

From Rio Index

Info	PAGE NUMBER	DATE
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Enfield Crisis Resolution and Home Treatment team Referral Form Page Numbers: 1	<u>1</u>	19/11/2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> London Borough of Enfield Approved Mental Health Professional Assessment Form! Date of initial referral 20/11/2014 Date of assessment 25/11/2014 Page Numbers: 2	<u>2</u> Assessing AMHPM Garrord/1 Anjaneyan Hospital Chase Farm Hospital, The Ridgeway, Enfield, EN2 8JL Consultant Dr Helen Moorey, ECRHT, Ivy House, Chase Farm Hospital, The Ridgeway, Enfield, EN2 8JL Tel: 02087025060 - For use when compulsory powers are being considered	Date of initial referral 20/11/2014 Date of assessment 25/11/2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Summary of assessment 19/11/2014 Enfield CRHT Page Numbers: 3,4	<u>3.4</u> Mr Cordell was referred to the Enfield CRHT by his mother on 19/11/2014 as she was concerned that he was mentally distressed, paranoid towards her and thinking that the television was talking to him. According to his mother, he has had several incidents with the police recently and they were also worried about his well-being. Mr Cordell's mother was concerned that he was not willing to accept any help from the family. Mr Cordell's father had tried to help him on 19/11/2014 and went to his flat but Mr Cordell had asked his father to leave his house after seen his father talking to professionals from the mental health service (HUB). According to his mother, Mr Cordell had suffered years of harassment from the police due to his past offences. The police had attended the property as Mr Cordell's neighbour had complained that Mr Cordell was screaming in distress.	25/11/2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Simon Cordell GP Assessment Letter Page Numbers: 5	<u>5</u> Dr. Gareth Jarvis MBChB MRC Psych ST5 General Adult Psychiatry to Dr. Andrews, Consultant Psychiatrist	18/03/2014 18 March 2014

<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Enfield Triage Team 25 Crown Lane Southgate London N14 5SH You have been referred Page Numbers: 6	<u>6</u> <u>= 4?</u> You have been referred to our Triage Service for a New Patient Assessment Date of Appointment: Monday 17th March 2014 Yours sincerely Carol Campbell CC: Dr Abidoye, Nightingale House Surgery, 1-3 Nightingale Road, London N9 8AJ	06/03/2014 6th March 2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> To be opened by addressee only Dr Abidoye Nightingale House Surgery! Page Numbers: 7	<u>7</u> New Assessment Dr Jarvis (ST5), Mr Cordell, Mr Cordell's mother. Diagnosis Adjustment reaction - predominantly anxiety Medication Nil Enfield Triage Service 25 Crown Lane Southgate London N14 5SH Trust Chairman: Michael Fox Trust Chief Executive: Maria Kane Director of Community Housing and Adult Social Care: Ray James	18/03/2014 18th March 2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Simon Cordell GP Assessment Letter Page Numbers: 8	<u>8</u> <i>Page 2 of 3 / 1 is missing</i> Maybe Above!	18/03/2014 18th March 2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> From: JJRI S WARREN DRJTHOMAS DRD ABIDOYE NIGHTINGALE HOUSE SURGERY Thank you for seeing this 33-year-old Afro-Caribbean man. Page Numbers: 9 =10?	<u>9</u> Thank you for seeing this 33-year-old Afro-Caribbean man. He gives a history of symptoms of anxiety and depression, which have been on-going for a few months. His symptoms have progressively got worse and he has been having some suicidal thoughts, although he has not made any concrete plans to do anything. He says that the only reason he has not acted on these suicidal thoughts is because of his ex- patient and family. He is currently involved with the criminal justice system and is -currently - on probation. He is under curfew and there have been imposed- restrictions on his movements	26/02/2014 26 February 2014 28/02/2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Receipt JJRI S WARREN DRJTHOMAS DRD ABIDOYE NIGHTINGALE HOUSE SURGERY Page Numbers: 11	<u>11</u>	28/02/2014
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u>	<u>12,</u> Receipt	13/08/2012

A+E Arrival: 13-AUC -2012 12:51 Upload to Rio This is when I drunk acholic drinks and it made me hallucinate I went to the hospital because I believed I had been spiked Arrested by Police? Page Numbers: 12,13,14,15,16,17,18,19	13, Notes 14 Notes 15 Notes 16 Notes 17 Ecg heart check 18 Mental State 19 Psychosocial assessment farm Emergence, Department-Chase Farm Hospital	
The Doctor's Folder / pub Book Issue: 1! MENTAL HEALTH ASSESSMENT FORM Crisis Resolution and Home treatment * Triage Service Telephone Screening Tool Name of Assessors): Jack Hallett Does the person have a history of mental health problems or psychiatric illness? Marked s yes Page Numbers: 20,21,22,23,24	20, MENTAL HEALTH ASSESSMENT FORM, p1 21 4. Suicide risk screen - greater number of positive responses suggests greater level of risk 22 If yes to any of the above, record details below Signed: Jack Hallett "He is known to mental health, a year ago a mental health act was carried out, not seen to be Section-able then. Mother reports deteriorating mental state with paranoid thoughts and hallucinations." 23 AMHP Signature: Margaret Garrord Date: 25/11/2014 Contact details 1st Floor, 65 C Park Avenue Bush Hill Park EN12HL (02083793977 / 07903 970401) 24 Medium Risk assessed	27/11/2015
The Doctor's Folder / pub Book Issue: 1! Triage S C 27.11.15 (Rio 11214451) Dear colleagues Please accept the attached referral For Rio 11214451 Page Numbers: 25	25 Sent: 27 November 2015 21:27	30/11/2015
The Doctor's Folder / pub Book Issue: 1! To: Dr Chong Y NIGHTINGALE HOUSE SURGERY Seen at home visit today after reports of gradual deterioration in mental health over last year. Plan Would not meet criteria for detention under the MHAA. Practitioner: Dr Jane Cushion Consultant Psychiatrist Page Numbers: 26	26 Change of assessment / care plan / medication for:	08/12/2015 Date: 8th December 2015

• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Enfield Assessment Service Barnet, Enfield & Haringey Mental Health Trust Crown Lane Clinic 25 Crown Lane Southgate London N14 5SH Tel: 020 8702 5000/8361 1770 Trust Chairman: Michael Fox Trust Chief Executive: Maria Kane Page Numbers: 27,28	<u>27</u> I am Jameson Simwanza, Social Worker in Enfield Assessment Service/Crisis Resolution and Home Treatment Team and I saw Mr Cordell at home today after reports of a gradual deterioration in his mental health over the last year. <u>28</u> Plan	09/12/2015 9th December 2015
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> To: Dr CHONG NIGHTINGALE HOUSE SURGERY 1 NIGHTINGALE ROAD Enfield Directorate Barnet, Enfield and Haringey Mental Health Trust Enfield Early Intervention Service Lucas House 305-309 Fore Street Edmonton London N9 OPD Goodie Adama Page Numbers: 29,30	<u>29</u> I write to inform you that the above-named gentleman has been accepted onto the caseload of the Enfield Early Intervention in Psychosis Service (EIS), and I am his Care Coordinator. <u>30</u> We would be very grateful if you could provide us with details of health checks you have carried out for this patient within the last twelve months with regards to:	17/12/2015
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> To: Mr Simon P CORDELL 109 Bumcroft Avenue Enfield The Lucas House West CSRT 305-309 Fore Street Edmonton London N9 OPD Tel: 0208 702 3100 Nicola Wheeler Page Numbers: 31	<u>31</u> I am pleased to inform you that an appointment has been made for you to be seen on 10 Feb 2016 at 14:00 at:	04/02/2016 Date: 4 Feb 2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Notes From the: 09/02/2016</u> <u>Date of initial referral: 21/01/2016</u> <u>Date of assessment: 03/02/2016</u> <u>Place of assessment: Patient's Home</u> London Borough of Enfield Approved Mental Health Professional Assessment Form. -For use when compulsory powers are being considered Assessing AMHP: Sam Curtis. <u>Hospital Not applicable</u> Dr Kripalani, Consultant Psychiatrist, Lucas House, 305 - 309 Fore Street, Edmonton, London, N9 OPD Tel: 020 8702 3100 GP	<u>32</u> Date of initial referral 21/01/2016 Date of assessment 03/02/2016 Place of assessment: Patient's Home <u>33</u> On 27/11/2015 Mr Cordell's mother contacted the Enfield HUB, mental health referral centre. She reported that Mr Cordell was not eating, not sleeping and that he was experiencing persecutory ideas, thinking that people are laughing at him and talking about him. His mother said that Mr Cordell believed that the government were advertising information about him and that the television was talking about him or to him. She stated that Mr Cordell was smoking significant amounts of cannabis and he was not	09/02/2016

Nightingale House Surgery, 1
Nightingale Road, N9 8AJ Tel: 020
88059997
/cmhn / Goodie Adama, Care
Coordinator and Community Mental
Health Nurse, Lucas House, cmht 305 -
309 Fore Street, Edmonton, London, N9
OPD
Tel: 020 8702 3100
Page Numbers: 32,33,34,35,36,37

taking the anti-depressant medication that as
prescribed in **March 2014**.

33

On

01/12/2015

Mr Cordell's mother again contacted the Enfield
assessment mental health team and reported that Mr
Cordell had locked himself in his room and believed
that his television was talking to him. She reported
that Mr Cordell was eating but not as regularly as
previously. She said that Mr Cordell sometimes
believes that his mother's body language is sending
him messages. She reported that he had not had any
recent contact with his friends but does go out on a
scramble bike and had injured his hands.

33

On

01/12/2015

**a worker from the Enfield assessment team
phoned Dawn Allan**, estate officer, who reported
that he had threatened to strangle his neighbour who
had been moved as a result.
Mr Cordell had accused his neighbour of
deliberately causing noise disturbance.

33

On

01/12/2015

an assessment team worker phoned Mr Cordell and
reported that she had received text messages from
Mr Cordell saying that he will commit suicide once
a court case is finished.
Mr Cordell was assessed by Dr Cushion, psychiatrist
based at the Home Treatment Team,

33

On

08/12/2015

There were no concerns identified concerning his
personal care. He said that he hasn't gone out for
months and his mother does all the shopping. He
spoke about a conspiracy to destroy his good name
and send subliminal messages to him via the
television.

Mr Cordell said that the woman in the flat upstairs
had been "stalking him" he elaborated and said that
she stamps on the floor when she hears him moving
around his flat or taking off his clothes. He spoke
about his plans to start a global business for
children. He said that he had about having thoughts
of killing himself when he eventually clears his
name. He did not accept that he had a mental
disorder during the assessment.

33

On

10/12/2015

	Mr Cordell was contacted by Goodie Adama, early intervention team worker. He said that he was not interested in meeting with mental health services. He spoke about being victimised by the police. <u>34</u> and there was no evidence thought disorder or psychotic symptoms on the telephone. He said that he didn't feel safe leaving the flat which appeared to be due concerns about police harassment. He said that complaint that he had made about a police officer had led to that police officer being arrested. <u>34</u> On 08/01/2016 Goodie received a telephone call from Mr Cordell's mother. She said that she was concerned about Mr Cordell and said that she had been concerned about him for over a year but would not specify what her concerns were. Goodie phoned Mr Cordell the same day he spoke about conspiracies involving the police and appeared thought disordered and thought about conspiracies. <u>34</u> On 13/01/2016 Goodie spoke to Mr Cordell to see if he would agree to a home visit that day but said that it was not a convenient time but he was prepared to have a visit at another time. <u>34</u> On 15/01/2016 He agreed to have home visit during a further telephone conversation with Goodie. <u>34</u> On 19/01/2016 he was visited at home by Goodie and Sandra Muschett, senior practitioner. He was noted to be paranoid, grandiose and not eating well. He denied any suicidal thoughts. <u>34</u> On 21/01/2016 Sandra Muschet had a telephone conversation with Mr Cordell's mother. She said that Mr Cordell had been harassed by the police for a number of years and that his preoccupation with the police was based on reality. She reported that Mr Cordell is not eating, not going out and has poor self-care. <u>34</u> On 22/01/2016	
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	An attempt was made to assess Mr Cordell under the Mental Health Act. Mr Cordell was angry that he had an unannounced assessment. He spoke about feeling targeted by the police. He spoke about being arrested numerous times and had a curfew from the police. He refused to give the assessing team access. He initially spoke rapidly but more slowly as the meeting went on. <u>34</u> On 22/01/2016 Mr Cordell phoned Amal Pomphrey, early intervention worker covering for Goodie, and said that he had felt threatened by the Mental Health Act assessment that had taken place. He spoke about being arrested over a thousand times by the police and being subject to a curfew. <u>34</u> On 26/01/2016 Mr Cordell phoned Amal Pomphrey, early intervention worker. He said that he had been contacted by a housing officer who had “threatened to get the mental health team out to see him”. <u>34</u> On 02/02/2016 Mr Cordell phoned Amal Pomphrey and advised that he had been told that a warrant had been granted. He was clearly aware of the planned Mental Health Act assessment. Information obtained from reports from Mr Cordell and his family to mental health services. Not independently verified. Social: Mr Cordell was the victim of abuse by a paedophile ring and this led to him having contact with CAMHS Safe project for a number of years, he has not spoken about the abuse for many years. Mr Cordell’s father was violent towards him. He was placed in care as a teenager. He separated from his girlfriend in 2014. Mr Cordell mother has regular contact with and helps with shopping. Mr Cordell’s grandmother was diagnosed with bi polar affective disorder and schizophrenia, she was treated with Schizophrenia. She died from cancer in August 2014. In 2014 he was bailed for burglary. In 2015 he was made subject to a 5-year Anti-Social Behaviour Order for organising illegal raves. He not allowed to enter industrial or disused premises between 10pm and 7 am. He has reported that he has a long history police contact since he was juvenile. His contact with the police mostly related to theft and driving offences. He lives in a one-bedroom council flat and is in receipt of Employment Support. Psychiatric History:	
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	Mr Cordell tried to hang himself at the age of 16 when in a young offender's institution and needed to be resuscitated. He was moved to a secure hospital and kept in seclusion on a number of occasions. He has reported that he was regularly by a psychiatrist called Dr Caplin from CAMHS "the safe project". Mr Cordell reports there was a second occasion where he tried to hang himself when in a cell after he was sentenced. He attended the Accident and Emergency Department at the North Middlesex Hospital after drinking liquid nitrous oxide with an intent to die. 35 hallucinating after taking LSD. He was not followed up by mental health services. He was assessed by Dr Jarvis from the Enfield triage team On 11/03/2014 due concerns about suicidal thoughts and anxiety. He was prescribed Sertraline anti-depressant. He was stressed about a pending court case as he was accused of burglary. He described experiencing poor sleep and weight loss. On 19/11/2014 Mr Cordell's mother phoned the hub (triage team) and reported that he was paranoid towards her and towards the police. In response the home treatment visited the same day. When home treatment workers arrived the same day, the police were present and reported that Mr Cordell had been screaming in distress. The police said that they had found Mr Cordell using a gas canister and thought that he was using nitrous oxide. He was referred for a Mental Health Act assessment. On 21/11/2014 The duty AMHP made contact with Mr Cordell's mother and father. The duty AMHP was told that Mr Cordell was subject to an anti-social behaviour order and that he is on the police at risk register for suicide. The duty AMHP advised that he broke up with his girlfriend and grandmother died. He had stopped taking his medication for chromes disease four weeks and had been admitted to the North Middlesex Hospital. Mr Cordell was assessed under the MHA act On 24/11/2015 He was not detained. 3. Record of interview with patient (Include where it was conducted who was present and use of police if required during process)	
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	Mr Cordell was assessed under the Mental Health Act at around 10:40hrs On 03/02/2016 Dr Al-Allaq (independents 12 Doctor), Dr Albazaz (independent s12 Doctor), CJ and Nellie (Home Treatment Team workers), Amal Pomphrey (Community Mental Health Nurse based at Enfield Early Intervention Team) all attended. A s135(1) warrant was obtained but not executed as Mr Cordell gave access. A lock smith was present but their services were not required as Mr Cordell opened the door. The police were present but remained outside the property. Mr Cordell's home was somewhat cluttered with a large printer by the door. However, it was clean and organised. He had food in the kitchen. His mother and a female friend were present. Mr Cordell was expecting the assessment to take place. He was appropriately groomed and dressed. He had put his dog in the garden. Mr Cordell expressed his unhappiness about the warrant being obtained. He said that if he had been sent an appointment letter, he would give professionals access. He mentioned on going issues with the police and that he had a court case in February. His speech was somewhat rapid at the start of the interview but this appeared to be due to anxiety rather than thought disorder. His speech slowed as the interview went on. Mr Cordell did change topic of conversation a number of times as there was particular information that he wanted to share with the team. He spoke a project to start a community internet site and showed those present a business plan that was on his computer. He showed us documents which he said were related to his court case. He pointed out a line in the document that said that all the suspects were white and said that this was part of his legal challenge to his Anti-Social Behaviour Order. He denied any symptoms of mental illness when asked about a variety of psychotic symptoms. He denied suicidal ideation. He spoke about difficulties he had with his upstairs neighbour relating to noise disturbance. He showed us some letters which said that his neighbour had written to him. He said that his neighbour has an alcohol problem and a learning disability. There was no evidence of distraction, confusion or that he was responding to internal stimuli. <u>36</u> It is my view that Mr Cordell's detention was not in the interests of his health as I did not identify evidence of mental disorder during the visit. I did not believe that Mr Cordell's detention was necessary for his safety, Mr Cordell denied experiencing any suicidal ideation and could I not identify other risks to safety apart from possible	
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	substance misuse which could not be used as the basis of detention without clear evidence of a mental disorder associated with the substance misuse issues. I also did not think that the threshold for detention on the basis of safety was met, he was having conflict with neighbour this conflict did not appear to be driven by any mental disorder. 5. Consultation with Nearest Relative and process of identifying the Nearest Relative I identified Mr Cordell's Nearest Relative as his mother Lorraine Cordell. Mr Cordell lives alone and is single. As far as I could ascertain he did not have any children and was not in relationship. His father was the older of his parents but when I phoned his mother on 03.02.16 she informed me that he was in regular contact with Mr Cordell and did his shopping for him. I therefore formed the view that she provided care and was the Nearest Relative. I phoned Lorraine at around 09:30hrs on 09.02.16 and she advised that in her view use of a warrant and the Mental Health Act assessment were unnecessary as he would give professionals access if he had received an appointment letter. She said that he had a court case in February but would not elaborate on this. Lorraine said that she thought that the involvement of mental health services was unnecessary as Mr Cordell was not in her view experiencing any mental health difficulties and had not experienced any mental health difficulties for a number of months. I was surprised that Lorraine stated that she did not think that Mr Cordell as the recent referral to mental health services had been triggered by a referral that she had made. 6. Consultation with Assessing Doctors Both assessing Doctors declined to make medical recommendations and were in agreement that there was no clear evidence of any mental disorder during the assessing. 7. Views of others consulted Prior to the assessment the police present advised me that were aware of conflict between Mr Cordell and his neighbour. They advised that the soundproofing between the two properties was poor. The police officers advised me that they were aware that on one occasion Mr Cordell had threatened to strangle his neighbour. 8. Mental Capacity Act 2005 No Capacity Act issues identified during the assessment. 9. Reason for decision to make the application (including choice of Section) Given that Mr Cordell's diagnosis and treatment plan were not clear at the time of the assessment the assessment was for possible detention on section 2. It was my view that Mr Cordell did not meet the statutory criteria for detention. It was not clear that he was suffering from a mental disorder of a nature because at the time of the assessment it was unclear	
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	if whether or not he had a mental disorder. He did not meet the criteria for degree as there was no clear evidence that he was experiencing symptoms of mental disorder. 10. If not admitted to hospital, outline immediate plans for alternative to admission and how those plans will be co-ordinated <u>37</u> Print details: Sam Curtis Contact details North London Forensic Service, Camlet 1, Chase Farm Hospital, The Ridgeway, London EN2 8JL Tel: 0208 7026108 I am using team viewer to transfer the files to my server	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> DR D ABIDOYE DR J THOMAS DRYCHONG NIGHTINGALE HOUSE SURGERY 1-3 NIGHTINGALE ROAD EDMONTON From Goodie Adama Care Coordinator Enfield Early intervention Service Lucas House S05-309 Fore Street London N9 0PD Page Numbers: 38	<u>38</u> Thank you for your letter dated 17th December 2015 requesting for any information regarding any health checks done for the above patient within the last twelve months. Unfortunately, this patient has not been seen in the surgery for more than one year. One of our doctors actually called him but he did not want to speak to us and ++ DR. Y Chong MB BS DRCOG	15/01/2016 15 January 2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> REFERRAL FORM - Enfield Crisis Resolution & Home Treatment Team Page Numbers: 39	<u>39</u> Reason for Referral; mhaa @10:00Am	02/02/2013? + 03/02/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> To: Me Enfield Directorate Banet, Enfield and Haringey Mental Health Trust Enfield Early Intervention Service Lucas House 305-309 Fore Street. Page Numbers: 40	<u>40</u> It was good to speak to you today. Thanks for taking the time to do this and for sharing your thoughts and views with me. From our conversations and one that you had previously with my Manager Simon Clark, I understand that you do not wish to remain in contact with us. It is our view, however, that you may be experiencing symptoms of some form of mental illness. We call it psychosis, but this does not appear to be affecting your capacity to make certain decisions, including whether you wish to have contact with the Enfield Early Intervention Team or not. We are however, happy to continue to offer you support but understand that at present this is not something you would like to do.	02/03/2016 2nd March 2016

	You know what my Team stands for and you know me, so if in the future you think either the Team or I will be of any help to you, please do not hesitate to call. I must say it was my pleasure having all those phone conversations with you. I wish you all the best. Yours Sincerely Goodie	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> London Borough of Enfield Approved Mental Health Professional Assessment Form - For use when compulsory powers are being considered. Consultant Discharged from EIS in March 2016. Date of initial referral 15/08/2016 Date of assessment 15/08/2016 Place of assessment Wood Green Police Station. Medical recommendations from: Dr. Albazaz Dr. Amin AMHP Signature : MARGARET GARROD Print details: MARGARET GARROD Contact details: 65C PARK AVENUE, BUSH HILL, ENFIELD, EN1 2HL. Tel: 0208 364 1844 Page Numbers: 41,42,43,44	<u>41</u> CMHn /cmht Formerly Early Intervention Service. Social worker/responsible local authority {Section 117} London Borough of Enfield "Forced Under a Section 2 of the Mental Health Act" Date admitted/detained: 16/08/2016 Time of admission: 4:30 AM Admitted/detained at: Hospital/Unit St Ann's Hospital Ward Haringey Assessment Ward <u>42</u> Referral details and any other precipitating factors Sgt Ahmed from Wood Green Police Station referred Mr Cordell for a Mental Health Act Assessment after he had been seen by the FME following his arrest. It seems that on 14.8.2016 at approximately 17.00hours he was playing music loudly in his garden when the victim looked out the window. On seeing the victim Mr Cordell is alleged to have shouted "What the fuck are you looking at? I am going to kill you and your kids, another elderly witness is reported to have complained that he rarely goes out, nor does his family visit as he is afraid of meeting Mr Cornell and being abused by him. the police understand that numerous complaints have been made to the Housing Services about his behaviour and he had previously been subject to an ASBO Order for one year. 2. Relevant social and medical history Mr Cordell was a victim of sexual abuse as a child and attended SAFE under Dr Caplan for a long time. He was arrested for burglary as a young man and was remanded in custody in a Young offender's institution for a prolonged period. During this period, he was discovered making preparation to kill himself by hanging. It is recorded that he has used laughing gas and LSD. He was arrested for organizing illegal raves It seems that he. may base his complaints for Police Harassment as he believes they have obstructed his ability to run this business. It is reported that he was made the subject of an ASBO, required to wear a tag and believed he could not go out at all for about a	15/08/2016 Date: 15/08/2016

	year. He was banned from visiting barns derelict buildings and factories and had a curfew. Medical: Mr Cordell suffers from Crohn's disease but does not eat properly to manage his symptoms and will not seek medical advice for this. In 2014 there were many deaths in the family from natural causes especially his grandmother to whom he was very close. He was assessed for admission in November 2104 but not detained. During this period, he spent many hours in doors his mother kept smelling gas but no leak was detected despite repeated complaints. He felt very ill and spent some days in hospital. Sometime later it was discovered the gas and carbonmonoxy meters were incorrectly installed and he was without heating or hot water for 6 weeks. 3. Record of interview with patient (Include where it was conducted who was present and use of police if required during process) Seen at Wood Green Police Station and interviewed through the wicket with Dr Albazaz, Dr Amin and the investigating officer Initially Mr Cordell refused to speak to us lying on the mattress covered in a blanket. He then jumped up and began to speak to us in a very rapid manner being very agitated and speaking right up to the wicket. He explained that he did not trust anyone and that the police had been doing what they could to ruin his business and find ways to arrest him. He said he had been framed by the police and had won one case against them and had one case pending. He said he taped everything that was said to him as he may need the evidence later. He talked about hiring large quantities of equipment for his raves that he has in storage even though there is no prospect of being able to use it at present He said the police had arrived at his home 15 strong and had ripped out his close circuit TV in front of his flat. He said he had been dragged off 2 weeks before for an injection but advised that he does not have mental illness. He said that 2 weeks ago the Police had arrived with a warrant and assessed for being Sectioned but that he was able to demonstrate that the evidence against him was false and that he was declared to be mentally well. He denied using alcohol or any illegal or street drugs. He said he would not consider admission to hospital as he is not ill. He claimed he is not able to leave his home and yet he is being charged with offences and that the police had doctored evidence against him. 4. Assessment of risk to patient and/or to other. Mr Cordell seems to have a history of deteriorating behaviour and feelings of persecution and since 2014 after the deaths in his family and the carbon monoxide poisoning. He has been taping everything and has Closed circuit TV outside his flat. It is reported that he believes the TV is talking about	
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him. He has been depressed in the past and attempted to take his own life. He seems to have some very grandiose plans to run Raves but no evidence that he has any funds for it. It is not clear whether he has been taking other substances, has a mental illness or is a person who will constantly find himself at risk of repeatedly breaking the law and feeling harassed as a result. He also seems preoccupied by his rights to do what he wants to do without seeming to understand the effect his actions might have on other people. He is putting his tenancy at risk.

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5. Consultation with Nearest Relative and process of identifying the Nearest Relative:

Lorraine Cordell his mother is one of the few people he still trusts to support him. He has become dependent on her to do his grocery shopping or care for his dog. He has no regular partner or child over 18 years. I deem his mother to be Nearest Relative, she believes there has been a difference in him since he suffered carbonmonoxy poisoning in 2014.

At the same time, she has been trying to help him with his complaints and appeals about the behaviour of the police towards and him. She told me that she can demonstrate that computer evidence has been changed.

6. Consultation with Assessing Doctors

Both Doctors were of the opinion that his pressure of speech and very challenging behaviour could be the result of drug use, mental illness or personality. Even though he has been known to services for up to 2 years there is still no clear diagnosis.

8. Mental Capacity Act 2005

Mr Cordell seemed to want to demonstrate his innocence and evidence that he was being unreasonably harassed. He had no concept that his behaviour would be seen as unacceptable and was in fact putting his tenancy at risk.

9. Reason for decision to make the application (including choice of Section)

Mr Cordell seemed to want to demonstrate his innocence and evidence that he was being unreasonably harassed. He had no concept that his behaviour would be seen as unacceptable and was in fact putting his tenancy at risk It seems that he is entitled to an Assessment that has not been possible in the community.

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**10. If not admitted to hospital:
outline immediate plans for alternative to admission
and how those plans will be co-ordinated Detained**

11. If admitted arrangements for:

- a) Dependants (including children^ None
- b) Securing property N/A
- c) Pets

	He has a dog Lady, which will need care. His mother has agreed to care for her 12. Any other practical matter (including information/advice about children visiting the ward) He has been bailed to return to Edmonton Police Station on 4.10.2016 13. Comment on any avoidable delays in the assessment and admission process Although the referral was made to the AMHP office at 12.12 on 15.2016 and the assessment was arranged for 3.00pm that day when the assessment was completed at 4.30pm there was no bed available and the matter could not be concluded at this time.	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> IN-PATIENT PRESCRIPTION CHART, "Regulated Drugs Chart!" Barnet, Enfield and Haringey Mental Health NHS Trust St Ann's Hospital Documents Page Numbers: 45,46,47,48,49,50,51	<u>45</u> IN-PATIENT PRESCRIPTION CHART, "Regulated Drugs Chart!" <u>46</u> Regulated Drugs Chart! <u>47</u> Regulated Drugs Chart! <u>48</u> Regulated Drugs Chart! <u>49</u> Regulated Drugs Chart! <u>50</u> Regulated Drugs Chart! <u>51</u> Regulated Drugs Chart!	16/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document Approved Mental Health Professional Assessment Form X? Place of assessment Wood Green Police Station. Page Numbers: 52	<u>52</u> Approved Mental Health Professional Assessment Form To be use when compulsory powers are being considered Date of initial referral 15/08/2016 Date of assessment 15/08/2016 Place of assessment Wood Green Police Station	15/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document Is this the same person? Originator Details: 09 Nov 2018 11:04 Maria Bruce Medical?? p) 12 = Folder 4 Hand Type of Summery of Notes! Page Numbers: 53,54,55	<u>53</u> Hand Type of Summery of Notes! Simon arrested on 15/08/2016 on suspicion of threats to kill neighbours & children! <u>54</u> Hand Type of Summery of Notes! <u>55</u> Hand Type of Summery of Notes! 0208-379-1000 The Enfield Emergency Duty Team (EDT)?	16/08/2016

• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> London Borough of Enfield Approved Mental Health Professional Assessment Form Medical recommendations from: Dr. Albazaz Dr. Amin AMHP Signature : MARGARET GARROD Page Numbers: 56	<u>56</u> Approved Mental Health Professional Assessment Form To be use when compulsory powers are being considered Date of initial referral 15/08/2016 Date of assessment 15/08/2016 Place of assessment Wood Green Police Station <u>Same as 52,53,54,55</u>	15/08/2016 16/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Hand Type of Summery of Notes! St Ann's Hospital Document Is this the same person? Originator Details: 09 Nov 2018 11:04 Maria Bruce Medical??? p) 12 = Folder 4 Page Numbers: 57,58,59	<u>57</u> Hand Type of Summery of Notes! Simon arrested on 15/08/2016 on suspicion of threats to kill neighbours & children! <u>58</u> Hand Type of Summery of Notes! <u>59</u> Hand Type of Summery of Notes! 0208-379-1000 The Enfield Emergency Duty Team (EDT)? <u>Same as 52,53,54,55</u>	16/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Section 135 informing patient of their rights. Name of Nurse: Caroline Acolaise Page Numbers: 60	<u>60</u> Section 135 informing patient of their rights. Name of Nurse: Caroline Acolaise	16/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document Record of detention in hospital. Page Numbers: 61,62	<u>61</u> Record of detention in hospital Time: 04:45 Hrs <u>62</u> Bank Page!	16/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document Application by an Approved Mental Health Professional for Admission for Assessment. Page Numbers: 63,64	<u>63</u> Application for a Mental Health Assessment! <u>64</u> Doctors index: 52 to 59 with double copy Or 52 to 55 without! Is this the same person? Originator Details: 09 Nov 2018 11:04 Maria Bruce Medical??? p) 12 = Folder 4	16/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Medical Recommendation for Admission for Assessment Dr. Atef Amin	<u>65</u> He lied about the date to cover up the time in police Custody Should be 16/08/2016	15/08/2016

Murphy Physiotherapy Clinic 18 Lowther Dr / Drive! EN2 7JN Page Numbers: 65,66	<u>66</u> Notes Hand writing!	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Medical Recommendation for Admission for Assessment Po Box: Dr Albazaz Page Numbers: 67,68	<u>67</u> He lied about the date to cover up the time in police Custody Should be 16/08/2016 <u>68</u> Notes Hand writing!	15/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> NIGHTINGALE SURGERY Realised "Private Medical Notes!" Page Numbers: 69,70,71	<u>69</u> "Private Medical Notes!" "Page 3 of 5" <u>70</u> "Private Medical Notes!" "Page 4 of 5" <u>71</u> "Private Medical Notes!" "Page 5 of 5"	16/08/2016 11:56 Printed 12:05pm 16-Aug-2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document Barnet, Enfield and Haringey Mental Health NHS Trust Consultant: DR. Julia Cranitch Page Numbers: 72,73,74,75,76	<u>72</u> Patient Observation Records: "Only for the 16/08/2016" <u>73</u> Patient Observation Records: "Only for the 16/08/2016" <u>74</u> Patient Observation Records: "Only for the 16/08/2016" <u>75</u> Patient Observation Records: "Only for the 16/08/2016" <u>76</u> Patient Observation Records: "Only for the 16/08/2016"	16/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document BARNET, EMFBELP & HARINGEY MH NHS TRUST DISCLAIMER OF Responsibility. Page Numbers: 77	<u>77</u> You are advised to restrict to a minimum the amount of property including cash brought into the hospital and to ++	16/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document ADMISSION CHECKLIST. Page Numbers: 78,79,80	<u>78</u> ADMISSION CHECKLIST <u>79</u> ADMISSION CHECKLIST <u>80</u>	16/08/2016

	ADMISSION CHECKLIST	
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document BARNET, Enfield & HARINGEY MH NHS TRUST <u>DISCLAIMER OF Responsibility</u> Page Numbers: 81	<u>81</u> Keeping Laptop	16/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document <u>NHS Questioner!</u> Barnet Enfield and Haringey Mental Health NHS Trust Please help us to make sure we are treating all types of people fairly by completing this questionnaire Page Numbers: 82,83	<u>82</u> NHS Questioner! <u>83</u> NHS <u>Questioner!</u>	17/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> St Ann's Hospital Document ECG Heart Check Page Numbers: 84	<u>84</u> ECG Heart Check	18/08/2016
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Official Letter Me & Mother to St Ann's Hospital. Page Numbers: 85,86	<u>85</u> I am writing this letter after speaking to Dr J Cranitch today 23/08/2016, I Believe that she is still under the impression that I have been charged at the police station on the 15/08/2016 for threats to kill and I have a court date of the 04/10/2016, My mother has contacted my solicitor to ask for them to write a letter to confirm that I have not been charged, which they will do and this will be ready by Friday. This is not the case as I told Dr Humphries on the 17/08/2016 I have not been interviewed by the police for this as of yet and have not been charged for anything by the police, the police were told when I was being held at the police station that I have CCTV which will prove this, as I did not leave my home on this day. In fact, when the police attended my home before I walked out of my flat the police realised that they were being recorded and ripped the wires out from my CCTV which there was no need to do if they did not have anything to hide. Also, when my mother and uncle came, they also recorded everything the police were doing. I did explain to Dr Humphries this and what went on in the police station thereafter when I was arrested. When at the police station I was not a risk to myself and never said anything that would have made the police think I was a risk to myself. I was left in my cell with all my clothing and shoes which included laces, if the police had any concerns of my welfare these would have been removed.	23/08/2016

	As anyone would be, I was upset at being arrested for something I did not do when the mental health team came to my cell, I had been in the police station around 20+ hours. And all I wanted was to have my interview and be released so when I saw the mental health team and they asked me if I would talk to them, I did not understand why they were there and said no due to just wanting my interview, my solicitor was there at this time. When talking to Dr J Cranitch she wanted me to agree to take my tablets which I agreed to do and work with them. When Dr J Cranitch asked me if I won my court tribunal would I be willing to stay in hospital voluntary. I was happy to say I was willing to work with the doctors. <u>86</u> Since 2014 when I had contact with the mental health team, I have never said I would hurt anyone or myself, I was only discharged from the early intervention team 3 months ago and if they had any concerns I would not have been discharged. Received by Goodie	
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Barnet, Enfield and Haringey Mental Health NHS Trust To: Dr CHONG NIGHTINGALE HOUSE SURGERY Chairman: Michael Fox Chief Executive: Maria Kane Page Numbers: 87,88	<u>87</u> I write to inform you that the above-named gentleman has been accepted onto the caseload of the Enfield Early Intervention in Psychosis Service (EIS), and I am his Care Coordinator. The EIS work with service users and their families for up to three years for those aged between 18-35 years of age, experiencing their first episode of psychosis, or those who are in the first three years of psychotic illness, living in Enfield. The EIS offers treatment including: • Administration of anti-psychotic medicines • Psychological interventions including Cognitive Behaviour Therapy for psychosis and emotional problems, such as depression and anxiety • Family interventions • Vocational recovery • Relapse prevention & management • A harm minimisation approach to substance misuse. • Care Coordination • Social recovery activities New service users are usually seen weekly to assist with engagement with the service and to help formulate care plans. The frequency of contact may extend over time depending on the service user's needs, the nature of their illness and other factors such as work and studies. We are required by the Care Quality Commission (CQC) to maintain a record of health care checks made by GP's of mentally ill patients on their register. Mentally ill people have increased morbidity and mortality compared with the general population. Many of them have unhealthy lifestyles resulting in	24/08/2016 24th August 2016

	poor physical health and increased mortality due to common life-threatening conditions and physical ill health. Risk factors, particularly Cardiovascular Disease, Chronic Obstructive Pulmonary Disease and diabetes should be identified and managed according to the relevant guidance through primary care settings. <u>88</u> We would be very grateful if you could provide us with details of health checks you have carried out for this patient within the last twelve months with regards to: • Cardiovascular Disease • Chronic Obstructive Pulmonary Disease • Diabetes • Height & Weight • Blood test results It would be very helpful if you could also provide details of any other significant physical health conditions the client has been diagnosed with, or is being investigated. We will update you routinely and following reviews and I look forward to working with you to support Mr Simon CORDELL with his mental health problems. Please feel welcome to contact me if you wish to discuss anything to do with Mr Simon CORDELL'S care. Yours Sincerely Goodie Adama Care Coordinator Enfield Early Intervention Service	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> SOCIAL CIRCUMSTANCE REPORT FOR MENTAL HEALTH ACT TRIBUNAL HEARING Goodie Adama Locum CMHN Early Intervention for Psychosis. Page Numbers: 89,90,91,92,93	<u>89</u> Current: Haringey Assessment Ward, St Ann's Hospital, Tottenham. N15 Status: Section 2 I am a Locum Community Mental Health Nurse and allocated care co-ordinator to Mr Simon Cordell. I work for the Enfield Mental Health NHS Trust in partnership with the London Borough of Enfield, the local Social Services Authority that has statutory responsibility for providing after care to Mr Cordell under Section 117 when he leaves hospital. In preparing this report I had access to previous reports, nursing and medical notes on electronic data base - RiO. I had the opportunity to speak with Mr Cordell as his care co-ordinator. And with his consent, I spoke with his mother Mrs Loraine Cordell by telephone. Mr Simon Cordell prefers to be called by his first name, Simon. ++++ <u>90</u> CIRCUMSTANCES LEADING TO ADMISSION Arrested at his home address after his mother raised concerns about his mental state - he was allegedly	25/08/2016

	verbally threatening towards his neighbour and (?) neighbour's children. Simon's mother called police who arrested him. He was seen by the FME at Wood Green police station, then referred for MHA. CURRENT MEDICATION Olanzapine 5mg PERSONAL & FAMILY HISTORY Mr Cordell was born at North Middlesex University Hospital. He has a younger brother and sister. Mr Cordell says he knows his maternal grandmother attempted suicide on a number of occasions and had admissions to mental hospital. Mr Cordell's father worked as a union representative and his mother ran her own computer company. Mr Cordell says he did not get on well with his father who was a violent man. He was violent towards Mr Cordell, Mr Cordell's mother and siblings. Mr Cordell left home at the age of fifteen and was homeless for a while. He was placed in to care after stealing a pint of milk. He was placed in a series of children's care homes around the UK, but says that each time he would steal a car and drive back to London. Mr Cordell said he was pushed hard to achieve at school by his father and that he was "an A-star student" for most of the time. He says he was intelligent and would do the work at other times and as a result would often just "mess about" in class. He went on to college and studied engine mechanics, completing a city & guilds qualification. After leaving school he went on to get jobs in the construction industry. Mr Cordell says he has tried to build himself up a business for providing party entertainment. At the moment he says he is not able to earn from this due to the restrictions of his bail. Mr Cordell has had one long term relationship which he describes as "my first true love". This is with a woman called Diana who is currently studying physiotherapy. They were together thirteen years but he says she has moved back out of his flat in recent months. Mr Cordell thinks this is 91 secondary to the repeated involvement of the police in their lives and the stress this has caused. Mr Cordell says he does not smoke tobacco and does not drink alcohol. Grandmother (? maternal) had BPAD and/or schizophrenia PSYCHIATRIC HISTORY in brief -Has previously been open to Enfield EIS, discharged in March 2016 due to non-engagement - Has been assessed under the MHA in 2014 and early 2016 but was not detained as there was not sufficient evidence of a mental disorder FORENSIC HISTORY Mr Cordell was put in a Young Offender's Institution at the age of 16 after repeated driving offences (driving without a license)	
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Mr Cordell says he has not been in trouble with the police for a number of years. He had stolen some trainers at a festival in 2009 and prior to that had not been in trouble since 2005.

He denied any violent offences.

Mr Cordell currently stands accused of burglary. He has a solicitor and the case will not be heard until July at the earliest.

MEDICAL HISTORY

Simon said he had Crohn's disease as a child. He denied any other physical health problems. **DRUGS AND ALCOHOL**

He said he only got drunk once a teenager and has since not taken alcohol or drugs. He denied current use

FINANCE

Simon receives £200 Income Support every fortnight **VIEWS OF THE NEAREST RELATIVE**
With Simon's consent I spoke with his mother Mrs Loraine Cordell. Mrs Cordell's views were that "I don't think he [Simon] needs to be on section; he is not a danger to himself or other people" Mrs

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Cordell said as far as she knows Simon is willing to work with the doctors and take his medication. Mrs Cordell would not say her views if Simon changes his mind and her response summed up as "we cross the bridge when we get there".

VIEWS OF THE PATIENT

Simon is willing to co-operative with mental health services. He said he is willing to take his medication.

He gave me a letter he wrote to indicate his commitment to treatment and willingness to engage. I attach it for your information.

POSITIVE ASPECTS OF PATIENT

Simon was able to access community resources independently and had the ability and capacity to make some choices. He is competent in his activities of daily living skills.

He plans to register a charity to raise funds to support causes dear to his heart. One of such causes is towards premature babies. He said his sister was born premature. The other is to help homeless people.

AFTERCARE

Simon lives on his own in a one-bedroom ground floor flat in Enfield. His mother is supportive and in constant contact with him.

Enfield Council will have section 117 responsibilities and will provide the appropriate housing and care in the community.

Simon will also have the support of an allocated care co-ordinator who will regularly monitor his mental state and concordance with medication. The team will offer Simon psychology assessment and or input; he will be seen and reviewed by psychiatrist regularly i.e. every 2-3 months or sooner if required. He will be offered interventions around concordance

	to medication, identifying triggers and relapse preventions. A referral to dual diagnosis worker will be offered. Simon will have access to groups such as social recovery and mental well-being and specialist services for vocational/occupation recovery. <u>93</u> RECOMMENDATION I met with Simon today on the ward and assessed him in preparation of the report. Simon recognised me immediately. He was warm, welcoming, polite and co-operative throughout the meeting. He stated about half a dozen times that he is willing to work with the services and also willing to accept medication. It would be helpful if Simon will agree to stay in hospital to continue treatment as he appeared to have made good progress since admission. As part of the medical and nursing team I believe that Simon will benefit from staying in hospital for further assessment and continue treatment. Goodie Adama Locum CMHN Early Intervention for Psychosis	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Official Letter Me & Mother to St Ann's Hospital Same as Page: 85,86 Page Numbers: 94,95	<u>94</u> Official Letter Me & Mother to St Ann's Hospital <u>95</u> Official Letter Me & Mother to St Ann's Hospital	23/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> SOCIAL CIRCUMSTANCE REPORT FOR MENTAL HEALTH ACT TRIBUNAL HEARING Goodie Adama Locum CMHN Early Intervention for Psychosis Same as: 89,90,91,92, 93 Page Numbers: 96,97,98,99,100 Double Page Numbers: 89,90,91,92,93?	<u>96</u> <u>97</u> <u>98</u> <u>99</u> <u>100</u>	25/08/2016
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> The First-tier Tribunal (Health, Education and Social Care Chamber) Mental Health Date of Application: 18-8-16 Responsible Authority: Barnet, Enfield & Haringey MH NHS Trust Hospital: St Ann's Hospital Before: Susan Rees (Judge) Dr E Kamel (Medical Member) Mr C Lee (Specialist Lay Member) Sitting at St Ann's Hospital on 26-8-16 Page Numbers: 101,102,103,104	<u>101</u> The First-tier Tribunal (Health, Education and Social Care Chamber) Mental Health Decision The patient shall be discharged immediately from liability to be detained. Recommendation pursuant to section 72(3)(a) The tribunal does not make a recommendation. Representation Patient: Ms Parmar of Duncan Lewis & Co Sols Responsible Authority: Not Represented. Attendance by Patient The Patient attended the hearing Announcement of Decision The decision was announced at the end of the hearing.	Sitting at St Ann's Hospital on 26/08/2016

	The patient was present for the announcement. The patient's representative was present for the announcement. Pre-Hearing Medical Examination of the Patient 102 A pre-hearing examination of the patient was indicated under the Rules. The interview with the patient took place on the day The Tribunal considered: Oral evidence from Dr Mills, ST4, Mr Ahmed, SN, Mr Adama, C-C, Mr Cordell, Mrs Cordell, mother Written evidence from Dr Mills, ST4, 24-8-16, A Burahee, SN, 24-8-16, Goodie Adama, Locum CMHN, 25-8-16 which included a letter from Mr Cordell. Other material, namely Responsible Authority Statement of Information, Jurisdiction. Preliminary and Procedural Matters 1. The tribunal is satisfied that it has jurisdiction to consider this application. Grounds for the Decision 1. The tribunal is not satisfied that the patient is suffering from mental disorder or from mental disorder of a nature or degree which warrants the patient's detention in a hospital for assessment (or for assessment followed by medical treatment) for at least a limited period. 2. The tribunal is not satisfied that the patient's detention as aforesaid is justified in the interests of the patient's own health or safety, or with a view to the protection of other persons. 3. The tribunal does not consider that it is appropriate to discharge the patient under its discretionary powers. Reasons 1. Mr Cordell is 35 years old. He lives alone in a one bedroom flat. His mother is supportive and attended the hearing. Mr Cordell had a troubled adolescence with periods spent in care and was homeless for a while. Mr Cordell is not currently in paid employment but he has ambitious plans to set up a company and a charitable organisation. He has a conviction for setting up illegal raves and is currently subject to an ASBO. 2. He has been known to psychiatric services since 2014 and has undergone a number of assessments of his mental health but these have found that he was not detainable. He was discharged by services after non-engagement in February 2016. He has expressed persecutory beliefs about a neighbour, the police and, at times, his mother. In the context of these beliefs he has put CCTV cameras outside his flat and it appears that a neighbour was rehoused after a disagreement with him but the exact circumstances were not clear. He has misused substances in the past. 3. The factual details of the circumstances of the admission were not clear from the reports and the clinical team were not able to tell us whether or	
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not he is on bail. It was Mr Cordell who furnished us with a notice from the police that he is on bail for an offence of threats to kill. He is not due to be interviewed until October. It is unclear who the alleged victim of the complaint is. He is adamant that he is not guilty of this charge. Further, the report from the care co-ordinator stated it was his mother who called the police but this was adamantly denied by Mrs Cordell. The care co-ordinator corrected his report to clarify that Mr Cordell is not awaiting trial for burglary.

4. Mr Cordell thinks he was arrested and taken to the police station because of concerns expressed about the loud music he was playing. He was seen in custody and admitted to hospital

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5. He has been in hospital since 16-8-16.

6. He was assessed in the absence of medication and was prescribed medication on 19-8-16 but refused it until 23-8-16. He has been compliant since that time. He wanted to research the side effects of the medication. Mr Cordell is concerned that procedures are followed correctly.

Issues and submissions

7. He requested immediate discharge from section. He would stay voluntarily and he is happy to continue with treatment and to see the team in the community. He does not accept a diagnosis of mental disorder but has stated that he will take treatment on the advice of the team. His mother thought that he has reacted to stress in the past and that he has been working very hard on his project.

8. The clinical team were not unanimous in their view. Dr Mills suggested that there had been a possibility that Dr Cranitch, RC, had considered discharging him prior to the tribunal but on balance had decided not to. Dr Mills, having spoken to the RC, was of the view that detention was warranted given the degree of the disorder which is in their view a first episode psychosis. Mr Ahmed, a staff nurse on the ward, was of the view that it was the nature of the disorder that warranted detention. The care co-ordinator, Mr Adama, was of the view that the section should be discharged as Mr Cordell had been adamant that he would engage with services. Dr Mills and Mr Ahmed were concerned about his insight and the risk of non-compliance and deterioration.

Tribunal's conclusions with reasons

9. The tribunal is satisfied that Mr Cordell is suffering from a mental disorder. This is consistent with the signs and symptoms he has displayed which include a preoccupation with a business plan which is so ambitious and far reaching that it can be described as grandiose thinking. He has been working unceasingly on these plans and is in all likelihood suffering from a stress reaction. He has very limited insight. Over a period of two years Mr Cordell has expressed beliefs about police and

	neighbours which may have some factual basis but in all likelihood are overvalued. 10. The tribunal is not satisfied that the nature of the disorder warrants detention. Mr Cordell has never accepted treatment. We were unable to find that the signs or symptoms have responded to treatment or that they had deteriorated in the absence of treatment. Any problems that he has had with neighbours and his beliefs about persecution at the hands of the police appear to be longstanding. Despite these beliefs he has lived in the same place for 11 years. He has convictions but these do not relate to violence and are in connection with driving offences as a youth and with organising an illegal rave. He has been assessed before and not been found to be detainable. 11. The tribunal is not satisfied that the degree of the disorder warrants detention. He was thought disordered on admission but these symptoms have settled. He poses no management problems. He is compliant with treatment and he gets on well with staff and patients. He was angry with his mother but she is visiting and supports his discharge. He may not accept that he has a mental disorder but states that he is willing to engage with the assessment. He has stated that if the procedures are carried out properly, he will abide by them. We accepted his evidence. 12. The tribunal's decision on the first limb of the act meant that we were not bound to consider the risks other than as to how they related to the current degree of the disorder. We are satisfied that it is at least likely that he will continue to comply with treatment either as a voluntary patient or in the community. In any event he has never accepted treatment in the past and until recently has found not to be detainable. It was not clear that there had been a deterioration. He is on bail but the police are not due to interview him until October 2016. We had his forensic history. We were not informed that he has any history of physical violence. <u>104</u> 13. We did not use our discretionary grounds for discharge. Judge Susan Rees Date 26-8-16 Notice A person seeking permission to appeal must make a written application to the tribunal for permission to appeal. An application for permission must: - Identify the decision of the tribunal to which it relates; - Identify the alleged error or errors of law in the decision; and - states the result the party making the application is seeking. An application for permission must be sent or delivered to the tribunal so that it is received no later	
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	than 28 days after the latest of the dates that the tribunal sends to the person making the application: - written reasons for the decision; - notification of amended reasons for, or correction of, the decision following a review; or - notification that an application for the decision to be set aside has been unsuccessful. (Note: This date only applies if the application for the decision to be set aside was made within the initial 28-day time limit, or any extension of that time previously granted by the tribunal.) If the person seeking permission to appeal sends or delivers the application to the tribunal later than the time required then: - the application must include a request that the tribunal extends the time limit under Rule 5(3)(a), and give the reason(s) why the application was not provided in time; and - unless the tribunal extends time for the application to be made, a late application cannot be admitted.	
<u>Stage 2</u> <u>Folder: 0</u>		
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Barnet, Enfield and Haringey Mental Health NHS Trust IN PATIENT PRESCRIPTION CHART Dr. Julia Cranitch Page Numbers: 1,2,3,4	<u>01</u> "Prescriber Doc" <u>02</u> Regula Drugs <u>03</u> As Required Drugs <u>04</u> DRUGS TO TAKE HOME (including weekend leave) Maximum supply - 28 days unless specially requested	16/08/2016
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> <u>Laboratories Tests</u> North Middlesex University Hospital NHS Trust Health Services Laboratories (HSL) North Middlesex Hospital, Sterling Way, London N18 1QX Enquiries: 020 8887 2000 Page Numbers: 5,6,7	<u>05</u> <u>Laboratories Tests</u> Sample dated: 18/08/16 Request received: 18/08/16 <u>06</u> <u>Laboratories Tests</u> Sample dated: 18/08/16 Request received: 18/08/16 <u>07</u> <u>Laboratories Tests</u> Sample dated: 18/08/16 Request received: 18/08/16	18/08/2016
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u>	<u>08</u> Dear Mr Simon P CORDELL,	21/09/2016 21 Sep 2016

<u>Folder: 0</u> <u>Appointment</u> The Lucas House Enfield EIS 305-309 Fore Street Edmonton London N9 OPD Tel: 0208 702 3100 Fax: 0208 345 6950 Page Numbers: 8	If you are unable to keep this appointment please telephone earliest opportunity to rearrange. This will allow us to give your appointment to someone else and help us to keep the waiting the clinic between 9am and 5pm on 020 8702 3100 at your time to a minimum. Please bring this letter with you to your appointment. Yours sincerely Nicola Wheeler	
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> <u>Appointment</u> The Lucas House Enfield EIS 305-309 Fore Street Edmonton London N9 OPD Tel: 0208 702 3100 Fax: 0208 345 6950 Page Numbers: 9	<u>09</u> Dear Mr Simon P CORDELL, I am pleased to inform you that an appointment has been made for you to be seen on 11th October 2016 at 4.00pm at: Enfield Early Intervention Psychosis - Dr Kripalani and Dr Garraway 305-309 Fore Street Edmonton N9 OPD If you are unable to keep this appointment please telephone the clinic between 9am and 5pm on 020 8702 3100 at your earliest opportunity to rearrange. This will allow us to give your appointment to someone else and help us to keep the waiting time to a minimum. Please bring this letter with you to your appointment. Yours sincerely Nasima Mamun Team Administrator	26/09/2016 Date: 26 Sep 2016
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> 24 Hour Discharge Notification "No Dr. lol" To: Chong Y NIGHTINGALE HOUSE SURGERY 1 NIGHTINGALE ROAD EDMONTON LONDON Care Coordinator: Goodie Adama The Crisis Resolution and Home Treatment Teams (CRHTT): Page Numbers: 10,11,12	<u>10</u> 10 - First Episode Psychosis (12 months) <u>Future Management, (including actions for GP)</u> EIP to monitor mood/mental state. EIP to encourage medication compliance. Re-referral back to ECRHTT in future if required. Drug Name: Olanzapine <u>Duration (weeks)</u> 2/52 (CLIENT REFUSED TTAs 22/09/16) Please follow prescribing guidance on monitoring patients taking antipsychotics including weight, LFTs, prolactin etc. <u>11</u> Referral received from HCRHT to followed up by ECRHT 27/08/16. Assessment carried out by HCRHT. Simon presented as courteous and polite on approach. Explained to HCRHTT staff that he had been detained illegally and was placed in hospital without reason. Denied making threats to neighbours, denied any mental health problems. Explained that he had been put on medication and has remained concordant whilst on the ward despite not wanting to have medication, as he feels "I do not suffer with any mental health problems" Circumstances leading to admission to Haringey Ward: Arrested at his home address after his mother raised concerns about his mental state - he was allegedly verbally threatening towards his neighbour	27/09/2016 27 Sep 2016

	and possibly neighbour's children. Simon's mother called police who arrested him. He was seen by the Referral FME at Wood Green police station, referred for MHA. Summary History of Paranoid thoughts regarding neighbour watching/listening to him. First HV by ECRHTT 28/08/16. Simon was adamant that the Tribunal (26/09/16) had discharged him from Section and is not willing to take medication anymore. Appeared slightly elated in mood, pressured speech. M/R by Dr Akande 07/09/16. Patient complained that the olanzapine was making him feel very tired. He appeared mentally stable in spite of his talkativeness which the Dr stated he later understood to be his normal self. Simon stated that professionals have misunderstood it as a symptom of a mental illness. ECRHTT TPM 16/09/16. Patient no-longer considered to be in acute crisis. Specific Risk / Safeguarding concerns and specific management plans History of non-compliance with medication. Risk to self: low Risk to others: low Risk from others: low Disengagement: highly likely to disengage Substance misuse: denied using drugs, cigarettes or alcohol FORENSIC Hx: frequent contact with police from a young age. Simon reported that he has been to prison in the past. Subject to an ASBO due to playing loud music. Early Relapse Indicators / Management Plan Aggression towards neighbour/neighbour's children. Increased paranoia regarding neighbour. EIP to monitor mood/mental state. CONTACT TELEPHONE NUMBERS: <u>12</u> COMPANY Details "Hospital Care"	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> - Barnet, Enfield and Haringey Mental Health NHS Trust - IN PATIENT PRESCRIPTION CHART - Consultant: Julia Cranitch Page Numbers: 13,14,15,16,17,18	<u>13</u> IN PATIENT PRESCRIPTION CHART <u>14</u> Regular Drugs <u>15</u> Regular Drugs <u>16</u> As Required Drugs <u>17</u> Drugs to take Home <u>18</u> As Required Drugs	16/08/2016

• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> <u>Notes St Ann's</u> Barnet, Enfield and Haringey Mental Health NHS Trust Reginald Massaquoi Criminal Justice Liaison Team Reginald.massaquoi@nhs.net 02087023567 Page Numbers: 19,20,21	<u>19</u> Mr Cordell is currently arrested at Edmonton police station this afternoon. According to police reports an allegation was made by Mr Cordell neighbour that Mr Cordell went outside, dragged a moped bicycle behind a van and smashed it. Therefore, he was arrested and he was also due to attend to a bail return today this afternoon. Mr Cordell is currently under the care of Enfield early intervention team based at Lucas house and he has a care coordinator called Goodie. Mr Cordell currently has diagnoses of unspecified non-organic psychosis. He was admitted to St Ann's hospital under section 2 of the MHA in August. He was discharged from hospital 2 weeks ago. He has been prescribed anti psychosis medication but has refused to comply with his medication. Mr Cordell believes that he does not suffer from mental illness. On presentation in custody. He was appropriate dressed with good personal hygiene. He engaged with me for over 30 minutes. He expressed some strange ideas about his neighbours are jealous of him been in a newspaper about him organising illegal parties. He also spoke lengthy about a website he built and people are using the website to advertise Their business and to raise funds for charities. He has express conspiracy theories about the police and authorities. His care coordinator told me that Mr Cordell has always expresses conspiracy theories. Mr Cordell denied any thoughts or intentions to harm himself and others. He also denies any knowledge about the incident he is arrested for. He denied hearing voices or seeing strange things. Mr Cordell appears stable in his mental state and does not require any further assessment or admission at this stage. <u>20</u> He was interviewed by the police and was charged to Highbury court in the morning. Plans: To liaise with mental health practitioner at Highbury court to follow up the outcome of his case. To contact care coordinator Goodie on 02087023100/ 02087023140 to follow up Mr Cordell in the community if he is released. <u>21</u> "Blank Page"	04/10/2016
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> To: Me	<u>22</u> I hope you are well. I am sorry we have not seen or spoken to each other in some time. From talking to your mother, I understand that you haven't wanted to speak to or meet with me recently.	02/12/2016 2 Dec. 2016

Enfield Early Intervention in Psychosis Service Barnet, Enfield and Haringey Mental Health Trust Lucas House 305-309 Fore Street Edmonton London N9 OPD Chairman: Michael Fox Chief Executive: Maria Kane Page Numbers: 22	As your allocated care co-ordinator, I am happy to help and support you if you would like me to but to do so I will need to see you. If you'd like to discuss this or arrange to meet please call me on the above number. Similarly, if you'd like to request discharge from the service, please let me know. If you'd like to talk please contact me within two weeks: by the end of the working day on 16th December 2016. If I have not heard from you by this time, I assume you do not wish to continue having contact with the Enfield Early Intervention Service and your care will therefore be transferred to your GP and your case will be closed to Enfield mental health services. I look forward to hearing from you Yours sincerely Goodie Adama Care Co-ordinator	
• <u>The Doctor's Folder / pub Book Issue:</u> <u>2!</u> <u>Stage 2</u> <u>Folder: 0</u> <u>"Referral Receipt"</u> Page Numbers: 23	<u>23</u> FW: 17PAC315194 - 11214451 [SEC = OFFICIAL] Kevin Kamese <Kevin.Kamese@enfield.gov.uk> on behalf of The Mash Team TheMashTeam@Enfield.gov.uk Tue 12/12/2017 14:42 To: ENFIELD, Assessment service (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) <assessmentservice.enfield@nhs.net>; Muriel Williams <muriel.williams@beh-mht.nhs.uk>; 0) 2 attachments Form87F_6991812.pdf; J2_form78_6991812.pdf; Classification: OFFICIAL Dear Team, Please see the attached for your attention. Regards, Kevin Kamese MASH OSD for Health, Housing B Adult Social Care Operational Support HUB T 020 8379 395B —Original Message— From: merlin@met.pnn.police.uk [mailto:merlin@met.pnn.police.uk] Sent: 12 December 2017 06:59 To: The Mash Team <TheMashTeam@Enfield.gov.uk> Subject: Ref: 17PAC315194 This email, created by merlin@met.pnn.police.uk, has been securely delivered using Egress Switch and was decrypted on Tuesday, December 12,2017 6:59:31 AM This is a system generated email so you cannot respond to this email address. If you wish to query any details, then please contact the unit concerned via their normal email address or telephone number. Please find attached a MERLIN file for your attention from: Enfield PPD Consider our environment - please do not print this email unless absolutely necessary.	12/12/2017

	Blank Page	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Met Police RISK ASSESSMENT (CASCADEINFO) MERLIN Ref: Page Numbers: 25,26,27,28,29,30 <u>"X 9 Different Incidents on Met Com Noted 12/12/2017"</u>	<u>25</u> <u>MINOR CRIME:</u> After initial investigation referred to Social Services for consideration. No further action by police unless further info becomes available Report to be sent to ENFIELD MASH Adults the Care Act 2014 states there is a duty to undertake the safeguarding of adults where a local authority has reasonable cause to suspect that an adult in its area has need of care and support, or is experiencing, or is at risk of, abuse or neglect, and is unable to protect himself or herself against the abuse or neglect or the risk of it. The need to safeguard and promote the welfare; along with protecting a vulnerable subject is paramount and I believe in keeping with the directions in the Care Act 2014, the health, safety and wellbeing of the subject outweighs the public interest risk of not sharing this information <u>26</u> Originator: Police Factors / Triggers: Yes: Possible mental health concerns <u>27</u> Based on Information available to Police at this time I confirm I have risk assessed this as shown above. JONES, PC (Name, Rank) DATE: 12/12/2017 TIME: 06:58 Sent: <u>28</u> Notification of Pre-Assessment Checklist Signature Rank Name (Print) BROOKS OCU/Unit YE-OPS Name (Print) OCU/Unit Warrant No. P232479 Date 08/12/2017 <u>29</u> Circumstances (including immediate action taken by and any views expressed Concerns: Psychological / Emotional Police were called to the location by the subject who stated that he was feeling suicidal due to ongoing issues with his upstairs neighbours and wanted to hang himself. Upon police arrival the subject was very agitated and angry he stated that his neighbour's upstairs were banging on the floor to and the building structure was collapsing, the subject did not make much sense but stated that he had lots of evidence against his neighbours and against police and wanted the neighbours arresting for the noise nuisance.	12/12/2017

	The subject was given advice and informed that the local safer neighbourhood team would be advised and they would deal with his issues. Whilst speaking to the subject he did not mention wanting to harm himself but was acting strangely and erratically, as police left the subject was left with another female, the subject also declined LAS help. Report to be sent to ENFIELD MASH Risk Assessment - AMBER This report has been assessed as AMBER, the child or young person at risk of harm, but not imminent and possibly less serious. ACN - ADULT REPORT Search Conducted - Deborah Batchelor YE PPD – <u>11/12/2017</u> Subject: Simon CORDELL, [REDACTED] Address: 109 Burncroft Avenue, Enfield EN37JQ CURRENT REPORT: - <u>11/12/2017</u> - 17PAC315194 - Police were called to the location by the subject who stated that he was feeling suicidal due to ongoing issues with his upstairs neighbours and wanted to hang himself. Upon police arrival the subject was very agitated and angry he stated that his neighbour's upstairs were banging on the floor and the building structure was collapsing. Subject did not mention to police that he wanted to harm himself, he was left with a female at the address. R/A AMBER 08/03/2017 - CRIS 5210999/17 - Subject's female neighbour at number 115, reports that Subject has knocking at her door, following her to her car and asks her why she has been making noises. Neighbour thinks Subject has mental health problems. 1st instance harassment warning has been issued to Subject. <u>08/12/2016</u> - CRIS 5227336/16 - Report that Subject is harassing neighbour at number 117. <u>04/10/2016</u> - CRIS 5221993/16 - Subject was charged with Public order and criminal damage to motor bike. <u>04/08/2016</u> - CRIS 5217954/16 - Subject arrested for threats to kill, whilst in custody Subject was Sectioned under the MH Act. <u>06/08/2016</u> - CRIS 5217352/16 - Subject came to police attention - First Instance harassment recorded. <u>22/08/2015</u>	
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	- CRIS 5218520/15 - Subject reports that he was threatened with a firearm, he was unable to provide any description of persons or vehicle. <u>25/06/2013</u> - CRIS 3018184/13 - Subject with others was Charged with attempted robbery. <u>30</u> Blank	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> To: Me Enfield Assessment Service 25 Crown Lane Southgate London N14 5SH Tel: 0208 702 3329 Page Numbers: 31	<u>31</u> You have been referred to our Assessment Service for a New Patient Assessment. Unfortunately, I have been unable to contact you to offer you an appointment. I am now writing to you to advise you that an appointment has been scheduled for you and the details are as follows: Appointment: 1 Clinic: Silver Street Clinic Date/Time: 2 Jan 2018 09:30:00 Intended Duration: 60 mins Clinician: Dr Jane Cushion Address 58-60 Silver Street, Enfield, Middlesex, EN1 3EP YOU NEED TO PHONE AND CONFIRM THIS APPOINTMENT WITHIN FIVE DAYS OF DATE ON TOP OF THIS LETTER; OTHERWISE THIS APPOINTMENT WILL BE CANCELLED. PLEASE SEE NOTE BELOW) Please complete the enclosed questionnaire form, this is titled INFORMATION FORM (Consent Form) and ETHNICITY FORM and bring it with you to your appointment, TOGETHER WITH THIS APPT LETTER. You may want a member of your family or a close friend to accompany you when you attend for Assessment. The appointment will last approximately up to 1 hour. Failure to confirm your attendance will result in the above appointment being cancelled and you may be discharged back to your referrer. Yours sincerely Beverley Campbell CC: GP	15/12/2017 15 Dec 2017
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> To: Dr. Y CHONG NIGHTINGALE HOUSE SURGERY Service Line: Crisis & Emergency Service: Enfield Assessment Service Tel: 020 8702 3329 Fax: 020 8702 3325 e-mail: assessmentservice.enfield@nhs.net Page Numbers: 32	<u>32</u> Dear Dr Chong Change of assessment / care plan / medication for: Mr Simon P CORDELL - D.O.B.: 26 Jan 1981 - NHS: 434 096 1671 Address: 109 Burncroft Avenue, Enfield, Middlesex EN3 7JQ 24 h note to GP only Mr Cordell was offered an appointment for joint assessment today at 9:30 with Enfield Early Intervention Service (EIS) and the Enfield Assessment Service (EAS). He did not come and we have been unable to contact him by phone.	02/01/2018 2nd January 2018

	Given his past history of involvement and care coordination with EIS, he is being referred to that service for further follow up. We will be closing his case to the Enfield Assessment Service. If Mr Cordell presents in crisis at any time please contact the Crisis team on 0208 702 3800. Thank you for ensuring this information is updated in your records. Yours sincerely Dr Jane Cushion - Consultant Psychiatrist - Enfield Assessment Service.	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Injunction Order N11 OA Power of arrest THE COUNTY COURT AT EDMONTON Claim No. E00ED049 Claimant's name (including ref.) THE LONDON BOROUGH OF ENFIELD Page Numbers: 33	<u>33</u> This order includes a power of arrest under (insert statutory provision) The Anti-Social Behaviour, Crime and Policing Act 2014 Expires: 09/01/2019	09/01/2018?
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Injunction Order Between Mr Simon Cordell, Defendant and The London Borough of Enfield, Claimant THE COUNTY COURT AT EDMONTON Claim No. E00ED049 Claimant's name (including ref.) THE LONDON BOROUGH OF ENFIELD Page Numbers: 34,35	<u>34</u> If you. Mr Simon Cordell, do not obey this order you will be guilty of contempt of court and you may be sent to prison If you. Mr Simon Cordell, disobey the order you will be guilty of contempt of court and you may be sent to prison or fined or have your asset seized. You should read this order carefully and are advised to consult a solicitor as soon as possible. You have the right to ask the court to vary or discharge this order. On 9th January 2018 at The County Court at Edmonton, Employment Judge Taylor, upon hearing the solicitor for the claimant and without notice to the defendant, considered an application for an injunction. AND IT WAS ORDERED THAT The defendant, Mr Simon Cordell, must; 1. Permit the claimant's employees and contractors access into 109 Bumcroft Avenue, Enfield, EN3 7JQ to carry out routine maintenance inspections and necessary repairs within 48 hours of written notification. 2. Keep his dog on a lead in communal areas outside his property. <u>35</u> AND IT IS FURTHER ORDERED THAT The defendant, Mr Simon Cordell, be forbidden (whether by himself or by instructing or encouraging or permitting any other person);	09/01/2018?

	3. From engaging or threatening to engage in conduct that is likely to cause physical violence and verbal abuse to the claimant's employees, tenants and visitors to the block of flats at Bumcroft Avenue, Enfield. 4. From engaging or threatening to engage in conduct that is likely to cause intimidation, harassment, alarm and distress to the claimant's employees, tenants and visitors to the block of flats at Bumcroft Avenue, Enfield. 5. From engaging or threatening to engage in conduct that is likely to cause nuisance and annoyance to the claimant's employees, tenants and visitors to the block of flats at Bumcroft Avenue, Enfield. 6. From using his pet dog to frighten, intimidate or threaten violence to the claimant's employees, tenants and visitors of the block of flats at Bumcroft Avenue, Enfield. 7. A power of arrest is attached to paragraphs 3 to 6 above. 8. Costs in the case. This order shall remain in force until 8th January 2019 at 11:59 PM unless before then it is revoked by further order of the court NOTICE OF FURTHER HEARING. The court will reconsider the application and whether the order should continue at a further hearing at the County Court at Edmonton, 59 Fore Street, London, N18 2TN on 5th February 2018 at 2:00 PM If you do not attend at the time shown the court may make an injunction order in your absence. You are entitled to apply to the court to reconsider the order before the day.	
<u>The Doctor's Folder / pub Book Issue:</u> <u>2!</u> <u>Stage 2</u> <u>Folder: 0</u> Injunction Order Page Numbers: 36,37	<u>36</u> Same as above, Page 34 <u>37</u> Same as above, Page 35	09/01/2018?
<u>The Doctor's Folder / pub Book Issue:</u> <u>2!</u> <u>Stage 2</u> <u>Folder: 0</u> Injunction Order Page Numbers: 38,39	<u>38</u> Same as above, Page 34 + 36 <u>39</u> Same as above, Page 35 + 37	09/01/2018?
<u>The Doctor's Folder / pub Book Issue:</u> <u>2!</u> <u>Stage 2</u> <u>Folder: 0</u> Reginald Massaquoi Criminal Justice Liaison Team Reginald.massaquoi@nhs.net 02087023567	<u>40</u> Reason for arrest Mr Cordell has alleged to have contact a council worker and left a message on their phone stating he knows where the council worker lives, will kill him and his family and set fire to his house and was arrested for suspicious threats to kill. Background	09/01/2018

Mr Cordell under the care of Enfield early intervention team based at Lucas house and he use has a care coordinator called Goodie. Mr Cordell currently has diagnoses of unspecified non-organic psychosis. He was admitted to St Ann's hospital under section 2 of the MHA in **August 2016**. He was discharged from hospital after 2 weeks of admission through the mental health tribunal. He has been prescribed anti psychosis medication but has refused to comply with his medication. Mr Cordell believes that he does not suffer from mental illness; he was discharge from services due to non-engagement. He is currently under Sliver street CMHT and he not been attending his last appointment.

Assessment in custody

I saw Mr Cordell in his cell this afternoon after he was referred to us. I last saw Mr Cordell at Edmonton police station 2016 two week after he was discharged from inpatient admission. At that time when I saw him, he was expressing some strange ideas about his neighbours are jealous of him been in a newspaper about him organising illegal parties. He also spoke lengthy about a website he built and people are using the website to advertise their business and to raise funds for charities. He has express conspiracy theories

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about the police and authorities. His care coordinator at the time Goodie told me that Mr Cordell has always expresses conspiracy theories about the system including the police and the council.

Mr Cordell was pleasant on approach and he remembers seeing me previously which help to establish a rapport.

Appearance & behaviour:

Mr Cordell was appropriately dressed and his personal hygiene appears relatively good Speech: His speech appears slightly pressured and rapid, he was coherent and spontaneous, he was easily interrupted whilst talking. He has lots of ideas of some of his activities that he is involving like organising parties, setting up charities and helping people in the community.

Mood:

He rated his mood fluctuating, subjectively hyperactive from school. He denied feeling low or depressed.

Thought:

Mr Cordell has presented with paranoid and suspicious view about the police and the council working together to suppress him with an ASBO, preventing him to undertake his activities like parties on the park and other activities.

Perception:

Mr Cordell denied hearing voices or having delusional perceptions. However, he has some paranoid and conspiracy ideas about the police and

	council but these are not psychotically driven. Mr Cordell seems to have a paranoid personality which can led to overvalued ideas. Insight: intact To self: denied any thoughts or intentions of self To others: Poses risk to authorities like the council staff due to the nature of his arrest, however, he does not pose any immediate to a member's off the public. 42 Impression Mr Cordell is a 36 years mixed race male with previous contact with mental health service but his engagement with service has been poor. He has a brief admission in 2016 but was discharged on tribunal two weeks after admission and has not been engaging since then. Mr Cordell has always presented with strange ideas and conspiracy theories about authorities. At the moment in time, Mr Cordell has not presented with any acute symptoms of psychosis that will warrant further assessment in custody under the MHA. Mr Cordell has been interviewed by the police and he was for his outcome of the interview. Officer has issued his section 18 to searched his house as he admitted I the interview to have recorded his victims whilst he has been talking to them. Reginald Massaquoi Criminal Justice Liaison Team Reginald.massaquoi@nhs.net 02087023567	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Enfield Health, Supporting Physical and Mental Health in Enfield To: Me Enfield Directorate Barnet, Enfield and Haringey Mental Health Trust Enfield Early Intervention Team the Lucas House 305-309 Fore Street Edmonton London N9 0PD Tel: 020 8702 3100 Fax: 020 8345 6950 Page Numbers: 43	43 I hope you are well and I also hope you remember me, Goodie. Early Intervention Service received a referral requesting we make contact with you and that you may need some support with your mental health in the community. I have arranged appointment to see you as follows: Venue: Lucas House, 305-309 Fore Street, Edmonton, N9 0PD Date: Wednesday 17 January 2018 Time: 2pm If this is not convenient for you, please telephone me on 0208 702 3140 in order that the appointment may be rearranged. Yours sincerely, Goodie Adama Care Co-ordinator Enfield Early Intervention Service	11/01/2018 11 January 2018
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> "Referral Receipt" Page Numbers: 44,45	44 Enfield Triage Team 13 APR 2010 Kevin Kamese <Kevin.Kamese@enfield.gov.uk> on behalf of The Mash Team <TheMashTeam@Enfield.gov.uk> Fri 13/04/2018 15:47	13/04/2018

	To: ENFIELD, Assessment service (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) <assessmentsservice.enfield@nhs.net>; @1 2 attachments Form87F_7198036.pdf; J2_form78_7198036.pdf; Classification: OFFICIAL Dear Team, Please see the attached for your attention. Regards, Kevin Kamese MASH DSD Far Health, Housing B Adult Social Care Operational Support HUB T 020 8379 3959 —Original Message— From: merlin@met.pnn.police.uk [mailto:merlin@met.pnn.police.uk] Sent: 13 April 2018 12:08 To: The Mash Team <TheMashTeam@Enfield.gov.uk> Subject: Ref: 18PAC087493 This email, created by merlin@met.pnn.police.uk, has been securely delivered using Egress Switch and was decrypted on Friday, April 13,2018 12:07:56 PM This is a system generated email so you cannot respond to this email address. If you wish to query any details, then please contact the unit concerned via their normal email address or telephone number. Please find attached a MERLIN file for your attention from: Enfield PPD Consider our environment - please do not print this email unless absolutely necessary. 45 Blank Page!	
<u>The Doctor's Folder / pub Book Issue:</u> <u>2!</u> <u>Stage 2</u> <u>Folder: 0</u> Met Police RISK ASSESSMENT (CASCADEINFO) MERLIN Ref: 18PAC087493 Page Numbers: 46,47,48,49,50,	46 RISK ASSESSMENT 47 Originator: Police Adult at Risks / Vulnerability Identified: Yes: Mental Health concerns 48 Research Based on Information available to Police at this time I confirm I have risk assessed this as shown above. THOMASON, Sgt (Name, Rank) DATE: 13/04/2018 TIME: 12:05 49 Notification of Pre-Assessment Checklist] Signature Rank Name (Print) PALMER OCU/Unit YE-OPS Name (Print) OCU/Unit Warrant No: P234711 Date: 12/04/2018	13/04/2018 + 12/04/2018

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Circumstances (including immediate action taken by and any views expressed)

Incident Location: 109 BURNCROFT AVENUE

Date From:

12/04/2018

Time From: 09:30

Date To:

12/04/2018

Time To: 09:38

Concerns: Psychological / Emotional

The neighbours are on the top floor are doing work. They are hammering and causing noise. This caused a dispute between the subject and the builders. have attended the subject's address to try and mediate between them to prevent further disputes. The subject went into a 15-minute rant about how he was under constant attack by everyone, and how he perceived the banging by the builder to be an assault against him.

The neighbour tried to come down and talk about when the work would finish but the subject started to shout at him. The subject stated that he has cameras set up all over his house and that he wanted the neighbour to come in and watch the footage of the aggressive hammering, when the neighbour declined, the subject started to shout about being mugged off.

The subject would benefit from a visit from social services. He appeared to be having issues with his mental health. There was nothing to suggest that he was in immediate danger, and he was within his dwelling.

Adult Research Conducted - Deborah Batchelor
Enfield PPD –

13/04/2018

Subject: - Simon CORDELL, [REDACTED]
Address 109 Burncroft Avenue, Enfield EN3 7JQ

CURRENT REPORT –

12/04/2018

- 18PAC087493 - Police called to a neighbour dispute which is due to one of them undertaking noisy building work. Subject is very unhappy with the ongoing noise, during the time police spent with Subject, Police believe the Subject may have mental health problems and may benefit from Social Care intervention. R/A GREEN

15/03/2018

- CRIS 5207374/18 - 5206249/18 - Subject and another male both arrested after fighting, criminal damage was caused to a vehicle by Subject. Ongoing investigation.

11/12/2017

- 17PAC315194 - Police were called to the location by the subject who stated that he was feeling

	suicidal due to ongoing issues with his upstairs neighbours and wanted to hang himself. Upon police arrival the subject was very agitated and angry he stated that his neighbour's upstairs were banging on the floor and the building structure was collapsing. Subject did not mention to police that he wanted to harm himself, he was left with a female at the address. R/A AMBER Following research taken from above report. 18/03/2017 - CRIS 5210999/17 - Subject's female neighbour at number 115, reports that Subject has knocking at her door, following her to her car and asks her why she has been making noises. Neighbour thinks Subject has mental health problems. 1st instance harassment warning has been issued to Subject. 08/12/2016 - CRIS 5227336/16 - Report that Subject is harassing neighbour at number 117. 04/10/2016 - CRIS 5221993/16 - Subject was charged with Public order and criminal damage to motor bike. 14/08/2016 - CRIS 5217954/16 - Subject arrested for threats to kill, whilst in custody Subject was Sectioned under the MH Act. 06/08/2016 - CRIS 5217352/16 - Subject came to police attention - First Instance harassment recorded. 22/08/2015 - CRIS 5218520/15 - Subject reports that he was threatened with a firearm, he was unable to provide any description of persons or vehicle. 25/06/2013 - CRIS 3018184/13 - Subject with others was Charged with attempted robbery.	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Enfield Early Intervention Team Lucas House 305-309 Fore Street London N9 OPD Page Numbers: 51	51 Dear Simon Re: Simon Cordell D.O.B: [REDACTED] NHS Number: 434 096 1671/ Rio Number: 11214451 We have received a police notification with concerns that you may be distressed with the building noise in your block. We are sorry to hear that this may have been a difficult time for you. We would like to offer you an appointment to see if we can support you. Please contact Lucas House switchboard on 0208 702 3100, and ask to speak to Georgina. I look forward to hearing from you within the next 10 days.	20/04/2018 20 April 2018

	If we have not heard from you within this time, we will assume that you do not wish to have any support at the moment. Yours sincerely, Georgina Lamb Care Coordinator / Social Worker	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Enfield Health is the combined name for Community Services (ECS) and Barnet, Enfield and Haringey Mental Health NHS Trust in Enfield BEH Chair: Michael Fox BEH Chief Executive: Maria Kane Page Numbers: 52	<u>52</u> Early Intervention in Psychosis Service (EIS) cc Simon Clark, EIS Team Manager cc DR CHONG - GP NIGHTINGALE HOUSE SURGERY	N/a Lost Page!
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> IN THE COUNTY COURT AT EDMONTON Claim No: E00EDQ49 Before District Judge Dias BETWEEN Claimant THE LONDON BOROUGH OF ENFIELD and MR SIMON CORDELL Defendant Page Numbers: 53,54,55	<u>53</u> ORDER UPON hearing Counsel for the Claimant and the Defendant not attending and upon hearing from the Defendant's mother and uncle AND UPON the Defendant's mother and uncle informing the court that the Defendant has suffered historical mental health issues and was sectioned under the Mental Health Act 2005 in 2016 AND UPON the court having concerns regarding the Defendant's capacity to litigate and/or capacity to understand the meaning of the interim injunction AND UPON the court being satisfied by reason of his attendance at the hearing on 05 February 2018 (subject to any issues regarding mental health) that the Defendant was aware of the terms of the interim injunction dated 09 January 2018 by at least 05 February 2018 and that it would be appropriate to dispense under CPR 81.8 with the need for personal service of the interim injunction from at 05 February 2018 AND UPON the court being asked to address the safety of the witnesses pending the production of any report concerning mental health AND UPON the court commenting that it would expect the police to arrest the Defendant under the power of arrest if there is reasonable cause to suspect that the Defendant has breached the interim injunction dated 09 January 2018 <u>54</u> AND UPON the court not being satisfied that it is appropriate at present to exclude the Defendant from Bumcroft Avenue, Enfield AND UPON the court noting that this is a civil matter such that the Defendant and/or his mother ought to be able to retain solicitors to represent them	30/05/2018 Dated 30 May 2018

	AND UPON the Defendant's mother confirming that she has evidence and will produce all relevant documentation (including documents from the occasion on which the Defendant was sectioned) and will file the same by 4pm 01 June 2018 by email enquiries@edmonton.countycourt.gsi.gov.uk. AND UPON the Defendant's mother confirming that she will accept service of this order on behalf of the Defendant IT IS ORDERED (1) By 4pm on 13 June 2018 the Defendant shall undergo medical assessment by the community mental health team at an appointment to be arranged of which the Defendant shall be given at least 24 hours' notice and a report shall be prepared in relation to the Defendant's capacity to litigate and capacity to understand the meaning of the interim injunction dated 09 January 2018 and that report shall be filed at court and served on each party to the litigation. (2) If the report indicates that the Defendant lacks capacity then the Official Solicitor shall be invited to represent the Defendant. (3) In the event that the Defendant fails to engage with the community mental health team and that the Defendant's mother takes no steps as the Defendant's nearest relative to have the Defendant's mental health assessed then the Defendant shall be deemed to have capacity. (4) The Claimant shall, if so advised, file and serve a witness statement appending any relevant documentation dealing with the question of the Defendant's capacity to litigate and/or capacity to understand the meaning of the interim injunction dated 09 January 2018 by 4pm on 13 June 2018 (5) The matter will be re-listed urgently on the first open date after 20 June 2018 with a time estimate of half a day to be listed in the morning and with no other cases listed that in the same list reserved to District Judge Dias. 55 (6) No earlier than seven and no later than three days prior to the relisted hearing the Claimant shall file and serve produce a paginated bundle of documents for use at the hearing. (7) This order will be deemed served on the Defendant if the Claimant emails a copy of the order to the Defendant's mother. (8) Costs reserved.	
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• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> "Referral Receipt" Page Numbers: 56,57	<u>56</u> FW: 18PAC130616 -11214451 [SEC=OFFICIAL] Kevin Kamese <Kevin.Kamese@enfield.gov.uk> on behalf of The Mash Team <TheMashTeam@Enfield.gov.uk> ' Enfield Triage Team 01 JUN 2018 Fri 01/06/2018 11:51 To: ENFIELD, Assessment service (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) <assessment.service.enfield@nhs.net>; Q) 2 attachments Form87F_7281218.pdf; J2_form78_7281218.pdf; Classification: OFFICIAL Dear Team, Please see the attached for your attention. Regards, Kevin Kamese MASH DSD for Health, Housing B Adult Social Care Operational Support HUB T DZDB37B335G —Original Message— From: merlin@met.pnn.police.uk [mailto:merlin@met.pnn.police.uk] Sent: 01 June 2018 11:09 To: The Mash Team <TheMashTeam@Enfield.gov.uk> Subject: Ref: 18PAC130616 This email, created by merlin@met.pnn.police.uk, has been securely delivered using Egress Switch and was decrypted on Friday, June 1, 2018 11:09:24 AM This is a system generated email so you cannot respond to this email address. If you wish to query any details, then please contact the unit concerned via their normal email address or telephone number. Please find attached a MERLIN file for your attention from: Enfield PPD Consider our environment - please do not print this email unless absolutely necessary, <u>57</u> Blank	01/06/2018 01 JUN 2018
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> RISK ASSESSMENT (CASCADEINFO) MERLIN Ref: 18PAC130616 Page Numbers: 58,59,60,61,62	<u>58</u> RISK ASSESSMENT (CASCADEINFO) MERLIN Ref: 18PAC130616 <u>59</u> Originator: Police Adult at Risks / Vulnerability Identified: Yes: Refer to Research. Factors / Triggers: Yes: Refer to Research. <u>60</u> Research Based on Information available to Police at this time I confirm I have risk assessed this as shown above. WEST, PC (Name, Rank) DATE: 01/06/2018 TIME: 11:06	01/06/2018

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Notification of Pre-Assessment Checklist

Signature

Rank

Name (Print) GEORGIOU OCU/Unit YE-OPS

Name (Print) OCU/Unit

Warrant No: P241909

Date: 31/05/2018

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Circumstances (including immediate action taken by and any views expressed)

Date From: 31/05/2018

Time From: 10:00

Incident Location: 109 Burncroft Avenue, Enfield

Date To: 31/05/2018

Time To: 10:07

Concerns: Psychological / Emotional

CAD 2354/3

1MAY2018

- PC GEORGIOU 119YE AND PC STYLIANOU 485YE

Officers attended the location of Burncroft Avenue in relation to an allegation of threats to kill made towards the subject Simon CORDELL by a neighbour.

The neighbour stated to officers that on **31/05/2018** at approximately 1000Hours she was standing at her window with her two children which looks out onto the rear garden when the Simon has noticed her and shouted words to the effect of ' You fucking bitch' I'm gone fucking kill you and your children'' I've got a bomb for you, I will get in your block and kill you'. This has alarmed viw causing distress resulting in her calling the police.

Simon is known to suffer from mental health issues. He was arrested for threats to kill and breach of injunction.

*** ye PPD ***

This report was initially bragged as Green by the PPD. The Merlin was then assessed by Adult Social Worker **Shannon Miles** who states police research is not required as the subject is known to Social Care or the incident does not raise safeguarding concerns which warrants information sharing. If it becomes apparent research is required, Adult Social Care are to make contact with the PPD.

Adults

The Care Act 2014 states there is a duty to undertake the safeguarding of adults where a local authority has reasonable cause to suspect that an adult in its area has need of care and support, or is experiencing, or is at risk of, abuse or neglect, and is unable to protect himself or herself against the abuse or neglect or the risk of it. The need to safeguard protecting a vulnerable subject is paramount and I believe in keeping with the directions in the Care Act 2014, the health, safety and wellbeing of the

	subject outweighs the public interest risk of not sharing this information IF NO CONSENT/UNABLE TO CONSENT: Because of the incident, I have considered the following; 1. The individuals need for care and support including mental health 2. The Individuals vulnerability to abuse or neglect 3. The Individuals ability to protect themselves, the impact on the individual and their wishes, and 4. The risk of repeated or increasingly serious acts involving children, this or another adult vulnerable to abuse or neglect. The intelligence gathered has led me to the decision that I am over riding consent and share with Social care for their intervention or allocation. and promote the welfare; along with	
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Emails Page Numbers: 63,64	<u>63</u> From: MORGAN, Debbie (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) [mailto:debbie.morganlO@nhs.net] Sent: 05 June 2018 12:47 To: Kaunchita Maudhub; clare.duignan@enfield.gov.uk Cc: Debbie Morgan; Ludmilla lyavoo; Lemmy Nwabuisi Subject: RE: Simon Cordell, Flat 109 Burncroft Avenue, Enfield [SEC=OFFICIAL] - URGENT — This message was sent from an email address external to NHS mail but gives the appearance of being from an NHS mail address. Verify the sender and content is legitimate before acting upon information contained within. — Dear Kaunchita, Thank you for bring this matter to our attention. I will liaise with BEH Mental Health NHS colleagues regarding this matter. Upon quick review of his notes I note he has been reluctant to engage with mental health professionals. Regards, Debbie Morgan EAS/AMHP Services Manager 0208 702 3329 07903970387 From: Kaunchita Maudhub mailto:Kaunchita.Maudhub@enfield.aov.uk Sent: 05 June 2018 12:03 To: clare.duignan@enfield.Gov.uk Cc: Debbie Morgan; Ludmilla lyavoo; Lemmy Nwabuisi Subject: FW: Simon Cordell, Flat 109 Burncroft Avenue, Enfield [SEC=OFFICIAL] - URGENT Dear Clare, Further to my email below-just to clarify I have amended the email to read "appointment to be arranged of which the defendant (Simon Cordell) shall be given at least 24 hours' notice"	05/06/2018 05 June 2018

Simon Cordell - [REDACTED]
109 Burncroft Avenue
Enfield
Middx
EN3 7JQ
Kind Regards
Kaunchita Maudhub
Anti-Social Behaviour - Team Leader
Community Safety Unit
Enfield Council
Civic Centre, Silver St
Enfield EN1 3XA
Tel: 020 8379-4182
kaunchita.maudhub@enfield.aov.uk

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Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities.

From: Kaunchita Maudhub

Sent: 05 June 2018 11:40

To: Clare Duignan

Cc: Debbie Morgan; Johnson Sarah; Lemmy Nwabuisi; Ludmilla Iyavoo

Subject: Re: Simon Cordell, Flat 109 Burncroft Avenue, Enfield [SEC=OFFICIAL] - URGENT

Dear Clare,

Please see attached interim injunction order that the London Borough of Enfield obtained against a council housing tenant (Simon Cordell of 109 Burncroft Avenue) in

January 2018.

We attended court on

30th May 2018

as the matter was listed for the return date for the injunction and for an application for committal following incidents which we submit have breached the terms. At the hearing DJ Dias was concerned about Mr Cordell's mental health following submissions from his mother in his absence.

Although we have no evidence that he does not have capacity the Judge wants to satisfy herself that there are no issues in him understanding the injunction and the proceedings. Therefore, she has made an order (a draft of which is attached) including that:
By 4pm on

13th June 2018

the Defendant shall undergo a medical assessment by the community mental health team at an appointment to be arranged of which the defendant (Simon Cordell) shall be given at least 24 hours' notice and a report shall be prepared in relation to the Defendant's capacity to litigate and capacity to understand the meaning of the interim injunction dated

09th January 2018

and that report shall be filed at court and served on each party to the litigation.

Apologies for the short timescale but could you please arrange for an appointment to be given to the

	defendant (Simon Cordell) as per the court order in order for these issues to be clarified. It would also be useful for some clarification about if Mr Cordell has been known to mental health services previously including the history and assessments or any previous sections etc Please let me know if you need any more detail or wish to discuss this further We await your reply Kind Regards Kaunchita Maudhub Anti-Social Behaviour - Team Leader Community Safety Unit Enfield Council Civic Centre, Silver St Enfield EN1 3XA Tel: 020 8379-4182 kaunchita.maudhub@enfield.gov.uk Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities.	
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Emails Page Numbers: 65,66	65 From: Ludmilla lyavoo Sent: 31 May 2018 11:28 To: Kaunchita Maudhub; Lemmy Nwabuisi Subject: Simon Cordell, Flat 109 Burncroft Avenue, Enfield [SEC=OFFICIAL] Classification: OFFICIAL Dear Kaunchita, I write further to the hearing which took place at the Edmonton County Court on 30/05/2018 The Court ordered that Simon Cordell should undergo a medical assessment by the community legal team by no later than 13th June 2018 As a result of this order an appointment will need to be arranged and a report should be prepared and filed at Court by this deadline. The report shall deal with Mr Cordell's capacity to litigate and capacity to understand the meaning of the interim injunction dated 09/01/2018 I will be therefore grateful if you could contact the Community Mental Health Unit and arrange for an appointment to be arranged urgently. Please note that at least 24 hours' notice need to be provided to Mr Cordell. Finally, I would be grateful you could contact Community Mental Health Unit and ask them whether Mr Cordell was sectioned under the Mental Health Act and if we could have copy of the relevant documentations. Many thanks. Kind regards, Ludmilla lyavoo Solicitor Corporate Team Legal Services Enfield Council Silver Street Enfield EN1 3XY DX 90615 Enfield 1 Telephone: 020 8379 8323 Fax: 020 8379 6492	31/05/2018 31 May 2018

	Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities. Classification: OFFICIAL <u>66</u> Blank	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> To: Me Enfield Assessment Service 25 Crown Lane Southgate London N14 5SH Tel: 0208 702 3329 Page Numbers: 76,	<u>67</u> Dear Mr CORDELL You have been referred to our Assessment Service for a New Patient Assessment. Unfortunately, I have been unable to contact you to offer you an appointment. I am now writing to you to advise you that an appointment has been scheduled for you and the details are as follows: Appointment: 1 Clinic: Crown Lane Clinic Date/Time: 15 Jun 2018 10:00:00 Intended Duration: 60 mins Clinicians: Angela Hague / EIS Address: Crown Lane Clinic, Crown Lane, Southgate, London, N14 5SH YOU NEED TO PHONE AND CONFIRM THIS APPOINTMENT WITHIN FIVE DAYS OF DATE ON TOP OF THIS LETTER; OTHERWISE THIS APPOINTMENT WILL BE CANCELLED. PLEASE SEE NOTE BELOW) Please complete the enclosed questionnaire form, this is titled INFORMATION FORM (Consent Form) and ETHNICITY FORM and bring it with you to your appointment, TOGETHER WITH THIS APPT LETTER. You may want a member of your family or a close friend to accompany you when you attend for Assessment. The appointment will last approximately up to 1 hour. Failure to confirm your attendance will result in the above appointment being cancelled and you may be discharged back to your referrer. Yours sincerely Beverley Campbell CC: GP	06/06/2018 6 Jun 2018
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Emails Page Numbers: 68	<u>68</u> From: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 15 June 2018 13:08 To: 'kaunchita.maudhub@enfield.gov.uk' Cc: HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) (simon.clarklO@nhs.net) Subject: Mr S Cordell 37 yrs. old To the antisocial behaviour team at Enfield Council: We have been trying to see Mr Cordell but he has not attended assessments offered although he has phoned the assessment team. He is not currently receiving any mental health treatment and is not under any team.	15/06/2018 15 June 2018

	He has had contact with various mental health teams in the (both child and adolescent and adult services) and seems (from the electronic record) to have had one brief admission on the Haringey assessment ward in August 2016 It seems that the Court / solicitor (Ludmilla lyavoo from the legal services team at Enfield Council) would like a report to assist the Court answering specific questions outlined in Ms lyavoo e mail. I would suggest that such a report is commissioned from a Consultant Forensic Psychiatrist from North London Forensic Service (tel 020 8702 6004/6072) forensic.referrals@nhs.net as this is not something, we would provide We will continue to endeavour to assess him and offer him any treatment he may need Dr Scurlock Consultant Psychiatrist EIP	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Emails Page Numbers: 69,70,71	<u>69</u> Entries by Angela Hague - Manager, Enfield Assessment Service Originator: HAGUE, Angela 15Jun 2018,14:25 [Nursing] Telephone call from Simon, long conversation, asking about his appointment he has been offered for next week, who made the referral and why. Same discussed and remembers that they had already spoken with Iain Williams. Difficult to follow his conversation and to interrupt. Says he has been on a 10pm curfew for the past 9 years afraid to leave his house as he feels the police have set this up. Mistaken identity, reports he has read all give descriptions of different people, 4 in total, not him. All happened because of a party on Lincoln Road, he was not involved but happened because people were disturbed by the noise. Because of the curfew says he lost his relationship with his first love has or had a second girlfriend. Said he has been dialling 999 they get 15,000 calls per day; their time is going backwards on their records and do not have a RUN number. Says he does not have a mental illness no previous contact with services has been good. Sectioned in the past human rights broken, people coming into his house, says he was giving them access. Has tape recordings and LinkedIn, Facebook pages of all involved, has set up a web page. Discussed that they reason I had contacted him was to offer an appointment next Tuesday 11am, asking why we are coming, offered to see at Lucas House instead he declined this says prefers to be seen at home. Asked why I am not treating with dignity and respect that he has told me all about my colleagues and their treatment of him and I have not apologised to him and investigating. Discussed that he has the right to compliant which he says he already has and knows how to make a complaint, reported that he was	15/06/2018 15Jun 2018

taping our conversation and was making a digital copy which he has made of most interactions with people. He agreed to a home visit next week. The home visit is with EIS Amal Pomphrey.

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19/06/2018

Originator. HAGUE, Angela

19Jun 2018, 13:57

[Nursing]

Telephone call from Simon's mother Lorraine Cordell. Sounded tearful on the phone, reported that she has spoken with Simon and he told her that we went to see him today, myself and Amal. Said that he told her that the appointment went well and that we had told him there is nothing mentally wrong with him, that he does not need psychiatric services and is well. Says she is finding it distressing, very worried about her son as she believes, and everyone else can see that her son is ill. Said he is struggling to cope, not leaving the house, feels persecuted by his neighbours. Not managing the court case well. Believes that the has lost trust in services and feels he needs to build trust with professionals again. Reported that when she was in court the information that was given was that her son had PTSD and was discharged from services, believes it was inaccurate and did not know where the information came from, though perhaps it was Iain Williams as he had around the same time called to speak to Simon about his referral.

Discussed that we would need Simon's consent to discuss his case. Reported that her mother suffered with schizophrenia and she has a lot of experience around people who have mental

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illness not believing they have a mental health problem and don't require treatment. Says she is happy to encourage her son to engage with services as far as possible.

Originator: HAGUE, Angela

19Jun 2018,14:33

[Nursing] Home visit today as arranged with Amal Pomphrey from EIS. Client previously under EIS from 2015 discharged in January this year, difficult to engage. History well known so not repeated. Simon was friendly and welcoming into his home. Put his pet dog outside in the garden, visible through patio doors. Dog appeared in good health though Simon reported that his dog is stressed about his neighbours the police and mental health services to the point it has chewed some of the fur off his front paws.

Simon stood for some time keen to talk about the evidence he has gathered against the police, and local authority, has taped and logged everything on a website. Showed his website says not live as yet, all he has to do is click a button and it will show how he has been unfairly treated by the local

	authority and police. Website and all written video and audio recordings linked. Showed a couple of examples CCTV inside his flat, conversation with ASBO team and written documents. Also showed us paper files that the has maintained in large ring binders, containing copies of e-mails and all correspondence. Informed us that he tapes all conversations he has with health, local authority and police staff. Has CCTV cameras placed internally and externally around his flat? Spoke of how his issues began many years ago trouble with the police over holding illegal parties. Reported that he is currently not going out feels afraid. No restrictions placed on him regarding going out other than not allowed in Industrial areas or 24-hour venues such as MacDonald's or Tesco's. Reported recently in court with regards to his neighbour, representing himself does not feel he needs a solicitor. Recommendation is that he has an assessment with a psychiatrist. However, said he will not attend as the letter has not been properly dated and stamped and therefore believes he is not bound by it. Mental state: Simon was casually dressed, his hygiene appeared fair. He maintained good eye contact and rapport. His speech appeared slightly pressured difficult to interrupt but not irritable when interrupted. Grandiose ideas around his intelligence, says he is a millionaire property from wealthy relatives who have deceased, successful businesses, earning hundreds and thousands of pounds. Paranoid about his neighbours, believes they and others have spread information that he may have had herpes. Paranoid delusions & believes, his neighbours are deliberately following him from room to room banging on his ceiling. Believes they want to kill him. Though he did not express any thoughts of wanting to harm anyone. Believes he is being paid to look after vulnerable people in poor situations. <u>71</u> Appears to be a mood element to his condition pressured speech grandiose, tangential jumping from topic to topic. However, reported that at times his mood can be depressed and upset by his neighbours. On one occasion he drank some liquid in an attempt to poison himself, found by mother and taken to A&E discharged. Denied having any current suicidal ideation or thought to harm himself. There was no evidence of any hallucinations. Personality appears to be intact. Simon appears to lack insight, asked if he believes he has a mental health condition denied this said he has never taken medication as he does not believe he has any mental health problem to require medication. Impression: 37-year-old male appears to have had a difficult childhood spoke about scars on his legs from	
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	beatings from his father. Wants to protect children, and vulnerable people believes it is his duty. 2015 diagnosed with psychotic illness and referred to EIS does not appear to have engaged with treatment offered, previously prescribed Olanzapine. Does not appear to require crisis team or mental health act assessment at this time. But would benefit from assertive follow up in the community. EIS state that has gone beyond EIS three-year treatment period. Plan therefore to refer to North Locality Team Locality Team. E-mail sent. EIS agree to liaise and advise court regarding the request for a report. Closed to EIS.	
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Email's Page Numbers: 72,73,74	<u>72</u> From: CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 25 June 2018 14:56 To: Ludmilla lyavoo Subject: RE: Mr S Cordell [SEC=OFFICIAL] Dear Ludmilla Thanks very much for your email Attached is a password protected document of the most recent patient record entries Please confirm receipt and I will send the password Thanks Simon Simon Clark Team Manager Enfield Early Intervention in Psychosis Service Barnet, Enfield & Haringey Mental Health NHS Trust Lucas House, 305-309 Fore Street Edmonton, N9 OPD Tel: 0208 702 3100 simon.clark@beh-mht.nhs.uk simon.clarkIO@nhs.net <u>73</u> Service Manager: Rachel Yona 0208 702 6878 rachel.yona@beh-mht.nhs.uk Website: www.beh-mht.nhs.uk Twitter: @BEHMHTNHS / Facebook: www.fb.com/behmht From: Ludmilla lyavoo [mailto:Ludmilla.lyavoo@enfield.gov.uk] Sent: 25 June 2018 14:53 To: CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Subject: Mrs Cordell [SEC=OFFICIAL] Importance: High Classification: OFFICIAL Dear Mr Clark, I am a solicitor for the London Borough of Enfield. I understand that Mr Cordell was contacted by the Community Mental Health Team. I was advised by Dr Scurlock on 15th June 2018	25/06/2018 25 June 2018

	that Mr Cordell did not attend the assessments he was offered. Can you please confirm whether this is the position? However, if he did attend, may I please have the outcome of the assessment? The matter is listed in court tomorrow and your urgent response will be appreciated. I look forward to hearing from you. Kind regards, Ludmilla lyavoo Solicitor Corporate Team Legal Services 74 Enfield Council Silver Street Enfield EN1 3XY DX 90615 Enfield 1 Telephone: 020 8379 8323 Fax: 020 8379 6492 Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities.	
<u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Email's Page Numbers: 75,76,77	75 Entries by Angela Hague - Manager, Enfield Assessment Service Originator. HAGUE, Angela 15 Jun 2018, 14:25 [Nursing] Telephone call from Simon, long conversation, asking about his appointment he has been offered for next week, who made the referral and why. Same discussed and remembers that they had already spoken with Iain Williams. Difficult to follow his conversation and to interrupt. Says he has been on a 10pm curfew for the past 9 years afraid to leave his house as he feels the police have set this up. Mistaken identity, reports he has read all give descriptions of different people, 4 in total, not him. All happened because of a party on Lincoln Road, he was not involved but happened because people were disturbed by the noise. Because of the curfew says he lost his relationship with his first love has or had a second girlfriend. Said he has been dialling 999 they get 15,000 calls per day; their time is going backwards on their records and do not have a RUN number. Says he does not have a mental illness no previous contact with services has been good. Sectioned in the past human rights broken, people coming into his house, says he was giving them access. Has tape recordings and LinkedIn, Facebook pages of all involved, has set up a web page. Discussed that they reason I had contacted him was to offer an appointment next Tuesday 11am, asking why we are coming, offered to see at Lucas House instead he declined this says prefers to be seen at home. Asked why I am not treating with dignity and respect that he has told me all about my colleagues and their treatment of him and I have not apologised to him and investigating. Discussed that he has the right to compliant which he says he already has and knows how to make a complaint, reported that he was	15/06/2018 15 Jun 2018

taping our conversation and was making a digital copy which he has made of most interactions with people. He agreed to a home visit next week. The home visit is with EIS Amal Pomphrey.

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19/06/2018

Originator: HAGUE, Angela

19 Jun 2018,13:57

[Nursing] Telephone call from Simon's mother Lorraine Cordell. Sounded tearful on the phone, reported that she has spoken with Simon and he told her that we went to see him today, myself and Amal. Said that he told her that the appointment went well and that we had told him there is nothing mentally wrong with him, that he does not need psychiatric services and is well. Says she is finding it distressing, very worried about her son as she believes, and everyone else can see that her son is ill. Said he is struggling to cope, not leaving the house, feels persecuted by his neighbours. Not managing the court case well. Believes that he has lost trust in services and feels he needs to build trust with professionals again.

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illness not believing they have a mental health problem and don't require treatment. Says she is happy to encourage her son to engage with services as far as possible.

19/06/2018

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19 Jun 2018,14:33

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2015

discharged in January this year, difficult to engage. History well known so not repeated.

Simon was friendly and welcoming into his home. Put his pet dog outside in the garden, visible through patio doors. Dog appeared in good health though Simon reported that his dog is stressed about his neighbours the police and mental health services to the point it has chewed some of the fur off his front paws.

Simon stood for some time keen to talk about the evidence he has gathered against the police, and

	local authority, has taped and logged everything on a website. Showed his website says not live as yet, all he has to do is click a button and it will show how he has been unfairly treated by the local authority and police. Website and all written video and audio recordings linked. Showed a couple of examples CCTV inside his flat, conversation with ASBO team and written documents. Also showed us paper files that the has maintained in large ring binders, containing copies of e-mails and all correspondence. Informed us that he tapes all conversations he has with health, local authority and police staff. Has CCTV cameras placed internally and externally around his flat? Spoke of how his issues began many years ago trouble with the police over holding illegal parties. Reported that he is currently not going out feels afraid. No restrictions placed on him regarding going out other than not allowed in Industrial areas or 24-hour venues such as MacDonald's or Tesco's. Reported recently in court with regards to his neighbour, representing himself does not feel he needs a solicitor. Recommendation is that he has an assessment with a psychiatrist. However, said he will not attend as the letter has not been properly dated and stamped and therefore believes he is not bound by it. Mental state: Simon was casually dressed, his hygiene appeared fair. He maintained good eye contact and rapport. His speech appeared slightly pressured difficult to interrupt but not irritable when interrupted. Grandiose ideas around his intelligence, says he is a millionaire property from wealthy relatives who have deceased, successful businesses, earning hundreds and thousands of pounds. Paranoid about his neighbours, believes they and others have spread information that he may have had herpes. Paranoid delusions believe his neighbours are deliberately following him from room to room banging on his ceiling. Believes they want to kill him. Though he did not express any thoughts of wanting to harm anyone. Believes he is being paid to look after vulnerable people in poor situations. <u>77</u> Appears to be a mood element to his condition pressured speech grandiose, tangential jumping from topic to topic. However, reported that at times his mood can be depressed and upset by his neighbours. On one occasion he drank some liquid in an attempt to poison himself, found by mother and taken to A&E discharged. Denied having any current suicidal ideation or thought to harm himself. There was no evidence of any hallucinations. Personality appears to be intact. Simon appears to lack insight, asked if he believes he has a mental health condition denied this said he has never taken medication as he does not believe he	
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	has any mental health problem to require medication. Impression: 37-year-old male appears to have had a difficult childhood spoke about scars on his legs from beatings from his father. Wants to protect children, and vulnerable people believes it is his duty. 2015 diagnosed with psychotic illness and referred to EIS does not appear to have engaged with treatment offered, previously prescribed Olanzapine. Does not appear to require crisis team or mental health act assessment at this time. But would benefit from assertive follow up in the community. EIS state that has gone beyond EIS three-year treatment period. Plan therefore to refer to North Locality Team Locality Team. E-mail sent. EIS agree to liaise and advise court regarding the request for a report. Closed to EIS.	
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Email's Page Numbers: 78,79,80	<u>78</u> From: CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 25 June 2018 14:56 To: Ludmilla lyavoo Subject: RE: Mr S Cordell [SEC=OFFICIAL] Dear Ludmilla Thanks very much for your email Attached is a password protected document of the most recent patient record entries Please confirm receipt and I will send the password Thanks Simon Simon Clark Team Manager Enfield Early Intervention in Psychosis Service Barnet, Enfield & Haringey Mental Health NHS Trust Lucas House, 305-309 Fore Street Edmonton, N9 0PD Tel: 0208 702 3100 simon.clark@beh-mht.nhs.uk simon.clark10@nhs.net <u>79</u> Service Manager: Rachel Yona 0208 702 6878 rachel.yona@beh-mht.nhs.uk Website: www.beh-mht.nhs.uk Twitter: @BEHMHTNHS / Facebook: www.fb.com/behmht From: Ludmilla lyavoo [mailto:Ludmilla.lyavoo@enfield.gov.uk] Sent: 25 June 2018 14:53 To: CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Subject: Mr S Cordell [SEC=OFFICIAL] Importance: High Classification: OFFICIAL Dear Mr Clark, I am a solicitor for the London Borough of Enfield. I understand that Mr Cordell was contacted by the	25/06/2018 25 June 2018

	Community Mental Health Team. I was advised by Dr Scurlock on 15th June 2018 that Mr Cordell did not attend the assessments he was offered. Can you please confirm whether this is the position? However, if he did attend, may I please have the outcome of the assessment? The matter is listed in court tomorrow and your urgent response will be appreciated. I look forward to hearing from you. Kind regards, Ludmilla lyavoo Solicitor Corporate Team Legal Services 80 Enfield Council Silver Street Enfield EN1 3XY DX 90615 Enfield 1 Telephone: 020 8379 8323 Fax: 020 8379 6492 Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities. Classification: OFFICIAL Follow us on Facebook Twitter http://www.enfield.gov.uk Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities. Opinions expressed in this email are those of the individual and not necessarily those of the London Borough of Enfield. This email and any attachments or files transmitted with it are strictly confidential and intended solely for the named addressee. It may contain privileged and confidential information and if you are not the intended recipient and receive it in error you must not copy, distribute or use the communication in any other way. All traffic handled by the Government Connect Secure Extranet may be subject to recording/and or monitoring in accordance with relevant legislation. This email has been scanned for viruses but we cannot guarantee that it will be free of viruses or malware. The recipient should perform their own virus checks.	
• <u>The Doctor's Folder / pub Book Issue: 2!</u> <u>Stage 2</u> <u>Folder: 0</u> Email's Page Numbers: 81,82,83,84,85,86,87,88,89	81 From: Ludmilla lyavoo [mailto:Ludmilla.lyavoo@enfield.gov.uk] Sent: 28 June 2018 14:48 To: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Cc: Kaunchita Maudhub; Lemmy Nwabuisi Subject: RE: Mr S Cordell 37 yrs. old [SEC=OFFICIAL] Classification: OFFICIAL Dear Dr Scurlock,	28/06/2018 28 June 2018

Thank you. Please note that Mr Cordell is now represented by a solicitor, Trishna Kerai of Stuart Miller Solicitors. Her email address is: Trishna@stuartmillersolicitors.co.uk. She can be contacted in relation to Mr Cordell's consent to the requested disclosure.

Please note that the consultant psychiatrists that we have approached have all requested for his medical history including his mental health. I therefore hope that the information could be provided urgently following consent.

Please do not hesitate to contact me if you have any queries.

Kind regards, Ludmilla Iyavoo Solicitor Corporate Team Legal Services Enfield Council Silver Street Enfield EN1 3XY

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DX 90615 Enfield 1
Telephone: 020 8379 8323 Fax: 020 8379 6492
Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities.

From: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) [**mailto:**hilary.scurlock@nhs.net]

Sent: 28 June 2018 13:02

To: Ludmilla Iyavoo; CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) **Cc:** Kaunchita Maudhub; Lemmy Nwabuisi **Subject:** RE: Mr S Cordell 37 yrs. old [SEC=OFFICIAL]

Thanks

I have passed your e mail to Simon Clark the team manager

I would imagine that we would need Mr Cordell's consent to pass on this level of information I'm sure Simon will respond to you BW HS

From: Ludmilla Iyavoo

[**mailto:**Ludmilla.Iyavoo@enfield.gov.uk]

Sent: 28 June 2018 11:09

To: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

83

Cc: Kaunchita Maudhub; Lemmy Nwabuisi

Subject: RE: Mr S Cordell 37 yrs. old [SEC=OFFICIAL]

Classification: OFFICIAL Dear Dr Scurlock,
Thank you for your email. I am in the process of instructing a Consultant psychiatrist but the consultant I have contacted requires details of his medical history.

Can you please arrange for someone in your team to provide this information to me urgently or direct me to the correct department?

Thanking you in advance for your cooperation.

Kind regards,
Ludmilla lyavoo Solicitor Corporate Team Legal
Services Enfield Council Silver Street Enfield
EN13XY
DX 90615 Enfield 1
Telephone: 020 8379 8323
Fax: 020 8379 6492

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Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities.

From: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) [<mailto:hilary.scurlock@nhs.net>]

Sent: 27 June 2018 11:51

To: Ludmilla lyavoo

Cc: Kaunchita Maudhub; Lemmy Nwabuisi

Subject: RE: Mr S Cordell 37 yrs. old

[SEC=OFFICIAL]

We offered him an assessment to establish if he had a current mental health problem that we could offer treatment for

Our offer to assess him was not connected to any legal matters

It might assist the Court to have an assessment from a specialist Forensic Psychiatrist who are experts in mentally disordered offenders and risk assessment and management

Best wishes

HS

From: Ludmilla lyavoo

[<mailto:Ludmilla.lyavoo@enfield.gov.uk>]

Sent: 22 June 2018 11:18

To: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Cc: Kaunchita Maudhub; Lemmy Nwabuisi

Subject: Mr S Cordell 37 yrs. old

[SEC=OFFICIAL]

Importance: High

Classification: OFFICIAL

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Dear Dr Scurlock,

I am the solicitor in conduct of a claim for an injunction against Mr Cordell and write in response to your email to Kaunchita Maudhub on

15th June 2018

I would need further clarification on the content of your email and hope you will be able to respond as soon as possible as a hearing has been listed on

Tuesday 26th June 2018

1) You explained that you have been trying to see Mr Cordell but he has not attended the assessments offered to him although he has phoned the assessment team.

	Can you please confirm the dates of the assessments offered to Mr Cordell and details of the conversations that were held? 2) You mentioned that he had contact with various mental health teams and had one brief admission on the Haringey assessment ward in August 2016 Will it be possible to have details of the contacts held and the assessment that was carried out? If possible, we would like a detailed history of the contacts/ admissions so we could provide the information to the Court. 3) You suggested that a report is to be commissioned from a Consultant Forensic Psychiatrist from North London Forensic Service as this is not something you would provide. Can you please confirm what would the report achieve? If this is not a service you could provide, why did your department contact Mr Cordell and offered him an assessment in the first place? I look forward to hearing from you. Kind regards, Ludmilla lyavoo 86 Solicitor Corporate Team Legal Services Enfield Council Silver Street Enfield EN1 3XY DX 90615 Enfield 1 Telephone: 020 8379 8323 Fax: 020 8379 6492 Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities. Classification: OFFICIAL Follow us on Facebook Twitter http://www.enfield.gov.uk Enfield Council is committed to serving the whole borough fairly, delivering excellent services and building strong communities. Opinions expressed in this email are those of the individual and not necessarily those of the London Borough of Enfield. This email and any attachments or files transmitted with it are strictly confidential and intended solely for the named addressee. It may 87 Blank 88 Blank 89 Blank	
<u>Stage 3</u> <u>Folder: 3</u>		

- **The Doctor's Folder / pub Book Issue:**
3!

Stage 3

Folder: 3

Psychiatric Report on Mr Simon Cordell
109 Burncroft Avenue Enfield EN3 7JQ

Page Numbers: 01,02,03,04,
05

Page 4, is wrong!

Good Copy Below

Stage 3

Folder: 3

Page Numbers: 06,07,08,09,10

1

1. Introduction

This report is prepared at the request of London Borough of Enfield, Antisocial Behaviour Team following directions from the Edmonton County Court to undertake an assessment on Mr Cordell. My instructions were received in a letter dated **05 July 2018**

and outlined as below:

1. Whether the defendant has the mental capacity to litigate and give instructions in his defence.

2. Whether the defendant understands the terms of the injunction order dated

09 January 2018

2. Details of current proceedings

The current proceedings relate to an interim injunction order issued against Mr Cordell, at the Edmonton County Court on **09 January 2018**

This followed numerous complaints from neighbours about Mr Cordell's acts of harassment and antisocial behaviour. However, it has been reported that Mr Cordell has continued to breach the order. It has been reported that a neighbour has been assaulted, harassed and has received threats from Mr Cordell. He has also made threats towards certain council employees. The local authority issued applications for committal due to Mr Cordell's breach of the injunction, however the applications could not be considered due to concerns about his mental capacity.

3. Sources of information

3.1. I was provided with the following information to aid in the assessment:

1. Claim form for an injunction with supporting documents

2. Order for an injunction dated **09/01/2018**

3. Report of Angela Hague from the Enfield Assessment Team

4. Court order made by DJ Dias, Edmonton County Court at the hearing on **30/05/2018**

And

26/06/2018

2

3.2 I assessed Mr Cordell on

06 July 2018

at his flat 109 Burncroft Avenue, Enfield EN3 7JQ, accompanied by two officers from the Enfield Housing Team. I can confirm that prior to my assessment; I explained to Mr Cordell my role and the purpose of my visit. I also explained to him that I was acting on the instructions of the Enfield Council at the directions of the Court.

4. Assessment of Mr Cordell

4.1 Mr Cordell spoke to us for a few minutes outside his flat and upon explaining the purpose of the visit, he allowed us into his flat. He agreed to tie the dog outside in the garden. The flat although disorganised with papers and folders scattered

08/07/2018
Assessment
3 day, for
the 2nd
Injunction
Order,
Lemmy!

	around, did not appear overly cluttered. Mr Cordell presented as a young, slim built, mixed race male with reasonable hygiene. We explained our roles and the purpose of our visit. Mr Cordell informed us that he was recording our conversation. 4.2 Mr Cordell seemed very keen and enthusiastic to talk and we had to explain the reason of our visit several times to maintain some structure and focus. He maintained appropriate eye contact and we managed to establish a rapport after a while. His demeanour was polite and appropriate. There was evidence of psychomotor agitation as he appeared generally restless and overactive. Mr Cordell described his appetite and sleep pattern as fine. Objectively I would regard his mood as labile, rapidly fluctuating between euthymia (normal mood) and irritability. 4.3 Mr Cordell's comprehension of information presented to him appeared adequate. He was able to understand the queries presented to him. His responses however were very elaborate and circumstantial. His speech was very pressured, difficult to interrupt and at times frankly rambling. There was clear evidence of thought disorder with flight of ideas (rapid shift of ideas with some superficial apparent connection). Mr Cordell struggled to sustain his goal of thinking as he often derailed to themes of relevance to him, digressing away from the topic of discussion. It was very difficult to obtain a direct response to the queries posed to him and follow his thread of conversation. 4.4. Mr Cordell's thought content was replete with various delusional beliefs of persecutory and grandiose nature. He spoke of an elaborate conspiracy which involves the Enfield local authority and the metropolitan police, dating back since 2013 when he claimed that he was arrested for putting up a gazebo in his garden which led to him being barred from visiting <u>3</u> places in central London and placed on a curfew from 10 pm. Mr Cordell informed that he followed these restrictions imposed on him for about a year and returned to Court and won the case. Mr Cordell then went on to talk about Sally Gillcrest, the legal executive for the metropolitan police who he alleged set him up for a million pounds and brought on an ASBO against him, which ended with him being imposed on a nine-year curfew. Mr Cordell stated that Sally Gillcrest in conjunction with the borough commander Jane Johnson and the community officer started spreading rumours that he was "suffering from herpes and has hurt a woman" which the neighbours in his block became aware of and started sending him messages addressing him as "you black boy Mr Cordell implied that Sally Gillcrest colluded with the neighbours as she had a vested interest in getting him out of this country. He stated that the	
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neighbours above him deliberately bang on his ceiling and have also subject him to other forms of harassment since

2014

Mr Cordell implied that the neighbours were responsible for the miscarriage suffered by his then girlfriend and also held them responsible for the separation from his previous girlfriends. He further stated that between

2014

and

2016

his mother has made numerous complaints to the council regarding the harassment he has been subject to and he has won a criminal case against his neighbours

4.5 Mr Cordell then went on to elaborate his grievance against Lemmy, the officer who works for the Enfield local authority. He claimed that he received an email from Lemmy threatening that he would obtain a possession order against him and asking him to attend a meeting. He then stated that the ASBO that was served against him was not valid due to lack of signature. Therefore, Lemmy built a false case against him by using "lower grade cases" to pursue a possession order and subsequently an injunction order, by falsifying statements and using "statements from dead cases". According to Mr Cordell this was declared as invalid by a Judge, however Lemmy has continued to produce false orders against him in the way of a second injunction, which he claimed has never been served on him. Mr Cordell described this as "targeted malice" by Lemmy as he has used the injunction as a smoke screen to cover up the ASBO by providing false statements and witnesses.

4.6 In addition, Mr Cordell also described a number of grandiose beliefs, stating that he was building a constitution on CIC, which he explained to be Community Interest Company. He also spoke of a number of other businesses. He was keen to show us the various documents, emails and recordings he has accrued as evidence to support his case.

4

5. Opinion and Recommendations

Mr Cordell is a resident at the Enfield borough, who was served an injunction on **09 January 2018** following numerous complaints by his neighbours of antisocial behaviour and harassment. Despite this, Mr Cordell has continued to breach the order with further incidents of harassment, threats and assault against the neighbours. In addition, it has been reported that some council employees have also received threats from Mr Cordell. According to available information, Mr Cordell has had sporadic contact with the mental health services and has been recently assessed by the Enfield Mental Health Assessment Service. During my assessment, Mr

	Cordell was preoccupied with a number of persecutory and grandiose delusional beliefs. In addition, he also presented with other symptoms such as labile mood, pressured speech, overactivity and flight of ideas. In my view, Mr Cordell's current presentation is consistent with Schizoaffective Disorder, which is recognised as an enduring mental illness. I have received specific instructions to address the following issues: 1. Whether Mr Cordell has the mental capacity to litigate and give instructions to his defence? As highlighted above, Mr Cordell's mental state is replete with complex persecutory delusional belief system. During my assessment, Mr Cordell was convinced that the local authority and the police have been colluding alongside his neighbours to pursue false claims and allegations against him. In his view, the possession order and the injunction order were based on false statements, created against him and this did not stand up in Court and therefore an injunction was not issued against him. In my view, although there are no significant deficits in Mr Cordell's comprehension or retention of information, his ability to process information relevant to the current proceedings is likely to be influenced by his underlying delusional beliefs. During my interaction, it was evident that his interpretation of events and actions of others are influenced by his abnormal beliefs. Mr Cordell perceives himself as a victim and is aggrieved by the injustice carried out against him. In my view, Mr Cordell's ability to weigh the information relevant to the current proceedings is impaired due to his tendency to misinterpret any information presented to him to fit into his entrenched persecutory delusional beliefs. Moreover, Mr Cordell presents with significant thought disorder and it is unlikely that he will be able to give coherent instructions to the defence. It is therefore my opinion that Mr Cordell lacks capacity to litigate and give appropriate instructions to the defence. <u>5</u> 2. Whether Mr Cordell understands the terms of the injunction order dated 09 January 2018 Mr Cordell is currently suffering from symptoms of Schizoaffective Disorder and presents with florid psychotic symptoms. His thinking and behaviour are influenced by his underlying persecutory beliefs. Mr Cordell is convinced that the injunction order is a cover up by the local authority for the errors and mistakes of the ASBO and therefore did not stand up in Court. Mr Cordell is convinced that the injunction order has been falsified by certain individuals (particularly Lemmy possibly in conjunction with others). He therefore does not value the order or the contents contained within it.	
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	In my opinion Mr Cordell's capacity to process the information relevant to the order is again impacted by his delusional beliefs. Dr Dhara Dinakaran, MBBS, MSc, MRCPsych Consultant Psychiatrist Approved under Section 12 (2) of MHA 08/07/2018	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> Psychiatric Report on Mr Simon Cordell 109 Burncroft Avenue Enfield EN3 7JQ "Double off above" Page Numbers: 06,07,08,09,10	<u>6</u> "Double off above" Page Numbers: 06,07,08,09,10 <u>7</u> "Double off above" Page Numbers: 06,07,08,09,10 <u>8</u> "Double off above" Page Numbers: 06,07,08,09,10 <u>9</u> "Double off above" Page Numbers: 06,07,08,09,10 <u>10</u> "Double off above" Page Numbers: 06,07,08,09,10	08/07/2018
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> Referral Barnet, Enfield and Haringey Mental Health NHS Trust ALL FIELDS MUST BE COMPLETED IN FULL Page Numbers: 11,12	<u>11</u> Date of Referral: 3rd October 2018 Referring Consultant: Dr Hussain Team Referring: Enfield Adult North Locality Address of Referring Team: 58-60 Silver Street Enfield EN1 3EP Tel No: 02083794142 Details of any current criminal charges (actual or likely to be pending), and court dates (attach witness statements) Had a recent court case in relation to on-going dispute about his neighbour deliberately causing him distress by making noise. The court has advised the council to rehouse him. This has not happened. However, Enfield Council is allegedly now planning to apply for his eviction via the courts. Offending History (attach PNC printout) Mr Cordell has a number of convictions for driving offences and theft 08/12/2015 given 5-year ASBO in 2015 for running illegal raves <u>12</u> North London Forensic Service Referral Form Assessment: Marked as: Yes	03/10/2018
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> To:	<u>13</u> Dear Sirs, Re: Anti-Social Behaviour, Tenancy concerns and breaches- pre-action letter.	15/10/2018 15th October 2018

Me
Please reply to: Legal Services
PO Box 50, Civic Centre Silver Street,
Enfield EN1 3XA
Page Numbers:
13,14,15,16,17,18,19,20,
21,22

We have received several complaints of anti-social behaviour against you and going back to **2016** for which you have been warned numerous times, verbally and formally in writing. Please see below a list of reports made against you:

1) On
6th July 2016
it is alleged that you approached an elderly neighbour as he came out of his flat and started to shout abuse and swear at him and threatened to burn down his flat.

2) Sometime in July 2016 it is alleged that you damaged the lock of a neighbour's electric cupboard and removed his fuse box resulting in no electricity to his flat.

3) On
6th August 2016,
it is alleged that you threatened one of your neighbours and his wife and aggressively demanded money from him. It is also alleged that you repeatedly swore and shouted abuse at him and his wife and called his wife a 'bitch' and tried to stop him from going up the stairs to his flat by standing in front of him.

4) Sometimes in
September 2016
it is alleged that you confronted an elderly neighbour outside your block of flats, 109 - 119 Burncroft Avenue as he was going to the local park with another resident and started to shout abuse and

14
threats at him and said to him 'I can get you over at the park, I know you go for a walk'.

5) On
27th September 2016
it is alleged that you confronted one of your neighbours as he was returned to his flat with his family and threatened and swore at him and demanded money from him. It is also alleged that you later banged on his door, shouted further abuse and swear words at him and accused him of making noises inside his flat.

6) On
28th September 2016
it is alleged that you aggressively banged on a neighbour's door and threatened and shouted verbal abuse and swearwords at them. It is also alleged that you aggressively demanded money from him.

7) On
4th October 2016
it is alleged that you aggressively banged on your ceiling and accused one of your neighbours of

	making noises, you then went to your neighbour's flat and started kicking and banging on his front door aggressively, accused him of banging on the floor and was swearing and shouting abuse at him. It is also alleged that you later went downstairs, dragged your neighbour's motorbike from where it was parked and started to hit it with a piece of wood. 8) On 22nd November 2016 during a telephone conversation between you, Mrs Cordell your mother and Ms Sarah Fletcher, neighbourhood officer, Ms Fletcher reported that she overheard you threatened her by saying 'I'm going to do her over' and then 'I'm going to take her job just for fun'. 9) On 8th December 2016, it is alleged that you aggressively banged on one of your neighbours' front door, shouted abuse and threats and accused him of making noise. 10) On 11th December 2016, it is alleged that you aggressively banged on your neighbour's door several times and accused them of banging on pipes. It is also alleged that you shouted abuse and threats at them. 11) On 14th December 2016, it is alleged that you were verbally abusive towards a woman who was visiting one of your neighbours as she knocked on your neighbour's door. <u>15</u> 12) On 23rd December 2016, it is alleged that you banged on a neighbour's front door, shouted abuse at them and asked them to turn their tap off. You then removed their electricity fuse thereby cutting off their power supply. 13. On 26th December 2016, it is alleged that you ran up the communal stairs to the first floor and confronted one of your neighbours as he was going out with his family and started to shout abuse and threats at him and his wife and accused him of tampering with your water supply, you also attempted to stop him from leaving the block. 14) On 3rd January 2017, it is alleged that you confronted one of your neighbours as he returned to the block with his wife and two-year-old daughter and started shouting abuse and threats at them. 15) On 21st January 2017, it is alleged that you aggressively banged on your neighbour's door, swore and shouted abuse and threats at them and accused them of making noises. 16) On 31st January 2017, it is alleged that you aggressively banged on your neighbour's door, shouted abuse and threats at them and accused them of banging on the floor. 17) We received a report that on 7th February 2017 you approached the leaseholder of 117 Burncroft Avenue and his plumber outside the block	
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	as they were attempting to resolve the problem causing low water pressure in the flat. You said to the leaseholder that there were problems between you and his tenants but did not give any specific details. The leaseholder explained to you that his tenants were experiencing low water pressure in the flat and you said to him 'you will not solve the problem as I am restricting their water supply'. The leaseholder later knocked on your door and asked whether you would increase the water pressure and you stated 'I cannot do anything at the moment, I will sort it out later'. 18) On 24th February 2017 Sarah Fletcher (Neighbourhood Officer) and Steve Stirk (Maintenance Surveyor) attended your property at flat 109 Burncroft Avenue to inspect the property following reports of low water pressure from flats 113 and 117 Burncroft Avenue. While inside your flat, they observed that you have installed an iron security gate inside your front door. It also appeared to them that the wall between your kitchen and living room seemed to have been removed thereby creating an open plan effect. Much of the property was <u>16</u> taken up industrial type printers, boxes and folders and there were dog faeces in your back garden. 19) On 17th March 2017 Lemmy Nwabuisi, ASB Coordinator visited 109 Burncroft Avenue to post a letter through your door and as he got into his car to drive off after posting the letter, you ran after him shouting and screaming abuse. The letter requested that you attend our offices to discuss the nuisance reports being received from your neighbours. By the time he returned to the office, you had telephoned him several times. He telephoned you back and you asked whether he was the person that posted a letter through your letterbox and he said yes. You asked why he did not stop when you ran after him and he stated that he had another visit and did not have the time to stop and talk to you. You stated that you will not attend the meeting at the Civic Centre or any of the council offices as you are unable to leave your flat and that the meeting should take place in your flat. Mr Nwabuisi offered to have the meeting at a neutral venue and suggested the local library or at your mother's house but you refused saying that you have done nothing wrong and accused him of taking sides with your neighbours. 20) On 5th May 2017, it is alleged that you threatened one of your neighbours by saying that you will ruin his life and that you were going to the police to present evidence about his illegal activities. 21) On 14th May 2017, it is alleged that you aggressively banged on one of your neighbour's door, shouted abuse and threats at her and falsely accused her of making noise and coming into your flat to attack you. You later followed her to her car	
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	shouting abuse and wanting to know where she was going. 22) On 14th May 2017 it is alleged that you allowed your dog to run freely in the communal area of your block without a lead. 23) On 28th May 2017, the police issued you with a first instance Harassment letter following reports of harassment and threatening behaviour made to the police by one of your neighbours. 24.) On 9th June 2017, it is alleged that you attacked one of your neighbours in the communal hallway of your block as he returned from work late at night by grabbing him on the arm and neck thereby causing bruising to his arm and neck. You also snatched his phone from him as he tried to video-record the incident. <u>17</u> 25) On 16th June 2017 at 11:55hrs it is alleged that you confronted one of your neighbours as she was exiting the main entrance to your building and said to her that you had her bank details and personal details such as date of birth and said to her that you wanted her and her husband to pay you some money. 26) On 18th June 2017 at 11:55hrs it is alleged that you confronted one of your neighbours as she was exiting the main entrance to your building and said to her that you knew what time she went out and what time she returned and to tell her husband that you would like to speak to him. 27) On 23rd June 2017 at 23:35hrs it is alleged that you came out of your flat with your dog without a lead and attacked one of your neighbours as he returned from work by punching him twice on the chest. You tried to push him out of the block and snatched his phone as he brought took it out of his pocket to record the incident. 28) On 28th June 2017 at 11:45hrs it is alleged that you confronted your neighbour as she was leaving the block. You swore and shouted abuse at her and accused her of making noise inside her flat. You told her that you know all her personal details and that of her husband including their full names, phone numbers, date of birth and banking details. You demanded that they pay you some money and asked her to tell her husband to come and see you. 29) On 30th June 2017 at 11:45hrs it is alleged that you confronted your neighbour as she was leaving the block and accused her of slamming the door. She denied slamming the door and called her a liar and proceeded to swear and shout abuse at her. 30) On 2nd July 2017 at 17:18hrs it is alleged that you confronted your neighbour as he was going out with his family with your dog barking and without a lead and asked him when he was going to hand over the money. It is also alleged that as they left the block, you ran after them swearing and shouting abuse at your neighbour and demanding that he must pay you some money if he wants you to	
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	leave him alone. You also said to him that you have all their personal details including their dates of birth and bank details. 31) On 12th July 2017 an Enfield Council Surveyor attended your flat to investigate reports of low water pressure to flats above yours but you refused him access. The Surveyor attended your flat again in the evening of the same <u>18</u> day following further reports that the water supply to the affected flats had completely ceased and you refused him access. You then followed him to his car swearing and shouting abuse at him and prevented him from entering his car. He then called the police. 32) On 11th November 2017 at 11.30am, it is alleged by one of your neighbours that you came to their front door, opened the letterbox and peeped through it to see who was inside the flat. You then started swearing and shouting abuse and banging on their front door as soon as you saw the neighbour's wife. 33) On 2nd January 2018 at 6.30pm, it is alleged that you stood outside your neighbour's property for more than twenty minutes swearing and shouting abuse. You went away and returned half an hour later, you lifted their letterbox, stuck your mobile phone through the letterbox and started to record his family while swearing and shouting abuse. This went on for about fifteen minutes. 34) On 9th January 2018 at about 12.18pm, you telephone Lemmy Nwabuisi (ASB Behaviour officer) and accused him of forging documents to get an antisocial behaviour order against him and you told him that he had made you a prisoner within your home. You also stated that you knew where he lives in Enfield and that he and his family were not safe from you. You also told him that you would watch him leave the office and you would have followed him home and he needed to watch his back. You called the ASB officer again 30 minutes later and told him that you knew he has a flat in Edmonton and also knew that one of his colleagues' lives in Edmonton. You also stated that you knew where they live and they were not safe. 35) On 9th January 2018 you called Kaunchita Maudhub (ASB Behaviour officer) and left a long voicemail on her work telephone number and made threats. 36) On 26th February 2018, at around 11.45pm it is alleged that you came to one of your neighbour's front door and started making loud banging noises and rattling with their letter box. You ran away after the neighbour opened her front door. 37) On 1st March 2018 it is alleged that you knocked on one of your neighbours' door loudly, you started rattling with their letter box and started	
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shouting. This went on for 5 to 10 minutes but you left after you've heard that the neighbour was calling the police.

38) On 15th March 2018 it is alleged that you swore, shouted and assaulted one of your neighbours in front of his wife and his 3 years old child.

39) On 1st May 2018, you attended the Edmonton County Court as there was a hearing listed in relation to an injunction. It is alleged that you started shouting abuse, swore and make threats to two of the Claimant's employees (Lemmy Nwabuisi, ASB officer and Balbinder Kaur Geddes, lawyer) and to one of your neighbours who attended Court to give evidence. You also swore at a judge. These incidents were witnessed by members of staff working at the Court.

40) On 29th May 2018, it is alleged that you attended one of your neighbours' property; you took your dog with you and waited by their front door. It is alleged that you tried to intimidate them as they were due to attend a hearing in the Edmonton County Court to give evidence in support of a claim for an injunction issued against you.

41) On 30th May 2018, it is alleged that you made threats to kill to one of your neighbours. The matter was reported to the police. You were arrested and released on bail.

42) You assaulted one of your neighbours on the 26th August 2018 for flashing his toilet.

43) You telephoned two council officers (Lemmy Nwabuisi and Ludmilla lyavoo) on 12th September 2018 and made threats to them over the telephone. You also accused them of fraud and of fabricating evidence to support the Council's claim for an injunction

44) On 12th September 2018 at about 3.50pm, you called one of your neighbours on his mobile phone using a private number. It is not known how you obtained his number, but he terminated the call. You called again using the same private number, but he terminated the call as soon as he heard your voice. You called repeatedly after that.

45) On 24th September 2018 at about 11.30am, one of your neighbours returned home from dropping her daughter at school and as she entered their block of flat, she noticed that the middle door on the ground floor was open as

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well as your front door. As she went up the stairs to their second floor flat, your dog came out of your flat and started barking at her. The neighbour had to run up the stairs to her flat to escape from the dog. It was reported that your dog is always barking whenever they go out or return to the block and the neighbour and 4 years old daughter are terrified.

46) One of your neighbours reported that his cousin was leaving the block at about on 2nd October 2018 at 12.45pm, and as you exited the

	block, you followed him and suddenly grabbed his jacket from behind and tried to pull him to the ground. The cousin started shouting to attract neighbours and managed to push you off. 47) There are other reports from one of your neighbours who reported that on 30th September 2018, you attempted to break down his front door by kicking it several times only because he flashed his toilet. 48) It is reported that you continue to harass and intimidate other residents on a regular basis. The London Borough of Enfield takes all acts of anti-social behaviour very seriously and will not tolerate such behaviour. You have been served ample warning regarding the complaints made against you. You have breached your tenancy agreement and conditions: Condition 9 “You, the tenant, are responsible for the behaviour of anyone, including your children, living in or visiting your home. This means that you must ensure that they do not act in breach of any of these conditions. Also, you must not encourage them to act in such a way. This applies in the property, in communal and surrounding areas, any property belonging to the council and or anywhere within Enfield borough.” Condition 10 “You must not act in any way which causes, or is likely to cause, a nuisance or annoyance or is anti-social.” Condition 21 <u>21</u> “You must not abuse, harass, make offensive comments and/or malicious allegations, use or threaten to use violence against any of our officers or agents, or against a councillor. This applies at any time and in any place. We may report the matter to the Police.” Condition 31 “You must take care not to cause damage to your property or the property of your neighbours.” Condition 33 “You must keep the inside of your property clean and in reasonable decorative order.” Condition 34 “You must not use the property in any way that may cause a health or safety hazard or encourage vermin and/or pests (for example, by hoarding items inappropriately).” Condition 44 “You must obtain our prior written permission before carrying out any alterations, improvements or structural work to the property. You may need to obtain other permissions such as planning permission or building regulations approval.” Condition 53	
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	“You must keep the inside of the property, the fixtures and fittings and all glass in the property in good repair during the tenancy.” Condition 57 “You must allow our employees, representatives and contractors to come into your property to service any electrical and gas supplies and appliances that we are responsible for maintaining.” 22 Condition 69 “You must not interfere with the electric or gas supply.” Condition 76 “You have the right to keep one pet, or animal such as a cat, a dog, small bird, fish, non-poisonous insect, spider, small snake or lizard, rabbit hamster, guinea pig, mouse, gerbil or domestic rat as long as they do not cause damage to the property, or nuisance or annoyance to anyone in your locality.” Condition 79 “You must always keep your dog(s) on a lead in communal areas and on our land.” This letter should be considered as a pre-action letter. If further breaches of the tenancy conditions were to occur, we would reserve the right to commence possession action of 109 Burncroft Avenue, without further notice. Please note that you are entitled to seek independent legal advice. Yours sincerely, Ludmilla Iyavoo Lawyer For the Director of Law and Governance	
<u>The Doctor’s Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Referral 58-60 Silver Street Enfield Middlesex EN1 3EP Tel: 0208 379 4142 Page Numbers: 23	23 Dear Mr Cordell You have been referred to our Service. We are pleased to offer you the following appointment: Appointment: New referral Clinic: Enfield Adults North MH Locality Date/Time: 28 Sep 2018 11:00 Intended Duration: 60 mins Clinician: Ruslan Zinchenko Address 58-60 Silver Street, Enfield, Middlesex EN1 3EP To make sure that access to our services is fair, please: • Contact us to confirm you can attend, or to arrange another appointment. We may not be able to offer you another appointment if you do not attend this one, or do not tell us that you cannot come. • Arrive on time for your appointment as we may not be able to see you if you are late. Enclosed is more information about the clinic or service you will be using, if this is appropriate. Please complete any enclosed forms prior to your visit and bring them to your appointment. Please contact us on the above number if English is not your first language and you need help or an interpreter. Please also contact us if you have a	21/09/2018 21 Sep 2018

	disability and have additional requirements which you need to discuss before your appointment. Yours sincerely Louiza Vassiliou On Behalf of Barnet, Enfield and Haringey Mental Health Trust	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Circumstances (including immediate action taken by and any views expressed) Page Numbers: 24,25,26,27,28,29	<u>24</u> Date From: 19/08/2018 Time From: 08:12 Date To: 19/08/2018 Time To: 08:12 Incident Location: 109 Burncroft Avenue Enfield Middlesex Concerns: Physical: Psychological / Emotional CAD – 2345 19AUG 2018 Officers attended 109 Burncroft avenue as neighbours from 117 called police to report the subject for knocking on their door repeatedly. On arrival it was clear to officers that the subject suffered with mental health due to his behaviour as well as repeating sentences over and over when police were tried to have a conversation him. The subject displayed agitated behaviour and did not like the presence of police officers, due to previous incidents in the past. The subject was continuously shouting at police, telling them to “fuck off” from his block and that the neighbours are the ones that are harassing him and they apparently always call police on him. The subject's mother showed up on scene shortly after, she was able to calm down the subject. The informant was spoken to by officers and so it was established that no offences have actually taken place, as he only knocked on the door. Neighbours were advised to call back in the event where he returns to their door and starts shouting/banging. LEVEL 2- GREEN: WHEN ADULTS NEEDS ARE NOT CLEAR OR NOT KNOWN; ADULTS' NEEDS WHICH ARE NOT KNOWN OR MAY NOT BEING MET <u>25</u> Notification of Pre-Assessment Checklist Signature Rank Name (Print) FISCA OCU/Unit YE-OPS Name (Print) OCU/Unit Warrant No: P242041 Date: 19/08/2018 <u>26</u> Notification of Pre-Assessment Checklist Rank Name (Print) FISCA OCU/Unit YE-OPS Name (Print) OCU/Unit Warrant No. P242041	19/08/2018

	Date: 19/08/2018 Research: Based on Information available to Police at this time I confirm I have risk assessed this as shown above. NILE, PC (Name, Rank) DATE: 20/08/2018 TIME: 14:18 <u>27</u> RISK ASSESSMENT (CASCADEINFO) MERLIN Ref: 18PAC200243 This report was initially bragged as Green by the PPD. The Merlin was then assessed by Adult Social Worker Shannon Miles who states police research is not required as the subject is known to Social Care or the incident does not raise safeguarding concerns which warrants information sharing. If it becomes apparent research is required, Adult Social Care are to make contact with the PPD. <u>28</u> N/a <u>29</u> Blank	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Referral Page Numbers: 30	<u>30</u> FW: 18PAC200243 - RIO ID 11214451 Kevin Kamese <Kevin.Kamese@enfield.gov.uk> on behalf of The Mash Team <TheMashTeam@Enfield.gov.uk> Tue 21/08/2018 14:14 To: ENFIELD, Assessment service (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) <assessmentservice.enfield@nhs.net>; @j 2 attachments Form87F_7416668.pdf; J2Jorm78_7416668.pdf; Dear Team, Please see the attached for your attention. Regards, Kevin Kamese MASH DSO for Adult Social Care T D2D 8379 3959 —Original Message— From: merlin@met.pnn.police.uk <merlin@met.pnn.police.uk> Sent: 20 August 2018 14:21 To: The Mash Team <TheMASHTeam@enfield.gov.uk> Subject: Ref: 18PAC200243 This email, created by merlin@met.pnn.police.uk, has been securely delivered using Egress Switch and was decrypted on Monday, August 20,2018 2:21:03 PM This is a system generated email so you cannot respond to this email address, if you wish to query any details, then please contact the unit concerned via their normal email address or telephone number. Please find attached a MERLIN file for your attention from: Enfield PPD	21/08/2018 Tue 21/08/2018

• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> To: Me 58-60 Silver Street Enfield Middlesex EN13EP Tel: 0208 379 4142 Page Numbers: 31	<u>31</u> You have been referred to our Service. We are pleased to offer you the following appointment: Appointment: New Referral Clinic: Enfield Adult North Locality Clinic Date/Time: Friday 31 August 2018 09.30 Intended Duration: 60 mins Clinician: Dr Ruslan Zinchenko Address 58-60 Silver Street, Enfield, Middlesex EN1 3EP To make sure that access to our services is fair, please: • Contact us to confirm you can attend, or to arrange another appointment. We may not be able to offer you another appointment if you do not attend this one, or do not tell us that you cannot come. • Arrive on time for your appointment as we may not be able to see you if you are late. Enclosed is more information about the clinic or service you will be using, if this is appropriate. Please complete any enclosed forms prior to your visit and bring them to your appointment. Please contact us on the above number if English is not your first language and you need help or an interpreter. Please also contact us if you have a disability and have additional requirements which you need to discuss before your appointment. Louiza Vassiliou On Behalf of Barnet, Enfield and Haringey Mental Health Trust	16/08/2018 16 Aug 2018
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> Met Police Referral Page 3 of 3 the rest is missing Page Numbers: 32	<u>32</u> Aug 2016 Threatened to kill his neighbour and 2 children. Mother alerted the police, was picked up and arrested. Was assessed by the Forensic Medical Examiner and felt he needs to be sectioned and admitted. Merlin Report 19/08/2018 Police was called by neighbours and reported that he was knocking continuously on their door. He was verbally aggressive to the police. Named as alleged perpetrator in SOVA alert against another service user who lives in the same building. On 30/09/2018 a service user known to the Forensic Mental Health Team-Enfield had reported to his CPN that Mr Cordell has threatened to break down his door. Not on MAPPA Please refer to Risk Assessment on RIO	19/08/2018
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> REFERRAL FORM - Enfield Crisis Resolution & Home Treatment Team	<u>33</u> Request Amp Worker	19/10/2018

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<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> London Borough of Enfield Approved Mental Health Professional Assessment Form Greensides 72 Hour Assessment! Page Numbers: 34,35,36,37	<u>34</u> Services involved: chase farm Consultant: Jonathan Greensides GP: Dr Chong Nightingale House Sgy 1 Nightingale Road N9 8AJ 0208 805 9997 Date of initial referral: 25/10/2018 Date of assessment: 25/10/2018 Place of assessment: Wood Green Police Station <u>Medical recommendations from:</u> Dr. P Keane Date: 25/10/2018 Dr. S Hewitt Date: 25/10/2018 Detained by Police Time of admission: 6:30 PM Any delays in admission process? N/A Time assessment: Started: 3:30 PM Completed: 6:30 PM <u>35</u> Summary of assessment Patient's name Simon Cordell Date of assessment 25/10/2018 1. Referral details and any other precipitating factors He was arrested today for spitting at a police officer after they were called about him harassing his neighbours. He also has a number of non-molestation orders against him, forbidding him contacting them. It was also reported that he appeared to be thoughts disorder, held a number of grandiose and delusional beliefs. Said the police were conspiring with medics and the council to silence him as he had uncovered police corruption. He also said his neighbours two floors above were controlling the neighbour below them and caused them to stamp on the floor and disturb him. police liaison requested a mental health act assessment, recent attempted mental health assessment but he refused to engage, a report went to court but they refused a warrant to complete an assessment. 2. Relevant social and medical history Mr Cordell was a victim of sexual abuse as a child and attended SAFE under Dr Caplan for a long time. He was arrested for burglary as a young man and was remanded in custody in a Young offender's institution for a prolonged period. During this period, he was discovered making preparation to kill himself by hanging. It is recorded that he has used laughing gas and LSD. He was arrested for organizing illegal raves It seems that he may base his complaints for Police Harassment as he believes they have obstructed his	25/10/2018

	ability to run this business. It is reported that he was made the subject of an ASBO, required to wear a tag and believed he could not go out at all for about a year. He was banned from visiting bams derelict buildings and factories and had a curfew. Medical: Mr Cordell suffers from Crohn's disease but does not eat properly to manage his symptoms and will not seek medical advice for this. In 2014 there were many deaths in the family from natural causes especially his grandmother to whom he was very close. He was assessed for admission in November 2104 but not detained. During this period, he spent many hours in doors his mother kept smelling gas but no leak was detected despite repeated complaints. He felt very ill and spent some days in hospital. Sometime later it was discovered the gas and carbonmonoxide meters were incorrectly installed and he was without heating or hot water for 6 weeks. 3. Record of interview with patient (Include where it was conducted who was present and use of police if required during process) Mental Health Act Assessment Wood Green Police Station, Dr s Hewitt And Dr P Keane. section 2 application by Anthony manning. The patient seen in the police cell, he was arrested today as the police called to his flat re him breaking a harassment order, he assaulted the police who attended, and spat at them. on interview he had pressure of speech, delusions about his neighbours and the police and housing ganging up against him. He denied drug use. He does not feel he has a mental disorder, spoke about organising St Ann's when he was admitted in the past, both doctors found him hypomanic, flight of speech, and grandiose. Said the police were conspiring with medics and the council to silence him as he had uncovered police corruption. He also said his neighbours two floors above were controlling the neighbour below them and caused them to stamp on the floor and disturb him. police liaison requested a mental health act assessment, recent attempted mental health assessment but he refused to engage, a report went to court but they refused a warrant to complete an assessment, he was also thought disordered, see medical recommendation for evidence. taking all the circumstances of the case into consideration including his human rights I made a section 2 application based on two medical recommendations. See medical recommendations for details. 4. Assessment of risk to patient and/or to others Mr Cordell seems to have a history of deteriorating behaviour and feelings of persecution and since 2014	
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	after the deaths in his family and the carbon monoxide poisoning. He has been taping everything and has Closed circuit TV outside his flat. It is reported that he believes the TV is talking about him. He has been depressed in the past and attempted to take his own life. He seems to have some very grandiose plans to run Raves but no evidence that he has any funds for it. this is a long running issue that has not changed since his admission in 2016 given his presentation today he would be a risk to other if not assessed under the mental health act and then treated. 36 Patient's name Simon Cordell Date of assessment 25/10/2018 5. Consultation with Nearest Relative and process of identifying the Nearest Relative Lorraine Cordell his mother is one of the few people he still trusts to support him. He has become dependent on her to do his grocery shopping or care for his dog. He has no regular partner or child over 18 years. I deem his mother to be Nearest Relative, she believes there has been a difference in him since he suffered carbon monoxide poisoning in 2014 she sees no change in him but does feel he needs mental health assistance and treatment, she does feel he got detained under false pretence as we deemed him to be delusional in his thoughts about the police and his neighbours, she does feel he suffers from depression and does need treatment for this. 6. Consultation with Assessing Doctors Both Doctors were of the opinion that he had pressure of speech and that his thought processes are delusional. they do not feel he can be treated in the community. 7. Views of others consulted 8. Mental Capacity Act 2005 Mr Cordell seemed to want to demonstrate his innocence and evidence that he was being unreasonably harassed. He had no concept that his behaviour would be seen as unacceptable and was in fact putting his tenancy at risk. He does not accept that his presentation may be the result of a mental disorder and that he needs an assessment of his mental state and treatment for this, so he could not agree to an informal admission. I deemed him to lack capacity to make this decision today. 9. Reason for decision to make the application (including choice of Section) Mr Cordell seems to have a history of deteriorating behaviour and feelings of persecution and since 2014 after the deaths in his family and the carbon monoxide poisoning. He has been taping everything	
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	and has Closed circuit TV outside his flat. It is reported that he believes the TV is talking about him. He has been depressed in the past and attempted to take his own life. He seems to have some very grandiose plans to run Raves but no evidence that he has any funds for it. this is a long running issue that has not changed since his admission in 2016 given his presentation today he would be a risk to other if not assessed under the mental health act and then treated. section 2 allows a period of assessment and or treatment for his mental disorder so this was the appropriate section to make today. 37 10. If not admitted to hospital, outline immediate plans for alternative to admission and how those plans will be co-ordinated Detained 11. If admitted arrangements for: a) Dependants (including children) None b) Securing property N/A c) Pets Simon has a dog his mother agreed to look after his dog while he was in hospital. 12. Any other practical matter (including information/advice about children visiting the ward) the police may want to still charge him with the alleged assault witch he was arrested for. 13. Comment on any avoidable delays in the assessment and admission process AMHP Signature Print details: Anthony Manning Contact details: 65C PARK AVENUE, BUSH HILL, ENFIELD, EN1 2HL. Date: 25/10/2018 Tel: 0208 364 1844	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Stage 3 Folder: 3 Chas Farm Hospital Record of detention in hospital Page Numbers: 38	38	26/10/2018
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> Stage 3 Folder: 3 Medical Recommendation for Admission for Assessment Dr. Sarah Katherine Hewitt	39 Hand Wrote Document! 40 Hand Wrote Document!	25/10/2016

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<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Medical Recommendation for Admission for Assessment Dr. P M Keane? Page Numbers: 41	41 I had previous acquaintance with the patient before I conducted that examination. I am approved under section 12 of the Act An having special experience in the diagnosis or treatment of mental disorder, In my opinion (a) this patient is suffering from mental disorder of a nature or degree which warrants the detention of the patient in hospital for assessment (or for assessment followed by medical treatment) for at least a limited period.	25/10/2016
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> To: Chas Farm Hospital Application by an Approved Mental Health Professional for Admission for Assessment Anthony Manning Page Numbers: 42,43	42 I am acting on behalf of <u>Enfield Council</u> and am approved to act as an approved mental health professional for the purposes of the Act by [that authority] 43 Info	25/10/2018
<u>The Doctor's Folder / pub Book Issue: 1!</u> Private Medical Notes Page Numbers: 44,45,46,47,48,49,50	44 Ecg Heart Check 45 Notes NIGHTINGALE SURGERY 46 Notes NIGHTINGALE SURGERY 47 Notes NIGHTINGALE SURGERY 48 Notes NIGHTINGALE SURGERY 49 Notes Ambulance 50 Notes Ambulance	26/10/2018
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Dorset ward Mental Health Tribunal Report	51 Circumstances of admission and back ground Mr Cordell is a 37 years old man with previous diagnosis of F29X - Unspecified nonorganic psychosis. He has been known to CAMHS service	01/11/2018 Date: 01/11/2018

Barnet, Enfield and Haringey Mental Health Trust
The Chase Building 127 The Ridgeway
Enfield EN2 8JL Tel: 020 87024669
Fax: 020 8375 1442

Page Numbers:

51,52,53,54,55,56,57,58,59,
60,61,62,63,64

in the past and to Adult Mental Health Services since **2014**

However, he has not been engaging with the services in recent years despite numerous attempts from mental health teams.

Mr Cordell become significantly unwell in mental health in

2014

He deteriorated significantly in mental state but he refused engage with mental health service and declined to take medication. Consequently, he had to be detained under Section 2 of MHA in

2016

He was treated with medication (Olanzapine) during the admission but soon after discharge he stopped taking his medication. He continued to be seen by Early Intervention service following a discharge but he continued to refuse any treatment for his condition. This led to further deterioration in mental health. When Mr Cordell is unwell, he presents with persecutory delusions about his neighbours, council staff and the police. As a result of paranoid beliefs, he becomes more aggressive and threatening especially towards neighbours. From

2016 to January 2018

there were numerous complaints from neighbours reported about Mr Cordell's acts of harassment and antisocial behaviour. This led to an interim injunction order (harassment order) to be issued against Mr Cordell, at the Edmonton County Court, in

January 2018

Mr Cordell breached the order on multiple occasions. It has been reported that his neighbours have been assaulted, harassed and have received threats from Mr Cordell. In addition, Mr Cordell disengaged with EIS.

In

April 2018

further deterioration in mental health was observed when he contacted the police and complained about the neighbours making noise. EIS team was contacted and they offered to review Mr Cordell but he refused to work with them again.

On the

01st of June

he was arrested for harassing his neighbours and breaching the injunction order against him. He threatened his neighbour who was at the time with her two children that he

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will kill her and her children "You fucking bitch, I have a bomb for you, I will get in your block, kill you and your children at that point, EIS stated that he has gone beyond EIS three-year treatment period and therefore they referred his case to Enfield North Locality Team in June 2018. During the period of next few months (from June 2018 until October 2018 - they were reported numerous accounts of

	harassment and assaults to his council on his neighbour) Mr Cordell has continued to harass his neighbours and has refused to engage with mental health services. Few neighbours already moved out from their flats due to Mr Cordell's aggressive behaviour and Enfield Council decided to seek possession of Mr Cordell's flat via the courts. In a recent court case, the judge recommended that Enfield Council re-house Mr Cordell on the proviso that he engages with the MH Team. However, he failed to do that. In October 2018, Mr Cordell was physically aggressive towards another service user who lives in the same building as him. Mr Cordell took him by the throat and left him feeling unable to walk around on the floor or even flush his toilet chain for fear of sparking another altercation (with no basis) about excessive noise. This triggered a safeguarding process and Enfield Adult North Locality Team decided to organise MHA assessment as Mr Cordell refused to engage with them. Consequently, he was referred for MHA assessment on the 17th of October 2018. Enfield Adult North Locality Team agreed that he is at risk to others and his behaviour could also put him at risk from others. Application for 135(1) was made however a judge found insufficient evidence presented for a warrant. He was referred to a forensic sector following this event. On the 25th of October he was arrested as the police were called to his flat regarding him breaking a harassment order and that day, he allegedly assaulted the police who attended by spitting. Consequently, he was taken to Wood Green police station. He was found to be thought disordered with grandiose and persecutory delusions, hypomanic with flight of ideas and pressured speech. Therefore, MHA assessment was organised. He was detained under section 2 of MHA and admitted to Dorset ward, Chase Farm Hospital on the 25th of October 2018. Mr Cordell explained that the police were conspiring with medics and the council to silence him as he had uncovered police corruption. He also said his neighbours two floors above were controlling the neighbour below them and caused them to stamp on the floor and disturb him. It was reported that he appeared to lack insight into his presentation as he did not believe he was mentally unwell and was adamant to see a psychiatrist for treatment. Mental state examination on admission Mr Cordell is 37-year-old male, mixed origin, slim build. He was wearing casual and dirty clothes. He engaged in conversation and made eye contact throughout. He was calm and polite during the interview; no aggression was observed but did become mildly restless at points. The conversation was one sided with Mr Cordell keen to talk. He	
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	presented with pressured speech and flight of ideas. Mood, subjectively he described as “fine, a bit elated”, objectively he was elated. Thoughts: He presented thought disordered with tangential thinking, grandiose and persecutory delusions. He was oriented to time, place and person. He presented with poor insight - does not want any medications, he does not believe that has a mental health disorder. Risk To self – high 53 Immediate risk to self is low as he denies any thoughts of self-harm or suicide. There are previous reports of suicide attempt as teenager. However, he is at high risk of being evicted from his property at present due to deterioration in his mental state and behaviour and his mental and physical health could be significantly affected if he becomes homeless. To others - high He denies thoughts or plans to hurt others. He has clearly documented history of aggressive behaviour and currently elated. From others - high, as he can be aggressive towards others, he is at risk of retaliation from others. Risk of physical and verbal aggression towards others noted. This in turn, increases risk of others retaliating, therefore harm towards Mr Cordell. Past psychiatric history: Mr Cordell reportedly had disrupted childhood spending some adolescence in care. He was under CAMHS due to anxiety as a teenager. Mr Cordell tried to hang himself at the age of 16 when in a young offender’s institution; he says he lost consciousness and needed to be resuscitated. He was moved to a high security hospital and kept in seclusion on a number of occasions, but he says he would destroy the padded cell with his teeth. He says he was seen regularly by a psychiatrist called Dr Caplin from "the safe project". Mr Cordell says there was a second occasion where he tried to hang himself when in a cell after he was sentenced. Mr Cordell denies any contact with Mental Health Services between that point and 2014. In March 2014 - He was diagnosed with Adjustment reaction “anxiety and suicidal thoughts over the last nine months in the context of having a pending court case (accused of burglary). He was offered Sertraline 50mg OD. In November 2014 - Mr Cordell was under Home Treatment Team. He was diagnosed with Psychotic episode - not deemed sectionable under MHA. Following this episode, he disengaged with mental health service. In November 2015 - He was referred via BEH HUB to mental health services. At that time Mr Cordell was not eating, not sleeping, he was paranoid saying people were talking about him or laughing at him, believed the government was advertising things	
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about him, the TV was talking about him and talking directly to him. He was smoking cannabis at that time. He was again found non sectionable under MHA and disengaged with the service.

In February 2016 it was applied for Warrant 135 (1) - but not sufficient evidence was presented to the judge for a warrant.

In August 2016, he was admitted under Section 2 of the MHA following custody at Wood Green station for threats to kill - section 2 reversed on appeal. He was discharged on Olanzapine 5mg and followed up by EIS. It was reported poor compliance with medication on discharge. Consequently, he was discharged from EIS due to disengagement.

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Past medical history:

Simon said he had Crohn's disease as a child. He denied any other physical health problems.

Current medications

Nil.

Personal/family history- information taken from previous assessments/reports

Mr Cordell was born at Chase Farm Hospital. He has a younger brother and sister. Mr Cordell says he knows his maternal grandmother attempted suicide on a number of occasions and had had admissions to mental hospital. Mr Cordell's father worked as a union representative and his mother ran her own computer company. His parents recently divorced. Mr Cordell says he did not get on well with his father who was a violent man. He was violent towards Mr Cordell, Mr Cordell's mother and siblings. Mr Cordell left home at the age of fifteen and was homeless for a while. He was placed in to care after stealing a pint of milk. He was placed in a series of children's care homes around the UK, but says that each time he would steal a car and drive back to London.

Mr Cordell said he was pushed hard to achieve at school by his father and that he was "an A-star student" for most of the time. He says he was intelligent and would do the work at other times and as a result would often just "mess about" in class. He went on to college and studied engine mechanics, completing a city & guilds qualification. After leaving school he went on to get jobs in the construction industry.

Mr Cordell says he has tried to build himself up a business for providing party entertainment. At the moment he says he is not able to earn from this due to the restrictions of his bail.

Mr Cordell has had two long term relationships. First relationship lasted for thirteen years. Mr Cordell thinks they broke up due to the repeated involvement of the police in their lives and the stress this has caused. He is currently in a relationship with Katy and he said that they were expecting a baby. Mr Cordell says he does not smoke tobacco and does not drink alcohol.

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Grandmother (? maternal) had BPAD and/or schizophrenia.

Social history:

Mr Cordell works from home currently. He says that he does 9-10-hour shifts building his website.

Previously he has had multiple different jobs including working at a market and brick laying. He has a new baby on the way with Katy - due to get married soon.

From Rio - "Enfield Council will be seeking possession of Mr Cordell's flat via the courts. In a recent court case, the judge recommended that Enfield Council re-house Mr Cordell on the proviso that he engages with the MH Team.

He failed to fulfil the requirement.

Drug and alcohol history- information taken from previous assessments/reports

He reported being "Clean as anything, occasionally have a puff of a cigarette". He denies drinking any alcohol. However, UDS was positive for cannabis on admission.

Note on Rio: previous LSD and cannabis use.

Forensic history -information taken from previous assessments/reports

He reported being linked to 500 cases but he has won every one. He says these are all linked to driving offences.

From Rio - 2015- 5y ASBO for organising illegal raves- not allowed to enter industrial or disused premises between 10pm and 7 am.

Young Offender's Institution at the age of 16 after repeated driving offences (driving without a license). Taken into custody for threats to kill.

August 2017

an injunction order was issued though this was discharged by the court in

November 2017

due to a procedural error

On the

09th of January 2018

an injunction order was issued against him due to verbal and physical abuse towards his neighbours and council employees and antisocial behaviour. He breached the injunction order on multiple occasions. This was discharged in

July 2018

following a forensic psychiatry assessment which deemed him to lack capacity to understand the conditions of the injunction (as a result of a psychotic illness).

Enfield council report was issued recently regarding tenancy concerns and breaches:

The report says the following:

	We have received several complaints of anti-social behaviour against you and going back to 2016 for which you have been warned numerous times, verbally and formally in writing. Please see below a list of reports made against you: 1) On 06th July 2016 it is alleged that you approached an elderly neighbour as he came out of his flat and started to shout abuse and swear at him and threatened to burn down his flat. 2) Sometime in July 2016 it is alleged that you damaged the lock of a neighbour's electric cupboard and removed his fuse box resulting in no electricity to his flat. 3) On 06th August 2016 it is alleged that you threatened one of your neighbours and his wife and aggressively demanded money from him. It is also alleged that you repeatedly swore and shouted 56 abuse at him and his wife and called his wife a 'bitch' and tried to stop him from going up the stairs to his flat by standing in front of him. 4) Sometimes in September 2016 it is alleged that you confronted an elderly neighbour outside your block of flats, 109-119 Burncroft Avenue as he was going to the local park with another resident and started to shout abuse and He was arrested on the 1st of June due to breaching the injunction order. threats at him and said to him 'I can get you over at the park, I know you go for a walk'. 5) On 27th September 2016 it is alleged that you confronted one of your neighbours as he was returned to his flat with his family and threatened and swore at him and demanded money from him. It is also alleged that you later banged on his door, shouted further abuse and swearwords at him and accused him of making noises inside his flat. 6) On 28th September 2016 it is alleged that you aggressively banged on a neighbour's door and threatened and shouted verbal abuse and swear words at them. It is also alleged that you aggressively demanded money from him.	
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	7) On 04th October 2016 it is alleged that you aggressively banged on your ceiling and accused one of your neighbours of making noises, you then went to your neighbour's flat and started kicking and banging on his front door aggressively, accused him of banging on the floor and was swearing and shouting abuse at him. It is also alleged that you later went downstairs, dragged your neighbour's motorbike from where it was parked and started to hit it with a piece of wood. 8) On 22nd November 2016 during a telephone conversation between you, Mrs Cordell your mother and Ms Sarah Fletcher, neighbourhood officer, Ms Fletcher reported that she overheard you threatened her by saying 'I'm going to do her over' and then 'I'm going to take her job just for fun'. 9) On 08th December 2016 it is alleged that you aggressively banged on one of your neighbours' front door, shouted abuse and threats and accused him of making noise. 10) On 11th December 2016 it is alleged that you aggressively banged on your neighbour's door several times and accused them of banging on pipes. It is also alleged that you shouted abuse and threats at them. 11) On 14th December 2016 it is alleged that you were verbally abusive towards a woman who was visiting one of your neighbours as she knocked on your neighbour's door. 12) On 23rd December 2016 it is alleged that you banged on a neighbour's front door, shouted abuse at them and asked them to turn their tap off. You then removed their electricity fuse thereby cutting off their power supply. 13. On 26th December 2016 it is alleged that you ran up the communal stairs to the first floor and confronted one of your neighbours as he was going out with his family and started to shout abuse and threats at him and his wife and accused him of tampering with your water supply, you also attempted to stop him from leaving the block. 14) On 03rd January 2017	
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	it is alleged that you confronted one of your neighbours as he returned to the block with his wife and two-year-old daughter and started shouting abuse and threats at them. 15) On 21st January 2017 it is alleged that you aggressively banged on your neighbour's door, swore and shouted abuse and threats at them and accused them of making noises. 16) On 31st January 2017 it is alleged that you aggressively banged on your neighbour's door, shouted abuse and threats at them and accused them of banging on the floor. 17) We received a report that on 07th February 2017 you approached the leaseholder of 117 Burncroft Avenue and his plumber outside the block as they were attempting to resolve the problem causing low water pressure in the flat. You said to the leaseholder that there were problems between you and his tenants but did not give any specific details. The leaseholder explained to you that his tenants were experiencing low water pressure in the flat and you said to him 'you will not solve the problem as I am restricting their water supply'. The leaseholder later <u>57</u> knocked on your door and asked whether you would increase the water pressure and you stated 'I cannot do anything at the moment, I will sort it out later'. 18) On 24th February 2017 <u>Sarah Fletcher</u> (Neighbourhood Officer) and <u>Steve Stirk</u> (Maintenance Surveyor) attended your property at flat 109 Burncroft Avenue to inspect the property following reports of low water pressure from flats 113 and 117 Burncroft Avenue. While inside your flat, they observed that you have installed an iron security gate inside your front door. It also appeared to them that the wall between your kitchen and living room seemed to have been removed thereby creating an open plan effect. Much of the property was taken up industrial type printers, boxes and folders and there were dog faeces in your back garden. 19) On 17th March 2017 Lemmy Nwabuisi, ASB Coordinator visited 109 Burncroft Avenue to post a letter through your door and as he got into his car to drive off after posting the letter, you ran after him shouting and screaming abuse. The letter requested that you attend our offices to discuss the nuisance reports being	
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	received from your neighbours. By the time he returned to the office, you had telephoned him several times. He telephoned you back and you asked whether he was the person that posted a letter through your letterbox and he said yes. You asked why he did not stop when you ran after him and he stated that he had another visit and did not have the time to stop and talk to you. You stated that you will not attend the meeting at the Civic Centre or any of the council offices as you are unable to leave your flat and that the meeting should take place in your flat. Mr Nwabuisi offered to have the meeting at a neutral venue and suggested the local library or at your mother's house but you refused saying that you have done nothing wrong and accused him of taking sides with your neighbours. 20) On 05th May 2017 it is alleged that you threatened one of your neighbours by saying that you will ruin his life and that you were going to the police to present evidence about his illegal activities. 21) On 14th May 2017 it is alleged that you aggressively banged on one of your neighbour's door, shouted abuse and threats at her and falsely accused her of making noise and coming into your flat to attack you. You later followed her to her car shouting abuse and wanting to know where she was going. 22) On 14th May 2017 it is alleged that you allowed your dog to run freely in the communal area of your block without a lead. 23) On 28th May 2017 the police issued you with a first instance Harassment letter following reports of harassment and threatening behaviour made to the police by one of your neighbours. 24.) On 09th June 2017 it is alleged that you attacked one of your neighbours in the communal hallway of your block as he returned from work late at night by grabbing him on the arm and neck thereby causing bruising to his arm and neck. You also snatched his phone from him as he tried to video-record the incident. 25) On 16th June 2017 at 11:55hrs it is alleged that you confronted one of your neighbours as she was exiting the main entrance to your building and said to her that you	
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	had her bank details and personal details such as date of birth and said to her that you wanted her and her husband to pay you some money. 26) On 18th June 2017 at 11:55hrs it is alleged that you confronted one of your neighbours as she was exiting the main entrance to your building and said to her that you knew what time she went out and what time she returned and to tell her husband that you would like to speak to him. 27) On 23rd June 2017 at 23:35hrs it is alleged that you came out of your flat with your dog without a lead and attacked one of your neighbours as he returned from work by punching him twice on the chest. You tried to push him out of the block and snatched his phone as he brought took it out of his pocket to record the incident. 28) On 28th June 2017 at 11:45hrs it is alleged that you confronted your neighbour as she was leaving the block. You swore and shouted abuse at her and accused her of making noise inside her flat. You told her that you know all her personal details and that of her husband including their full names, phone numbers, date of birth and banking details. You demanded that they pay you some money and asked her to tell her husband to come and see you. 29) On 30th June 2017 at 11:45hrs it is alleged that you confronted your neighbour as she was <u>58</u> leaving the block and accused her of slamming the door. She denied slamming the door and called her a liar and proceeded to swear and shout abuse at her. 30) On 02nd July 2017 at 17:18hrs it is alleged that you confronted your neighbour as he was going out with his family with your dog barking and without a lead and asked him when he was going to hand over the money. It is also alleged that as they left the block, you ran after them swearing and shouting abuse at your neighbour and demanding that he must pay you some money if he wants you to leave him alone. You also said to him that you have all their personal details including their dates of birth and bank details. 31) On 12th July 2017	
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	an Enfield Council Surveyor attended your flat to investigate reports of low water pressure to flats above yours but you refused him access. The Surveyor attended your flat again in the evening of the same day following further reports that the water supply to the affected flats had completely ceased and you refused him access. You then followed him to his car swearing and shouting abuse at him and prevented him from entering his car. He then called the police. 32) On 11th November 2017 at 11.30am, it is alleged by one of your neighbours that you came to their front door, opened the letterbox and peeped through it to see who was inside the flat. You then started swearing and shouting abuse and banging on their front door as soon as you saw the neighbour's wife. 33) On 02nd January 2018 at 6.30pm, it is alleged that you stood outside your neighbour's property for more than twenty minutes swearing and shouting abuse. You went away and returned half an hour later, you lifted their letterbox, stuck your mobile phone through the letterbox and started to record his family while swearing and shouting abuse. This went on for about fifteen minutes. 34) On 09th January 2018 at about 12.18pm, you telephone Lemmy Nwabuisi (ASB Behaviour officer) and accused him of forging documents to get an anti-social behaviour order against him and you told him that he had made you a prisoner within your home. You also stated that you knew where he lives in Enfield and that he and his family were not safe from you. You also told him that you would watch him leave the office and you would have followed him home and he needed to watch his back. You called the ASB officer again 30 minutes later and told him that you knew he has a flat in Edmonton and also knew that one of his colleagues' lives in Edmonton. You also stated that you knew where they live and they were not safe. 35) On 09th January 2018 you called Kaunchita Maudhub (ASB Behaviour officer) and left a long voicemail on her work telephone number and made threats. 36) On 26th February 2018 at around 11.45pm it is alleged that you came to one of your neighbour's front door and started making loud banging noises and rattling with their letter box.	
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	You ran away after the neighbour opened her front door. 37) On 01st March 2018 it is alleged that you knocked on one of your neighbours' door loudly, you started rattling with their letter box and started shouting. This went on for 5 to 10 minutes but you left after you've heard that the neighbour was calling the police. 38) On 15th March 2018 it is alleged that you swore, shouted and assaulted one of your neighbours in front of his wife and his 3 years old child. 39) On 01st May 2018 you attended the Edmonton County Court as there was a hearing listed in relation to an injunction. It is alleged that you started shouting abuse, swore and make threats to two of the Claimant's employees (Lemmy Nwabuisi, ASB officer and Balbinder Kaur Geddes, lawyer) and to one of your neighbours who attended Court to give evidence. You also swore at a judge. These incidents were witnessed by members of staff working at the Court. 40) On 29th May 2018 it is alleged that you attended one of your neighbours' property; you took your dog with you and waited by their front door. It is alleged that you tried to intimidate them as they were due to attend a hearing in the Edmonton County Court to give evidence in support of a claim for an injunction issued against you. 41) On 30th May 2018 it is alleged that you made threats to kill to one of your neighbours. The matter was reported to the police. You were arrested and released on bail. 42) You assaulted one of your neighbours on the 26th August 2018 for flashing his toilet. 43) You telephoned two council officers (Lemmy Nwabuisi and Ludmilla lyavoo) on 12th <u>59</u> September 2018 and made threats to them over the telephone. You also accused them of fraud and of fabricating evidence to support the Council's claim for an injunction	
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	44) On 12th September 2018 at about 3.50pm, you called one of your neighbours on his mobile phone using a private number. It is not known how you obtained his number, but he terminated the call. You called again using the same private number, but he terminated the call as soon as he heard your voice. You called repeatedly after that. 45) On 24th September 2018 at about 11.30am, one of your neighbours returned home from dropping her daughter at school and as she entered their block of flat, she noticed that the middle door on the ground floor was open as well as your front door. As she went up the stairs to their second floor flat, your dog came out of your flat and started barking at her. The neighbour had to run up the stairs to her flat to escape from the dog. It was reported that your dog is always barking whenever they go out or return to the block and the neighbour and 4 years old daughter are terrified. 46) One of your neighbours reported that his cousin was leaving the block at about on 02nd October 2018 at 12.45pm, and as you exited the block, you followed him and suddenly grabbed his jacket from behind and tried to pull him to the ground. The cousin started shouting to attract neighbours and managed to push you off. 47) There are other reports from one of your neighbours who reported that on 30th September 2018 you attempted to break down his front door by kicking it several times only because he flashed his toilet. 48) It is reported that you continue to harass and intimidate other residents on a regular basis. On the 25th of October 2018 he was arrested for breaching the injection order and spitting at the police officer on arrest. Treatment and progress on the ward On admission to Dorset ward, Mr Cordell presented elated, mildly irritable and thought disordered. On arrival to the room he remained calm and polite. He started the conversation by asking for duty doctor's name, which he wrote down on a paper. He then stated he has been detained here illegally because they think he is grandiose. He then went onto give the duty doctor a timeline of events which were largely related to the police and his connection with mental health services. In summary, he holds paranoid ideas that the police have charged him 'in	
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	illegal ways' for an ASBO for 'organisation of illegal raves. This has led to several on-going issues with the police who have involved mental health services and it is a conspiracy against him. He states he wasn't assessed properly by doctors today 25/10/2018 and that the doctors who saw him today 25/10/2018 have previously tried to section him and 'failed' because he has 'video recordings' to prove he is innocent. He referred to multiple acts and dates which apparently are being broken by keeping him here. He states he has several businesses that the police have tried to stop, including 'owning festivals' and his website called 'horrific corruption' and associated newsroom which he uses to expose police and doctors who are working in illegal ways. He states he has 'been wronged 78 times by the police' and will 'expose all of the doctors and police' involved. He spoke about being a 'privileged member of the community' and has never tried to hurt anyone. He reports the police have framed him in a 'sex scandal' and caused multiple issues. He described a negative relationship with neighbours and states that they bang from above continuously. He states a previous partner was pregnant and the neighbours banging led to the 60 baby being lost. He denies having a mental health illness and states he will get out of here once he has his laptop containing video graphic proof and was requesting a tribunal. During the course of the conversation he refused to acknowledge he has been sectioned and was adamant he would be able to leave but was not forceful or physically attempting to leave. When he was seen by ward doctor on the 26th of October 2018 Mr Cordell feels he is in hospital because the police have "falsified" a report that led to him being kept on a curfew for years. He proceeded to talk at length about circumstance that led him to be charged for handling of stolen goods and suspicion of burglary in 2013 He believes the case was handled poorly and is sure the police were conspiring against him. "The abuse of process by the civil service was unreasonable". Following this he reports being placed on a 2-year injunction and a 5-year curfew. He feels this has led to a breakdown in a 13-year relationship he had. He also reports this affecting his company -a community interest company he started up. At one-point Mr Cordell also mentioned the police targeting him for holding large parties that he was adamant were not hosted by him.	
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	Mr Cordell reports owning a couple of local festivals and talks about engaging with multiple charities helping children. He says he had to stop this as police were harassing him in front of the children. He alleges to own his own company, his own paper and has just bought his own book maker for 70000 pounds. He also reports having 180000 friends on Facebook due to all his free parties. When asked about his neighbours Mr Cordell said he believes his neighbours have been making up complaints about him. "My neighbours are calling up the police after forging the paperwork." He feels that his neighbours have been attacking him and reports feeling anxious in his house. Simon says he "kept writing to the police saying please can you protect me". He does not think he is unwell and does not think he has a mental health problem. He admits he might be elevated but he believes this is a constructive state. Mr Cordell reports not being compliant with any of his medication at any point. He is refusing to take any medication during this admission. "I've spent thousands of pounds showing you my brain, me being alert saves lives." Mr Cordell would like to appeal his section and feels that by keeping him in hospital we are breaching his rights. "Physical or mental suffering amount to torture" He reports sleeping, eating and drinking well. Later he suggested this may not be the case stating "In the night time when my neighbours are asleep that's the best time for working". Impression was that he presented with paranoid and grandiose delusions with significant mood component. In view of long-term symptoms this is most likely consistent with a Schizoaffective disorder. He does not currently have capacity for treatment or admission. He settled in over the weekend, personal hygiene remained poor, smell of cannabis on him was noticed. On the 29/10/2018 29th October 2018 when he was seen by a nurse, he was irritable and quite hostile. He was 61 on the phone to his relative, complaining about police and claimed to be falsely accused. On the 29th of October Formulation meeting was held: Care coordinator 's feedback: This is only the second time meeting Simon. There have been issues with reports he is assaulting other residents in his council accommodation. Nursing report: He appears paranoid on the ward. Interview with patient:	
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	Mr Cordell appeared very agitated and vocal and was keen to put across his opinion that he had been illegally detained. Mr Cordell reports issues with police actions in regards to not giving him the ASBO folder properly - this was left outside instead of giving it to him directly. Mr Cordell continued to explain other problems with the police's treatment of him. This includes the metropolitan police having placed a photo of Mr Cordell in a folder in regards to a party he had no involvement with. He denies being involved in any of the parties mentioned in the ASBO. Mr Cordell spoke at length about the injustices surrounding his placement on curfew and the ASBO order. He describes how on multiple times doctors have tried to assess him under the MHA and he has explained to them at each time the situation with the police. He was once placed under a section 2 and was able to appeal his section. Mr Cordell reports the neighbours (72 floors up) trying to deliberately disturb him by making a lot of noise and flushing the toilet multiple times. He feels they want him to get distressed and go upstairs to address them. They have been doing this over the last 4 years and are doing this throughout the day. From Mr Cordell's flat you can even hear them talking - there is apparently very poor sound proofing. Mr Cordell has described a council official as having forged statements and falsely accusing him of threatening his life. Mr Cordell reports that he is being assaulted by his neighbours as is his partner's small child. He feels the stress from this situation may have been linked to his partner's miscarriage. Mr Cordell denies any acts of antisocial behaviour, even in retaliation. At every point where he approaches the upstairs neighbours, he states he calls the police to ask them to "protect" him. In regards to the recent arrest he reports the police attended due to a fraudulent call from the neighbours. The police tried to hand him a breach of harassment order which Mr Cordell ripped and spat on the paper. The police officer then yelled that he had spat on her. He was then arrested for assault on a police officer. This charge was dropped in the police station and he was referred for an MHA. Mr Cordell is currently on benefits. He reports the expensive hardware he owns (e.g. 70000-pound bookmaker) he buys broken and second hand cheaply and fixes them. Mr Cordell works from home. He built a new model constitution - a community interest company which was a charity farm. Collateral information: His mother and uncle would like mental health service to stop referring to Mr Cordell reporting the police as being prejudice against him as delusional - they believe this can be proved (showing	
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photos of his company truck and hardware).

Mr Cordell 's mother is very upset that doctors have submitted reports stating that he is delusional and grandiose. They feel the AMHP report is grossly inaccurate.

Mr Cordell 's uncle is also upset that the mental health team would not provide Mr Cordell with a letter to assist with his housing situation.

They explain that the reason Mr Cordell has not be prosecuted for the complaints made by the neighbours is because each time Mr Cordell is able to "prove his innocence" directly to the police.

Mr Cordell 's mother believes he is very stressed due to the conditions of the ASBO and his neighbours disturbing him.

His uncle would like us to check the website that Mr Cordell has set up to highlight the injustices against him "horrificcorruption.com". (other websites mentioned by Simon include the Wayback machine and toosmooth).

Impression was that Mr Cordell was unstable in mental state and behaviour. He presented with persecutory delusions and possibly auditory hallucinations. Plan was:

1. Requires further review of notes
2. Liaise Enfield council re plans for housing - ask Rosie for input

Following the formulation meeting he presented very grandiose - showing staff and peers his website and that he has '20,000 emails and 500,000 phone contacts'. He seems elated and keen to get his message across.

Dr Timothy Rogers e-mailed Dr Greensides on the 30th of October 2018 as Mr Cordell was referred to a forensic sector prior MHAA and wrote that he has terrorised their patient (who lives above him) including one occasion taking him by the throat and left our patient feeling unable to walk around on the floor or even flush his toilet chain for fear of sparking another altercation (with no basis) about excessive noise.

Mr Cordell was reviewed on the

31/10/2018

31st of October 2018

by Dr Greensides (Consultant psychiatrist), Dr Elia and Dr Bruce:

Mr Cordell confirms his problems began in **2013**

He moved into his premises in

2013

there was evidence of CO poisoning in the flat and all the boiler systems and alarms had to be replaced.

Mr Cordell has been held on curfew for a long time for organising a party and? wrongly accused of damaging the premises. Also, was accused of burglary and handling of stolen goods - he was found innocent on both accounts.

	Mr Cordell reports having had a “relationship” with his current partner Katy for the last 20 years. She has a son from a previous relationship. The problems with the neighbours have been going on for 4 years now. Mr Cordell is concerned about his neighbours, in particular to how their behaviour might affect their child. 6 flats in total in his council building - the neighbours that are problematic are 2 floors above Mr Cordell’s. These 63 particular neighbours bang on the water pipes, stamps on the floor (this echo through the flat between) - this happens first thing in the morning and goes on through the day. Mr Cordell believes his neighbours sit in their flat eavesdropping on Mr Cordell’s whereabouts. When he enters the bathroom, they enter their bathroom and flush the toilet a lot. Simon has Video and Audio recordings throughout his flat in order to prove his innocence. There is a husband and wife living there as well as a new born baby. Mr Cordell reports he can hear this family talking but he can’t make out what they are saying - he denies them saying anything negative about him “they’ve never spoke to me”. Simon has personal information about his neighbour which he feels is proof of? tax evasion - he reports the family own 50 houses in the UK. The neighbour has changed their surname in order to accommodate some scheme to avoid? tax - Mr Cordell reports he has “100% evidence” that this is true and feels it is relevant to him because of how they are treating him. Mr Cordell believes what the neighbours are doing is a hate crime. Mr Cordell denies ever having felt like the TV was talking to him or that the council was advertising his information. Mr Cordell does feel his personal information is being advertised somehow - friends have approached him and have information about him he believes can only have come from secure computer systems. Mr Cordell is not concerned about his tenancy at the moment - he states he has recordings that prove his innocence. Simon is aware the council has told him to stay away from his neighbours - since this time he states he hasn’t approached his neighbours. He wants to publish a book about what has been going on. Simon does not appear to accept that he has become fixated on this issue. Mr Cordell does not think his problems with his neighbours are in any way due to him having a mental health problem. Mr Cordell wouldn’t like to take medication as he doesn’t feel he needs it and is concerned medication may impact his ability work. He is particularly concerned that the medication will “dope him out”. Mr Cordell states he has a good family support network. He is happy to see the ward psychologist.	
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	Mr Cordell has been informed that a referral to a forensic psychiatrist who may want to visit him on the ward. Impression was that he presented with persecutory delusions and poor insight into his condition. Not currently deemed to be a risk to himself or others. He could be at high risk of losing accommodation if continues untreated. Plan was: 1. For Section 17 leave 2. No medication at present 3. Refer to ward Psychologist - Dr Patkas He has terrorised our patient (who lives above him) including one occasion taking him by the throat and left our patient feeling unable to walk around on the floor or even flush his toilet chain for fear of sparking another altercation (with no basis) about excessive noise. 64 <u>Opinion and recommendations</u> 1. Mr Cordell suffers from a mental disorder, the symptoms of which at present are persecutory delusions, grandiose beliefs and attitude. In addition, he also presented thought disordered with circumstantial thinking. Probably he has been experiencing auditory hallucinations too. His condition is complicated by poor insight into his mental health illness and substance misuse. 2. This illness is currently of a nature and degree to warrant detention under section 2 of the mental health act. 3. Without this there are risks to his health, principally mental health which is likely to continue to deteriorate without intervention. He is also at high risk from being evicted from his current accommodation which could put his mental and physical health at significant risk. His safety is compromised by possible retaliation from others when he is behaving aggressively towards other people. As well as the safety of others as he was aggressive to his neighbours, council employees and police prior to admission. 4. This cannot be carried out in the community as he has limited insight and refuses intervention, tried for a number of years and failed. 5. Should he be discharged then he will be referred to the HTT, but is not likely to engage. 6. Tribunal need no special arrangements to accommodate Mr Cordell. Dr Maja Elia ST6 to Dr Jonathan Greensides Consultant Psychiatrist, Dorset ward	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Enfield Adult North Locality Team 58-60 Silver Street EN1 3EP	65 On Section 2 of the MHA 1983/2007 Soobah Appadoo Electronic Documentation on Rio Date of this report: 07/11/2018	07/11/2018 Date of this report: 7th November 2018

Social Circumstances Report Date of Admission: Hospital/Ward: 26th October 2018 Chase Farm Hospital, Dorset Ward Care Coordinator: Report prepared by: Sources of Information: Soobah Appadoo- Allocated August 2018 Page Numbers: 65,66,67,68,69	07th November 2018 Who you are and in what capacity you know the patient, how long you have worked with them: My name is Soobah Appadoo. I am a CPN with the above-named team. I have been asked to compile this social circumstance report in support of above-named patient's Mental Health Review Tribunal (MHRT) appeal against his detention under Section 2 of the Mental Health Act. Mr Cordell was admitted on section 2 on the 26/10/2018 26th October 2018 Mr Cordell was previously under the care of the Early Intervention Team for 3 years. The Early Intervention Team discharged him in June 2018 and at that point he was referred to our team. There is a suggestion on RIO notes that he did not engage well with that team. I was allocated to Mr Cordell in August 2018 We offered him an appointment at his flat on the 31/08/2018 31st August 2018 Mr Cordell rang our office the day before and spoke to me. I informed him that I am his new Care Coordinator. He said that he had been seen for "76 days by his CC" and there was "nothing wrong with me". He said that the reason we want to see him is to "cover for missing signatures?". He said he "will ruin anyone who come to my house" and he has "recording cameras and audios" to ruin us. He said if you come to my house "I fucking will scar you for life". He used foul languages throughout this contact. He said that I "can take the fucking referral and stick it up my ass". He said that he does not want to see us. I could not interrupt him: very verbally aggressive with pressure in speech". I did manage to say that we are a different team from Lucas House and we want him to have a fresh start- He said "I don't fuck care" Further to that the MDT advised that we should assess Mr Cordell in clinic due to the potential risks. We then offered him an appointment on the 28th September 2018 which Mr Cordell did not attend? 66 My report is based on the information which I have extracted from RIO and my telephone conversation with Mr Cordell's mother. Psychiatric history On the 16/10/2016 16th August 2016	
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	Mr Cordell was admitted to CFH under Section 2 of the MHA. He was discharged on the 27/08/2016 27th August 2016 According to RIO notes Mr Cordell "was arrested at his home address after his mother raised concerns about his mental state - he was allegedly verbally threatening towards his neighbour and (?) neighbour's children. Simon's mother called police who arrested him. He was seen by the FME at Wood Green police station, was then referred for MHA." He appealed against his Section. The Mental Health Review Tribunal discharged him from Section 2 on the 26/08/2016 26th August 2016 Leading to current admission As I stated above leading to this admission Mr Cordell did not attend appointments offered to him by our service. Subsequently due to the allegations made against him I was advised to attend a Safeguarding meeting for an alleged victim. In that meeting I was informed by the Council that Mr Cordell has a past and current history of physical and verbal aggression towards residents in the building. I was informed that the council has tried to work with Mr Cordell but to no avail. I was informed me that Mr Cordell was getting easily irritated even by the sound of a flushing toilet; this happened very recently and he threatened the resident concerned. The Council was of the opinion that these are signs of mental illness and suggested that BEH should proceed with an MHA. The Council argued that this is for the protection of others as well as Mr Cordell's own safety. Subsequently the council sent us a copy of 'Anti-Social Behaviour, Tenancy concerns and breaches-pre-action letter' which contained a chronology of alleged incidents dating from 2016 These alleged incidents were in the meaning of an antisocial behaviour presentation. On the 17/10/2018 17th October 2018 Mr Cordell was discussed in our MDT meeting. A decision was made to conduct an MHA. An MHA was attempted on the 19/10/2018 19th October 2018 Mr Cordell did not cooperate and the assessment did not take place. On the 23/10/2018 23rd October 2018 an application for a warrant was made but was declined on the grounds "that there was insufficient recent evidence that he was being "kept under proper control" as he is living alone and	
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	"insufficient recent medical evidence that "he is unable to care for himself. According to RIO, on the 25/10/2018 25th October 2018 Mr Cordell was arrested for breaching a harassment order. It was alleged that he was aggressive towards the police and spat at them. He was assessed at the police station. On interview he had pressure of speech, delusions about his neighbours and the police and housing ganging up against him. He denied drug use. He said that does not have a mental disorder. The <u>67</u> doctors who assessed Mr Cordell found him "hypomaniac, with flight of speech, grandiose and thought disordered" Forensic history Nil known. Risk History According to the Risk Assessment on RIO notes Mr Cordell had expressed suicidal thoughts in the past. This was related to stress from court cases. The date is not stated in the Risk Assessment. Around that time, he said that he had researched ways of harming himself (poisoning, OD, hanging). He had said in the past that he tried to hang himself aged 16 when he was in a young offender's institute. He had said that he needed resuscitation. He tried to hang himself a second time after he was sentenced by a judge aged 20. He had said that he drank Nitrous Oxide in 2014 with intent to die. According to his Risk Assessment he was regularly a victim or witness of his father's violent behaviour. There are recent reports from the Council regarding alleged aggressive behaviours towards other residents. In June 2018 he was apparently involved in court case with the neighbours who he apparently threatened to harm. Social circumstances Personal History Mr Cordell is single. He has a partner. He has no children. He was born in Enfield and did his schooling in Edmonton. Left school aged 16. He studied and worked in mechanics and road works, electrical and computers after he left school (mother's report) Accommodation Mr Cordell lives in a 1 bedroom flat on the ground floor. The flat has necessary amenities/facilities to allow independent living. Employment He is not currently in employment Finances	
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	He claims ESA and needs to make an application for PIP <u>68</u> Views of family I telephoned Ms Cordell on the 07/11/2018 07th November 2018 Ms Cordell told me that neighbours have been "terrorising" his son since 2014 in particular a neighbour on the 2nd floor. Ms Cordell told me that whilst her son is in hospital her nephew has been staying in the flat to look after the dog. The nephew has reported that the occupier on the 2nd floor have been "banging" on the floor. She said that the neighbour then realised that her son is not in the flat when they saw the nephew coming out of Mr Cordell's flat. She told me that since the 26/10/2018 26th October 2018 the "banging" has stopped. She said that she has complained about the neighbour herself but thinks these situations are misinterpreted by the council and the mental health services and her son is then seen as the perpetrator and or being mentally unwell. Ms Cordell stated that the sound proofing is lacking and the noise is real. Other neighbours have made allegations that Mr Cordell has been aggressive towards them. She said that there is no evidence of this; police have seen CCTV and found that her son had not left the flat at the time when these incidents were alleged to have happen. Ms Cordell gave another example in 2016 where it was alleged by a neighbour that her son had made threats to kill him. She said that the police initially charged her son with making threats to kill; after seeing video evidence they charged him with a 'Public Order Offence'. She said that around the time of this alleged incident her son was in his flat with some friends. Her son was not allowed to his flat and was bailed to her flat where he stayed until December 2016 She said that the CPS after seeing evidence dismissed the case a day before the trial. She said that the council has never taken the responsibility to look at evidences; the allegations made against her son (physical assault, letting his dog on the loose) have not been proven. She said that on the 9th August in court the Judge ordered Enfield Council to move her son to a 2-bedroom flat but the Council wants/plans to evict him instead. She said that the Council has no grounds to apply for her son's eviction. She said that her son has a one bedroom flat. She said that he does not want to live there. She said that he needs a 2 bedroom flat with the plan that his cousin could stay with him to provide emotional support. She said that her son has everything he	
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needs in the flat. She told me that her son is very independent in activities of daily living; his personal care is extremely good; he cooks for himself, maintains the flat and takes responsibility for his bills. She told me that he has no financial difficulties/no debts.

She said that her son has a work history. In **2010** he was planning to set up a business in the entertainment industry. He has also built websites in relation to this. At present he is not in employment. He is in receipt of Employment Support Allowance but needs to make an application for Personal **Independent Payment**.

I asked her if she thinks her son has a mental illness; she told me that he suffers from stress and anxiety due to issues with the neighbours but does not think he has a mental illness. She said that the judged looked at evidence and did not grant a warrant in **October 2018**

for a mental health act to take place at her son's flat. I asked Ms Cordell if she thinks her son could benefit from support from the community team. She said that he could do with some support but "we should stop labelling him as being delusional as he is not delusional".

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After-Care

Potentially Mr Cordell care/treatment would be delivered via the Care Programme Approach. I am the allocated Care Coordinator and he will have a responsible clinician in the community.

My role would be first of all to build a relationship with Mr Cordell as I have only met him on 2 occasions. I will try to motivate him to engage with myself and the multidisciplinary team. As his Care Coordinator I will review Mr Cordell regularly independently and with the Community RC.

We have a Team Clinical Psychologist and it would be vital for Mr Cordell to have some form of talking therapy. This is on the basis of the stress and anxiety that his mother states he suffers from.

We have a Dual Diagnosis Worker in the team who could offer drug counselling if necessary.

We have an organisation called 'Remploy' which is funded by the Local Authority. Potentially they could support Mr Cordell to find work. They meet regularly with clients whilst they are in work and also liaise with employers.

I could support Mr Cordell in making an application for PIP. Alternatively, he could get that support from 'Enfield Well-Being Connect'

The Mental Health Enablement Team could provide support in tenancy management as well as support to access education/training and work.

Opinion and recommendations

I have met Mr Cordell on two occasions only and I have not had the opportunity to assess him in the community. A rapport needs to be established with him.

	On the basis of recent events, history of risks to self and alleged risks towards others, and taking into account the views of the MDT on the ward I think that he would benefit from a longer stay in hospital. This is in-order for the MDT to assess him comprehensively to determine if he has a severe and enduring mental illness such as schizophrenia/psychosis. If it is determined that he has a severe mental illness then this should be treated accordingly whilst he is in hospital. Signed: Soobah Appadoo, CPN Dated: 07/11/2018	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> The First-tier Tribunal (Health, Education and Social Care Chamber) Mental Health Mental Health Act 1983 (as amended) Page Numbers: 70,71,72,73,74	<u>70</u> The Tribunal Procedure (First-tier Tribunal) (Health, Education and Social Care Chamber) Rules 2008 Case Number: MP/2018/29087 Date of Application: 01/11/2018 Patient: Mr Simon Cordell born [REDACTED] A patient now liable to be detained under Section 2 of the Act Responsible Authority: BEH Mental Health NHS Trust Hospital: Chase Farm Hospital Before Ms K. Hyman (Judge) Dr G. Luyombya (Medical Member) Mrs K. Charlwood (Specialist Lay Member) Sitting at Chase Farm Hospital on 08/11/2018 08th November, 2018 Decision The patient shall not be discharged from liability to be detained. Recommendation pursuant to section 72(3)(a) The tribunal does not make a recommendation. Representation Patient: Ms R. Caswell, Duncan Lewis Solicitors Responsible Authority: Not Represented. Attendance by Patient The Patient attended the hearing. Announcement of Decision The decision was announced at the end of the hearing. The patient was present for the announcement. The patient's representative was present for the announcement. <u>71</u> Pre-Hearing Medical Examination of the Patient A pre-hearing examination of the patient was indicated under the Rules. The interview with the patient took place on 08/11/2018 08th November, 2018. The Tribunal considered: Oral evidence from Dr J. Greensides, RC; Nurse Thembi Magodlela; Mr Soobah Appadoo, CPN; Mr Simon Cordell, patient and Mrs Cordell, patient's mother.	08/11/2018 Date 8th November, 2018

	Written evidence from Dr M. Elia, ST6; Nurse Bibi Khodabux; Mr Soobah Appadoo, CPN Other material, namely Responsible Authority Statement of Information, Observers: Mrs Fiona Bateman, (Judicial Shadowing Scheme) and Student Nurse Skubik Jurisdiction. Preliminary and Procedural Matters 1. The tribunal is satisfied that it has jurisdiction to consider this application. 2. The solicitor for the patient sought permission to submit a 6-page document from Mrs Cordell, the nearest relative. The solicitor indicated that the document expressed the nearest relative's views and those of a cousin. The panel considered the request and noted that Mrs Cordell's views as regards her son's detention and the housing problems he has experienced were fully reflected in the social circumstances report provided. The panel would also allow her to speak at the tribunal hearing if she wished to do so. In those circumstances, we did not accept the submission of the document. Grounds for the Decision 1. The tribunal is satisfied that the patient is suffering from mental disorder or from mental disorder of a nature or degree which warrants the patient's detention in a hospital for assessment (or for assessment followed by medical treatment) for at least a limited period. 2. The tribunal is satisfied that the patient's detention as aforesaid is justified in the interests of the patient's own health or safety, or with a view to the protection of other persons. 3. The tribunal does not consider that it is appropriate to discharge the patient under its discretionary powers. Reasons 1. Background Mr Simon Cordell is aged 37 and is single and resides in council accommodation in the community. There is a longstanding history of difficulties with neighbours at his accommodation which was detailed in the reports. His background and history were documented in the statutory reports provided to the panel. He has been known to Adult Mental Health Services since 2014 He has had varied diagnoses in the past and has been found not to require section under the Mental Health Act in 2014 and 2015 He was however detained subject to Section 2 in August, 2016 and was subsequently discharged by a Tribunal. The history indicated that he was discharged on prescribed medication and followed up by EIS. He reportedly did not engage with services or medication and was thereafter discharged from EIS. He has a current working diagnosis of schizophrenia.	
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	The current admission follows an incident in October, 2018 which led to safeguarding concerns and the Enfield Adult North Locality Team's decision to arrange an MHA assessment. Mr Cordell was detained subject to Section 2 on the 25/11/2018 <u>72</u> 2. The Responsible Authority's case The clinical case argued that the patient has a chronic and enduring mental illness. It is unclear whether the mental disorder responds to treatment as the patient has not engaged consistently with treatment. Currently, the patient has been assessed without medication as Mr Cordell does not accept that he requires psychotropic medication. Mr Cordell presents with a number of persecutory, paranoid thoughts in relation to his beliefs that the police and his neighbours are in some way targeting him. Mr Cordell also exhibits thought disorder and some tangentiality in his response to questions posed. The professional evidence argued that the nature and degree of the mental disorder warranted the patient's continued detention of assessment which is justified in the interests of the patient's health, safety and the protection of others. 3. The patient's view Mr Cordell was polite and courteous towards the panel. He told the panel that he did not accept that he has a mental illness or any need for medication. He said he experienced anxiety and distress at his accommodation. He indicated that the 48 allegations between 06/07/2016 and 02/10/2018 set out in the medical report from an Enfield Council Report regarding concerns and breaches of his tenancy agreement were all fabricated. He did not accept that he was in any way at fault. He repeated on several occasions that his neighbours had submitted a litany of complaints to council officials about him in order to undermine his occupation of the premises. He said that he has been stopped from organising festivals and had set up a website to air his frustrations about his perception of the injustice of his treatment. He told the panel that he would remain as a voluntary patient 4. The nature and degree of the mental disorder As to the nature of the mental disorder, the patient's illness appears to be a chronic illness which has persisted for some time. It is unclear as to the patient's response to treatment as yet. Mr Cordell told the panel that he did not take the psychotropic medication prescribed following his last discharge in 2016. The clinical team have sought the first recommendation for Section 3 and intend to commence treatment with psychotropic medication	
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	in due course. Mr Cordell displayed no insight into his mental health difficulties and sought to minimise his actions prior to the current admission. As to the degree of the mental disorder, the patient's evidence was tangential, guarded and there was clear thought disorder. Dr Greensides told the panel that he had looked at Mr Cordell's website which indicated the presence of thought disorder. The panel asked Mr Cordell about a telephone conversation with Mr Appadoo which is detailed in the social circumstances report; the patient is alleged to have used foul and threatening language throughout the conversation. Mr Cordell did not dispute the telephone conversation and sought to minimise his actions stating that the content was out of context. He was unable to contain his thoughts on the question posed as to whether, reflecting on the matter now, he thought his response was inappropriate. The nursing evidence in contrast to the panel's observation, indicated that the patient has not exhibited any psychotic symptoms. On a positive note there has been some improvement in the patient's presentation overall as he is no longer challenging, irritable or confrontational. 5. The detention is justified in the interests of the patient's health, safety and the protection of others As to the patient's health, the professional evidence indicated that psychotropic medication is to be commenced and the patient's response to treatment is to be monitored. The clinical view is that a period of treatment is now required to address the patient's psychotic symptoms. The clinical view is that the patient is unlikely to engage as an informal patient and a previous attempt at treating the patient in the community was unsuccessful. <u>73</u> As to the patient's safety, there is historical information that Mr Cordell has attempted to self-harm in the past. This is not a current concern. Mr Cordell's difficulties at his accommodation may pose a risk of eviction. However, further clarification is required during the period of the assessment on this point. There is a potential risk of retaliation from others when he is behaving aggressively towards others. As regards the protection of others, Mr Cordell has entrenched and longstanding views and there have been incidents of aggression involving his neighbours, council officials, and the police prior to admission. He showed little capacity for self-reflection or remorse during his evidence when he was questioned about his telephone interaction with Mr Appadoo. We note that the allegations of physical and verbal altercations with his neighbours were relied upon to obtain an order for an injunction as recently as the 09/01/2018	
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	which was later discharged in July 2018 due to the patient's lack of capacity to understand the conditions of the injunction due to his psychotic illness. 6. Our conclusions We accept the clinical evidence as to the nature and degree of the mental disorder. We have no doubt that there is some element of neighbour dispute; however, Mr Cordell's response to such triggers appear to be rooted in a mental disorder which will need to be assessed during this admission. We also accept that the detention is justified in the interests of the patient's health, safety and the protection of others for the reasons set out above. 7. Exercise of discretion There were no special features of this case which persuaded us to exercise our discretion to discharge. 8. Statutory criteria The grounds and statutory criteria are satisfied. The section is upheld Judge Hyman Notice A person seeking permission to appeal must make a written application to the tribunal for permission to appeal. An application for permission must: - Identify the decision of the tribunal to which it relates; - Identify the alleged error or errors of law in the decision; and - states the result the party making the application is seeking. An application for permission must be sent or delivered to the tribunal so that it is received no later than 28 days after the latest of the dates that the tribunal sends to the person making the application: - written reasons for the decision; - notification of amended reasons for, or correction of, the decision following a review; or - notification that an application for the decision to be set aside has been unsuccessful. (Note: This date only applies if the application for the decision to be set aside was made within the initial 28-day time limit, or any extension of that time previously granted by the tribunal.) If the person seeking permission to appeal sends or delivers the application to the tribunal later than the time required then: - the application must include a request that the tribunal extends the time limit 74 under Rule 5(3)(a), and give the reason(s) why the application was not provided in time; and b. unless the tribunal extends time for the application to be made, a late application cannot be admitted.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> Stage 3	75 RE: Letter of Authority for my mother Miss Lorraine Cordell dated	12/11/2018

<u>Folder: 3</u> Page Numbers: 75	12/11/2018 To whom it may concern: I Mr Simon Paul Cordell am writing this letter to confirm I give Barnet, Enfield and Haringey Mental Health NHS Trust authority if they need to speak or send any documents relating to me, to my mother Miss Lorraine Cordell on my behalf in relation to the subject access request I have submitted relating to obtaining all my medical health records. Barnet, Enfield and Haringey Mental Health NHS Trust can contact my mother Miss Lorraine Cordell via the information below and may speak or send any documents to her on my behalf, once the information is collected, I have asked my mother to attend and pick the information up and pay any fee needed on collecting the information. As I know it will be safer for it to be picked up in person. Can this letter please be placed on my file so that my mother has authority? Phone: Email: Letter: 23 Byron Terrace, Edmonton, London N9 7DG Regards Simon Cordell	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> Health Records, Barnet, Enfield and Haringey Mental Health NHS Trust Medical Records Office, P2, St Ann's Hospital site St Ann's Road London N15 3TH Subject access request Page Numbers: 76,77,78	<u>76</u> Dear Sir or Madam I Mr Simon Paul Cordell of 109 BURNCROFT Ave, Enfield, Middlesex, EN3 7JQ, also known from 23 Byron, Terrace, Edmonton, London N9 7DG DOB: [REDACTED] Hospital Number: 11214451 NHS Number: 434 096 1671 Please supply the data about me that I am entitled to under data protection law 1. Full copy of all my medical records 2. This would include everything that is held on Rio IT systems 3. Early Intervention Team,] <u>77</u> 4. Enfield Adult North Locality Team, 5. Any reports from Doctors I have seen Including CPN and nurses 6. Any assessments report I may have had via the mental health, including if anybody has asked for an assessment to be carried out. 7. Any other teams I may have had contract with me regarding mental health 8. This would include all data that is held about me on all IT systems that is in digital format. 9. Any third-party bodies that have passed information over regarding me relating to mental health. 10. This would include police, and Enfield council and any other person or bodies that passed information relating to my mental health.	13/11/2018

	11. Any emails that have been sent regarding me or received regarding me from anybody or any person. 12. Emails between 'person A' 'person B or person C' ECT 13. Copies of any statements written about me. 14. Any Audio or video or telephone calls that is being held regarding me. I know information that is being held about me is incorrect I have tried to deal with this a number of times yet the information that is incorrect is still being used against me and is still on the systems. If any information is being withheld, I would like to know why and for what reason it is being withheld. [REDACTED] (this is my mother's phone number, please also see attached authority letter from me her email address is [REDACTED]) I have included my ID with this application for my information. <u>78</u> If you need any more data from me, or a fee, please let me know as soon as possible. It may be helpful for you to know that data protection law requires you to respond to a request for data within one calendar month. If you do not normally deal with these requests, please pass this letter to your Data Protection Officer, or relevant staff member. If you need advice on dealing with this request, the Information Commissioner's Office can assist you. Its website is ico.org.uk or it can be contacted on 0303 123 1113. Yours faithfully Mr Simon Paul Cordell	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3 Folder: 3</u> - Private Medical Notes - NIGHTINGALE SURGERY Page Numbers: 79,80,81,82	<u>79</u> "Private Medical Notes!" <u>80</u> "Private Medical Notes!" <u>81</u> "Private Medical Notes!" <u>82</u> "Private Medical Notes!"	26/10/2018
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3 Folder: 3</u> - Mental Health NHS Trust IN PATIENT PRESCRIPTION CHART - Dr. Greenside Page Numbers: 83,84,85,86,87,88	<u>83</u> PATIENT PRESCRIPTION CHART <u>84</u> PATIENT PRESCRIPTION CHART <u>85</u> PATIENT PRESCRIPTION CHART <u>86</u> PATIENT PRESCRIPTION CHART <u>87</u>	26/10/2018

	PATIENT PRESCRIPTION CHART 88 PATIENT PRESCRIPTION CHART	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 3</u> <u>Folder: 3</u> 24 Hour Discharge Notification To: Chong Y NIGHTINGALE HOUSE SURGERY 1 NIGHTINGALE ROAD EDMONTON LONDON Page Numbers: 89,90,91	89 <u>Main Letter Page</u> 90 <u>17/10/2018?</u> 17 Oct – referred for MHA due to history of physical and verbal aggression towards his neighbours. EANLT MDT agreed that he is a risk to others and his behaviour could also put him at risk from others. Simon refused to engage with MHA. Application for 135(1) was made - Judge found insufficient evidence for 136. Forensic referral sent on 17/10/2018 25/10/2018 25 Oct – Simon was arrested as the police called to his flat re him breaking a harassment order and he assaulted the police who attended. He was taken to Wood Green police station. Found to be him thought disordered, hypomanic with flight of speech and grandiose delusions. Detained under MHA. On initial review he had pressured speech, difficulty interrupting, appeared elated in mood, and had grandiose beliefs e.g. started talking about owning a couple of local festivals and engaging in multiple charities involving children. At the time he has limited insight; he does not want any medication, and has never believed he has a mental health disorder. His UDS was positive to THC. He immediately appealed his section. The tribunal was done on 08/11/2018 which he lost. On 05/11/2018 Dr Greensides reviewed the patient and made an application for Section 3 as there are risks to his health and to others. It was felt that it would not be beneficial to take against his will unless he is subsequently detained on a section 3. However, there was a delay in the assessment so he was started on Risperidone 2mg ON which he refused to take. He had a MHAA for a Section 3 on 14/11/2018 it was felt that there was no evidence of Simon posing a risk of harm/safety to himself or others and there was no obvious risk of neglect. As a result, he was not sectioned. It was decided that as a result of this, there was no reason for Simon to remain on an acute psychiatric ward as we are unable to treat him. He was discharged as a result, with Dr Greensides emailing his CC about arranging an O/P consultant review and emailed the forensic consultant regarding an O/P forensic opinion.	21/11/2018 21 Nov 2018

	Thank you for your continued care. Here is his MSE on admission: Simon is a 37-year-old male, who was appropriately dressed. He engaged in conversation and made eye contact throughout. Calm and polite, no aggression but did become mildly restless at points. Pressurised speech, difficult to interrupt. Flight of ideas noted. Described mood as good. High levels of energy and labile mood. Paranoid delusions about the police and MH services and some grandiose delusions noted. 91 No perceptual abnormalities noted. Orientated to TPP Lacks insight, does not believe he has a MH condition and not willing to engage with services historically or currently. Unlikely to take medication willingly.	
• <u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 3</u> <u>Folder: 3</u> Page Numbers: 92	92 Private and Confidential to be opened by addressee Mr Simon P CORDELL 109 Burncroft Avenue 58-60 Silver Street Enfield Middlesex EN1 3EP Tel: 0208 379 4142 We would like to offer you a follow-up appointment: Appointment: Review Clinic: Enfield Adults North MH Locality Date/Time: 4 Dec 2018 14:30 Intended Duration: 30 mins Clinician: Saira Chowdhary and Soobah Appadoo: Address 58-60 Silver Street, Enfield, Middlesex EN1 3EP To make sure that access to our services is fair, please: Contact us to confirm you can attend, or to arrange another appointment. We may not be able to offer you another appointment if you do not attend this one, or do not tell us that you cannot come. Please note that if you are more than 10 minutes late for your appointment, you will not be seen as the clinics are very busy. Arrive on time for your appointment as we may not be able to see you if you are late. Please contact us on the above number if English is not your first language and you need help or an interpreter. Please also contact us if you have a disability and have additional requirements which you need to discuss before your appointment. Yours sincerely, Louiza Vassiliou Team Administrator On Behalf of Barnet, Enfield and Haringey Mental Health Trust	29/11/2018 29 Nov 2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 3
Folder: 3
Page Numbers: 93,94,95

93

From: ROGERS, Tim

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Sent: 04 January 2019 15:08

Cc: DINALA, Allan

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); **MURPHY,**

Lucy

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Forensic. Referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Subject: Re: Simon Cordell

Lucy

Please close the referral - it would appear that we are delaying doing the work otherwise. We can always re-open a referral if a professionals meeting is requested

Dr Tim Rogers

Consultant Forensic Psychiatrist - FICS Enfield
 Camlet Three | Chase Farm Hospital | The Ridgeway
 |Enfield EN2 8JL

Tel: 020 8702 5953 (mobile and landline)

Email: tim.rogersl@nhs.net Line Manager: Dr

Mehdi Veisi, Clinical Director Line Manager

Contact: 020

8702 6040 Web: www.beh-mht.nhs.uk

Twitter: @BEHMHTNHS / Facebook:

www.fb.com/behmht

04/01/2019

04 January
 2019

From: APPADOO, Soobah

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Sent: 04 January 2019 12:19

To: ROGERS, Tim

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); **BENYURE,**

George

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST);

GREENSIDES, Jonathan

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); **HUSSAIN,**

Basit

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Cc: DINALA, Allan

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); **MURPHY,**

Lucy

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Forensic. Referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Subject: RE: Simon Cordell

Dear Dr Rogers,

He has not engaged with us; we have not been able to review him since his discharge from hospital. We

are in the process of referring SC to the Unmanaged Risk Forum and will be guided by them.

94

Perhaps we could have a Professionals Meeting after the Unmanaged Risk Forum and make joint decisions in that meeting.

We will keep you posted.

BW

Soobah

From: ROGERS, Tim (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Sent: 03 January 2019 11:18

To: APPADOO, Soobah

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST);

BENYURE, George

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST);

GREENSIDES, Jonathan

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); HUSSAIN,

Basit

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Cc: DINALA, Allan

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); MURPHY,

Lucy

(BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Forensic. Referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Subject: Re: Simon Cordell

Dear all,

Happy New Year.

I wonder if I could email about Simon Cordell?

He has remained administratively open to the forensic outreach team for consultation if needed, in case it was possible to contribute to a professionals meeting about him if needed.

Where are things up to? Are we able to close his referral to us if there is no current contact with services?

Kind regards

Dr Tim Rogers

Consultant Forensic Psychiatrist - FICS Enfield
Camlet Three | Chase Farm Hospital | The Ridgeway
|Enfield EN2 8JL Tel: 020 8702 5953 (mobile and landline)

Email: tim.rogersl@nhs.net

Line Manager: Dr Mehdi Veisi, Clinical Director

Line Manager Contact: 020 8702 6040

95

From: ROGERS, Tim (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

23/11/2018

Sent: 23 November 2018 12:26

	To: APPADOO, Soobah (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); <u>BENYURE, George</u> (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); <u>GREENSIDES, Jonathan</u> (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); HUSSAIN, Basit (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Cc: DINALA, Allan (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Subject: Simon Cordell Dear Basit, Soobah, I hope you are well. I'm just following up on the discharge of the above. It is a shame that it was not possible to start treatment in him but I see that a concerted attempt was made. I have put a note on RiO. I note that Simon was documented to be thought disordered and to experience delusions but to be refusing to take treatment or to see a psychiatrist in the community following not being detained under s3 MHA. He was referred for a forensic assessment but of course we have no additional powers to compel him, so it is difficult for us to add more in the immediate aftermath. We have not closed the referral made to us. Although it seems unlikely that Simon would agree to attend a forensic assessment given the above, I wonder whether the most helpful course of action to take would be to suggest/arrange a professionals' meeting, involving Enfield Housing and also a representative from the Police (perhaps the officer in the case in relation to the assault charge) or even MAPPA (he could be referred here?). FICS would be able to attend this if helpful. Tim	
<u>Stage 4</u> <u>Folder 4</u>		
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 1	<u>1</u> Asked him if SC had been charged for the assault on the police. He said he is dealing specifically with this case; he said that the police need to interview SC first before charging him for assault; he said that SC has not made himself available.	8 Jan 2019 X2 = <u>29/11/2018</u> Originator Details: 29 Nov 2018

Run Time: 8 Jan 2019, 10:01 RiO Instance: LIVE (Reporting) Logged in User: Barnu TOI (Augustina Barnum) Parameters: ClientID = 11214451 (Simon P CORDELL), Date Range Criteria = Care provision time, Sort Order = Descending, Start Date = 12 October 2018 13:50, End Date = 4 December 2018 14:30, Filter Search = N, Progress Note Type = All, validated = All, Entered in error = No, Significant = All, Third Party Information = All, Added to Risk History = All, Concealed from Client = All, Locked Notes = No, User ID = Barnu TOI (Augustina Barnum) Record Count: 110 records returned Originator Details: 29 Nov 2018 12:05 Soobah Appadoo Nursing Originally Entered by Details: 29 Nov 2018 12:10 Soobah Appadoo Last Amended by Details: 05 Dec 2018 12:47 Soobah Appadoo Validated by Details: 05 Dec 2018 12:47 Soobah Appadoo Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed ENFIELD ADULT NORTH LOCALITY TEAM T/C to Police-PC Tom 07506 523950.	Informed him that we plan to hold a Professionals Meeting on the 19th December He said that I should try to call 101 to ask if Police can attend. He said that he cannot attend himself and would discuss this with his superiors. I gave him my direct contact number (work mobile) Rang 101. Police operator took some details. I relayed that SC is known to team; he does not engage and we cannot manage risks. Hence the reason for us to hold a Professionals Meeting. Police operator took my direct number and said that police will get back to me on this. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 29 Nov 2018 Last Amended by Details: 29 Nov 2018 Louiza Vassiliou Page Numbers: 1 <u>1</u> Appointment made with Dr Chowdhary and Soobah Appadoo for Tuesday 4 December 2018 at 14.30, appointment letter sent. <u>29/11/2018</u> Originator Details: 29 Nov 2018 11:53 Louiza Vassiliou Administrative Originally Entered by Details: 29 Nov 2018 11:53 Louiza Vassiliou Last Amended by Details: 29 Nov 2018 11:53 Louiza Vassiliou Validated by Details: 29 Nov 2018 11:53 Louiza Vassiliou Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Appointment made with Dr Chowdhary and Soobah Appadoo for Tuesday 04/12/2018 04 December 2018 at 14.30, appointment letter sent. <u>29/11/2018</u> • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 23 Nov 2018 Rogers Last Amended by Details: 23 Nov 2018 Dr Timothy Rogers Page Numbers: 1 <u>1</u> Enfield FICS - consultant's note Entries below noted. I note that Simon was documented to be thought disordered and to experience delusions but to be refusing to take treatment or to see a psychiatrist in	<u>23/11/2018</u> Originator Details: 23 Nov 2018
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	the community following not being detained under s3 MHA. The forensic team have no additional powers to compel Simon, of course, so it is difficult for us to add more in the immediate aftermath of this concerted attempt to treat him in hospital. We have not closed <u>23/11/2018</u> Originator Details: 23 Nov 2018 12:16 Dr Timothy Rogers Medical Originally Entered by Details: 23 Nov 2018 12:21 Dr Timothy Rogers Last Amended by Details: 23 Nov 2018 12:21 Dr Timothy Rogers Validated By Details: 23 Nov 2018 12:21 Dr Timothy Rogers Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield FICS - consultant's note Entries below noted. I note that Simon was documented to be thought disordered and to experience delusions but to be refusing to take treatment or to see a psychiatrist in the community following not being detained under s3 MHA. The forensic team have no additional powers to compel Simon, of course, so it is difficult for us to add more in the immediate aftermath of this concerted attempt to treat him in hospital. We have not closed the referral made to us. It seems unlikely that Simon would agree to attend a forensic assessment given the below but we would be happy to offer advice to his community care co-ordinator. I wonder whether the most helpful course of action to take would be to suggest/arrange a professionals' meeting, involving Enfield Housing and also a representative from the Police (perhaps the officer in the case in relation to the assault charge). FICS would be able to attend this if helpful.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 2	<u>16/11/2018</u> <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 16 Nov 2018 Last Amended by Details: 16 Nov 2018 Soobah Appadoo Nursing Page Numbers: 2 <u>2</u> ENFIELD ADULT NORTH LOCALITY TEAM 16/11/2018	Originator Details: 16 Nov 2018

	Lorraine (mother) left a message at reception for me to call her back. -5A T/C with Lorraine. She said she is not happy that Simon was discharged from hospital. I said that I did not see any value for the ward to keep him as he is adamant that he does not <u>2</u> Originator Details: 16 Nov 2018 15:08 Soobah Appadoo Nursing Originally Entered by Details: 16 Nov 2018 15:16 Soobah Appadoo Last Amended by Details: 16 Nov 2018 15:16 Soobah Appadoo Validated by Details: 16 Nov 2018 15:16 Soobah Appadoo Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed ENFIELD ADULT NORTH LOCALITY TEAM 16/11/2018 Lorraine (mother) left a message at reception for me to call her back. -5A T/C with Lorraine. She said she is not happy that Simon was discharged from hospital. I said that I did not see any value for the ward to keep him as he is adamant that he does not have a mental illness and he has constantly declined medications. She said that Simon wanted to build up a relationship with the ward? She also mentioned that I have said that I will help Simon with housing issues; I clarified that I at no point have I said this but what I said that if Simon agrees to engage with CC in the community, I am more than happy to talk/listen to him. I reiterated that his housing issues does not fall under the remit of the Community Mental Health Team and that he/should liaise with the Enfield Council directly and/or challenge the eviction via the courts. She said that she plans to liaise with the Court. I said that I am happy to arrange a review with his Psychiatrist if that what he wants; she said that she will discuss this with Simon and call be next week. From Dr Greensides RIO entry: -He does not want to see CC -He does not want to see Psychiatrist in the community. -He has agreed for nursing staff to call him (for 7 day follow up) <u>15/11/2018</u> • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 15 Nov 2018 Last Amended by Details: 15 Nov 2018 Emma Moseley Page Numbers: 2 <u>2</u>	
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	Simon was discharged from the ward. He waited till his mother came to pick him up. When his mother came, she expressed her concerns that he was being discharged as the situation with the flat had not been resolved. I stated that the care coordinator would be able to help with this. She stated that the discharge as " malicious". She was reassured that this was not the case. <u>15/11/2018</u> Originator Details: 15 Nov 2018 18:30 Emma Moseley Nursing Originally Entered by Details: 15 Nov 2018 18:33 Emma Moseley Last Amended by Details: 15 Nov 2018 18:33 Emma Moseley Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed. Simon was discharged from the ward. He waited till his mother came to pick him up. When his mother came, she expressed her concerns that he was being discharged as the situation with the flat had not been resolved. I stated that the care coordinator would be able to help with this. She stated that the discharge as " malicious". She was reassured that this was not the case. <u>15/11/2018</u> • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 15 Nov 2018 Last Amended by Details: 15 Nov 2018 Emma Moseley Page Numbers: 2 <u>2</u> T/C received from Simons Mother, she was angry that Simon had been discharged. The reasons for discharge were stated and she stated the she was not happy that he had been discharged and that he wanted a social worker. She was informed that he had a care coordinator that would be able to help or sign post Simon on social issues in the community. <u>15/11/2018</u> Originator Details: 15 Nov 2018 14:11 Emma Moseley Nursing Originally Entered by Details: 15 Nov 2018 14:13 Emma Moseley Last Amended by Details: 15 Nov 2018 14:13 Emma Moseley Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed T/C received from Simons Mother, she was angry that Simon had been discharged. The reasons for discharge were stated and she stated the she was not happy that he had been discharged and that he wanted a social worker. She was informed that he had a care coordinator that would be able to help or sign post Simon on social issues in the community. <u>15/11/2018</u> • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 15 Nov 2018 Last Amended by Details: 15 Nov 2018 Jonathan Greensides Page Numbers: 2 <u>2 + 3</u> Notes <u>3 + 2</u> Interviewed Simon maintains that he is not in need of any mental health follow up or treatment. He doesn't think he suffers with any kind of illness and will not accept any treatment I asked him about the 'second opinion' he mentioned yesterday to the assessing team, he told me they had misunderstood him and that he meant he would seek a second opinion if he was detained under a section 3. I asked him if he would see a community psychiatrist-he said that he would not I asked if he would see his CC Soobah, he said he would not he has agreed to the nursing staff contacting him after his discharge. Plan -discharge from section and discharge home -n/staff to carry out 7-day f/u -I will inform the CC Originator Details: 15 Nov 2018 12:06 Dr Jonathan Greensides Medical Originally Entered by Details: 15 Nov 2018 12:10 Dr Jonathan Greensides Last Amended by Details: 15 Nov 2018 12:10 Dr Jonathan Greensides Validated by Details: 15 Nov 2018 12:10 Dr Jonathan Greensides Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u>	<u>3 + 2</u> Interviewed	

Page Numbers: 3

Simon maintains that he is not in need of any mental health follow up or treatment.

He doesn't think he suffers with any kind of illness and will not accept any treatment I asked him about the 'second opinion' he mentioned yesterday to the assessing team, he told me they had misunderstood him and that he meant he would seek a second opinion if he was detained under a section 3.

I asked him if he would see a community psychiatrist-he said that he would not

I asked if he would see his CC Soobah, he said he would not he has agreed to the nursing staff contacting him after his discharge.

Plan

-discharge from section and discharge home -n/staff to carry out 7-day f/u

-I will inform the CC

15/11/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 15 Nov 2018

Last Amended by Details: 15 Nov 2018

Jonathan Greensides

Page Numbers: 3

3

Contains Third Party Info: No Conceal from Client: Not Concealed in the light of his not being detained on a section 3 I see no reason for him to remain on an acute psychiatric ward as we are unable to treat him.

he has requested a 'second opinion' I have no doubt that this will not

Originator Details: 15 Nov 2018 10:04 Dr Jonathan Greensides Medical Originally Entered by Details: 15 Nov 2018 10:07 Dr Jonathan Greensides Last Amended by Details: 15 Nov 2018 10:07 Dr Jonathan Greensides Validated by Details: 15 Nov 2018 10:07 Dr Jonathan Greensides Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client: Not Concealed in the light of his not being detained on a section 3 I see no reason for him to remain on an acute psychiatric ward as we are unable to treat him.

he has requested a 'second opinion' I have no doubt that this will not change his view, he has seen many doctors over the last few years, all of whom have thought there is mental disorder, yet he still disagrees.

I have emailed his CC about arranging an outpatient consultant review I have also emailed the forensic consultant regarding an outpatient forensic opinion

	I spoke with PC Tom yesterday, 07506523950. the police intend on charging him with assault. I have told the PC that we will discharge him later today. CC will need to do 7-day f/u. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 15 Nov 2018 Last Amended by Details: 15 Nov 2018 Debajyoti Choudhury Page Numbers: 3 <u>3</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Kept low profile on ward Not happy that he lost tribunal; however, he is not going to be detained under Section 3 Appears to be thought disordered. Did not sleep well last night Plan: 1. Review with a view to discharge and discuss with community team about treatment. <u>15/11/2018</u> Originator Details: 15 Nov 2018 09:59 Debajyoti Choudhury Medical Originally Entered by Details: 15 Nov 2018 10:00 Debajyoti Choudhury Last Amended by Details: 15 Nov 2018 10:00 Debajyoti Choudhury Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Kept low profile on ward Not happy that he lost tribunal; however, he is not going to be detained under Section 3 Appears to be thought disordered. Did not sleep well last night Plan: 1. Review with a view to discharge and discuss with community team about treatment.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 4	• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 15 Nov 2018 Last Amended by Details: 15 Nov 2018 Bibi Khodabux Page Numbers: 4 <u>4</u> 1:1 with Simon who looked calm and relaxed. He interacted well and said he was	

happy with the support of his family and pleased with the outcome of the MHA assessment yesterday. He said he will remain on the ward at present but refused to take his medication. Has slept well.

15/11/2018

4

Originator Details: 15 Nov 2018 05:00 Bibi Khodabux Nursing Originally Entered by Details: 15 Nov 2018 05:05 Bibi Khodabux Last Amended by Details: 15 Nov 2018 05:05 Bibi Khodabux Validated by Details: 15 Nov 2018 05:05 Bibi Khodabux Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

1:1 with Simon who looked calm and relaxed. He interacted well and said he was happy with the support of his family and pleased with the outcome of the MHA assessment yesterday. He said he will remain on the ward at present but refused to take his medication. Has slept well.

• **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 14 Nov 2018
Last Amended by Details: 15 Nov 2018
Laurence Ryan Social Worker
Page Numbers: 4

4

ENFIELD AMHP SERVICE MHAA
Simon was assessed for further detention under S 3 in the quiet room on Dorset Ward with Dr Rao S12, Maggie Garrod AMHP, Larry Ryan Trainee AMHP, Lorraine Cordell, Mother, Jerome, Cousin. Simon was polite

14/11/2018

Originator Details: 14 Nov 2018 16:33 Laurence Ryan Social Worker Originally Entered by Details: 14 Nov 2018 16:36 Laurence Ryan Last Amended by Details: 15 Nov 2018 15:19 Laurence Ryan Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

ENFIELD AMHP SERVICE MHAA

Simon was assessed for further detention under S 3 in the quiet room on Dorset Ward with Dr Rao S12, Maggie Garrod AMHP, Larry Ryan Trainee AMHP, Lorraine Cordell, Mother, Jerome, Cousin. Simon was polite and appropriate. At the outset it was noticed that Simon had a mobile phone in his

	hand and was asked if he was recording the assessment. I informed him that he would require our consent prior to recording. He claimed that he had a legal right to do this. I asked the other professionals present if they objected and they did not. I reinforced with Simon that consent has to be given. Simon talked at length about his experiences of being victimised by the police when asked about reason for arrest. He reported injustices about forged statements, curfew being in place since 2014 which included any area apart from a residential area. He admitted the police believed he had spat but denied doing this. There seemed no evidence of thought disorder. There was some pressure of speech which appeared to be linked to his anxiety that he could be detained under S3 and his need to give us as comprehensive version of his situation in the shortest possible time. No ideas expressed of intention to self-harm ideas or of suicidality. Mother backed up all of his assertions about neighbours making noise. Cousin Jerome claimed to have heard the noises in the flat which he reported stopped once he considered the neighbours in flat above saw him leaving the property and he felt they stopped making noise from then. Denied having any mental health issues but agreed to remain in hospital as an informal patient and would consider taking medication providing, he is seen by a second opinion doctor. It is reported that a referral has been made for a Forensic Assessment by the Care Coordinator and this should be followed up. Dr Rao did not make a recommendation for detainment under S3 as she did not feel the criteria was met as she was not in a position to refute the evidence that Simon gave. No evidence of Simon presenting a risk of harm/safety to himself or others, no obvious risk of neglect. Conclusion He does not accept that he has a mental illness but is willing to stay in hospital so that, in his own words, “Dr Greensides can get to know me better”. Simon will be willing to take medication if a doctor giving a second opinion can justify the need to him. Simon was encouraged to cooperate with Dr Greenside and the community team when discharged. Outcome Simon is not detained under S3 but remains subject to the conditions of S2 until it's expiry unless Dr Greensides completed a S23 form to discharge him from section 2. Report to follow • <u>The Doctor’s Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 14 Nov 2018 Last Amended by Details: 14 Nov 2018	
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	Debajyoti Choudhury Medical Page Numbers: 4 <u>4 + 5</u> Notes <u>5 +4</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Tribunal today Keeping to himself Plan: 1. Tribunal today <u>14/11/2018</u> Originator Details: 14 Nov 2018 10:19 Debajyoti Choudhury Medical Originally Entered by Details: 14 Nov 2018 10:19 Debajyoti Choudhury Last Amended by Details: 14 Nov 2018 10:19 Debajyoti Choudhury Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 5	<u>5 +4</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Tribunal today Keeping to himself Plan: 1. Tribunal today <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 08 Nov 2018 Last Amended by Details: 08 Nov 2018 Monowara Ahmed Social Worker Page Numbers: 5 Enfield AMHP service Received a request for an MHA under s3 of the MHA. His current section 2 is due to expire on 23/11/2018 It appears Simon has a MH T tribunal tomorrow 9/11/2018 The AMHP team has decided to wait for the outcome of the decisions from the tribunal. <u>08/11/2018</u> Originator Details: 08 Nov 2018 09:45 Monowara Ahmed Social Worker Originally Entered by Details: 08 Nov 2018 09:49 Monowara Ahmed Last Amended by Details: 08 Nov 2018 09:49 Monowara Ahmed Validated by Details: 08 Nov 2018 09:49 Monowara Ahmed Significant: No Added to Risk History: No	

Contains Third Party Info: No Conceal from Client:
Not Concealed

Enfield AMHP service

Received a request for an MHA under s3 of the MHA. His current section 2 is due to expire on 23/11/18.

It appears Simon has a MH T tribunal tomorrow 9/11/18. The AMHP team has decided to wait for the outcome of the decisions from the tribunal.

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 08 Nov 2018

Last Amended by Details: 08 Nov 2018

Gladys Osunsina

Page Numbers: 5

STATUS: On Section 2 of the MHA of 1983

MENTAL STATE: Simon has maintained a low profile. Remains relatively calm on the ward, though still lack insight into his mental state.

SOCIAL INCLUSION: Interacting well with other peers and staff.

MEDICATION: - Not on any medication and no pm medication given

PHYSICAL HEALTH: Nil physical health concern.

INVESTIGATION: - Nil carried out today.

PERSONAL CARE & ACTIVITIES:

Self caring which appears satisfactory.

RISK AND OBSERVATION: - Remains on general observation, no immediate risk identified.

LEAVE STATUS: He utilised his unescorted section 17 leave.

08/11/2018

Originator Details: 08 Nov 2018 06:39 Gladys Osunsina Nursing Originally Entered by Details: 08 Nov 2018 06:41 Gladys Osunsina Last Amended by Details: 08 Nov 2018 06:41 Gladys Osunsina Validated by Details: (UNVALIDATED)

Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client: Not Concealed MHA

STATUS: On Section 2 of the MHA of 1983

MENTAL STATE: Simon has maintained a low profile. Remains relatively calm on the ward, though still lack insight into his mental state.

SOCIAL INCLUSION: Interacting well with other peers and staff.

MEDICATION: - Not on any medication and no pm medication given

PHYSICAL HEALTH: Nil physical health concern. **INVESTIGATION:** - Nil carried out today.

	PERSONAL CARE & ACTIVITIES: Self caring which appears satisfactory. RISK AND OBSERVATION: - Remains on general observation, no immediate risk identified. LEAVE STATUS: He utilised his unescorted section 17 leave.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 13 Nov 2018 Last Amended by Details: 13 Nov 2018 Gifty Dadzie Nursing Page Numbers: 6 Simon kept himself occupied in his bed space, he has appeared fairly quiet on the ward. Minimal engagement with staff but pleasant on approach. Ate and drunk adequately during meal time. No concerns reported from Simon. Nursed on general observation. <u>13/11/2018</u> Originator Details: 13 Nov 2018 17:50 Gifty Dadzie Nursing Originally Entered by Details: 13 Nov 2018 17:50 Gifty Dadzie Last Amended by Details: 13 Nov 2018 17:50 Gifty Dadzie Validated by Details: 13 Nov 2018 17:50 Gifty Dadzie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon kept himself occupied in his bed space, he has appeared fairly quiet on the ward. Minimal engagement with staff but pleasant on approach. Ate and drunk adequately during meal time. No concerns reported from Simon. Nursed on general observation.	<u>6</u> <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 13 Nov 2018 Last Amended by Details: 13 Nov 2018 Gifty Dadzie Nursing Page Numbers: 6 Simon kept himself occupied in his bed space, he has appeared fairly quiet on the ward. Minimal engagement with staff but pleasant on approach. Ate and drunk adequately during meal time. No concerns reported from Simon. Nursed on general observation. <u>13/11/2018</u> Originator Details: 13 Nov 2018 17:50 Gifty Dadzie Nursing Originally Entered by Details: 13 Nov 2018 17:50 Gifty Dadzie Last Amended by Details: 13 Nov 2018 17:50 Gifty Dadzie Validated by Details: 13 Nov 2018 17:50 Gifty Dadzie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon kept himself occupied in his bed space, he has appeared fairly quiet on the ward. Minimal engagement with staff but pleasant on approach. Ate and drunk adequately during meal time. No concerns reported from Simon. Nursed on general observation.	

2018 12:57 Dr Jonathan Greensides Significant: No
Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

section 3 form completed, previous one has lapsed

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 13 Nov 2018

Last Amended by Details: 13 Nov 2018

Margaret Garrod

Page Numbers: 6

T/C to Lorraine Cordell mother on

She confirmed that she will be available tomorrow and can attend the Ward at 2.00pm.

She told me at

13/11/2018

Originator Details: 13 Nov 2018 11:18 Margaret Garrod Social Worker Originally Entered by Details: 13 Nov 2018 11:50 Margaret Garrod Last Amended by Details: 13 Nov 2018 11:50 Margaret Garrod Validated by Details: 13 Nov 2018 11:50 Margaret Garrod Significant: No Added to Risk History: No

Contains Third Party Info: Yes, Conceal from Client: Not Concealed Enfield AMHP Service

T/C to Lorraine Cordell mother on

She confirmed that she will be available tomorrow and can attend the Ward at 2.00pm.

She told me at length about her concerns that her son had been misdiagnosed and that the evidence against him that he has mental illness is based on information from Enfield Council who she considers have been supporting allegations from his neighbours, ignoring his complaints that the neighbours are causing him serious noise nuisance. She said she had attended a court hearing on 9th August when Enfield housing had been giving evidence to evict Simon from his flat. Lorraine said that the Court was impressed with her copies of her evidence that disputed the Evidence from Enfield and no Eviction notice was granted. She told me he has colour CCTV that could give documentary evidence that he was in his flat when instances occurred outside.

She also said that in the past Simon had agreed to remain in hospital but had been discharged two days later due to lack of beds.

She told me that Simon had been given leave to visit his dog who since Simon's admission was found to have cancer and has undergone major surgery. She had felt he needed time to be with the dog, to which

he is devoted, and planned to take him to visit her home today.

We agreed to meet on the ward tomorrow Wed

14/11/2018

at 2.00pm Dr Rao Independent S12 agreed to meet us on the ward at 2.00pm.

Dr Greensides agreed that he would be available on the ward. Simon has been very calm on the ward until the matter of him taking medication was raised. He thought there was sufficient evidence for a new med rec for Section 3 to be completed which he will be doing.

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 13 Nov 2018

Last Amended by Details: 13 Nov 2018

Dr Jonathan Greensides

Page Numbers: 6

Contains Third Party Info: No Conceal
from Client: Not Concealed I have given
him leave to visit his dog that is unwell.
dog is at mothers' home and not his.

13/11/2018

Originator Details: 13 Nov 2018 11:00 Dr Jonathan
Greensides Medical Originally Entered by Details:
13 Nov 2018 11:01 Dr Jonathan Greensides Last
Amended by Details: 13 Nov 2018 11:01 Dr
Jonathan Greensides Validated by Details: 13 Nov
2018 11:01 Dr Jonathan Greensides Significant: No
Added to Risk History: No

Contains Third Party Info: No Conceal from Client:
Not Concealed I have given him leave to visit his
dog that is unwell.
dog is at mothers' home and not his.

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 13 Nov 2018

Last Amended by Details: 13 Nov 2018

Dr Jonathan Greensides

Page Numbers: 6 + 7

6

Notes

7

I met with Simon

I had been informed that the section 3
assessment is delayed as the AMHP office
has a number of section 2 assessments to
complete 8t as his section 2 is not near
expiring

13/11/2018

	Originator Details: 13 Nov 2018 10:49 Dr Jonathan Greensides Medical Originally Entered by Details: 13 Nov 2018 10:57 Dr Jonathan Greensides Last Amended by Details: 13 Nov 2018 10:57 Dr Jonathan Greensides Validated by Details: 13 Nov 2018 10:57 Dr Jonathan Greensides Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 7 https://www.youtube.com/watch?v=1uYnrH4k_1I	<u>7</u> I met with Simon I had been informed that the section 3 assessment is delayed as the AMHP office has a number of section 2 assessments to complete & as his section 2 is not near expiring he is at the bottom of the pile. I explained this to Simon & that in the circumstances I feel it is important that he commences treatment he became quite angry, he said he felt the tribunal made the wrong decision & that we were relying on evidence that had been 'thrown out' as it had 'expired' (this was the list of complaints the council had compiled) he then said he would appeal again & would complain about me and that as a result I would not be his doctor as this would be 'a conflict of interests under the 1998 act' I asked him what the 1998 act was, he wasn't able to give a clear explanation. I told him that I felt he was confused about points of law, and that often he would refer to things incorrectly-I know this in regards to his references around the mental health act in particular he was thought disordered (this is apparent much more when he is confronted about his beliefs/behaviour) he continues to express paranoid views about the council & his neighbours, these haven't changed he was paranoid about me and felt that I was persecuting him and trying to 'euthanase him' by prescribing medication, which he told me he would refuse I explained I would prescribe risperidone 2mg at night. he remains insight less and whilst generally calmer his core delusional beliefs remain. Plan -risperidone 2mg nocte -d/w AMHP office <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 13 Nov 2018 Last Amended by Details: 13 Nov 2018 Debajyoti Choudhury Medical Page Numbers: 7 Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital	

	Whiteboard meeting CORDELL, Simon P (Mr) Kept low profile on ward Not happy that he lost tribunal Was given leave to view dog; did not go yesterday Plan: 1, Dr Greensides to discuss with patient with a view to start anti-psychotic <u>13/11/2018</u> Originator Details: 13 Nov 2018 10:08 Debajyoti Choudhury Medical Originally Entered by Details: 13 Nov 2018 10:08 Debajyoti Choudhury Last Amended by Details: 13 Nov 2018 10:08 Debajyoti Choudhury Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Kept low profile on ward Not happy that he lost tribunal Was given leave to view dog; did not go yesterday Plan: 1, Dr Greensides to discuss with patient with a view to start anti-psychotic • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 13 Nov 2018 Last Amended by Details: 13 Nov 2018 Gladys Osunsina Page Numbers: 7+ 8 8 MHA STATUS: -- Detained under Section 2 of the MHA MENTAL STATE: Simon spent most of his time in his room using his computer. He only came out of his room when he wants his demand to be met. He appeared calm in mood and fairly settled in presentation. Patient approached staff that he would like to go the petrol station in the middle of the night. SOCIAL INCLUSION: -- Minimal interaction with both staff and peers. INVESTIGATION: -- Nil carried out this shift PHYSICAL HEALTH: Nil reported and observed. Good dietary and fluid taken. MEDICATION: - Not on any medication at night PERSONAL CARE 6 ACTIVITIES: Self-care appeared satisfactory. Nil activity.	
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	RISK AND OBSERVATION LEVEL: Unpredictable behaviour. Nursed on general observation. LEAVE STATUS - Nil Section 17 leave but can go to the garden for fresh air. 13/11/2018 Originator Details: 13 Nov 2018 05:51 Gladys Osunsina Nursing Originally Entered by Details: 13 Nov 2018 05:59 Gladys Osunsina Last Amended by Details: 13 Nov 2018 05:59 Gladys Osunsina Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 8	8 MHA STATUS: -- Detained under Section 20 of the MHA MENTAL STATE: Simon spent most of his time in his room using his computer. He only came out of his room when he wants his demand to be met. He appeared calm in mood and fairly settled in presentation. Patient approached staff that he would like to go the petrol station in the middle of the night. SOCIAL INCLUSION: -- Minimal interaction with both staff and peers. INVESTIGATION: -- Nil carried out this shift PHYSICAL HEALTH: Nil reported and observed. Good dietary and fluid taken. MEDICATION: - Not on any medication at night PERSONAL CARE 6 ACTIVITIES: Self-care appeared satisfactory. Nil activity. RISK AND OBSERVATION LEVEL: Unpredictable behaviour. Nursed on general observation. LEAVE STATUS - Nil Section 17 leave but can go to the garden for fresh air. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Originator Details: 12 Nov 2018 Last Amended by Details: 12 Nov 2018 Gifty Dadzie Page Numbers: 8 Simon maintained a low profile, presented as fairly calm and relaxed in his mood and behaviour. No aggressive behaviour displayed. No overt psychotic symptom observed. Ate and drunk well in the company of others. Simon has up to 6 hours leave to see his dog. His mother will be visiting the ward tomorrow to see his dog.] 12/11/2018	

Originator Details: 12 Nov 2018 18:52 Gifty Dadzie
Nursing Originally Entered by Details: 12 Nov 2018
18:52 Gifty Dadzie Last Amended by Details: 12
Nov 2018 18:52 Gifty Dadzie Validated by Details:
12 Nov 2018 18:52 Gifty Dadzie Significant: No
Added to Risk History: No Contains Third Party
Info: No Conceal from Client: Not Concealed

Simon maintained a low profile, presented as fairly
calm and relaxed in his mood and behaviour. No
aggressive behaviour displayed.

No overt psychotic symptom observed. Ate and
drunk well in the company of others. Simon has up
to 6 hours leave to see his dog.

His mother will be visiting the ward tomorrow to
see his dog.

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 12 Nov 2018

Last Amended by Details: 12 Nov 2018

Margaret Garrod

Page Numbers: 8

Enfield AMHP Service

T/C by Gideon Ellis AMHP Trainee to

Lorraine Cordell [REDACTED] mother to
seek her availability for the MHAA on

Wednesday

14/11/2018

She thought she might be free but needed
to consult her diary. Gideon agreed a
member of the AMHP Service would ring
her tomorrow at about 10.00am to confirm
the time for the assessment.

Originator Details: 12 Nov 2018 16:33 Margaret
Garrod Social Worker Originally Entered by
Details: 12 Nov 2018 16:41 Margaret Garrod Last
Amended by Details: 12 Nov 2018 16:41 Margaret
Garrod Validated by Details: 12 Nov 2018 16:41
Margaret Garrod Significant: No Added to Risk
History: No

Contains Third Party Info: Yes, Conceal from
Client: Not Concealed

Enfield AMHP Service

T/C by Gideon Ellis AMHP Trainee to Lorraine
Cordell [REDACTED] mother to seek her

availability for the MHAA on Wednesday

14/11/2018

She thought she might be free but needed to consult
her diary. Gideon agreed a member of the AMHP
Service would ring her tomorrow at about 10.00am
to confirm the time for the assessment.

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

	Originator Details: 12 Nov 2018 Last Amended by Details: 12 Nov 2018 Gifty Dadzie Nursing Page Numbers: 8 T/C to Enfield AMHP spoke to Maria the administration staff in regards to allocating a date and time for Simon's assessment for section 3. She tells me Simon's section 2 expires on the 23/11 /2018 until then a date/time could not be allocate for the assessment. She tells me a new recommendation for section 3 would have to be done as the current one will be invalidating when the section expires on 23/11/2018 Originator Details: 12 Nov 2018 11:24 Gifty Dadzie Nursing Originally Entered by Details: 12 Nov 2018 11:24 Gifty Dadzie Last Amended by Details: 12 Nov 2018 18:50 Gifty Dadzie Validated by Details: 12 Nov 2018 18:50 Gifty Dadzie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed T/C to Enfield AMHP spoke to Maria the administration staff in regards to allocating a date and time for Simon's assessment for section 3. She tells me Simon's section 2 expires on the 23/11 /2018 until then a date/time could not be allocate for the assessment. She tells me a new recommendation for section 3 would have to be done as the current one will be invalidating when the section expires on 23/11/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 12 Nov 2018 Last Amended by Details: 12 Nov 2018 Debajyoti Choudhury Page Numbers: 8 + 9 2 Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Kept low profile on ward Not happy that he lost tribunal Plan: 1. Ward staff to chase AMHP - needs to assess for S3 ASAP Originator Details: 12 Nov 2018 10:09 Debajyoti Choudhury Medical Originally Entered by Details: 12 Nov 2018 10:09 Debajyoti Choudhury Last Amended by Details: 12 Nov 2018 10:09 Debajyoti Choudhury Validated by Details: (UNVALIDATED)	
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	Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 9	<u>9</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Kept low profile on ward Not happy that he lost tribunal Plan: 1. Ward staff to chase AMHP - needs to assess for S3 ASAP <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 12 Nov 2018 Last Amended by Details: 12 Nov 2018 Bibi Khodabux Page Numbers: 9 Has slept well at night. Originator Details: 12 Nov 2018 06:40 Bibi Khodabux Nursing Originally Entered by Details: 12 Nov 2018 06:40 Bibi Khodabux Last Amended by Details: 12 Nov 2018 06:40 Bibi Khodabux Validated by Details: 12 Nov 2018 06:40 Bibi Khodabux Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Has slept well at night. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 12 Nov 2018 Last Amended by Details: 12 Nov 2018 Bibi Khodabux Page Numbers: 9 STATUS: Detained under Section 2. MENTAL STATE: — Attempted 1:1 with Simon who became quite distressed and declined to sit down to talk, instead accused staff of colluding with the doctor when writing the tribunal report so that he is further detained on the ward. He was talking on the corridor and was irritable in mood and did not allow staff to explain or talk to him. He remains insight less, blaming others and not receptive to any reassurances. He is preoccupied with his website, computer and spent long hours in his room. SOCIAL INCLUSION: — Minimal interaction with staff and peers. INVESTIGATION: Nil carried out during this shift.	

	PHYSICAL HEALTH: — He did not report any problem. Had night snacks. MEDICATION: -- On no medication at the moment. PERSONAL CARE an ACTIVITIES: Good self-care maintained. RISK AND OBSERVATION LEVEL: To self is low. To others is moderate due to unpredictable behaviour. Nursed on general observation. LEAVE STATUS — Section 17 leave. Originator Details: 12 Nov 2018 00:48 Bibi Khodabux Nursing Originally Entered by Details: 12 Nov 2018 01:03 Bibi Khodabux Last Amended by Details: 12 Nov 2018 06:40 Bibi Khodabux Validated by Details: 12 Nov 2018 06:40 Bibi Khodabux Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: Detained under Section 2. MENTAL STATE: — Attempted 1:1 with Simon who became quite distressed and declined to sit down to talk, instead accused staff of colluding with the doctor when writing the tribunal report so that he is further detained on the ward. He was talking on the corridor and was irritable in mood and did not allow staff to explain or talk to him. He remains insight less, blaming others and not receptive to any reassurances. He is preoccupied with his website, computer and spent long hours in his room. SOCIAL INCLUSION: — Minimal interaction with staff and peers. INVESTIGATION: Nil carried out during this shift. PHYSICAL HEALTH: — He did not report any problem. Had night snacks. MEDICATION: -- On no medication at the moment. PERSONAL CARE an ACTIVITIES: Good self-care maintained. RISK AND OBSERVATION LEVEL: To self is low. To others is moderate due to unpredictable behaviour. Nursed on general observation. LEAVE STATUS — Section 17 leave. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 11 Nov 2018	
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	Last Amended by Details: 11 Nov 2018 Daizzy Annan Page Numbers: 9 + 10 Originator Details: 11 Nov 2018 Last Amended by Details: 11 Nov 2018 Daizzy Annan <u>10</u> MHA STATUS: Detained under Section 2 of the MHA MENTAL STATE: Simon spent most of his time in his room using his computer. He only came out of his room when he wants his demand to be met. He appeared calm in mood and fairly settled in presentation. However, when conversation was initiated, he reported that he doesn't know why we are still keeping him in hospital. Explanation given but Still lack insight into his mental state. SOCIAL INCLUSION: Minimal interaction with both staff and peers. INVESTIGATION: Nil PHYSICAL HEALTH: Nil reported and observed. Good dietary and fluid taken. MEDICATION: Nil medication due. PERSONAL CARE & ACTIVITIES: Self-care appeared satisfactory. Nil activity. RISK AND OBSERVATION LEVEL: Unpredictable behaviour. Nursed on general observation. LEAVE STATUS - Nil Section 17 leave but can go to the garden for fresh air. Originator Details: 11 Nov 2018 16:30 Daizzy Annan Nursing Originally Entered by Details: 11 Nov 2018 16:40 Daizzy Annan Last Amended by Details: 11 Nov 2018 16:40 Daizzy Annan Validated by Details: 11 Nov 2018 16:40 Daizzy Annan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 10	<u>10</u> MHA STATUS: Detained under Section 2 of the MHA MENTAL STATE: Simon spent most of his time in his room using his computer. He only came out of his room when he wants his demand to be met. He appeared calm in mood and fairly settled in presentation. However, when conversation was initiated, he reported that he doesn't know why we are still keeping him in hospital. Explanation given but Still lack insight into his mental state. SOCIAL INCLUSION: Minimal interaction with both staff and peers. INVESTIGATION: Nil	

PHYSICAL HEALTH: Nil reported and observed.
 Good dietary and fluid taken.
MEDICATION: Nil medication due.
PERSONAL CARE & ACTIVITIES: Self-care appeared satisfactory. Nil activity.
RISK AND OBSERVATION LEVEL:
 Unpredictable behaviour. Nursed on general observation.
LEAVE STATUS - Nil Section 17 leave but can go to the garden for fresh air.

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 11 Nov 2018

Last Amended by Details: 11 Nov 2018

Fungai Nembaware

Page Numbers: 10

Mental State:

Simon appeared calm in mood and relatively settled in his mental state and calm in mood. He kept mostly to his bed space, utilising his computer. He interacted selectively with peers and although he kept a low profile mostly. He interacted appropriately with staff. Slept well after night snacks, no management issues.

Physical Health:

Nil reported or observed.

Medication:

Concordant with his prescribed medication.

Personal Care and Activities:

Adequate personal hygiene.

Risks and Observation Level:

Nil new risk identified during this shift.

MH Status:

Currently on S2.

Leave:

No S17 leave.

Originator Details: 11 Nov 2018 04: 28 Fungai Nembaware Nursing Originally Entered by Details: 11 Nov 2018 04:34 Fungai Nembaware Last Amended by Details: 11 Nov 2018 04:34 Fungai Nembaware Validated by Details: (UNVALIDATED)

Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed NOCTE

Mental State:

Simon appeared calm in mood and relatively settled in his mental state and calm in mood. He kept mostly to his bed space, utilising his computer. He interacted selectively with peers and although he kept a low profile mostly. He interacted appropriately with staff. Slept well after night snacks, no management issues.

Physical Health:

Nil reported or observed.

	Medication: Concordant with his prescribed medication. Personal Care and Activities: Adequate personal hygiene. Risks and Observation Level: Nil new risk identified during this shift. MH Status: Currently on S2. Leave: No S17 leave. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 10 Nov 2018 Last Amended by Details: 10 Nov 2018 Akindele Ogunniyi Page Numbers: 10 + 11 <u>11</u> ONE TO ONE INTERACTION WITH SIMON TODAY. MHA STATUS: Detained under Section 2 of the MHA MENTAL STATE: ---- One to one interaction n with Simon this morning. He was seen using computer in his room and stated that all the documents he collected from hospital during this admission has been uploaded on his computer. He talked about many documents in the computer that seems not having meaning. He stated that he does not needs to be in hospital because there is nothing wrong with him. Appeared quite thought disordered and lacks insight into his mental state. Though exhibited nil challenging behaviour on the ward. SOCIAL INCLUSION: Minimal interaction with staff and peers. INVESTIGATION: Nil carried out during this shift. PHYSICAL HEALTH: — Nil physical health concern. Eating and drinking well. MEDICATION: — Nil on medication at the moment. PERSONAL CARE an ACTIVITIES: Good self-care maintained. RISK AND OBSERVATION LEVEL: Nursed on general observation. LEAVE STATUS — Section 17 leaves needs to be reviewed and updated by the team ■ Originator Details: 10 Nov 2018 17:33 Akindele Ogunniyi Nursing Originally Entered by Details: 10 Nov 2018 17:43 Akindele Ogunniyi Last Amended by Details: 10 Nov 2018 17:43 Akindele Ogunniyi Validated by Details: 10 Nov 2018 17:43 Akindele Ogunniyi Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 11	<u>11</u> ONE TO ONE INTERACTION WITH SIMON TODAY. MHA STATUS: Detained under Section 2 of the MHA MENTAL STATE: ---- One to one interaction n with Simon this morning. He was seen using computer in his room and stated that all the documents he collected from hospital during this admission has been uploaded on his computer. He talked about many documents in the computer that seems not having meaning. He stated that he does not needs to be in hospital because there is nothing wrong with him. Appeared quite thought disordered and lacks insight into his mental state. Though exhibited nil challenging behaviour on the ward. SOCIAL INCLUSION: Minimal interaction with staff and peers. INVESTIGATION: Nil carried out during this shift. PHYSICAL HEALTH: — Nil physical health concern. Eating and drinking well. MEDICATION: — Nil on medication at the moment. PERSONAL CARE an ACTIVITIES: Good self-care maintained. RISK AND OBSERVATION LEVEL: Nursed on general observation. LEAVE STATUS — Section 17 leaves needs to be reviewed and updated by the team ■ <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 10 Nov 2018 Originator Details: 10 Nov 2018 Simon Tsenuokpor Page Numbers: 11 MHA STATUS: On Section 2 MENTAL STATE: He Remains fairly calm and keeping to self on the ward, though still lack insight into his mental state. SOCIAL INCLUSION: Interacting well with peers and staff. MEDICATION: He is not on any medication at the moment PHYSICAL HEALTH: Nil reported on the shift. He is eating and drinking well INVESTIGATION: Nil carried out on the shift. PERSONAL CARE 6 ACTIVITIES: Appears satisfactory. He did not participate in any ward base activity, but was observed watching tv in his bed room	

	RISK AND OBSERVATION: Nil reported to self or other. Remains on general observation. LEAVE STATUS: He has section 17 leave Originator Details: 10 Nov 2018 07:01 Simon Tsenuokpor Nursing Originally Entered by Details: 10 Nov 2018 07: 02 Simon Tsenuokpor Last Amended by Details: 10 Nov 2018 07: 02 Simon Tsenuokpor Validated by Details: 10 Nov 2018 07:02 Simon Tsenuokpor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: On Section 2 MENTAL STATE: He Remains fairly calm and keeping to self on the ward, though still lack insight into his mental state. SOCIAL INCLUSION: Interacting well with peers and staff. MEDICATION: He is not on any medication at the moment PHYSICAL HEALTH: Nil reported on the shift. He is eating and drinking well INVESTIGATION: Nil carried out on the shift. PERSONAL CARE 6 ACTIVITIES: Appears satisfactory. He did not participate in any ward base activity, but was observed watching tv in his bed room RISK AND OBSERVATION: Nil reported to self or other. Remains on general observation. LEAVE STATUS: He has section 17 leave <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 09 Nov 2018 Last Amended by Details: 09 Nov 2018 Ebenezer Nana Alabar Nursing Page Numbers: 11+ 12 <u>12</u> Mental State: Simon appears relatively settled in his mental state and calm in mood. He kept mostly to his bed space using his computer, keeping a low profile on the ward. He interacted appropriately with staffs and his peers. He is pleasant on approach to staffs for his needs to be met. There were no management issues. Physical Health: No physical health concerns raised during the shift. Medication/Meal: He was concordant with his prescribed medication, and had adequate fluid and meals intake with no concerns. Personal Care and Activities: His personal hygiene appeared good, and	
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	appropriately dressed for the weather. He kept mostly to his bed space. Risks and Observation Level: No reported risk during the shift and he is nursed on general observations. MH Status: Currently on S2. Leave: No S17 leave given at the moment. Originator Details: 09 Nov 2018 17:18 Ebenezer Nana Alabar Nursing Originally Entered by Details: 09 Nov 2018 17:28 Ebenezer Nana Alabar Last Amended by Details: 09 Nov 2018 17:29 Ebenezer Nana Alabar Validated by Details: 09 Nov 2018 17:29 Ebenezer Nana Alabar Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 12	<u>12</u> Mental State: Simon appears relatively settled in his mental state and calm in mood. He kept mostly to his bed space using his computer, keeping a low profile on the ward. He interacted appropriately with staffs and his peers. He is pleasant on approach to staffs for his needs to be met. There were no management issues. Physical Health: No physical health concerns raised during the shift. Medication/Meal: He was concordant with his prescribed medication, and had adequate fluid and meals intake with no concerns. Personal Care and Activities: His personal hygiene appeared good, and appropriately dressed for the weather. He kept mostly to his bed space. Risks and Observation Level: No reported risk during the shift and he is nursed on general observations. MH Status: Currently on S2. Leave: No S17 leave given at the moment. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 09 Nov 2018 Last Amended by Details: 04 Dec 2018 Maria Bruce Medical Page Numbers: 12 Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Tribunal yesterday Section 2 upheld Due for assessment for S3 Plan: 1. Ward staff to chase AMHP - need to assess for S3 today as recommendation due to expire Originator Details: 09 Nov 2018 11:04 Maria Bruce Medical Originally Entered by Details: 09 Nov 2018	

11:04 Maria Bruce Last Amended by Details: 04 Dec 2018 16:03
Maria Bruce Validated by Details: 04 Dec 2018 16:03 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Dorset Ward - Chase Farm Hospital

Whiteboard meeting
CORDELL, Simon P (Mr)
Tribunal yesterday
Section 2 upheld
Due for assessment for S3

Plan:

1. Ward staff to chase AMHP - need to assess for S3 today as recommendation due to expire

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 09 Nov 2018

Last Amended by Details: 09 Nov 2018

Gladys Osunsina

Page Numbers: 12 + 13

13

ENTRY BY: Lawrence Gina

MHA STATUS: On Section 2 of the MHA of 1983

MENTAL STATE: He Remains relatively calm and settled on the ward maintaining low profile, though still lack insight into his mental state.

SOCIAL INCLUSION: Interacting well with other service users and staff.

MEDICATION: - Not on any medication at the moment

PHYSICAL HEALTH: Nil physical health concern. He was observed to have had adequate dietary and fluid intake

INVESTIGATION: - Nil carried out today.

PERSONAL CARE & ACTIVITIES:

Self caring which appears satisfactory.

There were no ward-based activities by the OT on this shift

RISK AND OBSERVATION: -- None identify with him or other. Remains on general observation.

LEAVE STATUS: He has section 17 leave

Originator Details: 09 Nov 2018 07:16 Gladys Osunsina Nursing Originally Entered by Details: 09 Nov 2018 07:23 Gladys Osunsina Last Amended by Details: 09 Nov 2018 07:23 Gladys Osunsina Validated by Details: 09 Nov 2018 07: 23 Gladys Osunsina Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.

<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 13	<u>13</u> ENTRY BY: Lawrence Gina MHA STATUS: On Section 2 of the MHA of 1983 MENTAL STATE: He Remains relatively calm and settled on the ward maintaining low profile, though still lack insight into his mental state. SOCIAL INCLUSION: Interacting well with other service users and staff. MEDICATION: - Not on any medication at the moment PHYSICAL HEALTH: Nil physical health concern. He was observed to have had adequate dietary and fluid intake INVESTIGATION: - Nil carried out today. PERSONAL CARE & ACTIVITIES: Self caring which appears satisfactory. There were no ward-based activities by the OT on this shift RISK AND OBSERVATION: -- None identify with him or other. Remains on general observation. LEAVE STATUS: He has section 17 leave <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 08 Nov 2018 Last Amended by Details: 08 Nov 2018 Gifty Dadzie Page Numbers: 13 MHA STATUS: Detained on section 2 of the MHA 1983 as amended 2007 MENTAL STATE: - Simon remains relatively calm on the ward. Seen interacting with staff and peers. He did not utilise his leave, he attended his tribunal and he unfortunately lost his tribunal. Remains on section 2 of the mental health act. SOCIAL INCLUSION: Simon did not utilise his section 17 leave, INVESTIGATION: -Nil carried out today. PHYSICAL HEALTH: Nil physical health concern. Ate and drunk adequately during meal times MEDICATION: — Nil regular medication prescribed PERSONAL CARE 6 ACTIVITIES: - Maintains good personal care. RISK AND OBSERVATION LEVEL: Nursed on general observation. LEAVE STATUS: He utilised his section 17 leave and returned to the ward. Originator Details: 08 Nov 2018 17:48 Gifty Dadzie Nursing Originally Entered by Details: 08 Nov 2018 17:43 Gifty Dadzie Last Amended by Details: 08 Nov 2018 17:48 Gifty Dadzie Validated by Details: 08 Nov 2018 17:48 Gifty Dadzie Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: Detained on section 2 of the MHA 1983 as amended 2007 MENTAL STATE: - Simon remains relatively calm on the ward. Seen interacting with staff and peers. He did not utilise his leave, he attended his tribunal and he unfortunately lost his tribunal. Remains on section 2 of the mental health act. SOCIAL INCLUSION: Simon did not utilise his section 17 leave, INVESTIGATION: -Nil carried out today. PHYSICAL HEALTH: Nil physical health concern. Ate and drunk adequately during meal times MEDICATION: — Nil regular medication prescribed PERSONAL CARE & ACTIVITIES: - Maintains good personal care. RISK AND OBSERVATION LEVEL: Nursed on general observation. LEAVE STATUS: He utilised his section 17 leave and returned to the ward. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 08 Nov 2018 Last Amended by Details: 08 Nov 2018 Lisa Brady Page Numbers: 13 Enfield FICS Dr Tim Rogers has contacted Dr Jonathan Greensides - await update Originator Details: 08 Nov 2018 15: 03 Lisa Brady Social Worker Originally Entered by Details: 08 Nov 2018 15: 04 Lisa Brady Last Amended by Details: 08 Nov 2018 15: 04 Lisa Brady Validated by Details: 08 Nov 2018 15:04 Lisa Brady Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield FICS Dr Tim Rogers has contacted Dr Jonathan Greensides - await update <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 08 Nov 2018 Last Amended by Details: 04 Dec 2018 Maria Bruce Page Numbers: 13 + 14 <u>14</u>	
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	Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Tribunal today Keeping to himself Plan: Tribunal today Originator Details: 08 Nov 2018 13:05 Maria Bruce Medical Originally Entered by Details: 08 Nov 2018 13:05 Maria Bruce Last Amended by Details: 04 Dec 2018 16:03 Maria Bruce Validated by Details: 04 Dec 2018 16:03 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 14	<u>14</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Tribunal today Keeping to himself Plan: 1. Tribunal today <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 08 Nov 2018 Last Amended by Details: 08 Nov 2018 Monowara Ahmed Page Numbers: 14 Enfield AMHP service Received a request for an MHA under s3 of the MHA. His current section 2 is due to expire on 23/11/2018 It appears Simon has a MH Tribunal tomorrow 09/11/2018 The AMHP team has decided to wait for the outcome of the decisions from the tribunal. Originator Details: 08 Nov 2018 09:45 Monowara Ahmed Social Worker Originally Entered by Details: 08 Nov 2018 09:49 Monowara Ahmed Last Amended by Details: 08 Nov 2018 09:49 Monowara Ahmed Validated by Details: 08 Nov 2018 09:49 Monowara Ahmed Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield AMHP service Received a request for an MHA under s3 of the MHA. His current section 2 is due to expire on 23/11/18. It appears Simon has a MH Tribunal tomorrow 9/11/18. The AMHP team has decided to wait for the outcome of the decisions from the tribunal.	

	<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 08 Nov 2018 Last Amended by Details: 08 Nov 2018 Gladys Osunsina Page Numbers: 14 MHA STATUS: On Section 2 of the MHA of 1983 MENTAL STATE: Simon has maintained a low profile. Remains relatively calm on the ward, though still lack insight into his mental state. SOCIAL INCLUSION: Interacting well with other peers and staff. MEDICATION: - Not on any medication and no pm medication given PHYSICAL HEALTH: Nil physical health concern. INVESTIGATION: - Nil carried out today. PERSONAL CARE & ACTIVITIES: Self caring which appears satisfactory. RISK AND OBSERVATION: - Remains on general observation, no immediate risk identified. LEAVE STATUS: He utilised his unescorted section 17 leave. Originator Details: 08 Nov 2018 06:39 Gladys Osunsina Nursing Originally Entered by Details: 08 Nov 2018 06:41 Gladys Osunsina Last Amended by Details: 08 Nov 2018 06:41 Gladys Osunsina Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: On Section 2 of the MHA of 1983 MENTAL STATE: Simon has maintained a low profile. Remains relatively calm on the ward, though still lack insight into his mental state. SOCIAL INCLUSION: Interacting well with other peers and staff. MEDICATION: - Not on any medication and no pm medication given PHYSICAL HEALTH: Nil physical health concern. INVESTIGATION: - Nil carried out today. PERSONAL CARE & ACTIVITIES: Self caring which appears satisfactory. RISK AND OBSERVATION: - Remains on general observation, no immediate risk identified. LEAVE STATUS: He utilised his unescorted section 17 leave.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u>	<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 07 Nov 2018 Last Amended by Details: 07 Nov 2018	

Akindele Ogunniyi

Page Numbers: 15

MHA STATUS: — Detained under Section 2 of the MHA.

MENTAL STATE: -- appeared relatively calm on the ward. Seen interacting well with staff and peers. He utilised his section 17 leave unescorted and returned to the ward. Though remains vague in his mental state as he denied any mental health problems.

SOCIAL INCLUSION: -- Interacting well on the ward and utilised his section 17 leave.

INVESTIGATION: -Nil carried out today.

PHYSICAL HEALTH: Nil physical health concern. Eating and drinking well.

MEDICATION: — Nil regular medication prescribed

PERSONAL CARE & ACTIVITIES: - Appeared well kempt. He maintained his personal hygiene.

RISK AND OBSERVATION LEVEL: Nursed on general observation.

LEAVE STATUS He utilised his section 17 leave and returned to the ward ■

15

Originator Details: 07 Nov 2018 18:22 Akindele Ogunniyi Nursing Originally Entered by Details: 07 Nov 2018 18:31 Akindele Ogunniyi Last Amended by Details: 07 Nov 2018 18:31 Akindele Ogunniyi Validated by Details: 07 Nov 2018 18:31 Akindele Ogunniyi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

MHA STATUS: — Detained under Section 2 of the MHA.

MENTAL STATE: -- appeared relatively calm on the ward. Seen interacting well with staff and peers. He utilised his section 17 leave unescorted and returned to the ward. Though remains vague in his mental state as he denied any mental health problems.

SOCIAL INCLUSION: -- Interacting well on the ward and utilised his section 17 leave.

INVESTIGATION: -Nil carried out today.

PHYSICAL HEALTH: Nil physical health concern. Eating and drinking well.

MEDICATION: — Nil regular medication prescribed

PERSONAL CARE & ACTIVITIES: - Appeared well kempt. He maintained his personal hygiene.

RISK AND OBSERVATION LEVEL: Nursed on general observation.

LEAVE STATUS He utilised his section 17 leave and returned to the ward ■

	<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 07 Nov 2018 Last Amended by Details: 04 Dec 2018 Maria Bruce Page Numbers: 15 Whiteboard meeting CORDELL, Simon P (Mr) Tribunal tomorrow Occupies himself in his room on his computer No issue on the ward Plan for S3 for treatment Communications office emailed re website Plan: 1 Await S3 assessment 2. Tribunal tomorrow Originator Details: 07 Nov 2018 11:03 Maria Bruce Medical Originally Entered by Details: 07 Nov 2018 11:03 Maria Bruce Last Amended by Details: 04 Dec 2018 16:04 Maria Bruce Validated by Details: 04 Dec 2018 16:04 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Tribunal tomorrow Occupies himself in his room on his computer No issue on the ward Plan for S3 for treatment Communications office emailed re website Plan: 1 Await S3 assessment 2. Tribunal tomorrow <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 07 Nov 2018 Last Amended by Details: 07 Nov 2018 Bibi Khodabux Page Numbers: 15 + 16 <u>16</u> MHA STATUS: Section 2 MENTAL STATE: 1:1 with Simon who is preoccupied with his tribunal hearing. He was insisting that he is being framed for something he did not do. He said he has his mother's support. He denied being paranoid against his neighbours. He insists he is innocent and has no mental illness. He has no insight. Reassurances and support offered by staff by attempting to explain that he is being offered help, treatment for his condition and not being accused of any crime. SOCIAL INCLUSION: Mostly on his computer in his room during the shift is INVESTIGATION: None carried out.	
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	PHYSICAL HEALTH: He did not report any problem. He ate and drank well. MEDICATION: Not on regular medication. PERSONAL CARE 6 ACTIVITIES: Is satisfactory, he interacted with fellow patients. RISK AND OBSERVATION LEVEL: Of slow progress in his mental state. To others on the ward is low. On general observation. LEAVE: Granted section 17 leave. Has slept well. Originator Details: 07 Nov 2018 07:02 Bibi Khodabux Nursing Originally Entered by Details: 07 Nov 2018 07:14 Bibi Khodabux Last Amended by Details: 07 Nov 2018 07:30 Bibi Khodabux Validated by Details: 07 Nov 2018 07:30 Bibi Khodabux Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 16	<u>16</u> MHA STATUS: Section 2 MENTAL STATE: 1:1 with Simon who is preoccupied with his tribunal hearing. He was insisting that he is being framed for something he did not do. He said he has his mother's support. He denied being paranoid against his neighbours. He insists he is innocent and has no mental illness. He has no insight. Reassurances and support offered by staff by attempting to explain that he is being offered help, treatment for his condition and not being accused of any crime. SOCIAL INCLUSION: Mostly on his computer in his room during the shift is INVESTIGATION: None carried out. PHYSICAL HEALTH: He did not report any problem. He ate and drank well. MEDICATION: Not on regular medication. PERSONAL CARE 6 ACTIVITIES: Is satisfactory, he interacted with fellow patients. RISK AND OBSERVATION LEVEL: Of slow progress in his mental state. To others on the ward is low. On general observation. LEAVE: Granted section 17 leave. Has slept well. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 06 Nov 2018 Gifty Dadzie Nursing Last Amended by Details: 06 Nov 2018 Page Numbers: 16	

	MHA STATUS: On Section 2 MENTAL STATE: Simon has maintained a low profile. Remains relatively calm on the ward, though still lack insight into his mental state. Seen interacting well with peers and staff. He utilised his leave on hospital ground. SOCIAL INCLUSION: He utilised his section 17 leave and engaging with other peers. MEDICATION: - PHYSICAL HEALTH: Nil physical health concern. INVESTIGATION: - Nil carried out today. PERSONAL CARE & ACTIVITIES: He attending to his personal care. RISK AND OBSERVATION: — Remains on general observation. LEAVE STATUS: He utilised his unescorted section 17 leave. Originator Details: 06 Nov 2018 17:42 Gifty Dadzie Nursing Originally Entered by Details: 06 Nov 2018 17:42 Gifty Dadzie Last Amended by Details: 06 Nov 2018 17:42 Gifty Dadzie Validated by Details: 06 Nov 2018 17:42 Gifty Dadzie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: On Section 2 MENTAL STATE: Simon has maintained a low profile. Remains relatively calm on the ward, though still lack insight into his mental state. Seen interacting well with peers and staff. He utilised his leave on hospital ground. SOCIAL INCLUSION: He utilised his section 17 leave and engaging with other peers. MEDICATION: - PHYSICAL HEALTH: Nil physical health concern. INVESTIGATION: - Nil carried out today. PERSONAL CARE & ACTIVITIES: He attending to his personal care. RISK AND OBSERVATION: — Remains on general observation. LEAVE STATUS: He utilised his unescorted section 17 leave. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 06 Nov 2018 Last Amended by Details: 06 Nov 2018 Gifty Dadzie Page Numbers: 16	
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	Simon was seen by a solicitor today in preparation to his upcoming tribunal hearing. Originator Details: 06 Nov 2018 17:42 Gifty Dadzie Nursing Originally Entered by Details: 06 Nov 2018 17:43 Gifty Dadzie Last Amended by Details: 06 Nov 2018 17:43 Gifty Dadzie Validated by Details: 06 Nov 2018 17:43 Gifty Dadzie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon was seen by a solicitor today in preparation to his upcoming tribunal hearing. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 06 Nov 2018 Last Amended by Details: 04 Dec 2018 Maria Bruce Medical Page Numbers: 16 + 17 <u>17</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Very preoccupied with his website, the tribunal and that a recommendation for S3 has been made Has put MHA section paperwork on his website Limited insight Plan: 1. Await S3 assessment 2. Inform communications office of documents online. Originator Details: 06 Nov 2018 12:20 Maria Bruce Medical Originally Entered by Details: 06 Nov 2018 12:20 Maria Bruce Last Amended by Details: 04 Dec 2018 16:04 Maria Bruce Validated by Details: 04 Dec 2018 16:04 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 17	<u>17</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Very preoccupied with his website, the tribunal and that a recommendation for S3 has been made Has put MHA section paperwork on his website Limited insight Plan: 1. Await S3 assessment 2. Inform communications office of documents online. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u>	

	<u>Folder 4</u> Originator Details: 06 Nov 2018 Last Amended by Details: 06 Nov 2018 Simon Tsenuokpor Page Numbers: 17 MHA Status: He is on section 2 Mental State: Simon was observed to be stable in the mood and behaviour, polite to staff and peers. He however, has no insight to his current mental state Social Inclusion: He was observed to be interacting with staff and peers in the lounge area Medication: He is not on any medication Physical Health: Nil reported on the shift. Had snacks, hot drinks, take away and appeared to have slept well Investigation: Nil done during this shift. Personal Hygiene and Activities: Appears satisfactory and was observed watching tv in his room for a while Risk and Observation: Nil reported or observed on the shift. He is being nursed on general observations Leave: He did not utilise his sec 17 leave on the shift Originator Details: 06 Nov 2018 06:29 Simon Tsenuokpor Nursing Originally Entered by Details: 06 Nov 2018 06: 30 Simon Tsenuokpor Last Amended by Details: 06 Nov 2018 06:30 Simon Tsenuokpor Validated by Details: 06 Nov 2018 06:30 Simon Tsenuokpor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status: He is on section 2 Mental State: Simon was observed to be stable in the mood and behaviour, polite to staff and peers. He however, has no insight to his current mental state Social Inclusion: He was observed to be interacting with staff and peers in the lounge area Medication: He is not on any medication Physical Health: Nil reported on the shift. Had snacks, hot drinks, take away and appeared to have slept well Investigation: Nil done during this shift. Personal Hygiene and Activities: Appears satisfactory and was observed watching tv in his room for a while Risk and Observation: Nil reported or observed on the shift. He is being nursed on general observations Leave: He did not utilise his sec 17 leave on the shift • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 05 Nov 2018	
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	Last Amended by Details: 05 Nov 2018 Jameson Simwanza Page Numbers: 17 + 18 18 Enfield AMHP service entry; Referral received from Dorset ward for a section 3 MHA assessment for Simon. Currently Simon is under section 2 of the MHA 1983/2007 which is due to expire on Originator Details: 05 Nov 2018 16:04 Mr Jameson Simwanza Social Worker Originally Entered by Details: 05 Nov 2018 16:04 Mr Jameson Simwanza Last Amended by Details: 05 Nov 2018 16:15 Mr Jameson Simwanza Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 18	18 Enfield AMHP service entry; Referral received from Dorset ward for a section 3 MHA assessment for Simon. Currently Simon is under section 2 of the MHA 1983/2007 which is due to expire on 23/11/2018 He was detained on section 2 on 26/10/18. Dr Greensides reviewed/examined Simon today (05/11/18) and felt that Simon is unwell and needing to start on new treatment. Dr Greensides does not wish to do this prior to any section 3 as feels that it will not be beneficial to take medication against his will unless he is subsequently detained on a section 3 (see Greensides progress notes below) However, also, Simon has appealed his section - no confirmed date yet (see Rio entry by: Dr BRUCE, Maria on 2 Nov 2018) Furthermore; when I phoned Simon's mother who I identified to be his Nearest Relative, in order to consult with her regarding carrying out an MHA assessment for section3, she argued that she has not been given sufficient time so that she could attend the assessment. She requested for notice or more time to enable her attends the assessment when it is set up. Plan: Explore above issues when considering setting up assessment N Relative, mother, Lorraine Cordell, mobile, and tel wants sufficient notice to attend the assessment. Simon is appealing his section 2 detention. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Originator Details: 05 Nov 2018 Last Amended by Details: 05 Nov 2018 Akindele Ogunniyi	

	Page Numbers: 18 MHA STATUS: On Section 2 of the MHA of 1983 MENTAL STATE: - Appeared relatively calm on the ward, though still lack insight into his mental state. Seen interacting well with peers and staff. He used his section 17 leave and returned to the ward. NB - First medical recommendation for section 3 written up by Dr Greensides and AMHP office informed. SOCIAL INCLUSION: - He utilised his section 17 leave and seen interacting well with staff and fellow patients. MEDICATION: - He concordant with his prescribed medication PHYSICAL HEALTH: — Nil physical health concern. INVESTIGATION: - Nil carried out today. PERSONAL CARE 6 ACTIVITIES: — He maintained his personal hygiene. RISK AND OBSERVATION: - Remains on general observation. LEAVE STATUS — He utilised his unescorted section 17 leave. Originator Details: 05 Nov 2018 14:39 Akindele Ogunniyi Nursing Originally Entered by Details: 05 Nov 2018 14:48 Akindele Ogunniyi Last Amended by Details: 05 Nov 2018 14:54 Akindele Ogunniyi Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: On Section 2 of the MHA of 1983 MENTAL STATE: - Appeared relatively calm on the ward, though still lack insight into his mental state. Seen interacting well with peers and staff. He used his section 17 leave and returned to the ward. NB - First medical recommendation for section 3 written up by Dr Greensides and AMHP office informed. SOCIAL INCLUSION: - He utilised his section 17 leave and seen interacting well with staff and fellow patients. MEDICATION: - He concordant with his prescribed medication PHYSICAL HEALTH: — Nil physical health concern. INVESTIGATION: - Nil carried out today. PERSONAL CARE 6 ACTIVITIES: — He maintained his personal hygiene. RISK AND OBSERVATION: - Remains on general observation. LEAVE STATUS — He utilised his unescorted section 17 leave. • The Doctor's Folder / pub Book Issue: 1!	
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	<u>Stage 4</u> <u>Folder 4</u> Originator Details: 05 Nov 2018 Last Amended by Details: 05 Nov 2018 Ioannis Patkas Psychology Page Numbers: 18 Simon refused to be assessed earlier today. He explained that his admission was not legitimate and he was advised by his solicitor not to engage with HCPs. Originator Details: 05 Nov 2018 14:27 Ioannis Patkas Psychology Originally Entered by Details: 05 Nov 2018 14:28 Ioannis Patkas Last Amended by Details: 05 Nov 2018 14:28 Ioannis Patkas Validated by Details: 05 Nov 2018 14:28 Ioannis Patkas Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon refused to be assessed earlier today. He explained that his admission was not legitimate and he was advised by his solicitor not to engage with HCPs. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 05 Nov 2018 Marilyn Cameron Therapy Last Amended by Details: 05 Nov 2018 Page Numbers: 18 + 19 <u>19</u> OT: Self pampering 11-12noon Simon came into the room and spoke about how unfair it was that he was in hospital. He spoke about the police conspiring against him. Simon said the police were very Originator Details: 05 Nov 2018 12:39 Marilyn Cameron Therapy Originally Entered by Details: 05 Nov 2018 12:41 Marilyn Cameron Last Amended by Details: 05 Nov 2018 13:12 Marilyn Cameron Validated by Details: 05 Nov 2018 13:12 Marilyn Cameron Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 19	<u>19</u> OT: Self pampering 11-12noon Simon came into the room and spoke about how unfair it was that he was in hospital. He spoke about the police conspiring against him. Simon said the police were very careful in how they handled him. Simon said the police could not prove/find him guilty of anything. Simon said he did not have a psychosis but as he was suing the police, they would	

	not put him in prison but made up the charge that he was psychotic. He said he was not grandiose and he did own and run a business. He said he was not bankrupt and despite receipts provided by his mother did not over spend. He mentioned that someone had accused him of something he'd done in his flat but it hadn't been true never the less the police had still brought him to hospital. He feels everything done to him is against his 'human rights. Technician did try to point out /reason with him but he only reason things out according to his beliefs. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 05 Nov 2018 Jonathan Greensides Last Amended by Details: 05 Nov 2018 Page Numbers: 19 + 20 + 21 <u>20</u> Progress Notes I had a long discussion with his mother on Friday, I was not able to write up on RIO then as it was not working I explained that I felt Simon was unwell and that he had paranoid psychotic symptoms and I felt at times was thought disordered, and heard things. I didn't accept that the persecution he described from his neighbour <u>21</u> IMP - I have made an application for a section 3. he suffers with a paranoid psychosis, most likely schizophrenia and there are risks to his health (mental), safety (retaliation) and to others-he has threatened his neighbours, filmed through their letter box etc. in response to his paranoia 6 caused considerable psychological distress. if this is upheld then we will start a trial of antipsychotic treatment, I do not wish to do this prior to any section 3 as it will not be beneficial to take medication against his will unless he is subsequently detained on a section 3. Originator Details: 05 Nov 2018 12:03 Dr Jonathan Greensides Medical Originally Entered by Details: 05 Nov 2018 12:23 Dr Jonathan Greensides Last Amended by Details: 05 Nov 2018 12: 23 Dr Jonathan Greensides Validated by Details: 05 Nov 2018 12:23 Dr Jonathan Greensides Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u>	<u>20</u> Progress Notes	

Folder 4

Page Numbers: 20

I had a long discussion with his mother on Friday, I was not able to write up on RIO then as it was not working

I explained that I felt Simon was unwell and that he had paranoid psychotic symptoms and I felt at times was thought disordered, and heard things.

I didn't accept that the persecution he described from his neighbour one floor up was happening as I didn't believe this was possible and I felt what was being described was paranoid psychosis. His mother does not agree and feels that this is to do with poor sound proofing St deliberate targeting by a neighbour and subsequent persecution by the authorities.

she asked me for a letter to be given to the legal dept, of Enfield council, advocating for Simon to have a two-bed property so that someone can stay to provide support for him.

I told her we do not write letters of this nature but that if the dept got in touch with us we would answer any questions they had.

she gave the details as Ludmilla Lyavoo tel 02083798323 ludmilla.lvavoo@enfield.gov.uk

I explained to his mother that I intended on applying for a section 3 as I felt he needed some treatment.

5/11/18

I interviewed Simon.

we went over some of the things, he maintained that the neighbour one floor above was persecuting him and was able to locate him in his flat and then bang, flush the toilet and make noise, the purpose of which was persecution.

He confirmed that this happens at all times of day and even if he changes his routine etc.

I asked him about the neighbour directly above he said he was OK. but went on to describe one time when he 'went mad in his flat, following me round and banging on the floor like crazy' He admitted that he confronted him after this, but denied any assault etc (I have been informed that he attacked this neighbour and that he was subsequently very frightened to flush his toilet)

I explained to Simon that I felt he was unwell with a paranoid psychosis and that I felt he needed to take some treatment, he disagreed and then accused me of 'being leaned on by people above you' On closer questioning he was referring to the police.

I asked him if he smoked much cannabis, he said he used to, then said every now & then. I asked him about the smell of cannabis in his room, he said that he'd had a few visitors.

he agreed to provide a urine sample at l/v

he is relatively well presented

his speech is rapid but not pressured, he makes frequent legal references some of which I know to be inaccurate (i.e. around the mental health act) and remains very preoccupied with his perceived persecution, of which this admission is part.

he is not elated or depressed in his mood

	his thinking is unclear and his answers are often very circumstantial, in my view he is at times thought disordered he remains paranoid with a complex system involving his neighbour, the council, police and the NHS I suspect he suffers with auditory hallucinations he is insight less and will not accept any treatment.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 21	<u>21</u> IMP - I have made an application for a section 3. he suffers with a paranoid psychosis, most likely schizophrenia and there are risks to his health (mental), safety (retaliation) and to others-he has threatened his neighbours, filmed through their letter box etc. in response to his paranoia 6 caused considerable psychological distress. if this is upheld then we will start a trial of antipsychotic treatment, I do not wish to do this prior to any section 3 as it will not be beneficial to take medication against his will unless he is subsequently detained on a section 3. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 05 Nov 2018 Last Amended by Details: 04 Dec 2018 Maria Bruce Page Numbers: 21 Whiteboard meeting CORDELL, Simon P (Mr) Very preoccupied with tribunal + corruption website No change in presentation Plan: 1. Application for section 3 Originator Details: 05 Nov 2018 11:17 Maria Bruce Medical Originally Entered by Details: 05 Nov 2018 11: 18 Maria Bruce Last Amended by Details: 04 Dec 2018 16: 04 Maria Bruce Validated by Details: 04 Dec 2018 16:04 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Very preoccupied with tribunal + corruption website No change in presentation Plan: 1. Application for section 3 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 05 Nov 2018 Last Amended by Details: 05 Nov 2018 Bibi Khodabux Page Numbers: 21	

	LEAVE: Granted section 17 leave. Originator Details: 05 Nov 2018 Last Amended by Details: 05 Nov 2018 Bibi Khodabux MHA STATUS: Section 2 MENTAL STATE: 1:1 with Simon who was polite and engaged well. He became anxious when he started discussing the tribunal. He said he was wrongly accused by police and does not believe he is ill. He still believes his neighbours are wrong and he is not taking any responsibility for any harm towards his neighbours. He thanked staff for their help and support on the ward. He agreed to have a copy of his care plan and discussed it at length. SOCIAL INCLUSION: Mostly on computer in his room during the shift, showing staff his writing about the tribunal. INVESTIGATION: None carried out. PHYSICAL HEALTH: He did not report any problem. He ate and drank well. MEDICATION: Not on regular medication. PERSONAL CARE & ACTIVITIES: Is satisfactory, he interacted with fellow patients. RISK AND OBSERVATION LEVEL: Of slow progress in his mental state due to non-compliance. On general observation. Originator Details: 05 Nov 2018 04:15 Bibi Khodabux Nursing Originally Entered by Details: 05 Nov 2018 04:24 Bibi Khodabux Last Amended by Details: 05 Nov 2018 04:27 Bibi Khodabux Validated by Details: 05 Nov 2018 04:27 Bibi Khodabux Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: Section 2 MENTAL STATE: 1:1 with Simon who was polite and engaged well. He became anxious when he started discussing the tribunal. He said he was wrongly accused by police and does not believe he is ill. He still believes his neighbours are wrong and he is not taking any responsibility for any harm towards his neighbours. He thanked staff for their help and support on the ward. He agreed to have a copy of his care plan and discussed it at length. SOCIAL INCLUSION: Mostly on computer in his room during the shift, showing staff his writing about the tribunal. INVESTIGATION: None carried out. PHYSICAL HEALTH: He did not report any problem.	
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	He ate and drank well. MEDICATION: Not on regular medication. PERSONAL CARE & ACTIVITIES: Is satisfactory, he interacted with fellow patients. RISK AND OBSERVATION LEVEL: Of slow progress in his mental state due to non-compliance. On general observation. LEAVE: Granted section 17 leave.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 22	• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 04 Nov 2018 Last Amended by Details: 04 Nov 2018 Ralph Antwi Nursing Page Numbers: 22 <u>22</u> MHA Status's 2 MENTAL STATE: Appeared reasonably stable in his mental state. SOCIAL INCLUSION: Mostly on computer in his bed area during the shift, observed interacting with his peers. INVESTIGATION: None carried out PHYSICAL HEALTH: Nil reported or observed during this shift, eating and drinking very well. MEDICATION: Not on regular medication. PERSONAL CARE & ACTIVITIES: Satisfactory, did not participate on ward activities. RISK AND OBSERVATION LEVEL: Nil, on general observation. LEAVE: On section 17 leave. <u>22</u> Originator Details: 04 Nov 2018 18:22 Ralph Antwi Nursing Originally Entered by Details: 04 Nov 2018 18:31 Ralph Antwi Last Amended by Details: 04 Nov 2018 18:31 Ralph Antwi Validated by Details: 04 Nov 2018 18:31 Ralph Antwi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status's 2 MENTAL STATE: Appeared reasonably stable in his mental state. SOCIAL INCLUSION: Mostly on computer in his bed area during the shift, observed interacting with his peers. INVESTIGATION: None carried out PHYSICAL HEALTH: Nil reported or observed during this shift, eating and drinking very well. MEDICATION: Not on regular medication. PERSONAL CARE & ACTIVITIES: Satisfactory, did not participate on ward activities. RISK AND OBSERVATION LEVEL: Nil, on general observation.	

LEAVE: On section 17 leave.

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 04 Nov 2018

Last Amended by Details: 04 Nov 2018

Robert Nnubia

Page Numbers: 22

MHA Status: Sec 2

Mental State: Presented as polite, calm and stable in mental state on the shift. He was observed to be keeping to self in his bed space watching tv during most part of the shift. No paranoid ideas expressed on the shift

Social Inclusion: Minimal interaction on the ward, however pleasant on approach

Investigation: Nil on the shift

Physical Health: Nil complained or observed on the shift. Had hot drink and snack and retired to bed and appears to have slept well.

Medication: He is not on any prescribed medication

Personal Care and Activities: Appears satisfactory and did not participate in any ward base activity

Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations.

Leave Status: He did not utilise his sec 17 leave on the shift

Originator Details: 04 Nov 2018 05:46 Robert Nnubia Nursing Originally Entered by Details: 04 Nov 2018 05:46 Robert Nnubia Last Amended by Details: 04 Nov 2018 05:46 Robert Nnubia Validated by Details: 04 Nov 2018 05:46 Robert Nnubia Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

MHA Status: Sec 2

Mental State: Presented as polite, calm and stable in mental state on the shift. He was observed to be keeping to self in his bed space watching tv during most part of the shift. No paranoid ideas expressed on the shift

Social Inclusion: Minimal interaction on the ward, however pleasant on approach

Investigation: Nil on the shift

Physical Health: Nil complained or observed on the shift. Had hot drink and snack and retired to bed and appears to have slept well.

Medication: He is not on any prescribed medication

Personal Care and Activities: Appears satisfactory and did not participate in any ward base activity

	Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: He did not utilise his sec 17 leave on the shift <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 03 Nov 2018 Last Amended by Details: 03 Nov 2018 Gladys Osunsina Page Numbers: 22 + 23 <u>22</u> Notes <u>23</u> Mental state-- Simon appeared calm, pleasant and stable during the shift. Mental status - On section 2 of the MHA of 1983 Social inclusion- Mostly in his room but coming out occasionally Medications- Not on any medication at the moment Physical Health- No physical symptoms complained of and non-observed. Observation and Risk assessment - Nursed on general level of observation Leave status- Did no utilize his unescorted section 17 leave today. Originator Details: 03 Nov 2018 17:34 Gladys Osunsina Nursing Originally Entered by Details: 03 Nov 2018 17:45 Gladys Osunsina Last Amended by Details: 03 Nov 2018 17:45 Gladys Osunsina Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 23	<u>23</u> Mental state-- Simon appeared calm, pleasant and stable during the shift. Mental status - On section 2 of the MHA of 1983 Social inclusion- Mostly in his room but coming out occasionally Medications- Not on any medication at the moment Physical Health- No physical symptoms complained of and non-observed. Observation and Risk assessment - Nursed on general level of observation Leave status- Did no utilize his unescorted section 17 leave today. <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 03 Nov 2018 Last Amended by Details: 03 Nov 2018 Lawrence Giwa Nursing Page Numbers: 23	

	MHA STATUS: Sec 2 MENTAL STATE: Appears fairly calm in mood and presented as stable in metal state on the shift. Observed sitting in the lounge area with peers watching tv for a while. SOCIAL INCLUSION: Interacting well on the ward with service user and staff INVESTIGATION: None carried out PHYSICAL HEALTH: Nil reported or observed during this shift MEDICATION: He was not any medication on this shift PERSONAL CARE & ACTIVITIES: Appears satisfactory. Hence no ward-based activities by the OT on this shift RISK AND OBSERVATION LEVEL: Nil observed or reported to self or others on the shift. He was nursed on general observation. LEAVE: No sec 17 leave at the moment Originator Details: 03 Nov 2018 07 :16 Lawrence Giwa Nursing Originally Entered by Details: 03 Nov 2018 07:24 Lawrence Giwa Last Amended by Details: 03 Nov 2018 07:24 Lawrence Giwa Validated by Details: 03 Nov 2018 07: 24 Lawrence Giwa Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA STATUS: Sec 2 MENTAL STATE: Appears fairly calm in mood and presented as stable in metal state on the shift. Observed sitting in the lounge area with peers watching tv for a while. SOCIAL INCLUSION: Interacting well on the ward with service user and staff INVESTIGATION: None carried out PHYSICAL HEALTH: Nil reported or observed during this shift MEDICATION: He was not any medication on this shift PERSONAL CARE & ACTIVITIES: Appears satisfactory. Hence no ward-based activities by the OT on this shift RISK AND OBSERVATION LEVEL: Nil observed or reported to self or others on the shift. He was nursed on general observation. LEAVE: No sec 17 leave at the moment • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 02 Nov 2018 Gladys Osunsina Nursing Last Amended by Details: 03 Nov 2018 Page Numbers: 23 Simon appears relatively settled on the ward but has no clear insight into his mental state. He is not on any medication at the moment. Went to utilize his unescorted	
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	section 17 leave and came back to the ward with no management problem. 02/11/2018 Originator Details: 02 Nov 2018 17:39 Gladys Osunsina Nursing Originally Entered by Details: 02 Nov 2018 17: 42 Gladys Osunsina Last Amended by Details: 03 Nov 2018 17: 46 Gladys Osunsina Validated by Details: 03 Nov 2018 17:46 Gladys Osunsina Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon appears relatively settled on the ward but has no clear insight into his mental state. He is not on any medication at the moment. Went to utilize his unescorted section 17 leave and came back to the ward with no management problem. • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 02 Nov 2018 Last Amended by Details: 04 Dec 2018 Maria Bruce Page Numbers: 23 + 24 <u>23</u> Notes <u>24</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Calm on the ward Has appealed his section - no confirmed date yet Plan for application for section 3 Plan: 1. Doctors to complete tribunal report 2. Application for section 3 Originator Details: 02 Nov 2018 10:00 Maria Bruce Medical Originally Entered by Details: 05 Nov 2018 11: 17 Maria Bruce Last Amended by Details: 04 Dec 2018 16: 04 Maria Bruce Validated by Details: 04 Dec 2018 16:04 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 24	<u>24</u> Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Calm on the ward Has appealed his section - no confirmed date yet Plan for application for section 3 Plan: 1. Doctors to complete tribunal report 2. Application for section 3	

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 02 Nov 2018

Last Amended by Details: 02 Nov 2018

John Mensah

Page Numbers: 24

In brief 1:1 interaction, he denied experiencing any perceptual abnormality. He acknowledged feeling fine, and appeared sociable with peers. He had night snacks, not on any night medications.

He was approached for possible transfer to another ward to create bed for admission but declined. He informed staff that he will be having tribunal soon hence would not like to be moved

He had a settled night sleep

Originator Details: 02 Nov 2018 06:30 John Men's
ah Nursing Originally Entered by Details: 02 Nov
2018 06:30 John Mensah Last Amended by Details:
02 Nov 2018 06:30 John Mensah Validated by
Details: 02 Nov 2018 06:30 John Mensah
Significant: No Added to Risk History: No Contains
Third Party Info: No Conceal from Client: Not
Concealed Simon appeared calm, pleasant and
stable during the shift.

In brief 1:1 interaction, he denied experiencing any perceptual abnormality.

He acknowledged feeling fine, and appeared sociable with peers.

He had night snacks, not on any night medications.

He was approached for possible transfer to another ward to create bed for admission but declined. He informed staff that he will be having tribunal soon hence would not like to be moved

He had a settled night sleep

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Page Numbers: 24 + 25

Originator Details: 01 Nov 2018

Last Amended by Details: 04 Dec 2018

Maria Bruce

Originator Details: 01 Nov 2018 12: 11 Maria Bruce
Medical Originally Entered by Details: 01 Nov 2018
12:11 Maria Bruce **Last Amended by Details: 04
Dec 2018 16:04 Maria Bruce Validated by Details:
04 Dec 2018 16:04 Maria Bruce Significant: No
Added to Risk History: No Contains Third Party
Info: No Conceal from Client: Not Concealed.**

<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 25	25 Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Room smelled of cannabis yesterday Polite on the ward Has appealed his section Plan: - Needs further review - Further information re collaterals - Email communications team re Simon's website - Search room for drugs - Doctors to complete tribunal report <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 01 Nov 2018 Last Amended by Details: 01 Nov 2018 Simon Tsenuokpor Nursing Page Numbers: 25 MHA Status's 2 MENTAL STATE: Appears fairly calm in mood and presented as stable in metal state on the shift. Observed sitting in the lounge area with peers watching tv for a while. He ordered pizza and shared with peers SOCIAL INCLUSION: Interacting well on the ward INVESTIGATION: Nil carried out PHYSICAL HEALTH AND ACTIVITIES: Nil reported or observed, had hot drink and snack snacks and retired to bed and appears to have slept well MEDICATION: He is not on any prescribed medication on the shift PERSONAL CARE ft ACTIVITIES: Appears satisfactory. Observed watching tv for a while RISK AND OBSERVATION LEVEL: Nil observed or reported to self or others on the shift. He is nursed on general observation. LEAVE: No sec 17 leave at the moment 01/11/2016 Originator Details: 01 Nov 2018 06:13 Simon Tsenuokpor Nursing Originally Entered by Details: 01 Nov 2018 06: 13 Simon Tsenuokpor Last Amended by Details: 01 Nov 2018 06:13 Simon Tsenuokpor Validated by Details: 01 Nov 2018 06:13 Simon Tsenuokpor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status's 2	
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	MENTAL STATE: Appears fairly calm in mood and presented as stable in metal state on the shift. Observed sitting in the lounge area with peers watching tv for a while. He ordered pizza and shared with peers SOCIAL INCLUSION: Interacting well on the ward INVESTIGATION: Nil carried out PHYSICAL HEALTH AND ACTIVITIES: Nil reported or observed, had hot drink and snack snacks and retired to bed and appears to have slept well MEDICATION: He is not on any prescribed medication on the shift PERSONAL CARE ft ACTIVITIES: Appears satisfactory. Observed watching tv for a while RISK AND OBSERVATION LEVEL: Nil observed or reported to self or others on the shift. He is nursed on general observation. LEAVE: No sec 17 leave at the moment 31/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 31 Oct 2018 Last Amended by Details: 01 Nov 2018 Maria Bruce Page Numbers: 25 + 26 + 27 <u>26</u> Dorset Ward Admission meeting CORDELL, Simon P (Mr) Present: Dr Greensides (consultant), Dr Elia (ST6) Dr Bruce (FY2) MHA: Section 2 Interview with Patient Simon confirms his problems began in 2013. He moved into his premises in 2013 - there was evidence of CO poisoning <u>27</u> Originator Details: 31 Oct 2018 12:26 Patricia Morgan Administrative – MHA Administrator Originator Details: 31 Oct 2018 13:21 Maria Bruce Medical Originally Entered by Details: 31 Oct 2018 13: 22 Maria Bruce Last Amended by Details: 01 Nov 2018 16: 22 Maria Bruce Validated by Details: 01 Nov 2018 16:22 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 26	<u>26</u> Dorset Ward Admission meeting CORDELL, Simon P (Mr) Present: Dr Greensides (consultant), Dr Elia (ST6) Dr Bruce (FY2)	

MHA: Section 2

Interview with Patient

Simon confirms his problems began in 2013. He moved into his premises in 2013 - there was evidence of CO poisoning in the flat and all the boiler systems and alarms had to be replaced. Simon has been held on curfew for a long time for organising a party and? wrongly accused of damaging the premises. Also, was accused of burglary and handling of stolen goods - he was found innocent on both accounts.

Simon reports having had a "relationship" with his current partner Katy for the last 20 years. She has a son from a previous relationship.

The problems with the neighbours have been going on for 4 years now. Simon is concerned about his neighbours, in particular to how their behaviour might affect their child. 6 flats in total in his council building - the neighbours that are problematic are 2 floors above Simons. These particular neighbours bang on the water pipes, stamps on the floor (this echo through the flat between) - this happens first thing in the morning and goes on through the day. Simon believes his neighbours sit in their flat eavesdropping on Simon's whereabouts. When he enters the bathroom, they enter their bathroom and flush the toilet a lot. Simon has Video and Audio recordings throughout his flat in order to prove his innocence. There is a husband and wife living there as well as a new born baby. Simon reports he can hear this family talking but he can't make out what they are saying - he denies them saying anything negative about him "they've never spoke to me". Simon has personal information about his neighbour which he feels is proof of? tax evasion - he reports the family own 50 houses in the UK. The neighbour has changed their surname in order to accommodate some scheme to avoid? tax - Simon reports he has "100% evidence" that this is true and feels it is relevant to him because of how they are treating him. Simon believes what the neighbours are doing is a hate crime.

Simon denies ever having felt like the TV was talking to him or that the council was advertising his information. Simon does feel his personal information is being advertised somehow - friends have approached him and have information about him he believes can only have come from secure computer systems.

Simon is not concerned about his tenancy at the moment - he states he has recordings that prove his innocence. Simon is aware the council has told him to stay away from his neighbours - since this time he states he hasn't approached his neighbours. He wants to publish a book about what has been going on. Simon does not appear to accept that he has become fixated on this issue.

Simon does not think his problems with his neighbours are in any way due to him having a mental health problem. Simon wouldn't like to take

	medication as he doesn't feel he needs it and is concerned medication may impact his ability work. He is particularly concerned that the medication will "dope him out". Simon states he has a good family support network. He is happy to see the ward psychologist. Simon has been informed that a referral to a forensic psychiatrist who may want to visit him on the ward. Impression: Presenting with persecutory delusions. Limited insight. Not currently deemed to be a risk to himself or others. Could be at risk of losing accommodation if continues untreated. Plan: For Section 17 leave - No medication at present - Refer to ward Psychologist - Dr Patkas.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 27	<u>27</u> Originator Details: 31 Oct 2018 12:26 Patricia Morgan Administrative – MHA Administrator 31/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originally Entered by Details: 31 Oct 2018 Last Amended by Details: 31 Oct 2018 Patricia Morgan Page Numbers: 27 Telephone call received from Duncan Lewis Solicitors to the MHA office, stating SC mother had requested Duncan Lewis to visit the ward to see SC. It was explained to Duncan Lewis that the MHA office and Nursing staff work for SC and to date he has not requested an appeal against his section, or to see a solicitor, he has been read his section 132 rights and has received a letter from the MHA office advising him of his rights. Originally Entered by Details: 31 Oct 2018 12:29 Patricia Morgan Last Amended by Details: 31 Oct 2018 12:29 Patricia Morgan Validated by Details: 31 Oct 2018 12:29 Patricia Morgan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Telephone call received from Duncan Lewis Solicitors to the MHA office, stating SC mother had requested Duncan Lewis to visit the ward to see SC. It was explained to Duncan Lewis that the MHA office and Nursing staff work for SC and to date he has not requested an appeal against his section, or to see a solicitor, he has been read his section 132 rights and has received a letter from the MHA office advising him of his rights.	

31/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 31 Oct 2018

Last Amended by Details: 01 Nov 2018

Maria Bruce

Page Numbers: 27

Dorset Ward - Chase Farm Hospital

Whiteboard meeting CORDELL, Simon P (Mr)

Settle on ward Elated Asking for leave

May need early recommendation for section 3 if evidence sufficient- if upheld then can commence for trial of treatment

Plan:

1. Needs further review
2. Further information re collaterals
3. Email communication department re website.

Originator Details: 31 Oct 2018 10:21 Maria Bruce
Medical Originally Entered by Details: 31 Oct 2018 10:21 Maria Bruce
Last Amended by Details: 01 Nov 2018 16:21 Maria Bruce
Validated by Details: 01 Nov 2018 16:21 Maria Bruce
Significant: No
Added to Risk History: No
Contains Third Party Info: No
Conceal from Client: Not Concealed

Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr)

Settle on ward Elated Asking for leave

May need early recommendation for section 3 if evidence sufficient- if upheld then can commence for trial of treatment

Plan:

1. Needs further review
2. Further information re collaterals
3. Email communication department re website.

31/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 31 Oct 2018

Last Amended by Details: 31 Oct 20 18

Simon Tsenuokpor

Page Numbers: 27 + 28

28

MHA Status: Sec 2

Mental State: Presented as polite, calm and stable in mental state. He was observed to be keeping to self in his bed space mostly watching tv.

Social Inclusion: Selectively interacts with other peers and staff. His mother visited

Investigation: Nil on the shift

	Physical Health: Nil reported or observed on the shift. He had hot drink and snack and appeared to have slept well Medication: Simon is not on any night medication Personal Care and Activities: Appears satisfactory and was observed watching television. Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: No leave at the moment Originator Details: 31 Oct 2018 06:44 Simon Tsenuokpor Nursing Originally Entered by Details: 31 Oct 2018 06:44 Simon Tsenuokpor Last Amended by Details: 31 Oct 20 18 06:44 Simon Tsenuokpor Validated by Details: 31 Oct 2018 06:44 Simon Tsenuokpor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 28	28 MHA Status: Sec 2 Mental State: Presented as polite, calm and stable in mental state. He was observed to be keeping to self in his bed space mostly watching tv. Social Inclusion: Selectively interacts with other peers and staff. His mother visited Investigation: Nil on the shift Physical Health: Nil reported or observed on the shift. He had hot drink and snack and appeared to have slept well Medication: Simon is not on any night medication Personal Care and Activities: Appears satisfactory and was observed watching television. Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: No leave at the moment 30/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Originator Details: 30 Oct 2018 Last Amended by Details: 30 Oct 2018 Emma Moseley Page Numbers: 28 MHA Status: Sec 2 Mental State: Simon has spent most of the shift in his room. Preoccupied with his website and how he is being set up, by police. He stated that he was not delusional or paranoid as he had evidence to prove he wasn't. Social Inclusion: Some interaction with selected peers, minimal with staff.	

	Investigation: Nil on the shift Physical Health: No reported or observed. Medication: Not on medication Personal Care and Activities: Good personal hygiene Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: Not currently granted any leave. Originator Details: 30 Oct 2018 17:21 Emma Moseley Nursing - Nursing Student Originally Entered by Details: 30 Oct 2018 17:21 Emma Moseley Last Amended by Details: 30 Oct 2018 17:26 Emma Moseley Validated by Details: 30 Oct 2018 17:26 Emma Moseley Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status: Sec 2 Mental State: Simon has spent most of the shift in his room. Preoccupied with his website and how he is being set up, by police. He stated that he was not delusional or paranoid as he had evidence to prove he wasn't. Social Inclusion: Some interaction with selected peers, minimal with staff. Investigation: Nil on the shift Physical Health: No reported or observed. Medication: Not on medication Personal Care and Activities: Good personal hygiene Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: Not currently granted any leave. 30/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 30 Oct 2018 Last Amended by Details: 30 Oct 2018 Timothy Rogers Page Numbers: 28 + 29 <u>29</u> FICS Enfield - consultant's note Simon had been referred to FICS for advice before he was detained under the MHA. I note the working diagnosis of psychosis. This would seem to be a possible explanation for some of the behaviours described and	
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	Originator Details: 30 Oct 2018 16: 42 Dr Timothy Rogers Medical Originally Entered by Details: 30 Oct 2018 16:42 Dr Timothy Rogers Last Amended by Details: 30 Oct 2018 16:42 Dr Timothy Rogers Validated by Details: 30 Oct 2018 16:42 Dr Timothy Rogers Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 29	<u>29</u> FICS Enfield - consultant's note Simon had been referred to FICS for advice before he was detained under the MHA. I note the working diagnosis of psychosis. This would seem to be a possible explanation for some of the behaviours described and, if confirmed as a diagnosis, antipsychotic treatment might well alter the relevant risks longer term. In terms of the inpatient assessment currently ongoing, if not already, some helpful corroborative information about Mr. Cordell's behaviour and tenancy problems might be obtained by contacting: Lemmy.NWABUISE@enfield.gov.uk Kaunchita.Maudhub@enfield.gov.uk OR Louise Brown Anti-Social Behaviour Team Leader Community Safety Unit Chief Executive Department London Borough of Enfield 020 8379 4467 * louise.brown2@enfield.gov.uk 30/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 30 Oct 2018 Last Amended by Details: 30 Oct 2018 Marilyn Cameron Therapy Page Numbers: 29 OT: Quiz 2-3pm Ward staff suggested Simon might like the quiz. Simon was in his room. He answered technicians knock on the door. He was invited to attend the session...politely declined writing an appeal re his being in hospital. Originator Details: 30 Oct 2018 15:06 Marilyn Cameron Therapy Originally Entered by Details: 30 Oct 2018 15:09 Marilyn Cameron Last Amended by Details: 30 Oct 2018 15:09 Marilyn Cameron Validated by Details: 30 Oct 2018 15:09 Marilyn Cameron Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	

OT: Quiz 2-3pm

Ward staff suggested Simon might like the quiz. Simon was in his room. He answered technicians knock on the door. He was invited to attend the session...politely declined writing an appeal re his being in hospital.

30/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 30 Oct 2018

Last Amended by Details: 30 Oct 2018

Marilyn Cameron Therapy

Page Numbers: 29

OT: Healthy snacks 11-12noon

Simon looked in just as the session was finished. He said he was sorry he had missed the foodstuff although he wasn't hungry.

Originator Details: 30 Oct 2018 13:13 Marilyn Cameron Therapy Originally Entered by Details: 30 Oct 2018 13:15 Marilyn Cameron Last Amended by Details: 30 Oct 2018 13:15 Marilyn Cameron Validated by Details: 30 Oct 2018 13:15 Marilyn Cameron Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

OT: Healthy snacks 11-12noon

Simon looked in just as the session was finished. He said he was sorry he had missed the foodstuff although he wasn't hungry.

30/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 30 Oct 2018

Last Amended by Details: 08 Nov 2018

Lisa Brady Social Worker

Page Numbers: 29

Enfield FICS

Referral received - now known that Mr Cordell has been admitted under. S2 MHA.

Originator Details: 30 Oct 2018 12: 00 Lisa Brady Social Worker Originally Entered by Details: 08 Nov 2018 15:07 Lisa Brady Last Amended by Details: 08 Nov 2018 15:07 Lisa Brady Validated by Details: 08 Nov 2018 15:07 Lisa Brady Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

	Enfield FICS Referral received - now known that Mr Cordell has been admitted under. S2 MHA.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 30 Oct 2018 Last Amended by Details: 01 Nov 2018 Maria Bruce Medical Page Numbers: 30 Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Elated in mood Showing his website to everyone - states proof he is not delusional Plan: 1 Needs further review 2. Rosie to chase Enfield council/housing situation 3. <u>++</u> <u>30</u> Originator Details: 30 Oct 2018 10:26 Maria Bruce Medical Originally Entered by Details: 30 Oct 2018 10:27 Maria Bruce Last Amended by Details: 01 Nov 2018 16:21 Maria Bruce Validated by Details: 01 Nov 2018 16:21 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Elated in mood Showing his website to everyone - states proof he is not delusional Plan: 1 Needs further review 2. Rosie to chase Enfield council/housing situation	30/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 30 Oct 2018 Last Amended by Details: 01 Nov 2018 Maria Bruce Medical Page Numbers: 30 Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Elated in mood Showing his website to everyone - states proof he is not delusional Plan: 1 Needs further review 2. Rosie to chase Enfield council/housing situation 3. <u>++</u> 30/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 30 Oct 2018 Last Amended by Details: 30 Oct 2018 Gifty Dadzie Nursing Page Numbers: 30 Originator Details: 30 Oct 2018 Last Amended by Details: 30 Oct 2018 Gifty Dadzie Nursing Mental State: Simon presented as affable on approach. Polite when conversation is initiated. He was observed browsing on his	

	computer. He collected his Barclays visa debit card from safe keeping. Social Inclusion: Selectively interacts with other peers and staff. Investigation: Nil on the shift Physical Health: He had hot drink and snack and resume to bed where he remained and slept majority of the night. Medication: Simon is not on any night medication Personal Care and Activities: Appears satisfactory and was observed watching television. Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: Not currently granted any leave. Originator Details: 30 Oct 2018 06:04 Gifty Dadzie Nursing Originally Entered by Details: 30 Oct 2018 06:04 Gifty Dadzie Last Amended by Details: 30 Oct 2018 06:04 Gifty Dadzie Validated by Details: 30 Oct 2018 06:04 Gifty Dadzie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status: Sec 2 Mental State: Simon presented as affable on approach. Polite when conversation is initiated. He was observed browsing on his computer. He collected his Barclays visa debit card from safe keeping. Social Inclusion: Selectively interacts with other peers and staff. Investigation: Nil on the shift Physical Health: He had hot drink and snack and resume to bed where he remained and slept majority of the night. Medication: Simon is not on any night medication Personal Care and Activities: Appears satisfactory and was observed watching television. Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: Not currently granted any leave. 29/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 29 Oct 2018 Last Amended by Details: 29 Oct 2018 Miss Bejal Nandha Nursing Page Numbers: 30 + 31 <u>30</u> No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed. <u>31</u> Day shift Simon had his formulation meeting today. He presents very grandiose - showing staff and peers his website and that he has 70,000 emails and 500,000 phone contacts'. He seems elated and keen to get his message across. Attended for his meals and seemed to eat well. Nursed on general observation. Originator Details: 29 Oct 2018 18:11 Miss Bejal Nandha Nursing Originally Entered by Details: 29 Oct 2018 18:16 Miss Bejal Nandha Last Amended by Details: 29 Oct 2018 18:16 Miss Bejal Nandha Validated by Details: 29 Oct 2018 18:16 Miss Bejal Nandha Significant: <u>30</u> No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 31	<u>31</u> Day shift Simon had his formulation meeting today. He presents very grandiose - showing staff and peers his website and that he has 70,000 emails and 500,000 phone contacts'. He seems elated and keen to get his message across. Attended for his meals and seemed to eat well. Nursed on general observation. 29/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 29 Oct 2018 Last Amended by Details: 01 Nov 2018 Maria Bruce Medical Page Numbers: 31+ 32 + 33 + 34 <u>31</u> Notes <u>32</u> Chase Farm - Dorset Ward Formulation Meeting CORDELL, Simon P (Mr) Present: Dr Greensides (consultant), Dr Bruce (FY2) Uncle, mother, Daizy (staff nurse), Ola (student nurse) Soobah Appadoo (CC) MHA status: Section 2 PC from Rio: 17 Oct - referred for <u>33</u> Care coordinator:	

	This is only the second time meeting Simon. There have been issues with reports he is assaulting other residents 34 Weigh up the information- Yes Communicate the decision- Yes Impression/Diagnosis: Simon appears Originator Details: 29 Oct 2018 16:56 Maria Bruce Medical Originally Entered by Details: 29 Oct 2018 16:56 Maria Bruce Last Amended by Details: 01 Nov 2018 16:21 Maria Bruce Validated by Details: 01 Nov 2018 16:21 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 32	32 Chase Farm - Dorset Ward Formulation Meeting CORDELL, Simon P (Mr) Present: Dr Greensides (consultant), Dr Bruce (FY2) Uncle, mother, Daizy (staff nurse), Ola (student nurse) Soobah Appadoo (CC) MHA status: Section 2 PC from Rio: 17 Oct - referred for MHA due to history of physical and verbal aggression towards his neighbours. EANLT MDT agreed that he is a risk to others and his behaviour could also put him at risk from others. Simon refused to engage with MHA. Application for 135(1) was made - Judge found insufficient evidence for 136. Forensic referral sent on 17/10 25 Oct - Simon was arrested as the police called to his flat re him breaking a harassment order and he assaulted the police who attended. He was taken to Wood Green police station. Found to be him thought disordered, hypomanic with flight of speech and grandiose delusions. Detained under MHA. Past Psychiatric Hx: - Disrupted childhood, CSE in paedophile ring, violent father, adolescence in care, under CAMHS - Self reports to have tried to hang himself twice at the age of 16 when in a young offender's institution; He was moved to a high security hospital and kept in seclusion on a number of occasions. - Denies any contact with MHS between that point and 2014 - March 2014 - Adjustment reaction "anxiety and suicidal thoughts over the last nine months in the context of having a pending court case" offered Sertraline 50mg OD	

	- November 2014 - Simon's mother called the HTT. Paranoid psychosis - not deemed sectionable under MHA - November 2015 - Simon's mother called the BEH HUB. Simon not eating, not sleeping, paranoid, saying people are talking about him or laughing at him, believes the government is advertising things about him, the TV is talking about him and talking directly to him. Smoking cannabis. Not sectionable under MHA. - February 2016 Warrant 135 (1) - not sufficient evidence of mental illness. - August 2016 admitted under Section 2 of the MHA following custody at Wood Green station for threats to kill -section 2 reversed on appeal. Discharged on Olanzapine 5mg and followed up by EIS. Reports noncompliance on discharge. Discharged from EIS Dec 2016 due to non-engagement. - Tenancy breach pre-action letter 15/10/18 from Enfield council- antisocial behaviour since 2016, 48 accounts of threatening and abusive behaviour - July 2018 Psychiatric assessment by Dr Dinakaran "Mr Cordell is currently suffering from symptoms of Schizoaffective Disorder and presents with florid psychotic symptoms" Past Medical Hx: Crohn's noted on Rio. Has not attended GP since 2015 Current Medications: nil Physical examination: NAD ECG: NSR 88bpm QTc 440ms Blood tests: WCC 14.3, Neut 10.1, CRP 13 (BG Crohns) UPS: THC positive.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 33	<u>33</u> Care coordinator: This is only the second time meeting Simon. There have been issues with reports he is assaulting other residents in his council accommodation. Nursing report: Appears paranoid on the ward. Interview with patient: Simon appears very agitated and vocal and is keen to put across his opinion that he has been illegally detained. Simon reports issues with police actions in regards to not giving him the ASBO folder properly - this was left outside instead of giving it to him directly. Simon continued to explain other problems with the police's treatment of him. This includes the metropolitan police having placed a photo of Simon in a folder in regards to a party he had no involvement with. He denies being involved in any of the parties mentioned in the ASBO. Simon spoke	

	at length about the injustices surrounding his placement on curfew and the ASBO order. He describes how on multiple times doctors have tried to assess him under the MHA and he has explained to them at each time the situation with the police. He was once placed under a section 2 and was able to appeal his section. Simon reports the neighbours (11 floors up) trying to deliberately disturb him by making a lot of noise and flushing the toilet multiple times. He feels they want him to get distressed and go upstairs to address them. They have been doing this over the last 4 years and are doing this throughout the day. From Simons flat, you can even hear them talking -there is apparently very poor sound proofing. Simon has described a council official as having forged statements and falsely accusing him of threatening his life. Simon reports that he is being assaulted by his neighbours as is his partner's small child. He feels the stress from this situation may have been linked to his partner's miscarriage. Simon denies any acts of antisocial behaviour, even in retaliation. At every point where he approaches the upstairs neighbours, he states he calls the police to ask them to "protect" him. In regards to the recent arrest he reports the police attended due to a fraudulent call from the neighbours. The police tried to hand him a breach of harassment order which Simon ripped and spat on the paper. The police officer then yelled that he had spat on her. He was then arrested for assault on a police officer. This charge was dropped in the police station and he was referred for an MHA. Simon is currently on benefits. He reports the expensive hardware he owns (egg 70000-pound bookmaker) he buys broken and second hand cheaply and fixes them. Simon works from home. He built a new model constitution – a community interest company which was a charity farm. Collateral information: His mother and uncle would like MHS to stop referring to Simon reporting the police as being prejudice against him as delusional - they believe this can be proved (showing photos of his company truck and hardware). Simon's mother is very upset that doctors have submitted reports stating that he is delusional and grandiose. They feel the AMHP report is grossly inaccurate. Simon's uncle is also upset that the MH team would not provide Simon with a letter to assist with his housing situation. They explain that the reason Simon has not been prosecuted for the complaints made by the neighbours is because each time Simon is able to "prove his innocence" directly to the police. Simons mother believes he is very stressed due to the conditions of the ASBO and his neighbours disturbing him.	
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	His uncle would like us to check the website that Simon has set up to highlight the injustices against him "horrificcorruption.com". (other websites mentioned by Simon include the Wayback machine and toosmooth) Capacity to consent to treatment- RETAINS CAPACITY Understand the information- Yes Retain the information- Yes.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 34	34 Weigh up the information- Yes Communicate the decision- Yes Impression/Diagnosis: Simon appears unwell. Symptoms unclear. Paranoia - possible auditory hallucinations. Plan: 1 Requires further review of notes 2. Liaise Enfield council re plans for housing - ask Rosie for input 29/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Originator Details: 29 Oct 2018 Marilyn Cameron Therapy Last Amended by Details: 29 Oct 2018 Page Numbers: 34 OT: Self pampering 11-12noon Simon came into the session to introduce himself. He said he did not need to do anything as his family had brought him in what he needed. Originator Details: 29 Oct 2018 12:41 Marilyn Cameron Therapy Originally Entered by Details: 29 Oct 2018 12:45 Marilyn Cameron Last Amended by Details: 29 Oct 2018 12:45 Marilyn Cameron Validated by Details: 29 Oct 2018 12:45 Marilyn Cameron Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed OT: Self pampering 11-12noon Simon came into the session to introduce himself. He said he did not need to do anything as his family had brought him in what he needed. 29/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Originator Details: 29 Oct 2018 Last Amended by Details: 01 Nov 2018	

	Maria Bruce Page Numbers: 34 Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Meeting today UDS positive to THC Plan: 1. Formulation meeting today Originator Details: 29 Oct 2018 10: 18 Dr. Maria Bruce Medical Originally Entered by Details: 29 Oct 2018 10:18 Maria Bruce Last Amended by Details: 01 Nov 2018 16:21 Maria Bruce Validated by Details: 01 Nov 2018 16:21 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Meeting today UDS positive to THC Plan: 1. Formulation meeting today 29/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 29 Oct 2018 Last Amended by Details: 29 Oct 2018 Bibi Khodabux Page Numbers: 34 1:1 with Simon who was agitated and blamed police for his admission. He was irritable and quite hostile. He was on the phone to his relative, complaining Originator Details: 29 Oct 2018 04:29 Bibi Khodabux Nursing Originally Entered by Details: 29 Oct 2018 04:33 Bibi Khodabux Last Amended by Details: 29 Oct 2018 04:35 Bibi Khodabux Validated by Details: 29 Oct 2018 04:35 Bibi Khodabux Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed 1:1 with Simon who was agitated and blamed police for his admission. He was irritable and quite hostile. He was on the phone to his relative, complaining about police and claimed to be falsely accused. Staff tried to reassure him and he thanked staff for their support. He had pm ibuprofen. Has slept well at night. At risk of confrontational behaviour and slow progress in his mental state due to poor compliance. Nursed on general observation.	
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<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 35	28/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 28 Oct 2018 Emma Moseley Last Amended by Details: 28 Oct 2018 Page Numbers: 35 MHA Status - s 2 Mental State: Spent most of his time in the room. Spoke to staff in depth about his beliefs about his neighbours and previous admission in hospitals and 35 Originator Details: 28 Oct 2018 18:47 Emma Moseley Nursing - Nursing Student Originally Entered by Details: 28 Oct 2018 18:55 Emma Moseley Last Amended by Details: 28 Oct 2018 18:55 Emma Moseley Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status - s 2 Mental State: Spent most of his time in the room. Spoke to staff in depth about his beliefs about his neighbours and previous admission in hospitals and police investigations. He stated that he believes that they are out to get him and that there is a conspiracy theory that they are all out to get him. He has set up a website with details, videos and recordings. Social Inclusion: Some interaction with peers in the lounge area. Investigation: Nil on the shift Physical Health: Nil complained or observed on the shift. Observed eating and drinking adequately. Medication: Took medication as prescribed. Personal Care and Activities: Observed to have good personal hygiene Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: No leave at the moment 28/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 28 Oct 2018 Last Amended by Details: 28 Oct 2018 Simon Tsenuokpor Page Numbers: 35 MHA Status: Sec 2	
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	Mental State: Presented as polite, calm and stable in mental state. He was observed to be keeping to self in his bed space. He denies Originator Details: 28 Oct 2018 06: 44 Simon Tsenuokpor Nursing Originally Entered by Details: 28 Oct 2018 06:43 Simon Tsenuokpor Last Amended by Details: 28 Oct 2018 06: 44 Simon Tsenuokpor Validated by Details: 28 Oct 2018 06:44 Simon Tsenuokpor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed MHA Status: Sec 2 Mental State: Presented as polite, calm and stable in mental state. He was observed to be keeping to self in his bed space. He denies any thoughts of self-harm, suicidal ideation or thoughts to harm others. Social Inclusion: Minimal interaction with staff and peers, however pleasant on approach Investigation: Nil on the shift Physical Health: Nil complained or observed on the shift. Had hot drink and snack and retired to bed and appears to have slept well. Medication: He is not on any prescribed medication on the shift Personal Care and Activities: Appears satisfactory and was observed watching tv Risk and observation Level: Nil observed to self or others on the shift. He is nursed on general observations. Leave Status: No leave at the moment 27/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 27 Oct 2018 Last Amended by Details: 27 Oct 2018 Daizzy Annan Page Numbers: 35 + 36 <u>36</u> MHA Status: Informal Mental State: Simon appeared fairly settled in presentation. During my interaction with him it was difficult to follow his train Originator Details: 27 Oct 2018 06:19 Daizzy Annan Nursing Originally Entered by Details: 27 Oct 2018 06:34 Daizzy Annan Last Amended by Details: 27 Oct 2018 06:34 Daizzy Annan Validated by Details: 27 Oct 2018 06:34 Daizzy Annan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
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<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 36	36 MHA Status: Informal Mental State: Simon appeared fairly settled in presentation. During my interaction with him it was difficult to follow his train of thoughts, as he was jumping from one topic to another. During the hourly check, Staff perceive a smell like cannabis in his room. When staff enquire from him, he denied. Social Inclusion: Seen in the lounge and was observed interacting with his peers. Medication: Nil due during the shift. Physical Health: Nil reported or observed. Had hot chocolate and toast Investigation: Nil Personal Hygiene and Activities: Self-care appeared satisfactory. Nil activity. Risk and Observation: Unpredictable behaviour. Nursed on general observations Leave: Nil leave but can go to the garden for fresh air. 26/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 26 Oct 2018 Last Amended by Details: 26 Oct 2018 Miss Bejal Nandha Page Numbers: 36 Simon Cordell - in the morning Simon asked for forms to complete and send for tribunal meeting. He was reminded he could appeal against his section in which case we could provide him with a list of solicitors. Simon told staff he did not need anyone to represent him, he can do this by himself, he said he knows the law inside out. He presented elated in mood and grandiose. Mother and uncle visited him. Lacks insight into his mental state. UDS - positive to THC, negative to all other substances. Personal hygiene: - is poor. Did not take part in OT group. Observed in bedroom using his electronic devices. Nursed on general observation. Has his blood test done today? Eating and drinking adequately. Originator Details: 26 Oct 2018 17:27 Miss Bejal Nandha Nursing Originally Entered by Details: 26 Oct 2018 17:27 Miss Bejal Nandha Last Amended by Details: 26 Oct 2018 17:27 Miss Bejal Nandha Validated by Details: 26 Oct 2018 17:27 Miss Bejal Nandha Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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	Simon Cordell - in the morning Simon asked for forms to complete and send for tribunal meeting. He was reminded he could appeal against his section in which case we could provide him with a list of solicitors. Simon told staff he did not need anyone to represent him, he can do this by himself, he said he knows the law inside out. He presented elated in mood and grandiose. Mother and uncle visited him. Lacks insight into his mental state. UDS - positive to THC, negative to all other substances. Personal hygiene: - is poor. Did not take part in OT group. Observed in bedroom using his electronic devices. Nursed on general observation. Has his blood test done today? Eating and drinking adequately. 26/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 26 Oct 2018 Debajyoti Choudhury Medical Last Amended by Details: 26 Oct 2018 Page Numbers: 36 + 37 <u>36</u> Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed. <u>37</u> Bloods 26/10/18 Normal U&Es; eGFR 79; Normal bone profile and LFTs CRP 13 BM 6.3 (Originator Details: 26 Oct 2018 15:09 Debajyoti Choudhury Medical Originally Entered by Details: 26 Oct 2018 15:11 Debajyoti Choudhury Last Amended by Details: 26 Oct 2018 15:11 Debajyoti Choudhury Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 37	<u>37</u> Bloods 26/10/18 Normal U&Es; eGFR 79; Normal bone profile and LFTs CRP 13 BM 6.3 (normal) Mean Corpuscular Haemoglobin Cone 354 g/L (320 - 360) F Neutrophils H 10.1 x 10 ⁹ /L (2.0 - 8.0) F White Blood Cell Count H 14.3 x 10 ⁹ /L (3.5 - 11.0) F Eosinophils 0.1 x 10 ⁹ /L (0.0 - 0.4) F	

	Haemoglobin: 156 g/L (130 - 180) F Haematocrit L 0.441 l/l (0.450 - 0.500) F Red Cell Distribution Width 13.8 % (10.0 - 15.0) F Monocytes H $1.2 \times 10^9/L$ (0.2 - 1.0) F NC. RBC count $< 0.2 \times 10^9/L$ F Red Blood Cell Count $4.99 \times 10^{12}/L$ (4.50 - 5.50) F Mean Corpuscular Haemoglobin 31.3 pg. (27.0 - 32.0) F Lymphocytes $2.9 \times 10^9/L$ (1.0 - 4.0) F Platelet Count $298 \times 10^9/L$ (130 - 450) F Basophils $0.1 \times 10^9/L$ (0.0 - 0.1) F Mean Corpuscular Volume 88.4 FL (78.0 - 100.0) F Impression Slighted raised WCC and Neuts with very minimal rise in CRP. Physical exam and observations do not show any signs of infection, however. Noted that patient does have history of Crohn's (will not take medications for it), which would explain results. Plan: 1. Only for repeat bloods if patient becomes systemically unwell/appears to show any signs of infection 2. Await rest of bloods. 26/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 26 Oct 2018 Last Amended by Details: 01 Nov 2018 Maria Bruce Page Numbers: 37 + 38 + 39 + 40 + 41 <u>38</u> Dorset Ward: Admission meeting CORDELL, Simon P (Mr) Present: Dr Choudhury (CT1) Dr Bruce (FY2) MHA: Section 2 PC: 17 Oct - referred for MHA due to history of physical and verbal aggression towards his neighbours. EANLT <u>39</u> Following this he reports being placed on a 2-year injunction and a 5-year curfew. He feels this has led to a breakdown in a 13-year relationship he had. He also reports this affecting his company -a community interest company he started up. At one-point Simon <u>40</u> MSE A6B: 37-year-old male, mixed origin, slim build. He was wearing casual and dirty clothes. The conversation was one sided with Simon keen to talk. S: Pressured <u>41</u>	
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	Plan: 1. Formulation meeting on Monday 29/10 2. Review on Monday and /consider starting antipsychotics 3. Chase blood results 4. Upload ECG on Rio 5. print Lorazepam Originator Details: 26 Oct 2018 15:02 Maria Bruce Medical Originally Entered by Details: 26 Oct 2018 15: 03 Maria Bruce Last Amended by Details: 01 Nov 2018 16: 21 Maria Bruce Validated by Details: 01 Nov 2018 16:21 Maria Bruce Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 38	<u>38</u> Dorset Ward: Admission meeting CORDELL, Simon P (Mr) Present: Dr Choudhury (CT1) Dr Bruce (FY2) MHA: Section 2 PC: 17 Oct - referred for MHA due to history of physical and verbal aggression towards his neighbours. EANLT MDT agreed that he is a risk to others and his behaviour could also put him at risk from others. Simon refused to engage with MHA. Application for 135(1) was made - Judge found insufficient evidence for 136. Forensic referral sent on 17/10 25 Oct - Simon was arrested as the police called to his flat re him breaking a harassment order and he assaulted the police who attended. He was taken to Wood Green police station. Found to be him thought disordered, hypomanic with flight of speech and grandiose delusions. Detained under MHA. Past Psychiatric Hx: • Disrupted childhood: CSE in paedophile ring, violent father, adolescence in care, under CAMHS • Self reports (from Rio) to have tried to hang himself twice at the age of 16 when in a young offender's institution; He was moved to a high security hospital and kept in seclusion on a number of occasions. • Denies any contact with MHS between that point and 2014 • March 2014 - Adjustment reaction "anxiety and suicidal thoughts over the last nine months in the context of having a pending court case" offered Sertraline 50mg OD • November 2014 - Simon's mother called the HTT. Paranoid psychosis - not deemed sectionable under MHA	

	- November 2015 - Simon's mother called the BEH HUB. Simon not eating, not sleeping, paranoid, saying people are talking about him or laughing at him, believes the government is advertising things about him, the TV is talking about him and talking directly to him. Smoking cannabis. Not sectionable under MHA. - February 2016 Warrant 135 (1) - not sufficient evidence of mental illness. - August 2016 admitted under Section 2 of the MHA following custody at Wood Green station for threats to kill -section 2 reversed on appeal. Discharged on Olanzapine 5mg and followed up by EIS. Reports noncompliance on discharge. Discharged from EIS Dec 2016 due to non-engagement. - Tenancy breach pre-action letter 15/10/18 from Enfield council- antisocial behaviour since 2016, 48 accounts of threatening and abusive behaviour - July 2018 Psychiatric assessment by Dr Dinakaran "Mr Cordell is currently suffering from symptoms of Schizoaffective Disorder and presents with florid psychotic symptoms" Past Medical Hx: Crohn's noted on Rio. Has not attended GP since 2015 Current Medications: nil on SCR, NKDA Interview with Patient Simon feels he is in hospital because the police have "falsified" a report that led to him being kept on a curfew for years. He proceeded to talk at length about circumstance that led him to be charged for handling of stolen goods and suspicion of burglary in 2013. He believes the case was handled poorly and is sure the police were conspiring against him. "The abuse of process by the civil service was unreasonable".	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 39	<u>39</u> Following this he reports being placed on a 2-year injunction and a 5-year curfew. He feels this has led to a breakdown in a 13-year relationship he had. He also reports this affecting his company -a community interest company he started up. At one-point Simon also mentioned the police targeting him for holding large parties that he was adamant were not hosted by him. Simon reports owning a couple of local festivals and talks about engaging with multiple charities helping children. He says he had to stop this as police were harassing him in front of the children. He alleges to own his own company, his own paper and has just bought his own book maker for 70000 pounds. He	

	also reports having 180000 friends on Facebook due to all his free parties. When asked about his neighbours Simon said he believes his neighbours have been making up complaints about him. "My neighbours are calling up the police after forging the paperwork." He feels that his neighbours have been attacking him and reports feeling anxious in his house. Simon says he "kept writing to the police saying please can you protect me". He does not think he is unwell and does not think he has a mental health problem. He admits he might be elevated but he believes this is a constructive state. Simon reports not being compliant with any of his medication at any point. He is refusing to take any medication during this admission. "I've spent thousands of pounds showing you my brain, me being alert saves lives." Simon would like to appeal his section and feels that by keeping him in hospital we are breaching his rights. "Physical or mental suffering amount to torture" Reports sleeping, eating and drinking well. Later suggested this may not be the case stating "In the night time when my neighbours are asleep that's the best time for working". Personal Hx: Born at? Chase farm hospital (previous entry on Rio NMUH), normal delivery. Was bullied at school by a female pupil. "I have loads of qualifications. My management system is my qualification - motor trade, gas laying, paving lay, I understand the formation of companies, my English is at 92%" Family Hx: Has one brother and sister - he is the oldest brother. Parents recently broke up. He sees his parents regularly. Denies any issues with his father. His grandmother had some psychotic problems/depression after his grandfather past away. Rio notes report his maternal grandmother had Bad/ later changed to Schizophrenia, detained formally multiple times, responded well to Clozapine. Social: Works from home currently. Does 9-10-hour shifts build his website. Previously has had multiple different jobs including working at a market and brick laying. Has a new baby on the way with Katy - due to get married soon? From Rio - "Enfield Council will be seeking possession of SC's flat via the courts. Lemy stated that in a recent court case the judge recommended that Enfield Council re-house SC on the proviso that he engages with the MH Team" Forensic Hx: Reports being linked to 500 cases but he has won every one. Says these are all linked to driving offences. From Rio - 2015- 5y ASBO for organising illegal raves- not allowed to enter industrial or disused premises between 10pm and 7 am. Young	
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	Offender's Institution at the age of 16 after repeated driving offences (driving without a license). Taken into custody for threats to kill. Substance Misuse Hx: “Clean as anything” “Occasionally have a puff of a cigar rete” Denies drinking any alcohol Note on Rio previous LSD and cannabis use.	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 40	40 MSE A6B: 37-year-old male, mixed origin, slim build. He was wearing casual and dirty clothes. The conversation was one sided with Simon keen to talk. S: Pressured speech. M: Subjectively “fine, a bit elated”. Objectively elated. T: Thought disordered, tangential thinking, grandiose, persecutory delusions. C: Oriented to TPP. I: Limited insight - does not want any medications, never thinks he has had a mental health disorder. Risk To self - low Denies any thoughts of self-harm or suicide. Previous reports of suicide attempt as teenager. To others - moderate Denies thoughts or plans to hurt others. Has clearly documented history of aggressive behaviour and currently elated. From others - low/moderate at risk of reciprocal aggression Physical examination: Comfortable at rest Nil Abdo/chest/msk pain reported HS I+11+0, pulse regular, CRT <3s Chest clear, L=R, nil wheeze or cough Abdomen SNT, bowel sound present Neurology intact, normal power, normal gait CN1-12 intact, PEARL Obs last night BP 130/74, Temp.36.6, Sat 97% Res. 17, Pulse 86, BM. 6.0 Weight 78.4 Kg, Height 179.0cm – BMI 24.5 ECG: NSR 88bpm QTc 440ms Impression: Evidence of grandiose delusions and elated mood. In view of long-term symptoms this is most likely consistent with a Schizoaffective disorder. Does not currently have capacity for treatment or admission.	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 41	41 Plan: 1. Formulation meeting on Monday 29/10 2. Review on Monday and /consider starting antipsychotics 3. Chase blood results	

4. Upload ECG on Rio
5. print Lorazepam

26/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 26 Oct 2018

Daniel Dwomoh Nursing

Last Amended by Details: 26 Oct 2018

Page Numbers: 41

MEETING WITH LORRAINE
CORDELL (MOTHER) AND
ANDREW CORDELL (UNCLE)

I had a meeting with Simon's mother and uncle. They demanded copies of the detention papers. They were

Originator Details: 26 Oct 2018 13:19 Daniel Dwomoh Nursing Originally Entered by Details: 26 Oct 2018 13:52 Daniel Dwomoh Last Amended by Details: 26 Oct 2018 14:18 Daniel Dwomoh Validated by Details: 26 Oct 2018 14: 18 Daniel Dwomoh Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

MEETING WITH LORRAINE CORDELL
(MOTHER) AND ANDREW CORDELL
(UNCLE)

I had a meeting with Simon's mother and uncle. They demanded copies of the detention papers. They were disputing the reasons for detention and more importantly the phrase that Simon is "Grandiose". They were very angry talking over each other and cutting across each other.

Lorraine said Simon has been harassed by his neighbours above him. He has reported many times to the authorities but no one is taking action but when the neighbours report of harassment about 15 police officers come to his flat.

Lorraine said the Court has ordered Enfield Council to move him to a 2-bedroom accommodation where family members can stay with him.

She confirmed that she will appeal against the detention.

She was reminded of the formulation meeting on Monday 29th at 3pm. She indicated her willingness to attend

26/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 26 Oct 2018

Last Amended by Details: 26 Oct 2018

Prabodh Raghavan Pharmacy

	Page Numbers: 41 + 42 42 MR-2 completed on Dorset ward Source: GP Summary, ECRHTT Allergies 6 Adverse reactions: No known allergies No allergies recorded Social History: Denies drug or alcohol use (current or past) OTC/herbal medications: no Did patient bring in Patients own medications – No Medication prior Originator Details: 26 Oct 2018 11:47 Prabodh Raghavan Pharmacy - Pharmacy Technician Originally Entered by Details: 26 Oct 2018 11:47 Prabodh Raghavan Last Amended by Details: 26 Oct 2018 .11:47 Prabodh Raghavan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 42	42 MR-2 completed on Dorset ward Source: GP Summary, ECRHTT Allergies 6 Adverse reactions: No known allergies No allergies recorded Social History: Denies drug or alcohol use (current or past) OTC/herbal medications: no Did patient bring in Patients own medications – No Medication prior to admission: GP summary No current medications ECRHTT No current medication on admission No current medication When required medication: Lorazepam 1mg tablets - Take one or two tablets-when required for agitation (maximum 2mg in 24 hours including IM) Lorazepam IM -1 mg to 2mg when required for agitation (maximum 4mg in 24 hours including oral) Paracetamol 500mg tablets- Take two tablets when required for pain (maximum 4g in 24 hours) Comments and action including variations to be actioned: Completed 26.102018 Prabodh R Mental Health Pharmacy Technician Chase Farm Hospital Telephone 02087025434 Prabodh.raghavan@beh-mht.nhs.uk	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u>	26/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u>	

Page Numbers: 43

Stage 4
Folder 4

Originator Details: 26 Oct 2018
Last Amended by Details: 26 Oct 2018
Miss Bejal Nandha Nursing
Page Numbers: 43
Formulation meeting booked for Monday
29th 3pm, C/C emailed invited to attend -
awaiting reply.
Simon said he will invite family to
meeting.

43

Originator Details: 26 Oct 2018 11:43 Miss Bejal
Nandha Nursing Originally Entered by Details: 26
Oct 2018 11:46 Miss Bejal Nandha Last Amended
by Details: 26 Oct 2018 11:46 Miss Bejal Nandha
Validated by Details: 26 Oct 2018 11:46 Miss Bejal
Nandha Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Formulation meeting booked for Monday 29th 3pm,
C/C emailed invited to attend - awaiting reply.
Simon said he will invite family to meeting.

26/10/2018

• **The Doctor's Folder / pub Book Issue: 1!**

Stage 4
Folder 4

Originator Details: 26 Oct 2018
Last Amended by Details: 01 Nov 2018
Maria Bruce
Page Numbers: 43
Dorset Ward - Chase Farm Hospital
Whiteboard meeting CORDELL, Simon P
(Mr)
Pressure of speech
Appears paranoid
Known to services?
Breached molestation order
Poor personal hygiene
Wants to appeal

Plan:

- 1 UDS
2. Formulation meeting
3. Bloods/physical /ECG
4. Review by doctor.

Originator Details: 26 Oct 2018 10:18 Maria Bruce
Medical Originally Entered by Details: 26 Oct 2018
10:18 Maria Bruce Last Amended by Details: 01
Nov 2018 16:20 Maria Bruce Validated by
Details: 01 Nov 2018 16:20 Maria Bruce
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

	Dorset Ward - Chase Farm Hospital Whiteboard meeting CORDELL, Simon P (Mr) Pressure of speech Appears paranoid Known to services? Breached molestation order Poor personal hygiene Wants to appeal Plan: 1 UDS 2. Formulation meeting 3. Bloods/physical /ECG 4. Review by doctor.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 44	26/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 26 Oct 2018 Last Amended by Details: 03 Nov 2018 Gladys Osunsina Nursing Page Numbers: 44 Patient appears fairly restless but manageable, he was challenging, grandiose and elated in mood. He later settled down after being seen by the doctor. He appears to have slept intermittently till mane. 44 Originator Details: 26 Oct 2018 06:45 Gladys Osunsina Nursing Originally Entered by Details: 26 Oct 2018 06:54 Gladys Osunsina Last Amended by Details: 03 Nov 2018 17:46 Gladys Osunsina Validated by Details: 03 Nov 2018 17:46 Gladys Osunsina Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Patient appears fairly restless but manageable, he was challenging, grandiose and elated in mood. He later settled down after being seen by the doctor. He appears to have slept intermittently till mane. 26/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 26 Oct 2018 Last Amended by Details: 26 Oct 2018 Bhavni Shah Medical Page Numbers: 44 + 45 + 46 45 Duty Doctor (CT1)- New ward admission Patient seen at: 10.30 MHA Status: Section 2	

	PC: Patient was arrested due to complaints received regarding harassment of neighbours. He was taken to Wood green police station, found 46 Paranoid delusions about the police and MH services and some grandiose delusions noted. (No) perceptual abnormalities: noted. Orientated to TPP Lacks insight, does not believe he has a MH condition Originator Details: 26 Oct 2018 00:19 Bhavni Shah Medical Originally Entered by Details: 26 Oct 2018 00:40 Bhavni Shah Last Amended by Details: 26 Oct 2018 03:09 Bhavni Shah Validated by Details: 26 Oct 2018 03:09 Bhavni Shah Significant: No Added to Risk History: No Contains Third Party Info: Yes, Conceal from Client: Not Concealed. “My Note Si - Barnet Clinical Commissioning Group. Wards All ... bhavini.shah@barnetccg.nhs.uk. 020 3688 1862?”	
• <u>The Doctor’s Folder / pub Book Issue: 1!</u> <u>Stage 4 Folder 4</u> Page Numbers: 45	45 Duty Doctor (CT1)- New ward admission Patient seen at: 10.30 MHA Status: Section 2 PC: Patient was arrested due to complaints received regarding harassment of neighbours. He was taken to Wood green police station, found to have a manic presentation with grandiose delusional ideas and was detained under MHA. Background: Patient previously given diagnosis of unspecified non-organic psychosis. He has a long-standing MH background and has been under both CAMHS and adult services in the past. Over the past few years he has engaged poorly with services and is not currently on any medications. More recently he has been reviewed by EIS/Enfield north locality team. Simon was seen in the quiet room with nursing staff present. Prior to entering the room, Simon started to ask a lot of questions and asked the nurses for a pen for 'the meeting'. When nursing staff stated that he should wait till we get to the room to ask questions he responded 'she is in a male role so it's only fair that I speak to her in the same way'. On arrival to the room he remained calm and polite. He started the conversation by asking for my name, which he wrote down on a paper. He then stated he has been detained here illegally because they think he is grandiose. He then went onto give me a timeline of events which were largely related to the police and his connection with mental health services. In summary he holds paranoid ideas that the police have charged him 'in illegal ways' for an	

	ASBO for organisation of illegal raves. This has led to several on-going issues with the police who have involved mental health services and it is a conspiracy against him. He states he wasn't assessed properly by doctors today and that the doctors who saw him today have previously tried to section him and 'failed' because he has 'video recordings' to prove he is innocent. He referred to multiple acts and dates which apparently are being broken by keeping him here. He states he has several businesses that the police have tried to stop, including 'owning festivals' and a newspaper called 'horrific corruption' and associated newsroom which he uses to expose police and doctors who are working in illegal ways. He states he has 'been wronged 78 times by the police' and will 'expose all of the doctors and police' involved. He spoke about being a 'privileged member of the community' and has never tried to hurt anyone. He reports the police have framed him in a 'sex scandal' and caused multiple issues. He described a negative relationship with neighbours and states that they bang from above continuously. He states a previous partner was pregnant and the neighbours banging led to the baby being lost. He denies having a MH illness and states he will get out of here once he has his laptop containing videographic proof and was requesting a tribunal. During the course of the conversation he refused to acknowledge he has been sectioned and was adamant he would be able to leave but was not forceful or physically attempting to leave. PMH: Nil DH: Nil NKDA SH: Denies drug or alcohol use (current or past) Personal history: Abuse as a child from father. Mental State Examination: Simon is a 37-year-old male, who was appropriately dressed. He engaged in conversation and made eye contact throughout. Calm and polite, no aggression but did become mildly restless at points. Pressurised speech, difficult to interrupt. Flight of ideas noted. Described mood as good. High levels of energy and labile mood.	
<u>The Doctor's Folder / pub Book Issue:</u> <u>1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 46	<u>46</u> Paranoid delusions about the police and MH services and some grandiose delusions noted. (No) perceptual abnormalities: noted. Orientated to TPP Lacks insight, does not believe he has a MH condition and not willing to engage with services historically or currently. Unlikely to take medication willingly. Risk: No risk to self-identified.	

	Risk of physical and verbal aggression: towards others noted. This in turn, increases risk of others retaliating, therefore harm towards Simon. Impression: Simon is a 37-year-old who has a background of a psychotic disorder. He presents with a deterioration in his mental state, with manic and psychotic symptoms. Plan: 1) Urine drug screen 2) Bloods in morning 3) Collateral history would be beneficial. 25/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 25 Oct 2018 Last Amended by Details: 26 Oct 2018 Daizy Annan Nursing Page Numbers: 46 + 47 <u>47</u> Simon is a 37 years old gentleman well known to the services. Admitted on Dorset ward on Section 2 of the MHA. It was reported that he has not been engaging with the services in recent years. He was arrested Originator Details: 25 Oct 2018 23:19 Daizy Annan Nursing Originally Entered by Details: 25 Oct 2018 23:19 Daizy Annan Last Amended by Details: 26 Oct 2018 03:37 Daizy Annan Validated by Details: 26 Oct 2018 03:37 Daizy Annan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 47	<u>47</u> Simon is a 37 years old gentleman well known to the services. Admitted on Dorset ward on Section 2 of the MHA. It was reported that he has not been engaging with the services in recent years. He was arrested today for spitting at a police officer after they were called about him harassing his neighbours. He also has a number of non-molestation orders against him, forbidding him contacting them. It was also reported that he appeared to be thoughts disorder, held a number of grandiose and delusional beliefs. Said the police were conspiring with medics and the council to silence him as he had uncovered police corruption. He also said his neighbours two floors above were controlling the neighbour below them and caused them to stamp on the floor and disturb him. It was reported that he appeared to lack insight into his presentation as he did not believe he was	

	mentally unwell and was adamant to see a psychiatrist for treatment. He was brought to the ward by ambulance crew and police officers. On arrival he appeared fairly calm and was observed interacting very well with his peers on the ward. Later, he was observed talking on his mobile phone, suddenly he became very angry talking on loud tone of voice. Later, staff approach him to engage him into conversation, but he showed no interest and informed staff that he shouldn't be admitted in the hospital. Reassurance given. Settled down and had hot chocolate and some toast He co-operates with the admission procedure. He was welcomed to the ward and allocated a bed. He was searched and no contraband found on him. He handed in Barclays card and a lighter for safe keeping. Hospital toiletries were given to him. Disclaimer form signed He was informed of No smoking policy in the hospital to which he acknowledges. He said he smoke occasionally. He was informed of other alternative nicotine replacement therapy but said he was not interested. Hospital pyjamas and towels were provided Ward Doctor has been informed for clerking purpose. Vital signs monitored and recorded as BP 130/74, Temp.36.6, Sat 97% Res. 17, Pulse 86, BM. 6.0 Weight 78.4 Kg, Height 179.0cm Bleep holder accepted section papers. 132 right under Section 2 of the Mental Health Act read to Simon, appears to have understood. He signed the document to demonstrate his understanding. 25/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 25 Oct 2018 Last Amended by Details: 25 Oct 2018 Kingsley Acquaye Page Numbers: 47 ECRHTT-AX Attended Wood Green Police Station for MHAA Simon was detained under section 2 MHA No role for Crisis Team and referral to ECRHTT closed. Originator Details: 25 Oct 2018 18:28 Kingsley Acquaye Nursing Originally Entered by Details: 25 Oct 2018 18:30 Kingsley Acquaye Last Amended	
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	by Details: 25 Oct 2018 18:30 Kingsley Acquaye Validated by Details: 25 Oct 2018 18:30 Kingsley Acquaye Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed ECRHTT-AX Attended Wood Green Police Station for MHAA Simon was detained under section 2 MHA No role for Crisis Team and referral to ECRHTT closed. 25/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 25 Oct 2018 Last Amended by Details: 26 Oct 2018 Mr Anthony Manning Page Numbers: 47 + 48 48 MENTAL HEALTH ACT ASSESSMENT WOOD GREEN POLICE STATION Dr s Hewitt and Dr P Kean, section 2 application by: Anthony manning. patient seen Originator Details: 25 Oct 2018 17:42 Mr Anthony Manning Social Worker - Social Worker Originally Entered by Details: 25 Oct 2018 17:52 Mr Anthony Manning Last Amended by Details: 26 Oct 2018 08:46 Mr Anthony Manning Validated by Details: 26 Oct 2018 08:46 Mr Anthony Manning Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 48	48 MENTAL HEALTH ACT ASSESSMENT WOOD GREEN POLICE STATION Dr s Hewitt and Dr P Kean, section 2 application by: Anthony manning. patient seen in the police cell, he was arrested today as the police called to his flat re him breaking a harassment order, he assaulted the police who attended, and spat at them. on interview he had pressure of speech, delusions about his neighbours and the police and housing ganging up against him. he denied drug use. he does not feel he has a mental disorder, spoke about organising St Ann's when he was admitted in the past.	

both doctors found him hypomanic, flight of speech, and grandiose, he was also thought disordered. taking all the circumstances of the case into consideration including his human rights I made a section 2 application based on two medical recommendations. See medical recommendations for details. mother identified as nearest relative, and was informed of the outcome of the assessment. bed identified on Dorset ward chase farm hospital. LAS and police to transport. report to follow.

25/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 25 Oct 2018

Last Amended by Details: 25 Oct 2018

Kelly Sullivan Nursing

Page Numbers: 48

Bed management:

Bed has been identified for S2 admission on Dorset ward Dorset ward informed Enfield AMHP informed Removed from bed allocation board

Originator Details: 25 Oct 2018 17:18 Kelly Sullivan Nursing Originally Entered by Details: 25 Oct 2018 17:19 Kelly Sullivan Last Amended by Details: 25 Oct 2018 17:19 Kelly Sullivan Validated by Details: 25 Oct 2018 17:19 Kelly Sullivan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Bed management:

Bed has been identified for S2 admission on Dorset ward Dorset ward informed Enfield AMHP informed Removed from bed allocation board

23/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 23 Oct 2018

Last Amended by Details: 23 Oct 2018

Margaret Garrod Social

Page Numbers: 48 + 49

49

Enfield AMHP Service

I made an application today for a Warrant under Section 135(1) of the Mental health Act 1983/2007.

	The District Judge was of the opinion there was insufficient Originator Details: 23 Oct 2018 14:35 Margaret Garrod Social Worker Originally Entered by Details: 23 Oct 2018 14:42 Margaret Garrod Last Amended by Details: 23 Oct 2018 15:23 Margaret Garrod Validated by Details: 23 Oct 2018 15:23 Margaret Garrod Significant: No Added to Risk History: No Contains Third Party Info: Yes, Conceal from Client: Not Concealed.	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 49	<u>49</u> Enfield AMHP Service I made an application today for a Warrant under Section 135(1) of the Mental health Act 1983/2007. The District Judge was of the opinion there was insufficient recent evidence that he was being "kept under proper control" as he is living alone. She further considered that there is insufficient recent medical evidence that "he is unable to care for himself" i.e. particularly his mental health, has he been prescribed / has he been taking it? It could be considered that he is not going out to avoid accusations that he is in breach of his Tenancy conditions. There is a report dated 8.7.2018 which indicates that he may lack capacity to adhere to the conditions of an injunction against him. The District Judge felt that there may be other legal options that could be used in preference to her issuing a S135 (1) warrant for which she considered there is insufficient evidence to consider he is unable to care for himself. To gain the necessary evidence there needs to be a further Psychiatric assessment offered to Mr Cordell at a time when his mother might be available to facilitate the appointment as had been previously planned. 19/10/2018 • <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 19 Oct 2018 Last Amended by Details: 19 Oct 2018 Kingsley Acquaye Page Numbers: 49 Originator Details: 19 Oct 2018 Last Amended by Details: 19 Oct 2018 Laurence Ryan Social Originator Details: 19 Oct 2018 20:26 Kingsley Acquaye Nursing Originally Entered by Details: 19 Oct 2018 20:27 Kingsley Acquaye Last Amended by Details: 19 Oct 2018 20:27 Kingsley Acquaye	

Validated by Details: 19 Oct 2018 20:27 Kingsley
Acquaye Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

ECRHTT-SL Attended MHAA

No role for HTT and referral to crisis team closed.

19/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 19 Oct 2018

Last Amended by Details: 19 Oct 2018

Laurence Ryan Social

Page Numbers: 49

Attempted to call Lorraine Cordell

██████████ NR, to
inform outcome of assessment, but no reply
and no message service.

Originator Details: 19 Oct 2018 16:35 Laurence
Ryan Social Worker Originally Entered by Details:
19 Oct 2018 16:37 Laurence Ryan Last Amended by
Details: 19 Oct 2018 16:37 Laurence Ryan
Validated by Details: 19 Oct 2018 16:37 Laurence
Ryan Significant: No Added to Risk History: No
Contains Third Party Info:
Yes, Conceal from Client: Not Concealed

Attempted to call Lorraine Cordell

██████████ NR, to inform
outcome of assessment, but no reply and no message
service.

19/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 19 Oct 2018

Last Amended by Details: 19 Oct 2018

Michelle Butcher

Page Numbers: 49 + 50

Attempted MHAA assessment *READ

ENTRY PROVIDED BELOW by trainee

AMPH Larry-

Plan:

ECRHTT

Originator Details: 19 Oct 2018 15:46 Michelle
Butcher Nursing Originally Entered by Details: 19
Oct 2018 15:46 Michelle Butcher Last Amended by
Details: 19 Oct 2018 15:46 Michelle Butcher
Validated by Details: 19 Oct 2018 15:46 Michelle
Butcher Significant: No Added to Risk History: No

	Contains Third Party Info: No Conceal from Client: Not Concealed Attempted MHAA assessment *READ ENTRY PROVIDED BELOW by trainee AMPH Larry-Plan: ECRHTT	
• <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 50	<u>50</u> Enfield AMHP Service: Attempted MHA Assessment Dr Keyhani (S12) Dr Albazaz (S12), Anthony Manning (AMHP) Larry Ryan (Trainee AMHP), Soobah Appadoo (Care Coordinator), Kingsley and Michelle (CRHTT). 11:15am Communal door to flat had been broken and closed with tape which opened easily. Simon's flat, 109 is on ground floor and door was closed and had a strap fastened to bottom of door as well. After knocking Simon asked who it was and when told " A social worker from Enfield Mental Health services" he said that he did not wish to see me and to go away, he talked rapidly about being subjected to 75 assaults at the hands of mental health services and that he has documented evidence and is taking action. Claimed he would make us all redundant. He warned us to leave. A dog could be heard barking behind the door. We left the block and gathered outside on the footpath to discuss plan. Shortly after Simon came out and approached as talking with pressured speech about his long battle with the police and legal system, how he is even now subject to a Curfew which keeps him from leaving his flat after 10.30 and this is in force until 2020, he claims. It was difficult to follow his story but appeared to all relate to the organisation of raves and club nights. He recognised Dr Albazaz from a previous assessment and said that he was there and he did not like him. Gradually a level of rapport was established and it was suggested to Simon that it might be a good idea to continue the discussion in his flat rather than in a public place. He agreed to this and I asked him to lock the dog away he said he will lock it in the back garden. Prior to entering the flat I informed Simon that I am a trainee AMHP and myself and the 2 doctors with me will be conducting a Mental Health Act assessment. We then entered the flat which was very cluttered with musical equipment and stacks of books and records. On the coffee table was a modern Apple PC. There was no obvious smell of drugs only cigarette smoke. Upon entering the living room and the mention of the 2 doctors he pointed to Dr Albazaz and said that he will not talk to him and does not want him in the flat. I explained that we could not conduct the assessment without 2 doctors and that we would	

need to leave. He was very keen to show me things on his computer relating to conspiracies and torments that he perceives he is suffering but we left explain the assessment would need to happen at another time.

Plan: Apply for S135 (1) warrant in view of his unwillingness to be assessed.

Would require removal to a place of safety for assessment.

Plans to be made for care of dog if Service user is removed to POS.

19/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 19 Oct 2018

Mohammad Fohim Nursing

Last Amended by Details: 19 Oct 2018

Page Numbers: 50

BED COORDINATOR Notified by
Enfield AMHP office that SC MHAA will
be re-scheduled - date 6-time TBC
Name removed from our board

Originator Details: 19 Oct 2018 12:57 Mohammad
Fohim Nursing Originally Entered by Details: 19
Oct 2018 12:57 Mohammad Fohim Last Amended
by Details: 19 Oct 2018 12:57 Mohammad Fohim
Validated by Details: 19 Oct 2018 12:57
Mohammad Fohim Significant: No Added to Risk
History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

BED COORDINATOR Notified by Enfield
AMHP office that SC MHAA will be re-scheduled -
date 6-time TBC
Name removed from our board

19/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 19 Oct 2018

Last Amended by Details: 19 Oct 2018

Laurence Ryan Social Worker

Page Numbers: 50

Retrospective Entry

9:45 am T/C :o Simon's mother and nearest
relative Lorraine Cordell [REDACTED]
she informed me that she had talked to
Simon last night

	Originator Details: 19 Oct 2018 12:53 Laurence Ryan Social Worker Originally Entered by Details: 19 Oct 2018 13:00 Laurence Ryan Last Amended by Details: 19 Oct 2018 13:01 Laurence Ryan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Retrospective Entry 9:45 am T/C :o Simon's mother and nearest relative Lorraine Cordell [REDACTED] she informed me that she had talked to Simon last night on the phone and sounded "like his normal self" she took fish and chips over to him 2 days previously and he was bright and cheerful she reported. I explained that we are today going to assess him under the MHA and that I wanted to consult with her. She said that he rarely leaves the flat and she visits with shopping and takes the dog for a walk. His dog currently has an abscess and the vet has prescribed anti-biotics. It was a difficult conversation as the mobile reception was poor. I agreed to call her after the assessment. 19/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 19 Oct 2018 Last Amended by Details: 19 Oct 2018 Laurence Ryan Social Worker Page Numbers: 50 Enfield AMHP Office 09:18 hrs T/t to Care Coordinator Soobah Appadoo requesting attendance at 11am MHA assessment. Message left on voice mail. Originator Details: 19 Oct 2018 09:39 Laurence Ryan Social Worker Originally Entered by Details: 19 Oct 2018 09:41 Laurence Ryan Last Amended by Details: 19 Oct 2018 09:41 Laurence Ryan Validated by Details: 19 Oct 2018 09:41 Laurence Ryan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield AMHP Office 09:18 hrs T/t to Care Coordinator Soobah Appadoo requesting attendance at 11am MHA assessment. Message left on voice mail.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u>	19/10/2018	

<u>Folder 4</u> Page Numbers: 51	<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 19 Oct 2018 Last Amended by Details: 19 Oct 2018 Kingsley Acquaye Nursing Page Numbers: 51 ECRHTT-SL Call received from the AMHP office for MHAA set for today at 11:00AM and they are asking for crisis team to attend <u>51</u> Originator Details: 19 Oct 2018 09: 30 Kingsley Acquaye Nursing Originally Entered by Details: 19 Oct 2018 09:31 Kingsley Acquaye Last Amended by Details: 19 Oct 2018 09:31 Kingsley Acquaye Validated by Details: 19 Oct 2018 09:31 Kingsley Acquaye Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed ECRHTT-SL Call received from the AMHP office for MHAA set for today at 11:00AM and they are asking for crisis team to attend. 18/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 18 Oct 2018 Last Amended by Details: 19 Oct 2018 Laurence Ryan Social Worker Page Numbers: 51 Enfield AMHP Service - Mental Health Act assessment details: Date: 19/10/18 Time: 11am Rendezvous point: nr 109 Burncroft Ave, EN3 7JQ AMHP: Anthony Manning Mob: 020 8702 5695 1st Doctor: Dr Albazaz Mob:0776334034 / 07841512524 2nd Doctor: Dr Keyhani Mob: 07496905216 Interpreter? N/A HTT: Will try and attend Other attendees: Larry Ryan, Trainee AMHP Bed manager: Aware Second worker/Care Co: Access? Communal entrance Nearest Relative: Attempted to call mother Lorraine Cordell [REDACTED] [REDACTED] no reply will try tomorrow.
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Ambulance: LAS Ref: Booked online Ref: 3380989/1

Other factors: Has big dog
LAS 0207 827 4597

Originator Details: 18 Oct 2018 16:47 Laurence Ryan Social Worker Originally Entered by Details: 18 Oct 2018 16:48 Laurence Ryan Last Amended by Details: 19 Oct 2018 09:46 Laurence Ryan
Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

Enfield AMHP Service - Mental Health Act assessment details:

Date: 19/10/18

Time: 11am

Rendezvous point: nr 109 Burncroft Ave, EN3 7JQ

AMHP: Anthony Manning Mob: 020 8702 5695

1st Doctor: Dr Albazaz Mob:0776334034 / 07841512524

2nd Doctor: Dr Keyhani Mob: 07496905216

Interpreter? N/A

HTT: Will try and attend

Other attendees: Larry Ryan, Trainee AMHP

Bed manager: Aware

Second worker/Care Co:

Access? Communal entrance

Nearest Relative: Attempted to call mother Lorraine Cordell [REDACTED] no reply will try tomorrow. **Ambulance:** LAS Ref:

Booked online Ref: 3380989/1

Other factors: Has big dog

LAS 0207 827 4597

18/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 18 Oct 2018

Last Amended by Details: 18 Oct 2018

Laurence Ryan Social Worker

Page Numbers: 51 + 52

From: RYAN, Larry (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Sent: 18 October 2018 16:45

To: Bed Management (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)

Subject: SC - 11214451

Hi, MHA assessment tomorrow at 11am for Simon Cordell **likely** we will need a bed, can you please put on board.

Regards

Larry

	Trainee AMHP Enfield AMHP Office 020 8364 1855 Originator Details: 18 Oct 2018 16:46 Laurence Ryan Social Worker Originally Entered by Details: 18 Oct 2018 16:46 Laurence Ryan Last Amended by Details: 18 Oct 2018 16:46 Laurence Ryan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed.	
<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 52	<u>52</u> From: RYAN, Larry (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 18 October 2018 16:45 To: Bed Management (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Subject: SC - 11214451 Hi, MHA assessment tomorrow at 11am for Simon Cordell likely we will need a bed, can you please put on board. Regards Larry Trainee AMHP Enfield AMHP Office 020 8364 1855 18/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 18 Oct 2018 Last Amended by Details: 19 Oct 2018 Laurence Ryan Social Worker Page Numbers: 52 Enfield AMHP Office T/C to GP Nightingale House Surgery, (020 8805 9997) Dr Chong on A/L, hasn't been seen since 2015. No Dr available to attend assessment. Originator Details: 18 Oct 2018 16:00 Laurence Ryan Social Worker Originally Entered by Details: 19 Oct 2018 09:44 Laurence Ryan Last Amended by Details: 19 Oct 2018 09:44 Laurence Ryan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield AMHP Office T/C to GP Nightingale House Surgery, (020 8805 9997) Dr Chong on A/L, hasn't been seen since 2015.	

No Dr available to attend assessment.

18/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator Details: 18 Oct 2018

Last Amended by Details: 18 Oct 2018

Sandra Muschett Social Worker

Page Numbers: 52

**ENFIELD AMHP SERVICE -
MENTAL HEALTH ACT
ASSESSMENT**

Referral received from Soobah (Care Coordinator) for a mental health act assessment. On reviewing Rio risk, I called Soobah and asked him to return my call.

Originator Details: 18 Oct 2018 15:09 Sandra Muschett Social Worker Originally Entered by Details: 18 Oct 2018 15:16 Sandra Muschett Last Amended by Details: 18 Oct 2018 15:16 Sandra Muschett Validated by Details: 18 Oct 2018 15:16 Sandra Muschett Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

**ENFIELD AMHP SERVICE - MENTAL
HEALTH ACT ASSESSMENT**

Referral received from Soobah (Care Coordinator) for a mental health act assessment. On reviewing Rio risk, I called Soobah and asked him to return my call.

17/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**
Stage 4
Folder 4

Originator. Details: 17 Oct 2018

Last Amended by Details: 17 Oct 2018

Soobah Appadoo Nursing

Page Numbers: 52

**ENFIELD ADULT NORTH
LOCALITY TEAM**

-Referred to Forensic Team for assessment

Originator. Details: 17 Oct 2018 15:30 Soobah Appadoo Nursing Originally Entered by Details: 17 Oct 2018 15:31 Soobah Appadoo Last Amended by Details: 17 Oct 2018 15:31 Soobah Appadoo Validated by Details: 17 Oct 2018 15:31 Soobah Appadoo Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

ENFIELD ADULT NORTH LOCALITY TEAM
-Referred to Forensic Team for assessment

17/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 17 Oct 2018

Last Amended by Details: 17 Oct 2018

Soobah Appadoo Nursing

Page Numbers: 52

**ENFIELD ADULT NORTH
LOCALITY TEAM**

T/C to AMHP office. Spoke to Admin

Staff-Marie who took the referral. Reasons
for referral given.

I asked that AMHP call back by Friday if
possible as I am on leave next week.

Originator Details: 17 Oct 2018 15:13 Soobah
Appadoo Nursing Originally Entered by Details: 17
Oct 2018 15:15 Soobah Appadoo Last Amended by
Details: 17 Oct 2018 15:15 Soobah Appadoo
Validated by Details: 17 Oct 2018 15:15 Soobah
Appadoo Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

ENFIELD ADULT NORTH LOCALITY TEAM

T/C to AMHP office. Spoke to Admin Staff-Marie
who took the referral. Reasons for referral given.

I asked that AMHP call back by Friday if possible as
I am on leave next week.

17/10/2018

- **The Doctor's Folder / pub Book Issue: 1!**

Stage 4

Folder 4

Originator Details: 17 Oct 2018

Last Amended by Details: 17 Oct 2018

Soobah Appadoo Nursing

Page Numbers: 52 + 53

**ENFIELD ADULT NORTH
LOCALITY TEAM**

Discussed in MDT on Tuesday 16th Oct.

Client has allegedly been physically
aggressive towards another service user
who lives in the building; a

Originator Details: 17 Oct 2018 14:22 Soobah
Appadoo Nursing Originally Entered by Details: 17
Oct 2018 14:27 Soobah Appadoo Last Amended by
Details: 17 Oct 2018 14:27 Soobah Appadoo
Validated by Details: 17 Oct 2018 14:27 Soobah
Appadoo Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed.

<u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Page Numbers: 53	<u>53</u> <u>ENFIELD ADULT NORTH LOCALITY TEAM</u> Discussed in MDT on Tuesday 16th Oct. Client has allegedly been physically aggressive towards another service user who lives in the building; a few residents have moved out due to aggressive behaviour. He has assaulted more than one person. Agreed that he is a risk to others and his behaviour could also put him at risk from others. Plan: Refer for MHA-but no concrete info as yet from Lemy regarding risk log-AMHP office would ask for evidence of risks. T /C to Lemy to ask if he could send an up-to-date risk log. Lemy said that he is seeking advice as to whether he could share info with us. He said he will get back to me later today. 12/10/2018 <u>The Doctor's Folder / pub Book Issue: 1!</u> <u>Stage 4</u> <u>Folder 4</u> Originator Details: 12 Oct 2018 Last Amended by Details: 12 Oct 2018 Soobah Appadoo Nursing Page Numbers: 53 <u>ENFIELD ADULT NORTH LOCALITY TEAM</u> On the 5th Oct I attended a meeting with Lemy Nwabuisi (Anti-Social Behaviour Coordinator, Community Safety Unit, Environmental & Community Safety, Enfield Council) Originator Details: 12 Oct 2018 13:50 Soobah Appadoo Nursing Originally Entered by Details: 12 Oct 2018 14: 05 Soobah Appadoo Last Amended by Details: 12 Oct 2018 14:05 Soobah Appadoo Validated by Details: 12 Oct 2018 14:05 Soobah Appadoo Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ENFIELD ADULT NORTH LOCALITY TEAM</u> On the 5th Oct I attended a meeting with Lemy Nwabuisi (Anti-Social Behaviour Coordinator, Community Safety Unit, Environmental & Community Safety, Enfield Council) and Alan Dinala, Forensic CPN. This meeting was part of the safeguarding process for Alan's client. SC has allegedly been aggressive on more than one occasion towards Alan's client. Lemy informed me that SC has a past and current history of physical and verbal aggression towards residents in the building. Lemy informed me that the	
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	council has tried to work with him but to no avail. Lemy informed me that SC is getting easily irritated even by the sound of a flushing toilet cistern; this happened very recently and he threatened Alan's client. Lemy thinks these are signs of mental illness and that BEH should proceed with an MHA. Lemy argued that this is for the protection of others as well as SC's own safety. I have asked Lemy to email me a list of incidents in chronological order. Lemy stated that he would need information from our team to confirm if SC is engaging or not with our service. I have advised Lemy to email his request to the Team Manager, George Benyure. Enfield Council will be seeking possession of SC's flat via the courts. Lemy stated that in a recent court case the judge recommended that Enfield Council re-house SC on the proviso that he engages with the MH Team. Plan: Discuss in MDT Lemy to email a risk log.	
<u>Stage 5</u> <u>Folder 5</u> <u>07/02/2019 Docs</u>		
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers: 01 <u>Run Time: 29 Jan 2019, 13:53 RiO Instance: LIVE (Reporting)</u> <u>Logged in user BamuT01</u> Parameters: ClientID = 11214451 (Simon P CORDELL), Date Range Criteria = Care provision time, Sort Order = Descending, Start Date = 12 August 2012 18:58, End Date = 12 October 2018 13:50. Filter Search = N, Progress Note Type = All, validated = All, Entered in error = No, Significant = All, Third Party Information = All, Added to Risk History = All, Concealed from Client = All,	28/09/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 28 Sep 2018 Last Amended by Details: 28 Sep 2018 Ruslan Zinchenko Medical Page Numbers: 01 <u>CT1 Zinchenko</u> Mr Cordell did not attend his appointment today and I was not able to get through to him on the phone. We will discuss his case in the MDT once again. <u>1</u> Originator Details: 28 Sep 2018 11:12 Ruslan Zinchenko Medical Originally Entered by Details: 28 Sep 2018 11:13 Ruslan Zinchenko Last Amended by Details: 28 Sep 2018 11:13 Ruslan Zinchenko Validated by Details: 28 Sep 2018 11:13 Ruslan Zinchenko Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>CT1 Zinchenko</u> Mr Cordell did not attend his appointment today and I was not able to get through to him on the phone.	

Locked Notes = No, User ID = BarnuTOI^ (Augustina Barnum)	We will discuss his case in the MDT once again. 21/09/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Sep 2018 Last Amended by Details: 21 Sep 2018 Soobah Appadoo Nursing Page Numbers: 01 <u>ENFIELD ADULT NORTH</u> <u>LOCALITY TEAM</u> Discussed in Caseload Supervision with Team Manager G. Benyure and Dr Hussain. Plan: -Refer for Forensic Assessment -Offer appointment in clinic-SS - Appointment booked for Friday 28th Sep with Dr Zinchenko for Can-Soobah Originator Details: 21 Sep 2018 14:22 Soobah Appadoo Nursing Originally Entered by Details: 21 Sep 2018 14:25 Soobah Appadoo Last Amended by Details: 21 Sep 2018 14:25 Soobah Appadoo Validated by Details: 21 Sep 2018 14:25 Soobah Appadoo Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ENFIELD ADULT NORTH LOCALITY TEAM</u> Discussed in Caseload Supervision with Team Manager G. Benyure and Dr Hussain. Plan: -Refer for Forensic Assessment -Offer appointment in clinic-SS -Appointment booked for Friday 28th Sep with Dr Zinchenko for Can-Soobah 21/09/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Sep 2018 Louiza Vassiliou Administrative Last Amended by Details: 21 Sep 2018 13 Page Numbers: 01 Appointment made with Dr Zinchenko for Friday 28 September 2018	
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	at 11.00, appointment letter sent. Unable to contact mother to advise of this appointment. Originator Details: 21 Sep 2018 13:05 Louiza Vassiliou Administrative Originally Entered by Details: 21 Sep 2018 13:09 Louiza Vassiliou Last Amended by Details: 21 Sep 2018 13:09 Louiza Vassiliou Validated by Details: 21 Sep 2018 13:09 Louiza Vassiliou Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Appointment made with Dr Zinchenko for Friday 28 September 2018 at 11.00, appointment letter sent. Unable to contact mother to advise of this appointment. 17/09/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 17 Sep 2018 Last Amended by Details: 17 Sep 2018 12 Augustina Barnum Administrative Page Numbers: 01 Tried to make contact with the Mother of this client in order to make an appointment for Mr Cordell. Unable to make contact by telephone to arrange an appointment for Wednesday 26th September 2018 at this present time. If this date is not acceptable another appointment will be offered. Telephone call with Mother of this client. Mother not happy with the current situation in respect of her Son and his housing. George Benyure to confirm if appointment to be offered to this client. Telephone number for Mother of this patient is [REDACTED] Originator Details: 17 Sep 2018 11:53 Augustina Barnum Administrative Originally Entered by Details: 17 Sep 2018 11:54 Augustina Barnum Last Amended by Details: 17 Sep 2018 12:20 Augustina Barnum Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Tried to make contact with the Mother of this client in order to make an appointment for Mr Cordell. Unable to make contact by telephone to arrange an appointment for Wednesday 26th September 2018	
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	at this present time. If this date is not acceptable another appointment will be offered. Telephone call with Mother of this client. Mother not happy with the current situation in respect of her Son and his housing. George Benyure to confirm if appointment to be offered to this client. Telephone number for Mother of this patient is [REDACTED] 07/09/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 07 Sep 2018 Last Amended by Details: 07 Sep 2018 14 Iain Williams Nursing Page Numbers: 01 + 02 <u>1</u> Notes <u>2</u> <u>EAS screening</u> Mr Cordell named as the alleged perpetrator in a SoVA alert for TA (1000395) Originator Details: 07 Sep 2018 14:06 Iain Williams Nursing Originally Entered by Details: 07 Sep 2018 14:07 Iain Williams Last Amended by Details: 07 Sep 2018 14:07 Iain Williams Validated by Details: 07 Sep 2018 14:07 Iain Williams Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:2	<u>2</u> <u>EAS screening</u> Mr Cordell named as the alleged perpetrator in a SoVA alert for TA (1000395) 30/08/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 30 Aug 2018 Last Amended by Details: 21 Sep 2018 Soobah Appadoo Nursing Page Numbers:2 <u>ENFIELD ADULT NORTH LOCALITY TEAM</u> Simon called the office and the call was passed on to me by Trish. Trish said that he sounded quite upset. Telephone conversation with Simon. He was very verbally abusive on the phone. I introduced myself as his new CC-He said that "I don't need a fucking Care Coordinator". He said that he had been seen	

	for "76 days by his CC" and there was "nothing wrong with me". He said that the reason we want to see him is to "cover for missing signatures?". He said he "will ruin anyone who come to my house" and he has "recording cameras and audios" to ruin us. He said if you come to my house "I fucking will scar you for life". He used foul languages throughout this contact. He said that I "can take the fucking referral and stick it up my ass". He said that he does not want to see us. I could not interrupt him: very verbally aggressive with pressure in speech". I did manage to say that we are a different team from Lucas House and we want him to have a fresh start- He said "I don't fuck care" Originator Details: 30 Aug 2018 14:29 Soobah Appadoo Nursing Originally Entered by Details: 30 Aug 2018 14:37 Soobah Appadoo Last Amended by Details: 21 Sep 2018 14:34 Soobah Appadoo Validated by Details: 21 Sep 2018 14:34 Soobah Appadoo Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ENFIELD ADULT NORTH LOCALITY TEAM</u> Simon called the office and the call was passed on to me by Trish. Trish said that he sounded quite upset. Telephone conversation with Simon. He was very verbally abusive on the phone. I introduced myself as his new CC-He said that "I don't need a fucking Care Coordinator". He said that he had been seen for "76 days by his CC" and there was "nothing wrong with me". He said that the reason we want to see him is to "cover for missing signatures?". He said he "will ruin anyone who come to my house" and he has "recording cameras and audios" to ruin us. He said if you come to my house "I fucking will scar you for life". He used foul languages throughout this contact. He said that I "can take the fucking referral and stick it up my ass". He said that he does not want to see us. I could not interrupt him: very verbally aggressive with pressure in speech". I did manage to say that we are a different team from Lucas House and we want him to have a fresh start- He said "I don't fuck care" 28/08/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 28 Aug 2018 Last Amended by Details: 17 Sep 2018 Augustina Barnum Administrative Page Numbers:2	
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	I have today spoken to the Mother of the above as I was unable to make telephone contact with the patient. I informed Mrs Cordell that two male members of staff, one a Doctor and the other a nurse would be making a home visit to her Son on Friday 31st August 2018 at 9.15am to carry out an Assessment. Mrs Cordell informed me that she would not be present at the appointment as she herself has a hospital appointment which she had been waiting for a while to ascertain and could not cancel this. I informed her that the Doctor and the Nurse would still attend for the appointment at the client's home address and she informed me that she would let her Son know. Mrs Cordell said that her Son may not be happy about the visit but none the less she will inform him. Originator Details: 28 Aug 2018 17:08 Augustina Barnum Administrative Originally Entered by Details: 28 Aug 2018 17:09 Augustina Barnum Last Amended by Details: 17 Sep 2018 11:52 Augustina Barnum Validated by Details: 17 Sep 2018 11:52 Augustina Barnum Significant: No Added to Risk History: No Contains Third Party Info: Yes, Conceal from Client: Not Concealed I have today spoken to the Mother of the above as I was unable to make telephone contact with the patient. I informed Mrs Cordell that two male members of staff, one a Doctor and the other a nurse would be making a home visit to her Son on Friday 31st August 2018 at 9.15am to carry out an Assessment. Mrs Cordell informed me that she would not be present at the appointment as she herself has a hospital appointment which she had been waiting for a while to ascertain and could not cancel this. I informed her that the Doctor and the Nurse would still attend for the appointment at the client's home address and she informed me that she would let her Son know. Mrs Cordell said that her Son may not be happy about the visit but none the less she will inform him. 28/08/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 28 Aug 2018 Last Amended by Details: 28 Aug 2018 Ruslan Zinchenko Medical Page Numbers:2	
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	<u>CT1 Zinchenko</u> To add to the below email: During the consultation I will add that: ‘we have reported this to the information commissioner, and are liaising with them’.? Any concerns about the information should be shared back to Rachel Yona and the patient and his mother should contact her with any questions. Originator Details: 28 Aug 2018 15:43 Ruslan Zinchenko Medical Originally Entered by Details: 28 Aug 2018 15:46 Ruslan Zinchenko Last Amended by Details: 28 Aug 2018 15:46 Ruslan Zinchenko Validated by Details: 28 Aug 2018 15:46 Ruslan Zinchenko Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>CT1 Zinchenko</u> To add to the below email: During the consultation I will add that: ‘we have reported this to the information commissioner, and are liaising with them’.? Any concerns about the information should be shared back to Rachel Yona and the patient and his mother should contact her with any questions. 23/08/2018 • <u>The Doctor’s Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Aug 2018 Last Amended by Details: 23 Aug 2018 Ruslan Zinchenko Medical Page Numbers:2 <u>3</u> <u>CT1 Zinchenko</u> Email received from Rachel Yona: Dear Dr Zinchenko, "For your awareness, I am investigating an information governance breach related to this patient. Due to the complexity, we have not written to him to inform him, as it was felt this would-be better-done face to face. His mother who will be attending the appointment is aware, and was the one to raise the complaint. When you see him, please could you tell him that ‘some clinical information was shared by the Trust with the London Borough of Enfield, in response to a court order. We are duty bound to share information when requested in a court order. However, the information we	
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	provided was not proportionate to the request. We are investigating this.’ Can you let me know that you have received this email? Originator Details: 23 Aug 2018 12:38 Ruslan Zinchenko Medical Originally Entered by Details: 23 Aug 2018 12:40 Ruslan Zinchenko Last Amended by Details: 23 Aug 2018 12:40 Ruslan Zinchenko Validated by Details: 23 Aug 2018 12:40 Ruslan Zinchenko Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor’s Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:3	<u>3</u> <u>CT1 Zinchenko</u> Email received from Rachel Yona: Dear Dr Zinchenko, "For your awareness, I am investigating an information governance breach related to this patient. Due to the complexity, we have not written to him to inform him, as it was felt this would-be better-done face to face. His mother who will be attending the appointment is aware, and was the one to raise the complaint. When you see him, please could you tell him that ‘some clinical information was shared by the Trust with the London Borough of Enfield, in response to a court order. We are duty bound to share information when requested in a court order. However, the information we provided was not proportionate to the request. We are investigating this.’ Can you let me know that you have received this email? 21/08/2018 <u>The Doctor’s Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Aug 2018 Last Amended by Details: 21 Aug 2018 Vincent Foutie Social Worker Page Numbers:3 <u>Enfield Assessment Service Screening Duty</u> Merlin Report dated 19/08/2018 reference number 18PAC1200243.Crisis attended by police. Under North Locality Team at present. No role for EAS. <u>Discharge EAS referral.</u> Originator Details: 21 Aug 2018 16:00 Vincent Foutie Social Worker Originally Entered by Details: 21 Aug 2018 16:00 Vincent Foutie Last Amended by Details: 21 Aug 2018 16:00 Vincent Foutie	

Validated by Details: 21 Aug 2018 16:00 Vincent Foutie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Enfield Assessment Service Screening Duty

Merlin Report dated

19/08/2018

reference number 18PAC1200243.Crisis attended by police. Under North Locality Team at present. No role for EAS.

Discharge EAS referral.

20/08/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 20 Aug 2018

Last Amended by Details: 20 Aug 2018

Mansy Jabuni Social Worker

Page Numbers:3

T/C to Lorraine following call on Access. Relayed long history of issues Simon has had with Enfield Housing. Current concern appears to be that Simon may not be given a 2 bedroom flat as housing feel that this is not needed, however family disagree.

Advised Lorraine that housing will have their policies/laws which they follow and mental health services can only provide supporting information that may or may not impact on final housing decision.

Lorraine said that she would be at the review meeting with Simon on the 31st, advised that she/Simon could inform how they feel housing may impact on Simon's mental health in the longer term (in terms of support that family are able to provide) this can be included in the clinic review letter however psychiatrist will need to determine whether this is having/is going to affect Simon's mental state/risk. Lorraine was happy with this plan and will provide clinic review letter to housing following appointment on the 31st August.

Originator Details: 20 Aug 2018 15:47 Mansy Jabuni Social Worker Originally Entered by Details: 20 Aug 2018 15:53 Mansy Jabuni Last Amended by Details: 20 Aug 2018 15:56 Mansy Jabuni Validated by Details: 20 Aug 2018 15:56 Mansy Jabuni Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Access

T/C to Lorraine following call on Access. Relayed long history of issues Simon has had with Enfield Housing. Current concern appears to be that Simon

may not be given a 2 bedroom flat as housing feel that this is not needed, however family disagree. Advised Lorraine that housing will have their policies/laws which they follow and mental health services can only provide supporting information that may or may not impact on final housing decision.

Lorraine said that she would be at the review meeting with Simon on the 31st, advised that she/Simon could inform how they feel housing may impact on Simon's mental health in the longer term (in terms of support that family are able to provide) this can be included in the clinic review letter however psychiatrist will need to determine whether this is having/is going to affect Simon's mental state/risk. Lorraine was happy with this plan and will provide clinic review letter to housing following appointment on the 31st August.

16/08/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5
 Originator Details: 16 Aug 2018
 Last Amended by Details: 16 Aug 2018
 Louiza Vassiliou
Page Numbers:3
 Appointment made with Dr Zinchenko for Friday
31 August 2018
 at 9.30am, appointment letter sent.

Originator Details: 16 Aug 2018 10:18 Louiza Vassiliou Administrative Originally Entered by Details: 16 Aug 2018 10:19 Louiza Vassiliou Last Amended by Details: 16 Aug 2018 10:19 Louiza Vassiliou Validated by Details: 16 Aug 2018 10:19 Louiza Vassiliou Significant: No Added to Risk History: No
 Contains Third Party Info: No Conceal from Client: Not Concealed

Appointment made with Dr Zinchenko for Friday
31 August 2018
 at 9.30am, appointment letter sent.

13/08/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5
 Originator Details: 13 Aug 2018
 Last Amended by Details: 13 Aug 2018
 Augustina Barnum Administrative
Page Numbers:3
 Appointment booked with Dr Zinchenko for Friday **31st August 2018**
 at 9.30am. This is a 1-hour appointment.

	Appointment letter to be sent. Originator Details: 13 Aug 2018 17:34 Augustina Barnum Administrative Originally Entered by Details: 13 Aug 2018 17:35 Augustina Barnum Last Amended by Details: 13 Aug 2018 17:35 Augustina Barnum Validated by Details: 13 Aug 2018 17:35 Augustina Barnum Significant: No Added to Risk History: No Contains Third Party Info: Yes, Conceal from Client: Not Concealed Appointment booked with Dr Zinchenko for Friday 31st August 2018 at 9.30am. This is a 1-hour appointment. Appointment letter to be sent.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:4	02/08/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Aug 2018 Last Amended by Details: 02 Aug 2018 11 Simon Clark Nursing Page Numbers:4 Entry for 25/06/2018 Email and phone correspondence with: Kind regards, Ludmilla lyavoo Solicitor Corporate Team Legal Services Enfield Council Silver Street Enfield EN1 3XY DX 90615 Enfield 1 Telephone: 020 8379 8323 Fax: 020 8379 6492 LBE had requested psychiatric medical opinion based on assessment for Mr Cordell to participate in legal proceedings. Ms lyavoo had approached Dr Scurlock about this and corresponded with me. I informed Ms lyavoo that BEH mental health services were unable to offer this type of assessment and report as we are commissioned 4 Originator Details: 02 Aug 2018 11:48 Simon Clark Nursing Originally Entered by Details: 02 Aug 2018 11:52 Simon Clark Last Amended by Details: 02 Aug 2018 11:52 Simon Clark Validated by Details: 02 Aug 2018 11:52 Simon Clark Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Entry for	

25/06/2018

Email and phone correspondence with:

Kind regards,

Ludmilla Iyavoo

Solicitor Corporate Team Legal Services Enfield

Council Silver Street Enfield EN1 3XY

DX 90615 Enfield 1

Telephone: 020 8379 8323 Fax: 020 8379 6492

LBE had requested psychiatric medical opinion based on assessment for **Mr Cordell to participate in legal proceedings.**

Ms Iyavoo had approached

Dr Scurlock about this and corresponded with me. I informed Ms Iyavoo that BEH mental health services were unable to offer this type of assessment and report as we are commissioned are not commissioned for this. I advised her that an independent medical assessment would be needed. At her request I sent a summary of the recent progress note entries relating to contact between mental health services and MR Cordell in relation to his case. Copies of correspondence and note summary are uploaded as documents to Rio. I was not informed that any correspondence shared would be subject to being shared with any other parties, I was not asked to consent to sharing this information and I did not advise that the information provided by BEH could be shared

30/07/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 30 Jul 2018

Last Amended by Details: 30 Jul 2018

Angela Hague Nursing

Page Numbers:4

Telephone call from Lorraine Cordell mother of Simon, said I sent a report to court without her or Simons consent. She read out a progress note I had written in 15th June, unhappy as she is named and her son has issues with Trust.

I am unable to see on Rio that I sent any reports to Enfield council. Lorraine agreed to e-mail me what she has with the details for her to review. Reported that she wishes to make a compliant.

Originator Details: 30 Jul 2018

11:17 Angela Hague Nursing Originally Entered by

Details: 30 Jul 2018 11:18 Angela Hague Last

Amended by Details: 30 Jul 2018 11:23 Angela

Hague Validated by Details: 30 Jul 2018 11:23

Angela Hague Significant: No Added to Risk

History: No

	Contains Third Party Info: No Conceal from Client: Not Concealed Telephone call from Lorraine Cordell mother of Simon, said I sent a report to court without her or Simons consent. She read out a progress note I had written in 15th June, unhappy as she is named and her son has issues with Trust. I am unable to see on Rio that I sent any reports to Enfield council. Lorraine agreed to e-mail me what she has with the details for her to review. Reported that she wishes to make a compliant.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:5	12/07/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 12 Jul 2018 Last Amended by Details: 12 Jul 2018 Marie Antao Administrative Page Numbers:5 <u>ON BEHALF OF DEBBIE MORGAN:</u> From: MORGAN, Debbie (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 11 July 2018 15:21 To: 'Giudi.A.Pell-Coggins@met.police.uk' Cc: Jacqui.Penn@met.police.uk Subject: RE: Concerns for male Hi Giudi, SC was seen and assessed at home on 19th June. He is not currently under a community team, the service has received several referrals since 2015 pertaining concern for his mental state, however upon assessment he's <u>5</u> Originator Details: 12 Jul 2018 11:48 Marie Antao Administrative Originally Entered by Details: 12 Jul 2018 11:48 Marie Antao Last Amended by Details: 12 Jul 2018 11:48 Marie Antao Validated by Details: 12 Jul 2018 11:48 Marie Antao Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ON BEHALF OF DEBBIE MORGAN:</u> From: MORGAN, Debbie (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 11 July 2018 15:21	

To: 'Giudi.A.Pell-Coggins@met.police.uk'

Cc: Jacqui.Penn@met.police.uk

Subject: RE: Concerns for male

Hi Giudi,

SC was seen and assessed at home on 19th June.

He is not currently under a community team, the service has received several referrals since 2015 pertaining concern for his mental state, however upon assessment he's not been found to be so unwell that restrictive measures have to be taken to engage him. He often presents with grandiose/paranoid ideations involving past involvement with police, and more recently involvement with the housing department and neighbour(s).

He is currently involved with court proceedings involving his neighbour/housing department arising from on-going dispute in which he alleges neighbour to be deliberating causing him distress by making noise (he appears to be noise sensitive).

Housing are exploring eviction proceedings in which information has recently been provided for court regarding his mental health needs. I understand he is representing himself in court and the court has questioned his mental capacity/mental health to do so?

I also understand he has CCTV inside and outside the property and often tapes interactions with others. He also has a dog on the premises and frequently makes reference to the evidence he has gathered about the alleged wrongs done to him by police, neighbours and housing department; a full ring-binder folder was observed in his flat with this alleged evidence.

There was no significant concern regarding his mental state when recently assessed to require a more intrusive intervention, he was not deemed to be psychotic but some acknowledgement of a paranoid personality type with grandiose beliefs. He is reluctant to engage with mental health services as he does not believe he is mentally unwell and therefore does not wish to engage to explore possible treatment options. The plan following the assessment was for a referral to be made to the North Locality Community Team for further engagement to build rapport over a period of time to try and engage/encourage him for further assessments and/or support.

Regards, Debbie

19/06/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 19 Jun 2018

Last Amended by Details: 19 Jun 2018

Angela Hague Nursing

	Page Numbers:5 + 6 <u>5</u> Notes <u>6</u> Home visit today as arranged with Amal Pomphrey from EIS. Client previously under EIS from 2015 discharged in January this year, difficult to engage. History well known so not repeated. Simon was friendly and welcoming into his home. Put his pet dog outside in the Originator Details: 19 Jun 2018 14:33 Angela Hague Nursing Originally Entered by Details: 19 Jun 2018 14:33 Angela Hague Last Amended by Details: 19 Jun 2018 16:31 Angela Hague Validated by Details: 19 Jun 2018 16:31 Angela Hague Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:6	<u>6</u> Home visit today as arranged with Amal Pomphrey from EIS. Client previously under EIS from 2015 discharged in January this year, difficult to engage. History well known so not repeated. Simon was friendly and welcoming into his home. Put his pet dog outside in the garden, visible through patio doors. Dog appeared in good health though Simon reported that his dog is stressed about his neighbours the police and mental health services to the point it has chewed some of the fur off his front paws. Simon stood for some time keen to talk about the evidence he has gathered against the police, and local authority, has taped and logged everything on a website. Showed his website says not live as yet, all he has to do is click a button and it will show how he has been unfairly treated by the local authority and police. Website and all written video and audio recordings linked. Showed a couple of examples CCTV inside his flat, conversation with ASBO team and written documents. Also showed us paper files that the has maintained in large ring binders, containing copies of e-mails and all correspondence. Informed us that he tapes all conversations he has with health, local authority and police staff. Has CCTV cameras placed internally and externally around his flat? Spoke of how his issues began many years ago trouble with the police over holding illegal parties. Reported that he is currently not going out feels afraid. No restrictions placed on him regarding going out other than not allowed in Industrial areas or 24-hour venues such as MacDonald's or Tesco's. Reported recently in court with regards to his neighbour, representing himself does not feel he needs a solicitor. Recommendation is that he has an assessment with a psychiatrist. However, said he will not attend as the letter has not been properly	

	dated and stamped and therefore believes he is not bound by it. Mental state: Simon was casually dressed, his hygiene appeared fair. He maintained good eye contact and rapport. His speech appeared slightly pressured difficult to interrupt but not irritable when interrupted. Grandiose ideas around his intelligence, says he is a millionaire property from wealthy relatives who have deceased, successful businesses, earning hundreds and thousands of pounds. Paranoid about his neighbours, believes they and others have spread information that he may have had herpes. Paranoid delusions believe his neighbours are deliberately following him from room to room banging on his ceiling. Believes they want to kill him. Though he did not express any thoughts of wanting to harm anyone. Believes he is being paid to look after vulnerable people in poor situations. Appears to be a mood element to his condition pressured speech grandiose, tangential jumping from topic to topic. However, reported that at times his mood can be depressed and upset by his neighbours. On one occasion he drank some liquid in an attempt to poison himself, found by mother and taken to A&E discharged. Denied having any current suicidal ideation or thought to harm himself. There was no evidence of any hallucinations. Personality appears to be intact. Simon appears to lack insight, asked if he believes he has a mental health condition denied this said he has never taken medication as he does not believe he has any mental health problem to require medication. Impression: 37-year-old male appears to have had a difficult childhood spoke about scars on his legs from beatings from his father. Wants to protect children, and vulnerable people believes it is his duty. 2015 diagnosed with psychotic illness and referred to EIS does not appear to have engaged with treatment offered, previously prescribed Olanzapine. Does not appear to require crisis team or mental health act assessment at this time. But would benefit from assertive follow up in the community. EIS state that has gone beyond EIS three-year treatment period. Plan: therefore, to refer to North Locality Team Locality Team. E-mail sent. EIS agree to liaise and advise court regarding the request for a report. Closed to EIS. 19/06/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Jun 2018	
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	Last Amended by Details: 19 Jun 2018 Angela Hague Nursing Page Numbers:6 + 7 <u>6</u> Notes <u>7</u> Telephone call from Simon's mother Lorraine Cordell. Sounded tearful on the phone, reported that she has spoken with Simon and he told her that we went to see him today, myself and Amal. Said that he told her that the appointment went well and that we had told him there is nothing mentally wrong with him, that he Originator Details: 19 Jun 2018 13:57 Angela Hague Nursing Originally Entered by Details: 19 Jun 2018 14:05 Angela Hague Last Amended by Details: 19 Jun 2018 14:05 Angela Hague Validated by Details: 19 Jun 2018 14:05 Angela Hague Significant: No Added to Risk History: No Contains Third Party Info: Yes, Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:7	<u>7</u> Telephone call from Simon's mother Lorraine Cordell. Sounded tearful on the phone, reported that she has spoken with Simon and he told her that we went to see him today, myself and Amal. Said that he told her that the appointment went well and that we had told him there is nothing mentally wrong with him, that he does not need psychiatric services and is well. Says she is finding it distressing, very worried about her son as she believes, and everyone else can see that her son is ill. Said he is struggling to cope, not leaving the house, feels persecuted by his neighbours. Not managing the court case well. Believes that the has lost trust in services and feels he needs to build trust with professionals again. Reported that when she was in court the information that was given was that her son had PTSD and was discharged form services, believes it was inaccurate and did not know where the information came from, though perhaps it was Iain Williams as he had around the same time called to speak to Simon about his referral. Discussed that we would need Simons consent to discuss his case. Reported that her mother suffered with schizophrenia and she has a lot of experience around people who have mental illness not believing they have a mental health problem and don't require treatment. Says she is happy to encourage her son to engage with services as far as possible. 15/06/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	

	Originator Details: 15 Jun 2018 Last Amended by Details: 15 Jun 2018 Angela Hague Nursing Page Numbers:7 Telephone call from Simon, long conversation, asking about his appointment he has been offered for next week, who made the referral and why. Same discussed and remembers that they had already spoken with Iain Williams. Difficult to follow his conversation and to interrupt. Says he has been on a 10pm curfew for the past 9 years afraid to leave his house as he feels the police have set this up. Mistaken identity, reports he has read all give descriptions of different Originator Details: 15 Jun 2018 14:25 Angela Hague Nursing Originally Entered by Details: 15 Jun 2018 14:32 Angela Hague Last Amended by Details: 15 Jun 2018 14:42 Angela Hague Validated by Details: 15 Jun 2018 14:42 Angela Hague significant! No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Telephone call from Simon, long conversation, asking about his appointment he has been offered for next week, who made the referral and why. Same discussed and remembers that they had already spoken with Iain Williams. Difficult to follow his conversation and to interrupt. Says he has been on a 10pm curfew for the past 9 years afraid to leave his house as he feels the police have set this up. Mistaken identity, reports he has read all give descriptions of different people, 4 in total, not him. All happened because of a party on Lincoln Road, he was not involved but happened because people were disturbed by the noise. Because of the curfew says he lost his relationship with his first love has or had a second girlfriend. Said he has been dialling 999 they get 15,000 calls per day; their time is going backwards on their records and do not have a RUN number. Says he does not have a mental illness no previous contact with services has been good. Sectioned in the past human rights broken, people coming into his house, says he was giving them access. Has tape recordings and LinkedIn, Facebook pages of all involved, has set up a web page. Discussed that they reason I had contacted him was to offer an appointment next Tuesday 11am, asking why we are coming, offered to see at Lucas House instead he declined this says prefers to be seen at home. Asked why I am not treating with dignity and respect that he has told me all about my colleagues and their treatment of him and I have not apologised to him and investigating. Discussed that he has the right to compliant which he says he already has and knows how to make a complaint, reported that he was	
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	taping our conversation and was making a digital copy which he has made of most interactions with people. He agreed to a home visit next week. The home visit is with EIS Amal Pomphrey. 15/06/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Jun 2018 Last Amended by Details: 15 Jun 2018 Nicola Wheeler Administrative Page Numbers:7 + 8 <u>7</u> Notes <u>8</u> From: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 15 June 2018 13:08 To: 'kaunchita.maudhub@enfield.gov.uk' Cc: HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) (simon.clark10@nhs.net) Subject: Mr S Cordell 37 yrs. old To the antisocial behaviour team at Enfield Council: We have been trying to see Originator Details: 15 Jun 2018 13:58 Nicola Wheeler Administrative Originally Entered by Details: 15 Jun 2018 13:59 Nicola Wheeler Last Amended by Details: 15 Jun 2018 13:59 Nicola Wheeler Validated by Details: 15 Jun 2018 13:59 Nicola Wheeler Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:8	<u>8</u> From: SCURLOCK, Hilary (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) Sent: 15 June 2018 13:08 To: 'kaunchita.maudhub@enfield.gov.uk' Cc: HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) (simon.clark10@nhs.net) Subject: Mr S Cordell 37 yrs. old To the antisocial behaviour team at Enfield Council:	

We have been trying to see Mr Cordell but he has not attended assessments offered although he has phoned the assessment team.
He is not currently receiving any mental health treatment and is not under any team.
He has had contact with various mental health teams in the (both child and adolescent and adult services) and seems (from the electronic record) to have had one brief admission on the Haringey assessment ward in August 2016.
It seems that the Court / solicitor (Ludmilla lyavoo from the legal services team at Enfield Council) would like a report to assist the Court answering specific questions outlined in Ms lyavoo's e mail.
I would suggest that such a report is commissioned from a Consultant Forensic Psychiatrist from North London Forensic Service (tel 020 8702 6004/6072) forensic.referrals@nhs.net as this is not something, we would provide
We will continue to endeavour to assess him and offer him any treatment he may need
Dr Scurlock
Consultant Psychiatrist EIP

15/06/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 15 Jun 2018

Last Amended by Details: 15 Jun 2018

Angela Hague Nursing

Page Numbers:8

Telephoned to speak to Simon [REDACTED] [REDACTED] number that he had left to be contacted on. Female answered the phone said she is aware that her son has been speaking to mental health services to arrange an appointment. Says he is also aware that there is a court order for him to have an assessment.

Said his mobile number is [REDACTED] she tried to call him but said going to answer phone. Said however she will pass on the message that we will come to see him at home on

Tuesday 19th June 2018

at 11am. If any problems say's her son will contact us.

Enquired how her son is says she doesn't want to talk to anyone as in the past her son has become suspicious of her and affected her relationship with him.

Home visit agreed with myself and Amal Pomphrey from EIS.

Originator Details: 15 Jun 2018 13:49 Angela Hague Nursing Originally Entered by Details: 15

	Jun 2018 13:55 Angela Hague Last Amended by Details: 15 Jun 2018 13:55 Angela Hague Validated by Details: 15 Jun 2018 13:55 Angela Hague Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Telephoned to speak to Simon [REDACTED] number that he had left to be contacted on. Female answered the phone said she is aware that her son has been speaking to mental health services to arrange an appointment. Says he is also aware that there is a court order for him to have an assessment. Said his mobile number is [REDACTED] she tried to call him but said going to answer phone. Said however she will pass on the message that we will come to see him at home on Tuesday 19th June 2018 at 11am. If any problems say's her son will contact us. Enquired how her son is says she doesn't want to talk to anyone as in the past her son has become suspicious of her and affected her relationship with him. Home visit agreed with myself and Amal Pomphrey from EIS. 15/06/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Jun 2018 Last Amended by Details: 15 Jun 2018 Hilary Scurlock Medical Page Numbers:8 <u>8</u> Notes <u>2</u> <u>d/w team manager Simon Clark</u> will try to arrange assessment by Amal P (who has prior knowledge of the patient) jointly with Angela H (EAS manager) to Originator Details: 15 Jun 2018 12:51 Hilary Scurlock Medical Originally Entered by Details: 15 Jun 2018 12:56 Hilary Scurlock Last Amended by Details: 15 Jun 2018 12:56 Hilary Scurlock Validated by Details: 15 Jun 2018 12:56 Hilary Scurlock Significant: Yes, Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	<u>2</u> d/w team manager Simon Clark will try to arrange assessment by Amal P (who has prior knowledge of the patient) jointly with Angela H (EAS manager) to see if he has a current mental	

health problem requiring treatment the Court has requested a report which we (NHS mental health services) would not be providing.
I will suggest that the Court/antisocial behaviour team/Enfield Council legal services approach a Forensic Psychiatrist from Camlet and commission this from them as this is their specialism
I understand he has allegedly threatened to kill a neighbour and there is an injunction
forensic.referrals@nhs.net tel 020 8702 6004/ 6072

14/06/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 14 Jun 2018

Last Amended by Details: 14 Jun 2018

Aurelie Crombe Nursing

Page Numbers:9

Enfield Early Intervention in Psychosis

Service Referral discussed in team meeting

Dr Scurlock to discuss with team manager regarding the best way forward

Originator Details: 14 Jun 2018 09:48 Aurelie Crombe Nursing Originally Entered by Details: 14 Jun 2018 09:50 Aurelie Crombe Last Amended by Details: 14 Jun 2018 09:50 Aurelie Crombe Validated by Details: 14 Jun 2018 09:50 Aurelie Crombe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Enfield Early Intervention in Psychosis Service

Referral discussed in team meeting

Dr Scurlock to discuss with team manager regarding the best way forward

11/06/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 11 Jun 2018

Last Amended by Details: 11 Jun 2018

Linda Scott Administrative

Page Numbers:9

Patient telephoned enquiring why he has an appointment, which he does not want.

Advised that I would inform Angela Hague of this fact. Did advise the patient that Angela may want to ring him. His

telephone number is [REDACTED]

Message sent to Angela via email.

Originator Details: 11 Jun 2018 13:53 Linda Scott Administrative Originally Entered by Details: 11 Jun 2018 13:55 Linda Scott Last Amended by

Details: 11 Jun 2018 13:55 Linda Scott Validated by
Details: 11 Jun 2018 13:55 Linda Scott Significant:
No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Patient telephoned enquiring why he has an appointment, which he does not want. Advised that I would inform Angela Hague of this fact. Did advise the patient that Angela may want to ring him. His telephone number is [REDACTED]
Message sent to Angela via email.

07/06/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 07 Jun 2018

Last Amended by Details: 07 Jun 2018

Beverley Campbell Administrative

Page Numbers:9

Unable to get in contact with client and client has not got back to me.

Unconfirmed appointment letter sent.

Clinic: Crown Lane Clinic, Date/Time:

15 Jun 2018

10:00:00, Clinicians: Angela Hague / EIS

Originator Details: 07 Jun 2018 12:37 Beverley Campbell Administrative Originally Entered by
Details: 07 Jun 2018 12:39 Beverley Campbell Last Amended by Details: 07 Jun 2018 12:39 Beverley Campbell Validated by Details: 07 Jun 2018 12:39 Beverley Campbell Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

Unable to get in contact with client and client has not got back to me.

Unconfirmed appointment letter sent.

Clinic: Crown Lane Clinic, Date/Time:

15 Jun 2018

10:00:00, Clinicians: Angela Hague / EIS

06/06/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 06 Jun 2018

Last Amended by Details: 07 Jun 2018

Beverley Campbell Administrative

Page Numbers:9

Tried contacting client to offer an appointment. Mobile was not answered.

	Left a voicemail message requesting client give me a call back. I have put a slot in the diary. Await to see if received a call from client. Originator Details: 06 Jun 2018 13:06 Beverley Campbell Administrative Originally Entered by Details: 06 Jun 2018 13:08 Beverley Campbell Last Amended by Details: 07 Jun 2018 12:40 Beverley Campbell Validated by Details: 07 Jun 2018 12:40 Beverley Campbell Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed EAS Tried contacting client to offer an appointment. Mobile was not answered. Left a voicemail message requesting client give me a call back. I have put a slot in the diary. Await to see if received a call from client. 05/06/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 05 Jun 2018 Last Amended by Details: 05 Jun 2018 16 Angela Hague Nursing Page Numbers:9 Plan joint assessment with EAS and EIS. Originator Details: 05 Jun 2018 16:58 Angela Hague Nursing Originally Entered by Details: 05 Jun 2018 16:58 Angela Hague Last Amended by Details: 05 Jun 2018 16:58 Angela Hague Validated by Details: 05 Jun 2018 16:58 Angela Hague Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Plan joint assessment with EAS and EIS.	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:10	01/06/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Jun 2018 Last Amended by Details: 01 Jun 2018 Iain Williams Nursing Page Numbers:10 <u>Email to EIS & close to EAS</u> Enfield EIS referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST);	

	CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); ...Cc: HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CUSHION, Jane (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Dear EIS / Simon Re: Mr Simon CORDELL (11214451) I would be grateful if you consider re-opening this referral. This pt is well known to you. I contacted him following a police report - threatening to kill his neighbour. On the phone he sounded thought disordered and paranoid. He would be agreeable to see EIS. I am aware you recently close his referral following DNAs for clinic-based appointments. He is probably more likely to engage if he is seen at home (2 workers!). I also contacted his mother. She was angry at previous contact with mental health services because Simon has found out - she thinks this will break what little relationship they have. She was reluctant to talk on that basis. Regards 10 Originator Details: 01 Jun 2018 16:32 Iain Williams Nursing Originally Entered by Details: 01 Jun 2018 16:33 Iain Williams Last Amended by Details: 01 Jun 2018 16:33 Iain Williams Validated by Details: 01 Jun 2018 16:33 Iain Williams Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Email to EIS & close to EAS Enfield EIS referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CLARK, Simon (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); ...Cc: HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); CUSHION, Jane (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Dear EIS / Simon Re: Mr Simon CORDELL (11214451) I would be grateful if you consider re-opening this referral. This pt is well known to you. I contacted him following a police report - threatening to kill his neighbour. On the phone he sounded thought disordered and paranoid. He would be agreeable to see EIS. I am aware you recently close his referral following DNAs for	
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	clinic-based appointments. He is probably more likely to engage if he is seen at home (2 workers!). I also contacted his mother. She was angry at previous contact with mental health services because Simon has found out - she thinks this will break what little relationship they have. She was reluctant to talk on that basis. Regards 01/06/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Jun 2018 Last Amended by Details: 01 Jun 2018 Iain Williams Nursing Page Numbers:10 + 11 <u>10</u> Notes <u>11</u> <u>EAS screening</u> Police notification received regarding contact on 31.5.18. Reported to have made threats to kill his neighbour and her children. He was arrested for threats to kill and breach of an injunction - outcome not known. Contacted Originator Details: 01 Jun 2018 14:28 Iain Williams Nursing Originally Entered by Details: 01 Jun 2018 14:29 Iain Williams Last Amended by Details: 01 Jun 2018 16:24 Iain Williams Validated by Details: 01 Jun 2018 16:24 Iain Williams Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:11	<u>11</u> <u>EAS screening</u> Police notification received regarding contact on 31.5.18. Reported to have made threats to kill his neighbour and her children. He was arrested for threats to kill and breach of an injunction - outcome not known. Contacted by phone - no answer then he called me back. Long conversation. Mood labile- calm, polite to irritable, aroused, accusing Difficult to follow content ■ sounded thought disordered Rambling about previous contact with MH services - difficult to follow. Legalise references, human right act. Believes his rights were breached & that he has proof of injustice / illegal treatment	

	Reference to being part of several companies. Health worker and government are part of different companies Thinks he has been "set up". " if I give you an amp, I'll get 5 years" "I've been illegally detained in my home for 9 years" "The government is trying to push me out of the country" "They are trying to label me as having a disease" "I'm not a super grass" Neighbour upstairs has MH problems (her name is familiar to me from previous team). He blames MH services for allowing her to live there and cause him problems. Has placed cameras in every room to record evidence of things which happen - will use this to defend himself States he is preparing a case for the supreme court, also has built a website to record injustices Constantly collecting evidence States he initially trusted Goode but felt let down when he was later assessed under MHA Would be prepared to meet someone from EIS if they visited him at home - would like to discuss some of the evidence he has gathered. Does not want CRHTT - thinks they acted illegally in the past" giving me medication when I was not section 117". Plan - forward referral to EIS 09/05/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 09 May 2018 Last Amended by Details: 09 May 2018 Simon Clark Nursing Page Numbers:11 No contact received from Simon, case closed to Enfield EIP No contact received from Simon, case closed to Enfield EIP Originator Details: 09 May 2018 16:15 Simon Clark Nursing Originally Entered by Details: 09 May 2018 16:16 Simon Clark Last Amended by Details: 09 May 2018 16:16 Simon Clark Validated by Details: 09 May 2018 16:16 Simon Clark Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed No contact received from Simon, case closed to Enfield EIP	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	30/04/2018 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u>	

Page Numbers:12

Folder 5

Originator Details: 30 Apr 2018
Last Amended by Details: 30 Apr 2018
Simon Clark Nursing

Page Numbers:12

I called Simon as I received an email message from an administrator that he called and asked me to call him back. I called the number given: 02082457454 but was told he was not there and was given the following number to call: 07729 243 063. There was no reply and no personal voicemail message so I did not leave a message

12

Originator Details: 30 Apr 2018 16:34 Simon Clark Nursing Originally Entered by Details: 30 Apr 2018 16:35 Simon Clark Last Amended by Details: 30 Apr 2018 16:35 Simon Clark Validated by Details: 30 Apr 2018 16:35 Simon Clark Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

I called Simon as I received an email message from an administrator that he called and asked me to call him back. I called the number given: [REDACTED] but was told he was not there and was given the following number to call: 07729 243 063 There was no reply and no personal voicemail message so I did not leave a message

20/04/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 20 Apr 2018
Last Amended by Details: 20 Apr 2018
Georgina Lamb Social Worker

Page Numbers:12

Enfield EIS

Appointment letter sent to Simon - see uploads.

Discharge from caseload if no reply by

07/05/2018

Originator Details: 20 Apr 2018 15:23 Georgina Lamb Social Worker Originally Entered by Details: 20 Apr 2018 15:24 Georgina Lamb Last Amended by Details: 20 Apr 2018 15:24 Georgina Lamb Validated by Details: 20 Apr 2018 15:24 Georgina Lamb Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Enfield EIS

Appointment letter sent to Simon - see uploads.

Discharge from caseload if no reply by
07/05/2018

19/04/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 19 Apr 2018

Last Amended by Details: 19 Apr 2018

Aurelie Crombe Nursing

Page Numbers:12

Enfield Early Intervention Service

Referral discussed in team meeting

Re-referral

PLAN

write to him to let him know that we received the referral and offer that he can arrange an appointment if he would like support from EIP

Originator Details: 19 Apr 2018 09:34 Aurelie Crombe Nursing Originally Entered by Details: 19 Apr 2018 09:40 Aurelie Crombe Last Amended by Details: 19 Apr 2018 09:40 Aurelie Crombe Validated by Details: 19 Apr 2018 09:40 Aurelie Crombe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Enfield Early Intervention Service

Referral discussed in team meeting

Re-referral

PLAN

write to him to let him know that we received the referral and offer that he can arrange an appointment if he would like support from EIP

13/04/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 13 Apr 2018

Last Amended by Details: 13 Apr 2018

Iain Williams Nursing

Page Numbers:12 + 13

12

Notes

13

EAS screening

Police notification received regarding contact on 12.4.18 - unsettled by local building work. Noise had upset him Closed to EIS Jan 2018 due to non-engagement. Attempted to contact by phone - "number unobtainable".

Email to EIS as follows:

	Amal.Pomphrey@beh-mht.nhs.uk; Enfield EIS referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Cc: The Mash Team; Dear EIS Re: Mr Simon CORDELL (11214451) This man was closed to your service in January of this year due to non-engagement. We received a police notification regarding contact on 12/04/2018 (see uploaded docs for details). Neighbour dispute due to noise from building work. Sounds like he is oversensitive in keeping with a persecutory outlook. I tried to phone but his number is unavailable RiO entries show he is fairly adamant about not being seen by mental health. I am closing to EAS. Not sure if you want to try and make contact as Goodie may have some rapport with him. Originator Details: 13 Apr 2018 16:19 Iain Williams Nursing Originally Entered by Details: 13 Apr 2018 16:21 Iain Williams Last Amended by Details: 13 Apr 2018 16:40 Iain Williams Validated by Details: 13 Apr 2018 16:40 Iain Williams Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:13	<u>13</u> <u>EAS screening</u> Police notification received regarding contact on 12.4.18 - unsettled by local building work. Noise had upset him Closed to EIS Jan 2018 due to non-engagement. Attempted to contact by phone - "number unobtainable". Email to EIS as follows: Amal.Pomphrey@beh-mht.nhs.uk; Enfield EIS referrals (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); HAGUE, Angela (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST); Cc: The Mash Team; Dear EIS Re: Mr Simon CORDELL (11214451) This man was closed to your service in January of this year due to non-engagement. We received a police notification regarding contact on 12/04/2018	

(see uploaded docs for details). Neighbour dispute due to noise from building work. Sounds like he is oversensitive in keeping with a persecutory outlook. I tried to phone but his number is unavailable RiO entries show he is fairly adamant about not being seen by mental health. I am closing to EAS. Not sure if you want to try and make contact as Goodie may have some rapport with him.

09/04/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 09 Feb 2018

Last Amended by Details: 09 Feb 2018

Reginald Massaquoi Nursing

Page Numbers:13

Seen by the Police and Liaison service on

09/01/2018

Please see attached document for report.

Originator Details: 09 Feb 2018 10:19 Reginald Massaquoi Nursing Originally Entered by Details: 09 Feb 2018 10:20 Reginald Massaquoi Last Amended by Details: 09 Feb 2018 10:20 Instinet Mahmud Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Seen by the Police and Liaison service on

09/01/2018

Please see attached document for report.

30/01/2018

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 30 Jan 2018

Last Amended by Details: 30 Jan 2018

Gregory Ishmael Nursing

Page Numbers:13

Night Team- CRHTT

TC received from Simon to say that he wants to make a complaint about how he was sectioned and generally not happy with the service that he got when he was admitted to St Ann's Hospital last year.

He was asking for names of doctors and I informed him that he should call during the daytime and also gave him Method of raising a complaint:

patient.experience@beh-mht.nhs.uk.

	Noted that he was recently discharged from EIS as not willing to engage as well. He thanked me for this and said that he will be following up on this. Originator Details: 30 Jan 2018 03:55 Gregory Ishmael Nursing Originally Entered by Details: 30 Jan 2018 04:02 Gregory Ishmael Last Amended by Details: 30 Jan 2018 04:02 Gregory Ishmael Validated by Details: 30 Jan 2018 04:02 Gregory Ishmael Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Night Team- CRHTT</u> TC received from Simon to say that he wants to make a complaint about how he was sectioned and generally not happy with the service that he got when he was admitted to St Ann's Hospital last year. He was asking for names of doctors and I informed him that he should call during the daytime and also gave him Method of raising a complaint: patient.experience@beh-mht.nhs.uk. Noted that he was recently discharged from EIS as not willing to engage as well. He thanked me for this and said that he will be following up on this.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:14	18/01/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 18 Jan 2018 Last Amended by Details: 18 Jan 2018 Aurelie Crombe Nursing Page Numbers:14 <u>Enfield Early Intervention Service Referral</u> discussed in team meeting Has refused to work with EIP Referral closed <u>14</u> Originator Details: 18 Jan 2018 12:50 Aurelie Crombe Nursing Originally Entered by Details: 18 Jan 2018 12:51 Aurelie Crombe Last Amended by Details: 18 Jan 2018 12:51 Aurelie Crombe Validated by Details: 18 Jan 2018 12:51 Aurelie Crombe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield Early Intervention Service Referral</u> discussed in team meeting Has refused to work with EIP Referral closed	

17/01/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 17 Jan 2018

Last Amended by Details: 21 Jan 2018

Goodie Adama Nursing

Page Numbers:14

DNA - Simon did not attend appointment to be assessed. He called the previous day, Tuesday and did not appear happy that he was sent a letter about assessing his mental state

t/c to mobile and was not able to make contact

Originator Details: 17 Jan 2018 14:40 Goodie Adama Nursing Originally Entered by Details: 21 Jan 2018 21:53 Goodie Adama Last Amended by Details: 21 Jan 2018 21:53 Goodie Adama Validated by Details: 21 Jan 2018 21:53 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

DNA - Simon did not attend appointment to be assessed. He called the previous day, Tuesday and did not appear happy that he was sent a letter about assessing his mental state

t/c to mobile and was not able to make contact

15/01/2018

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 15 Jan 2018

Last Amended by Details: 16 Jan 2018

Goodie Adama Nursing

Page Numbers:14

t/c received from Simon

he said he got my letter inviting him for assessment

he thanked me for concern shown towards him and made it clear that he did not have mental illness [and would not attend for assessment]

he spoke a lot about his disagreement with the Police and justice system - in fact nothing new from past dealings with him he said he did not need mental health, thanked me and wished me Happy New Year he ended the phone call before I could ask him for current contact number

Simon was loud and appeared "paranoid" as usual however there was no apparent evidence of psychotic symptoms plan

	feedback to team and will recommend referral to be closed Originator Details: 15 Jan 2018 15:08 Goodie Adama Nursing Originally Entered by Details: 16 Jan 2018 16:15 Goodie Adama Last Amended by Details: 16 Jan 2018 16:15 Goodie Adama Validated by Details: 16 Jan 2018 16:15 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c received from Simon he said he got my letter inviting him for assessment he thanked me for concern shown towards him and made it clear that he did not have mental illness [and would not attend for assessment] he spoke a lot about his disagreement with the Police and justice system - in fact nothing new from past dealings with him he said he did not need mental health, thanked me and wished me Happy New Year he ended the phone call before I could ask him for current contact number Simon was loud and appeared "paranoid" as usual however there was no apparent evidence of psychotic symptoms plan feedback to team and will recommend referral to be closed 11/01/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 11 Jan 2018 Last Amended by Details: 11 Jan 2018 Goodie Adama Nursing Page Numbers:14 t/c - I rang couple of mobile / contact numbers for Simon and all were not obtainable. I sent him appointment to meet for assessment on Wednesday 17 at 2pm at Lucas House - letter sent first class Originator Details: 11 Jan 2018 16:56 Goodie Adama Nursing Originally Entered by Details: 11 Jan 2018 16:58 Goodie Adama Last Amended by Details: 11 Jan 2018 16:58 Goodie Adama Validated by Details: 11 Jan 2018 16:58 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c - I rang couple of mobile / contact numbers for Simon and all were not obtainable.	
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	I sent him appointment to meet for assessment on Wednesday 17 at 2pm at Lucas House - letter sent first class 04/01/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 04 Jan 2018 Last Amended by Details: 04 Jan 2018 Aurelie Crombe Nursing Page Numbers:14 + 15 <u>14</u> Notes <u>15</u> Enfield Early Intervention Service Referral discussed in team meeting DNA joint assessment on 02/01/2018 with EAS Closed to EAS PLAN offer new appointment not home visit because of risk Originator Details: 04 Jan 2018 13:18 Aurelie Crombe Nursing Originally Entered by Details: 04 Jan 2018 13:21 Aurelie Crombe Last Amended by Details: 04 Jan 2018 13:22 Aurelie Crombe Validated by Details: 04 Jan 2018 13:22 Aurelie Crombe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:15	<u>15</u> Enfield Early Intervention Service Referral discussed in team meeting DNA joint assessment on 02/01/2018 with EAS Closed to EAS PLAN offer new appointment not home visit because of risk 02/01/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Jan 2018 Last Amended by Details: 02 Jan 2018 Linda Scott Administrative Page Numbers:15 <u>GP 24 Hour Notification sent to the GP</u> on behalf of Dr Cushion. Patient discharged from the EAS. Confirmation of delivery of email to the GP: Your message has been delivered to the following recipients:	

	SURGERY, Nightingale House (NIGHTINGALE HOUSE SURGERY) (nightingalehousesurgerv@nhs.net) Subject: Mr Simon P CORDELL - D.O.B.: 26 Jan 1981 - NHS: 434 096 1671 Originator Details: 02 Jan 2018 11:37 Linda Scott Administrative Originally Entered by Details: 02 Jan 2018 11:38 Linda Scott Last Amended by Details: 02 Jan 2018 11:38 Linda Scott Validated by Details: 02 Jan 2018 11:38 Linda Scott Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed GP 24 Hour Notification sent to the GP on behalf of Dr Cushion. Patient discharged from the EAS. Confirmation of delivery of email to the GP: Your message has been delivered to the following recipients: SURGERY, Nightingale House (NIGHTINGALE HOUSE SURGERY) (nightingalehousesurgerv@nhs.net) Subject: Mr Simon P CORDELL - D.O.B.: 26 Jan 1981 - NHS: 434 096 1671 02/01/2018 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Jan 2018 Last Amended by Details: 02 Jan 2018 Dr Jane Cushion Medical Page Numbers:15 <u>EAS</u> DNA- no response to attempts to contact by phone Has diagnosis of psychosis with admission in 2016 and care coordination from EIS late 2016 No indication for further attempted assessment in EAS, referred to EIS (see my original note) for further follow up done - will be discussed at EIS team meeting Thursday Close to EAS, 24h note to GP Originator Details: 02 Jan 2018 11:00 Dr Jane Cushion Medical Originally Entered by Details: 02 Jan 2018 11:02 Dr Jane Cushion Last Amended by Details: 02 Jan 2018 11:02 Dr Jane Cushion Validated by Details: 02 Jan 2018 11:02 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> DNA- no response to attempts to contact by phone	
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Has diagnosis of psychosis with admission in 2016 and care coordination from EIS late 2016
No indication for further attempted assessment in EAS, referred to EIS (see my original note) for further follow up done - will be discussed at EIS team meeting Thursday
Close to EAS, 24h note to GP

21/12/2017

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 21 Dec 2017

Aurelie Crombe Nursing

Last Amended by Details: 21 Dec 2017

Page Numbers:15

Enfield Early Intervention Service Referral discussed in team meeting

Joint assessment with EAS on

02/01/2018

- Gareth to attend

Originator Details: 21 Dec 2017 12:28 Aurelie Crombe Nursing Originally Entered by Details: 21 Dec 2017 12:28 Aurelie Crombe Last Amended by Details: 21 Dec 2017 12:28 Aurelie Crombe Validated by Details: 21 Dec 2017 12:28 Aurelie Crombe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Enfield Early Intervention Service Referral discussed in team meeting

Joint assessment with EAS on

02/01/2018

- Gareth to attend

15/12/2017

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 15 Dec 2017

Last Amended by Details: 15 Dec 2017 13

Beverley Campbell Administrative

	Page Numbers:15 Appointment letter sent. Clinic: Silver Street Clinic, Date/Time: 02 Jan 2018 09:30:00, Clinician: Dr Jane Cushion Originator Details: 15 Dec 2017 13:35 Beverley Campbell Administrative Originally Entered by Details: 15 Dec 2017 13:36 Beverley Campbell Last Amended by Details: 15 Dec 2017 13:36 Beverley Campbell Validated by Details: 15 Dec 2017 13:36 Beverley Campbell Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Appointment letter sent. Clinic: Silver Street Clinic, Date/Time: 02 Jan 2018 09:30:00, Clinician: Dr Jane Cushion 15/12/2017 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Dec 2017 Last Amended by Details: 15 Dec 2017 Beverley Campbell Administrative Page Numbers:15 <u>16</u> Appointment letter sent: Clinic: Silver Street Clinic, Date/Time: 02 Jan 2018 09:30:00, Clinician: Dr Jane Cushion Originator Details: 15 Dec 2017 13:33 Beverley Campbell Administrative Originally Entered by Details: 15 Dec 2017 13:34 Beverley Campbell Last Amended by Details: 15 Dec 2017 13:34 Beverley Campbell Validated by Details: 15 Dec 2017 13:34 Beverley Campbell Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:16	<u>16</u> Appointment letter sent: Clinic: Silver Street Clinic, Date/Time: 02 Jan 2018 09:30:00, Clinician: Dr Jane Cushion 15/12/2017 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	

	Originator Details: 15 Dec 2017 Last Amended by Details: 15 Dec 2017 Dr Jane Cushion Medical Page Numbers:16 <u>EAS</u> Attempted to call Mr Cordell- mobile not recognised Offer NP OPA any doctor, EIS do not wish to attend Originator Details: 15 Dec 2017 10:40 Dr Jane Cushion Medical Originally Entered by Details: 15 Dec 2017 10:41 Dr Jane Cushion Last Amended by Details: 15 Dec 2017 10:41 Dr Jane Cushion Validated by Details: 15 Dec 2017 10:41 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> Attempted to call Mr Cordell- mobile not recognised Offer NP OPA any doctor, EIS do not wish to attend 14/12/2017 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 14 Dec 2017 Last Amended by Details: 14 Dec 2017 Dr Jane Cushion Medical Page Numbers:16 <u>EAS</u> NB previous formal admission to SAH Originator Details: 14 Dec 2017 13:33 Dr Jane Cushion Medical Originally Entered by Details: 14 Dec 2017 13:33 Dr Jane Cushion Last Amended by Details: 14 Dec 2017 13:33 Dr Jane Cushion Validated by Details: 14 Dec 2017 13:33 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> NB previous formal admission to SAH 14/12/2017 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 14 Dec 2017 Last Amended by Details: 14 Dec 2017 Dr Jane Cushion Page Numbers:16 <u>EAS</u> Consultant screening	
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	Known to EIS to December 2016 cc Goodie Adama, discharged due non-engagement Email to EIS Dear EIS We have received a MERLIN regarding this man who was care coordinated in EIS to December 2016, when he was discharged due to non-engagement. The report records that he is again behaving erratically and we will pass the referral to you for further action. Thanks Originator Details: 14 Dec 2017 13:27 Dr Jane Cushion Medical Originally Entered by Details: 14 Dec 2017 13:30 Dr Jane Cushion Last Amended by Details: 14 Dec 2017 13:30 Dr Jane Cushion Validated by Details: 14 Dec 2017 13:30 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> Consultant screening Known to EIS to December 2016 cc Goodie Adama, discharged due non-engagement Email to EIS Dear EIS We have received a MERLIN regarding this man who was care coordinated in EIS to December 2016, when he was discharged due to non-engagement. The report records that he is again behaving erratically and we will pass the referral to you for further action. Thanks 13/12/2017 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 13 Dec 2017 Last Amended by Details: 13 Dec 2017 Vincent Foutie Social Worker Page Numbers:16 <u>Enfield Assessment Service -Screening Duty</u> Merlin report received dated 08/12/2017 Uploaded on Rio. Previously known to EIS and discharge due to poor engagement in December 2016. Police was called to the premises and he had claimed to be suicidal. It was noticed that he is behaving erratically. To discharge EAS caseload. Put on Dr. Cushion caseload. Originator Details: 13 Dec 2017 16:45 Vincent Foutie Social Worker Originally Entered by Details:	
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	13 Dec 2017 16:46 Vincent Foutie Last Amended by Details: 13 Dec 2017 16:46 Vincent Foutie Validated by Details: 13 Dec 2017 16:46 Vincent Foutie Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield Assessment Service -Screening Duty</u> Merlin report received dated 08/12/2017 Uploaded on Rio. Previously known to EIS and discharge due to poor engagement in December 2016. Police was called to the premises and he had claimed to be suicidal. It was noticed that he is behaving erratically. To discharge EAS caseload. Put on Dr. Cushion caseload. 19/12/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Dec 2016 Last Amended by Details: 19 Dec 2016 Goodie Adama CPA Review Page Numbers:16 + 17 <u>16</u> Notes <u>17</u> <u>CPA Review</u> Date: 19 December 2016 12:43 Review Type: Discharge Attendees: * G Adama (Care co-ordinator) * CORDELL, Simon (Mr) (Client) * Review unmet needs wants to clear his name Originator Details: 19 Dec 2016 12:43 Goodie Adama CPA Review Originally Entered by Details: 19 Dec 2016 12:50 Goodie Adama Last Amended by Details: 19 Dec 2016 12:50 Goodie Adama Validated by Details: 19 Dec 2016 12:50 Goodie Adama Significant: Yes, Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u>	<u>17</u> <u>CPA Review</u> Date:	

Folder 5

Page Numbers:17

19 December 2016

12:43 Review Type: Discharge Attendees:

- * G Adama (Care co-ordinator)
- * CORDELL, Simon (Mr) (Client)
- * Review unmet needs

wants to clear his name with the Police and legal / judicial services

- * Client view

Simon says he has and never had psychotic symptoms and not willing to engage with mental health services

- * Carer view

Mother, Lorraine agrees with Simon that he is not mentally ill. However, she would like Simon to engage with mental health services to support him to sort himself out with the police

- * What worked well
- * What did not work well
- * Other notes

Simon refuses to engage with EIP Simon declines to have medication

EIP therefore deemed it appropriate to discharge him to GP

Simon may be referred back to mental health services in future if the need arises

2016

02/12/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 02 Dec 2016

Last Amended by Details: 05 Dec 2016

Goodie Adama Nursing

Page Numbers:17

Simon has not engaged with me or EIP and says he does not want to engage with EIP or the mental health service. I sent Simon a letter to contact with me or EIP to indicate that he wishes to remain with EIP or he will be considered for discharge.

Originator Details: 02 Dec 2016 17:15 Goodie Adama Nursing Originally Entered by Details: 04 Dec 2016 21:22 Goodie Adama Last Amended by Details: 05 Dec 2016 16:58 Goodie Adama Validated by Details: 05 Dec 2016 16:58 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Simon has not engaged with me or EIP and says he does not want to engage with EIP or the mental health service. I sent Simon a letter to contact with me or EIP to indicate that he wishes to remain with EIP or he will be considered for discharge.

27/11/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 27 Nov 2016

Last Amended by Details: 27 Nov 2016

Goodie Adama Nursing

Page Numbers:17

Went to court on

17/11/2016

and charges dropped. He is now free to return to his flat

Originator Details: 27 Nov 2016 01:33 Goodie Adama Nursing Originally Entered by Details: 27 Nov 2016 01:34 Goodie Adama Last Amended by Details: 27 Nov 2016 01:34 Goodie Adama Validated by Details: 27 Nov 2016 01:34 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Went to court on

17/11/2016

and charges dropped. He is now free to return to his flat

25/11/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 25 Nov 2016

Last Amended by Details: 25 Nov 2016

Goodie Adama Nursing

Page Numbers:17

t/c received from Lorraine and she reported that Simon said to her that he was willing to engage with EIP and just that he did not wish to take medication. I informed Lorraine that medication is but one of many interventions on offer from EIP. I informed Lorraine that it was important for Simon to be reviewed by doctors from time to time and I need to have contact with him to monitor his mental state and mood. I also said to Lorraine that it would be helpful if Simon called me directly and that would indicate his commitment.

	Lorraine requested if appointments could be at Simon's place? I told Lorraine that it was possible to see Simon at his place but he must also be able to come to Lucas House or another designated place to be seen. I offered to book appointment to see Simon and Lorraine said he will have to speak with Simon first and contact me for appointment. Originator Details: 25 Nov 2016 11:55 Goodie Adama Nursing Originally Entered by Details: 25 Nov 2016 12:07 Goodie Adama Last Amended by Details: 25 Nov 2016 12:07 Goodie Adama Validated by Details: 25 Nov 2016 12:07 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c received from Lorraine and she reported that Simon said to her that he was willing to engage with EIP and just that he did not wish to take medication. I informed Lorraine that medication is but one of many interventions on offer from EIP. I informed Lorraine that it was important for Simon to be reviewed by doctors from time to time and I need to have contact with him to monitor his mental state and mood. I also said to Lorraine that it would be helpful if Simon called my directly and that would indicate his commitment. Lorraine requested if appointments could be at Simon's place? I told Lorraine that it was possible to see Simon at his place but he must also be able to come to Lucas House or another designated place to be seen. I offered to book appointment to see Simon and Lorraine said he will have to speak with Simon first and contact me for appointment. 23/11/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Nov 2016 Goodie Adama Nursing Last Amended by Details: 25 Nov 2016 Page Numbers:17 + 18 <u>17</u> Notes <u>18</u> t/c I spoke with Simon and for the majority of the time he dominated the conversation. He spoke extensively about his cases and gripes with Police. He told me that he did not need EIP service. He said he was not willing to take medication and or work with team. I informed Simon that if that was the case, he will be discharged from the team.	
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	I then spoke with his mother Lorraine and explained that apart from medication Simon could benefit from regular contact with myself to monitor his mental health and psychiatrist for review. He could have psychology input if interested and other activities on offer from EIP. Originator Details: 23 Nov 2016 17:20 Goodie Adama Nursing Originally Entered by Details: 23 Nov 2016 17:21 Goodie Adama Last Amended by Details: 25 Nov 2016 12:15 Goodie Adama Validated by Details: 25 Nov 2016 12:15 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:18	<u>18</u> t/c I spoke with Simon and for the majority of the time he dominated the conversation. He spoke extensively about his cases and gripes with Police. He told me that he did not need EIP service. He said he was not willing to take medication and or work with team. I informed Simon that if that was the case, he will be discharged from the team. I then spoke with his mother Lorraine and explained that apart from medication Simon could benefit from regular contact with myself to monitor his mental health and psychiatrist for review. He could have psychology input if interested and other activities on offer from EIP. 03/11/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 03 Nov 2016 Last Amended by Details: 03 Nov 2016 Goodie Adama Nursing Page Numbers:18 t/c I spoke with Simon's mother [she is not too well with bad back] because Simon will not talk to me. Simon believes that since he met me, I caused him to be in hospital. Mother informed me that Simon was working at the moment; she said he was doing his own work Mother informed me that Simon's court case is on 17 Nov 2016 She said that Simon wants to move from current property and will require support from EIP. He believes that if he moves, he will not have the kind of problems he is going through. I advised mother to ask Simon to apply to Housing and I added EIP will be willing give supporting letter.	

Originator Details: 03 Nov 2016 12:35 Goodie Adama Nursing Originally Entered by Details: 03 Nov 2016 12:45 Goodie Adama Last Amended by Details: 03 Nov 2016 15:45 Goodie Adama Validated by Details: 03 Nov 2016 15:45 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

t/c I spoke with Simon's mother [she is not too well with bad back] because Simon will not talk to me. Simon believes that since he met me, I caused him to be in hospital. Mother informed me that Simon was working at the moment; she said he was doing his own work

Mother informed me that Simon's court case is on **17 Nov 2016**

She said that Simon wants to move from current property and will require support from EIP. He believes that if he moves, he will not have the kind of problems he is going through. I advised mother to ask Simon to apply to Housing and I added EIP will be willing give supporting letter.

19/10/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 19 Oct 2016

Last Amended by Details: 19 Oct 2016

Goodie Adama Nursing

Page Numbers:18

t/c to Lorraine, Simon's mother and I asked if I could speak with him. Lorraine told me that Simon was sleeping but I could clearly hear him say that he did not wish to speak with me. I asked Lorraine about Simon's court case. He was due to report to court for sentencing on
17

and Lorraine did not answer and rather asked if I could get Simon moved from his current accommodation. I said to Lorraine that Simon should contact me to discuss his housing needs. Lorraine then said that Simon agreed to call me tomorrow to discuss his housing.

I did not have time and opportunity to ask about Simon's mental state and mood. Or whether or not he is taking medication.

Originator Details: 19 Oct 2016 11:36 Goodie Adama Nursing Originally Entered by Details: 19 Oct 2016 11:43 Goodie Adama Last Amended by Details: 19 Oct 2016 11:43 Goodie Adama Validated by Details: 19 Oct 2016 11:43 Goodie Adama Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:
Not Concealed

t/c to Lorraine, Simon's mother and I asked if I could speak with him. Lorraine told me that Simon was sleeping but I could clearly hear him say that he did not wish to speak with me. I asked Lorraine about Simon's court case. He was due to report to court for sentencing on

17

and Lorraine did not answer and rather asked if I could get Simon moved from his current accommodation. I said to Lorraine that Simon should contact me to discuss his housing needs. Lorraine then said that Simon agreed to call me tomorrow to discuss his housing.

I did not have time and opportunity to ask about Simon's mental state and mood. Or whether or not he is taking medication.

11/10/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 11 Oct 2016

Last Amended by Details: 11 Oct 2016

Mukesh Kripalani Medical

Page Numbers:18

Dr Kripalani Consultant Psychiatrist

Client did not attend. Given his clear reluctance to engage, we shall discuss role of future EIS involvement with the team and his GP.

Originator Details: 11 Oct 2016 15:48 Mukesh Kripalani Medical Originally Entered by Details: 11 Oct 2016 15:49 Mukesh Kripalani Last Amended by Details: 11 Oct 2016 15:49 Mukesh Kripalani Validated by Details: 11 Oct 2016 15:49 Mukesh Kripalani Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:
Not Concealed

Dr Kripalani Consultant Psychiatrist
Client did not attend. Given his clear reluctance to engage, we shall discuss role of future EIS involvement with the team and his GP.

10/10/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 10 Oct 2016

Last Amended by Details: 10 Oct 2016

Goodie Adama Nursing

	Page Numbers:18 t/c I rang Simon's mother, Lorraine no her landline [REDACTED] to speak with Simon. I could hear him very clearly in the background saying and referring to me "stay away from me; you have ruined my life". He did not wish to speak with me. Lorraine however said that he was fine and that he has been staying with her. I said to Lorraine that I will call at another time and hope to get him in a better mood. Originator Details: 07/10/2016 07 Oct 2016 12:59 Goodie Adama Nursing Originator Details: 10 Oct 2016 10:19 Goodie Adama Nursing Originally Entered by Details: 10 Oct 2016 10:23 Goodie Adama Last Amended by Details: 10 Oct 2016 10:23 Goodie Adama Validated by Details: 10 Oct 2016 10:23 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I rang Simon's mother, Lorraine no her landline 02082457454 to speak with Simon. I could hear him very clearly in the background saying and referring to me "stay away from me; you have ruined my life". He did not wish to speak with me. Lorraine however said that he was fine and that he has been staying with her. I said to Lorraine that I will call at another time and hope to get him in a better mood. Originator Details: 07/10/2016 07 Oct 2016 12:59 Goodie Adama Nursing 07/10/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originally Entered by Details: 07 Oct 2016 Last Amended by Details: 07 Oct 2016 Goodie Adama Page Numbers:18 I made 2 calls to Simon's mobile to try and speak with him about his health and Police case. I wanted to simply offer support. There was no answer. Originally Entered by Details: 07 Oct 2016 13:02 Goodie Adama Last Amended by Details: 07 Oct 2016 13:02 Goodie Adama Validated by Details: 07	
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	Oct 2016 13:02 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed I made 2 calls to Simon's mobile to try and speak with him about his health and Police case. I wanted to simply offer support. There was no answer.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:19	06/10/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 06 Oct 2016 Last Amended by Details: 06 Oct 2016 Reginald Massaquoi Nursing Page Numbers:19 CORDELL SIMON- conditional bail (residence at mother's address/ non-contact with victim) to return for sentence 17/10/2016 at Highbury Corner Mags 19 Originator Details: 06 Oct 2016 10:52 Reginald Massaquoi Nursing Originally Entered by Details: 06 Oct 2016 10:53 Reginald Massaquoi Last Amended by Details: 06 Oct 2016 10:53 Reginald Massaquoi Validated by Details; 06 Oct 2016 10:53 Reginald Massaquoi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed CORDELL SIMON- conditional bail (residence at mother's address/ non-contact with victim) to return for sentence 17/10/2016 at Highbury Corner Mags 06/10/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 06 Oct 2016 Last Amended by Details: 07 Oct 2016 Goodie Adama Nursing Page Numbers:19 t/c received from Reginald to informed me that Simon was given conditional bail and will back for sentencing on 17/10/2016 Originator Details: 06 Oct 2016 10:10 Goodie Adama Nursing Originally Entered by Details: 07	

	Oct 2016 15:12 Goodie Adama Last Amended by Details: 07 Oct 2016 15:19 Goodie Adama Validated by Details: 07 Oct 2016 15:19 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c received from Reginald to informed me that Simon was given conditional bail and will back for sentencing on 17/10/2016 05/10/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 05 Oct 2016 Last Amended by Details: 05 Oct 2016 Reginald Massaquoi Nursing Page Numbers:19 <u>19</u> Notes <u>20</u> Mr Cordell is currently arrested at Edmonton police station this afternoon. According to police reports an allegation was made by Mr Cordell neighbour that Mr Cordell went outside, dragged a moped bicycle behind a van and smashed it. Therefore, he was arrested and he was also due to attend to a bail return today this afternoon. Mr Cordell is currently under the care of Enfield early intervention team based at Lucas house and he has a care coordinator Originator Details: 05 Oct 2016 13:46 Reginald Massaquoi Nursing Originally Entered by Details: 05 Oct 2016 13:49 Reginald Massaquoi Last Amended by Details: 05 Oct 2016 13:49 Reginald Massaquoi validated By Details: 05 Oct 2016 13:49 Reginald Massaquoi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:20	<u>20</u> Mr Cordell is currently arrested at Edmonton police station this afternoon. According to police reports an allegation was made by Mr Cordell neighbour that Mr Cordell went outside, dragged a moped bicycle behind a van and smashed it. Therefore, he was arrested and he was also due to attend to a bail return today this afternoon. Mr Cordell is currently under the care of Enfield early intervention team based at Lucas house and he has a care coordinator called Goodie. Mr Cordell currently has diagnoses of unspecified non-organic	

	psychosis. He was admitted to St Ann's hospital under section 2 of the MHA in August. He was discharged from hospital 2 weeks ago. He has been prescribed anti psychosis medication but has refused to comply with his medication. Mr Cordell believes that he does not suffer from mental illness. On presentation in custody. He was appropriate dressed with good personal hygiene. He engaged with me for over 30 minutes. He expressed some strange ideas about his neighbours are jealous of him been in a newspaper about him organising illegal parties. He also spoke lengthy about a website he built and people are using the website to advertise Their business and to raise funds for charities. He has express conspiracy theories about the police and authorities. His care coordinator told me that Mr Cordell has always expresses conspiracy theories. Mr Cordell denied any thoughts or intentions to harm himself and others. He also denies any knowledge about the incident he is arrested for. He denied hearing voices or seeing strange things. Mr Cordell appears stable in his mental state and does not require any further assessment or admission at this stage. He was interviewed by the police and was charged to Highbury court in the morning. Plans: To liaise with mental health practitioner at Highbury court to follow up the outcome of his case. To contact care coordinator Goodie on 02087023100/ 02087023140 to follow up Mr Cordell in the community if he is released. 04/10/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 04 Oct 2016 Last Amended by Details: 06 Oct 2016 Goodie Adama Nursing Page Numbers:20 t/c received from Reginald, Liaison CPN @ Edmonton Police Station to report that Simon has been arrested and at the Police station. Apparently, Simon smashed a neighbour's motor bike. Originator Details: 04 Oct 2016 15:30 Goodie Adama Nursing Originally Entered by Details: 06 Oct 2016 11:50 Goodie Adama Last Amended by Details: 06 Oct 2016 11:50 Goodie Adama Validated by Details: 06 Oct 2016 11:50 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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	t/c received from Reginald, Liaison CPN @ Edmonton Police Station to report that Simon has been arrested and at the Police station. Apparently, Simon smashed a neighbour's motor bike. 04/10/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 04 Oct 2016 Last Amended by Details: 04 Oct 2016 Victoria Mabinuori Administrative Page Numbers:20 <u>HUB</u> Reginald (CPN Edmonton Police Station) called requesting for the care coordinator and number of pt. Gave both to Originator Details: 04 Oct 2016 15:13 Victoria Mabinuori Administrative Originally Entered by Details: 04 Oct 2016 15:15 Victoria Mabinuori Last Amended by Details: 04 Oct 2016 15:15 Victoria Mabinuori Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>HUB</u> Reginald (CPN Edmonton Police Station) called requesting for the care coordinator and number of pt. Gave both to	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:21	04/10/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 04 Oct 2016 Last Amended by Details: 24 Nov 2016 Bianca Olizzi Administrative Page Numbers:21 Seen by Reginald Massaquoi on 04/10/2016 see document uploads for report. <u>21</u> Originator Details: 04 Oct 2016 12:01 Bianca Olizzi Administrative Originally Entered by Details: 24 Nov 2016 12:01 Bianca Olizzi Last Amended by Details: 24 Nov 2016 12:01 Bianca Olizzi Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Seen by Reginald Massaquoi on 04/10/2016	

see document uploads for report.

30/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 30 Sep 2016

Last Amended by Details: 30 Sep 2016

Natasha Spence Nursing

Page Numbers:21

ECRHT

TPM

Present: Vijay, Dr Moorey, Hazel

Risk: GREEN

Plan:

Declined to engage with HTT DX back to GP

Inform EIS

Originator Details: 30 Sep 2016 08:22 Natasha Spence Nursing Originally Entered by Details: 30 Sep 2016 08:24 Natasha Spence Last Amended by Details: 30 Sep 2016 08:24 Natasha Spence Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

ECRHT

TPM

Present: Vijay, Dr Moorey, Hazel

Risk: GREEN

Plan:

Declined to engage with HTT DX back to GP

Inform EIS

29/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 29 Sep 2016

Last Amended by Details: 29 Sep 2016

Iona Crawford Therapy

Page Numbers:21

ECRHTT

Email from Gareth EIP, Simon does not want contact from EIP.

Plan:

- Discuss at next TPM, possible dx to GP?

Originator Details: 29 Sep 2016 15:47 Iona Crawford Therapy Originally Entered by Details: 29 Sep 2016 15:48 Iona Crawford Last Amended by Details: 29 Sep 2016 15:48 Iona Crawford Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:
Not Concealed

ECRHTT

Email from Gareth EIP, Simon does not want contact from EIP.

Plan:

- Discuss at next TPM, possible dx to GP?

29/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 29 Sep 2016

Last Amended by Details: 29 Sep 2016

Iona Crawford Nursing

Page Numbers:21

From: Crawford Iona

Sent: 29 September 2016 15:33

To: Krisman Gareth

Cc: Kissoon Vijay; Moorey Hellen;

Horsfall Ann; Kadrass Valeri; Pomphrey

Amal Subject: RE: ECRHTT TOC request

SC 11214451

Hi Gareth,

Thanks for letting me know. HTT wasn't aware that Simon did not want input from EIP. I take your suggestion about leaving things until Goodie returns from leave. I'll make a note of it and discuss it with Dr Moorey.

Thanks,

Iona

Trainee Graduate Mental Health Worker

Enfield Crisis Resolution Home Treatment

Team Ivy House, Chase Farm

Tel: 020 8375 1024

Originator Details: 29 Sep 2016 15:40 Iona

Crawford Nursing Originally Entered by Details: 29

Sep 2016 15:42 Iona Crawford Last Amended by

Details: 29 Sep 2016 15:46 Iona Crawford Validated

by Details: 29 Sep 2016 15:46 Iona Crawford

Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:

Not Concealed

From: Crawford Iona

Sent: 29 September 2016 15:33

To: Krisman Gareth

Cc: Kissoon Vijay; Moorey Hellen; Horsfall Ann;

Kadrass Valeri; Pomphrey Amal Subject: RE:

ECRHTT TOC request SC 11214451

Hi Gareth,

Thanks for letting me know. HTT wasn't aware that Simon did not want input from EIP. I take your suggestion about leaving things until Goodie returns

	from leave. I'll make a note of it and discuss it with Dr Moorey. Thanks, Iona Trainee Graduate Mental Health Worker Enfield Crisis Resolution Home Treatment Team Ivy House, Chase Farm Tel: 020 8375 1024	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:22	29/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 29 Sep 2016 Last Amended by Details: 29 Sep 2016 Gareth Krisman Nursing Page Numbers:22 EMAIL TO: Kissoon Vijay <Viiav.Kissoon@beh-mht.nhs.uk>; Horsfall Ann <Ann.Horsfall@beh-mht.nhs.uk>; Kadrass Valeri <Valeri.Kadrass@beh-mht.nhs.uk>; Pomphrey Amal <Amal.Pomphrev@beh-mht.nhs.uk>Crawford Iona <Iona.Crawford@beh-mht.nhs.uk> Hi Iona, It seems that Simon spoke to one of our admin staff this afternoon making it quite clear that he wants nothing to do with Lucas House or EIS. He threatened to 'sue us' and report the Trust to the Ombudsman should anyone from this team make contact with him either face to face or by phone. I'm not sure how you would like to proceed with this one. My suggestion would be to wait until Goodie returns as he seems to get on well with him. Thanks, Gareth Krisman <u>22</u> Originator Details: 29 Sep 2016 15:34 Gareth Krisman Nursing Originally Entered by Details: 29 Sep 2016 15:35 Gareth Krisman Last Amended by Details: 29 Sep 2016 15:35 Gareth Krisman Validated by Details: 29 Sep 2016 15:35 Gareth Krisman Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed EMAIL TO: Kissoon Vijay <Viiav.Kissoon@beh-mht.nhs.uk>; Horsfall Ann <Ann.Horsfall@beh-mht.nhs.uk>; Kadrass Valeri <Valeri.Kadrass@beh-mht.nhs.uk>; Pomphrey Amal <Amal.Pomphrev@beh-mht.nhs.uk>Crawford Iona <Iona.Crawford@beh-mht.nhs.uk> Hi Iona,	

It seems that Simon spoke to one of our admin staff this afternoon making it quite clear that he wants nothing to do with Lucas House or EIS. He threatened to 'sue us' and report the Trust to the Ombudsman should anyone from this team make contact with him either face to face or by phone. I'm not sure how you would like to proceed with this one. My suggestion would be to wait until Goodie returns as he seems to get on well with him. Thanks,
Gareth Krisman

29/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 29 Sep 2016

Last Amended by Details: 29 Sep 2016

Iona Crawford Nursing

Page Numbers:22

ECRHTT

- Pt Dx from ECRHTT.
- Email send to EIP to request TOC.

From: Crawford Iona

Sent: 28 September 2016 16:03

To: Krisman Gareth

Cc: Kisson Vijay; Horsfall Ann; Kadras Valeri; Pomphrey Amal

Subject: ECRHTT TOC request SC 11214451

Dear Gareth,

I would like to organise a date/time for a TOC for Simon Cordell (RiO - 11214451). Would you be free tomorrow or before the end of this week?

Kind regards

Iona Crawford

Trainee Graduate Mental Health Worker

Enfield Crisis Resolution Home Treatment

Team Ivy House, Chase Farm

Tel: 020 8375 1024

Plan:

- Confirm date/time of TOC

Originator Details: 29 Sep 2016 08:33 Iona Crawford Nursing Originally Entered by Details: 29 Sep 2016 08:37 Iona Crawford Last Amended by Details: 29 Sep 2016 15:36 Iona Crawford Validated by Details: 29 Sep 2016 15:36 Iona Crawford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

ECRHTT

- Pt Dx from ECRHTT.
- Email send to EIP to request TOC.

	From: Crawford Iona Sent: 28 September 2016 16:03 To: Krisman Gareth Cc: Kissoon Vijay; Horsfall Ann; Kadras Valeri; Pomphrey Amal Subject: ECRHTT TOC request SC 11214451 Dear Gareth, I would like to organise a date/time for a TOC for Simon Cordell (RiO - 11214451). Would you be free tomorrow or before the end of this week? Kind regards Iona Crawford Trainee Graduate Mental Health Worker Enfield Crisis Resolution Home Treatment Team Ivy House, Chase Farm Tel: 020 8375 1024 Plan: - Confirm date/time of TOC	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:23	28/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 28 Sep 2016 Last Amended by Details: 28 Sep 2016 Valeri Kadras Nursing Page Numbers:23 <u>Enfield HTT</u> Second home visit today to deliver medication- Simon refused to open the door and said that he does not want any medication. He asked me to leave. <u>23</u> Originator Details: 28 Sep 2016 21:32 Valeri Kadras Nursing Originally Entered by Details: 28 Sep 2016 21:34 Valeri Kadras Last Amended by Details: 28 Sep 2016 21:34 Valeri Kadras Validated by Details: 28 Sep 2016 21:34 Valeri Kadras Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield HTT</u> Second home visit today to deliver medication- Simon refused to open the door and said that he does not want any medication. He asked me to leave. 28/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 28 Sep 2016 Last Amended by Details: 28 Sep 2016 Iona Crawford Nursing	

Page Numbers:23

ECRHTT

HV to Simon's flat with Val.

Simon refused to open the door, instead shouting through the door that he did not need to see HTT again. Val will attempt to go back again this evening to drop off Simon's TTA's (5mg Olanzapine).

Originator Details: 28 Sep 2016 14:18 Iona Crawford Nursing Originally Entered by Details: 28 Sep 2016 14:19 Iona Crawford Last Amended by Details: 28 Sep 2016 14:19 Iona Crawford Validated by Details: 28 Sep 2016 14:19 Iona Crawford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

ECRHTT

HV to Simon's flat with Val.

Simon refused to open the door, instead shouting through the door that he did not need to see HTT again. Val will attempt to go back again this evening to drop off Simon's TTA's (5mg Olanzapine).

28/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 28 Sep 2016

Last Amended by Details: 28 Sep 2016

Sharon Wade Administrative

Page Numbers:23

ECRHTT

Your message has been delivered to the following recipients:

SURGERY, Nightingale House
(NIGHTINGALE HOUSE SURGERY)
(nightingalehousesurgery@nhs.net)

Subject: Discharge Notification NHS
4340961671 - Mr Simon Cordell

Originator Details: 28 Sep 2016 10:27 Sharon Wade Administrative Originally Entered by Details: 28 Sep 2016 10:28 Sharon Wade Last Amended by Details: 28 Sep 2016 10:28 Sharon Wade Validated by Details: 28 Sep 2016 10:28 Sharon Wade Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

ECRHTT

Your message has been delivered to the following recipients:

SURGERY, Nightingale House (NIGHTINGALE HOUSE SURGERY)
(nightingalehousesurgery@nhs.net)

Subject: Discharge Notification NHS 4340961671 - Mr Simon Cordell

28/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 28 Sep 2016

Last Amended by Details: 28 Sep 2016

Harriet Mudekunye Nursing

Page Numbers:23

Telephone call from Val from EHTT enquiring whether Goodie will be attending transfer of care meeting today. Informed him that Goodie was on A/L. He requested for anyone from team to attend advised him to contact Amal to confirm.

Originator Details: 28 Sep 2016 09:34 Harriet Mudekunye Nursing Originally Entered by Details: 28 Sep 2016 09:42 Harriet Mudekunye Last Amended by Details: 28 Sep 2016 09:42 Harriet Mudekunye Validated by Details: 28 Sep 2016 09:42 Harriet Mudekunye Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Telephone call from Val from EHTT enquiring whether Goodie will be attending transfer of care meeting today. Informed him that Goodie was on A/L. He requested for anyone from team to attend advised him to contact Amal to confirm.

28/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 28 Sep 2016

Last Amended by Details: 28 Sep 2016

Iona Crawford Nursing

Page Numbers:23

ECRHTT

Several T/C made to Simon to confirm this morning's TOC but with no response.

Originator Details: 28 Sep 2016 09:18 Iona Crawford Nursing Originally Entered by Details: 28 Sep 2016 09:19 Iona Crawford Last Amended by Details: 28 Sep 2016 13:01 Iona Crawford Validated by Details: 28 Sep 2016 13:01 Iona Crawford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

ECRHTT

Several T/C made to Simon to confirm this morning's TOC but with no response.

27/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 27 Sep 2016

Last Amended by Details: 27 Sep 2016

Dr Helen Moorey Medical

Page Numbers:23

TOC arranged for

28.09

at 10.30.

Originator Details: 27 Sep 2016 15:27 Dr Helen Moorey Medical Originally Entered by Details: 27 Sep 2016 15:28 Dr Helen Moorey Last Amended by Details: 27 Sep 2016 15:28 Dr Helen Moorey Validated by Details: 27 Sep 2016 15:28 Dr Helen Moorey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

TOC arranged for

28.09

at 10.30.

26/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 26 Sep 2016

Last Amended by Details: 26 Sep 2016

Ivy Asare Nursing

Page Numbers:23

24

ECRHT

Ivy Asa re

Discussed at planning meeting today.

Plan:

No further visits, to arrange and discharge to EIP Enfield today

Originator Details: 26 Sep 2016 08:31 Ivy Asare Nursing Originally Entered by Details: 26 Sep 2016 08:31 Ivy Asare Last Amended by Details: 26 Sep 2016 08:33 Ivy Asare Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:24	24 ECRHT Ivy Asa re Discussed at planning meeting today. Plan: No further visits, to arrange and discharge to EIP Enfield today 23/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Sep 2016 Last Amended by Details: 23 Sep 2016 Hazel Stelzner Therapy Page Numbers:24 ECRHT: Several T/Cs today - My plan was to invite him to pick his medication up at CFH because there is a risk issue with female staff. Simon did not answer his phone. Plan: - Try again tomorrow Originator Details: 23 Sep 2016 17:10 Hazel Stelzner Therapy Originally Entered by Details: 23 Sep 2016 17:12 Hazel Stelzner Last Amended by Details: 23 Sep 2016 17:12 Hazel Stelzner Validated by Details: 23 Sep 2016 17:12 Hazel Stelzner Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed ECRHT: Several T/Cs today - My plan was to invite him to pick his medication up at CFH because there is a risk issue with female staff. Simon did not answer his phone. Plan: - Try again tomorrow 23/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Sep 2016 Last Amended by Details: 23 Sep 2016 Yageswaree Jungbadoor Nursing Page Numbers:24 ECRHTT TC prior to visiting, no reply. Message left for him that I am coming to visit and will also give him his TTA's.	
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	Arrived at him home address but still unable to get through to him. Need a code to enter the building. As I was again calling him, I saw a car who stopped and a guy came out asking me if I am a Doctor and whether I have come to no: 109. Before I could reply he told me he is the person at 109. He was dressed in black suit and tie. A female driver stayed in the car. He approached me and told me he does not need to be seen by the HTT because “I am not crazy.” He also added that he also won his Tribunal and only agreed to be seen by us briefly. He went on saying Dr has been prescribing him medication that he never took and the Dr claimed that he is doing well on it when in fact he is not taking any medication. “I don’t need it. I am ok without the medication ‘therefore refused the TTA’s and requested no more visits from us and that he will call us if he needs our help. Plan: To discuss in next TPM and to discharge him back to GP or his local CMHT. Originator Details: 23 Sep 2016 10:12 Yageswaree Jungbadoor Nursing Originally Entered by Details: 23 Sep 2016 10:12 Yageswaree Jungbadoor Last Amended by Details: 23 Sep 2016 10:12 Yageswaree Jungbadoor Validated by Details: 23 Sep 2016 10:12 Yageswaree Jungbadoor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT</u> TC prior to visiting, no reply. Message left for him that I am coming to visit and will also give him his TTA’s. Arrived at him home address but still unable to get through to him. Need a code to enter the building. As I was again calling him, I saw a car who stopped and a guy came out asking me if I am a Doctor and whether I have come to no: 109. Before I could reply he told me he is the person at 109. He was dressed in black suit and tie. A female driver stayed in the car. He approached me and told me he does not need to be seen by the HTT because “I am not crazy.” He also added that he also won his Tribunal and only agreed to be seen by us briefly. He went on saying Dr has been prescribing him medication that he never took and the Dr claimed that he is doing well on it when in fact he is not taking any medication. “I don’t need it. I am ok without the medication ‘therefore refused the TTA’s and requested no more visits from us and that he will call us if he needs our help. Plan:	
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To discuss in next TPM and to discharge him back to GP or his local CMHT.

21/09/2016

• **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 21 Sep 2016

Last Amended by Details: 21 Sep 2016

Simon Clark Nursing

Page Numbers:24

I spoke to Simon on the phone a few days ago. He called to say that his solicitor has talked to him about a psychiatric assessment re: fitness to appear in court. Simon said he has had numerous assessments, but I pointed out this one would be specific and current regarding fitness to appear rather than some of the other assessments such as for section or general mental health.

He explained that he is currently preparing for a court hearing but when this is completed, he would like some help to look at training/courses to support his career ambitions. Simon said he will call in the next few weeks once the court hearing is over and we can arrange to meet to talk about what support he would like.

Although Simon spoke quite quickly on a number of subjects, with a slight preoccupation of past assessments and contact with the police, the content did not appear odd or delusional

Originator Details: 21 Sep 2016 12:12 Simon Clark
Nursing Originally Entered by Details: 21 Sep 2016
12:16 Simon Clark Last Amended by Details: 21
Sep 2016 12:16 Simon Clark Validated by Details:
21 Sep 2016 12:16 Simon Clark Significant: No
Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

I spoke to Simon on the phone a few days ago. He called to say that his solicitor has talked to him about a psychiatric assessment re: fitness to appear in court. Simon said he has had numerous assessments, but I pointed out this one would be specific and current regarding fitness to appear rather than some of the other assessments such as for section or general mental health. He explained that he is currently preparing for a court hearing but when this is completed, he would like some help to look at training/courses to support his career ambitions. Simon said he will call in the next few weeks once the court hearing is over and

	we can arrange to meet to talk about what support he would like. Although Simon spoke quite quickly on a number of subjects, with a slight preoccupation of past assessments and contact with the police, the content did not appear odd or delusional 19/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Sep 2016 Last Amended by Details: 19 Sep 2016 Ann Horsfall Nursing Page Numbers:24 + 25 <u>24</u> Notes <u>25</u> <u>ECRHT</u> Email send to care co Goodie to arrange for TOC sometimes this week Originator Details: 19 Sep 2016 12:44 Ann Horsfall Nursing Originally Entered by Details: 19 Sep 2016 12:46 Ann Horsfall Last Amended by Details: 19 Sep 2016 12:46 Ann Horsfall Validated by Details: 19 Sep 2016 12:46 Ann Horsfall Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:25	<u>25</u> <u>ECRHT</u> Email send to care co Goodie to arrange for TOC sometimes this week 18/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 18 Sep 2016 Last Amended by Details: 18 Sep 2016 Modupe Rabi Nursing Page Numbers:25 <u>ECRHTT</u> Home visit carried out this morning following T/C. No significant change from his previous presentation. Reported he is not mentally sick and he has not been taken any medication. He said when he was on the ward, he hides it underneath his tongue and pretends taken it. He said he appreciates HTT efforts but we are not supporting him in the way he wants.	

	When asked in what way Originator Details: 18 Sep 2016 19:04 Modupe Rabi Nursing Originally Entered by Details: 18 Sep 2016 19:13 Modupe Rabi Last Amended by Details: 18 Sep 2016 19:34 Modupe Rabi Validated by Details: 18 Sep 2016 19:34 Modupe Rabi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT</u> Home visit carried out this morning following T/C. No significant change from his previous presentation. Reported he is not mentally sick and he has not been taken any medication. He said when he was on the ward, he hides it underneath his tongue and pretends taken it. He said he appreciates HTT efforts but we are not supporting him in the way he wants. When asked in what way? He said the way he was treated during the MHA and false statements in various reports about him including police reports. He said HTT begins to lack there responsibility as in duty of care to him. I explained to him the role of CRHTT. He said he agrees but at the same time there are more to the role. After spending 40mins, reading part of his notes, he said he will appreciate if I can amend it on RIO. I explained to him my own job role is to monitor mental state and risk but not to amend any legal documents on RIO. He said he will soon stop CRHTT not to visit him again since nothing tangible regarding his court case. Appeared settled but still elated in mood and over talkative. No thoughts of self-neglects elicited during the visit. No evidence of psychosis extract during the visit. Plan No role for CRHTT to discuss about his discharge. Pt. has care coordinator (Goodie) well known to Simon 16/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 16 Sep 2016 Last Amended by Details: 16 Sep 2016 Dr Helen Moorey Medical Page Numbers:25 <u>Enfield CRHT Planning Meeting.</u> Present; Dr Moorey, Dr Akande, Vijay,	
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	Dr Deans, Iona, Kwame, Hazel, Mo. Not currently in acute crisis. Arrange TOC to care co. Originator Details: 16 Sep 2016 09:06 Dr Helen Moorey Medical Originally Entered by Details: 16 Sep 2016 09:07 Dr Helen Moorey Last Amended by Details: 16 Sep 2016 09:07 Dr Helen Moorey Validated by Details: 16 Sep 2016 09:07 Dr Helen Moorey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield CRHT Planning Meeting.</u> Present; Dr Moorey, Dr Akande, Vijay, Dr Deans, Iona, Kwame, Hazel, Mo. Not currently in acute crisis. Arrange TOC to care co. 14/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 14 Sep 2016 Last Amended by Details: 14 Sep 2016 Nadia Edwards Nursing Page Numbers:25 <u>26</u> <u>ECRHTT - BANK</u> Patient was seen this evening. He was very talkative, showing me folders, he had compiled and paperwork Showed me his little finger and said that when he was in hospital, that his small finger was damaged and currently cannot bend it. Kempt, dressed appropriate for the weather in jeans and a T-shirt. Said that he has ran out of Lorazepam and would like it to be prescribed to him again, to which I explained will relay this back to the office. He rated his mood at 6 out of 10, saying that he just wants his appeal to be sorted out at the Crown Court which should be towards the end of next week. He was giving me compliments but was getting too familiar which was making me feel uncomfortable. I then said I had to go as I had my colleague waiting for me. He reported no further concerns. Plan:	
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	To mms/risk 2/7 Originator Details: 14 Sep 2016 20:35 Nadia Edwards Nursing Originally Entered by Details: 14 Sep 2016 20:40 Nadia Edwards Last Amended by Details: 14 Sep 2016 20:43 Nadia Edwards Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:26	26 <u>ECRHTT - BANK</u> Patient was seen this evening. He was very talkative, showing me folders, he had compiled and paperwork Showed me his little finger and said that when he was in hospital, that his small finger was damaged and currently cannot bend it. Kempt, dressed appropriate for the weather in jeans and a T-shirt. Said that he has ran out of Lorazepam and would like it to be prescribed to him again, to which I explained will relay this back to the office. He rated his mood at 6 out of 10, saying that he just wants his appeal to be sorted out at the Crown Court which should be towards the end of next week. He was giving me compliments but was getting too familiar which was making me feel uncomfortable. I then said I had to go as I had my colleague waiting for me. He reported no further concerns. Plan: To mms/risk 2/7 10/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 10 Sep 2016 Last Amended by Details: 10 Sep 2016 Modupe Rabi Nursing Page Numbers:26 <u>ECRHTT</u> Pt. was seen this morning following T/C. Presented as relatively stable in mental state. He was pre-occupied with professional's body in his care. Expressed how they all misunderstood him and section him without any psychotic symptoms extract. He was over talkative, showing me different videos and Emails. He said, he is dealing with their case and lots will lose their jobs but not the Nurse's because Nurse's acts on instructions. Re-assurance given and agreed for 2/7 in a week visit instead.	

	Otherwise, presentable no issues and appropriately dressed. Pt. has no plans neither intent to himself or others during the visit. <u>Plan:</u> To: mms/risk 2/7 Next visit 14/09/2016 Pm Originator Details: 10 Sep 2016 20:32 Modupe Rabi Nursing Originally Entered by Details: 10 Sep 2016 20:43 Modupe Rabi Last Amended by Details: 10 Sep 2016 20:48 Modupe Rabi Validated by Details: 10 Sep 2016 20:48 Modupe Rabi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT</u> Pt. was seen this morning following T/C. Presented as relatively stable in mental state. He was pre-occupied with professional's body in his care. Expressed how they all misunderstood him and section him without any psychotic symptoms extract. He was over talkative, showing me different videos and Emails. He said, he is dealing with their case and lots will lose their jobs but not the Nurse's because Nurse's acts on instructions. Re-assurance given and agreed for 2/7 in a week visit instead. Otherwise, presentable no issues and appropriately dressed. Pt. has no plans neither intent to himself or others during the visit. <u>Plan:</u> To: mms/risk 2/7 Next visit 14/09/2016 Pm 09/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 09 Sep 2016 Last Amended by Details: 09 Sep 2016 Vincent Foutie Social Worker Page Numbers:26 + 27 <u>26</u> Notes <u>27</u> Enfield Crisis Resolution and Home Treatment Team Bank Staff Member	
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	Simon did not answer his mobile phone and I could not get access to his flat. Plan: Next contact tomorrow. Originator Details: 09 Sep 2016 22:05 Vincent Foutie Social Worker Originally Entered by Details: 09 Sep 2016 22:06 Vincent Foutie Last Amended by Details: 09 Sep 2016 22:06 Vincent Foutie Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:27	<u>27</u> Enfield Crisis Resolution and Home Treatment Team Bank Staff Member Simon did not answer his mobile phone and I could not get access to his flat. Plan: Next contact tomorrow. 08/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Sep 2016 Last Amended by Details: 08 Sep 2016 Nadia Edwards Nursing Page Numbers:27 <u>ECRHTT – BANK</u> Spoke to Simon to arrange a visit this evening. He said he would like to have EOD visits and has enquired about the reduction in medication. I said I would speak with the doctor on return to the office to get an update. Have spoken with Dr Imo who said to give him a call and let him know that once it has been agreed in a reduction, we will contact Simon and let him know. Plan: HV: 09/09/2016 PM - monitor mental state. Originator Details: 08 Sep 2016 16:18 Nadia Edwards Nursing Originally Entered by Details: 08 Sep 2016 16:19 Nadia Edwards Last Amended by Details: 08 Sep 2016 16:19 Nadia Edwards Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT – BANK</u>	

Spoke to Simon to arrange a visit this evening. He said he would like to have EOD visits and has enquired about the reduction in medication. I said I would speak with the doctor on return to the office to get an update.
Have spoken with Dr Imo who said to give him a call and let him know that once it has been agreed in a reduction, we will contact Simon and let him know.

Plan:

HV:

09/09/2016

PM - monitor mental state.

07/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 07 Sep 2016

Last Amended by Details: 07 Sep 2016

Hazel Stelzner Therapy

Page Numbers:27

ECRHT

T/C - Simon informed me that Dr had told him he could self-medicate from now on. Dr's RiO entry did not explicitly say this although stated that he appeared stable at present, so benefit of doubt given.

Simon, he said he was reluctant to take meds because he does not feel he needs it and because he has been experiencing side effects - feeling of electric shocks going through his head. He talked at length about his issues with mental health services and asked lots of questions about how things operate. Also asked me if there was anything negative written about him in his progress notes. Sounded very knowledgeable about mental health services, diagnoses and mental health law. Eventually, he agreed to see me to be given the TTAs.

Home visit this evening - was pleasant although slightly over-familiar with me - asked me personal questions such as if I am single and asked for my phone number. Speech was slightly tangential although normal rate, tone and volume, interruptible. TTA's delivered - 21 tablets of Olanzapine 5mg **Plan-**

Dr Imo to discuss reduction of meds with care co

Arrange transfer of care

Originator Details: 07 Sep 2016 21:37 Hazel Stelzner Therapy Originally Entered by Details: 07 Sep 2016 21:46 Hazel Stelzner Last Amended by Details: 07 Sep 2016 21:58 Hazel Stelzner Validated by Details: (UNVALIDATED)

	Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHT</u> T/C - Simon informed me that Dr had told him he could self-medicate from now on. Dr's RiO entry did not explicitly say this although stated that he appeared stable at present, so benefit of doubt given. Simon, he said he was reluctant to take meds because he does not feel he needs it and because he has been experiencing side effects - feeling of electric shocks going through his head. He talked at length about his issues with mental health services and asked lots of questions about how things operate. Also asked me if there was anything negative written about him in his progress notes. Sounded very knowledgeable about mental health services, diagnoses and mental health law. Eventually, he agreed to see me to be given the TTAs. Home visit this evening - was pleasant although slightly over-familiar with me - asked me personal questions such as if I am single and asked for my phone number. Speech was slightly tangential although normal rate, tone and volume, interruptible. TTA's delivered - 21 tablets of Olanzapine 5mg Plan- Dr Imo to discuss reduction of meds with care co Arrange transfer of care	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers: 28	07/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 07 Sep 2016 Last Amended by Details: 18 Sep 2016 Dr Imo Akande Medical Page Numbers: 28 <u>Enfield HTT</u> Home visit today. No concerns. Patient complained that the olanzapine was making him feel very tired. He appeared mentally stable in spite of his talkativeness which I later understood was his normal self. He told me that professionals have misunderstood it as a symptom of a mental illness. He was preoccupied with how he was treated during the MHA and false statements in various reports about him including police reports. He has spent significant amount of time putting things in correct perspective with both papers and audio-visual evidences. He	

	has an advocate and he also talking to his lawyers. Plan: Full entry to follow. Arrange TOC. Reducing Olanzapine to 2.5mg after discussing with his care coordinator. 28 Originator Details: 07 Sep 2016 17:49 Dr Imo Akande Medical Originally Entered by Details: 07 Sep 2016 17:56 Dr Imo Akande Last Amended by Details: 18 Sep 2016 19:30 Modupe Rabi Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield HTT</u> Home visit today. No concerns. Patient complained that the olanzapine was making him feel very tired. He appeared mentally stable in spite of his talkativeness which I later understood was his normal self. He told me that professionals have misunderstood it as a symptom of a mental illness. He was preoccupied with how he was treated during the MHA and false statements in various reports about him including police reports. He has spent significant amount of time putting things in correct perspective with both papers and audio-visual evidences. He has an advocate and he also talking to his lawyers. Plan: Full entry to follow. Arrange TOC. Reducing Olanzapine to 2.5mg after discussing with his care coordinator. 07/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 07 Sep 2016 Last Amended by Details: 07 Sep 2016 Goodie Adama Nursing Page Numbers: 28 t/c I spoke with Simon and he asked me to call back in 20 mins because he was with a doctor. Originator Details: 07 Sep 2016 13:31 Goodie Adama Nursing Originally Entered by Details: 07 Sep 2016 13:35 Goodie Adama Last Amended by Details: 07 Sep 2016 13:35 Goodie Adama Validated by Details: 07 Sep 2016 13:35 Goodie Adama Significant: No Added to Risk History: No	
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Contains Third Party Info: No Conceal from Client:
Not Concealed

t/c I spoke with Simon and he asked me to call back
in 20 mins because he was with a doctor.

07/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 07 Sep 2016

Last Amended by Details: 07 Sep 2016

Goodie Adama Nursing

Page Numbers: 28

t/c to Simon's mobile with the view to
arrange a home visit and there was no
answer.

Originator Details: 07 Sep 2016 13:25 Goodie
Adama Nursing Originally Entered by Details: 07
Sep 2016 13:26 Goodie Adama Last Amended by
Details: 07 Sep 2016 13:26 Goodie Adama
Validated by Details: 07 Sep 2016 13:26 Goodie
Adama Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

t/c to Simon's mobile with the view to arrange a
home visit and there was no answer.

07/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 07 Sep 2016

Last Amended by Details: 07 Sep 2016

Hazel Stelzner Therapy

Page Numbers: 28 + 29

28

Notes

29

Treatment planning meeting

Present: Dr Moorey; Vijay; Liz; Florence;
Nadia; Iona RAG rating: AMBER

Plan-

Risk rating to remain AMBER.

Medical review today Review lorazepam

Contact care-coordinator for joint visit

Originator Details: 07 Sep 2016 09:08 Hazel
Stelzner Therapy Originally Entered by Details: 07
Sep 2016 09:09 Hazel Stelzner Last Amended by
Details: 07 Sep 2016 09:09 Hazel Stelzner Validated
by Details: 07 Sep 2016 09:09 Hazel Stelzner
Significant: No Added to Risk History: No

	Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:29	<u>29</u> Treatment planning meeting Present: Dr Moorey; Vijay; Liz; Florence; Nadia; Iona RAG rating: AMBER Plan- Risk rating to remain AMBER. Medical review today Review lorazepam Contact care-coordinator for joint visit 06/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 06 Sep 2016 Last Amended by Details: 06 Sep 2016 Sheik Auladin Nursing Page Numbers: 29 <u>ECRHTT</u> Home visit at 19.00 hrs, front door locked, unable to get in. He did not answer his mobile. Prior to visit, I rang him and he said he wanted to see a doctor about his medications, and was not expecting a nurse. He said he told the nurse who last visited and was promised that his request would be looked into. He sounded annoyed, and questioned the purpose of me visiting. I have explained that I will make a request for a medical review for 07/09/2016 Originator Details: 06 Sep 2016 20:56 Sheik Auladin Nursing Originally Entered by Details: 06 Sep 2016 21:00 Sheik Auladin Last Amended by Details: 06 Sep 2016 21:02 Sheik Auladin Validated by Details: 06 Sep 2016 21:02 Sheik Auladin Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT</u> Home visit at 19.00 hrs, front door locked, unable to get in. He did not answer his mobile. Prior to visit, I rang him and he said he wanted to see a doctor about his medications, and was not expecting a nurse. He said he told the nurse who last visited and was promised that his request would be looked into. He sounded annoyed, and questioned the purpose of me visiting. I have explained that I will make a request for a medical review for 07/09/2016	

	05/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 05 Sep 2016 Roberts Last Amended by Details: 05 Sep 2016 Rawle Roberts Nursing Page Numbers:29 + 30 <u>29</u> Notes <u>30</u> <u>ECRHTT</u> Planned Home Visit Visited Simon at his home address Initially did not answer his phone Left a message informing him that I would wait in the area for mins x10 then leave if her does not reply to my message. Returned my call before I left the area. Generally talkative and concerned about how he is being treated by mental health services. Went onto his computer and show me a web site which he claims is his business site. Informed me that he the medication is making him ill and he does not want take it Said he informed colleagues on previous visits and wanted to see a doctor to discuss his medication Informed Simon that I will discuss his case with the medical team at the next meeting. PLAN: Discuss in next team planning meeting regarding his compliance and medication and options available to him. Next visit planned for the 06/09/2016 Originator Details: 05 Sep 2016 20:25 Rawle Roberts Nursing Originally Entered by Details: 05 Sep 2016 20:29 Rawle Roberts Last Amended by Details: 05 Sep 2016 20:40 Rawle Roberts Validated by Details: 05 Sep 2016 20:40 Rawle Roberts Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:30	<u>30</u> <u>ECRHTT</u> Planned Home Visit Visited Simon at his home address Initially did not answer his phone Left a message informing him that I would wait in the area for mins x10 then leave if her does not reply to my message. Returned my call before I left the area.	

	Generally talkative and concerned about how he is being treated by mental health services. Went onto his computer and show me a web site which he claims is his business site. Informed me that he the medication is making him ill and he does not want take it Said he informed colleagues on previous visits and wanted to see a doctor to discuss his medication Informed Simon that I will discuss his case with the medical team at the next meeting. PLAN: Discuss in next team planning meeting regarding his compliance and medication and options available to him. Next visit planned for the 06/09/2016 03/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 03 Sep 2016 Last Amended by Details: 03 Sep 2016 Karen Martin Nursing Page Numbers:30 <u>ECRHTT</u> H/V Simon invited me to sit in the lounge area this evening. He was polite, spoke a great deal about his problems with the police and was generally talkative. He also reported that 'I am not happy with the documentation about what they are saying about me and what Doctors are saying about me'. He was talking about 'not being happy with the effects the medications are giving him, and said 'since being prescribed the medication, I feel that it has had more of a negative impact, rather than a positive impact'. Simons also said, 'the tablets are making me over sleep and hard to live my day to day life'. However, he said, that he is sleeping well and has been eating and drinking well and said, 'in general I am ok'. Risk: Low Plan: To: visit 04/09/2016 Originator Details: 03 Sep 2016 20:08 Karen Martin Nursing Originally Entered by Details: 03 Sep 2016 20:30 Karen Martin Last Amended by Details: 03 Sep 2016 20:30 Karen Martin Validated by Details: 03 Sep 2016 20:30 Karen Martin Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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ECRHTT

H/V

Simon invited me to sit in the lounge area this evening. He was polite, spoke a great deal about his problems with the police and was generally talkative. He also reported that 'I am not happy with the documentation about what they are saying about me and what Doctors are saying about me'.

He was talking about 'not being happy with the effects the medications are giving him, and said 'since being prescribed the medication, I feel that it has had more of a negative impact, rather than a positive impact'. Simons also said, 'the tablets are making me over sleep and hard to live my day to day life'.

However, he said, that he is sleeping well and has been eating and drinking well and said, 'in general I am ok'.

Risk: Low Plan:**To:** visit**04/09/2016****02/09/2016**

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5**Folder 5**

Originator Details: 02 Sep 2016

Last Amended by Details: 02 Sep 2016

Nadia Edwards Nursing

Page Numbers:30**3**

Notes

31**ECRHTT - BANK**

Saw Simon this evening. He welcomed me into the living room.

He was polite, spoke a great deal about his problems with the police and was generally talkative, then apologised for talking too much.

He was kempt and dressed appropriately for the weather wearing a tracksuit.

He said that he was doing ok, that he is taking his medication, however felt that he was not suffering for any kind of mental illness.

I left him his medication as he said he was preparing a meal and once he had finished, he would take his medication.

Plan: HV:**03/09/2016**

PM s/s medication and monitor mental state, discuss at TPM Monday

Originator Details: 02 Sep 2016 20:40 Nadia
Edwards Nursing Originally Entered by Details: 02
Sep 2016 20:47 Nadia Edwards Last Amended by

	Details: 02 Sep 2016 20:47 Nadia Edwards Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:31	<u>31</u> <u>ECRHTT - BANK</u> Saw Simon this evening. He welcomed me into the living room. He was polite, spoke a great deal about his problems with the police and was generally talkative, then apologised for talking too much. He was kempt and dressed appropriately for the weather wearing a tracksuit. He said that he was doing ok, that he is taking his medication, however felt that he was not suffering for any kind of mental illness. I left him his medication as he said he was preparing a meal and once he had finished, he would take his medication. Plan: HV: 03/09/2016 PM s/s medication and monitor mental state, discuss at TPM Monday 01/09/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Sep 2016 Last Amended by Details: 01 Sep 2016 Valeri Kadrass Nursing Page Numbers:31 <u>Enfield HTT</u> Home visit this evening. His flat was messy but habitable. Appeared very talkative and demanding to see Rio notes, made by HTT Said most of notes, he got from previous teams are wrong. Demanding me to sign his request. Said he has solicitor who is looking into his appeal/injustice. Denied suffering from any kind of mental illness. Reported no other concerns. Denied feeling suicidal/having thoughts to self-harm or harm others. Said he is eating and drinking okay. Left medication with him, as he did not want to take it in my presence, saying "there is nothing wrong with him". Plan: discuss at TPM tomorrow. Originator Details: 01 Sep 2016 21:26 Valeri Kadrass Nursing Originally Entered by Details: 01 Sep 2016 21:26 Valeri Kadrass Last Amended by Details: 01 Sep 2016 21:31 Valeri Kadrass Validated by Details:	

01 Sep 2016 21:31 Valeri Kdras Significant: No
Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Enfield HTT

Home visit this evening.

His flat was messy but habitable.

Appeared very talkative and demanding to see Rio notes, made by HTT Said most of notes, he got from previous teams are wrong.

Demanding me to sign his request.

Said he has solicitor who is looking into his appeal/injustice.

Denied suffering from any kind of mental illness.

Reported no other concerns. Denied feeling suicidal/having thoughts to self-harm or harm others. Said he is eating and drinking okay.

Left medication with him, as he did not want to take it in my presence, saying "there is nothing wrong with him".

Plan: discuss at TPM tomorrow.

01/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 01 Sep 2016

Last Amended by Details: 01 Sep 2016

Ann Horsfall Nursing

Page Numbers:31

ECRHT

Email send to Goodie Care Co. as per TPM discussion this morning to arrange TOC/ joint visit

Originator Details: 01 Sep 2016 15:56 Ann Horsfall Nursing Originally Entered by Details: 01 Sep 2016 15:57 Ann Horsfall Last Amended by Details: 01 Sep 2016 15:58 Ann Horsfall Validated by Details: 01 Sep 2016 15:58 Ann Horsfall Significant: No
Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

ECRHT

Email send to Goodie Care Co. as per TPM discussion this morning to arrange TOC/ joint visit

01/09/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 01 Sep 2016

Last Amended by Details: 02 Sep 2016

Goodie Adama Nursing

	Page Numbers:31+ 32 <u>31</u> Notes <u>32</u> t/c I spoke with Simon. It was just to get an update on how he was getting on with HTT. Simon spoke about the Tribunal and appeared upset about the reports. Particularly he was not happy that it has been documented that he threatened his neighbour and also that it was his mother who called the Police. He said he was angry with his mother and will never talk to her. There was no malice intended while he went on about what doctors, nurses and his mother did, are doing and will continue to do. Simon spoke on lots of topics - going from one issue to the other without finishing off the previous; had flight of ideas and speech was pressured. These appear to be normal to him. Originator Details: 01 Sep 2016 11:30 Goodie Adama Nursing Originally Entered by Details: 02 Sep 2016 08:17 Goodie Adama Last Amended by Details: 02 Sep 2016 08:17 Goodie Adama Validated by Details: 02 Sep 2016 08:17 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:32	<u>32</u> t/c I spoke with Simon. It was just to get an update on how he was getting on with HTT. Simon spoke about the Tribunal and appeared upset about the reports. Particularly he was not happy that it has been documented that he threatened his neighbour and also that it was his mother who called the Police. He said he was angry with his mother and will never talk to her. There was no malice intended while he went on about what doctors, nurses and his mother did, are doing and will continue to do. Simon spoke on lots of topics - going from one issue to the other without finishing off the previous; had flight of ideas and speech was pressured. These appear to be normal to him. 01/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Sep 2016 Last Amended by Details: 02 Sep 2016 Goodie Adama Nursing Page Numbers:32	

	t/c I spoke with Simon's mother Loraine after I failed several times to make contact with Simon by phone. It turned out that Simon changed his number. Mother gave me the new number. Loraine said that she was pleased with the outcome of the Tribunal. Loraine reported that so far Simon has been ok. Originator Details: 01 Sep 2016 11:15 Goodie Adama Nursing Originally Entered by Details: 02 Sep 2016 08:21 Goodie Adama Last Amended by Details: 02 Sep 2016 08:21 Goodie Adama Validated by Details: 02 Sep 2016 08:21 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I spoke with Simon's mother Loraine after I failed several times to make contact with Simon by phone. It turned out that Simon changed his number. Mother gave me the new number. Loraine said that she was pleased with the outcome of the Tribunal. Loraine reported that so far Simon has been ok. 01/09/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Sep 2016 59 Kwame Addai-Gyimah Nursing Kwame Addai-Gyimah Page Numbers:32 <u>ECRHTT</u> TPM Present – Dr. Moorey, Dr. Tomasz, Dr. Dean, Ann, Liz, Alanzo, Val Discussed in meeting Plan: To arrange TOC with Goodie, Care Co. Reduce RAG rate to amber Continue supervise medication Originator Details: 01 Sep 2016 08:59 Kwame Addai-Gyimah Nursing Originally Entered by Details: 01 Sep 2016 09:01 Kwame Addai-Gyimah Last Amended by Details: 01 Sep 2016 09:04 Kwame Addai-Gyimah Validated by Details: 01 Sep 2016 09:04 Kwame Addai-Gyimah Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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	<u>ECRHTT</u> TPM Present – Dr. Moorey, Dr. Tomasz, Dr. Dean, Ann, Liz, Alanzo, Val Discussed in meeting Plan: To arrange TOC with Goodie, Care Co. Reduce RAG rate to amber Continue supervise medication 31/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 31 Aug 2016 Last Amended by Details: 01 Sep 2016 Allan Dinala Nursing Page Numbers:32 + 33 <u>32</u> Notes <u>33</u> <u>Enfield HTT:</u> PLEASE NOTE CONTACT NUMBERS ON RiO BELONG TO HIS MOTHER-SHE SAID NOT TO CALL HER UNLESS IT'S AN EMERGENCY AS SHE IS FADE UP OF EHTT STAFF CALLING HER EVERYDAY. SHE GAVE ME SIMON'S CORRECT CONTACT NUMBER 07783158424. Seen at home. Has a camera outside his flat door. Very talkative, Pleasant and polite. Has a dog, which he locked in the garden during my visit. Told me that he was recently Originator Details: 31 Aug 2016 21:48 Allan Dinala Nursing Originally Entered by Details: 01 Sep 2016 01:23 Allan Dinala Last Amended by Details: 01 Sep 2016 01:23 Allan Dinala Validated by Details: 01 Sep 2016 01:23 Allan Dinala Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:33	<u>33</u> <u>Enfield HTT:</u> PLEASE NOTE CONTACT NUMBERS ON RiO BELONG TO HIS MOTHER-SHE SAID NOT TO CALL HER UNLESS IT'S AN EMERGENCY AS SHE IS FADE UP OF EHTT STAFF CALLING HER EVERYDAY.	

	SHE GAVE ME SIMON'S CORRECT CONTACT NUMBER 07783158424. Seen at home. Has a camera outside his flat door. Very talkative, Pleasant and polite. Has a dog, which he locked in the garden during my visit. Told me that he was recently discharged from the ward after he won his managers hearing "I was admitted on section 2"" I don't have a mental illness"" I'm seeing because a Dr told me to." He showed a small pile of his Rio notes (photocopies), said most entries are wrong and wants to appeal the section 117 after care "I don't need it" "I have done my research online, I don't need be on section 117 as I was not put on a section 3". Said he has solicitor who is looking into his appeal/injustice. Denied suffering from any kind of mental illness. Reported no other concerns. His flat was messy but habitable. Denied feeling suicidal/having thoughts to self-harm or harm others. Said he is eating and drinking okay. <u>Medication</u> Left prescribed evening medication, for tonight only, with him as he said he will take it before going to bed tonight. Appeared relatively stable in mental state with no immediate concerns noted. Risk to self or others appeared low. <u>Plan</u> to continue with monitoring and supply daily meds until next EHTT review 31/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 31 Aug 2016 Last Amended by Details: 31 Aug 2016 Dr Imo Akande Medical Page Numbers:33 Home visit - patient not at home. Several phone calls, no response. Originator Details: 31 Aug 2016 17:06 Dr Imo Akande Medical Originally Entered by Details: 31 Aug 2016 17:07 Dr Imo Akande Last Amended by Details: 31 Aug 2016 17:07 Dr Imo Akande Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield HTT. Home visit - patient not at home. Several phone calls, no response.	
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31/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
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Originator Details: 31 Aug 2016

Moorey Last Amended by Details: 31 Aug 2016

Dr Helen Moorey Medical

Page Numbers:33

CRHT Planning Meeting.

Present;

Dr Moorey, Liz,

Ann, Hazel

Agreed to supervision of meds yesterday.

Needs current mental state examination and risk assessment.

Medical review today.

Originator Details: 31 Aug 2016 09:26 Dr Helen Moorey Medical Originally Entered by Details: 31 Aug 2016 09:26 Dr Helen Moorey Last Amended by Details: 31 Aug 2016 09:26 Dr Helen Moorey Validated by Details: 31 Aug 2016 09:26 Dr Helen Moorey Significant: No Added to Risk History: No Contains Third Party I/ 890nfo: No Conceal from Client: Not Concealed Enfield

CRHT Planning Meeting.

Present;

Dr Moorey, Liz,

Ann, Hazel

Agreed to supervision of meds yesterday.

Needs current mental state examination and risk assessment.

Medical review today.

30/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
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Originator Details: 30 Aug 2016

Last Amended by Details: 30 Aug 2016

Kwame Addai-Gyimah Nursing

Page Numbers:33 + 34

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Notes

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ECRHTT

Seen at home address this evening Agreed to comply with nocte medication He was busy on his laptop when I arrived Still complaining about his treatment in hospital Appeared pleasant in mood, seemed to interact quite well during the visit No imminent risk identified

	Plan Continue with daily S/S medication Assess mental state and risk Originator Details: 30 Aug 2016 20:24 Kwame Addai-Gyimah Nursing Originally Entered by Details: 30 Aug 2016 20:26 Kwame Addai-Gyimah Last Amended by Details: 30 Aug 2016 20:28 Kwame Addai-Gyimah Validated by Details: 30 Aug 2016 20:28 Kwame Addai-Gyimah Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:34	34 <u>ECRHTT</u> Seen at home address this evening Agreed to comply with nocte medication He was busy on his laptop when I arrived Still complaining about his treatment in hospital Appeared pleasant in mood, seemed to interact quite well during the visit No imminent risk identified Plan Continue with daily S/S medication Assess mental state and risk 30/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 30 Aug 2016 Smith Last Amended by Details: 30 Aug 2016 Alanzo Smith Nursing Page Numbers:34 <u>TEAM PLANNING MEETING:</u> Patient to remain Red on RAG system: ECRHTT to supply and supervise medication. ECRHTT to liaise with care coordinator and arrange joint visit and assess current presentation. Plan: ECRHTT to arrange discharge to Care coordinator. Originator Details: 30 Aug 2016 09:26 Alanzo Smith Nursing Originally Entered by Details: 30 Aug 2016 09:29 Alanzo Smith Last Amended by Details: 30 Aug 2016 09:29 Alanzo Smith Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>TEAM PLANNING MEETING:</u> Patient to remain Red on RAG system:	

	ECRHTT to supply and supervise medication. ECRHTT to liaise with care coordinator and arrange joint visit and assess current presentation. Plan: ECRHTT to arrange discharge to Care coordinator. 29/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 29 Aug 2016 Last Amended by Details: 29 Aug 2016 Valeri Kadras Nursing Page Numbers:34 <u>35</u> <u>Enfield HTT</u> Home visit this morning. Simon appeared slightly elated in mood, pressured speech, However, during the visit, he was courteous and polite on approach. Preoccupied with that his psychiatric report from 25/08/2016 is not very correct. Said that there are few paragraphs, which wrongly explain how he was detained. Said that he had been detained illegally and was placed in hospital for no reasons. He also denied making any threats to neighbours, denied any mental health problems. Said he has a CD as a prove, that the police was acting incorrectly. However, he said he is willing to work with HTT and will take medication. Simon expressed delusional thoughts about running a company at home. Second home visit this evening to supply medication - I left medication for this evening Said he is going to take it later, as he was busy at the moment. Plan: discuss if HTT to supply all TTA'S or to supervise medication every evening. Originator Details: 29 Aug 2016 21:35 Valeri Kadras Nursing Originally Entered by Details: 29 Aug 2016 21:40 Valeri Kadras Last Amended by Details: 29 Aug 2016 21:51 Valeri Kadras Validated by Details: 29 Aug 2016 21:51 Valeri Kadras Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u>	<u>35</u> <u>Enfield HTT</u> Home visit this morning.	

<u>Folder 5</u> Page Numbers:35	Simon appeared slightly elated in mood, pressured speech, However, during the visit, he was courteous and polite on approach. Preoccupied with that his psychiatric report from 25/08/2016 is not very correct. Said that there are few paragraphs, which wrongly explain how he was detained. Said that he had been detained illegally and was placed in hospital for no reasons. He also denied making any threats to neighbours, denied any mental health problems. Said he has a CD as a prove, that the police was acting incorrectly. However, he said he is willing to work with HTT and will take medication. Simon expressed delusional thoughts about running a company at home. Second home visit this evening to supply medication - I left medication for this evening Said he is going to take it later, as he was busy at the moment. Plan: discuss if HTT to supply all TTA'S or to supervise medication every evening. 29/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 29 Aug 2016 Last Amended by Details: 29 Aug 2016 Amiz Burahee Page Numbers:35 Spoke to Nelly Enfield Htt. Simon's Tta sent to her by Nursing Staff /Taxi. Originator Details: 29 Aug 2016 15:14 Amiz Burahee Nursing Originally Entered by Details: 29 Aug 2016 15:16 Amiz Burahee Last Amended by Details: 29 Aug 2016 15:16 Amiz Burahee Validated by Details: 29 Aug 2016 15:16 Amiz Burahee Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Spoke to Nelly Enfield Htt. Simon's Tta sent to her by Nursing Staff /Taxi. 29/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	
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	Originator Details: 29 Aug 2016 Last Amended by Details: 29 Aug 2016 Bank Nurse Nelia Quirante Nursing Page Numbers:35 Received a call from Ahmed Burahee HCRHTT at about 2.30pm. He attended his Tribunal and was found not detainable. On Sunday gone, he took his own discharged, and went home. He said, that EHTT kwami came to visit him yesterday morning. HTT next visits is supposed to be today, Ahmed will arrange a cab/nurse, to bring his 2 weeks TTA's in and hours' time to Ivy House, this afternoon. Plan will continue daily visits/to monitor mental state and compliance with his prescribed medication. HCRHTT will bring his 2 weeks TTA's supply via a cab/Nurse this afternoon. At about 15.45pm, Staff from HCRHTT, came to handover patient TTA'S, and was given to Val EHTT. He said, that, he came to see him this morning. <u>Please read Val's entry.</u> Originator Details: 29 Aug 2016 15:14 Bank Nurse Nelia Quirante Nursing Originally Entered by Details: 29 Aug 2016 15:20 Bank Nurse Nelia Quirante Last Amended by Details: 29 Aug 2016 15:49 Bank Nurse Nelia Quirante Validated by Details: 29 Aug 2016 15:49 Bank Nurse Nelia Quirante Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Received a call from Ahmed Burahee HCRHTT at about 2.30pm. He attended his Tribunal and was found not detainable. On Sunday gone, he took his own discharged, and went home. He said, that EHTT kwami came to visit him yesterday morning. HTT next visits is supposed to be today, Ahmed will arrange a cab/nurse, to bring his 2 weeks TTA's in and hours' time to Ivy House, this afternoon. Plan will continue daily visits/to monitor mental state and compliance with his prescribed medication. HCRHTT will bring his 2 weeks TTA's supply via a cab/Nurse this afternoon. At about 15.45pm, Staff from HCRHTT, came to handover patient TTA'S, and was given to Val EHTT. He said, that, he came to see him this morning. <u>Please read Val's entry.</u>	
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28/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 28 Aug 2016

Last Amended by Details: 28 Aug 2016

Kwame Addai-Gyimah Nursing

Page Numbers:36

ECRHTT

T/C to Simon this morning to arrange for visit

Unannounced visit, knocked on his door, Simon was quite reluctant to door, saying it was arranged in the meeting that the visits should in the evening

Explained to see him in the evening

When I sat in my car and about to drive away, Simon approached me to come back and do the visit Mother came to his flat to see him but immediate started arguing with the Mother

He was adamant that the Tribunal has discharged him from Section and is not willing to take medication anymore.

Appeared slightly elated in mood, pressured speech

Simon expressed delusional thoughts about running a company at home.

Denied having thoughts to harm himself/others

Risk appeared to be low at the time of visit

Plan

Next visit tomorrow am,

29/08/2016

Continue to assess mental state and risk

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Originator Details: 28 Aug 2016 15:39 Kwame

Addai-Gyimah Nursing Originally Entered by

Details: 28 Aug 2016 15:47 Kwame Addai-Gyimah

Last Amended by Details: 28 Aug 2016 21:28

Kwame Addai-Gyimah Validated by Details: 28

Aug 2016 21:28 Kwame Addai-Gyimah Significant:

No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:

Not Concealed

ECRHTT

T/C to Simon this morning to arrange for visit

Unannounced visit, knocked on his door, Simon was quite reluctant to door, saying it was arranged in the meeting that the visits should in the evening

Explained to see him in the evening

When I sat in my car and about to drive away,

Simon approached me to come back and do the visit

Mother came to his flat to see him but immediate started arguing with the Mother
 He was adamant that the Tribunal has discharged him from Section and is not willing to take medication anymore.
 Appeared slightly elated in mood, pressured speech
 Simon expressed delusional thoughts about running a company at home.
 Denied having thoughts to harm himself/others
 Risk appeared to be low at the time of visit
Plan
 Next visit tomorrow am,
 29/08/2016
 Continue to assess mental state and risk

27/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 27 Aug 2016

Last Amended by Details: 27 Aug 2016

Gabriel Daramola Nursing

Page Numbers:36

As requested below in the earlier entry, the Simon Medication chart has been uploaded and EHTT called and informed through their contact phone number 07701281005 at about 22:00hrs.

Originator Details: 27 Aug 2016 22:03 Gabriel Daramola Nursing Originally Entered by Details: 27 Aug 2016 22:07 Gabriel Daramola Last Amended by Details: 27 Aug 2016 22:07 Gabriel Daramola Validated by Details: 27 Aug 2016 22:07 Gabriel Daramola Significant: No Added to Risk History: No
 Contains Third Party Info: No Conceal from Client: Not Concealed

As requested below in the earlier entry, the Simon Medication chart has been uploaded and EHTT called and informed through their contact phone number 07701281005 at about 22:00hrs.

27/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 27 Aug 2016

Last Amended by Details: 27 Aug 2016

Ann Horsfall Nursing

Page Numbers:36 + 37

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Notes

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	<u>ECRHT</u> Referral received from Haringey CRHT to followed up by ECRHT. This referral was received whilst ECRHT assessment team were in the road carrying out assessment. I my return to base. I T/C to Haringey ward and spoke with RMN Ron and nurse in charge Gabriel from Haringey ward to upload patient medication chart on Rio to enable ECRHT doctors to prescribe on Tuesday. See HCEHT assessment documentation on Rio PLAN: Referral accepted by ECRHT to be place on white board. Medication chart to be written on Tuesday by ECRHT doctors Daily visit to monitor his mental state and risk assess. Next visit 28/08/2016 Phone Simon to arrange best time to visit ECRHT to liaise with his care co on Tuesday to discuss care pathway. Originator Details: 27 Aug 2016 20:58 Ann Horsfall Nursing Originally Entered by Details: 27 Aug 2016 21:17 Ann Horsfall Last Amended by Details: 27 Aug 2016 21:17 Ann Horsfall Validated by Details: 27 Aug 2016 21:17 Ann Horsfall Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:37	<u>37</u> <u>ECRHT</u> Referral received from Haringey CRHT to followed up by ECRHT. This referral was received whilst ECRHT assessment team were in the road carrying out assessment. I my return to base. I T/C to Haringey ward and spoke with RMN Ron and nurse in charge Gabriel from Haringey ward to upload patient medication chart on Rio to enable ECRHT doctors to prescribe on Tuesday. See HCEHT assessment documentation on Rio PLAN: Referral accepted by ECRHT to be place on white board. Medication chart to be written on Tuesday by ECRHT doctors Daily visit to monitor his mental state and risk assess. Next visit 28/08/2016 Phone Simon to arrange best time to visit ECRHT to liaise with his care co on Tuesday to discuss care pathway. 27/08/2016	

	<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Aug 2016 Last Amended by Details: 27 Aug 2016 Mr Marko Donatiello Nursing Page Numbers:37 + 38 <u>37</u> Notes <u>38</u> Attended Haringey Ward to carryout mental health assessment Marko 6 Amelia Attended Haringey ward to meet with Simon, Simon presented as courteous and polite on approach. Explained to staff that he had been detained illegally and was placed in hospital for no reasons. Denied making any threats to neighbours, denied any mental health problems. Explained that he had been put on medication and has remained concordant whilst on the ward despite not really wanting to have medication, as he feels "I do not suffer with any mental health problems". He explained that "I will continue to take medication, but I need to speak to my Dr as I find it Originator Details: 27 Aug 2016 17:55 Mr Marko Donatiello Nursing Originally Entered by Details: 27 Aug 2016 17:59 Mr Marko Donatiello Last Amended by Details: 27 Aug 2016 17:59 Mr Marko Donatiello Validated by Details: 27 Aug 2016 17:59 Mr Marko Donatiello Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:38	<u>38</u> Attended Haringey Ward to carryout mental health assessment Marko 6 Amelia Attended Haringey ward to meet with Simon, Simon presented as courteous and polite on approach. Explained to staff that he had been detained illegally and was placed in hospital for no reasons. Denied making any threats to neighbours, denied any mental health problems. Explained that he had been put on medication and has remained concordant whilst on the ward despite not really wanting to have medication, as he feels "I do not suffer with any mental health problems". He explained that "I will continue to take medication, but I need to speak to my Dr as I find it makes me drowsy and I'm not able to function properly". Simon informed HTT that he had attended Tribunal and was not found detainable under the MHA and was made informal so he was able to leave the ward, as he was an informal patient. He also informed the HTT that he needed to get out of hospital and continue to set up his business venture that he had	

	been working on for several months, to which was to organise festival and venues all over the UK. I explained although he was found to be informal, one of the recommendations from the tribunal was to continue working with the mental health service and remain concordant with his prescribed medication. I explained that this maybe for a short period of time, normally lasting up too about 7-10days. Simon was in agreement to meet with the HTT, but informed staff that he takes his medication late at night and would not be happy to take it early evening. I informed him that it was important to concord with medication and part of this care package was to monitor and supervise him taking medication. Simon continued to decline having his medication between 6pm-8pm but was happy to meet with HTT to MMS and check concordance with medication. It was agreed that ward will hand over his TTA'S for the next 3 days; ECRHTT will be able to prescribe on-going medication thereafter. Prescription chart will be up-loaded on Rio. Denied any thoughts of wanting to harm himself or others. Denied hallucinations, not responding to unseen stimuli. Risk of non-concordance with prescribed medication and non-engagement with HTT, however Simon has agreed to meet with HTT during the evenings and negotiate times to meet thereafter to MMS. PLAN ECRHTT to meet for H/V 28/08/2016 PM to MMS and check concordance with prescribed medication. Simon will be given 3 days' supply of TTA's. ECRHTT to prescribe thereafter. HCRHTT to liaise with ECRHTT. 27/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Aug 2016 Last Amended by Details: 27 Aug 2016 Tracey Jordan Nursing Page Numbers:38 + 39 <u>38</u> Notes <u>39</u> Simon seen by Duty Dr following request for discharge from hospital today - pls see medical entry for details. Discharge granted.	
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	Simon seen by and accepted by HTT - Simon said he would work with same in terms of monitoring his mental health, however, told HTT that he could not take his medication supervised by HTT between 6-8p.m. as same makes him drowsy, but would take same later in the evening said he was taking medication now because same prescribed by Dr Cranitch but would be seeing his GP asap to review same because of associated drowsiness and because he is not unwell or requires same Simon said that he wants to get back to normal, sell some records, focus on looking after himself as opposed to others as previously HHTT will refer Simon to Enfield HTT for follow-up. Simon given 2/7 tta's medication from ward stock, same given to mother who said she would ensure Simon take same. Mother will ring Haringey Ward on Monday 29/08/2016 to collect 2/52 tta's. Simon and his mother left ward together. Risk Asst updated - Simon denied risk to self/others. HTT to action 7 days follow-up in community. <u>DISCHARGED TODAY.</u> Originator Details: 27 Aug 2016 16:50 Tracey Jordan Nursing Originally Entered by Details: 27 Aug 2016 16:58 Tracey Jordan Last Amended by Details: 27 Aug 2016 17:08 Tracey Jordan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:39	<u>39</u> Simon seen by Duty Dr following request for discharge from hospital today - pls see medical entry for details. Discharge granted. Simon seen by and accepted by HTT - Simon said he would work with same in terms of monitoring his mental health, however, told HTT that he could not take his medication supervised by HTT between 6-8p.m. as same makes him drowsy, but would take same later in the evening said he was taking medication now because same prescribed by Dr Cranitch but would be seeing his GP asap to review same because of associated drowsiness and because he is not unwell or requires same Simon said that he wants to get back to normal, sell some records, focus on looking after himself as opposed to others as previously	

	HHTT will refer Simon to Enfield HTT for follow-up. Simon given 2/7 tta's medication from ward stock, same given to mother who said she would ensure Simon take same. Mother will ring Haringey Ward on Monday 29/08/2016 to collect 2/52 tta's. Simon and his mother left ward together. Risk Asst updated - Simon denied risk to self/others. HTT to action 7 days follow-up in community. <u>DISCHARGED TODAY.</u> 27/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Aug 2016 Last Amended by Details: 27 Aug 2016 Angelliner Nassuna Nursing Page Numbers:39 Contacted HTT to refer Simon, they informed me to call back in 30mins as they were out carrying out an assessment. Originator Details: 27 Aug 2016 14:33 Angelliner Nassuna Nursing Originally Entered by Details: 27 Aug 2016 14:34 Angelliner Nassuna Last Amended by Details: 27 Aug 2016 16:50 Tracey Jordan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Contacted HTT to refer Simon, they informed me to call back in 30mins as they were out carrying out an assessment. 27/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Aug 2016 Last Amended by Details: 27 Aug 2016 Neli Avramova Medical Page Numbers:39 <u>40</u> ATSP, asking to self-discharge Hx and BG noted. Handover from ward doctor received and advised that pt is not detainable unless presentation massively changed.	
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	Simon is keen to be discharged today, he wants to visit his civil partner, take his dog out for a walk and "get back to normal". He also intends to go to A&E for? CXR of his distal phalange of L small finger which he believes to be broken following an accident on the ward - slipped in the bathroom. Advised by staff that this was examined by duty doctor and it was felt it is unlikely to be a fracture. He admits that he has benefited from his stay on the ward but feels that no further IP stay is necessary as he would feel much more comfortable at home. He initially suggested to go home today, stay overnight and return to the ward. The plan from the day team was for pt to go out on escorted leave with staff and then gradually increase his leave and let him go out alone. He refused going out with staff due to "embarrassment" of walking with staff if he is seen by his neighbours/friends. I asked if he would be happy to be visited by HTT at home on discharge and he agreed. He confirmed he is happy to take his meds and to engage with HTT. He denied any suicidal thoughts or thoughts of self-harm, denied thoughts of harming others. Denied any hallucinatory experiences. <u>MSE</u> Looks kempt, good eye contact, rapport established Speech - normal rate, tone, volume, coherent Mood - euthymic, reactive affect Thoughts - no formal thought disorder, no thoughts of harming self/others, no delusional beliefs, forward looking Perception - denied hallucinations, not responding to unseen stimuli Risks: Risk of harm to self - low Risk of harm to others - low Risk of meds noncompliance and non-engagement with services- however pt confirms he will engage with HTT and take his meds and is not detainable Plan discharge with HTT follow up - NS to kindly arrange HTT referral Px 2 weeks TTA Originator Details: 27 Aug 2016 13:27 Neli Avramova Medical Originally Entered by Details: 27 Aug 2016 13:46 Neli Avramova Last Amended by Details: 27 Aug 2016 13:46 Neli Avramova Validated by Details: 27 Aug 2016 13:46 Neli Avramova Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:40	40 ATSP, asking to self-discharge Hx and BG noted. Handover from ward doctor received and advised that pt is not detainable unless presentation massively changed. Simon is keen to be discharged today, he wants to visit his civil partner, take his dog out for a walk and "get back to normal". He also intends to go to AED for? CXR of his distal phalange of L small finger which he believes to be broken following an accident on the ward - slipped in the bathroom. Advised by staff that this was examined by duty doctor and it was felt it is unlikely to be a fracture. He admits that he has benefited from his stay on the ward but feels that no further IP stay is necessary as he would feel much more comfortable at home. He initially suggested to go home today, stay overnight and return to the ward. The plan from the day team was for pt to go out on escorted leave with staff and then gradually increase his leave and let him go out alone. He refused going out with staff due to "embarrassment" of walking with staff if he is seen by his neighbours/friends. I asked if he would be happy to be visited by HTT at home on discharge and he agreed. He confirmed he is happy to take his meds and to engage with HTT. He denied any suicidal thoughts or thoughts of self-harm, denied thoughts of harming others. Denied any hallucinatory experiences. <u>MSE</u> Looks kempt, good eye contact, rapport established Speech - normal rate, tone, volume, coherent Mood - euthymic, reactive affect Thoughts - no formal thought disorder, no thoughts of harming self/others, no delusional beliefs, forward looking Perception - denied hallucinations, not responding to unseen stimuli Risks: Risk of harm to self - low Risk of harm to others - low Risk of meds noncompliance and non-engagement with services- however pt confirms he will engage with HTT and take his meds and is not detainable Plan discharge with HTT follow up - NS to kindly arrange HTT referral Px 2 weeks TTA 27/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Aug 2016 Last Amended by Details: 27 Aug 2016	

	Mary Doherty Page Numbers:40 CP1; Simon was in his room using his computer when the shift began, only coming out to attend to his needs. He appears pleasant and calm and interacting well with staff and peers alike. CP2; He had his night drink. CP5; He complied with his prescribed night medication. He had a good night sleep and remains asleep at the time of writing this report. Originator Details: 27 Aug 2016 05:55 Mary Doherty Nursing Originally Entered by Details: 27 Aug 2016 06:07 Mary Doherty Last Amended by Details: 27 Aug 2016 06:07 Mary Doherty Validated by Details: 27 Aug 2016 06:07 Mary Doherty Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed CP1; Simon was in his room using his computer when the shift began, only coming out to attend to his needs. He appears pleasant and calm and interacting well with staff and peers alike. CP2; He had his night drink. CP5; He complied with his prescribed night medication. He had a good night sleep and remains asleep at the time of writing this report.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:41	26/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 26 Aug 2016 Rupesh Khade Nursing Last Amended by Details: 26 Aug 2016 Page Numbers:41 CP1: At the start of the shift Simon was in his room. He appeared calm and relatively settle in his mental state presentation. Interacting well with staff and peers. Pose no management problem. CP2: He is eating and drinking well. CP5: Not on day medication. CP10: He attend his tribunal in the morning and he is now Informal patient. 41 Originator Details: 26 Aug 2016 15:55 Rupesh Khade Nursing Originally Entered by Details: 26 Aug 2016 15:59 Rupesh Khade Last Amended by Details: 26 Aug 2016 15:59 Rupesh Khade Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No	

Contains Third Party Info: No Conceal from Client:
Not Concealed

CP1: At the start of the shift Simon was in his room. He appeared calm and relatively settle in his mental state presentation. Interacting well with staff and peers. Pose no management problem.

CP2: He is eating and drinking well.

CP5: Not on day medication.

CP10: He attend his tribunal in the morning and he is now Informal patient.

26/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
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Originator Details: 26 Aug 2016

Last Amended by Details: 26 Aug 2016

Rosemary Mills Medical

Page Numbers:41

TRIBUNAL + PLAN

Simons MHA Tribunal went ahead this morning - the panel decided not to uphold the Section 2, therefore Simon is now an informal patient. The judge made it clear to Simon that although they were discharging the section, they felt that he needed to work with the medical team and the nurses, and that they felt he needed support.

Simon has agreed to remain in hospital informally so that we can continue to assess him and monitor his progress with medication, his time off the ward can be negotiated with nursing staff, we would recommend that this is escorted on the first instance then if goes well can be unescorted.

Simon has also agreed to take his medication as prescribed (5mg olanzapine nocte, 1mg lorazepam nocte), he presents as calm and amenable, willing to work with health professionals, denying thoughts to harm self and others.

If Simon were to change his mind and decide to leave over the weekend, it would not be appropriate to detain him under 5(2) unless his presentation and risks changed.

If Simon wishes to leave hospital and his presentation is unchanged, we would recommend that Simon be discharged with the HTT for follow up/monitoring/supervision with medication.

Originator Details: 26 Aug 2016 15:23 Rosemary Mills Medical Originally Entered by Details: 26 Aug 2016 15:31 Rosemary Mills Last Amended by Details: 26 Aug 2016 15:33 Rosemary Mills

Validated by Details: 26 Aug 2016 15:33 Rosemary Mills Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dr Mills ST4 Haringey Assessment Ward.

TRIBUNAL + PLAN

Simons MHA Tribunal went ahead this morning - the panel decided not to uphold the Section 2, therefore Simon is now an informal patient. The judge made it clear to Simon that although they were discharging the section, they felt that he needed to work with the medical team and the nurses, and that they felt he needed support. Simon has agreed to remain in hospital informally so that we can continue to assess him and monitor his progress with medication, his time off the ward can be negotiated with nursing staff, we would recommend that this is escorted on the first instance then if goes well can be unescorted. Simon has also agreed to take his medication as prescribed (5mg olanzapine nocte, 1mg lorazepam nocte), he presents as calm and amenable, willing to work with health professionals, denying thoughts to harm self and others. If Simon were to change his mind and decide to leave over the weekend, it would not be appropriate to detain him under 5(2) unless his presentation and risks changed. If Simon wishes to leave hospital and his presentation is unchanged, we would recommend that Simon be discharged with the HTT for follow up/monitoring/supervision with medication.

26/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
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Originator Details: 26 Aug 2016

Last Amended by Details: 26 Aug 2016

Amiz Burahee Nursing

Page Numbers:41

Attended Tribunal this morning. Taken off Section, made informal, has agreed to work with the Ward/ Htt Team.

Originator Details: 26 Aug 2016 14:02 Amiz Burahee Nursing Originally Entered by Details: 26 Aug 2016 14:03 Amiz Burahee Last Amended by Details: 26 Aug 2016 14:03 Amiz Burahee Validated by Details: 26 Aug 2016 14:03 Amiz Burahee Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Attended Tribunal this morning. Taken off Section, made informal, has agreed to work with the Ward/ Htt Team.

26/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 26 Aug 2016

Goodie Adama Nursing

Last Amended by Details: 28 Aug 2016

Page Numbers:41

AM

MH Tribunal held at St Ann's Hospital following Simon's appeal against his section.

PM

Simon's appeal was held and he was therefore discharged from sec2 and now informal patient.

Originator Details: 26 Aug 2016 10:30 Goodie Adama Nursing Originally Entered by Details: 28 Aug 2016 11:01 Goodie Adama Last Amended by Details: 28 Aug 2016 11:02 Goodie Adama Validated by Details: 28 Aug 2016 11:02 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

AM

MH Tribunal held at St Ann's Hospital following Simon's appeal against his section.

PM

Simon's appeal was held and he was therefore discharged from sec2 and now informal patient.

26/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 26 Aug 2016

Last Amended by Details: 09 Sep 2016

Sonya Rudra

Page Numbers:41 + 42

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Notes

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Dr Mills

discussion with Simon:

He is keen to go home with HTT. He says he will take medication. He is seeing his solicitor today.

	Bessie (ward manager) feedback: Simon has said he will only take medication until Friday. Family have expressed concerns. Plan <u>Tribunal today</u> Originator Details: 26 Aug 2016 09:18 Sonya Rudra Medical Originally Entered by Details: 26 Aug 2016 09:19 Sonya Rudra Last Amended by Details: 09 Sep 2016 14:00 Sonya Rudra Validated by Details: 09 Sep 2016 14:00 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:42	<u>42</u> <u>Dr Mills</u> discussion with Simon: He is keen to go home with HTT. He says he will take medication. He is seeing his solicitor today. Bessie (ward manager) feedback: Simon has said he will only take medication until Friday. Family have expressed concerns. Plan <u>Tribunal today</u> 26/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 26 Aug 2016 Last Amended by Details: 26 Aug 2016 09 Sonya Rudra Page Numbers:42 <u>WBM Haringey Ward</u> Present: Dr Cranitch (consultant), Dr Mills (ST4), Dr Rudra (CT1), Dr Mumford (FY1), Zoe (medical student), Dayo (ward manager), Robin (war adimin), Ahmed (nurse) Nursing Feedback: Has been more settled in the last few days. Taking medication. Saying he will stay in hospital. Plan: Review today with a view to working with informally Originator Details: 26 Aug 2016 09:04 Sonya Rudra Medical Originally Entered by Details: 26 Aug 2016	

09:07 Sonya Rudra Last Amended by Details: 26 Aug 2016 09:07 Sonya Rudra Validated by Details: 26 Aug 2016 09:07 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

WBM Haringey Ward

Present:

Dr Cranitch (consultant),
Dr Mills (ST4),
Dr Rudra (CT1),
Dr Mumford (FY1),
Zoe (medical student),
Dayo (ward manager),
Robin (ward admin),
Ahmed (nurse)

Nursing Feedback:

Has been more settled in the last few days. Taking medication. Saying he will stay in hospital.

Plan:

Review today with a view to working with informally

26/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 26 Aug 2016

Last Amended by Details: 26 Aug 2016

Ronald Ossei Nursing

Page Numbers:42

Simon has been showing some improvement in his mental state.

Polite on approach. Observed socializing with fellow service users.

Mum was on the ward to visit.

Ordered a take away meal during the shift and shared with fellow service users.

Was concordant with his prescribed medication.

Appears asleep from midnight.

Originator Details: 26 Aug 2016 06:28 Ronald Ossei Nursing Originally Entered by Details: 26 Aug 2016 06:32 Ronald Ossei Last Amended by Details: 26 Aug 2016 06:32 Ronald Ossei Validated by Details: (UNVALIDATED)

Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client: Not Concealed

Simon has been showing some improvement in his mental state.

Polite on approach. Observed socializing with fellow service users.

	Mum was on the ward to visit. Ordered a take away meal during the shift and shared with fellow service users. Was concordant with his prescribed medication. Appears asleep from midnight. 25/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Aug 2016 Last Amended by Details: 25 Aug 2016 Philip Adu Gyamfi Nursing Page Numbers:42 Simon appeared calm in mood and settled in mental state, he was pleasant on approach and was observed interacting well with selected peers and staff on the ward. He was observed eating and drinking adequately, he took care of his personal hygiene and appeared kempt He was concordant with his medication no side effect observed or reported. Originator Details: 25 Aug 2016 18:26 Philip Adu Gyamfi Nursing Originally Entered by Details: 25 Aug 2016 18:31 Philip Adu Gyamfi Last Amended by Details: 25 Aug 2016 18:31 Philip Adu Gyamfi Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon appeared calm in mood and settled in mental state, he was pleasant on approach and was observed interacting well with selected peers and staff on the ward. He was observed eating and drinking adequately, he took care of his personal hygiene and appeared kempt He was concordant with his medication no side effect observed or reported. 25/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Aug 2016 Last Amended by Details: 29 Aug 2016 Goodie Adama Nursing	
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	Page Numbers:42 <u>42</u> Notes <u>43</u> t/c I spoke with Simon's mother Mrs Loraine Cordell with Simon's permission in preparing my report for the Tribunal. I informed her that I was preparing Tribunal report on Simon and wanted to include her views about Simon being on section and also medication. Mrs Cordell's views were that "I don't think he [Simon] needs to be on section; he is not a danger to himself or other people" Mrs Cordell said as far as she knows Simon is willing to work with the doctors and take his medication. Mrs Cordell would not say her views if Simon changes his mind and her response summed up as "we cross the bridge when we get there". Originator Details: 25 Aug 2016 17:00 Goodie Adama Nursing Originally Entered by Details: 29 Aug 2016 12:52 Goodie Adama Last Amended by Details: 29 Aug 2016 12:52 Goodie Adama Validated by Details: 29 Aug 2016 12:52 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:43	<u>43</u> t/c I spoke with Simon's mother Mrs Loraine Cordell with Simon's permission in preparing my report for the Tribunal. I informed her that I was preparing Tribunal report on Simon and wanted to include her views about Simon being on section and also medication. Mrs Cordell's views were that "I don't think he [Simon] needs to be on section; he is not a danger to himself or other people" Mrs Cordell said as far as she knows Simon is willing to work with the doctors and take his medication. Mrs Cordell would not say her views if Simon changes his mind and her response summed up as "we cross the bridge when we get there". 25/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Aug 2016 Last Amended by Details: 25 Aug 2016 Goodie Adama Nursing Page Numbers:43 Met with Simon this morning on Haringey Assessment ward and assessed him in preparation of my report to the tribunal.	

	Simon recognised me immediately. He was warm, welcoming, polite and co-operative throughout the meeting. He stated about half a dozen times that he is willing to work with the services and also willing to accept medication. He gave me a letter he wrote to indicate his views and willingness to work with doctors and staff. Social circumstances report and Simon's letter uploaded on RiO. Originator Details: 25 Aug 2016 16:04 Goodie Adama Nursing Originally Entered by Details: 25 Aug 2016 16:11 Goodie Adama Last Amended by Details: 25 Aug 2016 16:11 Goodie Adama Validated by Details: 25 Aug 2016 16:11 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Met with Simon this morning on Haringey Assessment ward and assessed him in preparation of my report to the tribunal. Simon recognised me immediately. He was warm, welcoming, polite and co-operative throughout the meeting. He stated about half a dozen times that he is willing to work with the services and also willing to accept medication. He gave me a letter he wrote to indicate his views and willingness to work with doctors and staff. Social circumstances report and Simon's letter uploaded on RiO. 25/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Aug 2016 Last Amended by Details: 25 Aug 2016 Jack Mumford Medical Page Numbers:43 <u>WBM Haringey Ward</u> Present: Dr Cranitch (consultant), Dr Rudra (CT1), Dr Mumford (FY2), Dayo (nurse in charge), Robin (ward admin), Zoe (medical student) Nursing feedback: Seen regarding tribunal. Seemed settled. Plan: 1) Tribunal tomorrow	
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Originator Details: 25 Aug 2016 09:09 Jack Mumford Medical Originally Entered by Details: 25 Aug 2016 09:10 Jack Mumford Last Amended by Details: 25 Aug 2016 09:10 Jack Mumford Validated by Details: 25 Aug 2016 09:10 Jack Mumford Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

WBM Haringey Ward

Present:

Dr Cranitch (consultant),
Dr Rudra (CT1),
Dr Mumford (FY2),
Dayo (nurse in charge),
Robin (ward admin),
Zoe (medical student)

Nursing feedback:

Seen regarding tribunal. Seemed settled.

Plan:

1) Tribunal tomorrow

25/08/2016

• **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 25 Aug 2016

Last Amended by Details: 25 Aug 2016

Mojisola Bankole Nursing

Page Numbers:43

Simon appeared fairly settled on the ward.

Spent some time in the garden with other fellow patient.

Eating and drinking observed during the night snack.

Complied with night medication. Settled to bed around mid-night, observed to be asleep all night.

Originator Details: 25 Aug 2016 05:51 Mojisola Bankole Nursing Originally Entered by Details: 25 Aug 2016 06:06 Mojisola Bankole Last Amended by Details: 25 Aug 2016 06:06 Mojisola Bankole Validated by Details: (UNVALIDATED)

Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client: Not Concealed

Simon appeared fairly settled on the ward. Spent some time in the garden with other fellow patient. Eating and drinking observed during the night snack.

Complied with night medication. Settled to bed around mid-night, observed to be asleep all night.

24/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 24 Aug 2016

Last Amended by Details: 24 Aug 2016

Goodie Adama Nursing

Page Numbers:43

t/c to Haringey Assessment Ward. I spoke with nurse Folake and asked that Simon be informed that I will visit him tomorrow morning [to interview him and prepare Tribunal report]

Originator Details: 24 Aug 2016 17:52 Goodie Adama Nursing Originally Entered by Details: 24 Aug 2016 17:54 Goodie Adama Last Amended by Details: 24 Aug 2016 17:54 Goodie Adama Validated by Details: 24 Aug 2016 17:54 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

t/c to Haringey Assessment Ward. I spoke with nurse Folake and asked that Simon be informed that I will visit him tomorrow morning [to interview him and prepare Tribunal report]

24/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 24 Aug 2016

Last Amended by Details: 24 Aug 2016

Folake Idowu

Page Numbers:43

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Notes

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Simon presented calm, keeping a low profile on the ward, he was in his room most time of the day.

Observed eating and drinking well, he appeared kempt and no management issue regarding him.

Concordant with his medication and has been nursed on general observation level.

Telephone call received from his care coordinator regarding visiting Simon on the ward tomorrow. This message has been passed to Simon and was happy about it.

	Originator Details: 24 Aug 2016 17:02 Folake Idowu Nursing Originally Entered by Details: 24 Aug 2016 17:08 Folake Idowu Last Amended by Details: 24 Aug 2016 17:11 Folake Idowu Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:44	<u>44</u> Simon presented calm, keeping a low profile on the ward, he was in his room most time of the day. Observed eating and drinking well, he appeared kempt and no management issue regarding him. Concordant with his medication and has been nursed on general observation level. Telephone call received from his care coordinator regarding visiting Simon on the ward tomorrow. This message has been passed to Simon and was happy about it. 24/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 24 Aug 2016 35 Rosemary Mills Medical Last Amended by Details: 24 Aug 2016 Page Numbers:44 <u>I saw Simon in on the ward with</u> Tamba (ward nurse) present – for the purpose of assessing his mental state and obtaining some further history about drug and alcohol use. Simon was amenable to interview. Simon denied any drug or alcohol use at all, stating that he 'never touched the stuff. I clarified this with him as previous notes have described him using cannabis on a daily basis back in Dec 2105 , also mentions of him using nitrous oxide. Simon stated that cannabis was very infrequent 'just to try it' 'recreationally', minimised this significantly in his recollection. Also Originator Details: 24 Aug 2016 16:35 Rosemary Mills Medical Originally Entered by Details: 24 Aug 2016 16:54 Rosemary Mills Last Amended by Details: 24 Aug 2016 16:54 Rosemary Mills Validated by Details: 24 Aug 2016 16:54 Rosemary Mills Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	

	<u>I saw Simon in on the ward with</u> Tamba (ward nurse) present – for the purpose of assessing his mental state and obtaining some further history about drug and alcohol use. Simon was amenable to interview. Simon denied any drug or alcohol use at all, stating that he 'never touched the stuff. I clarified this with him as previous notes have described him using cannabis on a daily basis back in Dec 2105 , also mentions of him using nitrous oxide. Simon stated that cannabis was very infrequent 'just to try it' 'recreationally', minimised this significantly in his recollection. Also told me that he had only been drunk once in his life when he was 16 and hadn't been drunk since. This differs to another report in RiO where he was admitted to A+E after consuming a bottle of rum and LSD in 2012. Unfortunately, we haven't managed to complete a UDS during this admission. Simon was well kempt, he was initially polite in that he called me 'miss', he remained seated for the interview. Quite intense eye contact. Speech rapid, difficult to interrupt, very keen to discuss his business plans and court cases, told me about showing all his business plans to the patients on the ward, unable to see that this might not be relevant to them. Spoke of several different folders that he has created in order to plan his festivals and events, told me that he has set up a charity which he intends to use to help people by benefiting beneficiaries of the up. He has applied for lottery funding and intends to appoint 6 directors. I found it very hard to understand the activities of his charity but it seemed to involve an online notice board where advertising space could be sold. Simon spoke about arranging for the red arrows to attend a future festival, has downloaded their website and made a folder for this. Simon struggled to stay on topic and had to be prompted several times back to the initial question. I explained the tribunal process to Simon and told him that I would be presenting the view of the team which is that we felt he is currently mentally unwell, and would benefit from further time in hospital and treatment with antipsychotic medication. I told him that I thought he was overly preoccupied with his court cases and police conspiracies, and that his business plans were difficult to understand and seemed a little far reaching and unrealistic. I told him that we felt that the extent to which he is preoccupied with this was a symptom of mental illness. I asked Simon to have a think about what he would want to do should the section be ended on Friday, as he has at times said he might stay informally.	
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	Simon reported feeling quite happy, sleeping well, eating well, happy to be sharing his plans with us and working on his businesses. Denied any abnormal perceptions or unusual experiences. Does not feel that he has a mental illness. After the meeting, I returned to Simon to let him know about the procedure regarding him reading the reports prior to the tribunal (which he has a right to do). Mental health act office confirmed that they will provide him with the reports likely on Thursday afternoon or Friday morning. Simon was holding the phone near his ear at this point, asked me to tell him my name (which he already knows) apparently for the benefit of the phone. I asked Simon if he was recording, it turned out someone was on the phone. Simon told me that he would like me to tell his representative (turned out to be partner, Katie) why I was detaining him in hospital. The encounter felt very confrontational, I told Simon that it wasn't appropriate for me to discuss his case with unknown others on the telephone and she is welcome to attend any future meetings if he would like. I ended the conversation at that point. Simon continued stand very close to me whilst I was unlocking the office door, and continued to hold the phone towards me, demanding that I say my name and explain why I thought he was ill (I showed him my badge and confirmed who I was) and he was quite intimidating in this respect.	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:45	24/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 24 Aug 2016 Last Amended by Details: 24 Aug 2016 Jack Mumford Medical Page Numbers:45 <u>NMUH pathology lab for blood results from</u> <u>18/08/2016</u> Na 141 K Haemolysed Urea 4 create 88 eGFR 89 Adj Calcium 2.35 Phosphate 0.84 Magnesium 0.95 Bil 14 ALT 23 ALP 72 Total protein 77 Albumin 49 Vit D 31 Cholesterol 4.6 HDL 1.2 Non-HDL 3.4 LDL 3 Cholesterol HDL ratio 3.8 CRP1.7 Glucose 5.3 Vit b12 234 Folate Haemolysed TSH 131 Free T4 19.8	

	<u>45</u> Originator Details: 24 Aug 2016 15:58 Jack Mumford Medical Originally Entered by Details: 24 Aug 2016 16:05 Jack Mumford Last Amended by Details: 24 Aug 2016 16:05 Jack Mumford Validated by Details: 24 Aug 2016 16:05 Jack Mumford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Contacted <u>NMUH pathology lab for blood results from 18/08/2016</u> Na 141 K Haemolysed Urea 4 create 88 eGFR 89 Adj Calcium 2.35 Phosphate 0.84 Magnesium 0.95 Bil 14 ALT 23 ALP 72 Total protein 77 Albumin 49 Vit D 31 Cholesterol 4.6 HDL 1.2 Non-HDL 3.4 LDL 3 Cholesterol HDL ratio 3.8 CRP1.7 Glucose 5.3 Vit b12 234 Folate Haemolysed TSH 131 Free T4 19.8	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:46	24/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 24 Aug 2016 Last Amended by Details: 24 Aug 2016 Dr Julia Cranitch Medical Page Numbers:46 Tried to ring Simons mother but no answer from the landline [REDACTED] and the mobile [REDACTED] was not receiving calls I will try again another time <u>46</u> Originator Details: 24 Aug 2016 15:06 Dr Julia Cranitch Medical Originally Entered by Details: 24 Aug 2016 15:09 Dr Julia Cranitch Last Amended by Details: 24 Aug 2016 15:09 Dr Julia Cranitch Validated by Details: 24 Aug 2016 15:09 Dr Julia Cranitch Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Tried to ring Simons mother but no answer from the landline [REDACTED] and the mobile [REDACTED] was not receiving calls I will try again another time	

24/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 24 Aug 2016

Last Amended by Details: 25 Aug 2016

Sonya Rudra Medical

Page Numbers:46

WBM Haringey Assessment Ward

Present:

Dr Cranitch (consultant),

Dr Mills (ST4),

Dr Rudra (CT1).

Dr Mumford (FY2),

Alan (medical student),

Zoe (medical student),

Tamba (nurse), Folake (nurse),

Robin (ward clerk),

Bessie (ward manager)

Nursing Feedback:

During the day he was well. Pleasant at

night. Took anti-psychotic medication.

Looking forward to tribunal. In his review

he agreed to take his anti-psychotic and

became tearful.

Plan

Continue current medication Tribunal

Friday

Dr Cranitch to contact mother today

Originator Details: 24 Aug 2016 09:08 Sonya Rudra

Medical Originally Entered by Details: 24 Aug 2016

09:08 Sonya Rudra Last Amended by Details: 25

Aug 2016 12:43 Sonya Rudra Validated by Details:

25 Aug 2016 12:43 Sonya Rudra Significant: No

Added to Risk History: No

Contains Third Party Info: No Conceal from Client:

Not Concealed

WBM Haringey Assessment Ward

Present:

Dr Cranitch (consultant),

Dr Mills (ST4),

Dr Rudra (CT1).

Dr Mumford (FY2),

Alan (medical student),

Zoe (medical student),

Tamba (nurse), Folake (nurse),

Robin (ward clerk),

Bessie (ward manager)

Nursing Feedback:

During the day he was well. Pleasant at night. Took

anti-psychotic medication. Looking forward to

tribunal. In his review he agreed to take his anti-

psychotic and became tearful.

Plan

Continue current medication Tribunal Friday
Dr Cranitch to contact mother today

24/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 24 Aug 2016

Last Amended by Details: 24 Aug 2016

Gabriel Daramola Nursing

Page Numbers:46

Mental state: Simon presented to be more stable in his mental state presentation last night. He was with co-patient in the TV lounge interacting and watching another programme on his Lap top. He was very pleasant to approach and appropriate in his interaction with staff. Appeared to have slept through the night.

Nutrition: No concern with food and fluid intake during the shift.

Medication: He has changed his mind as per plan from his ward review to start complying with his prescribed antipsychotic medication. He took his both prescribed night medication last night without any further argumentation.

Originator Details: 24 Aug 2016 06:20 Gabriel Daramola Nursing Originally Entered by Details: 24 Aug 2016 06:28 Gabriel Daramola Last Amended by Details: 24 Aug 2016 06:28 Gabriel Daramola Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

Mental state: Simon presented to be more stable in his mental state presentation last night. He was with co-patient in the TV lounge interacting and watching another programme on his Lap top. He was very pleasant to approach and appropriate in his interaction with staff. Appeared to have slept through the night.

Nutrition: No concern with food and fluid intake during the shift.

Medication: He has changed his mind as per plan from his ward review to start complying with his prescribed antipsychotic medication. He took his both prescribed night medication last night without any further argumentation.

24/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

	<u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Aug 2016 Last Amended by Details: 27 Aug 2016 Tracey Jordan Nursing Page Numbers:46 + 47 <u>4</u> Notes <u>47</u> Simon appears generally settled, remains consumed with same preoccupations which he relates with pressured, uninterruptible speech - wants to formally apply to view his medical records, <u>says he wants to make complaint about his 'illegal assessment' whilst in police custody and his current detention under MHA 1983, refutes that he is unwell</u> Simon has spent his time between his room using his laptop and communal areas of ward sharing use of his laptop with others. Meals attended. Visited by his mother and sister. Originator Details: 23 Aug 2016 18:55 Tracey Jordan Nursing Originally Entered by Details: 23 Aug 2016 19:02 Tracey Jordan Last Amended by Details: 27 Aug 2016 12:12 Tracey Jordan Validated by Details: 27 Aug 2016 12:12 Tracey Jordan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:47	<u>47</u> Simon appears generally settled, remains consumed with same preoccupations which he relates with pressured, uninterruptible speech - wants to formally apply to view his medical records, <u>says he wants to make complaint about his 'illegal assessment' whilst in police custody and his current detention under MHA 1983, refutes that he is unwell</u> Simon has spent his time between his room using his laptop and communal areas of ward sharing use of his laptop with others. Meals attended. Visited by his mother and sister. 23/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Aug 2016 Last Amended by Details: 25 Aug 2016 Sonya Rudra Page Numbers:47 <u>Dr Rudra (CT1 Psychiatry)</u> Information leaflet printed for Simon about olanzapine.	

	Simon was with his solicitor so I have handed this to nurse Tamba to pass on to Simon. Originator Details: 23 Aug 2016 15:08 Sonya Rudra Medical Originally Entered by Details: 23 Aug 2016 15:09 Sonya Rudra Last Amended by Details: 25 Aug 2016 12:43 Sonya Rudra Validated by Details: 25 Aug 2016 12:43 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Dr Rudra (CT1 Psychiatry)</u> Information leaflet printed for Simon about olanzapine. Simon was with his solicitor so I have handed this to nurse Tamba to pass on to Simon. 23/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Aug 2016 Last Amended by Details: 24 Aug 2016 Rosemary Mills Medical Page Numbers:47 + 48 + 49 <u>47</u> Notes <u>48</u> <u>Consultant Review</u> Present: Dr Julia Cranitch (consultant), Dr Rosie Mills (ST4), Tracey (ward nurse), Zoe (medical student), Simon (patient) MDT discussion: We reviewed Simons history and events around admission on RiO notes and MHA papers. Interview: Simon joined the meeting, everyone introduced. • Simon told us that he has researched the members of staff in <u>49</u> Medication: Discussed medication, Simon referred to lots of different information from the internet about antipsychotics, a lot of which was factually incorrect. Simon agreed to trial a small dose of olanzapine 5mg - starting today. Plan 1) Simon has agreed to take olanzapine 5mg nocte.	
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	2) Give Simon some printed patient information about olanzapine from our intranet. 3) Continue to assess Simons mental state 4) Dr Cranitch intends to contact Simons mother later today. 5) Tribunal on Friday at 10:30am. Originator Details: 23 Aug 2016 14:35 Rosemary Mills Medical Originally Entered by Details: 23 Aug 2016 14:51 Rosemary Mills Last Amended by Details: 24 Aug 2016 13:37 Rosemary Mills Validated by Details: 24 Aug 2016 13:37 Rosemary Mills Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5 Folder 5</u> Page Numbers:48	<u>48</u> <u>Consultant Review</u> Present: Dr Julia Cranitch (consultant), Dr Rosie Mills (ST4), Tracey (ward nurse), Zoe (medical student), Simon (patient) MDT discussion: We reviewed Simons history and events around admission on RiO notes and MHA papers. Interview: Simon joined the meeting, everyone introduced. - Simon told us that he has researched the members of staff in the meeting online and by asking people, he thought that Dr Cranitch had worked in south America with a children's charity. We clarified this with Simon, he had obtained some incorrect information from google and linked in etc. - We explored with Simon the events leading up to his admission, this was quite difficult to achieve coherently as Simon frequently jumped from topic to topic and also would focus on events that had happened months and years ago, required a lot of prompting and direction in order to discuss the matter at hand. - Simon told us that he has an Asbo for which he is due in court on 1st September. Spoke about some events that he had run several years ago, in 2013, organised a birthday party for someone he knew, which involved obtaining a gazebo which later turned out to be stolen property, and he was charged with this. - Described being under bail conditions for about a year which involved a curfew and a tag and having to attend a London office on a daily basis. Started working on festivals, describes various roles working in entertainment and events. Simon spoke at length about a business he wanted to reopen, and spent a lot of time researching into the legal situation.	

	- Described going to Gap with anxiety in the past but didn't require any follow up, then described receiving phone calls from mental health services asking how he was, then 2 professionals (one called Sandra) came to his house for an assessment, Simon felt that this went ok and that someone was going to come and see him again in a months' time. - Simon has cut cameras up in his corridor and one inside his front door. Disagrees that this infringes anyone else's privacy despite the camera filming the communal corridor and outside the property. Told us that he likes to record himself in the flat as well in order to document 'like a journal what he is up to, and also appeared to refer to this several times as evidence of his innocence. Events around coming into hospital/progress. - Asked about threats to harm neighbour and her children, Simon denied this "I've been in children's homes my whole life, I would never harm a child" "I 100% did not make a threat". - Simon described a difficult situation with a previous neighbour "I had an altercation with another neighbour called Deborah Andrews who had a problem with alcohol". "Council moved her out of the property". She was trying to cause me problems, banging around the house and knocking on the door asking for money". - On day of recent MHA, Simon was at home, a friend had visited him with new baby, friend left. Police arrived at the property, which Simon saw with his cameras. Police were responding to a call they had received about him making a threat against his neighbours, Simon disputes this allegation. - Q: Why would the neighbours say that? Simon feels this is because he had been playing music. - Simon spoke at length about the treatment he subsequently received in the police station. Simon feels strongly that the assessment was not adequate and not legal. - Dr Cranitch explained our assessment of his progress, that he had taken antianxiety drugs for the past few days. Dr Cranitch explained that she felt that Simon was not mentally well currently and that the treatment she advises is an antipsychotic medication called olanzapine. - Simon feels that he is able to think clearly, denied any his thoughts were being interfered with in any way. Listens to radio and tv, denied that he feels radio and tv are talking about him. Pressure of speech evident, overinclusive and rambling manner of speech, at times standing up to better express himself, difficult to interrupt, frequently referring to injustices and things done illegally against him, some of his thought content was grandiose in nature, spoke of having tens of thousands of Facebook friends and that his mum had gifted him 20million emails (contacts) for his business, that his mum also	
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	owns several business, mentioned a computer game company. It was unclear as to the veracity of these statements. Tribunal: Dr Cranitch explained the tribunal process and that the tribunal may decide to end the detention under Section 2. If section 2 stopped, Simon told us that he would consider staying in hospital for a bit longer. "Whatever it takes to get out of hospital so I can go out and look after other people". If Section 2 upheld we explained that we would want Simon to remain in hospital for a while longer and take medication to treat his mental illness. RE assured Simon that we want to help him get better.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:49	<u>49</u> Medication: Discussed medication, Simon referred to lots of different information from the internet about antipsychotics, a lot of which was factually incorrect. Simon agreed to trial a small dose of olanzapine 5mg - starting today. Plan 1) Simon has agreed to take olanzapine 5mg nocte. 2) Give Simon some printed patient information about olanzapine from our intranet. 3) Continue to assess Simons mental state 4) Dr Cranitch intends to contact Simons mother later today. 5) Tribunal on Friday at 10:30am. 23/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Aug 2016 Last Amended by Details: 25 Aug 2016 Sonya Rudra Page Numbers:49 <u>WBM Haringey Assessment Ward</u> Present: Dr Cranitch (consultant), Rosemary (ST4), Dr Rudra (CT1), Dr Mumford (FY1), Theo (ward manager), Tracey (staff nurse), Tambe (nurse), Robin (ward admin), Bessie (ward manager) Nursing Feedback: Last night refused anti-psychotic. Phoned mother saying he is being made to take medication. Eventually settled. Taking lorazepam (for 4 days).	

	Bessie spoke to Simon after his mother left. Explained to him why he was detained. Reinforced about medication. He was told that he would need an injection if he refuses oral. He agreed to take medication after see by consultant. Plan: Consultant Review today Tribunal Friday 10.30 Enfield patient - can be transferred if bed becomes available Originator Details: 23 Aug 2016 09:09 Sonya Rudra Medical Originally Entered by Details: 23 Aug 2016 09:10 Sonya Rudra Last Amended by Details: 25 Aug 2016 12:43 Sonya Rudra Validated by Details: 25 Aug 2016 12:43 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>WBM Haringey Assessment Ward</u> Present: Dr Cranitch (consultant), Rosemary (ST4), Dr Rudra (CT1), Dr Mumford (FY1), Theo (ward manager), Tracey (staff nurse), Tambe (nurse), Robin (ward admin), Bessie (ward manager) Nursing Feedback: Last night refused anti-psychotic. Phoned mother saying he is being made to take medication. Eventually settled. Taking lorazepam (for 4 days). Bessie spoke to Simon after his mother left. Explained to him why he was detained. Reinforced about medication. He was told that he would need an injection if he refuses oral. He agreed to take medication after see by consultant. Plan: Consultant Review today Tribunal Friday 10.30 Enfield patient - can be transferred if bed becomes available 23/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Aug 2016 Last Amended by Details: 23 Aug 2016 Gabriel Daramola Nursing Page Numbers:49	
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	Mental state: Simon appeared settle and stable in his mental state presentation last night. He was with his parent visiting him at the time of taken over the shift. He was happy at their visit. Observed interacting with co-patients appropriately and appeared to have slept through the night. Nutrition: No concern with food and fluid intake during the shift. Medication: He continue to refuse anti-psychotic medication and takes only 1mg lorazepam. Originator Details: 23 Aug 2016 06:23 Gabriel Daramola Nursing Originally Entered by Details: 23 Aug 2016 06:28 Gabriel Daramola Last Amended by Details: 23 Aug 2016 06:28 Gabriel Daramola Validated by Details: 23 Aug 2016 06:28 Gabriel Daramola Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Mental state: Simon appeared settle and stable in his mental state presentation last night. He was with his parent visiting him at the time of taken over the shift. He was happy at their visit. Observed interacting with co-patients appropriately and appeared to have slept through the night. Nutrition: No concern with food and fluid intake during the shift. Medication: He continue to refuse anti-psychotic medication and takes only 1mg lorazepam. 22/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 22 Aug 2016 Last Amended by Details: 22 Aug 2016 Ricky Jean Nursing Page Numbers:49 + 50 <u>5</u> Notes <u>50</u> CP1 Appears fairly settled. However, seem a bit preoccupied with trying to prove he was wrongfully admitted. CP2 Good dietary/fluid intake Originator Details: 22 Aug 2016 18:07 Ricky Jean Nursing Originally Entered by Details: 22 Aug 2016 18:09 Ricky Jean Last Amended by Details: 22 Aug 2016 18:09 Ricky Jean Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:50	50 CP1 Appears fairly settled. However, seem a bit preoccupied with trying to prove he was wrongfully admitted. CP2 Good dietary/fluid intake 22/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 22 Aug 2016 Last Amended by Details: 23 Aug 2016 Elizabeth Laryea Nursing Page Numbers:50 Simon requested to speak with me. Had 1:1 with him to enable him ventilate his fears and anxieties. He complained about his admission as he feels it was unlawful for some of the mental health professionals who came to his house to assess him as he has already made a complaint about their attitudes and have recordings OF the visits. He also informed me that there is nothing wrong with him to be in hospital and to take anti-psychotic medication. He has been told that he will be given injection if he refused his oral medication after he has been seen by the consultant. He just wants to be discharge to continue with his business plan. After explaining to him about the reasons for his detention and the benefits of taking medication, also the longer he refused will prolong his stay in hospital. With a lot of reassurance, he agreed comply with medication if the consultant asked him to do so. Originator Details: 22 Aug 2016 17:30 Elizabeth Laryea Nursing Originally Entered by Details: 23 Aug 2016 09:02 Elizabeth Laryea Last Amended by Details: 23 Aug 2016 09:07 Elizabeth Laryea Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon requested to speak with me. Had 1:1 with him to enable him ventilate his fears and anxieties. He complained about his admission as he feels it was unlawful for some of the mental health professionals who came to his house to assess him as he has already made a complaint about their attitudes and have recordings OF the visits. He also	

informed me that there is nothing wrong with him to be in hospital and to take anti-psychotic medication. He has been told that he will be given injection if he refused his oral medication after he has been seen by the consultant. He just wants to be discharge to continue with his business plan. After explaining to him about the reasons for his detention and the benefits of taking medication, also the longer he refused will prolong his stay in hospital. With a lot of reassurance, he agreed comply with medication if the consultant asked him to do so.

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- **The Doctor's Folder / pub Book Issue: 5!**
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Folder 5

Originator Details: 22 Aug 2016

Last Amended by Details: 22 Aug 2016

Jack Mumford Medical

Page Numbers:50

Dr Mumford & Dr Mills

Conversation with Simons mother

Explained current treatment plan and mental state. Agreed Simon is taking the lorazepam however it has not made any notable change to his mental state.

Explained that the next stage is antipsychotic medications as was stated at our first meeting. Mum says that Simon will refuses to take these and she denies that he is delusional or paranoid.

Simon continues to decline his antipsychotics as he does not think he needs them.

We have explained the signs and symptoms that Simon is exhibited warrants the use of antipsychotics to prevent further deterioration in his physical and mental health.

We have explained that if Simon continues to refuse tablets the next stage would be an injection.

Simons mum asked about when or if he will be moved to another ward, we explained that this depends on Simons progress and how long it takes to make a fuller assessment of his needs.

Simons mum was concerned with the lack of activities on the ward and she feels this is contributing to his bad health, she says the only time there was an activity on the ward was when the solicitor on the ward and she felt these two things were linked.

Originator Details: 22 Aug 2016 16:48 Jack
Mumford Medical Originally Entered by Details: 22

Aug 2016 17:01 Jack Mumford Last Amended by Details: 22 Aug 2016 17:01 Jack Mumford Validated by Details: 22 Aug 2016 17:01 Jack Mumford Significant: No Added to Risk History: No

Contains Third Party Info: Yes, Conceal from Client: Not Concealed

Dr Mumford & Dr Mills

Conversation with Simons mother

Explained current treatment plan and mental state. Agreed Simon is taking the lorazepam however it has not made any notable change to his mental state. Explained that the next stage is antipsychotic medications as was stated at our first meeting. Mum says that Simon will refuse to take these and she denies that he is delusional or paranoid. Simon continues to decline his antipsychotics as he does not think he needs them.

We have explained the signs and symptoms that Simon is exhibiting warrants the use of antipsychotics to prevent further deterioration in his physical and mental health.

We have explained that if Simon continues to refuse tablets the next stage would be an injection.

Simons mum asked about when or if he will be moved to another ward, we explained that this depends on Simons progress and how long it takes to make a fuller assessment of his needs.

Simons mum was concerned with the lack of activities on the ward and she feels this is contributing to his bad health, she says the only time there was an activity on the ward was when the solicitor on the ward and she felt these two things were linked.

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- **The Doctor's Folder / pub Book Issue: 5!**

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Folder 5

Originator Details: 22 Aug 2016

Last Amended by Details: 25 Aug 2016

Sonya Rudra

Page Numbers:50

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Dr Rudra (CT1 Psychiatry)

Fingers reviewed:

Continue to complain of lack of sensation in tip of right fourth finger. Reports no active movement. Is convinced he has turned the ligaments. OE: Small laceration, clean and dry. Able to move passively.

Complaining of pain in left little finger.

Movement slightly limited by pain. Finger is swollen at DIPJ. No warmth. Mildly tender to palpate. Full range of passive movement.

	Imp - No improvement since Friday, however has not been wearing the finger strap. Emergency treatment not indicated currently. Plan: Finger strapped Simon will discuss with consultant in his next review whether he can have leave for an XR as he says it is his right Originator Details: 22 Aug 2016 12:27 Sonya Rudra Medical Originally Entered by Details: 22 Aug 2016 12:31 Sonya Rudra Last Amended by Details: 25 Aug 2016 12:43 Sonya Rudra Validated by Details: 25 Aug 2016 12:43 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:51	<u>51</u> <u>Dr Rudra (CT1 Psychiatry)</u> Fingers reviewed: Continue to complain of lack of sensation in tip of right fourth finger. Reports no active movement. Is convinced he has turned the ligaments. OE: Small laceration, clean and dry. Able to move passively. Complaining of pain in left little finger. Movement slightly limited by pain. Finger is swollen at DIPJ. No warmth. Mildly tender to palpate. Full range of passive movement. Imp - No improvement since Friday, however has not been wearing the finger strap. Emergency treatment not indicated currently. Plan: Finger strapped Simon will discuss with consultant in his next review whether he can have leave for an XR as he says it is his right 22/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 22 Aug 2016 Last Amended by Details: 25 Aug 2016 Sonya Rudra Page Numbers:51 <u>WBM Haringey</u> Present: Dr Cranitch (consultant), Dr Rudra (CT1), Rosemary (ST4), Dr. Mumford (FY2), Fiona (psychotherapy placement), Dayo (nurse), Robin (admin), Bessie (ward manager)	

	Nursing feedback: Simon settled, reported some pain and was given painkillers. Last night he was making a recording of staff. Refused olanzapine and made a recording of being made to stop. It was found that he recorded multiple social workers and medical consultations. Mother phoned to express that he does not need medication. Unhappy about him being given anti-psychotic. He is taking his lorazepam. Plan Offer oral anti-psychotic, if not improving in mental state by tomorrow (following 4 days of anti-anxiolytic) and continues to refuse, then give IM from tomorrow Needs treatment ward in Enfield Review finger today Originator Details: 22 Aug 2016 11:09 Sonya Rudra Medical Originally Entered by Details: 22 Aug 2016 11:09 Sonya Rudra Last Amended by Details: 25 Aug 2016 12:43 Sonya Rudra Validated by Details: 25 Aug 2016 12:43 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>WBM Haringey</u> Present: Dr Cranitch (consultant), Dr Rudra (CT1), Rosemary (ST4), Dr. Mumford (FY2), Fiona (psychotherapy placement), Dayo (nurse), Robin (admin), Bessie (ward manager) Nursing feedback: Simon settled, reported some pain and was given painkillers. Last night he was making a recording of staff. Refused olanzapine and made a recording of being made to stop. It was found that he recorded multiple social workers and medical consultations. Mother phoned to express that he does not need medication. Unhappy about him being given anti-psychotic. He is taking his lorazepam. Plan Offer oral anti-psychotic, if not improving in mental state by tomorrow (following 4 days of anti-anxiolytic) and continues to refuse, then give IM from tomorrow Needs treatment ward in Enfield Review finger today 22/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5! Stage 5</u>	
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	<u>Folder 5</u> Originator Details: 22 Aug 2016 Last Amended by Details: 23 Aug 2016 Gabriel Daramola Nursing Page Numbers:51 <u>51</u> Notes <u>52</u> Simon at about 21:35hrs was called for his prescribed night medication. He was given his 1mg Lorazepam and 5mg Olanzapine tablet as prescribed for the night. He refused the 5mg Olanzapine, with claim that ward doctor that prescribed the medication did not Originator Details: 22 Aug 2016 06:39 Gabriel Daramola Nursing Originally Entered by Details: 21 Aug 2016 22:50 Gabriel Daramola Last Amended by Details: 23 Aug 2016 06:22 Gabriel Daramola Validated by Details: 23 Aug 2016 06:22 Gabriel Daramola Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:52	<u>52</u> Simon at about 21:35hrs was called for his prescribed night medication. He was given his 1mg Lorazepam and 5mg Olanzapine tablet as prescribed for the night. He refused the 5mg Olanzapine, with claim that ward doctor that prescribed the medication did not discussed Olanzapine with him. He also went further to contradict himself that same prescribing doctor has instructed him that he doesn't have to take any anti-psychotic medication. Nursing staff then tried to explore the reason why he doesn't want to take his medication; Perhaps due to taste or difficulty in swallowing, so that alternative route could be explored when feeding back to the MDT during white board meetings. Instead of listening to the staff talking to him, he claimed to have taken picture and recording the staff present during the interaction. At this point, the staff asked him to delete the content if he had actually done that because it's not with his consent and it's not an acceptable practice. Instead of deleting the content of what he might have taken, he ran to his room to phone his mother, that he was being advised to take his prescribed medication against his will and that he could be given injection if he continues to refuse medication orally. The mother then phones the ward to inform the ward staff GD that her son, if going by the previous judgment they have got from the Supreme Court. Simon has the right to record any interaction at any public place, in which hospital is one of them. The mother went further to inform staff that she has	

	spoken with the team doctor (no name given) about her son medication and that it was an agreement that Simon should only be taken 1mg Lorazepam now while subsequent medication review has to be weekly. Hence, they have not done further review, no staff should encourage son to take any anti-psychotic medication prescribed on the ward. The mother claimed that the said doctor and her were of the opinion to wait and see how Simon reacts to Lorazepam before he can think of taking any other medication. In addition to the above, Simon himself played the audio recording of interactions with doctor and social workers from the previous encounter, when trying to delete the one he did tonight. He then claimed that he has not present this recording in the court because he doesn't want that social worker in the recorded content sacked. However, the shift coordinator advised the mother to work with care team in a way that could enhance the best interest of Simon. Also, to encourage son to be compliant with his treatment plan as an inpatient on the ward. Furthermore, Simon to stop recording and taking picture of caring team without their consent because, it's not part of treatment package. 21/08/2016 <u>The Doctor's Folder / pub Book</u> <u>Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Aug 2016 Last Amended by Details: 21 Aug 2016 Ekundayo Okafor Nursing Page Numbers:52 Simon's mental state appears reasonably settled. Observed to be interacting well with other service user's and peers. Spent most of his time in the day area and was observed to be listening to music on his lap top. Eating and drinking well. Not on any day medication. He posed no management problems. Originator Details: 21 Aug 2016 16:42 Ekundayo Okafor Nursing Originally Entered by Details: 21 Aug 2016 16:46 Ekundayo Okafor Last Amended by Details: 21 Aug 2016 16:46 Ekundayo Okafor Validated by Details: 21 Aug 2016 16:46 Ekundayo Okafor Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon's mental state appears reasonably settled. Observed to be interacting well with other service user's and peers. Spent most of his time in the day area and was observed to be listening to music on his lap top.	
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Eating and drinking well.
Not on any day medication.
He posed no management problems.

21/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 21 Aug 2016

Last Amended by Details: 21 Aug 2016

50 Tracey Jordan Nursing

Page Numbers:52

Simon reported painful finger, offered and accepted pm Ibuprofen.

Simon is requesting to see his medical notes, Simon informed that he should put same in writing and forward same to Medical Records Dept, SAH.

Originator Details: 21 Aug 2016 15:50 Tracey Jordan Nursing Originally Entered by Details: 21 Aug 2016 15:52 Tracey Jordan Last Amended by Details: 21 Aug 2016 15:52 Tracey Jordan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Simon reported painful finger, offered and accepted pm Ibuprofen.

Simon is requesting to see his medical notes, Simon informed that he should put same in writing and forward same to Medical Records Dept, SAH.

21/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 21 Aug 2016

Last Amended by Details: 21 Aug 2016 06

Gabriel Daramola Nursing

Page Numbers:52

Mental state; Simon appeared stable in his mental state presentation during this shift. Spent quality time with patient in the TV lounge watching Olympic games before back to his bed room. Appeared to have slept through the night.

Nutrition: No concern with food and fluid intake.

Medication: Continue to refuse his anti-psychotic medication.

Originator Details: 21 Aug 2016 06:04 Gabriel Daramola Nursing Originally Entered by Details: 21

	Aug 2016 06:11 Gabriel Daramola Last Amended by Details: 21 Aug 2016 06:11 Gabriel Daramola Validated by Details: 21 Aug 2016 06:11 Gabriel Daramola Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Mental state; Simon appeared stable in his mental state presentation during this shift. Spent quality time with patient in the TV lounge watching Olympic games before back to his bed room. Appeared to have slept through the night. Nutrition: No concern with food and fluid intake. Medication: Continue to refuse his anti-psychotic medication.	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:53	20/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 20 Aug 2016 Last Amended by Details: 20 Aug 2016 Angelliner Nassuna Nursing Page Numbers:53 CP1: Simon has presented mentally stable and calm in mood throughout the shift. Polite in approach. Observed to be engaging well with fellow peers, spent the day playing music on his laptop whilst in the tv lounge with peers also playing ward based games. He reported he cannot wait to go home as his missing hi partner and being home. He was visited by mother and girlfriend this afternoon and they spent some time together in the quite room. CP2: Attended to his personal care. He ate and drank well. Utilised the garden to smoke and relax. CP5: His not on day medication. Phoenix Wing Duty Dr Theresa Bacarese-Hamilton, CT3 Asked to chase blood results however the lab noted the bloods had been taken On 18/08/16 and that the results should have been requested yesterday via the results line, which does not run on the weekend. They reported his phosphate was slightly raised at 0.84 but said all other results were within normal range. They advised the line needed to be kept free as it is A&E emergency line and advised us to get the results on Monday via the results line.	

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Originator Details: 20 Aug 2016 16:23 Angelliner Nassuna Nursing Originally Entered by Details: 20 Aug 2016 16:37 Angelliner Nassuna Last Amended by Details: 20 Aug 2016 16:37 Angelliner Nassuna Validated by Details: 20 Aug 2016 16:37 Angelliner Nassuna Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

CP1: Simon has presented mentally stable and calm in mood throughout the shift. Polite in approach. Observed to be engaging well with fellow peers, spent the day playing music on his laptop whilst in the tv lounge with peers also playing ward based games. He reported he cannot wait to go home as his missing hi partner and being home. He was visited by mother and girlfriend this afternoon and they spent some time together in the quite room.

CP2: Attended to his personal care. He ate and drank well. Utilised the garden to smoke and relax.

CP5: His not on day medication.

Phoenix Wing

Duty

Dr Theresa Bacarese-Hamilton, CT3

Asked to chase blood results however the lab noted the bloods had been taken On

18/08/16

and that the results should have been requested yesterday via the results line, which does not run on the weekend.

They reported his phosphate was slightly raised at 0.84 but said all other results were within normal range.

They advised the line needed to be kept free as it is A&E emergency line and advised us to get the results on Monday via the results line.

20/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 20 Aug 2016

Daramola Last Amended by Details: 21 Aug 2016

Gabriel Daramola Nursing

Page Numbers:53

Mental state: Simon appeared calm in mental state presentation at the start of the shift. Spent quality time with others in the TV lounge and garden for fresh air.

Nutrition: No concern with food and fluid intake during the shift.

Medication: He was very difficult with compliant with his prescribed medication. He refused the 5mg Olanzapine prescribed for him at night. He accepted taken 1mg lorazepam after much persuasion but later

	came back to request for the names of both medications prescribed for him. Half an hour later again, he came with complaint that he might be having side effect from medication that was refused. He was reminded that he never had the medication Olanzapine and he cannot have any side effect from what he did not take. He went further to say, may be its from 1mg lorazepam but staff re-assured him that he's not having any side effect but need to calm down and relax in his bed. He eventually settled down and slept. Still sleeping at time of this entry. Originator Details: 20 Aug 2016 06:15 Gabriel Daramola Nursing Originally Entered by Details: 20 Aug 2016 06:32 Gabriel Daramola Last Amended by Details: 21 Aug 2016 06:03 Gabriel Daramola Validated by Details: 21 Aug 2016 06:03 Gabriel Daramola Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Mental state: Simon appeared calm in mental state presentation at the start of the shift. Spent quality time with others in the TV lounge and garden for fresh air. Nutrition: No concern with food and fluid intake during the shift. Medication: He was very difficult with compliant with his prescribed medication. He refused the 5mg Olanzapine prescribed for him at night. He accepted taken 1mg lorazepam after much persuasion but later came back to request for the names of both medications prescribed for him. Half an hour later again, he came with complaint that he might be having side effect from medication that was refused. He was reminded that he never had the medication Olanzapine and he cannot have any side effect from what he did not take. He went further to say, may be its from 1mg lorazepam but staff re-assured him that he's not having any side effect but need to calm down and relax in his bed. He eventually settled down and slept. Still sleeping at time of this entry. 19/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Aug 2016 Last Amended by Details: 19 Aug 2016 Tracey Jordan Page Numbers:53 <u>53</u>	
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	Notes 54 Simon has been generally settled. Bessie Ward Mgr. spoke with Simon's father - father reported that another family member was prescribed Clozapine which had to be immediately stopped, he is concerned that we proceed cautiously with any prescribed medication for Simon. Father earlier reported his concern that Simon's swollen finger was being neglected, I understand he spoke with Bessie about same. Ibuprofen, 400mg, oral tablets given to Simon for painful swollen finger. Meals attended. Socialised with peers. First thing this morning Simon communicated that he was unhappy about another patient M.A. being on the ward, agitating, intimidating and upsetting other patients including himself, related other patients shared his opinion that other 'aggressive' patient should not be on this ward and be moved elsewhere, said he could not guarantee not 'taking on' M.A., 'I don't want to go back to prison, I'm on an ASBO. I will defend myself. I counselled Simon to maintain his distance, not to take matters into his own hands, not involve himself with M.A., to report any concerns to nursing staff for staff to manage any challenging/aggressive behaviour and in so doing maintain the welfare and safety of all persons. Originator Details: 19 Aug 2016 19:14 Tracey Jordan Nursing Originally Entered by Details: 19 Aug 2016 19:28 Tracey Jordan Last Amended by Details: 19 Aug 2016 19:28 Tracey Jordan Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:54	54 Simon has been generally settled. Bessie Ward Mgr. spoke with Simon's father - father reported that another family member was prescribed Clozapine which had to be immediately stopped, he is concerned that we proceed cautiously with any prescribed medication for Simon. Father earlier reported his concern that Simon's swollen finger	

	was being neglected, I understand he spoke with Bessie about same. Ibuprofen, 400mg, oral tablets given to Simon for painful swollen finger. Meals attended. Socialised with peers. First thing this morning Simon communicated that he was unhappy about another patient M.A. being on the ward, agitating, intimidating and upsetting other patients including himself, related other patients shared his opinion that other 'aggressive' patient should not be on this ward and be moved elsewhere, said he could not guarantee not 'taking on' M.A., 'I don't want to go back to prison, I'm on an ASBO. I will defend myself. I counselled Simon to maintain his distance, not to take matters into his own hands, not involve himself with M.A., to report any concerns to nursing staff for staff to manage any challenging/aggressive behaviour and in so doing maintain the welfare and safety of all persons. 19/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Aug 2016 Last Amended by Details: 19 Aug 2016 Jack Mumford Page Numbers:54 Spoke to Simons mother over the phone. Explained the changes to meds as outlined in the below entry. Simons mum is unhappy, she said we are starting too many drugs at once. She said 'what you are trying to do is put everything in his way - so it goes against him when he's refusing medication. Now he's going to have this on his record, I feel your putting things in his path.' I explained that the consultant feels that this medicine will be beneficial to his mental state which is why we have prescribed it. Simons mum has also asked that we record all collateral history or mention of her in the notes as third party information as she does not want Simon to read it when he requests a copy of his notes. Please disregard all statements from his mother when providing Simon with his medical notes. This has been discussed and agreed with Dr Humphreys. Originator Details: 19 Aug 2016 12:27 Jack Mumford Medical Originally Entered by Details: 19 Aug 2016 12:36 Jack Mumford Last Amended by Details: 19 Aug 2016 12:36 Jack Mumford	
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Validated by Details: 19 Aug 2016 12:36 Jack Mumford Significant: No Added to Risk History: No
Contains Third Party Info: Yes, Conceal from Client: Not Concealed

Spoke to Simons mother over the phone. Explained the changes to meds as outlined in the below entry. Simons mum is unhappy, she said we are starting too many drugs at once. She said 'what you are trying to do is put everything in his way - so it goes against him when he's refusing medication. Now he's going to have this on his record, I feel your putting things in his path.'
I explained that the consultant feels that this medicine will be beneficial to his mental state which is why we have prescribed it.
Simons mum has also asked that we record all collateral history or mention of her in the notes as third party information as she does not want Simon to read it when he requests a copy of his notes. Please disregard all statements from his mother when providing Simon with his medical notes. This has been discussed and agreed with Dr Humphreys.

19/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 19 Aug 2016

Last Amended by Details: 19 Aug 2016

Jack Mumford Medical

Page Numbers:54

Went to see Simon to explain changes to medication.

Explained that we will prescribe lorazepam only at night for now as he does not want to take it during the day.

I have explained that the consultant Dr Cranitch would like him to be started on 5mg olanzapine. The patient was unhappy about this and said he will not take the medication as he does not think he needs it.

I have explained that despite this we will still prescribe it and offer it to him if he would like to take it. I have explained that it will be beneficial to improving his mental health.

Originator Details: 19 Aug 2016 12:18 Jack Mumford Medical Originally Entered by Details: 19 Aug 2016 12:27 Jack Mumford Last Amended by Details: 19 Aug 2016 12:27 Jack Mumford
Validated by Details: 19 Aug 2016 12:27 Jack Mumford Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

	Went to see Simon to explain changes to medication. Explained that we will prescribe lorazepam only at night for now as he does not want to take it during the day. I have explained that the consultant Dr Cranitch would like him to be started on 5mg olanzapine. The patient was unhappy about this and said he will not take the medication as he does not think he needs it. I have explained that despite this we will still prescribe it and offer it to him if he would like to take it. I have explained that it will be beneficial to improving his mental health. 19/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Aug 2016 Last Amended by Details: 25 Aug 2016 Sonya Rudra Medical Page Numbers:54 + 55 <u>54</u> Notes <u>55</u> <u>WBM Haringey Ward</u> Dr Humphries (ST6), Dr Rudra (CT1), Dr Mumford (FY2), Theo (nurse in charge), Tracey (staff nurse), Robin (ward admin), Bessie (ward manager) Nursing feedback: Background reviewed. Refused clonazepam last night as wanted lorazepam. Had his ECG yesterday. Mother had reactions against injections. Plan: Prescribe lorazepam at night and PRN Offer olanzapine 5mg at night, if not taking then review next week and consider to be given IM - inform patient Allocation of CCO requested Originator Details: 19 Aug 2016 09:13 Sonya Rudra Medical Originally Entered by Details: 19 Aug 2016 09:18 Sonya Rudra Last Amended by Details: 25 Aug 2016 12:43 Sonya Rudra Validated by Details: 25 Aug 2016 12:43 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u>	<u>55</u> <u>WBM Haringey Ward</u>	

<u>Stage 5</u> <u>Folder 5</u> Page Numbers:55	Dr Humphries (ST6), Dr Rudra (CT1), Dr Mumford (FY2), Theo (nurse in charge), Tracey (staff nurse), Robin (ward admin), Bessie (ward manager) Nursing feedback: Background reviewed. Refused clonazepam last night as wanted lorazepam. Had his ECG yesterday. Mother had reactions against injections. Plan: Prescribe lorazepam at night and PRN Offer olanzipine 5mg at night, if not taking then review next week and consider to be given IM - inform patient Allocation of CCO requested 19/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Aug 2016 Last Amended by Details: 19 Aug 2016 Iloabuchi Chukwunweike Page Numbers:55 Simon presented as fairly settled and calm in mood. He spent time socialising with fellow service users within the communal area, played music with his laptop and made quite a few phone calls thereafter. He had snacks and hot drink during tea time. However, he refused his night medication as prescribed. Retired to bed and appears to have slept from midnight. Originator Details: 19 Aug 2016 06:55 Iloabuchi Chukwunweike Nursing Originally Entered by Details: 19 Aug 2016 07:04 Iloabuchi Chukwunweike Last Amended by Details: 19 Aug 2016 07:04 Iloabuchi Chukwunweike Validated by Details: 19 Aug 2016 07:04 Iloabuchi Chukwunweike Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Simon presented as fairly settled and calm in mood. He spent time socialising with fellow service users within the communal area, played music with his laptop and made quite a few phone calls thereafter. He had snacks and hot drink during tea time. However, he refused his night medication as prescribed. Retired to bed and appears to have slept from midnight.	
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18/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 18 Aug 2016

Last Amended by Details: 18 Aug 2016

Folake Idowu

Page Numbers:55

Simon presented fairly settled on the ward.

He has been eating and drinking adequately.

He appeared kept and was not on any day medication.

he has not posed any managerial issue on the ward.

Originator Details: 18 Aug 2016 17:51 Folake Idowu Nursing Originally Entered by Details: 18 Aug 2016 17:55 Folake Idowu Last Amended by Details: 18 Aug 2016 17:55 Folake Idowu Validated by Details: 18 Aug 2016 17:55 Folake Idowu Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Simon presented fairly settled on the ward. He has been eating and drinking adequately.

He appeared kept and was not on any day medication.

he has not posed any managerial issue on the ward.

18/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
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Originator Details: 18 Aug 2016

Last Amended by Details: 18 Aug 2016

Ekundayo Oka

Page Numbers:55

1:1 Session

Simon approached me this morning stating that he wants to talk to me. I obliged him and went to his room to talk to him.

According to Simon he does not think he is ill and he now went on to say that there is a dead rat in behind his room.

I asked him the exact location and he replied "just by my window". I went to investigate this and saw the rat by his window.

I reassured him stating I will immediately inform Estate and Facilities.

	Logged in on Estate and facilities website. I informed him that this has been done and will be cleared ASAP. He seems happy about this. Originator Details: 18 Aug 2016 17:13 Ekundayo Okafor Nursing Originally Entered by Details: 18 Aug 2016 17:37 Ekundayo Okafor Last Amended by Details: 18 Aug 2016 17:37 Ekundayo Okafor Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed 1:1 Session Simon approached me this morning stating that he wants to talk to me. I obliged him and went to his room to talk to him. According to Simon he does not think he is ill and he now went on to say that there is a dead rat in behind his room. I asked him the exact location and he replied "just by my window". I went to investigate this and saw the rat by his window. I reassured him stating I will immediately inform Estate and Facilities. Logged in on Estate and facilities website. I informed him that this has been done and will be cleared ASAP. He seems happy about this.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:56	18/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 18 Aug 2016 Last Amended by Details: 18 Aug 2016 Jack Mumford Page Numbers:56 Offered a Simon bloods, physical and ECG, Simon consented. Bloods were taken aseptically and sent to NMUH ECG showed Normal sinus rhythm Examination: pulse 76bpm, warm and well perfused, cap refill <2 secs. No signs of anaemia, no central or peripheral cyanosis. Heart sounds normal, no added sounds. Chest clear. Abdo soft non-tender No calf swelling or tenderness. Neurology not formally assessed but grossly intact. On 5th finger of right 56	

	Originator Details: 18 Aug 2016 11:34 Jack Mumford Medical Originally Entered by Details: 18 Aug 2016 11:54 Jack Mumford Last Amended by Details: 18 Aug 2016 11:54 Jack Mumford Validated by Details: 18 Aug 2016 11:54 Jack Mumford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Offered a Simon bloods, physical and ECG, Simon consented. Bloods were taken aseptically and sent to NMUH ECG showed Normal sinus rhythm Examination: pulse 76bpm, warm and well perfused, cap refill <2 secs. No signs of anaemia, no central or peripheral cyanosis. Heart sounds normal, no added sounds. Chest clear. Abdo soft non-tender No calf swelling or tenderness. Neurology not formally assessed but grossly intact. On 5th finger of right-hand patient has a small laceration, appears clean, no erythema or pus, probably a couple of days old, unsure how he did it. Patient concerned that he has cut through his tendons, I have reassured the patient that the cut does not appear deep enough for this to have happened and that his range of movement is limited only by pain. On the 5th finger of his right hand, Simon has swelling over his DIP a black appearance around the cuticle which looks like dry blood. The joint is not hot to touch and there is no obvious erythema. Range of movement is slightly limited by pain during active movement however it is only mildly tender to palpate and range of movement is full during passive movement. Reviewed by Dr Rudra - agrees with assessment. Simon reports falling on finger yesterday and has been swollen and painful since. Poor ROM (active and passive). Currently on section and new to ward, agreed to remain on ward so that mental state can be monitored. Currently not for A&E as not emergency. However, have neighbour strapped finger and consider sending for XR with section 17 leave if no improvement next week. Simon was happy with this and agreed to plan. Imp: Likely bruised DIP Plan: 1) Chase bloods 2) Paracetamol PRN 3) Neighbour strap swollen finger 4) Review in 5 days, if no improvement consider x-ray of the left 5th finger	
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	18/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 18 Aug 2016 Last Amended by Details: 25 Aug 2016 Sonya Rudra Medical Page Numbers:56 <u>56</u> Notes <u>57</u> <u>WBM Haringey Ward</u> Present: Dr Rudra (CT1), Dr Mumford (FY2), Folake (staff nurse), Herine (staff nurse) James (student nurse), Robin (ward admin) No changes, still refusing Lorazepam - says it will make him drowsy for his court case. Unhappy about being on the ward. Says he does not like the water. Says he has abdominal pain. Complaining about the pain. Plan Ensure he has given information about his medication Encourage oral tablets. Consider depot Physical, bloods, ECG Originator Details: 18 Aug 2016 09:12 Sonya Rudra Medical Originally Entered by Details: 18 Aug 2016 09:12 Sonya Rudra Last Amended by Details: 25 Aug 2016 12:43 Sonya Rudra Validated by Details: 25 Aug 2016 12:43 Sonya Rudra Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:57	<u>57</u> <u>WBM Haringey Ward</u> Present: Dr Rudra (CT1), Dr Mumford (FY2), Folake (staff nurse), Herine (staff nurse) James (student nurse), Robin (ward admin) No changes, still refusing Lorazepam - says it will make him drowsy for his court case. Unhappy about being on the ward. Says he does not like the water. Says he has abdominal pain. Complaining about the pain. Plan Ensure he has given information about his medication Encourage oral tablets. Consider depot Physical, bloods, ECG	

18/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
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Folder 5

Originator Details: 18 Aug 2016

Last Amended by Details: 18 Aug 2016

Titilayo Alimi Nursing

Page Numbers:57

72 Hours: Nocte report:

Simon appeared fairly calm during the early part of the night shift, was observed using his laptop in his bed area and seems to be keeping to himself. He had night snacks and hot drinks during refreshment period. He refused his newly prescribed night medication and appeared to have slept fairly well through the night.

Originator Details: 18 Aug 2016 06:00 Titilayo Alimi Nursing Originally Entered by Details: 18 Aug 2016 06:05 Titilayo Alimi Last Amended by Details: 18 Aug 2016 06:05 Titilayo Alimi Validated by Details: 18 Aug 2016 06:05 Titilayo Alimi Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

72 Hours: Nocte report:

Simon appeared fairly calm during the early part of the night shift, was observed using his laptop in his bed area and seems to be keeping to himself. He had night snacks and hot drinks during refreshment period. He refused his newly prescribed night medication and appeared to have slept fairly well through the night.

17/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
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Originator Details: 17 Aug 2016

Last Amended by Details: 17 Aug 2016

Herine Otero

Page Numbers:57

CP1: Simon remained very agitated and unpredictable during the shift.

CP2: He ate and drank adequately during the shift.

CP3: His family came to attend his view meeting and he became very loud and argumentative.

CP5: he was not on any day medication.

Originator Details: 17 Aug 2016 17:41 Herine Otero Nursing Originally Entered by Details: 17 Aug 2016 17:41 Herine Otero Last Amended by

	Details: 17 Aug 2016 17:41 Herine Otero Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed CP1: Simon remained very agitated and unpredictable during the shift. CP2: He ate and drank adequately during the shift. CP3: His family came to attend his view meeting and he became very loud and argumentative. CP5: he was not on any day medication. 17/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 17 Aug 2016 Last Amended by Details: 17 Aug 2016 Yowhans Beyene Pharmacy Page Numbers:57 <u>57</u> Notes <u>58</u> Medicines reconciliation 2 completed on Haringey assessment ward at St Ann's hospital on 17/08/2016 Source 1: GP Fax No current medication Source: Previous notes From RiO Nil Source 3: Previous supply from St Ann's Hospital Pharmacy (JAC) Nil Allergies St ADRs: no allergies recorded (GP fax) Alcohol consumption: Nil (RiO) Cigarettes per day: Nil (GP) Medication Chart on 16/08/2016 Regular: Nil PRN Lorazepam 1-2mg PO max 4mg/24h Zopiclone 7.5mg ON Originator Details: 17 Aug 2016 14:19 Yowhans Beyene Pharmacy Originally Entered by Details: 17 Aug 2016 14:19 Yowhans Beyene Last Amended by Details: 17 Aug 2016 14:19 Yowhans Beyene Validated by Details: 17 Aug 2016 14:19 Yowhans Beyene Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	<u>58</u> Medicines reconciliation 2 completed on Haringey assessment ward at St Ann's hospital on 17/08/2016	

Page Numbers:58

Source 1: GP Fax

No current medication

Source: Previous notes From RiO

Nil

Source 3: Previous supply from St Ann's Hospital Pharmacy (JAC)

Nil

Allergies St ADRs: no allergies recorded (GP fax)

Alcohol consumption: Nil (RiO)

Cigarettes per day: Nil (GP)

Medication Chart on

16/08/2016

Regular: Nil PRN

Lorazepam 1-2mg PO max 4mg/24h Zopiclone

7.5mg ON

17/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

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Originator Details: 17 Aug 2016

Last Amended by Details: 17 Aug 2016

Jack Mumford Medical

Page Numbers:58 + 59 +60 + 61

5

Notes

59

Haringey Ward CPA Review Meeting

CORDELL, Simon P (Mr)

MHA Status: Sec.2

Community Team: Enfield Community EIP team

Present:

Dr Humphreys (SpR),

Dr Mumford (F2),

James (student nurse),

Amal (care-coordinator),

Mother Discussion with professionals:

Notes reviewed from admission: clerking and progress on the ward. Section 2 papers reviewed.

- Amal:

Went over history with us, paranoia surrounding neighbours, has

60

them before, but could inform them after.

We have explained that if he repeatedly refuses tablet medications, we may need to consider long term injections as treatment, however we would discuss this with them first if possible, and this would depend on

61

4) If no improvement with Lorazepam consider antipsychotic

Originator Details: 17 Aug 2016 13:10 Jack

Mumford Medical Originally Entered by Details: 17

Aug 2016 13:10 Jack Mumford Last Amended by

Details: 17 Aug 2016 13:10 Jack Mumford

	Validated by Details: 17 Aug 2016 13:10 Jack Mumford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:59	<u>59</u> <u>Haringey Ward CPA Review Meeting</u> CORDELL, Simon P (Mr) MHA Status: Sec.2 Community Team: Enfield Community EIP team Present: Dr Humphreys (SpR), Dr Mumford (F2), James (student nurse), Amal (care-coordinator), Mother Discussion with professionals: Notes reviewed from admission: clerking and progress on the ward. Section 2 papers reviewed. - Amal: Went over history with us, paranoia surrounding neighbours, has been arrested with alleged threats to kill neighbours and their children Interview with the patient: Simon came into the room loud and frustrated that he is held here under section. Simon is not engaging with questions, talking rapidly about his business ventures, lots of derailing talking about unrelated themes. Saying he was held hostage in a call and was held illegally. Repeatedly talking of a CD, he has which holds a recording proving that the warrant was illegally served. Claims he has bought a lot of expensive equipment to start his new festival, and his new business ventures. Says he got the money from selling some of his own possessions such as scramblers and inheritance from his Nan. Simon denies any wrongdoing categorically. Saying that he is being persecuted, says the section 2 is wrong and was conducted illegally. Denies he was assessed under MHA. Denies that anyone spoke to him with regards to a mental health assessment. Simon began accusing his mother of trying to get him put away because she has not written a full appeal letter. Became extremely irate, shouting at his mother saying 'is this what I mean to you, I will never speak to you again' Admits being on bail for threats to neighbours. 08/10/2016 is his court date. Claims he is being set up. Says to us he was accused of saying 'fuck you I will kill you' to neighbour but denies this ever happened. Claims the police continually changed their story regarding where he was when this incident occurred. Asked about energy levels - reports being up every morning at 6am, says he works all the time. Reports physical health: is good. Simon has Crohn's disease.	

	Claims he is not a danger to himself or others. Says the police are claiming he is other people. When explained that he is held under section 2 and won't be released as there is an ongoing period of assessment Simon became extremely angry, stood up, pacing up and down the room, shouting loudly, does not think he is unwell. Simon then left the room for a period of time, heard shouting in the corridor, then asked to return to room, said he would calm, he quickly started shouting at mother and uncle who also shouted back. Explained we wanted to give anti-anxiety medication called lorazepam, Simon became very irate saying we were trying to 'stich him up' we were trying to 'end his life'. Extra nurses had to be called and Simon had to be escorted from the room. Collateral from Mother Mother also claims that the police unplugged the CCTV outside his house. Claims that son is not paranoid about the police, claims they have persecuted him for over 20 years, always send 15+ police to his house when they want to speak to or arrest him. Claims there have been numerous arrests of Simon where he has been innocent but they have charged him. Claims that he should not have been found guilty of throwing an illegal party for his friend. Reports: got carbon monoxide poisoning in 2014, feels that's when his health deteriorated. Mother does not want Simon to receive injections. We have explained we cannot guarantee this, and there may be some emergency situations we need to give injections where we will not be able to guarantee that we can inform	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:60	<u>60</u> them before, but could inform them after. We have explained that if he repeatedly refuses tablet medications, we may need to consider long term injections as treatment, however we would discuss this with them first if possible, and this would depend on his mental state. Also explained that if lorazepam is not sufficient by itself, we may need to consider further treatments i.e. antipsychotics. Mother reports: Simon often thinks things said on the TV are about him, and if you tell him otherwise, he gets very angry. When discussed with family on their own, mother and uncle did express the view that Simon is unwell. Saying he seems 'manic'. <u>Brief mental state examination:</u> A - Appearance, slightly unkempt. Erratic behaviour S - Pressured speech, rapid rate, loud volume. De-railing and tangentiality.	

	M - Simon is angry and frustrated at being detained. Seems hyper-aroused, shouting. T - Thought disorder present. Paranoid delusions. Grandiose delusions. P - No obvious abnormal perception although cannot be sure. C - Cognition not formally assessed. Orientated to time place and person. I - No insight into mental health Brief risk assessment: To self - Moderate (With his behaviour towards others) To others - Moderate Other - n/a Capacity to decide about suggested treatment plan: No Consent to admission: No Consent to Treatment/medication: No Current regular medication: None Physical Examination: no Blood tests: no ECG: no UDS: no Crohns - Possibly last admitted due to flare Nov 2014 Do NOT give steroids due to worsening of mania. Plan: 1) Physical, bloods and ECG 2) Start Lorazepam 1mg BD and PRN 3) Continue to monitor mental state	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:61	<u>61</u> 4) If no improvement with Lorazepam consider antipsychotic 17/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 17 Aug 2016 Mumford Last Amended by Details: 17 Aug 2016 Jack Mumford Page Numbers:61 Dr Humphreys (SpR), Dr Mumford (F2), Herine (Student nurse), James (Student Nurse), Dayo (Nurse), Robin (Ward admin) Nursing feedback: Settled last night, no issues. Yesterday unpredictable and irritable. Confrontation with MAA. MAA bothering Simon and his family in quiet room. Not fully compliant with meds. Drs feedback: Plan: 1) 72hr meeting today 2) Review meds 3) Offer physical, bloods, ECG	

Originator Details: 17 Aug 2016 09:11 Jack Mumford Medical Originally Entered by Details: 17 Aug 2016 09:11 Jack Mumford Last Amended by Details: 17 Aug 2016 09:11 Jack Mumford Validated by Details: 17 Aug 2016 09:11 Jack Mumford Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

Dr Humphreys (SpR),
Dr Mumford (F2),
Herine (Student nurse),
James (Student Nurse),
Dayo (Nurse),
Robin (Ward admin)

Nursing feedback:

Settled last night, no issues. Yesterday unpredictable and irritable. Confrontation with MAA. MAA bothering Simon and his family in quiet room. Not fully compliant with meds.

Drs feedback:

Plan:

- 1) 72hr meeting today
- 2) Review meds
- 3) Offer physical, bloods, ECG

17/08/2016

• **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

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Originator Details: 17 Aug 2016

Last Amended by Details: 17 Aug 2016

Caroline Acolatse Nursing

Page Numbers:61 + 62

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He was in his bed area at the start of the night shift. During checks he was observed at times pacing about in his room or talking to one on his phone.

He had night snack and hot drink and soon went to his bed area. He is not on prescribed night

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Haringey Assessment

Ward Duty: Dr Bacarese-Hamilton, CT3

Attended the ward to offer Simon physical, ECG and blood test.

Simon was

Originator Details: 17 Aug 2016 06:19 Caroline Acolatse Nursing Originally Entered by Details: 17 Aug 2016 06:27 Caroline Acolatse Last Amended by Details: 17 Aug 2016 06:27 Caroline Acolatse Validated by Details: 17 Aug 2016 06:27 Caroline Acolatse Significant: No Added to Risk History: No

	Contains Third Party Info: No Conceal from Client: Not Concealed He was in his bed area at the start of the night shift. During checks he was observed at times pacing about in his room or talking to one on his phone. He had night snack and hot drink and soon went to his bed area. He is not on prescribed night medication. He was observed to have had a good night sleep.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:62	62 <u>Haringey Assessment</u> Ward Duty: Dr Bacarese-Hamilton, CT3 Attended the ward to offer Simon physical, ECG and blood test. Simon was seen in the quiet room; his girlfriend and mother were also present. I offered him physical, ECG and blood test and explained the rationale and benefits however Simon was adamant that he did not want any of them. He said he treats his body like a temple, does not use drugs or alcohol and he is physically well. He will not be accepting any medication so does not need an ECG. Explained he can approach staff members if he changes his mind. Plan - Day team to offer him physical, ECG and blood test again once he is more settled. 16/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 16 Aug 2016 Last Amended by Details: 16 Aug 2016 Lilian Oke Page Numbers:62 CP1 -Simon appears settled and calm on the ward, but confuse, isolates himself with minimal interaction with patient. Spends time in bedroom area. CP2- Simon is eating and drinking well, no physical issues with him, family came visiting. CP5-No medication given. Originator Details: 16 Aug 2016 17:35 Lilian Oke Nursing - Nursing Student Originally Entered by Details: 16 Aug 2016 17:37 Lilian Oke Last Amended by Details: 16 Aug 2016 17:52 Lilian Oke Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed CP1 -Simon appears settled and calm on the ward, but confuse, isolates himself with minimal	

interaction with patient. Spends time in bedroom area.
CP2- Simon is eating and drinking well, no physical issues with him, family came visiting.
CP5-No medication given.

16/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 16 Aug 2016
Last Amended by Details: 16 Aug 2016
Yowhans Beyene
Page Numbers:62
Medication and Medical history
uploaded to Rio under clinical
documentation (GP fax)
Allergies: no allergies recorded

Originator Details: 16 Aug 2016 14:54 Yowhans
Beyene Pharmacy Originally Entered by Details: 16
Aug 2016 14:55 Yowhans Beyene Last Amended by
Details: 16 Aug 2016 14:55 Yowhans Beyene
Validated by Details: 16 Aug 2016 14:55 Yowhans
Beyene Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Medication and Medical history uploaded to Rio
under clinical documentation (GP fax)
Allergies: no allergies recorded

16/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 16 Aug 2016
Last Amended by Details: 16 Aug 2016
Amal Pomphrey
Page Numbers:62
I shall attend formulation meeting
tomorrow at 11am.

Originator Details: 16 Aug 2016 14:28 Amal
Pomphrey Nursing Originally Entered by Details: 16
Aug 2016 14:29 Amal Pomphrey Last Amended by
Details: 16 Aug 2016 14:29 Amal Pomphrey
Validated by Details: 16 Aug 2016 14:29 Amal
Pomphrey Significant: No Added to Risk History:
No
Contains Third Party Info: No Conceal from Client:
Not Concealed Enfield EIS

I shall attend formulation meeting tomorrow at
11am.

	16/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 16 Aug 2016 Last Amended by Details: 16 Aug 2016 Samantha Robin Page Numbers:62 A meeting has been arranged for 17.8.16@11.00 Amal Pomphrey will attend for EIS, Mother will also attend Originator Details: 16 Aug 2016 11:20 Samantha Robin Administrative Originally Entered by Details: 16 Aug 2016 11:21 Samantha Robin Last Amended by Details: 16 Aug 2016 14:30 Samantha Robin Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed A meeting has been arranged for 17.8.16@11.00 Amal Pomphrey will attend for EIS, Mother will also attend 16/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 16 Aug 2016 Last Amended by Details: 16 Aug 2016 Samantha Robin Page Numbers:62 Mother Lorraine: Contact details: Home [REDACTED] 7454, Mobile:0 [REDACTED] Originator Details: 16 Aug 2016 11:18 Samantha Robin Administrative Originally Entered by Details: 16 Aug 2016 11:19 Samantha Robin Last Amended by Details: 16 Aug 2016 11:19 Samantha Robin Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Mother Lorraine: Contact details: Home [REDACTED] 7454, Mobile:0 [REDACTED]	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:63	16/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u>	

	<u>Folder 5</u> Originator Details: 16 Aug 2016 Last Amended by Details: 16 Aug 2016 Margaret Garrod Page Numbers:63 Enfield AMHP Service AMHP Report uploaded. His mother has reassured me that his dog is fine and she will be attending to its needs. <u>63</u> Originator Details: 16 Aug 2016 09:49 Margaret Garrod Social Worker Originally Entered by Details: 16 Aug 2016 09:50 Margaret Garrod Last Amended by Details: 16 Aug 2016 09:50 Margaret Garrod Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield AMHP Service AMHP Report uploaded. His mother has reassured me that his dog is fine and she will be attending to its needs. 16/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 16 Aug 2016 Last Amended by Details: 16 Aug 2016 Jack Mumford Page Numbers:63 Dr Humphreys (SpR), Dr Mumford (F2), Bessie (Ward manager) Theo (Charge nurse), Robin (Admin), Tracey (Nurse), Herine (Nurse) Nursing feedback: 35M threatening to kill neighbours and children, taken to wood green station Originator Details: 16 Aug 2016 09:18 Jack Mumford Medical Originally Entered by Details: 16 Aug 2016 09:18 Jack Mumford Last Amended by Details: 16 Aug 2016 09:18 Jack Mumford Validated by Details: 16 Aug 2016 09:18 Jack Mumford Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Dr Humphreys (SpR), Dr Mumford (F2), Bessie (Ward manager) Theo (Charge nurse),	
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	Robin (Admin), Tracey (Nurse), Herine (Nurse) Nursing feedback: 35M threatening to kill neighbours and children, taken to wood green station, put on section 2. No MH history. Has forensic history related to violence and aggressive? Paranoid and agitated when admitted, fully orientated when rights read. Not on any meds currently, antipsychotic naVve. Plan: 1) Physical, bloods, ECG 2) Explore forensic background. Was he charged for this incident? 3) UDS 4) 72hr meeting 17/08 @ 11AM - invite family 5) 15 min obs for now 16/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 16 Aug 2016 Last Amended by Details: 16 Aug 2016 Caroline Acolatse Page Numbers:63 <u>64</u> He is a 35-year-old gentleman transferred from Wood green Police Station to HAW at approximately 04:30 hrs escorted by 2 ambulance crew in a secure Originator Details: 16 Aug 2016 06:32 Caroline Acolatse Nursing Originally Entered by Details: 16 Aug 2016 05:09 Caroline Acolatse Last Amended by Details: 16 Aug 2016 06:34 Caroline Acolatse Validated by Details: 16 Aug 2016 06:34 Caroline Acolatse Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:64	<u>64</u> He is a 35-year-old gentleman transferred from Wood green Police Station to HAW at approximately 04:30 hrs escorted by 2 ambulance crew in a secure van. It was reported that he made threats to kill his neighbour and 2 children. His mother alerted the police, who picked him up and arrested him. He is a known to MH Services, known to Enfield EIS. He was referred to private service, but they declined him due to lack of information. He has paranoid, bizarre speech. Was assessed by the Forensic Medical Examiner and felt he needs to be sectioned and admitted. He was reported to be on clozapine in the past, but stopped it and relapsed,	

reported to be an absconding risk and during his transfer in the van he has been chatty.
On arrival he appeared paranoid saying, " This is where I heard about, it's like a prison where you lock people up" He was reassured and was informed that this is a ward and he has his own room. He was welcome and orientated to the ward setting. Was offered night snack and drink, but he only requested for a cup of water. Bleep holder was contacted to come and accept his section 2 papers. Night duty doctor was also contacted to see the patient and she also came.

His vital sign was done at 05:00 hrs and reading were

bp=150

t=36.5

p=63

by=6.5

w=72

h=175.5

He was given a welcome and recovery pack; his section 2 right was read to him which he understood. Section 132 form completed, ethnicity completed. He has been placed on 15 minutes observation. Since his arrival on the ward he hardly slept on his bed, rather interacting with staff and another patient, awake

16/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

- **Stage 5**

- **Folder 5**

Originator Details: 16 Aug 2016

Last Amended by Details: 16 Aug 2016

Maheera Tyler Medical

Page Numbers:64 + 65 + 66

64

Notes

65

Duty Doctor CT3 M Cheema

New admission to HAW, St Ann's Hospital

Date of **admission:**

16/08/2016

MHA Status: Section 2 Diagnosis:

Previous

66

Forensic Hx:

-frequent contact with police from a young age, says he has been to prison in the past but was unable to say exactly when this was

Says he is

Originator Details: 16 Aug 2016 06:23 Maheera Tyler Medical Originally Entered by Details: 16 Aug 2016 06:26 Maheera Tyler Last Amended by Details: 16 Aug 2016 07:10 Maheera Tyler

	Validated by Details: 16 Aug 2016 07:10 Maheera Tyler Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:65	<u>65</u> <u>Duty Doctor CT3 M Cheema</u> New admission to HAW, St Ann's Hospital Date of admission: 16/08/2016 MHA Status: Section 2 Diagnosis: Previous diagnoses of Unspecified nonorganic psychosis (F29) and Adjustment disorder (F432) Medication: Nil Allergies: Unknown - Simon is unsure if he has any allergies Background/PPHx: -Has previously been open to Enfield EIS, discharged in March 2016 due to non-engagement -Has been assessed under the MHA in 2014 and early 2016 but was not detained as there was not sufficient evidence of a mental disorder -no previous admissions to hospital -Notes state that he was known to CAMHS and has previously attempted to end his life when he was 16 y/o (by jumping from a window) Circumstances leading to admission: Arrested at his home address after his mother raised concerns about his mental state - he was allegedly verbally threatening towards his neighbour and (?) neighbour's children. Simon's mother called police who arrested him. He was seen by the FME at Wood Green police station, then referred for MHA. Interview: I reviewed Simon on HAW with RMN Titi. Simon stated that he has been very busy setting up his company recently. Spoke about working very hard and spending years 'studying'. He spoke in grandiose terms, describing his company as managing mental health services and working in the entertainment industry. He spoke about buying speakers for £50,000 each and hiring out equipment to Glastonbury and Isle of Wight festivals. Simon stated that he owns a 'city' and it is his job to understand the various roles that people have in society so that he can 'look after people'. When asked how he was able to fund these projects he described a system of fundraising using 'charity bars' and websites. Simon denied making any threats to harm others and denied such thoughts at present. He denied any thoughts to harm himself. He categorically stated that he does not believe he has a mental illness, and that he has consistently refused to take medication in the past for this reason. He also does not take medication for physical health problems as he does	

	not believe he needs it. Simon stated that his sleep is 'good' - sleeps for exactly 8 hours per night. Energy levels are increased. Simon said that he has been depressed in the past but became quite irritable when asked about details of this. He denied ever taking antidepressants; he was previously given Sertraline but it is unclear if he took it. MSE: -A+B: medium height, slim mixed-race gentleman. Slightly dishevelled, dressed in black tracksuit, noted to be missing several teeth. Initially good rapport but became quite irritable at times -Speech: Fast rate, pressured speech. Tangential. -Mood: subjectively 'I'm really good', objectively appears elevated -Thoughts: no FTD. Denied thoughts to harm himself or others. -Perceptions: denied hallucinations -Insight: limited. Aware of reasons for admission but does not agree that he may have a mental illness Social and Personal Hx: -Lives alone in 1-bedroom flat which he says he owns outright -Mother lives nearby and provides support. -Simon says he has siblings and other extended family in the local area as well. -In a relationship, on and off with partner for 20 years (Katie). Simon told us that Katie lives with him and is expecting his child. Declined to say when the baby is due to be born as he felt this was too personal to share. -Says he runs his own company at the moment (see details above) -Past history of sexual abuse (from notes) Family Hx: -grandmother (? maternal) had BPAD and/or schizophrenia	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:66	<u>66</u> Forensic Hx: -frequent contact with police from a young age, says he has been to prison in the past but was unable to say exactly when this was -Says he is currently subject to an ASBO due to playing loud music Physical Health: -Previous notes state that Simon has Crohn's according to his mother. Simon denied this and is not currently seeing anyone for this and is not taking any medication -Denied any other physical health problems -Simon was not fully examined as he was becoming increasingly aroused through the interview -Obs noted to be NAD on admission -GCS 15/15 -Mobilising independently, normal gait Risk Summary:	

-to self: denied any thoughts of self-harm or suicide
-to others: denied any thoughts to harm others
-from others: vulnerable when unwell - need to explore whether he is being financially independent.
-disengagement: highly likely to disengage
-Substance misuse: denied using drugs, cigarettes or alcohol

Plan:

1. Admit under Section 2 of MHA
2. 15 min obs
3. UDS to be done please
4. Physical and bloods to be done by day team please
5. Medication chart written

16/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 16 Aug 2016

Last Amended by Details: 16 Aug 2016

Hugh Briscoe

Page Numbers:66

following mha asmt initiated on 15/8, two meds recs competed. amhp Maggie Garrod unable to compete asmt because no bed available.

I was informed at 23.50 on

15/2018

by bed manager David Walcott that bed identified on Haringey

Originator Details: 16 Aug 2016 04:44 Hugh Briscoe Social Worker Originally Entered by Details: 16 Aug 2016 04:58 Hugh Briscoe Last Amended by Details: 16 Aug 2016 04:58 Hugh Briscoe Validated by Details: 16 Aug 2016 04:58 Hugh Briscoe Significant: Yes, Added to Risk History: No
Contains Third Party Info: Yes, Conceal from Client: Not Concealed

following mha asmt initiated on 15/8, two meds recs competed. amhp Maggie Garrod unable to compete asmt

because no bed available.

I was informed at 23.50 on

15/2018

by bed manager David Walcott that bed identified on Haringey ward, St Ann's hospital.

I attended wood green police station at approx.

02.00 this morning, I spent approx. 40 minutes with Simon in interview room.

I have read the s.2 med recs by Dr. Albazaz and Dr. Amin, and recent history on RiO. I spoke with amhp Maggie Garrod, and I have also spoken with nearest relative mother Lorraine Cordell. she stated that she

	is Simons only real social support and remains very protective of their relationship. in all circumstances of the case I think that detention in under s.2 is the only viable way to ensure that Simon receives appropriate assessment for his mental health, and that an appropriate approach might be developed to assisting him. Simon was adamant that he is not mentally unwell, and not in need of any mental health assistance, he stated that he feels that detention and admission to hospital is truly detrimental to his future, and would not entertain the notion that he might require mental health assistance. I informed mother of outcome of mhaa asmt and her rights as nearest relative. s.2 detention documents and amhp report handed to pss ambulance staff at 04.00 this morning, and they agreed to transport Simon to Haringey ward. Simon has been bailed by police and is in possession of the bail sheet. amhp report completed and uploaded. 15/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Aug 2016 Last Amended by Details: 16 Aug 2016 David Walcott Nursing Page Numbers:66 + 67 <u>66</u> Notes <u>67</u> T/c from Cygnet, referral has been declined due to lack of info. I earlier had received a call from Haringey Assessment ward that they have a male bed available, which I later again confirmed with them as they were a couple of transfers occurring & this still remains the Originator Details: 15 Aug 2016 23:35 David Walcott Nursing Originally Entered by Details: 15 Aug 2016 23:41 David Walcott Last Amended by Details: 16 Aug 2016 05:49 David Walcott Validated by Details: 16 Aug 2016 05:49 David Walcott Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:67	<u>67</u> T/c from Cygnet, referral has been declined due to lack of info. I earlier had received a call from Haringey Assessment ward that they have a male bed available, which I later again confirmed with them as they were a couple of transfers occurring & this still remains the case that 1 male bed is available.	

I have contacted the Enfield Duty AMHP to inform him that the MHAA can proceed tonight & I will allocate this bed for him on HAW. I am awaiting the on - call AMHP to contact myself with reference T1348013.

23:50hrs - T/c with the Enfield AMHP (H.B) --- He will arrange a MHAA at Wood green St shortly. I have informed him of where the acute bed will be available. He will inform me of the MHAA outcome. I have informed HAW of the Sec 2 MHAA & pending admission.

David Walcott

Bed Manager (OOH's)

15/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 15 Aug 2016

Last Amended by Details: 15 Aug 2016

Teeresh Bundhun

Page Numbers:67

Bed Manager

I received a Tc from Cygnet Stevenage (Susan) who informed that they are still looking at the referral for Simon.

Originator Details: 15 Aug 2016 19:47 Teeresh Bundhun Nursing Originally Entered by Details: 15 Aug 2016 19:51 Teeresh Bundhun Last Amended by Details: 15 Aug 2016 19:51 Teeresh Bundhun Validated by Details: 15 Aug 2016 19:51 Teeresh Bundhun Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Bed Manager

I received a Tc from Cygnet Stevenage (Susan) who informed that they are still looking at the referral for Simon.

15/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 15 Aug 2016

Last Amended by Details: 15 Aug 2016

Teeresh Bundhun

Page Numbers:67

Bed Manager

Authorisation was gained from the day senior manager for referral to the private sector.

I contacted Chamberlain ward and spoke to NIC Susan.

	She informed me that <u>Chmaberlain</u> has a vacant male bed. I have referred Simon to: Chamberlain ward Cygnet Hospital Stevenage Grave ley Road, Stevenage SG1 4YS 01438 342942 At present I am awaiting outcome of referred. Originator Details: 15 Aug 2016 18:13 Teeresh Bundhun Nursing Originally Entered by Details: 15 Aug 2016 18:15 Teeresh Bundhun Last Amended by Details: 15 Aug 2016 18:15 Teeresh Bundhun Validated by Details: 15 Aug 2016 18:15 Teeresh Bundhun Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Bed Manager</u> Authorisation was gained from the day senior manager for referral to the private sector. I contacted Chamberlain ward and spoke to NIC Susan. She informed me that <u>Chmaberlain</u> has a vacant male bed. I have referred Simon to: Chamberlain ward Cygnet Hospital Stevenage Grave ley Road, Stevenage SG1 4YS 01438 342942 At present I am awaiting outcome of referred. 15/08/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details; 15 Aug 2016 Last Amended by Details: 15 Aug 2016 Teeresh Bundhun Page Numbers:67 + 68 <u>67</u> Notes <u>68</u> <u>Bed Manager</u> To receive from AMHP Maggie G. She informed me that following a MHAA Simon has been detained under Section 2 of the MHAA. At present there are no male beds within BEH. I will start to look for a Private sector bed. Originator Details; 15 Aug 2016 16:39 Teeresh Bundhun Nursing Originally Entered by Details: 15 Aug 2016 16:41 Teeresh Bundhun Last Amended by Details: 15 Aug 2016 16:41 Teeresh Bundhun Validated by Details: 15 Aug 2016 16:41 Teeresh Bundhun Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:68	68 <u>Bed Manager</u> To receive from AMHP Maggie G. She informed me that following a MHAA Simon has been detained under Section 2 of the MHAA. At present there are no male beds within BEH. I will start to look for a Private sector bed. 15/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Aug 2016 Last Amended by Details: 15 Aug 2016 Margaret Garrod Page Numbers:68 <u>Enfield AMHP Service</u> Request for a MHAA from Ahmed at Wood Green Police Station. Mr Cordell had been arrested for threats to kill his Neighbours and Children. Dr Albazaz and Dr Amin available to attend at 3.00pm Bed manager advised. Enfield HTT unable to undertake the assessment as he is currently out of area. Haringey HTT Crisis Team suggested the assessment to go ahead in their absence and if appropriate the Enfield CRHTT could follow up. Originator Details: 15 Aug 2016 13:49 Margaret Garrod Social Worker Originally Entered by Details: 15 Aug 2016 13:59 Margaret Garrod Last Amended by Details: 15 Aug 2016 13:59 Margaret Garrod Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield AMHP Service</u> Request for a MHAA from Ahmed at Wood Green Police Station. Mr Cordell had been arrested for threats to kill his Neighbours and Children. Dr Albazaz and Dr Amin available to attend at 3.00pm Bed manager advised. Enfield HTT unable to undertake the assessment as he is currently out of area.	

Haringey HTT Crisis Team suggested the assessment to go ahead in their absence and if appropriate the Enfield CRHTT could follow up.

15/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 15 Aug 2016

Last Amended by Details: 15 Aug 2016

Matthew Strachan Social Worker

Page Numbers:68

T/C from custody at Wood Green police station. Simon is in custody after making threats to kill. The FME believes a MHAA should be carried out.

I have checked the system (Rio) and it is clear that this gentleman is an Enfield Client - living in Enfield, GP in Enfield and known to EIS in Enfield. I passed on the details of the Duty AMHP service in Enfield.

Originator Details: 15 Aug 2016 12:10 Matthew Strachan Social Worker Originally Entered by Details: 15 Aug 2016 12:12 Matthew Strachan Last Amended by Details: 15 Aug 2016 12:12 Matthew Strachan Validated by Details: 15 Aug 2016 12:12 Matthew Strachan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

T/C from custody at Wood Green police station. Simon is in custody after making threats to kill. The FME believes a MHAA should be carried out. I have checked the system (Rio) and it is clear that this gentleman is an Enfield Client - living in Enfield, GP in Enfield and known to EIS in Enfield. I passed on the details of the Duty AMHP service in Enfield.

15/08/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

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Originator Details: 15 Aug 2016

Last Amended by Details: 15 Aug 2016

Simon Clark

Page Numbers:68

Telephone call received from Lorraine Cordell, Simon's mother. She was asking questions about what happened with Simon's care after the MHA assessment. I was unable to give this information to Lorraine without Simon's consent but

	informed Lorraine that an application can be made for access to medical notes Originator Details: 15 Aug 2016 11:11 Simon Clark Nursing Originally Entered by Details: 15 Aug 2016 11:11 Simon Clark Last Amended by Details: 15 Aug 2016 11:11 Simon Clark Validated by Details: 15 Aug 2016 11:11 Simon Clark Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Telephone call received from Lorraine Cordell, Simon's mother. She was asking questions about what happened with Simon's care after the MHA assessment. I was unable to give this information to Lorraine without Simon's consent but informed Lorraine that an application can be made for access to medical notes 15/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Aug 2016 Last Amended by Details: 15 Aug 2016 Benedicta Osei-Prempeh Nursing Page Numbers:68 <u>HUB</u> T/c received from Mr Andrew Cordell who claimed to be Simon's uncle to say that he wants to know why Simon was discharged from service without follow up. Andrew was angry and said who did they write to discharge letters to, he asked me to tell him the name of the person that discharged Simon from service without follow up. Andrew was informed Simon was discharged from Enfield Early Intervention Service (EIS) telephone number for EIS given to Andrew to contact for assistance. Originator Details: 15 Aug 2016 10:44 Benedicta Osei-Prempeh Nursing Originally Entered by Details: 15 Aug 2016 10:44 Benedicta Osei-Prempeh Last Amended by Details: 15 Aug 2016 10:55 Benedicta Osei-Prempeh Validated by Details: 15 Aug 2016 10:55 Benedicta Osei-Prempeh Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>HUB</u> T/c received from Mr Andrew Cordell who claimed to be Simon's uncle to say that he wants to know why Simon was discharged from service without follow up. Andrew was angry and said who did they write to discharge letters to, he asked me to tell him	
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	the name of the person that discharged Simon from service without follow up. Andrew was informed Simon was discharged from Enfield Early Intervention Service (EIS) telephone number for EIS given to Andrew to contact for assistance. 14/08/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 14 Aug 2016 Last Amended by Details: 14 Aug 2016 George Onuegbu Page Numbers:68 <u>9</u> Notes <u>69</u> T/C from Andrew - [REDACTED] to say that it was reported that Simon threatened to kill his neighbour with her two children and the police was called. He stated that the police are around but Simon is refusing to open the door. He was angry that his nephew was discharged without any follow-up in the community. Originator Details: 14 Aug 2016 19:26 George Onuegbu Nursing Originally Entered by Details: 14 Aug 2016 19:33 George Onuegbu Last Amended by Details: 14 Aug 2016 19:39 George Onuegbu Validated by Details: 14 Aug 2016 19:39 George Onuegbu Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:69	<u>69</u> T/C from Andrew - 07960470159 to say that it was reported that Simon threatened to kill his neighbour with her two children and the police was called. He stated that the police are around but Simon is refusing to open the door. He was angry that his nephew was discharged without any follow-up in the community. 02/03/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Mar 2016 Last Amended by Details: 04 Mar 2016 Goodie Adama Nursing Page Numbers:69 Letter to inform Simon of discharge from EIP sent to him and copy to his GP. Letter uploaded to RiO documents.	

Originator Details: 02 Mar 2016 17:15 Goodie Adama Nursing Originally Entered by Details: 02 Mar 2016 17:16 Goodie Adama Last Amended by Details: 04 Mar 2016 17:22 Goodie Adama Validated by Details: 04 Mar 2016 17:22 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Letter to inform Simon of discharge from EIP sent to him and copy to his GP. Letter uploaded to RiO documents.

01/03/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 01 Mar 2016

Last Amended by Details: 04 Mar 2016

Goodie Adama Nursing

Page Numbers:69

Simon was discussed at EIP referral and case meeting. I reported that I spoke with him and he was clear that he did not want EIP input. I also reported that he appeared to have capacity in this regard and said he has come to know of EIP and me and that if he needed help, he will make contact.

Outcome

Discharge from EIP caseload

Simon may be referred to EIP within 3 years should the need arise

Originator Details: 01 Mar 2016 11:00 Goodie Adama Nursing Originally Entered by Details: 02 Mar 2016 17:01 Goodie Adama Last Amended by Details: 04 Mar 2016 17:21 Goodie Adama Validated by Details: 04 Mar 2016 17:21 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Simon was discussed at EIP referral and case meeting. I reported that I spoke with him and he was clear that he did not want EIP input. I also reported that he appeared to have capacity in this regard and said he has come to know of EIP and me and that if he needed help, he will make contact.

Outcome

Discharge from EIP caseload

Simon may be referred to EIP within 3 years should the need arise

29/02/2016

	• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 29 Feb 2016 Last Amended by Details: 29 Feb 2016 Goodie Adama Nursing Page Numbers:69 t/c I spoke with Simon and informed him that I was back from my holidays. He told about the MHA team visiting him while I was away and tried to get him into hospital. He said he did not appreciate what happened and was glad that the doctors did not agree that he was mentally ill. He said "I know who the team is and who you are and If I ever need help, I know who to contact" He spoke positively about Mr Clark, manager; that he is a nice person and good to speak with. Plan: Discuss at EIS referral and case meeting on Tuesday Recommend that case to be closed Originator Details: 29 Feb 2016 11:33 Goodie Adama Nursing Originally Entered by Details: 29 Feb 2016 11:44 Goodie Adama Last Amended by Details: 29 Feb 2016 15:31 Goodie Adama Validated by Details: 29 Feb 2016 15:31 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I spoke with Simon and informed him that I was back from my holidays. He told about the MHA team visiting him while I was away and tried to get him into hospital. He said he did not appreciate what happened and was glad that the doctors did not agree that he was mentally ill. He said "I know who the team is and who you are and If I ever need help, I know who to contact" He spoke positively about Mr Clark, manager; that he is a nice person and good to speak with. Plan: Discuss at EIS referral and case meeting on Tuesday Recommend that case to be closed 29/02/2016	
	• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 29 Feb 2016 Last Amended by Details: 10 Mar 2016 Goodie Adama CPA Review Page Numbers:69 + 70 <u>6</u>	

	Notes <u>70</u> <u>CPA Review</u> Date: 29 February 2016 11:00 Review Type: Discharge Attendees: * G Adama (Care co-ordinator) * CORDELL, Simon (Mr) (Client) * Review unmet needs none identified * Client view "I am not mentally ill and I do not need any help. I know who the team is and who Originator Details: 29 Feb 2016 11:00 Goodie Adama CPA Review Originally Entered by Details: 10 Mar 2016 18:47 Goodie Adama Last Amended by Details: 10 Mar 2016 18:47 Goodie Adama Validated by Details: 10 Mar 2016 18:47 Goodie Adama Significant: Yes, Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:70	<u>70</u> <u>CPA Review</u> Date: 29 February 2016 11:00 Review Type: Discharge Attendees: * G Adama (Care co-ordinator) * CORDELL, Simon (Mr) (Client) * Review unmet needs none identified * Client view "I am not mentally ill and I do not need any help. I know who the team is and who you are and If I ever need help, I know who to contact" * Carer view not available * What worked well n/a * What did not work well n/a * Other notes Simon not willing to engage as he believes he is not mentally ill. Discussed at EIS referral and case meeting and case closed. To be referred again if EIP is required and within 3 years 26/02/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 26 Feb 2016 Last Amended by Details: 26 Feb 2016 17 Goodie Adama Nursing Page Numbers:70 t/c I made a couple of calls to Simon's mobile this week and this evening and did	29/02/2016 29 February 2016

	not get answered. I left him a message that I was back from holiday and wanted to catch up with him. Plan: I will call him again on Monday after lunch time. Originator Details: 26 Feb 2016 17:35 Goodie Adama Nursing Originally Entered by Details: 26 Feb 2016 17:37 Goodie Adama Last Amended by Details: 26 Feb 2016 17:37 Goodie Adama Validated by Details: 26 Feb 2016 17:37 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I made a couple of calls to Simon's mobile this week and this evening and did not get answered. I left him a message that I was back from holiday and wanted to catch up with him. Plan: I will call him again on Monday after lunch time. 10/02/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 10 Feb 2016 Last Amended by Details: 10 Feb 2016 Simon Clark Nursing Page Numbers:70 + 71 <u>7</u> Notes <u>71</u> Phone conversation with Simon. I explained I had been asked to call him. Simon expressed unhappiness about the MHA last week and said talked about the s135warrant being obtained under false pretences and that mental health staff had confessed' that he had an agreed to allow access to his property, therefore a warrant was not required. I asked Simon about the word confess, as this suggested to me a response to a criminal charge or accusation. Simon gave examples of confessions but it was not possible to explore Originator Details: 10 Feb 2016 15:44 Simon Clark Nursing Originally Entered by Details: 10 Feb 2016 15:55 Simon Clark Last Amended by Details: 10 Feb 2016 16:35 Simon Clark Validated by Details: 10 Feb 2016 16:35 Simon Clark Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5
Folder 5

Page Numbers: 71

71

Phone conversation with Simon. I explained I had been asked to call him. Simon expressed unhappiness about the MHA last week and said talked about the s135 warrant being obtained under false pretences and that mental health staff had confessed' that he had an agreed to allow access to his property, therefore a warrant was not required. I asked Simon about the word confess, as this suggested to me a response to a criminal charge or accusation. Simon gave examples of confessions but it was not possible to explore this further as I could not re-engage Simon on this subject. Simon spoke at length about plans for the future, that he is working hard to help other people. I talked about sometimes we all need help, but Simon said he has a hundred thousand friends and hundreds of family members. I said these sounded like very large numbers and asked how he made so many friends, Simon said through being nice and helpful.

I asked Simon about the records he keeps including recordings of conversations, he said it is like keeping minutes for a meeting. I asked several times if he understood how this could seem to others like the behaviours of someone with paranoid beliefs to but he did not address this.

Simon said that he had been told he is not mentally ill and that staff had cheered this at the MHA review. I tried to explain that mental ill health and health are a continuum and there is not a binary system of sickness vs. health. I tried to explain what I have been told and read that Simon did not meet thresholds for detention un MHA in terms of severity of mental illness or risk of harm to others or himself, but he did not acknowledge this. I told Simon that I thought he hadn't grasped what I was saying but regarding the MHA but he did not continue the conversation with this topic. I also said that our conversation has seemed tangential at times, Simon changing from one subject to another. He said that was to make the conversation varied.

I asked if he needed any help, he said he needed space to work, but did not want weekly assessments from mental health services, and that he'd previously agreed to the appointment today but after thinking about it, decided he didn't want to attend. Simon agreed that I can call him from time to time, but did not want to meet with me when I offered. He said he would call me if he feels he needs help in future. I asked Simon to consider having a low threshold for asking for help and not to let things get very bad if he feels he would like to contact me.

Although the content of Simon's speech was not bizarre, it did appear that he expressed paranoid thoughts at times, in addition to his behaviour of recording and monitoring of others. Simon made a clear view that he did not wish to have continue engagement with mental health services and it is my view that he has the capacity to make this decision. I will discuss the case with the clinical team and other

staff/managers as appropriate regarding future action from mental health services and the EIP team in particular

10/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**

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Originator Details: 10 Feb 2016

Last Amended by Details: 11 Feb 2016

Mukesh Kripalani Medical

Page Numbers: 71

Patient cancelled the appointment today.

The latest AMHP report states in point 4 that there was no evidence of mental disorder during the assessment.

Simon Clark (team manager) will make contact and if the client is unwilling to see services and given the AMHP report and his mother able to request support for the client when needed, a decision for discharge could be considered following the phone call, if client has capacity to refuse intervention from services.

Client seems unlikely to engage unless under the auspices of the Mental Health act or under the criminal justice route.

Originator Details: 10 Feb 2016 14:31 Mukesh Kripalani Medical Originally Entered by Details: 10 Feb 2016 14:35 Mukesh Kripalani Last Amended by Details: 11 Feb 2016 16:07 Mukesh Kripalani Validated by Details: 11 Feb 2016 16:07 Mukesh Kripalani Significant: Yes, Added to Risk History: No Contains Third Party Info: No Conceal from Client: Yes

Patient cancelled the appointment today.

The latest AMHP report states in point 4 that there was no evidence of mental disorder during the assessment.

Simon Clark (team manager) will make contact and if the client is unwilling to see services and given the AMHP report and his mother able to request support for the client when needed, a decision for discharge could be considered following the phone call, if client has capacity to refuse intervention from services.

Client seems unlikely to engage unless under the auspices of the Mental Health act or under the criminal justice route.

08/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

	<u>Folder 5</u> Originator Details: 08 Feb 2016 Last Amended by Details: 08 Feb 2016 Amal Pomphrey Nursing Page Numbers: 71 <u>7</u> Notes <u>72</u> From: Pomphrey Amal <u>08/02/2016</u> Sent: 08 February 2016 12:49 To: Quadri Bola Cc: Clark Simon; Kripalani Mukesh; Benyure George Subject: RE: Simon CORDELL Spoke to Mark Aldwinckle Acting Police Sergeant 474YE will be attending SOVA meeting this Thursday at 1pm. Tel; 0208 345 1146 Thanks, Amal Pomphrey Originator Details: 08 Feb 2016 12:49 Amal Pomphrey Nursing Originally Entered by Details: 08 Feb 2016 12:49 Amal Pomphrey Last Amended by Details: 08 Feb 2016 12:49 Amal Pomphrey Validated by Details: 08 Feb 2016 12:49 Amal Pomphrey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue:</u> <u>5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:72	<u>72</u> From: Pomphrey Amal <u>08/02/2016</u> Sent: 08 February 2016 12:49 To: Quadri Bola Cc: Clark Simon; Kripalani Mukesh; Benyure George Subject: RE: Simon CORDELL Spoke to Mark Aldwinckle Acting Police Sergeant 474YE will be attending SOVA meeting this Thursday at 1pm. Tel; 0208 345 1146 Thanks, Amal Pomphrey 08/02/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u>	

	<u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Feb 2016 Last Amended by Details: 08 Feb 2016 Amal Pomphrey Nursing Page Numbers:72 + 73 <u>72</u> Notes <u>73</u> From: Quadri Bola <u>04/02/2016</u> Sent: 04 February 2016 10:28 To: Pomphrey Amal; Adama Goodie Cc: Benyure George Subject: Re: S.C - 11214451 Dear Amal / Goodie I am writing in respect of your above patient who has been causing a lot of distress for my patient a€“ D. A a€“ 1009639, who lives on top of his flat. S.Ca€™™s behaviour and concerns about his mental state triggered the referral to your service. There is on-going SOVA in respect of S.Ca€™™s threatening and aggressive behaviour towards D.A and her Support workers, this is in addition to constant barking by his dog which has made it difficult for D.A to live in peace at the accommodation. S.C has expressed paranoid thoughts that he was being stalked by D.A each time she moves around in her flat. D.A stated she has become a prisoner in her home due to the fear of being attacked by S.C who was alleged in the past to have waited for her under the communal landing while she was leaving her flat, fortunately her Support worker heard her scream and rushed in following which S.C went back to his flat. S.C was reported recently Originator Details: 08 Feb 2016 12:41 Amal Pomphrey Nursing Originally Entered by Details: 08 Feb 2016 12:42 Amal Pomphrey Last Amended by Details: 08 Feb 2016 12:42 Amal Pomphrey Validated by Details: 08 Feb 2016 12:42 Amal Pomphrey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	<u>73</u> From: Quadri Bola <u>04/02/2016</u> Sent: 04 February 2016	

10:28

To: Pomphrey Amal; Adama Goodie

Cc: Benyure George

Subject: Re: S.C - 11214451

Dear Amal / Goodie

I am writing in respect of your above patient who has been causing a lot of distress for my patient a€“

D. A a€“ 1009639, who lives on top of his flat.

S.Ca€™™s behaviour and concerns about his mental state triggered the referral to your service.

There is on-going SOVA in respect of S.Ca€™™s threatening and aggressive behaviour towards D.A and her Support workers, this is in addition to constant barking by his dog which has made it difficult for D.A to live in peace at the accommodation.

S.C has expressed paranoid thoughts that he was being stalked by D.A each time she moves around in her flat.

D.A stated she has become a prisoner in her home due to the fear of being attacked by S.C who was alleged in the past to have waited for her under the communal landing while she was leaving her flat, fortunately her Support worker heard her scream and rushed in following which S.C went back to his flat.

S.C was reported recently to have been verbally aggressive and threatening towards D. Aa€™™s Support worker from Hospitaler with his dog in which they now feel unsafe to visit D.A at home Enfield homes Anti-social behaviour Officer is currently involved with the case and during D.A a€™™s last SOVA meeting, there was a plan for a Management transfer, but I understand that this will take a long time to happen.

D.A is living in constant fear of S.C due to his aggressive and threatening behaviour towards her and she will not go out alone or attend clinic appointments unless accompanied by her Support worker from Hospitaler.

S. Ca€™™s wondering whether there is a treatment plan put in place for S.C in managing the risks he poses as I understand he can mask his presentation when meeting with professionals and he was deemed not detainable under the MHAA yesterday. Is it possible for either you or representative to attend the SOVA Case Conference meeting next week a€“ 11th February 2016 @ 13.00hrs a€“ Silver Street, the Anti-social Behaviour Officer for the area will also be present, we need to discuss and formulate a plan regarding the risks S.C poses to D.A as there are concerns that he may cause actual physical harm to D.A if his behaviour continues unchecked.

Regards

Bola Quadri

Care-coordinator / CPN / Nurse Prescriber/
Psychosis Service Line

	08/02/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Feb 2016 Last Amended by Details: 08 Feb 2016 Elsy Duncan Social Worker Page Numbers:73 + 74 <u>7</u> Notes <u>74</u> <u>COPY OF EMAIL FROM PC AAARK</u> <u>ALDWINCKLE Elsy,</u> As discussed, I would appreciate an update after the safeguarding meeting. If they would like one of us to attend, we may be able to swing it as are in on 11th. Regards, Mark Aldwinckle Acting Police Sergeant 474YE Metropolitan Police Service Neighbourhood Policing Team - Enfield and North Cluster - Enfield Highway Internal: 721146 Tel: 0208 34511461 Email: mark.aldwinckle@met.pnn.police.uk Address: Enfield Police Station, 41 Baker Street, Enfield, EN1 3EU Originator Details: 08 Feb 2016 12:34 Elsy Duncan Social Worker Originally Entered by Details: 08 Feb 2016 12:35 Elsy Duncan Last Amended by Details: 08 Feb 2016 12:35 Elsy Duncan Validated by Details: 08 Feb 2016 12:35 Elsy Duncan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:74	<u>74</u> <u>COPY OF EMAIL FROM PC AAARK</u> <u>ALDWINCKLE Elsy,</u> As discussed, I would appreciate an update after the safeguarding meeting. If they would like one of us to attend, we may be able to swing it as are in on 11th. Regards, Mark Aldwinckle Acting Police Sergeant 474YE Metropolitan Police Service Neighbourhood Policing Team - Enfield and North Cluster - Enfield Highway Internal: 721146 Tel: 0208 34511461 Email: mark.aldwinckle@met.pnn.police.uk Address: Enfield Police Station, 41 Baker Street, Enfield, EN1 3EU 08/02/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u>	

	<u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Feb 2016 Last Amended by Details: 08 Feb 2016 Elsy Duncan Social Worker Page Numbers:74 T/C from PC Mark Aldwick 0208 345 1124 rang requesting information/UPDATE about Simon Cordell a€“ case. Rang Care Coordinator/ CPN Amal Pompfrey East Enfield Lucas House 0208 7023100 Amal informed me that there is a Strategy meeting arranged for the 11/02/2016 to discuss the allegation about harassment. Amal said that she is able to update the police officer with this case following the SECTION 42 ENQUIRY. <u>“My Note: SECTION 42; Care Act 2014”</u> Rang Marck 0208 3451124 agreed that he will be sending an email to me with his request, so CC Amal can update him after the Section 42 Enquiry meeting. Originator Details: 08 Feb 2016 11:58 Elsy Duncan Social Worker Originally Entered by Details: 08 Feb 2016 12:00 Elsy Duncan Last Amended by Details: 08 Feb 2016 12:00 Elsy Duncan Validated by Details: 08 Feb 2016 12:00 Elsy Duncan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed T/C from PC Mark Aldwick 0208 345 1124 rang requesting information/UPDATE about Simon Cordell a€“ case. Rang Care Coordinator/ CPN Amal Pompfrey East Enfield Lucas House 0208 7023100 Amal informed me that there is a Strategy meeting arranged for the 11/02/2016 to discuss the allegation about harassment. Amal said that she is able to update the police officer with this case following the SECTION 42 ENQUIRY. <u>“My Note: SECTION 42; Care Act 2014”</u> Rang Marck 0208 3451124 agreed that he will be sending an email to me with his request, so CC Amal can update him after the Section 42 Enquiry meeting.	
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04/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 04 Feb 2016
Last Amended by Details: 04 Feb 2016
Amal Pomphrey Nursing
Page Numbers:74

Enfield EIS
Appointment letter sent for Friday
12th Feb
at 9.30am.

Originator Details: 04 Feb 2016 15:08 Amal
Pomphrey Nursing Originally Entered by Details: 04
Feb 2016 15:09 Amal Pomphrey Last Amended by
Details: 04 Feb 2016 15:09 Amal Pomphrey
Validated by Details: 04 Feb 2016 15:09 Amal
Pomphrey Significant: No Added to Risk History:
No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Enfield EIS
Appointment letter sent for Friday
12th Feb
at 9.30am.

03/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 03 Feb 2016
Last Amended by Details: 09 Feb 2016
Samuel Curtis Social Worker
Page Numbers:74 + 75

7
Notes

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Retrospective Entry

Entry Sam Curtis, Forensic Social Worker
Outline report. Initial entry on

03/02/2016

Updated on

09/02/2016

I carried out a Mental Health Act for Simon
at around 10:40hrs on

03/02/2016

Dr Al-Allaq (independent s 12 Doctor),
Dr Albazaz (independent s12 Doctor)
CJ and Nellie (HTT workers),
Amal (Community Mental Health Nurse
based at Enfield Early Intervention Team)
all attended. A s135(1) warrant

	Originator Details: 03 Feb 2016 10:40 Samuel Curtis Social Worker Originally Entered by Details: 04 Feb 2016 09:41 Samuel Curtis Last Amended by Details: 09 Feb 2016 14:18 Samuel Curtis Validated by Details: 09 Feb 2016 14:18 Samuel Curtis Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:75	<u>75</u> <u>Retrospective Entry</u> Entry Sam Curtis, Forensic Social Worker Outline report. Initial entry on 03/02/2016 Updated on 09/02/2016 I carried out a Mental Health Act for Simon at around 10:40hrs on 03/02/2016 Dr Al-Allaq (independent s 12 Doctor), Dr Albazaz (independent s12 Doctor) CJ and Nellie (HTT workers), Amal (Community Mental Health Nurse based at Enfield Early Intervention Team) all attended. A s135(1) warrant was obtained but not executed as Simon gave access. A lock smith was present but their services were not required as Simon opened the door. The police were present but remained outside the property. Mr Cordella's home was somewhat cluttered with a large printer by the door. However, it was clean and organised. He had food in the kitchen. His mother and a female friend were present. Simon was expecting the assessment. He was appropriately groomed and dressed. He had put his dog in the garden. Simon expressed his unhappiness about the warrant being obtained. He said that if he had been sent an appointment letter, he would give professionals access. He mentioned on going issues with the police and that he had a court case in February. His speech was somewhat rapid at the start of the interview but this appeared to be due to anxiety rather than thought disorder. His speech slowed as the interview went on. Simon did change the topic of conversation a number of times as there was particular information that he wanted to share with the team. He spoke a project to start a community internet site and showed those present a business plan that was on his computer. He showed us documents which he said were related to his court case. He pointed out a line in the document that said that all the suspects were white and said that this was part of his legal challenge to his Asbo. He denied any symptoms of mental illness when asked about a variety of psychotic symptoms. He denied suicidal ideation. He spoke about difficulties	

he had with his upstairs neighbour relating to noise disturbance. He showed us some letters which said that his neighbour had written to him. He said that his neighbour has an alcohol problem and a learning disability.

There was no evidence of distraction, confusion or that he was responding to internal stimuli.

I did not feel that there was sufficient evidence of mental illness on the day of the assessment to detain Simon under the Mental Health Act. Neither Doctor made medical recommendations. Simon agreed to attend an outpatient appointment with the Early Intervention Team psychiatrist.

SSM1 report to follow.

02/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 02 Feb 2016

Last Amended by Details: 03 Feb 2016

Annette Tumalu Nursing

Page Numbers:75

ECRHTT

Assessment with

Beatrice:

T/C from

Margaret AMPH, MHAA at 10:00AM,
HTT staff to attend;

Please call AMPH in the morning to
confirm the meeting address below.

Rendezvous point: ***** Shaftesbury
Avenue and Green Street***

Originator Details: 02 Feb 2016 21:08 Annette
Tumalu Nursing Originally Entered by Details: 02
Feb 2016 21:10 Annette Tumalu Last Amended by
Details: 03 Feb 2016 22:12 Annette Tumalu
Validated by Details: 03 Feb 2016 22:12 Annette
Tumalu Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

ECRHTT

Assessment with

Beatrice:

T/C from

Margaret AMPH, MHAA at 10:00AM, HTT staff to
attend;

Please call AMPH in the morning to confirm the
meeting address below.

Rendezvous point: ***** Shaftesbury Avenue and
Green Street***

02/02/2016

	• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Feb 2016 Eatally Last Amended by Details: 02 Feb 2016 Mrs Bibi Eatally Nursing Page Numbers:75 <u>Bed Management</u> Phone call received form Enfield Duty AMHP Maggie requesting for bed. Warrant Sec135(1) to be executed tomorrow morning @ 10.00am. His name is on the bed Management board Originator Details: 02 Feb 2016 18:19 Mrs Bibi Eatally Nursing Originally Entered by Details: 02 Feb 2016 18:21 Mrs Bibi Eatally Last Amended by Details: 02 Feb 2016 18:21 Mrs Bibi Eatally Validated by Details: 02 Feb 2016 18:21 Mrs Bibi Eatally Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Bed Management</u> Phone call received form Enfield Duty AMHP Maggie requesting for bed. Warrant Sec135(1) to be executed tomorrow morning @ 10.00am. His name is on the bed Management board	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers: 76	02/02/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Feb 2016 Last Amended by Details: 02 Feb 2016 Margaret Garrod Social Worker Page Numbers: 76 Simon rang the AMHP office and it seems following a discussion and he needs confirmation of the evidence that he is less well as this was not his impression from is care co-ordinator. He may agree to allow access. <u>76</u> Originator Details: 02 Feb 2016 17:51 Margaret Garrod Social Worker Originally Entered by Details: 02 Feb 2016 17:57 Margaret Garrod Last Amended by Details: 02 Feb 2016 17:57 Margaret Garrod Validated by Details: 02 Feb 2016 17:57 Margaret Garrod Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	

Simon rang the AMHP office and it seems following a discussion and he needs confirmation of the evidence that he is less well as this was not his impression from his care co-ordinator. He may agree to allow access.

02/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 02 Feb 2016

Last Amended by Details: 02 Feb 2016

Margaret Garrod Social Worker

Page Numbers: 76

Enfield AMHP Service - Mental Health Act assessment details:

03/02/2016

Date:

03rd Feb 2016

Time: 10.00

Rendezvous point: ***** Shaftesbury Avenue and Green Street***

AMHP: Sam Curtis

Mob: 0208 702 6108

1st Doctor: Dr Al_Allaq

Mob: 07950 558455

2nd Doctor: Dr Albazaz

Mob: 07726 334034

Second/co-Worker: Amal Pomphrey

Mob: 0208 702 3134

Estate officer Dawn Allen

Mob: 07506 287 139

Locksmith: With Dawn Allen

HTT: Yes, aware of RVPoint

NR: Parents Tel/mob: Father Ben [REDACTED]

[REDACTED] Mother Lorraine [REDACTED]

Bed Manager aware? 0208 702 5550: Yes

Aware *Ambulance: PSS Ref: Not yet

booked S135 Warrant +

Police Safer Neighbourhood team

SGT

Mark Auldwinkle

0208 345 1124

Please tell them of Rendezvous Point and request they bring

Bite Back Spray for the dog

Originator Details: 02 Feb 2016 17:23 Margaret

Garrod Social Worker Originally Entered by

Details: 02 Feb 2016 17:25 Margaret Garrod Last

Amended by Details: 02 Feb 2016 17:45 Margaret

Garrod Validated by Details: 02 Feb 2016 17:36

Margaret Garrod Significant: No Added to Risk

History: No

Contains Third Party Info: No Conceal from Client:

Not Concealed

**Enfield AMHP Service - Mental Health Act
assessment details:**

03/02/2016

Date:

03rd Feb 2016

Time: 10.00

Rendezvous point: ***** Shaftesbury Avenue and
Green Street***

AMHP: Sam Curtis

Mob: 0208 702 6108

1st Doctor: Dr Al Allaq

Mob: 07950 558455

2nd Doctor: Dr Albazaz

Mob: 07726 334034

Second/co-Worker: Amal Pomphrey

Mob: 0208 702 3134

Estate officer Dawn Allen

Mob: 07506 287 139

Locksmith: With Dawn Allen

HTT: Yes, aware of RVPoint

NR: Parents Tel/mob: Father Ben [REDACTED]

Mother Lorraine [REDACTED] Bed Manager

aware? 0208 702 5550: Yes Aware *Ambulance:

PSS Ref: Not yet booked S135 Warrant +

Police Safer Neighbourhood team

SGT

Mark Auldwinkle

0208 345 1124

Please tell them of Rendezvous Point and request
they bring

Bite Back Spray for the dog

02/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 02 Feb 2016

Last Amended by Details: 02 Feb 2016

Amal Pomphrey Nursing

Page Numbers: 76 + 77

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Notes

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From: Pomphrey Amal

Sent:

02 February 2016

15:07

To: Muschett Sandra;

Antao Marie

Cc: Clark Simon;

Kripalani Mukesh;

Morgan Debbie;

Curtis Sam

Subject:

RE: Telephone Message

Importance: High

Dear all,

	He told me to take notes, told me to take down the time and date of our call. I have had a very irate call from Simon Cordell. He says that he has been Originator Details: 02 Feb 2016 15:07 Amal Pomphrey Nursing Originally Entered by Details: 02 Feb 2016 15:07 Amal Pomphrey Last Amended by Details: 02 Feb 2016 15:07 Amal Pomphrey Validated by Details: 02 Feb 2016 15:07 Amal Pomphrey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:77	<u>77</u> From: Pomphrey Amal Sent: 02 February 2016 15:07 To: Muschett Sandra; Antao Marie Cc; Clark Simon; Kripalani Mukesh; Morgan Debbie; Curtis Sam Subject: RE: Telephone Message Importance: High Dear all, He told me to take notes, told me to take down the time and date of our call. I have had a very irate call from Simon Cordell. He says that he has been informed by his mother that a warrant has been granted to access his flat. He says the mother received a call from someone earlier today to inform her and she has told Simon. Extremely unhappy, says he is going to come here with his solicitor - took down our address. Says he has always said he would see me (this is true). Although refused me, the doc and AMHP access the other week. Demanding I find out the nature of the warrant and what do I know about it. Asking to see me this afternoon. He wants a call back in half an hour. He is due for an MHA assessment tomorrow at 10am. Police are coming. The mother has clearly disclosed details of the assessment tomorrow to Simon. We are going to walk into a very hostile situation. I believe he may have CCTV cameras outside his flat facing the street as he mentioned to me previously that he saw someone sitting in their car (although this could be part of his paranoia). He does have CCTV in the entrance hallway. Could the police/assessing team please have forewarned. Maybe we need to meet around the corner rather than park outside his flat. Thanks, Amal Pomphrey	

02/02/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 02 Feb 2016

Last Amended by Details: 02 Feb 2016

Sandra Muschett Social Worker

Page Numbers:77 + 78

77

Notes

78

Email sent,

Dear Jackie,

Thanks for your email regarding the above mental health act assessment which is scheduled to take place on

03/02/2016

at 10.00am.

Could you confirm that a locksmith will be present to secure the property?

The Approved Mental Health Act

Professional (AMHP) will be

Sam Curtis

and his mobile number is 0208 702 6108

and this is an NHS Trust mobile number.

If you have any concerns please do not hesitate to contact me.

Regards

Sandra Muschett

Email received from

Jackie Gubby - housing

Hi Louise

Simon Cordell Burncroft Ave

Have you been liaising with?

Anthony Manning

on this one, can you advise on the force entry with Police presence. I understand that he has an internal metal gate installed.

Looks like we have a date for the

03/02/2016

at 10am

Thank you

Jackie

Jackie

Jackie Gubby Housing Manager

Originator Details: 02 Feb 2016 09:49 Sandra

Muschett Social Worker Originally Entered by

Details: 02 Feb 2016 09:50 Sandra Muschett Last

Amended by Details: 02 Feb 2016 09:50 Sandra

Muschett Validated by Details: 02 Feb 2016 09:50

Sandra Muschett Significant: No Added to Risk

History: No

Contains Third Party Info: No Conceal from Client:

Not Concealed

• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:78	78 Email sent, Dear Jackie, Thanks for your email regarding the above mental health act assessment which is scheduled to take place on 03/02/2016 at 10.00am. Could you confirm that a locksmith will be present to secure the property? The Approved Mental Health Act Professional (AMHP) will be Sam Curtis and his mobile number is 0208 702 6108 and this is an NHS Trust mobile number. If you have any concerns please do not hesitate to contact me. Regards Sandra Muschett Email received from Jackie Gubby - housing Hi Louise Simon Cordell Burncroft Ave Have you been liaising with? Anthony Manning on this one, can you advise on the force entry with Police presence. I understand that he has an internal metal gate installed. Looks like we have a date for the 03/02/2016 at 10am Thank you <u>Jackie</u> <u>Jackie</u> Jackie Gubby Housing Manager	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:79	01/02/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Feb Last Amended by Details: 05 Feb 2016 Hashi Nath Social Worker Page Numbers:79 <u>Enfield AMHP office</u> Enfield AMHP office T/C to Housing Officers Dawn Allan And Jackie Gubby a€“ 0208 375 8131 a€“ no answer. A message has been left for both officers to return my call. T/C to Civic Centre to Housing estate to inform them of the MHAA for SC 03/02/2016	

	@ 10am. Informed by admin that the line was busy and try to contact another number 0208 379 1327. T/C using 8379 1327 which goes through to Civic Centre and not directly to Housing services. An email has been sent to Dawn and Jackie and cc to Sandra 79 Originator Details: 01 Feb 2016 11:14 Hashi Nath Social Worker Originally Entered by Details: 01 Feb 2016 11:44 Hashi Nath Last Amended by Details: 05 Feb 2016 15:48 Hashi Nath Validated by Details: 01 Feb 2016 12:41 Hashi Nath Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield AMHP office</u> Enfield AMHP office T/C to Housing Officers Dawn Allan And Jackie Gubby a€“ 0208 375 8131 a€“ no answer. A message has been left for both officers to return my call. T/C to Civic Centre to Housing estate to inform them of the MHAA for SC 03/02/2016 @ 10am. Informed by admin that the line was busy and try to contact another number 0208 379 1327. T/C using 8379 1327 which goes through to Civic Centre and not directly to Housing services. An email has been sent to Dawn and Jackie and cc to Sandra 27/01/2016 <u>The Doctor’s Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Jan 2016 Last Amended by Details: 27 Jan 2016 Hugh Briscoe Social Worker Page Numbers:79 + 80 <u>79</u> Notes <u>80</u> mha asmt set up for 10.00 on Wednesday 03/02/2016 at client’s home address.	
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	police snt to attend. warrant available at amhp office. s.12 Dr. al Allaq & s. 12 Dr. Albazaz to attend. care coordinator made aware of plan and agreed to attend. door code to block [REDACTED] according to Sandra's note dated 21/1, Simons mother has agreed to look after dog "lady". I spoke to mother on [REDACTED] she said she would be willing and able to care for dog, if Simon goes into hospital. she indicated very strongly that she believes Simon is being harassed Originator Details: 27 Jan 2016 16:04 Hugh Briscoe Social Worker Originally Entered by Details: 27 Jan 2016 16:07 Hugh Briscoe Last Amended by Details: 27 Jan 2016 16:33 Hugh Briscoe Validated by Details: 27 Jan 2016 16:33 Hugh Briscoe Significant: No Added to Risk History: No Contains Third Party Info: Yes, Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue:</u> <u>5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:80	80 mha asmt set up for 10.00 on Wednesday 03/02/2016 at client's home address. police snt to attend. warrant available at amhp office. s.12 Dr. al Allaq & s. 12 Dr. Albazaz to attend. care coordinator made aware of plan and agreed to attend. door code to block [REDACTED] according to Sandra's note dated 21/1, Simons mother has agreed to look after dog "lady". I spoke to mother on [REDACTED] she said she would be willing and able to care for dog, if Simon goes into hospital. she indicated very strongly that she believes Simon is being harassed by his upstairs neighbour, who she said has mental health problems, she said also that Simon (and the whole family) have been harassed by police for the last 20 years, she said Simon suffers from stress that is exacerbated by neighbour and police actions?	

	I advised she speaks to cc Amal regarding her concerns, she said Simon is happy to engage with Amal and eis. I advised of details for mha asmt so that she can be available - she said she would care for dog if Simon admitted. I advised she does not tell Simon of the mha asmt plan, in case he decides to avoid seeing staff, I was not certain from her approach that she would adhere to this advice, she warned that police attending Simon's home would cause uproar. to do: - confirm locksmith availability via Line council Jackie Gubby 020 8375 8131 – message left on her answer phone. - bed manager to be alerted. 27/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Jan 2016 Last Amended by Details: 27 Jan 2016 Hugh Briscoe Social Worker Page Numbers:80 Call received from safer neighbourhood team (snt) Sgt mark Aldwinckle 020 8345 1124. he said police snt not available until wed 03/02/2016 in discussion, we agreed that although mha asmt needs to be carried out as soon as possible, there does not seem to be anything which is escalating any risk presented by Simon, at this time, we agreed that given police snt knowledge of client and ongoing quite frequent contact with him, it would be useful to have local snt staff attend to assist on the occasion of this mha asmt - rather than other police officers who are not familiar with him. we discussed issue that Simon has a dog, and that it would be possible for him to use dog as a threat against staff wishing to enter his property. Sgt Aldwinckle said police would equip with "bite back" spray, which they may use to calm threatening dogs. we agreed 10.00 on Wednesday 03/02/2016 as date for mha asmt to set up.	
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	Originator Details: 27 Jan 2016 15:22 Hugh Briscoe Social Worker Originally Entered by Details: 27 Jan 2016 15:30 Hugh Briscoe Last Amended by Details: 27 Jan 2016 16:04 Hugh Briscoe Validated by Details: 27 Jan 2016 16:04 Hugh Briscoe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Call received from safer neighbourhood team (snt) Sgt mark Aldwinckle 020 8345 1124. he said police snt not available until wed 03/02/2016 in discussion, we agreed that although mha asmt needs to be carried out as soon as possible, there does not seem to be anything which is escalating any risk presented by Simon, at this time, we agreed that given police snt knowledge of client and ongoing quite frequent contact with him, it would be useful to have local snt staff attend to assist on the occasion of this mha asmt - rather than other police officers who are not familiar with him. we discussed issue that Simon has a dog, and that it would be possible for him to use dog as a threat against staff wishing to enter his property. Sgt Aldwinckle said police would equip with "bite back" spray, which they may use to calm threatening dogs. we agreed 10.00 on Wednesday 03/02/2016 as date for mha asmt to set up. 27/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 27 Jan 2016 Last Amended by Details: 27 Jan 2016 Hugh Briscoe Social Worker Page Numbers:80 + 81 <u>80</u> Notes <u>81</u> amhp service sent risk asmt and court report to police on 26/1. amhp has also received email from Amal raising further concern and asking amhp service to escalate matter of arranging mha asmt. 10.00 - I spoke with pc James flesher Enfield highway	
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	snt 020 8721 2903 and explained further concerns as outlined in Amal's email from yesterday, he said the responsible snt officer Sgt mark Aldwinckle is due in at 14.00 and he will attend to the matter of identifying police availably, and contact amhp service - number provided. Originator Details: 27 Jan 2016 09:49 Hugh Briscoe Social Worker Originally Entered by Details: 27 Jan 2016 10:09 Hugh Briscoe Last Amended by Details: 27 Jan 2016 10:09 Hugh Briscoe Validated by Details: 27 Jan 2016 10:09 Hugh Briscoe Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:81	81 amhp service sent risk asmt and court report to police on 26/1. amhp has also received email from Amal raising further concern and asking amhp service to escalate matter of arranging mha asmt. 10.00 - I spoke with pc James flesher Enfield highway snt 020 8721 2903 and explained further concerns as outlined in Amal's email from yesterday, he said the responsible snt officer Sgt mark Aldwinckle is due in at 14.00 and he will attend to the matter of identifying police availably, and contact amhp service - number provided. 26/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 26 Jan 2016 Last Amended by Details: 26 Jan 2016 Amal Pomphrey Nursing Page Numbers:81 In addition, Simon said that he would be happy to meet with me to show me recordings and data. He does not want doctors or the police visiting. Originator Details: 26 Jan 2016 16:26 Amal Pomphrey Nursing Originally Entered by Details: 26 Jan 2016 16:27 Amal Pomphrey Last Amended by Details: 26 Jan 2016 16:27 Amal Pomphrey Validated by Details: 26 Jan 2016 16:27 Amal Pomphrey Significant: No Added to Risk History: No	

Contains Third Party Info: No Conceal from Client:
Not Concealed

In addition, Simon said that he would be happy to meet with me to show me recordings and data. He does not want doctors or the police visiting.

26/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 26 Jan 2016

Last Amended by Details: 26 Jan 2016

Amal Pomphrey Nursing

Page Numbers:81

Message received to call Simon.

Called Simon on his mobile. Asks after my welfare.

He went on to say that a

PC Steve E

And

Steve from the civic are in collaboration.

He has had a call from

Louise Brown

(he asked me write down her name)

making threats to get the MH team out to see him.

Says his neighbour is victimizing him.

Doesn't want the police or MH team visiting him to say he has anxiety.

He spoke of writing constitutions, he has incriminating evidence. He has things in black and white that are being used against him.

He was pressured, thought disordered and difficult to follow. He again mentioned HIV

but could I not make any sense of what he was saying as it was rambles.

I have spoken with the AMHP office and I understand a warrant has been granted and a police risk assessment has been forwarded to the police along with the warrant and a date is now being awaited.

I shall email AMHP office to alert them to my conversation today.

Originator Details: 26 Jan 2016 16:09 Amal Pomphrey Nursing Originally Entered by Details: 26 Jan 2016 16:13 Amal Pomphrey Last Amended by Details: 26 Jan 2016 16:23 Amal Pomphrey Validated by Details: 26 Jan 2016 16:23 Amal Pomphrey Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:
Not Concealed

Message received to call Simon.

	Called Simon on his mobile. Asks after my welfare. He went on to say that a PC Steve E And Steve from the civic are in collaboration. He has had a call from Louise Brown (he asked me write down her name) making threats to get the MH team out to see him. Says his neighbour is victimizing him. Doesn't want the police or MH team visiting him to say he has anxiety. He spoke of writing constitutions, he has incriminating evidence. He has things in black and white that are being used against him. He was pressured, thought disordered and difficult to follow. He again mentioned HIV but could I not make any sense of what he was saying as it was rambles. I have spoken with the AMHP office and I understand a warrant has been granted and a police risk assessment has been forwarded to the police along with the warrant and a date is now being awaited. I shall email AMHP office to alert them to my conversation today. 26/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 26 Jan 2016 Last Amended by Details: 26 Jan 2016 Mr Anthony Manning Social Worker Page Numbers:81 telephone contact with housing, the housing officer are Jackie Gubby And Dawn Allan 02083758131 Dawn will need to know when the assessment is planned and they can arrange a lock smith. Originator Details: 26 Jan 2016 14:36 Mr Anthony Manning Social Worker - Social Worker Originally Entered by Details: 26 Jan 2016 14:38 Mr Anthony Manning Last Amended by Details: 26 Jan 2016 14:38 Mr Anthony Manning Validated by Details: 26 Jan 2016 14:38 Mr Anthony Manning Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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	telephone contact with housing, the housing officer are Jackie Gubby And Dawn Allan 02083758131 Dawn will need to know when the assessment is planned and they can arrange a lock smith. 22/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 22 Jan 2016 Last Amended by Details: 22 Jan 2016 Amal Pomphrey Nursing Page Numbers:81 + 82 <u>8</u> Notes <u>82</u> From: Pomphrey Amal Sent: 22 January 2016 13:55 To: Muschett Sandra Cc: Clark Simon Subject: RE: Telephone Message I have had a very lengthy conversation with Simon. He starts quite calm however soon descends into a conversation in that he feels persecuted and paranoid against the police, the govt, and his upstairs neighbour. He was tangential, thought disordered, grandiose and difficult to follow at times. Quoting parts of various acts and reading out letters. Asked me what are my objectives? Who visited, the names? Concerned that the police may be coming. Who referred Originator Details: 22 Jan 2016 13:55 Amal Pomphrey Nursing Originally Entered by Details: 22 Jan 2016 13:57 Amal Pomphrey Last Amended by Details: 22 Jan 2016 13:57 Amal Pomphrey Validated by Details: 22 Jan 2016 13:57 Amal Pomphrey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u>	82 From: Pomphrey Amal Sent:	

22 January 2016

13:55

To:

Muschett Sandra

Cc: Clark Simon

Subject:

RE: Telephone Message I have had a very lengthy conversation with Simon.

He starts quite calm however soon descends into a conversation in that he feels persecuted and paranoid against the police, the govt, and his upstairs neighbour. He was tangential, thought disordered, grandiose and difficult to follow at times.

Quoting parts of various acts and reading out letters.

Asked me what are my objectives?

Who visited, the names?

Concerned that the police may be coming.

Who referred me to you? I haven't seen my GP for ages.

Says he has showed Goodie the true facts and he has official documents to say he has been set up by the police.

Says he has been arrested 60 times, he has all the papers. His appeal is in

02/52.

He went on talk about a relationship he had and

08/12

into that relationship the woman said she had an internal problem, the clinic said she had an external problem.

Said the clinic was watching him.

He went on to say that he attended a sexual health clinic on the

08/05/2015

and received a letter to say he had anti-bodies and he shouldn't have sex with anyone.

Says that the neighbour eavesdrops saying he has HIV and Hep B.

I'm really unclear about this, whether he has HIV or Hep B or this is part of his mental health problem.

Says that he is building a website and charity and educating others.

Police setting him up.

He spoke about his upstairs neighbour at length, says she is an alcoholic and has LD.

Under a MH team. Says she stalks him and has written him letters.

She bangs on the taps, he has digi recorded her.

Neighbour can hear his friends in the flat and follows them upstairs and bangs on the taps.

He has been recording her. 3 days ago, says that she flooded his flat,

he undone the knot on the radiator. She is trying to destroy his life. It's been going on in total for 400 days.

Neighbour is deliberately ruining his property. Says neighbour needs to be analysed as does her network.

He could do a citizen arrest.

Thanks,

	Amal Pomphrey 22/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 22 Jan 2016 Last Amended by Details: 22 Jan 2016 Sandra Muschett Social Worker Page Numbers:82 + 83 <u>8</u> Notes <u>83</u> <u>ENFIELD AMHP MENTAL HEALTH ACT SERVICE</u> Dr Al-Allaq, Amal (EIS) and I visited Simona€™s home for the purpose of undertaking a Mental Health Act assessment. Simon was very angry that we had attended unannounced stating that when I last visited, I did not say I would come back and that he felt he was forming a good working relationship with the team. He went on to say that he has been targeted by the police who are stopping him from working. He described organising Originator Details: 22 Jan 2016 13:33 Sandra Muschett Social Worker Originally Entered by Details: 22 Jan 2016 13:37 Sandra Muschett Last Amended by Details: 22 Jan 2016 13:37 Sandra Muschett Validated by Details: 22 Jan 2016 13:37 Sandra Muschett Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers: 83	<u>83</u> <u>ENFIELD AMHP MENTAL HEALTH ACT SERVICE</u> Dr Al-Allaq, Amal (EIS) and I visited Simona€™s home for the purpose of undertaking a Mental Health Act assessment. Simon was very angry that we had attended unannounced stating that when I last visited, I did not say I would come back and that he felt he was forming a good working relationship with the team. He went on to say that he has been targeted by the police who are stopping him from working. He described organising several illegal Raves which the police shut down.	

	He presented as manic with pressure of speech but when Dr Al- Allaq questioned him about this, he started talking slower stating that we were busy people so he was talking fast to get all the information out. He said that the police have arrested him over 1,000 times and that he is on a 10-year curfew to not leave the house after 8.00pm. He has insulted CCTV cameras outside the house and stated that he is recording our visit and will make a formal complaint and take it higher. He said that he has lost thousands of pounds in earnings due to police harassment. He said that the police have contacted the DVLA who are monitoring him. He said he has files and files of information which proves that he is being harassed and monitored by the police. He gave an account of going to court about this and has documents that prove he is being harassed and targeted by the police. He said that he has been to see a psychologist in the East Community Support and Recovery Team and that the psychiatrist said he is not mentally well. Simon refused to allow the assessing team into his property stating that we have to send him an appointment letter. He said he is recording us on CCTV and will have evidence of our conversation. Simon presented as paranoid, suspicious, and grandiose with flights of ideas, clear evidence that he is suffering from a mental disorder. Plan Obtain a Section 135 (1) warrant to enable us to gain police assistance to enter his property for the purpose of carrying out a Mental Health Act assessment (1983). 22/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 22 Jan 2016 Last Amended by Details: 22 Jan 2016 Amal Pomphrey Nursing Page Numbers: 83 From: KhatunTahera Sent: 22 January 2016 12:41 To: Pomphrey Amal Subject: Telephone Message Simon Cordell had called raising concerns regarding an unannounced visit with two females and one male today. He felt very threatened and intimidated and would like to make a complaint about this incident.	
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	I mentioned that you will be calling him after your assessment this afternoon and record the conversation. I told him that we are a service to support him and not making him any other way. If you can please kindly give him a call back on [REDACTED] Thank you Tahera Khatun Originator Details: 22 Jan 2016 12:58 Amal Pomphrey Nursing Originally Entered by Details: 22 Jan 2016 12:58 Amal Pomphrey Last Amended by Details: 22 Jan 2016 12:58 Amal Pomphrey Validated by Details: 22 Jan 2016 12:58 Amal Pomphrey Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed From: KhatunTahera Sent: 22 January 2016 12:41 To: Pomphrey Amal Subject: Telephone Message Simon Cordell had called raising concerns regarding an unannounced visit with two females and one male today. He felt very threatened and intimidated and would like to make a complaint about this incident. I mentioned that you will be calling him after your assessment this afternoon and record the conversation. I told him that we are a service to support him and not making him any other way. If you can please kindly give him a call back on 0208 245 7454 Thank you Tahera Khatun 21/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Jan 2016 Last Amended by Details: 21 Jan 2016 18 Shiwajee Rama Nursing Page Numbers: 83 Call from Enfield AMHP office of MHAA arranged for 22/01/2016 at 11am. Originator Details: 21 Jan 2016 18:04 Shiwajee Rama Nursing Originally Entered by Details: 21 Jan 2016 18:05 Shiwajee Rama Last Amended by Details: 21 Jan 2016 18:05 Shiwajee Rama	
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	Validated by Details: 21 Jan 2016 18:05 Shiwajee Rama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Bed Management Call from Enfield AMHP office of MHAA arranged for 22/01/2016 at 11am.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:84	21/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Jan 2016 Last Amended by Details: 21 Jan 2016 Monowara Ahmed Social Worker Page Numbers:84 <u>ENFIELD AMHP SERVICE</u> Entry by Monowara Ahmed (duty amhp). Received a request for MHA assessment from the EIS. - Arranged the assessment tomorrow 22nd January at 11 am. - Dr All Al-Allaque and Dr Al Bazaz Section 12 approved Dr are attending. - HTT - informed spoke with Sharon the Admin she took the referral, however, the duty AMHP would need to contact the HTT tomorrow morning to confirm which staff is attending from the HTT. - Amal from the EIS is attending as a second worker. - Bed manager Raj is informed for the bed. - Ambulance/PSS booked for 11.30 am, the CAD number is 1839 <u>84</u> Originator Details: 21 Jan 2016 11:28 Monowara Ahmed Social Worker Originally Entered by Details: 21 Jan 2016 11:39 Monowara Ahmed Last Amended by Details: 21 Jan 2016 16:37 Monowara Ahmed Validated by Details: 21 Jan 2016 16:37 Monowara Ahmed Significant: No Added to Risk History: No	

Contains Third Party Info: No Conceal from Client:
Not Concealed

ENFIELD AMHP SERVICE

Entry by

Monowara Ahmed

(duty amhp).

Received a request for MHA assessment from the EIS.

- Arranged the assessment tomorrow

22nd January

at 11 am.

- Dr All Al-Allaque

and

Dr Al Bazaz

Section 12 approved Dr are attending.

- HTT - informed spoke with

Sharon

the Admin she took the referral, however, the duty AMHP would need to contact the HTT tomorrow morning to confirm which staff is attending from the HTT.

- Amal

from the EIS is attending as a second worker.

- Bed manager

Raj

is informed for the bed.

- Ambulance/PSS booked for 11.30 am, the CAD number is 1839

21/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 21 Jan 2016

Last Amended by Details: 21 Jan 2016

Sandra Muschett Social Worker

Page Numbers:84

ENFIELD MENTAL HEALTH AMHP SERVICE

Please note that Simon has a dog called Lady so arrangements will need to be put in place to ensure that the dog is cared for.

The building has a code which his mother has details of - so contact her first.

T/c to Loraine Cordell mother on [REDACTED]

[REDACTED] and had a long conversation. Loraine said that Simon has been

unwell for many years

and was assessed in 2014 but not detained.

She said that his fixation with the police is factual

as he has been harassed for many years. He has a history of attempted suicide when he was in young offender a€™s prison when

	he was 16 years old and had to be moved to a high secure unit. Lorraine said that Simon is not eating, poor self-care and is not going out. He uses cannabis and has a history of using LSD. <u>Lorraine does not object to him being detained but does not want he to know that she has been talking to us.</u> Door Code: [REDACTED] Lorraine has agreed to look after Lady if Simon is detained. PLAN Mental Health Act assessment to be arranged for 22/01/2016 Originator Details: 21 Jan 2016 10:10 Sandra Muschett Social Worker Originally Entered by Details: 21 Jan 2016 10:14 Sandra Muschett Last Amended by Details: 21 Jan 2016 10:39 Sandra Muschett Validated by Details: 21 Jan 2016 10:39 Sandra Muschett Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ENFIELD MENTAL HEALTH AMHP SERVICE</u> Please note that Simon has a dog called Lady so arrangements will need to be put in place to ensure that the dog is cared for. The building has a code which his mother has details of - so contact her first. T/c to Lorraine Cordell mother on [REDACTED] and had a long conversation. Lorraine said that Simon has been unwell for many years and was assessed in 2014 but not detained. She said that his fixation with the police is factual as he has been harassed for many years. He has a history of attempted suicide when he was in young offender a€™s prison when he was 16 years old and had to be moved to a high secure unit. Lorraine said that Simon is not eating, poor self-care and is not going out. He uses cannabis and has a history of using LSD. <u>Lorraine does not object to him being detained but does not want he to know that she has been talking to us.</u> Door Code: [REDACTED] Lorraine has agreed to look after Lady if Simon is detained. PLAN Mental Health Act assessment to be arranged for 22/01/2016	
<u>The Doctor's Folder / pub Book Issue: 5!</u>		

Stage 5
Folder 5

Page Numbers:85

19/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5
Folder 5

Originator Details: 19 Jan 2016

Last Amended by Details: 20 Jan 2016

Goodie Adama Nursing

Page Numbers:85

Unannounced home visit with Sandra,
Senior Practitioner / AMHP

Seen at on

19/01/2016

with

Sandra Muschett,

Snr Pract.

He appeared paranoid about people, police especially and had grandiose delusions. Not eating well. No apparent evidence of self-harm or harm to others. No suicidal thoughts.

Simon has installed CCTV at his front door and inside his flat.

Action a€ “referred for MHA assessment a€ “

Sandra

accepted referral

85

Originator Details: 19 Jan 2016 14:16 Goodie

Adama Nursing Originally Entered by Details: 19

Jan 2016 14:17 Goodie Adama Last Amended by

Details: 20 Jan 2016 01:04 Goodie Adama

Validated by Details: 20 Jan 2016 01:04 Goodie

Adama Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal from Client:

Not Concealed

Unannounced home visit with Sandra, Senior
Practitioner / AMHP

Seen at on

19/01/2016

with

Sandra Muschett,

Snr Pract.

He appeared paranoid about people, police especially and had grandiose delusions. Not eating well. No apparent evidence of self-harm or harm to others. No suicidal thoughts.

Simon has installed CCTV at his front door and inside his flat.

Action a€ “referred for MHA assessment a€ “

Sandra

accepted referral

19/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**

	<u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Jan 2016 Last Amended by Details: 20 Jan 2016 Goodie Adama Nursing Page Numbers:85 t/c to Simon and there was no answer plan - I will arrange an unannounced visit this afternoon Originator Details: 19 Jan 2016 12:16 Goodie Adama Nursing Originally Entered by Details: 19 Jan 2016 14:16 Goodie Adama Last Amended by Details: 20 Jan 2016 01:03 Goodie Adama Validated by Details: 20 Jan 2016 01:03 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c to Simon and there was no answer plan - I will arrange an unannounced visit this afternoon 15/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 15 Jan 2016 Last Amended by Details: 20 Jan 2016 Goodie Adama Nursing Page Numbers:85 <u>Simon rang reception</u> to make enquiries about his referral. I was called to take the call and I spoke with Simon. He wanted to know why he has been referred to mental health services I read to him the referral letter from his GP and he seemed to have understood and accepted my response. Simon explained his circumstances i.e. repeated all that has been documented on RiO already regarding the police and him He appeared quite satisfied talking to me and agreed to a home visit on Monday at / after mid-day Originator Details: 15 Jan 2016 16:56 Goodie Adama Nursing Originally Entered by Details: 15 Jan 2016 16:58 Goodie Adama Last Amended by Details: 20 Jan 2016 01:02 Goodie Adama Validated by Details: 20 Jan 2016 01:02 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Simon rang reception</u>	
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to make enquiries about his referral. I was called to take the call and I spoke with Simon. He wanted to know why he has been referred to mental health services. I read to him the referral letter from his GP and he seemed to have understood and accepted my response. Simon explained his circumstances i.e. repeated all that has been documented on RiO already regarding the police and him. He appeared quite satisfied talking to me and agreed to a home visit on Monday at / after mid-day.

15/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 15 Jan 2016

Last Amended by Details: 20 Jan 2016

Goodie Adama Nursing

Page Numbers:85

t/c to Simon to arrange meeting and there was no answer.

Plan

call again on Monday and discuss him on Tuesday at EIS referral meeting.

Originator Details: 15 Jan 2016 16:36 Goodie Adama Nursing Originally Entered by Details: 15 Jan 2016 16:37 Goodie Adama Last Amended by Details: 20 Jan 2016 00:57 Goodie Adama Validated by Details: 20 Jan 2016 00:57 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

t/c to Simon to arrange meeting and there was no answer.

Plan

call again on Monday and discuss him on Tuesday at EIS referral meeting.

14/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 14 Jan 2016

Last Amended by Details: 16 Jan 2016

Goodie Adama Nursing

Page Numbers:85

t/c to Simon and his mobile was not answered.

	Originator Details: 14 Jan 2016 16:34 Goodie Adama Nursing Originally Entered by Details: 15 Jan 2016 16:35 Goodie Adama Last Amended by Details: 16 Jan 2016 00:47 Goodie Adama Validated by Details: 16 Jan 2016 00:47 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c to Simon and his mobile was not answered.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers: 86	13/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 13 Jan 2016 Last Amended by Details: 13 Jan 2016 Goodie Adama Nursing Page Numbers: 86 t/c I spoke with Simon this morning; it appeared I woke him up from sleep as he sounded sleepy. He was able to hold conversation with me and asked him if it was ok to visit him with colleague who is not a doctor today at 2pm. Simon said that it was not convenient today and asked me to call back tomorrow afternoon to discuss a visit. <u>86</u> Originator Details: 13 Jan 2016 10:43 Goodie Adama Nursing Originally Entered by Details: 13 Jan 2016 10:52 Goodie Adama Last Amended by Details: 13 Jan 2016 10:52 Goodie Adama Validated by Details: 13 Jan 2016 10:52 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I spoke with Simon this morning; it appeared I woke him up from sleep as he sounded sleepy. He was able to hold conversation with me and asked him if it was ok to visit him with colleague who is not a doctor today at 2pm. Simon said that it was not convenient today and asked me to call back tomorrow afternoon to discuss a visit. 13/01/2016 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 13 Jan 2016 Last Amended by Details: 13 Jan 2016	

	Goodie Adama Nursing Page Numbers: 86 <u>Sandra,</u> senior social worker / AMHP has offered a joint visit with me to see Simon this afternoon at 2pm. Originator Details: 13 Jan 2016 10:21 Goodie Adama Nursing Originally Entered by Details: 13 Jan 2016 10:43 Goodie Adama Last Amended by Details: 13 Jan 2016 10:53 Goodie Adama Validated by Details: 13 Jan 2016 10:53 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Sandra,</u> senior social worker / AMHP has offered a joint visit with me to see Simon this afternoon at 2pm. 12/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 12 Jan 2016 Last Amended by Details: 13 Jan 2016 Goodie Adama Nursing Page Numbers: 86 Email: Briefly mentioned Simon to Sandra Muschett, Senior Social Worker / AMHP and requested if a joint home visit would be possible for second opinion. Sandra said she was not available however offered to discuss him if needed after a visit with EIP colleague. Originator Details: 12 Jan 2016 10:32 Goodie Adama Nursing Originally Entered by Details: 13 Jan 2016 10:40 Goodie Adama Last Amended by Details: 13 Jan 2016 10:41 Goodie Adama Validated by Details: 13 Jan 2016 10:41 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Email: Briefly mentioned Simon to Sandra Muschett, Senior Social Worker / AMHP and requested if a joint home visit would be possible for second opinion. Sandra said she was not available however offered to discuss him if needed after a visit with EIP colleague.	
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08/01/2016

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 08 Jan 2016

Last Amended by Details: 08 Jan 2016

Goodie Adama Nursing

Page Numbers: 86

t/c I spoke with Simon immediately his mother hangs up the phone with me.

Simon appeared polite and pleasant to speak with. He asked me how my Xmas and New Year breaks went.

He told me that his went ok.

However, when I asked "what did Santa bring you" he went completely off tangent and spoke about conspiracies and difficulties with the police.

He "rambled" on and appeared to be thought disordered. He also came across a paranoid with delusions about cases, 400 he intends to present to court and win.

He told me that he did not need help. He will only allow me to visit him if I came with a colleague and not a doctor.

I agreed and I told him that I will call him again on Monday or Tuesday to give him date and time.

He denied self-harm or harm to others.

There was no apparent evidence of suicidal thoughts.

Originator Details: 08 Jan 2016 16:21 Goodie Adama Nursing Originally Entered by Details: 08 Jan 2016 16:30 Goodie Adama Last Amended by Details: 08 Jan 2016 16:30 Goodie Adama Validated by Details: 08 Jan 2016 16:30 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

t/c I spoke with Simon immediately his mother hangs up the phone with me.

Simon appeared polite and pleasant to speak with. He asked me how my Xmas and New Year breaks went.

He told me that his went ok.

However, when I asked "what did Santa bring you" he went completely off tangent and spoke about conspiracies and difficulties with the police.

He "rambled" on and appeared to be thought disordered. He also came across a paranoid with delusions about cases, 400 he intends to present to court and win.

He told me that he did not need help. He will only allow me to visit him if I came with a colleague and not a doctor.
I agreed and I told him that I will call him again on Monday or Tuesday to give him date and time.
He denied self-harm or harm to others. There was no apparent evidence of suicidal thoughts.

08/01/2016

• **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 08 Jan 2016

Last Amended by Details: 08 Jan 2016

Goodie Adama Nursing

Page Numbers: 86

I had a telephone conversation with Simon's mother who expressed concerns about him. Mother appeared angry and frustrated that for over a year she has been seeking help for Simon and she has not been heard or listened to. I tried and failed to get what Simon's mother was concerned about. I asked what risks there were and what prompted her to call about Simon today and did not get much from her. It was difficult to speak with her as she was understandably emotional about his son not being helped. There was someone talking over Simon's mother and made the conversation difficult to follow. Mother said she will be taking the matter with his MP and hang up.

Originator Details: 08 Jan 2016 15:00 Goodie Adama Nursing Originally Entered by Details: 08 Jan 2016 15:42 Goodie Adama Last Amended by Details: 08 Jan 2016 15:51 Goodie Adama Validated by Details: 08 Jan 2016 15:51 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

I had a telephone conversation with Simon's mother who expressed concerns about him. Mother appeared angry and frustrated that for over a year she has been seeking help for Simon and she has not been heard or listened to. I tried and failed to get what Simon's mother was concerned about. I asked what risks there were and what prompted her to call about Simon today and did not get much from her. It was difficult to speak with her as she was understandably emotional about his son not being helped. There was someone talking over Simon's mother and made the conversation difficult to follow. Mother said she will be taking the matter with his MP and hang up.

	05/01/2016 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 05 Jan 2016 Last Amended by Details: 08 Jan 2016 Goodie Adama Nursing Page Numbers: 86 + 87 <u>8</u> Notes <u>87</u> <u>EIS case & referral meeting:</u> I gave feedback on Simon. I reported that he still remained adamant that he did not require mental health services. However, he is happy to speak with me. Team discussed possible actions - • cc to speak with GP and find out if they had any concerns • cc to continue telephone contact with Simon • discuss Simon again at next meeting Originator Details: 05 Jan 2016 11:24 Goodie Adama Nursing Originally Entered by Details: 08 Jan 2016 15:30 Goodie Adama Last Amended by Details: 08 Jan 2016 15:30 Goodie Adama Validated by Details: 08 Jan 2016 15:30 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:87	<u>87</u> <u>EIS case & referral meeting:</u> I gave feedback on Simon. I reported that he still remained adamant that he did not require mental health services. However, he is happy to speak with me. Team discussed possible actions - • cc to speak with GP and find out if they had any concerns • cc to continue telephone contact with Simon • discuss Simon again at next meeting 31/12/2015 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 31 Dec 2015 Last Amended by Details: 31 Dec 2015 Goodie Adama Nursing	

	Page Numbers:87 t/c I rang Simon and wished him Happy New Year and asked him how he was. He told me that he has been doing well and no problems except that he has a Court case in February to clear his name. However, he told me that he reported a police officer whom he secretly recorded for framing or setting him up. He said at the Highbury Magistrate Court the police officer Originator Details: 31 Dec 2015 14:56 Goodie Adama Nursing Originally Entered by Details: 31 Dec 2015 14:57 Goodie Adama Last Amended by Details: 31 Dec 2015 16:25 Goodie Adama Validated by Details: 31 Dec 2015 16:25 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I rang Simon and wished him Happy New Year and asked him how he was. He told me that he has been doing well and no problems except that he has a Court case in February to clear his name. However, he told me that he reported a police officer whom he secretly recorded for framing or setting him up. He said at the Highbury Magistrate Court the police officer was found guilty. He said he felt good about that and that he will be claiming compensation. He will also like an apology made through the news [media]. Simon informed me that he has not been going out much - "getting myself locked; I don't feel safe to walk around much" as I got a police officer arrested. I reminded him of my or EIP offer for help i.e. talk to someone or get practical help if the need arose. Simon was quite polite, thank me for calling and the reminder and wished me and the team a Happy New Year. Impression Apart from the story about getting a police officer arrested [? Delusional?]. and is plausible, Simon did not appear to have psychotic symptoms. He spoke clearly, coherently and content was logical. There was no apparent evidence of thought disorder. He appeared to not mind me calling him. I will call him again after New Year to check how things have moved on. 23/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Dec 2015 Last Amended by Details: 31 Dec 2015 Goodie Adama Nursing	
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	Page Numbers:87 t/c I spoke with Simon on 07763 043 933 and ask how he was and he told me that he was doing well. He informed me that he has been gathering necessary information / documentation to help him clear his name. He said he was waiting for the court date. I asked if there was anyway EIP could help him i.e. practical things etc. to assist him in his case. Simon thanked me for the offer and said that he was fine and did not need it. Originator Details: 23 Dec 2015 14:01 Goodie Adama Nursing Originally Entered by Details: 23 Dec 2015 14:02 Goodie Adama Last Amended by Details: 31 Dec 2015 14:54 Goodie Adama Validated by Details: 31 Dec 2015 14:54 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I spoke with Simon on 07763 043 933 and ask how he was and he told me that he was doing well. He informed me that he has been gathering necessary information / documentation to help him clear his name. He said he was waiting for the court date. I asked if there was anyway EIP could help him i.e. practical things etc. to assist him in his case. Simon thanked me for the offer and said that he was fine and did not need it. 23/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 23 Dec 2015 Last Amended by Details: 31 Dec 2015 Goodie Adama Nursing Page Numbers:87 t/c my first call went to mother's mobile and she could not speak because she said she was driving. Mother said she will call me back when convenient. Originator Details: 23 Dec 2015 13:54 Goodie Adama Nursing Originally Entered by Details: 23 Dec 2015 14:01 Goodie Adama Last Amended by Details: 31 Dec 2015 14:53 Goodie Adama Validated by Details: 31 Dec 2015 14:53 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
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	t/c my first call went to mother's mobile and she could not speak because she said she was driving. Mother said she will call me back when convenient.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:88	10/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 10 Dec 2015 Last Amended by Details: 11 Dec 2015 43 Goodie Adama Page Numbers:88 t/c I spoke with Simon at length and his final decision was that he was not interested in meeting me or having help from the mental health services. Simon told <u>88</u> Originator Details: 10 Dec 2015 14:42 Goodie Adama Nursing Originally Entered by Details: 10 Dec 2015 14:48 Goodie Adama Last Amended by Details: 11 Dec 2015 14:43 Goodie Adama Validated by Details: 11 Dec 2015 14:43 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I spoke with Simon at length and his final decision was that he was not interested in meeting me or having help from the mental health services. Simon told me he was not mentally ill and did not need help. He then went on to tell me about all the problems he had or still has with the police. He said that he simply wants to clear his name and that "the truth will set me free" His speech appeared pressure and went from topic to topic without ending one topic. He appeared to have an aggressive tone and on the other hand he appeared apologetic about refusing help. My impression is that Simon will not co-operative with assessment and treatment in the community. There was touch of delusions or rather exaggeration to his claims about being "victimised". There is information on the net about his arrest and being placed on ASBO. I will discuss his case at EIS case fit referral meeting on Tuesday 10/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 10 Dec 2015	

	Last Amended by Details: 10 Dec 2015 Goodie Adama Nursing Page Numbers:88 [REDACTED] to speak with Simon and a female answered and told me that she was his mother. She told me also that Simon was still in bed and will be upset if woken up. I told her who I was and the team. She recognised the team immediately and willingly gave me Simon's mobile number [REDACTED] Plan Goodie to call Simon from 12pm and arrange and assessment. Originator Details: 10 Dec 2015 10:38 Goodie Adama Nursing Originally Entered by Details: 10 Dec 2015 10:45 Goodie Adama Last Amended by Details: 10 Dec 2015 10:45 Goodie Adama Validated by Details: 10 Dec 2015 10:45 Goodie Adama Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed t/c I rang [REDACTED] to speak with Simon and a female answered and told me that she was his mother. She told me also that Simon was still in bed and will be upset if woken up. I told her who I was and the team. She recognised the team immediately and willingly gave me Simon's mobile number [REDACTED] Plan Goodie to call Simon from 12pm and arrange and assessment. 09/12/2015 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 09 Dec 2015 Last Amended by Details: 09 Dec 2015 Originator Details: 09 Dec 2015 Page Numbers:88 Simon Clark has notified Goodie who is managing EIS referrals this week Originator Details: 09 Dec 2015 14:35 Dr Jane Cushion Medical Originally Entered by Details: 09 Dec 2015 14:37 Dr Jane Cushion Last Amended by Details: 09 Dec 2015 14:37 Dr Jane Cushion Validated by Details: 09 Dec 2015 14:37 Dr Jane Cushion Significant: No Added to Risk History: No	
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	Contains Third Party Info: No Conceal from Client: Not Concealed EAS Simon Clark has notified Goodie who is managing EIS referrals this week 09/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 09 Dec 2015 Last Amended by Details: 09 Dec 2015 Linda Scott Page Numbers:88 <u>Assessment letter sent to the GP via email.</u> Dr Cushion advised that she would close the referral once the EIS had taken over this patient's care. Your message has been delivered to the following recipients: Surgery Nightingale House (NHS ENFIELD CCG) Subject: Mr Simon P CORDELL - D.O.B.: 26 Jan 1981 - NHS: 434 096 1671 Originator Details: 09 Dec 2015 10:58 Linda Scott Administrative Originally Entered by Details: 09 Dec 2015 10:59 Linda Scott Last Amended by Details: 09 Dec 2015 12:09 Linda Scott Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Assessment letter sent to the GP via email. Dr Cushion advised that she would close the referral once the EIS had taken over this patient's care. Your message has been delivered to the following recipients: Surgery Nightingale House (NHS ENFIELD CCG) Subject: Mr Simon P CORDELL - D.O.B.: 26 Jan 1981 - NHS: 434 096 1671	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:89	08/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Dec 2015 Mr Jameson Simwanza Social Worker Last Amended by Details: 08 Dec 2015	

	Page Numbers:89 + 90 + 91 <u>89</u> Notes <u>90</u> <u>EAS/ECRHTT entry;</u> Joint assessment conducted together with Dr Cushion from the Enfield Assessment Services at patients' home. We could not gain entry to his flat and therefore we had to make a telephone call to his mother who we asked to give <u>91</u> Being appropriately clothed. Mr Cordell was casually dressed in a truck suit. He was cleanly shaven with no signs of self-neglect Accommodation. Lives in a one bed roomed flat provided by the council and paid <u>89</u> Originator Details: 08 Dec 2015 17:51 Mr Jameson Simwanza Social Worker Originally Entered by Details: 08 Dec 2015 17:54 Mr Jameson Simwanza Last Amended by Details: 08 Dec 2015 19:10 Mr Jameson Simwanza Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:90	<u>90</u> <u>EAS/ECRHTT entry;</u> Joint assessment conducted together with Dr Cushion from the Enfield Assessment Services at patients' home. We could not gain entry to his flat and therefore we had to make a telephone call to his mother who we asked to give us a code for access to communal door of the property. Same given as 0123. His mother a€™s is called Lorraine and her phone number is 02082457454. Upon knocking on the door to his flat there was fierce barking of his dog from the flat. He was suspicious of people knocking on the door and asked, a€œWho are you?a€ We calmly introduced ourselves and called out purpose for our attendance. We then asked him to put his dog away and let us in. He complied without any issues. The front door was secured with a heavy-duty metal door and as soon as he opened the door, he instantly bombarded us with volumes of information, about who he is, he talked about what the police have done to him, explained what his neighbour is doing to him (following him about) and what he is doing to clear his name regarding his assumed criminal or police records. This pattern continued even when we sat down to interview him. He would not allow continuous flow of conversation; he had rapid speech, he was	

	disruptive and jumping topics. He had many volumes of files to refer to and try to prove his points and assumed mistreatment by the police and misdiagnosis by the medical professionals. However, he could be interrupted without him becoming angry. He could not facilitate conclusive dialog or interview no matter what method of interviewing we employed. We kept going around the circle without end. He appeared to be mentally disordered and without understanding of his illness (not insightful). We advised and offered him support for his mental disorders which he declined saying that he is not ill and will not take medication. His mother reported family history of mental illness. His grandmother suffered from schizophrenia. This could be the start of his schizophrenia exacerbated by drug use. Finally, we had to summarise purpose of our home visit. We told him that we had attended in order to address his medical as well as social issues: Medical: We told him that after the interview, we felt that he needed support/treatment for his mental disorders. We explained and offered him home treatment which he declined. I do not think that he would engage with the HTT. If he continues to take drugs he will continue to deteriorate in mental state and being paranoid about harm to him from others including the police and neighbours Social issues: A 34-year male of mixed race, white-black (mother is white and father is black). He was known to CAMHS as a child. He accessed mental health services in 2008, 2012, 2013, 2014 and this year with no records of previous admission. He admits to using skunk cannabis daily supplied by people. He pays for drug supply with his benefitsTM money and support from his mother. A well-known person to police. Relationships. Isolated for more than two years, he said. According to Simon; he is not allowed to go out to certain areas by the police and in particular industrial places. He said that he has no friends. However, his mother has regular contact with him. She does his shopping for him. Activity of daily living. He told me that he can cook for himself. I checked that his kitchen was clean and there was some activity of previous cooking. There was food in the fridge. Although his flat is full of equipment, computers, industrial printers, speakers, and others, his flat is reasonably clean and orderly. His bed room is not too bad either, has makeshift wall robe he made by himself and I could see that an attempt had been made to make the bed after night use.	
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<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:91	91 Being appropriately clothed. Mr Cordell was casually dressed in a truck suit. He was cleanly shaven with no signs of self-neglect Accommodation. Lives in a one bed roomed flat provided by the council and paid through housing benefits. Denied any rent arrears. Finance/employment. Unemployed, explained that he is not allowed to venture out by police and hence he cannot go out to look for work. He said that he is in receipt of state benefits. He told me that he earns around A£70 per week EAS and receives housing benefits on top. Mother supports him with money too. Social inclusion. He does not want to work or go for training. Said that his grandparents left a lot of money for the family. He said, "I am alright" Factors having significant impact on Mr Cordell's wellbeing. Mental health and emotional wellbeing; he continues to deteriorate in mental state as currently not under treatment and using skunk cannabis Conclusion/impression: Mr Cordell is not accepting that he is ill. He would not engage with the HTT. Mr Cordell needs to be referred to the EIS as showing early signs of psychosis. A referral for MHA assessment to admit him in hospital for further assessments and treatment would help reduce risk of further deterioration in mental state but Mr Cordell is not deterrable in his current mental state. No immediate social work role for now. The interview did not determine and Mr Cordell could not identify social issues having significant impact on his wellbeing. Plan; We gave him our 24-hour contact number to phone mental health services if in emergency (02087023800). 08/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Dec 2015 Last Amended by Details: 08 Dec 2015 39 Dr Jane Cushion Medical Page Numbers:91 <u>Letter to GP to be uploaded in clin docs</u> cc GP only Originator Details: 08 Dec 2015 16:39 Dr Jane Cushion Medical Originally Entered by Details: 08 Dec 2015 16:40 Dr Jane Cushion Last Amended by	
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	Details: 08 Dec 2015 16:40 Dr Jane Cushion Validated by Details: 08 Dec 2015 16:40 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Letter to GP to be uploaded in clin docs</u> cc GP only	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:92	08/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Dec 2015 Last Amended by Details: 08 Dec 2015 Dr Jane Cushion Medical Page Numbers:92 <u>EAS</u> Mother has crisis number and is in regular contact with Simon She confirmed that he has deteriorated gradually in last year, with no self-harm in last year she is aware of and no known harm to others <u>92</u> Originator Details: 08 Dec 2015 16:14 Dr Jane Cushion Medical Originally Entered by Details: 08 Dec 2015 16:15 Dr Jane Cushion Last Amended by Details: 08 Dec 2015 16:17 Dr Jane Cushion Validated by Details: 08 Dec 2015 16:17 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> Mother has crisis number and is in regular contact with Simon She confirmed that he has deteriorated gradually in last year, with no self-harm in last year she is aware of and no known harm to others 08/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Dec 2015 Last Amended by Details: 08 Dec 2015 Dr Jane Cushion Page Numbers:92 <u>EAS</u>	

	T/C to Simon's mother, who is his de facto carer: She said Simon's grandmother (her mother) had a diagnosis of BPAD and was detained formally multiple times: later her diagnosis was changed to SCZ and she responded well to Clozapine She is realistic about Simon's potential engagement and aware that things may not progress smoothly. She is keen to have support for herself and a carer's assessment while Simon is under the care of EIS - I told her about Enfield Carer's Centre She gave history that that large metal gate has gone up again recently: and that in her view Simon has been deteriorating for the past year Originator Details: 08 Dec 2015 15:39 Dr Jane Cushion Medical Originally Entered by Details: 08 Dec 2015 15:44 Dr Jane Cushion Last Amended by Details: 08 Dec 2015 15:44 Dr Jane Cushion Validated by Details: 08 Dec 2015 15:44 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> T/C to Simon's mother, who is his de facto carer: She said Simon's grandmother (her mother) had a diagnosis of BPAD and was detained formally multiple times: later her diagnosis was changed to SCZ and she responded well to Clozapine She is realistic about Simon's potential engagement and aware that things may not progress smoothly. She is keen to have support for herself and a carer's assessment while Simon is under the care of EIS - I told her about Enfield Carer's Centre She gave history that that large metal gate has gone up again recently: and that in her view Simon has been deteriorating for the past year. 08/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Dec 2015 Last Amended by Details: 08 Dec 2015 Samantha Bernard Page Numbers:92 <u>24hour notification letter emailed to GP on behalf of Dr Cushion:</u> Your message has been delivered to the following recipients: Surgery Nightingale House (NHS) ENFIELD CCG)	
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Subject: Mr Simon P CORDELL - D.O.B.:
26 Jan 1981 - NHS: 434 096 1671
Sent by Microsoft Exchange Server 2007

Originator Details: 08 Dec 2015 15:30 Samantha
Bernard Administrative Originally Entered by
Details: 08 Dec 2015 15:31 Samantha Bernard Last
Amended by Details: 08 Dec 2015 15:31 Samantha
Bernard Validated by Details: 08 Dec 2015 15:31
Samantha Bernard Significant: No Added to Risk
History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

**24hour notification letter emailed to GP on
behalf of Dr Cushion:**

Your message has been delivered to the following
recipients:

Surgery Nightingale House (NHS ENFIELD CCG)
Subject: Mr Simon P CORDELL - D.O.B.: 26 Jan
1981 - NHS: 434 096 1671
Sent by Microsoft Exchange Server 2007

08/12/2015

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 08 Dec 2015
Last Amended by Details: 08 Dec 2015
Dr Jane Cushion Medical

Page Numbers:92

EAS

PLEASE NOTE

Mother is very keen that Simon not know
she made the referral to mental health
services. Since his father called the HUB,
they have had no contact. She is Simon's
main support at the moment and has
concerns that Simon knowing of her
involvement would damage this
relationship and negatively impact on him.

Originator Details: 08 Dec 2015 15:13 Dr Jane
Cushion Medical Originally Entered by Details: 08
Dec 2015 15:16 Dr Jane Cushion Last Amended by
Details: 08 Dec 2015 15:16 Dr Jane Cushion
Validated by Details: 08 Dec 2015 15:16 Dr Jane
Cushion Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

EAS

PLEASE NOTE

Mother is very keen that Simon not know she made
the referral to mental health services. Since his

	father called the HUB, they have had no contact. She is Simon's main support at the moment and has concerns that Simon knowing of her involvement would damage this relationship and negatively impact on him. 08/12/2015 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 08 Dec 2015 Last Amended by Details: 08 Dec 2015 Dr Jane Cushion Page Numbers:92 + 93 + 94 <u>92</u> Notes <u>93</u> EAS Joint HV with me and Jameson Simwanza SW after sending out letter From RIO notes Disrupted childhood: CSE in paedophile ring, violent father, adolescence in care, under CAMHS 2012 - diagnosed <u>94</u> From previous notes -Tried to hang himself at the age of 16 when in a young offender's institution and needed to be resuscitated. He was moved to a high security hospital and kept Originator Details: 08 Dec 2015 13:26 Dr Jane Cushion Medical Originally Entered by Details: 08 Dec 2015 13:26 Dr Jane Cushion Last Amended by Details: 08 Dec 2015 14:34 Dr Jane Cushion Validated by Details: 08 Dec 2015 14:34 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:93	• <u>93</u> <u>EAS</u> Joint HV with me and Jameson Simwanza SW after sending out letter From RIO notes Disrupted childhood: CSE in paedophile ring, violent father, adolescence in care, under CAMHS 2012 - diagnosed with anxiety related to court case for burglary 2014- had MHAA - found not to have major mental illness 2015- 5 y ASBO for organising illegal raves- not allowed to enter industrial or disused premises baton 10pm and 7 am 2015- November - mother made referral via HUB- she reports gradual deterioration in mental health over the last year. Simon was angry when his father	

	made contact with the HUB in 2014 and does not want it known she instigated the referral. Today Simon consented to be seen and let us in. He was clean, well nourished, well kempt and dressed casually. He put the dog in the back garden. One bed council flat There was a massive heavy-duty metal door like that of a prison cell (over 7 feet tall) behind his own front door, which Simon said he's made and installed recently. There were tools lying about on the floor and he has worked in construction in the past. He didn't give us a reason for making the door. He hasn't gone out for months- mother does all shopping History from Mr Cordell Chaotic historian, jumping about topic to topic, but happy to talk especially about his grievances chiefly with the police and the woman upstairs. He said there is a widespread conspiracy to destroy his good name and possibly ultimately to kill him. This is organised by the police with a policeman in Essex called Big Bad (unheard) as its source, in league with "Storm" a global agency who manage the UK's 999 calls. The police are putting things about him all over the internet (there has been local reporting of his ASBO) and are putting subliminal messages about him through his own TV and other people's. As part of this, he says they have falsified all his records - the proof of which he gave as a list of CADS (relating to one of the illegal raves he'd arranged) which as they were not written down in sequence of their numbers, could not be a true record and thus in his view proof of a conspiracy. He said he has evidence on tape of the police talking about him and plotting against him, which he offered to show us, although in fact there were no such sound files on his computer. He couldn't really explain how he'd heard this material. He was keen to show us other written "evidence" from the police, which were all notes Simon had made in files on his computer. Simon said the woman in the flat above has been stalking him, is aware of all his movements around the flat, and when he is in the bath, takes off his clothes or on the loo, begins stamping on the floorboards. The history we have is that he made threats to her and she was moved for her own safety: he still feels she is upstairs. Said he had CCTV footage from cameras in his flat of her stalking him - he could not show us any cameras. Simon got out several boxes of papers which he said related to the conspiracy together with his plan for his own business and his plans for a global charity for children. The flat was full of equipment for printing and other things. Simon said he had spent "a quarter of a million" on his businesses including 20 000 on each of two printers.	
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	Has thoughts of killing himself "when I eventually clear my name." FH of Bipolar Disorder /Schizophrenia-grandmother <u>PPH</u>	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5 Folder 5</u> Page Numbers:94	<u>94</u> From previous notes -Tried to hang himself at the age of 16 when in a young offender's institution and needed to be resuscitated. He was moved to a high security hospital and kept in seclusion on a number of occasions. He says he was seen regularly by a psychiatrist called Dr Caplin from "the safe project" (probably CAMHS). -He says there was a second occasion where he tried to hang himself when in a cell after he was sentenced Said attended NMUH A and E 2014 after drinking liquid nitrous oxide with intent to die Forensic history Long history police contact from juvenile, mostly connected with driving, theft-? in prison on remand in past Smokes 1-2 spliffs most days, no other drugs, alcohol or tobacco SH 1 bed council flat, no debts, ESA, food in fridge, flat cluttered but clean MSE Clean, open manner, engaged well, incongruently cheerful, very polite Appeared euthymic- did not appear particularly elated: idea of harming self "when name is eventually cleared" but currently has no thoughts of self harm or harming anyone else Pressure of speech but able to repeatedly interrupt without irritability Thought disordered: Tangential, circumstantial, preoccupied Paranoid delusions relating mainly to police and woman upstairs: delusions of reference His comments about hearing having police talking about him on tapes may be elaboration of auditory hallucinations No evidence commands or passivity Insight: articulate: does not think he has a mental health problem: Said he'd had all these problems for the last year, especially in the last few months but felt they were getting worse. He has withdrawn from all social contact except with his mother. Impression FEP, possibly with mood element history at least several months Strengths: Significant part of personality intact at present, was willing to engage with us today Maternal support Risks: isolation, self-neglect if mother withdraws support, potential risk harm to self but trigger factors not clear (past self-harm attempts as teenager appear to have related to court appearances) Plan Declined medication and engagement with CRHTT (as he didn't want to give his story again)	

	We talked about referral to EIS and my view that he would find seeing someone regularly helpful: he said if I made the referral he would engage- saying he would be too polite to refuse. He seemed to find our conversation today a relief and thanked us for coming. I did not feel he would meet criteria for detention today under the MHA and that I would refer for assertive approach from EIS as a more proportionate response. Referral via email to Simon Clark	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:95	02/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 02 Dec 2015 Last Amended by Details: 02 Dec 2015 Dr Jane Cushion Page Numbers:95 <u>EAS</u> Offer HV me and Jameson SW 95 Originator Details: 02 Dec 2015 09:20 Dr Jane Cushion Medical Originally Entered by Details: 02 Dec 2015 09:21 Dr Jane Cushion Last Amended by Details: 02 Dec 2015 09:21 Dr Jane Cushion Validated by Details: 02 Dec 2015 09:21 Dr Jane Cushion Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>EAS</u> Offer HV me and Jameson SW 01/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Dec 2015 Last Amended by Details: 01 Dec 2015 Angela Hague Nursing Page Numbers:95 <u>NB</u> EIS notified of referral as part of trusts waiting time standard to review the referral. Originator Details: 01 Dec 2015 18:29 Angela Hague Nursing Originally Entered by Details: 01 Dec 2015 18:30 Angela Hague Last Amended by	

Details: 01 Dec 2015 18:30 Angela Hague Validated
by Details: 01 Dec 2015 18:30 Angela Hague
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

NB

EIS notified of referral as part of trusts waiting time
standard to review the referral.

01/12/2015

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 01 Dec 2015

Last Amended by Details: 01 Dec 2015

Angela Hague Nursing

Page Numbers:95

NB

Loraine reported that her mother suffered
from bi-polar affective disorder and latter
schizophrenia

late onset during her menopause. Passed
away last year August 2014 from cancer
believes she had an overdose of
chemotherapy.

Originator Details: 01 Dec 2015 18:17 Angela
Hague Nursing Originally Entered by Details: 01
Dec 2015 18:18 Angela Hague Last Amended by
Details: 01 Dec 2015 18:18 Angela Hague Validated
by Details: 01 Dec 2015 18:18 Angela Hague
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

NB

Loraine reported that her mother suffered from bi-
polar affective disorder and latter
schizophrenia

late onset during her menopause. Passed away last
year August 2014 from cancer believes she had an
overdose of chemotherapy.

01/12/2015

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 01 Dec 2015

Last Amended by Details: 01 Dec 2015

Angela Hague Nursing

Page Numbers:95 + 96

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Notes

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	Telephoned and spoke to Lorraine. Advised that we will offer a non-urgent appointment from EAS. Lorraine reported her concern that we would be tell her son about her reporting her son and that this would damage their relationship for good. Reported that about three years ago she called an ambulance when her son was vomiting and he is still complaining and Originator Details: 01 Dec 2015 15:36 Angela Hague Nursing Originally Entered by Details: 01 Dec 2015 15:37 Angela Hague Last Amended by Details: 01 Dec 2015 18:03 Angela Hague Validated by Details: 01 Dec 2015 18:03 Angela Hague Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:96	96 Telephoned and spoke to Lorraine. Advised that we will offer a non-urgent appointment from EAS. Lorraine reported her concern that we would be tell her son about her reporting her son and that this would damage their relationship for good. Reported that about three years ago she called an ambulance when her son was vomiting and he is still complaining and talking about it. Reported that her son has been in trouble with the police since the age of 14 said he was addicted to driving. Many charges and cases over the years. Feels that the police have victimised her son and her other children because they are mixed race. Reported that they are appealing against some of the charges and his name being publicised in the papers which is due in court in February next year. Lorraine reported that she visits her son almost every day to check on him and make sure he has food in the house. Reported that he is eating but not as regularly as before, some weight loss, has IBS but is drinking well. Reported that he talks about the TV talking to him and also when they are out when she scratches her head or something, he believes that she is sending messages and becomes paranoid that someone will harm him. Reported that he has lots of friends but stops no longer goes out with them and also does not have them come around his home. Reported however he does have a scrambling bike that he goes out on and has injured his ankle and wrist but refuses medical attention. Reported that he has been suspicious about doctors since his childhood and having tonsillitis. Reported that his mood does fluctuate but most days she will get text messages from him talking about killing himself when his name is cleared in next year after the court case, no current plans or intent. Asked if she believes her son will see professionals if they visit, says she believes that he will shout but	

	otherwise not aggressive, feels he will agree to be seen as a follow up following his assessment last year. Feels he needs some help and support but uncertain what her son needs. 00/00/20?? • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Whilst talking to Lorraine her mobile phone rang and she spoke to the person says it was Maggie Garrod AMHP. Said she has been phoning them and they called her back yesterday and that they have told them that she should have a carers assessment as she is finding it difficult to cope. Page Numbers:96 Reported that they had also told her that her son should be seen urgently. Agreed to speak to the AMHP office. Discussion with AMHP manager Debbie Morgan. Informed reported that Lorraine had spoken to Maggie and Lorraine had been advised about the carers centre in Enfield and also advised to go along with whatever plan there is with the assessment service. From description from mother does not appear to be crisis, is eating and drinking and no active plans to and, gradual deterioration in mental health over the past year. Plan to offer assessment with EAS medic and Social Worker. Patient already known to Community Safety Officer and this may be a route into the assessment given the concerns raised by other residents. Community Safety Officer already informed. EIS also informed as may be and psychotic illness. Whilst talking to Lorraine her mobile phone rang and she spoke to the person says it was Maggie Garrod AMHP. Said she has been phoning them and they called her back yesterday and that they have told them that she should have a carers assessment as she is finding it difficult to cope. Reported that they had also told her that her son should be seen urgently. Agreed to speak to the AMHP office. Discussion with AMHP manager	
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	Debbie Morgan. Informed reported that Lorraine had spoken to Maggie and Lorraine had been advised about the carers centre in Enfield and also advised to go along with whatever plan there is with the assessment service. From description from mother does not appear to be crisis, is eating and drinking and no active plans to and, gradual deterioration in mental health over the past year. Plan to offer assessment with EAS medic and Social Worker. Patient already known to Community Safety Officer and this may be a route into the assessment given the concerns raised by other residents. Community Safety Officer already informed. EIS also informed as may be and psychotic illness. 01/12/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Dec 2015 Kylassum Gopaulen Nursing Last Amended by Details: 01 Dec 2015 Page Numbers:96 + 97 <u>96</u> Notes <u>97</u> <u>Enfield Assessment Service Referral</u> <u>Screening</u> Referral discussed with CRHTT manager V. Kisson Advised for EAS to arrange a DV and if he is willing to engage, then HTT will take him on. A Hague informed. Discussed with D Morgan a€“ Telephone to Enfield Council Housing (0800 4080160) Spoke with D Allen a€“ Informed me they are aware of problems/issues with Mr Originator Details: 01 Dec 2015 12:30 Kylassum Gopaulen Nursing Originally Entered by Details: 01 Dec 2015 12:31 Kylassum Gopaulen Last Amended by Details: 01 Dec 2015 13:37 Kylassum Gopaulen Validated by Details: 01 Dec 2015 13:37 Kylassum Gopaulen Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u>	<u>97</u> <u>Enfield Assessment Service Referral Screening</u>	

Stage 5
Folder 5

Page Numbers:97

Referral discussed with CRHTT manager
V. Kisson
Advised for EAS to arrange a DV and if he is
willing to engage, then HTT will take him on. A
Hague informed.
Discussed with
D Morgan
a€“ Telephone to Enfield Council Housing (0800
4080160)
Spoke with
D Allen
a€“ Informed me they are aware of problems/issues
with Mr Cordell. He recently accused another
resident of purposely making noise to disturb him
and he had threatened to strangle her.
He appears to be very paranoid about sound.
The resident upstairs is apparently under the care of
our CSRT a€“ Bola is the care coordinator and the
resident had to be moved to another accommodation
for her own safety.
Mr Cordell was seen by Community Safety Unit and
given a warning about his behaviour. He presents as
very aggressive.
Community Safety Officer is
Louise Brown
a€“ 0208 379 4467.
Plan a€“ To organise DV jointly with EAS medical
team / SW from CRHTT and Community Safety
Unit

01/12/2015

- **The Doctor's Folder / pub Book Issue: 5!**

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Folder 5

Originator Details: 01 Dec 2015

Last Amended by Details: 01 Dec 2015

Kylasum Gopaulen Nursing

Page Numbers:97

Enfield Assessment Service Referral
Screening

Discussed with

A Hague

Spoke with Mrs Cordell again. Clearly, she
does not want his son to know that she is
requesting help.

She last saw him on

Friday

and spoke with him regularly on the
Telephone.

She told me he is not well. He has locked
himself in his room, believing TV is talking
about him. He is not eating properly and
talks about killing himself. Mrs Cordell
became rather irate, stating * I don't want
you to tell him that I am requesting help,
just leave him, I have enough problem'.

	Plan - Discussed with Team - Referral to CRHTT. MHA assessment could be needed if he does not engage with HTT. Originator Details: 01 Dec 2015 11:02 Kylassum Gopaulen Nursing Originally Entered by Details: 01 Dec 2015 11:06 Kylassum Gopaulen Last Amended by Details: 01 Dec 2015 11:30 Kylassum Gopaulen Validated by Details: 01 Dec 2015 11:30 Kylassum Gopaulen Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield Assessment Service Referral Screening</u> Discussed with A Hague Spoke with Mrs Cordell again. Clearly, she does not want his son to know that she is requesting help. She last saw him on Friday and spoke with him regularly on the Telephone. She told me he is not well. He has locked himself in his room, believing TV is talking about him. He is not eating properly and talks about killing himself. Mrs Cordell became rather irate, stating * I don't want you to tell him that I am requesting help, just leave him, I have enough problem'. Plan - Discussed with Team - Referral to CRHTT. MHA assessment could be needed if he does not engage with HTT. 01/12/2015 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 01 Dec 2015 Last Amended by Details: 01 Dec 2015 Kylassum Gopaulen Nursing Page Numbers:97 <u>Enfield Assessment Service Referral Screening</u> I had telephone contact with Simon's Mother Lorraine Cordell [REDACTED] today at 10.35. She told me Simon is refusing to seek help or attend his GP's surgery. He did not take the medication that was prescribed when he saw Dr Jarvis last March 2014. It appears that Simon is not consenting to seek help with regards to his mental health. I have however advised Mrs Cordell that she encourages to visit his GP or she could request another assessment under the MHA 1983 if she has concerned that Simon is at significant risk to himself and others.	
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I have also advised that she could ring the police / LAS and Simon could be taken to A&E in an emergency.

Originator Details: 01 Dec 2015 10:43 Kylassum
Gopaulen Nursing Originally Entered by Details: 01
Dec 2015 10:51 Kylassum Gopaulen Last Amended
by Details: 01 Dec 2015 10:51 Kylassum Gopaulen
Validated by Details: 01 Dec 2015 10:51 Kylassum
Gopaulen Significant: No Added to Risk History:
No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Enfield Assessment Service Referral Screening

I had telephone contact with Simon's Mother
Lorraine Cordell

today at 10.35.

She told me Simon is refusing to seek help or attend
his GP's surgery. He did not take the medication that
was prescribed when he saw Dr Jarvis last March
2014.

It appears that Simon is not consenting to seek help
with regards to his mental health.

I have however advised Mrs Cordell that she
encourages to visit his GP or she could request
another assessment under the MHA 1983 if she has
concerned that Simon is at significant risk to himself
and others.

I have also advised that she could ring the police /
LAS and Simon could be taken to A&E in an
emergency.

30/11/2015

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 30 Nov 2015

Last Amended by Details: 30 Nov 2015

Kylassum Gopaulen

Page Numbers:97 +98

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Notes

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Enfield Assessment Service Referral
Screening

Spoke with GP

Dr Abidoye

- Last seen in Surgery was

Feb 2014

Does not engage well.

GP is of the opinion that his mother should
encourage and advise him to attend
surgery.

If he visits the surgery. Dr Abidoye was
advised to make a referral to EAS if

	psychiatric assessment is indicated. Telephone contact - Mrs Cordell was contacted twice to no avail. I was unable to leave a message. Originator Details: 30 Nov 2015 12:01 Kylassum Gopaulen Nursing Originally Entered by Details: 30 Nov 2015 12:08 Kylassum Gopaulen Last Amended by Details: 30 Nov 2015 12:08 Kylassum Gopaulen Validated by Details: 30 Nov 2015 12:08 Kylassum Gopaulen Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:98	98 <u>Enfield Assessment Service Referral Screening</u> Spoke with GP Dr Abidoye - Last seen in Surgery was Feb 2014 Does not engage well. GP is of the opinion that his mother should encourage and advise him to attend surgery. If he visits the surgery. Dr Abidoye was advised to make a referral to EAS if psychiatric assessment is indicated. Telephone contact - Mrs Cordell was contacted twice to no avail. I was unable to leave a message. 30/11/2015 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 30 Nov 2015 Last Amended by Details: 30 Nov 2015 Angela Hague Nursing Page Numbers:98 <u>Hub referral</u> Client not consented to the referral or to be seen. Mother does not want her son to know that she has called services. Informed by screener that they have tried to contact the mother but unable to speak to her on the number on RiO. E-mail to the HUB to check if they have any other contact details for the referrer. Screener also reported that he has spoken to GP surgery and informed that he does not attend his surgery. Originator Details: 30 Nov 2015 11:37 Angela Hague Nursing Originally Entered by Details: 30 Nov 2015 11:40 Angela Hague Last Amended by Details: 30 Nov 2015 11:40 Angela Hague Validated by Details: 30 Nov 2015 11:40 Angela Hague Significant: No Added to Risk History: No	

Contains Third Party Info: No Conceal from Client:
Not Concealed

Hub referral

Client not consented to the referral or to be seen.
Mother does not want her son to know that she has called services. Informed by screener that they have tried to contact the mother but unable to speak to her on the number on RiO. E-mail to the HUB to check if they have any other contact details for the referrer. Screener also reported that he has spoken to GP surgery and informed that he does not attend his surgery.

27/11/2015

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5

Folder 5

Originator Details: 27 Nov 2015

Last Amended by Details: 28 Nov 2015

John Hallett

Page Numbers:98

BEH HUB

Referral from mother. (But she does not want him to know of it)

Patient known to mental health services was assessed under the MH Act last year but not deemed sectionable.

Mother says she has been asking for help all over but got nowhere.

She describes her son as not eating, not sleeping, he is paranoid saying people are talking about him or laughing at him.

He believes the government is advertising things about him. That the TV is talking about him and talking directly to him.

She reluctantly admits that he smokes cannabis adding "not a lot"

She is adamant that her son should not know of this referral as she is frightened to sever the fragile relationship, she has with him.

Referred to E Assessment team, email sent

Originator Details: 27 Nov 2015 19:29 John Hallett
Nursing Originally Entered by Details: 27 Nov 2015 19:30 John Hallett
Last Amended by Details: 28 Nov 2015 16:31 John Hallett
Validated by Details: 28 Nov 2015 16:31 John Hallett
Significant: No
Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

BEH HUB

Referral from mother. (But she does not want him to know of it)

Patient known to mental health services was assessed under the MH Act last year but not deemed sectionable.

Mother says she has been asking for help all over but got nowhere.

She describes her son as not eating, not sleeping, he is paranoid saying people are talking about him or laughing at him.

He believes the government is advertising things about him. That the TV is talking about him and talking directly to him.

She reluctantly admits that he smokes cannabis adding "not a lot"

She is adamant that her son should not know of this referral as she is frightened to sever the fragile relationship, she has with him.

Referred to E Assessment team, email sent

28/11/2014

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 28 Nov 2014

Last Amended by Details: 28 Nov 2014

Maureen Hawkins

Page Numbers:98

MONWARA AHMED - DUTY AMHP -
ENFIELD AMHP OFFICE

I had telephone contact with Simon's Mother Lorraine Cordell 0208 245 7454, today at 12.35pm. She believes the symptoms that her son is experiencing, they are all related to carbon monoxide poison. The council have turned off the gas and I advised the mother to get medical advice from the GP.

Originator Details: 28 Nov 2014 12:54 Maureen Hawkins Administrative Originally Entered by Details: 28 Nov 2014 12:57 Maureen Hawkins Last Amended by Details: 28 Nov 2014 12:57 Maureen Hawkins Validated by Details: 28 Nov 2014 12:57 Maureen Hawkins Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

MONWARA AHMED - DUTY AMHP -
ENFIELD AMHP OFFICE

I had telephone contact with Simon's Mother Lorraine Cordell 0208 245 7454, today at 12.35pm. She believes the symptoms that her son is experiencing, they are all related to carbon

	monoxide poison. The council have turned off the gas and I advised the mother to get medical advice from the GP. 25/11/2014 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Nov 2014 Last Amended by Details: 25 Nov 2014 Margaret Garrod Page Numbers:98 <u>Mental Health Act Assessment</u> undertaken with Immanuel Anjaneyan AMHP Trainee Dr Moorey RC for Enfield CRHT and Dr Albazaz S12. AMHP Report completed and uploaded to Rio Documents and copy sent to GP. Originator Details: 25 Nov 2014 16:54 Margaret Garrod Social Worker Originally Entered by Details: 25 Nov 2014 16:57 Margaret Garrod Last Amended by Details: 25 Nov 2014 16:57 Margaret Garrod Validated by Details: 25 Nov 2014 16:57 Margaret Garrod Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed AMHP Service. <u>Mental Health Act Assessment</u> undertaken with Immanuel Anjaneyan AMHP Trainee Dr Moorey RC for Enfield CRHT and Dr Albazaz S12. AMHP Report completed and uploaded to Rio Documents and copy sent to GP.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:99	25/11/2014 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Nov 2014 Last Amended by Details: 25 Nov 2014 Immanuel Anjaneyan Social Worker Page Numbers:99 Enfield AMHP service: Completed an MHA assessment today as planned. He talked about his current situation in a more eloquent manner. No medical	

	recommendation from both the doctors. There is no need for any involvement from the mental health service at present. He was given information about how to contact the service if he required in the future. He seemed to be aware of the process and said that he had used crisis service in the past. AMHP report will be uploaded shortly and the bed manager was told about the decision. 99 Originator Details: 25 Nov 2014 12:13 Immanuel Anjaneyan Social Worker Originally Entered by Details: 25 Nov 2014 12:18 Immanuel Anjaneyan Last Amended by Details: 25 Nov 2014 12:18 Immanuel Anjaneyan Validated by Details: 25 Nov 2014 12:18 Immanuel Anjaneyan Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed Enfield AMHP service: Completed an MHA assessment today as planned. He talked about his current situation in a more eloquent manner. No medical recommendation from both the doctors. There is no need for any involvement from the mental health service at present. He was given information about how to contact the service if he required in the future. He seemed to be aware of the process and said that he had used crisis service in the past. AMHP report will be uploaded shortly and the bed manager was told about the decision. 25/11/2014 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 25 Nov 2014 Last Amended by Details: 25 Nov 2014 Rawle Roberts Nursing Page Numbers:99 <u>Bed Management</u> Contacted by Emmanuel from Enfield AMHP office Informed bed management that a bed is no longer need to accommodate the admission of Mr Cordell, was no placed on a section. PLAN: * Bed request to be removed from bed management white board. Originator Details: 25 Nov 2014 11:34 Rawle Roberts Nursing Originally Entered by Details: 25 Nov 2014 11:40 Rawle Roberts Last Amended by	
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Details: 25 Nov 2014 11:40 Rawle Roberts
Validated by Details: 25 Nov 2014 11:40 Rawle
Roberts Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

Bed Management

Contacted by Emmanuel from Enfield AMHP office
Informed bed management that a bed is no longer
need to accommodate the admission of Mr Cordell,
was no placed on a section.

PLAN:

* Bed request to be removed from bed management
white board.

24/11/2014

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 24 Nov 2014

Last Amended by Details: 24 Nov 2014

Chantel Williams Social

Page Numbers:99

AMHP Service:

MHAA has been set up for 10 am
tomorrow at the client's home address.

Dr Moorey

from HTT and

Dr Albazaz

(s12) will be attending.

I called the Complex Care team, to try and
arrange a 2nd worker, but was informed
that the Team Manager Sarah Johnson
was in a meeting and will be available
tomorrow.

Originator Details: 24 Nov 2014 12:24 Chantel
Williams Social Worker Originally Entered by
Details: 24 Nov 2014 12:26 Chantel Williams Last
Amended by Details: 24 Nov 2014 14:29 Chantel
Williams Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client:
Not Concealed

AMHP Service:

MHAA has been set up for 10 am tomorrow at the
client's home address.

Dr Moorey

from HTT and

Dr Albazaz

(s12) will be attending.

I called the Complex Care team, to try and arrange a
2nd worker, but was informed that the Team
Manager Sarah Johnson
was in a meeting and will be available tomorrow.

	21/11/2014 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 21 Nov 2014 Last Amended by Details: 21 Nov 2014 Sandra Muschett Social Page Numbers:99 + 100 <u>99</u> Notes <u>100</u> Approved Mental Health Professional Service On going Progress Originator Details: 21 Nov 2014 14:47 Sandra Muschett Social Worker Originally Entered by Details: 21 Nov 2014 14:50 Sandra Muschett Last Amended by Details: 21 Nov 2014 14:50 Sandra Muschett Validated by Details: 21 Nov 2014 14:50 Sandra Muschett Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:100	<u>100</u> Approved Mental Health Professional Service On going Progress T/c to Lorraine Cordell) mother on 0208 245 7454, Lorraine said that Simon has been set up by the police. He was accused or burglary in June 2014 but the court throw the case out due to lack of evidence. She also alleged that Simon is being harassed by the police; monitor his flat on a daily basis. The police often stop and search him and believe that he is being targeted. She described him as a good person who recently stopped a youth centre from closing in Enfield. Lorraine is concerned about Simon's chromosomes " stopped medication and is low in vitamin D. Four weeks ago, he was admitted to North Middlesex Hospital. She said that the police have him on there at risk register for suicide. Simon has been put on an ASBO due to nuisance (was unable to elaborate on this) Lorraine said that Simon called her in the night and talks about the police harassment. She thinks he needs treatment but would be unwilling to accept it. She stated that Simon called his father and apologies for his behaviour yesterday towards him and HTT. Lorraine said that his father Ben is the oldest therefore he is the nearest relative within the meaning of the mental health act (1983/2007). However, Lorraine said that she provides significant and substantial support and sees or has contact with Simon on a daily basis. Lorraine then received a call from Simon's best friend who advised her that Simon was coming to	

	see her. Due to this I ended the call as Simon was outside and said that I would call back later. T/c to Ben (father) on 07415 388 734 no reply or message facility T/c to Ben and discussed the nearest relative. Ben said he is the oldest parent but Simon's mother Lorraine provides significant and substantial support and has contact with him on a daily basis. Ben said that Simon is very depressed after experiencing the loss of his grandmother; broke up with his girlfriend, being placed on an ASBO and being harassed by the police. Ben took three days off work to stay with Simon and yesterday he seemed a lot calmer. However, he continues state that he does not want other people such as HTT to be involved. I explained that HTT have requested that Simon be assessed under the Mental Health Act. Ben said that it might make Simon worst, so would talk to Lorraine and assesses the situation. I agreed to contact Lorraine and gain her views. T/c to Lorraine, Simon was present so she was unable to talk but replied yes or no to my questions. She agreed that he was a little calmer and that she would not want the police to be involved. I asked Lorraine to talk to Simon about seeing the HTT again as this would be the least restricted alternative to hospital. Lorraine said she felt he would be ok over the weekend and I advised her to contact the police if she felt threatened or take him to North Middlesex Hospital A&E. Plan I will contact Lorraine on Monday and review the situation. 20/11/2014 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 20 Nov 2014 Last Amended by Details: 20 Nov 2014 Teeresh Bundhun Nursing Page Numbers:100 <u>ECRHTT</u> Following a discussion with team consultant it was agreed that a MHAA would be required. T/C was made to AMHP Alex France to refer Simon for a mental health AX. Plan Await MHAA from AHMP. No further HV from HTT due to risk presented by Simon. Originator Details: 20 Nov 2014 15:58 Teeresh Bundhun Nursing Originally Entered by Details: 20 Nov 2014 16:25 Teeresh Bundhun Last Amended by Details: 20 Nov 2014 16:25 Teeresh Bundhun	
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	Validated by Details: 20 Nov 2014 16:25 Teeresh Bundhun Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT</u> Following a discussion with team consultant it was agreed that a MHAA would be required. T/C was made to AMHP Alex France to refer Simon for a mental health AX. Plan Await MHAA from AHMP. No further HV from HTT due to risk presented by Simon. 20/11/2014 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 20 Nov 2014 Last Amended by Details: 20 Nov 2014 Teeresh Bundhun Nursing Page Numbers:100 + 101 <u>100</u> Notes <u>101</u> <u>ECRHTT</u> T/C was made to Simon's mother this morning to inform her that we were planning to come and Ax Simon this 20/11/2014 Originator Details: 20 Nov 2014 15:15 Teeresh Bundhun Nursing Originally Entered by Details: 20 Nov 2014 15:23 Teeresh Bundhun Last Amended by Details: 20 Nov 2014 15:24 Teeresh Bundhun Validated by Details: 20 Nov 2014 15:24 Teeresh Bundhun Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:101	<u>101</u> <u>ECRHTT</u> T/C was made to Simon's mother this morning to inform her that we were planning to come and Ax Simon this morning. She informed me that Simon remains very paranoid, guarded and abusive to individuals. Currently she said his father is with him. Having arrived at Simons property I called Simons father on the phone. I asked him whether we could Axe Simon. He said at present was not good, we would aggravate Simon further. I tried to ask him how Simon has been however he was reluctant to answer fearing Simon may know who he is talking too.	

	Simon was heard shouting in the background. ‘who the fuck is you talking to? what do they want? Get the fuck out of my house et out I don’t want anything. ‘Simon continued to shout abuse at his father. He was heard to have been very paranoid and abusive. Simon's father then said we would not come back and that we should leave Simon alone. He was heard trying to calm Simon down in the background. We were unbale to Ax Simon. Given the risks posed by Simon and the concerns from his family and neighbour, Simon is not willing to engage with the HTT or be Ax. I feel that this needs to be discussed with the team consultant for possible MHAA?? PLAN Discuss with team consultant for possible MHAA?? If Simon is to have a MHAA then a warrant will be required as Simon has an extensive forensic history an also at present will not allow anyone to see him. 19/11/2014 • <u>The Doctor’s Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Nov 2014 Last Amended by Details: 19 Nov 2014 Colin Clancy Nursing Page Numbers:101+ 102 <u>105</u> Notes <u>102</u> <u>CRHT:</u> Mother, Lorraine: [REDACTED] Father, Ben: [REDACTED] We spoke initially with mother on phone. She reiterated that Simon has suffered years of harassment by Originator Details: 19 Nov 2014 19:12 Colin Clancy Nursing Originally Entered by Details: 19 Nov 2014 19:19 Colin Clancy Last Amended by Details: 19 Nov 2014 20:26 Colin Clancy Validated by Details: 19 Nov 2014 20:26 Colin Clancy Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
• <u>The Doctor’s Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:102	<u>102</u> <u>CRHT:</u> Mother, Lorraine: [REDACTED] Father, Ben: [REDACTED] We spoke initially with mother on phone. She reiterated that Simon has suffered years of harassment by the police for past offences. Not all true. She has spoken with him today and he has been extremely angry with her and the father. We stated to mother that we will be tactful and say only that the family were concerned.	

We attended the flat around 17.30. There were police outside. They had been attempting to enter as they had received complaints from neighbours due to Simon screaming out in distress. We spoke with the officers and explained that we were from the mental health services. They stated that they had not properly spoken with him and observed him to be holding a small gas cannister, possibly sniffing nitrous oxide for recreational purposes. We all jointly spoke with his mother and she requested that CRHT do not attempt to see him following this as it will antagonise the situation.

19.30: Spoke with Lorraine. She stated that a friend is currently with him and he is calmer.

The coincidental timing of the police attending has caused him to blame Lorraine for calling police.

He is convinced that she is also conspiring against her. he has stated to her that he is feeling persecuted, he is paranoid and suffering ideas of reference from the TV constantly.

Lorraine explained that he has had an ASBO put on him due to being aggressive when in court, he has been bailed to his own address c/o a burglary accusation in June 2014.

Lorraine spoke of her own mother who has been treated for BPAD and was prescribed clozaril with good effect. Mother is now deceased c/o cancer complications.

Lorraine states that Simon has suffered sexual abuse as part of a paedophile ring when younger. This is the source of his anger and subsequent treatment under CAMHS. He has refused to talk about it for years and has declined any therapy / counselling for this so far. Lorraine states that she does not want him to be asked about any sexual abuse.

I informed mother of the remit of HTT and that he may be potentially prescribed an antipsychotic for his emerging paranoid psychosis.

She reiterates that he will most likely refuse all medicine interventions. He has been prescribed medicine for

Crohn's disease.

He does not take.

We have mutually agreed to plan:

- CRHT to call mother tomorrow am to negotiate another visit to assess

19/11/2014

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 19 Nov 2014

Last Amended by Details: 19 Nov 2014

Lucy Clitherow

Page Numbers:102

ECRHTT-

Referral taken from Simon's Mother as the situation was discussed with Scott Kerr and

	Helen Moorey and it was decided that the team would go and assess Simon at his home address. Simon's mother called in to say that he has kicked his father out of the house as he heard him talking with staff from the hub and is now extremely paranoid towards him. He thinks that he is teaming up with his mother against him. Simon's mother Lorraine expressed that he is not a threat to anyone but himself. It was advised that two members of staff carry out the assessment. Originator Details: 19 Nov 2014 15:50 Lucy Clitherow Administrative Originally Entered by Details: 19 Nov 2014 15:53 Lucy Clitherow Last Amended by Details: 19 Nov 2014 15:53 Lucy Clitherow Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>ECRHTT-</u> Referral taken from Simon's Mother as the situation was discussed with Scott Kerr and Helen Moorey and it was decided that the team would go and assess Simon at his home address. Simon's mother called in to say that he has kicked his father out of the house as he heard him talking with staff from the hub and is now extremely paranoid towards him. He thinks that he is teaming up with his mother against him. Simon's mother Lorraine expressed that he is not a threat to anyone but himself. It was advised that two members of staff carry out the assessment. 19/11/2014 • <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Nov 2014 Last Amended by Details: 19 Nov 2014 Kyieka Downie Page Numbers: 102 <u>HUB</u> Spoke with the mother Lorraine, Simon is not living with her and is not willing to communicate with the mother as he deems her as evil. The mother stated he is not willing to accept any help she is also unsure whether Simon would give consent to make a referral. Mother left me with Simon father number Ben [REDACTED]	
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	Spoke with Simon father and he explained that he needs to calm Simon down and try to get his consent to accept help and will call the hub back later today Originator Details: 19 Nov 2014 14:29 Kyieka Downie Administrative Originally Entered by Details: 19 Nov 2014 14:37 Kyieka Downie Last Amended by Details: 19 Nov 2014 14:39 Kyieka Downie Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>HUB</u> Spoke with the mother Lorraine, Simon is not living with her and is not willing to communicate with the mother as he deems her as evil. The mother stated he is not willing to accept any help she is also unsure whether Simon would give consent to make a referral. Mother left me with Simon father number Ben [REDACTED] Spoke with Simon father and he explained that he needs to calm Simon down and try to get his consent to accept help and will call the hub back later today.	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:103	19/11/2014 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 19 Nov 2014 Last Amended by Details: 19 Nov 2014 Lucy Clitherow Page Numbers:103 <u>ECRHTT-</u> Telephone call received from Simon's Mother to say that he is really unwell. He is extremely paranoid towards her, he thinks the television is talking to him and is having quite a lot of trouble with the police. He is very paranoid towards them also. I have given her the number for the Hub to make a referral for her Son. He is currently staying with his Father as he is so paranoid towards his Mother. She said that his Father would help as much as he could but he doesn't know how Simon will react if he hears his Father talking about him. <u>103</u> Originator Details: 19 Nov 2014 12:31 Lucy Clitherow Administrative Originally Entered by Details: 19 Nov 2014 12:33 Lucy Clitherow Last	

Amended by Details: 19 Nov 2014 12:33 Lucy Clitherow Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

ECRHTT-

Telephone call received from Simon's Mother to say that he is really unwell.

He is extremely paranoid towards her, he thinks the television is talking to him and is having quite a lot of trouble with the police.

He is very paranoid towards them also.

I have given her the number for the Hub to make a referral for her Son.

He is currently staying with his Father as he is so paranoid towards his Mother.

She said that his Father would help as much as he could but he doesn't know how Simon will react if he hears his Father talking about him.

17/03/2014

- **The Doctor's Folder / pub Book Issue: 5!**
Stage 5
Folder 5

Originator Details: 17 Mar 2014

Last Amended by Details: 17 Mar 2014

Dr Gareth Jarvis Medical

Page Numbers:103

Telephone contact with Ms Lorraine Cordell (Mr Cordell's mother)

Ms Cordell was wondering when a letter would be sent out as Mr Cordell would be in court tomorrow.

I told Ms Cordell that a letter has now been written and would be being sent out as soon as is possible.

Ms Cordell also asked if Mr Cordell would be offered counselling.

I told her that Mr Cordell had been ambivalent about this in the meeting and we left it that he would choose whether to pursue this and I would send out some self-referral forms about it.

Originator Details: 17 Mar 2014 12:27 Dr Gareth Jarvis Medical Originally Entered by Details: 17 Mar 2014 12:29 Dr Gareth Jarvis Last Amended by Details: 17 Mar 2014 12:29 Dr Gareth Jarvis Validated by Details: (UNVALIDATED)
Significant: No Added to Risk History: No
Contains Third Party Info: No Conceal from Client: Not Concealed

Telephone contact with Ms Lorraine Cordell (Mr Cordell's mother)

	Ms Cordell was wondering when a letter would be sent out as Mr Cordell would be in court tomorrow. I told Ms Cordell that a letter has now been written and would be being sent out as soon as is possible. Ms Cordell also asked if Mr Cordell would be offered counselling. I told her that Mr Cordell had been ambivalent about this in the meeting and we left it that he would choose whether to pursue this and I would send out some self-referral forms about it. 11/03/2014 <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Originator Details: 11 Mar 2014 Last Amended by Details: 17 Mar 2014 Dr Gareth Jarvis Medical Page Numbers:103 + 104 + 105 <u>103</u> Notes <u>104</u> Enfield Triage Team 58-60 Silver Street New Assessment Dr Jarvis (ST5), Mr Cordell, Mr Cordell's mother Diagnosis Adjustment reaction - predominantly anxiety Medication Nil Plan 1. If Mr Cordell would like to try medication Sertraline starting at 50 mg for one week then increasing up to 100 mg would be a good choice. 2. Crisis plan agreed with Mr Cordell if he feels like acting on his suicidal <u>105</u> leaving school, he went on to get jobs in the construction industry. Mr Cordell says he has tried to build himself up a business for providing Originator Details: 11 Mar 2014 11:17 Dr Gareth Jarvis Medical Originally Entered by Details: 11 Mar 2014 11:19 Dr Gareth Jarvis Last Amended by Details: 17 Mar 2014 12:32 Dr Gareth Jarvis Validated by Details: (UNVALIDATED) Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed	
<u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u>	<u>104</u> Enfield Triage Team 58-60 Silver Street New Assessment	

Folder 5

Page Numbers:104

Dr Jarvis (ST5),
Mr Cordell,
Mr Cordell's mother
Diagnosis
Adjustment reaction - predominantly anxiety
Medication
Nil

Plan

1. If Mr Cordell would like to try medication Sertraline starting at 50 mg for one week then increasing up to 100 mg would be a good choice.
2. Crisis plan agreed with Mr Cordell if he feels like acting on his suicidal thoughts (call crisis team, or Samaritans or an ambulance).
3. Discuss with team at MDT for advice around sources of support
4. Mr Cordell to consider psychotherapy to address problems from the past.

Thank you for referring this 33-year-old man with low mood, suicidal thoughts and anxiety. He attended an appointment at the Silver Street Clinic

11/03/2014

with his mother Lorraine.

Mr Cordell explained to me that he is under a lot of stress at the moment due to a pending court case. He told me he is accused of burglary, but that he had been wrongly accused and the police had falsified items on his criminal record. He said that the record had led to the judge placing restrictive bail conditions including being at home in his flat after 8 pm. This has meant Mr Cordell has not been able to work for the last nine months (as he normally works as a DJ and party host with most work going on beyond that time). The bail conditions have just been extended for a further six months. Mr Cordell feels that these restrictive conditions have made him feel "a prisoner" in his own home.

Mr Cordell describes feeling anxious most days. He says he has a poor appetite and has lost "3 stone" in weight over the last 9 months. He says he often finds his thoughts are over active and will not give him any rest. Mr Cordell says he finds it difficult to get off to sleep, sometimes not until 5am, but then will stay in bed until midday. His mother says she has noticed him become "more aggressive" and trying to isolate himself from others.

Mr Cordell says he frequently has suicidal thoughts and that he has been researching ways to kill himself "on YouTube". These have included "poisoning, over-dose, hanging". He said that he has tried to kill himself by hanging in the past. He says he has all the materials at home ready to act on his thoughts and has done so for the last nine months. He says what stops him from acting on these thoughts is a desire for justice, wanting to be proved innocent at trial. He says the police are very worried about him, saying "they know they have messed up and now I am on their most vulnerable list, I call 101 regularly, I had police officers out to my flat twice last week to check on my safety".

	Mr Cordell says he feels angry with the police, that he has been victimised by them because of the colour of his skin and that he will continue to be victimised by them. Past Psychiatric History Mr Cordell tried to hang himself at the age of 16 when in a young offender's institution; he says he lost consciousness and needed to be resuscitated. He was moved to a high security hospital and kept in seclusion on a number of occasions, but he says he would destroy the padded cell with his teeth. He says he was seen regularly by a psychiatrist called Dr Caplin from "the safe project". He says there was a second occasion where he tried to hang himself when in a cell after he was sentenced. He has not had contact with mental health services for the last 15 years. Past Medical History Nil Personal History Mr Cordell was born at North Middlesex University Hospital. He has a younger brother and sister. Mr Cordell says he knows his maternal grandmother attempted suicide on a number of occasions and had had psychiatric hospital admissions. Mr Cordell's father worked as a union representative and his mother ran her own computer company. Mr Cordell says he did not get on well with his father who was a violent man. He was violent towards Mr Cordell, Mr Cordell's mother and siblings. Mr Cordell left home at the age of fifteen and was homeless for a while. He was placed in to care after stealing a pint of milk. He was placed in a series of children's care homes around the UK, but says that each time he would steal a car and drive back to London. Mr Cordell said he was pushed hard to achieve at school by his father and that he was "an A-star student" for most of the time. He says he was intelligent and would do the work at other times and as a result would often just "mess about" in class. He went on to college and studied engine mechanics, completing a city & guilds qualification. After	
• <u>The Doctor's Folder / pub Book Issue: 5!</u> <u>Stage 5</u> <u>Folder 5</u> Page Numbers:105	<u>105</u> leaving school, he went on to get jobs in the construction industry. Mr Cordell says he has tried to build himself up a business for providing party entertainment. At the moment he says he is not able to earn from this due to the restrictions of his bail. Mr Cordell has had one long term relationship which he describes as "my first true love". This is with a woman called Diana who is currently studying physiotherapy. They were together thirteen years but he says she has moved back out of his flat in recent months. Mr Cordell thinks this is secondary to the repeated involvement of the police in their lives and the stress this has caused.	

	Mr Cordell lives in a one-bedroom council flat. He says things have been financially difficult in recent months as his benefits were stopped and he has had to borrow from friends and relatives. His benefits have been restarted now. Mr Cordell says he does not smoke tobacco and does not drink alcohol. He says he does occasionally smoke "skunk". Forensic History Mr Cordell was put in a Young Offender's Institution at the age of 16 after repeated driving offences (driving without a license) Mr Cordell says he has not been in trouble with the police for a number of years. He had stolen some trainers at a festival in 2009 and prior to that had not been in trouble since 2005. He denied any violent offences. Mr Cordell currently stands accused of burglary. He has a solicitor and the case will not be heard until July at the earliest. Mental State Examination Mr Cordell presented as a tall mixed-race man with short dark hair and beard, dressed appropriately in trousers and coat. He sat in a relaxed manner throughout our interview making good eye contact. His speech was a little rapid, but normal in rhythm and tone. His mood was described as "anxious", objectively it was a little low with a reactive affect. There was no evidence of formal thought disorder; content focused around the problems caused by his bail conditions. He described suicidal thoughts but said he had no plan to act on the thoughts due to wanting justice first. Mr Cordell denied abnormal perceptions and was not obviously responding to any. Cognition was not formally assessed but appeared grossly intact. Mr Cordell could see that most of his problems flowed from the very difficult set of circumstances he finds himself in and that he did not think he is "crazy". Opinion Mr Cordell is a 33-year-old man presenting with anxiety and suicidal thoughts over the last nine months in the context of having a pending court case with no clear date or outcome yet. I would agree with Mr Cordell's own assessment that he does not have a major mental disorder. He has symptoms of anxiety in keeping with the stressful circumstances he finds himself in. He also displays a number of maladaptive psychological coping mechanisms, which likely flow from his difficult childhood with a violent father. His suicidal thoughts and acts have been a long running feature, becoming particularly acute at times of involvement with the criminal justice system. Management We agreed a crisis plan today should Mr Cordell feel inclined to act on his suicidal thoughts. We agreed he would either call the Crisis Team (0208 702 5060) or the Samaritans (08457 90 90 90). If	
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these sources of support did not work out, I said he could always call an ambulance in an emergency. We agreed that he could try an antidepressant medication if he chose to, although he remained ambivalent about this at consultation. Sertraline 50 mg OD increasing to 100 mg OD after one week, continuing as long as necessary would be appropriate.

I also discussed psychotherapy with Mr Cordell today. He was not sure about this at present. If Mr Cordell would like psychotherapy the IAPT (Improving Access to Psychological Therapies) service would seem like an appropriate place to get this.

We have not made plans to follow Mr Cordell up. If you have any questions or concerns, please do not hesitate to contact us.

Yours sincerely

Dr Gareth Jarvis MBChB MRCPsych
ST5 General Adult Psychiatry

10/03/2014

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Stage 5
Folder 5

Originator Details: 10 Mar 2014

Last Amended by Details: 15 Dec 2017

Beverley Campbell Administrative

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Notes

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Patient's mum called requesting earlier appointment with Dr Jarvis.

A booked appointment was made for Monday

17th March,

9.30 by

Carol Campbell.

Dr Jarvis

was informed. Since patient's mother called Dr Jarvis

and will now see patient tomorrow – Tuesday

11th March

at 9.30am in Silver Street.

Originator Details: 10 Mar 2014 13:35 Beverley Campbell Administrative Originally Entered by Details: 10 Mar 2014 13:37 Beverley Campbell Last Amended by Details: 15 Dec 2017 13:24 Beverley Campbell Validated by Details: 15 Dec 2017 13:24 Beverley Campbell Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

- **The Doctor's Folder / pub Book Issue: 5!**

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- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5
Folder 5

Originator Details: 04 Mar 2014

Last Amended by Details: 04 Mar 2014

Iain Williams Nursing

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Triage Screening

Plan - Triage assessment

Originator Details: 04 Mar 2014 09:07 Iain Williams Nursing Originally Entered by Details: 04 Mar 2014 09:07 Iain Williams Last Amended by Details: 04 Mar 2014 09:07 Iain Williams Validated by Details: 04 Mar 2014 09:07 Iain Williams Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed

Triage Screening

Plan - Triage assessment

13/08/2012

- **The Doctor's Folder / pub Book Issue: 5!**

Stage 5
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Originator Details: 13 Aug 2012

Last Amended by Details: 13 Aug 2012

Mohammad Fohim Nursing

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Originator Details: 13 Aug 2012

Enfield AAC

Faxed referral received from CFH A&E Dr Smith

Reported SC was under police arrest (for? crime related offence) and

four police officers brought him to CFH

A&E due to effects of LSD he

	13/08/2012 Originator Details: 13 Aug 2012 18:58 Mohammad Fohim Nursing Originally Entered by Details: 13 Aug 2012 19:13 Mohammad Fohim Last Amended by Details: 13 Aug 2012 19:13 Mohammad Fohim Validated by Details: 13 Aug 2012 19:13 Mohammad Fohim Significant: No Added to Risk History: No Contains Third Party Info: No Conceal from Client: Not Concealed <u>Enfield AAC</u> Faxed referral received from CFH A&E Dr Smith Reported SC was under police arrest (for? crime related offence) and four police officers brought him to CFH A&E due to effects of LSD he took over the weekend. He had about 2 x paper LSD last Saturday and? 5mcg liquid LSD on Sunday, also had about 1 bottle of rum yesterday. Had been partying over the weekend at a festival. Was under care of medics (? had first aid) at the festival. Was agitated on arrival, but calm down later? hallucinating, seeing different colours. No other risk or symptoms identified. Dr Smith reported that these LSD effects might last for about 48hours. Referral triaged and advised that he did not need an emergency mental health assessment at present. Advised for him to see his GP. Likely would be arrested by police.	
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