

Lanarkshire Forensic Mental Health Service

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CONFIDENTIAL

Dr JJ Canning
Drs Jordan & Canning
Rutherglen Primary Care Centre
130 Stonelaw Road, Rutherglen
Glasgow
G73 2PQ

Date Dictated: 16/01/2024
Date 16/01/2024
Typed:
Our Ref: MMacD/cs
CHI No: 2104673933
Enquiries to: Carole Scott
Direct Line: 01698 456248
Email: forensic.cmht@lanarkshire.scot.nhs.uk

Dear Dr Canning

NAME: Andrew Shaw
D.O.B: 21/04/1967
ADDRESS: Flat 1, 14 Hillhead Avenue, Glasgow, G73 4NJ

LEGAL STATUS – COMPULSION ORDER

I would like to take this opportunity as the Forensic Community Psychiatric Nurse (FCPN), responsible for the care and treatment of the above patient to update you on his current mental health since his discharge from inpatient low secure on 12--06-23. Furthermore, to advise of his discharge from NHS Lanarkshire Forensic CPN services.

As you are aware, Mr Shaw has a diagnosis of Paranoid Schizophrenia, PTSD and Personality difficulties. On discharge he had chosen to move to a tenancy in the Rutherglen area, unfortunately this is out with NHS Lanarkshire Forensic services remit. It was agreed in consultation with Eastvale Resource Centre Mr Shaw's care, would transfer to said team after a period of stability in the community. A period of 6 months joint working was agreed to prepare Mr Shaw for transfer due to trust issues, feelings of rejection.

A CPA meeting was held at Eastvale Resource Centre, present RMO Consultant Psychiatrist Dr McMillan and allocated CPN Michael Breenan. Minutes of this meeting were forwarded accordingly.

Dr McMillan requested we reduce our normal level of contact to monthly allowing the building of a therapeutic relationship with themselves and Mr Shaw with which we concurred. Mr Shaw was in receipt of contact numbers with which to reach Forensic services throughout this time should he require extra support. These appointments were held monthly at East Vale medical centre, with Consultant Psychiatrist Dr McMillan and CPN Michael Breenan present.

During these times Mr Shaw was encouraged to discuss his mental health; signs and symptoms; indicators for relapse and importantly to build a therapeutic relationship with staff. Mr Shaw's prescribed Paliperidone 150mgs depot medication was administered on the day of appointment.

On the whole Mr Shaw has been fully concordant with his medication his mental health is stable, he can report good days and bad days, with ongoing breakthrough symptoms reported. However, having as required medication to utilise alongside encouragement to utilise coping strategies these appear to benefit him. There have been the odd additional telephone calls for some talking support. Mr Shaw has always agreed to Verum testing [DOA] regularly, these results have returned on the main positive for Cocaine. Mr Shaw denied he was using said drug on a regular basis, indeed he reports it would help him sleep, he has been given Harm reduction advice. Dr Steven prescribed Zopiclone as a safer alternative. His risk level is assessed as low.

Due to Mr Shaw's prescribed medication being out with BNF recommendations he is subject to NHS Lanarkshire protocol for High Dose Antipsychotic Monitoring [HDAT] every three months. Last carried out 16-11-23 next due February 2024. At this time Mr Shaw has not attended for ECG as part of protocol. Subsequently he participated in an annual physical health check overseen by Forensic services in November 2023, at this time Mr Shaw's BMI was recorded as 45.1 which places him in the category of morbidly obese. This is something which both myself and Dr Steven often addressed, encouraging healthy eating and some exercise.

Mr Shaw was discharged from my case load on 14-12-23. I wish him well in his recovery.

Please accept my apologies for the lateness of my letter.

Yours sincerely,

Authorised on 17/01/2024 10:43:46 by Maxine MacDougall.

Maxine MacDougall
Forensic CPN

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Consultant Forensic Psychiatrist
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