

Nancy Linnerooth, J.D., M.A., LMFT

Emmaus Counseling Center

(425) 869-2644, ext. 12

CLIENT DISCLOSURE AND OFFICE POLICY STATEMENT

You have the right to choose a therapist who best suits your needs and purposes. With that in mind, the following information is provided for you.

Professional Background

My educational background includes: a bachelor's degree from Carleton College, Northfield, MN (1985); a juris doctor degree from Harvard Law School, Cambridge, MA (1988); and a master's degree from Pacific Lutheran University in marriage and family therapy (1999), with emphasis on a systemic—or interrelationship—approach. Since 1998, I have worked as a therapist with individuals, couples and families through public and private agencies in the state of Washington. I have worked in private practice since June 2001.

I am licensed by the Washington State Department of Health as a "Licensed Marriage & Family Therapist." My license number is LF00001814. Counselors practicing counseling for a fee must be registered or licensed with the department of health for the protection of the public health and safety. Licensure indicates that the therapist has met certain education and experience requirements for the practice area.

Therapeutic Approach

In therapy, I will work with you in a practical, action-oriented approach to set goals and structure a plan to achieve those goals. My treatment approach combines several therapeutic models, using theory and interventions of the therapies called structural, strategic, solution-focused, behavioral, cognitive-behavioral and narrative therapy.

When working on issues involving stress or anxiousness, I offer a technique involving tapping on face, hands, and torso using pressure points located on the surface of the skin throughout the body which are adapted from the practice of acupressure (I just call this "tapping"). In most instances, I will instruct you about how to tap on the appropriate points yourself. In some instances, I may ask your consent to tap directly on you.

The use of tapping within the field of psychotherapy is a relatively new development. At this time there is limited published research in established scientific journals investigating this method. While clinical reports of successful outcomes using these methods do exist in the published literature, clinical reports do not constitute conclusive scientific evidence. Furthermore, even if the clinical effectiveness of these methods is scientifically established in the future, as with many methods results will vary from person to person.

While tapping is a safe treatment method, with a substantial body of clinical experience showing no serious side-effects when properly administered, it is possible that unresolved memories and related

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emotions and sensations may be brought into your awareness. It is possible that this emotional material may continue to surface after the session and require further treatment.

In addition, previously traumatic memories may lose their emotional charge, and this could adversely affect your ability to provide legal testimony that carries the same impact as prior to treatment.

Length of treatment will vary according to each individual. I may propose assignments for you to work on between sessions so that you can make progress quicker. Appointments are around 45-50 minutes long. Beginning and ending sessions on time is important for both of us. You may wish to take a few minutes before we get started to collect your thoughts.

Billing Practices

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. Payment is due in full prior to beginning services. You must give at least 24 hours notice of cancellation or you may be charged in full for that session.

If you need to discuss, clarify, or bring up any issues with me between appointments, feel free to call me. You can leave a message on my confidential voicemail and I will return your call as soon as I am able during business hours. Telephone sessions will be charged in 1/4 hour increments based on the regular fee. Calls for scheduling and appointment changes are not charged for.

In case of crisis or if you need to talk to someone outside of business hours, call the 24- hour crisis line at (206) 461-3222.

Confidentiality

All information shared in session will not be disclosed without your written permission. However, such disclosure is required or permitted by law in certain instances, including without limitation: (i) disclosure that you have or are about to commit a crime; (ii) disclosure involving suspected abuse or neglect of a child or dependent adult; (iii) if you are a danger to yourself or others; and (iv) disclosures pursuant to a court order. A copy of RCW 18.19.180, regarding confidential communications, is attached to this declaration.

Client Rights

It is your responsibility to choose the provider and treatment modality which best suits your needs. You have the right to raise questions about my treatment approach, to refuse treatment, and to request a referral to another therapist if you desire to do so. You may also raise any questions you have with Dr. Richard Wemhoff, the medical director of Emmaus Counseling Center. If you feel that any health care provider has practiced unethically or unprofessionally you have the right to report your concerns to the Dept. of Health by calling (360) 753-1761 or by writing to the Health Professional Quality Assurance Division, P.O. Box 47869, Olympia, WA 98504-7869.

A copy of RCW 18.130.180, setting out the acts of unprofessional conduct, is attached to this declaration.

Acknowledgment of Disclosure and Consent for Treatment

I have been provided a copy of this disclosure statement and understand the information and agree to the terms set forth in it, and I have received copies of RCW 18.19.180 and RCW 18.130.180.

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I hereby request and authorize Nancy Linnerooth to evaluate, treat and/or provide counseling services to me.

name (please print)

client signature

date

Nancy Linnerooth

date

RCW 18.19.180: Confidential communications.

An individual registered under this chapter shall not disclose the written acknowledgment of the disclosure statement pursuant to RCW 18.19.060 nor any information acquired from persons consulting the individual in a professional capacity when that information was necessary to enable the individual to render professional services to those persons except:

(1) With the written consent of that person or, in the case of death or disability, the person's personal representative, other person authorized to sue, or the beneficiary of an insurance policy on the person's life, health, or physical condition;

(2) That a person registered under this chapter is not required to treat as confidential a communication that reveals the contemplation or commission of a crime or harmful act;

(3) If the person is a minor, and the information acquired by the person registered under this chapter indicates that the minor was the victim or subject of a crime, the person registered may testify fully upon any examination, trial, or other proceeding in which the commission of the crime is the subject of the inquiry;

(4) If the person waives the privilege by bringing charges against the person registered under this chapter;

(5) In response to a subpoena from a court of law or the secretary. The secretary may subpoena only records related to a complaint or report under chapter 18.130 RCW; or

(6) As required under chapter 26.44 RCW. [2001 c 251 § 24; 1991 c 3 § 33; 1987 c 512 § 11.]

RCW 18.130.180: Unprofessional conduct.

The following conduct, acts, or conditions constitute unprofessional conduct for any license holder under the jurisdiction of this chapter:

(1) The commission of any act involving moral turpitude, dishonesty, or corruption relating to the practice of the person's profession, whether the act constitutes a crime or not. If the act constitutes a crime, conviction in a criminal proceeding is not a condition precedent to disciplinary action. Upon such a conviction, however, the judgment and sentence is conclusive evidence at the ensuing disciplinary hearing of the guilt of the license holder of the crime described in the indictment or information, and of the person's violation of the statute on which it is based. For the purposes of this section, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for the conviction and all proceedings in which the sentence has been deferred or suspended. Nothing in this section abrogates rights guaranteed under chapter 9.96A RCW;

(2) Misrepresentation or concealment of a material fact in obtaining a license or in reinstatement thereof;

(3) All advertising which is false, fraudulent, or misleading;

(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed;

(5) Suspension, revocation, or restriction of the individual's license to practice any health care profession by competent authority in any state, federal, or foreign jurisdiction, a certified copy of the order, stipulation, or agreement being conclusive evidence of the revocation, suspension, or restriction;

(6) Except when authorized by *RCW 18.130.345, the possession, use, prescription for use, or distribution of controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes, diversion of controlled substances or legend drugs, the violation of any drug law, or prescribing controlled substances for oneself;

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- (7) *Violation of any state or federal statute or administrative rule regulating the profession in question, including any statute or rule defining or establishing standards of patient care or professional conduct or practice;*
- (8) *Failure to cooperate with the disciplining authority by:*
- (a) *Not furnishing any papers, documents, records, or other items;*
 - (b) *Not furnishing in writing a full and complete explanation covering the matter contained in the complaint filed with the disciplining authority;*
 - (c) *Not responding to subpoenas issued by the disciplining authority, whether or not the recipient of the subpoena is the accused in the proceeding; or*
 - (d) *Not providing reasonable and timely access for authorized representatives of the disciplining authority seeking to perform practice reviews at facilities utilized by the license holder;*
- (9) *Failure to comply with an order issued by the disciplining authority or a stipulation for informal disposition entered into with the disciplining authority;*
- (10) *Aiding or abetting an unlicensed person to practice when a license is required;*
- (11) *Violations of rules established by any health agency;*
- (12) *Practice beyond the scope of practice as defined by law or rule;*
- (13) *Misrepresentation or fraud in any aspect of the conduct of the business or profession;*
- (14) *Failure to adequately supervise auxiliary staff to the extent that the consumer's health or safety is at risk;*
- (15) *Engaging in a profession involving contact with the public while suffering from a contagious or infectious disease involving serious risk to public health;*
- (16) *Promotion for personal gain of any unnecessary or inefficacious drug, device, treatment, procedure, or service;*
- (17) *Conviction of any gross misdemeanor or felony relating to the practice of the person's profession. For the purposes of this subsection, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for conviction and all proceedings in which the sentence has been deferred or suspended. Nothing in this section abrogates rights guaranteed under chapter 9.96A RCW;*
- (18) *The procuring, or aiding or abetting in procuring, a criminal abortion;*
- (19) *The offering, undertaking, or agreeing to cure or treat disease by a secret method, procedure, treatment, or medicine, or the treating, operating, or prescribing for any health condition by a method, means, or procedure which the licensee refuses to divulge upon demand of the disciplining authority;*
- (20) *The willful betrayal of a practitioner-patient privilege as recognized by law;*
- (21) *Violation of chapter 19.68 RCW;*
- (22) *Interference with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representative, or by the use of threats or harassment against any patient or witness to prevent them from providing evidence in a disciplinary proceeding or any other legal action, or by the use of financial inducements to any patient or witness to prevent or attempt to prevent him or her from providing evidence in a disciplinary proceeding;*
- (23) *Current misuse of:*
- (a) *Alcohol;*
 - (b) *Controlled substances; or*
 - (c) *Legend drugs;*
- (24) *Abuse of a client or patient or sexual contact with a client or patient;*
- (25) *Acceptance of more than a nominal gratuity, hospitality, or subsidy offered by a representative or vendor of medical or health-related products or services intended for patients, in contemplation of a sale or for use in research publishable in professional journals, where a conflict of interest is presented, as defined by rules of the disciplining authority, in consultation with the*

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[2010 c 9 § 5; 2008 c 134 § 25; 1995 c 336 § 9; 1993 c 367 § 22. Prior: 1991 c 332 § 34; 1991 c 215 § 3; 1989 c 270 § 33; 1986 c 259 § 10; 1984 c 279 § 18.]

After you sign the attached consent, please keep this Disclosure Statement for your records.
