



Physical Therapy Board of California

STATE AND CONSUMER SERVICES AGENCY - GOVERNOR EDMUND G. BROWN JR.

Physical Therapy Board of California

2005 Evergreen St. Suite 1350, Sacramento, California 95815

Phone: (916) 561-8200 Fax: (916)263-2560

Internet: www.ptbc.ca.gov



CONSUMER INFORMATION INSTRUCTIONS FOR FILING A COMPLAINT AGAINST A LICENSED PHYSICAL THERAPIST/PHYSICAL THERAPIST ASSISTANT AND/OR A NON LICENSED PRACTITIONER PRACTICING PHYSICAL THERAPY

Notice: Except for the name of the physical therapist/physical therapist assistant, all information requested is voluntary, but failure to provide the requested information may delay or prevent the investigation of your complaint. As much information as possible should be provided in connection with the complaint. The information on the complaint form will be used in part to determine whether a violation of state law has occurred. If a violation is substantiated, the information may be transmitted to other government agencies, including the Attorney General's Office.

The specific California statutes and regulations related to the practice of physical therapy are contained in the Physical Therapy Practice Act (Business and Professions Code §2600- 2696, California Code of Regulations (Title 16, Division 13.2), and other pertinent sections of the Business and Professions Code.

The function of the Physical Therapy Board of California (Board) is to protect the public from the incompetent, unprofessional, and/or unlawful practice of physical therapy. To fulfill this mission the Board investigates the background of applicants, licensed physical therapists and physical therapist assistants, certifies physical therapists to perform electromyography, investigates complaints from consumers and takes disciplinary action against licensees.

RESOLVING CONCERNS OR PROBLEMS:

Some concerns or problems between a patient and a licensee are caused by a breakdown in communication. Some common misunderstandings are the scope of services available, the quality of professional services, and the timeliness of those services. Direct and open communication can be beneficial to both the patient and the professional in seeking an acceptable resolution.

When you cannot resolve a problem and you believe that the issue of concern is a violation of the Board's licensing laws or regulations, you should file a complaint with the Board by completing the Physical Therapy Board's Consumer Complaint Form. The Board investigates complaints based upon the specific information you provide in the complaint form.

Examples of other violations of law that should be brought to the Board's attention include; sexual misconduct, conviction of a criminal offense related to the profession, mental illness, and practice outside the scope of the providers license or below accepted community standards, breach of confidentiality, deceptive advertising, and aiding and abetting the unlicensed practice of physical therapy.

If you have questions regarding filing a complaint, please contact the Board on its toll free number

at: 1-800-832-2251; or you may download the complaint form from the Board's website at: www.ptbc.ca.gov. Calls not related to consumer protection issues will be directed to the Board's public number at: 1-916-561-8200.

HOW THE BOARD HANDLES YOUR COMPLAINT:

Following receipt of a complaint, the Board promptly mails a notice of receipt of the complaint to the complainant. Each complaint is reviewed to determine the course of action for the alleged violation or whether the Board has jurisdiction. In most instances, the Board cannot effectively investigate cases where the complainant wants to remain anonymous. If the complaint concerns a matter or issue outside the Board's jurisdiction, the Board will inform you if another state or local agency might be able to assist you.

California law requires the Board to have **clear and convincing evidence of a violation** in order to sustain disciplinary action. Consequently, the Board's investigative process can be lengthy. The Board will notify you in writing of the results of the investigation as soon as possible.

COMPLETING AND MAILING THE COMPLAINT FORM:

Complete all spaces on the attached form, including your name, address, zip code, day and evening telephone numbers, email address and fax phone number, if applicable. State the full and complete name(s) of the subject of your complaint and list his or her business name and address. If some of the blank spaces do not apply to your complaint, write N/A (not applicable) in those spaces. You must sign and date the complaint form.

Provide complete details in your complaint by stating the reason for the complaint, when the problem first occurred, relevant dates of your concerns, and the pertinent facts of your complaint. Attach a copy of any supporting documents you may have in your possession pertaining to your specific complaint.

If your complaint concerns physical therapy services provided to you, complete the Authorization for Release of Medical Records and return the form with your complaint. The release form must be signed and dated **by either the patient or other authorized person**. If the patient is unable to sign the release, the form may be signed by: 1) the next of kin, if the patient is deceased, 2) the parent of a minor child, or 3) the person named by the patient in a signed "Power of Attorney" granting the person authority to make medical decisions for the patient. **Include the complete name and address of the subject of your complaint on the Authorization for Release of Medical Records.**

**Return the completed form to the Physical Therapy Board of California at:
2005 Evergreen St., Suite 1350, Sacramento, CA 95815**