



Annual Report

2024 / 2025



ISCAS

INDEPENDENT SECTOR
COMPLAINTS ADJUDICATION SERVICE

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About ISCAS

Owned by the Centre for Effective Dispute Resolution (CEDR), a registered charity, ISCAS provides its services free of charge to patients.

ISCAS exists to give patients in private healthcare a fair, independent route for resolving complaints when local resolution has not been successful. Our role is recognised by healthcare regulators, including the Care Quality Commission (CQC), Healthcare Improvement Scotland (HIS), Healthcare Inspectorate Wales (HIW), and the Regulation and Quality Improvement Authority (RQIA), as well as other appropriate regulatory bodies such as the Parliamentary and Health Service Ombudsman (PHSO) and the Human Fertility and Embryology Authority (HFEA). We hold Memorandums of Understanding with the CQC, HIS, HIW, RQIA, and HFEA to support information sharing in the interest of patient safety and quality of care.

At the heart of our work is the ISCAS Code of Practice for the Management of Complaints, which all subscribing organisations agree to follow. If all local attempts to resolve a complaint have been exhausted without agreement between the patient and the provider, either party may refer the case to ISCAS for independent adjudication. This Independent Review is impartial and transparent, giving patients confidence that their concerns will be heard and fairly addressed.

Where an adjudication raises concerns about a provider's compliance with the ISCAS Code, our Information Sharing Agreements allow us to share these concerns with statutory regulators, along with adjudication outcomes where appropriate. We also alert regulators to providers who fail to give private patients access to a recognised independent review stage, ensuring patients are not denied this important safeguard.

More information is available in the About Us section of the ISCAS website: <https://iscas.cedr.com>



ISCAS Vision, Mission and Values



Our Vision

A healthcare environment where every private patient can access a high-quality, truly independent complaints system that puts their voice at the heart of the process.

Our Mission

To ensure all patients in independent healthcare – including those treated in NHS Private Patient Units (PPUs) – can access independent adjudication when needed, and to promote the ISCAS Code of Practice as the recognised industry standard for fair and effective complaints handling.

Our Values



Compassionate

We listen carefully to patients' concerns, respond with empathy, and resolve issues appropriately to support those who have experienced difficulties in their care.



Fair

We make decisions based on evidence, treating both patients and providers with impartiality and respect.



Responsive

We act swiftly to address patient concerns in line with the ISCAS Code of Practice, ensuring timely and meaningful resolution.



Improving

We use patient feedback and lessons learned from complaints to shape training, update guidance, and continually improve the experience of the complaints process across the independent healthcare sector.

The ISCAS Team

Board



Des Shiels
Chairman



Graham Massie
Director and Company
Secretary



Sally Taber
Executive Director



John Munton
Director

Advisory Board



Baroness Fiona Hodgson CBE
Chair of ISCAS Advisory Board

Operations Team



John-Paul Azzi
Manager



Jordan Yates
Senior Case
Manager



Tom Earley
Principal
Adjudicator



Michelle Oredoko
Case Manager

Director's Review of the Year

This year has been one of sustained activity and meaningful progress, always guided by ISCAS' core purpose – protecting patients and ensuring their concerns are heard, understood, and addressed fairly. I would like to begin by sincerely thanking the ISCAS team, led by Senior Case Manager Jordan Yates, for their dedication and professionalism in supporting patients through what can often be a challenging and emotional process.

Our Independent Adjudicators issued 145 reports this year, up from 112 last year. This increase reflects both the demand for an independent voice for patients and the confidence they have in ISCAS to deliver a fair outcome. Once again, the most common head of complaint related to how complaints themselves are managed, closely followed by issues concerning consultants. Where we see recurring themes that could impact patient safety or confidence, we raise them directly with relevant bodies such as the General Medical Council (GMC) and the Association of British Insurers (ABI), ensuring that patient interests are represented at the highest level.

Sally Taber ISCAS Director

Learning and Improvement

Enhancing how providers respond to and resolve complaints is at the heart of our work—because effective complaint handling leads directly to better outcomes for patients. As part of this commitment, the four training videos we developed on the ISCAS Code remain a core element of the induction process for new subscribers and are available on our website.

- General Complaint Handling Principles under the ISCAS Code
- Stage 1: Managing Complaints under the ISCAS Code
- Stage 2: Managing Complaints under the ISCAS Code
- Stage 3: Managing Complaints under the ISCAS Code

These resources give providers practical tools to resolve concerns effectively and compassionately, reducing the likelihood of unresolved issues escalating to independent adjudication. I am grateful to Suzy Ashworth, ISCAS Adjudicator, for her professional leadership in developing these resources.

We have also delivered targeted training to Phoenix, the Independent Doctors Federation (IDF), and AXA Health, tailoring each session to address real-world lessons from recent adjudications. These training initiatives – along with our 'After Adjudication' reviews – give providers a structured opportunity to reflect, learn, and make changes that will benefit future patients.

Looking Ahead

While our adjudication service remains at the heart of what we do, our broader mission is to create lasting improvements in patient care. Every complaint we see is an opportunity for learning – for providers, for regulators, and for the wider sector. In the coming year, we will continue to work closely with our subscribers, regulators, and stakeholders to ensure that every patient who needs an independent review has access to it, and that the experience of going through a complaint process is as clear, fair, and compassionate as possible.

Patients come to ISCAS at a time when they feel unheard or dissatisfied. Our role is to restore their voice, ensure their concerns are given proper weight, and help rebuild trust in the care they receive. That will remain my focus – and the focus of ISCAS – in the year ahead.

Stakeholder Engagement

ISCAS' engagement with stakeholders is driven by one aim – to ensure patients receive the highest standards of care and that their concerns are addressed fairly and effectively. Our work with partners, regulators, and professional bodies supports better complaint handling across the independent healthcare sector, ultimately improving the patient experience.

We continue as a Corporate Member of the Independent Healthcare Providers Network (IHPN) and take part in their events, which play an important role in advancing both the clinical and organisational aspects of patient care in the public-private healthcare landscape.

Information-sharing meetings have been held with system regulators across the four UK nations – the Care Quality Commission (CQC), Healthcare Improvement Scotland (HIS), Healthcare Inspectorate Wales (HIW), and the Regulation & Quality Improvement Authority (RQIA) in Northern Ireland. These discussions focus on sharing intelligence relevant to complaints management, so that learning from patient cases can inform improvements across the system.

In addition, ISCAS monthly newsletters, which highlight key learning and best practice in complaint handling, are shared with regulators to support a consistent, patient-centred approach across the sector.



The ISCAS Advisory Board chaired by Baroness Fiona Hodgson CBE has met on a regular basis to ensure the Governance process is appropriate for ISCAS and the important role it plays in covering the four countries of the United Kingdom. A new patient representative has joined the Board to ensure that ISCAS remains cognisant of the patient voice and the documentation produced is patient friendly. The CEO of AvMA – Action for Victims of Medical Accidents has attended to bring a different perspective to the Board. Representatives of each of the larger organisations are present in addition to a representative of one of the larger NHS PPUs.

“This year the ISCAS Advisory Board has continued to consolidate and build on all its previous progress, with particular focus on addressing how the patient’s point of view can be better represented.” – Baroness Fiona Hodgson CBE

Efficiency Review

The ongoing review of ISCAS service efficiency, led by Tom Earley, ISCAS Principal Adjudicator, is focusing on several key initiatives:

- New application form – Patients are now able to set out the nature of their complaint, the outcome(s) sought, and provide consent to adjudication within a single form. This is designed to reduce the time spent constructing formal heads of complaint and to streamline the initial stages of the process.
- Targeted provider responses – Providers will be asked to respond directly to the specific points raised by the patient, rather than submitting the full patient records. This will be trialled as a pilot project to assess its value in improving efficiency.
- Clinical expert reports – Work is under way to explore the use of a pro forma template for experts, enabling more focused and consistent responses. A simplified pro forma request form, with concise and relevant questions, is also under consideration.
- Adjudicator report format – A project is in progress to make adjudicators’ reports more concise and accessible, while retaining essential detail. Particular attention will be given to reducing the length of sections that simply restate the complaints process.

These changes are designed to make the adjudication process clearer, quicker, and easier to navigate for patients. By focusing on the specific issues in dispute, removing unnecessary administrative steps, and presenting findings in a more accessible way, patients can expect a more streamlined experience, less repetition, and a faster route to a fair outcome.

Position Statements provided for subscribing organisations this year

- ISCAS Code of Practice
- ISCAS Patients' Guide
- Goodwill Payment Guide
- Guidance for Managing Unacceptable Behaviour by Complainants
- ISCAS Position Statement on Complaints Management and Practising Privileges
- ISCAS Position Statement Complaints Management Fees
- ISCAS Position Statement - Complaint Handling v Clinical Negligence
- Complaints relating to consultants and/or medical care
- ISCAS Position Statement - Criteria in which ISCAS Adjudicators will seek an expert opinion

Subscribers & 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 including the Fertility Units and the Independent Doctors Federation (IDF). The list of subscribers is presented at the end of the report.

NHS Private Patient Units (PPU's)

ISCAS believes that patients who choose private treatment within NHS Private Patient Units (PPUs) should have the same right to an independent review of their complaint if it cannot be resolved locally. At present, this important safeguard is not available through the Parliamentary and Health Service Ombudsman (PHSO), which deals exclusively with NHS complaints.

This position reflects Recommendation 6b of the Paterson Inquiry, which stated:



We recommend that all private patients should have the right to mandatory independent resolution of their complaint.

Our concern is for the patients who are left without this vital layer of protection, not for expanding our subscriber base. Independent review offers reassurance that complaints will be considered impartially, helps to uphold standards of care, and strengthens trust between patients and providers. While there are positive examples

of NHS PPUs already offering this protection—such as Moorfields Private Healthcare, Imperial Private Healthcare, University College London Hospitals NHS Foundation and Great Ormond Street NHS Hospital for Children Foundation Trust, International & Private Care - too many patients remain without access to an independent and impartial review.

Private Fertility Units

Patients undergoing private fertility treatment should have clear, accessible routes to escalate their concerns if local resolution is not possible. Following guidance from the Competition and Markets Authority (CMA), which identifies ISCAS as one of the options for independent complaint review, we have been reaching out to private fertility units to encourage them to provide this safeguard. While progress has been limited to date, our priority remains ensuring that patients in this highly sensitive area of care have access to fair, independent adjudication when they need it.

Cosmetic Surgery and non-surgical Providers

ISCAS' work in the cosmetic sector is guided by one principle – protecting patients and ensuring they can make informed choices about their care. Over the past year, we have continued to engage with the Breast Implant Registry and have participated, where appropriate, in the Registry's Governance Group and the Cosmetic Surgery Certification process. These initiatives help ensure that patients receive treatment from appropriately qualified and accountable practitioners.

To embed these standards across the sector, the Royal College of Surgeons team implementing the Cosmetic Surgery Certification process has delivered two presentations to ISCAS subscribers. The certification process is already being applied in full by Spire Healthcare, whose Group Medical Director has mandated that all surgeons performing cosmetic surgery within its hospitals must hold this certification – a gold standard that other providers should follow.



Subscriber cosmetic providers have actively demonstrated good practice, including participating in the Private Healthcare Information Network (PHIN) and contributing to the Breast Implant Registry. ISCAS continues to work closely with the Royal College of Surgeons to ensure that surgeons within our subscriber units meet the certification requirement, providing patients with added reassurance about their surgeon's qualifications and standards of care.

Beyond the subscriber base, there is still more to be done. ISCAS gave robust evidence to the Department of Health's special working group investigating the risks faced by patients travelling to Turkey for cheaper cosmetic procedures – a trend that has led to serious complications requiring NHS treatment. While the situation has improved, there remains significant concern about non-surgical cosmetic providers, particularly unregulated practitioners offering treatments without proper qualifications or approved substances.

In response, Sally Taber, ISCAS Director and Trustee of the Joint Council for Cosmetic Practice (JCCP), continues to support the JCCP's mission to ensure all practitioners are appropriately trained and use only recognised, safe substances – safeguarding patients and helping them avoid preventable harm.

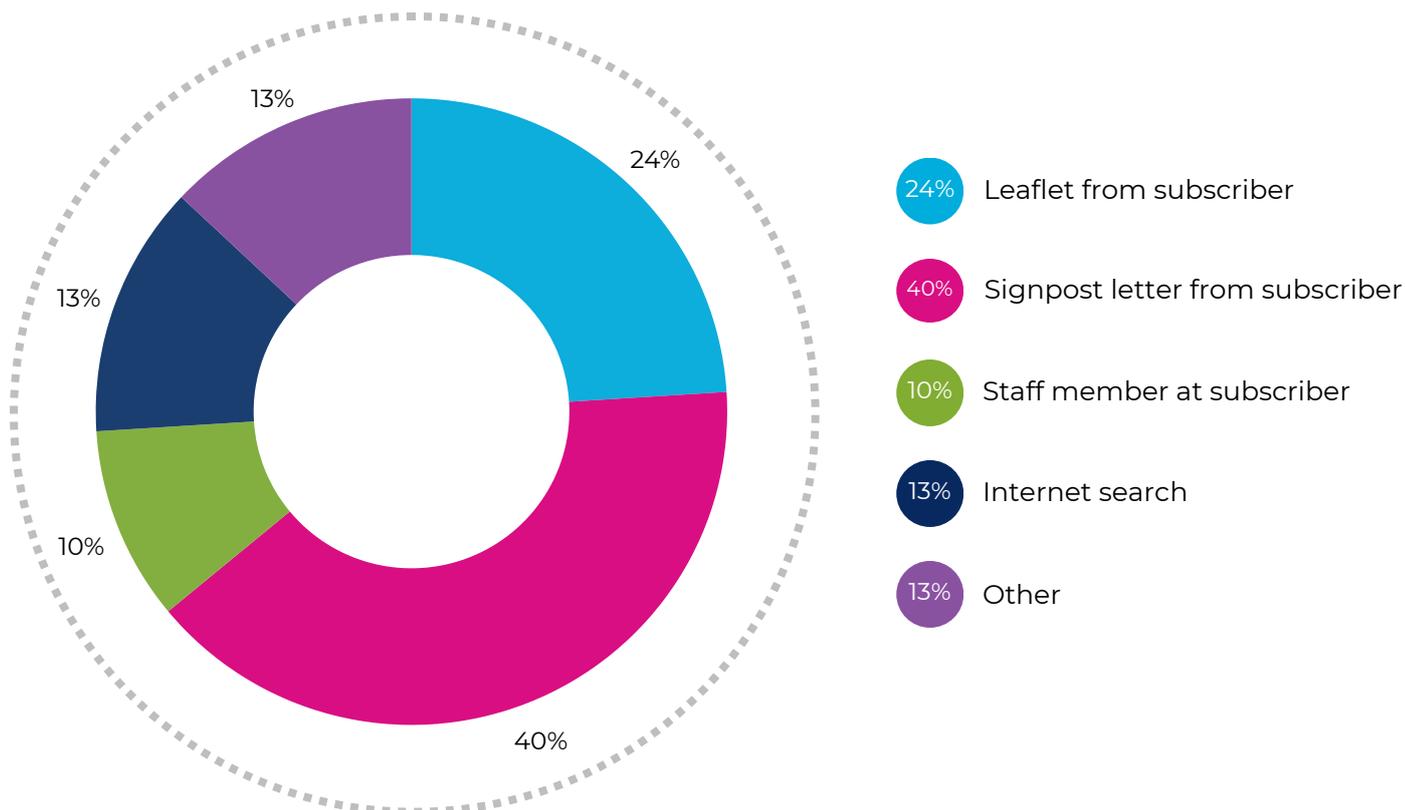


ISCAS Activity, Facts & Figures

Referrals to ISCAS

At the Independent Adjudication stage, over 70% of patients are directed to ISCAS by our subscriber organisations, ensuring they are aware of their right to an impartial review when their complaint cannot be resolved locally. A significant number of patients also find ISCAS themselves through online searches, reflecting the importance of clear, accessible information for those seeking independent help. Table 1 sets out how patients were signposted to ISCAS before their complaint reached the adjudication stage.

Table 1: How People Hear About ISCAS



Complaints Managed by ISCAS

Over the reporting period, 571 patients and family members contacted ISCAS by telephone, email, or letter with concerns about their care. Of these, 70% (402) related to ISCAS subscriber organisations, meaning those patients could access our independent adjudication process if required. The remaining 30% concerned non-subscribers; wherever possible, we signposted these patients to other organisations that could assist them, ensuring they were not left without support.

From the 162 completed applications received about ISCAS subscribers, 145 patients progressed to Independent Adjudication and received a final decision during the financial year. Some of these cases had been submitted in the previous year, with adjudication completed in this period.

An important part of our role is helping patients understand what Independent Adjudication can and cannot achieve. While many seek resolution through explanation, acknowledgement, or service improvements, others hope for outcomes such as refunds, revision surgery, or financial compensation. In cases where such remedies are outside the scope of adjudication, we guide patients to the most appropriate forums for their needs, ensuring their concerns are addressed in the right place

Adjudication Facts and Figures

In this reporting period, 145 complainants have received a final decision from an Independent Adjudicator. In these cases, adjudicators identified 385 Heads of Complaint, up from 343 the previous year. This is reflected in the table below.

	Apr 2020- Mar 2021	Apr 2021- Mar 2022	Apr 2022- Mar 2023	Apr 2023- Mar 2024	Apr 2024- Mar 2025
Total number of complaints adjudicated	109	88	90	112	145
Total heads of complaint	624	344	288	343	385

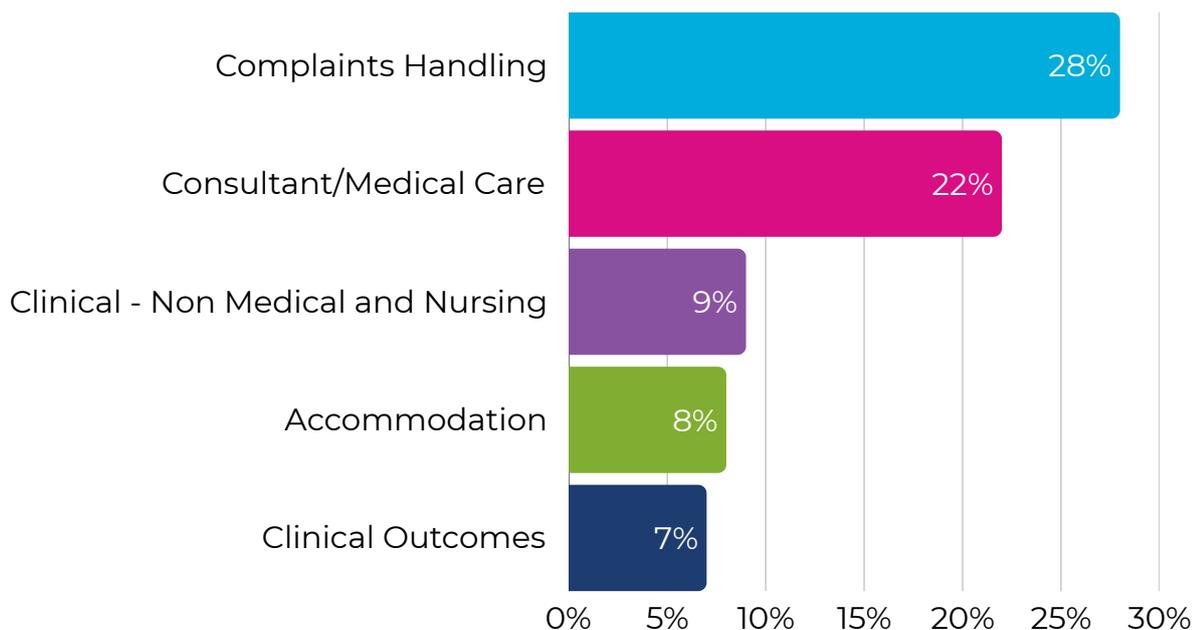
Additional Facts and Figures Cont.

During this financial year, it has been interesting to see the increase in the total heads of complaint. This is due to the increase in Stage 3 adjudications and the complexity of cases.

Table 3: Type of Heads of Complaint at Independent Adjudication

The following table shows the five largest categories of Heads of Complaint. The top 5 categories were: Complaints Handling, Consultant/Medical Care, Clinical – Non-medical and nursing, Accommodation and Clinical Outcomes.

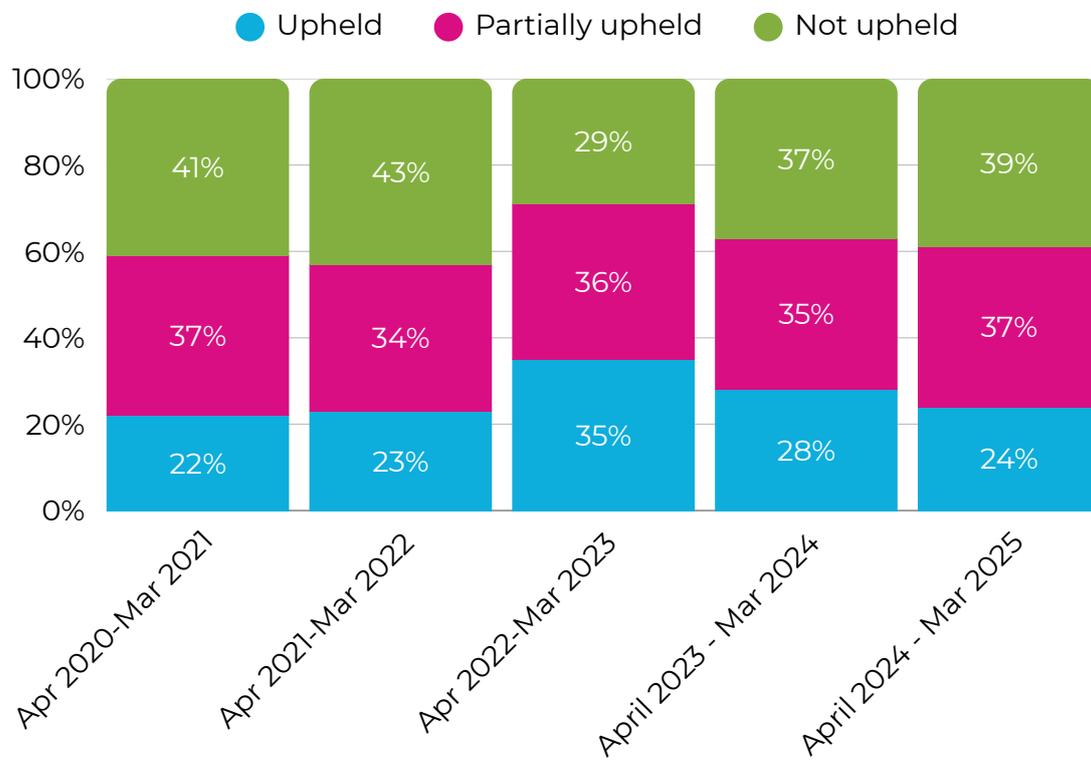
Type of Heads of Complaint April 2024-March 2025



Notably, this year saw an increase in complaints relating to clinical outcomes, contrasting with last year when discharge-related issues were more prominent. In every adjudication report, adjudicators reach a conclusion on each head of complaint, categorising it as either 'upheld', 'partially upheld', or 'not upheld'. As shown in the following table, the majority of complaint heads (61%) were either upheld or partially upheld. This represents a decrease compared with the proportion reported in the previous year.

Additional Facts and Figures Cont.

Table 4: Heads of Complaint Upheld at the 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 £1,590, which shows a decrease from the previous financial year.

Table 5: Overall Independent Adjudication Costs

	£
Collective Adjudicator costs	£230,596
Goodwill payment costs	£80,978
Clinical expert costs	£2,350

Goodwill payments were awarded in approximately 66% of completed cases during this reporting period. Among those cases where a goodwill payment was made, the average amount was £844 – a slight increase on last year’s average of £815. When calculated across all completed cases, including those where no goodwill payment was awarded, the average payment was £558.

Table 6: Goodwill Payments

	Apr 2020- Mar 2021	Apr 2021- Mar 2022	Apr 2022- Mar 2023	Apr 2023- Mar 2024	Apr 2024- Mar 2025
Cases in which payment made	90	66%	71	76	96
% of cases attracting a payment	83%	77%	79%	68%	67%
Total costs	£55,206	£38,776	£53,910	£61,876	£80,987
Average award	£613	£579	£759	£815	£844

Expert Clinical Advice

Where appropriate, Independent Adjudicators may seek expert clinical advice to ensure that decisions are informed by specialist knowledge. These clinical reports are shared with both the complainant and the provider when the adjudicator issues their decision, ensuring transparency for all parties.

In this reporting period, only 1% of cases required expert clinical input – a reduction from 13% in the previous financial year. The total cost of this advice was £2,350, with both the number of cases and associated costs falling compared with last year. This reduction may be linked to ISCAS’ new expert policy and could also reflect improved complaint management at an earlier stage. We aim to see this trend continue, ensuring expert advice is used where it adds value for patients, while maintaining a focus on resolving complaints efficiently and effectively.

	Apr 2020- Mar 2021	Apr 2021- Mar 2022	Apr 2022- Mar 2023	Apr 2023- Mar 2024	Apr 2024- Mar 2025
% of cases requiring expert clinical advice	24%	16%	12%	13%	1%

Complaints About ISCAS

ISCAS received four complaints about our service during the financial year. Our published three stage complaints procedure applies only to concerns about the level of customer service provided by ISCAS Case Managers; it does not cover complaints about the ISCAS process, the adjudication itself, or an adjudicator's decision. This is because the process and the decision are matters for independent adjudicators and reviewing them would compromise the impartiality and finality of the adjudication.

Of the four complaints received, three were outside the procedure's scope: one concerned an adjudicator's decision, another related to the process, and the third was submitted outside the permitted timeframe. The single in-scope complaint, which involved a customer service matter, was resolved promptly at Stage 1, ensuring the complainant's concerns were addressed quickly and fairly.



Subscribers to ISCAS

108 Medical Ltd
 152 Harley Street
 Active Care Group
 Adnova Clinic
 AI Beauty Clinic
 Alliance Medical
 Ascot Rehabilitation Centre
 Augmentive
 Autism Oxford UK Ltd
 Babylon Healthcare Services Ltd (eMed and SheMed)
 Bella Vou
 Benenden Hospital
 Blemish Clinic
 Bloomfield Health
 BPAS
 Bupa Cromwell Hospital (London Medical inclusive)
 Bupa Health Clinics (Blackberry Clinics)
 Care Oncology Clinic
 Castle Craig Hospital
 Central Health London LLP
 Centre for Reproductive Immunology and Pregnancy (Miscarriage Clinic)
 Centre for Sight
 CES Medical Ltd (Previously Clinical Eye Service Ltd t/a Kent Ophthalmology)
 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
 Cognacity Health Limited
 Community Health and Eyecare Ltd
 Community Healthcare Solutions Ltd
 Coppergate Clinic
 Coriel Orthopaedic Group
 Cosmetic Surgery Partners
 Coyne Medical
 Derby Private Health
 Doctor Now Ltd t/as Doctor Now and The Beaconsfield Clinic
 Doctors 4 you
 Dr Alexandra Chambers Medical and Aesthetic Practice
 EA Clinic
 East Sussex Private Patient Unit
 Elanic
 Elevate Health Group Ltd
 Embankment Place Primary Healthcare Ltd
 Epsomedical
 Essex Private Doctors Ltd
 Evolve Medical
 Exeter Eye LLP
 Azara International Limited (previously Facial Plastic Surgery)
 Fleet Street Clinic
 Fortius Clinic
 Genesis Cancer Care UK Ltd
 Great Ormond Street NHS Hospital for Children Foundation Trust, International & Private Care
 Great Western Hospital NHS Foundation Trust
 Grespi Ltd
 Guy's and St Thomas' Private Healthcare (Royal Brompton & Harefield Hospitals)
 Hair Science Institute
 Harley Health Village
 Harley Street Injectables
 Harley Street Ultrasound Group
 Harrogate Harlow Private Healthcare
 HCA Healthcare
 Health and Longevity Optimisation Ltd t/as Hooke
 Health Bridge Limited t/as Zava (Superdrug Online Doctor inclusive)
 HealthHero Solutions Ltd
 Hearts First Ambulance Service
 Heathrow Medical Services LLP
 Hereford Vision Surgical Group
 Herts And Essex Fertility Centre
 Horder Healthcare (McIndoe Surgical Centre)
 Hospital of St John and St Elizabeth
 HS Health Group Limited
 Illuminate Skin Clinic
 Imperial Private Healthcare
 Independent Doctors Federation
 InHealth (Vista Health)
 Ion Kavouni London (Aesthetic Plastic Surgery and Kosmesis Ltd)
 JACE Private Clinic
 Japan Green Medical Centre Ltd
 Jorja Healthcare Holdings Limited (Previously Primary Care Holdings Ltd T/as Living Room Health)

Subscribers to ISCAS Cont.

Kat & Co Healthcare
 KIMS Hospital Limited
 King Edward VII Hospital Sister Agnes
 Kings Fertility
 Knightsbridge Doctors
 KP Aesthetics
 KSL Clinic
 Laser Vision Limited
 Latus Group Bidco Ltd (Centerline Inclusive)
 Levitas Clinic (Formerly The Mews Practice)
 Liverpool Skin Clinics
 London Lauriston Clinic
 London Pregnancy Clinic - Ultrasound Link (City Ultrasound)
 London Psychiatry Clinic
 Lycahealth Leasing Limited
 Manchester Private Hospital
 Mayfair Medicum
 Mayo Clinic Healthcare LLP
 Medical Equipment Solutions Ltd
 Medical Imaging Partnership
 Medneo Diagnostics UK Limited
 MET Medical Ltd
 Mid and South Essex NHS Foundation Trust - Private Care
 Midland Eye
 Midland Health
 Midlands Ultrasound & Medical Services (MUMS)
 MindOf Limited
 Moorfields Private Eye Hospital - London Claremont
 MSI Reproductive Choices
 MSK Doctors & Associates Limited
 My iClinic
 myGP Clinic
 NAFS Health
 Neko Health UK Ltd
 Netri Cosmetic Surgery
 New Medica
 New Victoria Hospital
 Newson Health
 Nightingale Hospital
 Northumbria Health
 Nova Healthcare
 Nuffield Health
 One Heart Clinic
 Optegra Eye Health Care (Custom Vision Clinic inclusive)
 Orri Limited
 OSD Healthcare
 Ouronyx Limited
 Ovara Health (Previously Women's Wellness Centre)
 Oxford ADHD & Autism Centre
 Oxford Independent Health t/as Oxona Healthcare
 Pall Mall Medical
 Paragon Clinic
 Pearl Aesthetics t/as Hunar Clinic
 Peppy Health
 Phoenix Hospital Group - Weymouth Street Hospital (One Healthcare & MyBreast)
 Practice Plus Group
 Precision Medical Clinic
 Private GP Clinic
 Private Midwives Limited
 Private Specialist GPS Ltd t/as My Specialist GP
 Private Ultrasound Scan
 PrivateDoc Limited
 PSL Clinics
 QS Enterprises Ltd t/as Queen Square Imaging Centre
 Queen Anne Street Medical Centre
 Ramsay Health Care
 Radox Health
 Regent Street Clinic
 Regent's Park Heart Clinics Ltd
 Renovo Care
 Riviera Psychology Ltd t/as Autism Assessment UK
 Royal Free PPU
 Royal National Orthopaedic Hospital - Private Care
 Royal Papworth Hospital
 RTN Medical Ltd (including RTN Mental Health Solutions)
 Rushcliffe Care Group
 Sana
 Sancta Maria Hospital
 Save Minds
 Schoen Clinic UK
 Sciensus
 Sheffield Teaching Hospitals NHS Trust
 Skylight Psychiatry Ltd
 Somdoc Walk-In Clinic t/as Private Walk-in Clinic
 South East Eye Surgeons
 Spencer Private Hospitals
 Spire Healthcare Ltd (London Doctor's Clinic)

Subscribers to ISCAS Cont.

St Hugh's Hospital
St Joseph's Hospital
Starjumpz
Sulis Hospital Bath
Surgical Recovery London
Surrey Cardiovascular Clinic
Surrey Orthopaedic Clinic
TAC Healthcare Group Limited
Taktouk Clinic
TDP Bidco Limited (The Dermatology Partnership)
Teladoc Health UK
Tesla Radiology Solutions LTD
The Battersea Clinic Ltd
The Brook Surgery
The Cadogan Clinic
The Clinica Ascot Limited
The Day Clinic
The Doctor's Method
The Doctors Laboratory
The Doctors Practice
The Ewell
The Family Treatment Service
The GP Surgery Ltd
The Hamptons Hospital
The Harley Street General Practice Ltd
The Harley Street Hospital
The Health Suite
The Lawrence Clinic
The Linbury Doctors Ltd
The LivingCare Group
The London Clinic
The London Psychiatry Centre
The Mole Clinic
The National Heart Clinic
The New Foscote Hospital Limited
The Newcastle upon Tyne Hospitals NHS Foundation Trust Private Care
The Parkside Suite
The Plastic Surgery Group
The Priory Group Ltd
The Royal Buckinghamshire Hospital
The Sefton Suite
The Soke
The Surrey Park Clinic
The Virtual Catheter Lab Holdings
The Walcote Practice
Wells Health (Maidstone & Tunbridge Wells NHS Trust)
The Whiteley Clinic
TPC Group (previously The Private Clinic)
Ulster Independent Clinic
UME Diagnostics
University College London Hospitals NHS Foundation Trust - Private Care
University Hospital Southampton NHS Foundation Trust
University Hospitals of Leicester - Private Care
Veincentre
Vie Aesthetics
Virginia Water Private Medical Clinic
VISIO Health
Vita Health Group
Welbeck Health Partners (One Welbeck)
Well Life Clinic
Wimbledon Neuro-Care
Woodlands Suite – Private Care at the Royal Orthopaedic Hospital
Yorkshire Skin Centre



ISCAS

INDEPENDENT SECTOR
COMPLAINTS ADJUDICATION SERVICE

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