

# NORTH CAROLINA SOCIAL WORK CERTIFICATION AND LICENSURE BOARD

Post Office Box 1043 Asheboro, North Carolina 27204 Phone (336) 625-1679 Fax (336) 625-4246

Website: www.ncswboard.org

Please read the following information carefully prior to filing your complaint and retain this page for future reference regarding the complaint review process. Depending on the complexity of the complaint, the review process may include formal investigation and may take a few months, up to a year or longer to complete. Your patience is appreciated during this process.

- 1. Complaints, the social worker's response and information gathered in connection with an investigation of a complaint are **confidential**. When the Board receives a complaint, it determines first if the complaint is "valid" (meaning, does the Board have jurisdiction over the matter and if the allegations are true, would it be a violation of the Statute and/or Rules governing social work practice in North Carolina?).
- 2. Upon receipt of a formal written complaint, an acknowledgement letter will be sent to the complainant; and the social worker will be notified and provided an opportunity to respond to the complaint.
- 3. The Complaint Review Process may take as little as a few weeks, up to several months or more depending on the complexity of the case, the availability of witnesses for interview, and access to necessary information. The review process is monitored by the Board's Ethics Coordinator to insure all complaints are addressed and subsequently resolved.
- 4. The complaint may also be assigned to a Subcommittee (usually two seated members of the Board) for review and possible resolution.
- 5. An investigator may be assigned to the complaint and may or may not contact you for supplemental information. You may be asked to provide additional documentation or provide clarification of information you have already provided. It is important that the Board has your *current* contact information to insure that you may be reached by U.S. Mail or by phone.
- 6. The investigator may also interview the social worker against whom the complaint is filed, along with any other identified witnesses; and will gather and review documentation and/or any physical evidence deemed relevant to the complaint. Investigative interviews are generally done by phone.
- 7. Upon completion of a formal investigation, the investigator will prepare an investigative summary of the case.
- 8. The Subcommittee will review case materials and make a recommendation such as: close unsubstantiated; close with a letter of concern; restrictions, limitations, or a formal disciplinary action through a voluntary consent agreement; or may request additional information or recommend proceeding to a formal administrative hearing. Subcommittee review is part of the investigative process and as such, is confidential and done in closed session.
- 9. When an investigation indicates that a violation appears to have occurred and formal action is required, the Subcommittee may seek to enter into a Consent Order. A Consent Order is a mutually agreeable finding that contains applicable regulatory language outlining the facts of the case and the final disposition, which may or may not include adverse disciplinary action. The **Consent Order is a public record document** and can be provided to the

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- complainant. [A Consent Order may not be offered in all cases; some may be referred directly to the Administrative Hearing Process.]
- 10. If an amenable Consent Order is not reached with the social worker, the Board may notice the matter for formal hearing before the Board or the Office of Administrative Hearings. The Notice of Hearing will outline the charges and schedule a date and time the matter is to be heard. [Subcommittee members are recused from any formal hearing and will not participate or deliberate on the matter.]
- 11. Through the Administrative Hearing Process, the social worker has the right to call witnesses, present evidence, and cross examine the complainant. The social worker may represent themselves or may choose to be represented by counsel.
- 12. Testimony and evidence accepted during a formal hearing is considered public; however, the Board may redact from public record, the name of any individual/witness who is/has been the recipient of social work services and does not wish to be publicly identified. The Board may also choose to close the hearing to the public to receive testimony from any individual who is/has been the recipient of social work services; however, the social worker may remain and is entitled to cross examination of any witness.
- 13. As a result of the hearing, the Board will determine what, if any, adverse/disciplinary action may be required/appropriate to address. The social worker has a right to appeal the Board's decision to the Office of Administrative Hearings.
- 14. The complainant and the social worker are notified in writing regarding the final disposition of the complaint.



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#### **COMPLAINT FORM**

Please read the following sections from the North Carolina Administrative Code, Title 21, Occupational Licensing Boards, Chapter 63, Social Work Certification and Licensure Board, Section .0500-Ethical Guidelines, and Section .0600-Disciplinary Procedures. These can be found on the Board's website at <a href="ncswboard.org">ncswboard.org</a>, or you may contact the Board at the number below for a printed copy.

Please: 1) type or print clearly, 2) do not write near (within one-half inch) of the edges of the paper to allow for complete copying of your information, 3) include a separate, narrative statement and timeline of what occurred along with any other information you wish the Board to consider as it addresses this matter, 4) Identify witnesses, sources of evidence, or other significant information, in "Sources of Evidence" below, or provide a separate listing.,

For any questions about this form or the complaint process, please contact the Board office at 336-625-1679.

We recommend that you keep a copy of the completed complaint for your records.

Complaint Against:	
Address:	
City, State, Zip:	
License number	(call the Board at 336-625-1679, if you cannot locate this number)
Your Name:	
Address:	
City, State, Zip:	
Telephone Number:	
E-mail Address:	

### Data to be furnished by the Complainant

1. Statement of Complaint: The statement should respond to the criteria listed in Section .0500-

Ethical Guidelines and should identify the actions that are violations of the ethics standards of the North Carolina Board established for licensed or certified social workers. Please indicate the relevant subsections of Section .0500, AND attach detailed, narrative description of the events and evidence supporting the complaint. .0501 PURPOSE AND SCOPE  $\square$  (a),  $\square$  (b),  $\square$  (c),  $\square$  (d) .0503 GENERAL PROFESSIONAL RESPONSIBILITIES  $\square$  (b),  $\square$  (c),  $\square$  (d),  $\square$  (e)  $\square$  (a), .0504 RESPONSIBILITIES IN PROFESSIONAL RELATIONSHIPS  $\square$  (a),  $\square$  (b),  $\square$  (c),  $\square$  (d),  $\square$  (e),  $\square$  (f),  $\square$  (g), ☐ (h) .0505 RELATIONSHIPS WITH COLLEAGUES  $\square$  (2),  $\square$  (3),  $\square$  (4),  $\square$  (5)  $\square$  (1), .0506 REMUNERATION  $\square$  (d)  $\square$  (a),  $\square$  (b),  $\square$  (c), .0507 CONFIDENTIALITY AND RECORD KEEPING  $\square$  (a),  $\square$  (b),  $\square$  (c),  $\square$  (d),  $\square$  (e) .0508 PURSUIT OF RESEARCH AND SCHOLARLY ACTIVITIES  $\square$  (4),  $\square$  (2),  $\square$  (3),  $\square$  (5),  $\square$  (1), .0509 PUBLIC STATEMENTS  $\square$  (b),  $\square$  (c),  $\square$  (d), ☐ (e)  $\square$  (a), Other Concerns (describe in the narrative attachment). 2. Sources of Evidence: The complainant should list individuals (and their contact information, if known), who may be in a position to substantiate this report and should list any documentary sources of information that will support the complaint. Use a separate sheet if needed.

# Please complete the signature page

Please complete the following Declar	ration:
I,Complainant's Name	, hereby file a complaint for consideration by
THE NORTH CAROLINA SOCIAL WO	RK CERTIFICATION AND LICENSURE BOARD against
Social Worker's Name	·
Carolina Social Work Certification	nics standards and disciplinary procedures of the North and Licensure Board. I swear or affirm that the e, based on my personal knowledge or based upon
Co	onfidentiality Limitations
public until and unless a Notice of	are considered confidential and are not disclosed to the Hearing, Consent Order, or Final Agency Decision is (unless noticed for hearing) and unsubstantiated
worker for response. The Board <u>d</u> of the complainant or anyone ident the complaint conclude in a public disclosure the identity of any client	nt materials are usually copied and sent to the social oes not have the legal authority to withhold the identity tified in this complaint from the social worker. Should finding, the Board can only withhold from public twho has not consented to the public disclosure of social ter by the applicant, certificate holder, or licensee.
Signature of complainant	
Printed Name of the Complainant	
Date	 vii

Please return completed form to:
North Carolina Social Work Certification and Licensure Board
P. O. Box 1043
Asheboro, NC 27204