



Consumer Name:	<b>LEONARD WILLIAMS</b>	Date/Time:	<b>4/17/2019 6:28 PM to 7:08 PM</b>
DOB:	<b>11/1/1980</b>	Employee Name:	<b>Alli Roe BSW</b>
Address:	[REDACTED]	Program:	<b>MCT803</b>
Visit Type/CPT Code:	<b>NC Assess / H2011 HF</b>		

### PRESENTING INFORMATION

**Dispatch Time:** 6:08 pm

**Arrival Time:** 6:28 pm

**Departure Time:** 7:08 pm

**Mileage:** 9.2

**Shift:** Shift 2

**Place of Service:** Home

**Reason for Call:** Explain

MCT RECEIVED A CALL FROM JENNIFER COX REQUESTING MCT ASSISTANCE WITH CONNECTING HER FRIEND, A 38 YEAR OLD SCM TO SERVICES. MS COX CONFERENCED HER FRIEND (CONS) INTO THE CALL AND DISCLOSED SHE WAS CONCERNED ABOUT CONS PARANOID THOUGHTS AND DELUSIONS. CONS DENIED THOUGHTS AND DELUSIONS BUT CONSENTED TO HAVE MCT DISPATCH TO HIS RESIDENCE.

### PRESENTING PROBLEM

**Presenting Problem - Part One:** Part One

MCT ARRIVED ON SCENE AND WERE GREETED BY CONS IN THE LIVING ROOM OF HIS HOME. CONS SHOOK MCT HANDS AND MADE EYE CONTACT. MCT OBSERVED CONS TO BE DRESSED IN NAVY WINDBREAKER PANTS AND A T-SHIRT. MCT OBSERVED CONS TO APPEAR SWEATY, DESPITE THE COOL TEMPERATURE IN HIS APARTMENT. MCT ALSO OBSERVED CONS TO APPEAR DISHEVELED, WITH POOR HYGIENE, AND SLIGHTLY OVERWEIGHT.

MCT OBSERVED CONS APARTMENT TO BE MALODOROUS, DIRTY, FILLED WITH TRASH AND EMPTY FOOD CONTAINERS, AND OVERALL UNTIDY. MCT OBSERVED THE ONLY CLEAN AREAS TO BE THE COUCH, WHICH CONS LATER REPORTED HE CLEANED OFF FOR MCT VISIT, AND THE BOOKSHELF, WHICH WAS WELL STOCKED WITH NUMEROUS BOOKS.

MCT OBSERVED CONS TO BE GUARDED, IRRITABLE, DEFENSIVE, AND AGITATED AT TIMES THROUGHOUT MCT DISPATCH. MCT OBSERVED CONS TO BE FIXATED ON GIVING MC THIS ENTIRE MH HX, GOING BACK TO HIS CHILDHOOD. WHEN OBSERVED CONS TO BECOME INCREASINGLY AGITATED AT THE SITUATION WHENEVER ASKED TO ANSWER A QUESTION DIRECTLY, THOUGH CONS WAS NEVER THREATENING OR AGGRESSIVE WITH MCT.

MCT MET WITH CONS IN THE LIVING ROOM OF HIS HOME.

**Presenting Problem - Part Two:** Part Two

MCT OBTAINED SOME INFORMATION PRIOR TO DISPATCH FROM CONS FRIEND, JENNIFER, VIA PHONE CALL WITH IC AND MCT. CONS FRIEND REPORTED SHE IS CONCERNED FOR CONS DUE TO HIS PARANOID THOUGHTS AND DELUSIONS ABOUT OTHERS WATCHING HIM, TRYING TO KILL HIM, OR CONTACT PEOPLE FROM HIS WORK. PER CONS FRIEND, CONS HAS SENT TEXT MESSAGES REFERRING TO HOW THE POLICE AND HIS MOTHER WOULD FIND HIS BODY ONE DAY. CONS FRIEND REPORTED NO SAFETY CONCERNS.

CONS BEGAN TO FIXATE ON HIS PAST MH HX (FROM CHILDHOOD), INCLUDING HIS MEDICATION HX. DESPITE REDIRECTION FROM MCT, CONS WAS UNABLE TO ANSWER DIRECT QUESTIONS. MCT OBSERVED CONS TO HAVE TANGENTIAL AND DISORGANIZED THOUGHT PROCESSES THROUGH THE DURATION OF THE DISPATCH.



MCT WAS UNABLE TO OBTAIN A CLEAR HX OF CONS MH SX, AS CONS WAS VERY DISORGANIZED. CONS ADAMANTLY DENIED CURRENT THOUGHTS OF SI/HI WITH MCT AT MULTIPLE POINTS THROUGHOUT THE DISPATCH.

CONS REPORTED HIS FRIEND CALLED MCT WITH HIM ON THE PHONE TODAY BECAUSE SHE IS CONCERNED CONS IS PARANOID AND DELUSIONAL. CONS DISCUSSED WITH MCT THAT HE HAS BEEN "LIVING IN HELL" AND IN "EMOTIONAL PAIN" DUE TO HIS FRIEND INSISTING THAT HE IS PARANOID. CONS DENIED PARANOIA OR ANY OTHER MH SX. CONS REPORTED HE IS NOT FEELING DEPRESSED, BUT RATHER IS EXPERIENCING "EMOTIONAL PAIN". CONS REPORTED SHE HAS BEEN INSISTING THESE THINGS FOR THE PAST FEW MONTHS AND IT IS CAUSING HIM DISTRESS.

CONS REPORTED HE CURRENTLY RECEIVED MEDICATION MANAGEMENT SERVICES THROUGH A PSYCHIATRIST, BUT DID NOT DISCLOSE THE PRACTICE OR PROVIDER. CONS REPORTED HE IS NOT CURRENTLY CONNECTED TO ANY OTHER SERVICES, OUTSIDE OF THE MED MANAGEMENT. CONS REPORTED HE IS CURRENTLY TAKING THE FOLLOWING PRESCRIPTIONS:

- ZYPREXA, 5MG, CONS DID NOT REPORT PRESCRIBER
- CELEXA, 20MG, CONS DID NOT REPORT PRESCRIBER
- ADDERAL, 40MG, CONS DID NOT REPORT PRESCRIBER

CONS BECAME AGITATED WITH MCT AT MULTIPLE POINTS THROUGHOUT THE DISPATCH, WHENEVER MCT ATTEMPTED TO VERBALLY REDIRECT CONS TO THE CURRENT CRISIS. EACH TIME, CONS WOULD RESPOND THAT MCT COULD ALWAYS LEAVE IF THEY DID NOT BELIEVE HIM OR WANT TO HELP HIM. CONS WOULD APOLOGIZE WHEN HE BECAME AGITATED, AND EXPLAIN TO MCT THAT HE HAD A HX OF TRAUMA AND DID NOT LIKE TO BE INTERRUPTED OR RUSHED WHEN HE IS TALKING TO SOMEONE. CONS DID NOT DISCLOSE ANY FURTHER INFORMATION REGARDING HIS TRAUMA HX.

#### **Presenting Problem - Part Three: Part Three**

MCT PROVIDED ACTIVE LISTENING AND SUPPORTIVE TALK. DESPITE CONS TANGENTIAL THOUGHT PROCESSES AND PARANOIA, MCT WAS ABLE TO TALK TO CONS ABOUT A TX/CRISIS PLAN. MCT MADE SUGGESTIONS OF WAYS CONS COULD RELAX TO ALLEVIATE SOME STRESS, AND ALSO SUGGESTED CONS CONNECT WITH AN OUTPATIENT THERAPIST THROUGH MCT PROVIDED RESOURCES OR A REFERRAL FROM HIS PSYCHIATRIST.

TOGETHER, MCT AND CONS REVIEWED AND AGREED UPON THE FOLLOWING TX PLAN:

- LEONARD TO REST TONIGHT AND OCCUPY HIS MIND WITH POSITIVE THINGS SUCH AS READING OR WORKING ON HIS WEBSITE DESIGNS.
- LEONARD TO CONSIDER ACCESSING MCT PROVIDED RESOURCES FOR OUTPATIENT MH SERVICES OR MH EVAL INCLUDING: EASTOVER PSYCHIATRICS, AMARA WELLNESS, OR MONARCH.
- LEONARD TO CONSIDER UTILIZING THE CRISIS TEXT LINE OR REAL TALK CRISIS LINE WHEN HE IS STRESSED.
- LEONARD TO CALL MCT 24/7 IF NEEDED IN FUTURE.

CONS RELUCTANTLY AGREED TO THE TX PLAN. MCT WAS UNABLE TO OBTAIN SIGNED CONSENTS OR ROI DUE TO CONS AGITATION AND PARANOIA. CONS THANKED MCT FOR COMING AND MCT CLEARED THE SCENE.

#### **MENTAL HEALTH HX AND TX**

**Has the consumer ever been diagnosed with a Mental Health condition?:** Yes - Please Explain  
CONS REPORTED PAST DX THROUGHOUT HIS LIFE OF ADHD, BIPOLAR D/O, AUTISM SPECTRUM D/O WITHOUT COGNITIVE IMPAIRMENT, SCHIZOEFFECTIVE D/O, AND SCHIZOPHRENIA D/O.

**Has the consumer ever experienced periods of depression?:** Yes

**When (current/past)? How Long (e.g.: situational, life-long, episodic)?** CONS REPORTED HE HAS A HX OF DEPRESSION AND 'EMOTIONAL PAIN' BUT DID NOT REPORT FREQUENCY OR DURATION OF SX. MCT WAS UNABLE TO GATHER THE INFORMATION DUE TO CONS TANGENTIAL THOUGHT PROCESS AND PARANOIA.

**Symptoms Experienced?:** Sleep Disturbance, Depressed Mood, Irritability

**Has the consumer ever experienced periods of anxiety or panic attacks?:** Unknown

**Has the consumer ever been exposed to a traumatic experience?:** Yes - Please explain  
CONS REPORTED EXPERIENCING CHILDHOOD TRAUMA BUT DID NOT DISCLOSE THE NATURE OF THE TRAUMA.

**Has consumer ever experienced hallucinations (visual, auditory, tactile) or delusions?:** Unknown

**Has consumer ever been admitted to a hospital for psychiatric reasons?:** Yes - Please explain approximately when and for what reason.

CONS REPORTED HE WAS LAST IN THE HOSPITAL IN MAY OF 2018. CONS DID NOT REPORT WHICH HOSPITAL OR LENGTH OF STAY. CONS REPORTED PREVIOUS HOSPITALIZATIONS BUT DID NOT DISCLOSE WHERE OR WHEN.



**Has the consumer ever been in treatment or counseling for MH issues?:** Yes - If yes, please include the following if known: Provider, Level of care, Duration, Dates of service, and outcome.

CONS REPORTED HE HAS BEEN IN OUTPATIENT/INPATIENT MH COUNSELING SINCE THE AGE OF 12. CONS DID NOT DISCLOSE THE NAMES OF HIS PROVIDERS, DURATIONS, OR OUTCOMES OF SERVICES.

**Is the consumer CURRENTLY on any medication for MH purposes?:** Yes

**Medication 1 (include dose, frequency, prescriber):** ZYPREXA, 5MG, CONS DID NOT REPORT PRESCRIBER

**Usually Adherent?:** Yes

**Effective?:** Yes

**Any Other MH Medications Prescribed?:** Yes

**Medication 2 (include dose, frequency, prescriber):** CELEXA, 20MG, CONS DID NOT REPORT PRESCRIBER

**Effective?:** Yes

**Usually Adherent?:** Yes

**Any Other MH Medications Prescribed?:** Yes

**Medication 3 (include dose, frequency, prescriber):** ADDERAL, 40MG, CONS DID NOT REPORT PRESCRIBER

**Any Other MH Medications Prescribed?:** No

**Has consumer ever been prescribed psych medications in the PAST (not currently taking)?:** Yes - Provide Details Below:

CONS REPORTED BEING PRESCRIBED A NUMBER OF OTHER MEDICATION, INCLUDING DEPAKOTE. MCT WAS UNABLE TO GATHER INFORMATION REGARDING THE MEDICATIONS OR DOSAGES DUE TO CONS TANGENTIAL THOUGHT PROCESSES.

**Does Consumer have a first responder?:** No

**Do the consumer have a healthcare advanced directive?:** Unknown

**Is any family history of MH issues or suicide attempts known?:** Unknown/Unable to Obtain

#### SAFETY ASSESSMENT

**Are you currently having suicidal thoughts?:** No

**Have you had thoughts of suicide in the past?:** Unknown

**Have you ever attempted suicide in the past?:** Unknown

**Are you currently having thoughts of hurting someone else?:** No

**Have you had thoughts of hurting someone else in the past?:** Unknown

**Have you ever attempted to hurt anyone in the past?:** Unknown

**Interpretive Summary / Diagnostic Impression:** EXPLAIN

THROUGHOUT THE DISPATCH, MCT OBSERVED THE CONS TO HAVE TANGENTIAL THOUGHT PROCESSES AND PARANOID THOUGHTS REGARDING HIS FRIEND SPREADING LIES ABOUT HIM. CONS REPORTED HE RECORDS TELEPHONE CONVERSATIONS WITH PEOPLE IN CASE THEY TRY TO USE THEM AGAINST HIM. CONS ALSO REPORTED HE OBSESSES OVER PSYCHOLOGICAL JOURNALS AND DIAGNOSING HIMSELF WITH DIFFERENT DISORDERS.

MCT OBSERVED CONS TO HAVE DISORGANIZED SPEECH WHEN ASKED A QUESTION. MCT ALSO OBSERVED CONS TO FIXATE ON ONE TOPIC REGARDING HIS PAST HX WHEN ASKED A QUESTION ABOUT PRESENT CRISIS. CONS REPORTED HE IS CURRENTLY SELF-EMPLOYED AND FINDS IT DIFFICULT TO CONCENTRATE ON HIS WORK DUE TO HIS OWN PERCEIVED COGNITIVE DISPLAYS HE IS EXPERIENCING. CONS REPORTED HE BELIEVES THIS IS A SIDE EFFECT OF THE COMBINATION OF MEDICATIONS HE HAS BEEN GIVEN OVER HIS LIFETIME. CONS REPORTED HE HAS TOLD HIS DOCTOR THESE THINGS, BUT HIS DOCTOR DOES NOT SEEM CONCERNED.

-CONS REPORTED PAST DX OF ADHD, BIPOLAR D/O, AUTISM SPECTRUM D/O WITHOUT COGNITIVE IMPAIRMENT, SCHIZOEFFECTIVE D/O, AND SCHIZOPHRENIA D/O.

-CONS REPORTED NUMEROUS PAST HOSPITALIZATIONS, BUT DID NOT REPORT WHERE, WHY, OR THE OUTCOMES OF THE HOSPITALIZATIONS.

-CONS REPORTED HE CURRENTLY RECEIVED MED MGMT SERVICES THROUGH A PSYCHIATRIST AND HAS PREVIOUSLY RECEIVED OUTPATIENT COUNSELING SERVICES BUT DID NOT REPORT A PROVIDER OR FURTHER TX HX.

**Mental Health Recommendations:** MCT RECOMMENDS CONS CONNECT WITH AMARA WELLNESS OR MONARCH FOR A PSYCH EVAL. MCT RECOMMENDS CONS CONNECT WITH ONGOING MH SERVICES INCLUDING OUTPATIENT THERAPY. MCT RECOMMENDS CONS CONTACT REAL TALK CRISIS LINE OR CRISIS TEXT LINE IF NEEDED. MCT RECOMMENDS CONS CONNECT WITH THE PSYCHIATRIST HE SEES FOR MED MGMT AND TALK ABOUT HIS COGNITIVE SX. MCT RECOMMENDS CONS CONTACT MCT 24/7 IF NEEDED IN FUTURE.

#### SUBSTANCE USE HX AND TX



**Has consumer ever abused alcohol or drugs?:** Unknown

**Interpretive Summary / Diagnostic Impression:** EXPLAIN

MCT WAS UNABLE TO OBTAIN INFORMATION REGARDING CONS SUBSTANCE USE HX, OR LACK THEREOF DUE TO CONS TANGENTIAL THOUGHT PROCESSES, PARANOIA, AND ACTIVE PSYCHOSIS.

**Substance Use Recommendations:** MCT MADE NOT SUBSTANCE USE RECOMMENDATIONS AS NONE WERE NEEDED/WANTED/KNOWN OF AT THIS TIME.

## MEDICAL HISTORY

**If MOST information is not obtained regarding this section, please explain why:** EXPLAIN

MCT WAS UNABLE TO OBTAIN SOME INFORMATION REGARDING CONS MEDICAL HX, SEXUAL HX, AND PHYSICIANS DUE TO CONS TANGENTIAL THOUGHT PATTERNS AND PARANOIA.

**Does the consumer have any medical issues?:** Yes - Be specific  
CONS REPORTED HE HAS BEEN DX WITH DIABETES.

**Does the consumer have any allergies (food, medication)?:** No

**Is the consumer pregnant?:** N/A

**Is the consumer currently on any medication? (medical):** Yes - If yes, please include the following information: medication name, strength, dose, prescribing doctor, and effectiveness

CONS REPORTED CURRENTLY TAKING THE FOLLOWING MEDICATION:

-ZYPREXA (5MG)

-CELEXA (20MG)

-ADDERAL (40MG)

-METFORMIN (NO DOSAGE PROVIDED)

MCT WAS UNABLE TO OBTAIN INFORMATION REGARDING PRESCRIBING DOCTOR OR MEDICATION EFFECTIVENESS DUE TO CONS TANGENTIAL THOUGHT PATTERNS AND PARANOID STATE.

**Do you have any problems with participating in daily activities?:** Household Management

**Have you ever had a serious injury or medical condition?:** Unknown

**Have you ever had a serious head injury?:** Unknown

**Do you have a primary care physician?:** Unknown

**When was your last physical/check up?:** UNKNOWN

**Do you see other physicians on-going?:** Unknown

### Sexual Health

**Do you have any concerns regarding your sexual orientation, gender identity, and gender expression?:** Unknown

**Do you have any concerns regarding your sexual health?:** Unknown/Not Reported

**Interpretive Summary:**

CONS REPORTED PAST DX OF DIABETES THAT IS CURRENTLY MANAGED THROUGH THE USE OF METFORMIN. CONS ALSO REPORTED THE FOLLOWING MEDICATIONS:

-ZYPREXA (5MG)

-CELEXA (20MG)

-ADDERAL (40MG)

CONS DID NOT REPORT THE PRESCRIBING DOCTOR OR MEDICATION EFFECTIVENESS, EXCEPT THAT HE CURRENTLY SEES A PSYCHIATRIST THAT AGREES WITH HIM THAT THE DOSAGES ARE GOOD. MCT WAS UNABLE TO OBTAIN ANY OTHER INFORMATION REGARDING CONS MEDICAL OR SEXUAL HEALTH DUE TO CONS PARANOIA/PSYCHOSIS.

**Medical Suggestions:** MCT MADE NO MEDICAL RECOMMENDATIONS AS NONE WERE NEEDED/WANTED AT THE TIME.

## PSYCHOSOCIAL

**If MOST information is not obtained regarding this section, please explain why:** EXPLAIN

MCT WAS UNABLE TO OBTAIN PSYCHOSOCIAL INFORMATION DUE TO CONS TANGENTIAL THOUGHT PROCESSES, PARANOIA, AND ACTIVE PSYCHOSIS.

### LIVING SITUATION

**What is consumer's current living arrangements?:** Independent Housing, Living Alone

**Is the consumer experiencing difficulty with housing?:** No

**Does consumer have children under the age of 18?:** No

**Has DSS ever been involved with you or your children?:** Unknown/Not Reported

**Do you have children over the age of 18?:** No