## Complaint Report Form South Dakota Board of Physical Therapy 810 N. Main Street, Suite 298

810 N. Main Street, Suite 298 Spearfish, SD 57783 **Phone:** 605.642.1600

## \*Licensee will receive a copy of this complaint\*

Complaint filed by (your information):						
Name:			_			
Address:			_			
City:	State:	Zip:				
Phone:	E-Mail:					
Have you filed any previous complaints with this Board? $\Box$ Yes			□ No			
Nature of your relationship to the licensee you are filing the complaint against (i.e. client, parent or guardian of client, co-worker, employer, friend etc.):						
Are you represented by an attorney for this matter?			□ No			

Complaint filed against (licensee):						
Name:						
Address:						
City:	State:		_			
Phone:	_E-Mail:					
License Number (if known):						
Will you be willing to testify at a hearing, if necessary, regarding this complaint? Yes No						

Details of the Complaint:

Date of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Witnesses to the alleged violation (Names, Addresses and Phone Numbers):

State your Complaint:

\*Please note – your statement should be as clear and concise as possible. You must list exactly what ethical or legal violations you believe to have occurred. This includes listing the relevant statutes, administrative rules, and code of ethics sections that you believe the licensee to have violated. Please write as neatly as possible. You may use additional sheets of paper if necessary.

I verify that all statements made by me related to this complaint are true to the best of my knowledge and belief. I understand and agree that a copy of this complaint will be provided to the licensee and it may also become public record if a contested case is initiated. I specifically acknowledge and understand that the Board, its staff, investigator and legal counsel may disclose the information in this complaint as they deem necessary to investigate the above complaint. I further state that I will voluntarily appear and testify to the facts in this complaint if called upon by the Board.

Signature of Complainant

## **Complaint Form Instructions and Information**

Please mail the completed form to the Board office at: 810 N. Main St. Suite 298, Spearfish, SD 57783.

Complaints received against a licensee must be in writing, identity the applicant or licensee, and must include the allegations giving rise to the complaint. The Board office may request additional information from you. If you fail to respond, your complaint may be dismissed without further action. Please be advised, the licensee will receive a copy of the complaint and it may also become public record if a contested case is initiated.

Upon Board office receipt of a properly written complaint, a copy is sent to the licensee. The licensee has 20 days to respond to allegations and concerns in writing to the Board office.

Once a response is received, a Board member may be assigned to investigate the matter and an investigative committee may be formed. The investigative committee will consist of the investigating Board member, legal counsel and Board staff. During the investigation, the existence of the complaint is confidential to everyone except the subject of the complaint and the exchange of information and procedures are confidential.

If violations are found in the investigative process, informal or formal dispositions may be used to resolve the complaint. Be informed, although the Board is proceeding as quickly as possible, this is generally a lengthy process. It is possible that the matter may proceed to a formal hearing before the Board, at which time sworn testimony would be required.

If the investigating committee determines that the complaint is without merit or not sufficient evidence to prove a violation of statute or administrative rule, the complaint may also be dismissed for lack of jurisdiction. Regardless of the outcome of the complaint, you will be notified upon disposition.

For more information on Chapter 36-1C, Uniform Complaint and Declaratory Ruling Procedures please visit: <u>https://sdlegislature.gov/Statutes/Codified\_Laws/2079277</u>