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

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 5 July 2018 and outlined as below:

- 1. Whether the defendant has the mental capacity to litigate and give instructions in his defence.
- Whether the defendant understands the terms of the injunction order dated 9 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 9 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 9.1.2018
 - 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 26.6.2018.

3.2 I assessed Mr Cordell on 6 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 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

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 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 Lemmi, the officer who works for the Enfield local authority. He claimed that he received an email from Lemmi 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 Lemmi 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 Lemmi 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 Lemmi 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.

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5. **Opinion and Recommendations**

Mr Cordell is a resident at the Enfield borough, who was served an injunction on 9 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.

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2. Whether Mr Cordell understands the terms of the injunction order dated 9 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 Lemmi possibly in conjunction with others). He therefore does not value the order or the contents contained within it. In my opinion Mr Cordell's capacity to process the information relevant to the order is again impacted by his delusional beliefs.

Rarangini

Dr Dhara Dinakaran, MBBS, MSc, MRCPsych Consultant Psychiatrist Approved under Section 12 (2) of MHA

08.07.2018

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Mr Cordell is a resident at the Enfield borough, who was served an injunction on 9 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.

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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.

2. Whether Mr Cordell understands the terms of the injunction order dated 9 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 Lemmi possibly in conjunction with others). He therefore does not value the order or the contents contained within it. In my opinion Mr Cordell's capacity to process the information relevant to the order is again impacted by his delusional beliefs.

Rarangini

Dr Dhara Dinakaran, MBBS, MSc, MRCPsych Consultant Psychiatrist Approved under Section 12 (2) of MHA

08.07.2018

Barnet, Enfield and Haringey

Mental Health NHS Trust

Data of Defermel	3 rd October 2018	BE COMPLETED IN FULL		
Date of Referral:		<u> </u>		
Referring Consultant –	Dr Hussain			
Team Referring:	Enfield Adult North Locality Team			
Address of Referring Team	58-60 Silver Street	······································		
	Enfield EN1 3EP			
Tel No:	02083794142			
Mobile No:				
Fax No:			<u></u>	
Email (NHS.net if available):	basit.hussain@nhs.	net		
Demographic Information:				
Name of Patient:	Simon Cordell			
Rio No:	11214451			
NHS Number:	434 096 1671			
Date of Birth:	26 th January 1981			
Ethnicity:	Mixed-White & blac	ck Caribbean		
Address: (last known)	109 Burncroft Avenue, Enfield, Middlesex, EN3 7JQ			
Name and address of GP:	Dr Y.Chong Nightingale House Surgery Tel: 020 88059997			
Marital Status:	Single			
CCG / GP Consortia:	Enfield			
Present location of patient:	At home			
Interpreter Required	No	Language	English	
Mental Health Information:				
Local care co-ordinator	Soobah Appao	ool		
Current/recent care team or CMHT	Enfield Adult North Locality Team			
Mental Health Act 1983 Status	Not under the MHA			
Offending and Risk Information:				
Details of any current criminal	Had a recent court c	ase in relation to on-going	dispute about his neighbour	
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	and is an encourt now plain		
Offending History (attach PNC printout)	via the courts Mr Cordell has a number of convictions for driving offences and theft 8/12/15: given 5 year ASBO in 2015 for running illegal raves			

Barnet, Enfield and Haringey

Mental Health NHS Trust

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North London Forensic Service Referral Form

Is this referral for:-

- admission to medium security (please note that cases admitted to medium security for the most part concern serious violence, such as GBH or homicide)
- admission to low security
- risk assessment: please specify whether this is a general assessment or refers to a specific risk (e.g. expressed homicidal intent towards a particular individual or a group, such as children)
- advice on diagnosis and management.
- advice about longer term secure placement (please indicate current duration of stay in locked ward environment).
- instead of the patient being seen in the first instance, would you like a telephone consultation with a Consultant instead?

Or for **Forensic Integrated Community Services (FICS)**. See FICS referral guidance for more information :

٠	Training	
•	Consultation	
٠	Attendance at a case review/team meetings	
•	Assessment	\boxtimes
•	Case assisted working	
•	Full case management	





Please reply to: Legal Services PO Box 50. Civic Centre Silver Street, Enfield EN1 3XA E-mail: Ludmilla.lyavoo@enfield.gov.uk Phone: 0208 379 8323 DX: 90615 Enfield 1 Fax: 0208 379 6492

My Ref: LS/C/LI/157255 Your Ref: Date: 15th October 2018

Dear Sirs,

Enfield

EN3 7JQ

Mr Simon Cordell

109 Burncroft Avenue

Re: Anti-Social Behaviour, Tenancy concerns and breaches- pre-action letter.

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

Jeremy Chambers Director of Law & Governance Enfield Council Civic Centre, Silver Street Enfield EN1 3XY

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www.enfield.gov.uk

If you need this document in another language or format contact the service using the details above.

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 swear words 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 gonna do her over' and then 'I'm gonna 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.

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 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 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 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.

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 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

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

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 you 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 Iyavoo) 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

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

"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

"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."

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,

L.Iyavoo

Ludmilla Iyavoo Lawyer For the Director of Law and Governance

Barnet, Enfield and Haringey



Mental Health NHS Trust

A University Teaching Trust

Your Ref: NHS Number: 434 096 1671 Hospital Number:11214451

21 Sep 2018

Private and Confidential to be opened by addressee Mr Simon P CORDELL 109 Burncroft Avenue Enfield Middlesex, EN3 7JQ Enfield Middlesex EN1 3EP

58-60 Silver Street

Fax: Email:

Tel: 0208 379 4142

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:				

I o 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.

Yours sincerely

Louiza Vassiliou On Behalf of Barnet, Enfield and Haringey Mental Health Trust



For information on how we manage your personal data please visit our full processing /privacy notice on our trust website: <u>http://www.beh-mhs.nhs.uk/privac-policy.htm</u> or email: <u>beh-v_information.government@nhs.ns</u> THIS INFORMATION IS SENT IN CONFIDENCE AND IS RESTRICTED. IT MUST NOT BE PASSED ON TO A THIRD PARTY WITHOUT THE EXPRESS PERMISSION OF THE POLICE.

Date From: Date To:	19/08/2018 19/08/2018	Time From: Time To:	08:12 08:12	Incident Location: 109 Burncroft Avenue ENFIELD Enfield Middlesex EN37JQ UNITED KINGDOM
------------------------	--------------------------	------------------------	----------------	--

Concerns: Physical

Psychological / Emotional

CAD - 2345/19AUG18

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 continously 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

Continued on plain paper Y

18PAC200243 Printed for Warrant No. P217965

DATA PROTECTION ACT - DISPOSE OF AS CONFIDENTIAL WASTE

Notification of Pre-Assessment Checklist

- All sections of this form must be completed.
- Use one form per family, per adult or per child as necessary.
- THIS INFORMATION IS SENT IN CONFIDENCE AND IS RESTRICTED. IT MUST NOT BE PASSED ON TO A THIRD PARTY WITHOUT THE EXPRESS PERMISSION OF THE POLICE.

Subject's details	OCU Ref. 18PAC200243 (ACN)				
Surname: CORDELL	Surname: CORDELL				
Forename(s): SIMON			Crimint		
Sex: Male/ Female	ID Code: 3	Date and place of birth: 26/01/1981			
Home Address:	L				
109 Burncroft Avenue ENFIELD Enfield Middlesex EN37JQ UNITED KINGDOM	•	7			
Tel. No.			PNC Check		
Current Location:			Trace I No Trace I		
1 GL 190.			PNC ID No.		

Family and Key Roles Details

Surname	Forename(s)	DOB/Age Now	Relationship

Reporting Officer (Source)		Supervising Officer (Certifying ac evaluations as correct)	tions and
Signature	Rank	Signature	Rank
Name (Print) FISCA	OCU/Unit YE-OPS	Name (Print)	OCU/Unit
Warrant No. P242041			
Date 19/08/2018		Date	

4

18PAC200243 Printed for Warrant No. P217965

DATA PROTECTION ACT - DISPOSE OF AS CONFIDENTIAL WASTE





MERLIN Ref: 18PAC200243

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 Sent: Yes No

18PAC200243

Form 87F

RISK ASSESSMENT (CASCADEINFO)



MERLIN Ref: 18PAC200243

Surname: CORDELL

F

Forename(s): SIMON

DOB: 26/01/1981

THIS INFORMATION IS SENT IN CONFIDENCE AND IS RESTRICTED. IT MUST NOT BE PASSED ON TO A THIRD PARTY WITHOUT THE EXPRESS PERMISSION OF THE POLICE.

This case is currently being dealt with by police as a:

This is being investigated by the officer shown here. Please contact to discuss.

OIC:

Tel/Email:

MINOR CRIME:

After initial investigation referred to Social Services for consideration. No further action by police unless further info becomes available



INCIDENT OF CONCERN:

Referred to Social Services for consideration

Pre-Assessment Check

Pre Assessment Che	Referred to other Force or external Agency
	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
	IF NO CONSENT/UNABLE TO CONSENT:
	Because of the incident, I have considered the following;
	 The individuals need for care and support including mental health The individuals vulnerability to abuse or neglect The individuals ability to protect themselves, the impact on the individual and their wishes, and The risk of repeated or increasingly serious acts involving children, this or another adult vulnerable to abuse or neglect.
	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.
l	LEVEL 2- GREEN: WHEN ADULTS NEEDS ARE NOT CLEAR OR NOT KNOWN; ADULTS' NEEDS WHICH ARE NOT KNOWN OR MAY NOT BEING MET

RISK ASSESSMENT (CASCADEINFO)

MERLIN Ref: 18PAC200243

URN:



Ν

Checks

Originator Police	-	
CORDELL, SIMON, DOB:26/01/1981, Subject, 109, B	urncrof	ft Avenue, ENFIELD, Middlesex, Enfield,
		<u> </u>
Home: Business:		
Mobile:		
Other:		
Email:		
Preferred Method of Communication: Not Applic		
	Yes/N	Source / Reference
Local Authority Trace	No	Refer to Research.
Open Case	No	Refer to Research.
Repeat Victim (Min 2 Times Rolling In 12 Months)	No	Refer to Research.
Repeat Merlin (Min 2 Times Rolling 12 Months)	No	Refer to Research.
Child Protection / Child Sexual Exploitation		Refer to Research.
Adult At Risks / Vulnerability Identified	No	Refer to Research.
Suicide (Atmpts / Fmly Mbrs) / Homicide/Threats To Kill Refs	No	Refer to Research.
Controlling And Jealous Behaviour Stalking And Harassment	No	Refer to Research.
Assaults And Violent Behaviour Including Sexual	No	Refer to Research.
Domestic Abuse	No	Refer to Research.
Escalation Of Behaviour / Including Use Of Weapons		Refer to Research.
Incidents Of Missing / Absences		Refer to Research.
Neglect/Abuse And Cruelty To Children Or Animals		Refer to Research.
Factors / Triggers		Refer to Research.
Other Forms Of Abuse Incl. Alcohol / Substances / Financial	No	Refer to Research.

18PAC200243

Form 87F

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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.

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, Assessmentservice (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST) <assessmentservice.enfield@nhs.net>;

2 attachments

Form87F_7416668.pdf; J2_form78_7416668.pdf;

Dear Team,

Please see the attached for your attention.

Regards,

Kevin Kamese MASH OSO for Adult Social Care

T D20 8379 3956

-----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 <u>merlin@met.pnn.police.uk</u>, 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

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Barnet, Enfield and Haringey NHS

Mental Health NHS Trust

A University Teaching Trust

Your Ref: NHS Number: 434 096 1671 Hospital Number:11214451

16 Aug 2018

Private and Confidential to be opened by addressee Mr Simon P CORDELL 109 Burncroft Avenue Enfield

Dear Mr Cordell

Middlesex, EN3 7JQ

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



58-60 Silver Street Enfield Middlesex EN1 3EP

Tel: 0208 379 4142 Fax: Email:



formation on how we manage your personal data a visit our full processing /privacy notice on our trust te: <u>http://www.bah-mht.nhs.uk/privacy-polici.htm</u> or

Barnet, Enfield and Haringey

	Mental Health NHS Trust
	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 30/9/2018 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.
MAPPA Level	Not on MAPPA
Risk Issues	Please refer to Risk Assessment on RIO
Timescales of note, ie. EDRs etc.	

Date: 19 10 18	Time referred:	G.Z. Time ari	rived:	Time seen:		Referral taken by: LEINGILEY
Referral from: GP	A+E 🗆 Self 🗆	Police D Hub		Social Serv	ices 🗆 I	Psych Ward 🗅
Other (please	specify)	First	••••	Tel		
Service User Details:		- P I	<u>۲</u>	10	1 10	
Title:	Date of Birth:	G S	RIO No:		14	
First Name:	1. M	·····	Surnam	.e:	58 d	211
First Name:	9 Bur	ncrof	, f	<u>A-U:</u>	• • • • • • • • • • • • • • • • • • • •	
	Enf	Jel d		Po	ost Code	ENS 730
Telephone Number (s):	Ч		Mobile	No:		
Ethnicity:	Interpro	eter needed:)	//N	Language s		;
GP Surgery & Contact					Tel	ephone number
Main Carer /N.O.K						
Community Team		*****		11,10,10,10,10,10,10,00,10,10,00,00,00,0		
Accommodation: Owner Y	//N Rented Y/N	No fixed Abode	Y/N Other	(specify)	Livi	ng alone? Y / N
Reason for Referral:	7 m. e. st. f. (- C	5×47 >0 Am	Current D	01agnosis:	<u>k</u>	M.tf.A.
PLEASE COMPLETE BEFORE F Care Plan:	OLLOWING UP:- essment	Crisis Plan 🗆	Core Asses	ssment _ D	GP Le	
Patient seen at: Home C) A+E 🗆	Referral on Rid Appointment		× (Other	
Date and length of as	sessment	Ţ	ïme			
Outcome: Taken b	y CRHTT. 🗆 Transfé	er to HCRHTT	Transfer to I	BCRHTT D		
Enfield T	riage 🗆 Hospi	tal Admission 🗆	Discharged	co GP 🖸		
Form completed by (F	Print Name) prm is to be completed ar					

Approved Mental Health Professional Assessment Form

- For use when compulsory powers are being considered

	e this form can be completed electronically or in I nter or the tab key on the keyboard to go to the ne		te this for	m electron	ically, please t	ne use
Patient's	details	🛛 Male 🛛 F	emale	Age/DoB / 26/01/1981		
Name Address	Simon Cordell 109 Burncroft ave Enfield	Ethnic origin (Do⊦ Religion Preferred langua		Black British Mixed Race Not dosclosed English		
Phone no.	Middx Postcode EN3 7JQ 07763043933	Interpreter neede Assessing AMHF	Г	☐ Yes anthony m	⊠ No anning	
Hospital Consultant GP CMHN/CMH	· · · · · · · · · · · · · · · · · · ·		9997			
Nearest Name Address Phone no. Age/DoB Relationship	Mrs Lorraine Cordell 23 Byron Terrace Edmonton London Postcode N9 7DG 02082457454 /	Informed? Consulted? Objected? Reason not inform Nearest relative r Letter sent? Reason why not Nearest relative i Names and conta	notified of notified [nformed c	admission?	rights?	es □ No es ⊠ No
If 'No', pleas Assessn Date of initia Place of ass	ent made aware of his/her legal status and rights und e state date when he/she was made aware of above nent details I referral 25/10/2018 Date of assessment Wood Green Police Station ommendations from: Please select if Second Date 25/10/2018		Lega □ Inf. □ Sec. □ Sec. □ Sec. □ Sec. □ Sec.	I status a □ 2 □ 3 ⊠ 4 .5(2) □ .7 □	t time of asso Sec.135 Sec.136 Detained by Po under Sec.136 CTO Other	essment
Any delays in Time assess Outcome Date admitte Admitted/def	e details ed/detained 25/10/2018 Time of admission		 □ No a □ Infor □ Rem ☑ Deta □ Deta □ Deta □ Deta □ Place 	admission rmal admiss nains inform ained under ained under ained under ced under So Yes [] No	al inpatient Sec.2 Sec.3 Sec.4 ec.7 D Renewal	
					(200201 2003



Barnet, Enfield and Haringey

Health Authority

11214451

SSM1

Copy for: Service user file Social Services records GP

Summary of assessment

Patient's name | Simon Cordell

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 leaison 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 compleat 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 arrensted for burglary as a young man and was remanded in custody in a Young offenders 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 Harrassment as he believes they have obstucted 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 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 grand mother 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. Some time later it was discovered the gas and carbonmonixide 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 Woodgreen 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 Anns 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 for evidance. 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 after the deaths in his famly 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 hs been depressed in the past and atempted 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 unnder the mental health act and then treated.

Simon Cordell

Date of assessment 2

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

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 deluional. 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 harrassed. He had no concept that his behaviour would be seen as unacceptable and was in fact putting his tenancy at risk. He does not accpt that his presentation may be the result of a mental disorder and that he needs an assessment of his mental sate and treatment for this. so he could not agree to an inforamal admission. I demmed 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 famly 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 hs been depressed in the past and atempted 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 unnder 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.

Pat	ient's name	Simon Cordell	Date of assessment	25/10/2018
10.	If not admit Detained	tted to hospital, outline immediate plans for alternative to admission a	and how those plans will be	<u>co-ordinated</u>
11.		rrangements for: hts (including children)		
	b) Securing p N/A c) Pets simon has a	property a dog his mother agreed to lookafter his dog while he was in hospital.		
12.	Any other pra	actical matter (including information/advice about children visiting the nay want to still chage him with the alleged assut witch he was arrest	e ward) ted for.	
13.	Comment on	n any avoidable delays in the assessment and admission process		

AMHP Signature		Print details	anthony manning	
	anthony manning	Contact details	65C PARK AVENUE, BUSH HILL,	
			ENFIELD, EN1 2HL.	
Date	25/10/2018		0208 364 1844	

Record of detention in hospital

Mental Health Act 1983 Sections 2, 3 and 4 Regulation 4(4) and (5)

	(To be attached to the applicat	tion for admission)	
	PART 1		
(name and address of hospital)	Barnet, Enfield and Haringey Mi Chase Farm Hospital	ental Health NHS Trust	
	127 The Ridgeway, Enfield,	Middlesex EN2 8JL	
(PRINT full name of patient)	Simon Cora	Je 11	
	Complete (a) if the patient is not	already an in-patient in the hospita	Ι.
	Complete (b) <u>if the patient is alre</u>	ud y un in patient .	
(Delete the one which does not apply)	hospital) 26 10 118	n under section (state section)	admission to in pursuance
	been admitted to this hospital) of the Mental Health Act 1983 managers on (date)	was received by me on behalf of th at (time)	e hospital
	and the patient was accordin from that time.	gly treated as admitted for the pur	poses of the Act
		Signed <u><u></u> <u>B</u>ee</u>	(.
		on behalf of the	hospital managers
		PRINT NAME Sunil	Kamrecha
		Date 26/10/18	<u> </u>
	PART 2		
(To be com	pleted only if the patient was admin application under section		
	On (date)	at (time)	I received, on

behalf of the hospital managers, the second medical recommendation in support of the application for the admission of the above named patient.

Signed

on behalf of the hospital managers

PRINT NAME

Date

NOTE: IF THE PATIENT IS BEING DETAINED AS A RESULT OF A TRANSFER FROM GUARDIANSHIP, THE PATIENT'S ADMISSION SHOULD BE RECORDED IN PART 2 OF THE FORM G8 WHICH AUTHORISED THE TRANSFER.

Cat. No. MHR14

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Medical Recommendation for Admission for Assessment

Mental Health Act 1983 Section 2 Regulation 4(1)(b)(ii)

(PRINT full name and I address of medical	DIZ SARAN KATHERINE HEWITT
practitioner)	CHASE FARM HOSPITAL, THE RIDGEWAY
	ENFIELD ENZ &JL
	a registered medical practitioner, recommend that
(PRINT full name and	SIMON CORDELL
address of patient)	109 BURNCROFT AVENUE
	$E_{NF1ELD} E_{NS} \overline{7} \overline{5} Q$ be admitted to a hospital for assessment in accordance with Part 2 of the Mental
	Health act 1983.
	I last examined this patient on
(date)	25 OCtober 2018
*Delete if not applicable	*I had previous acquaintance with the patient before I conducted that examination.
	*I am approved under section 12 of the Act as 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,
	AND
	(b) ought to be so detained
(Delete the indents not applicable)	(i) in the interests of the patient's own health
approable)	(ii) in the interests of the patient's own safety
	(iii) with a view to the protection of other persons
	My reasons for these opinions are:
	(Your reasons should cover both (a) and (b) above. As part of them: describe the patient's symptoms and behaviour and explain how those symptoms and behaviour lead you to your opinion; explain why the patient ought to be admitted to hospital and why informal admission is not appropriate.)
mr cordell is known to psi	ychiatric services but hers ret engaged with them in
recent years. Today he w	as arrested for spitting our a police officer after they were
Called about him havapin	y his neighbours. He has a number of non-moleoration order
gainst him, providing him	free contracting them. On examination we cordell displayed
disordered with averinclusi	clience symptons. He spoke rapidly and was thought ve and tensental speech. He held a number of graveliese (If you need to continue on a separate sheet please indicate here and attach that
P.J:()	sheet to this form.)
	Signed <u>Date 25 10 18</u>
Cat. No. MHR4 Printed by B (01322	arnet Enfield & Haringey NHS, MH Unit, HA8 0AD under licence from Shaw & Sons Ltd LFX 31159 621100). Crown Copyright. Reproduced by permission of the Controller of HMSO.

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and delusioned beliefs. He told us that the police were conspring with medics and the cancil to silence him as he had incovered police corophian. He said he was tageted by police as they were envious of his abilities. It told as that his neighbour has plaars above were controlling the neighbour below them and caused them to stamp on the floor and distribution for cordell. He did not believe that he was mentally unwell and was adamant he would not see a psychiabrist. He lacked insight into his presentation. He was irritable and has assaulted police officers and herassed his neighbours in recent days. It poses a risk to other therefore. His behaviour places him at rish of retaliatory attacks has other and he will not accept theatheast pr his hypomanic symptimes. This places his health and safety at risk. There is evidence therefore that he has a mental illness of a nature and degree much women's assessment and theament in hospital and without this there is a risk of how to his health and safety and the safety of others

Brs. Hemilt.

Medical Recommendation for Admission for Assessment

Mental Health Act 1983 Section 2 Regulation 4(1)(b)(ii)

P MKEARE (PRINT full name and I address of medical WEEN POLICE ST NOOD practitioner) 401 NON WOOD GREEN a registered medical practitioner, recommend that RUN ZNOF 109 (PRINT full name and CONFLY SITUR address of patient) ENFIED CORDELL 702 be admitted to a hospital for assessment in accordance with Part 2 of the Mental Health act 1983. I last examined this patient on (date) 10 *Delete if not applicable *I had previous acquaintance with the patient before I conducted that examination. *I am approved under section 12 of the Act as 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, AND (b) ought to be so detained (Delete the indents not (i) in the interests of the patient's own health applicable) (ii) in the interests of the patient's own safety (iii) with a view to the protection of other persons My reasons for these opinions are: (Your reasons should cover both (a) and (b) above. As part of them: describe the patient's symptoms and behaviour and explain how those symptoms and behaviour lead you to your opinion; explain why the patient ought to be admitted to hospital and why informal admission is not appropriate.) THIS MAN IN HYDERMANI WITH FLICHT OF AND IDEATION. ITE IMIS REFERENCE DELUSION GEMULT POLLE ANE TAN THE. HIM AS BLO(IC OFRAD FSIDATS 12 - 171 DEODLE IN THE _ SMEEJ SNEEN THETSELIEVE HE GAVE SECAUSE Ipr HERDES. HE (If you need to continue on a separate sheet please indicate here and attach that CMANAUSE IN THIS IDEAT ANOT sheet to this 1K) ORN Signed Date

Cat. No. MHR4

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Form A2

Application by an Approved Mental Health Professional for Admission for Assessment

Mental Health Act 1983 Section 2 Regulation 4(1)(a)(ii)

(name and address	To the Managers of Bartel Brobild and Harmany NHS MWA
of hospital)	chair from Husportal, izi the Ridge was Friddelf ENZ SJL
(PRINT your full name) I	ANTHON'N MANNING
(PRINT your address) of	Enbield ENIZHL
	apply for the admission of
(PRINT full name of patient)	SIMON CORDELL
(PRINT address of of	109 BURNEROFT AVINUE
patient)	BAFILL EN3 7JQ
	for assessment in accordance with Part 2 of the Mental Health Act 1983.
	I am acting on behalf of
(PRINT name of local social services authority)	Enfosede Council
	and am approved to act as an approved mental health professional for the purposes of the Act by
delete as appropriate	[that authority]
	name of local social services authority that approved you, if different
	Complete the following if you know who the nearest relative is.
	Complete (a) or (b) as applicable and delete the other [(a) To the best of my knowledge and belief
(PRINT full name and address)	23 Byron remain
	London N9 7D6
	is the patient's nearest relative within the meaning of the Act.]
	[(b) I understand that
(PRINT full name and address)	
delete phrase which does not apply	has been authorised by a county court/the patient's nearest relative to exercise the functions under the Act of the patient's nearest relative.]
	I have/have-not-yet* informed that person that this application is to be made and of the nearest relative's power to order the discharge of the patient.
	CONTINUED
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LFX 31157

Complete the following if you do not know who the nearest relative is.

Delete (a) or (b)

[(a) I have been unable to ascertain who is the patient's nearest relative within the meaning of the Act.]

[(b) To the best of my knowledge and belief this patient has no nearest relative within the meaning of the Act.]

The remainder of the form must be completed in all cases.

(date)

I last saw the patient on 25/10/2000within the period of 14 days ending on the day this application is completed.

I have interviewed the patient and I am satisfied that detention in a hospital is in all the circumstances of the case the most appropriate way of providing the care and medical treatment of which the patient stands in need.

This application is founded on two medical recommendations in the prescribed form.

If neither of the medical practitioners had previous acquaintance with the patient before making their recommendations, please explain why you could not get a recommendation from a medical practitioner who did have previous acquaintance with the patient:-

(If you need to continue on a separate sheet please indicate here sheet to this form.)

and attach that

which was

Signed

Date 25/10/2018,

NHR2

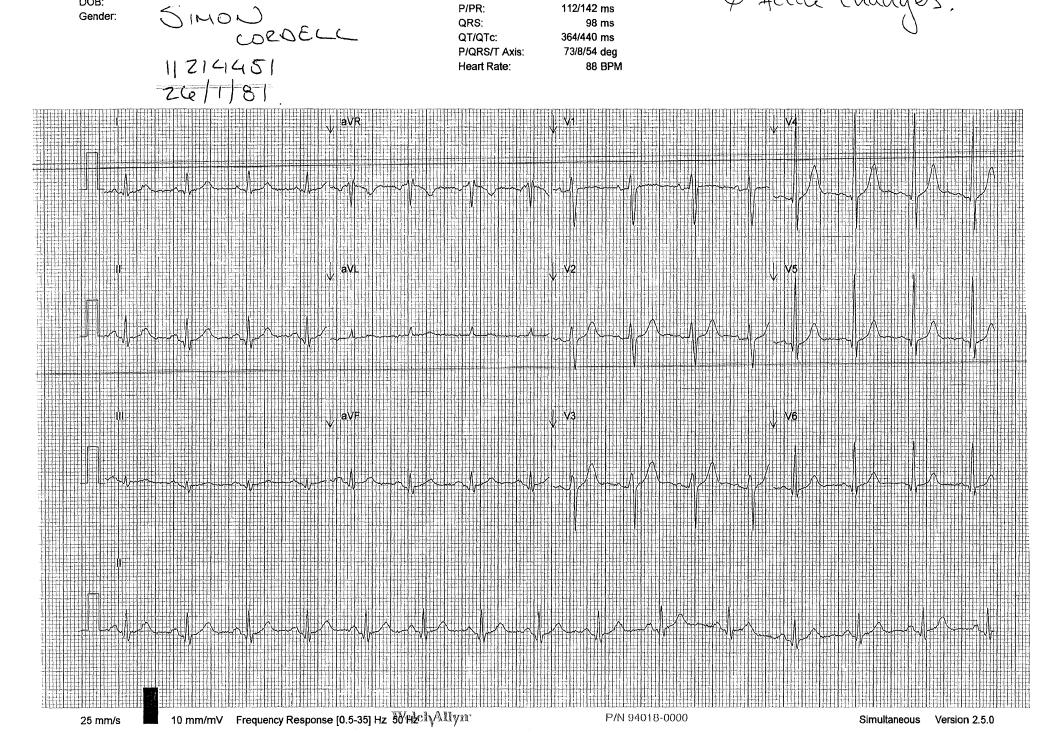
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ıυ. DOB: Gender: warne:

26/10/2018 11:31:01

P/PR:	112/142 ms
QRS:	98 ms
QT/QTc:	364/440 ms
P/QRS/T Axis:	73/8/54 deg
Heart Rate:	88 BPM

Ø Acute changes.



Nightingale House Surgery NHS Number: 434 096 1671

CORDELL, Simon (Mr.) Date of Birth: 26-Jan-1981

CORDELL, Simon (Mr.)

Date of Birth: 26-Jan-1981 (37y)

Report Path: Local Record

109 Burncroft Avenue, Enfield, Middlesex, EN3 7JQ

NHS Number:	434 096 1671	Home Tel:	
Usual GP:	ABIDOYE, Dapo (Dr.)	Work Tel:	
Patient Type:	Regular	Mobile Tel:	07783158424
Registered	08-Feb-1999	email	

Active

09-Dec-2015	[X]Psychosis NOS	
28-Jun-2011	Administration	
13-Jan-2008	Reduction of fracture of mandible	SUMMARY=Y
31-Jul-2005	Fracture of scaphoid	(IL) SUMMARY=Y
13-Jul-2004	Lloyd George culled+summarised	SUMMARY=Y
20-Nov-1997	Fracture of scaphoid	LATERALITY - Left SUMMARY=Y
23-Jun-1997	Overdose of drug	SUMMARY=Y
26-Jan-1981	Asthma	SUMMARY=Y

Significant Past

Medication No current medic Allergies No allergies reco Health Status			
04-Feb-2016	Non-smoker		
	of cigarettes -		
07-Nov-2011	Q/E - weight	79	kg
07-Nov-2011	O/E - height	177	7 cm
07-Nov-2011	Body Mass Index	25.	21 kg/m2
04-Aug-2005	Notes summary on computer		
05-Feb-1999	Current Drinker	40	units/week
	(Advised)		•
20-Dec-1996	O/E Blood Pressure Reading	110)/70 mm Hg

Immunisations

19-Sep-2016 Flu vac inv 1st SMS bit msg st

Planned Events

26-Oct-2018	Named GP not informed
26-Oct-2018	No BP recorded in past 5 years
26-Oct-2018	Mental Health Care Plan Outstanding
26-Oct-2018	Alcohol Consumption recording
26-Oct-2018	Risk Stratification - lifestyle data
26-Oct-2018	Seasonal Flu Vacc recommended
26-Oct-2018	Patient on QOF Registers

Last 3 Consultations

No additional comment entered

CORDELL, Simon (Mr.) Date of Birth: 26-Jan-1981

Nightingale House Surgery NHS Number: 434 096 1671

		1						
	Caraa							
	Comment	PT NEEDS TO BE SEEN RE			2018) REQUEST			
		HAS BEEN DESTROYED AS	PINEVERC	AME BACK	The second s			
	Additional							
	Additional	Attachment Admin Letter E Administration	ntield Council		SOLICIOR			
				19:34UEUTAN 1927-561990 (A.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S				
	Additional	Attachment B Unscheduled C						
,	Auditional	Scanned document		51 2 1				
Values and Inv	restigations	(Latest Value)						
17-Jan-2017		ardiovascular disease 10 year i	risk 0.86	%				
	score							
		Batch Data Management (Estin						
DE Mou 2016		Å ² ; Ethnicity: British; Cholestero Risk Calculator			Hg;)			
05-May-2016		Batch Data Management	0.09	%				
		te Cancer Risk	0	%				
		Cancer Risk	0.02	%				
		lar Cancer Risk	0.02	%				
		ctal Cancer Risk	0.01	%				
	Gastro	-Oesophageal Cancer Risk	0	%				
		atic Cancer Risk	0	%				
	Lung C	ancer Risk	0	%				
		Tract Cancer Risk	0	%				
30-Sep-2013		imin D - (drdapo) - Makela rout	ine 27	nmol/L				
	appointme							
	Vitamin D guidelines:							
	Deficient Insuffici		ז / ד					
	Sub-optin							
		concentration: 76 - 200 nm						
		Toxicity: >250 nmol/L						
30-Sep-2013		sglutaminase IgA lev	1	U/ml	<10.00U/ml			
30-Sep-2013	Thyroid ful							
		TSH level	0.99	mU/l	0.35 - 5.50mU/l			
	Serum	free T4 level	12.7	pmöl/l	10.00 - 22.70pmol/l			
30-Sep-2013	lgA		3.22	g/l	0.80 - 3.90g/l			
30-Sep-2013		ood Chemistry			10.00 07.00.8			
		ALT level	22		10.00 - 37.00u/L			
	GFR ca	alculated abbreviatd MDRD derived EGFR should be m	84	mL/min/1.73som				
		ibbeans. If <30 consult th						
		scribing advice, available						
		e on the intranet. It is no						
		gnancy, amputees or extrem						
		C reactive protein level	2 -	mg/l	<6.00mg/l			
	NB:	CRP assay sensitivity is r						
30-Sep-2013	Liver funct							
		alkaline phosphatase	68	u/L	40.00 - 129.00u/L			
		total bilirubin level	15	umol/i	<15.00umol/l			
		total protein	77	g/l	62.00 - 82.00g/l			
		albumin	48	g/L	35.00 - 50.00g/L			
30-Sep-2013	Urea and e		100	1// no no n	135.00 - 145.00mmol/l			
	Serum		138	mmol/i	3.50 - 5.50mmol/L			
		potassium	4.6 4.5	mmol/L mmol/l	1.70 - 8.30mmol/l			
		urea level	4.5 90	umoi/l	42.00 - 102.00umo!/l			
90 Ban 2042		creatinine e sedimentation rate	2	mm/hr	2.00 - 15.00mm/hr			
30-Sep-2013	Eryunocyte		~					

CORDELL, Simon (Mr.)	
Date of Birth: 26-Jan-1981	

	I Full blood count - FBC			
30-Sep-2013	Please note: The units for Hb and MC	HC have cl	anged from d/d	i to g/I
	in line with national guidelines.		-	
	Haemoglobin estimation	148	g/L	135.00 - 165.00g/L
	Total white blood count	9.1	x10^9/I	4.00 - 11.00x10 [^] 9/I
	Platelet count	233	x10^9/I	135.00 - 420.00x10^9/I
	Red blood cell (RBC) count	4.53	x10^12/I	4.50 - 6.00x10^12/1
	Packed cell volume	0.44	I/I	0.40 - 0.521/1
	! Mean corpuscular volume (MCV)	97,7	fl	76.00 - 96.00fl
	! Mean corpusc. haemoglobin(MCH)	32.7	pg	27.00 - 32.00pg
	Mean corpuse, Hb, conc. (MCHC)	335	g/L	315.00 - 365.00g/L
	Neutrophil count	6,1	x10^9/I	2.00 - 7.50x10^9/l
	Percentage result: 67.03%	0,1	XTO SH	2.00 -11,00210 0/1
	Lymphocyte count	2.2	x10^9/I	1.00 - 4.00x10^9/i
	Percentage result: 24.18%			
	Monocyte count	0.6	x10^9/I	0.20 - 1.00x10^9/l
	Percentage result: 6.59%		,	
	Eosinophil count	0.1	x10^9/I	0.04 - 0.40x10^9/l
	Percentage result: 1.10%	5.11		
	Basophil count	0.1	x10^9/I	0.02 - 0.10x10^9/I
	Percentage result: 1.10%	V. I		0.02 -0.10/10 3/1
07 Nev 0044		70	ka	
07-Nov-2011	O/E - weight	79	kg	
07-Nov-2011	O/E - height	177	çm	
07-Nov-2011	Body Mass Index	25.21	kg/m2	
10-Oct-2011	Serum vitamin D	32	nmol/L	
	viewed by: YC	- •		
10-Oct-2011	Serum ferritin	66	ng/mi	15 - 300 ng/mi
	.viewed by:			
10-Oct-2011	Serum folate	4.5	ug/L	2 - 14.5 ug/L
	.viewed by: YC			
10-Oct-2011	! Serum vitamin B12	164	ng/L	190 - 900 ng/L
	.viewed by: YC .gp comment: Make Routine	Appointme	ent	
10-Oct-2011	Full Blood Count	• -		
	viewed by:			
10-Oct-2011	Total choiesterol:HDL ratio	3.4	UNKNOWNIUNI	TS
		•		
10-Oct-2011	viewed by: AST serum level	24	ыA	10 - 37 u/l
10-Oct-2011	AST serum level	24 3 22	u/L a/l	10 - 37 u/L 0.8 - 3.9 g/l
10-Oct-2011 10-Oct-2011	AST serum level	24 3.22	u/L g/l	10 - 37 u/L 0.8 - 3.9 g/l
10-Oct-2011	AST serum level IgA viewed by:	3.22	g/l	0.8 - 3.9 g/l
	AST serum level IgA .viewed by: Serum glucose level			
10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by:	3.22 4.5	g/l mmol/l	0.8 - 3.9 g/l
10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level	3.22 4.5 1.2	g/l mmol/l mmol/l	0.8 - 3.9 g/l 3 - 6 mmol/l
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level	3.22 4.5 1.2 2.6	g/l mmol/l mmol/l mmol/l	0.8 - 3.9 g/l
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides	3.22 4.5 1.2 2.6 0.7	g/l mmol/l mmol/l mmol/l mmol/l	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol	3.22 4.5 1.2 2.6 0.7 4.1	g/l mmol/l mmol/l mmol/l mmol/l mmol/l	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum inorganic phosphate	3.22 4.5 1.2 2.6 0.7 4.1 0.97	g/l mmol/l mmol/l mmol/l mmol/l mmol/l mmol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum inorganic phosphate Serum calcium	3.22 4.5 1.2 2.6 0.7 4.1 0.97 2.31	g/l mmol/l mmol/l mmol/l mmol/l mmol/L mmol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L 2.1 - 2.6 mmol/L
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum inorganic phosphate	3.22 4.5 1.2 2.6 0.7 4.1 0.97	g/l mmol/l mmol/l mmol/l mmol/l mmol/l mmol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum cholesterol Serum inorganic phosphate Serum calcium Corrected serum calcium level Tissu transglutaminase IgA lev	3.22 4.5 1.2 2.6 0.7 4.1 0.97 2.31 2.26 1	g/l mmol/l mmol/l mmol/l mmol/l mmol/L mmol/L mmol/L umol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L 2.1 - 2.6 mmol/L 2.1 - 2.6 mmol/L
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum inorganic phosphate Serum calcium Corrected serum calcium level	3.22 4.5 1.2 2.6 0.7 4.1 0.97 2.31 2.26 1	g/l mmol/l mmol/l mmol/l mmol/l mmol/L mmol/L mmol/L umol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L 2.1 - 2.6 mmol/L
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum inorganic phosphate Serum calcium Corrected serum calcium level Tissu transglutaminase IgA lev	3.22 4.5 1.2 2.6 0.7 4.1 0.97 2.31 2.26 1	g/l mmol/l mmol/l mmol/l mmol/l mmol/L mmol/L mmol/L umol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L 2.1 - 2.6 mmol/L 2.1 - 2.6 mmol/L
10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011 10-Oct-2011	AST serum level IgA viewed by: Serum glucose level viewed by: Serum HDL cholesterol level Serum LDL cholesterol level Serum triglycerides Serum cholesterol Serum inorganic phosphate Serum calcium Corrected serum calcium level Tissu transglutaminase IgA lev viewed by: YC PATH LAB RESULTS OF Serum lipids	3.22 4.5 1.2 2.6 0.7 4.1 0.97 2.31 2.26 1	g/l mmol/l mmol/l mmol/l mmol/l mmol/L mmol/L mmol/L umol/L	0.8 - 3.9 g/l 3 - 6 mmol/l 2.5 - 3.9 mmol/l 3.8 - 5.2 mmol/l 0.8 - 1.4 mmol/L 2.1 - 2.6 mmol/L 2.1 - 2.6 mmol/L
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CORDELL, Simon (Mr.) Date of Birth: 26-Jan-1981

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Mental Health NHS Trust

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

Mental Health Tribunal Report

Date:01/11/18

Patient details

Mr Simon Cordell (11214451)

Date of birth: 26 Jan 1981

Address : 109 Burncroft Avenue, Enfield

Post Code : EN3 7JQ

Circumstances of admission and background

Mr Cordell is a 37 years old man with previous diagnosis of F29X - Unspecified nonorganic psychosis. He has been known to CAMHS service 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 Nr 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 1st 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 account 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 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.

<u>Risk</u>

To self - high

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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 offenders 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 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 9th 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 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 should

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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 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 swear words 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 'l'm gonna do her over' and then 'l'm gonna 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.

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 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

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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

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 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.

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

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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 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

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 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 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

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 you 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 Iyavoo) on 12th

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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

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.

On the 25th of October 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 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 (25/10/18) and that the doctors who saw him today(25/10/18) 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

baby being lost.

He denies having a mental health 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.

When he was seen by ward doctor on the 26th of October 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.

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 29th October 2018 when he was seen by a nurse he was irritable and quite hostile. He was

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on the phone to his relative, complaining about police and claimed to be falsely accused.

On the 29th of October Formulation meeting was held:

<u>Care coordinator 's feedback:</u> This is only the second time meeting Simon. There have been issues with reports he is assaulting other residents in his council accommodation. <u>Nursing report</u>: He appears paranoid on the ward. <u>Interview with patient</u>:

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 (?2 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 then 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 to a police officer. This charge was dropped in the police station and he was referred for a MHA.

Mr Cordell is currently on benefits. He reports the expensive hardware he owns (eg 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 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

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particular neighbours bang on the water pipes, stamps on the floor (this echoes 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 2x 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 2x - 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.

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.

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Opinion and recommendations

 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

Enfield Adult North Locality Team 58-60 Silver Street EN1 3EP

Social Circumstances Report for S.C Rio no 11214451 on Section 2 of the MHA 1983/2007

Date of birth:	26 [™] January 1981
Home address:	109 Burncroft Avenue, Enfield, Middlesex EN3 7JQ
Date of Admission:	26 TH October 2018
Hospital/Ward:	Chase Farm Hospital, Dorset Ward
Care Coordinator :	Soobah Appadoo- Allocated August 2018
Report prepared by:	Soobah Appadoo
Sources of Information:	Electronic Documentation on Rio
Nearest Relative:	Ms Cordell (mother)
Date of this report:	7 th 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 circumstances 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 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 31st August. 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 f...ing will scar you for life". He used foul languages through out this contact. He said that I "can take the f...ing referral and stick it up my a..e". 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 f...ing 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 which Mr Cordell did not attend.

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 16th August 2016 Mr Cordell was admitted to CFH under Section 2 of the MHA. He was discharged on the 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 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 a 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 17th October Mr Cordell was discussed in our MDT meeting. A decision was made to conduct a MHA. A MHA was attempted on the 19th October. Mr Cordell did not cooperate and the assessment did not take place.

On the 23rd October 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 "insufficient recent medical evidence that "he is unable to care for himself".

According to RIO, on the 25th October 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

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doctors who assessed Mr Cordell found him "hypomanic, 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)

<u>Accommodation</u>

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

He claims ESA and needs to make an application for PIP

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Views of family

I telephoned Ms Cordell on the 7th 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 26th October 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 has 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 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".

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

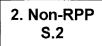
I have met Mr Cordell on two occasions only and I have not had the opportunity to assess him in the community. A rapport needs to be established with him.

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





The First-tier Tribunal (Health, Education and Social Care Chamber) Mental Health

Mental Health Act 1983 (as amended)

The Tribunal Procedure (First-tier Tribunal) (Health, Education and Social Care Chamber) Rules 2008

Case Number: MP/2018/29087 Date of Application: 1.11.2018

Patient: Mr Simon Cordell (born 26.1.1981)

A patient now liable to be detained under Section 2 of the Act

Responsible Authority: BEH Mental Health NHS Trust Hospital: Chase Farm Hospital

<u>Before</u>

Ms K. Hyman (Judge) Dr G. Luyombya (Medical Member) Mrs K. Charlwood (Specialist Lay Member)

Sitting at Chase Farm Hospital on 8th 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.

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 8th 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.

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

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.

<u>Reasons</u>

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 was 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.

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.

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 6.7.2016 and 2.10.2018 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 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. <u>The detention is justified in the interests of the patient's health, safety and the protection of others</u>

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.

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 9.1.2018 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 Date 8th November, 2018

Notice

A person seeking permission to appeal must make a written application to the tribunal for permission to appeal. An application for permission must:

- a. identify the decision of the tribunal to which it relates;
- b. identify the alleged error or errors of law in the decision; and
- c. state 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:

- a. written reasons for the decision;
- b. notification of amended reasons for, or correction of, the decision following a review; or
- c. 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:

a. 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

b. unless the tribunal extends time for the application to be made, a late application cannot be admitted.

Mr Simon Cordell 109 Burncroft Ave Enfield Middlesex EN3 7JQ DOB: 26/01/1981 12/11/2018

RE: Letter of Authority for my mother Miss Lorraine Cordell dated 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: 07807 3335454 Email: <u>lorraine32@blueyonder.co.uk</u> Letter: 23 Byron Terrace, Edmonton, London N9 7DG

Regards

map Mall

Simon Cordell

Mr Simon Paul Cordell 109 Burncroft Ave Enfield Middlesex EN3 7JQ 13/11/2018

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

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: 26/01/1981 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,

- 4. Enfield Adult North Locality Team,
- 5. Any reports from Doctors I have seen Including CPN and nurses
- 6. Any assessments reports I may have had via the mental health, including if any body 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.
- 11. Any emails that have been sent regarding me or received regarding me from any body 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.

07807 333545 (this is my mothers phone number, please also see attached authority letter from me her email address is <u>lorraine32@blueyonder.co.uk</u>)

I have included my ID with this application for my information.

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

maple

Mr Simon Paul Cordell

NIGHTINGALE SURGERY

PAGE 02/05

Nightingale House Surgery NHS Number: 434 096 1671

CORDELL, Simon (Mr.) Date of Birth: 26-Jan-1981

CORDELL, Simon (Mr.)

Date of Birth: 26-Jan-1981 (37y)

Report Path: Local Record

109 Burncroft Avenue, Enfield, Middlesex, EN3 7JQ

NHS Number:	434 096 1671	Home Tel:	
Usual GP:	ABIDOYE, Dapo (Dr.)	Work Tel:	
Patient Type:	Regular	Mobile Tel:	07783158424
Registered	08-Feb-1999	email	

Problems

Active		
09-Dec-2015	[X]Psychosis NOS	
28-Jun-2011	Administration	
13-Jan-2008	Reduction of fracture of mandible	SUMMARY=Y
31-Jul-2005	Fracture of scaphoid	(IL) SUMMARY=Y
13-Jul-2004	Lloyd George culled+summarised	SUMMARY=Y
20-Nov-1997	Fracture of scaphoid	LATERALITY - Left SUMMARY=Y
23-Jun-1997	Overdose of drug	SUMMARY=Y
26-Jan-1981	Asthma	SUMMARY=Y

Significant Past

Medication No current med Allergies No allergies rec Health Status			
04-Feb-2016	Non-smoker		
	of cigarettes -		
07-Nov-2011	O/E - weight	79	kg
07-Nov-2011	O/E - height	177	cm
07-Nov-2011	Body Mass Index	25.21	kg/m2
04-Aug-2005	Notes summary on computer		
05-Feb-1999	Current Drinker	40	units/week
D	(Advised)		
20-Dec-1996	O/E Blood Pressure Reading	110/7	0 mm Hg

Immunisations

19-Sep-2016	Flu vac inv 1st SMS txt msg st
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Planned Events

26-Oct-2018	Named GP not informed
26-Oct-2018	No BP recorded in past 5 years
26-Oct-2018	Mental Health Care Plan Outstanding
26-Oct-2018	Alcohol Consumption recording
26-Oct-2018	Risk Stratification - lifestyle data
26-Oct-2018	Seasonal Flu Vacc recommended
26-Oct-2018	Patient on QOF Registers

Last 3 Consultations

No additional comment entered

CORDELL, Simon (Mr.) Date of Birth: 26-Jan-1981 Nightingale House Surgery NHS Number: 434 096 1671

***************************************	17.0.02067/000200					AND THE OTHER PROPERTY AND THE OTHER
	Comment		D BE SEEN RE LET ESTROYED AS PT		COURT (OF JUNE 2 AME BACK	2018) REQUEST
	Additional	Attachment	Admin Letter Enfield	d Council L	UDMILLA LYAVOO	SOLICTOR
	Additional	Attachment B Scanned docu	Unscheduled Care	PCT Genei	ral	
		e (Latest Value)				
17-Jan-2017	QRISK2 c score	cardiovascular dis	sease 10 year risk	0.86	%	
		Batch Data Mar	agement (Estimate	s used as i	not all input data pre	sent or in range: BMI:
1					5; SBP: 127.7 mm H	
05-May-2016		Risk Calculator		0.09	%	
		Batch Data Mar	agement	0	07	
		te Cancer Risk Cancer Risk		0 0.02	% %	
		ular Cancer Risk		0.02	%	
		ctal Cancer Risk		0.01	%	
	Gastro	-Oesophageal C	ancer Risk	0	%	
	Pancre	eatic Cancer Risk	κ.	0	%	
		Cancer Risk		0	%	
00.0 0040		Tract Cancer Ris		0	%	
30-Sep-2013) - Make a routine	27	nmol/L	
	appointme Vitamin i	D guidelines:				
	Deficien		<20 nmol/L			
	Insuffic		21 - 50 nmol/L			
	Sub-opti		51 - 75 nmol/L			
			76 - 200 nmol/I	J		
		Toxicity:	>250 nmol/L			
30-Sep-2013		sglutarninase IgA	\ lev	1	U/mi	<10.00U/ml
30-Sep-2013		nction test TSH level		0.00	mU/l	0.35 - 5.50mU/l
		free T4 level		0.99 12.7	pmol/l	10.00 - 22.70pmol/l
30-Sep-2013	lgA			3.22	g/i	0.80 - 3.90g/l
30-Sep-2013		lood Chemistry			3	
•		ALT level		22	u/L	10.00 ÷ 37.00u/L
		alculated abbrevi		84	mL/min/1.73sqm	
			should be multip			
			30 consult the R			
			ce,available via amet.It is not a			
			es or extremes			
		C reactive prote		2	mg/l	<6.00mg/l
			sitivity is now	0.2 mg/l		
30-Sep-2013	Liver funct					
		alkaline phospha		68	u/L	40.00 ± 129.00u/L
		total bilirubin lev	ei	15	umol/i	<15.00umol/l
		total protein		77 49	g/l a/l	62.00 - 82.00g/l
30-Sep-2013		albumin electrolytes		48	g/L	35.00 - 50.00g/L
00 00 00 00 00 00 00 00 00 00 00 00 00	-	sodium		138	mmol/I	135.00 - 145.00mmol/l
		potassium		4.6	mmol/L	3.50 - 5.50mmol/L
		urea level		4.5	mmol/l	1.70 - 8.30mmol/l
		creatinine		90	umot/l	42.00 - 102.00umol/l
30-Sep-2013	Erythrocyt	e sedimentation	rate	2	mm/hr	2.00 - 15.00mm/hr

20, 10/ 2018	13:18 02088059994	NIGHTING	ALE SURGERY	
	·		and there are not a statement of the	PAGE 04/05 Nightingale House Surgery
CORDELL, SI				NHS Number: 434 096 1671
Date of Birth:	26-Jan-1981			NUO Mailinén 494 Ago 102 1
30-Sep-2013	I Full blood count - FBC			
	Please note: The units for Hb and	MCHC have o	hanged from c	r/dl to g/I
	in line with national guidelines.			ł
	Haemoglobin estimation	148	g/L	135.00 - 165.00g/L
	Total white blood count	9,1	x10^9/I	4.00 - 11.00x10^9/I
	Platelet count	233	x10^9/I	135.00 - 420.00x10^9/I
	Red blood cell (RBC) count	4.53	x10^12/i	4.50 - 6.00x10^12/I
	Packed cell volume	0.44	1/1	0.40 - 0.521/1
	! Mean corpuscular volume (MCV)	97,7	fl	76.00 - 96.00fl
	! Mean corpusc. haemoglobin(MCH)	32.7	þð	27.00 - 32.00pg
	Mean corpusc, Hb, conc. (MCHC)	335	g/L	315.00 - 365.00g/L
	Neutrophil count	6,1	x10^9/I	2.00 - 7.50x10^9/l
	Percentage result: 67.03%			
	Lymphocyte count	2,2	x10^9/I	1.00 - 4.00x10^9/I
	Percentage result: 24.18%	-		
	Monocyte count	0.6	x10^9/I	0.20 - 1.00x10^9/l
	Percentage result: 6.59%	_		
	Eosinophil count	0.1	x10^9/I	0.04 - 0.40x10^9/l
	Percentage result: 1.10%	. (
	Basophil count	0.1	x10^9/I	0.02 -{0.10x10^9/I
	Percentage result: 1.10%			
07-Nov-2011	O/E - weight	79	kg	
07-Nov-2011	O/E - height	177	çm	
07-Nov-2011	Body Mass Index	25.21	kg/m2	
10-Oct-2011	Serum vitamin D	32	nmol/L	
40.0-4.0044	viewed by: YC	PC	and and to and	45 200 pa/ml
10-Oct-2011	Serum ferritin	66	ng/ml	15 - 300 ng/ml
	viewed by;	4.5		0 46 E . uml
10-Oct-2011	Serum folate	4.5	ug/L	2 - 14.5 ug/L
10-Oct-2011	.viewed by: YC ! Serum vitamin B12	164	nd/l	190 900 ng/L
10-061-2011	viewed by: YC .gp comment: Make Routi		ng/L	190 600 fig/L
10-Oct-2011	Full Blood Count	ne Abboutture	SHIL	
10-00-2011	viewed by;			
10-Oct-2011	Total cholesterol:HDL ratio	3.4	UNKNOWN L	INITS
10-061-2011	viewed by:	0	QIALIOTII	
10-Oct-2011	AST serum level	24	u/L	10 - 37 u/L
10-Oct-2011	lgA	3.22	g/l	0.8 - 3.9 g/l
10 001 2011	viewed by:	• • • • • • • • • • • • • • • • • • • •	3	
10-Oct-2011	Serum glucose level	4.5	mmol/l	3 - 6 mmol/1
	viewed by:			
10-Oct-2011	Serum HDL cholesterol level	1.2	mmol/l	
10-Oct-2011	Serum LDL cholesterol level	2.6	mmol/i	2.5 - 3.9 mmol/l
10-Oct-2011	Serum triglycerides	0.7	mmol/l	
10-Oct-2011	Serum cholesterol	4.1	mmol/l	3.8 - 5.2 mmol/l
10-Oct-2011	Serum inorganic phosphate	0.97	mmol/L	0.8 - 1.4 mmol/L
10-Oct-2011	Serum calcium	2.31	mmol/L	2.1 - 2.6 mmol/L
10-Oct-2011	Corrected serum calcium level	2.26	mmol/L	2.1 - 2.6 mmol/L
10-Oct-2011	Tissu transglutaminase IgA lev	1	U/ml	
	.viewed by: YC PATH LAB RESULTS O	F 10,10.11 G	IVEN ON 2.11.1	1 CH
10-Oct-2011	Serum lipids			
	.viewed by:			
	Serum cholesterol	4.1	mmol/l	3.8 - 5.2 mmol/l
	Serum triglycerides	0.7	mmol/l	
10-Oct-2011	Thyroid function test			
	viewed by: YC			
10-Oct-2011	Bone profile			
- · · ·	viewed by: YC .gp comment: Make Routin	e Appointme		
01-Jun-2009	Cigarette smoker	2	per day	
	(Advised)			
05-Feb-1999	Current Drinker	40	units/week	
	(Advised)			

PAGE 05/05 Nightingale المربية NHS Number: 434 096 1671

CORDELL, Simon (Mr.) Date of Birth: 26-Jan-1981

05-Feb-1999	Non-smoker
20-Dec-1996	O/E Blood Pressure Reading
20-Dec-1996	O/E - blood pressure reading

0 a day 110/70 mm Hg



INSTRUCTIONS FOR USE OF CHART

Notes for Prescriber

- 1. Write clearly in BLOCK CAPITALS using BLACK indelible ink
- Use APPROVED NAME and METRIC UNITS 2.
- Sign your name with FULL signature and date for 3. prescription to be valid 20/09/2006

Discontinue drugs thus: RISPERIDONE 4. and draw a similar line through recording panels



- 5. No prescription should be altered. A new prescription must be written.
- 6. When all sections have been completed, start a new prescription chart and file the completed chart in patient's notes.
- 7. All current prescriptions should be entered on the new chart, so that only one chart is in use.
- 8. Prescriptions are valid for FOUR WEEKS ONLY and MUST BE REWRITTEN BY A VALID PRESCRIBER.
- 9. All prescribers circle administration times. Please see key below:

ADMINISTRATION TIMES			
Morn	(Morning)	8:00a.m – 9:30a.m	
Lunch	(Lunch Time)	12:00p.m – 1:30p.m	
Eve	(Evening)	5:00p.m – 6:30p.m	
Night	(Night Time)	8:00p.m – 10:00p.m	
Blank	Please state other time		

MEDICATION Chart No 4 of

RIO/ NHS	No:	1121445	<u> </u>
Surname	:	CORDELL	
Forenam	e:	SIMON	
M/F:	<u> </u>	DOB: <u>2610</u>	1/1981
	e: 25/10		
Weight:	Height:	Ward: Dorset 1	Change of Ward:
Consulta	116 -	Greenside,	
Bleep / C	ontact No:		

ALLERGIES & ADVERSE REACTIONS

Drug	Reaction Type	Initial/ Date
.⊿ Nil Known	Unknown	Re- dli
		as per two
		+ scr

For Section Patients Only (Please tick if complete)			
Form T2	Attached		
Form T3	Attached		

Notes for Nursing Staff on Administration

- 1. Check entries in every section to avoid omissions.
- 2. Patient identity matches prescription chart.
- 3. A Registered Nurse should initial each administration in the appropriate box.
- 4. In the event of non-administration, record all missed doses and indicate reasons using the appropriate code:

* Clarify in patient's note.	Codes must be circled
Patient away from ward	1
Drug not available*	2
Patient refused drug	3
Drug Omitted*	4
Patient self-medicating	5
Other*	6

	ONCE ONLY AND PREMEDICATION DRUGS									
DATE PRESCRIBED	DRUG	DOSE	ROUTE	SIGNATURE	GIVEN BY	TIME	PHARM.			
							·			

REGULAR DRUGS

NAME:

In the event of non-administration indicate reason using appropriate code: 1 Patient away from ward 2 Drug not available 3 Patient refused drug 4 Drug Omitted 5 Patient self-medicating 6 Other

DATE AND MONTH	\mathbf{i}	15	14	16									
TIME OVODUMN	4	18	4	19									
Drug (approved name and form)	Morn												
Dose Route Frequency Date / ,	Lunch												
2m 0 075 13/1/18	Eve												
Sign and Print Name	Night) 3	3	1									
Pharmacy 213/11													
Drug (approved name and forM)	Morn		Vice e								Sec. 1	- Galagi	
Dose Route Frequency Date	Lunch	्रम् स्ट्रे - सुरस्त											
Dose Roule Frequency Date	Eve	11 s 1		nin series Series de la composition	star kali fi di Voja tradicio								
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REGULAR DRUGS

NAME:

WARD:

In the event of non-administration indicate reason using appropriate code: 1 Patient away from ward 2 Drug not available 3 Patient refused drug 4 Drug Omitted 5 Patient self-medicating 6 Other

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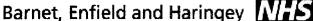
DRUGS TO TAKE HOME (including weekend leave)

Maximum supply – 28 days unless specially requested

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National Early Warning Score 2 (NEWS2) © Royal College of Physicians 2017



Mental Health NHS Trust

A University Teaching Trust

21 Nov 2018

Chong Y NIGHTINGALE HOUSE SURGERY **1 NIGHTINGALE ROAD** EDMONTON LONDON N9 8A.J

Patient Name Mr Simon P CORDELL NHS Number 434 096 1671 RiO Number 11214451 Date of Birth 26 Jan 1981 Admission Date 26 Oct 2018 Discharge Date 15 Nov 2018 Legal Status Section 2 Transferred To GP / CMHT / CRHT

24 Hour Discharge Notification

Inpatient Consultant	Dr Jonathan Greensides	Ward / Hospital	Dorset
Comm. Consultant		Carer's Contact	[Unavailable Data]
Care Coordinator	Soobah Appadoo	Care Co. Contact	

Principal Diagnosis (on Discharge) and ICD10 Code F29X - Unspecified nonorganic psychosis

Other Diagnoses (on Discharge) and ICD10 Codes

Care Cluster

Smoking Status No

Physical Health (including diabetic risk)

Normal physical health examination Normal ECG – NSR HR 88BPM QTc 440ms

Future Management (including actions for GP)

Nil at present

Drug Name	Dose (mg)	Route	Frequency	Duration (weeks)	Prescriber on Discharge
nil				Continuing / New	GP / CRHT
				Continuing / New	GP / CRHT
				Continuing / New	GP / CRHT
				Continuing / New	GP / CRHT
				Continuing / New	GP / CRHT
ALLERGY STA	TUS:				

2 Weeks TTAs supplied, if Crisis Resolution and Home Treatment Team f/u they will manage mental health medications and update GP on discharge

Please follow prescribing guidance on monitoring patients taking antipsychotics including

Admission Summary	 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. 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 8/11/18 which he lost. On 5/11/18, 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 14/11/18; 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 consul
	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.

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):

Barnet Crisis Resolution Home Treatment Team First Floor, Dennis Scott Unit Edgware Community Hospital Burnt Oak Broadway Edgware HA8 0AD	Enfield Crisis Resolution Home Treatment Team Ivy House, Chase Farm Hospital, 127 The Ridgeway, Enfield, EN2 8JL	Haringey Crisis Resolution Home Treatment Team Lea Unit, St Ann's Hospital, St Ann's Road, Tottenham, Haringey, N15 3TH
Tel No: 020 8702 4040	Tel No: 020 8702 3800	Tel No: 020 8702 6700

Doctor: Dr D Choudhury

Position: CT1

Contact No: 02087024670

Cc Patient Cc Community Consultant

NHS Smoking Cessation Services Information: <u>http://www.nhs.uk/smokefree</u>

To evaluate the effectiveness of our communication with GPs we would be grateful for your feedback on you experience. Please complete a short survey using the link below: www.oc-meridian.com/beandhmht/survey/gpsurvey







For information on how we manage your personal data please visit our full processing /privacy notice on our trust website: <u>http://www.beh-mht.nhs.uk/privacy-policy.htm</u> or email: <u>beh-tr_information.government@nhs.net</u>

Barnet, Enfield and Haringey NHS

Mental Health NHS Trust

A University Teaching Trust

NHS Number: 434 096 1671 Hospital Number: 11214451

29 Nov 2018

Private and Confidential to be opened by addressee Mr Simon P CORDELL 109 Burncroft Avenue Enfield Middlesex, EN3 7JQ

Dear Mr Cordell

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



For information on how we manage your personal data please visit our full processing /privacy notice on our trust website: <u>http://www.beh-mit.nhs.uk/privacy-policy.htm</u> or email: <u>beh-or_information.government@nhs.net</u>

58-60 Silver Street Enfield Middlesex EN1 3EP

Tel: 0208 379 4142 Email: 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.rogers1@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

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.

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

We will keep you posted.

ΒW

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); 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); 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 were 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.rogers1@nhs.net

Line Manager: Dr Mehdi Veisi, Clinical Director

Line Manager Contact: 020 8702 6040

Web: www.beh-mht.nhs.uk

From: ROGERS, Tim (BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST)
Sent: 23 November 2018 12:26
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); 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