

COMPLAINT FORM

If you would like to report a complaint about a psychotherapist to The Association of Integrative Research, Counselling and Psychotherapy (ACCPI) please complete this form either by hand or electronically and send it to the address at the bottom of this form. Please note that ACCPI only deals with complaints involving its members. If you wish to complain about a psychotherapist who is not a member of ACCPI you should contact the Romanian Psychotherapy Federation or the Romanian College of Psychologists.

The aim of this form is to provide ACCPI with:

- the basic information needed to identify you and the individual you wish to make a complaint against; and
- details of your complaint needed to investigate the matter.

Please note that due to the measures introduced by the Government in response to COVID-19, all our staff are working from home. This means we have limited access to our post and we would strongly advise that you send your complaint by email to silvia.georgix@gmail.com and not by post where possible.

If you would like to discuss your concerns with the Chair of the Ethics Committee, or if you need help to fill in this form, please call 0040.745.816.116

1. Your contact details

Name and surname

Address.....

Telephone number

Email.....

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* Please provide us with a telephone number we can contact you on during office hours.

2. Psychotherapist's contact details

Please give details of the psychotherapist against whom you wish to make a complaint.

Psychotherapist's name and surname

Psychotherapist's address.....

Psychotherapist's telephone number

Psychotherapist's email.....

3. Details of your complaint

Please describe your complaint as fully as possible. Provide as much information as possible about what happened, where it happened, and the dates when it happened.

(continue on separate sheet if necessary)

4. Supporting documents

Please provide copies of any correspondence you have sent to the psychotherapist about your complaint or any other evidence that you think supports your position.

Please list below the documents you are sending. Please number each document so that we can easily identify them.

Document number	Description

5. Have you complained about this to any other organisation?

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If you have, please say which organisation(s) you have complained to. Give brief details of what happened to your complaint, and provide copies of any letters between you and them.

(continue on separate sheet if necessary)

6. Declaration and consent to disclose

In order to deal with your complaint, we will need to disclose details of it to the psychotherapist(s) concerned and their employer(s). Please read, sign and date the declaration box below to give us your consent to do this. We are unlikely to be able to take your complaint any further if you do not sign and date in the box below.

I would like ACCPI to consider my complaint. I confirm that all the information I have given in this form is, to the best of my knowledge, accurate. I understand that:

- ACCPI will need to handle personal details about me – which could include sensitive information – to deal with my complaint.
- ACCPI will need to disclose my complaint and any information that is necessary, including confidential material, in connection with it to the psychotherapist(s) named in this form and may share it with any other regulator or authority (including but not limited to the Police).
- The psychotherapist(s) can disclose to ACCPI any information that is necessary for the ACCPI to consider my complaint.

Signature

Date:

7. Next steps:

Thank you for completing this form. Please send the complaint to us by email. Type your full name in the signature box, save this form and attach the file to an email, together with electronic copies of supporting evidence, to silvia.georgix@gmail.com

You should expect to hear from us within 14 working days of receiving your complaint.