



Association for Group and Individual Psychotherapy

MAKING A COMPLAINT

This form is to be used if you wish to make a complaint about an AGIP member to the Professional Ethics Committee of AGIP. Please note: for AGIP members who are also UKCP Registrants you should contact UKCP to make your complaint (the exception to this is for supervisees of AGIP supervisors who should make a complaint direct to AGIP using this form).

Please complete this form either by hand or electronically and send it to the address at the bottom of this form marking the envelope "CONFIDENTIAL".

The aim of this form is to provide the AGIP with:

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

If you would like to discuss your concerns with a member of the Professional Ethics Committee, please call 020 7272 7013. This telephone number is the main AGIP office number and is normally answered in person in the mornings by one of our administrators, otherwise please leave a message and someone will call you back.

Your contact details

Your Name:	
Your Address:	
	Post Code:
Phone Number:	
E-mail:	

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

Have you complained about this to any other organisation, such as an NHS trust or the practice where the psychotherapist works?

Yes No

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.

<p style="text-align: right;"><i>Continue on separate sheet if necessary</i></p>

Declaration and consent to disclose

In order to deal with your complaint, we will need to disclose details of it to the Member concerned and possibly also 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 AGIP 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:

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

Signed:

Date:

Next steps:

Thank you for completing this form. There are two ways to send the completed form to us.

1. **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 office@agip.org.uk. You may wish to consider the fact that email is not regarded as an entirely secure system.
2. **By Post:** Send this form in hard copy with supporting documents:
Co-ordinator PEC
AGIP
1 Fairbridge Road
London N19 3EW

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

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