

Michelle Battin, Ph.D.

Emmaus Counseling Center

425.869.2644, ext. 19

PROFESSIONAL DISCLOSURE STATEMENT

When people enter into any kind of relationship in which services are exchanged, it's a good idea to be clear about each person's rights and responsibilities. This agreement tells you what you can expect of me and what I can expect of you. Please read it carefully and be sure to ask me to explain anything you don't understand or that you have a concern about.

My Background and Approach

I am a licensed clinical psychologist in the State of Washington (License PY60655194). I received my Ph.D. in Clinical Psychology from the California School of Professional Psychology at Alliant International University in 2010.

Since 2010, I have been providing therapeutic services to adults, children, families, and groups in private practice, clinic-based, school-based, and home-based settings. My post doctoral work began as a psychological assistant working with adults, youth, and families in a private practice setting. Here, I also gained extensive training in the Play Therapy treatment modality. While working as a psychological assistant, I began working at Pennylane Center in 2011. I provided therapy to diverse and high-risk youth struggling with anxiety, depression, aggression, oppositional defiance, trauma, ADHD, and developmental disabilities including autism spectrum and intellectual delays. Here, I gained extensive experience helping parents navigate their children through the special education system and became certified as a Behavioral Intervention Case Manager through the Los Angeles Unified School District. In 2014, I opened my own private practice working with adults, adolescents, children, and families. I also became an independent contractor with Counseling4Kids and began providing trauma based therapeutic services to children and their families/caregivers referred for treatment by the Department of Child and Family Services. I worked with many foster parents and aided them easing the transition of their foster children into their homes and in building a supportive and healing environment.

I use a variety of interventions such as Solution-Focused, Cognitive Behavioral, Family Systems, Play Therapy, and Attachment Theory. I understand we all have specific needs and tailor my interventions to best match who you are as an individual within the context of your environment. I have obtained the following treatment modality certifications: Trauma Focused Cognitive Behavioral Therapy, Managing and Adaptive Practices, and Seeking Safety. I regularly seek to development my clinical skills and expertise and have training in the following areas: Birth to Five Assessment and Development, Birth to Five Interventions, Trauma within the Birth to Five Population, Motivational Interviewing, and Sports Psychology. In 2015, I obtained a ninety-five hour Children's Yoga Instructor certification through a Yoga Alliance certified training program. I additionally have experience administering psychological assessments and offer psychological evaluation services.

Your Rights

Clients always have the right to request a change in counseling approach, referral to another counselor, or termination of therapy at any time. As a licensed clinical psychologist, I am accountable for my work

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Updated: 8/21/2018

with you. If you have any concerns about the course of treatment, please discuss them with me. If you determine that I cannot help you, you may seek out another therapist or you can ask me to help you find one. Should you feel that I have been unethical or unprofessional you may contact the Department of Licensing.

Appointments

Individual appointments are 50 minutes in length. It is important to be on time because your appointment will not be extended beyond the schedule time as a result of your late arrival. Attending sessions on a weekly basis is necessary if you wish to see progress in treatment. Your appointment is held exclusively for you. If you are unable to keep your appointment for any reason, you must give me at least 24 hours advance notice; otherwise you will be charged an \$80 fee for the time I have reserved for you. Exceptions in the event of an emergency or unavoidable circumstances will be discussed.

Fees and Payments

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 \$180 for the initial assessment and \$150 for each 50-minute session thereafter.

Confidentiality

Our counseling sessions are held in the strictest of confidence. As my client it is you rather than me who determines whether information shared in our sessions can be released to others. You do this by signing a release of information form that I will provide, if and when this is appropriate. 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.

Exceptions to this right of confidentiality, which is protected by state law, are: when there has been child abuse or abuse of the developmentally disabled within the past seven years or in life-threatening situations in which you pose a clear threat to your life or the life of another and/or you are unable to provide a minimum of self-care which will sustain your life. In all of these situations I am required by law to take necessary steps to secure your safety and/or the safety of others.

Crisis and Emergencies

My voicemail will take your calls any time, but I do not carry a beeper and may need up to a day to respond. If you need assistance before I can be reached, you can call **the 24-hour King County Crisis Clinic at 206-461-3222. If it is an emergency, please call 9-1-1.**

Court Testimony and Legal Involvement

In order to avoid dual relationships and conflicts of interest, I will provide you or your child 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 you or your child's ability to be honest with me during treatment. In addition, I do not participate in evaluation for adoption homes studies or provide evaluations of parental fitness to adoption agencies or State entities. By signing this document, you agree:

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- 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 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 there is a court-appointed evaluator in your child's custody or dependency dispute, and if appropriate releases are signed and a court order is provided, I will provide general information about the child which will not include recommendations concerning custody, custody arrangements, or visitations;
- 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 reports, testifying, being in attendance, and any other case related costs.

Professional Consultation

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

Communication

E-mails, cell-phones, computers and faxes are not private. No form of client communication is 100% guaranteed to be private. Conversations can be overheard, e-mails and faxes can be sent to the wrong recipients and phone conversations can be listened to by others. Although they add convenience and expedite communication, it is very important to be aware that computers, e-mail and cell phone communication can be accessed relatively easily by unauthorized people and hence can compromise privacy and confidentiality. If you choose to communicate with me by email, be aware that all e-mails are 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 administrators of the internet service providers. You should also know that any e-mails I receive from you and any responses that I send to you may become a part of your legal record and may be revealed in cases where your records are summoned by a legal entity. To protect your confidentiality to the best of my ability, my computer is equipped with a firewall, virus protection and passwords and my cell phone is equipped with virus protection and passwords.

Social Media Policies

Per industry standards, my personal social media presence and professional social media presence are separate (ACA code section H.6) and it is not appropriate for me to engage in virtual relationships with my clients (ACA Code A.5.e; NBCC Code section 19). I do not accept friend or contact requests from current or former clients on any social networking site. Please do not use messaging on social networking sites to contact me. Do not use wall postings, @replies, or other means of engaging with me in public online if we have already established a client/therapist relationship. Engaging with me in this way could compromise your confidentiality and 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.

Location-Based Services Reveal Your Location:

If you use location-based services on your mobile phone, you may wish to be aware of the privacy issues related to using these services. If you have GPS tracking enabled on your device, it is possible that others may surmise that you are a therapy client due to regular check-ins at my office on a regular basis.

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 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.

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 Dr. Michelle Battin, Ph.D.

Client Signature

Date

Print Name

Dr. Michelle Battin, Ph.D.

Date