Duty to Warn and Protect Worksheet

Threat assessment, state law check, consultation, actions and rationale, for the clinical record

If anyone is in immediate danger, call 911 first. Then come back to this page.

Client and context

Client code

Date and time of statement

Clinician and license

Client located in (state)

Your license state(s)

Setting (in person, telehealth)

1. The statement, in the client's words

Exact words, in quotation marks

Continued, or what led up to it

Said by: ☐ Client ☐ Family member ☐ Other person

2. Threat assessment: tick what applies

- ☐ Identifiable person at risk
- ☐ Access to firearm or weapon
- ☐ Timeline or trigger
- ☐ Recent loss or grievance
- ☐ Risk to self as well
- ☐ Specific plan
- ☐ Stated intent
- ☐ History of violence
- ☐ Alcohol or drug use
- ☐ Threat reported by someone else

Person at risk (role or initials, how identifiable)

Means (what, where)

Protective factors

Overall judgment (low, moderate, high)

3. State law and consultation

☐ Mandatory ☐ Permissive ☐ Hybrid ☐ Agency report ☐ No duty or unclear

Statute (section)

Threshold met? Why

Actions the law recognizes

Consulted (name, role)

When

Advice

4. Actions taken: tick, and note times on page 3

- ☐ Intensified treatment, sooner follow up
- ☐ Means safety (weapon moved)
- ☐ Voluntary hospital or crisis evaluation
- ☐ Warned the person at risk
- ☐ Agency report (if state requires)
- ☐ Safety plan made or updated
- ☐ Family or support involved (consent)
- ☐ Involuntary evaluation started
- ☐ Notified law enforcement
- ☐ Client told of the disclosure

5. Rationale and follow up

Why this action, and why not the others

Client told? When, and response

Next contact and reassessment

Completed by

Date and time written

Reviewed with

Copy filed in record

Quote the exact words. Share only what the recipient needs. Log every disclosure on page 3.

A documentation aid, not a risk instrument or legal advice. Your state law, board and judgment decide.

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Duty to Warn and Protect Worksheet

Threat assessment, state law check, consultation, actions and rationale, for the clinical record

FILLED EXAMPLE · fictional practice, client, people, places and dates

Client and context

Client code: C-14 (adult, 34)

Date and time of statement: 03/11/2027, 4:15 pm

Clinician and license: J. Navarro, LMHC (fictional)

Client located in (state): Washington

Your license state(s): Washington

Setting (in person, telehealth): In person, Cedar Lane office

1. The statement, in the client's words

Exact words, in quotation marks: "If I see R. in the parking lot Friday, I'll bring the rifle and end this."

Continued, or what led up to it: Talking about being fired last week; R. is his former supervisor

Said by: ☑ Client ☐ Family member ☐ Other person

2. Threat assessment: tick what applies

- ☑ Identifiable person at risk
- ☑ Access to firearm or weapon
- ☑ Timeline or trigger
- ☑ Recent loss or grievance
- ☐ Risk to self as well
- ☑ Specific plan
- ☑ Stated intent
- ☐ History of violence
- ☑ Alcohol or drug use
- ☐ Threat reported by someone else

Person at risk (role or initials, how identifiable): R., former supervisor; full name and workplace known

Means (what, where): Hunting rifle, kept at home

Protective factors: Daughter (8), never misses sessions, trusted brother

Overall judgment (low, moderate, high): High, specific

3. State law and consultation

☑ Mandatory ☐ Permissive ☐ Hybrid ☐ Agency report ☐ No duty or unclear

Statute (section): RCW 71.05.120(3)

Threshold met? Why: Yes: actual threat, identifiable victim

Actions the law recognizes: Warn victim and law enforcement

Consulted (name, role): M. Osei, LICSW; carrier risk line

When: 4:50, 5:05 pm

Advice: Duty applies: warn R. and police, move rifle

4. Actions taken: tick, and note times on page 3

- ☑ Intensified treatment, sooner follow up
- ☑ Means safety (weapon moved)
- ☐ Voluntary hospital or crisis evaluation
- ☑ Warned the person at risk
- ☐ Agency report (if state requires)
- ☑ Safety plan made or updated
- ☑ Family or support involved (consent)
- ☐ Involuntary evaluation started
- ☑ Notified law enforcement
- ☑ Client told of the disclosure

5. Rationale and follow up

Why this action, and why not the others: Specific threat, means, date; statute met. Treatment alone not enough; crisis eval declined.

Client told? When, and response: Yes, 4:30 pm: angry, then agreed to plan

Next contact and reassessment: Call 03/12 10 am; session 03/12

Completed by: J. Navarro, LMHC

Date and time written: 03/11/2027, 5:55 pm

Reviewed with: Practice owner, 03/13

Copy filed in record: Yes, 03/11

Quote the exact words. Share only what the recipient needs. Log every disclosure on page 3.

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After a Threat: Checklist and Log

Ten checks for the hours and days after a threat, plus a log of every contact and disclosure

After a threat, in order

- [ ] 1. Exact words, date and time written in the chart the same day.
- [ ] 2. Person at risk, plan, means, intent, timeline and history assessed.
- [ ] 3. Firearms asked about; safe storage arranged where possible.
- [ ] 4. State statute checked: type, threshold, recognized actions.
- [ ] 5. Consulted a supervisor, colleague or carrier; consult recorded.
- [ ] 6. Least intrusive action that protects chosen; others ruled out in note.
- [ ] 7. Disclosures limited to what each recipient needs to prevent harm.
- [ ] 8. Client told when safe; reason noted if not told first.
- [ ] 9. Each disclosure logged below for the HIPAA accounting.
- [ ] 10. Follow up confirmed, not assumed; next contact booked; debrief done.

Contact and disclosure log

Date and time	Contacted (name, role, agency)	How	What was shared	Response or report no.	By

Record every call or message: consultations, the person at risk, police, crisis teams, family. For each disclosure note what you shared and why. Use client codes, and keep this log with the clinical record.

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