



**Disclosure Statement**  
**Lucas Abernathy**  
**Mental Health Counselor**  
**614 West McGraw St. Seattle, WA 98119**  
**License: MC60226945**

### **Therapeutic Approach**

Several key beliefs drive my therapeutic orientation. First, I believe inherent in every person is the desire to live rich, authentic, and loving lives. Second, I believe that each of us is relational at our core. That is, we are all shaped by our relational experiences, both good and bad, and that our experiences of meaning and healing take place in the context of relationship. Third, I believe we all seek to find and make meaning in our lives. We face difficult choices that shape who we become, and the degree to which we take responsibility for these choices is the degree to which we experience ownership of our own lives. In short, we want good, we want to experience it with each other, and we want it in a way that we know it is truly ours.

I believe that therapy should offer a safe space and unique relationship that encourages, facilitates, and participates in a client's deeper living into these desires. While I draw from a number of therapeutic approaches, I believe the psychodynamic relational therapeutic approach most naturally aligns with these goals. This model recognizes the centrality of relationships to all of us. What ails us is often relationally rooted and also often manifested in how we relate. I seek to develop a therapeutic relationship that reveals the client's way of relating and offers a place to explore and re-imagine new ways of relating. I believe and have found that this process can be healing and grounding. Further, it can attune us to and encourage us to live into our deep desire to live authentic and meaningful lives.

### **Qualifications**

I received a Bachelor of Science in Mathematics from Taylor University (2003) and a Masters of Arts in Counseling Psychology from The Seattle School of Theology and Psychology (2011). I have worked in the mental health field since 2009 and began my private practice in 2011. My training is in psychotherapy to individuals, couples, and groups.

I regularly seek consultation from colleagues as well as a licensed supervisor to discuss your treatment and for the purposes of improving my work with you. All information is shared confidentially and remains so. My supervisor is Joseph Canarelli, LICSW, LW00009353.

I will offer referrals for areas of need that are beyond my expertise.

### **Fee and Payment Information**

The fee for counseling will be \$85 per 50-minute session. Payments are to be made at each session. You will be charged for a missed appointment if you have failed to notify me within 24 hours of our scheduled time (illness and emergencies excepted). Fees may increase periodically, and thus the fees are subject to change with two weeks prior notification.

In some cases I offer my fee at a sliding-scale if my standard fee is financially prohibitive for you to meet on a weekly basis. If this is the case for you, we can discuss your options and agree to a fee that seems appropriate for both parties.

Appointments are generally made on a consistent, weekly basis. At the end of each session, we will confirm for the next week's meeting. Usually appointments are made for the same time each week, but appointment times are not automatically held open for you week to week, so if you miss an appointment it is your responsibility to reschedule. In circumstances of inclement weather, if it is unsafe to travel we will consider our appointment canceled and you will not be charged for the missed appointment.

### **Insurance**

I do not file insurance claims directly. Rather, if your insurance provider will be covering the cost of your counseling, then you need to make arrangements with them to reimburse you directly. You are responsible for obtaining and filling out any appropriate paperwork and submitting it to the insurance company. I will be glad to provide billing statements for you monthly and fill out any part of the insurance form that is necessary.

### **Contact Information**

You may call me or leave me a message at 206.713.9168, and you can contact me by email at [lucasabernathy@thecounselingcollaborative.com](mailto:lucasabernathy@thecounselingcollaborative.com).

Please be aware that although my voice mail and email are confidential and protected as best I am able, there is a greater risk to confidentiality. Please reserve for our inperson time any important therapeutic information. Do not use my voice mail or email for any disclosure of life threatening emergencies. If you cannot reach me immediately, see below.

### **Emergencies**

For emergencies, you may dial **911** or call the Crisis Clinic at **206.461.3222**.

### **Rights and Responsibilities**

I appreciate that you have selected me for these services. Please be aware that your participation in this therapy is voluntary and you may terminate these services at any time without additional cost. You will always maintain the right to select another therapist. You have the right to ask me to review my treatment approach at any time and you may request changes as you deem appropriate. You have the right to review

your records and, upon written request may receive a copy at any time.

Counselors practicing counseling for a fee must be registered or certified with the department of health for the protection of the public health and safety. Registration of an individual with the department does not include a recognition of any practice standards, nor necessarily implies the effectiveness of any treatment.

The Counselor Credentialing Act regulates counselors in order to provide protection for public health and safety and to empower the citizens of the state of Washington by providing a complaint process against those counselors who would commit acts of unprofessional conduct.

**Confidentiality**

All records kept relating to our sessions together will kept strictly confidential with the following exceptions: 1) I will release information to your physician, attorney, other mental health professional or your insurance if you sign a release of information form, 2) If you present an imminent threat to yourself or another, 3) in cases of suspected abuse to another individual, 4) information shared that suggests the commission of a crime 5) under court order.

**Consent**

I, \_\_\_\_\_, have read and agree to the above policy and give my informed consent for services.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

**REGULATION OF HEALTH PROFESSIONS --  
UNIFORM DISCIPLINARY ACT  
Unprofessional conduct**

The following conduct, acts, or conditions constitute unprofessional conduct for any license holder or applicant 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 or applicant 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) 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 or documents;
  - (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 department, based on recognized professional ethical standards.

Complaints concerning any of the above information should be directed to:

Department of Health  
1112 SE Quince Street  
PO BOX 47890  
Olympia, Washington 98504-7890  
DOH Consumer Hotline - (800) 525-0127  
Health Profession Licensing - (360) 236 - 4700