

Crisis Assessment

Overview

Referral Source: Self

Presenting Problem:

Ct presents at the North County MH clinic today requesting to speak with "someone who can help me." Ct states that he is depressed and distraught over the recent break-up of from his girlfriend of 1 1/2 years.

Circumstances leading to current crisis:

Ct reports that his girlfriend of 1 1/2 years ended their relationships 2 weeks ago. Ct presents as desperate to understand what the catalyst was that led to ending of his romantic relationship. He is preoccupied with obsessive and ruminating thoughts regarding the activities and whereabouts of his ex and states that if he is unable to repair the relationship that, "my transgression [sex out of wedlock] will be punishable with eternal damnation."

Relevant History: *(include pertinent medical information that may impact the client's risk or resiliency)*

Ct is a 23-year-old Caucasian male who states that he was raised in a strict sect of the Southern Baptist religion. "We do not believe in sex before marriage, because it is a sin punishable by internal damnation." Ct states that prior to being in this relationship with his ex-girlfriend that he was a virgin and feels as though if he is unable to reconcile with her then he will go to hell. Having reviewed ct's current and previous tx records, it is worth noting that a substantial amount of work has been done with ct around reality testing to do with his preoccupation about potential consequences he feels he will face from God as a result of his religious beliefs and the faith he was brought up in. It is difficult to ascertain if these beliefs are delusional in nature; however they cause ct significant distress when he feels he has, "committed a transgression."

Client denies any history of abuse.

Substance use:

Ct states that he finds himself drinking to go to sleep, but states that he cannot stay asleep. He denies using any other substances or medications (either prescribed or OTC).

Agencies/Programs involved with client:

Describe (include relevant law enforcement contacts):

NA

Current psychotropic medications and prescriber:

Per ct's treatment record client is prescribed Ability 10mg 1x a day. Client reports he cannot remember when he took the medication last but remembers picking it up from the pharmacy.

Any allergies or special precautions?

No

If yes, describe:

NA

Indicated risk of:

Danger To Self Danger To Others Grave Disability

Danger to Others

Current Risk to Others

Does the client currently have thoughts or plans to harm others? Yes

If yes, explain (include Duty to Protect):

Ct acknowledged owning a firearm and keeping it in his off-campus apartment. Ct stated that he even purchased ammunition for it yesterday. Ct also admitted to, "scoping out the entrance and exit points," in the engineering building in order to ensure, "a quick escape." Ct admits that he continues to be distraught by the recent break-up from his gf but is unwilling to say if she is the target of his fantasy. Ct states that he finds himself drinking to go to sleep, but states that he cannot stay asleep. Ct cannot remember the last time he took his psychiatric medication, though he states that he remembers picking the refill up from the pharmacy.

Tarasoff Warning indicated? Yes

Tarasoff Criteria

A. What is the specific threat? Use of firearm

B. Who or what is the target? students in engineering

C. What are the means? Gun

D. Does the client have access to the means? Yes

E. Who needs to be informed? What is their phone number?

F. Other comments:

When directly asked about thoughts of HI, ct states, "I just want to hurt them." When this writer asked follow-up questions ct stated that he feels that he is being, "laughed at by all the engineering students," and that he has "fantasized about shutting them up with my gun."

Ct states that he owns a firearm that is kept in his apt off campus; however, he is unwilling to answer how many firearms he owns or has access to. Ct states that he recently purchased ammunition at a local sporting goods store but again refused to answer how much ammunition was purchased or for what purpose.

Does the client have access to weapons?

Yes

If yes, explain:

Ct states that he owns a firearm that is kept in his apt off campus; however, he is unwilling to answer how many firearms he owns or has access to. Ct states that he recently purchased ammunition at a local sporting goods store, but again refused to answer how much ammunition was purchased or for what purpose.

Does the client have thoughts or plans on setting fires?

No

If yes, explain:

NA

Does the client have fantasies/obsessive thoughts about others?

Yes

If yes, explain:

Ct presents as desperate to understand what the catalyst was that led to ending of his romantic relationship. He is preoccupied with obsessive and ruminating thoughts regarding the activities and whereabouts of his ex and states that if he is unable to repair the relationship that, "my transgression [sex out of wedlock] will be punishable with eternal damnation."

Historical Risk to Others

Does the client have a history of thoughts or plans to harm others?

No

If yes, explain:

Client denies and current records do not indicate a history of DTO and writer is waiting for records from previous providers in Texas.

Does the client have a history of stalking or harming others?

Yes

If yes, explain:

Ct does acknowledge obsessive thoughts re: whereabouts and activities of ex-girlfriend (i.e. who she is spending time with, what she is doing, is she dating other men or women). Ct states that he has, "waiting for her outside some of her classes like I used to do," but states that when his ex has seen him she has refused to speak with him and, "run away from me." Ct also states that he has gone to the sorority house where his ex resides to see what she is doing/who she is with, but has not, "gone up to the door."

Does the client have a history of thoughts or plans on setting fires?

No

If yes, explain:

NA

Does the client have a history of obsessive thoughts about others?

Yes

If yes, explain:

See above under stalking

Summary

Risk Level:

Elevated risk: immediate risk to self or others. Current and/or recent history of suicidal plans or behaviors, violence, threats, or similar acting-out behavior which may be associated with a disorganized mental state or substance abuse.

Describe:

Given all risk factors present at the time of assessment (i.e. reasonably identifiable victim- i.e. students in engineering dept at school, access to firearms at his home, recent purchase of ammunition for said firearms, increase use of ETOH, inconsistent compliance with psychiatric medication, recent stressor from the breakup of his romantic relationship, lack of familial and peer support due to isolating behaviors and being away at college, changes to his appearance, reported insomnia, presence of mood sxs (feeling hopeless and depressed), as well as history of psychotic sxs and observation of disorganized thought process, behavior, and response to internal stimuli) this writer contacted the Mental Health Evaluation Team so that ct could be placed on a hold for danger to others.

Does the client meet criteria for an involuntary hold? Yes

DTS DTO GD

Describe (include reason for involuntary hold or release):

This writer consulted with the MHET crisis worker and was notified that client was placed on a 5150 involuntary hold for danger to others and is currently being evaluated at the San Luis Obispo Psychiatric Health Facility

Safety Plan/Next Steps:

While ct was being evaluated by MHET crisis worker, this writer consulted with , Rachel McSpadden-Tarver, LMFT and Program Supervisor, Dr. Kathleen Cohen regarding the need to begin a Tarasoff notification.

After consultation, this writer contacted San Luis Obispo Police Department (the law enforcement agency having jurisdiction where ct resides) as well as Cal Poly SLO campus police (law enforcement agency having jurisdiction where the intended victims reside) to notify them that client had made statements of wanting to harm students in the engineering department. This writer detailed ct's statements (i.e. "wanting to hurt them" "fantasized about shutting them up with my gun.") as well as behavior he admits taking in order to carry out his plan (i.e. purchasing ammunition for his legally owned firearm, "scoping out the various entrance and exits to the engineering building to make a clean escape" as well as the recent changes to his behavior, presence of alcohol use, inconsistent compliance with psychiatric medication, and recent life stressor (i.e. break up with a girl who is an engineering major). This writer made it clear to law enforcement agencies in both jurisdictions that she is unable to notify intended victims or client's ex-girlfriend due to lack of information but will contact the engineering department at Cal Poly SLO so that they are able to take any precautions necessary to protect their students.

This writer then phoned Cal Poly University SLO and spoke with Dr. Amy Fleischer, Dean for the College of Engineering. This writer notified the Dean of the threats made by client against students in the engineering department (i.e. "wanting to hurt them" "fantasized about shutting them up with my gun.") and discussed with the Dean client's stated plan and steps he has taken toward carrying out this threat. This writer also noted that client indicated that his ex-girlfriend, Alyssa is a student in the engineering department, but writer is unable to locate or notify her because her last name at this time is unknown to this writer.

After both law enforcement agencies and Cal Poly SLO, Department of Engineering were notified via phone, this writer completed the necessary Tarasoff letter and faxed it to San Luis Obispo Police Department and Cal Poly Campus Police Department and emailed a separate letter to Dr. Amy Fleischer, Dean for the College of Engineering at the email address she provided during the earlier phone conversation.

This writer consulted with the MHET crisis worker and was notified that client was placed on a 5150 involuntary hold for danger to others and is currently being evaluated at the San Luis Obispo Psychiatric Health Facility.

Staff:

Breanne Salmon, LMFT

Signature Date:

08/07/2025
10:01AM

Crisis Assessment

Clinician: Julianne Schmidt, LMFT

Signature Date: 08/07/2025
12:13PM