

### Complaint Form

All complaints must be submitted to the College in writing. If you choose not to use this form, you may still submit a complaint in writing to the College. Please note that the Registered Social Worker (RSW) will be made aware of the allegations and the name of the complainant.

**The College can:**

- Reprimand the Registrant
- Impose limits or conditions on the Registrant’s practice of social work
- Suspend or cancel the Registrant’s registration
- Fine the Registrant
- Enter into a remedial agreement with the Registrant
- Dismiss the complaint
- Take no further action

**The College cannot** offer or mandate monetary compensation, mandate the provision of further services, intervene in legal matters, or require an employer to take further action.

**Your Personal Information (Complainant Information)**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Registered Social Worker (RSW) Information**

Name of the Registered Social Worker: \_\_\_\_\_

Employer (if known): \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Work Phone (if known): \_\_\_\_\_

Email (if known): \_\_\_\_\_

Have you attempted to resolve your concern with the Registered Social Worker? Yes  No

If you require assistance, please call and ask for our Complaints Department.

604-737-4916 or Toll Free (Canada only): 1-877-576-6740

**Relationship with RSW**

What is your relationship with the Registered Social Worker (RSW)?

Client  Colleague  Other

If you are not the client, who is the client?

What is your relationship to the client? (guardian/attorney/friend/relative etc.)

**Details of the Incident(s)**

Please provide the following information regarding your complaint against the Registered Social Worker (RSW).

Where did the incident(s) occur?

When did the incident(s) occur?

Date:

Time:

Please provide a general description of the circumstances from which your complaint arises.

### Your Concerns with Practice of the RSW

Please identify the concerns you have regarding the Registered Social Worker's (RSW) conduct.

If you are interested, you may also list the relevant BCCSW Standards of Practice and/or Code of Ethics of which you feel the Registrant has breached. RSW conduct is assessed against the BCCSW's Standards of Practice and Code of Ethics, copies of which can be found here:

<http://www.bccollegeofsocialworkers.ca/registrants/code-of-ethics-and-standards-of-practice/>

You do not have to include information regarding the Standards of Practice or the Code of Ethics, but it may be helpful to review these documents and use them as a basis for outlining your concerns.

### Other Reports

Have you reported the incident(s) elsewhere? Yes  No

If yes, what was the outcome of this report?

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**Expectations for Outcome**

Please share your expectations for this process and outcome of this complaint.

**Supporting Documentation**

If you have any documents, images, or correspondence that you feel are relevant to your complaint, please submit them along with this form.

**I have read and I understand the following:**

I understand that I am filing a formal complaint against the Registered Social Worker (RSW) named on this form, that the information on this form is collected under the authority of the Social Workers Act, 2008, and that the information provided will be used to process my complaint.

I understand that the BCCSW may obtain my relevant personal information, including records and clinical notes contained in the records of the RSW complained about as part of the complaints process.

I understand that personal information and documents collected by the College and relevant to the evaluation of this complaint, including this form and any documents attached, may be shared with the RSW complained about.

Further, I understand that if this complaint is referred to the Discipline Committee, there may be a hearing which is open to the public, and personal information may be disclosed at that hearing. If a hearing is required, I understand that I may be required to appear as a witness.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Once complete, please mail, fax or email this document along with any other accompanying materials to the Registrar at:

**Mail:**

BC College of Social Workers  
1420-1200 West 73<sup>rd</sup> Avenue  
Vancouver BC V6P 6G5

**Fax:** (604) 737-6809

**Email:** [info@bccsw.ca](mailto:info@bccsw.ca)

**Complaint Checklist:**

Have you provided the following?

- Full name and address of the Registered Social Worker (RSW) involved
- A complete description of the complaint
- Your name and a phone number where you can be reached
- Signed and dated acknowledgement section
- Additional supporting documents (optional)

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