



Arizona Board of Psychologist Examiners

1740 West Adams St., Suite 3403
Phoenix, Arizona 85007

Website: www.psychboard.az.gov / Fax: (602) 542-8279

Email contact: jennifer.michaelsen@psychboard.az.gov

COMPLAINT INSTRUCTIONS & PROCEDURES

Use this form to file a complaint regarding Board licensees, applicants for licensure, or unlicensed individuals who may be referring to themselves as psychologists or behavior analysts, and/or practicing psychology or behavior analysis without a license.

If you are alleging unprofessional conduct against a psychologist who performed court-ordered services (A.R.S. §32-2081(C)), please use a Claim Form (instead of this form). A Claim Form can be downloaded from the Board's website from the "Forms" tab under "General Forms," or can be mailed to you upon request.

If your complaint does not pertain to court-ordered services, please complete the enclosed form and return it, along with any supporting documentation, to the Board office at the address listed on the form. **Please do not submit your Complaint Form until you have assembled all supporting documentation so that the entire packet can be submitted at one time to avoid delays. Audiotapes, video tapes or compact discs submitted as a part of your response must be accompanied by a transcript of the entire (not excerpted) proceeding or conversation.**

Upon receipt, the complaint will be assigned for investigation. A copy of the complaint will be forwarded to the individual who is the subject of the complaint. The individual will be required to respond in writing. Please note that your name will be provided to the individual about whom you are complaining. **That individual's response and investigative reports are, pursuant to statute, part of the confidential complaint file and will not be provided to you.**

An investigation will be conducted. For complaints against psychologists, the matter will then be referred to the Board's Complaint Screening Committee ("CSC") for initial review. For complaints against behavior analysts, the matter will be referred to the Board's Committee for Behavior Analysts (CBA) for initial review. You will be notified of the date, time, and location of the meeting, may attend, and may provide brief remarks if you are present at the meeting. The person against whom the complaint is made may also address the committee. After the CSC's initial review of the complaint, the CSC can vote to 1) dismiss the complaint finding no evidence of violation of statute or rule, or 2) refer the complaint to the full Board for further review and action. You will be notified in writing of the CSC's decision. All matters reviewed by the CBA will go to the full Board for consideration.

If the complaint is referred to the full Board, and the Board believes that a violation of statute or rules may have occurred, an informal interview with the licensee/applicant maybe scheduled during a regularly scheduled Board meeting. If an informal interview is scheduled, you will be notified and may attend. If the Board determines that the facts of the complaint do not warrant license revocation or suspension, it may take any of the following actions:

1. Dismiss the complaint.
2. Issue a non-disciplinary Letter of Concern.
3. Issue a Decree of Censure.
4. Fix a period and terms of probation. Probation may include temporary suspension for a period not to exceed twelve months, restriction of the license, or restitution of fees to a client resulting from violations of this chapter. If a licensee fails to comply with a term of probation, the Board may file a complaint and notice of hearing and take further disciplinary action.
5. Enter into an agreement with the licensee for discipline.

If the Board believes grounds exist to revoke or suspend a license for more than 12 months, it may refer the case to a formal hearing. You may be requested to attend the hearing and provide testimony. Whatever action is taken, you will be notified in writing of the results.

If the complaint pertains to an applicant for licensure or a non-licensed individual, the Board may take other actions permissible by law.

Pursuant to Board rules, only a party may file a motion for rehearing or review of a Board decision. A party means the Board, an applicant for licensure or a licensee, and does not include a complainant.

The Arizona Board of Psychologist Examiners has the responsibility to protect the public and is committed to act as fairly and expeditiously as possible on all investigations of matters within its jurisdiction. If you have any questions, please contact Jennifer Michaelsen, Deputy Director, by email at jennifer.michaelsen@psychboard.az.gov



State of Arizona Board of Psychologist Examiners

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COMPLAINT FORM

Please type or print in ink and answer all questions. Return the completed original form, and one copy of all documents submitted.

Licensee, Applicant, or other individual who is the subject of the complaint:
Name:
Business Name:
Business Address:
Business Phone Number:
Email Address:

Complainant Information:
Name:
Address:
Phone Number: (where you wish to be contacted during business hours):
Email Address:

SUMMARY OF ALLEGATION(S):

Include as many specific details as possible (who, what, when, where, how, why). Include the date(s) of treatment and specific examples of the problems with the care and treatment. Attach any additional documentation and evidence that supports your allegations. If needed, use extra sheets of paper and sign each additional page. Please print clearly as the Board's review of your complaint will be delayed if we cannot read your writing.

IS THIS COMPLAINT RELATED TO ACTIONS/NON-ACTIONS OF A PSYCHOLOGIST ARISING OUT OF A JUDICIALLY ORDERED EVALUATION, TREATMENT OR PSYCHOEDUCATION OF A PERSON CHARGED WITH VIOLATING ANY PROVISION OF TITLE 13, CHAPTER 14 SEXUAL OFFENSES?

Yes No If yes, please provide a copy of the court order appointing the psychologist and a copy of the psychologist's report to the court.

RELATIONSHIP OF COMPLAINANT TO CLIENT:

Self
 Parent
 Brother/Sister
 Legal Guardian (provide documentation)
 Spouse
 Son/Daughter
 Friend
 Other _____
 (Please specify)

Is there anyone, other than yourself, who knows about your complaint and who could give us further information? If so, please provide the person's full name, address and telephone number.

I am the person who prepared this complaint. The information given herein is known to me to be the truth, or is true to the best of my knowledge and belief, without any reservations.

Signature of person filing the complaint

Date

PLEASE NOTE THE FOLLOWING:

- 1) The Arizona Board of Psychologist Examiners (Board) has the statutory authority to regulate **psychologists** and **behavior analysts** as provided by Arizona Revised Statutes (A.R.S.) and Board rules. Issues which are not within the authority of the Board include billing disputes (i.e., the amount a licensee charges for services) and rudeness or personality conflicts (such as the licensee's or the office staff's attitude or professionalism.
- 2) The Board's complaint files and records are confidential by law. Availability is restricted pursuant to Arizona Revised Statutes (A.R.S.) §32-2082(E). **Please note that your complaint will be provided to the individual who is the subject of the complaint to obtain a response to the allegation(s). According to statute, you are not entitled to review the response submitted by that individual.**
- 3) If you wish to file a complaint against a health care facility or provider **other than an individual under the jurisdiction of this Board, please see the attached list of health care professional and facility licensing agencies.**
- 4) Pursuant to A.R.S. §32-2081(B), "The Board shall not consider a complaint against a psychologist arising out of a judicially ordered evaluation, treatment or psychoeducation of a person charged with violating any provision of Title 13, Chapter 14 to present a charge of unprofessional conduct unless the court ordering the evaluation has found a substantial basis to refer the complaint for consideration by the board."