

Patient's name Simon Cordeil

Date of assessment 16/8/16

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

I understood Simon to be basically estranged from most of his family & his main source of social & emotional support is from his mother. I determined her as NR. I believe he has very little contact with father. I spoke with Lorraine Cordeil and consulted with her. I informed her on phone & wrote a assessment & reasoning (contact & assessment & estrangement)

6. Consultation with Assessing Doctors

Assessing doctors in agreement: chief presents with features suggestive of mental illness. Paranoid ideas about the police eg that police officers damaged his CCTV cameras at his home. withdrawn & believes TV talking to him. Pressured speech. Neighbours report escalation in his antisocial behaviour, loud music & verbal aggression. Denies mental illness & refuses voluntary admission to hospital.

7. Views of others consulted

Requires to be assessed - contact.

I spoke with Maggie Corrod - AMHP involved in earlier MHA not on 15/8. She said he had been aggressive & disruptive in cell & initially refused to engage with staff. She said she believes he would benefit from antipsychotics. Escalation in his negative behaviour ending up with being arrested by police.

8. Mental Capacity Act 2005

No evidence to determine that chief lacks capacity to make decisions regarding his mental health. MCA not applicable. MHA applicable.

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

- Two clear independent med recommendations for s.2.
- Arrested for allegedly making threat to kill neighbours on 15/8.
- HTR or other committee approach not possible given chief's total rejection of any notion that he might require MH services' input.
- Chief refuses to entertain idea of hospital admission.