

Douglas J. W. Bartholomew, RC00005458 / LH00003582 - Case file # 2009-238982LH

Beginning Page	Ending Page	Entire page or group of pages withheld	Exemption
1	3		None
4		Complainant / patient name	RCW 43.70.075, RCW 70.02.020
5	7		None
8	9	Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
10	11	Licensee's social security number	RCW 42.56.350(1), and 42 USC Section 405(c)(2)(C)(vii)(1).
12	13		None
14		Complainant / patient names	RCW 43.70.075, RCW 70.02.020
15		Complainant / patient name	RCW 43.70.075, RCW 70.02.020
16		Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
17			None
18		Licensee's residential address and phone number	RCW 42.56.350(2), RCW 42.56.050
19			None
20		Licensee's residential address, complainant / patient name and other identifiers	RCW 42.56.350(2), RCW 42.56.050, RCW 43.70.075, RCW 70.02.020
21			None
22		Complainant / patient name	RCW 43.70.075, RCW 70.02.020
23	24		None
25		Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
26			None
27		Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
28			None
29		Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
30	32		None
33		Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
34			None
35		Complainant / patient name	RCW 43.70.075, RCW 70.02.020
36		Complainant / patient name and other identifiers	RCW 43.70.075, RCW 70.02.020
37	38		None

Timeline for Case 2009-138982

Respondent:	Douglas J W Bartholomew	Alleged Issues:	Unprofessional Conduct
Credential:	MHC.LH.00003582	Case Nature:	Standard of Care/Services
Profession:	Mental Health Counselor License	Resolutions:	No Whistleblower
Created:	09/01/2009		
Closed:	11/13/2009		

Timeline Detail	Start	End	Days Used
OPENED	08/13/2009	09/01/2009	19
Intake	09/01/2009	09/01/2009	0
Assessment	09/01/2009	09/03/2009	2
Investigation	09/03/2009	10/23/2009	50
Case Disposition	10/23/2009	11/13/2009	21
CLOSED	11/13/2009		0

Timeline Summary	Auth Days	Extend Days	Days Used	Days Remain
OPENED	0	0	19	-19
Intake	7	0	0	7
Assessment	14	0	2	12
Investigation	170	0	50	120
Case Disposition	140	0	21	119
CLOSED	0	0	0	0
Total:			92	

Case Disposition Worksheet

Respondent: Douglas Bartholomew Case Number: 2009-138982 LH

Date Presented: 10/29/2009

Profession: Mental Health

Staff Present: [X] Tammy Kelley [X] Bob Nicoloff [X] Don Painter [X] Mike Ellsworth [X] Betty Moore [X] Leann Yount [X] Erin Obenland [X] Stacy Messenger [X] Kitty Slater [X] Billie Dale

Presented by: Tammy Kelley

Staff Attorney: Pre-Assigned or Requested (circle one)

SEXUAL MISCONDUCT CASES

For Board and Commission cases, panel should refer sexual misconduct cases to the Secretary when there are no clinical issues involved. (It is recommended to make this referral only after investigation; however, any pre-investigation referral should include a panel authorization for investigation.)

- Panel finds there are clinical issues, do not refer. No clinical issues, refer case to Secretary

Complete Signature Below Only If Case Is Referred to Secretary

Authorized by Panel Chair: Print Name of Panel Chair: per Program Staff (initials) (if applicable) Reviewing Commission Member (if applicable) Date referral authorized:

A. REQUEST FOR LEGAL ACTION:

- Summary Action: Suspension Practice Restrictions Compliance: Release from STID, Release from Order, Referral to Collection Agency, Authorization for Fast Track

Alleged Violations—RCW 18.130.180:

- (1) Moral turpitude (2) Misrepresentation of facts (3) False advertising (4) Incompetence (5) Out of state action (6) Illegal use of drugs (7) Violated state or fed law (8) Failure to cooperate (9) Failure to comply (10) Aiding and abetting (11) Violation of rules (12) Practice beyond scope (13) Misrepresentation or fraud (14) Failure to supervise (15) Public health risk (16) Unnecessary or inefficacious drugs (17) Criminal conviction (18) Criminal abortion (19) Treating by secret methods (20) Betrayal of patient privilege (21) Rebating (22) Interference w/ investigation (23) Current drug/alcohol misuse (24) Sexual contact/patient abuse (25) Acceptance of more than nominal gratuity

Other Violations of Relevant State or Federal Law:

Or RCW 18.130 .170: Mental Impairment Physical Impairment

B. FILE CLOSED:

Table with 4 columns: No Jurisdiction, No violation at the time the event occurred, Conduct was within standard of practice, No violation determined. Includes rows for Evidence does not support a violation, Insufficient evidence, Application Investigation Only- No Action to Deny, Risk minimal, not likely to reoccur, Complainant withdrew, Mistaken identity, No Whistleblower, Care rendered was within standard of care, Complaint unique closure.

Further explanation (if any):

C. OTHER, EXPLAIN (Legal Review, Return to Investigation, etc.):

1 Program may request a specific staff attorney who has prior experience with the file or the Respondent.

CASE REVIEW FORM-SECRETARY PROFESSIONS

DATE: 10/29/2009

CASE #: 2009-138982 LH

ALLEGATIONS (from the original complaint):

The C alleges the R was treating his for DV issues and made a recommendation that C obtain see another provider for services as well. C states that when he told R that he was dissatisfied with the friend and filing a complaint that the R changed his mind about him and said that he would not release him from treatment because he was trying to control others.

SUMMARY OF CASE (ex. Criminal Conviction Dates, Classification of Crime, Pleadings, etc):

Complainant has failed to return a signed Whistleblower Waiver form.

CREDENTIAL INFORMATION:

ISSUANCE: 7/22/2001 **EXPIRATION:** 1/13/2010 **STATUS:** Active

COMPLAINT HISTORY:

PREVIOUS COMPLAINTS: NO

BRIEF EXPLANATION (# of complaints, types, results):

INITIAL RECOMMENDATION (To CMT) :

AGGRAVATING FACTOR:

*

MITIGATING FACTOR:

*

CHARGING/CLOSURE RECOMMENDATION:

No Whistleblower waiver

DISCUSSION (at CMT) :

FINAL CHARGING/CLOSURE RECOMMENDATION (By CMT) :

**DEPARTMENT OF HEALTH
OFFICE OF INVESTIGATIONS AND INSPECTIONS
MEMORANDUM TO FILE**

TO: File

FROM: Greg Bratten, Health Care Investigator

SUBJECT: Douglas J.W. Bartholomew/2009-138982LH

DATE: October 21, 2009

On September 16, 2009, I was assigned to investigate Douglas J.W. Bartholomew in Department of Health (DOH) case number 2009-138982LH.

On September 17, 2009, I telephoned _____ the Complainant. _____ stated that he needed another Whistleblower Release Form mailed to him, which I agreed to do. I explained to the Complainant that I could not proceed with my investigation without a signed Whistleblower Release Form.

On September 21, 2009, I mailed the Complainant another Whistleblower Release Form. **Evidence page 1.**

On October 8, 2009, I mailed the Complainant a letter (**Evidence page 2**) with another Whistleblower Release Form (**Evidence page 3**) enclosed, which advised the Complainant that if the Whistleblower Release Form was not received back by October 15, 2009, I would be forced to close out his complaint without an investigation of the allegations.

On October 14, 2009, the Complainant called me and was uncertain and vacillating about signing the Whistleblower Release Form. I again explained to him that I could not proceed with my investigation and that it would be closed unless he provided me with a signed Whistleblower Release Form. The Complainant agreed to call me back either way by Friday, October 16, 2009.

As of the date of this memorandum, I have still heard and received nothing from the Complainant. As a result, this case will be closed because without a Whistleblower Release Form, I will be unable to obtain the Complainant's patient records or question the Respondent about the specific allegations made by the Complainant. Based on the above, the Office of Investigations and Inspections (OII) considers this case to be completed and closed.

Approved by: _____

Jeffrey Yoshinaka, Supervisory Investigator

DATE 10/22/09

Evidence/Exhibits

Page #'s

Description

- | | |
|---|---|
| 1 | Whistleblower Release Form (unsigned) |
| 2 | Letter dated October 8, 2009 from Investigator Bratten to the Complainant |
| 3 | Whistleblower Release Form (unsigned) |

Activity Report

- | | | |
|----|----------|---|
| 1. | 09/17/09 | Reviewed case file. |
| 2. | 09/17/09 | Telephoned the Complainant. He needs another Whistleblower Release Form sent to him. |
| 3. | 09/21/09 | Sent another Whistleblower Release Form to the Complainant. |
| 4. | 09/24/09 | Received an e-mail from the Respondent. |
| 5. | 09/24/09 | Replied to the e-mail of the Respondent. |
| 6. | 10/08/09 | Received a telephone call from the Respondent. |
| 7. | 10/08/09 | Prepared and mailed a letter to the Complainant with another Whistleblower Release Form. |
| 8. | 10/14/09 | Received a telephone call from the Complainant who was balking at signing the Whistleblower Release Form. |
| 9. | 10/21/09 | Prepared Case Closing Memorandum. |

- Respondent Notification Letter
- NHA Notification Letter
- Malpractice Settlement Letter
- Special Letter (see comments below)
- Compliance (Docket Number)

- Complainant Notification Letter
- Whistleblower
- Criminal History Letter
- WHPS Letter
- Follow Up

Date received: 09-03-09

Investigator: Beatty

Date assigned: 9/1/09

Priority: A B C D E

Comments: _____

Assessment Worksheet

Respondent: Douglas Bartholomew Case Number: 2009-138982LH

Date: 9/3/2009 Board/Commission/Profession: LH Staff present: Tammy Kelley Bob Nicoloff Don Painter

Presented by: Tammy Kelley Judy Young Betty Moe Leann Yount Erin Obenland

Conference Call Board/Commission/CMT meeting Stacy Messenger Jennifer Sommer Kitty Slater Billie Ba

A. FILE CLOSED:

<input type="checkbox"/> BT- No Jurisdiction	<input type="checkbox"/> BT- No violation at the time the event occurred	<input type="checkbox"/> BT- Advertising that is a technical violation	<input type="checkbox"/> BT- Communication and personality issues
<input type="checkbox"/> BT- Aged or outdated complaints	<input type="checkbox"/> BT- Risk minimal, not likely to reoccur	<input type="checkbox"/> BT- Lack of complaint credibility	<input type="checkbox"/> BT- Complainant withdrew
<input type="checkbox"/> BT- No complainant's or client/patient's name and no allegations of significant harm or potential harm	<input type="checkbox"/> BT- Billing and fee disputes except as designated by disciplining authority	<input type="checkbox"/> BT- Practice on an expired credential for a period of time accepted by the disciplining authority	<input type="checkbox"/> BT- Insufficient information
<input type="checkbox"/> BT- Profession-specific threshold. Explain: _____ a) Violating confidentiality b) Inappropriate delegation to unlicensed person that does not involve invasive procedures or piercing of skin (e.g., RN instructs NA to apply skin cream) c) Failure to supervise resulting in no harm or minor harm to a patient d) Isolated incidents which suggest little or no patient harm, not likely to reoccur	<input type="checkbox"/> BT- Issues which have been otherwise resolved. Explain resolution: _____ _____ _____ _____ (detail corrective action: practitioner is already revoked; ongoing monitoring, etc.)	<input type="checkbox"/> BT- If allegations are true, no violation of law occurred	<input type="checkbox"/> BT- Referral to another program or agency. <input type="checkbox"/> BT- Incident reported by facility

Further explanation (if any): _____

B. INVESTIGATION AUTHORIZED:

Recommended priority: _____ Professions _____ Facilities _____

A (risk of immediate danger)	(____ # of days)
B (serious risk)	(____ # of days)
X C (moderate risk)	(____ # of days)
D (minor risk)	(____ # of days)
E (technical violations)	(____ # of days)

C. SEXUAL MISCONDUCT CASES

For Board and Commission cases, panel should refer sexual misconduct cases to the Secretary when the case does not involve clinical expertise or standard of care issues. (Note: any pre-investigation referral should still include a panel authorization for investigation.)

- Panel finds there are clinical issues, do not refer.
- No clinical issues, refer case to Secretary

Notes:

Initiate investigation and obtain records, including patient records.

Authorized by Panel Chair/CMgr: Tammy Kelley

Print Name of Panel Chair/CMgr: Tammy Kelley

per Program Staff (initials) TLK Reviewing Commission Member _____
(if applicable) (if applicable)

Date investigation authorized: 9/3/2009

**COMPLAINT INTAKE
SUMMARY WORKSHEET**

RESPONDENT INFORMATION

Name & Address	Douglas J W Bartholomew 1750 112th Ave NE Ste B218 Bellevue, WA 98004-3770					Case #	2009-138982LH	
						Allegation	Unprofessional Conduct	
						License #	MHC.LH.00003582	
						Issued	07/22/2001	
						Expires	01/13/2010	
Phone #						Status	Active	
Legal Action	Yes	No	Compliance	Yes	No	Cases	Open:	Closed:
		X			X		1	

COMPLAINANT INFORMATION

Name & Address			
Phone #	E-Mail		

SUMMARY OF COMPLAINT

Complainant has been seeing the respondent for treatment due to his domestic violence. The respondent allegedly praised the complainant throughout treatment telling him he was progressing very well.

The complainant told the respondent that he had made a complainant against the respondent's friend. After the complainant told the respondent this, the respondent has allegedly changed his mind and told the complainant he will not release him from his program until he demonstrates twelve months of not trying to control others.

Complainant states the respondent is just being vindictive.

Case View Screen

Case Status	2009-138982 (PUBLIC) Assessment	Date Created Date Received How Received	09/01/2009 08/13/2009 Email	Audit Entry Items Notes Master Cas Participan Add Maste Timeline t
Respondent ID Respondent Credential	632109 Douglas J W Bartholomew MHC.LH.00003582	Receiving Board Receiving Profession Receiving Department Received By	SECRETARY Mental Health Counselor License Case Intake Robin M. Paradiso	
Complainant I Complainant		Alleged Issues Unprofessional Conduct Case Nature Standard of Care/Services		

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- Action Items

Priority History

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	U
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Other Participants

No additional participants found

Resolution

Department: Case Management Worker: Tammy Kelley Date Closed:	Found Issues none Resolution none
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Resolution Notes:

Current HIPDB Reports

Type	Submission Date	Status	DCN	Case I
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No HIPDB Reports found for this credential.

Action Items [add] [add group]

Type	Assigned To	Activity	Due	Effective	Completed	Order Signed	Created	▼
Present for Assessment	Case Management, Kelley, Tammy			09/01/2009			09/01/2009	Paradiso,
Target: Douglas J W Bartholomew, MHC.LH.00003582								
Case Status:	Status Changed To:	Assessment					09/01/2009	Paradiso,
Intake	Case Intake, Paradiso, Robin			09/01/2009	09/01/2009		09/01/2009	Paradiso,
Target: Douglas J W Bartholomew								
Warning:	Warning Type:	CASE PENDING						
	Warning Effective Date:	09/01/2009						
	Suppress License Print:	NO						
	Warning:	2009-138982LH						
Case Status:	Status Changed To:	Intake						
Action Info:	Complaint Source	Patient/Client/Resident						
	Possible Imminent Danger?	No						
	Single Complaint							
	Process Coordination Needed?	No						
	Enter Case Summary	Yes						
Comments:	Complainant has been seeing the respondent for treatment due to his domestic violence. The respondent allegedly prais complainant throughout treatment telling him he was progressing very well.							
	The complainant told the respondent that he had made a complainant against the respondent's friend. After the complain told the respondent this, the respondent has allegedly changed his mind and told the complainant he will not release him his program until he demonstrates twelve months of not trying to control others.							
	Complainant states the respondent is just being vindictive.							

Credential View Screen [update]

<p>Douglas J W Bartholomew Address: <input checked="" type="radio"/> Public <input type="radio"/> Mail <input type="radio"/> Renewal Mail [change public address] Douglas J W Bartholomew 1750 112th Ave NE Ste B218 Bellevue, WA 98004-3770</p>		<p>ID 632109 Warnings CASE PENDING SSN/FEIN Contact Standing Living Contact Type INDIVIDUAL Birth Date 01/13/1950 Public File YES Mailing List Legacy Licensure Name BARTHOLOMEW, DOUGLAS J W</p>	<p>Contact Audit Public Cases Cont. Edu Documents Owned By/Key Mgmt Exams Experience Notes Schools Supervises SupervisedBy Legacy Librarian Application Other State License</p>
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Comments:

<p>Mental Health Counselor License [update] [form letter]</p>		<p>Credential Status ACTIVE (01/27/2009) Status Reason ACTIVE Amount Due (\$100.00) Date Last Activity 7/10/2009 10:06:13 AM Last Updated by Crawford, Katrina B Certificate Sent Date 01/27/2009</p>	<p>Audit Documents Workflow Key Mgmt Fees Notes Print Docs Comp. Audit Renewal Legacy</p>
<p>Credential # MHC.LH.00003582 Legacy License # LH00003582 Application Date Effective Date 01/12/2009 Expiration Date 01/13/2010 First Issuance Date 07/22/2001 Last Date Of Contact CE Due Date 01/13/2009</p>			

Comments:

Supervises	User Defined License Data	Legacy	HIPDB
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[update]

Background Check Processed

SEP 04 2009

NPDB/HIPDB
 Department of Health
 Office of Investigation and Inspection

Contact View Screen [update]



Douglas J W Bartholomew

Address: Public Mail

Douglas J W Bartholomew
1750 112th Ave NE Ste B218
Bellevue, WA 98004-3770

ID 632109
Warnings CASE PENDING
SSN/FEIN
Contact Standing Living
Contact Type INDIVIDUAL
Criminal History NO
Public File YES
Mailing List

Audit
Public Cases
Cont. Edu
Documents
Owned By/Key Mgmt
Exams
Experience
Notes
Schools
Supervises
SupervisedBy
Legacy
Librarian
Application
Other State License

Comments:

Addresses	Personal Information	Credential List	Legacy
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Credentials [add]

Credential	Sub	License Type	License Issue	Expiration Date	Status	Reason
MH.MH.30000460 Douglas J W Bartholomew 1750 112th Ave NE Ste B218 Bellevue, WA 98004-3770		Mental Health Counselor Certificate		07/19/2001	EXPIRED	PROFESSION DISCONTINUED
MHC.LH.00003582 Douglas J W Bartholomew 1750 112th Ave NE Ste B218 Bellevue, WA 98004-3770		Mental Health Counselor License	01/12/2009	01/13/2010	ACTIVE	ACTIVE
RC.RC.00005458 Douglas J W Bartholomew 1750 112th Ave NE Ste B218 Bellevue, WA 98004-3770		Counselor Registration	01/13/1997	01/13/1997	EXPIRED	CREDENTIAL NOT RENEWED

Public Cases for Bartholomew, Douglas J W

Public Case(s)

Case	Board	Current Owner
2000-76239	SECRETARY	ZLegacy
2000-114509	LEGACY	ZLegacy
2004-101385	SECRETARY	ZLegacy
2007-107507	SECRETARY	ZLegacy
2008-128802	SECRETARY	Case Intake
2009-137532	SECRETARY	Investigation

Public Master Case(s)

Master Case	Board	Current Owner
No Public master case(s) associated with this contact.		

Public Examinations(s)

Examinations	Board	Current Owner
No Public examinations(s) associated with this contact.		

PREVIOUS CASE SUMMARY

Case - Search [hide criteria]

Case

Year - Number -

Legacy Case

Board

Participant

Name Respondent Complainant Participant

Credential Number -

SSN/FEIN

Secretary Of State #

Federal ID

CLIA Number

Search Options

Soundex Search Previous Names Open results in new window

Case ▲	Board	Department	Status	Respondent	Complainant	Opened Date	Closed Date
2004-101385	SECRETARY	ZLegacy	CLOSED	Bartholomew, Douglas J W	NONE	01/20/2004	01/22/2004
2007-107507	SECRETARY	ZLegacy	CLOSED	Bartholomew, Douglas J W	NONE	02/23/2007	04/19/2007
2008-128802	SECRETARY	Case Intake	CLOSED	Bartholomew, Douglas J W		08/07/2008	10/17/2008
2009-137532	SECRETARY	Investigation	Investigation	Bartholomew, Douglas J W		06/23/2009	

Showing 1 to 4 of 4 Results.

Case View Screen

Case	2009-137532 (PUBLIC)	Date Created	07/06/2009	Audit Entry Items Notes Master Ca Participan Add Maste Timeline I
Status	Investigation	Date Received	06/23/2009	
Respondent ID	632109	Receiving Board	SECRETARY	
Respondent	Douglas J W Bartholomew	Receiving Profession	Mental Health Counselor License	
Credential	MHC.LH.00003582	Receiving Department	Case Intake	
Complainant ID		Received By	Jenny T Yeam	
Complainant		Alleged Issues	Breach of Confidentiality Unprofessional Conduct	
		Case Nature	Standard of Care/Services	

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- TimeTracker
- Action Items

Priority History

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR User
Jul 10 2009 7:49AM	C Priority	Other...	Investigative Service Unit	07/09/2009	Unprofessional ...	NO Crawford, Katr

Other Participants

No additional participants found

Resolution

Department: Investigation
Worker: Greg M Bratten
Date Closed:

Found Issues
none
Resolution
none

Resolution Notes:

Current HIPDB Reports

Type	Submission Date	Status	DCN	Case I
No HIPDB Reports found for this credential.				

Time Tracker

Charge Back Totals

Department	Hours	Amount
Investigation	4.8	369.60

Cost Recovery Totals

Department	Hours	Amount

Cost Recovery Invoicing

Respondent	InvoiceDate	User

Action Items [add] [add group]

Type	Assigned To	Activity	Track Time	Due	Effective	Completed	Order Signed	Created ▼
Investigative - Case Activity	Investigation, Bratten, Greg M		[Charge Back]	08/25/2009	08/25/2009	08/25/2009		08/26/2009
Comments:	Received an additional complaint from Program from the Complainant against the Respondent. Received a telephone call from the Respondent. Faxed the Respondent a copy of the new complaint and requested a supplemental statement.							
Investigative - Case Activity	Investigation, Bratten, Greg M		[Charge Back]	08/26/2009	08/26/2009	08/26/2009		08/26/2009
Comments:	Received a telephone call from the Respondent.							
Investigative - Case Activity	Investigation, Bratten, Greg M		[Charge Back]	08/14/2009	08/14/2009	08/14/2009		08/14/2009
Comments:	Replied to two e-mails from the Respondent.							
Investigative Correspondence - General	Investigation, Bratten, Greg M		[Charge Back]	08/12/2009	08/12/2009	08/12/2009		08/12/2009
Comments:	Prepared 21-day letter for mailing on 08/13/09, including a request for patient records. The response is due on							

**COMPLAINT INTAKE
SUMMARY WORKSHEET**

RESPONDENT INFORMATION

Name & Address	Douglas J W Bartholomew 1750 112th Ave NE Ste B218 Bellevue, WA 98004-3770				Case #	2009-137532LH		
					Allegation	<ul style="list-style-type: none"> • Breach of Confidentiality • Unprofessional Conduct 		
					License #	MHC.LH.00003582		
					Issued	7/22/01		
					Expires	1/13/10		
Phone #					Status	Active		
Legal Action	Yes	No	Compliance	Yes	No	Cases	Open:	Closed:
								0

COMPLAINANT INFORMATION

Name & Address					
Phone #			E-Mail		

SUMMARY OF COMPLAINT

Respondent is alleged of disclosing confidential information without written consent, did not advise Complainant to contact law enforcement and/or domestic violence advocate and verbally abusing Complainant when he made comments such as "you are a closet cross dresser homosexual" "you are a drama queen" and "like a drag queen from the movie "Birdcage."



Case View Screen [update]

Case Status	2008-128802 (PUBLIC) CLOSED	Date Created Date Received How Received	08/12/2008 08/07/2008 Mail	Audit Entry Items Documents Notes Master Cas Participan Add Maste Timeline P
Respondent ID Respondent Credential	632109 Douglas J W Bartholomew MHC.LH.00003582	Receiving Board Receiving Profession Receiving Department	SECRETARY Mental Health Counselor License Case Intake	
Complainant ID Complainant	874156 Peter Connick	Received By Incident Date	Amanda Whipple 08/05/2008	
		Alleged Issues Improper or Inadequate Supervision or Delegation Malpractice Case Nature Misrepresentation Standard of Care/Services		

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- TimeTracker
- Action Items

Priority History [add]

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	User
Sep 9 2008 8:38AM	C Priority	Other...	Investigative Service Unit	08/14/2008	malpractice...	NO	Crawford, Katri

Other Participants [add]

No additional participants found

Resolution [update]

Department: Case Intake Worker: Jenny T Yeam Date Closed: 10/17/2008	Found Issues none Resolution ZDelete - Evidence Does Not Support Allegation
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Resolution Notes: Closed per CMT CNAH

Current HIPDB Reports

Type	Submission Date	Status	DCN	Case I
No HIPDB Reports found for this credential.				

Time Tracker

Charge Back Totals

Department	Hours	Amount
Investigation	2.5	192.50

Cost Recovery Totals

Department	Hours	Amount

Cost Recovery Invoicing

Respondent	InvoiceDate	User

Action Items [add] [add group]

Type	Assigned To	Activity	Track Time	Due	Effective	Completed	Order Signed	Created ▼
Change Status to Closed	Case Intake, Yeam, Jenny T				10/17/2008	10/17/2008		10/17/2008
Target: Douglas J W Bartholomew, MHC.LH.00003582 Case Status: Status Changed To: CLOSED Action Info: Resolution Recorded? Yes								
Forward for Closure	Case Intake, Yeam, Jenny T				10/16/2008	10/16/2008		10/16/2008
Target: Douglas J W Bartholomew, MHC.LH.00003582 Action Info: Resolution Recorded? Yes CMT Decision Maker 1 Kelley Tammy CMT Decision Maker 2 Wiesman Mike								

**CUSTOMER SERVICE COMPLAINT INTAKE
SUMMARY WORKSHEET**

RESPONDENT INFORMATION

RESPONDENT NAME & ADDRESS	DOUGLAS J W BARTHOLOMEW				CASE #	2008-128802		
					ALLEGATION	Malpractice		
					LICENSE #	MHC.LH.0003582		
					ISSUED	01/23/2008		
					EXPIRES	01/13/2009		
PHONE #					STATUS	Active		
Legal Action:	YES	NO	Compliance	YES	NO	Cases	Open:	Closed:

COMPLAINANT INFORMATION

Name & Address	Peter Connick 80 Yesler Way Ste 320 Seattle, WA 98104-3493		
PHONE #	(206) 624-5958	EMAIL	

SUMMARY OF COMPLAINT

Complainant is filing in defense of his client. Complainant alleges Respondent falsely treated client and interfered with his representation of client due to Respondent's evaluation based on personal bias. Complainant also alleges unprofessional conduct of Respondent based on actions and unethical behavior by attempting to provide therapy beyond the scope of what was warranted.

Case View Screen [update]



Case	2007-107507 (PUBLIC)	Date Created	02/23/2007	Audit Entry Item Documents Notes Master Cas Participan Add Maste Timeline I
Legacy Case	2007020006	Date Received	02/23/2007	
Status	CLOSED	Receiving Board	SECRETARY	
Respondent ID	632109	Receiving Profession	Mental Health Counselor License	
Respondent	Douglas J W Bartholomew	Receiving Department	ZLegacy	
Credential	MHC.LH.00003582	Received By	Legacy	
Complainant ID		Alleged Issues	none	
Complainant	NONE	Case Nature	ZLegacy - Unprofessional Questionable Conduct 34	

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- Action Items

Priority History [add]

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	User
Mar 5 2007 1:10PM	ZLegacy - Priority 3	Other...	ZLegacy - 7-CMT	03/01/2007		NO	LEGACYD.

Other Participants [add]

No additional participants found

Resolution [update]

Department: ZLegacy	Found Issues none Resolution ZLegacy - Closed After Investigation No Violation Determined
Worker: Legacy	
Date Closed: 04/19/2007	

Resolution Notes:

Current HIPDB Reports

Type

No HIPDB Reports found for this credential.

Submission Date

Status

DCN

Case I

Action Items [add] [add group]

Type	Assigned To	Activity	Due	Effective	Completed	Order Signed	Created	▼
ZLegacy - Make Case Internally Visible	ZLegacy, Legacy			02/23/2007	02/23/2007		02/23/2007	LEGACY
Target: Douglas J W Bartholomew, MHC.LH.00003582								

CASE MANAGEMENT ASSESSMENT

DATE: 9/1/09

CASE NO: 2007-02-0006LH

Department of Health
Health Professions Quality Assurance Division
Health Professions Section 7
Licensed Counselors
MS 47869
(360) 236-4905

ASSESSMENT RECOMMENDED:

- Close (See closure reasons below)
- Field Investigation (See request below)
- Legal Review

RESPONDENT ADDRESS:

COMPLAINANT(S) ADDRESS:

DOGLAS J BARTHOLOMEW ()	FAX NUMBER: ()
---------------------------------	------------------------

SUMMARY OF COMPLAINT:

Respondent is alleged of....

Unlicensed practice

HIPPA & Ethics violations

"This man is full of himself, and operating by lying, manipulating and writing reports to please attorneys wishes who refers him court ordered clients."

PREVIOUS COMPLAINTS: YES NO

BACKGROUND COMMENTS:

POSSIBLE VIOLATIONS:

RECOMMENDATIONS:

CLOSED PRIOR TO INVESTIGATION:

- How should case be closed?
- (CNA1) No Jurisdiction
 - (CNA2) Below Threshold
 - (CNA3) Does Not Appear To Be A Violation Of Law
 - (CNA4) Insufficient Information

PROGRAM MANAGER: _____ Date _____
(Please initial)

2007-107507



Case View Screen [update]

Case	2004-101385 (PUBLIC)	Date Created	01/20/2004	Audit Entry Item Documents Notes Master Cas Participan Add Maste Timeline f
Legacy Case	2004010003	Date Received	01/20/2004	
Status	CLOSED	Receiving Board	SECRETARY	
Respondent ID	632109	Receiving Profession	Mental Health Counselor License	
Respondent	Douglas J W Bartholomew	Receiving Department	ZLegacy	
Credential	MHC.LH.00003582	Received By	Legacy	
Complainant ID		Alleged Issues	none	
Complainant	NONE	Case Nature	ZLegacy - Unprofessional Questionable Conduct 34	

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- Action Items

Priority History [add]

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	U
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Other Participants [add]

No additional participants found

Resolution [update]

Department: ZLegacy
 Worker: Legacy
 Date Closed: 01/22/2004

Found Issues
 none
 Resolution
 ZLegacy - Closed Prior to Investigation-Not a Violation of Law

Resolution Notes:

Current HIPDB Reports

Type

No HIPDB Reports found for this credential.

Submission Date

Status

DCN

Case I

Action Items [add] [add group]

Type	Assigned To	Activity	Due	Effective	Completed	Order Signed	Created ▼
ZLegacy - Make Case Internally Visible	ZLegacy, Legacy			01/20/2004	01/20/2004		01/20/2004 LEGACY
Target: Douglas J W Bartholomew, MHC.LH.00003582							

CASE MANAGEMENT ASSESSMENT

DATE: 1/22/04

CASE NO: 2004-01-0003LH

Department of Health
Health Professions Quality Assurance Division
Health Professions Section 2
Counselors
MS 7869
(360)236-4917

ASSESSMENT RECOMMENDED:

- Administrative Investigation
- Close (See closure reasons below)
- Field Investigation
- Legal Review

RESPONDENT ADDRESS:

COMPLAINANT(S) ADDRESS:

DOUGLAS BARTHOLOMEW	
()	()

SUMMARY OF COMPLAINT: Complaint is under court order to receive domestic violence counseling. Complainant contacted respondent in which respondent informed him that under their program he could not be a participant unless he was willing to committ to a certain length of time in excess of what was ordered. Complainant refused. Complainant then states that respondent rejected him and that respondent was slanderous.

PREVIOUS COMPLAINTS: YES NO

BACKGROUND COMMENTS:

POSSIBLE VIOLATIONS :

RECOMMENDATIONS:

CLOSED PRIOR TO INVESTIGATION:

- How should case be closed?
- (CNA1) No Jurisdiction
 - (CNA2) Below Threshold
 - (CNA3) Does Not Appear To Be A Violation Of Law

REQUEST FOR INVESTIGATIVE SUPPORT

Case View Screen [update]



Case	2000-76239 (PUBLIC)	Date Created	07/17/2000	Audit Entry Item Documents Notes Master Ca: Participan Add Maste Timeline +
Legacy Case	2000070001	Date Received	07/17/2000	
Status	CLOSED	Receiving Board	SECRETARY	
Respondent ID	632109	Receiving Profession	Counselor Registration	
Respondent	Douglas J W Bartholomew	Receiving Department	ZLegacy	
Credential	RC.RC.00005458	Received By	Legacy	
Complainant ID		Alleged Issues	none	
Complainant	NONE	Case Nature	ZLegacy - Unprofessional Questionable Conduct 34	

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- Action Items

Priority History [add]

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	U
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Other Participants [add]

No additional participants found

Resolution [update]

Department: ZLegacy	Found Issues none Resolution ZLegacy - Closed Prior to Investigation-Not a Violation of Law
Worker: Legacy	
Date Closed: 07/24/2000	

Resolution Notes:

Current HIPDB Reports

Type	Submission Date	Status	DCN	Case I
No HIPDB Reports found for this credential.				

Action Items [add] [add group]

Type	Assigned To	Activity	Due	Effective	Completed	Order Signed	Created	▼
ZLegacy - Make Case Internally Visible	ZLegacy, Legacy			07/17/2000	07/17/2000		07/17/2000	LEGACY
Target: Douglas J W Bartholomew, RC.RC.00005458								

Case View Screen [update]



Case	2000-114509 (PUBLIC)	Date Created	07/17/2000	Audit Entry Item Documents Notes Master Ca: Participant Add Maste Timeline
Legacy Case	2000070001	Date Received	07/17/2000	
Status	CLOSED	Receiving Board	LEGACY	
Respondent ID	632109	Receiving Profession	Mental Health Counselor Certificate	
Respondent	Douglas J W Bartholomew	Receiving Department	ZLegacy	
Credential	MH.MH.30000460	Received By	Legacy	
Complainant ID		Alleged Issues	none	
Complainant	NONE	Case Nature	ZLegacy-Unprofessional Questionable Conduct 34	

Comments:

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- Action Items

Priority History [add]

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	U
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Other Participants [add]

No additional participants found

Resolution [update]

Department: ZLegacy	Found Issues none Resolution ZLegacy - Closed Prior to Investigation Below Threshold CNA
Worker: Legacy	
Date Closed: 07/24/2000	

Resolution Notes:

Current HIPDB Reports

Type

No HIPDB Reports found for this credential.

Submission Date

Status

DCN

Case I

Action Items [add] [add group]

Type	Assigned To	Activity Due	Effective	Completed	Order Signed	Created ▼
ZLegacy - Make Case Internally Visible	ZLegacy, Legacy		07/17/2000	07/17/2000		07/17/2000 LEGACY
Target: Douglas J W Bartholomew, MH.MH.30000460						

SE MANAGEMENT ASSESSMEN

DATE: 7/17/00

CASE NO: 2000-07-0001MH
2000-07-0001RC

Department of Health
Health Professions Quality Assurance Division
Health Professions Section 2
Certified Mental Health Counselors
MS 7869
(360)236-4902

ASSESSMENT RECOMMENDED:

- Administrative Investigation
- Close (See closure reasons below)
- Field Investigation
- Legal Review

RESPONDENT ADDRESS:

COMPLAINANT(S) ADDRESS:

DOUGLAS J W BARTHOLOMEW 1400 112TH AVE SE #210 BELLEVUE WA 98004 (425)635-0188	
---	--

SUMMARY OF COMPLAINT: Complainant disputes the opinions offered by Respondent in a divorce / custody case.

PREVIOUS COMPLAINTS: YES NO

BACKGROUND COMMENTS:

POSSIBLE VIOLATIONS RCW 18.130.180:

RECOMMENDATIONS:

CLOSED PRIOR TO INVESTIGATION:

- How should case be closed?
- (CNA1) No Jurisdiction
 - (CNA2) Below Threshold
 - (CNA3) Does Not Appear To Be A Violation Of Law

REQUEST FOR INVESTIGATIVE SUPPORT

Please obtain the following information (waiver, patient records, respondent explanation, etc.):

2000-76239
2000-114509



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

November 13, 2009

Douglas J W Bartholomew
1750 112th Ave NE Ste B218
Bellevue, WA 98004-3770

Subject: Case No: 2009-138982

Dear Mr. Bartholomew:

The Secretary of Health, Mental Health Counselor Program has reviewed a concern about you alleging unprofessional conduct.

We have closed this case because the Whistleblower release form was either denied or not returned, therefore, an investigation can not be done.

We may reconsider this decision if we receive more relevant information or identify a pattern of similar complaints.

This decision is based on a careful review of the facts and state law. State law defines the disciplinary process and unprofessional conduct (Chapter 18.130 RCW). We cannot consider issues outside our authority.

The person who filed this complaint has been notified of this decision. The state's whistleblower law does not allow us to identify the person who filed the complaint.

You have the right to request any information contained in the file. If you would like a summary of the case or other materials in the file, please submit a written request for a copy to the Department of Health, Public Disclosure & Records Center, PO Box 47865, Olympia, WA 98504-7865 or fax to (360) 586-2171.

If you have questions, please contact us at (360) 236-2620 or email us at hsqacomplaintintake@doh.wa.gov.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristi Cholski".

Kristi Cholski
Office of Customer Service
Complaint Intake Unit



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

November 13, 2009

Subject: Case No: 2009-138982

Dear

Thank you for submitting your concern about Douglas Bartholomew.

Based on the information provided, the Secretary of Health, Mental Health Counselor Program could not identify any violations under the laws that we enforce. The Secretary has closed this case because the Whistleblower release form was either denied or not returned, therefore, an investigation can not be done. We may reconsider this decision if we receive more relevant information or identify a pattern of similar complaints.

This decision is based on a careful review of the facts and state law. State law defines the disciplinary process and unprofessional conduct. (Chapter 18.130 RCW) We cannot consider issues outside our authority.

To take action against a practitioner, the courts require us to have clear and convincing evidence. This is often a tough test to meet.

You have the right to request any information contained in the file. If you would like a summary of the case or other materials in the file, please submit a written request for a copy to the Department of Health, Public Disclosure & Records Center, PO Box 47865, Olympia, WA 98504-7865 or fax to (360) 586-2171.

If you have questions, please contact us at (360) 236-2620 or email us at hsqacomplaintintake@doh.wa.gov.

Thank you for bringing this matter to our attention.

Sincerely,

Kristi Cholski
Office of Customer Service
Complaint Intake Unit



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

AUTHORIZATION TO RELEASE COMPLAINANT'S NAME
(DOH WHISTLEBLOWER STATUTE)

RCW 43.70.075 provides in part: "The identity of a whistleblower who complains, in good faith, to the Department of Health about the improper quality of care by a health care provider, or in a health care facility, as defined in RCW 43.72.010 shall remain confidential..."

I understand that my identity is confidential pursuant to RCW 43.70.075 (DOH Whistleblower Statute). By signing this document, I waive my right to confidentiality and authorize the Department of Health to release my identity to **Douglas J.W. Bartholomew**, Respondent, to other persons who are reasonably necessary to the investigation, and for use in any subsequent administrative proceeding regarding my complaint. I understand that my identity will not be released for any other purpose.

APPROVAL OF CONFIDENTIALITY WAIVER

For the sole purpose of investigating my complaint and pursuing disciplinary/adverse action proceeding, I hereby waive confidentiality and consent to the release of my identity.

Signature: _____
Date: _____
Home Phone: _____
Day Phone: _____

DENIAL OF CONFIDENTIALITY WAIVER

I hereby deny my waiver of confidentiality and deny consent to release of my identity. I understand this denial may impair the Department of Health's ability to pursue disciplinary/adverse actions.

Signature: _____
Date: _____
Home Phone: _____
Day Phone: _____

CASE #: 2009-138982LH

RESPONDENT: Douglas J.W. Bartholomew



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
20435 72nd Avenue South, Suite 200
Kent, Washington 98032

October 8, 2009

Re: DOH File # 2009-138982LH/Douglas J.W. Bartholomew

Dear

On September 14, 2009, you were sent a letter containing a Whistleblower Release Form that you needed to sign and return before I am allowed by law to initiate my investigation of Mr. Bartholomew, the respondent, in the above referenced Department of Health (DOH) case file. I am forwarding you another Whistleblower Release Form for your signature and return. Please sign only one section of the form. If you authorize the release of your identity to the respondent, please sign the "Approval of Confidentiality Waiver" section. If you do not authorize the release of your identity to the respondent, please sign the "Denial of Confidentiality Waiver" section.

Please be advised that if you sign the "Denial of Confidentiality Waiver" section of the form, I will not be able to proceed with my investigation.

Please return the signed Whistleblower Release Form in the postage paid envelope by October 15, 2009, or I will be forced to close out your complaint without an investigation of these allegations. If you have any questions, please feel free to contact me at (253) 395-6785.

Thank you for your anticipated cooperation.

Sincerely,

Greg Bratten
Investigator

Enclosure: Whistleblower Release Form



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

AUTHORIZATION TO RELEASE COMPLAINANT'S NAME
(DOH WHISTLEBLOWER STATUTE)

RCW 43.70.075 provides in part: "The identity of a whistleblower who complains, in good faith, to the Department of Health about the improper quality of care by a health care provider, or in a health care facility, as defined in RCW 43.72.010 shall remain confidential..."

I understand that my identity is confidential pursuant to RCW 43.70.075 (DOH Whistleblower Statute). By signing this document, I waive my right to confidentiality and authorize the Department of Health to release my identity to **Douglas J.W. Bartholomew**, Respondent, to other persons who are reasonably necessary to the investigation, and for use in any subsequent administrative proceeding regarding my complaint. I understand that my identity will not be released for any other purpose.

APPROVAL OF CONFIDENTIALITY WAIVER

For the sole purpose of investigating my complaint and pursuing disciplinary/adverse action proceeding, I hereby waive confidentiality and consent to the release of my identity.

Signature: _____
Date: _____
Home Phone: _____
Day Phone: _____

DENIAL OF CONFIDENTIALITY WAIVER

I hereby deny my waiver of confidentiality and deny consent to release of my identity. I understand this denial may impair the Department of Health's ability to pursue disciplinary/adverse actions.

Signature: _____
Date: _____
Home Phone: _____
Day Phone: _____

CASE #: 2009-138982LH

RESPONDENT: Douglas J.W. Bartholomew

Notice

The identity of a whistleblower who complains in good faith to the Department of Health about the improper quality of care by a health care provider or in a health care facility shall remain confidential.

RCW 43.70.075

Department of Health staff need to:

- Place this notice in the file with the complaint.
- Keep this notice in the file with the complaint when the case is closed.

WAC 246-15-030

Notice

Bratten, Gregory M (DOH)

From: Bratten, Gregory M (DOH)
Sent: Thursday, September 24, 2009 5:40 PM
To: 'Doug Bartholomew'
Subject: RE: complaint

Will do.

Greg

From: Doug Bartholomew [mailto:doug@doug-bartholomew.com]
Sent: Thursday, September 24, 2009 5:39 PM
To: Bratten, Gregory M (DOH)
Subject: complaint

Please let me know when you get the release to share the new complaint with me.

Doug Bartholomew MS, LMHC
1750 112th Ave. NE # B-218
Bellevue, WA 98004
Phone: 425-635-0188
email doug@doug-bartholomew.comcastbiz.net
FAX 425-451-8184
website www.doug-bartholomew.com



Washington State Department of

Health

Health Systems Quality Assurance

Complaint Intake

P.O. Box 47857

Olympia WA 98504-7857

Complaint Form

Today's Date: 8/12/2009

1. Your Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Work (____) ____ - ____ Home _____

*Rec'd
8/13/09*

2. Information about the Facility or Health Care Professional

Type of facility or profession: Psychology

Name of facility or professional: Doug Bartholomew

Address: 1750 112th Ave NE

City: Bellevue State: WA Zip: 98004

3. Resident/Guest/Patient Information

Full Name (if different than above) _____

Date of Birth (of patient, if complaint involves a patient) 3/12/1967

Date of incident: 7/1/2009

4. Please describe your complaint in the space below. Include the name, title and phone number of other patients, witnesses or staff members involved in the incident. Email completed form to the Customer Service Center at HSQAComplaintIntake@doh.wa.gov, or fax to 360.236.4818, or mail to:

Washington State Department of Health
P.O. Box 47857
Olympia WA 98504-7857.

Please attach any supporting documentation and additional sheets if necessary.

I have been seeing Doug Bartholomew for domestic violence for almost one year. I had placed myself in treatment because of a custody battle that I

am involved and was recommended through Dale Todd that I receive treatment for an incident that happened with my ex girlfriend who is the mother of my child. The incident that happened was that I was trying to stop my ex from using hard core drugs while pregnant. I agreed to do the d.v. because I had no right.

I have been doing well in my domestic violence classes and was about to complete one year. The last few months my ex had been coming around and Doug disagreed with me seeing her, but she is the mother of my child. Her background is pretty bad and when she does come around she wreaks havoc and throws out wrongful accusations. Apparently she has been self mutilating herself since the age of nine. Now she refuses to let me see my child and has hired a pit-bull attorney who has no regard for ethics.

A parenting plan was done in January and after six months the AGAL was to recommend a psycho analysis for me and domestic violence for her. Doug suggested I do the analysis since I was still letting her in my life. I did the analysis and it cost me \$1500.

The analysis was with Dr. Gustafson who did the same for my ex. I met with him and had great concern about him being bias since my ex's mother is on the board with Bridgeway. In addition his report about my ex was not correct. He stated that she was in sustained remission from hard core drug use. It also stated she stopped using in 2005. I provided declarations from people who know her and did drugs with her up to date. None of my information that was provided was even recognized. Also he failed to mention anything about her suicide attempt in 2007 while eight months pregnant and that she had a very late term abortion because of her condition or acknowledge her hard core usage. When we were dating I took her to a lot of different doctors and they had diagnosed her bi-polar. Me dating her almost cost me my life a few times and she had been arrested for assaulting me and her parents. Dr. Gustafson stated in his report she had no issues.

Dr. Gustafson did a report on me and stated that I had issues and that it was my game plan to keep the baby away from the mother. This shocked me because I relayed to Dr. Gustafson that my son needs his parents and it was my intent to fully work with her on raising him. He wrote in his report the opposite and found it hard to believe that I had six months d.v. treatment behind me. I am still in shock that he wrote his report the way he did and was aimed at recent battle in the courts over relocation. I disagreed with Dr. Gustafson report and filed a complaint. From his report the courts have seriously diminished my time with my son. This hurts bad, because I reiterated to the Dr. that my goal was to be all that I can be to

the mother and thought of my son's best interests and what his desire would be and that would be to have both parents in his life.

After I told Doug Bartholomew that I filed a complaint against his friend (DR. Gustafson) he told me that I was no longer in compliance and was kicking me out of his d.v. program. This hurts me very much since my compliance allows me to see my child. We argued about this issue and I was told that by me complaining and going to the board that I was not in compliance. I told him that I have a right to due process and I am in bewilderment on Dr. Gustafson's reports. Doug became very upset and after me telling him that I had a right and that I would forward this to the board he allowed me to still be in compliance.

There are still major issues going on with my ex and a lot of bad behavior and we are still arguing in the courts for the best interests of our child. The AGAL has broken the law in different ways and I reported her to the superior court. She in turn reported me to Doug and they have been communicating back and forth. This is against GAL rules and she has gone above her orders given by the court.

Where we stand at now is that I was nearly completed with d.v. and had no issues and received praise up until Dr. Gustafson and the AGAL complained to Doug that I threatened to report them. I do believe that their actions need to be addressed and I am still in bewilderment on what is going on and believe that I should be able to write a complaint letter if I see something so far opposite on what is happening with my child.

Doug Bartholomew now states that he will not release me of my program until I demonstrate twelve months of not controlling. I am seriously astounded by this action and believe it to be vindictive. Last month I was being praised and how I have grown and changed. I am very confused and now I do not trust the psychologists that have been involved with my life.

I would like to see some type of regulation in this regards. I am not being abusive or controlling. I am fighting for my rights to be a part of my son's life. I believe the GAL has failed in many ways-filing late reports, not contacting my collaterals, giving my ex legal advice, filing paperwork where she has no right and more. Voicing my frustration with her bad work is not controlling. She has in turn by her tardiness hurt my case. I should not have to go through another year of domestic violence for filing a complaint.



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

September 14, 2009

RE: Douglas J.W. Bartholomew
Case No: 2009-138982LH

Dear .

Your recent complaint regarding Douglas J.W. Bartholomew, has been referred to the Investigation and Inspection Office of the Department of Health, for investigation. The investigator that has been assigned to your complaint is:

Greg Bratten, Health Care Investigator
Investigation & Inspection Office
20435 72nd Avenue South, Suite 200
Kent, WA 98032
Phone: (253) 395-6785 FAX: (253) 395-6365
Email: Greg.Bratten@doh.wa.gov

Due to recently enacted legislation, RCW 43.70.075, regarding confidentiality, we ask that you read, sign and return the enclosed "Whistleblower Release Form" within fourteen (14) days after your receipt of this letter. A postage paid envelope has been included for your convenience. Thank you for your cooperation in this matter.

Respectfully,

Tina Crawford
Administrative Assistant 2

Enclosure: Whistleblower Release Form



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

AUTHORIZATION TO RELEASE COMPLAINANT'S NAME
(DOH WHISTLEBLOWER STATUTE)

RCW 43.70.075 provides in part: "The identity of a whistleblower who complains, in good faith, to the Department of Health about the improper quality of care by a health care provider, or in a health care facility, as defined in RCW 43.72.010 shall remain confidential..."

I understand that my identity is confidential pursuant to RCW 43.70.075 (DOH Whistleblower Statute). By signing this document, I waive my right to confidentiality and authorize the Department of Health to release my identity to **Douglas J.W. Bartholomew**, Respondent, to other persons who are reasonably necessary to the investigation, and for use in any subsequent administrative proceeding regarding my complaint. I understand that my identity will not be released for any other purpose.

APPROVAL OF CONFIDENTIALITY WAIVER

For the sole purpose of investigating my complaint and pursuing disciplinary/adverse action proceeding, I hereby waive confidentiality and consent to the release of my identity.

Signature: _____
Date: _____
Home Phone: _____
Day Phone: _____

DENIAL OF CONFIDENTIALITY WAIVER

I hereby deny my waiver of confidentiality and deny consent to release of my identity. I understand this denial may impair the Department of Health's ability to pursue disciplinary/adverse actions.

Signature: _____
Date: _____
Home Phone: _____
Day Phone: _____

CASE #: 2009-138982LH

RESPONDENT: Douglas J.W. Bartholomew



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

September 14, 2009

Douglas J.W. Bartholomew
1750 112th Ave NE Ste B218
Bellevue, WA 98004

RE: Case # 2009-138982LH

Dear Mr. Bartholomew:

The Counselor Programs within the Department of Health, has received a complaint alleging unprofessional conduct on your part, as defined in RCW 18.130.180. The complaint alleges unprofessional conduct. This notice is required by RCW 18.130.095.

The Uniform Disciplinary Act (UDA) provides that the Counselor Programs has the authority to investigate complaints against health care providers. RCW 18.130.050 The Counselor Programs has reviewed the complaint. The issues fall within its jurisdiction, and the Board/Program authorized an investigation to gather the facts in this matter.

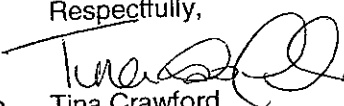
We are bound by two different laws, which may seem to conflict. The first requires that we immediately notify you that a complaint has been filed. The second, the whistleblower law (RCW 43.70.075), prohibits us from releasing the name of the complainant or any specific details about the report which could identify the complainant until we have received a signed waiver allowing us to do so. We understand that it can be challenging to learn that a complaint has been filed against you, but not know any details about it. As a result, once we receive the signed waiver, an investigator will contact you as soon as practical. At that time, all issues will be discussed as fully as allowed by law. Your case is being assigned to:

Greg Bratten, Health Care Investigator
Investigation & Inspection Office
20435 72nd Avenue South, Suite 200
Kent, WA 98032
Phone: (253) 395-6785 FAX: (253) 395-6365
Email: Greg.Bratten@doh.wa.gov

You may submit a written statement about the complaint at any time to the investigator listed above. However, you may choose to wait until you are contacted by the investigator and you have had the chance to discuss the complaint. As noted earlier, the investigator will contact you after a confidentiality release has been received, if one is required. You may consult with and engage an attorney, at your expense, to represent you in this matter prior to making a written statement. If you wish to have an attorney represent you, please have the attorney send us a Letter of Representation at the address above. The Letter of Representation will allow us to speak with him or her, if necessary, about the complaint against you and ensure they are copied on any correspondence to you.

Thank you for your anticipated cooperation.

Respectfully,


Tina Crawford
Administrative Assistant 2

