

# **Kathryn Hulet, RN, M.N., M.A., LMHC**

## **Emmaus Counseling Center**

### **Adult Individuals & Couples**

**License Number: LH00010635**

**P: 425.869.2644, ext. 53**

## **Professional Disclosure Statement**

### **Experience and Licensure**

I work with adults for any and all reasons one may seek the help of a therapist. I see individuals, couples, and groups. I am an active Licensed Mental Health Counselor (Number: LH00010635) and Registered Nurse in the state of Washington. I received my Bachelor of Science in Nursing degree from Seattle Pacific University (1975) and my Master of Nursing degree from the University of Washington Tacoma (1999). I received my Master of Arts in Counseling degree from Mars Hill Graduate School (2004), currently named The Seattle School of Theology and Psychology. I am a member of the Washington Mental Health Counselors Association and the American Association of Christian Counselors.

### **Counseling Orientation and Methods**

I view the counseling process as forming an alliance with you to explore the nature of your problem(s) or what is causing emotional pain in your life. Although we will spend time exploring the specific problem(s) that brought you to therapy, we will also look at the nature of your relationships with other significant people in your life. According to my theoretical orientation, many of the forces and dynamics that have influenced the complexity and intensity of your problem(s) are rooted in relational issues. My Christian worldview leads me to believe you are made to relate in a satisfying and self-giving manner. This is the source of your greatest joy but also of your deepest emotional pain. We will explore together how your relational style may interfere with experiencing a meaningful life. This exploration is also meant to give you hope, that by not only dealing with the problem itself, we will aim at the source of the problem. I welcome people of all backgrounds and belief systems to a therapeutic relationship with me.

Emotional and psychological stressors can have physical components as well. In some cases, I may refer you to your primary care physician. If temporary medication is indicated and may help support your process in therapy, I may suggest you see your medical provider so we may work together to support your health and well-being. My background and training as a Registered Nurse has also been helpful to people suffering chronic conditions and/or physical pain as we journey through the emotional and psychological issues you may be experiencing. Many people with chronic conditions and/or conditions of aging may use multiple medications and my nursing background is helpful in navigating how they may affect you in therapy. However, I do not have prescriptive authority as an RN, so I refer you to your medical providers for your primary physical care and treatment.

My treatment approach depends on the needs of the individual. I may use of variety of methods including Person-Centered Therapy, Psychodynamic Therapy, Relational Therapy, Cognitive Behavioral Therapy, Solution Focused Brief Therapy, long term depth therapy including Family of Origin Work, Attachment Theory, Object-relations, and Emotion-Focused Couples Therapy to name a few.

Our time together will be primarily conversational and last 50 minutes per session for individual or couples therapy. It is important to note that during the process of therapy feelings may become intense and disrupting. Although the therapeutic relationship provides a safe, confidential context in which to explore your life and

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challenges, you may feel as if things are getting worse before they get better. This is common during the process of personal change and growth. There are also joys and victories along the journey! However, the desired changes and outcomes of therapy are up to you, as there are no guarantees regarding outcomes of treatment. It takes courage for a person to be willing to seek therapy and be willing to work with the painful issues in one's life. I honor your courage and welcome you to the process!

### **Fees, Cancellation Policies, and Emergencies**

Please note that I am a provider on some but not all insurance panels. If you are planning on using your insurance for mental health services, please verify that I am contracted with your plan prior to the first visit. Emmaus Counseling Center's billing staff will submit claims to your insurance company following each office visit.

My rate for those paying full fee (i.e., no mental health insurance coverage) is currently \$150 for the initial assessment and \$130 for each 50 minute session thereafter.

If letters, reports or documentation is requested by you for or from any outside source that you would like from me, you will need to sign a written Release of Information first. You will be charged for this service at my usual hourly rate of \$110/hour. These services are not reimbursed by your insurance coverage.

If for some reason you do not come to a scheduled session, I request that you either cancel at least 24 hours in advance or pay a missed session fee of \$80. Insurance cannot be billed for missed sessions. However, I will not charge you for sessions missed due to a sudden illness or personal/family emergency. If this occurs, please call as soon as you can. My voice mail will take your calls any time, but I don't carry a beeper and may need up to a day to respond. If you need assistance before I can be reached, you may call the **King County Crisis Clinic at (206) 461-3222**, which is open 24 hours, or dial 911.

### **Confidentiality**

In general, whatever is said during your sessions with me is held in strict confidentiality, meaning I will not discuss you or our work with anyone else except in my own strictly confidential professional consultation, unless you sign a release of information form allowing me to discuss our work with another person (e.g. your physician, school counselor, previous therapist), or unless a judge orders me to release my records to the court and/or testify. In the State of Washington, all clients age 13 and older are legally required to sign a release of information in order for mental health information to be shared.

There are certain legal exceptions to confidentiality:

- If you give me written consent to have the information released to another party.
- If the therapist suspects that child abuse or neglect has occurred or that a vulnerable adult has been abused or neglected, the law requires that it be reported to the proper authorities. This may include suspected mental or emotional abuse of a child who has witnessed domestic violence.
- In the case of your death or disability I may disclose information to your personal representative.
- If you waive confidentiality by bringing legal action against me.
- In response to a valid subpoena from a court or from the secretary of the Washington State Department of Health for records related to a complaint, report, or investigation.
- If I reasonably believe that disclosure of confidential information will avoid or minimize an imminent danger to your health or safety or the health or safety of any other person.
- If, without prior written agreement, no payment for services has been received after 90 days, the

account name and amount may be submitted to a collection agency.

In legal proceedings, patient/therapist communications are privileged with the following exceptions. A judge's court order is required for such information to be released or the patient's written release for the information. Examples of when a judge might subpoena your record include, but are not limited to:

- a. If your mental status is an issue for the court;
- b. The judge feels that communications are necessary to the proper administration of justice.

The rules of confidentiality can on rare occasions create dilemmas. For instance, say that perhaps during therapy you tell me you have a new friend, or romantic partner or boss, and it turns out that some years ago that person was a client of mine. Despite my desire to be open with you, I can't tell you that I know him or her, because I would be breaking the confidentiality of my work with that person.

If you have any questions about confidentiality, please discuss them with me.

### **Professional Practice and Orientation**

Therapy has both benefits and risks. Risks sometimes include experiencing uncomfortable feelings such as sadness, guilt, anxiety, frustration, anger, loneliness, and helplessness. Therapy has been shown to have benefits for people who undertake it. It often leads to significant reduction in feelings of distress, better relationships, and resolutions to specific problems. As a client utilizing my services, you have the right to ask any questions you may have about the process, methods, duration, and goals of therapy; the right to discuss any concerns you may have about your progress in therapy; and the right to terminate therapy at any time.

Depending on your needs and the problems you want to work on, my therapeutic approach may include elements of Psychodynamic Therapy, Cognitive Behavioral Therapy, Client/Person Centered Therapy, Relational Therapy, and Family Systems among other treatment modalities. I will work with you to set treatment goals and structure a plan to achieve those goals. While my role is that of "helper," who educates, suggests, and challenges, your role is to work on the issues both inside and outside of our sessions. I may assign homework for you to work on between sessions so that you can make progress more quickly and/or to help families work together on issues. Due to the complexity of human nature, length of treatment will vary according to each individual, and I cannot make guarantees as to the effectiveness of treatment.

My normal practice is to schedule one 50-minute session per week at a mutually agreed time, although sometimes sessions may occur more frequently. I do my best to accommodate your schedule; however, flexibility is needed on both ends.

### **Court Testimony and Legal Involvement**

In order to avoid dual relationships and conflicts of interest, I will provide you with clinical services only. I do not intend to become involved in legal disputes such as personal injury lawsuits, divorce proceedings, dependency hearings or custody battles. These proceedings erode the client-therapist relationship and compromise your ability to be honest with me during treatment. In addition, I do not participate in evaluation for adoption home studies or provide evaluations of parental fitness to adoption agencies or State entities. By signing this document, you agree:

- That my role is limited to providing treatment and that you will not involve me in any legal dispute;
- That you will instruct your attorneys not to subpoena me or refer in any court filings to anything I have said or done;

- That you will not ask for my participation or recommendations in an adoption home study or dependency hearing;
- If, for any reason, I am required to provide expert testimony or documentation for a legal dispute, adoption proceeding or dependency case, or to appear as a witness, the party responsible for my participation agrees to reimburse me at the rate of \$150 per hour (even in the case of sliding-scale fee clients) for time spent traveling, preparing letters or reports, testifying, being in attendance, and any other case-related costs.

### **Social Media Policy**

This section outlines my office policies related to use of social media, i.e., how I conduct myself on the Internet as a mental health professional and how you can expect me to respond to various interactions that may occur between us on the Internet. I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc.). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. Please do not use messaging on social networking sites such as Twitter, Facebook, or LinkedIn to contact me. These sites are not secure and I may not read these messages in a timely fashion. Do not use wall postings, @replies, or other means of engaging with me in public online if we have an already established client/therapist relationship. Engaging with me this way could compromise your confidentiality. It may also create the possibility that these exchanges become a part of your legal medical record and will need to be documented and archived in your chart.

If you need to contact me between sessions, the best way to do so is by Therapy Appointment as it is HIPAA compliant. Please do not text or email me content related to your therapy sessions, as they are not completely secure or confidential. If you choose to communicate with me by text or email, be aware that all contact is retained in the logs of your and my Internet service providers. While it is unlikely that someone will be looking at these logs, they are, in theory, available to be read by the system administrator(s) of the Internet service provider. You should also know that any texts or emails I receive from you and any responses that I send to you become a part of your legal medical record.

### **Professional Consultation**

In order to provide the best service possible, I may seek professional consultation on the dynamics and process of your case, if needed. If I discuss your situation in that context, I will not use information that would identify you personally.

### **State of Washington Disclosures**

The State of Washington requires that I provide you with the following information.

You have the right both to receive appropriate care and treatment, and to refuse any treatment you do not want. You have the right to choose a Counselor who best suits your needs and purposes. Counselors practicing counseling for a fee must be registered or licensed with the Department of Licensing for the protection of public health and safety. Credentialing of an individual with the Department of Health does not include a recognition of any practice standards, nor necessarily imply the effectiveness of any treatment.

A copy of the acts of unprofessional conduct can be found in RCW 18.130.180. Complaints about unprofessional conduct can be made to:

Health Systems Quality Assurance Complaint Intake

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Post Office Box 47857  
Olympia, WA 98504-7857  
Phone: 360-236-4700  
E-mail: HSQAComplaintIntake@doh.wa.gov

**Addendum:** All clients receiving mental health services at Emmaus Counseling Center are welcome to contact the clinic director, Richard Wemhoff, Ph.D., with any concerns about their treatment at the Center.

**Welcome!** I look forward to beginning a therapeutic relationship with you. I encourage you to ask questions you may have about the nature and structure of our professional relationship.

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By signing this document, you are attesting that you have received, read, fully understand and consent to the disclosures, terms, and conditions above, that you read and fully understand these rights, and have been given the opportunity to ask questions.

By signing this document, you are attesting to your consent to participation in counseling services provided by Kathy Hulet, M.A., LMHC.

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Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Kathy Hulet, M.A., LMHC

\_\_\_\_\_  
Date

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