NeuroClnx

COMPLAINTS POLICY – NON-RESEARCH SERVICES

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1. INTRODUCTION

Neurocln x is committed to providing high-quality, safe and person-centred Early Detection Pathway and Private Treatment Services across Scotland and England. We recognise that feedback, concerns and complaints are valuable opportunities to improve the quality, safety and effectiveness of the services we provide.

We are committed to fostering a culture of openness, accountability and continuous improvement, ensuring that all patients are treated with dignity, respect and compassion throughout their care. We acknowledge that, despite robust clinical and governance systems, concerns or complaints may occasionally arise regarding the care provided, communication, administrative processes or the overall patient experience.

To support the prompt and fair resolution of concerns, Neurocln x has established this Complaints Policy for Early Detection Pathway and Private Treatment Services. The policy provides a clear, accessible and transparent process for identifying, receiving, recording, investigating, responding to and learning from complaints. We are committed to handling all complaints fairly, consistently and without discrimination, ensuring complainants are not disadvantaged for raising concerns.

Information on how to raise a complaint will be made available to all patients in an accessible format. Where appropriate, Neurocln x will make reasonable adjustments to support patients or their representatives in raising concerns.

Through effective complaint management, Neuroclnx aims to:

- Ensure complaints are handled fairly, consistently and respectfully.
- Resolve concerns promptly wherever possible.
- Learn from complaints to improve the quality and safety of our services.
- Identify and implement corrective and preventative actions where appropriate.
- Maintain a safe, supportive and patient-centred environment.

This policy forms part of Neuroclnx's wider Quality Management System and supports our commitment to continuous quality improvement and regulatory compliance.
Neuroclnx operates in accordance with the regulatory requirements applicable to independent healthcare providers within England and Scotland.

For services delivered in England, this policy complies with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, including Regulation 16 (Receiving and Acting on Complaints) and associated guidance issued by the Care Quality Commission (CQC).
For services delivered in Scotland, this policy complies with the Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011, including the requirements relating to complaints handling and quality assurance. Healthcare Improvement Scotland (HIS) regulates registered independent healthcare services within Scotland and may be contacted directly by patients wishing to raise concerns regarding registered services.

Healthcare Improvement Scotland
Programme Manager
Healthcare Improvement Scotland
Independent Healthcare Team
Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Email: **his.ihcregulation@nhs.scot**
Where a complaint identifies a notifiable patient safety incident, Neuroclnx will also comply with its statutory and organisational Duty of Candour obligations where applicable.

2. PURPOSE OF THE POLICY

The purpose of this policy is to establish a consistent approach for managing complaints relating to Neuroclnx's Early Detection Pathway and Private Treatment Services.
The policy aims to ensure that:

- patients know how to raise concerns or complaints;
- complaints are managed fairly, promptly and confidentially;
- learning is identified and acted upon;
- trends are monitored through Neuroclnx's governance processes;
- improvements are implemented to reduce the likelihood of recurrence.

This policy applies only to Early Detection Pathway and Private Treatment Services.
Complaints relating to research studies are managed separately under the Complaints Policy – Research.

3. SCOPE OF THE POLICY

This policy applies to all patients receiving Early Detection Pathway or Private Treatment Services delivered by Neuroclnx.
It includes complaints relating to:

- Clinical assessment, treatment or procedures.
- Communication and patient experience.
- Professional conduct or behaviour of staff.
- Administrative processes including appointments, correspondence, billing or records.
- Clinic facilities, accessibility or environment.
- Any other aspect of the service provided.

This policy applies to all permanent, temporary, agency and contracted staff working on behalf of Neuroclnx.

4. PROCEDURES

4.1. Identifying complaints

Complaints can be received in the following formats:
Verbal Complaints: In person or by phone.
Written Complaints: By email, post, on social media, or via the clinic-wide email address info@Neuroclnx.com
Anonymous Complaints: Complainants may submit an anonymous complaint, though Neuroclnx encourages identification to ensure appropriate follow-up.

Complaints should ideally be made as soon as possible following the incident to allow for prompt investigation. The clinic encourages patients to raise concerns at the earliest opportunity.

All mechanisms through which complaints could be received are regularly monitored by Neuroclnx staff trained in recognising and escalating complaints where necessary.

4.2. Receiving, handling, and responding to complaints

The specific process for handling complaints is detailed in site-specific SOPs but in general the following steps will always take place:

Initial Acknowledgment

- Acknowledgment of Receipt: Complaints will be acknowledged in writing or verbally within 5 working days. The complainant will be informed about the process and the estimated timeline for resolution.
- Details and Clarification: If necessary, a member of staff will contact the complainant to clarify the details of the complaint and ensure that it is understood in full.
- Early Resolution: We aim to resolve complaints informally at the earliest possible stage, where appropriate. The complainant will be informed of the resolution within 10 working days.

Formal Investigation

- If the complaint cannot be resolved informally, it will be escalated to a formal investigation. This will be initiated by the Medical Director who will decide who is best placed within the organisation to handle the complaint
- Regular meetings will take place to discuss findings and compile a response.
- Findings and Resolution: The complainant will receive a written response with the findings, any actions taken, and the steps that will be taken to prevent a recurrence, if applicable.
- No written communications will be sent without the prior approval of the Medical Director.

Further Review (Escalation)

- If the complainant is not satisfied with the outcome of the formal investigation, they may request a further review.
- Further review may take place within Neurocinx, consulting the Board and SMT where required, or Neurocinx may choose to seek input from regulatory bodies (HIS, CQC) accordingly
- The complainant can self-refer their complaint at any time to the regulatory bodies as listed above.

Timeframes

- Complaints are accepted by Neurocinx up to 6 months after the event occurred.
- Neurocinx will provide a written acknowledgement of a complaint within 7 working days of receipt and will provide a full response within 40 working days of receipt.
- More detail regarding expected timeframes is included on a site-specific basis within relevant SOPs
- We aim to resolve all complaints as quickly as possible, but complex complaints may take longer to address. The complainant will be kept informed throughout the process.

Confidentiality

All complaints will be handled confidentially and with respect for the complainant's privacy. Personal data will be processed in accordance with GDPR and relevant data protection laws in both Scotland and England. Information about the complaint will only be shared with staff involved in the investigation and resolution of the issue.

Escalation

If a complainant remains dissatisfied following completion of Neurocinx's complaints process, they may request that the complaint be reviewed internally.
Patients may also raise concerns directly with the relevant regulator.

For services provided in England, patients may share concerns with the Care Quality Commission (CQC), which uses such information to inform its regulatory activities, although it does not investigate or determine individual complaints.
For services provided in Scotland, patients may contact Healthcare Improvement Scotland (HIS), which regulates independent healthcare services.

5. ASSOCIATED DOCUMENTS

SOP Managing Complaints

SOP informed consent

Policy – Informed consent

Complaints Policy - Research

6. ROLES AND RESPONSIBILITIES

The **Medical Director** has responsibility for ensuring written complaints are addressed in an appropriate manner.

SMT has responsibility for ensuring timely response and execution of action items in response to any written complaints.

All staff are responsible for ensuring that complaints are handled professionally and in a timely manner, escalating where required. All staff should treat complainants with respect and empathy.

REFERENCES

1. Care Quality Commission. Regulation 16: Receiving and Acting on Complaints. Available at: https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-16

2. Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (SI 2014/2936), Regulation 16: Receiving and Acting on Complaints.

3. The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011 (SSI 2011/182), Regulation 15: Complaints.

	Detail	**Signature/Date (DDMMYYYY)**
Document Version	5.0	Final 18Jun2026
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Medical Director	Jennifer Lynch	18JUN2026