



APHP COMPLAINTS PROCEDURE

The purpose of the APHP Ltd Complaints Procedure is to provide an open and transparent way for clients, members of the public or other therapists to raise a complaint against any APHP registered therapist/trainer against whom an allegation of professional misconduct has been made under the Code of Ethics and Standards: <https://www.aphp.co.uk/pages/ethics>

Criteria for Complaints

1. The complaint must relate to a *current APHP registered therapist/trainer* at the time of the alleged professional misconduct.
2. A complaint may be submitted up to two years following the termination of the professional APHP relationship.
3. A complaint may be submitted where a complainant becomes aware of the alleged misconduct of another APHP practitioner/trainer and has evidence in support of the allegation.

If your complaint does not satisfy the above criteria, it will be returned to you with an explanation of why it does not meet the criteria.

Excluded Complaints

- Complaints for which legal action is proposed or is in progress, including those that are subject to Criminal or Civil Law.
- Complaints about professional misconduct that occurred more than two years following termination of the therapeutic relationship.

Disciplinary Procedure

If a complaint is upheld, the APHP registered therapist/trainer can be disciplined by one or more of the following:

1. Issued with a formal written warning, or statement of requirement for re-training or specific changes/improvements in their practice by a specific date.
2. Suspension and withdrawal of any professional status or rights conferred by their membership of APHP
3. Termination of their APHP membership with their details deleted from the APHP and or NRPC website.

Please note that it is outside the remit of The Association to prevent a therapist from continuing to practice or obtain financial compensation or reparation for the complainant.

Additional Disciplinary Procedure outlined under the APHP Code of Ethics will apply.

MAKING A COMPLAINT

There are two types of complaints; Informal and Formal.

Please keep a written record of your actions.

Informal Complaint

1. A complainant wishing to make a complaint should first try to resolve any grievance directly with the therapist/trainer before making a formal complaint.
2. Calmly state the nature of your complaint and what the therapist can do to redress the situation.
3. Give the therapist enough time to respond; 28 days before moving on to the next step.

Formal Complaint to APHP (The Association)

If the issue remains unresolved, the attached Complaints Form below should be completed and emailed to Chris Macintosh, Professional Standards Officer APHP standards@aphp.co.uk who will arbitrate and/or refer the matter to the Ethics Committee for adjudication.

PROCESS

1. Your email, with enclosures, will be acknowledged within 14 working days.
2. Following investigation, a final response will be issued within 21 working days from acknowledgement, or if circumstances do not permit this, you will be advised of the progress of the investigation and likely timeframe for resolution and closure of the complaint.
3. All formal complaints will receive a final response by email from the Professional Standards Officer.

APPEALS PROCEDURE

If you are dissatisfied with the final response, you can appeal the decision to the Ethics Committee within six weeks of the date of the final response email/letter on the following basis:

1. New evidence had come to light and must be provided.
2. The final response was not justified due to the weight of existing evidence.

Copies of your signed APHP Therapist Contract and receipt for services must be included.

The Ethics Committee's decision following appeal and review is final.

Strictly Confidential

COMPLAINT FORM

Details of Complainant:

Name: _____

Address: _____

Email: _____ Mobile: _____

Details of APHP Registered Practitioner/Trainer:

Name: _____

Address: _____

Email: _____ Mobile: _____

Date of alleged Professional Misconduct: _____

Details of Incident:

Complainant's consent for APHP to contact named Witness:

Name: _____

Address: _____

Email: _____ Mobile: _____

Signature of Witness: _____

Name: _____

Address: _____

Email: _____ Mobile: _____

Signature of Witness: _____

(Signed consent of additional witnesses (if any) can be documented on the reverse of this form)

Details of attempt to resolve issue to date or reasons for not doing so:

Details of how matter can be resolved to your satisfaction:

DECLARATION:

1. I declare that the information given in relation to my complaint is accurate.
2. I have enclosed copies of all relevant documentation (signed Contract and receipts).
3. In accordance with GDPR, I consent to information being disclosed to the appropriate parties.
4. I consent to the APHP contacting me by phone and/or email.
5. If I am not satisfied with the final response, I confirm that I will abide the Ethics Committee.

Signature

Date

FOR OFFICE USE			
Date of Receipt		Received by	
Complaint acknowledged <i>(within 7 days)</i>		Date therapist notified	
Complainant notified of outcome <i>(within 21 days)</i>		Therapist notified of outcome <i>(within 21 days)</i>	
Appeal Received <i>(6 weeks from notification of outcome)</i>		Complaint closed – all parties advised	

Recommendation/Rationale:

Decision Confirmed on (date): _____

Signed by: _____
Professional Standards Officer Society Member Society Member

Chair – APHP (in case of appeal only)

Date