Disclosure Statement

My Master’s degree in Psychology with emphasis in Mental Health Counseling was obtained from Western Washington University, Bellingham, Washington, in 2000 and my Bachelor’s degree in Psychology from Seattle Pacific University, Seattle Washington, in 1998. I am state licensed as a Mental Health Counselor (LMHC). I have over 13 years of experience as a therapist working with individuals and families, and supervising a counseling program.

My orientation to counseling is primarily a cognitive/behavioral approach, but the orientation I select depends on the situation and client preference. My approach to counseling is a collaborative partnership with my clients. I focus on their strengths and assets in the process of finding the reasonable solutions possible. The treatment plan will be determined with the inputs of my clients, since I believe my clients are the effective resources in counseling process.

Service Fees

The Counseling Center provides free and confidential services to full-time and part-time students attending to DigiPen Institute of Technology (“DigiPen”). Students may be seen up to 12 individual sessions during the regular academic year. Individual sessions are scheduled for up to 50 minutes at a frequency to be determined by the student and his or her counselor.

Emergencies

If you have an immediate crisis, please contact 911 or go to your nearest emergency room. You can also contact the Crisis Line (Crisis Clinic of Seattle) on a 24-hour basis at (866) 427-4747.

Confidentiality

We observe confidentiality within the DigiPen Counseling Centers as required by RCW 18.19.180. To provide effective services, your therapist may discuss your case with other professionals as-needed basis (please see RCW Chapter 70.02 for rules about this consultation). The Counseling Center may also share information with members of the Student Affairs Department in order to prevent imminent danger to students or the community caused by high risk behavior. However, no information about you is given to anyone outside of the Counseling Centers, including parents, partners, roommates, employers, faculty, or other DigiPen staff, unless:

1. I have your written permission.
2. I believe it is necessary to prevent clear and imminent danger to you or others.
3. You indicate that there is reasonable cause to believe that a child, dependent adult, or a vulnerable elderly person has been abused.
4. A court orders us to disclose confidential information about you. If this happens, I will first ask that the court drop their order. If they refuse to drop their order, I will disclose only the minimum amount of information I deem necessary to satisfy the court’s order.
5. You waive the privilege by bringing charges against me or the Center.

If you have any questions about confidentiality, please talk to your counselor.

The following statement is required by law:

You have the right to refuse treatment and the right to choose a counselor and treatment modality which best suits your needs.
Unprofessional Conduct (RCW 18.130.180)

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;

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;

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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;
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(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 department, based on recognized professional ethical standards.

The purpose of the law regulating counselors is: (A) to provide protection for public health and safety; and (B) to empower the citizens of the state of Washington by providing a complaint process against those counselors who would commit acts of unprofessional conduct.

If you want more information about the law regulating counselors or want to file a complaint, please write to: Department of Health, Health Professions Quality Assurance, Counselor Section, PO Box 47869, Olympia, Washington, 98504-7857 or call (360) 236-4700.

The counselor has provided you, the client, with a copy of this required disclosure information. By signing below, you acknowledge that you have read and understand the information.

Client's name (printed): ____________________________________

Client's signature: _________________________________________ Date: __________________

Counselor's Signature: ______________________________________ Date: ________________
Caleb Flatau, MS, LMHC

Licensed Mental Health Counselor: LH 60712934
Counseling Center
DigiPen Institute of Technology
9931 Willows Road NE
Redmond, WA 98052
(425) 629-4859
Email: c.flatau@digipen.edu

Disclosure Statement

I graduated with a Master’s of Science degree in Mental Health Counseling from Central Washington University in 2014. I am also credentialed as a Licensed Mental Health Counselor (LMHC) and National Certified Counselor (NCC). My experience includes employment at a residential substance use treatment center, college counseling clinics, and community mental health centers.

My primary approach to helping students utilizes cognitive/behavioral counseling. Therapy is ideally brief, beginning with understanding the cause of the distress, exploring student strengths, then using research supported interventions to build skills that will reduce or eliminate the distress.

My treatment method involves monitoring the conditions of the distress (when and how distress occurs), exploring why the distress occurs, and implementing treatment techniques that are collaboratively agreed upon by the student and myself. The student is primarily responsible for beginning and maintaining positive growth to reduce/manage distress. My goal is to support, guide, and teach the skills the student requests to overcome his/her challenge.

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Client's signature: ________________________________ Date: ________________

Counselor's Signature: ________________________________ Date: ________________