

### **What types of complaints is the College of Audiologists and Speech – Language Pathologists authorized to handle?**

The College of Audiologists and Speech – Language Pathologists (the College), is the regulatory College for the professions of audiology and speech – language pathology. As such, the College accepts and responds to written complaints about audiologists and speech – language pathologists who are registered with the College.

The College also responds to information about individuals who are not registered with the College and are presenting as an audiologist or speech – language pathologist or practicing audiology or speech – language pathology in Manitoba.

The College deals with a variety of matters which relate to providing safe, ethical care and appropriate professional conduct.

The College is not able to handle every kind of complaint; some matters that fall outside the legal authority of the College.

Once a complaint is received, it is reviewed, and you will be notified if the College is able to assist with the matter.

For more information, visit the “For the Public” section of the College website, at [www.caslpm.ca](http://www.caslpm.ca)

### **Confidentiality**

Complaints and investigations are **confidential** unless the College has started regulatory inquiry proceedings.

In fairness to the audiologist or speech – language pathologist about whom you are filing a complaint, the College will share with her or him some or all of the information you submit, such as:

- Copies of documents you provide
- Copies of documents from other sources
- Your personal contact information (name, address, email, telephone number) or that of others who are involved in the matter.

### **How to file a complaint**

1. Complete and sign the Complaint Form
2. Attach copies of any documents that relate to your complaint. Include any documents that you think will help to describe your complaint; indicate specific parts that you think are important.
3. Be sure to make copies of all the original documents. Keep the originals and send only copies with your complaint.
4. Send the completed Complaint Form with copies of relevant documents to:

The Registrar  
College of Audiologists and Speech – Language Pathologists of Manitoba  
Unit 1 – 333 Vaughan Street  
Winnipeg MB R3B 3J9

**What happens next?**

You will receive a communication from the College, either by email or regular post, to let you know your complaint was received.

The complaint will be carefully reviewed and assessed. If it is determined that the College is not authorized to deal with the matter, you will receive a notice.

The College will keep you informed of the status of your complaint. Similarly, the same courtesy is expected from others.

**Commitment to a respectful environment**

The College is committed to communicating with you in a respectful, professional, and civil manner. The complaint process and the circumstances that give rise to complaints can be stressful. However, the College will not accept racist, discriminatory or harassing behaviour or profane communications.

**Questions?**

If you have questions about how to file a complaint, please contact the Registrar of the College at [office@caslpm.ca](mailto:office@caslpm.ca) or 204 453 4539 ext.: 2



**COMPLAINT FORM**

**I. COMPLAINANT CONTACT INFORMATION**

**Name**

**Preferred Salutation:**  Mr.  Ms.  Mrs.  Dr.  Other Specify:

**Email**

**Home Phone:**

**Work Phone:**

**Mailing Address**

**Cell:**

**May we contact you at work:**  Yes  No

**II. PRACTITIONER INFORMATION**

**Provide details of the practitioner (or former practitioner) about whom you are filing the complaint.**

**Name**

**Type of Practitioner / Profession**  
 Audiologist  
 SLP

**Business Address**

**III. RELATIONSHIP TO PRACTITIONER**

**Describe your relationship to the practitioner (or former practitioner) about whom you are filing the complaint.**  
**Examples: client, parent or family member of a client, colleague, employee, employer of practitioner, other (specify)**

**Have you or your family member received services from the practitioner or former practitioner?**

Yes  No

**Do you or your family member continue to receive services from the practitioner or former practitioner?**

Yes  No

**IV. YOUR COMPLAINT**

Please set out the events that occurred that have led you to file a complaint. Where possible, please include locations, dates, and names of other persons who may have witnessed an event, circumstance, etc. Provide additional information on a separate piece of paper, as required.

You may submit documents to the College which help to describe your complaint. Be sure to make copies of the original documents, keep the originals, and send only copies with your complaint.

Please list the documents you are submitting:

What do you hope will happen as a result of your complaint?

**V. ACKNOWLEDGEMENT, CONSENT, AND SIGNATURE**

Before completing this form, please be sure you read the attached Information Sheet.

I have read and I understand the following:

- I understand that the College of Audiologists and Speech – Language Pathologists of Manitoba (the College) will share some or all the information and documents that it receives from me and other parties with the practitioner or former practitioner about whom this complaint is made;
- I agree to the College sharing and providing copies of the information and documents that it receives from me with the practitioner or former practitioner about whom this complaint is made. I understand that if I do not agree, the College may be unable to process my complaint;
- I understand that the College may keep digital recordings of voice mail messages as part of the complaint file.

Signature of Complainant

Date

If you have any questions about how to file your complaint, please contact the Registrar at:

Unit 1 – 333 Vaughan Street  
Winnipeg MB  
R3B 3J9

Email: [office@caslpm.ca](mailto:office@caslpm.ca)  
Phone: 204 453 4539 ext.: 2