COPY

Glasgow City Health and Social Care Partnership
Rossdale Resource Centre
12 Haughburn Road
GLASGOW
G53 6AB

www.glasgow.gov.uk
www.nhsggc.org.uk

Private & Confidential

Dr Datta
Dr Datta & Partners
Cardonald Medical Centre
1831 Paisley Road West
Glasgow
G52 3SS

Date 22nd December 2025
Dictated 22nd December 2025
CHI No: 130 865 6505
Our Ref: ST/LC
Enquiries To: 0141 232 4750

Dear Dr Datta

Re: Brenda O'Neill CHI No: 130 865 6505
8 Moulin Circus, Cardonald, Glasgow. G52 3JY.

Many thanks for referring Brenda to Rossdale CMHT. We understand that Brenda sadly lost her son only two weeks ago and she is seeking formal counselling for bereavement.

As you rightly suggested, Cruse Bereavement Support would be the most appropriate service for Brenda at this time. Given her very recent loss, we believe it is important not to medicalise her grief via the CMHT.

Cruse offers an early support service specifically for individuals bereaved within the last six months, which aligns well with Brenda's needs.

Therefore, we will not be accepting this referral at present. Please do not hesitate to contact us if you have any questions about these recommendations, or if Brenda's condition worsens.

Yours sincerely

Dr Su Tin
Principal Clinical Psychologist
On behalf of Rossdale MDT

Patient Details

Chi Number	1308656506
PiMS Number	2237833
Title	Ms.
Forename	Brenda
Surname	O'Neill
Date of Birth	19 Aug 1965
Address1	15 Berryknowes Drive
Address2	Cardonald
Address3	Glasgow
Address4	
Postcode	G52 2DZ

Identifiers

Identifier Type	Identifier	Start Date	End Date
New NHS Number	1308656506	25/06/2012	
Not Specified	2237833	25/06/2012	

Casenote Volumes

No data returned for this view. This might be because the applied filter excludes all data.

Alerts

No data returned for this view. This might be because the applied filter excludes all data.

Referrals

No data returned for this view. This might be because the applied filter excludes all data.

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow

Additional Support Needs:

REFERRAL TO

Rossdale Resource Centre - CMHT Adult
GGC Mental Health

— **Consultant / receiving practitioner** and/or **specialty clinic**

Community Mental Health Team - Adult
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G002G

Email address
-

Urgency of referral	Routine		
Date of referral	17-Dec-2025	**Date sent**	17-Dec-2025

PATIENT DETAILS

Surname	O'Neill
Forename(s)	Brenda
Title	Mrs
Sex	Female
Date of birth	13-Aug-1965
CHI no.	1308656505
Area of Residence	-

Patient's address

8
Moulin Circus
Cardonald Glasgow
G52 3JY

Contact number(s)

Voice: 07469735613

101038551534E

Unique Care Pathway Number: 101038551534E

REGISTERED GP DETAILS

Name	Dr Julia Datta		
GMC code	4761778	GP code	04766
Practice name	Cardonald Medical Centre (18974)		
Practice code	52414		

Practice address

1831
Paisley Road West
Cardonald
Glasgow
G52 3SS

Contact number(s)

Voice: 0141 892 2548
Facsimile: 0141 892 2549

REFERRING GP DETAILS

Name	Dr. Julia Datta		
GMC code	4761778	GP code	04766
Practice name	Drs Datta & Partners (52414)		
Practice code	52414		

Practice address

Cardonald Medical Centre
1831 Paisley Road West
Glasgow
G52 3SS

Contact number(s)

Voice: 0141 892 2548

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Bereavment Reaction

Comment: Dear colleague. This lady has suffered a bereavement in the last few weeks. Her son was homeless and died in a tent. She expresses guilt and remorse and seeks formal counselling. I encouraged her to contact one of the bereavement counselling services. She has strong views about how mental health services should be accessed and strongly pressed me to refer her to yourselves as she believes she needs structured and ongoing support. Homeless son died 2/52 ago. wants referred for formal counselling.

I'd be grateful for your advice.

[redacted]

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Bereavement reaction	-	16-Dec-2025	16-Dec-2025
Autism	- autism spectrum disorder.	06-May-2025	06-May-2025
Cervicalgia - pain in neck	-	11-Oct-2023	11-Oct-2023
Convergent squint	latent	19-Sep-2016	19-Sep-2016
Lumbar disc displacement	disc herniation on MRI	24-Oct-2012	24-Oct-2012
Anxiety states	-	01-Jan-2005	01-Jan-2005
Acquired hypothyroidism	-	01-Jan-2005	01-Jan-2005
Migraine	-	01-Jan-2000	01-Jan-2000

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Breast neoplasm screen normal	10-Jul-2025	10-Jul-2025
BCSP faecal occult blood test normal	25-Mar-2024	25-Mar-2024
Creation of jejunostomy	23-Dec-2014	23-Dec-2014
Cholecystectomy	01-Jan-2003	01-Jan-2003
CT scan brain - normal	01-Jan-2003	01-Jan-2003

Family conditions (All priorities)

Description	Date of Onset
FH: Diabetes mellitus (Father)	05-May-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Ibuprofen Tablets 400 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD	-	27-Jun-2025	10-Dec-2025
Fexofenadine Hydrochloride Tablets 120 mg	60	60 TABLET	ONE TO BE TAKEN EACH DAY IF REQUIRED	-	19-Jul-2022	10-Dec-2025
Levothyroxine Sodium Tablets 25 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	03-Jul-2019	10-Dec-2025
Levothyroxine Sodium Tablets 100 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	27-Apr-2015	10-Dec-2025
Paracetamol Soluble tablets 500 mg	300	300 TABLET	1 or 2 Tabs qid if needed	-	17-Oct-2011	14-Oct-2025

Recent medication (Any medication issued within last 90 days not shown above)

No recent medications recorded

Blood Pressure

Date Recorded	Systolic	Diastolic
26-Feb-2025	128	84
12-Sep-2023	115	77
25-Apr-2022	116	69
18-Mar-2022	128	80
25-Feb-2021	128	78

Body Measurements

Date Recorded	Height	Weight	BMI
26-Feb-2025	161	104	40.12
05-Feb-2025	-	109	-

12-Sep-2023	161	104	-
20-Sep-2022	161	105	-
25-Apr-2022	161	108	41.67

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker :	29 years no alcohol	06-Mar-2024
Ex-cigarette smoker, 40 cigs/day (past):		25-Apr-2022
Ex-cigarette smoker, 30 cigs/day (past):		25-Feb-2021
Never smoked tobacco:		14-Mar-2019
Ex-smoker - amount unknown :	of 20 yrs	06-Dec-2018
Alcohol consumption, 0 units/week:		25-Apr-2022
Alcohol consumption, 0 units/week:		25-Feb-2021
Non-drinker alcohol :	depression and anxiety, has plantar fasciitis attending a chiropodist and the orthotics at hospital. attending live active. off work for a month. having issues with son who has aspergers,- TRUNCATED	05-Jul-2019
Alcohol consumption, 0 units/week:		14-Mar-2019
Non-drinker alcohol :		02-Aug-2017
Aerobic exercise 2 times/week:		25-Apr-2022
Takes inadequate exercise:		25-Feb-2021

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to Aspirin	13-Dec-2011	
Adverse reaction to Fluoxetine Hydrochloride	13-Dec-2011	
Adverse reaction to Sumatriptan Succinate	13-Dec-2011	
Drugs and other substances-adverse effects in theraputic use	22-Nov-2011	
Drugs and other substances-adverse effects in theraputic use	fluoxetine sumatriptan no othe rinfo brought over from gpass	22-Nov-2011
Adverse reaction to aspirin	22-Nov-2011	
Adverse reaction to aspirin	22-Nov-2011	
[X]Fluoxetine adverse reaction	18-Oct-2010	
[V]Personal history of aspirin allergy	18-Oct-2010	
[V]Personal history of drug allergy	ASPIRIN PROZAC sumatriptan priority=2	10-Sep-2010
[X]Fluoxetine adverse reaction	Start Date: 01/01/2008	01-Feb-2008

Additional Support Needs

Aspergers/Autism

Additional relevant information

Risk of Suicide:No
Past history of suicide attempt:No
Risk of deliberate self harm:No
Is patient responsible for children?:No
Risk to others including children/dependents/clinicians/other:No
Risk from others:No
Risk of Self Neglect:No
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Locum
Electronic Attachment Present:No

Social circumstances
Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Glasgow City HSCP
Healthcare Social Care Partnership

Susanne Millar
Chief Officer

Our Ref: AF
Job ID: 531658
Date: 26/05/2023

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Dr JD Datta
Drs Datta & Partners
Cardonald Medical Centre
1831 Paisley Road West
Glasgow
G52 3SS

Department of General Adult Psychiatry
Brand Street Resource Centre
Units G7, G8 & G4
150 Brand Street
Glasgow
G51 1DH
01413038900 EXT:
www.nhsggc.org.uk

Dear Dr Datta

Re: Brenda O'Neill DOB: 13/08/1965 CHI: 1308656505
Address: 15 Berryknowes Drive, Glasgow, G52 2DZ

Thank you for referral of the above lady to our service, the referral was discussed at our MDT screening meeting on the 24th May 2023.

It was delibertaed that Brenda can access psychological therapy through secondary care. She can self refer to Life Link or Wellbeing Scotland and can receive face to face psychological input from them. She does not meet the threshold for psychological input from CMHT at present.

Kindly don't hesitate to re-refer her in the future if her presentation changes, and you think she requires our service.

Yours sincerely

Dr Nida Munawar

NHS Greater Glasgow and Clyde

Glasgow City HSCP
Health and Social Care Partnership

Susanne Millar
Chief Officer

On behalf of the Multidisciplinary Screening Team

Authorised on 30/05/2023 15:48:49 by Junior doc1 Byers.

If phoning or visiting, please ask for Duty.
Telephone 01413038900. Fax 01413038909

NHS Greater Glasgow and Clyde

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Brand Street Resource Centre - CMHT Adult
GGC Mental Health

— **Consultant / receiving practitioner** and/or **specialty clinic**

Community Mental Health Team - Adult
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G002G

Email address
-

Urgency of referral Routine
Date of referral 22-May-2023 **Date sent** 22-May-2023

PATIENT DETAILS

Surname	O'Neill
Forename(s)	Brenda
Title	Mrs
Sex	Female
Date of birth	13-Aug-1965
CHI no.	1308656505
Area of Residence	-

Patient's address

15 Berryknowes Drive
GLASGOW
G52 2DZ

Contact number(s)
Voice: 07469735613

101029654193D Unique Care Pathway Number: 101029654193D

REGISTERED GP DETAILS

Name	Dr Julia Datta		
GMC code	4761778	GP code	04766
Practice name	Cardonald Medical Centre (18974)		
Practice code	52414		

Practice address

1831
Paisley Road West
Cardonald
Glasgow
G52 3SS

Contact number(s)
Voice: 0141 892 2548
Facsimile: 0141 892 2549

REFERRING GP DETAILS

Name	C McCartney		
GMC code	7408805	GP code	-
Practice name	-		
Practice code	52414		

Practice address

Contact number(s)
-

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: request for psychological therapy

Comment: This 57 year old female was assessed by your team last year. Longstanding mental health difficulties with low mood and anxiety. Significant experiences from childhood that are likely the root or significant exacerbators of these issues. She found the two sessions helpful when she attended last year, but felt that there was so much that she didn't have a chance to discuss/work through. She is not wanting to consider medication (ADR to fluoxetine in past and is very reluctant to retry medication - suggestion of duloxetine re-discussed) and had no motivation to engage with online CBT (struggles with technology and finds F2F input more helpful) In view of this I wondered if longer psychological therapy could be arranged for her, as mentioned in the previous review. I do feel she is someone who would engage well with this. Thank you for your time.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Convergent squint	latent	19-Sep-2016	19-Sep-2016
Lumbar disc displacement	disc herniation on MRI	24-Oct-2012	24-Oct-2012
Anxiety states	-	01-Jan-2005	01-Jan-2005
Acquired hypothyroidism	-	01-Jan-2005	01-Jan-2005
Migraine	-	01-Jan-2000	01-Jan-2000

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
Breast neoplasm screen normal	-	11-Mar-2016	11-Mar-2016
Creation of jejunostomy	-	23-Dec-2014	23-Dec-2014
Chest X-ray - routine	normal	01-May-2009	01-May-2009
Cholecystectomy	-	01-Jan-2003	01-Jan-2003
CT scan brain - normal	-	01-Jan-2003	01-Jan-2003

Family conditions (All priorities)

Description	Date of Onset
FH: Diabetes mellitus (Father)	05-May-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Fexofenadine Hydrochloride Tablets 120 mg	60	60 TABLET	ONE TO BE TAKEN EACH DAY IF REQUIRED	-	19-Jul-2022	22-May-2023
Levothyroxine Sodium Tablets 25 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	03-Jul-2019	22-May-2023
Levothyroxine Sodium Tablets 100 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	27-Apr-2015	22-May-2023
Paracetamol Soluble tablets 500 mg	300	300 TABLET	1 or 2 Tabs qid if needed	-	17-Oct-2011	22-May-2023
Rizatriptan Benzoate Wafers (Oral Lyophilisate) Sugar Free 10 mg	6	6 WAFER	1 Tab As directed	-	17-Oct-2011	22-May-2023

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Omeprazole Capsules (Gastro-Resistant) 20 mg	28	28 capsule	ONE TO BE TAKEN EACH DAY	-	29-Mar-2023	29-Mar-2023

Omeprazole Capsules (Gastro-Resistant) 20 mg	28	28 capsule	ONE TO BE TAKEN EACH DAY	-	02-Feb-2023	02-Feb-2023
Hyoscine Butylbromide Tablets 10 mg	112	112 TABLET	TWO TABLETS UP TO THREE TIMES DAILY	-	09-Nov-2022	29-Mar-2023

Blood Pressure

Date Recorded	Systolic	Diastolic
25-Apr-2022	116	69
18-Mar-2022	128	80
25-Feb-2021	128	78
14-Mar-2019	113	64
06-Dec-2018	117	67

Body Measurements

Date Recorded	Height	Weight	BMI
20-Sep-2022	161	105	-
25-Apr-2022	161	108	41.67
25-Feb-2021	162	104	39.63
04-Oct-2019	162	102	38.87
16-May-2019	-	101	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex-cigarette smoker, 40 cigs/day (past):		25-Apr-2022
Ex-cigarette smoker, 30 cigs/day (past):		25-Feb-2021
Never smoked tobacco:		14-Mar-2019
Ex-smoker - amount unknown :	of 20 yrs	06-Dec-2018
Ex-smoker - amount unknown :	of 20yrs.	02-Aug-2017
Alcohol consumption, 0 units/week:		25-Apr-2022
Alcohol consumption, 0 units/week:		25-Feb-2021
Non-drinker alcohol :	depression and anxiety, has plantar fasciitis attending a chiropodist and the orthotics at hospital. attending live active. off work for a month. having issues with son who has aspergers,- TRUNCATED	05-Jul-2019
Alcohol consumption, 0 units/week:		14-Mar-2019
Non-drinker alcohol :		02-Aug-2017
Aerobic exercise 2 times/week:		25-Apr-2022
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Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to Aspirin	13-Dec-2011	
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Drugs and other substances-adverse effects in theraputic use	22-Nov-2011	
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[X]Fluoxetine adverse reaction	18-Oct-2010	
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[V]Personal history of drug allergy	ASPIRIN PROZAC sumatriptan priority=2	10-Sep-2010
[X]Fluoxetine adverse reaction	Start Date: 01/01/2008	01-Feb-2008

Additional Support Needs

No known ASN requirements

Additional relevant information

Risk of Suicide:No
Past history of suicide attempt:Don't Know
Risk of deliberate self harm:No
Is patient responsible for children?:No
Risk to others including children/dependents/clinicians/other:No
Risk from others:No
Risk of Self Neglect:No
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:Yes

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Glasgow City HSCP
Health and Social Care Partnership

Susanne Millar
Chief Officer

Our Ref: WI/mf
Job ID: 405730
Date: 13/06/2022

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Dr JD Datta
Drs Datta & Partners
Cardonald Medical Centre
1831 Paisley Road West
Glasgow
G52 3SS

Mental Health
Brand Street Resource Centre
Units G7, G8 & G4
150 Brand Street
Glasgow
G51 1DH
0141-303-8900 EXT:
www.nhsggc.org.uk

Dear Dr Datta

Re: Brenda O'Neill DOB: 13/08/1965 CHI: 1308656505
Address: 15 Berryknowes Drive, Glasgow, G52 2DZ

Diagnosis: Adverse childhood experiences, anxiety, fibromyalgia
Medication: Consider Duloxetine 60mg for both anxiety and fibromyalgia
Follow up: Discharged from OPC, please refer to Computerised CBT

Thank you for referring this pleasant 56 year old woman who I saw at the psychiatric outpatient clinic on two occasions, first on 13.06.2022 and then on 21.06.2022. In attendance was a Medical Student Anna Flannigan on 13/6/22

You will be aware that Brenda has had various mental health difficulties over the years and was seeking an answer and a definitive diagnosis. She presented a whole raft of symptoms over the years which started with a feeling of strangeness and panic at age 10 which has carried on intermittently through her intervening years. She has sought psychiatric opinion because she feels that things have worsened over the past two years and is looking for a definitive answer. You will be aware she was diagnosed with fibromyalgia 6 years ago and she struggles on a day to day basis. She gave a history of periods when she feels quite energetic and overspends and this usually helps her mood. When there are constraints over her spending she is able not to use her funds. She usually spends with the full knowledge of her partner. This is not in keeping with a manic episode where insight and control is completely lost.

She postulated that she might have bipolar disorder, ASD, depression and anxiety. We had a discussion that perhaps she could have all of these, some of these or none of these and it would take some time to tease out the difficulties to come to a definitive diagnosis.

She described feeling overwhelmed by noise and activity. She found lockdown was a good excuse as she did not have to interact with people. She tells me that she is easily tired and is worried all of the time, does not sleep because of pain and worries about her interactions with people. She finds it difficult to take responsibility at work but realises that she needs to, she says that she needs to keep herself calm by mindfulness and keep her mood flat to prevent over stimulation and the feeling

Glasgow City HSCP
Health and Social Care Partnership

Susanne Millar
Chief Officer

of being overwhelmed. She has not slept well for many years and wakes 3-4 times per night. . The description of her current symptoms certainly is in keeping with an anxious personality, possible emotional instability and someone who has a history of trauma.

There are additional issues currently - she has a son who is a drug addict and at times can disappear for days and weeks on end and their relationship has been difficult over the years

Currently she is in a good relationship in the same sex marriage, her wife [redacted] is aged 50 and is supportive, she also works as a home carer. Most recently Brenda has had to go part-time because of her fibromyalgia.

Personal History

Brenda was born in Dumbarton and grew up in Glasgow having moved around during her childhood. She originally lived in the West End as her mum was a caretaker in a big house near Byres Road and worked in University as well as running a cinema. Her father was also a caretaker. She described a happy childhood has good memories. She had 2 older brothers 2 and 4 years older than her. Age 7 seems to have been a turning point for her, she remembers being taken by 2 girls who were age 14/15 at the time to a strange house and remembers the police breaking into the house with her mum. Thereafter she remembers going to various different houses although she had no bad feelings about this, with hindsight feels that this was somewhat odd, she wondered whether she had been taken to these houses as a respectable front for prostitution. After this incident of being abducted her parents appear to have lost their jobs as caretaker and there was a spiral into poverty, they had to move to Drumchapel and this was a significant change of circumstances for her. She was extensively bullied, her father was assaulted and did not work but was emotionally absent for most of her childhood it appears although her parents stayed together her mother spiralled into alcoholism and there were many parties. She remembers having to work from an early age and being the "main wage earner" at age 11/12. She earned money from babysitting, collecting coupons and washing people's stairs whilst her mum drank away all of the money and did not have any money to pay for electricity or food so Brenda would buy food with the money that she had earned. She wonders why her father never intervened. They were evicted when she was aged 13 and then moved to Govan. Govan this was even rougher than Drumchapel, she remembers little in the way of furniture, food or clothes. She had no friends and she was picked on and bullied because of her circumstances and lack of clothing etc.

At age 14 her mother brought in a lodger who was about 21 and she describes a 3 month period where she was locked in a room with him and coerced into sexual activity and she states that all 4 adults, her mum, dad and her older brothers who were now 16 and 18 were all aware of this but did nothing to stop it. It did finally come to an end when mother walked in on them and threw out the lodger but it was never spoken of again and she reported it to no one. She stated she was quite sexually naïve at the time and felt very isolated and had no one to turn to. It's clear she was severely let down by the adults around her.

I saw Brenda again on 21.06.2022 to complete our assessment and asked how she had felt with regards to the previous session. She stated that she was quite surprised that we had gone into such detail about previous experiences and had not been expecting this and had been quite exhausted afterwards and emotionally drained. I explained that it was necessary to understand her and how she has arrived in her current situation and that previous experiences were really important in getting an understanding of her.

Glasgow City HSCP
Health and Social Care Partnership

Susanne Millar
Chief Officer

It is clear that the experience with the lodger was significant and although she was not doing well at school this was an additional stressors which led to her not attending school and her mother having to go to court as a consequence of her non-attendance. She then started seeing a 20 year old man at age 14 who subsequently became her husband at age 17 when she moved out of the family home. On looking back she feels that she needed to escape the situation with her mum and this was the way she sought to do this. However with hindsight she recognised that this relationship was cohesive and controlling and her husband would stop her from going out and isolated her from her friends. They had 3 children in quick succession, [redacted]. She now recognises when she had her first child at age 18 that she may have suffered from post-natal depression. Because of her previous experiences she feels that she was overly attentive and would not accept any help to look after her children. She felt unable to leave her children with others including her mother and would not allow people into the house although her husband was also of the same mind. She stated that the house and the children were always spotless but she herself was a mess. Her husband did not work until she found him a job as a janitor and when at age 23 Brenda began to branch out to improve her situation, her husband found this difficult and would undermine her attempts to do so. She had tried to leave him on an occasion but he had threatened to take the children away from her. She eventually had a breakdown at age 29, developed suicidal thoughts as she felt trapped. The previous summer her father had also died which was a contributory factor, she was started on Fluoxetine at that time. She eventually started moving out, she was homeless for about a year with 2 of the children, the oldest child [redacted] who was aged 14 at the time lived with his father until he was aged 21 and she had little contact with him.

She met her wife [redacted] when she was aged 30 and [redacted] was aged 23. She developed a relationship with [redacted] towards the end of her marriage and [redacted] did not move in until a year after she separated from her husband. She felt that her husband had sent people to watch her, he would often call social work with regards to the children and he was unpredictable with regards to picking up the children. She worries about not having been a good enough mother and blames herself, especially regards how [redacted] her youngest child turned out. He is now aged 31, has drug problems and all 4 of the children were taken into care. There were issues with him making threats towards her sending her pictures of knives and directly threatening her when she tried to gain access to the children. Their relationship has improved with contact intermittent. She has a better relationship with [redacted] and has a good relationship with his children whom she sees on a regular basis. Her daughter who is in a same sex relationship and has no children is working towards a PHD.

Management

We had a long discussion about Brenda's reasons for attendance here and the questions she has had with regards to diagnosis. I explained that unfortunately there could be no definitive diagnosis but the experiences from her childhood has clearly had a huge impact on her personality development. Its likely that she was already rather an introverted child. It is clear from her history that she had a relatively good childhood until age 7 but the move and change of circumstances at then had a significant impact on the way she viewed the world as being unsafe and dangerous. In addition it is clear that she lacked parental support from a very early age and was left to her own devices and in fact was the main breadwinner from age 11/12. The trauma she experienced from with the lodger further reinforced this view of the world as unsafe and adults around her could not be relied on. The further abusive relationship with her husband also compounded this. Despite these experiences it was also clear that she is a caring, considerate and resilient person having

Glasgow City HSCP
Healthcare Social Care Partnership

Susanne Millar
Chief Officer

taken responsibility for her own life and that of others. Although this caring attitude perhaps is also to her detriment as she is a constant worrier and is self-blaming for when things go wrong.

With regards to diagnosis it is clear that she does have anxiety and periods of depression which she manages quite well and has learned many coping skills but would benefit from perhaps CBT and or medication. We discussed the possibility of Duloxetine which could be helpful for both her fibromyalgic pain as well as anxiety but at the present she is not keen to try this as she wants to try and manage her symptoms. We discussed the possibility of CBT and further education with regards to anxiety and depression and with this in mind she is agreeable to referral for computerised CBT and will look up the Wellbeing Glasgow websites for additional courses if necessary. It may be that if longer term psychological therapy would be warranted in the future should these strategies fail to address the problems and she can be referred back for further assessment

She is aware that in future if she changes her mind about her medication that this can be initiated through her GP. She was extremely grateful for all the help that she has received through the NHS and I do wish her the very best for the future. I have now discharged her back to your care.

Yours sincerely

Dr Wai Lan Imrie
Consultant Psychiatrist

If phoning please ask for Dr Imrie's secretary.
Telephone 0141 303 8900 Fax 0141 303 8909

Authorised on 15/07/2022 13:30:00 by Typist Michelle Fitzpatrick, on behalf of Wai Imrie.

(P) Brenda O'Neill
15 Berryknowes Drive
Glasgow
G52 2DZ

NHS
Greater Glasgow and Clyde
Glasgow

COPY

Ref: WI/mf
CHI: 130 865 6505
Date: 7 June 2022

PRIVATE & CONFIDENTIAL
Mrs Brenda O'Neill
15 Berryknowes Drive
Glasgow
G52 2DZ

Dear Mrs O'Neill

As you will be aware, you have been referred to our service for an outpatient consultation. Arrangements have been made for you to be seen on:

Date:	**13-Jun-2022**
Time:	**1:30pm**
Appointment with:	**Consultant Wai Lan Imrie**
Location:	**Brand Street Resource Centre**
Contact details:	**0141-303-8900**

If you are attending an appointment with a doctor, please note that in some instances you may be seen by a locum Consultant or another member of the medical team.

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made. If applicable, any specific requirements for your attendance will be noted on an enclosed page.

Please note these points before attending your appointment:

- If you have symptoms of COVID 19, you should not attend, but contact us on the above number to rearrange your appointment.
- Patients should only bring one other person to their appointment.
- Patients and anyone accompanying them should wear a mask/ face covering to their appointment unless exempt.
- Please arrive as close to your appointment time as possible and remain in waiting area until called.

Yours sincerely

Team Medical Secretary

COPY

Ref: WI/mf
CHI: 130 865 6505
Date: 23 May 2022

PRIVATE & CONFIDENTIAL
Mrs Brenda O'Neill
15 Berryknowes Drive
Glasgow
G52 2DZ

Dear Mrs O'Neill

As you will be aware, you have been referred to our service for an outpatient consultation. Arrangements have been made for you to be seen on:

Date:	**07-Jun-2022**
Time:	**2:00pm**
Appointment with:	**Consultant Wai Lan Imrie**
Location:	**Brand Street Resource Centre**
Contact details:	**0141-303-8900**

If you are attending an appointment with a doctor, please note that in some instances you may be seen by a locum Consultant or another member of the medical team.

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made. If applicable, any specific requirements for your attendance will be noted on an enclosed page.

Please note these points before attending your appointment:

- If you have symptoms of COVID 19, you should not attend, but contact us on the above number to rearrange your appointment.
- Patients should only bring one other person to their appointment.
- Patients and anyone accompanying them should wear a mask/ face covering to their appointment unless exempt.
- Please arrive as close to your appointment time as possible and remain in waiting area until called.

Yours sincerely

Team Medical Secretary

COPY

Glasgow City HSCP
Health and Social Care Partnership

Chief Officer
David Williams
MA (Hons) CQSW

Glasgow City Health and Social Care Partnership
Leverndale Hospital
510 Crookston Road
Glasgow
G53 7TU

www.glasgow.gov.uk
www.nhsggc.org.uk

DATE: 16/05/2022

LH/HRD

Confidential

Dr K Fiskin
Cardonald Medical Centre
1831 Paisley Road West
Glasgow
G52 3SS

Dear Dr Fiskin

Re: Brenda O'Neill CHI: 1308656505
15 Berryknowes Drive Glasgow G52 2DZ

Thank you for referring the above named patient via SCI Gateway to Rossdale CMHT.

As the patient resides in the locality for Brand Street CMHT, this referral has been forwarded to them.

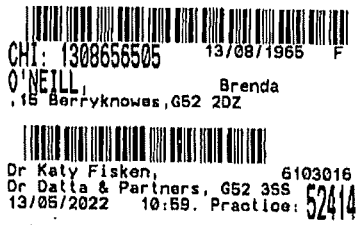
Yours sincerely

Referral Centre
Leverndale Hospital
Mental Health Services
South Glasgow, NHS GGC

COPY

Weird things about me

Pls scan both sides to file



1. Inability to understand social cues.
2. I am tired all the time.
3. The effort it takes to manage my health (including my mental health) is exhausting me even more.
4. Worry about saying the wrong thing. (like really worry, up all night thinking about the smallest detail)
5. Day dreaming.. a lot.
6. Fixations on stuff, obsessive so much that I can't think of anything else.
7. Spending lots of money, resources,time on things, hobbies, ideas.. only to drop them for the next thing. (had to go bankrupt at one point as a result)
8. Total sleep deprivation when fixated, followed by zoning out for days, weeks with no activity at all. **** this is causing more problems to my physical health as I put on lots of weight during these periods of inactivity*****
9. Inability to enjoy a lot of people, have trained myself to zone out when this is required (airports, shops, necessary family events,ect)
10. I don't enjoy hugs from people, it's taken years to feel comfortable with friends awkward hugs, if a person is introduced to me n goes for a hug, it feels like an electric shock.
11. Noise makes me annoyed/ panicky and makes tinnitus worse. Especially lots of people talking,, loud noises can stay with me if startled.
12. Hate bright lights, give me headaches n upsets my anxiety.
13. Anxious if I don't plan ahead, inability to be spontaneous.
14. Rock myself to sleep (have done since I was a baby) shake legs, pick skin on fingers when awake, worse if I'm stressed or engrossed in something.
15. Don't need other people.. I'm happier in my own company.
16. I like only quiet pursuits.
17. People sometimes find it hard to understood me and can misinterpreted what I mean.
18. I don't " get" jokes easily, and cannot take anyone " kidding' with me.
19. I become confused with arguments..
20. My mum said I never liked anyone helping me from a very young age I always pushed people away... still do this, people exhaust me, I'd rather fail 10 times than have someone show me what to do.
21. I require a calm environment and don't like clutter, mess and have to fix it..
22. I find weather patterns difficult.. I can Sense weather changes before they happen.
23. I get exhausted every day, if I have an event to attend, like family stuff, Christmas, holidays, I can take weeks to feel at ease.
24. My jaw is crunchy due to anxiety, (dentist confirmed TMJ) I clench my jaw at night, which may have caused the tinnitus, headaches.
25. Life feels pointless. I feel as if I have to " act" like a person. It does not come naturally for me.
26. I often feel detached from others and the world, like a spectator.
27. I have to force myself to relax after doing " ordinary" things like speaking on the phone, attending an appointment, filling in a form.
28. Detest anything medical, always feel like people are staring at me, not believing me, when put

on the spot, I become unable to answer. It's like I'm moaning, but I'm just explaining. And I detest sympathy.

29. I tend to " feel " more than others. More pain, more overwhelming stuff, so I tend to limit myself for protection.
30. I cannot look at anything surprising like someone falling, hurting themselves , scary things, it gives me a bolt/ jolt.
31. inabilty to say " no" or tell a lie.
32. People can manipulate me very easily, I can become confused.
33. Other people have at times noticed, tutors , coucellors have remarked that I have developed excellent coping techniques to allow myself to get by. These are now to difficult for me to do, since underactive thyroid, fibromyalgia, anxiety and now menopause, all together.. I'm just now so confused and tierd.
34. I've been frightened of pursuing a diagnosis due to feeling that it might reduce or get in the way of my chances of employment, travel or other opportunities.
35. I want to opt out of doing things. The energy required is too much.
36. I'd rather just sit, it's uncomfortable being me.
37. Others remark that i remain like a child and for the most part I agree.. I remain somewhat nieve .I can't take hints or vuage directions. I need direct, cinsice instructions. Which I often carry out to explicit detail..but only if I write it down, I cannot store information, but I cannot forget event's.
38. The mental health worker I had in 2021 said I might have ptsd? Due to sexual abuse when I was 14.
39. Lists work for me.
40. Working on one thing, then seeing something else, starting that, then something else, n before you know it, I'm overwhelmed and achieve no more than getting very tired.
41. I have fought to earn a living, it took me 2-3 times as long to learn something, I had to work earlier n later to make it work,now it's just to difficult, but I still need to earn money or I will loose my home.
42. I can have moments of success and be articulate,then I loose the confidence and can find it hard to explain or do something I know well..
43. I cannot do anything fast, that leaves me with an unsettling feeling.
44. Use routines to keep calm and find it difficult if I have to alter these routines. Changes can make me very anxious.
45. Find it hard to look people in the eye.

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow (Glasgow, v20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Rossdale Resource Centre - CMHT Adult
GGC Mental Health

— **Consultant / receiving practitioner** and/or **specialty clinic**

Community Mental Health Team - Adult
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G002G

Email address
-

Urgency of referral Routine
Date of referral 16-May-2022 **Date sent** 16-May-2022

PATIENT DETAILS

Surname	O'Neill
Forename(s)	Brenda
Title	Mrs
Sex	Female
Date of birth	13-Aug-1965
CHI no.	1308656505
Area of Residence	-

Patient's address

15 Berryknowes Drive
GLASGOW
G52 2DZ

Contact number(s)

Voice: 07469735613

101026337472L Unique Care Pathway Number: 101026337472L

REGISTERED GP DETAILS

Name	Dr Julia Datta		
GMC code	4761778	GP code	04766
Practice name	Cardonald Medical Centre (18974)		
Practice code	52414		

Practice address

1831
Paisley Road West
Cardonald
Glasgow
G52 3SS

Contact number(s)

Voice: 0141 892 2548
Facsimile: 0141 892 2549

REFERRING GP DETAILS

Name	Dr. Katy Fisken		
GMC code	6103016	GP code	01554
Practice name	Drs Datta & Partners (52414)		
Practice code	52414		

Practice address

Cardonald Medical Centre
1831 Paisley Road West
Glasgow
G52 3SS

Contact number(s)

Voice: 0141 892 2548
Facsimile: 0141 892 2549

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Patient requests referral for assessment as below

Comment: Dear Doctor.

I wonder if you would consider seeing this 56 year-old lady. She tells me she has long standing mental health difficulties and presents requesting further assessment of these. She initially wondered if she has autism or ADHD. She presents with a list of symptoms that she feels she has noticed over the years. I have attached her list.

She has a background of childhood trauma with her mother being an alcoholic and her being a victim of childhood sexual abuse. She tells me she has had longstanding symptoms of anxiety but also some difficulties with social communication and attention.

On reviewing her symptoms I found it difficult to see a unifying diagnosis and wondered if you would consider seeing her. She feels her difficulties are impacting her quality of life and she is keen to obtain a diagnosis to allow her to move forward.

Many thanks

Katy Fisken
GP

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Convergent squint	latent	19-Sep-2016	19-Sep-2016
Lumbar disc displacement	disc herniation on MRI	24-Oct-2012	24-Oct-2012
Anxiety states	-	01-Jan-2005	01-Jan-2005
Acquired hypothyroidism	-	01-Jan-2005	01-Jan-2005
Migraine	-	01-Jan-2000	01-Jan-2000

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
Breast neoplasm screen normal	-	11-Mar-2016	11-Mar-2016
Creation of jejunostomy	-	23-Dec-2014	23-Dec-2014
Chest X-ray - routine	normal	01-May-2009	01-May-2009
CT scan brain - normal	-	01-Jan-2003	01-Jan-2003
Cholecystectomy	-	01-Jan-2003	01-Jan-2003

Family conditions (All priorities)

Description	Date of Onset
FH: Diabetes mellitus (Father)	05-May-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Levothyroxine Sodium Tablets 25 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	03-Jul-2019	05-Apr-2022
Levothyroxine Sodium Tablets 100 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	27-Apr-2015	05-Apr-2022
Loratadine Tablets 10 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY IF REQD	-	16-May-2014	05-Apr-2022
Paracetamol Soluble tablets 500 mg	300	300 TABLET	1 or 2 Tabs qid if needed	-	17-Oct-2011	05-Apr-2022

Rizatriptan Benzoate Wafers (Oral Lyophilisate) Sugar Free 10 mg	6	6 WAFER	1 Tab As directed	-	17-Oct-2011	05-Apr-2022

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Chlorphenamine Tablets 4 mg	28	28 TABLET	ONE TO BE TAKEN EVERY FOUR TO SIX HOURS (MAX 6 TABLETS PER 24 HOURS)	-	18-Mar-2022	18-Mar-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
25-Apr-2022	116	69
18-Mar-2022	128	80
25-Feb-2021	128	78
14-Mar-2019	113	64
06-Dec-2018	117	67

Body Measurements

Date Recorded	Height	Weight	BMI
25-Apr-2022	161	108	41.67
25-Feb-2021	162	104	39.63
04-Oct-2019	162	102	38.87
16-May-2019	-	101	-
14-Mar-2019	162	100	38.1

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex-cigarette smoker, 40 cigs/day (past):		25-Apr-2022
Ex-cigarette smoker, 30 cigs/day (past):		25-Feb-2021
Never smoked tobacco:		14-Mar-2019
Ex-smoker - amount unknown :	of 20 yrs	06-Dec-2018
Ex-smoker - amount unknown :	of 20yrs.	02-Aug-2017
Alcohol consumption, 0 units/week:		25-Apr-2022
Alcohol consumption, 0 units/week:		25-Feb-2021
Non-drinker alcohol :	depression and anxiety, has plantar fasciitis attending a chiropodist and the orthotics at hospital. attending live active. off work for a month. having issues with son who has aspergers,- TRUNCATED	05-Jul-2019
Alcohol consumption, 0 units/week:		14-Mar-2019
Non-drinker alcohol :		02-Aug-2017
Aerobic exercise 2 times/week:		25-Apr-2022
Takes inadequate exercise:		25-Feb-2021

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to Aspirin	13-Dec-2011	

Adverse reaction to Fluoxetine Hydrochloride	13-Dec-2011	
Adverse reaction to Sumatriptan Succinate	13-Dec-2011	
Drugs and other substances-adverse effects in theraputic use	22-Nov-2011	
Drugs and other substances-adverse effects in theraputic use	fluoxetine sumatriptan no othe rinfo brought over from gpass	22-Nov-2011
Adverse reaction to aspirin	22-Nov-2011	
Adverse reaction to aspirin	22-Nov-2011	
[X]Fluoxetine adverse reaction	18-Oct-2010	
[V]Personal history of aspirin allergy	18-Oct-2010	
[V]Personal history of drug allergy	ASPIRIN PROZAC sumatriptan priority=2	10-Sep-2010
[X]Fluoxetine adverse reaction	Start Date: 01/01/2008	01-Feb-2008

Additional Support Needs

No known ASN requirements

Additional relevant information

Risk of Suicide:No

Past history of suicide attempt:No

Risk of deliberate self harm:No

Is patient responsible for children?:No

Risk to others including children/dependents/clinicians/other:No

Risk from others:No

Risk of Self Neglect:No

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:Yes

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

COPY

Referral to Staff Mental Health Check In
The Anchor

Date of Referral		28/05/2021						
Name of Patient		Brenda O'Neill						
CHI Number:		1308656505						
Postcode:		G52 2DZ						
Referrer Name		Self-Referral						
Referrer Title								
Consultant								
Speciality	**Psychology**	*	**Psychotherapy**		**OT**		**Mental Health Practitioner**	

REFERRAL TO STAFF MENTAL HEALTH CHECK IN TEAM

Please could a referral be opened on EMIS for this person

Thanks for your help

Brenda O'Neill
13/08/1965
15 Berryknowes Drive
Glasgow
G52 2DZ
Tel: 07469 735613

Health and Social Care Referral

PCM ID:	73290600		
CHI:	1308656505	**Caller :** Self	
Surname:	O'NEILL	**Date/Time Call Received:**	08.04.2021 12:49:53
Forename:	BRENDA	**Date/Time Call Completed:**	08.04.2021 13:18:54
DOB:	13.08.1965		
Gender:	F		
Address:	15 Berryknowes Drive GLASGOW G52 2DZ	**Current Location:**	15 Berryknowes Drive GLASGOW G52 2DZ

Phone Number: 07469735613
Phone Ext.:

CALL SUMMARY:
FINAL ENDPOINT:
Refer to Employee Support Services
REASON FOR CALL / RELEVANT INFORMATION:
HAD MISSED A CALL BACK FOR A GP FROM PROMISES SCOTLAND
COVID NEGATIVE

Confirmed Symptom(s):

#Employer: EAST RENFREWSHIER DISTRICT COUNCAL

#Usual Place of Work: EAST RENFEWSHIRE COUNCIL BULIDING

#Job Title: SW ASSISTENT

#History and Mental state RAG: Amber, What patient says are main problems: PT STATED FEELING LOW IN MOOD AND HAVING ANXIETY AND FEELS SHE IS STRUGGLING WITH HER DAY TO DAY RESPONSIBLITES AND FEELS AT TIMES SHE CAN BE DISCONETED WITH THING AROUND HER NO RISK PRESENT NO THOUGHTS OF HARM TO SELF OR OTHERS, Engagement with services: NOT OPEN TO SERVICES, Medication: NOT TAKING MEDICATION

#Risk of self-harm RAG: Green, Details: NO THOUGHTS OF HARM TO SELF AND NO HX OF THOUGHTS OF HARM TO SELF

#Risk of suicide RAG: Green, Details: NO THOUGHTS OF SUICIDE PRESENT PT STATED HAVING THOUGHTS OF RUNNING AWAY FORM EVERYTHING AROUND 26 YEARS AGO BUT NEVER ACTED ON THE THOUGHTS

#Risk of harm to others RAG: Green, Details: NO THOUGHTS OF HARM TO SELF AND NO HX OF THOUGHTS OF HARM TO SELF

#Adult Protection RAG: Green, Details: NOT DISCUSSED

#Child Protection RAG: Green, Details: NOT DISCUSSED

#Risk from substance misuse RAG: Green, Details: NO DRUG USE
NO ALCOHOL USE

#Social and personal risks RAG: Amber, Support network: FAMILY,GP, Physical health: PT HAS ONGOING PHYSICAL HEALTH ISSUES WITH FIBROMYALGIA AND UNDER ACTIVE THIROD GP AWARE OF THIS AND TREATMENT IS BEING GIVEN, Occupation/activity: WORKS AS SW ASSISTENT
ACTIVITY OK PT TRYS TO BE ACTIVIE IN THE MORNING AS BY THE AFTERNOON THE PAIN IS MORE INTENCE, Housing & finances: NO ISSUES DISCUSSED

#Other issues RAG: Green, Details: NIL

#Overall impression, including risk RAG: Green, Details: PT STATED SHE HAD MISSED THE CALL FOR THE DOCTOR FROM PROMISE SCOTLAND YESTERDAY AND HAS NO WAY OF CALLING THE DOCTOR BACK PT STATED STILL FEELING LOW IN MOOD AND HAVING ANXIETY THAT IS IMPACTING ON HER DAY TO DAY RESPONSIBILITES AND PT STATED SHE AT TIME FEELS DISCONECTED TO THINGS AROUND HER PT STATED NO RISK PRESENT NO THOUGHTS OF HARM TO SELF OR OTHERS AND NO HX OF THOUGHTS OF HARMING SELF OR OTHERS

#Referral to Greater Glasgow & Clyde

#Voicemail can be left if required

#RAG Summary: Red:0 Green:8 Amber:2 Not known:0

#Call reason: Anxiety

Health and Social Care Referral

PCM ID: 73290600
CHI: 1308656505
Surname: O'NEILL
Forename: BRENDA
DOB: 13.08.1965
Gender: F
Address: 15 Berryknowes Drive
GLASGOW
G52 2DZ

Caller : Self
Date/Time Call Received: 29.03.2021 15:04:00
Date/Time Call Completed: 29.03.2021 15:46:02

Current Location: 15 Berryknowes Drive
GLASGOW
G52 2DZ

Phone Number: 07469735613
Phone Ext.:

CALL SUMMARY:
FINAL ENDPOINT:
Refer to Employee Support Services
REASON FOR CALL / RELEVANT INFORMATION:
HEARD ABOUT US FROM THE PROMIS. WEBSITE, LONG-TERM ANXIETY AND DEPRESSION
COVID NO

Confirmed Symptom(s):

#Employer: EAST RENFREWSHIRE COUNCIL

#Usual Place of Work: EAST RENFREWSHIRE HSCP

#Job Title: SOCIAL WORK ASSISSTANT

#History and Mental state RAG: Amber, What patient says are main problems: PT STATED SHE'S LOOKING FOR MH SUPPORT, ONGOING ISSUES THAT HAVE BEEN WORSE OVER THE PAST FEW MONTHS, Engagement with services: GP, Medication: NO CURRENT PRESCRIPTIONS ACCORDING TO PT

#Risk of self-harm RAG: Green, Details: NO THOUGHTS OR PLANS

#Risk of suicide RAG: Green, Details: NO THOUGHTS OR PLANS

#Risk of harm to others RAG: Green, Details: NO THOUGHTS OR PLANS

#Adult Protection RAG: Green, Details: NO

#Child Protection RAG: Green, Details: NO

#Risk from substance misuse RAG: Green, Details: NONE TODAY, NO SUBSTANCE MISUSE ISSUES

#Social and personal risks RAG: Amber, Support network: PT STATED SHE HA SOME SUPPORT FROM FAMILY BUT NO SUPPORT FROM MH PROFESSIONALS, Physical health: NO CURRENT CONCERNS, Occupation/activity: SOCIAL CARE ASSISSTANT, WORKS FULL-TIME, Housing & finances: BY HERSELF CURRENTLY, NO FINANCIAL CONCERNS

#Other issues RAG: Amber, Details: SEASONAL AFFECTIVE DISORDER, ANXIETY, DEPRESSION

#Overall impression, including risk RAG: Amber, Details: PT STATED SHE'S BEEN STRUGGLING WITH HER MH FOR YEARS BUT IT HAS BEEN WORSE SINCE LAST YEAR, NO CURRENT SUICIDAL THOUGHTS

Health and Social Care Referral

OR THOUGHTS OF SELF-HARM BUT OFTEN FEELS OVERWHELMED AND STRUGGLES TO DO HER DAY TO DAY RESPONSIBILITIES, LOT OF RESPONSIBILITIES AT WORK AND ADDITIONAL STRESS DUE TO HER SON'S ADDICTION ISSUES, NO MEDICATION AND PT STATED SHE DOESN'T WANT TO TAKE MH MEDS - HAD A TRAUMATIC ALLERGIC REACTION TO PROZAC BEFORE, ABLE TO KEEP HERSELF SAFE TODAY BUT LOOKING FOR LONG-TERM SUPPORT

#Referral to Greater Glasgow & Clyde

#Voicemail can be left if required

#RAG Summary: Red:0 Green:6 Amber:4 Not known:0

#Call reason: Low mood