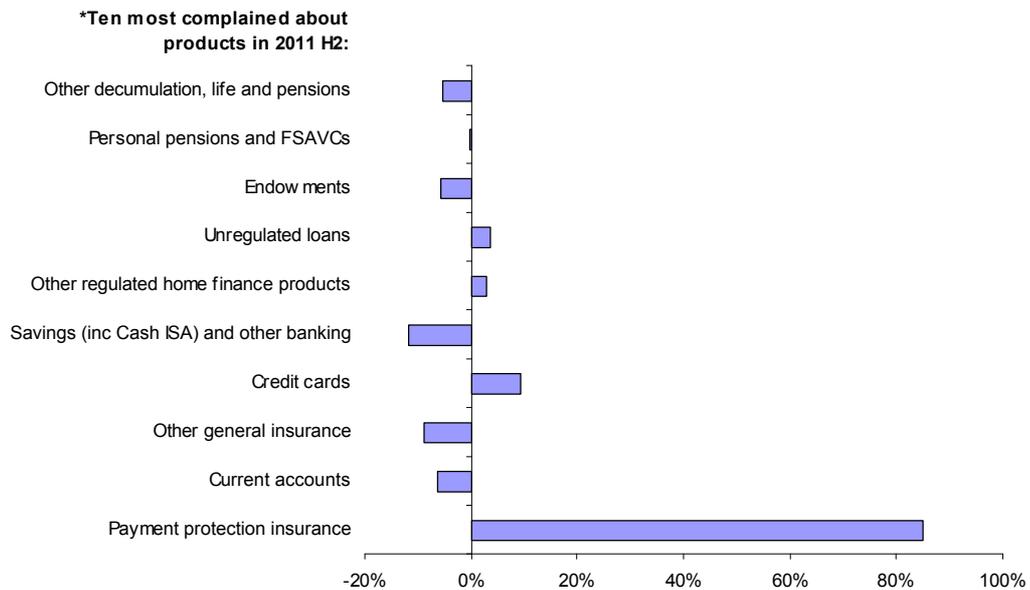


Figure 3: Percentage change in volume of complaints for the 10 most complained about products* between 2011 H1 and H2



The volume of complaints about PPI account for many of the other highlights in this data:

- The number of complaints to banks and building societies increased by 29% in 2011 H2 to 1,660,578 (Table 2.2).

- Overall, complaints about ‘advising, selling and arranging’ increased by 69% to 1,093,684 (Table 2.3). 1,002,523 equating to 92% of these complaints were about general insurance and pure protection products (Table 1).
- The percentage of general insurance and pure protection complaints closed within 8 weeks decreased from 72% in 2011 H1 to 43% in 2011 H2 with the total percentage falling from 86% to 64% (Table 3.2). This reflects the temporary extension to the complaints handling time limit rules which was granted to a small number of firms, allowing them more than 8 weeks to handle their backlog of PPI complaints.
- The total number of closed complaints increased by 55% to 2,429,166 (Tables 2.4 and 2.5). This was mainly caused by the number of closed general insurance and pure protection complaints which increased to 1,440,441 (Table 2.5).
- The percentage of upheld complaints increased from 51% in 2011 H1 to 60% in 2011 H2 (Table 4.1). Again this was mainly caused by the upheld general insurance and pure protection complaints increasing from 53% to 69%.
- The total amount of redress paid increased from £411m in 2011 H1 to £2,250m in 2011 H2 (Table 5.1). Within this, the increase in redress paid for general insurance and pure protection to £2,102m will also have been affected by firms resolving the PPI complaints that were placed on hold during the judicial review in H1 2011.

About the current aggregate complaints data

Firms are required to report to the FSA every six months on the number of complaints they receive and how they handle them. We have published [complaints data from 2006 through to 2011](#).

The data covers the following 3 areas¹:

- Volume of complaints received according to product, type of firm and cause of the complaint. Firms currently report the volumes according to 25 different product categories (e.g. credit cards). These product categories can be combined into five different product groups (e.g. Banking).
- Complaints-handling – including the proportion of complaints resolved within eight weeks and the proportion of complaints upheld by firms.
- Redress paid - this shows the redress paid in respect of complaints reported during the stated half year. This figure only covers cases where a cash value can be readily identified. It does not include other types of redress, for example extending the cover provided by an insurance policy, nor does it include redress paid which does not relate to complaints. For example in some cases it may not include redress paid as a result of enforcement action or where the firm has undertaken a review of past business.

In October 2010, following publication of PS 10/12 on the assessment and redress of Payment Protection Insurance (PPI) complaints, the British Bankers' Association began legal proceedings to challenge our new measures. The legal challenge was rejected by the High Court on 20 April 2011, but during this time firms placed a number of their complaints about PPI on hold.

In August 2011, we began publishing separate [figures showing how firms are dealing with PPI complaints](#). It is important to note that the PPI redress data solely relates to PPI complaints whereas the Aggregate Complaints Data published here cover a wider product group of 'general insurance and pure protection'². It is also important to note that the data on PPI complaints handling refers to redress reported on a monthly basis and provides comparison between these months only. The aggregate complaints data refers to data for a six month period and provides comparison to previous half years. As a result, comparison between these data sets is limited and should be avoided.

▲ [Back to top](#)

Technical note: interpreting the data

To provide a more detailed analysis of complaints handling data, each firm's data has been linked to the FSA's own categorisation of that firm's type (e.g. 'bank' or 'discretionary investment manager'). For information on how firms have been grouped by primary category see note 2 in the tables. This provides the analysis by 'firm type' shown for both the volumes and complaints handling data. A caveat to this analysis is that a firm of one type may do a high proportion of other kinds of business not reflected in its primary category. Therefore, this analysis does not provide a perfect match of the complaints handling information and the type of business to which it relates. This issue can also affect the change in reported complaints figures in each category between periods, as firms may switch from one category to another.

These statistics only cover reportable complaints. Complaints which have been resolved by close of business on the business day following their receipt are not reported. In many cases, firms will be able to resolve a complaint, particularly an oral complaint, within this time, and it will therefore not be covered by the complaints reporting rules. By definition, we do not have figures for the numbers of complaints that are not reported to the FSA, but the recent [review of complaint handling in banking groups](#) found that the banks assessed resolved 60-80% of all complaints within this timetable.

On 1 August 2009, we introduced new complaints reporting requirements for firms. The new requirements aim to make reporting less burdensome for firms and more useful to the FSA. This means that some data from the second half of 2009 onwards will not always be directly comparable to previous data. As a result of the reporting changes, there are some alterations in the data from the second half of 2009:

- For complaints with a reporting period end date after 1 August 2009, we are able to publish the amount of redress paid split into product group and firm type (Table 5) and information on the speed of resolution and the proportion of complaints upheld split into the five different product groups (Table 3.2 and 4.2).
- As the reporting changes have amended the product categories and groups we are not able to provide trends for complaints by type of product prior to 2009. Where possible, we have mapped most of the products into their new categories and provide the data, from 2009 only, in Table 2a.

We updated all 2010 H2 and 2011 H1 aggregate data from the previous publication due to individual firm resubmissions.

The FSA's Aggregate Complaints Data are Official Statistics. Official statistics are defined in the Statistics and Registration Service Act 2007 as statistics produced by (amongst others) the (UK) Statistics Board, government departments including executive agencies, and any person designated by an order made by the Secretary of State. The FSA was designated as a body to which the 2007 Act applies by the Official Statistics Order 2009.

¹The precise scope of the complaints reporting rules are set out in the [FSA Handbook](#) - see [DISP 1.10](#)

²Refer to Note 1 of the statistics for the products within each product group.

³For more information on PPI complaints please visit the FSA website at: [Payment protection insurance](#)