

London Borough of Enfield

Approved Mental Health Professional Assessment Form

- For use when compulsory powers are being considered

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SSM1 Barnet, Enfield and Haringey RIO number: 11214451

Copy for: Service user file
Social Services records
GP

Please note this form can be completed electronically or in hard copy. To complete this form electronically, please use mouse pointer or the tab key on the keyboard to go to the next form field.

Patient's details

Name: Simon Cordell

Address: 109 Burncroft Avenue, Enfield, Middlesex
Post Code EN3 7JQ

Phone no.: 07961833021

Male Female Age/DoB: 26 Jan 1981 (35 years old)

Ethnic origin (DoH coding): Dual heritage, white & black Caribbean

Religion: Not discussed during assessment

Preferred language: English

Interpreter needed? Yes No

Assessing AMHP: Sam Curtis

Services involved (Please state name, address, phone no.)

Hospital: Not applicable

Consultant: Dr Kripalani, Consultant Psychiatrist, Lucas House, 305 - 309 Fore Street, Edmonton, London, N9 0PD, Tel: 020 8702 3100

GP: Nightingale House Surgery, 1 Nightingale Road, N9 8AJ Tel: 020 88059997

/CMHN / CMHT: Goodie Adama, Care Coordinator and Community Mental Health Nurse, Lucas House, 305 - 309 Fore Street, Edmonton, London, N9 0PD, Tel: 020 8702 3100

Social worker/responsible local authority (Section 117): None

Nearest relative

Name: Lorraine Cordell

Address: 23 Bryon Terrace, Edmonton
Postcode N9 7DG

Age/DoB: Over 18

Relationship to patient: Mother

Informed? Yes No

Consulted? Yes No

Objected? Yes No

Reason not informed/consulted: n/a

Nearest relative notified of admission? Yes No

Letter sent? Yes No

Reason why not notified:

Nearest relative informed of their legal rights? Yes No

Names and contact information for significant others:

Patient's rights

Was the patient made aware of his/her legal status and rights under the 1983 Mental Health Act at time of interview? Yes No

If 'No', please state date when he/she was made aware of above: