



Psicon Ltd

Statement of Purpose

Health and Social Care Act 2008



This Statement of Purpose will be reviewed annually to ensure continued alignment with our regulatory obligations, organisational values, and the needs of those we serve.



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1 The Provider's name, legal status, address and other contact details

Statement of purpose, Part 1

Health and Social Care Act 2008, Regulation 12, schedule 3

The provider's business contact details, including address for service of notices and other documents, in accordance with Sections 93 and 94 of the Health and Social Care Act 2008

1. Provider's name and legal status					
Full name ¹	Psicon Limited				
CQC provider ID	1-6269123747				
Legal status ¹	Individual	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Organisation <input checked="" type="checkbox"/>

2. Provider's address, including for service of notices and other documents	
Business address ²	15-17 New Dover Road
Town/city	Canterbury
County	Kent
Post code	CT1 3AS
Business telephone	03308 383105
Electronic mail (email) ³	enquiries@psicon.co.uk

By submitting this statement of purpose, you are confirming your willingness for CQC to use the email address supplied at Section 2 above for service of documents and for sending all other correspondence to you. Email ensures fast and efficient delivery of important information. If you do not want to receive documents by email, please check or tick the box below. We will not share this email address with anyone else.



I/we do NOT wish to receive notices and other documents from CQC by email	
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1. Where the provider is a partnership, please fill in the partnership's name at 'Full name' in Section 1 above. Where the partnership does not have a name, please fill in the names of all the partners at Section 3 below
2. Where you do not agree to service of notices and other documents by email they will be sent by post to the business address shown in Section 2. This includes draft and final inspection reports. This postal business address will be included on the CQC website.
3. Where you agree to service of notices and other documents by email your copies will be sent to the email address shown in Section 2. This includes draft and final inspection reports.

Please note: CQC can deem notices sent to the email or postal address for service you supply in your statement of purpose as having been served as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents.

3. The full names of all the partners in a partnership	
Names:	N/A



2 Aims and Objectives

2.1 Introduction

Our aim is to deliver safe, high-quality, effective and person-centred care under the regulated activity of "treatment of disease, disorder or injury," with a specific focus on neurodevelopmental and psychological health.

At Psicon we recognise that everyone's mind is unique, we believe that with understanding, empathy and expert support everyone can thrive. Psicon was founded on personal and professional beliefs where neurodivergent children and adults could be assessed and fully supported with kindness, compassion and the best clinical care.

We became known for providing a warm and welcoming safe space, where every 'different', unhappy or challenged individual feels understood and hopeful for their future. We continue to be committed to improving health outcomes for individuals of all ages through timely responsive assessments that are tailored to individual needs, provide evidence-based interventions, and compassionate care that is delivered by the right people with the right skills in an environment that feels safe..

We work in partnership with individuals, families, the NHS, local authorities, and other organisations to provide the following support for children and adults:

- Autism assessment services
- ADHD assessment and treatment services
- Mental wellbeing services

All our services are designed, monitored, managed and delivered to meet the CQC Fundamental Standards of Quality and Safety.

Assessment Services

Our diagnostic assessment models follow NICE guidelines and are designed to gather information by standardised tests (e.g., Conners), interviews, questionnaires, and collateral information to create an individual formulation which is used to differentiate between ASD/ADHD and other potential diagnoses which could better explain the presentation of the person being assessed.

Treatment Services

Where treatment is indicated, we work collaboratively with individuals and families to explore the range of appropriate support options, including the potential for medication and psychological interventions. All prescribing decisions guided by clinical best practice on the safe and effective use of medicines.

We support clients to reach the best possible outcome, including (where appropriate) achieving a stable and effective medication dose. Once stability is reached, ongoing care may be transitioned to a shared care arrangement with the individual's GP/local NHS service, where clinically appropriate. Alternatively, private clients may choose to continue receiving support through our service, depending on their needs and preferences.



Mental Wellbeing Services

Although not part of our regulated activity, we also offer a range of mental wellbeing services designed to support individuals during challenging times. Our clinicians are experienced in a variety of therapeutic approaches and strive to create a safe, supportive environment in which clients feel comfortable to talk and explore their concerns. Where therapy is indicated, we work collaboratively with clients to identify the most appropriate and beneficial approach. These services are non-clinical in nature and are intended to complement, our regulated clinical offerings.



2.2 Organisational Goals

To fulfil our aim, we pursue the following strategic objectives:

- **The best customer services** - Outstanding customer service that is responsive, respectful, and inclusive.
- **The most efficient and effective clinical work** - service delivery that meets the highest professional and regulatory standards.
- **A truly inclusive organisation** - with culture of equity and inclusion where all service users and staff feel respected and valued.
- **A thriving and engaged staff group** - empowered through development, collaboration, and accountability.

2.3 Core Values: Commitment, Trust, Integrity & Kindness

Our values guide how we work with our clients and with each other. They are at the heart of all we do.

- **Commitment:** To clients, colleagues, and continuous improvement.
- **Trust:** Built through reliability, discretion, and professionalism.
- **Integrity:** Upholding ethical standards even when challenging.
- **Kindness:** Demonstrated in daily actions, from clinical work to informal support.

2.4 Leadership and Accountability

Our leadership structure is outlined in the organisational chart submitted with this application. Psicon is led by a team of experienced psychologists, psychiatrists, and service managers who oversee clinical quality, operational efficiency, and staff wellbeing.

Weekly leadership meetings address service delivery and corporate governance.

A quarterly Clinical Governance Committee oversees clinical standards, risk, safety, and professional development.

Each service area has a designated clinical/service lead responsible for local operations and staff supervision.

All staff are encouraged to participate in service development and quality improvement.



2.5 Ensuring Safe Practice

We are committed to protecting both clients and staff from abuse and avoidable harm by embedding a culture of safety, learning, and accountability throughout our organisation. In alignment with the principles of the Patient Safety Incident Response Framework (PSIRF), we adopt a proactive and systems-based approach to managing risk, responding to incidents, and safeguarding vulnerable individuals. Risk management is an integral part of our operational and clinical governance. Risks are routinely assessed and reviewed within departmental and leadership forums, with mitigation plans clearly documented, implemented, and regularly monitored for effectiveness.

Our Adverse Incident and Near Miss Reporting Policy supports a culture of learning and improvement, underpinned by the principles of Just Culture. We recognise that most incidents arise from system failings rather than individual error, and we strive to understand the broader context and contributory factors when things go wrong. This approach helps us to respond fairly and consistently, avoiding blame and encouraging honest reflection. Lessons learned are shared across teams to strengthen resilience and reduce the risk of recurrence.

Safeguarding remains a core component of our duty of care. All staff receive safeguarding training appropriate to their roles, with administrative staff trained to a minimum of Level 1 and clinical staff to Level 3. We have designated Safeguarding Leads and Deputies who are supported by a robust policy framework, enabling them to provide specialist advice, oversight, and escalation where necessary. These safeguarding arrangements are regularly reviewed to ensure they remain effective, responsive, and compliant with statutory requirements and best practice standards.

All treatments are delivered by appropriately qualified and experienced professionals, ensuring safe, high-quality care. Psychiatrists are medically trained, registered with the General Medical Council (GMC), and undergo regular appraisal. Psychologists are registered with the relevant professional bodies, including the British Psychological Society (BPS), the Health and Care Professions Council (HCPC), and the British Association for Behavioural and Cognitive Psychotherapies (BABCP). Our robust Recruitment and Selection Policy ensures that all staff have completed enhanced DBS checks, their qualifications and registrations are verified, and they engage in ongoing professional development and supervision to maintain clinical excellence.



2.6 Ensuring Effective Care, Treatment & Support

Effectiveness is continually monitored through a structured and responsive audit programme, tailored to the specific needs of each service. These audits assess key performance indicators such as clinical outcomes, referral rates, waiting times, adverse events, and workforce utilisation.

Alongside quantitative data, we place significant emphasis on client and family feedback. Insights gathered from complaints, concerns, and compliments are systematically reviewed and analysed to identify recurring themes, highlight good practice, and pinpoint areas requiring improvement. This feedback loop is essential in ensuring that our services remain person-centred, responsive, and aligned with the needs and expectations of those who use them.

While still in the implementation phase, our intention is to integrate our Experts by Experience, into quality governance processes, including safety reviews, incident investigations, and improvement initiatives. Their lived experience will provide valuable insight to ensure services are not only clinically effective but also compassionate and responsive to individual needs.

Furthermore, our regular service reviews ensure that findings from audits and patient feedback are integrated into decision-making, supporting safe and effective service development. This combined approach is embedded in our Quality Management System (QMS) and reflects our commitment to transparency, improvement, and accountability.

2.7 Responsiveness and Feedback

We view all feedback as a valuable opportunity for learning and continuous improvement. To support this, we provide multiple channels for clients to share their experiences, including verbal, written, and survey-based feedback. We respond promptly to all concerns, complaints, and compliments, ensuring that each is handled with openness, fairness, and confidentiality in line with our Duty of Candour. Importantly, we treat complaints not as setbacks but as tools to drive learning and improve the quality of our services.

2.8 Service Locations

In addition to our primary registered site, 15-17 New Dover Road, we deliver services at satellite locations, which are listed in the appendix of the Statement of Purpose.



3 Location(s) and

- The people who use the service there
- Their service type(s)
- Their regulated activity(ies)



Fill in a separate part 3 for each location

The information below is for location no.:	1	Of a total of:	1	Locations
Name of location	Psicon			
Address	15-17 New Dover Road Canterbury Kent			
Postcode	CT1 3AS			
Telephone	03308 383105			
Email	enquiries@psicon.co.uk			



Description of the location

(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)



Building description

Our primary clinic at 15-17 New Dover Road, is designed to feel like a home-from-home environment, offering a welcoming and comfortable space where children, young people and their families can feel at ease from the moment they arrive.

The front of house team is trained to greet everyone with kindness, ensuring a friendly and supportive first impression. A warm drink is available via our tea and coffee machine, and fresh drinking water is also provided. The peaceful atmosphere is further enhanced by the presence of a calming fish tank.

We prioritise privacy, confidentiality, and dignity by restricting site access to clinical and front-of-house staff only, with administrative functions based off-site.

The building is arranged over multiple floors and while it is an older property, accessibility remains a clear priority. There is a designated disabled parking space on-site, which can be booked in advance. Entry to the building is via a ramp or steps access, and a lift is available to take visitors to the second floor. In addition, the ground floor includes fully accessible clinic rooms for individuals who may have mobility needs or prefer step-free access.

The building is equipped with air-conditioning throughout, helping to ensure a comfortable environment for both visitors and staff all year round.

Toilet facilities are available for all visitors, and these are maintained daily to ensure high standards of cleanliness.

To support the safety of both service users and staff, discreetly placed panic alarms are installed in every clinic room. These alarms are designed to be unobtrusive ensuring they do not impact the therapeutic atmosphere, while still offering rapid response functionality - if required.

Many of the clinic rooms are thoughtfully themed to create a welcoming and engaging space for children and young people. Designs including calming and colourful murals such as outer space, around the world adventures and the jungle, helping to create a child-friendly environment that supports comfort, imagination and therapeutic engagement.

Staff receive regular safeguarding training appropriate to their role and the safeguarding lead and deputy are based on-site to respond to any concerns or incidents promptly and effectively.

Certain areas of the building are designated staff-only and are accessed securely via key fob to ensure appropriate boundaries between clinical and operational spaces. Clear, accessible signage is displayed throughout the building to guide visitors to toilets and emergency exits.

Staffing and qualifications

The clinic is staffed by a multidisciplinary team of professionals who are experienced in providing mental health and neurodevelopmental services. This includes paediatricians, psychiatrists, clinical psychologists, nurse prescribers and speech and language therapists. All clinicians are appropriately qualified, registered with their respective bodies, and undergo regular clinical supervision and ongoing professional development.

Administration staff are trained in safeguarding, data protection and confidentiality, health and safety, equality and diversity, responding to emergency situations and Oliver McGowan training.



We regularly access workforce to ensure we always maintain safe staffing levels with systems in place to ensure clinical oversight, safeguarding leadership and appropriate escalation processes. Clinical governance, regular team meetings, supervision and the quality management system support high standards of care across the service.

Although the Registered Manager is physically present at this location for a limited portion of the week, he remains fully accessible remotely during core operating hours, five days a week, and is based less than a 10-minute walk away at Burgate Lane, ensuring he can attend the site promptly if required and maintains effective oversight of the regulated activity.

No of approved places / overnight beds (not NHS)			0
CQC service user bands			
The people that will use this location ('The whole population' means everyone).			
Adults aged 18-65	x	Adults aged 65+	x
Mental health	x	Sensory impairment	
Physical disability		People detained under the Mental Health Act	
People with an eating disorder		People who misuse drugs or alcohol	
Dementia		Learning difficulties or autistic disorder	x
Children aged 0 – 3 years	x	Children aged 4-12	x
Children aged 13-18			x
The whole population		Other (please specify below)	



The CQC service type(s) provided at this location	
Acute services (ACS)	
Prison healthcare services (PHS)	
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	
Hospice services (HPS)	
Rehabilitation services (RHS)	
Long-term conditions services (LTC)	
Residential substance misuse treatment and/or rehabilitation service (RSM)	
Hyperbaric chamber (HBC)	
Community healthcare service (CHC)	
Community-based services for people with mental health needs (MHC)	
Community-based services for people with a learning disability (LDC)	
Community-based services for people who misuse substances (SMC)	
Urgent care services (UCS)	
Doctors consultation service (DCS)	x
Doctors treatment service (DTS)	x
Mobile doctor service (MBS)	
Dental service (DEN)	
Diagnostic and or screening service (DSS)	
Care home service without nursing (CHS)	
Care home service with nursing (CHN)	
Specialist college service (SPC)	
Domiciliary care service (DCC)	
Supported living service (SLS)	
Shared Lives (SHL)	
Extra Care housing services (EXC)	



Ambulance service (AMB)	
Remote clinical advice service (RCA)	
Blood and Transplant service (BTS)	



Regulated activity(ies) carried on at this location	
Personal care	
Registered Manager(s) for this regulated activity:	
Accommodation for persons who require nursing or personal care	
Registered Manager(s) for this regulated activity:	
Accommodation for persons who require treatment for substance abuse	
Registered Manager(s) for this regulated activity:	
Accommodation and nursing or personal care in the further education sector	
Registered Manager(s) for this regulated activity:	
Treatment of disease, disorder or injury	X
Registered Manager(s) for this regulated activity: Dr Daniel Simmonds	
Assessment or medical treatment for persons detained under the Mental Health Act	
Registered Manager(s) for this regulated activity:	
Surgical procedures	
Registered Manager(s) for this regulated activity:	
Diagnostic and screening procedures	
Registered Manager(s) for this regulated activity:	
Management of supply of blood and blood derived products etc	
Registered Manager(s) for this regulated activity:	
Transport services, triage and medical advice provided remotely	
Registered Manager(s) for this regulated activity:	
Maternity and midwifery services	
Registered Manager(s) for this regulated activity:	



Termination of pregnancies	
Registered Manager(s) for this regulated activity:	
Services in slimming clinics	
Registered Manager(s) for this regulated activity:	
Nursing care	
Registered Manager(s) for this regulated activity:	
Family planning service	
Registered Manager(s) for this regulated activity:	



4 Registered manager details

Including address for service of notices and other documents

The information below is for manager number:	1	of a total of:	1	Managers working for the provider shown in part 1
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1. Manager's full name	Dr Daniel Simmonds
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2. Manager's contact details	
Business address	15-17 New Dover Road
Town/city	Canterbury
County	Kent
Post code	CT1 3AS
Business telephone	03308 383105
Manager's email address¹	
Daniel.simmonds@psicon.co.uk	

¹ Where the manager has agreed to service of notices and other documents by email they will be sent to this email address. This includes draft and final inspection reports on all locations where they manage regulated activities.

Where the manager does not agree to service of notices and other documents by email they will be sent by post to the provider postal business address shown in Part 1 of the statement of purpose. This includes draft and final inspection reports on all locations.

Please note: CQC can deem notices sent to manager(s) at the relevant email or postal address for service in this statement of purpose as having been served, as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents to registered managers.



3. Locations managed by the registered manager at 1 above

(Please see part 3 of this statement of purpose for full details of the location(s))

Name(s) of location(s) (list)	Percentage of time spent at this location
15-17 New Dover Road	25%



4. Regulated activity(ies) managed by this manager	
Personal care	
Accommodation for persons who require nursing or personal care	
Accommodation for persons who require treatment for substance abuse	
Accommodation and nursing or personal care in the further education sector	
Treatment of disease, disorder or injury	X
Assessment or medical treatment for persons detained under the Mental Health Act	
Surgical procedures	
Diagnostic and screening procedures	
Management of supply of blood and blood derived products etc	
Transport services, triage and medical advice provided remotely	
Maternity and midwifery services	
Termination of pregnancies	
Services in slimming clinics	
Nursing care	
Family planning service	



5. Locations, regulated activities and job shares

Where this manager does not manage all of the regulated activities ticked / checked at 4 above at all of the locations listed at 3 above, please describe which regulated activities they manage at which locations below.

Please also describe below any job share arrangements that include or affect this manager.

N/A



Appendix: List of Satellite Locations

Name of location	Address
Delandale House	37 Old Dover Road Canterbury Kent CT1 3JF
Basingstoke	Eastlands li London Road Basingstoke RG21 4AW
Isle of Wight	Mill Court Business Centre Furrlongs Newport PO30 2AA
Burgate Lane (Administration headquarters – not open to the public)	4-9 Burgate Lane Canterbury Kent CT1 2XJ