

Annual Report

2020/2021



ISCAS

INDEPENDENT SECTOR
COMPLAINTS ADJUDICATION SERVICE

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About ISCAS

ISCAS is an appropriate body for the management of complaints about private healthcare recognised by regulators, including the Care Quality Commission (CQC), Healthcare Improvement Scotland (HIS), Healthcare Inspectorate Wales (HIW), Regulation and Quality Improvement Authority (RQIA) and other appropriate regulatory bodies, for example the Parliamentary and Health Services Ombudsman (PHSO).

ISCAS is a not-for-profit organisation registered with Companies House as a company limited by guarantee. It is independent of private healthcare providers and is hosted by the Centre for Effective Dispute Resolution (CEDR), a charity. ISCAS services are free to patients.

ISCAS promotes a Code of Practice for the Management of Complaints to which subscribing organisations adhere. If, after exhausting ways to resolve a complaint, patient and subscriber cannot agree, reference to ISCAS by either party results in an independent adjudication the results of which are binding on both parties. This is the Independent Review. Should it raise doubts about the subscriber's effective compliance with the ISCAS Code of Practice, Information Sharing Agreements permit ISCAS to share these concerns with Statutory Regulators. Similarly with providers who come to notice for not providing private patients with access to a recognised independent review stage.

Our vision, mission and values frame our drive for continual improvement in complaint handling

Our vision

To create the environment in which all patients have access to a high quality independent complaints system.

Our mission

To provide access to independent adjudication and promote compliance to the ISCAS Code of Practice as the recognised industry standard for complaints handling, wherever patients are treated in independent healthcare and in NHS PPU's.

Our values

Compassionate - we are empathetic, understanding and attentive to people's concerns. We resolve concerns appropriately.

Fair - we treat people, both patients and subscribers, fairly, proportionately and according to the evidence.

Responsive - we ensure that patient concerns are addressed swiftly according to the ISCAS Code of Practice and resolution is found.

Improving - we use feedback and lessons learned from complaints in training and in updating resources to continually improve people's experience of the complaints process in the independent healthcare sector.

More information can be found at About Us on the ISCAS website: <https://iscas.cedr.com>



Introduction



Baroness Fiona Hodgson CBE
Chair of the ISCAS Advisory Board

Whilst this has been a difficult year in so many ways due to the pandemic, the work of ISCAS has continued. I hosted the updated ISCAS Governance Advisory Board with representatives from the Key organisations to monitor: How is ISCAS doing? What are we doing well? and What are we not doing well?

Greater numbers of private patients now have the assurance of access to an independent review of their complaint by an appropriate body. It has been heartening to see that the number of subscribers to ISCAS continues to increase year on year, including a small number of NHS Private Patient Units (NHSPPU) during 2020/1. However, it is disappointing that there remain a large proportion of NHSPPU that do not provide access to an appropriate scheme for escalating complaints.

It has been apparent that complaints about Consultants have become the top area of dissatisfaction since April 2020.

Looking to the future, for ISCAS to remain recognised as an Appropriate Body, the ISCAS Governance Advisory Board consider ISCAS will need to change its status to become a charity, which could be achieved either by becoming a stand-alone independent charity or translating to an entity inside the CEDR Charity. We are examining these options urgently.



Sally Taber
ISCAS Director

The challenges of COVID-19 have required ISCAS to continue to adapt to new ways of working and to monitor how subscribers are coping within their changed circumstances. The review of the June 2017 Code of Practice for Complaints Management was delayed due to the pandemic but was commenced at the beginning of 2021 with the assistance of ISCAS Governance Advisory Board chaired by Baroness Fiona Hodgson CBE.

The Key aims of revision:

- **Simplify** - Language, terminology, structure.
- **Clarify** - Steps re. effective complaint management, timescales.
- **Consolidate** - What works well.
- **Condense** - Avoid unnecessary repetition.

A separate Cosmetic Surgery Providers working group has been set up to address particular cosmetic issues.

Karen Harrowing who led on how ISCAS can improve patient engagement, working with the Patients Association, as well as continuing work on regulation and governance, decided to step down as an ISCAS Director in December 2020 to concentrate on working with the Royal Pharmaceutical Society on issues arising from the pandemic. A huge thank-you to Karen for her work for ISCAS.

Pre-COVID, we started discussions on Information Sharing with three Key insurers - Bupa UK Insurance, AXA PPP Healthcare and Aviva. It is intended to continue these from 2021 as circumstances permit.



Des Shiels
ISCAS Director

Patients and Partners

Patient focus

From the evidence we see, patients find that the service ISCAS provides does address their concerns and they are overwhelmingly satisfied with the adjudication service. The hosting arrangement with the Centre for Effective Dispute Resolution (CEDR), who allocate adjudicators to complaints, continues to provide the necessary independence to the service.

Patient feedback:

I would like to thank yourself and my ISCAS adjudicator, Thank you for both your support & timing within this complaint. If you can please send my thanks and appreciation to [named adjudicator], for the time spent on my report and outcome as it is very in depth.

This process has been very emotional for me, I am relieved ISCAS has been able to Support, and this complaints procedure is in place.

However, some patients are still not signposted to ISCAS. Ensuring that private patients have good information on how to escalate complaints is an area ISCAS continues to work on with the Patients Association.

The Patients Association

Due to COVID-19, the business arrangement with the Patients Association was suspended until 1st March 2021.

We are now working together to review the ISCAS Code and will be concentrating on the accompanying training tool to ensure that it is updated, the Frequently Asked Questions (FAQs) and the Patients Guide.



Centre for Effective Dispute Resolution

The Centre for Effective Dispute Resolution (CEDR) continues to host ISCAS and brings a great deal of experience of operating a variety of alternative dispute resolution schemes, including mediation work with NHS Resolution.

The Senior Case Manager, Jordan Yates provides the key link between CEDR and ISCAS and ensures that communication between the person complaining, the provider and the independent adjudicator are managed effectively.

During 2020/21 the Senior Case Manager has been pivotal to a number of areas of continuous improvement, including developing a Direct Entry Mediation Scheme for smaller providers where the adjudication scheme is not appropriate.

Independent Adjudicators

ISCAS has worked with five independent adjudicators during 2020/21. The adjudicators work independently of ISCAS and have a variety of backgrounds, including healthcare delivery, health policy, health professional standards, complaint handling, consumer policy, professional regulation and the law. The Facts & Figures section of this report provides the details of the issues that continue to arise at stage 3, including subscribers not following their own complaints procedures and the ISCAS Code.

The independent adjudicators continue to capture learning from stage 3 adjudications and address relevant matters to the subscribers' Chief Executive. ISCAS when appropriate will follow up on the recommendations.

The independent adjudicators have continued to work a wholly paperless system of reviewing complaints precipitated by the COVID-19 pandemic. Whilst this provides a more sustainable approach, ISCAS is aware that online ways of working do not meet all patients' accessibility needs. ISCAS will review the lessons learned from the enforced change in approach as part of our learning from the pandemic.

Ensuring factual accuracy has again been discussed along with the advantages and disadvantages previously discussed such as delays resulting in increased costs.

An independent adjudicator attends the quarterly subscriber meetings to raise any themes arising from adjudication which assists providers improve the overall quality of their complaint handling.

Private Healthcare Mediation Scheme

Because subscribing to ISCAS requires independent healthcare providers to adopt the ISCAS Code which mandates a strict three-stage complaints process, small independent healthcare providers and sole practitioners may not be able to operate under the Code due to limited resources and the number of personnel employed.

A mediation service has therefore been introduced as part of ISCAS's menu for smaller organisations such as Baby Scan Units where adjudication is not appropriate.

In order to ensure patients of these providers can access dispute resolution CEDR has established the Private Healthcare Mediation Scheme in collaboration with ISCAS. For this scheme, CEDR provides independent mediation (over the telephone) between subscribing organisations and their patients if they are unable to resolve their complaints directly through the organisation's own complaints procedure.

The scheme has been demonstrated to the CQC, HIS and HIW who have responded positively.

Subscribers and Providers

Subscribers to ISCAS

Organisations that subscribe to ISCAS fall into the broad categories of Acute General Hospital, Mental Health Hospital, NHS Private Patient Unit, Cosmetic Provider, 'Other' specialist clinic and the Independent Doctors Federation (IDF).

The list of subscribers is presented at the end of the report and shows that in 2020/21 the number and variety continued to increase. The increasing variety of subscribers reflects the innovation in the independent sector.

There were 34 new subscribers of which 5 were NHS private patient units (NHSPPU).

Whilst it is good to see more NHSPPU subscribing to ISCAS, the pace of expansion is slow and ISCAS continues to receive complaints from private patients treated in the NHS who have no access to an appropriate body for complaint escalation.



Some subscribers to ISCAS are not members of a representative body and this can result in less consistency in their governance frameworks. This is particularly relevant to Cosmetic Providers, where those engaged in complaint handling often do not fully understand the requirements for 'practising privileges'. Namely, that the regulators require that the medical practitioner must be working in accordance with the hospital's policies, including the complaints procedure. Issues with practising privileges have not only been identified by ISCAS - the recommendations in the Paterson Inquiry Report included:


"We recommend that the differences between how the care of patients in the independent sector is organised and the care of patients in the NHS is organised, is explained clearly to patients who choose to be treated privately. This should include clarification of how consultants are engaged at the private hospital, including the use of practising privileges ..."



The first of the new style newsletters for ISCAS subscribers was launched. Given the increased need for communication during the pandemic, these are now sent monthly.

ISCAS also uses social media channels where appropriate:

 https://twitter.com/ISCAS_UK

 <https://www.linkedin.com/company/independent-sector-complaints-adjudication-service-limited>

Learning and improvement

Training in complaints handling and compliance with the ISCAS Code is delivered online. Given the on-going requirements for social distancing through the pandemic, the plan will be to hold remote training sessions through 2021 until face-to-face training events can be fully supported by subscriber representatives, speakers and sponsors.

ISCAS held a Training webinar on November 3rd 2020 with the support of Kennedy Law Firm with a session from Andrew Medlock, Assistant Director PHSO on the Complaints Standards Framework, Yael Bradbury, Policy Manager GMC shared the new features of the new GMC Guidance on Decision Making and Consent and Nico Fabri, Partner at Kennedy's advised on the likely indemnity requirements for independent practitioners in the future.

On February 25th 2021 the key high-level proposed changes to the Code were presented at an ISCAS webinar. A presentation led by the Complaints team at HCA Princess Grace Hospital informing of the numbers of complaints that have been dramatically reduced was very well received.



Stakeholders and Engagement

The context in which ISCAS operates results in engagement with a number of key stakeholders, including the healthcare system regulators and the ombudsman from each country within the UK, as well as organisations focused specifically on private healthcare. In addition to these groups, covered in more detail below, ISCAS has maintained engagement with the Private Medical Insurers (PMIs) and professional regulators such as the General Medical Council (GMC) and the Nursing and Midwifery Council (NMC).

Inquiry/Review/Regulation

During 2019/20 the Paterson Inquiry Report was published and recommended that all private patients should have the right to mandatory independent resolution of their complaint. The Government has had to prioritise directing legal resource and Parliamentary time to preparations for EU Exit and more recently to responding to the COVID-19 pandemic. It is therefore unclear if the regulation of healthcare complaints will be addressed imminently.

In the interim ISCAS has been working with patient groups, ombudsmen and regulators to ensure that patients can be assured of an independent adjudication process by increasing subscribers and compliance with the ISCAS Code.

The publication of the Independent Medicines and Medical Devices Safety Review (IMMDSR) chaired by Baroness Cumberlege was delayed due to COVID-19. However, the Health Service Safety Investigations Bill (HSSIB) has now been published and the independent sector has been added.



Ombudsmen

ISCAS maintains good engagement with the ombudsmen responsible for the independent review of NHS complaints across the UK. During 2020 this has included ensuring the signposting on the ombudsmen website is clear where they are unable to intervene in private healthcare complaints and the information about ISCAS is up to date.

Throughout 2020/21, ISCAS has worked in partnership with the Parliamentary and Health Services Ombudsman (PHSO) to build a new Complaint Standards Framework (CSF). The Framework sets out a single set of standards for staff to follow when they handle complaints. It also sets out how organisations can best capture and act on the learning from complaints.

PHSO and ISCAS are both listed in the guidance on 'appropriate bodies' by the Care Quality Commission.

Given the need identified in the Paterson Inquiry Report, for greater consistency in complaint handling for NHS and private patients, ISCAS will include the Complaints Standard Framework within the updated ISCAS Code due to be finalised mid-2021. We are also looking to build on the PHSO work on *Making Complaints Matter*.



System Regulators

The system regulators across the UK recognise ISCAS as an appropriate body for private patient complaint escalation.

During 2020/21 ISCAS has maintained Information Sharing Agreements with the Care Quality Commission (CQC - England), Health Inspectorate Wales (HIW) and Health Improvement Scotland (HIS) and these are published on the ISCAS website. The Regulatory and Quality Improvement Authority (RQIA) - Northern Ireland was signed in April 2021.

NHS PPU's - The CQC regulatory Policy Manager agreed at the January 2021 meeting to review CQC's approach to PPUs inspection. At the time of writing, this piece of work had not been reported on.





Independent Healthcare Providers Network (IHPN)

ISCAS engages regularly with the Independent Healthcare Providers Network (IHPN) and we were delighted to see that our feedback was originally included in the Medical Practitioners Assurance Framework (MPAF) prior to the launch by Professor Sir Bruce Keogh in October 2019 and the associated patient facing animation published in January 2020. Key points from the animation and the framework regarding complaints handling include:

- **Medical practitioners** must record and report complaints - working in line with the healthcare provider's complaint handling policy and taking an active part in investigations and sharing of learning.
- **Complaints policy** needs to include the internal procedures to comply with fundamental standards, and also explain when, and how, complaints should be escalated to external bodies, for example, such as ISCAS.
- **Healthcare Providers** need to monitor patient safety, clinical quality and encourage continuous improvement. Analysis of complaints about all staff, including self employed practitioners with practising privileges, and lessons learned should be used to continually improve performance. Providers must be open and transparent with people who use services.

ISCAS accepts that it is for the regulators to ensure that registered providers must demonstrate that service users have access to an appropriate body for escalating complaints. However, we would also like to see that this is supported by the Independent Healthcare Providers Network (IHPN) through ensuring its membership provides access to patients through subscription to ISCAS.

In March 2021 IHPN produced an Impact review on the Framework and referred to ISCAS updating its Code and ensuring that the MPAF is referenced and new subscribers to ISCAS are alerted to the MPAF if there are Medical Practitioners within the organisation.



Private Healthcare Information Network (PHIN)

ISCAS has continued to engage with the Private Healthcare Information Network (PHIN). Whilst the mandate from the Competition and Markets Authority (CMA) does not specify that PHIN should publish information on complaints data, the 11 performance measures do include one relating to patient feedback. Complaints are an important measure of patient feedback and this was emphasised in the Paterson Inquiry Report:

"Complaints from patients about their care offers hospitals the opportunity to examine the adequacy of the treatment and care their patients receive, to apologise when it has been found wanting and to prevent recurrence."

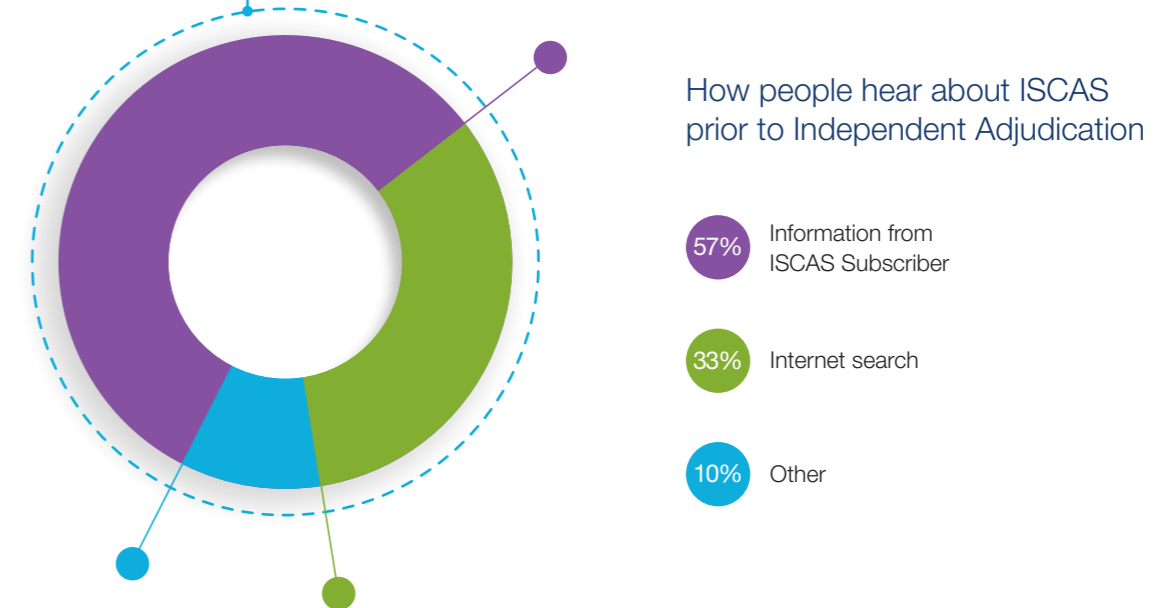
ISCAS considers information on complaints should be included as a measure of patient feedback and that there should be a plan to align the information with NHS datasets. Due to COVID-19 further engagement between PHIN and ISCAS on complaints information was postponed. At that time PHIN was focusing on moving to a single source of healthcare data through the Acute Data Alignment Programme (ADAPT) with NHS Digital.

As the work with the PHSO's Complaint Standards Framework on monitoring, reporting and sharing information develops through 2020/21, ISCAS plans to look at how datasets on complaint handling can be aligned and then utilised with other information to support patient choice.

Facts and Figures

Referrals to ISCAS

More than half of complainants are referred to ISCAS by ISCAS subscribers, while a substantial number of complainants hear about ISCAS by carrying out their own enquiries on the internet. The figure below shows how people were signposted to ISCAS:



Complaints managed by ISCAS

During this reporting period, a total of 486 complainants contacted ISCAS with a concern, via telephone, email or letter. This is a slight drop in the number of contacts received by ISCAS from the previous reporting period (509). Of the 486 contacts, 65% (314) related to ISCAS subscribers, which was a slight decrease in percentage of contacts relating to ISCAS subscribers in the previous reporting period. The remaining 35% of complainants whose complaints related to non-ISCAS subscribers were signposted to other organisations such as The Parliamentary and Health Service Ombudsman, General Medical Council, Dental Complaints Service and the Local Government and Social Care Ombudsman.

92 completed applications which related to ISCAS subscribers were received during the reporting period. 109 complainants forwarded to an Independent Adjudicator had their adjudication completed during the financial year. Some of these cases were received in the previous financial year and had decisions issued in this current financial year.

The ISCAS Management Team has an important role in managing complainant expectations, particularly when they are considering progressing to Independent Adjudication. Some complainants have unrealistic expectations about the possible outcomes of adjudication - seeking a refund, revision surgery and/or financial compensation. These complainants are signposted to more appropriate forums such as Citizen's Advice Bureau or to seek Independent Legal Advice.

Adjudication activity

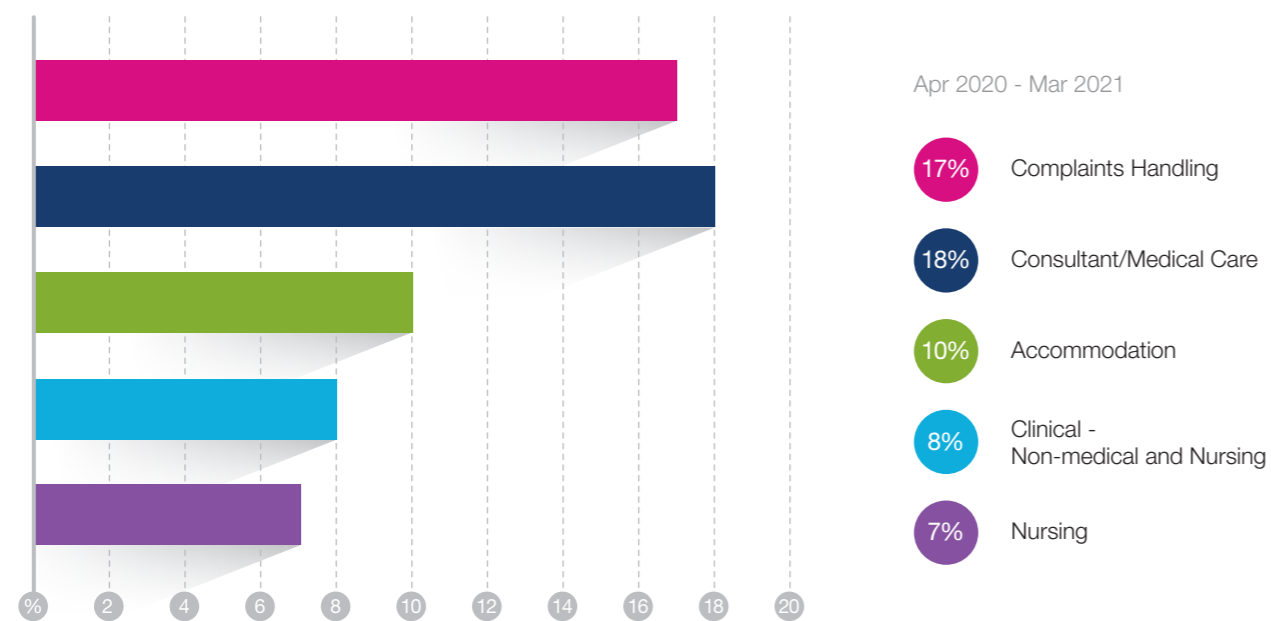
In this reporting period, 109 complainants have received a final decision from an Independent Adjudicator. Of the 109 complaints that have been adjudicated on, adjudicators identified 624 Heads of complaint, up from 348 the previous year. This is reflected in the table below.

	Jan 2016 - Mar 2017	Apr 2017 - Mar 2018	Apr 2018 - Mar 2019	Apr 2019 - Mar 2020	Apr 2020 - Mar 2021
Total number of complaints adjudicated	78	101	107	111	109
Total heads of complaints	240	279	275	348	624

During this financial year, it has been interesting to see the increase in the total heads of complaint. We consider that a possible explanation for this increase is the nature and complexity of the complaints received during the past 12 months.

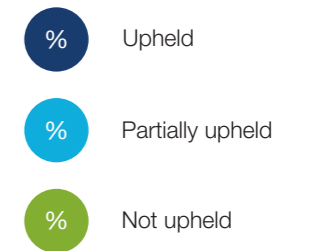
The following table shows the five most numerous categories of Heads of Complaint. This has differed from previous years where the top 5 categories were: Clinical - Non medical and nursing, Accommodation, Complaints Handling, Consultant/ Medical Care and Nursing.

Type of Heads of Complaint at Independent Adjudication

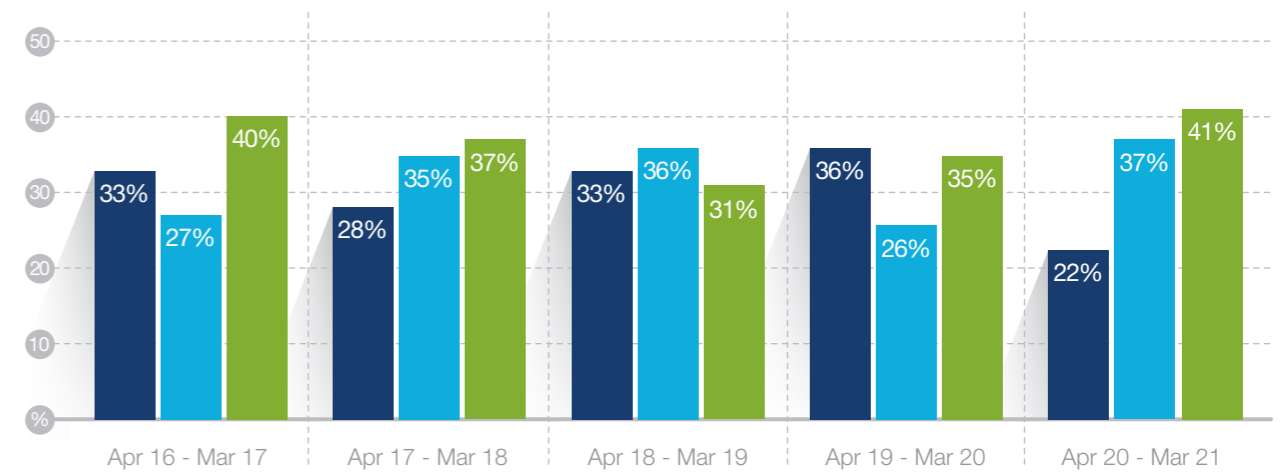


Of note, this year we saw an increase in the number of 'Clinical - Non-Medical and Nursing' complaints. This differed from 'Accommodation' which was more prominent last reporting year.

In each adjudication report, adjudicators either: 'uphold', 'partially uphold' or 'do not uphold' a particular head of complaint. The following table illustrates that the majority (58.8%) of complaint heads are either 'upheld' or 'partially upheld' by adjudicators, which is a slight decrease in percentage of 'upheld' or 'partially upheld' complaint heads reported on in the previous year.



Heads of Complaint upheld at Independent Adjudication stage



Adjudication costs

Individual ISCAS subscribers bear the cost of adjudications. The average cost of an adjudication case in this reporting period was £2,053, which shows a decrease from the previous financial year.

	Apr 2019 - Mar 2020	Apr 2020 - Mar 2021
Adjudicator costs	£212,563	£213,826
Goodwill payment costs	£61,683	£55,206
Clinical expert costs	£21,094	£30,704

Goodwill payments were made in around 83% of completed cases in this reporting period, which is an increase of around 9% compared to the previous year. The average goodwill payment rose very slightly from £605 last year to £613 this year.

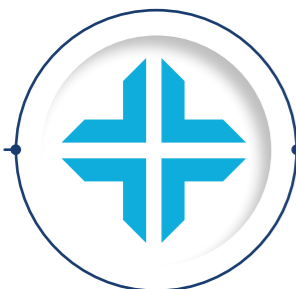
	Jan 2016 - Mar 2017	Apr 2017 - Mar 2018	Apr 2018 - Mar 2019	Apr 2019 - Mar 2020	Apr 2020 - Mar 2021
Cases in which payments made	68	81	88	102	90
% of cases attracting a payment	87%	80%	82%	92%	83%
Total costs	£42,840	£65,815	£66,728	£61,683	£55,206
Average award	£630	£813	£758	£605	£613

Independent Adjudicators may require the use of expert clinical advice to support the adjudication process. Clinical reports are made available to complainants and providers when the adjudicator issues their decision.

24% of cases required expert clinical advice in this reporting period, an increase from the previous year (14%). The cost was £30,704 (or an average of £1,653 per case). This is an increase from last year (£1,357 per case). Independent Adjudicators have discretion whether to engage the services of an expert, depending on the nature and complexity of the case. These vary from year to year.

Complaints about ISCAS

CEDR received six complaints about ISCAS during the financial year. Of these, five were about an adjudicator's decision and this was out of scope as the independent adjudicator has absolute discretion on decisions, which are final and not subject to review. The remaining complaint related to the ISCAS process and was partially upheld.



The ISCAS Team



Jordan Yates
ISCAS Senior Case Manager

Jordan is the first point of contact for patients, independent adjudicators and providers. Jordan has previously worked in a patient facing role for the NHS. She has many years of experience as a case administrator at CEDR, providing advice and assistance to consumers across a range of dispute resolution services and schemes



John-Paul Azzi
ISCAS Manager

John-Paul provides the day-to-day oversight of the ISCAS scheme and administers the panel of independent adjudicators. He is Head of Consumer Services at CEDR and has over 10 years' experience working in alternative dispute resolution. John-Paul's background includes complaint handling, negotiation, conciliation, adjudication, management, quality assurance and complaints review. He is also a qualified solicitor from Australia.



Graham Massie
ISCAS Company Secretary

Graham Massie is CEDR's Chief Operating Officer, Company Secretary and Chief Financial Officer, a role he also performs for ISCAS. A Chartered Accountant and professional mediator by background, Graham has over 20 years' experience in the conflict management field. His current project portfolio with CEDR includes working with a range of leading professional firms, corporate and public sector bodies to develop their in-house negotiation skills and conflict management systems, and he also leads CEDR's research project on 'Cutting the Cost of Conflict'.



Subscribers to ISCAS

Aesthetic Beauty Centre
Aesthetic Plastic Surgery

AI Beauty Clinic

Alliance Medical
Ascot Rehabilitation Centre
Aspen Healthcare

Auris Ear Care

Avicenna Clinic

Babylon Healthcare Services Ltd

Bedford Hospital Private Care - Bridges Clinic

Bella You
Benenden Hospital
Brigstock Skin & Laser Centre
Bupa Cromwell Hospital

Bupa Health Clinics
Care Oncology Clinic

Castle Craig Hospital

Cavendish Clinic

CC Kat Aesthetics

Centre for Reproductive Immunology and Pregnancy
(Miscarriage Clinic)

Centre for Sight

Chase Lodge Hospital

Chelsea and Westminster Hospital

& West Middlesex Private Care

Circle Health Group (BMI Healthcare)
Clatterbridge Private Clinic

Cleveland Clinic

Clinical Partners
Cobalt Health
Cosmetic Surgery Partners
Coyne Medical
Custom Vision Clinic

Doctap

Elanic

Elysium Healthcare Ltd

Emotions Clinic, Education and Training Centre
ENT Referrals Limited
Epsomedical

Evolve Medical

Fairfield Independent Hospital

Fetal Medicine UK

Fleet Street Clinic

Fortius Clinic

Genesis Cancer Care UK Ltd

Guy's and St Thomas' Private Healthcare
(Royal Brompton & Harefield Hospitals)

Hair Science Institute

Harley Street ENT Clinic

Harley Street Specialist Hospital

Harley Street Ultrasound Group

HCA Healthcare

Health Bridge Limited T/A Zava

(Superdrug Online Doctor inclusive)

Hearts First Ambulance Service

Heathrow Medical Services LLP

HLPO Life

Horder Healthcare (McIndoe Surgical Centre)

Hospital of St John and St Elizabeth

IESO Digital Health

Illuminate Skin Clinic

Imperial Private Healthcare

Independent Doctors Federation

InHealth (Vista Health)

Japan Green Medical Centre Ltd

KIMS Hospital Limited

King Edward VII Hospital Sister Agnes

Knightsbridge Doctors

KSL Clinic

LANCuk

LF Aesthetics

Linia Cosmetic Surgery aka Harley Health village

London Claremont Clinic

London Doctors Clinic

London Medical

London Welbeck Hospital

Luxmedica

Manchester Private Hospital

Mayfair Medicum

Mayo Clinic Healthcare LLP

Medical Equipment Solutions Ltd

Medical Imaging Partnership

Medical Solutions UK

Medneo Diagnostics UK Limited

Melbury Clinic T/A The VeinCare Centre

MET Medical Ltd

Midlands Ultrasound & Medical Services (MUMS)

Moorfields Private Eye Hospital

Moorgate Andrology

MSI Reproductive Choices

MYA Cosmetic Surgery

MyBreast Limited

Nash Private Healthcare - Basildon and Thurrock

University Hospitals NHS Foundation Trust (Brook Suite),

Mid Essex Hospital Services NHS Trust (Broomfield),

and Southend University Hospital NHS Foundation Trust

National Migraine Centre

NES Healthcare

New Medica

New Victoria Hospital

Nightingale Hospital

North West Independent Hospital

Nuffield Health

One Healthcare Partners

Operose Health

Optegra Eye Health Care

OSD Healthcare

Pall Mall Medical

Pearl Aesthetics T/A Hunar Clinic

Practice Plus Group

Private GP Clinic

Private Psychiatry

Private Ultrasound Scan

PrivateDoc Limited

Ramsay Health Care

Randex Health

Regent's Park Heart Clinics Ltd

Renevo Care - Hollenden Park Hospital

Riviera Psychology Ltd T/A Autism Assessment UK

Royal Free PPU

Royal National Orthopaedic Hospital - Private Care

Rushcliffe Care Group

Rutherford Cancer Care Limited

Sancta Maria Hospital

Save Minds

Schoen Clinic UK

Sk:n Clinics Ltd (Courthouse Clinics & Destination Skin)

SmartTMS

Spencer Private Hospitals

Spire Healthcare Ltd

St Hugh's Hospital

St Joseph's Independent Hospital

TAC Healthcare Group Ltd

The Cadogan Clinic

The Ewell

The French Cosmetic Medical Company

The GP Surgery Ltd

The Harley Medical Group

The Harley Street Hospital

The London Clinic

The London Psychiatry Centre

The Manchester Clinic

The Medical Cannabis Clinic

The Mews Practice

The Mole Clinic

The New Foscote Hospital Limited

The Parkside Suite

The Plastic Surgery Group

The Priory Group Ltd

The Private Clinic

The Royal Buckinghamshire Hospital

The Sefton Suite

The Soke

The Standing CT Company

The Surrey Park Clinic

The Virtual Catheter Lab Holdings

The Wells Suite

(Maidstone & Tunbridge Wells NHS Trust)

Transform Hospital Group (Burcot Hall Hospital)

UK Birth Centres T/A Private Midwives

Ulster Independent Clinic

Ultrasound Link (City Ultrasound)

UME Diagnostics

Vie Aesthetics

Welbeck Health Partners (One Welbeck)

Weymouth Street Hospital

Wimbledon Neuro-Care

Yabb Consultants T/A Moor Eye Care

ZoomDoc Ltd

Terminated

Bliss Pharmacy

Kinvara Private Hospital



ISCAS

INDEPENDENT SECTOR
COMPLAINTS ADJUDICATION SERVICE

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