

**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 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:

To access our services in hours (9am-5pm) please contact the Care Coordinator within the relevant team.

For out of hours emergency response please call the Crisis Resolution and Home Treatment Teams (CRHTT):