ID: 506

Male Years
Req. No. :

James Weir
120 389 3450

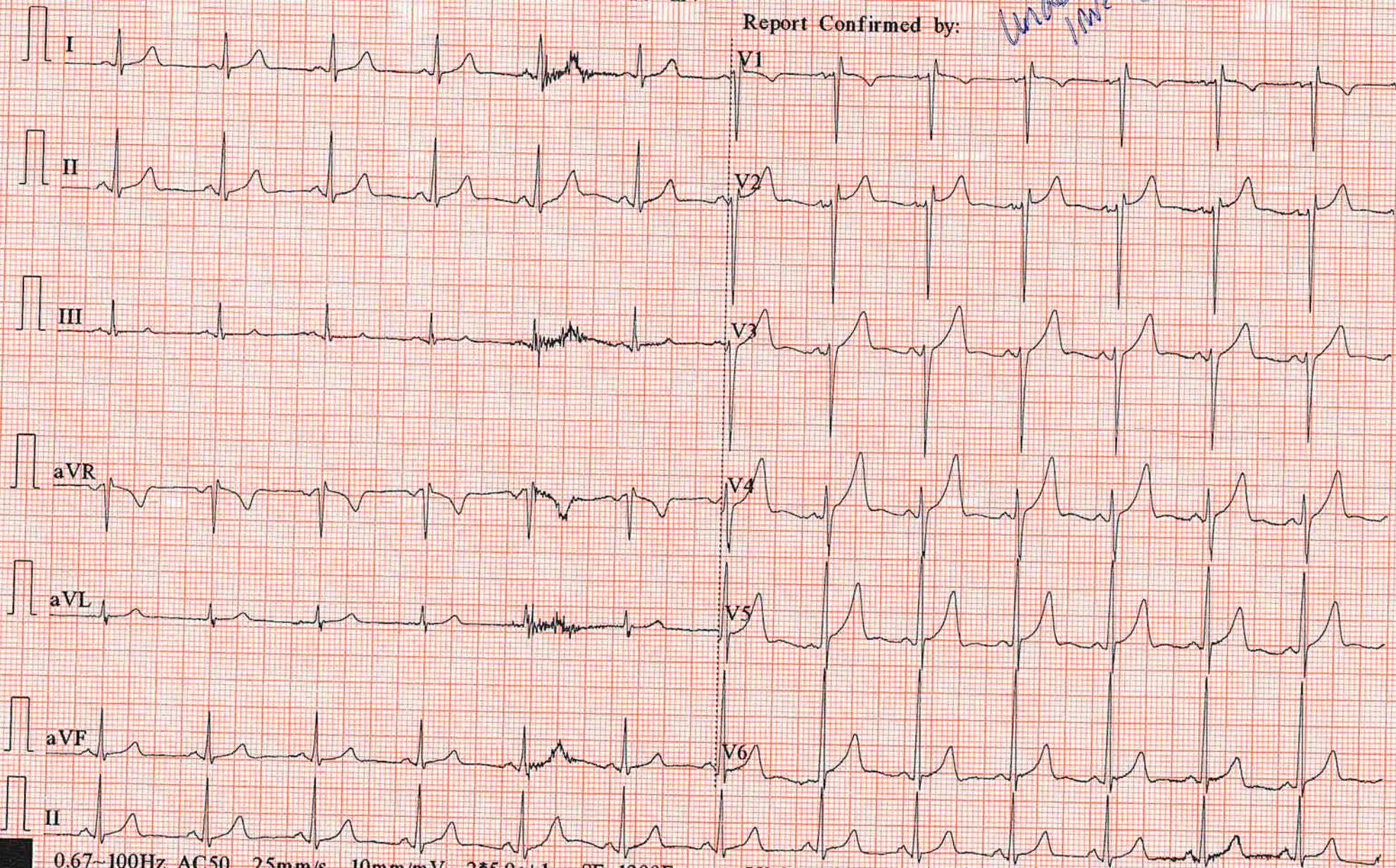
20-05-2026 09:32:54

HR	: 80	bpm
P	: 98	ms
PR	: 110	ms
QRS	: 86	ms
QT/QTcBz	: 368/425	ms
P/QRS/T	: 61/59/44	°
RV5/SV1	: 1.474/1.214	mV

Diagnosis Information:
Sinus rhythm
rSr'(V1) – probable normal variant
Normal ECG

Report Confirmed by:

Dr Umar Nawaz Khan



0.67~100Hz AC50 25mm/s 10mm/mV 2*5.0s+1r SE-1200Express V2.22 Glasgow V28.6.7

MS1-32462

Renfrewshire Health & Social Care Partnership

Ref: MS/KF
CHI: 120 389 3450
Date: 30 April 2026

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**28-Oct-2026**
Time:	**11:30am**
Appointment with:	**Dr Edwards, Specialty Doctor**
Location:	**Charleston Centre, 59 Neilston Road, Paisley PA2 6LY**
Contact details:	**Secretary 0141 849 2217**

As there is a great demand for this service and availability is limited, we would be very grateful if you could telephone us on the number provided above if the appointment is not suitable or you are unable to attend. If we have your mobile number you may receive a text reminder message before your appointment.

Please note that failure to attend this appointment could result in you being discharged back to the care of your GP.

Yours sincerely

Team secretary
On behalf of the ADHD waiting list

Renfrewshire Health & Social Care Partnership

Ref: ECG&BLOODS/DS
CHI: 120 389 3450
Date: 19 May 2026

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

An appointment has been made for you to be seen by the ALCOHOL & DRUG RECOVERY SERVICE as follows:

Date:	**Friday 12th of June 2026**
Time:	**10:20am**
Appointment with:	**BLOODS & ECG CLINIC**
Location:	**ADRS, 8 New Sneddon Street Clinic, Paisley PA3 2AD**
Contact details:	**0300 300 1199 (option 2)**

If this appointment is not suitable, please telephone me on the above number AS SOON AS POSSIBLE so alternative arrangements can be made and this appointment can be offered to someone else on our waiting list.

Yours sincerely,

Medical Secretary

NHS Greater Glasgow and Clyde

MHAU REFERRAL FORM

Referral Date:	14/05/2026	**Time:**	1745
Referral taken by:	r.wilson		
Referrer Name:	Pc Mcdermid	**Contact Number:**	[redacted]
Organisation:	Police	**Shoulder No:**	K662
		Incident No:	2256
Patient Name:	Mr James Weir		
DOB:	12-Mar-1989	**CHI:**	120 389 3450
Address:	Flat D, 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ	**Postcode:**	PA5 8QJ

Is the patient detained under Section 297 of the Mental Health Act?	Yes	☐	No	☐
Mental Health Triage and Risk Assessment Tool Completed (ED only)	Yes	☐	No	☐
Do you wish to receive feedback following the completion of the MHAU assessment? (ED/ GP only)	Yes	☐	No	☐
If delay in responding, has an update been provided?	Yes	☐	No	☐

Mode of transportation to the MHAU:	
Is the patient under arrest?	Yes ☐ No ☐

Presenting Complaint:

Voicing thoughts of killing himself. No fixed plan

Is the patient reported to be intoxicated?	**Yes**	☐	**Comment**	
	No	☐		

Contact Type	**Telephone**	☐	**Face to face**	☐	**Information/ Advice only**	☒	
Allocated Nurse:	Mairijane Mcbrearty				**Time of call back:**	1800	
Time arrived at MHAU/ED:		**Time assessment commenced:**			**Time left MHAU/ED:**		
Completed by:	Mairijane Mcbrearty		**Date:**	14/5/26	**Time:**	1842	

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: HMCK/GW
Job ID: 913788
Date Dictated: 20/03/2026
Date Typed: 26/03/2026

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group
Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Community Mental Health Team
Mile End Mill

12 Seedhill Road
Paisley

PA1 1JS
0141 849 2208 EXT:
www.nhsggc.org.uk

Dear Dr Rehman,

RE: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

CHI No:	**1203893450**	**Date:**	19/03/26.
Surname:	**Weir**	**Date of Birth:**	**12/03/1989**
First Name:	**James**	**Gender:**	**M**
Address & Post Code:	**Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ**		
Phone No:	07342 325713	**Legal Status (MHA, AWI, Guardianship):**	Informal.
Ethnicity:	White.	**Nationality:**	Scottish.

Consent to sharing info:	Yes.
Communication needs:	Reports to struggle with reading and writing and did not wish to list any next of kin.
Next of Kin / Carer contact details:	*Carer contact details listed below:*

Professional contacts summary

Gender Based Violence

1.	**Did staff make a sensitive enquiry on gender based violence?**	YES x NO
2.	**Did the patient disclose any experience of GBV?**	YES x NO
	Brief Details of Disclosure - Childhood sexual abuse? Domestic Abuse? : Disclosed childhood sexual abuse aged 7.	
	Document any action taken: (Has a safe plan been put in place)	
3.	**Does the person meet the 3-point Adult Support & Protection criteria –** *low assessment of risk section*	YES NO x
	a. Has an AP1 been submitted?	YES NO
	b. Is the person already on a plan?	YES NO
4.	**Have any child protection concerns been identified?**	YES NO x
	1. **Has a Notification of Concern been completed to the Child Protection Unit (Tel: 0141 451 6605) and to Renfrewshire Children's Social Work Services (Tel: 0300 300 1199)**	YES NO
5.	**Was there a reason as to why the question was not asked**	
6. If sensitive enquiry to Domestic Abuse or Childhood sexual abuse was not asked what is the recommended follow-up?		

Alerts *(history of violence, offending history)*
Has a conviction for theft.
Reason for referral *(referrer's reason[s] for requesting assessment)*
James was offered an assessment due to being open to the Community Mental Health Team and not having had his mental health reviewed in some time.
Reason for attendance *(Description of individuals main concerns, their perceptions of difficulties and hopes from the service)*
James presented as reasonably well kempt and well presented. Offered normal pitch, tone and pressure of speech. Spontaneous conversation offered without prompt, did not appear to be subjectively or objectively depressed. James overly inclusive at points and struggled to remain focused on the questions at hand, requiring questions to be asked twice at points. James had a tendency to bring the conversation back to his general life dissatisfaction, suicidal ideation and his perceived need for hospital admission. James's information was inconsistent throughout the assessment. Initially stating that he had no support system and then mentioned a supportive friend named Jacqueline. He also mentioned that he is socially isolated, spending no time in the community, and then mentioned that he spends time with groups of friends. James main concern appears to be in the context of emotional dysregulation, describes intense reactions, difficulties managing emotions, active deliberate self-harm in the context of punching walls/doors. James explored concerns with interpersonal relations. Advised that he has found these difficult at present and feels that he is often having 'angry outbursts', at times worrying that he may physically lash out. James feels that he is often triggered by things people say, particularly if he feels his trust for them has been jeopardised. James reports difficulties with ADL's, stated that prior to today he

had 'not showered in two years'. James appeared to eb reasonably well kempt today with clean clothes, nails and hair. Nil evidence to suggest that he is not regularly maintaining his hygiene and appearance. James reports that he had lack of structure, routine and meaningful activity. No longer engages with hobbies. Describes himself as previously enjoying the outdoors. Discussed hypervigilance within the community due to a general mistrust of others. James's main goal was in the context of hospital admission. We explored the reasons why we do not feel that this would be helpful for James at present, i.e. admission will not address his long-term difficulties due to his environmental stressors. Hospital admission would be a difficult environment to be in. Hospital would not eliminate all risks factors and therefore formulating a treatment plan would be much more helpful in the longer term. James disgruntled with this and struggled to mentalise this. James agreed that he would consider options and accept a telephone call from CMHT next week.

Psychiatric history *(previous/ongoing mental health problems, diagnoses and interventions, via GP or mental health services, and their impact; h/o self harm/attempted suicide; previous admission/detentions)*

Previously known to RCMHT.

Medical history *(prior/pre-existing/ongoing physical health problems, diagnoses and interventions and their impact)*

Nil.

Current medication details as given by individual *(prescribed, over-the-counter, complementary, drug allergies)*

Medication	Dose	Frequency	Duration	Response
Mirtazapine.	15mg.	Once daily.		

Allergies:	None known.		
Dispensing frequency:	Monthly.	**Medication concordance:**	Concordant.

Family History *(relationships; h/o MH problems, medical, substance use problems; h/o suicide)*
None known.
Personal History:

Childhood / development / relationships	Born in Paisley. Dad died two years ago. He cannot remember any good parts of his younger life. Cannot remember if his Mum even read him a book. History of childhood trauma, sexual abuse. Stated that his Mum and Gran beta him up a lot due to not being able to control him with his ADHD Symptoms. Enjoyed school but found it difficult to ADHD symptoms.
Childhood trauma / neglect / abuse	
Education / employment	

Adult relationships *Adult trauma / abuse / vulnerability* *Personal strengths / Hopes for the future*	He had good friends in primary, who stayed with him in secondary. Was at Ferguslie then Castlehead. Struggled a bit towards the end, then went to the Kibble two or three times per week. No relationship at present, states 'messed up' due to alcohol and confident he can meet someone in the future. History of adult trauma, describing his life as 'a train wreck'. Sexual abuse for seven years while he was in a childrens home, this information from previous assessment. Today, he also states that a close friend was killed in his close and he saw the body as the Police left, lying there covered for 24 hours.
Current social circumstances:	
Housing *Employment / Employability* *Finances* *Support* *Interests / current activities*	Lives in a council flat, lives alone. Currently unemployed at present. No financial issues, no debt. Has input from ADRS. Has not been engaging in hobbies at present.

Any children/ dependents under the age of 18?

	Child 1	Child 2	Child 3	Child 4
Name				
Age				
Address if different:				
Child protection concerns/agencies				

involved:				

Impact of mental health on parenting and/or potential risk to children:	
N/A	
Description of functioning before current difficulties:	
Always struggled with ADHD and Depression.	
Substance use: *(caffeine, alcohol, tobacco, non-prescribed drugs, novel psychoactive substances)*	
Pattern of current use	Reports being off alcohol for coming up to 17 months.
Impact on individual	N/A
Previous history	
Forensic history: *(charges, fines, convictions, h/o violence)*	
Ten month Prison sentence historically.	
Legal issues: *(driving, capacity, detention, vulnerability, other orders)*	
Nil.	
Individual expectation of service:	
Feels that the only helpful solution would be hospital admission.	
Mental State Examination:	
Appearance	Casually dressed, thin gentleman, bit tearful during appointment.
Behaviour	Good rapport and eye contact.
Mood & Affect	Did not appear to be objectively or subjectively low. Congruent affect.

Speech	Normal in rate, rhythm and tone.
Thought form	Coherent.
Thought content	Suicidal ideation, hopelessness and lack of ambition for the future.
Perceptions	Denied any perceptual abnormalities.
Cognition	Not formally assessed, however no concerns identified.
Insight	Appropriate insight through the purpose of the assessment.

Carers / Next of Kin / others views, concerns and expectations from services
N/A.
Additional notes:

Summary

Name: James Weir	**CHI:** 1203893450
Summary of assessment *(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)*	
Open to RDS, diagnosis of substance misuse and Emotionally Unstable Personality Disorder.	
Overall impression of risk *(CRAFT to be completed separately)*	
James's main focus was on the goal of hospital admission. We explained the reasons why we do not feel this would be helpful for James at present, i.e. admission would not be addressing his long-term difficulties due to environmental stressors. Hospital admission would be difficult environment to be in. Hospital	

would not eliminate all risk factors and therefore formulate a treatment plan. It would be much more helpful in the longer term. James disgruntled with this and struggled to mentalise this. James agreed that he would consider options for telephone call from CMHT next week. James discussed suicidal ideation in the context of 'packing a bag and just walking'. Reports he has been considering how he would write suicide notes for his family. Nil active plan or intent, future focused and has agreed to a safety plan and accepted a telephone call from RCMHT next week. Ongoing deliberate self-harm in the context of punching walls/doors. Carries a weapon at times when in the community for self-protection purposes. Nil plan or intent to utilise this. James aware of legal consequences of this.
Immediate actions *(including information provided)*
Discuss at MDT.
Outcome of MDT discussion/ Treatment plan *(including follow-up arrangements if relevant)*
Plan to offer James a telephone call next week in order to clarify if he would like to be placed on the EUPD pathway.

Primary Diagnosis:	N/A
Any additional diagnoses:	N/A
Suitable for psychological therapies (Y/N):	

Name:	Heather McKechnie	**Designation:**	CPN
Signature:		**Date:**	20/03/26.

Yours sincerely,

Heather McKechnie
CPN

Authorised on 31/03/2026 10:30:58 by Heather McKechnie.

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: HMcK/HM
Job ID: 923760
Date Dictated: 21/04/2026
Date Typed: 23/04/2026

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear James Weir,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Thank you for your engagement within the Renfrewshire Community Mental Health Teams assessment on 31st March 2026. During this time, you advised that your main concerns appeared to be in keeping with emotional dysregulation, intense reactions, difficulties managing emotions, and acts of deliberate self-harm in the context of punching walls and doors. You explored your interpersonal stressors, advising that you often have "angry outbursts", and at times worrying that you may physically lash out.

Your main focus during the assessment was the goal of hospital admission. We explained the reasons why we do not feel this would be helpful for you at this time i.e. admission will not address long-term difficulties, hospital would exacerbate your already existing environmental stressors and therefore, formulating a treatment plan would be much more helpful in the longer term.

We discussed this within our wider multi-disciplinary team who were in agreement with the above, and numerous telephone calls have been extended to you in order to discuss your interests in our treatment pathway for your diagnosed emotional unstable personality disorder. During these calls, you have not felt that this would not be helpful, felt this would not address your difficulties and remained focused on hospital admission. Following further discussion within our multi-disciplinary team, it has been agreed to discharge you from the Renfrewshire Community Mental Health Team until you feel ready for treatment.

Please note that should you feel you have any concerns with your mental health and/or feel ready for treatment, please discuss this with your GP in the first instance. I would like to take this opportunity to wish you well for the future.

Yours sincerely

Heather McKechnie
CPN
Authorised on 23/04/2026 11:36:14 by Heather McKechnie.

(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: AE/AH
Job ID: 100953776
Date Dictated:
Date Typed: 29/04/2026

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Department of General Adult Psychiatry
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
01413144293 EXT: 44293
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Change of Medication Request
Your above named patient was reviewed by telephone/video/face to face assessment.

Urgent (Same Day) ☐ (should be followed by a telephone call)	Routine (available 48 hrs following request) ☒
Action required by GP:	
1) Please increase Methylphenidate MR 72mg mane.	

Please do not hesitate to get in touch on the number above if you need further information.

Yours sincerely,

Dr. Andrew Edwards
Specialty Doctor in Psychiatry

Authorised on 29/04/2026 11:30:22 by Andrew Edwards.

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 28 April 2026

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 30th of June 2026**
Time:	**2:30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

Medical Secretary
Renfrewshire Alcohol and Drug Recovery Service

Billy McClean
Chief Officer

Our Ref: RA/KE
Job ID: 915077
Date: 25/03/2026

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Date of Assessment/Appointment:	24th of March 2026
Type of Assessment:	Face to face review
Diagnosis:	Alcohol Dependance Syndrome - abstinent on aversive medications ADHD Emotionally Unstable Personality Disorder History of trauma with anxiety and depressive symptoms
Current Medication:	Methylphenidate 54mgs MR one tablet daily Acamprosate 666mgs three times a day Folic Acid 5mgs daily Thiamine 50mgs four times a day Olanzapine 17.5mgs daily Promethazine 25mgs x2 at night Mirtazapine 45mgs daily Disulfiram 400mgs twice weekly and 600mgs once weekly, prescribed by the GP and supervised at the local pharmacy
Follow-up:	I will offer James a review in clinic in 3-4 months time if he has not transferred to services in Aberdeen.

Management and Plan	1. James remains under the care of the local community mental health team. 2. James will contact us to let us know of his new living circumstances and GP registration so that we can help to transfer his care.
Discharge	N/A

I reviewed James via telephone consultation on the 24th of March 2026 for the Torley Unit outpatient clinic. As you know I review James from an addictions point of view, and he remains under the care of the community mental health team for his ADHD and personality disorder.

It appears that recently he has been making contact with the CMHT, as well as ourselves at Renfrewshire ADRS and the Torley Unit, usually in a distressed state and voicing suicidal ideation. The services have responded to this appropriately, as well as offering him appropriate care and treatment at these times.

Most recently James contacted the Torley Unit voicing suicidal ideation which ultimately prompted today's review urgently at my clinic.

At the time of my call he was making his way to Aberdeen and was on the bus to meet up with a friend there and to stay with him. He reiterated that he is taking 'his care into his own hands' as no one in Renfrewshire is helping him, and he feels aggrieved by this.

From an addictions point of view he denied any alcohol use for the past couple of years. He reports good compliance with his medications and he denied any recent drug use.

He reiterated that he was heading towards Aberdeen to have a new start as he cannot live in Renfrewshire any more due to previous traumas. As you know from previous correspondence he has spoken to me about moving to other parts of Scotland which included Ayrshire, Glasgow City and Lanarkshire, but this never transpired. He told me that this hasn't been done as he was under the impression that the Renfrewshire services would do something about this on his behalf and that the responsibility lay with ourselves to arrange a move of home for him. He would frequently call services which at times would result in him becoming quite irritable and leading to suicidal thoughts.

Today he gave me an example of his most recent contact with services at the local CMHT and how unhappy he was and that he wanted to complain. I explained how he might do this, but this appeared to have aggravated him more as he is under the impression that he shouldn't need to do this and this is something that lay with our services.

He did not complain to me today of any physical health issues at review, nor was he suicidal at the time of call, and there was no psychotic symptoms that I could illicit. His insight appeared to be intact, but I could sense the frustration that was evident in todays call with me.

In the end I explained that once he arrives and settles in Aberdeen then he should register with a GP, as well as services in Aberdeen, and give us the details of this along with an up to date address so that we can help with a transfer. I assured him that we would send the paperwork for this transfer to occur.

I note that he has left all of his medications, so he may well come back to Renfrewshire in order to get these. For the time being however, it appears that he may well be without his medications for a number of days at least.

I will offer him another appointment provisionally in 3-4 months time, assuming that he is still with us. Of course if the transfer has occurred I will discharge him from the clinic. I will keep you informed of my contact with him.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 26/03/2026 15:46:47 by Raihan Ashraf.

NHS Greater Glasgow and Clyde

MHAU REFERRAL FORM			
Referral Date:	14/03/2026	**Time:**	18.28
Referral taken by:	Andrea		
Referrer Name:	Lisa	**Contact Number:**	[redacted]
Organisation:	SAS	**Shoulder No:**	
		Incident No:	
Patient Name:	Mr James Weir		
DOB:	12-Mar-1989	**CHI:**	120 389 3450
Address:	Flat D, 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ	**Postcode:**	PA5 8QJ

Is the patient detained under Section 297 of the Mental Health Act?	Yes	☐	No	☐
Mental Health Triage and Risk Assessment Tool Completed (ED only)	Yes	☐	No	☐
Do you wish to receive feedback following the completion of the MHAU assessment? (ED/ GP only)	Yes	☐	No	☐
If delay in responding, has an update been provided?	Yes	☐	No	☐

Mode of transportation to the MHAU:	
Is the patient under arrest?	Yes ☐ No ☐
Presenting Complaint:	
Phone saying going to harm himself, no plans, paraniod about neigbour, ADHD, PTSD	

Is the patient reported to be intoxicated?	**Yes**	☐	**Comment**	
	No	☐		

Contact Type	**Telephone**	☐	**Face to face**	☐	**Information/ Advice only**	☐

Allocated Nurse:				**Time of call back:**	
Time arrived at MHAU/ED:		**Time assessment commenced:**		**Time left MHAU/ED:**	
Completed by:			**Date:**	**Time:**	

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: LB
Job ID: 905874
Date Dictated: 02/03/2026
Date Typed: 03/03/2026

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141-849-2248 EXT: 2248
www.nhsggc.org.uk

Dear James Weir,

Thank you for taking my call on the 25th February 2026.

As discussed the most recent plan with your previous CPN was for discharge from the Community Mental Health Team, as there was no ongoing treatment plan, however it was not finalised on our system, therefore I agreed with my Team Lead to call you and to review your mental state in order to complete your discharge.

However, you explained that things have changed recently and that you have new mental health symptom concerns and would like to have the opportunity to discuss this and treatment options. I agreed with yourself and my Team Lead following the call that you would be offered a routine assessment via our assessment clinic and an outcome can be reached about what support may be most beneficial for you at this time. I have added you to our assessment waiting list, and you will receive an appointment in due course for this.

During this time you have access to our Duty Hub if you have concerns relating to your mental health and need support - they can be contact Monday – Friday 9am to 5pm on

0141 849 2200, alternatively you can utilise 1st Crisis – 08002218929 – Monday – Friday 9am – 8pm – Saturday – Sunday 9am – 5pm, and NHS 24 – 11 – 7 days per week. I am aware that you are also open to Alcohol and Drug Recovery Team who you can also access support in needed.

Yours sincerely

Amy Delaney
CPN

Authorised on 05/03/2026 15:03:03 by Amy Delaney.

(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 10 March 2026

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

Please be advised that the appointment scheduled for you with Dr Ashraf on the 24th of March 2026 has been cancelled and rescheduled to the below date and time. Apologies for any inconvenience this may cause.
Please attend on:

Date:	**Tuesday 28th of April 2026**
Time:	**3:00pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

Team Medical Secretary
Renfrewshire Alcohol and Drug Recovery Service

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: LB
Job ID: 895760
Date Dictated:03/02/2026
Date: 03/02/2026

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141-849-2248 EXT: 2248
www.nhsggc.org.uk

Dear James Weir,

As you may be aware your Community Psychiatric Nurse Rebecca Loudon is off work at present.

I would like to make an appointment with you to review your mental health in Rebecca's absence on, to ascertain if you are in need of any future support on -

Date:	**Wednesday 25th February 2026**
Time:	**11am**
Appointment with:	**AMY DELANEY COMMUNITY PSYCHIATRIC NURSE**
Location:	**PHONE CALL**
Contact details:	**Amy Delaney CPN 0141 849 2200**

I may call off of a withheld number, please be aware of this.

If you require any support, or advice prior to this phone call please do not hesitate to call me on the above telephone number.

Yours sincerely

Amy Delaney
CPN

Authorised on 03/02/2026 15:46:14 by Amy Delaney.

(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 10 February 2026

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

We note that you did not attend your last scheduled appointment with Dr Ashraf.
Another appointment has been made for you to be seen as follows:
Please attend on:

Date:	**Tuesday 24th of March 2026**
Time:	**2:30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Renfrewshire Health & Social Care Partnership

Ref: **SMc/DS**
CHI: **120 389 3450**
Date: **13 February 2026**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

A medical review appointment has been made for you to be seen by the **ALCOHOL & DRUG RECOVERY SERVICE** as follows:

Date:	**Friday 27th of March 2026**
Time:	**9:30am**
Appointment with:	**Dr Stephen McLaughlin**
Location:	**ADRS, 20 Back Sneddon Street Clinic, Paisley PA3 2DJ**
Contact details:	**0300 300 1199 (option 2)**

If this appointment is not suitable, please telephone me on the above number AS SOON AS POSSIBLE so alternative arrangements can be made and this appointment can be offered to someone else on our waiting list.

Yours sincerely,

Medical Secretary

Billy McClean
Chief Officer

Our Ref: RA/KE
Job ID: 893128
Date: 28/01/2026

PRIVATE & CONFIDENTIAL

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

I was due to review James at the outpatient clinic at the Torley Unit on the 27th of January 2026.

James did not attend his appointment today, nor had he contacted us to cancel.

On reviewing his notes he has had very poor engagement with our service, despite us trying to contact him via telephone and out reach visits. In this instance I will offer him another appointment at the clinic and will keep you informed of my contact with him.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 28/01/2026 16:05:16 by Raihan Ashraf.

Ref: ECG/Blood Clinic
CHI: 120 389 3450
Date: 17 December 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

As you will be aware, you have been referred to our service for an outpatient consultation appointment the ECG clinic & blood clinic.

Arrangements have been made for you to be seen on:

Date:	**16/1/26**
Time:	**11am**
Appointment with:	**Craig HCSW**
Location:	**ADRS New Sneddon Street Clinic Ground Level**

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.

Yours sincerely

Team Medical Secretary

Billy McClean
Chief Officer

Our Ref: RA/KE
Job ID: 877723
Date: 10/12/2025

PRIVATE & CONFIDENTIAL

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

I was due to review James at the outpatient clinic at the Torley Unit on the 9th of December 2025.

James did not attend his appointment today, nor had he contacted us to cancel.

I note that he has had some telephone contact with the local CMHT, and appears to be recently discharged from the CPN there. I do, however, note that he has an outpatient appointment at the CMHT regarding his ADHD in April 2026.

I will be offering him another appointment in due course and will keep you informed of my contact with him.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 10/12/2025 16:14:36 by Raihan Ashraf.

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 12 December 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

An appointment has been made for you to be seen as follows:

Date:	**Tuesday 27th of January 2026**
Time:	**3:30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Renfrewshire Health & Social Care Partnership

CIRCLE

81 Glasgow Road
Paisley
Renfrewshire
PA1 3PE

Tel: 0300-300-1199 (Option 2 then 4)
Email: ci.circle.recovery@nhs.scot

Private & Confidential
Mr James Weir
Flat D
27 MacDowall Street
Johnstone
PA5 8QJ

Date: **2nd December 2025**

Dear Mr Weir,

I would like to offer an appointment to see you on:

Date: **Thursday 8th January 2026**

Time: **10am**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on **0300 300 1199 (Option 2, Option 4)** to let me know.

Yours sincerely,

Louise Sommerville
Recovery Worker

Renfrewshire Health & Social Care Partnership

CIRCLE

Renfrewshire CIRCLE Recovery Service Referral Form

Please note that we will endeavour to provide assessment and treatment within 21 days of the referral being received.

If you are making a referral from RADRS OR CMHT, for your Service User, could you please complete an updated EMIS CRAFT.

Once complete, please email to ci.circle.recovery@nhs.scot

Client's Personal Details

Title:	Ms	**First Name**	james	**Surname:**	Weir
DOB:	12.03.1989	**CHI No:**	1203893450	**ECLIPSE ID:**	
Home Address:	27 Mcdowall street Johnstone			**Postcode:**	PA5 8QJ
Type of accommodation:	Flat.				
Mobile No:	07388825676	**Home Phone No:**			
Email Address:					
Ethnicity:	White	**Religion**			
Disabilities:	no	**Mobility Issues:**	Yes ☒ No ☐		
Is the client a war veteran?	Yes ☐ No ☒	**Is the client a carer?**	Yes ☐ No ☒		
Is a referral to Advocacy Services required?		Yes ☐ No ☒			
Any concerns relating to violence or aggression?		Yes ☒ No ☐			
If yes, provide further information:	History of violence and agression towards others.				
Next of Kin:	Sister, Debbie Weir	**Telephone No**	[redacted]		

Referrer Details

Name:	Annmarie Boyle	**Relationship to client:**	Social Worker
Contact No:	0300 300 1199 option 2	**Email:**	[redacted]
Service /Organisation name and address.	ADRS		
Is the client aware of this referral	Yes ☒ No ☐	**If no, explain why:**	

Reason for Referral

Type: (tick all that apply)	**Drug** ☐ **Alcohol** ☐ **Both** ☒ **Mental Health** ☐		
Additional information	History of alcohol misuse. Prescribed disulfiram, abstinent now for approx. 1 year.		
Have you discussed recovery options with the	Yes ☒ No ☐	**What does client hope to gain**	Increase social network, provide structure and

client		from service	routine to day and mainatin abstinence.

Recovery	
Please detail any protective factors/ recovery capital: (for example: skills, achievements, hobbies/interests, family/ community supports, positive relationships etc)	Engaging with ADRS, reports close relationship with mum and sister and states to have a number of close friends.
Is there a Recovery Plan in place?	**Yes** ☐ **No** ☐
Expected Recovery Outcomes:	Substance Use ☐ Self-care and nutrition ☒ Relationships ☐ Physical health and wellbeing ☒ Mental and emotional wellbeing ☒ Occupying time and fulfilling goals ☒ Offending ☐ Money matters ☐ Children ☐
Please add any other desired outcomes identified by the client:	

Substance Use			
Substance use: **(Please select all that apply)**	Heroin ☐ Benzodiazepines ☐ Cocaine ☐ Amphetamines ☐ Prescribed Meds ☐ Psychoactive substances ☐ Cannabis ☐ Codeine/over counter medications ☐ Other ☐ *(Specify which type)*		
Additional information **1. Name of substance(s) used** **2. Quantities Used and** **3. How often**			
Administration of use	Injecting ☐ Oral ☐ Smoking ☐ Snorting ☐ Buzzing ☐ Other ☐ *(Specify how it is taken)*		
Medications and doses prescribed for substance use (if applicable):	Historical concerns surrounding self-harm intent and suicide ideation		
Is there a history of overdose?	**Yes** ☒ **No** ☐	**If yes, provide details:**	
Has the client had a BBV or Dry Blood Spot test done?	**Yes** ☐ **No** ☒	**Has the client been given Naloxone?**	**Yes** ☒ **No** ☐
Does the client require condoms/birth control	**Yes** ☐ **No** ☒	**Does the client require needles or foil?**	**Yes** ☐ **No** ☒ *If yes, provide quantity supplied:*

Mental Health			
Is the client open to Mental Health Services?	**Yes** ☒ **No** ☐	**Name of Consultant Psychiatrist:**	
Name of Care Manger	Rebbecca Loudon, CPN.		
Diagnosis (if applicable):	.ADHD.		
Medications prescribed (if applicable):			
Has the client experienced any thoughts of suicide or history of self harm?	**Yes** ☒ **No** ☐	**If yes, provide detail (dates and times):**	No recent thoughts.

	Core 10 Date completed by client	Not at all	Only Occasionally	Sometimes	Often	Most or all of the time
	Over the past week					
1	I have felt tense anxious or nervous		X			
2	I have has someone to turn to for support when needed				X	
3	I have been able to cope when things go wrong		X			
4	Talking to people has felt too much for me		X			
5	I have felt panic or terror	X				
6	I made plans to end my life	X				
7	I have difficulty getting to sleep or staying asleep			X		
8	I have felt despairing of hopeless			X		
9	I have felt unhappy		X			
10	Unwanted images or memories have been distressing me.			X		

Children Protection			
Does the client have any contact with children?	Yes ☐ No ☒		
Name of child /children:		DOB:	
Address:		Postcode:	
Relationship child/children and type of contact			
Is the child/children open to Social Work?	Yes ☐ No ☐	Social Worker Name	
Name of Health Visitor *(if under 5)*		Name of school (if applicable):	

Adult and Public Protection			
Is there adult protection?	Yes ☐ No ☒	Is there child protection?	Yes ☐ No ☒
Is there public protection (MAPA)?	Yes ☐ No ☒	Is the child/children care experienced?	Yes ☐ No ☒
Is the client pregnant?	Yes ☐ No ☒	Is support for domestic violence required?	Yes ☐ No ☒

GP Details			
GP Name and Practice Address:	Dr UH Rehman, Alba medical group, Glasgow, Erskinke clinic, Bargarran Centre, Erskine,	Postcode:	PA8 - 6BS
Telephone (day):		Telephone (night):	
Details of GP prescribed medications and doses:	-		

Other Agencies Involved in Care	
Are there any other agencies involved? (Childrens Services, Home Care, Voluntary Services, Justice Services etc)	Yes ☐ No ☒
If yes, list which services:	

Contact details of each service (if applicable):	
If subject to any orders or legislation(CP, CPO, ASP, AWI etc) Please detail:	

Communication			
Client's preferred initial method of Communication	**Telephone** ☒ **E-Mail** ☐ **Letter** ☐ **Other** ☐ *(Specify)*		
Preferred language:	English		
Interpreter required?	**Yes** ☐ **No** ☒	**Sign language required?**	**Yes** ☐ **No** ☐
Is the client able and willing to use NHS Near Me (Attend Anywhere) as a means of communicating?		**Yes** ☐ **No** ☒	
Does the client have any literacy problems?		**Yes** ☒ **No** ☐	

Please provide any further relevant information about the client here:	Client is illiterate, all communication should be by telphone.

Date	06/11/25
Print Name:	Annmarie Boyle
Signature	A boyle

FOR INTERNAL STAFF USE ONLY	
Worker allocated referral:	
Senior worker responsible for allocating:	
RAG assessment of referral:	**Green** ☐ **Amber** ☐ **Red** ☐
Referral received date:	
Received by:	
Task checklist:	**Daisy completed** ☐ **ECLIPSE updated** ☐ **EMIS updated and referral scanned to documents** ☐

Ref: ECG
CHI: 120 389 3450
Date: 13 November 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

As you will be aware, you have been referred to our service for an outpatient consultation appointment at the ECG clinic.

Arrangements have been made for you to be seen on:

Date:	**28/11/25**
Time:	**12PM**
Appointment with:	**Craig HCSW**
Location:	**ADRS Paisley New Sneddon Street Clinic Ground Level**

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.

Yours sincerely

Team Medical Secretary

PRIVATE & CONFIDENTIAL

Community Mental Health Team
Charleston Centre
49 Neilston Road
Paisley
PA2 6LY

0141 314 4203

DATE AS POSTMARK

James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

Your next ADHD treatment & monitoring appointment will be:

Date: **Wednesday 29th April 2026**

Time: **11am**

Venue: **Charleston Centre, 49 Neilston Road Paisley PA2 6LY**

Clinician: **Dr Edwards, Specialty Doctor**

Please read the important information below.

- **Please contact the above number immediately if this appointment is unsuitable**
- **Due to the high demand of the service, if you do not attend you may not be offered another appointment**

If you have any questions, please contact 0141 314 4292

Yours sincerely

Stacey Campbell
MH Act Administrator
On behalf of the ADHD WLI

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 28 October 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

An appointment has been made for you to be seen as follows:

Date:	**Tuesday 9th of December 2025**
Time:	**3.30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Billy McClean
Chief Officer

Our Ref: JM/RA
Job ID: 845622
Date: 18/09/2025

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Renfrewshire ADRS
20 Back Sneddon Street
Paisley
Renfrewshire

PA3 2DJ
0300 300 1199 EXT: (Option 2)
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Date of Assessment/Appointment:	16.09.2025
Type of Assessment:	Review
Diagnosis:	• Alcohol dependence syndrome, currently abstinent on aversive medications • History of ADHD • Personality disorder • History of trauma with mixed anxiety and depressive symptoms
Current Medication:	• Olanzapine 15mg daily • Folic Acid • Thiamine • Mirtazapine 45mg daily

	• Acamprosate 666mg three times daily • Disulfiram 400mg twice weekly & 600mg once weekly, prescribed by the GP and supervised at local pharmacy • Methylphenidate 54mg daily
Follow-up:	• Review in OPC in 3 months time • Please increase Olanzapine to 17.5mg daily • I would be grateful if he could be reviewed by the Community Mental Health Team (CMHT) regarding his ongoing mental health symptoms.
Management and Plan	• Review in OPC in 3 months time • Please increase Olanzapine to 17.5mg daily • I would be grateful if he could be reviewed by the Community Mental Health Team (CMHT) regarding his ongoing mental health symptoms.
Discharge	No

I reviewed James at the out patient clinic at the Torley Unit on the 16th September 2025. He attended well ahead of time, and was unaccompanied.

James was quite emotional at today's review. He asked me why he was in to see myself sooner, as his main issue has been around his mental health.

I spoke to him about the run-up to today's appointment, and noted his recent presentation and that there was a request from the CMHT to ask if the appointment could be brought forward for review today.

He reports no alcohol or any drug use, apart from some cannabis from time to time. He is compliant with his medications, including his Antabuse, and cannot understand why his mental health has been getting worse of late. He was, generally, disgruntled by the fact that he was here for today's review, and was unhappy about the response from the CMHT, and was asking me why he is not seeing a psychiatrist over there for a full medication review regarding his PTSD symptoms. Although I briefly spoke to him about treatment options with regard to PTSD, including talking therapies, he was quite dismissive of this and says that he does want treatment, but that this should be done by the CMHT and their doctors.

Renfrewshire
Health & Social Care
Partnership

Billy McClean
Chief Officer

As mentioned, he was quite distressed today and began to get tearful as he spoke about continual night terrors, not being able to sleep at night, at times crippling anxiety and palpitations. He believes he needs some help with this, and it's becoming harder and harder to manage, day by day. He also told me that he continues his desire to move home, either to North Ayrshire or Glasgow City to be closer to some friends.

He did not complain of any new physical health illnesses to me today, and as mentioned he appears compliant with his medications.

As you know, he is already on high-dose Mirtazapine, along with his Methylphenidate and had a short course of Diazepam arranged by the CMHT.

I have suggested, in this instance, of slightly increasing his Olanzapine by 2.5mg and, although reluctant to accept this, he said he would try it. He did, however, remain unhappy - citing that he wants further help and will be going to the CMHT for a review. I explained that he does have an appointment with Rebecca (CPN) next week at 11:00am, on the 26th September, and that he also has an appointment with Anne Marie Boyle on the 19th.

I would be grateful for the increase in olanzapine, however I suspect James may not take this. I plan to review him again in 3 months, but I would be grateful if the CMHT continue to review him to help optimise his medications. I will keep you informed of my contact with him.

Yours sincerely

Dr Raihan Ashraf
Speciality Doctor Addictions Psychiatry

Authorised on 24/09/2025 15:18:17 by Raihan Ashraf.

(P) Rebecca Loudon
CPN
Mile End Mill
12 Seedhill Road
PA1 1JS

Renfrewshire Health & Social Care Partnership

Ref: OL
CHI: 120 389 3450
Date: 9 September 2025

Telephone: 0300 300 1199 (Option 2)

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**16-Sep-2025**
Time:	**1:30pm**
Appointment with:	**DR Raihan Ashraf**
Location:	**Back Sneddon centre, 20 Back Sneddon Street, Paisley, PA3 2DJ**
Contact details:	**0300 300 1199 (Option 2)**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely

Team Medical Secretary

Ref: CC ECG
CHI: 120 389 3450
Date: 19 September 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

As you will be aware, you have been referred to our service for an outpatient consultation appointment for ECG.

Arrangements have been made for you to be seen on:

Date:	**10/10/25**
Time:	**11.20AM**
Appointment with:	**Craig HCSW**
Location:	**ADRS Paisley New Sneddon Street Clinic Ground Level**

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.

Yours sincerely

Team Medical Secretary

Renfrewshire
Health & Social Care
Partnership

Ref: **CG/MMcG**
CHI: **120 389 3450**
Date: **8 September 2025**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Friday 19-Sep-2025**
Time:	**10:40am**
Appointment with:	**ADRS BLOOD/ECG CLINIC**
Location:	**8 New Sneddon St Paisley PA3 2AD**
Contact details:	**0300 300 1199 Option 2**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely

Team Medical Secretary

Renfrewshire
Health & Social Care
Partnership

REQUEST TO PRESCRIBE MEDICATION

Torley Unit/ADRS
Dykebar Hospital
Grahamston Road
Paisley, PA2 7DE
Tel: 0141 314 4106

Dear Dr REHMAN Date: 16/9/25

Patient:	**CHI:**
JAMES WEIR	120389 3450

I would be grateful if you could please prescribe:

☐ Urgent (within 48 hours) (*phone practice prior to emailing confirmation)	☑ Routine (Prescription available 48 hours following request)

(1) Increase Olanzapine to 17.5mg nocte.

☑ This medication is in addition to/is an amendment to the patient's current regime.

☐ This medication replaces:

Yours sincerely,

Dr Raihan Ashraf

Speciality Doctor in Addictions Psychiatry

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: RL
Job ID: 100799985
Date Dictated:
Date Typed: 21/08/2025

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200 EXT:
www.nhsggc.org.uk

Dear James Weir,

An appointment has been arranged for you to be seen by your CPN.
Arrangements have been made for you to be seen on:

Date: Friday 29th August 2025
Time: 11am
Appointment with: Rebecca, CPN
Location: Abbey Mill Business Centre, Studio 1001-1011, 12 Seedhill Rd, Paisley, PA1 1JS

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely

Rebecca Loudon
CPN

Authorised on 21/08/2025 15:23:19 by Rebecca Loudon.

(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Renfrewshire Health & Social Care Partnership

Billy McClean
Chief Officer

Our Ref: AT/SC
Job ID: 100805026
Date Dictated:
Date Typed: 29/08/2025

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Department of General Adult Psychiatry
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 487 2837 EXT: 0141487 2837
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Change of Medication Request
Your above named patient was reviewed by telephone/video/face to face assessment.

Urgent (Same Day) ☒ (should be followed by a telephone call)	Routine (available 48 hrs following request) ☐
Action required by GP:	
Please prescribe diazepam 2mg bd for 4 days (8 tablets in total)	

Please do not hesitate to get in touch on the number above if you need further information.

Yours sincerely

Dr Alex Thom
Consultant Psychiatrist

Authorised on 29/08/2025 11:10:07 by Alex Thom.

PRIVATE & CONFIDENTIAL

DATE AS POSTMARK

Community Mental Health Team
Charleston Centre
49 Neilston Road
Paisley
PA2 6LY

0141 314 4203

James Weir
Flat D
27 MacDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

Your next ADHD treatment & monitoring appointment will be:

Date: **Wednesday 29th October 2025**

Time: **2pm**

Venue: **Charleston Centre, 49 Neilston Road Paisley PA2 6LY**

Clinician: **Dr Edwards**

Please read the important information below.

- **Please contact the above number immediately if this appointment is unsuitable**
- **Due to the high demand of the service, if you do not attend you may not be offered another appointment**

If you have any questions, please contact 0141 314 4292

Yours sincerely

Stacey Campbell
MH Act Administrator
On behalf of the ADHD WLI

Ref: RL
CHI: 120 389 3450

Date: 14 July 2025

Strictly Confidential

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

An appointment has been arranged for you to be seen on:-

Date: **Friday 18th July 2025**

Time: **11am**

Service: **Rebecca Loudon, CPN**

Location: **Abbeymill Business Centre, Mile End Mill 12 Seedhill Road Paisley PA1 1JS**

Please report to reception on arrival and they will advise you where to go. Please bring this letter with you.

If this appointment is not suitable, please contact us on the telephone number 0141 849 2200.

As there is a great demand for this service and availability is limited, we would be very grateful if you could telephone us on the number above if the appointment is not suitable or you are unable to attend.

Yours sincerely

Rebecca Loudon,
CPN

Christine Laverty
Chief Officer

Our Ref: RA/KE
Job ID: 810889
Date: 13/06/2025

PRIVATE & CONFIDENTIAL

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Date of Assessment/Appointment:	10th of June 2025
Type of Assessment:	Face to face review
Diagnosis:	Alcohol Dependance Syndrome - currently abstinent on aversive medications History of ADHD Personality Disorder History of trauma with mixed anxiety and depressive symptoms
Current Medication:	Olanzapine 15mgs daily Folic Acid Thiamine Mirtazapine Acamprosate 666mgs three times a day Disulfiram 400mgs twice weekly and 600mgs once weekly - prescribed by the GP and supervised at the local pharmacy Methylphenidate 54mgs daily
Follow-up:	Review in the outpatient clinic in four months time
Management and Plan	1. **No change to medications.**

	2. **James will advise us if he moves out of the area.** 3. **We will help refer him to CIRCLE.**
Discharge	N/A

I reviewed James at the outpatient clinic at the Torley Unit on the 10th of June 2025. He attended on time and was unaccompanied.

James tells me that he has been sober now for 14 months, and he was incredibly proud of this. He continues to have good engagement with his key workers, both from the community mental health team and ourselves. He continues to be compliant with his Antabuse and reports no alcohol or drug use apart from some cannabis use.

Although there was no major concerns regarding his mental health presentation today, he did say that he recently saw his abuser approximately two weeks ago. He said that he was extremely shaken by this and felt that he was 'frozen' when he saw him. Since then, he has had strong cravings for alcohol.

James asked me today whether an increase in Antabuse could be a possibility, however I did not feel that this was needed as I explained how Disulfiram worked. He remains on Acamprosate and I suggested that he spend some time working and keeping himself busy with third sector recovery.

To this end he was keen on being reviewed by CIRCLE and believes that his key worker has already referred him. We will endeavour to chase this up. I have not made any changes to his medications and will plan to review him again in four months time. He has said that he is looking towards moving out of the area and I have informed him to let us know as soon as possible if this is the case in order for us to facilitate a seamless transfer.

I will keep you informed of my contact with him.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 16/06/2025 10:26:45 by Raihan Ashraf.

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: RL
Job ID: 100741031
Date Dictated:
Date Typed: 16/05/2025

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200 EXT:
www.nhsggc.org.uk

Dear James Weir,

A follow-up appointment has been made for you to be seen as follows:

Date: **Friday 30th May 2025**
Time: **11am**
Appointment with: **Rebecca Loudon, CPN**
Location: **Abbey Mill Business Centre, Studio 1001-1011. 12 Seedhill Road Paisley. PA1 1JS**

As there is a great demand for this service and availability is limited, I would be very grateful if you could telephone us 0141 849 2200 if the appointment is not suitable and alternative arrangements can be made.

Yours sincerely

Rebecca Loudon
CPN

Authorised on 16/05/2025 19:57:53 by Rebecca Loudon.

(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Renfrewshire
Health & Social Care
Partnership

REF: RL/JW
CHI: 120 389 350

MR James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear James,

An appointment has been arranged for you to be seen on:

Date: **Friday 16th May 2025**

Time: 11am

Service: Rebecca, CPN

Location: Mile End Mill, 12 Seedhill Road Paisley PA2 6LY

Please report to reception on arrival and they will advise you where to go. Please bring this letter with you.

If this appointment is not suitable, please contact us on the telephone number below.

As there is a great demand for this service and availability is limited, we would be very grateful if you could telephone us on the number below if the appointment is not suitable or you are unable to attend.

Yours Sincerely,

Rebecca Loudon,
CPN
Renfrewshire Community Mental Health Team.

First Crisis 0800 221 8929

(Mon – Fri 0900 – 2000, Sat – Sun 0900 – 1700)

Samaritans 116 123 www.samaritans.org

(24 hours, 7 days a week)

Breathing Space 0800 83 85 87 http://breathingspace.scot/

(Mon – Thurs 1800 – 0200, Fri 1800 – Sun 0600)

NHS 24 111 www.nhs24.com

(24 Hours, 7 Days a week)

Renfrewshire Community Mental Health Team, Abbey Mill Business Centre, Studio 1001-1011, 12 Seedhill Rd, Paisley, PA1 1JS
Telephone: 0141 849 2200, Fax: 0141 618 5830

Renfrewshire Health & Social Care Partnership

REF: RL/JW
Date: 22.04.2025

To Whom It May Concern,

RE: Mr James Weir Address: Flat D 27 MacDowall Street, Johnstone PA5 8QJ.
CHI: 120 389 3450

This is a letter of support in relation to the above named patient who has asked for a letter of support in relation to his application for Adult Disability Payment. James is currently open to Rebecca Loudon, CPN and Annmarie Boyle Alcohol and Drug Recovery Service.

James has a diagnosis of ADHD which was given in childhood as well as significant childhood adversities which had a detrimental impact on his daily life and does experience anxiety and depression. James has experienced significant trauma within his life and requires significant support to manage day to day tasks of daily living. James can struggle to leave his home and can struggle with cooking and cleaning and attending to his personal care needs. James also has experience thoughts to end his life and has made attempts previous to end his life and deliberate self-harm.

I would be grateful if this information could be considered in relation to his application and if further information is required then please do not hesitate to make contact with myself on 0141 849 2200.

Yours Sincerely,

Rebecca Loudon,
CPN
Renfrewshire Community Mental Health Team.

First Crisis 0800 221 8929

(Mon – Fri 0900 – 2000, Sat – Sun 0900 – 1700)

Samaritans 116 123 www.samaritans.org

(24 hours, 7 days a week)

Breathing Space 0800 83 85 87 http://breathingspace.scot/

(Mon – Thurs 1800 – 0200, Fri 1800 – Sun 0600)

NHS 24 111 www.nhs24.com

(24 Hours, 7 Days a week)

Renfrewshire Community Mental Health Team, Abbey Mill Business Centre, Studio 1001-1011, 12 Seedhill Rd, Paisley, PA1 1JS
Telephone: 0141 849 2200, Fax: 0141 618 5830

Renfrewshire Health & Social Care Partnership

REF: RL/JW
Date: 22.04.2025

To Whom It May Concern,

RE: Mr James Weir Address: Flat D 27 MacDowall Street, Johnstone PA5 8QJ.
CHI: 120 389 3450

This is a letter of support in relation to the above named patient who has asked for a letter of support in relation to his Housing Application. James is currently open to Rebecca Loudon, CPN and Annmarie Boyle Alcohol and Drug Recovery Service.

James has a diagnosis of ADHD which was given in childhood as well as significant childhood adversities and trauma which has had a detrimental impact on his daily life and does experience anxiety and depression. James is keen to be rehoused out with his current area of Johnstone due to previous traumatic experiences which have occurred within his current residence and out with the property. Due to his current living situation this has caused a deterioration in his mental state is causing significant anxiety and increased thoughts to harm himself due to flashbacks and night terrors from incidents which have occurred

Due to this, I would be grateful if this information could be considered in relation to his application to be rehoused urgently and if further information is required then please do not hesitate to make contact with myself on 0141 849 2200.

Yours Sincerely,

Rebecca Loudon,
CPN
Renfrewshire Community Mental Health Team.

First Crisis 0800 221 8929

(Mon – Fri 0900 – 2000, Sat – Sun 0900 – 1700)

Samaritans 116 123 www.samaritans.org

(24 hours, 7 days a week)

Breathing Space 0800 83 85 87 http://breathingspace.scot/

(Mon – Thurs 1800 – 0200, Fri 1800 – Sun 0600)

NHS 24 111 www.nhs24.com

(24 Hours, 7 Days a week)

Renfrewshire Community Mental Health Team, Abbey Mill Business Centre, Studio 1001-1011, 12 Seedhill Rd, Paisley, PA1 1JS
Telephone: 0141 849 2200, Fax: 0141 618 5830

PRIVATE & CONFIDENTIAL

Community Mental Health Team
Charleston Centre
49 Neilston Road
Paisley
PA2 6LY

0141 314 4292

2nd April 2025

James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

You last saw Dr Edwards for your ADHD appointment on 26th March 2025.

As one of our ADHD HCP's is leaving the service, the ADHD diary has to be re-arranged and as soon as this is completed we will send you out a return appointment.

Please let us know of any changes of address / telephone number so appointment letter goes to correct address.

Yours sincerely,

Mental Health Act Administrator
Health Records Dept
On behalf of Renfrewshire ADHD WLI

Renfrewshire
Health & Social Care
Partnership

Ref: **RA/KE**
CHI: **120 389 3450**
Date: **29 April 2025**

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

An appointment has been made for you to be seen as follows:

Date:	**Tuesday 10th of June 2025**
Time:	**2.00pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely

K. Edgar

Medical Secretary

Ref: Renfrewshire ADRS
CHI: 120 389 3450
Date: 28 April 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

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:	**2nd May 2025**
Time:	**10:30am**
Appointment with:	**Annmarie Boyle**
Location:	**20 Back Sneddon Street, Paisley, PA3 2DJ**

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.

Yours sincerely

Annmarie Boyle

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: AE/AH
Job ID: 100711347
Date Dictated:
Date Typed: 26/03/2025

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Department of General Adult Psychiatry
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
01413144293 EXT: 44293
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Change of Medication Request
Your above named patient was reviewed by telephone/video/face to face assessment.

Urgent (Within 24 hrs) ☐ (should be followed by a telephone call)	Routine (available 48 hrs following request) ☒
Action required by GP:	
1) Please increase mirtazapine to 45mg nocte.	
2) Please add promethazine 50mg nocte (feel at liberty to reduce to 25mg nocte at patient request)	

3) Please increase Methylphenidate MR to 54mg mane

Please do not hesitate to get in touch on the number above if you need further information.

Yours sincerely,

Dr. Andrew Edwards
Specialty Doctor in Psychiatry

Authorised on 26/03/2025 17:06:39 by Andrew Edwards.

Ref: Renfrewshire ADRS
CHI: 120 389 3450
Date: 1 April 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

Arrangements have been made for you to be seen on:

Date:	**25th April 2025**
Time:	**11am**
Appointment with:	**Annmarie Boyle**
Location:	**ADRS, 20 Back sneddon street, Paisley, PA3 2DJ**

.

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.

Yours sincerely

Annmarie Boyle

Christine Laverty
Chief Officer

Our Ref: RA/BT
Job ID: 774752
Date Dictated: 05/03/2025
Date Typed:

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Alcohol Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

I was due to review James at my outpatient clinic at the Torley Unit on 4th March 2025.

He had spoken to his keyworker earlier today and explained that he was heading to Glasgow, and wanted to cancel today's appointment. This information was emailed over to me by his keyworker, Ann Marie.

I will be offering him another appointment due course, and Annemarie will continue to review him in the community.

I will keep you informed of my contact with him.

Yours sincerely

Dr Raihan Ashraf
Speciality Doctor Addictions Psychiatry

Authorised on 07/03/2025 13:51:46 by Raihan Ashraf.

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 14 February 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

An appointment has been made for you to be seen as follows:

Date:	**Tuesday 4th of March 2025**
Time:	**3.30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Renfrewshire
Health & Social Care
Partnership

Ref: ADRS
CHI: 120 389 3450
Date: 7 January 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

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:	**13th January 2025**
Time:	**11:30am**
Appointment with:	**Annmarie Boyle**
Location:	**20 Back Sneddon Street, Paisley PA3 2DJ.**

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.

Yours sincerely

Team Medical Secretary

Ref: ADRS
CHI: 120 389 3450
Date: 3 February 2025

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

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:	**10th February 25**
Time:	**10:30am**
Appointment with:	**Annmarie Boyle**
Location:	**ADRS**

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.

Yours sincerely

Annmarie Boyle

PRIVATE & CONFIDENTIAL

Community Mental Health Team
Charleston Centre
49 Neilston Road
Paisley
PA2 6LY

0141 314 4203

DATE AS POSTMARK

James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

Following your recent referral from Caroline Young, Nurse Team Lead at Renfrewshire Community Mental Health Services, we are writing to offer you an ADHD Treatment & Monitoring appointment on:

Date: **Wednesday 26th March 2025**

Time: **2pm**

Venue: **Charleston Centre, 49 Neilston Road, Paisley PA2 6LY**

Clinician: **Dr Edwards**

Please read the important information below.

- **Please contact the above number immediately if this appointment is unsuitable**
- **Due to the high demand of the service, if you do not attend you may not be offered another appointment**

If you have any questions, please contact 0141 314 4292.

Yours sincerely

Stacey Campbell
MH Act Administrator
On behalf of the ADHD WLI

Christine Laverty
Chief Officer

Our Ref: CAK
Job ID: 100655071
Date Dictated:
Date Typed: 20/12/2024

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Mental Health
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 849 2200
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

A referral was received by the Renfrewshire CMHT Screening Group and subsequently screened at the meeting of 19th December 2024. Following discussion, it was passed to the ADHD Assessment waiting list.

Please do not hesitate to contact me should you have any queries.

Yours sincerely

Caroline Young
RCMHT Team Lead
For and on behalf of Screening Group

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: RL
Job ID: 100659008
Date Dictated:
Date Typed: 03/01/2025

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200 EXT:
www.nhsggc.org.uk

Dear James Weir,

A follow up appointment has been made for you to be seen as follows:

Date: **Monday 13th January 2025**
Time: **11am**
Appointment with: **Rebecca Loudon, CPN**
Location: **Abbey Mill Business Centre, Studio 1001-1011, 12 Seedhill Rd, Paisley, PA1 1JS**

As there is a great demand for this service and availability is limited, I would be very grateful if you could telephone us 0141 849 2200 if the appointment is not suitable and alternative arrangements can be made.

Yours sincerely

Rebecca Loudon
CPN

Authorised on 03/01/2025 09:53:26 by Rebecca Loudon.

(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:		Time of Assessment:	1

Personal Details			
Surname:	WEIR, James (Mr)	CHI Number:	120 389 3450
Forename:		Relationship Status:	unknown
Dob:	12-Mar-1989 (35y)	Sex:	Male
Age:	35	Referral Urgency:	Non-Urgent
E-Mail Address:		Registered GP :	Alba - Bargarren
Clients Address:	27 Macdowall stress Johnstone	Practice Code:	87358
		Client Telephone No:	07342325713
Post Code:	Pa5 8QJ	Client Mobile No:	

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	SW
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below; **Service** / **Assessment Required** Network Services / Network Service Profile Addictions / DAST/AUDIT Doing Well / PHQ CMHT / GAD7		
Consent to Referral:	Patient is aware of referral		
Brief History/Current Issues/Known Forensic History Risks:	known to services since 2013 history of abuse, labile mood (eupd diagnisis) adhd and addictions input - currently abstinant history of weapons and aggression poor engagment with psychological interventions prev treatment for alcohol addiction		

Reason for Referral: CPN completing autism referal for ax
no on-going role for MHS
requires treatment monitoring for ADHD

Referred By: caroline young
Location: mem
Designation: NTL
Contact Information/Number: 0141 849 2200
Date Referred:

Email to: healthrecords.dykebarhospital@ggc.scot nhs.uk

Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Version 2, Dec 13

Renfrewshire
Health & Social Care
Partnership

Mental Health Services

Renfrewshire Drug Service
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Date: 13/12/2024
Our Ref: RA/KE
Your Ref:
Enquiries: 03003001199
(Option 2)

Strictly Private & Confidential

Rebecca Louden
Community Mental Health Team
Studio 1001 – 1011
Abbeymill Business Centre
12 Seedhill Road
Paisley
PA1 1JS

Dear Rebecca,

RE: James Weir (d.o.b 12/03/89) Flat D, 27 Macdowall Street, Johnstone, PA5 8QJ

You may know that I review James at my outpatient clinic at the Torley Unit regarding his alcohol dependency.

He has a long history of ADHD and I understand is currently being reviewed for autism. He has been prescribed Methylphenidate in the past and he reported that due to supply issues he is unable to get this anymore. He has spoken to me again today at review about alternatives, and I would be grateful if this could be considered by your team and discussed with the consultant team if there are any workable alternatives.

I will continue to review James in my outpatient clinic, but I would be very grateful for your help in this instance.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Specialty Doctor in Addictions Psychiatry

Christine Laverty
Chief Officer

Our Ref: RA/KE
Job ID: 746935
Date: 13/12/2024

PRIVATE & CONFIDENTIAL

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Date of Assessment/Appointment:	10th of December 2024
Type of Assessment:	Face to Face
Diagnosis:	Alcohol Dependance Syndrome - currently abstinent on aversive medications History of ADHD Personality Disorder History of Trauma and Mixed Anxiety and Depression Currently being reviewed for Autism
Current Medication:	Olanzapine 15mgs daily Folic Acid 5mgs daily Thiamine 50mgs four times a day Mirtazapine 30mgs at night Acamprosate 666mgs three times a day Disulfiram 400mgs twice weekly and 600mgs once weekly - prescribed by the GP and supervised at the local pharmacy Methylphenidate Hydrochloride 36mgs MR one tablet daily - Last prescription was generated on the 9th of October 2024 (patient reports that he did not receive this as there is a supply issue)

Christine Laverty
Chief Officer

Follow-up:	Review in the outpatient clinic in three months time
Management and Plan	1. I will write to James's community mental health team worker regarding Methylphenidate. 2. Continue input by Key Worker Ann Marie Boyle in the community.
Discharge	N/A

I reviewed James at the outpatient clinic at the Torley Unit on the 10th of December 2024. He attended unaccompanied.

James was looking rather subdued today and told me that he is struggling with ongoing ADHD symptoms. He reports that he has now been without his medications for a number of months, and although there had been some discussion of alternatives, this has not gone through. He reports that he has spoken to his GP about this again and was advised that he should contact the community mental health team for review of this.

He has been to see his mental health team worker Rebecca and is now being assessed for autism. He is unsure if his ADHD medications (Methylphenidate), has ongoing supply issues, and was wondering if another option can be used.

He reports that his family are noticing a worsening of his symptoms, and he is therefore spending more time on his own and in his own home. He has managed to significantly curtail his cannabis use, and he is no longer drinking alcohol. He remains compliant with his Disulfiram and has been doing well from that point of view. He reports no new physical health issues.

He has missed calls from his key worker Ann Marie from our service and I have suggested that he make contact with her again. He has updated his phone number, and we have taken a note of this.

James's main concern today was his ADHD medications. He seemed quite subdued and downhearted and is worried how his behaviours will be during Christmas and New Year and if he will be able to spend time with family. At the moment he feels he is unable to do this and would just remain at home.

He has made good progress from an alcohol point of view, and therefore I have not made any changes to this. He continues on his Disulfiram and I plan to review him again in approximately three months time to see how he is doing. I will keep you informed of his progress.

Yours sincerely,

R. Ashraf

Christine Laverty
Chief Officer

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 13/12/2024 12:12:49 by Raihan Ashraf.

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 29 November 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 10th of December 2024**
Time:	**2.30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Ref: Renfrewshire ADRS
CHI: 120 389 3450
Date: 3 December 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

Arrangements have been made for you to be seen on:

Date:	**13th December 2024**
Time:	**10am**
Appointment with:	**Annmarie Boyle**
Location:	**20 Back sneddon street, Paisley, PA3 2DJ.**

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.

Yours sincerely
Annmarie Boyle
Social Worker

CIRCLE Discharge Form

To be completed by allocated Recovery Worker and counter-signed by CIRCLE Service Lead

Client Name:	JAMES LEIR	CHI: ECLIPSE ID:	
Date Opened to CIRCLE:	11.04.24	Referred by:	Annemarie Boyle SW ADRS.
Allocated Worker:	CAMRA LYNCH	Co-worker/Service:	

If unallocated give reason:

Is Client open to Psychology/OT? ☐ Yes ☐ No Note: (If yes, case should not be closed to CIRCLE)

Open active referrals at time of proposed closure	Consultation/Action taken with services pre-closure
Children and Families (C&F) ☐	
Criminal Justice ☐	
Occupational Therapy/ Psychology ☐	
CMHT/Mental Health/Crisis Services ☐	
Other Services (Police/Social Work etc) ☐	

Service user has current relationship recorded within ECLIPSE/EMIS with Child/Children: Yes ☐ No ☐ N/A ☐

	Child ECLIPSE ID:	Childs Name:	Open to C&F Service:
Child 1 age:			Yes ☐ No ☐
Child 2 age:			Yes ☐ No ☐
Child 3 age:			Yes ☐ No ☐
Child 4 age:			Yes ☐ No ☐

Details of worker and treatment contact prior to case closure (including issues with regard to child/children):

Reason for Discharge: (as recorded on EMIS and Eclipse by Recovery Worker)		COMMENTS
Recovery plan met	☐	
Volunteering/education/employment	☐	
Referred to more appropriate service/area	☐	
Declined service involvement	☐	
Requested discharge	☒	
No contact despite assertive outreach	☐	
Moved to new local authority	☐	
Prison admission for more than 6 months	☐	
Client has died	☐	

Has Client been referred on to other Team or Service? Yes ☐ No ☒ (Provide details/outcome of referral)

Did CIRCLE make a referral on for child/children Yes ☐ No ☒ (Provide details/outcome of referral)

Sections below to be completed by CIRCLE Service Lead:

Discharge NOT approved by Service Lead(s) for following reasons and recommended action:

Discharge Date Approved by Service Lead(s)	Signature/Name of Service Lead approving discharge
05/11/24	

Has a final observation /consultation – giving reason(s) for discharge been entered by Recovery Worker on:

EMIS Yes ☒ No ☐

ECLIPSE Yes ☒ No ☐

Referrer and Client have been notified of discharge by Recovery Worker by:

Telephone call by Recovery Worker ☐

Discharge Letter ☐ → EMAIL FROM CARE MANAGER AS.

N/A – Client has died ☐

Note: Circle Service Lead to upload the agreed and completed discharge form to EMIS, notify Business Support to close to worker on ECLIPSE and Recovery Coordinator/CIRCLE Lead to be advised to update CIRCLE Client Database.

Linda Higgins

From: [redacted]
Sent: 08 October 2024 15:01
To: MBX-SW BS addictions
Cc: Annmarie Boyle
Subject: James weir

James Weir 120 389 3450

Hello,

I saw this man today.

Can his Naltrexone be discontinued asap. No other changes.

Ann Marie - can you make contact with him and link him in with CMHT again (Rebecca?). He requires review and help with mental state and an alternative for his ADHD medications.

I will follow up in 2 months

(please see EMIS and my letter for details once typed)

Thanks

Raihan

Dr Raihan Ashraf
Specialty Doctor in Addictions Psychiatry
Honorary Clinical Senior Lecturer at University of Glasgow, Medical School
[redacted]
NHS
Greater Glasgow and Clyde

This email is intended for the named recipient only. If you have received it by mistake, please (i) contact the sender by email reply; (ii) delete the email from your system; . and (iii) do not copy the email or disclose its contents to anyone.

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: RL
Job ID: 100609883
Date: 14/10/2024

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200 EXT:
www.nhsggc.org.uk

Dear James Weir,

We are sorry that you did not attend your recent appointment on Thursday 10th October 2024, A further appointment has been arranged for you to be seen on;

Date: **Wednesday 30th October 2024**
Time: **12:30**
Appointment with: **Rebecca Loudon, CPN**
Location: **Abbey Mill Business Centre, Studio 1001-1011, 12 Seedhill Rd, Paisley, PA1 1JS**

As there is a great demand for this service and availability is limited, I would be very grateful if you could telephone us 0141 849 2200 if the appointment is not suitable and alternative arrangements can be made.

Yours sincerely

Rebecca Loudon

CPN
Authorised on 14/10/2024 08:55:14 by Rebecca Loudon.
(D) Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

PRIVATE and CONFIDENTIAL

Date: **22nd October 2024**
Ref: **CIR0602**

Mr James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

STRICTLY PRIVATE AND CONFIDENTIAL

Dear James

We have arranged three separate consultation appointments but unfortunately you have not attended.

I am writing today to offer you one final appointment, and offer you the opportunity to contact the service should you require any further support.

If you do not attend this appointment, we wish you well in your ongoing recovery, and your case will be closed to CIRCLE; however, should you wish to engage or be referred in future please do contact us on 0300 300 1199 option 2 option 4.

I would like to offer an appointment to see you on:

Date: **Tuesday 5th November 2024**

Time: **10.30am**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on: **0300 300 1199 option 2 option 4 or 07890 033163** to let me know.

Yours sincerely

Laura Lynch
Recovery Worker

Christine Laverty
Chief Officer

Renfrewshire Health & Social Care Partnership

Our Ref: RA/KE
Job ID: 721982
Date: 09/10/2024

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Date of Assessment/Appointment:	8th of October 2024
Type of Assessment:	Face to Face
Diagnosis:	Alcohol Dependance Syndrome - currently abstinent on aversive medications History of ADHD Personality Disorder History of Trauma Mixed Anxiety and Depression
Current Medication:	Olanzapine 15mgs daily Folic Acid 5mgs daily Thiamine 50mgs four times a day Mirtazapine 30mgs at night Acamprosate 666mgs three times a day

	Disulfiram 400mgs twice weekly and 600mgs once weekly - prescribed by the GP and supervised at the local pharmacy James also reports that he is on Naltrexone which he takes intermittently, and he was previously on Methylphenidate Hydrochloride 36mgs MR tablets one tablet daily - his last prescription was in August 2024
Follow-up:	Review in the outpatient clinic in two months time
Management and Plan	1. I have advised James to contact his community mental health team nurse Rebecca Louden, for further review of his mental health and management of his ADHD. 2. Naltrexone is to be discontinued. 3. Follow-up by his key worker from RADRS, Annmarie Boyle. 4. James will attend his GP for review of his chest pains
Discharge	N/A

I reviewed James at the outpatient clinic at the Torley Unit on the 8th of October 2024. He attended unaccompanied.

James is a 35 year old gentleman with a history of the above diagnoses. He has been doing very well from an alcohol point of view, having remained abstinent from alcohol for a period of six months now with the help of Antabuse. This is prescribed by his GP, and he attends the pharmacy for this three times a week.

He did not report any drug use apart from cannabis, having last had this two days ago. He is a chronic cannabis user and has been doing so for a number of years. We spoke about various ways of trying to reduce this in the first instance, and I explained to him that it will take a number of months for him to slowly reduce his cannabis use. He seemed to be understanding of this.

On reviewing his notes, it appears that James was referred by his key worker at RADRS to the Intensive Home Treatment Team during the summer of this year. He had been reviewed by Dr Emma Earl as well as members of the IHTT team following suicidal ideation. He reports that he had also been admitted to Dykebar Hospital in the past. He went on to tell me very briefly about having lost his dad and the previous trauma that he had suffered, and became quite tearful about this. He said that he is looking for help with regards to his mental health and that things have been very difficult of late with this, feeling quite emotional which results in agitation and feeling tremulous. He did not report any

major changes in his mood however, and he had a slightly reactive affect today. He did not display any psychotic or delusional content at today's review.

He has a diagnosis of ADHD, and he reports to me that he was reviewed for autism via a screening questionnaire from his CPN. He is quite keen to know the outcome of this, as he believes that he needs help for this in addition to his ADHD. As noted above, he has been prescribed Methylphenidate which was re-started in the Kershaw Unit back in April. It appears that this script continued up until August, until there were supply issues again, and he has now been without Methylphenidate for a number of weeks. This has clearly had a detrimental effect on his mental health and as mentioned today he was looking for some help from this point of view. He reported to me that he is also taking some Naltrexone. This was previously prescribed by ADRS, however we normally do not prescribe Naltrexone and Antabuse at the same time. I have suggested that he discontinue the Naltrexone immediately and stick with his Antabuse. He later told me however that this was an old supply of medications.

With regards to his physical health, he did not report any new changes. He does have a history of pericarditis which was diagnosed a number of years ago. He said that he does not remember much of this time as he was drinking to excess. He also complains of chest pain from time to time and told me that this was quite prominent during the summer. He did get this reviewed with his blood tests coming back as normal. He still reports the odd chest pain from time to time and I have suggested that he make an appointment with his GP to get this reviewed and for further investigations.

He currently lives on his own, however his mum is only a couple of miles away. His sister lives much closer and she sees him on a regular basis.

Mental State Examination

James was a thin gentleman with short dishevelled looking hair who was quite tearful at times throughout today's review. He had a backpack and was holding a can of monster energy drink which he drank a couple of times during the review. There was no smell of alcohol from him, and he had no desire to go drinking. He did not display any psychotic or delusional symptoms and I had no major concerns with regards to his mood, however he is clearly still suffering from the effects of the trauma that he has had in the past, along with being without his ADHD medications. He appeared to be quite emotional at times and reported to me that he doesn't want to be like this. I had no concerns regarding his insight and he did not report any suicidal ideation to me today.

Management

James was quite concerned about receiving appropriate treatment for his mental health. Although I had briefly reviewed him today, which he was grateful for, I have suggested that he make contact with the Renfrewshire Community Mental Health Team and his CPN Rebecca so that she can review him and report back to the appropriate consultant team there. I do wonder if an alternate medication can be used with regards to his ADHD, but I will leave that up to the discretion of the community mental health team.

I have asked James to see his GP regarding his chest pain and I will offer him follow up in two months time in the outpatient clinic. His key worker Annmarie Boyle will continue to review him in the community from an RADRS point of view. I have advised him to stop Naltrexone but to continue with his Antabuse. Many thanks for continuing to prescribe this.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 10/10/2024 12:23:37 by Raihan Ashraf.

PRIVATE and CONFIDENTIAL

Date: **29th August 2024**

Mr James Weir
Flat D, 27 MacDowell Street
Johnstone
PA5 8QJ

Dear James,

I would like to offer an appointment to see you on:

Date: **Thursday, 5th September 2024**

Time: **11:00 am**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on **0300 300 1199 (Option2, Option 4)** to let me know.

Yours sincerely,

Laura Lynch
Recovery Worker

Ref: ADRS
CHI: 120 389 3450
Date: 11 October 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

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:	**Thursday, 17th October 2024**
Time:	**3:30pm**
Appointment with:	**Annmarie Boyle**
Location:	**20 Back sneddon street, Paisley, PA32DJ**

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.

Yours sincerely

Team Medical Secretary

Christine Laverty
Chief Officer

Renfrewshire Health & Social Care Partnership

Our Ref: RA/KE
Job ID: 703729
Date: 21/08/2024

PRIVATE & CONFIDENTIAL

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 314 4106 EXT: 34106
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

I was due to review James at the outpatient clinic at the Torley Unit on the 20th of August 2024.

He did not attend today's appointment, nor had he contacted us to cancel.

I understand that he has been recently reviewed by IHTT.

I will be offering him another appointment in due course and I will keep you informed of my contact with him.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor in Addictions Psychiatry

Authorised on 26/08/2024 12:19:25 by Raihan Ashraf.

Ref: Renfrewshire ADRS
CHI: 120 389 3450
Date: 26 August 2024
Telephone: 0300 300 1199 option 2

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

Arrangements have been made for you to be seen on:

Date:	**30th August 2024**
Time:	**2:30pm**
Appointment with:	**Annmarie Boyle**
Location:	**20 Back sneddon street, Paisley, PA3 2DJ**

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.

Yours sincerely

Team Medical Secretary

Christine Laverty
Chief Officer

Our Ref: LC/SC
Job ID: 692629
Date Dictated: 18/07/2024
Date Typed: 18/07/2024

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 487 2837
www.nhsggc.org.uk

Dear Dr Rehman

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Period of I.H.T.T. Contact: 25.06.24 to 18.07.24

Discharge Diagnosis: Mixed anxiety and depression, ADHD, alcohol dependence currently abstinent, personality disorder and childhood trauma

Medication on Discharge: Olanzapine was increased to 15mgs
No changes made while working with IHTT

Follow-Up Care: Rebecca Loudon, CPN, Renfrewshire CMHT appointment 25.07.24
at 12 noon
Anne Marie Boyle, ADRS
Dr Ashrif, ADRS appointment 20.08.24 at 3pm

You will be aware via previous correspondence James was referred to the Intensive Home Treatment Team following a deterioration in mental state. He was referred via ADRS.

While working with IHTT he was reviewed by Dr Earl who will have sent you detailed correspondence, however her impression was of a 35-year-old man, presenting with mixed anxiety and depressive symptoms in the context of recent sobriety and the need to learn to adapt with helpful coping skills with recent bereavements on the background of childhood trauma and personality disorder.

He has been referred to CMHT Key Worker to take forward anxiety management and mood monitoring and once more stable may benefit from a referral to Psychology for assessment for a trauma informed therapy.

His Olanzapine is currently 15mgs. We did consider reviewing anti-depressant however mood appears to have lifted, therefore there were no changes made ot his anti-depresssant at that time.

While working with the team James has attended for the majority of his appointments and engaged well, feeling that he was keen to move forward with his treatment and engage with longer term support. He feels he just plodding on. He did report that he was experiencing some chest pains and I know that my colleague Dr McAree had written to yourself regarding this. He did have bloods taken today on 18.07.24 by writer to check this. We were not able to get an ECG at this time and he will be referred to the physical health clinic at Dykebar Hospital for an ECG. He appears to be also using energy drinks to a high amount.

Following my consultation with James today and a joint visit with his CPN Rebecca Loudon, he does continue to struggle with mood but was labile throughout appointment. He feels he wants assessments for Autism and bi polar. Rebecca CPN has explained she could start the process of Autism assessment. He did say that his chest pains are settling and are not as bad. He feels reassured that the team are taking him seriously by completing bloods and getting an ECG in due course. He did state he has ongoing suicidal thoughts but no plan or intent and he was future focused in regard to attending college and University to become a nurse. He states he is concordant with his medication. He remains 115 days sober. Writer did not ask him about illicit substances but there was a strong smell of cannabis when bloods were being taken.

At this time James was in agreement for his care and treatment to be transferred over to the Renfrewshire Community Mental Health Team with follow up appointment in place with CPN as noted above. He will have ongoing input from his ADRS Worker Anne Marie Boyle and Dr Ashrif. Therefore James is now discharged from IHTT. Should you require any further information please do not hesitate to contact us on the number above.

Yours sincerely

Linzi Campbell
Senior Intensive Home Treatment Practitioner

Authorised on 18/07/2024 14:25:42 by Linzi Campbell.

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 23 August 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 8th of October 2024**
Time:	**2.30pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: CY/LW
Job ID: 100549176
Date Dictated:
Date Typed: 02/07/2024

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
PA5 8QJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley
PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear Mr Weir

Linzi Campbell, Crisis Practitioner at Renfrewshire IHTT referred you to Renfrewshire Sector Screening Group and this was subsequently screened at the meeting of 1st July 2024.

Following discussion, it was passed to:

Renfrewshire CMHT Nursing Team for CPN Allocation at the above address and telephone no

The above team will be in touch with you in due course regarding an appointment to their services.

Yours sincerely

Caroline Young
Team Lead
For and on behalf of Screening Group

Christine Laverty
Chief Officer

Our Ref: SMcA/SC
Job ID: 100558812
Date Dictated:
Date Typed: 16/07/2024

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Intensive Home Treatment Team
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
0141 487 2837
www.nhsggc.org.uk

Dear Dr Rehman

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

This gentleman remains under the care of IHTT.

I wanted to make you aware that he has recently advised the team of experiencing intermittent chest pain which can also radiate into his arm. We requested that he would seek medical attention and he undertook to do so. Unfortunately, he did not. On Friday 12th July, I actually cold called him at his home to discuss this. He clearly has capacity to understand our concerns and also of the need to seek medical attention. Unfortunately, he has still not taken our advice onboard.

On Friday 12th July it was clear that he didn't wish the visit to be prolonged. Staff did not enter his home. He was speaking in full sentences, alert and did not look distressed. He stated the pain was not present at that time.

He continues to assert that he is abstinent from alcohol- I'm aware that he is prescribed Disulfiram. I believe he is also prescribed methylphenidate and Olanzapine. He appears to be using energy drinks and we brielfy spoke of our concern about how these may be interacting.

This is for information only. I do hope he seeks attention. However, any thoughts or assistance you might be able to offer would be appreciated. It did occur to me that he might accept a clinic appt with one of the GPs if this were possible? If you wished to discuss, I can be reached on the number above.

Urgent (Within 24 hrs) ☒ (should be followed by a telephone call)	Routine (available 48 hrs following request) ☐
Action required by GP:	
Info above.	

Please do not hesitate to get in touch on the number above if you need further information.

Yours sincerely

Sinead McAree
Consultant Psychiatrist

Authorised on 16/07/2024 16:36:24 by Sinead McAree.

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 9 July 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 20th of August 2024**
Time:	**3.00pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Mental Health Directorate, Renfrewshire Alcohol & Drug Recovery Service,
20 Back Sneddon Street, Paisley, PA3 2DJ
Telephone: 0300 300 1199

Christine Laverty
Chief Officer

Our Ref: CY / CAK
Job ID: 100548991
Date Dictated:
Date Typed: 02/07/2024

PRIVATE & CONFIDENTIAL

Lindsey Campbell
IHTT
Charleston Centre
49 Neilston Road
Paisley
PA2 6LY

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear Lindsey Campbell

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

A referral was received by the Renfrewshire CMHT Screening Group and subsequently screened at the meeting of 1st July 2024. Following discussion, it was passed for CPN Allocation.

Please do not hesitate to contact me should you have any queries.

Yours sincerely

Caroline Young
RCMHT Team Lead
For and on behalf of
Screening Group

Renfrewshire Health & Social Care Partnership

CIRCLE

81 Glasgow Road
Paisley
Renfrewshire
PA1 3PE

Tel: 0300-300-1199 (Option 2 then 4)
Email: ci.circle.recovery@nhs.scot

Mr James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

I would like to offer an appointment to see you on:

Date: **Monday 15th July 2024**

Time: **11.30am**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on **0300 300 1199 (Option 2, Option 4)** to let me know.

Yours sincerely,

Laura Lynch
Recovery Worker

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: EE/EE
Job ID: 100546304
Date Dictated:
Date Typed: 27/06/2024

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 487 2837
www.nhsggc.org.uk

Dear Dr Rehman

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

Diagnosis: Mixed anxiety and depression
ADHD
Alcohol dependence: currently abstinent
Personality disorder
Childhood trauma

Medication: **Please INCREASE OLANZAPINE from 10mg at night to 15mg at night - please could this prescription be available for him to collect tomorrow?**

Mirtazapine 45mg (ECS notes 30mg, James reports taking 45mg - we will clarify this with him again)
Disulfiram 400mg Mondays and Wednesdays, 600mg Fridays

Acamprosate 666mg three times daily
Folic acid 5mg once daily
Thiamine 50mg four times daily

Please continue to dispense all medication weekly

Legal Status:	Informal
Follow up:	Remains on the Intensive Home Treatment Team caseload, with next appointment on Saturday 29th June 2024 1pm. Also has follow-up from ADRS

James was referred to the Intensive Home Treatment Team by our colleague in ADRS due to James having presented with suicidal ideation.

I assessed him today with my colleague Jamie Morrans, senior IHTT practitioner. He complains of mixed anxiety and depressive symptoms in the context of three bereavements within the last two years, including his friend who was murdered in the common close of James' flat. He has been experiencing thoughts of suicide by stepping in front of a train, but at present has no intent to act on these thoughts and wants help to recover and improve his life.

He has now been abstinent from alcohol for three months, and intends to remain so. He is keen to develop new, helpful coping strategies and is keen for support to allow him to cope with his anxiety.

On mental state examination, he engaged well. He was tearful at times and objectively he was low in mood but with reactive, congruent affect and he was able to smile and use humour. He described suicidal ideas, and although he had recently visited a rail line with thoughts of stepping in front of a train, he has no intent to act on these thoughts at present. He described hopes and ambitions for his future. There were no psychotic phenomena. His insight was intact.

We have offered him further intensive home treatment and will begin anxiety management skills with him. **I would be grateful if you would please increase his olanzapine,** which may help with agitation and poor sleep. If his mood remains low, we may consider switching to an alternative antidepressant such as venlafaxine, although we need to clarify his dose of

mirtazapine first as there may be room to increase this in the first instance, if he has not been taking 45mg already. We will be in touch about any medication changes if needed.

If you require any further information, please don't hesitate to contact us on the number above. Thank you for your help.

Yours sincerely

Emma Earl
Speciality doctor in Psychiatry

Authorised on 27/06/2024 14:05:44 by Emma Earl.

IHTT Assessment EMIS Web

RE: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

CHI No:	1203893450	**Date:**	27.06.24
Surname:	**Weir**	**Date of Birth:**	**12/03/1989**
First Name:	**James**	**Gender:**	**M**
Address & Post Code:	**Flat D 27 Macdowall Street, Johnstone, PA5 8QJ**		
Phone No:	Patient Home Telephone Patient Mobile Telephone 07388 825676 out of service until Monday due to repairs	**Legal Status (MHA, AWI, Guardianship):**	Informal
Ethnicity:	Caucasian	**Nationality:**	British
Consent to sharing info:	Aware information may be shared with partner agencies within HSCP – consent given		
Communication needs:	Alternative correspondence format		
Next of Kin / Carer contact details:	*Carer contact details listed below:* Sister, Debbie Weir – contact in emergencies only, do not involve in care as she worries		

Professional contacts summary

Alerts *(history of violence, offending history)*
Previous notes – Documented history of hostile and aggressive behaviour towards staff at A&E however no sign of this today.
Reason for referral *(referrer's reason[s] for requesting assessment)*
For ongoing support by Intensive Home Treatment Team to monitor poor mental health.

Gender Based Violence

1.	**Did staff make a sensitive enquiry on gender based violence?**	*Select as appropriate	YES ☑ NO☐
2.	**Did the patient disclose any experience of GBV?**	*Select as appropriate	YES ☑ NO☐
	Brief Details of Disclosure - Childhood sexual abuse? Domestic Abuse? : Documented in assessment.		
	Document any action taken: (Has a safe plan been put in place) No		
3.	**Does the person meet the 3-point Adult Support & Protection criteria –** *low assessment of risk section*	*Select as appropriate	YES☐ NO☑
	a. Has an AP1 been submitted?	*Select as appropriate	YES☐ NO☑
	b. Is the person already on a plan?	*Select as appropriate	YES☐ NO☑

4.	**Have any child protection concerns been identified?**	*Select as appropriate	YES☐ NO☑
	a. Has a Notification of Concern been completed to the Child Protection Unit (Tel: 0141 451 6605) and to Renfrewshire Children's Social Work Services (Tel: 0300 300 1199)	*Select as appropriate	YES☐ NO☑
5.	**Was there a reason as to why the question was not asked**	n/a	
6. If sensitive enquiry to Domestic Abuse or Childhood sexual abuse was not asked what is the recommended follow-up? n/a			

Reason for attendance *(Description of individuals main concerns, their perceptions of difficulties and hopes from the service)*

James is a gentleman who is known to ADRS and prescribed antabuse due to a long history of alcohol misuse. He has been abstinent from alcohol for approx. 90 days. He has a history of poor mental health symptoms, social anxiety, low mood, low self-worth and thoughts of self-harm. He has a history of childhood and adult trauma, reporting being a victim of sexual assault and childhood physical abuse in addition to witnessing the death of his close friend. He feels his mental health has deteriorated since he stopped alcohol. He has flashbacks and physical symptoms, shaking, sweating and voices in his head.

James said he wants to get better, unsure how to help himself therefore has come to IHTT for guidance. He thought when he stopped alcohol that things would improve. He has now been sober for 93 days and since stopping drinking he has not heard from any friends. He has realised who was there for him in the past.

At point of referral he called from a call box which he is not happy about this was intervened by services. He feels that they increased his anxiety levels when Police came. He says everyday he has similar thoughts of anxiety and looking over his shoulder but everyone overreacted at that particular time. He says his main problems with anxiety and flashbacks and reliving things. He can see the body of his murdered friend in the close which happened in 2022. He thinks over the death of his dad and another friend who both died of heart attacks in recent years and he is crying daily. Next Wednesday will be the 100th day sober, following 19 days in the Kershaw Unit. He felt bullied by other patients in the Kershaw Unit and had to leave. He says things have been "shite and terrible since". He feels worse than when he was drinking, feels shaky with anxiety every morning particularly bad. He tries to keep busy by painting and decorating and spending time with family. Things are okay when he is doing that but when he is alone things break down. Some elements of life are better being sober on reflection, he does love doing things. He describes himself as an adrenaline junkie, always willing to take on new tasks. His family have described him as more grumpy recently and he can now see they are right. He says it is not fair on them acting like this.

He has been eating fine, has proper healthy diet. Sleeps has not been okay, it "has been terrible". Takes his tablets at 9pm and bed for 10.30pm. Has not slept in 2 days because of flashbacks and nightmares especially bad over last 6 months. He did used to drink alcohol to help sleep and take away the "rubbish in my head". He does not sleep during the day. His energy dips by 2pm. He is trying to get back to doing his own shopping and cooking and making an effort to care for his personal hygiene. He says he has voices in his head that describe self-worthlessness and they bring thoughts to end his life. He wants and needs to get better and thinks he

has been unwell for too long.
When we discussed recent thoughts of suicide he had planned to wait until night and jump in front of a train at high speed. He has attended the railway station a few times, last time was a couple of weeks ago. Although he states he has come to get help because he doesn't want to be in that position. He wishes he had therapy or counselling for issues previously. He feels 80% confident he has autism and thinks he has ruined his hands by punching walls through anxiety.
He did almost drink recently but managed not to. He doesn't feel Olanzapine helps, he wants to figure out what it does. He feels constantly depressed and mirtazapine is not helping. Open to trying another anti-depressant. Has not had venlafaxine.
Due to ADHD medications says he has to go to different pharmacies to collect his prescriptions, went 8 weeks recently without it. He doubts he has ADHD but wants to find out what is going on with him.

Psychiatric history ***(previous/ongoing mental health problems, diagnoses and interventions, via GP or mental health services, and their impact; h/o self-harm/attempted suicide; previous admission/detentions)***

Problems with alcohol since age 13.
Long standing suicidal ideation.
Admissions to Leverndale and Dykebar Hospitals. History of non-engagement.
ADHD diagnosis since age 5 or 6.

Medical history ***(prior/pre-existing/ongoing physical health problems, diagnoses and interventions and their impact)***

Issues with leg pain following an RTA when bike collided with a car. He does not have any other physical health issues and he doesn't like to use doctor's time.

Current medication details as given by individual ***(prescribed, over-the-counter, complementary, drug allergies)All patient reported below***

Medication	Dose	Frequency	Duration	Response
Disulfiram	200mgs	2 on Monday / 2 on Wednesday / 3 on a Friday from Boots in Johnstone		
Methylphenidate MR	36mgs			
Mirtazapine	45mgs			
Folic Acid	5mgs			
Thiamine	50mgs	4 times daily		
Acamprosate	666mgs	3 times daily		Helps greatly
Olanzapine	10mgs			Doesn't help

Allergies:	Nil allergies			
Dispensing frequency:	Weekly. Gets ADHD meds at Boots due to shortage. Gets rest from Well Pharmacy	**Medication concordance:**	Good	

Family History *(relationships; h/o MH problems, medical, substance use problems; h/o suicide)*

Mother – Mary, becoming a great mum now, she lives in Ferguslie. They have a better relationship now he is in recovery, they text, Facebook and sometimes meet each other.
Dad – deceased MI. He was a drinker, not a nice drunk.
Parents divorced and mum remarried again who he describes as a "scumbag".
Siblings – Jamie and Debbie who he talks to. Also has another 2 brothers and 6 sisters who he does not talk to – all because of alcohol.
Nephew – has autism.

Personal History:

Childhood / development / relationships	Born in Paisley. Dad died 2 years ago. He cannot remember any good parts of his younger life. Cannot remember if mum ever read him a book.
Childhood trauma / neglect / abuse	History of childhood trauma, sexual abuse. Stated his mum and gran beat him up a lot due to not being able to control him with his ADHD symptoms.
Education / employment	Enjoyed school but found it difficult due to ADHD. He had good friends in primary which stayed with him in secondary. Was at Ferguslie then Castlehead High. Struggled a bit towards the end so went to The Kibble two or three times per week.
Adult relationships	No relationship at present. States messed up due to alcohol but confident he can meet someone in the future.

Adult trauma / abuse / vulnerability	History of adult trauma describing his life as "a train wreck". Sexual abuse for 7 years while he was in a child's home. – This information is from previous assessment. Today she also states that a close friend was killed in his close which he saw the body as Police left lying there uncovered for 24 hours.
Personal strengths / Hopes for the future	Would like to become an addictions nurse.
Current social circumstances:	
Housing	Lives in a council flat, lives alone. His neighbours do not cause any extra stress. He has all mod cons. Has a PS4 etc. which he enjoys.
Employment / Employability	Unemployed at present.
Finances	No financial issues, no debt. On ESA. Although he does say gas have asked for £6000 bill, states he has never used it and shouldn't have that meter. Possibly needs advice with this.
Support	Has ADRS Anne Marie Boyle tomorrow and has an appt with Dr Ashraf for his first medical appointment.
Interests / current activities	He likes long walks, describes himself as an adrenaline junkie, he would be up for anything. Has some arts and crafts to try.

Any children/ dependents under the age of 18?				
	Child 1	**Child 2**	**Child 3**	**Child 4**
Name	Nil			
Age				
Address if different:				
Child protection concerns/agencies involved:				

Impact of mental health on parenting and/or potential risk to children:
Not responsibility for any children.
Description of functioning before current difficulties:
Always struggled with ADHD and depression.

Substance use: ***(caffeine, alcohol, tobacco, non-prescribed drugs, novel psychoactive substances)***	
Pattern of current use	Reports being off alcohol for coming up to 100 days.
Impact on individual	
Previous history	Cannabis daily.

Forensic history: ***(charges, fines, convictions, h/o violence)***
When a teen he broke in to somewhere and got a 10 month prison sentence. Been out of jail since 21 and never went back.

Legal issues: ***(driving, capacity, detention, vulnerability, other orders)***
Not a driver. He has capacity. Feels he would love a driving licence but needs 12 months sobriety.

Individual expectation of service:
Feels if he was able to deal with crowds things would help and it would enable him to make friends and do fun things.

Mental State Examination:	
Appearance	Casually dressed thin gentleman. Bit tearful during appointment.
Behaviour	Good rapport and good eye contact.
Mood & Affect	Subjectively low, objectively low but reactive. Congruent affect. Smiling and volunteering humour.
Speech	Logical.
Thought form	No formal thought disorder.
Thought content	Suicidal ideas with recent suicidal actions of going to train line but no current intent. Not hopeless and has ambitions for the future.
Perceptions	No thoughts or intent to harm others.
Cognition	Good short term memory, good concentration, orientated, not formally assessed.
Insight	Good insight.

Carers / Next of Kin / others views, concerns and expectations from services
None present. Not be involved.

Additional notes:

Summary

Name: James Weir	**CHI:** 1203893450
Summary of assessment ***(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)***	
35 year old gentleman who was referred by ADRS for further assessment of mental health by IHTT.	
Overall impression of risk ***(CRAFT to be completed separately)***	
Risk has reduced since patient wants to get better. He is keen on input and any recommended changes.	
Immediate actions ***(including information provided)***	
Seen by Dr Earl	
Outcome of MDT discussion/ Treatment plan ***(including follow up arrangements if relevant)***	
Accepted for IHTT caseload – begin anxiety management and relaxation techniques. Possibly Decider Skills. Refer for CMHT key Worker to take this forward. Increase Olanzapine to 15mgs. If mood remains low can give information on venlafaxine and consider cross titration from mirtazapine. Has appointment with ADRS tomorrow. Next IHTT contact Saturday 29.06.24 at Glennifer Unit 1pm.	
Primary Diagnosis:	
Any additional diagnoses:	
Suitable for psychological therapies (Y/N):	

Name:	Jamie Morrans	**Designation:**	Snr IHTT Practitioner
Signature:		**Date:**	27.06.24

Authorised on 30/06/2024 11:17:43 by Jamie Morans.

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:	27/06/2024	Time of Assessment:	10:30

Personal Details			
Surname:	Weir	CHI Number:	120 389 3450
Forename:	James	Relationship Status:	
Dob:	12-Mar-1989	Sex:	Male
Age:	35	Referral Urgency:	Urgent
E-Mail Address:		Registered GP :	SIM, Juliet (Dr) Quarryside Practice
Clients Address:	Flat D 27 Macdowall Street Johnstone	Practice Code:	87305
		Client Telephone No:	
Post Code:	PA5 8QJ	Client Mobile No:	(07388) 825676

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	Other (please specify)
Risk Factors:	Other (Please state)	Disabilites:	N/a

Assessment Documentation:

All Referrals must be accompanied by a Glasgow Risk Screen.

Additional information must be completed for the services below;

Service	Assessment Required
Network Services	Network Service Profile
Addictions	DAST/AUDIT
Doing Well	PHQ
CMHT	GAD7

Consent to Referral: Patient is aware of referral

Brief History/Current Issues/Known Forensic History Risks:

James is a 35 year old male who was referred to IHTT from ADRS following expressing thoughts of suicide. He has been experiencing low mood, suicidal ideation and anxiety in the context of recently reaching 93 days abstinent from alcohol and experiencing flashbacks of his best friends death. His friend [redacted] was murdered in his close and James had seen his body, his father passed away the same month and another friend had passed away from a heart attack.

Has had suicdal thoughts of jumping infront of a high speed train. However he states he does not want to to die and wants a better life. Nephew and family are protective factors. Has a history of keeping knifes under his pillow and previously hostie with staff at A&E.

He has a history of childhood abuse. History alcohol dependency with recent sobriety. He is currently taking disulfiram and acamprosate, has ongoing support form Ann-Marie Boyle, ADRS and due to meet Dr Ashraf in August 2024.

Current medication includes Olanzapine 10mg, Mirtazapine 30mg, Disulfiram 400mg Mon/ Wed and 600mg Fridays, Acamprosate 333mg thrice daily, Folic Acid 5mg and Thiamine 50mg four times daily.

Reason for Referral: Referral for a CPN for ongoing support post IHTT for mood monitoring and anxiety management.

Referred By:	Jocelyn Holmes (student nurse / Linzi Campbell(Senior Crisis Practitioner)
Location:	IHTT
Designation:	
Contact Information/Number:	01414872837
Date Referred:	28/06/24

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk
Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Version 2, Dec 13

Detailed Print

Case Details:

Case No.	User Description
7356289	Leanne Wright (Pwp Call Taker) ()

Patient's Name: James Weir
Address: Flat D - Phone Box Around Corener 27 Johnstone

PA5 8QJ

Tel: 07814 953320
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Rehman,Usman(A72)
Surgery: Bargarran Medical
Confidential: True

Tel:

Leanne Wright (Pwp
NHS 24 Assessment

Start Time: 25/06/2024 21:58
End Time: 25/06/2024 23:05

ANXIOUS, PARANOID AND SHAKING

Clinical summary created by: Leanne Wright (Pwp Call Taker) () [25/06/2024 23:05:53]
Reason for call: ANXIOUS, PARANOID AND SHAKINGConfirmed Symptom(s):
Endpoint Management Selected (CT)

History and Mental state:
Medication: COMPLIANT WITH PX MEDS.
RAG History and mental state: Amber
Main problem: APPT TOMORROW THE HOME INTENSIVE TREATMENT TEAM - HOWEVER CANNOT WAIT.
ANXIOUS, PARANOID AND SHAKING.
HOWEVER REALLY STRUGGLING AND DOES NOT THINK CAN WAIT UNTIL THEM.
STATES FEELING CONSTANTLY ANXIOUS, PARANOID AND SHAKING.
DX OF PTSD & ADHD.
OFF ALCOHOL FOR 92 DAYS.
HAS BEEN GETTING THINGS IN HEAD FOR TOO LONG. CAN'T STOP AND TAKE A BREATHER FROM THOUGHTS.
VOICES IN HEAD.
CONSTANTLY AGITATED.
STATES WENT TO CHARLESTON CENTRE, WAS ASKED IF COULD KEEP SELF SAFE.
VOICES BELIEF THAT HE DOES NOT HAVE A PURPOSE IN LIFE, WORTHLESSNESS.
STATES DOES NOT HAVE STENGTH.
FELELING AGITATED CANNOT SLEEP.
STRUGGLING WITH MH, MOOD IS LOW.
Engagement with services: APPT WITH IHTT TOMORROW.

Detailed Print

Case Details:

Case No. **User Description**
7356289

Patient's Name: James Weir
Address: Flat D - Phone Box Around Corener 27 Johnstone

PA5 8QJ

Tel: 07814 953320
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Rehman,Usman(A72)
Surgery: Bargarran Medical
Confidential: True

Tel:

Public protection considerations:
RAG Harm to others: Amber
RAG Adult protection: Amber
RAG Child protection: Green
Harm to others risk: DENIED ANY THOUGHTS OF HARMING OTHERS.
STATES HAS BEEN HAVING FLEETING OF HARMING THOSE WHO HAVE PREVOIUSLY ABUSED PT. NOT INTENT.
Adult protection: HAS BEEN UNABLE TO SLEEP DUE TO HX OF TRAUMA.

Child protection: NOTHING NOTED

Suicide or self-harm:
Self-harm risk: VOICES IN HEAD COMMANDING PT TO HARM SELF, HOWEVER PT IS TRYING NOT DO. DENIED ANY DSH. DISCLOSED HX OF SELF HARM. STATES HAS BEEN THINKING OF SELF HARMING ON HIS ARM TODAY.
RAG Suicide: RAG Red
RAG Self-harm: Amber
Suicide risk: STATES HAS THOUGHT ABOUT SUICIDE TODAY, STATES IS REACHING OUT BEFORE ACTING UPON THIS. STATES HAS THOUGHTS OF OVERDOSE ON MEDS IN THE HOUSE - UNSURE IF HAS ENOUGH MEDS. UNCLEAR OF HX OF SUICIDAL ACTS. STATES AT ONE POINT AT PETORL AND LIGHTER IN HIS HOUSE.

Social and personal risks:
Occupation/activity: NOTHING NOTED.
Housing and finances: LIVES AT HOME ALONE.
Support network: DAD DIED 2 YEARS AGO.
DOES NOT WANT TO FRIENDS HOUSE AS THEY STILL DRINK ALCOHOL .
Physical health: REPORTS IS SHAKING.
RESTLESS AND AGITATED.
RAG Social and personal risks: Amber

Detailed Print

Case Details:

Case No. **User Description**
7356289

Patient's Name: James Weir
Address: Flat D - Phone Box Around Corener 27 Johnstone

PA5 8QJ

Tel: 07814 953320
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Rehman,Usman(A72)
Surgery: Bargarran Medical
Confidential: True

Tel:

Risk from substance misuse:
RAG Risk from substance misuse: Amber
Substance abuse risk: 92 DAYS INTO RECOVERY WITH ALCOHOL ADDICTION.
NO ALCOHOL OR ILLICIT SUBSTANCE USE.

Any other issues:
RAG Any other issues: Amber
Other issues: HAS NOT BEEN SMOKING CANNBIS FOR THE PAST FEW DAYS, REPORTING PRIOR TO THIS WAS SMOKING CANNABIS DAILY.
DOES NOT WANT TO GIVE UP, IF HE DOES THE PEOPLE WHO ABUSED HIM WILL WIN.
HX OF RTA IN 2019, ISSUE WITH LEG - IMPACTING MOBILITY.
SELF NEGLECT.
LIVING IN FEAR DAILY.
POLICE ARRIVED WITH PT WHILST ON CALL, STRORM ID: 2406254084

Overall impression:
RAG Overall impression: Red
Overall impression: SUICIDAL THOUGHTS - THOUGHTS OF SELF HARM - DISTRESS - AGITATED - RESTLESS - HX OF ALCOHOL ABUSE - THOUGHTS OF RELAPSE - HEIGHTENED PARANOIA - HEIGHTENED ANXIETY
RAG Summary: Red:2 Amber:7 Green:1 Not known:0

Call Detail(s):
Call reason: Suicidal thoughts
Clinical supervisor: Guild Alisha GUILDA Dundee
25:06:2024 23:11:38 WRIGHTL2.. PT APPEARED ACUTELY DISTRESSED. NOTING HEIGHTENED ANXIETY, PARANOIA AND SHAKING. STATES HAS APPT WITH IHHT TODAY AND FEELS CANNOT WAIT UNTIL THEN. REPORTS HAVING DARK THOUGHTS OF SELF

Detailed Print

Case Details:

Case No. **User Description**
7356289

Patient's Name: James Weir
Address: Flat D - Phone Box Around Corener 27 Johnstone

PA5 8QJ

Tel: 07814 953320
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Rehman,Usman(A72)
Surgery: Bargarran Medical
Confidential: True

Tel:

HARM AND SUICIDAL IDEATIONS... STATES HAS BEEN HAVING THOUGHTS OF OVERDOSE ON PX MEDS AT HOME. UNSURE OF HX OF SUICIDAL ACTS. DISCLOSED HAS BEEN ALCOHOL FREE FOR 92 DAYS AND CANNABIS FREE FOR 2 DAYS. DISCLOSED HX OF TRAUMA AND ABUSE... PT IN A PHONE BOX DURING CALL, UNWILLING TO DISCLOSE LOCATION OF THIS. PT NOTING THAT INCREASED AGITATION AND RESTLESSNESS PREVENTING HIM FROM SLEEPING. DISCLOSED SELF NEGLECT AND UNABLE TO CARRY OUT ACTIVITIES OF DAILY LIVING... NOTING IS CONSIDERING USING ALCOHOL AGAIN DUE TO HOW HE IS FEELING, DISCLOSED HAVING THOUGHTS OF ILLICIT DIAZEPAM USE TO EASE AGITATION. PT PROVICING CONTRACDITORY INFORMATION DURING CALL IN RELATION TO SUICIDAL INTENT. DW MHNP A GUILD... REQUESTED PT TO ATTEND A&E DUE BEING UNABLE TO ARRANGED CALLBACK - PT DECLINED. POLICE CONTACTED AND ARRIVED WHILST ON CALL WITH PT, STORM ID:2406254084. POLICE AGREED TO REMAIN WITH PT FOR CALLBACK. WORSENING STATEMENT GIVEN... CALLBACK NUMBER: 07814953320. CPN 1 HOUR..
Outcome: CPN (Dr) to phone patient within 1 Hr

Case type set to Mental Health
Start Time: 25/06/2024 23:13
End Time: 25/06/2024 23:13

Priority On reception set to within 1 hour
Start Time: 25/06/2024 23:13
End Time: 25/06/2024 23:13

Non-disclosure set to True
Start Time: 25/06/2024 23:13
End Time: 25/06/2024 23:13

Case status set to COMPLETE
Start Time: 25/06/2024 23:13
End Time: 25/06/2024 23:13

Special Patient Notes

Detailed Print

Case Details:

Case No.	User Description
7356289	

Patient's Name:	James Weir	**Date of Birth:**	12/03/1989
Address:	Flat D - Phone Box Around Corener 27 Johnstone PA5 8QJ	**Own Doctor:**	Rehman,Usman(A72)
		Surgery:	Bargarran Medical
		Confidential:	True
Tel:	07814 953320		
Call Origin			
Caller Name:	James	**Tel:**	

NHS Greater Glasgow and Clyde

TELEPHONE REFERRAL FORM

Referrer Name & Organisation:	NHS24	**Contact Number:**	
Date:	26/06/24	**Time:**	0040
Patient Name:	Mr James Weir	**Tel No:**	/ 07388825676
DOB:	12-Mar-1989	**CHI:**	120 389 3450
Address:	Flat D, 27 Macdowall Street, Johnstone, PA5 8QJ	**Postcode:**	PA5 8QJ

Ambulance, ED, GP only		**Police only**	
Is the patient medically fit to be assessed/transferred? (e.g intoxicated, overdose, covid symptoms, waiting on blood results, wounds requiring treatment?)	Y ☐ N ☐	Incident No:	
		Shoulder No:	
Mental Health triage and risk assessment tool completed (from ED only)	Y ☐ N ☐	Is the patient intoxicated?	Y ☐ N ☐
Glasgow Coma Scale below 15 (ED/SAS Only)	Y ☐ N ☐	Is the patient on a 297?	Y ☐ N ☐
Do you wish to receive feedback following the completion of the MHAU assessment? (ED/GP only)	Y ☐ N ☐	Is the patient under arrest?	Y ☐ N ☐
Safe mode of transport:	Taxi		☐
	Ambulance		☐
	Police		☐
	Own transport		☐

Presenting Complaint: *Please tick only one box*							
Episode of Self Harm	☐	Other Mental Health Issues	☐				
Addiction Issues	☐	Social Stressors/Distress	☐	Alcohol/ Drugs	☐		

Presentation/comment:					
Contact Type:	Telephone	☐	Face to face	☐	
Interpreter required		Primary language	unknown		
Outcome of assessment:					

Time arrived		Time assessed		Time left	
Completed by:		**Date:**		**Time:**	

Our Ref: MHAU/KM
Job ID: 100544846
Date: 26/06/2024

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Mental Health
Stobhill Hospital
Nevis Building
133 Balornock Road
Glasgow
G21 3UW
0141 201 3136
www.nhsggc.org.uk

Dear Dr Rehman

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

The above named was referred to Mental Health Assessment Unit (MHAU) Stobhill by NHS24 and was assessed by telephone on 26th June 2024.

Assessment

James was upset and tearful at the beginning of the call. He described how he has faced several abusive situations in his life, and how he still gets flashbacks and physical symptoms (shaking and sweating) when he is triggered. James feels that since he stopped drinking alcohol, he has been abandoned by those he used to consider friends (they still remain drinking alcohol and have not checked in with him). James also feels that without alcohol his mental health is becoming more and more challenging to handle. James feels that group therapy that has been offered to him in the past has not been helpful, as he struggles to regulate his emotions in group settings and feels he cannot fully open up". James also feels that he may have an ASD, and plans to attend a psychiatry appointment for assessment of this in August. James is looking for "any support at all" with his mental health. Writer and James discussed this further, and James feels that he would benefit from involvement in his community mental health team, as his issues are not likely to resolve within the crisis timeframe. James was previously rejected from CMHT (unclear through EMIS notes, however James believes this was due to him still drinking at the time.) James agreed that he was feeling much better after talking with writer and police, and agreed to safety plan of going back to his house, playing his playstation, and trying to get some sleep. James agreed that he will call back into NHS24 if he feels unsafe or is experiencing a deterioration, and has expressed that he no longer feels actively suicidal. James' tone and speech was much less tearful and upset towards end of call, with James stating that he was glad to talk to somebody as he felt that he now had some hope for improvement.

Recommendation

Safety planning and distraction techniques discussed with James, who agreed to utilise

them tonight. Letter will be sent to GP to inform them of contact and recommendation that James is referred to his local CMHT. James will present to GP tomorrow afternoon, giving them time to receive letter. Worsening advice given, with James agreeing to call NHS24 if he felt unable to keep himself safe or was experiencing a deterioration in mental health. James given general advice and signposting to bereavement services, to utilise when he feels ready.

Risk

Moderate risk - James shows good help seeking behaviours, and some future focus (ASD assessment in August), however James also feels isolated and has not developed any other coping strategies since quitting alcohol.

Yours sincerely

Joe Sinclair
Unscheduled Care Nurse
Authorised on 26/06/2024 10:16:31 by Typist Karen McConnell, not verified by Joe Sinclair.

NHS Greater Glasgow and Clyde

Mental Health Services

Prescription Sheet No._____ of_____

NAME	CHI (10 digits)	WARD/HOSPITAL	CONSULTANT	DATE REWRITTEN
JAMES WEIR	1203[illegible]3450	ADRS	DR HILLMAN	

REGULAR PRESCRIPTIONS

PHARMACY	START DATE	MEDICINE (Block letters) - APPROVED NAME	DOSE	ROUTE	TIMES (24 hour) 0900	1300	1700	2200	OTHER TIMES		PRESCRIBER'S SIGNATURE	DISCONTINUED DATE	INITIALS
	A 01/07/21	PARGINEX.	I + II	IM.	(5)	PAIRS.							
	B												
	C												
	D												
	E												
	F												
	G												
	H												
	J												
	K												
	L												
	M												
	N												
	O												
	P												

	AS REQUIRED PRESCRIPTIONS	DOSE	ROUTE	INDICATION	DOSE INTERVAL	MAX DOSE IN 24HRS
Q						
R						
S						
T						
V						
W						

	DEPOTS/LONG-ACTING INJECTIONS	DOSE	FREQUENCY
X			
Y			
Z			

DATE	ONCE ONLY MEDICATIONS	DOSE	ROUTE	TIME	SIGNATURE	GIVEN BY	TIME GIVEN	ADDITIONAL INFORMATION

APPROPRIATE ALERT STICKERS

HIGH DOSE ANTIPSYCHOTIC THERAPY	T2/T3	RISK OF INFECTION	KNOWN ALLERGY/ADVERSE DRUG REACTION - DETAILS

Cedar Code - 05197

Ref: ADRS
CHI: 120 389 3450
Date: 20 June 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

Arrangements have been made for you to be seen:

Date:	**28/06/2024**
Time:	**10am**
Appointment with:	**Annmarie Boyle**
Location:	**ADRS, 20 Back sneddon street, Paisley, PA3 2DJ**

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.

Yours sincerely

Annmarie Boyle

NHS Greater Glasgow and Clyde

Mental Health Services

Prescription Sheet No. _____ **of** 21999

NAME	CHI (10 digits)	WARD/HOSPITAL	CONSULTANT	DATE REWRITTEN
JAMES WEIR	120 389 3450			23/3/22

REGULAR PRESCRIPTIONS

PHARMACY		START DATE	MEDICINE (Block letters) - APPROVED NAME	DOSE	ROUTE	TIMES (24 hour) 0900	1300	1700	2200	OTHER TIMES			PRESCRIBER'S SIGNATURE	DISCONTINUED DATE	INITIALS
	A	24.3.22	~~ACAMPROSATE~~	666mg	O	✓		✓						23/3/22	BV
	B	24.3.22	THIAMINE	50mg	O	✓		✓	✓						
	C														
	D														
	E														
	F														
	G														
	H														
	J														
	K														
	L														
	M														
	N														
	O														
	P														

		AS REQUIRED PRESCRIPTIONS	DOSE	ROUTE	INDICATION	DOSE INTERVAL	MAX DOSE IN 24HRS
	Q						
	R						
	S						
	T						
	V						
	W						

		DEPOTS/LONG-ACTING INJECTIONS	DOSE	FREQUENCY
	X			
	Y			
	Z			

DATE	ONCE ONLY MEDICATIONS	DOSE	ROUTE	TIME	SIGNATURE	GIVEN BY	TIME GIVEN	ADDITIONAL INFORMATION
								Omar ✓

APPROPRIATE ALERT STICKERS

HIGH DOSE ANTIPSYCHOTIC THERAPY	T2/T3	RISK OF INFECTION	KNOWN ALLERGY/ADVERSE DRUG REACTION - DETAILS

Renfrewshire Health & Social Care Partnership

CIRCLE

81 Glasgow Road
Paisley
Renfrewshire
PA1 3PE

Tel: 0300-300-1199 (Option 2 then 4)
Email: ci.circle.recovery@nhs.scot

Mr James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

I would like to offer an appointment to see you on:

Date: **Wednesday 12th June 2024**

Time: **10.30am**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on **0300 300 1199 (Option 2, Option 4)** to let me know.

Yours sincerely,

Laura Lynch
Recovery Worker

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: CY/HMcM
Job ID: 661887
Date: 30/04/2024

PRIVATE & CONFIDENTIAL

Ms Ann Marie Boyle
Social Worker
ADRS
20 Back Sneddon Street
Paisley
PA3 2DJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley
PA1 1JS
0141 849 2203

Dear Ann Marie,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

Thank you for your referral dated 22nd April 2024. This was discussed at length within our multi-disciplinary screening meeting in attendance of Dr Nagore Penades (Consultant Psychiatrist), Caroline Young (Nurse Team Lead), Amanda Haddow (Social Work Team Lead), Kirsty Davidson (OT Team Lead), Courtney Smiley (Admin) and Elaine Farrell (CPN).

Unfortunately, we are unable to accept the referral at this time. It would appear there would remain some significant addiction issues and recently did not complete his detox. Unfortunately, we would be unable to assess him due to this. If you wish to discuss this further, please do not hesitate in contacting me.

Yours sincerely

Caroline Young
RCMHT Team Lead
Authorised on 01/05/2024 12:09:35 by Caroline Young.

Renfrewshire ADRS Pabrinex Prescription Recording Sheet

Name: James Weir | Care Manager: | 120 389 3450 | GP & Practice:

Exclusion Criteria – Patient has known:

1. Hypersensitivity to Pabrinex or excipients of the product ☐
2. Signs / symptoms of Wernicke's Encephalopathy ☐
3. Signs/symptoms or history of Delirium Tremens ☐
4. Symptoms of Acute Psychosis and Hallucinations ☐
5. Pregnancy or have a suspected pregnancy ☐
6. History of Bleeding Disorders ☐

CONSENT QUESTIONS (ask at each visit)	Tick	PROBLEMS/Comments
1. Are you in good health at present?	☑	
2. Have you ever suffered a reaction to a Pabrinex injection?	☐	NO
3. Have you ever had an allergic reaction to any substance (food, drug, latex)?	☐	NO
4. Do you have any history of bleeding disorders?	☐	NO
5. Are you pregnant or suspect being pregnant?	☐	NA
6. I have received information on the treatment duration & course of Pabrinex injections?	✓	
7. I have discussed and received written information about Pabrinex injections and side effects	✓	
8. I have been given contact numbers for emergency services for use out-with ADRS working hours.		

I have read/discussed the above and give my consent for a Pabrinex injection Course Signed X James Weir Date

Course 1 Please record DNAs/notify Care Manager

	Date	Time	Px Code	Injection site	Signed
1	19/10/23	11'15	Q46	L	MCD
2	16/11/23	11.17	Q47	R	MCD
3					
4					
5					
6					
7					

Comments

Course 2

	Date	Time	Px Code	Injection site	Signed
1	4/1/24	10[illegible]	Q47	L	MCD
2	11/1/24	10'5	Q47	R	MCD
3					
4					
5					
6					
7					

Comments

Course 3

	Date	Time	Px Code	Injection site	Signed
1					
2					
3					
4					
5					
6					
7					

Comments

Please request prescriber to discontinue completed courses and scan both sides to "Documents" in EMIS.

Christine Laverty
Chief Officer

Renfrewshire Health & Social Care Partnership

Our Ref: RA/KE
Job ID: 659521
Date: 24/04/2024

PRIVATE & CONFIDENTIAL

Alcohol and Drug Recovery Service
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
Tel: 0300 300 1199 (option 3)
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

I was due to review James at the outpatient clinic at the Torley Unit on the 23rd of April 2024.

As you know he has recently been discharged from the Kershaw Unit following an alcohol detox. He is a gentleman who is also non-compliant with various medications including his Methylphenidate which was re-instated by the Kershaw team.

He has been referred to the Community Mental Health Team for review regarding his ADHD and management of his medications. We of course were going to review him in the Torley Unit as he has been prescribed some Antabuse and will do appropriate follow up for this.

As mentioned he did not attend his appointment today, but I will be offering him another appointment shortly.

I will keep you informed of my contact with him.

Yours sincerely,

R. Ashraf

Dr Raihan Ashraf
Speciality Doctor Addictions Psychiatry

Authorised on 26/04/2024 16:10:56 by Raihan Ashraf.

Chief Officer
Susanne Miller
MA (Hons) CQSW

Alcohol and Drug Recovery Services
Glasgow City HSCP
The Kershaw Unit
Gartnavel Royal Hospital
1055 Great Western Road
Glasgow
G12 0XH
Phone 0141 211 3546
Fax 0141 211 3554

www.glasgowcity.hscp.scot
www.glasgow.gov.uk
www.nhsggc.org.uk

CHI: 1203893450
Ref: UJ/RG

Dictated: 16/04/2024
Typed: 16/04/2024

Dr Sim
Quarryside Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Dear Dr Sim

==========
DISCHARGE SUMMARY
==========

James Weir - DOB: 12/03/1989
Flat D, 27 McDowall Street, Johnstone, PA5 8QJ

Date of admission:	**25/03/2024**
Date of discharge:	**12/04/2024**
Ward:	**Kershaw Inpatient Unit, Gartnavel Royal Hospital**
Consultant:	**Dr Iain MacKay**
Status	**Informal**
Diagnosis:	**Alcohol Dependence Syndrome (ICD11 Code - 6C40.2)**
Medication on Discharge:	**Please refer to IDL dated 12/04/2024**
Follow-up plans:	**Encouraged to engage in Psychosocial Recovery Groups.** **Continues on Folic Acid 5mg regularly – could GP please review need for this after 4 months.** **Mirtazapine restarted on admission and titrated up to 30mg nocte. This can be increased further back to 45mg by GP post-discharge.** **Acamprosate and Disulfiram commenced as APM.** **CAT Team support and monitoring/supervision of alcohol-protective medication, in accordance with prescribing guidelines.** **CAT Team will re-refer to CMHT.**

Further Information:
No further information to be added in relation to my colleague's, Dr Martin's (FY2), Immediate Discharge Letter (IDL) dated 12/04/2024.

Smoking is banned on NHS Greater Glasgow and Clyde property, including all buildings, all vehicles and grounds.

Glasgow - Proud Host City of the 2014 Commonwealth Games

Read our Privacy Statement at www.glasgow.gov.uk/privacy

Yours sincerely



Dr Usman Javed
Locum Speciality Doctor in Addiction Psychiatry
On behalf of Dr MacKay (Consultant Psychiatrist)

Kershaw Unit in Patient

Against Medical Advise Discharge Form

Patients Name JAMES WEIR DOB 12/03/89 (3450)

Referring Care Manager/GP Dr. Usman Rehman (GP)
ALBA Medical Group
(Tel - 0141 314 9313)

Agency Renfrewshire ADRS
Dr. B O'Neill (Medical officer)
Address ~~DC Angela~~
Anne Marie Boyle (Key worker)

- I hereby declare that I am taking my own discharge from Kershaw Inpatient service against medical advice.
- I understand the medical or nursing staffs concerns and accept that I am discharging myself at my own risk and have had these risks explained by staff; and I take full responsibility for my actions.
- I understand that the nursing staff in Kershaw in patient service will immediately fax this form to my Community Addiction Team care manager/referrer today to inform them of my discharge to allow me to receive follow up care.

Signed JAMES WEIR Date 12/04/2024.

Witnessed [signature] Date 12/04/2024.

Immediate Discharge Letter

Highly Sensitive: No
Consent for Sharing Withheld: No

USMAN REHMANALBA Medical Group Glasgow,Erskine Clinic,Bargarran Centre,
Erskine, PA8 6BS

Main Switchboard:
Date of Completion: 12-Apr-2024

Dear USMAN REHMAN,

Name	CHI	DoB	Address
James Weir	**1203893450**	**12-Mar-1989**	**27D MACDOWALL STREET, Johnstone, Renfrewshire, PA5 8QJ**

Admitted	Type	Discharged	Destination
25-Mar-2024 10:19	IP	12-Apr-2024	Private Residence - living alone

Specialty	Consultant	Ward	Telephone
Psychiatry	MacKay	Gartnavel Royal Kershaw Ward-G1	

Primary Diagnosis
There is no data to display.

Secondary Diagnosis
There is no data to display.

Significant Operations / Procedures:
There is no data to display.

Last Discharge Review: Usman Javed (Usman Javed - Specialty Doctor) on 11 Apr 2024 10:47

Legal Status: Informal

Discharge Medication:

Active Drug Name	Route	Dose	Disp	Reason	Further Details	ECS	Since Admission
Acamprosate 333mg gastro-resistant tablets	oral	2 tablets three times daily	Yes		**Drug Details:** CAT Team support and monitoring/supervision of alcohol-protective medication, in accordance with prescribing guidelines		Added
Disulfiram 200mg tablets	oral	1 tablet once daily , Not for dispensing, for information only. CAT Team to continue prescribing/monitoring.	No	Other see comments	**Dispensing Details:** CAT team to provide		Added
Folic acid 5mg tablets	oral	1 tablet once daily	Yes				
Mirtazapine 30mg tablets	oral	1 tablet once daily at night	Yes				Amended
Olanzapine 10mg tablets	oral	1 tablet once daily at night	Yes		**Drug Details:** Re-titrated from 5mg. Scope to increase to 15mg again if required.		Added
Thiamine 50mg tablets	oral	1 tablet four times daily	Yes				Amended
Xaggitin XL 36mg tablets (Ethypharm UK Ltd)	oral	1 tablet once daily , PLEASE SUPPLY SEVEN (7) OF THIRTY-SIX MILLIGRAM (36MG) XAGGITIN TABLETS FOR DISCHARGE. , On-going	Yes				Added Amended

"Added" means this medicine was added to the Clinical Portal record after admission. It does not necessarily mean this medicine was started by the hospital.

Dispensing Comments
There is no data to display.

Withheld Medication:

Date	Withheld Drug Name	Route	Dose	Note	Withheld Reason
There is no data to display.					

Stopped Medication:

Date	Stopped Drug Name	Route	Dose	Note	Stopped Reason
2024-04-11	Concerta XL 36mg tablets (CST Pharma Ltd)	oral	1 tablet once daily in the morning	start date 2/4/24	Changed to Xaggitin XL 36
2024-03-26	Diazepam 5mg tablets	oral	1 tablet twice daily		Superseded by HEPMA medications
2024-03-26	Methylphenidate 18mg modified-release tablets	oral	1 tablet once daily		Superseded by HEPMA medications Medication was removed from, made inactive or made unprescribable in the drug database.
2024-03-26	Olanzapine 15mg tablets	oral	1 tablet once daily at night		Stopped before admission

Reason for Admission and Presenting Complaints	Admission Category
No data available	No data available

Clinical Comments:	Dear Doctor, Diagnosis: Alcohol Dependence Syndrome (ICD 11 Code – 6C40.2) Mr Weir is a 35-year-old male who was admitted to The Kershaw Unit, Gartnavel Royal Hospital, on 25/03/2024 for an elective alcohol detox. He reported drinking alcohol since the age of 13 with problematic drinking for over 20 years. Mr Weir described drinking 3 bottles of buckfast per day. Mr Weir has had previous detoxes including an admission to Kershaw in July 2022 (Discharged against medical advice) and several acute medical admissions for withdrawals. Without

alcohol, he described typical withdrawal symptoms, seizures, delirium tremens, memory blackouts, and pins and needles. He admitted to using 3g/day of cannabis and previous cocaine use. He is currently smoking 10cig/day.

PPHx:
ADHD
EUPD
Possible PTSD
Anxiety and Depression
Adjustment disorder
Sexual abuse
Hx of Deliberate self-harm (Overdose and cutting)
Admitted to Dykebar (June 2021) for suicidal thoughts (Informal-discharged against medical advice)

PMHx:
Acute pericarditis (2012)
Gastritis (2015)
Inguinal hernia (2012)
Left hydrocele (2010)
Right tib/fib fracture

Progress on Ward:
Mr Weir was commenced on the diazepam reducing regime for the alcohol detox and tolerated this well. He was also prescribed oral Thiamine, oral Forceval and IM Pabrinex as vitamin supplementation, with Thiamine to continue post-discharge. Routine admission bloods showed a serum folate of <2.2 and GGT of 114 but were otherwise unremarkable. He had already been started on folic acid 5mg prior to admission.

He admitted he had not been taking his usual medications for a few months and therefore Mirtazapine was re-titrated up from 15mg (Currently at 30mg), Methylphenidate from 10mg (Back to usual 36mg now), Olanzapine from 5mg (Currently at 10mg). Mirtazapine and Olanzapine could be increased back to 45mg and 15mg respectively in the future if required.

Mr Weir’s mental health was monitored throughout his admission. He expressed chronic fleeting thoughts of suicide in keeping with EUPD. As a result of this, over the easter weekend his detox was maintained at 60mg/day before reduction resumed. The principals of alcohol-protective medication such as acamprosate and disulfiram were discussed with Mr

	Weir at MDT. He showed an interest in these and was given information leaflets for each. He was started on acamprosate on 09/04/24. He was persistently keen to start disulfiram, his only contra-indication to which could be his impulsivity and suicidal thoughts. It was discussed with Mr Weir and his CAT team and agreed he would be suitable. Dr Ashraf has agreed to prescribe this. On 12th April, James discharged against medical advice (AMA) three days earlier than expected, due to a verbal disagreement with another patient. Discharge medication was still provided to mitigate the risk involved. James had capacity in relation to this decision and agreed to a Safety Plan (ie to contact services) over the weekend if he required further support before Monday. He will be followed up by the Community Addiction Team (CAT). Dr William Martin FY2 Addiction Psychiatry Kershaw Unit Gartnavel Royal Hospital On behalf of Dr Iain Mackay (Consultant Psychiatrist)
Discharge Comments:	
Follow Up:	Yes Encouraged to engage in Psychosocial recovery groups. Continues on Folic Acid 5mg regularly - could GP please review need for this after 4 months. Mirtazapine restarted on admission and titrated up to 30mg nocte. This can be increased further back to 45mg by GP post-discharge. Acamprosate and Disulfiram commenced as Alcohol Protective Medication. CAT Team support and monitoring/supervision of alcohol-protective medication, in accordance with prescribing guidelines. CAT Team will re-refer to CMHT
Results Awaited:	No
Pharmacist Comments:	
Final Discharge Letter to Follow:	Yes

Yours sincerely,

Usman JAVED

Prescription Review
Medications reviewed by pharmacist: Hareem Javed (Pharmacist Mental Health)
Checked by: Margot JOHNSTONE (Pharmacist)
Discharged by: Julie PETTIGREW (Staff Nurse)

Renfrewshire
Health & Social Care
Partnership

Ref: RA/KE
CHI: 120 389 3450
Date: 10 April 2024

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

An appointment has been made for you to be seen as follows:

Date:	**Tuesday 23rd of April 2024**
Time:	**4.00pm**
Appointment with:	**Dr Raihan Ashraf**
Location:	**TORLEY UNIT, DYKEBAR HOSPITAL, GRAHAMSTON ROAD, PAISLEY, PA2 7DE**
Contact details:	**0141 314 4106**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely,

K. Edgar

Medical Secretary

Mental Health Directorate, Renfrewshire Alcohol & Drug Recovery Service,
20 Back Sneddon Street, Paisley, PA3 2DJ
Telephone: 0300 300 1199

Patient Name:
CHI number:

EMISweb Scanning code: EMISNQC0276

Consent to Disulfiram Treatment

1. *Aim of Treatment*

To support the prevention of relapse in alcohol dependence in conjunction with appropriate psychosocial interventions.

2. *Requirements of Treatment*

- Remain abstinent from alcohol
- Adhere to medication supervision arrangements as agreed with addiction recovery service
- Comply with arrangements for healthcare practitioner and prescriber review, including checks to confirm abstinence (bloods, breathalyser etc.)
- Engage with appropriate psychosocial activities to support abstinence from alcohol
- Safe custody, storage and disposal.

3. *Risks Associated with Disulfiram*

a. Relapse; disulfiram - alcohol reaction (DAR)

- Expected reaction (severe flushing, breathlessness, headache, heart palpitations, nausea and vomiting)
- Severe reaction; tachycardia, hypotension, respiratory depression, chest pain, QT prolongation, ST depression, arrhythmias, coma, convulsions
- Rare complications; hypertension, bronchospasm, methaemoglobinaemia (complication with the supply of oxygen to body tissues)
- In rare cases death has occurred
- All products (toiletries etc) used are required to be alcohol (ethanol, ethyl alcohol) free

b. Possible side effects, listed in order of severity and frequency:
(Frequencies quoted as per choice and medication leaflet and practitioner experience)

- Liver cell damage (rare)
- Psychiatric disorders (rare); depression, mania, paranoia, schizophrenia. Reduction in libido.
- Peripheral neuritis / Optic neuritis (rare)
- Encephalopathy (rare)
- Allergic dermatitis (uncommon)
- Nausea / Vomiting (common)
- Drowsiness / Fatigue during initial treatment (common)
- Halitosis (common)

☐ ***Choice and Medication*** **Patient Information Leaflet provided**
https://www.choiceandmedication.org/nhs24/generate/pilldisulfiram.pdf

c. Potential risks and benefits in pregnancy
Pregnancy test may be necessary / Report if planning or are pregnant

☐ **Pregnancy Patient Information Leaflet provided (please tick)**
https://www.choiceandmedication.org/nhs24/generate/handyfactsheetperinataldisulfiram.pdf

d. Need to make all treating doctors and pharmacy aware (carry patient treatment card) e.g. if admitted to hospital for an operation

I have fully discussed disulfiram with JAMES WEIR on 11.04.24.
Note particular risks emphasised or concerns raised.....
.....
I confirm that he/she understands the purpose, benefits and risks of disulfiram treatment and wishes to proceed.
Signed.....Print Name LONA CELLY Date 11.04.24.
I confirm that the purpose, benefits and risks of disulfiram treatment have been explained to me by the above and I wish to proceed with treatment.
Signed JAMES WEIR Print Name JAMES WEIR Date 11/5/24

Person Specific (Inpatient) Moving and Handling Assessment Form

Person's Name:	Mr James Weir	Named Nurse:		Person is totally independent (tick here and go to date box)	☒

1. General Information

Body Build		Problems with comprehension, behavior, co-operation (specify):
Weight	Height	
60.7 Kg	176 cm	
BMI: 19.6		Handling constraints, e.g. disability, weakness, pain, skin lesions, infusions (specify):
Risk of Falls: Yes ☐	No ☒	

2. Sit to Stand to Sit Transfers (Including to and from bed, wheelchair, commode and toilet)

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Model		Aid Type	People: 1 ☐ 2 ☐ >3 ☐		
Sling type		Additional Information / Equipment:			
Sling Size					

3. Toileting

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers		see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information:			

4. Move on / off bed pan

Hoist ☐	Maneuver ☐	Assistance ☐	Supervision ☐	N / A ☐
See No 2 Sit to Stand Transfers	Roll patient ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Independent bridging ☐			

5. Move up / down bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers	Sliding sheets ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Rope ladder ☐			

6. Lateral Transfer to / from trolley / bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers	Rigid Transfer Board ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Other (Please specify) ☐	Additional Information / Equipment (eg sliding sheets):		

7. Sit up over side of bed

Bed Rest ☐	Assistance ☐	Supervision ☐	Independent ☐
	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg rope ladder, swivel cushion):		

8. Into Bath or Shower

Equipment ☐	Handling Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Shower ☐	Shower chair ☐	People: 1 ☐ 2 ☐ >3 ☐		
Variable / Fixed height bath ☐	Shower trolley ☐	Additional Information / Equipment (eg sling lifting hoist after risk assess):		
Bed bath ☐	Bathing hoist (eg Alenti) ☐			

9. Walking

No Walking ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
	see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg hoist with walking sling, dist. Walked):			

10. Other Instructions / Observations / Equipment Used

	1st Assessment	2nd Assessment	3rd Assessment
Recording Symbol:	/ Forward slash	X	Ä
Date Assessed:		09/04/24	
Assessor's signature:		Lyn Powell	
Proposed Review date:		16/04/24	

1. General Information (Only complete this section if changed from over page)

Body Build		Problems with comprehension, behavior, co-operation (specify):
Weight	Height	
Kg	cm	
BMI:		Handling constraints, e.g. disability, weakness, pain, skin lesions, infusions (specify):
Risk of Falls: Yes ☐	No ☐	

2. Sit to Stand to Sit Transfers (Including to and from bed, wheelchair, commode and toilet)

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Model		Aid Type	People: 1 ☐ 2 ☐ >3 ☐		
Sling type		Additional Information / Equipment::			
Sling Size					

3. Toileting

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details		see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information:			

4. Move on / off bed pan

Hoist ☐	Maneuver ☐	Assistance ☐	Supervision ☐	N / A ☐
See No 2 Sit to Stand Transfers for details	Roll patient ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Person bridges ☐			

5. Move up / down bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details	Sliding sheets ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Rope ladder ☐			

6. Lateral Transfer to / from trolley / bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details	Rigid Transfer Board ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Other (Please specify) ☐	Additional Information / Equipment (eg sliding sheets):		

7. Sit up over side of bed

Bed Rest ☐	Assistance ☐	Supervision ☐	Independent ☐
	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information /Equipment (eg rope ladder, swivel cushion):		

8. Into Bath or Shower

Equipment ☐	Handling Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Shower ☐	Shower chair ☐	People: 1 ☐ 2 ☐ >3 ☐		
Variable / Fixed height bath ☐	Shower trolley ☐	Additional Information / Equipment (eg sling lifting hoist after risk assess):		
Bed bath ☐	Bathing hoist (eg Alenti) ☐			

9. Walking

No Walking ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
	see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg hoist with walking sling, dist. Walked):			

10. Other Instructions / Observations / Equipment Used

	4th Assessment	5th Assessment	6th Assessment
Recording Symbol:	/ Forward slash	X	Ã
Date Assessed:			
Assessor's signature:			
Proposed Review date:			

Person Specific (Inpatient) Moving and Handling Assessment Form

Person's Name:	Mr James Weir	Named Nurse:		Person is totally independent (tick here and go to date box)	☒

1. General Information

Body Build		Problems with comprehension, behavior, co-operation (specify):
Weight	Height	
60.9 Kg	cm	
BMI: 19.66		Handling constraints, e.g. disability, weakness, pain, skin lesions, infusions (specify):
Risk of Falls: Yes ☐	No ☒	

2. Sit to Stand to Sit Transfers (Including to and from bed, wheelchair, commode and toilet)

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Model		Aid Type	People: 1 ☐ 2 ☐ >3 ☐		
Sling type		Additional Information / Equipment:			
Sling Size					

3. Toileting

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers		see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information:			

4. Move on / off bed pan

Hoist ☐	Maneuver ☐	Assistance ☐	Supervision ☐	N / A ☐
See No 2 Sit to Stand Transfers	Roll patient ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Independent bridging ☐			

5. Move up / down bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers	Sliding sheets ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Rope ladder ☐			

6. Lateral Transfer to / from trolley / bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers	Rigid Transfer Board ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Other (Please specify) ☐	Additional Information / Equipment (eg sliding sheets):		

7. Sit up over side of bed

	Bed Rest ☐	Assistance ☐	Supervision ☐	Independent ☐
		People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information / Equipment (eg rope ladder, swivel cushion):		

8. Into Bath or Shower

Equipment ☐	Handling Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Shower ☐	Shower chair ☐	People: 1 ☐ 2 ☐ >3 ☐		
Variable / Fixed height bath ☐	Shower trolley ☐	Additional Information / Equipment (eg sling lifting hoist after risk assess):		
Bed bath ☐	Bathing hoist (eg Alenti) ☐			

9. Walking

No Walking ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
	see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg hoist with walking sling, dist. Walked):			

10. Other Instructions / Observations / Equipment Used

	1st Assessment	2nd Assessment	3rd Assessment
Recording Symbol:	/ Forward slash	X	Ä
Date Assessed:	1/4/24		
Assessor's signature:	Julie Pettigrew		
Proposed Review date:	WEEKLY		

1. General Information (Only complete this section if changed from over page)

Body Build		Problems with comprehension, behavior, co-operation (specify):
Weight	Height	
Kg	cm	
BMI:		Handling constraints, e.g. disability, weakness, pain, skin lesions, infusions (specify):
Risk of Falls: Yes ☐	No ☐	

2. Sit to Stand to Sit Transfers (Including to and from bed, wheelchair, commode and toilet)

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Model		Aid Type	People: 1 ☐ 2 ☐ >3 ☐		
Sling type		Additional Information / Equipment::			
Sling Size					

3. Toileting

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details		see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information:			

4. Move on / off bed pan

Hoist ☐	Maneuver ☐	Assistance ☐	Supervision ☐	N / A ☐
See No 2 Sit to Stand Transfers for details	Roll patient ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Person bridges ☐			

5. Move up / down bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details	Sliding sheets ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Rope ladder ☐			

6. Lateral Transfer to / from trolley / bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details	Rigid Transfer Board ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Other (Please specify) ☐	Additional Information / Equipment (eg sliding sheets):		

7. Sit up over side of bed

Bed Rest ☐	Assistance ☐	Supervision ☐	Independent ☐
	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information /Equipment (eg rope ladder, swivel cushion):		

8. Into Bath or Shower

Equipment ☐	Handling Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Shower ☐	Shower chair ☐	People: 1 ☐ 2 ☐ >3 ☐		
Variable / Fixed height bath ☐	Shower trolley ☐	Additional Information / Equipment (eg sling lifting hoist after risk assess):		
Bed bath ☐	Bathing hoist (eg Alenti) ☐			

9. Walking

No Walking ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
	see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg hoist with walking sling, dist. Walked):			

10. Other Instructions / Observations / Equipment Used

	4th Assessment	5th Assessment	6th Assessment
Recording Symbol:	/ Forward slash	X	Ã
Date Assessed:			
Assessor's signature:			
Proposed Review date:			

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: SMc/DS
Dictated: 22/03/2024
Date: 26/03/2024

PRIVATE & CONFIDENTIAL

Alcohol & Drug Recovery Service
20 Back Sneddon Street
Paisley
PA3 2DJ

0300 300 1199
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Glasgow
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D, 27 Macdowall Street, Johnstone, PA5 8QJ

Follow-up:	**20/06/2024 @ 2.30pm**

James did not attend an appointment with myself today on 22/03/2024. This service is prescribing him Naltrexone 50mg daily. He has had a very recent engagement with his keyworker and unfortunately he is still drinking alcohol at a harmful level. I understand he is on the Kershaw waiting list and is receiving a number of supports from his keyworker. He will be offered a further medical review in three months' time. We will review the prescription again then.

Yours sincerely

Stephen McLaughlin
Medical Officer

Authorised on 28/03/2024 13:26:36 by Stephen McLaughlin.

Renfrewshire
Health & Social Care
Partnership

Ref: **SMc/DS**
CHI: **120 389 3450**
Date: **26 March 2024**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

I note you did not attend your last medical review with the Alcohol & Drug Recovery Service and did not contact the centre to let us know. I have arranged a further appointment for you as follows:

Date:	**Thursday 20th of June 2024**
Time:	**2:30pm**
Appointment with:	**Dr Stephen McLaughlin**
Location:	**ADRS, 20 Back Sneddon Street Clinic, Paisley PA3 2DJ**
Contact details:	**0300 300 1199**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely,

Medical Secretary

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: CY/LMCN
Job ID: 633889
Date: 16/02/2024

PRIVATE & CONFIDENTIAL

Annmarie Boyal
Renfrewshire ADRS
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear Annmarie

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Thank you for your referral for Mr Weir. We discussed this at length at our multidisciplinary screening meeting. However from reviewing the notes it would appear that Mr Weir is awaiting a detox therefore would not be suitable for any psychological treatment within the CMHT.

We will currently return the referral to yourself. If after detox Mr Weir id ready to engage in a theraputic treatment please make further contact. If you have any concerns please don't hesitate in contacting me.

Yours sincerely

Caroline Young
RCMHT Team Lead
Authorised on 27/02/2024 11:58:06 by Caroline Young.

Person Specific (Inpatient) Moving and Handling Assessment Form

Person's Name:	Mr James Weir	Named Nurse:	Colin Ness	Person is totally independent (tick here and go to date box)	☒

1. General Information

Body Build		Problems with comprehension, behavior, co-operation (specify):
Weight	Height	
Kg	cm	
BMI:		Handling constraints, e.g. disability, weakness, pain, skin lesions, infusions (specify):
Risk of Falls: Yes ☐	No ☐	

2. Sit to Stand to Sit Transfers (Including to and from bed, wheelchair, commode and toilet)

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Model		Aid Type	People: 1 ☐ 2 ☐ >3 ☐		
Sling type		Additional Information / Equipment:			
Sling Size					

3. Toileting

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers		see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information:			

4. Move on / off bed pan

Hoist ☐	Maneuver ☐	Assistance ☐	Supervision ☐	N / A ☐
See No 2 Sit to Stand Transfers	Roll patient ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Independent bridging ☐			

5. Move up / down bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers	Sliding sheets ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Rope ladder ☐			

6. Lateral Transfer to / from trolley / bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers	Rigid Transfer Board ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Other (Please specify) ☐	Additional Information / Equipment (eg sliding sheets):		

7. Sit up over side of bed

	Bed Rest ☐	Assistance ☐	Supervision ☐	Independent ☐
		People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information / Equipment (eg rope ladder, swivel cushion):		

8. Into Bath or Shower

Equipment ☐	Handling Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Shower ☐	Shower chair ☐	People: 1 ☐ 2 ☐ >3 ☐		
Variable / Fixed height bath ☐	Shower trolley ☐	Additional Information / Equipment (eg sling lifting hoist after risk assess):		
Bed bath ☐	Bathing hoist (eg Alenti) ☐			

9. Walking

No Walking ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
	see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg hoist with walking sling, dist. Walked):			

10. Other Instructions / Observations / Equipment Used

	1st Assessment	2nd Assessment	3rd Assessment
Recording Symbol:	/ Forward slash	X	Ä
Date Assessed:	25/03/24		
Assessor's signature:	CDNess		
Proposed Review date:	01/04/24		

1. General Information (Only complete this section if changed from over page)

Body Build		Problems with comprehension, behavior, co-operation (specify):
Weight	Height	
Kg	cm	
BMI:		Handling constraints, e.g. disability, weakness, pain, skin lesions, infusions (specify):
Risk of Falls: Yes ☐	No ☐	

2. Sit to Stand to Sit Transfers (Including to and from bed, wheelchair, commode and toilet)

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Model		Aid Type	People: 1 ☐ 2 ☐ >3 ☐		
Sling type		Additional Information / Equipment::			
Sling Size					

3. Toileting

Hoist ☐	Standaid ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details		see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
		Additional Information:			

4. Move on / off bed pan

Hoist ☐	Maneuver ☐	Assistance ☐	Supervision ☐	N / A ☐
See No 2 Sit to Stand Transfers for details	Roll patient ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Person bridges ☐			

5. Move up / down bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details	Sliding sheets ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Monkey pole ☐	Additional Information:		
	Rope ladder ☐			

6. Lateral Transfer to / from trolley / bed

Hoist ☐	Handling Aids ☐	Assistance ☐	Supervision ☐	Independent ☐
See No 2 Sit to Stand Transfers for details	Rigid Transfer Board ☐	People: 1 ☐ 2 ☐ >3 ☐		
	Other (Please specify) ☐	Additional Information / Equipment (eg sliding sheets):		

7. Sit up over side of bed

Bed Rest ☐	Assistance ☐	Supervision ☐	Independent ☐
	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information /Equipment (eg rope ladder, swivel cushion):		

8. Into Bath or Shower

Equipment ☐	Handling Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
Shower ☐	Shower chair ☐	People: 1 ☐ 2 ☐ >3 ☐		
Variable / Fixed height bath ☐	Shower trolley ☐	Additional Information / Equipment (eg sling lifting hoist after risk assess):		
Bed bath ☐	Bathing hoist (eg Alenti) ☐			

9. Walking

No Walking ☐	Walking Aid ☐	Assistance ☐	Supervision ☐	Independent ☐
	see 'sit to stand transfers'	People: 1 ☐ 2 ☐ >3 ☐		
	Additional Information / Equipment (eg hoist with walking sling, dist. Walked):			

10. Other Instructions / Observations / Equipment Used

	4th Assessment	5th Assessment	6th Assessment
Recording Symbol:	/ Forward slash	X	Ã
Date Assessed:			
Assessor's signature:			
Proposed Review date:			

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref:
Job ID:
Date: 12/03/2024

20 Back Sneddon Street
Paisley
PA3 2DJ
07890424763
Telephone: 0300 300 1199 Option 2
www.nhsggc.org.uk

PRIVATE & CONFIDENTIAL

James Weir

Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear James

I have been trying to contact you to offer you ongoing support from ARDS

Can you call the above number to arrange an appointment that would be suitable for yourself to meet with us or call you.

If we do not hear from you, we may have to carry out a further visit for your welfare

Regards

Addiction Worker Annmarie

Renfrewshire Health & Social Care Partnership

Ref: SM/JM
CHI: 120 389 3450
Date: 19 February 2024

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment for 08.03.24 has been **RE-SCHEDULED** for you to be seen as follows:

Date:	**Friday 22-Mar-2024**
Time:	**10:30am**
Appointment with:	**ADRS Medical Officer Stephen McLaughlin**
Location:	**Back Sneddon Centre, 20 Back Sneddon Street, Paisley, PA3 2DJ**
Contact details:	**0300 00 1199 (Option 2)**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely

Team Medical Secretary

Chief Officer
Susanne Millar
Chief Officer

Glasgow Alcohol & Drug Recovery Services
Glasgow City HSCP
Kershaw Inpatient Unit
Gartnavel Royal Hospital
1055 Great Western Road
Glasgow
G12 OXH
0141 211 3546
www.glasgowcity.hscp.scot
www.glasgow.gov.uk
www.nhsggc.org.uk

CONFIDENTIAL
Dr Mackay/Dr Rizov
Glasgow Alcohol and Drug Recovery Services
Kershaw Inpatient Unit
Gartnavel Royal Hospital
1055 Great Western Road
Glasgow
G12 OXH

Date:

Referral to Tier 4

Dear Dr Mackay / Dr Rizov,

Re: James Weir	**DOB:12.03.1989**	**Address: 27d Macdowall street, Johnstone, PA58QJ**	**CHI: 1203893450**
Brief request details (reason for referral) Inpatient detoxification required due to daily alcohol misuse, reports to be drinking buckfast wine 15% daily. Experiencing regular withdrawals in the form of sweats, shakes, vomiting, blackouts, agitation, seizures, describes and also described symptoms of peripheral neuropathy in both hands.			
Addiction History Long standing history of alcohol misuse.			
Current Use 2 bottles of wine 15% most days, more if he can afford.		Historical Use Report he has been alcohol dependent for a number of years, been unable to maintain long term abstinence.	
☐ Drug user - Include date and results of most recent Urine/Saliva Drug Screen.			
☐ Smoker ☐ Nicotine Assessment included - Required for Inpatient admission			
Mental Health History			
Mental Health Diagnosis Depression.		Current/ Most recent presentation James presents as tearful, reports ongoing low mood has little motivation and experiences anxiety symptoms.	

Historical Mental Health issues
History of suicide ideation, self-harm intent. Previous involvement with crisis services and RCMHT. Recently referred to PCMHT.

Other care services involved at present or in past (CMHT, Social Work etc)

☐ Additional ADRS Mental Health Check included

Physical Health History

No physical health issues.

☒ Recent blood results included

(U&Es/LFTs/INR/Coag/FBC for IP admission, if relevant)
Yes, can be accessed on clinical portal.

BBV status (if known)

☒ Additional CAT Physical health check paperwork included (If relevant)

Yes, can be accessed on Emis web

All Current prescribed Medications (drug, dose, frequency)
Thaimine 50mg daily
Naltrexone50mg daily
Pabrinex injections one weekly.

Social History

Resides alone, long term unemployed, reports to manage all aspects of daily living. Reports to maintain contact with Mum and sister and has a few friends that he will maintain in contact with however prefers to be at home alone.

Risk James has a history of violence and aggression. Emis web indicated James has knives within his home and sleeps with them under his pillow.

	[x] Updated CRAFT Risk Screen available.
Summary and Aftercare Plan (if likely to be heading for Inpatient Admission)	
1. Refer to circle to increase social network, establish routine and structure, identify interest. 2. Signpost to AA 3. Refer to RCA trust.	
1	

Yours sincerely,

Annmarie Boyle
Social Worker
RADRS
Name:
0300 300 1199 option 2

Smoking is banned on NHS Greater Glasgow and Clyde property
Buildings, all vehicles and grounds

Read our Privacy Statement at www.glasgow.gov.uk/pri

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:	30/01/24	Time of Assessment:	

Personal Details			
Surname:	Weir	CHI Number:	3450
Forename:	James	Relationship Status:	
Dob:	12.03.1989	Sex:	Male
Age:	34	Referral Urgency:	Urgent
E-Mail Address:		Registered GP :	
Clients Address:	27 Macdowall street, Flat D	Practice Code:	
	Johnstone	Client Telephone No:	
Post Code:	PA5 8QJ	Client Mobile No:	07388825676

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	SW
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below;		
Consent to Referral:	Patient is aware of referral		
Brief History/Current Issues/Known Forensic History Risks:	Long standing history of low mood, anxiety, suicide ideation and self-harm intent. Previous involvement with IHTT and RCMHT. Significant trauma of childhood physical and adult sexual abuse. Diagnosed with ADHD and prescribed medication for this		

Service	**Assessment Required**
Network Services	Network Service Profile
Addictions	DAST/AUDIT
Doing Well	PHQ
CMHT	GAD7

Reason for Referral: James is experiencing low mood and anxiety symptoms and ongoing feelings of low self-worth and is experiencing identity issues. He reports to experience low motivation and has little energy to complete day to day tasks, such as washing and dressing, resulting in a gradual decline in his overall presentation, he is socially isolated and prefers to stay at home. James is currently prescribed medication for depression and ADHD from his GP, however does not feel this is helping and fees he would benefit from specialist support for his ADHD.

James reports as a child he was physically and emotionally abused on a regular basis by his care givers and later was sexually assaulted as a young adult in addition witnessing his chilldhood friends murder.
James is now reporting daily flashbacks and is tearful/ emotional most days.
James reports previous input from mental health services and is keen to reengage.
James has a history of alochol miuse however has recently undertook an alochol detoxification and is now prescribed Disulfiram.

Referred By: Annmarie Boyle
Location: RADRS, 20 back sneddon street, Paisley, PA3 2DJ
Designation: Social Worker
Contact Information/Number: 0300 300 1199 option2
Date Referred: 30/01/24

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk
Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Version 2, Dec 13

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:	30/01/24	Time of Assessment:	

Personal Details			
Surname:	Weir	CHI Number:	1203893450
Forename:	James	Relationship Status:	
Dob:	12.03.1989	Sex:	Male
Age:	34	Referral Urgency:	Urgent
E-Mail Address:		Registered GP :	Dr Sim
Clients Address:	27 Macdowall Street Flat D	Practice Code:	87305
	Johnstone	Client Telephone No:	
Post Code:	PA5 8QJ	Client Mobile No:	07388 825676

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	SW
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below;		
Consent to Referral:	Patient is aware of referral		
Brief History/Current Issues/Known Forensic History Risks:	Long standing history of low mood, anxiety, suicide ideation and self-harm intent. Previous involvement with IHTT and RCMHT. Significant trauma of childhood physical and adult sexual abuse.		

Service	**Assessment Required**
Network Services	Network Service Profile
Addictions	DAST/AUDIT
Doing Well	PHQ
CMHT	GAD7

Reason for Referral: James is experiencing low mood and anxiety symptoms and ongoing feelings of low self-worth and is experiencing identity issues. He reports to experience low motivation and has little energy to complete day to day tasks, such as washing and dressing, resulting in a gradual decline in his overall presentation, he is socially isolated and prefers to stay at home. James is currently prescribed medication for depression from his GP, however does not feel this is helping.
James reports as a child he was physically and emotionally abused on a regular basis by his care givers and later was sexually assaulted as a young adult. James is now reporting daily flashbacks and is tearful/ emotional most days.
James reports previous input from mental health services and is keen to reengage.

Referred By: Annmarie Boyle
Location: RADRS, 20 back sneddon street, Paisley, PA3 2DJ
Designation: Social Worker
Contact Information/Number: 0300 300 1199 option2
Date Referred: 30/01/24

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk
Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Version 2, Dec 13

Renfrewshire Health & Social Care Partnership

Alcohol & Drug Recovery Service
New Sneddon Centre
8 New Sneddon Street
PAISLEY
PA3 2AD

0300 300 1199 (option 2)

Date: 14/12/2023
Ref.: BC/DS
CHI: 120389-3450

PRIVATE & CONFIDENTIAL
James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

The following appointments have been made for you at attend the Pabrinex Clinic at New Sneddon Street Clinic, Paisley PA3 2AD as follows:

Date	**Time**
Thursday 4th of January	10.30am
Thursday 11th of January	10.30am
Thursday 18th of January	10.30am
Thursday 25th of January	10.30am
Thursday 1st of February	10.30am

Yours sincerely,

D. Stewart

Alcohol & Drug Recovery Service

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: BO/DS
Dictated: 08/12/2023
Date: 14/12/2023

PRIVATE & CONFIDENTIAL

Alcohol & Drug Recovery Service
20 Back Sneddon Street
Paisley
PA3 2DJ

0300 300 1199
www.nhsggc.org.uk

Dr UH Rehman
Alba Medical Group Renfrewshire
Erskine Clinic
Bargarran Centre
Erskine
PA8 6BS

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D, 27 Macdowall Street, Johnstone, PA5 8QJ

Diagnosis:	**Alcohol Dependent Syndrome F10.2** **Emotionally Unstable Personality Disorder** **Possible PTSD**
Current Medication:	**Thiamine 50mg qds by GP. Naltrexone 50mg once daily. To commence Pabrinex injections one weekly for five weeks commencing 04/01/2024**
Follow-up:	**08/03/2024 @ 10.30am**

I saw this gentleman in a face-to-face consultation for medical review at Back Sneddon Street Clinic on 08/12/2023.

His drinking behaviour essentially reduced slightly aided by Naltrexone since his last review.

There has been poor interaction with the ADRS and keyworker and he has missed Pabrinex appointments.

I note the surprisingly normal bloods from October (low folate only).

Today his BAL was 8. He was not under the influence or in withdrawal.

He was quite optimistic at times but feels “not ready” to stop drinking. He was given homework to compile a list of positives and negatives regarding abstinence and also a gratitude list (for example, it is clear that he has a loving, caring relationship with his sister, Debbie, and nephew, [redacted]).

I emphasised that his isolation is detrimental to both his general wellbeing and being able to plan ahead. He was reactive and articulate throughout. Smelling of cannabis.

PLAN
He agrees to attend for Pabrinex.

I have asked him to think about the timing of a detox by our next review, having completed his homework, and then I will see him again in three months' time.

Yours sincerely,

Brian O'Neill
Medical Officer

Authorised on 15/12/2023 09:38:32 by Brian O'Neill.

Renfrewshire Health & Social Care Partnership

Ref: **BO/DS**
CHI: **120 389 3450**
Date: **14 December 2023**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Friday 8th of March 2024**
Time:	**10:30am**
Appointment with:	**Brian O'Neill, Medical Officer**
Location:	**ADRS, 20 Back Sneddon Street Clinic, Paisley PA3 2DJ**
Contact details:	**0300 300 1199**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely,

Medical Secretary

Renfrewshire Health & Social Care Partnership

Christine Laverty
Chief Officer

Our Ref: BO/DS
Dictated: 09/10/2023
Date: 11/10/2023

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Alcohol & Drug Recovery Service
20 Back Sneddon Street
Paisley
PA3 2DJ

0300 300 1199
www.nhsggc.org.uk

Dear Dr Rehman,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, PA5 8QJ

Diagnosis:	**Alcohol Dependent Syndrome F10.2** **Emotionally Unstable Personality Disorder** **Possible PTSD**
Current Medication:	**Nil. Prescribed Thiamine 50ml qds by GP**
Follow-up:	**08/12/2023 @ 10.30am**

I saw this gentleman in a face-to-face consultation for medical review at Back Sneddon Street Clinic on 09/10/2023. He attends in moderately severe alcohol withdrawal. His BAL was zero. He last consumed alcohol at 10pm yesterday and feels he was doing the right thing by abstaining for this appointment.

He feels desperate and hopeless. He is drinking around 18 units of alcohol daily (in the form of *Buckfast*). He has tried self-tapering on a number of occasions. I note he has lost a significant amount of weight and most of his calories is alcohol presently. His tag will be removed on 28/10/2023 and this will provide him with greater options to help himself. I emphasised repeatedly not to stop drinking suddenly.

He will attend an AA Fellowship meeting in Elderslie on Friday.

Our plan was to attend for bloods, Pabrinex and ECG which I have ordered with a degree of urgency. I would ask his keyworker to refer him for consideration of a Kershaw detoxification from alcohol and an inpatient Disulfiram capture. We did discuss Disulfiram as a way of staying stopped.

The interview was truncated to allow alcohol consumption given that he has a history of withdrawal seizures. He refused assessment in A+E. I will review him again in two months' time.

Yours sincerely,

Brian O'Neill
Medical Officer

Authorised on 13/10/2023 12:25:15 by Brian O'Neill.

ID: 35

Male Years

Req. No. :

James Weir

1203893450.

20-10-2023 11:27:31

HR	: 64	bpm
P	: 102	ms
PR	: 114	ms
QRS	: 88	ms
QT/QTcBz	: 406/419	ms
P/QRS/T	: 61/69/42	°
RV5/SV1	: 2.011/0.858	mV

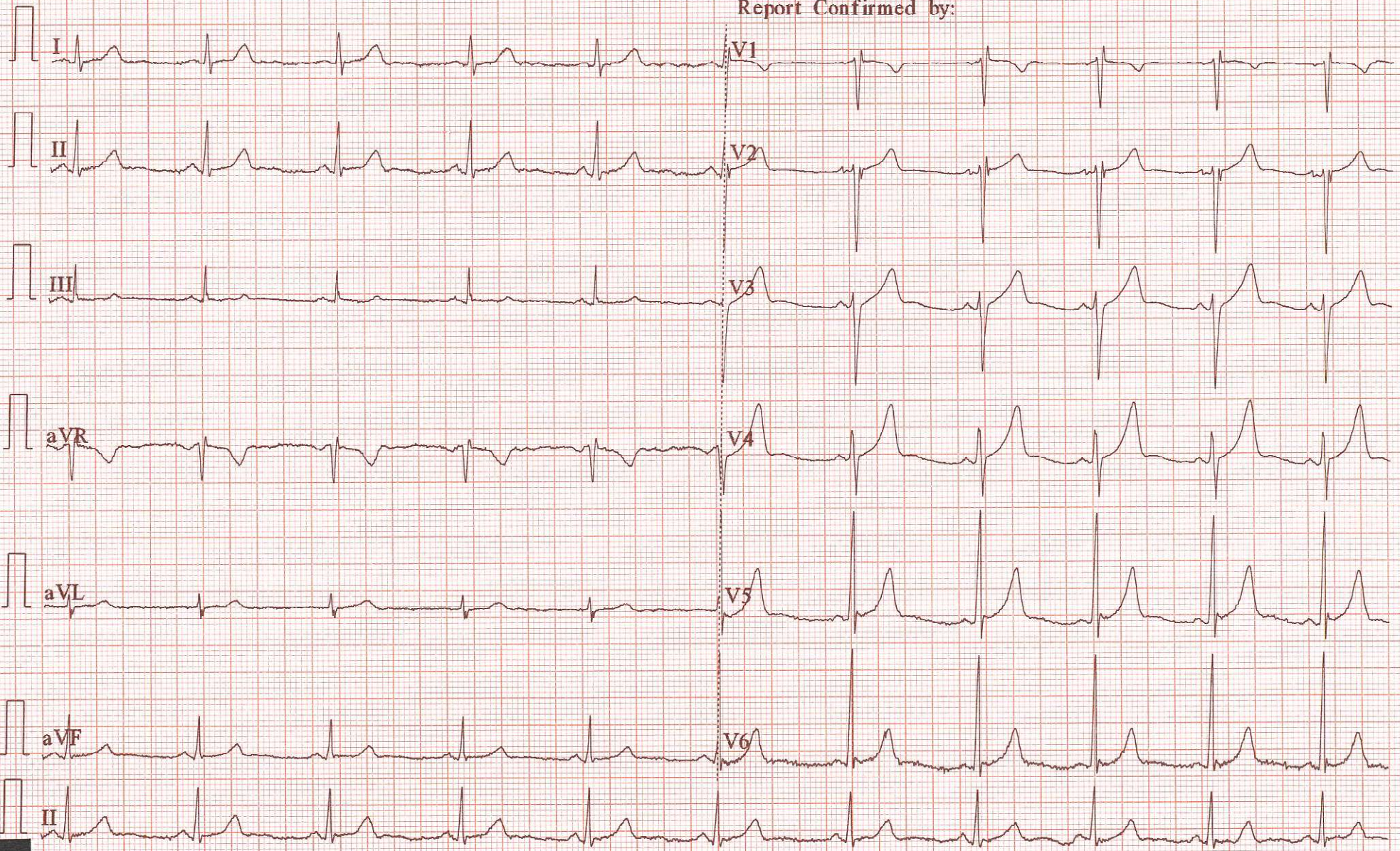
Diagnosis Information:

Sinus rhythm

rSr'(V1) - probable normal variant

Normal ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 2*5.0s+1r SE-1200Express V2.22 Glasgow V28.6.7

Renfrewshire Health & Social Care Partnership

Ref: **BO/DS**
CHI: **120 389 3450**
Date: **11 October 2023**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Friday 8th of December 2023**
Time:	**10:30am**
Appointment with:	**Brian O'Neill, Medical Officer**
Location:	**ADRS, 20 Back Sneddon Street Clinic, Paisley PA3 2DJ**
Contact details:	**0300 300 1199**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely,

Medical Secretary

Booked. Letter Voicemail 09/10/23

Renfrewshire ADRS

Back Sneddon Centre

20 Back Sneddon Street

Paisley

ECG Request – Cardiology Department – RAH

Date: 9/10/23.

Patient CHI: 1203893450

Patient Name: JAMES WEIR.

Patient Address: FLAT D.
27 MACDONALD St
JOHNSTONE
PA5 8QJ.

Reason for ECG:
? QTc prolongation.
? For disulfiram.

Referrer Name:
BRIAN O'NEILL
MO

James Weir 120 389 3450.
Urgent bloods - on Emis
+ Fabrinex course please

BW

Booked letter voicemail 09/10/23

Renfrewshire Health & Social Care Partnership

Ref: ECG/JM
CHI: 120 389 3450
Date: 9 October 2023

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Friday 13-Oct-2023**
Time:	**11:30am**
Appointment with:	**ADRS ECG CLINIC**
Location:	**New Sneddon Street Clinic, 8 New Sneddon Street, Paisley, PA3 2AD**
Contact details:	**0300 300 1199 (Option 2)**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely

Team Medical Secretary

Renfrewshire Health & Social Care Partnership

Ref: BLOODS/JM
CHI: 120 389 3450
Date: 9 October 2023

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 17-Oct-2023**
Time:	**12:40pm**
Appointment with:	**ADRS BLOOD CLINIC**
Location:	**Back Sneddon Street Clinic, 20 Back Sneddon Street, Paisley, PA3 2DJ**
Contact details:	**0300 300 1199 (Option 2)**

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

Yours sincerely

Team Medical Secretary

Renfrewshire
Health & Social Care
Partnership

Ref: **BO/DS**
CHI: **120 389 3450**
Date: **19 September 2023**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir,

A follow up appointment has been made for you to be seen as follows:

Date:	**Monday 9th of October 2023**
Time:	**11:00am**
Appointment with:	**Brian O'Neill, Medical Officer**
Location:	**ADRS, 20 Back Sneddon Street Clinic, Paisley PA3 2DJ**
Contact details:	**0300 300 1199**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely,

Medical Secretary

Renfrewshire Health & Social Care Partnership

Ref: PABRINEX/JM
CHI: 120 389 3450
Date: 9 October 2023

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Thursday 12-Oct-2023**
Time:	**11:30am**
Appointment with:	**Adrs Pabrinex Clinic R RenDrug Service ADRS PABRINEX CLINIC**
Location:	**New Sneddon Street Clinic, 8 New Sneddon Street, Paisley, PA3 2AD**
Contact details:	**0300 300 1199 (Option 2)**

If you are attending an appointment with a doctor clinic, 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.

Yours sincerely

Team Medical Secretary

TELEPHONE REFERRAL FORM

Referrer Name	NUS 2k	**Contact Number**	07814953330
Date:	170623	**Time:**	2304
Police Incident No & Shoulder No:	5218 PC Edgar K275	*(If applicable)*	
Patients Name:	James Weir		
D.O.B:	120389	**Tel No:**	07388825676
CHI	1203893450		
Address:	Flat D, 27 MacDowall St Johnstone	**Postcode:**	PA5 8QJ
Temperature (if appropriate)			

Do you wish to receive feedback following the completion of the MHAU assessment? (ED Referrals only)	**Yes**	**No**
Friend/ relative accompanying patient N.B Covid restrictions apply to 1-2 person only	Yes	
If assessed as appropriate for transfer to MHAU- safe method of transport :	Taxi	
	Ambulance	
	Police	
	Own Transport	
Primary Language:		

Mental Health triage and risk assessment tool completed (from ED only)	Y	N
Medically fit for transfer?	Y	N
Ability to engage in assessment (drugs/alcohol intoxication)?	Y	N
Are there any Covid symptoms evident?	Y	N
Has the patient disclosed possible overdose?	Y	N
Any minor wounds requiring treatment?	Y	N
Glasgow Coma Scale below 15 (ED/SAS Only)	Y	N

Presenting Complaint: *Please tick only one box*

Episode of Self Harm		Other Mental Health Issues		Alcohol/ Drugs	
Addiction Issues		Social Stressors/ Distress			

Presentation/comments:

Case no 7012987.

Outcome of Assessment	**Contact Type**	Telephone		Face to face	

refused to engage in assessment via phone. Invited for face to face. Hostile and aggressive alcohol consumed.

Alcohol/Drugs Involved			**Y**	**N**
Time In		Time Assessed		Time Left	

Completed by: [illegible] **Date:** 18/6/23. **Time:** 0105

CIRCLE Discharge Form

To be completed by allocated Recovery Worker and counter-signed by CIRCLE Service Lead

Client Name:	James Weir	**CHI:** **ECLIPSE ID:**	1203893450
Date Opened to CIRCLE:	29/06/2022 **Referred by:**	Omar Ul-Haq	
Allocated Worker:	Emma McFarlane	**Co-worker/Service:**	N/A

If unallocated give reason:

Is Client open to Psychology/OT? ☐ **Yes** **No X** **Note: (If yes, case should not be closed to CIRCLE)**

Open active referrals at time of proposed closure	**Consultation/Action taken with services pre-closure**
Children and Families (C&F) ☐	
Criminal Justice ☐	
Occupational Therapy/ Psychology ☐	
CMHT/Mental Health/Crisis Services ☐	
Other Services (Police/Social Work etc) ☐	

Service user has current relationship recorded within ECLIPSE/EMIS with Child/Children: Yes ☐ **No X** ☐ **N/A** ☐

	Child ECLIPSE ID:	**Childs Name:**	**Open to C&F Service:**
Child 1 age:			**Yes** ☐ **No**
Child 2 age:			**Yes** ☐ **No**
Child 3 age:			**Yes** ☐ **No** ☐
Child 4 age:			**Yes** ☐ **No** ☐

Details of worker and treatment contact prior to case closure (including issues with regard to child/children):

Reason for Discharge: (as recorded on EMIS and Eclipse by Recovery Worker)		**COMMENTS**
Recovery plan met	☐	
Volunteering/education/employment	☐	
Referred to more appropriate service/area	☐	
Declined service involvement	☐	
Requested discharge	**X**	**Requested discharge. Not the right time for engaging.**
No contact despite assertive outreach	☐	
Moved to new local authority	☐	
Prison admission for more than 6 months	☐	
Client has died	☐	

Has Client been referred on to other Team or Service? Yes ☐ **No X**(Provide details/outcome of referral)

Did CIRCLE make a referral on for child/children **Yes** ☐ **No X** (Provide details/outcome of referral)

Sections below to be completed by CIRCLE Service Lead:

Discharge not NOT approved by Service Lead(s) for following reasons and recommended action:

Discharge Date Approved by Service Lead(s)	**Signature/Name of Service Lead approving discharge**
27.06.23	**D Kennedy**

Has a final observation /consultation – giving reason(s) for discharge been entered by Recovery Worker on:

EMIS **Yes** ☒ **No** ☐
ECLIPSE **Yes** ☒ **No** ☐

Referrer and Client have been notified of discharge by Recovery Worker by:

Telephone call by Recovery Worker ☒
Discharge Letter ☐
N/A – Client has died ☐

Note: Circle Service Lead to upload the agreed and completed discharge form to EMIS, notify Business Support to close to worker on ECLIPSE and Recovery Facilitator to be advised to update CIRCLE Client Database.

Our Ref: MHAU
Job ID: 100331402
Date: 20/06/2023

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
McLeod Centre
Leverndale Hospital
510 Crookston Road
Glasgow
G53 7TU
0141 211 6627 EXT: 46627
www.nhsggc.org.uk

Dear Dr Rehman

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

The above named person was referred to the Mental Health Assessment Unit (MHAU), Leverndale by NHS24 Mental Health Hub, and was briefly assessed by telephone on 18/06/2023.

Assessment

Return call to James, initially stating he didn't want to talk and he didn't know why he was receiving a call. Difficult to ascertain why he had called services. He reports Police Scotland were at his house earlier this evening and made him contact NHS24 but had left him at home himself. They were at his house earlier due to a neighbour flooding his bathroom. He reports to not coping for 6 months. Unable to elaborate on answer continually stating he doesn't trust anyone. James denied any alcohol tonight stating the last time he had a drink was last Wednesday. Last used Cannabis 10 days go. James was tearful throughout call stating he no longer wished to go on. He would not disclose plans or intent to harm himself. Spoke with Senior staff and it was decided that a trained member of staff would call him back. James in agreement that he would be willing to wait for a return call.

Recommendation

James in agreement for a trained member of staff to call him back.

Yours sincerely

Laura Crossan
Associate Unscheduled Care Nurse
Authorised on 20/06/2023 12:16:32 by Typist Donna Farmer, not verified by Lorraine Kirk.

Our Ref: MHAU
Job ID: 100331417
Date: 20/06/2023

PRIVATE & CONFIDENTIAL

Dr UH Rehman
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
McLeod Centre
Leverndale Hospital
510 Crookston Road
Glasgow
G53 7TU
0141 211 6627 EXT: 46627
www.nhsggc.org.uk
mailto:adultautismteam@ggc.scot.nhs.uk

Dear Dr Rehman

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

The above named person was referred to the Mental Health Assessment Unit (MHAU), Leverndale by NHS24 Mental Health Hub and Police Scotland, and was briefly assessed via telephone and then invited to Assessment Unit for face to face assessment on 18/06/2023.

Assessment

Initially James hostile and argumentative on the phone. Stating he was not getting support for his mental health. Stating he was annoyed at wrier asking questions and demanding help. Advised writer was trying to help him and assessing him to establish what support he needs. Stated this is 'shite'. Shouting and hostile towards writer. Stated he did not want to continue with assessment as he was unhappy with questions being asked. Passed phone to Police. Invited to unit for face to face assessment. When James arrived at unit he continued to be argumentative and hostile. Blamed his ADHA and had not taken his medication. Reports he was raped and his sister was raped by a befriender. James also reports he has been attempting to get help with his mental stated from his GP. Advised he has been in contact frequently. When asked when he last spoke with his GP. Stated he last spoke with his G 18 months ago. Appeared in consistent and not telling staff what was troubling him or what support he felt he needed. Remained argumentative and sabotaging assessment process. Poor engagement with assessment and unable to identify risks. James walked out of unit shouting at staff and Police. Police took James home.

Recommendation

Will contact Renfrewshire ADRS to make aware of contact.

Risk

Risk of increased alcohol use.

Yours sincerely

Lorraine Kirk
Unscheduled Care Nurse
Authorised on 20/06/2023 12:26:35 by Typist Donna Farmer, not verified by Lorraine Kirk.

CHI No:	120 389 3450	**Date:**	18/06/23
Surname:	Weir	**Date of Birth:**	12-Mar-1989
First Name:	James	**Gender:**	M
Address & Post Code:	Flat D 27 Macdowall Street Johnstone Renfrewshire PA5 8QJ		
Phone No:	07553015425	**Legal Status (MHA, AWI, Guardianship):**	Informal
Ethnicity:	White: Scottish - Scotland ethnic category 2011 census	**Nationality:**	Scottish
Consent to sharing info:	yes		
Communication needs:			
Next of Kin / Carer contact details:	*Carer contact details listed below:*		

Alerts *(history of violence, offending history)*
History of verbal aggression and hostile behaviours towards health care workers. History of having weapons.
Reason for referral *(referrer's reason[s] for requesting assessment)*
James initially contacted NHS 24. Referral received by MHAU Leverndale. James told a senior member of staff would contact him. He then contacted the council to advise he was suicidal. The council contact police due to concerns for James mental state. PC Edgar then referred James to MHAU Leverndale. Staff explained James was due a call back from staff.
Reason for attendance *(Description of individuals main concerns, their perceptions of difficulties and hopes from the service)*
James stated he has been struggling with his mood for past 18 months and feels he can no longer cope. Became hostile and argumentative over phone. Refused to engage in assessment process and stated he didn't trust writer and only wanted to talk to his sister. Sttaed assessment was 'shite' and becoming more disgruntled with writer. Writer asked James to pass phone back to police. Advised Jmaes was not engaging in assessment. Police stated they were unable to leave him. Jamers then invited dien to unit for a Face to face. James assessed by SUCN Evah Korsah and UCN Lorraine Kirk. James initially hostile and argumentative. Blames his behaviour on his ADHD and advised writer to look up ADHD. Not engaging in assessment, stated he was 'forced' to attend assessment by police. Later stated he was seeking support but unable to get support as no one was taking him seriosly. Advised he has been raped by a befriender and his sister was also raped. Unable to specify what his issues were to get support. Stated it wad 'everything'. Sttaing he hasn't washed in 3 years and is unable to leave his house due to his firnec being murdered and he is

having to 'watch his back'. Becoming irratable and raising his voice during assessment and statting he does not want to be assessed by nurses and wants a doctor or psychologists to assess him. Dismissuve of staff.
Psychiatric history *(previous/ongoing mental health problems, diagnoses and interventions, via GP or mental health services, and their impact; h/o self harm/attempted suicide; previous admission/detentions)*

Current medication details as given by individual *(prescribed, over-the-counter, complementary, drug allergies)*

Medication	**Dose**	**Frequency**	**Duration**	**Response**

Allergies:			
Dispensing frequency:		**Medication concordance:**	

Any children/ dependents under the age of 18?

	Child 1	**Child 2**	**Child 3**	**Child 4**
Name				
Age				
Address if different:				
Child protection concerns/agencies involved:				

Impact of mental health on parenting and/or potential risk to children:
Description of functioning before current difficulties:

Substance use: *(caffeine, alcohol, tobacco, non-prescribed drugs, novel psychoactive substances)*	
Pattern of current use	Alcohol .Reports having an alcohol problem for past 20 years
Impact on individual	

Previous history	
Mental State Examination:	
Appearance	Slim man with beard. Dressed causually. No evidene of self neglect.
Behaviour	Hostile and irritable in manner. Not engaging in assessment but vocal about requiring support.
Mood & Affect	Disgrunlted and appeared angry at times. States he feels he cant cope and his head is going to explode.
Speech	Shouting at staff. No concerns regarding rate or rhythm. Angry in tone.
Thought form	No evidence of thought disorder or other abnormalities.
Thought content	States he needs support for his mental health. Unable to identify what support he needs or why he needs support. Not engaging in assesmsent process. Angry and hostile. Shouting at staff and police. Advised he had 1/2 bottle of buckfast.
Perceptions	No evidence of any perceptual difficutlies.
Cognition	Appeared orientated to time, person and place. Not formally assessed, Appears under influence of alcohol.
Insight	
Carers / Next of Kin / others views, concerns and expectations from services	
Additional notes:	

Summary

Name: WEIR, James (Mr)		**CHI:** 120 389 3450	
Summary of assessment *(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)*			
James is a 34 year old male who has a			
Overall impression of risk *(CRAFT to be completed separately)*			
Immediate actions *(including information provided)*			
Outcome of MDT discussion/ Treatment plan *(including follow up arrangements if relevant)*			
Primary Diagnosis:			
Any additional diagnoses:			
Suitable for psychological therapies (Y/N):			
Name:		**Designation:**	
Signature:		**Date:**	

Renfrewshire Health & Social Care Partnership

CIRCLE

81 Glasgow Road
Paisley
Renfrewshire
PA1 3PE

Tel: 0300-300-1199 (Option 2 then 4)
Email: ci.circle.recovery@nhs.scot

Strictly Private & Confidential **Date: 8th June 2023**

James Weir
27 MacDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

We are writing today to wish you well in your onward recovery and offer you the opportunity to contact the service in future should you require any further support.

We would ask that you contact the service within 7 days if you still require support at this time.

If we do not hear from you, within this time, your case will be closed to CIRCLE; however, should you wish to engage or be referred in future please do contact us.

Yours sincerely,

Derek Kennedy
Team Lead
Renfrewshire Alcohol and Drug Recovery Service

Detailed Print

Case Details:

Case No.	User Description
7012987	Bradley Farrant (Pwp Call Taker) ()

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07388 825676
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Rehman,Usman(A72)
Surgery: Quarryside Medical
Confidential: True

Tel:

Bradley Farrant (Pwp NHS 24 Assessment

Start Time: 17/06/2023 22:28
End Time: 17/06/2023 22:57

MHA. RIGHT NOW

Clinical summary created by: Bradley Farrant (Pwp Call Taker) () [17/06/2023 22:57:28]
Reason for call: MHA. RIGHT NOWConfirmed Symptom(s):
Endpoint Management Selected (CT)

History and Mental state:
Medication: AS PRESCRIED
RAG History and mental state: Amber
Main problem: SUICIDAL
Engagement with services: HOUSING OFFICER WAS SPOKEN TO LAST WEEK - PT AGREED TO CALL THEM ON MONDAY MORNING

Suicide or self-harm:
RAG Self-harm: Green
RAG Suicide: Green
Self-harm risk: NIL
Suicide risk: PT HAS NOT HARMED THEMSLEVES

Risk from substance misuse:
RAG Risk from substance misuse: Green
Substance abuse risk: NIL

Detailed Print

Case Details:

Case No. **User Description**
7012987

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07388 825676
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Rehman,Usman(A72)
Surgery: Quarryside Medical
Confidential: True

Tel:

Call Detail(s):
Clinical supervisor: D MCPEAKE
Call reason: Suicidal thoughts
17:06:2023 22:59:59 FARRANTB.. SUICIDAL THOUGHTS. PT STATES THEY HAVE A PLAN AND WOULD NOT TELL ME THIER PLAN. POLICE ARRIVED 20 MINS AGO DUE TO PT STATING HE WOULD KILL HIS NEIGHBOUR IN A PREVIOUS CALL... PT STATED THEY HAD THOUGHTS TO HARM NEIGHBOUR STILL BUT WOULD NOT ACT ON THESE. PT WAS VERY UNCLEAR ABOUT HIS INTENT TONIGHT. AFTER MUCH DELIBERATION PT OPENLY STATED THEY WERE SUICIDAL AND WERE UNSURE IF THEY WOULD BE SAFE MOVING FORWARD... PT STATED A CPN 2 WOULD BE TOO LONG AND THEY WOULD NOT MANAGE THIS TIME PT THEN AGREED TO STAY SAFE UNTIL DW D MCPEAKE. CPN 1.. PT WAS UNCLEAR ABOUT A PLAN BUT WAS ADAMENT THAT THEY WOULD NOT BE SAFE. CPN 1..
Outcome: CPN (Dr) to phone patient within 1 Hr

Case type set to Mental Health
Start Time: 17/06/2023 23:02
End Time: 17/06/2023 23:02

Priority On reception set to within 1 hour
Start Time: 17/06/2023 23:02
End Time: 17/06/2023 23:02

Non-disclosure set to True
Start Time: 17/06/2023 23:02
End Time: 17/06/2023 23:02

Case status set to COMPLETE
Start Time: 17/06/2023 23:02
End Time: 17/06/2023 23:02

Special Patient Notes

PRIVATE and CONFIDENTIAL

Date: **18th April 2023**

Mr James Weir
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir,

I would like to offer an appointment to see you on:

Date: **Thursday, 27th April 2022**

Time: **2pm**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on **0300 300 1199 (Option2, Option 4)** to let me know.

Yours sincerely,

Pauline Flanagan
Recovery Worker

Care Manger	Worker requesting Px		Pharmacy Address & Postcode	EMIS updated before making request?	COMMENTS	Team Leader (print sheet, date & sign as agreed for prescriber)		
Fiona Connar	Fiona Connar		Well pharmacy Quarry Street.	Yes No	request for Naltrexzone to assist with continued reductions and abstinence from alcohol, patient advised prescribed this previously and believe it helped.	Denise Johnston	ADMIN Please notify Prescriber / MO for signing as soon as printed	All completed Pxs should be filed in folder

DATE Prescription Starts	EVENT CODE	CLIENT NAME	Patient CHI NUMBER	Cows Score	When last used drugs?	Urine result on EMIS	Face to Face Y/N & when	MEDICATION (delete as apropriate)	No of DAYS	DOSE	REASON CODE	INSTALLMENT WORDING	Prescriber agreeing to request (Sign & date for admin)	PRESCRIPTION NUMBER	Admin Worker Printing Px (Sign & date)
21/03/2023	2	James Weir	120 389 3450					Naltrexzone	for run		1	As directed by medic	Bd. Naltrexone 50mg one daily (months)		
		2113 >							210.						

Contact Event Codes:
1 - Clinic 2 - Duty 3 - New Patient Clinic

Fill all pink sections and Email saved copy to line manger or in their absence to the Duty Team Lead to check

Reason code:
1 - Restart 2 - Not forward planned 3 - DNA 4 - Prison release 5 - Change to script 6 - New Patient 7 - Pharmacy change 8 - Client moved
9 Holiday Px 10 - Px Lost by client 11 - Hospital Discharge 12 - Titrating 13 - Admin / System error (please state details) -

PRIVATE and CONFIDENTIAL

James Weir
27 MacDowall Street
Flat D
Johnstone
PA5 8QJ

Date: 21st February 2023
Ref: PER 3970

Dear James

I would like to offer an appointment to see you on:

Date: **1st March 2023**

Time: **3 p.m.**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on: 07929718478 to let me know.

Yours sincerely,

Pauline

Pauline Flanagan
Recovery Support Worker

Renfrewshire Health & Social Care Partnership

Renfrewshire Alcohol & Drug Recovery Service Referral Form

By ticking the box below, I confirm that I (the client) consent to the information and data provided in this form be shared with Renfrewshire ADRS and with other partner services when required.

I agree to give my consent as per the above statement ☐

Please note that we will endeavour to provide assessment and treatment within 21 days of the referral being received.

Client's Personal Details							
Title:	Mr	**First Name:**	James	**Surname:**	Weir		
DOB:	12.03.1989	**CHI No:**		**ECLIPSE ID:** **SWIFT:**	PER3970 9000025		
Home Address:	Flat D, 27 Macdowall Street, Johnstone,			**Postcode:**	PA5 8QJ		
Type of accommodation:	Council property, lives alone						
Mobile No:	07553 015425	**Home Telephone No:**					
Email Address:	N/A						
Ethnicity:	White/British	**Religious/cultural:**	N/A				
Disabilities:	N/A	**Mobility Issues:**	☐ **No** ☐				
Is the client a war veteran?	☐ **No** ☐	**Is the client a carer?**	☐ **No** ☐				
Is a referral to Advocacy Services required?	☐ **No** ☐						
Are there any concerns relating to violence or aggression?	☐ **No** ☐						
If yes, provide further information:							
Next of kin:		**Telephone No:**					

Referrer Details			
Self-referral:	☐ **No** ☐		
Name:	Catherine O'Hara Community Payback Officer	**Address:**	Abbey House 8 Seedhill Rd, Paisley
Contact No:	[redacted]	**Email:**	[redacted]
Relationship to the individual:	Community Payback Officer		
Service/Organisation	Community Payback Team		
Is the individual aware that the referral has been made?	**Yes** ☐ ☐		
If no, explain why:			

Reason for Referral			
Type:	**Drug** ☐ **Alcohol** ☐ **Both** ☐*		
Substance use: (Please select all that apply)	**Heroin** ☐ **Benzos** ☐ **Cocaine** ☐ **Amphetamines** ☐ **Prescribed** ☐ **Psychoactive substances** ☐ **Cannabis** ☐* **Codeine/over counter** ☐ **Other** ☐ **Alcohol**_____		
Additional information	Self medicates with cannabis and alcohol.		
Quantity/Dose	Frequent, regular, consistent use.		
Frequency			
Administration of use	**Injecting** ☐ **Oral** ☐ **Smoke** *☐ **Snort** ☐ **Buzz** ☐ **Other** ☐		
Is there a history of overdose?	☐ **No** ☐	**If yes, provide detail:**	
Has the client had a BBV or dry blood spot test done?	☐ **No** ☐* **Not known**	**Has the client been given naloxone?**	☐ **No** ☐*
Does the client require condoms/birth control	☐ **No** ☐*	**Does the client require needs or foil?**	☐ **No** ☐* **If yes, provide quantity:**
Have you discussed recovery options with the client (i.e. Recovery Hub)?		**Yes** ☐* ☐	
If yes, provide details:	Currently allocated to Pauline Flanagan, Circle Recovery Hub		

Adult & Children Protection			
Does the client have any contact with children?	☐ **No** ☐*		
If yes, provide the following details:			
Name of the child /children:		**DOB:**	
Address:		**Postcode:**	
Relationship to the child/children			
Is the child/children open to Social Work?	**Yes** ☐ **No** ☐		
Name of health visitor (if under 5)		**Name of school (if applicable):**	
Is there adult protection?	**Yes** ☐ * ☐	**Is there child protection?**	☐ **No** ☐*
Is there public protection (MAPA)?	☐ **No** ☐*	**Is the child/children care experienced?**	**Yes** ☐ **No** ☐
Is the client pregnant?	☐ **No** ☐*	**Is support for domestic violence required?**	☐ **No** ☐*

For staff: Refer to domestic violence process if support is required.
Liaise with Children's worker if open to Children & Families.

Mental Health			
Is the client open to Mental Health Services?	☐ **No** ☐ **Previous involvement**	**Name of consultant psychiatrist:**	Dr Kaur
Name of service/worker contact details			
Diagnosis (if applicable):	Psychosis		
Medications prescribed (if applicable):	Mirtazapine		
Has the client experienced any thoughts of suicide?	**Yes** ☐ * ☐	**If yes, provide detail (dates, times):**	Recent and ongoing thoughts of suicide.
Is there a history of suicidisation?	**Yes** ☐ * ☐	**If yes, provide detail:**	

For staff: Administer ASSIST training as appropriate.

GP Details				
GP Practice:	Quarryside Practice			
Address:	Linden Medical Centre Johnstone		**Postcode:**	
Telephone (day):	01505 321733	**Telephone (night):**		
Details of prescribed medication:	Thiamine, Olanzapine, Folic Acid,			

Other Agencies	
Are there any other agencies involved? (Childrens Services, Home Care, Voluntary Services, Justice Services etc)	**Yes** ☐* **No** ☐
If yes, list which services:	Community Payback Team
Contact details (if applicable):	48-50 Wallnuek Rd, Paisley, PA3 4BT 0141 618 4768
If subject to any orders or legislation please detail (CP, CPO, ASP, AWI etc):	Community Payback Order imposed on 06.10.2022 to complete 90 hours of Unpaid Work within 12 months.

Communication			
Client's preferred initial method of Communication	**Telephone** ☐* **E-Mail** ☐ **Letter** ☐* **Other** ☐ _____		
Preferred language:			
Interpreter required?	☐ **No** ☐	**Sign language required?**	☐ **No** ☐
Is the client able and willing to use NHS Near Me (Attend Anywhere) as a means of communicating?		**Yes** ☐ ☐	
Does the client have any literacy problems?		**Yes** ☐ ☐ Dyslexia	

Please provide any other relevant information here:

James reports previous involvement with ADRS and was allocated to Omar Ul_Haq.
James advises that he struggles with daily living skills and avoids leaving home. He relies on cannabis and alcohol to self medicate. He also informed that he benefitted from previous medication prescribed by ADRS. He also experiences issues in relation missing items from his prescription and struggles to contact/discuss with his GP.

Date:____23.01.2023_____

Print Name:__JAMES WEIR_____

Signature:_PP  _____

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

Our Ref: BON/AOC
Job ID: 100203304
Date: 12/09/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

20 Back Sneddon Street
Paisley

PA3 2DJ
Phone No: 0300 300 1199
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Date of Assessment/Appointment:	**7th September 2022**
Type of Assessment:	**Medical Review**
Diagnosis:	**Alcohol Dependence Syndrome F10.2** **Emotionally Unstable Personality Disorder** **Possible PTSD**
Current Medication:	**Thiamine 50mg qds** **Naltrexone 50mg once daily**
Follow-up:	**2 months' time**
Management and Plan	
Discharge	

This gentleman did not attend a face to face consultation for medical review with myself at New Sneddon Street Clinic on 7th September 2022.

He has an ongoing diagnosis of alcohol dependence syndrome, EUPD and possibly PTSD.

He was seen by myself on 8th June 2022 for review prior an inpatient Kershaw detoxification from alcohol. He took his own discharge against medical advice. His present drinking status is uncertain

but admits to relapse 3 weeks ago. There are consistent complaints of low mood but no suicidal intent. On perusing EMIS records there has been no medical interventions recorded. I note that he was referred to RCA for support and we will reappoint him in couple of months.

Yours sincerely

Brian O'Neill
Medical Officer

Authorised on 23/09/2022 11:00:20 by Brian O'Neill.

PRIVATE and CONFIDENTIAL

James Weir
27 MacDowall Street
Flat D
Johnstone
PA5 8QJ

Date: 19th December 2022
Ref: PER 3970

Dear James

I would like to offer an appointment to see you on:

Date: **5th January 2023**

Time: **2 p.m.**

Location: **CIRCLE, 81 Glasgow Road, Paisley, Renfrewshire, PA1 3PE**

I look forward to seeing you then. If you are unable to attend, I would be grateful if you could contact me on: 07929718478 to let me know.

Yours sincerely,

Pauline

Pauline Flanagan
Recovery Support Worker

Referrals for patients to go on EMIS RDS

Name	James Weir
Date of Birth	12/03/1989
CHI	120383450
GP	Quarryside Medical Centre
Client Address	27 MacDowall Street Johnstone PA5 8QJ
Phone Number	
Referral Date	09/11/22
Referral Source	ADRS Core

To have a referral added to EMIS please fill out this document and send it to:-

Yvonne.McFarlane@ggc.scot.nhs.uk and Heather.Herbison2@ggc.scot.nhs.uk

Furthermore could the following be copied into the email:-Jacqueline.Leiper@ggc.scot.nhs.uk, ailsa.boyle@renfrewshire.gcsx.gov.uk and addictions.sw@renfrewshire.gcsx.gov.uk

Chief Officer
Susanne Miller
MA (Hons) CQSW

Alcohol and Drug Recovery Services
Glasgow City HSCP
The Kershaw Unit
Gartnavel Royal Hospital
1055 Great Western Road
Glasgow
G12 0XH
Phone 0141 211 3546
Fax 0141 211 3554

www.glasgowcity.hscp.scot
www.glasgow.gov.uk
www.nhsggc.org.uk

CHI: 1203893450
Ref: KMcC/TS

Dictated: 23 July 2022
Typed: 25 July 2022

Dr J Sim
Quarryside Practice
Linden Medical Centre
25 Floors Street
Johntone
PA5 8PZ

Dear Dr Sim

==========
DISCHARGE SUMMARY
==========

JAMES WEIR – DOB 12.03.89
FLAT D, 27 MACDOWALL STREET, JOHNSTONE, PA5 8QJ

Date of admission:	**28 June 2022**
Date of discharge:	**9 July 2022 (discharged against medical advice)**
Ward:	**Kershaw Inpatient Unit, Gartnavel Royal Hospital**
Consultant:	**Dr Rizov**
Status	**Informal**
Diagnosis:	**Alcohol Dependence Syndrome (F10.2)** **ADHD** **PTSD** **Emotionally Unstable Personality Disorder**
Medication on discharge:	**No medication was provided to the patient as he left the ward against medical advice**
Follow-up plans:	**Local ADRS team were notified of his early discharge from the ward**

Cont/…

Smoking is banned on NHS Greater Glasgow and Clyde property, including all buildings, all vehicles and grounds.

Glasgow - Proud Host City of the 2014 Commonwealth Games

Read our Privacy Statement at www.glasgow.gov.uk/privacy

I have reviewed the IDL generated on 23 July 2022. This letter covered the patient's admission from 28 June 2022 to his early discharge on 9 July 2022 (discharged against medical advice). I have no new information to add to this letter. I note from his electronic care records that his community team have successfully been in contact with Mr Weir. Should you require any further information please do not hesitate to get in contact with the ward.

Yours sincerely



Kirstine McCrae
Advanced Nurse Practitioner in Addiction Psychiatry
On behalf of Dr Assen Rizov, Consultant Psychiatrist

Ref: BON/JRP
CHI: 120 389 3450
Date: 4 July 2022

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**07-Sep-2022**
Time:	**2:30pm**
Appointment with:	**Dr. Beate Beck-Schwahn - SD1**
Location:	**New Sneddon Clinic, 8 New Sneddon Street, Paisley, PA3 2AD**
Contact details:	**0300 300 1199**

If you are attending an appointment with a doctor clinic, 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.

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

RENFREWSHIRE ADRS PHYSICAL HEALTH ASSESSMENT

NAME	DATE	CHI No
James Weir	13/6/22	1 3 0 8 8 9 3 4 5 0
ASSESSOR	*If prescribed Antipsychotics please use and upload the Glasgow Antipsychotic Side Effect Scale to EMIS*	**GP/Practice**
Ashley Barclay		Dr Sim
BP 124/78	**Height** 5"10	**Alcometer Reading**
Pulse 68	**Weight** 615 kg	**Weekly Units** *(Supply diary)* 20+
Temp	**BMI**	**Last time used Alcohol** Yesterday
Resps	**Waist Circ.** *(Aim 35" females, 40" males)*	BMI = (weight ÷ height) e.g. (70kg ÷ 1.75m) = **40** Then (answer ÷ height) = **BMI** e.g. (40 ÷ 1.75) = **22.9** **Aim for BMI of 18.5 to 24.9 - Give dietary and exercise advice**
O2 Saturation		*If prescribed Acamprosate reduce dose if under 60kg*

Have you any Known Allergies?	*Penicillin* ☐ *None reported* ☐ None
Urine Drug Screen ☐ **Oral Drug Screen** ☐ **Multistix Test** ☐	*No drugs detected* ☐ *No abnormalities detected* ☐ *Methadone* ☐ *Opiates* ☐ *Buprenorphine* ☐ *Cocaine* ☐ *Amphetamines* ☐ *Benzodiazepines* ☐ **COMMENTS**
How do you feel your current health status is?	Not good. Breathing *No problems reported* ☐

Do you have any family history of health problems	Details	COMMENTS
☑ Yes ☐ No ☐ Don't know	Cardiac, ☑ *Parent* ☑ *Grandparent* ☑ *Sibling* ☐ Respiratory, ☑ *Parent* ☐ *Grandparent* ☐ *Sibling* ☑ Renal, ☐ *Parent* ☐ *Grandparent* ☐ *Sibling* ☐ Diabetes, ☐ *Parent* ☐ *Grandparent* ☐ *Sibling* ☐ Epilepsy. ☐ *Parent* ☐ *Grandparent* ☐ *Sibling* ☐ CVA ☐ *Parent* ☐ *Grandparent* ☐ *Sibling* ☐	

	YES	NO	DETAILS
Are you currently prescribed medication? *(ask about anticoagulants, Gabapentinoids, diazepam, and analgesia)* *If on Citalopram advise change to other antidepressant if starting OST)*	Yes ☑	No ☐	Mirtazapine 45mg Olanzapine 15mg ADHD Thiamine 50mg Accomprosate
Are you currently taking any over the counter medicines? *(analgesia, sleep/cough remedies)*	Yes ☐	No ☑	*Analgesia* ☐ *Cough Medicine* ☐ *Night Sedation* ☐
Do you see any other health professionals or have hospital appointments?	Yes ☐	No ☑	

Please upload completed assessment to EMIS in "Documents" under "Physical Health Assessment"

RENFREWSHIRE ADRS PHYSICAL HEALTH ASSESSMENT

	YES	NO	DETAILS
Have you been hospitalised in the past 2-5 years? *(Check Clinical Portal)*	Yes ☑	No ☐	MH reasons.
Have you in the past year been diagnosed with any condition?	Yes ☐	No ☑	
Indigestion or heartburn? *(ask about difficulty swallowing)*	Yes ☐	No ☑	*Frequent heartburn* ☐ *Difficulty swallowing* ☐
Vomited blood?	Yes ☑	No ☐	*Recently vomited blood* ☑ *Vomited blood in past* ☐ few days few months ago - on + off after drinking
Breathing problems	Yes ☐	No ☑	*Asthma* ☐ *Bronchitis* ☐ *COPD* ☐ *Uses inhaler* ☐ *Breathless on exertion* ☐
Heart Problems /Chest pain?	Yes ☑	No ☐	*Reports M.I. history* ☐ *Reports Arrhythmias* ☐ Reports chest pain
Blood pressure?	Yes ☑	No ☐	*High blood Pressure* ☐ *Low Blood Pressure* ☑ cannabis use.
Seizures, fits or blackouts?	Yes ☑	No ☐	*Reports recent seizure* ☑ *Reports previous seizures* ☐ *Diagnosis of epilepsy* ☐ few weeks ago - 2 hrs after a drink.
Diabetes? (Which type)	Yes ☐	No ☑	*Insulin dependent* ☐ *Diet controlled* ☐ Oral *Medication controlled* ☐
Endocrine, Thyroid problems?	Yes ☐	No ☑	
Pins and needles? *e.g. in hands or feet (Consider the need for Pabrinex)*	Yes ☐	No ☑	*Hands* ☐ *Feet* ☐ *Prescribed Thiamine* ☐
Jaundice or hepatitis?	Yes ☐	No ☑	*Presently Jaundiced* ☐ *Recent episode* ☐ *Previous episode* ☐
Pancreatitis?	Yes ☐	No ☑	
Gall Bladder Stones?	Yes ☐	No ☑	
Ascites?	Yes ☐	No ☑	
Kidney or urinary problems?	Yes ☐	No ☑	*Urinary Frequency* ☐ *Difficulty passing urine* ☐ *Nocturnal problems* ☐
Discharge from breasts *(male or female)*	Yes ☐	No ☑	*Prolactin levels checked due to reported discharge* ☐
Bowel problems?	Yes ☑	No ☐	*Diarrhoea* ☐ *Constipation* ☑
Dark stools / blood?	Yes ☐	No ☑	*Dark stools* ☐ *Fresh Blood* ☐

Please upload completed assessment to EMIS in "Documents" under "Physical Health Assessment"

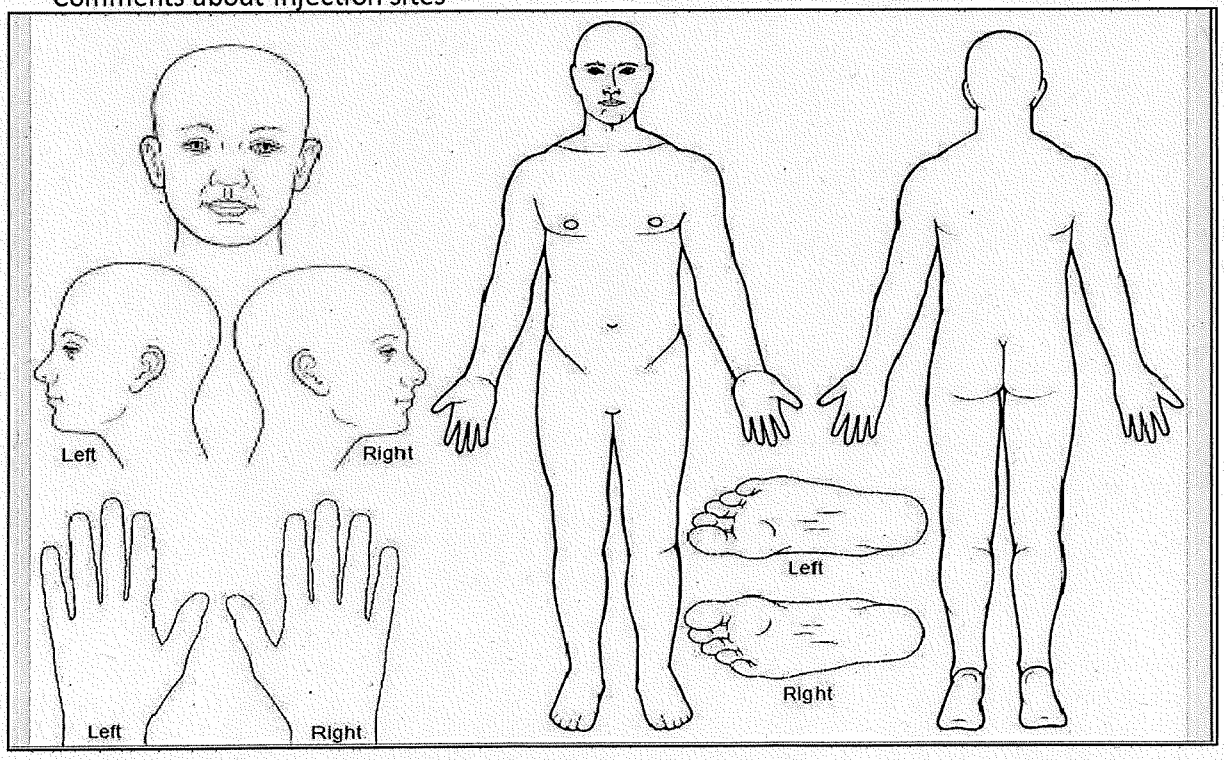
RENFREWSHIRE ADRS PHYSICAL HEALTH ASSESSMENT

Anaemia or blood problems?	Yes ☐	No ☑	
Muscle or arthritic problems?	Yes ☐	No ☑	Pain in : *Feet* ☐ *Knees* ☐ *Hips* ☐ *Back* ☐ *Neck* ☐ *Arms* ☐ *Hands* ☐
Sleep problems? *(ask about daytime sleeping, Snoring- Advise GP if sleep Apnoea suspected)*	Yes ☑	No ☐	*Problems getting over* ☑ *Early wakening* ☐ *Prescribed night sedation* ☐
Motor or sensory problems? *E.g. mobility, eye sight, hearing*	Yes ☐	No ☑	*Poor mobility* ☐ *Needs Glasses* ☐ *Reports deafness* ☐
Clots or DVT	Yes ☐	No ☑	*Previous DVT reported* ☐ *Present DVT reported* ☐
Stroke?	Yes ☐	No ☐	
Headaches /migraine?	Yes ☑	No ☐	Headaches
Head Injuries?	Yes ☐	No ☑	*History of assaults* ☐ *History of falls* ☐
Skin problems or wounds? *(? Infections from injecting, itching or general infections)*	Yes ☐	No ☑	*Arms* ☐ *Leg* ☐ *Groin* ☐ *Neck* ☐ *Other* ☐

If the patient is injecting drugs, despite the obvious health risks;-

- Confirm injecting sites by physical observation/examination and record on body map below
- **Continue to monitoring at each appointment until patient has refrained from injecting**
- Ensure foils supplied or Supply one hit kit and advise of needle exchanges

Comments about injection sites



Please upload completed assessment to EMIS in "Documents" under "Physical Health Assessment"

RENFREWSHIRE ADRS PHYSICAL HEALTH ASSESSMENT

BLOOD BORNE VIRUS

Have you ever been tested for:-	Yes	No	Don't know	If yes, where?	If yes, when?
Hepatitis B	Yes ☐	No ☐	☐	GP ☐ STD Clinic ☐ Prison ☐ ADRS ☐	2017
Hepatitis C	Yes ☑	No ☐	☐	GP ☐ STD Clinic ☐ Prison ☐ ADRS ☐	2017
HIV	yes ✓	No ☐		GP ☐ STD Clinic ☐ Prison ☐ ADRS ☐	2017
Have you put yourself at risk since your last test?	Yes ☑	No ☐	☐	Shared snorting equipment when using cocaine	
Have you previously been vaccinated for Hep A & B?	Yes ☐	No ☑	☐	Where GP ☐ ADRS ☐ Prison ☐ Other ☐ (specify)	
Would you consider blood borne virus testing with an HCV nurse/ specialist service	Yes ☑	No ☐	☐	Comments	

SEXUAL HEALTH

	YES	NO	DETAILS
Are you currently sexually active? Method of contraception used?	Yes ☐	No ☑	Condom ☐ Oral ☐ CAP ☐ Coil ☐ Implant ☐ None ☐
Have you ever been tested for sexually transmitted diseases? *If so, which, and was treatment completed?*	Yes ☑	No ☐	2017
Do you have any sexual health difficulties *e.g. Libido, erectile dysfunction, impotency.*	Yes ☐	No ☑	Libido ☐ Impotency ☐ Erectile Dysfunction ☐
Discharge or pain when urinating?	Yes ☐	No ☑	Blood in urine ☐
Female Questions Only			**DETAILS**
Is your menstrual cycle regular? *(please ask when last menstruated)*	Yes ☐	No ☐	
Menopause?	Yes ☐	No ☐	
Are you pregnant? *(ask how long and any complications)*	Yes ☐	No ☐	
Do you think you could be pregnant? *(test urine)*	Yes ☐	No ☐	
When was your last smear? Do you know the result?	Yes ☐	No ☐	Last smear taken on
Do you ever self-examine your breasts?	Yes ☐	No ☐	Lumps causing concern ☐ No abnormalities reported ☐

NUTRITION/PHYSICAL ACTIVITY

Please upload completed assessment to EMIS in "Documents" under "Physical Health Assessment"

RENFREWSHIRE ADRS PHYSICAL HEALTH ASSESSMENT

	YES	NO	DETAILS
Have you eaten any food over the last five days? *(Promote 5 fruit/veg daily. Limit caffeine < 5 cups coffee daily)*	Yes ☑	No ☐	
How would you describe your appetite at present?	Yes ☐	No ☐	*Good* ☐ *Overeating* ☐ *No appetite* ☐ *Forcing self to eat* ☑
Do have any dental problems?	Yes ☐	No ☑	*Advised on how to register with dentist* ☐
Do you have any recent weight loss/gain? *(Risks: - unplanned loss in the past 3 months?)* *(Large changes in body weight has an effect on methadone dosage/metabolism)*	Yes ☑	No ☐	*Unplanned loss in past 3 months* ☐ **BMI** **30+ = Obese** **25-30 = Overweight** **20-25 = No risk** **18.5 – 20 = Moderate risk** *(weigh monthly)* **- 18.5 = High risk of malnutrition** *(weigh monthly)* 0·3kg.
Do you ever have nausea or vomiting?	Yes ☑	No ☐	*Blood reported when vomiting* ☐ Blood in Past.
Do you take any nutritional supplements? *e.g. build up drinks, vitamins*	Yes ☐	No ☑	*Build up Drinks* ☐ *Vitamins* ☐
Do you exercise and if so what type?	Yes ☐	No ☑	*Daily* ☐ *Weekly* ☐ *No exercise at all* ☐
Do you smoke and how much daily? *(Encourage smoke free. Advise of GP support)*	Yes ☑	No ☐	Joints

OUTCOMES

Action Required	Yes	No	N/A	Comments	Date Actioned
Dry Blood Spot Test	Yes ☐	No ☐	n/a ☐	DBST declined ☐	*Completed on*
Offer One Hit Kit	Yes ☐	No ☐	n/a ☐	Kits refused ☐	*Supplied on*
Offer Contraception	Yes ☐	No ☐	n/a ☐	Contraception refused ☐	*Supplied on*
Offer Foil	Yes ☐	No ☐	n/a ☐	Foil refused ☐	*Supplied on*
Refer for Naloxone	Yes ☐	No ☐	n/a ☐	*Naloxone declined* ☐	*Supplied on*
Offer Pabrinex	Yes ☐	No ☐	n/a ☐	*Pabrinex declined* ☐	*To start on*
Offer Twinrix	Yes ☐	No ☐	n/a ☐	Twinrix declined ☐	*To start on*
Refer to HCV nurse / BBV services.	Yes ☐	No ☐	n/a ☐	*Referral declined* ☐	*Referred on*
Refer to: **Psychiatrist** ☐ **Medic/Prescriber** ☐ **GP** ☐	Yes ☐	No ☐	n/a ☐	**Comments**	*Appt. arranged for*
Refer to Sandyford Sexual Health	Yes ☐	No ☐	n/a ☐	*Referral declined* ☐	*Referred on*
Other Service required *(specify)*	Yes ☐	No ☐	n/a ☐	*Smoking Cessation* ☐	*Referred on*
Arrange ECG	Yes ☐	No ☐	n/a ☐	*Client refused ECG* ☐	*Appt. arranged for*

Follow up Check of Body Maps (complete as follow up whilst still injecting)

Please upload completed assessment to EMIS in "Documents" under "Physical Health Assessment"

Ref: Blood Clinic
CHI: 120 389 3450
Date: 20 June 2022

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**05-Jul-2022**
Time:	**11:10am**
Appointment with:	**AdrsBloodClinic R RenDrugService ADRS BLOOD CLINIC**
Location:	**New Sneddon Clinic, 8 New Sneddon Street, Paisley, PA3 2AD**
Contact details:	**0300 300 1199**

If you are attending an appointment with a doctor clinic, 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.

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

GAD-7 Anxiety

Over the last two weeks, how often have you been bothered by the following problems?	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious, or on edge	0	1	2	3
2. Not being able to sleep or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid, as if something awful might happen	0	1	2	3

Column totals 0 + 1 + 10 + 3 =

Total score 14

If you checked any problems, how difficult have they made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all	Somewhat difficult	Very difficult	Extremely difficult
☐	☐	☑	☐

Source: Primary Care Evaluation of Mental Disorders Patient Health Questionnaire (PRIME-MD-PHQ). The PHQ was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagues. For research information, contact Dr. Spitzer at ris8@columbia.edu. PRIME-MD® is a trademark of Pfizer Inc. Copyright© 1999 Pfizer Inc. All rights reserved. Reproduced with permission

Scoring GAD-7 Anxiety Severity

This is calculated by assigning scores of 0, 1, 2, and 3 to the response categories, respectively, of "not at all," "several days," "more than half the days," and "nearly every day."
GAD-7 total score for the seven items ranges from 0 to 21.

0–4: minimal anxiety

5–9: mild anxiety

10–14: moderate anxiety

15–21: severe anxiety

PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: James Weir DATE: 13/6/22

Over the last *2 weeks,* how often have you been bothered by any of the following problems?
(use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite – being so figety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3
add columns		+ 4	+ 21	

(Healthcare professional: For interpretation of TOTAL, please refer to accompanying scoring card). TOTAL: 25

10. If you checked off *any problems,* how *difficult* have these problems made it for you to do your work, take care of things at home, or get along with other people?	Not difficult at all _____ Somewhat difficult _____ Very difficult ✓ Extremely difficult _____

Copyright © 1999 Pfizer Inc. All rights reserved. Reproduced with permission. PRIME-MD© is a trademark of Pfizer Inc.

A2663B 10-04-2005

Susanne Millar
Chief Officer

Our Ref: MHAU
Job ID: 100166819
Date: 10/06/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
Stobhill Hospital
Nevis Building
133 Balornock Road
Glasgow
G21 3UW
0141 201 3136
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

The above named was referred to Mental Health Assessment Unit (MHAU) Stobhill by NHS24 and was assessed by telephone on 7th June 2022.

Assessment

Spoke with James on the telephone tonight after he made contact with NHS24. Advises that he had a bottle of Buckfast to drink earlier and began to think about his friend who was Murdered by his brother last week. Has not had any alcohol for over five days, but today was feeling upset so had a drink, now struggling to cope with his emotions. James reports feeling Guilty that he was unable to save his friend and can't get what happened out of his head. Have spoken in Length with James tonight and explained these feelings are normal and very understandable. I also reminded him that he has lots of positives in his life to focus on, including going into Kershaw for a detox from alcohol. James was unaware of this and then said that I have made his night informing him of this, as he knew it was maybe going to happen, however did not realise he was on the waiting list. Following this knowledge James perked up and was able to recognise how lucky he was and happy to talk about some safety planning. Although James had been drinking tonight was not under the influence and able to engage in a full assessment. Mood seems bright and reactive with no evidence of any abnormal perceptions or any delusional ideation. Denies any suicidal ideation intent or planning. Has not thoughts of DSH or taking an overdose. Has his prescribed medication that he plans to take, then he is going to go to bed.

Recommendation

Have offered James a referral to CDRS tonight, has declined. Will task ADRS to see if they can call him tomorrow. To engage with own GP to see if they can prescribe a short anxiolytic to help at this time. Aware how to access services including NHS24, Breathing space and the Samaritans if needed tonight.

Susanne Millar
Chief Officer

Risk

Has agreed to a robust safety plan tonight. Denies any suicidal ideation intent or planning.

Yours sincerely

Margaret Thomson
Senior Unscheduled Care Nurse

Authorised on 10/06/2022 15:42:45 by Typist Karen McConnell, not verified by Margaret Thomson.

Renfrewshire Health & Social Care Partnership

Ref: **BO'N/DS**
CHI: **120 389 3450**
Date: **13 June 2022**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 21-Jun-2022**
Time:	**4:00pm**
Appointment with:	**Dr. Brian O'Neill Medical Officer**
Location:	**NEW SNEDDON STREET CLINIC, 8 NEW SNEDDON STREET, PAISLEY, PA3 2AD**
Contact details:	**0300 300 1199 (Option 2)**

If you are attending an appointment with a doctor clinic, 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.

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

Debra Smith

Medical Secretary

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

Our Ref: BON/JRP
Job ID: 400549
Date: 30/05/2022
Dictated: 30/05/2022
Typed: 07/06/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

20 Back Sneddon Street
Paisley
PA3 2DJ
0300 300 1199
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Diagnosis:	**1. Alcohol Dependence Syndrome**
Current Medication:	**1. Thiamine 50mg QID**

I saw this gentleman in a face to face consultation on the 25th of May 2022 at New Sneddon Street clinic.

History of Presenting Complaint

James's early childhood was marked for physical abuse by his mother and sexual abuse by another. He was in the childrens home from 14 to 16 and experienced trauma. He did poorly at school and felt very isolated when he returned to his family. He has sisters [redacted] who suffered the same fate. Drinking became his solution. He admits to being sectioned three times and reports that this was to protect others as when intoxicated he has strong urges to harm people. He is presently consuming two bottles of buckfast daily. He has salvage drinks. He experiences withdrawals. He describes two seizures recently though not witnessed and this could be simply over inebriation however it is more likely to be the former. He describes an episode of DTs which sounded unconvincing.

His longest sober spell in life was three months when in the Haven residential rehabilitation in Kilmacolm (Christian Fellowship). He was proud of the effort he made. He drank on the day of release. He describes his sister Debbie as his ''rock''. He is close to and very loving to his nieces

and nephews, ‘’I want to have children’’. Today he showed no signs of intoxication, he was not breathalysed. He had a half bottle of buckfast in his bag which he showed me. He denies illicit drugs.

He is well dressed, emotionally labile and there were tearful episodes punctuated by laughter. This seemed a little incongruent. The interview was marked by sudden ejaculations of phrases sometimes not within the theme of discussion. He was quite compliant to suggestions and admonitions. He does have hope and optimism for the future. He expresses willingness to put effort into sobriety.

Plan

I assertively linked him to the ODAAT newcomer’s fellowship meeting in the rooms Glasgow. A friend who is sober for sixty days will take him there. We will book him into the Pabrinex clinic. I have stopped his Acamprosate as this has been ineffective over the last two months. We will retake bloods and consider starting Naltrexone. This gentleman clearly requires a great deal of psychosocial support from us and I hope the fellowship of alcoholics anonymous should he allow himself to be connected. I think a detox work up would be appropriate to make this one count.

Presently I do not think this gentleman would be a good candidate for Disulfiram given his presentation today and his part history of impulsivity. This can be reassessed before referral to a MDT. I will keep you updated as to his progress.

Yours sincerely

Brian O'Neill
Medical Officer

Authorised on 08/06/2022 09:36:50 by Brian O'Neill.

Susanne Millar
Chief Officer

Our Ref: MHAU
Job ID: 100163326
Date: 31/05/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
Stobhill Hospital
Nevis Building
133 Balornock Road
Glasgow
G21 3UW
0141 201 3136
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

The above named was referred to Mental Health Assessment Unit (MHAU) Stobhill by NHS24 and was assessed by telephone on 29th May 2022.

Assessment

Telephone consultation. I spoke with James who stated that he is a 'chronic alcoholic' and has been addicted to alcohol from the age of 13, for 20 years. He stated that he feels that he is getting 'nowhere' and showing 'no progress', and often feels like 'throwing in the towel' and giving up. He stated that he has been in a 'dark place' for months, which was due to the sudden death of both his father and uncle, both of whom he shared a close relationship with. He stated that he has family, 3 siblings, however they 'don't have time' for him and do not make the effort with him much. Explored suicidal ideation, which James stated he has struggled with for many years however this has worsened over recent months; no clear trigger as to increased suicidal ideation today. On further discussion, he denied immediate intent to act on same, instead demonstrating future hopes in tackling his enduring mental health difficulties. He stated that he needs 'something done' with regards his mental health. We discussed his current engagement with services and he appeared to believe that I was basing all of his difficulties on his use of alcohol on the contrary I advised him that I recognise the factors influencing his use of alcohol and subsequent addiction and the difficulties that early experiences pose to one's mental health, however highlighted the importance of managing the former in order to accurately manage underlying mental health difficulties. He advised me that SAS and Police were called to his home last night; queried whether he was charged by Police due to possession of a knife which he stated he was not and became hostile stating 'what would you do if you were abused and somebody woke you up by stroking your leg (meaning the SAS paramedic)'; he told me to phone the Police to 'get your facts straight'. James stated that he was not willing to speak with a Nurse, rather was 'promised' he would be put in touch with a 'psychiatric doctor' today. Explained service provisions and initial engagement with MHAU nursing staff, which he stated was absolutely not the case and stated he spoke with a Dr via telephone last year from the

MHAU. Queried whether this was in fact via NHS24 which he stated was untrue. He told me that he had to speak with somebody with 'a bit of experience, who knows what they're talking about', and not 'this shite'. Explained the purpose of this telephone call in providing further assessment, which again he stated is a waste of his time and that I cannot force him to speak. James was very hostile and told me that I was denying him access to a telephone call with a medic and refused to listen to the reasons behind this. That being said, he could not identify any pressing medical concern which would require medical review as opposed to nursing. He asked for my name and workplace and stated I am to blame for 'miscommunication' and told me that he is going to call back NHS24 'right now'. The call was then terminated.

Recommendation

James refused to engage further, despite several attempts of reassurance, and stated he was expecting a call from a medic as opposed to nursing staff, which he did not wish to engage with. He advised that he will contact NHS24 in attempt to access a medic. Task sent to Renfrewshire Drug and Alcohol Service.

Yours sincerely

Frankie Findlay
Unscheduled Care Nurse

Authorised on 31/05/2022 13:19:19 by Typist Karen McConnell, not verified by Frankie Findlay.

Detailed Print

Case Details:

Case No.	User Description
6700935	Angela Fallen (Pwp Call Taker) ()

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Angela Fallen (Pwp Call NHS 24 Assessment

Start Time: 07/06/2022 22:05
End Time: 07/06/2022 22:34

FRIEND WAS MURDERED LAST WEEK.STRUGGLES WITH MENTAL HEALTH

Clinical summary created by: Angela Fallen (Pwp Call Taker) () [07/06/2022 22:34:14]
Reason for call: FRIEND WAS MURDERED LAST WEEK.STRUGGLES WITH MENTAL HEALTHConfirmed Symptom(s):
Endpoint Management Selected (CT)

History and Mental state:
Medication: NO CHANGES TO MEDS
RAG History and mental state: Amber
Main problem: PT STRUGGLING TO COPE FOLLOWING HIS FRIEND BEING MURDERED LAST WEEK
Engagement with services: YES

Public protection considerations:
Harm to others risk: NO RISK OF HARMING OTHERS
Adult protection: NR
Child protection: NR
RAG Harm to others: Green
RAG Adult protection: Green
RAG Child protection: Green

Suicide or self-harm:
Self-harm risk: NO ACTS OF SELF HARM

Detailed Print

Case Details:

Case No. **User Description**
6700935

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Suicide risk: DOESN'T KNOW IF HE COULD STAY SAFE AS SO LOW
RAG Self-harm: Green
RAG Suicide: Amber

Social and personal risks:
Support network: HAS FAMILY AND FRIENDS BUT NOT BEEN TELLING THEM HOW HE HAS BEEN FEELING
Physical health: OK
Occupation/activity: OK
Housing and finances: LIVES ALONE
RAG Social and personal risks: Amber

Risk from substance misuse:
Substance abuse risk: WAS IN RECOVERY BUT DRAN A BOTTLE OF BUCKFAST EARLIER
RAG Risk from substance misuse: Amber

Any other issues:
Other issues: NONE
RAG Any other issues: Green

Overall impression:
Overall impression: PT STRUGGLING WIT COPE FOLLOWING HIS FRIEND BEING MURDERED LAST WEEK. ALWAYS STRUGGLED WITH MH AND UNSURE HE CAN STAY SAFE. WAS IN RECOVERY BUT DRANK A BOTTLE OF BUCKFAST EARLIER. AGREED TO STAY SAFE UNTIL CALL BACK. OUTCOME DR/CPN 2HRS
RAG Overall impression: Amber

Call Detail(s):

Detailed Print

Case Details:

Case No. **User Description**
6700935

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Clinical supervision not used
Call reason: Suicidal thoughts
07:06:2022 22:06:20 FALLENA1.. 1ST PARTY CALLER. STRUGGLING AS FRIEND WAS MURDERED LAST WEEK AND NOT COPING... HASN'T HARMED HIMSELF IN ANY WAY... FEELS GUILTY AS FEELS HE COULD HAVE HELPED... NO CHANGES TO MEDICATIONS. HAS DRANK A BOTTLE OF BUCKFAST... NOT TELLING FAMILY HOW HE IS REALLY FEELING.. HAS MANAGED TO GET OUT AND THINGS. HAS ALWAYS STRUGGLED WITH MENTAL HEALTH... WAS SECTIONED LAST YEAR IN DYKEBAR HOSPITAL.. NO THOUGHTS OF HARMING ANYONE ELSE... PT VERY DISTRESSED AND UNSURE IF HE CAN STAY SAFE. AGREED TO STAY SFAE UNTIL CALL BACK. OUTCOME DR/CPN 2HRS..
Outcome: CPN (Dr) to phone patient within 2 Hrs

Case type set to CPN
Start Time: 07/06/2022 22:37
End Time: 07/06/2022 22:37

Priority On reception set to Pr 2 Within 2 hrs
Start Time: 07/06/2022 22:37
End Time: 07/06/2022 22:37

Non-disclosure set to True
Start Time: 07/06/2022 22:37
End Time: 07/06/2022 22:37

Case status set to COMPLETE
Start Time: 07/06/2022 22:37
End Time: 07/06/2022 22:37

Special Patient Notes

Detailed Print

Case Details:

Case No.	User Description
6688935	Lauren Rooney (Call Taker Si) ()

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Lauren Rooney (Call
NHS 24 Assessment

Start Time: 28/05/2022 13:14
End Time: 28/05/2022 13:35

WORSENING MENTAL HEALTH

Clinical summary created by: Lauren Rooney (Call Taker Si) () [28/05/2022 13:35:24]
Reason for call: WORSENING MENTAL HEALTHConfirmed Symptom(s):
Has Fever
Suicidal or harming
Endpoint Management Selected (CCT)

Risk Factor(s):
No travel outside Europe in last 21 days or to an affected country

Call Detail(s):

Clinical supervisor (First Triage): F TONER
Call reason: Suicidal thoughts
28:05:2022 13:16:15 ROONEYL1.. STRUGGLING TO COPE AND MANAGE. AMBULANCE SERVICE CAME TO HOME AND TOLD PARAMEDICS TO LEAVE. NOT SURE IF FEVERED... D/W NP F TONER - TEARFUL AND AGITATED DURING CALL. STATES PARAMEDICS ALREADY ATTENDED THIS MORNING AFTER BEING CONTACTED BY SOMEONE ELSE WITHOUT HIS KNOWLEDGE. HAS POOR MENTAL HEALTH. ALCOHOL EXCESS AND PREVIOUS SUICIDAL IDEATION... CONTINUED...RELUCTANT TO ENGAGE IN CONVERSATION. WANTED TO SPEAK DIRECTLY TO MH NURSE/DR. SUICIDAL THOUGHTS. UNABLE TO ROUTE TO MH NURSE. DIFFICULT TO ASSESS. SPEAK TO CPN/DR 1 HR...
Outcome: CPN (Dr) to phone patient within 1 Hr

Detailed Print

Case Details:

Case No. **User Description**
6688935

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Case type set to CPN
Start Time: 28/05/2022 13:40
End Time: 28/05/2022 13:40

Priority On reception set to Pr 1 Within 1 hr
Start Time: 28/05/2022 13:40
End Time: 28/05/2022 13:40

Non-disclosure set to True
Start Time: 28/05/2022 13:40
End Time: 28/05/2022 13:40

Case status set to COMPLETE
Start Time: 28/05/2022 13:40
End Time: 28/05/2022 13:40

Special Patient Notes

Detailed Print

Case Details:

Case No.	User Description
6690433	Kimberly Gallacher (Pwp Call Taker) ()

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Kimberly Gallacher
NHS 24 Assessment

Start Time: 29/05/2022 13:32
End Time: 29/05/2022 14:11

STRUGGLING MH

Clinical summary created by: Kimberly Gallacher (Pwp Call Taker) () [29/05/2022 14:11:35]
Reason for call: STRUGGLING MHConfirmed Symptom(s):
Endpoint Management Selected (CT)

History and Mental state:
Medication: PT NON COMPLIANT WITH MEDS, ONLY TAKES WHEN NOT DRINKING ALCOHOL,
Engagement with services: GP, ALCOHOL WORKER 30/05/22, TURNING POINT
Main problem: PARAMEDICS AND POLICE ATTENDED YESTERDAY, STRUGGLING MH, CALLED LAST NIGHT, CALLBACK MISSED AT 3AM AS PT SLEEPING
RAG History and mental state: Green

Public protection considerations:
Harm to others risk: NO HARM TO OTHERS, HAS THOUGHTS TO HARM OTHERS BUT NO INTENT WOULD NOT ACT ON THEM
Adult protection: NONE IDENTIFIED
Child protection: NONE IDENTIFIED
RAG Child protection: Green
RAG Adult protection: Green
RAG Harm to others: Green

Suicide or self-harm:

Detailed Print

Case Details:

Case No. **User Description**
6690433

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Self-harm risk: NO SELF HARM, THOUGHTS TO OVERDOSE, PT HAS THE MEANS IN HIS OWN HOME, H/O OVERDOSE APPROX YEAR AGO
RAG Self-harm: Green
Suicide risk: SUICIDAL THOUGHTS TO TAKE MEDS TO END LIFE
RAG Suicide: Green

Social and personal risks:
Support network: LITTLE SUPPORT FROM FAMILY AS THEY DONT UNDERSTAND MENTAL HEALTH
Housing and finances: NO HOUSING ISSUES, RECEIVING BENEFITS
Occupation/activity: SIT IN BEDROOM
Physical health: PHYSICALLY LOST ALOT WEIGHT, ALCOHOL ABUSE
RAG Social and personal risks: Green

Risk from substance misuse:
RAG Risk from substance misuse: Green
Substance abuse risk: HALF BOTTLE BUCKFAST, NO DRUGS

Any other issues:
Other issues: NONE IDENTIFIED
RAG Any other issues: Green

Overall impression:
Overall impression: PT AT TIMES DOESNT FEEL SAFE BEING ON OWN, PT STATES BEEN SECTIONED 3 TIMES, PT VERY UPSET, CONSTANTLY THINKING OF HARM SELF OR SUICIDE, WILL TRY KEEP SAFE, - CPN CALLBACK 2HRS
RAG Overall impression: Amber
RAG Summary: Red:0 Amber:1 Green:9 Not known:0

Detailed Print

Case Details:

Case No. **User Description**
6690433

Patient's Name: James Weir
Address: Flat D 27 Macdowall Street
Johnstone

PA5 8QJ

Tel: 07553 015425
Call Origin
Caller Name: James

Date of Birth: 12/03/1989
Own Doctor: Renwick,Eilidh(CC)
Surgery: Call Centre
Confidential: True

Tel:

Call Detail(s):
Clinical supervisor: MHNP A MCKEITCH
Call reason: Suicidal thoughts
29:05:2022 13:49:26 GALLACHERK2.. PARAMEDICS AND POLICE ATTENDED, STRUGGLING MH, CALLED LAST NIGHT, CALLBACK MISSED AT 3AM AS PT SLEEPING.. ADHD, OUTBURST WITH ANGER AND FRUSTRATION, CHRONIC ALCOHOLIC.. NO SELF HARM, THOUGHTS TO OVERDOSE, PT HAS THE MEANS IN HIS OWN HOME, SUICIDAL THOUGHTS TO TAKE MEDS TO END LIFE, NO HARM TO OTHERS, HAS THOUGHTS TO HARM OTHERS BUT NO INTENT WOULD NOT ACT ON THEM.. PHYSICALLY LOST ALOT WEIGHT, ALCOHOL ABUSE, PT NON COMPLIANT WITH MEDS, ONLY TAKES WHEN NOT DRINKING ALCOHOL, HALF BOTTLE BUCKFAST, NO DRUGS.. PT AT TIMES DOESNT FEEL SAFE BEING ON OWN, PT STATES BEEN SECTIONED 3 TIMES, PT VERY UPSET, CONSTANTLY THINKING OF HARM SELF OR SUICIDE, WILL TRY KEEP SAFE, - CPN CALLBACK 2HRS..
Outcome: CPN (Dr) to phone patient within 2 Hrs

Case type set to CPN
Start Time: 29/05/2022 14:13
End Time: 29/05/2022 14:13

Priority On reception set to Pr 2 Within 2 hrs
Start Time: 29/05/2022 14:13
End Time: 29/05/2022 14:13

Non-disclosure set to True
Start Time: 29/05/2022 14:13
End Time: 29/05/2022 14:13

Case status set to COMPLETE
Start Time: 29/05/2022 14:13
End Time: 29/05/2022 14:13

Special Patient Notes

Detailed Print

Case Details:

Case No.	User Description
6690433	

Patient's Name:	James Weir	**Date of Birth:**	12/03/1989
Address:	Flat D 27 Macdowall Street Johnstone PA5 8QJ	**Own Doctor:**	Renwick,Eilidh(CC)
		Surgery:	Call Centre
		Confidential:	True
Tel:	07553 015425		
Call Origin			
Caller Name:	James	**Tel:**	

Address: ADRS
20 Back Sneddon St, Paisley, PA3 2DJ
Tele: 0300 300 1199
Fax:
Email: adultservicesreferral.sw@renfrewshire.gov.uk
Website: www.renfrewshire.gov.uk
Our ref:
Your Ref: 3970
Contact: Omar Ul-Haq
Date: 10/5/22

Renfrewshire Council

James Weir
Flat D
27 Macdowall Street
Johnstone, Scotland
PA5 8QJ

Dear Mr Weir,

I am writing to advise you that I have arranged an appointment for you at ADRS on Friday 13/5/22 at 9.30am.

I note that you did not attend your previous appointments and have been uncontactable by phone. In addition, I have arranged other appointments with other services which you were made aware of but have not made yourself available for this support. Therefore, if you do not contact me I can only conclude that if you no longer require a service.

Yours sincerely,

Omar Ul-Haq
Social Worker

Address: ADRS
20 Back Sneddon St, Paisley, PA3 2DJ
Tele: 0300 300 1199
Fax:
Email: adultservicesreferral.sw@renfrewshire.gov.uk
Website: www.renfrewshire.gov.uk
Our ref:
Your Ref: 3970
Contact: Omar Ul-Haq
Date: 24/5/22

James Weir
Flat D
27 Macdowall Street
Johnstone, Scotland
PA5 8QJ

Dear Mr Weir,

I am writing to advise you that I have arranged an appointment for you at ADRS on Monday 30/5/22 at 10am.

I note that you did not attend your previous appointment at our clinic and have been uncontactable by phone to arrange another appointment. Therefore, as previously stated if you do not attend I can only conclude that you no longer wish a service due to your level of engagement with your treatment plan.

Yours sincerely,

Omar Ul-Haq
Social Worker

Renfrewshire Health & Social Care Partnership

Ref: **BO'N/DS**
CHI: **120 389 3450**
Date: **16 May 2022**

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

An appointment has been made for you to be seen as follows:

Date:	**Wednesday 25-May-2022**
Time:	**4:00pm**
Appointment with:	**Dr. Brian O'Neill**
Location:	**NEW SNEDDON STREET CLINIC, 8 NEW SNEDDON STREET, PAISLEY, PA3 2AD**
Contact details:	**0300 300 1199 (Option 2)**

If you are attending an appointment with a doctor clinic, 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.

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

Debra Smith

Medical Secretary

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

Our Ref: EE/SC
Job ID: 372517
Date: 15/03/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Diagnosis:	Alcohol Dependence Emotionally Unstable Personality Disorder ADHD PTSD
Medication:	Methylphenidate hydrochloride MR 36mgs daily Folic acid 5mgs daily Mirtazapine 30mgs at night Olanzapine 15mgs at night Thiamine 100mgs three times daily (on repeat prescription but last prescribed October 2021)
Follow Up:	Continues to work with Intensive Home Treatment Team but we will liaise with the Alcohol and Drug Recovery Service for ongoing care and follow up in due course.

I reviewed James on 10.03.22 in the company of Alex Livingston, Medial Student.

At interview, James complained of low mood associated with constant suicidal thoughts, which he told me had been present for the last 3 years. He has acted on these previously, and told me that he tried to hang himself a few years ago, that he has previously cut his arm and chest and that he recently took an overdose of fake diazepam approx. 4 weeks ago.

His history was a little inconsistent but he told me that he hadn't eaten for a week nor been sleeping well. He feels alone and unsupported and is struggling with the loss of his father last year and his uncle approx. one week ago. His uncle and his father both died of heart attacks, and he is worried about his own heart. He told me that he has been having chest pain for months but hasn't seen you about it.

Regarding his medications, his concordance is very variable and it was difficult to establish how regularly he has been taking it, although he told us he had taken it the previous night and that his sleep was good as a result.

In terms of alcohol, he continues to drink on a daily basis and he views alcohol as a significant problem and wants to stop entirely. My colleagues had advised him not to stop abruptly due to the risk of withdrawals, and although he was a bit upset about this he was understanding of it. He told us he had had a seizure the previous night, but he had consumed half a bottle of vodka the previous morning. Prior to his appointment with me he had consumed a bottle of Buckfast.

On mental state examination, James looked tired and dishevelled. He appeared to be under the influence of alcohol, and at the end of the interview, he seemed unsteady on his feet. However, his eye contact and rapport were good. He was fidgety. His speech was a little repetitive. Subjectively and objectively his mood was low. His affect was reduced in reactivity but not completely flat. There was no evidence of formal thought disorder nor delusions. He described suicidal ideation but no clear intent to act and there was evidence of future focus and help seeking to get better. He did describe having thoughts of harming one of his sisters, whom he says is causing trouble with their mum, but he went on to say he would not act on these thoughts and described himself as not wishing to harm anyone. There was no obvious perceptual disturbance. He was alert and orientated. His insight was intact. He was keen to stop drinking and would like to be admitted to Gartnavel for a detox if this was possible.

Impression & Plan:
James is a 32 year old man presenting in crisis with suicidal thoughts and low mood in the context of active alcohol dependence and on a background of known EUPD, PTSD and ADHD.

His risk of suicide is elevated, but he is willing to engage with home treatment and given that he had attended as planned and voiced calling for help in between appointments, I felt that home treatment was feasible.

We therefore agreed to continue Intensive Home Treatment. I advised him not to stop alcohol abruptly due to the risk of withdrawal, but also advised him to avoid drinking to inebriation. I advised him to consider going to A&E as he had injured his hand punching a wall, and I also advised him to make an appointment with you to discuss his recurrent chest pain.

He has already been allocated a Key Worker within ADRS and he has an appointment due on 17.03.22 which he intended to attend.

I would not recommend any changes to his medication, although I would advise continuing to dispense all of his medications on a weekly basis. We have checked his bloods today given his recent alcohol excess, and I will chase the results.

We will keep you updated about his progress.

Kind regards,

Yours sincerely

Dr E Earl
Specialty Doctor in Psychiatry

Authorised on 15/03/2022 14:35:21 by Emma Earl.

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

Our Ref: LC/LMCN
Job ID: 372718
Date: 15/03/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Period of IHTT contact: 08.03.22- 15.03.22

Discharge Diagnosis: Active alcohol dependence background of known EUPD PTSD and ADHD.

Medication On Discharge: No changes to medication.

Follow Up: ADRS with Omar on 17.03.22 at 10am at Back Sneddon ADRS.

You will be aware via previous correspondence James was referred to the intensive home treatment team following being assessed at the mental health assessment unit. At that time he attended A&E after discussion with Stobhill mental health assessment unit were there was concerns of possible alcohol withdrawals at this time he was voicing ideas of suicide. He reports at assessment with IHTT he ongoing feelings of suicide but states they are long standing, his coping mechanism is utilising alcohol and he had woke up that day to find out his uncle had passed away. While working with the team he was reviewed by Dr Earl in which he will receive correspondence about, but her impression was of that a 32 year old man presenting in crisis with suicidal thoughts, low mood and the context of active alcohol dependence on the background of known EUPD PTSD and ADHD. The risk at time of suicide was elevated but he was willing to engage with home treatment and attended as planned today 10.03.22, his engagement was sporadic with the team he was due contact over the weekend however did not answer his phone but was aware of appointment as this was given on Friday 11th March. He attended today along with his cousin Kenny he was seen by myself and senior practitioner John Hyndman he was well kempt he apologised for missing the appointment over the weekend he states he did not hear his phone. Bloods taken as per Dr Earls request these were LFT, Bone Profile, TFT, Lipit Profile, GGT,

Glucose Random and FBC. James's main focus today was that he has issues with alcohol and had consumed a bottle of buckfast prior to attending his appointment this afternoon at 12pm, we discussed with him safe alcohol reduction techniques and retaining structure. There was nil thoughts to harm self reported he was future focused on planning to be a nurse and also attending rangers march on 26.03.22. He reports poor sleep but does feel his appetite is improving, is able to contribute his poor sleep to his alcohol intake. States he has good family supports at this time, James has a follow up appointment with his social worker at ADRS Omar on the 17.03.22 at 10am at which he plans to attend. Therefore James treatment has been transferred over to the ADRS and discharged from the intensive home treatment team. If you have any further concerns please do not hesitate to contact the team on the number above.

Yours sincerely

Linzi Campbell
IHTT Senior Nurse Practitioner

Authorised on 15/03/2022 15:45:54 by Linzi Campbell.

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

IHTT Assessment EMIS Web

RE: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

CHI No:	**1203893450**	**Date:**	
Surname:	**Weir**	**Date of Birth:**	**12/03/1989**
First Name:	**James**	**Gender:**	**M**
Address & Post Code:	**Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ**		
Phone No:	Patient Home Telephone Patient Mobile Telephone 07553015425 Or 07877424283	**Legal Status (MHA, AWI, Guardianship):**	
Ethnicity:	Caucasian	**Nationality:**	Scottish
Consent to sharing info:	Not at the moment.		
Communication needs:	Alternative correspondence format Sister- Debbie [redacted] However as said not to involve her at present. Patient is aware we will be sharing information with other agencies.		
Next of Kin / Carer contact details:	*Carer contact details listed below:*		

Professional contacts summary

Alerts *(history of violence, offending history)*
Emis warnings for concealed weapon's under his pillow and reports of hostile and aggressive behaviour towards staff, previous charges for assault. He did report to staff prior today that he set fire to his house when he was in Lothian however polite appropriate and well-mannered today.
Reason for referral *(referrer's reason[s] for requesting assessment)*
Attended RAH emergency department after discussion with Stobhill mental health assessment unit were there was concerns re possible withdrawl from alcohol assessed in situ and medical staff had no concerns. Voicing ideas of suicide mental health assessment requested by mental health assessment unit.

Reason for attendance *(Description of individuals main concerns, their perceptions of difficulties and hopes from the service)*
James reports on going feelings of suicide he notes these are long standing, usual coping mechanisms are 3 bottles of tonic wine daily. Woke up yesterday with news that his uncle had died and only had 1 bottle of wine yesterday tells us that is his last drink. James had called the GP to let him know how he was feeling regarding low mood and suicidal he had disclosed that he was thinking of putting a toaster in the bath. GP contacted the police who attended his property and forced entry as they had found no response. At assessment with mental health assessment unit James disclosed that he had been raped as teenager he sites this as a major factor in his drinking and it blocks out flash backs. He believes that he has been let down by the mental health services and that there is no point in engaging further in assessment as "nobody knows what they are doing" he alluded that he was going to go home and cause harm to the perpetrator of his abuse then complete suicide. That is what was reported by the mental health assessment unit to us yesterday, James did not say this today. Today James attended the Charleston Centre he was appropriately dressed but did appear quite fidgety. At times avoided eye contact but engaged well in conversation and was teary throughout expressed mood has always been low In the last 3 years especially.
Psychiatric history *(previous/ongoing mental health problems, diagnoses and interventions, via GP or mental health services, and their impact; h/o self harm/attempted suicide; previous admission/detentions)*
Diagnosis of EUPD, ADHD and he tells us also PTSD. Says he hasn't eaten anything at all in the last 5 days and sleep has been very poor and he maybe gets about 3 hours a night and wakes about midnight or 2am and that is him. He says he has been drinking 3 bottles of tonic wine each day up until yesterday when that was his last one which caused him to have some withdrawal's and he said he had mentioned his hands were sweating. Currently he is open to ADRS Renfrewshire and he has not had contact recently or support from them, he thinks frequently it would be easy to commit suicide but he said his heart tells him not to as he sites family as a protective factor. There is some positive conversation throughout the interview and he does say he has hopes and dreams and future plans and happy to continue with treatment. He is on Olanzapine 15mg Mirtazapine 30mg however he has said that it could be months since he last took these. He states himself that his current issues with mental health and alcohol consumption down to childhood trauma and abuse stating mum and gran beat him to a pulp and forced him to pee in the corner. Says he has many friends who support him and encourage him not to drink but also some friends that are exploiting him for his money and contributing to his messy house. He said that housing has referred him for housing support and they were going to come and try help him out. Police had smashed down the door when they were looking for him which will also need repaired, doesn't get up to much most days doesn't have any hobbies but does enjoy spending time with his

sister did say he has a larger family which he has found out about over the years. We had a discussion with Dr Earl regarding and advised him to do some controlled drinking other than abstain totally, he said he is a bit short of cash and may not be able to do that. Offered him to see us tomorrow but he would prefer a telephone call as he has heard that the weather is going to change and he would like to stay indoors, he is happy to have a telephone conversation at any point though and he is happy to attend for a medical review on Thursday. He feels like he can call us or reach out for help if required. As stated diagnosis of EUPD and open to ADRS history of none engagement with services reports previous impatient at ST Johns in Livingston and also in Dykebar, historically threatened to electrify himself using toaster and bath numerous times also self-harmed by cutting his arms and groin. Notes report attempted self-harm in the past and also attempted hanging.

Medical history *(prior/pre-existing/ongoing physical health problems, diagnoses and interventions and their impact)*

Doctor at RAH recently reported no physical concerns he was hit by a car as a child broke tibia and fibia plates and screws “struggling to walk at times”

Current medication details as given by individual *(prescribed, over-the-counter, complementary, drug allergies)*

Medication	Dose	Frequency	Duration	Response
Olanzapine	15mg	Nocte		
Mirtazapine	30mg	Nocte		
Folic Acid	5mg			

Allergies:	None			
Dispensing frequency:		**Medication concordance:**	Only Concorde with Folic Acid could be moths ago he last took the other ones.	
Family History *(relationships; h/o MH problems, medical, substance use problems; h/o suicide)*				
Not sure of family history his sister has depression and anxiety not aware of any suicide in the family still sees his sister often, mother and gran used to beat him up States he almost killed his gran once but was able to see that he would end up in jail. He said he broke in to her house and he was standing behind her chair with a rope to cause her harm but he manged to tell himself that would ruin his own life as well as end hers. Family have popped up over the years he has 3 brothers and 6 sister speaks to 1 sister and 2 brothers but they do avoid him a bit because of his drinking 1 other brother [redacted] is in jail. He found out about the family at different stages in his life.				
Personal History:				
Childhood / development / relationships *Childhood trauma / neglect / abuse* *Education / employment* *Adult relationships* *Adult trauma / abuse / vulnerability* *Personal strengths / Hopes for the future*	He was born in paisley at birth he said the chord was tied around his neck doesn't remember much said there was quite a lot of abuse and sexual abuse when he was a child said his mum and gran beat him up a lot due to not being able to control him his ADHD symptoms. Enjoyed school but found it hard with ADHD found he did have good friends in primary and they stayed with him in secondary. Has no partner at present has had girlfriends in the past, is focusing on himself at present. Has a male cousin which he has a good relationship with him as a positive influence. One day he wants to be a dad he has always chose alcohol over his relationships describes his life as a train wreck being hooked on alcohol since he was 13 years old would to make changes moving forward. Sexual abuse for 7 years he said while he was in a childs home a man got him drunk it was a befriender they had arranged for him when he told people about the sexual abuse one of his sisters called him a liar and another time he went to the police and the man got 2 years in prison. He would like to be a nurse in addictions and help others			

	going through the same triggers, he sees himself as caring person.
Current social circumstances:	
Housing *Employment / Employability* *Finances* *Support* *Interests / current activities*	He said his house is a bombsite but it is a council flat said his door is a mess from the police braking it in. 1 bed has a TV and a couch appliances aren't working properly in the kitchen. He did work in a restaurant at the airport and left that job because they had to share hats as part of the uniform and he refused to do such a thing because he was scared he got head lice. He then worked in Somerfield he worked when he was 18, 19, 20 but his last 40 years ago. Not coping financially people are taking his money his bills are paid there is no debts but his phone still needs paid but he has 2 phones 1 of them is a good one that he has handed in to the pawn shop and they will hold it for a certain amount of time and then once he gets money he will go and take it back by paying an extra £30 to get it. This seems to be the way he lives his life. With regards to support he has his sister and brother who he says are good support and stay nearby he also has friends who support. Doesn't do much he says he likes police interceptors on the TV likes seeing people getting justice and things that why he likes that but in general he doesn't have internet, computer or anything like that he just likes to stay in his house and doesn't really do much.

Any children/ dependents under the age of 18?				
	Child 1	**Child 2**	**Child 3**	**Child 4**
Name	None			
Age				
Address if different:				
Child protection concerns/agencies involved:				

Impact of mental health on parenting and/or potential risk to children:

Description of functioning before current difficulties:
He says he has always struggled with ADHD and the depression and the things that has brought.

Substance use: *(caffeine, alcohol, tobacco, non-prescribed drugs, novel psychoactive substances)*	
Pattern of current use	Alcohol maybe 3 bottles a day of tonic wine if he doesn't take it he can have tremors, cold sweats, nausea and feeling of agitation. He tells us he has been doing that for years, Has had a few puffs of a cannabis joint yesterday to try and calm him down but he says doesn't really use drugs much.
Impact on individual	
Previous history	
Forensic history: *(charges, fines, convictions, h/o violence)*	
He said he has none, he has ADHD he said can obviously lead to violence and aggression but did report that he has a court date in May and he is unsure what it is for but he is not worried about it. He said he was having blackouts and wasn't getting the proper support from the services and that why whatever offence has been caused. This will need further investigation and assessment as he does say he is not a violent person and has never been violent.	
Legal issues: *(driving, capacity, detention, vulnerability, other orders)*	
Court day that is mentioned.	
Individual expectation of service:	
He initially said he was unsure on what he wants but then he let us know he needs help with his alcohol addiction, he said he needs help with ARDS because he is a chronic alcoholic and it stems from a child says there is no point in lying about this and he was looking for help but he felt that for some reason he wasn't getting his mail or his post and he never got the appointment's.	
Mental State Examination:	
Appearance	Dressed appropriately he looked quite tired he was teary throughout the visit.
Behaviour	Maintained good eye contact fidgety a bit engaged in conversation well.
Mood & Affect	Mood was very low said it always has been really was interactive with us.
Speech	Was softly spoken and quite but understandable and coherent.
Thought form	He was coherent expressing himself in always.
Thought content	Suicidal content, he has suicidal thoughts in his mind but he doesn't have any intent to harm himself at present.

Perceptions	No perceptual abnormalities.
Cognition	Orientated to time place and person.
Insight	He realised he has been unwell and need help and he seems to know the direction of his care would help.
Carers / Next of Kin / others views, concerns and expectations from services	
None	
Additional notes:	

Summary

Name: James Weir	**CHI: 1203893450**
Summary of assessment *(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)*	
32 year old gentlemen with a diagnosis EUPD with a consistent harmful use of alcohol, high risk of suicide self-harm with escalation following an uncle's death. Childhood's sexual abuse contributed to current health and alcohol use. Wants to engage with team and is hopeful that he can get better and has dreams for the future.	
Overall impression of risk *(CRAFT to be completed separately)*	
Risk of suicide/ self-harm, alcohol withdrawl. Does plan on engaging with mental health services going forward and is hopeful to become stable mentally.	
Immediate actions *(including information provided)*	
IHTT caseload at the moment and has telephone contact tomorrow which we will let him what time the review will be on the following day with Dr McAree or Dr Earl. Will link in with ADRS to make them aware of his attendance.	
Outcome of MDT discussion/ Treatment plan *(including follow up arrangements if relevant)*	
Refer to IHTT due to on going concerns re suicidal/ harm to others would possibly benefit from referral to psychology/ counselling re sexual abuse. Task ADRS to make aware of attendance.	
Primary Diagnosis:	EUPD

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

Any additional diagnoses:	He tells us he also has PTSD ADHD.		
Suitable for psychological therapies (Y/N):			
Name:	Jamie Morrans Scott McGibbon	**Designation:**	Senior IHTT Practitioner Student
Signature:		**Date:**	

Yours sincerely

Jamie Morans

IHTT Nurse

Authorised on 10/03/2022 19:57:23 by Jamie Morans.

Susanne Millar
Chief Officer

Our Ref: MHAU
Job ID: 100132191
Date: 09/03/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
Stobhill Hospital
Nevis Building
133 Balornock Road
Glasgow
G21 3UW
0141 201 3136
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

The above named was referred to Mental Health Assessment Unit (MHAU) Stobhill by Police Scotland and was assessed by telephone on 7th March 2022.

Assessment

Telephone consultation. I spoke with James who engaged well. He was very distressed and tearful from the onset. He described suicidal ideation which has been present for several months; he explained his mental health declined as a result of his fathers' death in May 2021, however he received news that his uncle died suddenly last week and this has contributed to his decline in mental state and increased suicidality. He explained his difficulties in detail.

He advised that he has not properly washed/attended to ADLs for the past year, and his home is in a filthy state; he stated he has no motivation/volition on a day to day basis. He discussed his current issues with alcohol use; he stated that he generally consumes three 'big, big bottles' of wine per day, however has been consuming ½ -1 bottle per day. He described acute tremors, cold sweats from wakening which remain throughout the entirety of the day, ongoing nausea and his stomach feeling like a 'washing machine', and 'voices', which he did not wish to discuss to any degree as these were distressing. He stated that the above symptoms have been present for 5-6 days but notably worse this afternoon. He stated that he has had a small amount of wine this morning, and recognises potential withdrawal symptoms. I explained that he would need to be assessed medically in the case of acute withdrawal, which he was understanding of however concerned that I was not taking his mental health concerns seriously; I explained that further assessment would be welcomed once he was deemed medically fit, which he found reassuring. I discussed the above with PC Williams whom was in agreement; she explained she will either escort James to the local A&E, or request SAS attendance as James was concerned he would be unable to return home following this review.

Susanne Millar
Chief Officer

Recommendation

MHAU assessment not complete; James describes an onset of ?withdrawal symptoms with evidence of tremor, sweating and agitation noted by Police Officers. To either attend A&E for review, or await SAS response.

EMAIL sent to Renfrew ADRS Service to highlight MHAU contact.

Risk

Not fully assessed; referred for assessment of suicidality, but concerns related to potential withdrawl symptoms requiring assessment in the first instance.

Yours sincerely

Frankie Findlay
Unscheduled Care Nurse

Authorised on 09/03/2022 13:24:46 by Typist Karen McConnell, not verified by Frankie Findlay.

Susanne Millar
Chief Officer

Our Ref: JMcG
Job ID: 100131499
Date: 07/03/2022

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
McLeod Centre
Leverndale Hospital
510 Crookston Road
Glasgow
G53 7TU
0141 211 6627

www.nhsggc.org.uk

Dear Dr Sim

RE: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

CHI No:	**1203893450**	**Date:**	07/03/2022
Surname:	**Weir**	**Date of Birth:**	**12/03/1989**
First Name:	**James**	**Gender:**	M
Address & Post Code:	**Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ**		
Phone No:	07553015425	**Legal Status (MHA, AWI, Guardianship):**	informal
Ethnicity:	Ethnic Origin	**Nationality:**	
Consent to sharing info:			
Communication needs:	No additional communication needs identified		
Next of Kin / Carer contact details:	*Debbie weir (sister)* [redacted]		

Professional contacts summary

Susanne Millar
Chief Officer

Alerts ***(history of violence, offending history)***
EMIS warnings for weapons concealed under his pillow Hostile and aggressive towards healthcare staff Previous charges for assault James reports that he set fire to his house when he lived in Lothian – apparently did not disclose this at the time
Reason for referral ***(referrer's reason[s] for requesting assessment)***
Attended RAH ED today after discussion with Stobhill MHAU wherein there were concerns re possible withdrawals from alcohol – assessed in situ and medical staff had no concern re same. Voicing ideas of suicide – mental health assessment requested
Reason for attendance ***(Description of individuals main concerns, their perceptions of difficulties and hopes from the service)***
James reports ongoing feelings of suicide – he notes these are longstanding. Usual coping mechanism is alcohol - 3x bottles of tonic wine daily. Today woke up to the news that his uncle had passed away – has only had one bottle of wine today. James unclear as to how police became aware of his suicidality – he disclosed that he had thoughts of putting a toaster in his bath. Police attended his property and forced entry as there was no response – James thereafter returned home. At assessment, James disclosed that he had been raped as a teenager – he cites this as a major factor in his drinking as it 'blocks out the flashbacks'. He believes that he has been let down by mental health services and that there is no point in engaging further in assessment as 'nobody knows what they are doing'. Alluded to going home to cause harm to the perpetrator of his abuse and then complete suicide.
Psychiatric history ***(previous/ongoing mental health problems, diagnoses and interventions, via GP or mental health services, and their impact; h/o self harm/attempted suicide; previous admission/detentions)***
Diagnosis of EUPD Open to ADRS Renfrewshire – historical non-engagement with services James reports previous inpatient admission in St Johns Livingstone and also Dykebar. Historically has threatened to electrocute himself using toaster in bath numerous times. Has also self-harmed by cutting his arms and groin. Notes report attempted self-immolation and also hanging
Current medication details as given by individual ***(prescribed, over-the-counter, complementary, drug allergies)***

Medication	**Dose**	**Frequency**	**Duration**	**Response**

Allergies:				
Dispensing frequency:		**Medication concordance:**		
Any children/ dependents under the age of 18?				
	Child 1	**Child 2**	**Child 3**	**Child 4**
Name				
Age				
Address if different:				
Child protection concerns/agencies involved:				
Impact of mental health on parenting and/or potential risk to children:				
Description of functioning before current difficulties:				
Substance use: ***(caffeine, alcohol, tobacco, non-prescribed drugs, novel psychoactive substances)***				
Pattern of current use	Harmful use of alcohol – 3x bottles of Eldorado daily – can't remember last day without alcohol			
Impact on individual	States he uses alcohol to block out flashbacks od childhood sexual abuse			
Previous history				
Mental State Examination:				
Appearance	Dresses in reasonably clean, casual attire – no obvious deficits to personal care needs			
Behaviour	At times hostile and aggressive – required to be counselled re behaviour after punching wall			

Mood & Affect	Mood appears low - ruminating on previous traumatic events
Speech	Normal rate, rhythm and volume – spontaneous throughout and hostile at times
Thought form	Grossly intact
Thought content	Focused on previous traumatic events
Perceptions	No evidence of perceptual abnormality
Cognition	Orientated to three spheres – no evidence of judgement impairing mental illness or limited capacity
Insight	Was eventually able to show good insight into current situation
Carers / Next of Kin / others views, concerns and expectations from services	
Additional notes:	

Summary

Name: James Weir	**CHI: 1203893450**
Summary of assessment *(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)*	
32yr old gentleman with diagnosis of EUPD with concomitant harmful use of alcohol. Presented with police via RAH ED – initial concerns re withdrawals from alcohol though medics report no current issues. Attended MHAU – hostile and aggressive initially and required to be counselled re same. Thereafter engaged appropriately in assessment process. Reports ideas of suicide – feels these have increased today since receiving word of his uncles' death. James cites his childhood sexual abuse as the main catalyst for his mental health – he says he has not spoken openly about this prior to this evening and does not feel there is any point in engaging with psychological therapies as he will not be here. James angry at his perception that he has not been supported by mental health services – was not accepting when challenged re his non-engagement with services in the past.	

Susanne Millar
Chief Officer

James then alluded to causing harm to the perpetrator of his sexual abuse and then going on to complete suicide – James advised that he did not have a judgement impairing mental illness and police would be informed of these threats. Risk of suicide/self-harm remains a concern – he reports an active plan and intent. Though evidence of future planning and plans to engage with services going forward. Writer discussed the need to engage with ADRS and the benefits of discussing his sexual abuse with the appropriate services – offered and accepted IHTT referral with the hope that he engages and agrees to referral to discuss his previous sexual abuse. James demeanour immediately changed – became more calm and grateful that help was being made available. Reiterated need to engage and for him to make contact with ADRS for support with alcohol and his want for inpatient detox.
Overall impression of risk *(CRAFT to be completed separately)*
Risk of suicide/self-harm remains Risk of harm to others Risk of alcohol withdrawal Plans on engaging with MH services going forward and hopeful he may be considered for inpatient detox
Immediate actions *(including information provided)*
Outcome of MDT discussion/ Treatment plan *(including follow up arrangements if relevant)*
Refer to IHTT due to ongoing concerns re suicide/harm to others Would possibly benefit from referral to psychology/counselling re sexual abuse Task to ADRS to make aware of attendance and his hopes for an inpatient detox

Primary Diagnosis:	
Any additional diagnoses:	

Suitable for psychological therapies (Y/N):

Name:	John McGuigan	**Designation:**	Senior Unscheduled Care Nurse
Signature:		**Date:**	07/03/2022

Yours sincerely

John McGuigan

Senior Unscheduled Care Nurse

IHTT
CHARLESTON CENTRE

Renfrewshire Health & Social Care Partnership

COMMUNICATION WITH GP/REFERRER FOLLOWING EMERGENCY ASSESSMENT

PATIENT INITIALS	JW	POST CODE	PA5 8QJ
CHI	1203893450		
GP NAME	Dr Sim	PRACTICE CODE	
GP SURGERY	Quarryside Medical Practice		
PATIENT KNOWN TO PSYCHIATRIC SERVICES YES ☒ NO ☐ IF YES: KNOWN TO:- ADRS			

SOURCE OF THIS REFERRAL

MHAU Stobhill

REASON GIVEN FOR REFERRAL

Attended RAH A&E after discussion with Stobhill MHAU where there were concerns re possible withdrawal from alcohol – deemed medically fit.
Voicing suicidal ideation, further assessment of mental health requested.

PRESENTING PROBLEM

Reports ongoing thoughts of suicide – reports these are longstanding.
Usual coping mechanism is alcohol – 3 x bottles of tonic wine daily.
Woke up today with the news that uncle had died – had 1 bottle of wine at this point.
Unclear of how police became aware of suicidality – he disclosed thoughts of taking a bath with his toaster. Police gained entry by force.
At assessment patient disclosed he was raped as a teenager, he cites this as major factor in his drinking as it “blocks out flashbacks”.
Believes he has been let down by mental health services and that there is no point in engaging in further treatment as “nobody knows what they are doing”
Alluded to going home to cause harm to the perpetrator however this was explored and no risk to others at present. Willing to contract to safety until tomorrow.
Sleep and appetite poor.
Reports low mood longstanding issue worsened 3 years ago.
Unsure of what he wishes from services and unable to express his needs but keen to engage with IHTT going forward.

MENTAL STATE

Dressed appropriately for the weather, casually, appeared tired, became tearful throughout visit.
Maintained good eye contact, appeared restless at times, engaged in conversation well.
Reports mood as low, objectively low.
Speech – soft spoken, quiet in tone, normal rate and rhythm.
Coherent in being able to express himself.
Ongoing thoughts of suicide
No perceptual abnormalities
Orientated to time place and person.
Insight intact.

ASSESSMENT OUTCOME (Medication/Referrals/IHTT/Admission etc)

IHTT caseload 1/24
Discussed with Dr Earl
Medical review to be arranged for 10/3/22
To link back in with RDS

ADMITTED YES ☐ NO ☒	HOSPITAL		WARD
TIME OF ADMISSION			

IHTT

CHARLESTON CENTRE

Renfrewshire Health & Social Care Partnership

Patient Surname	Weir
Forename	James
Address	Flat D 27 MacDowell St
Town	Johnstone
Postcode	p a 5 8 q j

ACCEPTED FOR HOME TREATMENT YES☒ NO ☐
REFERRED FOR/TO - OTHER- SPECIFY:-

ASSESSORS SIGNATURE	Jamie Morrans	ASSESSORS SIGNATURE	Scott McGibbon
PRINT NAME		PRINT NAME	
DESIGNATION	Senior IHTT Pract	DESIGNATION	Student Nurse

DATE	8/3/22	TIME COMPLETED	1730

THE ABOVE MUST BE COMPLETED TO ENSURE COMPLIANCE WITH MEDICAL RECORDS INFORMATION

Renfrewshire Health & Social Care Partnership

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Mr. J. Weir
Flat D
27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Date 02/02/2022
Our Ref 120 389 3450
Your Ref
Enquiries: ADRS
Tel: 0300 300 1199 Option 2
e-mail

PRIVATE & CONFIDENTIAL

Dear Mr. Weir

I am writing to you from the Renfrewshire Alcohol and Drug Recovery Service. We have been attempting to contact you and unfortunately have been unable to reach you on the number listed.

The number we have on file for you is: 07877424283. If this number is incorrect, please get in touch so we can update our records.

We kindly request you make contact with the duty team at ADRS on 0300 300 1199 (option 2) to advise if you still wish support from the Alcohol and Drug Recovery Service. Can you make contact prior to end of day **09/02/2022**.

Should we not receive contact from you by the above stated date, it will be assumed that you do not presently wish support from ADRS and your care will be transferred back to your G.P.

Yours sincerely

Duty Team

Renfrewshire Alcohol and Drug Recovery Service
Back Sneddon Care Centre, 20 Back Sneddon Street, Paisley, PA3 2DJ
0300 300 1199 (option 2)

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: JH/SC
Job ID: 278972
Date: 16/06/2021

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

Period of I.H.T.T. contact:	10.06.21 to 16.06.21
Discharge Diagnosis:	ADHD, EUPD and alcohol issues
Follow Up Care:	Lynsey Meekins, ADRS appt 23.06.21 CPN, Renfrewshire Community Mental Health Team

Following discharge from South Ward, Dykebar Hospital against medical advice James was again referred back to Intensive Home Treatment Team for support.

Due to limited contact with James it was discussed at MDT Meeting and a decision was taken that James would be discharged from I.H.T.T. due to non engagement and again failing to attend an arranged appointment today at Charleston Centre.

James has follow up with his CPN on 08.07.21 and also has ADRS follow up. We will write to James to inform his of his discharge from I.H.T.T. and we will provide him with crisis numbers and the Duty CMHT number based at Charleston Centre. Should you require any further information please do not hesitate to contact us on the number above.

Yours sincerely

John Hyndman
Senior Intensive Home Treatment Practitioner

Authorised on 16/06/2021 12:12:44 by John Hyndman.

Renfrewshire Health & Social Care Partnership

Christine Laverty
Interim Chief Officer

Our Ref: IMCF/GW
Job ID: 296507
Date: 09/08/2021

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

James was referred to the Renfrewshire Community Mental Health Team and to addictions services, following his discharge from the Intensive Home Treatment Team. He engaged with addictions services and has not been in contact with the CMHT. Mr Weir's case was discussed at the multi disciplinary team and it was agreed to discharge him back to your care at this time due to non-engagement.

Should you have any queries regarding this letter then please do not hesitate to contact me on the above number.

Yours sincerely

Iris McFee

Iris McFee
CPN
Renfrewshire Community Mental Health Team

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: JH/SC
Job ID: 278977
Date: 16/06/2021

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear James

Due to you failing to engage with the Intensive Home Treatment Team your care will be transferred back to ADRS and Renfrewshire Community Mental health Team where you have an appointment with your CPN Iris McFee on 08.07.21.

Should you require any support prior to this appointment you can contact the Duty Team based at the Charleston Centre on 0141 618 5600.

Yours sincerely

John Hyndman
Senior Intensive Home Treatment Practitioner

Authorised on 16/06/2021 12:11:44 by John Hyndman.

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: JH/LF
Job ID: 276692
Date: 09/06/2021

PRIVATE & CONFIDENTIAL

James Weir
Flat D 27 Macdowall Street
Johnstone
Renfrewshire
PA5 8QJ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear James Weir,

Following your absconsion from South Ward, Dykebar Hospital staff have referred you back to the Intensive Home Treatment Team.

I attempted to call you to arrange an appointment but unfortunately was not able to get through.

I would be grateful if you would contact the IHTT before 5:00pm on Thursday 10th June 2021 to advise whether or not you wish to be assessed by the team for support. If we do not hear from you within this timeframe we will assume you no longer wish to engage with our service.

Yours sincerely

John Hyndman
IHTT Practitioner

Authorised on 09/06/2021 14:27:36 by Typist Louise Fotheringhame, on behalf of John Hyndman.

Immediate Discharge Letter

Highly Sensitive: No
Consent for Sharing Withheld: No

JULIET SIMQuarryside Medical Practice,Linden Medical Centre,25 Floors Street,
Johnstone, PA5 8PZ

Main Switchboard:
Date of Completion: 16-Jun-2021

Dear JULIET SIM,

Name	CHI	DoB	Address
James Weir	**1203893450**	**12-Mar-1989**	**27D MACDOWALL STREET, Johnstone, Renfrewshire, PA5 8QJ**

Admitted	Type	Discharged	Destination
08-Jun-2021 00:30	IP	09-Jun-2021	

Specialty	Consultant	Ward	Telephone
Psychiatry	Rajan	Dykebar South Ward G1	

Primary Diagnosis
There is no data to display.

Secondary Diagnosis
There is no data to display.

Significant Operations / Procedures:
There is no data to display.

Last Discharge Review: Shivraj Vittalraj (Shivraj Vittalraj - StR) on 16 Jun 2021 22:42

Legal Status: Informal

Discharge Medication:

Active Drug Name	Route	Dose	Disp	Reason	Further Details	ECS	Since Admission
Diazepam 5mg tablets	oral	1 tablet twice daily					Added
Folic acid 5mg tablets	oral	1 tablet once daily					Added
Methylphenidate 18mg modified-release tablets	oral	1 tablet once daily					Added
Mirtazapine 30mg tablets	oral	1 tablet once daily at night					Added
Olanzapine 15mg tablets	oral	1 tablet once daily at night					Added
Thiamine 100mg tablets	oral	1 tablet three times daily					Added

"Added" means this medicine was added to the Clinical Portal record after admission. It does not necessarily mean this medicine was started by the hospital.

Dispensing Comments
There is no data to display.

Withheld Medication:

Date	Withheld Drug Name	Route	Dose	Note	Withheld Reason
There is no data to display.					

Stopped Medication:

Date	Stopped Drug Name	Route	Dose	Note	Stopped Reason
There is no data to display.					

Reason for Admission and Presenting Complaints	Admission Category
No data available	No data available

Clinical Comments:	Diagnosis: ADHD, EUPD, Alcohol Excess Events leading to Admission: Patient was discharged on 26/05/21 to IHTT team. Patient attended for assessment paper work and had one telephone appointment prior to failing to turn up for face to face appointment on 07/06/21. When contacted over the phone, patient was sounding intoxicated, very emotional, tearful was upset about his dad. Admitted on consuming alcohol 1 bottle of Buckfast and was drinking wine entire day. Patient arrived in taxi to Dykebar Hospital and on assessment was very intoxicated, speech was slurred.Patient stated he was feeling more anxious, distressed and suicidal,

	stated that he was hearing voices telling him bad things. Expressed that he is vulnerable adult and needed help. Sister was contacted by IHTT team who refused to let him stay at her house as patient was intoxicated. MSE on Admission: Patient was casually dressed, slightly unhygienic appearance. Smells of alcohol. mood was low, had thoughts of wanting to be dead, stated wanted to electrocute himself by putting his toaster in his bath filled with water. No evidence of thought disorder but difficult to assess properly. Insight - asking for help. agreeable to stay in the ward . Patient stated he has no one to stay with and sister was not able to support him at this time. Patient was admitted overnight due to safety concerns. Next day patient absconded from the ward prior to review by consultant. Police was informed who completed a welfare check on the patient and was found to be safe and well. He refused to come back to hospital. Patient was discharged Against Medical Advice from South Ward. No changes in the medications. IHTT team and ADRS team informed.
Discharge Comments:	Patient absconded from the ward, was discharged against medical advice. To continue with previous medications.
Follow Up:	No To be followed up by IHTT team and ADRS team
Results Awaited:	No
Pharmacist Comments:	
Final Discharge Letter to Follow:	Yes

Yours sincerely,

Shivraj VITTALRAJ

Prescription Review
Checked by: Shivraj VITTALRAJ (StR)
Discharged by: Shivraj VITTALRAJ (StR)

Missing Patient/Abscondment Form - PART A

Name: James Weir	D.O.B &—CHI: 12/03/89 (3450)	Consultant: Dr.Mannan
Missing/Absconded from: South Ward	Date: 08/06/2021	Time:07:35
Legal Status: Informal	Probable Destination (if known): Unknown	
Detention under MHS Act: N/A	Date of Admission to hospital: 08/06/2021	

Description:		
Height: About 5ft 6'	Build: Slim	Eyes colour:
Hair colour/length: Dark brown, very short, almost shaved.	Complexion: white/Salou	

Distinguishing Marks or Features?

Tattoos, however, unknown what these are asfollowing admission retired straight to bed and absconded following him awakening.

What was the patient wearing when last seen?

A black and white tracksuit, possibly Adidas.

Brief details of most recent risk assessment:

Risk of harm to himself.

What are the issues regarding safety: to self or others and to whom?

Risk to self.

Name and address of person to whom patient may have gone:

Sister's home Debbie, address is unknown to the ward at present.

Physical/Mental Health risks if any

Suicidal ideation with plan and intent while under the influence.

Presentation prior to going missing/absconsion:
Settled overnight. Irritable with staff upon awakening.

Line of Communication for all Abscondment/Missing patient
Nurse reporting abscondment/missing patient: Philip Higgins.

Note Physical/Mental Health Status/Alerts on return

A copy of this completed form should be forwarded to the Lead Nurse on all occasions

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: SMcA/SC
Job ID: 275849
Date: 07/06/2021

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

This gentleman is currently working with I.H.T.T. following his recent discharge from in-patient care. He was due to attend an appointment with me on the morning of 07.06.21 but did not do so. I phoned and he stated he had got mixed up. I spoke with him briefly and had no issue with his presentation at that point and offered to see him later that afternoon. Prior to speaking with him I had opportunity to review the information from the ward, noted his involvement with the Alcohol Service and his contact with I.H.T.T. with whom I work. I met with him in the company of Harry Brown one of the medical students, who coincidently, had met James during his in-patient admission also.

At Interview:
James presented as quite emotional, tearful and anxious. However, approximately 30 minutes into the appointment he eventually admitted to having consumed one bottle of Buckfast around lunchtime, having denied this earlier on in the appointment. I felt this was likely to be impacting on his acute presentation. This clearly limited the assessment to a degree.

He advised me that he had only taken alcohol today and on 05.06.21 when he consumed one bottle of Jack Daniels. He does appear motivated to address his alcohol use and appears willing to engage with Alcohol Services. However he is clearly struggling with abstinence. He is also using up to 3g of cannabis per day. Again he can acknowledge how this may impact on his emotions and also his finances and wishes to modify this and potentially stop. Unfortunately, once again, he is struggling with this. We discussed some initial steps to abstinence from cannabis. I was not of the opinion, given his recent admission, he required a further detox from alcohol. This is also based on the fact that he denied any alcohol other than what he has now stated.

In terms of his mood this was a difficult area to judge given his presentation under the influence. He clearly continues to struggle with his father's death but did indicate that his family have commented that he has made progress. He seemed very keen that we would link in once more with his sister Debbie. The team have already had some contact with her.

No mention was made of any psychotic symptoms today.

He does worry that his abuser will return but denied placing any knives for example by the bed again. Equally he is not carrying any weapons. He also described being quite angry at an unnamed GP feeling that they offered him little help over the years. However there is no indication that he will seek revenge on those he believes have wronged him and he does not want to return to prison as his family mean too much to him.

It is likely that his medication use has, at best, been sporadic since discharge. However he himself has raised the idea of buying a dosette box to prompt with adherence.

He also admitted that, on the day he drank the Jack Daniels, he also sat with his tablets and thought of overdose. He did not take them and it appears that thoughts of his family and friends were a protective factor. He has no specific plan to harm himself immediately just now but is clearly still struggling with his safety. He agreed to a plan as iterated below. He does seem to wish to engage though can find this challenging. He lives alone but family are important to him. He may help seek but reports having a negative recent experience when using crisis numbers out of hours when he felt that the member of staff was unhelpful and dismissive. I gave an apology regarding this and have tried to encourage him to continue to use the services. (I'm also mindful that I am only I receipt of his account of this interaction.) He has some future focus and ambition in the longer term and, although some hopelessness was noted I did not feel this was complete. In addition his current presentation with me today was clearly being impacted on by his alcohol use over the last few hours. He agreed to bring in his medications the following day and to have excess removed. He had not been taking his medications since discharge on a routine basis and had accumulated extra. I encouraged him to take his medications as agreed.

<u>Mental State Assessment:</u>
James is a young gentleman who presented in an emotional manner. He jumped from topic to topic. He was under the influence of alcohol. He was polite. He appeared somewhat anxious. His presentation was clean and he was appropriately dressed. Subjectively he feels he left the hospital too soon and is struggling. Objectively I found him to be under the influence and acutely emotional. Nil psychotic was voiced today other than a worry that his abuser will appear. His insight is at least fair.

<u>Impression:</u>
I am in agreement that his diagnosis includes alcohol dependence, substance misuse, EUPD, ADHD and trauma. At the meeting today he was under the influence. His risk appears to have escalated a little since discharge likely due to a number of factors including

his alcohol and cannabis use, the fact that he is now living independently again, non-adherence to medications. However I was of the opinion that he was still home treatable.

Plan:

1. We will make a further phone call to him later tonight and see him again tomorrow.
2. We discussed taking the situation step by step and much positive encouragement was given. We spoke of how he might spend the next few hours.
3. He is planning to buy a dosette box. He will bring his excess medications to his appointment tomorrow to try to help us figure out what he has been taking or not. Excess medications will be removed.
4. I have updated his alcohol / addictions worker.
5. We will make contact with his sister Debbie in due course again.
6. I did not feel that there was any indication for further detox at the present time. However this will need to be monitored.

Many thanks,

Yours sincerely

Dr S McAree
Consultant Psychiatrist

Authorised on 10/06/2021 17:52:37 by Sinead McAree.

Shiona Strachan
Interim Chief Officer

Our Ref: JH/SC
Job ID: 276490
Date: 09/06/2021

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Intensive Home Treatment Team
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY
0141 618 3333
www.nhsggc.org.uk

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 MacDowall Street, Johnstone, Renfrewshire, PA5 8QJ

Period of I.H.T.T. contact: 27.05.21 to 09.06.21

Discharge Diagnosis: ADHD / EUPD / Alcohol issues

Follow Up Care: Admitted to South Ward, Dykebar Hospital

Following discharge from South Ward, Dykebar on 26.05.21 James was referred to the Intensive Home Treatment Team for support. He attended for assessment paperwork and had one further phone call prior to failing to turn up for a medical review on 07.06.21. James was contacted by Dr McAree where he sounded intoxicated over the phone. He was asked to attend Dykebar for assessment. When he arrived at Dykebar he had to be helped out of taxi by the taxi driver as he was very intoxicated. He was admitted overnight to sober up prior to a mental health assessment. The following morning when sober he absconded from the ward and currently remains a missing patient from Dykebar Hospital.

Therefore due to failing to engage with I.H.T.T. and his admission to hospital he is now discharged from I.H.T.T. Should you require any further information please do not hesitate to contact us on the number above.

Yours sincerely

John Hyndman
Senior Intensive Home Treatment Practitioner

Authorised on 09/06/2021 11:29:12 by John Hyndman.

Shiona Strachan
Interim Chief Officer

Our Ref: DJ/SR
Job ID: 271853
Date: 26/05/2021

PRIVATE & CONFIDENTIAL

Acute Addiction Liaison Service
The Torley Unit
Dykebar Hospital
Grahamston Road
Paisley

PA2 7DE
Tel: 0141 314 4472
www.nhsggc.org.uk

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Dear Dr Sim

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 MacDowall Street, Johnstone, Renfrewshire, PA5 8QJ

This gentleman was referred to the Acute Addiction Liaison Service having been admitted to South Ward at Dykebar Hospital. I telephoned the ward on the 20h May 2021 and was advised that presently this gentleman was isolating as per COVID-19 instructions. In speaking with the ward nurse, I was informed at that time he appeared mildly agitated although he had been responding well to staff support.

I conducted a review with Mr Weir on South Ward on the 21st May 2021. He initially informed me that he had been diagnosed with ADHD, PTSD and anxiety. On discussion of his alcohol use he advised that prior to admission he had been consuming three bottles of wine on a daily basis and that he would always drink alone on the cycle path in the Johnstone area of Renfrewshire as he preferred the outdoors and this had been his consistent drinking pattern for the last 5 years.

He expressed that he always requires to have a morning relief drink in order to minimise any potential withdrawal symptoms which he stated as hallucinations, sweats, moderate tremor, poor dietary intake and a poor standard of personal hygiene. He also views that both his sleep pattern and dietary intake have suffered due to his alcohol dependency.

Mr Weir resides alone and has been in this current tenancy for the last 7 years. He has regular contact with his sister Debbie whom he views as being very supportive towards him. He has several siblings although he has very limited contact with them, two sisters who reside in Edinburgh and a brother who is presently in prison, named [redacted]

Mr Weir notified that he has received word from a family member that his father had passed away last week although he acknowledged that he had not seen his father in many years as he has recently served a 10 year prison sentence and had only been released last year. He spoke at length and in detail about his childhood and of the trauma he experienced during his younger years, where he advised that he had been allegedly abused by his mother and his maternal grandmother and that he had been taken into foster care from the age of 13 years of age.

He was accommodated by the local council in a children's home and had been allocated a befriender whom he again alleged had sexually abused him from the age of 17 years to 24 years of age and he also notified that the perpetrator had undertaken a jail term in relation to this although he had been liberated two years ago.

Mr Weir also notified that he had contact with the Panda Centre in his younger years for many years although he was unable to recall when this ended. Although he did remember being prescribed Concerta for his ADHD which he was keen to be re-established on. He also advised that he had input from a psychiatrist from the CMHT and had a CPN for a short period, although he had been discharged from the service pre-COVID19 lockdown procedures although was unclear when.

He estimated that he had been using alcohol as a means of self-medicating since the age of 13 years of age as he had not underwent any form of formal counselling. He recalled undertaking an inpatient alcohol detoxification programme at the turning point service in 2019 and a further detox at the Haven private facility in Kilmacolm, although he views that he did not benefit from the latter detox due to its religious connotations and connections.

Concurrently Mr Weir had also been smoking cannabis for many years although ceased his use of this substance late last year as he notified that he had got himself into debt in relation to this but he has now managed to pay this debt off. I took the opportunity of providing alcohol and health education and it was strongly recommended that Mr Weir aim to take this opportunity to aid long term abstinence from alcohol in aiding his own physical and mental health recovery.

Information was given on local community alcohol support services and of the various treatment options that they provide. He did acknowledge the negative impact that alcohol has had on various spheres of his life as whilst under the influence of alcohol he views that he becomes agitated and aggressive which has led on several occasions to him becoming involved with Police and judicial services. He currently has a court case pending and this is due to him conducting an assault on both nursing and medical staff at the Royal Alexandra Hospital in Paisley and also against Police who were in attendance and that his court date is on the 3rd June 2021.

Again Mr Weir asked to be re-commenced on Concerta and it was explained to him that this was a drug that was predominantly used to treat children with ADHD although as a child turns to adult it begins to sometimes/occasionally have an opposite effect and stimulate more agitation. However it was suggested that he discuss this with ward medical staff.

I explained to Mr Weir that I will send a fast track referral to the alcohol and drug recovery service in order that he gain support on discharge from hospital.

I conducted a further review with this gentleman on South Ward on the 24th May 2021. I advised Mr Weir that he has now been allocated a Community Addiction Nurse, Lyndsay Meekins who will contact him this week in order to conduct an in depth addiction assessment and to provide him with an appropriate level of support. On discussion with ward medical staff it was ascertained that presently Mr Weir is now prescribed Mirtazapine 30mgs x1, Diazepam 5mgs x 2, Concerta 18mgs x 1.

I have emailed Nurse Meekins to advise her of this and this gentleman will now be discharged from the Acute Addiction Liaison Service caseload.

Shiona Strachan
Interim Chief Officer

Yours sincerely

Denise Johnston
Acute Addiction Liaison Nurse

Authorised on 02/06/2021 09:20:37 by Denise Johnston.

Carenap Basic Information Sheet

Person's full name : James Weir
Mr / Mrs / Miss / Ms / Other
Preferred name :
DOB : _24___ / __08___ / __1964_____
Lives alone – Yes / No (please circle)

CHI number : 2408643279
Social work number :
Other number *(specify)* :
Gender: M / F / Transgender / Other :
Ethnic Background : White British

Referrer

Name of Referrer : Denise Johnston
Profession: Addiction Liaison Nurse

Address : Liason Services, RAH
Telephone :

Is person aware that referral has been made? Yes / No (please circle)

Reason for assessment

Relapse prevention support

Date of referral : _24___ / __05___ / _2021___

Person lives in? *(tick box)*

Rented – Local Authority	❑	Sheltered Housing	❑	Residential Home – Local Authority	❑
Rented – Housing Assoc.	❑	Supported accommodation	❑	Residential Home – Private	❑
Rented – Private Landlord	❑	Hospital	❑	Residential Home – Voluntary	❑
Rented – Other (specify what)	❑	Nursing Home	❑	Hostel	❑
Privately Owned	❑	Care Home	❑	Homeless	❑
Relatives home (specify who)	❑	Other (specify what)	❑		

Present address : Flat D
27 Macdowall Street
Renfrewshire

Post town : **Johnstone**
Post code : **PA5 8QJ**
Telephone : (07843) 850737

Home address *(if different)* **:**

Post town :
Post code :
Telephone :

Contact Details	**Main carer**	**Next of Kin (if different)**	**Keyholder (if different)**
Name (include title) :		Debbie Weir	
Relationship to person :		Sister	
Keyholder :	**Yes / No** *(circle)*	**Yes / No** *(circle)*	
Address :			
Post town :		Johnstone	
Post code :			
Tel (Day) :		07843850737	

Tel (Night) : Tel (Mobile) :			

Who is the GP? Dr.J.C.Sim. Address: QUARRYSIDE MEDICAL PRACTICE, LINDEN MEDICAL CENTRE, Post town : JOHNSTONE Post code : PA5 8PZ Tel (Day) : Tel (Night) : Practice number :	**Communication Needs** Preferred language : English Is an interpreter required? Yes / No *(circle)* Language required ? Yes / No *(circle)* Hearing aid used? Yes / No *(circle)* Spectacles used? Yes / No *(circle)* Other - please speciify

Relevant Background History
To include where appropriate : *Work/employment, Family, Marital Status, Religion, Any other factors – Housing/Accommodation issues, recent change in abilities/function, Concerns, Risks, Social network, Bereavement,*

Lives alone. Unemployed. In receipt of benefits. Recently bereaved of Father. Recent suicidal intent leading to hospital admission.

Relevant Medical History (including current medical conditions and medication)

Medications;

Diazepam 5mg BD
Folic Acid 5mg
Methylphenidate 18mg to be increased to 36mg
Mirtazapine 30mg
Olanzapine 15mg
Thiamine 100mg TID

Renfrewshire Joint Care

Partnership

Shared Information

Client Details

Surname: Weir	**Date of Birth: 12/03/1989**
Forename: James	**Social Work ID:**
Contact Agency: ADRS	**Department: ADRS**

I Mr/Mrs/Ms ----------James Weir----------have had the principles of joint care planning explained to me by my health/social worker.

----------Lynsey Meekins----------. I understand that it may be necessary for information relating to me to be shared between the various agencies involved in my care, i.e.. health and social work professionals and voluntary agency staff. Where appropriate. The information shared will only be that relevant to my care and those I care for and it will be only on a "need to know " basis unless there is a risk to myself or others.

I give my consent to the sharing of my personal information for the joint care planning purposes explained to me.

I give restricted consent to the sharing of my personal information for the joint care planning purposes explained to me.

I do not give my consent to the sharing of my personal information for the purposes explained to me and I understand that this could place restrictions on the integrated service within my care plan. These restrictions have been explained to me.

I * have/have not received a copy of an information leaflet which explains how information about me is used.

*Please delete as appropriate

Signed ---Verbal consent via telephone consultation---------- Date ----27/05/2021----------

Status if not client: _____

Health/Social Worker Statement:

I confirm that I have explained to –James Weir----------the principles of joint care planning, including the fact that information may be shared with others on a "need to know" basis. I have also explained that should information sharing consent be refused the level of integrated service could be restricted.

Signed -------Lynsey Meekins---------- Date -----27/05/2021----------

Designation --------Nurse----------

Single Shared Assessment

Drug / Alcohol Support
Needs Assessment Package

14th April 2008: Version 12

Person's Name:	James Weir
Person's DOB:	12/03/1989
Lead Assessor's Name:	Lynsey Meekins
Agency of Lead Assessor:	ADRS
Date of Assessment:	01/06/2021
Date of Review:	
Date of Review:	
Date of Review:	

Section 1: BASIC INFORMATION			
Person's Full Name:	James Weir	CHI / PIMS Number:	120 389 3450
ADDRESS	Flat D 27 Macdowall Street Johnstone	SWIFT/CARE FIRST/REFERENCE Number:	

GP NAME, ADDRESS AND TEL NUMBER	Quarryside Medical Practice, Linden Medical Centre, Johnstone,	Date Consent Form Completed:	01/06/2021
Location (where seen):	Telephone consultation	Date of Birth:	12/03/1989

Section 2: ALCOHOL / DRUG CURRENT USE & HISTORY

Drugs / Alcohol History: Please indicate onset / development of difficulties, short history leading to present use (present use should be more detailed). Indicate type of substance (legal (L), illegal (I) or prescribed (P). Method of Use

Current

Substance Used (What, How much, How often, and Last used)	Type (L, I or P)	Consequences
Currently abstinent from alcohol following being detoxed during an inpatient hospital admission. Smokes cannabis – unable to provide estimate of how many joints, but advises of daily use.	L	Has felt tempted at times, however has resisted. Has been spending time with siblings and friends to distract himself of thoughts of alcohol.

Have you ever injected?	YES		NO		**Denied IV use.**
Have you ever shared injecting equipment?	YES		NO		

Comments – relating to above

Smokes cannabis – unable to specify amount.

Denies IV use, however previous assessments suggest historic IV use and methadone.

Section 2: ALCOHOL / DRUG CURRENT USE & HISTORY (contd)			
History			
Age	Substance Used (What, How much, How Often)	Type (Legal,illegal or prescribed)	Consequences
13	Alcohol and cannabis use.	I	Affected mood and behaviours.
Age 20	Drinking most days – After serving prison sentence.	L	Low mood, withdrawals – tremor sweats, nausea.
30's	Daily drinking – Buckfast 2 bottles, cans of cider/beer. Smokes Cannabis.	L/I	Concealing alcohol use from family. Experienced withdrawals; tremor, sweats, nausea. Reports poor memory.

Section 3: SERVICE HISTORY DETAILS		**Yes**	**No**	**N/A**
Current and Previously Known Details: Please indicate whether client has any other current involvement, and whether s/he is previously known to this agency and / or other agencies				
Contact Details Named Worker (address & telephone) Dates of Involvement	Interventions	Outcomes (please include dates)		
Assessed by ADRS June 2020, Alison McPhee	Attended for assessment. Disengaged.	Discharged from service.		

Section 4: GENERAL INFORMATION / PROFILE										
HOUSING (Tenancy, Problems, Complaints, Arrears, Length of Tenure)							Yes	No	N/A	
Details: Council house, since 2014.										
FIRE RISK: Information given	YES	NO	**Leaflet Given**	YES	NO	**Referral On**	YES	NO	DECLINED	
FINANCE (Present Income, Outgoings and Debts)							Yes	No	N/A	
Details: In receipt of benefits. ESA and PIP. Income Maximisation Required?				Yes	No	N/A				
EMPLOYMENT (Past/Current Difficulties, Literacy and Numeracy)							Yes	No	N/A	
Details: Currently unemployed. Has not worked for 6 years.										
EDUCATION (Past/Current Difficulties, Literacy and Numeracy)							Yes	No	N/A	
Details: **Attended Paisley schools. Reports of bullying. Left school aged 15. Reports difficulties with reading and writing.**										
CURRENT LEGAL STATUS (Please indicate status below)							Yes	No	**N/A**	
None		Probation				Licence		DTTO		
Community		In Prison				Other		DTTO Assessment		
Details:										
Previous Offences:							Yes	No	N/A	
10 month sentence for house breaking and knife possession.										
Current / Outstanding Offences							Yes	No	N/A	
Due in court 03/06 for alleged assault against NHS staff. Pleading diet. Been attempting to contact solicitors to plead guilty.										
Any Other Details (including any periods in Prison)										

Section 5: HEALTH INFORMATION / PROFILE

Physical Health (including hospital admissions, current prescribed medication, Hepatitis B vaccination, Hepatitis C information, Pregnancy).

Smoker - Smokes Cannabis. Unable to quantify how many joints but daily.

Experiences pain in leg, due to an incident a decade ago, in which he was knocked down by a car. Broke 2 bones in leg.

Hernia op 6 years ago.

Appetite is good. Reports weight gain.

Sleep hygiene has improved recently. Sometimes wakeful overnight. Advises sleep pattern was very poor prior to hospital admission.

Psychological Health (including hospital admissions and current prescribed medication).

Diagnosis of EUPD. ADHD in childhood.

Denies any suicidal intent during today's assessment, however reports frequent ideation of same. Is in possession of crisis numbers and is willing to utilise. Has CMHT input and awaiting allocation of CPN.

Recent hospital admission due to voicing suicidal intent, discharged yesterday 26/05/2021.

Hx of DSH – cutting, attempted to set self on fire.

Reports Hx of inpatient mental health admissions.

Review of notes indicates diagnosis of EUPD and PTSD.

HX of childhood trauma. Physical abuse at home by Mother and maternal grandmother. Sexual abuse while in care by a befriender between ages 17-24.

Section 6: SOCIAL SITUATION / CONTEXT
Living / Domestic Arrangements; Family Relationships (Past and Present); Current/history of domestic violence
Current
Lives alone. Unemployed. Has sister Debbie who is supportive and also sees his brother who lives nearby. Advises friends have been supportive since discharge from hospital. Has been keeping himself busy doing up his house. Bereaved of Father 2 weeks ago, aged 52 of a heart attack. Hx of domestic abuse at home and sexual abuse in care.
Past
Born and raised in Paisley. Mum and Dad, 3 brothers and 1 sister. Reports physical abuse at home by Mum and Maternal grandmother. Entered local authority care system aged 13-17. Reports sexual abuse throughout this time by a befriender. Befriender has served a custodial sentence in relation to same. 10 months in prison due to possession of knife and house breaking. Has siblings in Edinburgh and Renfrewshire. Only maintains contact with sister Debbie and a brother who lives nearby.

Section 7: INFORMATION ON CHILDREN, PRENANCY & OTHER CARE RESPONSIBILITIES					
Children?	Yes	No	Contact with children	Yes	No
			Frequency of contact		

Name	D.O.B	Address	Main Carer	Nursery /School	SW Status

Who is the main carer?	Relationship to Adult / Child	Any Care Responsibilities to Children / Child Under 16
Who is in the household (over the age of 16 either resident or on a regular basis)	Relationship to Adult/Child	Do they hold any care responsibilities to Children/Child Under 16 (e.g school run , baby sitting e.t.c.
1.		
2.		

3.		
4.		
Children seen?	Yes	No

Comments (Clarify if this information has been verified)

Where were the children seen

Any issues arising from this

Partner Pregnancy

Is partner pregnant	Yes	No	Is partner a drug user Is partner a dependant alcohol user Is partner attending ante natal	Yes	No

If Yes, stage of pregnancy / Expected date of delivery

Who has this been verified with (GP, e.t.c.)

Is client currently on Methadone or prescribing in relation to alcohol dependency

Is further support required? (if yes identify)

Client Pregnancy		
Is client Drug/Alcohol Users:	Yes	No
Are they attending ante-natal care	Yes	No
Are maternity services aware of drug/alcohol use:	Yes	No
Have they had regular contact with support services (establish contact with SNIPS / New Expectations / SW Referrals to determine level of contact/careplan and summarise, discuss any prescribing issues in relation to stability during pregnancy. Potential of neo-natal withdrawal).		
Has a Pre-Birth initial or full discussion been arranged? **Date for Same**		
If no – initiate with senior a SW pre-birth process to inform support needs		

Section 7: INFORMATION ON CHILDREN, PREGNANCY & OTHER CARE RESPONSIBILITIES *(continued)*			
Other care Responsibility?	Yes	No	N/A

Name	DOB	Address	Main Carer

Relatives / Other Agencies Arranging Childcare:	Yes	No	N/A
Is childcare arrangements made on a regular basis by extended family.			

Who provides this, benefits of support
How often (This will establish planned respite for children/networks and areas of potential resilience)

Help Required with Children or Arranging Childcare:	Yes	No		N/A	

What assistance could be provided and by whom

Has client agreed to action suggested	Yes	No
If yes specify action		

Social Work Contact	Yes	No

Contact with other allocated worker/s and summarise priority areas for parent and child joint careplanning
If no state why

Health Visitor Contact	Yes	No

Clarify what child(ren) involved with Health Visitor?
Frequency of nursery placements (a.m. /p.m. daily e.t.c.)
Summarise priority areas for parent and child joint careplanning.
If no state why

School nurse contact –	Yes	No
Specific school concerns? Summarise priority areas for parent and child joint careplanning Homelink involvement Attendance		

Children's Health Issues:	Yes	No
Any current applications to be applied/medications to be dispensed by parent.	Yes	No
Regular Hospital or clinic appointments for child	Yes	No
Any issues in relation to above		

Client's Perceived Effects of their Own or others Alcohol / Drug Use on Children

Ability to manage income and prioritise everyday bills/household expenditure
Ability to emotionally respond to children given the potential physical and mental health impact of alcohol/drug use
Ability to provide activities for children e.g. visits to park, mother and toddler groups
Older children assuming parental role for younger children
What Arrangements are Made for Children when Drug / Alcohol Use Is Being Pursued / Consumed?

Current routines/frequency for alcohol/drug consumption (who with/where/what time)
Discuss areas of potential risk in relation to above and any impact on children. Identify areas of action
Risk from other adults in household
What arrangements are made for Safe Storage of Alcohol / Drugs and associated paraphenalia (both illegal and prescribed) Where are all medications kept (verify at first HV) Discuss potential risks from both and summarise Identify any action to be taken.
Is an appropriate storage box required. If no identify action e.g. purchase of box. Timescales Who will purchase Yes ☐ No ☐

Please identify any factors related to children's issues arising from assessment and action taken
When clients stability of alcohol/drug use is obtained how would this change clients lifestyle/parenting

Section 8: ASSESSMENT OUTCOME / INITIAL PLAN OF CARE		
Identified Need (Should be in order of priority of user)	**Proposed Interventions** (Demonstrate how intervention will take account of gender, ethnicity and disability)	**Timescale** Include person responsible
Wishes to maintain current abstinence long term.	Telephone contact as per RAG category for relapse prevention and motivational enhancement support. Obtain bloods and UDS for review. Assess suitability for Pabrinex or protective medication prescribing, if James wishes same.	Addiction Nurse Lynsey Meekins Will commence contact as of week beginning 07/06. Blood clinic appointment to be scheduled.

Section 8: ASSESSMENT OUTCOME / INITIAL PLAN OF CARE (contd)

Summary of Assessment

32 year old gentleman. Currently abstinent and wishing to maintain this long term.

Diagnosis of EUPD and ADHD. Denies any intent of suicide or self-harm at present, however reports frequent ideation of same. Is in possession of crisis numbers and is willing to utilise.

Initial plan of care is for;

1) **Relapse prevention support and motivational enhancement via telephone consultation as per RAG category.**
2) **Bloods and UDS to be obtained for review.**
3) **To discuss protective medication prescribing if James wishes and is assessed to be a suitable candidate.**

Unmet Need	N/A	Reasons

Client's Perception of the Above

No further action / Referral to other agency (please give details why)

Service Users Signature: Verbal consent via telephone consultation.	Date 01/06/2021
Assessors Signature: Lynsey Meekins	Date 01/06/2021

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: SM
Job ID: 100043856
Date: 31/05/2021

PRIVATE & CONFIDENTIAL

Student Nurse R Finnie
South Ward
Dykebar Hospital
Grahamston Road
Paisley
PA2 7DE

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear Student Nurse Finnie,

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

A referral was received by the Renfrewshire Sector Screening Group and subsequently screened at the meeting of 28/05/2021. Following discussion, it was passed to CPN @ Renfrewshire Community Mental Health Team, Mile End Mill, 12 Seedhill Road, Paisley.

Please do not hesitate to contact me should you have any queries.

Yours sincerely

RCMHT Team Lead

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:		Time of Assessment:	

Personal Details			
Surname:	Weir	CHI Number:	1203893450
Forename:	James	Relationship Status:	
Dob:	12/03/1989	Age:	32
E-Mail Address:		Referral Urgency:	Urgent
Registered GP:	Dr Juliet Sim	Practice Code:	
Address:	Flat D 27 Macdowall Street. Johnstone. Renfrewshire	Sex:	Male
		Telephone No:	
Post Code:	PA5 8QJ	Mobile No:	07706807775

Additional Information		
Children: No	At Home: No	SW Involvement: No
Risk Factors:	Violence to self or others History of suicidal thoughts with a plan to electrocute himself by putting his toaster in his bath filled with water. Alcohol and cannabis dependence. Forensic history. Has spent 10 months in prison for housebreak and carrying 2 knives with the intent to harm the men who he claimed raped his sister. James has an upcoming court case on for assault. Also known to be aggressive at A&E attendacne.	
Consent to Referral:	Patient is aware of referral	Has a Glasgow Risk Assessment Been Completed:Yes
Involved Parties:	Other (please specify)	
Disabilites:	Mobility No disabilities	
Brief History/Current Issues:	James has a diagnosis of Emotionally Unstable Personality Disorder (EUPD). History of suicidal thoughts with a plan to electrocute himself by putting his toaster in his bath filled with water. Alcohol and drug use. James reports that he has had a negative relationship with alcohol since he was 13 years old. James reports that he drinks 2 bottles of buckfast daily and will drink 5 days per week. James denies any drug use apart from 6 Cannabis joints a day which has been the pattern for the last 6 years. James has reported that he has previously DSH by cutting himself and he also reported trying to set himself on fire. Reports volatile upbringing. James states that he was physically abused by mum, gran and step dad. James reports that he was sexually abused by a worker whilst in care. James has reported low mood and has had thoughts of wanting to be dead. At present James is positive that he no longer wants to drink and is focused on his recovery.	

Reason for Referral:
Referral for CPN for James Weir is important to support James in the community. Furthermore, to try prevent the deterioration in mental state. The support of the CPN in the community can help James remain future focused and positive about his recovery with the absence of alcohol and drugs.

Referred By:	R Finnie
Location:	Dykebar
Designation:	Student nurse
Contact Information/Number:	01413144070
Date Referred:	26/05/21

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

ADULT EMERGENCY ASSESSMENT & ADMISSION FORM

Date Assessed:	2	7	0	5	2	1	Time of Assessment: (24 Hour Clock)	1	0	0	0

Personal Details			
Surname	Weir	CHI Number	3450
Forename & Initial	James	Marital Status	Single
Previous Name(s)		Legal Status	Inf Review Date: / /
Date of Birth	12.03.89	Advanced Statement	Yes ☐ No
Address	27d McDowall Street	Named Person	Nil
	Johnstone	CPA	Yes ☐ No ☑
Post Code	PA5 8QJ	Religion	
Telephone No.		Present Occupation	Unemployed
Mobile No.	07843 850737	Interpreter Required	Yes ☐ No ☑
		ADULT AT RISK AP1	Yes ☐ No ☑
Risk to Staff:			
Next of Kin	Debbie Weir	Resides with	Alone
Relationship	Sister	Relationship	
Address	[redacted]	Tel No.	
		Consent to Involve	Yes ☐ No ☐
Post Code		**Dependants: Names**	**DOB**
Telephone No.		Nil	
Mobile No.	[redacted]		
Consent to Involve	Yes ☑ No		
Height	5ft 10 ½ ”	Hair Colour	Short, brown
Weight	60kgs	Eye Colour	Blue
Build	Slim	Distinguishing Marks	Tattoos “J” on neck/star tattoo left hand
Sex	Male ☑ Female	General Appearance	Well kempt
Allergies	Penicillin	Driving	Yes No ☑

REFERRED BY (Name) :- Phillip Higgins, South Ward											
& AGENCY/DESIGNATION :-											
CONTACT No.-											

ASSESSMENT LOCATION:	
ASSESSMENT OUTCOME	
ADMISSION YES ☐ NO ☑	CMHT YES ☐ NO
HOSPITAL / WARD	OUT PATIENT REQUEST YES ☐ NO
	IHTT YES ☑ NO ☐
ANY OTHER INFORMATION:	

ASSESSED BY -			
NAME	Linzi Campbell, Snr IHTT Practitioner	NAME	Ashley Stevenson, Student Nurse

Existing Services involved in care (next appointment due)	
GP: Dr Ragi, Linden MC, Johnstone	Psychiatric Consultant:
Telephone No:	Telephone No:
Social Worker:	CPN: referral made by ward for new CPN
Telephone No:	Telephone No:
Other: Frank Finnie, RCA	Other: RDS Lynsey Meechans, appt 27.05.21 at 3pm
Telephone No:	Telephone No:

PRESENTING PROBLEMS AND ASSESSMENT OF RISK
(as expressed by client/carer and assessor):

32 year old gentleman with diagnosis of ADHD, alcohol issues and EUPD. James was admitted on 17.05.21 due to suicidal thoughts, alcohol use and recent bereavement of father. At point of admission he had suicidal thoughts with plan to electrocute himself by putting toaster in the bath filled with water.

James's father passed away one week before presentation which appears to be the trigger. He is drinking 3 x bottles of Buckfast a day for the past 5 years. Smokes cannabis.

In hospital was given alcohol detox, commenced on Mirtazapine and Olanzapine. Dose increased to 30mgs Mirtazapine and 15mgs Olanzapine. Recommenced on Methylphenidate for ADHD, dose to be increased to 36mgs after one week. Commenced on folic acid for low levels and thiamine for withdrawals.

On review today James appeared tearful in context of death of his father. States he slept well, ate well. Has chronic suicidal thoughts but no plans or intent, cites family as protective factors. Future focused regarding decorating house and getting new tattoos. Worried regarding an upcoming court case.

Happy to work with IHTT and engage with Addiction Services.

PREVIOUS MENTAL ILLNESS EPISODES (including history of engagement, dates of hospital admissions, detentions, past medications, history of risk eg. Suicide attempts/DSH):

History of deliberate self harm – cutting arms and chest with Stanley knife. Has scarring.
Attempted to set self of fire 2 years ago.
Attempted to hang self 18 months ago.
Reports numerous attendance at Dykebar in the past.
Sertraline prescribed by GP "for years".
Anxiety, depression, adjustment disorder.
2 previous admissions.
History of deliberate self harm via cutting and one stated incidence of setting himself alight.

Update 27.05.21:-
Previously open to CMHT – discharged.
Referred to RDS during admission – appointment 27.05.21 at 3pm.
Admission 19.05.21 to 26.05.21 due to alcohol detox and suicidal thoughts.
Overdose on street valium 2 years ago.

CURRENT HEALTH ISSUES/MEDICAL HISTORY (including any disabilities, smoking status, investigations)

Complaining of stomach pains.

Update 27.05.21:-
Ongoing issues with knee from being hit by car 11 years ago. Metal plates in knee, states he now have arthritis from this and has pain from this.

MEDICINES RECONCILIATION

Source (please tick all used)

Patient	Relative/ Carer	Patient order slip	GP ref letter/ print out	GP ECS	GP phone call	Patient's own drugs	Other

Admission Medicines			Plan for medicines (Dr must complete)				Comments
Name	**Dose**	**Freq**	**Continue**	**Amend**	**Suspend**	**Stop**	**Reason for alteration/other comments**
Diazepam	5mgs	bd					
Folic acid	5mgs	Od					
Mirtazapine	30mgs	Nocte					
Olanzapine	15mgs	Nocte					
Methylphenidate	18mgs	Od					To be increased to 36mgs after one week
Thiamine	100mgs	tid					

Pharmacy comments:

One weeks supply from ward. Has penicillin allergy.
Will collect from Well Pharmacy, Quarry Street, Johnstone. Weekly dispensing at present.

FAMILY HISTORY (including family, education, occupation, parental/siblings relationships, childhood trauma):	
Mother	Mary Weir, lives in Ferguslie. Haven't spoken in years. Apparently tells him to "go away". Poor relationship.
Father	Deceased recently – unaware of reason.
Siblings	Has siblings – no contact. Sister, Debbie – [redacted] Close contact now with Debbie.
Children	Nil.
Family Psychiatric History	None known.

PERSONAL HISTORY	
Birth / Childhood	Born in Paisley. Brought up in care from age 13 – children's home. Physically abused by his gran. Was sexually assaulted by a friend for 7 years. Reported to Police, charges were brought – he thinks they were dropped.
School / Education	Attended school in Paisley. Left school aged 15.
Primary/ Secondary Qualifications	Cannot remember.
Occupations	Various jobs. Currently unemployed.
Relationships (including psycho sexual)	No relationship at present.
Premorbid Personality	Wants to help others.

SOCIAL CIRCUMSTANCES

ACCOMMODATION and FINANCES:

On benefits. Lives alone – doesn't like neighbourhood.
Update 27.05.21:-
Lives in one bedroom council flat, need some work done to it. Thinking of moving out of area.
Currently on ESA, managing finances well, some debts, unsure of amount.

OCCUPATIONAL and DAYTIME ACTIVITIES:

Spending time with sister and her partner and nephew. Plans to decorate house.

PERSONAL CARE and DAILY LIVING SKILLS:

Sleeping well, appetite good.

CHILD WELFARE (including Child Protection issues – physical injury, emotional abuse, sexual abuse, neglect**):**

Nil.

RELATIONSHIP WITH OTHERS (including current support mechanisms & effect of presenting problems on relationships**):**

Sister Debbie is good support and he has good support from friends and family.

ALCOHOL and ILLICIT DRUG USE (current and past, previous detox programmes/seizures, Methadone, IV use, cigarette smoking, misuse of prescribed medications)

Doesn't want to drink – managed to remain abstinent for 2 weeks. (Was drinking 2 bottles Buckfast a day). Not had any cannabis for two weeks – took cocaine 2 nights ago.
Update 27.05.21:-
Before admission was drinking 3 x bottles of tonic wine per day for 5 years. Smokes cannabis. Smoking one in morning and one at night currently. Cigarettes approx. 5 to 10 per day.

FORENSIC HISTORY (past and present)

Sleeps in his house with a 10 inch meat knife for protection from past sexual abuser.
In prison 10 months for housebreaking / reset / breach of peace when drunk.
Update 27.05.21:-
Court date on 03.06.21 – states this is for trying to hit NHS worker in 2020. Pleading diet this day, states he is pleading guilty. Previous incident with Police unsure of charge. Query breach of peace.

MENTAL STATE EXAMINATION

APPEARANCE & BEHAVIOUR:

Well kempt, good eye contact, rapport easily established. Tearful in regards to death of father.

MOOD & AFFECT (Objective & Subjective):

Subjectively – mood 6 or 7/10 today, emotional at loss of dad recently.
Objectively – appropriately tearful regarding father. Appeared euthymic.

SPEECH & THOUGHT FORM:

Normal rate rhythm and tone.

THOUGHT / CONTENT

Chronic suicidal thoughts, family are protective factors.

PERCEPTUAL ABNORMALITIES:

Internal voices and flashbacks, voices of person who sexually assaulted him, voices of his gran and mum, derogatory. Alarm sounds from hospital occurring.

COGNITION:

Intact but not formally assessed.

INSIGHT:

Intact.

INFORMATION GAINED FROM OTHER SOURCES (collaborative information):

EMIS.

CLIENTS EXPECTATION OF REFERRAL/SERVICE (recovery focused):

Support from services.

CARER'S EXPRESSED NEEDS and EXPECTATIONS OF REFERRAL/SERVICE:

Nil expressed.

SUMMARY (including impression, identified strengths and risks):	
32 year old gentleman was diagnosis of ADHD, alcohol issues and EUPD. Admitted 17.05.21 due to suicidal thoughts, alcohol use and recent bereavement of father. Alcohol detox on the ward and commenced on Mirtazapine which is increased to 30mgs and Olanzapine 15mgs. Father passing away appears to be the trigger. Family are protective factors for suicidal thoughts, future focused. Happy to work with IHTT and Addiction Services.	
RELEVANT STRESSORS:	
Reducing alcohol.	
PROTECTIVE FACTORS:	
Family and friends.	
PLAN:	
Daily contact with IHTT support. Telephone contact 28.05.21 between 1-3pm. Crisis numbers provided and James happy to utilise.	
DISCUSSED WITH:	
Assessors signatures:	
PRINT& DESIGNATION	
1: Linzi Campbell Snr IHTT Practitioner	
2: Ashley Stevenson Student Nurse	

Renfrewshire Health & Social Care Partnership

FACILITATION OF EARLY DISCHARGE ASSESSMENT REQUEST

Date of Referral: 26.05.21		**Time of Referral: 19:00**	
Name: JAMES WEIR	**Sex:** M	**DOB:** 12.03.89	**CHI No:** 3450
Home Address: Flat D, 27 McDowall Street Johnstone **Postcode:** PA5 8QJ **Telephone No:** **Mobile:** 07843 850737		**GP:** Dr J Sim **Address:** **Telephone No:** **Advise patient to be seen on ward prior to discharge, accept in exceptional circumstances eg: out of sector.** **Tick here ……..**	

Referrer: Phillip Higgins	**Agency:** South Ward, Dykebar	**Tel No:**
Admission Date: 19.05.21		

REFERRALS COMPLETED ON WARD (by whom)
Alcohol and drugs referral / CMHT referral

CMHT INVOLVED YES NO (IF YES WHOM)

Legal Status: inf	**CPA (Care Manager):**

DIAGNOSIS: ADHD, alcohol issues, EUPD
REASON FOR ADMISSION:
Alcohol detox, not contracting to safety, suicidal thoughts.

PROGRESS ON WARD: (Including risk to self or others)
Treatment complete – alcohol detox. Dependent personality traits?

EXPECTED IHTT INTERVENTION:
Monitor mental health.

Any children at home: YES ☐ NO ☑

Names:	Gender	D.O.B.	Current location / carer:

History of alcohol abuse: YES ☑ NO ☐ Past ☐ Present ☑ mainly alcohol

History of drug abuse: YES ☐ NO ☑ Past ☐ Present ☐

KNOWN HISTORY OF AGGRESSION/VIOLENCE :

YES ☑ NO ☐ Past ☐ Present ☐ hostile to A&E staff

Details:

Potentially dangerous to others ☐

KNOWN FORENSIC HISTORY :

YES ☐ NO ☑ Past ☐ Present ☐

Details:

Potentially dangerous to others

KNOWN HISTORY OF SELF HARM : YES ☐ NO ☑

(Overdose / cutting / other)

Current medication: (including proposed changes)

Diazepam 5mgs bd, folic acid 5mgs daily, methylphenidate 18mgs (to be increased after 1 week to 36mgs) Mirtazapine 30mgs nocte, Olanzapine 15mgs nocte, thiamine 100mgs tid

Time and ward of assessment Charleston Centre 10am 27.05.21	

Allocated assessors:

INFORMED:

Signature: N Lawrie	Date: 26.05.21	Time: 19:15

Immediate Discharge Letter

Highly Sensitive: No
Consent for Sharing Withheld: No

JULIET SIMQuarryside Medical Practice,Linden Medical Centre,25 Floors Street,
Johnstone, PA5 8PZ

Main Switchboard:
Date of Completion: 26-May-2021

Dear JULIET SIM,

Name	CHI	DoB	Address
James Weir	**1203893450**	**12-Mar-1989**	**27D MACDOWALL STREET, Johnstone, Renfrewshire, PA5 8QJ**

Admitted	Type	Discharged	Destination
17-May-2021 18:00	IP	26-May-2021	Private Residence - (supported)

Specialty	Consultant	Ward	Telephone
Psychiatry	Rajan	Dykebar South Ward G1	

Primary Diagnosis
There is no data to display.

Secondary Diagnosis
There is no data to display.

Significant Operations / Procedures:
There is no data to display.

Last Discharge Review: Shivraj Vittalraj (Shivraj Vittalraj - StR) on 26 May 2021 15:19

Legal Status: Informal

Discharge Medication:

Active Drug Name	Route	Dose	Disp	Reason	Further Details	ECS	Since Admission
Diazepam 5mg tablets	oral	1 tablet twice daily	Yes				Added
Folic acid 5mg tablets	oral	1 tablet once daily	Yes				Added
Methylphenidate 18mg modified-release tablets	oral	1 tablet once daily	Yes		**Dispensing Details:** 7x18mg M/R **Drug Details:** To be increased to 36 mg after 1 week. To supply 7 (seven) tablets of 18 mg only		Added Amended
Mirtazapine 30mg tablets	oral	1 tablet once daily at night	Yes			Y	Amended
Olanzapine 15mg tablets	oral	1 tablet once daily at night	Yes				Added
Thiamine 100mg tablets	oral	1 tablet three times daily	Yes		**Dispensing Details:** 42 X 50mg		Added Amended

"Added" means this medicine was added to the Clinical Portal record after admission. It does not necessarily mean this medicine was started by the hospital.

Dispensing Comments
There is no data to display.

Withheld Medication:

Date	Withheld Drug Name	Route	Dose	Note	Withheld Reason
There is no data to display.					

Stopped Medication:

Date	Stopped Drug Name	Route	Dose	Note	Stopped Reason
There is no data to display.					

Reason for Admission and Presenting Complaints	Admission Category
No data available	No data available

Clinical Comments:	Dear Colleague,

32/m Mr Weir was admitted to South Ward in Dykebar Hospital. Patient presented with suicidal thoughts.

Past Psychiatric History: EUPD, Overdose of Drug, ADHD in Childhood was on Methylphenidate. Under the care of Dr Kaur in RCMHT.

Past Medical History: Hernia operation , Alcohol withdrawal

Events leading to admission:
Mr Weir voiced suicidal thoughts when he was in contact with the bank. Police was contacted by bank staff.. Patient was accompanied by the police to the ward . James expressed current suicidal thought with a plan to electrocute himself by putting his toaster in his bath filled with water. Patient's dad died 1 week ago which appears to be a trigger for his presentation as well as an upcoming court case for assault on 3/6/21. Patient admitted to consuming 2 cans of beer this morning. Did not appear intoxicated. He reports consuming alcohol most days.

Drug and Alcohol History: Drinks 3 bottles of wine a day, takes buck fast, drinking for past 5 years drinks daily, last drank 2 days back, has craving to drink. Smokes cigarettes, last used cannabis 3 days back, uses 3 grams of cannabis a day started at 13 years both Alcohol and Cannabis, cannabis helps him with appetite, stated it makes him paranoid sometimes. Used Cocaine a year ago, Took street valium 2 years ago and stopped it, Denied usage of Amphetamines, heroin, magic mushroom diazepam.

Social History: Social: Mr Weir lives alone in a 1 bed flat in Paisley. Born and raised in Paisley

Personal History: Patient described he had a volatile upbringing. James advised he was physically abused by his mum, step dad and gran. He reports he was removed from their care and put into care system at age 13. James advised he was sexually abused by a worker whilst in care. He advised as a young adult, he pressed charges and the abuser was found guilty. James is currently not working and appears to have little structure meaningful activity. He does feel very supported by his sister Debbie.

MSE on Admission:
Causally dressed variable eye contact ,able to engage in assessment but agitated and restless .Reports mood is low has thoughts of wanting to be dead ,but does not have any definite suicidal plans previously stated wanted to electrocute himself by putting his toaster in his bath filled with water. No evidence of thought disorder .states been hearing his mum voice became abusive when try to explore further .Insight agreeable to stay in the ward .

	Course of Stay in Hospital: Mr Weir was admitted under Dr Mannan in South Ward Dykebar Unit. Was having withdrawal symptom following admission, was given treatment for withdrawal symptoms. Was depressed on initial presentation and had hallucinations. Was Started on Mirtazapine 15mg and Olanzapine 10 mg and dose was later increased to 30 mg of Mirtazapine and 15 mg of Olanzapine. Patient stated he was treated for ADHD as a child and was commenced on Methylphenidate tablets which helped him but was later stopped in the community. Patient was re commenced on Methylphenidate 18 mg after discussing with Pharmacist. Addiction liaison team referral was sent and patient was reviewed in the ward. Referral was sent to Local Renfrewshire Alcohol and Drug Recovery service and patient will be reviewed on 1/06/21. In the recent review patient had good improvement in his mood, no suicidal thoughts or any hallucinations. Was emotional and remorseful about alcohol and drug use, was happy to engage in alcohol rehabilitation program and with IHTT services. Aware of Court case on 03/06/21 for h/o assault. Meds Change: Commenced on Olanzapine, Mirtazapine and Methylphenidate. Diazepam to be slowly tapered and stopped . Patient was on 36 mg of Methylphenidate previously. Dose of Methylphenidate to be increased to 36 mg after one week (Currently on 18 mg Methylphenidate). Patient was commenced on folic acid due to low levels and Thiamine for withdrawal symptoms.
Discharge Comments:	
Follow Up:	Yes To be followed up in IHTT To be followed up by ADRS team on 01/06/21 GP to review medications as mentioned above.
Results Awaited:	No
Pharmacist Comments:	
Final Discharge Letter to Follow:	Yes

Yours sincerely,

Shivraj VITTALRAJ

Prescription Review
Medications reviewed by pharmacist: Elizabeth Mackie (Pharmacist)
Checked by: Margaret GRAHAM (snr pharmacy technician)
Discharged by: Philip HIGGINS (Staff Nurse)

NHS Greater Glasgow & Clyde

In-Reach Service

Referral Form

Name: JAMES WEIR

Ward: SCOTT

CHI: 1203893450

Consultant: DR MANNAN

Situation Hstory of alcohol & drug abuse, 2-3 bottles Buckfast and 1-3 bags of 'weed' a day. Psychotic, paranoid/ delusional. Recent bereavement (Biological father) Has been on alcohol detox since admission

Background Death of father appears to have hit him hard, court case coming up on 3/6/21 for assault on nurse at ? Age whilst under the influence of alcohol

Assessment F&P substance abuse, anxious/agitated at times Has stated he's scared for his safety so will not go out in evenings. Potential for relapse very high

Recommendations Support following discharge, referral to CMHT/IHTT, SDS

RISK Relapse, violence, deterioration of mental health

Services Involved

CPN

REFERRAL

What Service/Discipline is referral for:	Integrated Alcohol Team		
Date Assessed:		Time of Assessment:	

Personal Details			
Surname:	James	CHI Number:	1203893450
Forename:	Weir	Relationship Status:	
Dob:	12/03/89	Age:	32
E-Mail Address:		Referral Urgency:	Urgent
Registered GP:	Dr Sim	Practice Code:	
Address:	Flat D 27 Mcdowell Street Johnstone	Sex:	Male
		Telephone No:	
Post Code:	PA5 8QJ	Mobile No:	07706807775

Additional Information		
Children: No	At Home: No	SW Involvement: No
Risk Factors:	Violence to self or others Pending court case on 03/06/21 due to hostile and aggressive behaviours towards A&E staff.	
Consent to Referral:	Patient is aware of referral	Has a Glasgow Risk Assessment Been Completed:Yes
Involved Parties:	Other (please specify)	
Disabilites:	Mobility No disabilities	
Brief History/Current Issues:	James has a history of childhood trauma, expereinced physical and sexual abuse.Has a diagnosis of EUPD, previously seen at RCMHT. Previous suicide attempt in 2017. Currently voicing thoughts of self-harm and suicide.	

Reason for Referral:
James states that hes had a negitive relationship with alcohol from the age of thirteen. James reports that he drinks around two bottles of buckfast per day and will drink 5 days per week with two non consective days sober. James reported the he begins drinking at noon and will drink untill he "passes out". James denies any sezuires or DT's, however he does report that at times he can be tremulous and sweaty on the days that he does not consume any alcohol. James states his goal is to achieve absitnence from alcohol.

Referred By:	Louise Taylor ST/N
Location:	Dykebar
Designation:	Student Nurse.
Contact Information/Number:	01413144070
Date Referred:	17/05/2021

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

REFERRAL

What Service/Discipline is referral for:	Alcohol Problems Clinic		
Date Assessed:	23/05/2021	Time of Assessment:	1400

Personal Details			
Surname:	WEIR	CHI Number:	1203893450
Forename:	JAMES	Relationship Status:	SINGLE
Dob:	12/03/1989	Sex:	Male
Age:	32	Referral Urgency:	Urgent
E-Mail Address:		Registered GP :	DR J C SIM
Clients Address:	27D MACDOWALL STREET, JOHNSTONE	Practice Code:	QUARRYSIDE MEDICAL PRACTICE, LINDEN MEDICAL CENTRE, JOHNSTONE, PA5 8PZ
		Client Telephone No:	07572333730
Post Code:	PA5 8QJ	Client Mobile No:	

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	Other (please specify)
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below;		

Service	**Assessment Required**
Network Services	Network Service Profile
Addictions	DAST/AUDIT
Doing Well	PHQ
CMHT	GAD7

Consent to Referral:	Patient is in agreement of refer
Brief History/Current Issues/Known Forensic History Risks:	Previous involvement with probation services and criminal justice, although James was unable to recall what these episodes were for. Has current charges pending for assualt of health staff at the Royal Alexandra Hospital, Paisley --due in court on 03/06/2021 in relation to this.

Reason for Referral: James was referred to the Acute Addiction Liaison Service, having been admitted to South Ward at Dykebar Hospital, Paisley 0n 17/05/2021, due to experiencing low mood and a degree of alcohol withdrawal symptoms.

Personal History--Lengthy history of previous live traumas--alledged abuse by mother and maternal grand mother. Was accomodated by local authority in childrens home aged 13 years of age.
Was given a befriender from 17--24 years of age and alledged abuse by befriender who had served a custodial sentence in relation to this.

Has various siblings in either Edinburgh or Renfrewshire area--only maintains contact with his sister Debbie.
ALCOHOL USE: Has been utilising alcohol as a form of stress relief and self medicating since the age of 13 years. At assessment on 21/05/2021 advised that prior to current hospital admission he been drinking 3 bottles of wine on a daily basis and always requires to have a morning relief drink.

Agreed to be referred to the Renfrewshire Alcohol and Drug Recovery Service, for support in aiding a protracted period of abstinence to aid physical and mental health recovery.

Referred By:	Denise Johnston
Location:	Torley Unit ADRS
Designation:	ACUTE ADDICTION LIAISON NURSE.
Contact Information/Number:	0141-314-4472 Mobile 07539258444
Date Referred:	23/05/2021

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk
Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: RR/LM
Job ID: 100017869
Date: 23/02/2021

PRIVATE & CONFIDENTIAL

Denise Gallagher CN
South Ward
Dykebar Hospital
Grahamston Road
Paisley
PA2 7DE

Community Mental Health Team
Mile End Mill
12 Seedhill Road
Paisley

PA1 1JS
0141 849 2200
www.nhsggc.org.uk

Dear Nurse Gallagher

Re: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D, 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

A referral was received by the Renfrewshire Sector Screening Group and subsequently screened at the meeting of 23rd February 2021. Following discussion the referral has been rejected and a full explanatory letter will follow from screening team.

Yours sincerely

Roberta Roberton
Team Lead

Authorised on 23/02/2021 15:32:33 by Typist Lesley Maitland, on behalf of Roberta Roberton.

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Our Ref: JM
Job ID: 100039036
Date: 18/05/2021

PRIVATE & CONFIDENTIAL

Dr JC Sim
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Mental Health
Charleston Centre
49 Neilston Road
Paisley

PA2 6LY

www.nhsggc.org.uk

Dear Dr Sim

RE: James Weir DOB: 12/03/1989 CHI: 1203893450
Address: Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ

CHI No:	**1203893450**	**Date:**	17/05/21
Surname:	**Weir**	**Date of Birth:**	**12/03/1989**
First Name:	**James**	**Gender:**	M
Address & Post Code:	**Flat D 27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ**		
Phone No:	Not known	**Legal Status (MHA, AWI, Guardianship):**	Informal
Ethnicity:	Ethnic Origin	**Nationality:**	
Consent to sharing info:	Consent to involve sister Debbie		
Communication needs:	Nil noted		
Next of Kin / Carer contact details:	Debbie Weir – [redacted]		

Professional contacts summary

Alerts *(history of violence, offending history)*
Emis warning states he has knives at his home and sleeps with them underneath his pillow. Documented history of being hostile and aggressive towards staff whilst in A&E Assessment dated 20178 states he spent 10 months in prison for housebreaking and breach of peace. James reports upcoming court hearing 3/6/21 for assault charge. He states he cannot recall this offence.
Reason for referral *(referrer's reason[s] for requesting assessment)*
Referral received from Police as James voiced suicidal ideation when on the phone to his bank. They then contacted the police who attended his home address
Reason for attendance *(Description of individuals main concerns, their perceptions of difficulties and hopes from the service)*
James reports he has been asking for help for years and has never been given it. Annoyed at his perceived lack of support from mental health services in the past. James' dad died 1 week ago which appears to be a trigger for today's presentation as well as an upcoming court case for assault on 3/6/21. James claims he does not recall assaulting anybody. James has a history of childhood trauma in the nature of sexual and physical abuse.
Psychiatric history *(previous/ongoing mental health problems, diagnoses and interventions, via GP or mental health services, and their impact; h/o self harm/attempted suicide; previous admission/detentions)*
He has a diagnosis of EUPD and was previously known to Dr Kaur at RCMHT. Currently inactive to mental health services. Reports he was discharged from services approx. 2 years ago. James reports a history of deliberate self-harm by cutting and current deliberate self-harm by cutting his groin area. Suicide attempts noted on previous assessment by IHTT dated 2017 – Attempted to set self on fire 2015, attempted to hang himself. Reported 2 previous admission to psychiatric hospital.
Current medication details as given by individual *(prescribed, over-the-counter, complementary, drug allergies)*

Medication	**Dose**	**Frequency**	**Duration**	**Response**
Nil				

Allergies:	Nil reported			
Dispensing frequency:		**Medication concordance:**		
Any children/ dependents under the age of 18? Nil				
	Child 1	**Child 2**	**Child 3**	**Child 4**
Name				
Age				
Address if different:				
Child protection concerns/agencies involved:				
Impact of mental health on parenting and/or potential risk to children:				
N/A				
Description of functioning before current difficulties:				
Reports long standing issues with his sleep and appetite. Reports he has been experiencing issues with his mental health for a long time. James unable to describe his level of functioning prior to current difficulties.				
Substance use: *(caffeine, alcohol, tobacco, non-prescribed drugs, novel psychoactive substances)*				
Pattern of current use	James reports using alcohol most days but not daily. Admitted to drinking 2 cans of lager 8 hours before assessment. Did not appear intoxicated. James reports he sometimes experiences "the shakes". [redacted] No signs of alcohol withdrawals at time of assessment James admits to using cannabis.			
Impact on individual	James not keen to discuss his substance use at great length and reported "it will go against me".			

Previous history	Previous assessment (2017) reports cocaine use.
Mental State Examination:	
Appearance	Casually dressed. Slim built
Behaviour	Distressed and tearful throughout assessment. Difficult to get responses at times.
Mood & Affect	Subjectively – "angry and hostile" Objectively – irritable
Speech	Raising voice at times
Thought form	Not thought disordered
Thought content	James reports feeling hopeless and helpless and a burden to his family. He reports suicidal thoughts with a plan to end his life by electrocuting himself by putting his toaster in his bath filled with water
Perceptions	James reports hearing the voice of his mum. He did not appear preoccupied. He also reports seeing images of himself being sexually assaulted when he was a teenager.
Cognition	Orientated to time, place and person
Insight	Has insight
Carers / Next of Kin / others views, concerns and expectations from services	
[redacted]	
Additional notes:	
James was dismissive at times and unwilling to discuss things further. At one point said he "could smash the room up". Police were in attendance outside room throughout assessment.	

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Summary

Name: James Weir		**CHI: 1203893450**	
Summary of assessment *(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)*			
32 year old male with a diagnosis of EUPD presenting in crisis with suicidal thoughts and plan. Reports he would carry out plane if discharged home today. James unable to agree to safe plan with support from community services.			
Overall impression of risk *(CRAFT to be completed separately)*			
James expressed current suicidal thoughts with a plan to electrocute himself by putting his toaster in his bath filled with water. James unable to agree to a safe plan with support from community services including IHTT James is at risk of alcohol withdrawals			
Immediate actions *(including information provided)*			
Discussed assessment with Dr Kaur – on call consultant and agreed to crisis admission. James feels admission will be helpful. Advised him of Covid restrictions on the ward. Advised sister of admission Duty doctor and bed manager made aware of admission.			
Outcome of MDT discussion/ Treatment plan *(including follow up arrangements if relevant)*			
- Short crisis admission to South ward at Dykebar hospital with follow up from IHTT on discharge if appropriate			
Primary Diagnosis:	EUPD		
Any additional diagnoses:	Alcohol dependence		
Suitable for psychological therapies (Y/N):			
Name:	Jacqueline Muir	**Designation:**	Community safety nurse
Signature:		**Date:**	17/05/21

Yours sincerely

Renfrewshire Health & Social Care Partnership

Shiona Strachan
Interim Chief Officer

Jacqueline Muir

IHTT Practitioner

Authorised on 18/05/2021 10:32:35 by Jacqueline Muir.

REFERRAL

What Service/Discipline is referral for:	Integrated Alcohol Team		
Date Assessed:		Time of Assessment:	

Personal Details			
Surname:	James	CHI Number:	1203893450
Forename:	Weir	Relationship Status:	
Dob:	12/03/89	Age:	32
E-Mail Address:		Referral Urgency:	Urgent
Registered GP:	Dr Sim	Practice Code:	
Address:	Flat D 27 Mcdowell Street Johnstone	Sex:	Male
		Telephone No:	
Post Code:	PA5 8QJ	Mobile No:	07706807775

Additional Information		
Children: No	At Home: No	SW Involvement: No
Risk Factors:	Violence to self or others Pending court case on 03/06/21 due to hostile and aggressive behaviours towards A&E staff.	
Consent to Referral:	Patient is aware of referral	Has a Glasgow Risk Assessment Been Completed:Yes
Involved Parties:	Other (please specify)	
Disabilites:	Mobility No disabilities	
Brief History/Current Issues:	James has a history of childhood trauma, expereinced physical and sexual abuse.Has a diagnosis of EUPD, previously seen at RCMHT. Previous suicide attempt in 2017. Currently voicing thoughts of self-harm and suicide.	

Reason for Referral:
James states that hes had a negitive relationship with alcohol from the age of thirteen. James reports that he drinks around two bottles of buckfast per day and will drink 5 days per week with two non consective days sober. James reported the he begins drinking at noon and will drink untill he "passes out". James denies any sezuires or DT's, however he does report that at times he can be tremulous and sweaty on the days that he does not consume any alcohol. James states his goal is to achieve absitnence from alcohol.

Referred By: Louise Taylor ST/N
Location: Dykebar
Designation: Student Nurse.
Contact Information/Number: 01413144070
Date Referred: 17/05/2021

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - Paisley		
Date Assessed:	25/01/21	Time of Assessment:	

Personal Details			
Surname:	JAMES	CHI Number:	1203893450
Forename:	WEIR	Relationship Status:	SINGLE
Dob:	12/03/89	Sex:	Male
Age:	26	Referral Urgency:	Non-Urgent
E-Mail Address:		Registered GP :	RENWICK EILIECLK
Clients Address:	27D MC DOWALL STREET	Practice Code:	LINDEN MEDICAL PRACTICE
		Client Telephone No:	NONE GIVEN
Post Code:	PA5 8QJ	Client Mobile No:	

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	SW
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below; **Service** **Assessment Required** Network Services Network Service Profile Addictions DAST/AUDIT Doing Well PHQ CMHT GAD7		
Consent to Referral:	Patient is aware of referral		
Brief History/Current Issues/Known Forensic History Risks:	James has history of sexual abuse the petrator of abuse has recently been released from prison .James belives he knows where he is staying James has been in care system during his childhood,he has known history of drug and alcohol abuse James ? diagnois of A.D.H.A History of 2 bottles buckfast a day,long term cannabis nmisuse ocassional use of heroin ,cocaine and amphetamines Appears in old letters that he frabicates about his life As talks about his father and mother however S.C.I gateway refferal formNov2015 states they are both dead . James presented to acute admission after he was taken to his G.P by police police had been called to his home police found he had a knife and a can of petrol threatening suicide his brother phoned the police. He was detained on E.D.C in hospital but now is informal		

Reason for Referral: James has been under the care of doctor Kaur who has requested a C.P.N and Community consultant referral
During his in patient care James has had sucidal ideation detox regime for alcohol abuse . He feel his problems are emotional related to depression which he feels has not lifted for long peroids of his life James has had a previous admission to St john livingstone trated for depression and drug alcohol misuse James antidepressants were increased frm 100mgs to 150mgs of today .
he has remained on constant observation due to sucidal ideation he has had laces taken off him he has tied together

Referred By:	DENISE GALLAGHER
Location:	SOUTH WARD DYKEBAR
Designation:	CHARGENURSE
Contact Information/Number:	01418103250
Date Referred:	25/01/16

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

PRIVATE & CONFIDENTIAL
Dr Sim,
Quarryside Practice
Linden Medical Centre
25 Floors Street
Johnstone
Renfrewshire
PA5 8PZ

Date: 23/07/2020
Our Ref: AMCP
Your Ref: 120 389 3450
Enquiries: Integrated Alcohol Team
Tel: 0141 618 7820

Dear Dr Sim

Re: James Weir, Flat D, 27 MacDowall Street, Johnstone, Renfrewshire. PA5 8QJ.
CHI: 120 389 3450

As per previous correspondence, you will be aware that Mr Weir had advised he wanted no further input from addiction services.

I wrote to him on it **14/08/20** advising that his case would remain open for 7 days to allow him time to consider if he wished to continue with our service.

As Mr Weir has not responded to this letter, it would now be fair to assume he no longer wishes support from alcohol services and as such I now plan to discharge his case

Should you have any further concerns or questions, please do not hesitate to contact me on 0300 300 1199 (option 2). Please do not hesitate to re-refer Ms MacMillan in the future when she is ready to engage with services.

Yours sincerely,

Alison McPhee

Senior Addiction Nurse
Back Sneddon Centre
Integrated Alcohol Team

ADRS CLOSING SUMMARY CHECK LIST

NAME	James Weir,	CHI	120 389 3450	SWIFT	
ADDRESS:	Flat D, 27 MacDowall Street, Johnstone, Renfrewshire. PA5 8QJ.				

ACTIONS	DATE	CONTACT NAME	METHOD: EMAIL/LETTER/PHONE	COMMENTS
CLOSING SUMMARY COMPLETED	27.08.2020			
END STAR COMPLETED	27.08.2020			
SMR 25 B COMPLETED		Alcohol only		
FINAL RISK ASSESSMENT (CRAFT) COMPLETED	27.08.2020			
GP LETTER COMPLETED	27.08.2020			
NOTIFICATIONS	DATE	CONTACT NAME	METHOD: EMAIL/LETTER/PHONE	COMMENTS
CHILD CARE CHECKLIST				
SOCIAL WORK	N/a	No children under 16		.
HEALTH VISITING	N/A			
SCHOOL				
(OTHER)				
(OTHER)				
ADULT CHECKLIST				
MENTAL HEALTH TEAM	N/A			
SOCIAL WORK (A.S.P)	N/A			
VOLUNTARY SECTOR	N/A			
(OTHER)				
REASON FOR CLOSURE e.g. failure to attend, intervention refused, intervention complete, transfer within authority, other (please specify)	Declined on-going input from ADRS. Wants weekly face to face appointments however due to identified low risk – was advised that support would be provided by phone contact only. James no longer wanted to continue with phone support and declined onward referral to RCA. Failed to respond to opt in letter encouraging him to continue with phone support at present time No SI/DSH disclosed No children at home No ASP identified.			

KEY WORKER SIGN OFF: Alison McPhee	**DATE:** 27.08.2020
C.M. GROUP SIGN OFF:	**DATE:**

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

PRIVATE & CONFIDENTIAL
Mr James Weir
27D MacDowall Street
Johnstone
PA5 8QJ

Date	10.07.2020
Our Ref	AMC
Your Ref	1203893450
Enquiries:	Integrated Alcohol Team
Tel:	0300 300 1199

Dear Mr Weir

I hope this letter finds you well.

I am writing to advise that I have tried to contact you on several occasions to provide support around your alcohol misuse. Unfortunately I have been unable to reach you.

I would appreciate if you could call me on: **0300 300 1199** if you still require continued support and I would also appreciate if you could contact me to tell me if you no longer require support from alcohol services.

If there has been no contact within 7 days of receiving this letter, it would be fair to assume you are doing well and no longer want support from the team. I will at that point close your case.

Yours sincerely

Alison McPhee

Senior Addiction Nurse
Integrated Alcohol Team
Cc Dr J Webb, Quarryside Medical Practice, Linden Medical Centre, 25 Floors Street, Johnstone

"Staff should not be exposed to second hand smoke during home visits. To protect staff who visit clients in their own homes, clients and their families will be requested not to smoke for the duration of the visit" - **NHS No smoking policy 2017**

For support to quit,
Patients and visitors can visit: www.nhsggcsmokefree.org.uk
Or call Smokeline on: 0800 84 84 84

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Renfrewshire Health & Social Care Partnership

PRIVATE & CONFIDENTIAL
Mr James Weir
27D MacDowall Street
Johnstone
PA5 8QJ

Date	14.08.2020
Our Ref	AMC
Your Ref	1203893450
Enquiries:	Integrated Alcohol Team
Tel:	0300 300 1199

Dear Mr Weir

I hope this letter finds you well.

I am writing following our recent telephone conversation where you had advised that you no longer wanted to continue with telephone support and instead required face to face appointments with addiction services.

As I advised over the phone, due to current covid-19 legislation, we are unable to facilitate this at present time.

I would strongly encourage you to continue with telephone support for now with a view to moving to face to face appointments when it is safe to do so. Please be reassured that we are providing the same relapse prevention and harm reduction advice over the phone as we would be in person.

I would appreciate if you could call me on: **0300 300 1199** if you still require continued support and I would also appreciate if you could contact me to tell me if you no longer require support from alcohol services.

If there has been no contact within **7 days** of receiving this letter, it would be fair to assume you no longer want support from the team. I will at that point close your case.

Yours sincerely

Alison McPhee
Senior Addiction Nurse
Integrated Alcohol Team

cc Dr J Webb, Quarryside Medical Practice, Linden Medical Centre, 25 Floors Street, Johnstone

"Staff should not be exposed to second hand smoke during home visits. To protect staff who visit clients in their own homes, clients and their families will be requested not to smoke for the duration of the visit" - **NHS No smoking policy 2017**

For support to quit,
Patients and visitors can visit: www.nhsggcsmokefree.org.uk
Or call Smokeline on: 0800 84 84 84

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

PRIVATE & CONFIDENTIAL
Dr Webb
Quarryside Practice
Linden Medical Centre
25 Floors Street
Johnstone
Renfrewshire
PA5 8PZ

Date: 23-06-2020
Our Ref: AMCP
Your Ref: 1203893450
Enquiries: Integrated Alcohol Team
Tel: 0300 300 1199

Dear Dr Webb

Re: James Weir, Flat D, 27 MacDowall Street, Johnstone,. PA5 8QJ.
CHI: 1203893450

Thank you for your referral of the above male. Mr Weir attended for assessment by phone consultation on Tuesday 23rd June 2020.

Current:
Mr Weir attended for phone assessment appointment today at 11:30am. Assessment process was difficult to complete with Mr Weir as he often changed details several time throughout which would seem to contradict previous answers / details. Mr Weir also is a poor historian, often going off topic, or unable to recall when events took place and again giving various time frames for the same events.

Alcohol:
Mr Weir reports he has had a negative relationship with alcohol since around 13yrs of age. He reports this most recent relapse has lasted around 1 year. Mr Weir reports to be drinking 2 bottles of buckfast daily and will drink 5 days per week with 2 non consecutive days sober. Mr Weir advised he will start drinking around noon and will drink until he "passes out". Mr Weir denied any seizures or DTs however did report he can become tremulous and sweaty when he is not drinking. Mr Weir advised his goal is to achieve abstinence from alcohol.

Drugs:
Mr Weir denied any drug use other than 6 cannabis joints per day, this has been his pattern for the past 6yrs. Review of notes after assessment identified that in a previous assessment with IHTT it is documented that Mr Weir reports previously using methadone and reporting IV drug use. It is unclear if the methadone was prescribed / illicit. Also identified in the IHTT assessment, Mr Weir reported using cocaine. Mr Weir did not report any of this to writer and denied any use outside of his current cannabis use. Mr Weir advised his goal is to reduce his cannabis use however isn't sure if he wants to stop this completely.

Mental Health:
Well known to RCMHT. Mr Weir reports 2 admissions in the past to Leverndale and Dykebar. He was unable to tell writer when this took place, nil information on Emis to identify time frames for this. Mr Weir also advised of previously DSH by cutting his wrist however stated he has not had any urges to do this recently. He also reported trying to set himself on fire, this is also documented in previous IHTT assessment; however Mr Weir was unable to identify when this happened or any details around this. Mr Weir advised he has always struggled with low mood and childhood trauma (physical and sexual abuse). Mr Weir rated mood at 4/10 (1-low,10-good). He was future focused throughout conversation and denied any current thoughts of suicide / DSH. Mr Weir identified sister Debbie as strong protective factor and described a strong desire to want to "get better and live a better life".
Review of notes indicated diagnosis of EUPD and PTSD.
Px - Mirtazapine 15mg daily, weekly dispense.

Physical Health:
Hernia operation which Mr Weir advised was 5yrs ago and then changed this to say it was when he was a teenager. No current chronic or acute physical health concerns disclosed. Experiencing withdrawals from alcohol when not drinking and described these to be full body tremor and sweating. Mr Weir also reports he doesn't sleep well and is eating a minimal diet of 1 meal per day.

Social:
Mr Weir lives alone in a 1 bed flat in Paisley. Born and raised in Paisley, he describes a volatile upbringing. Mr Weir advised he was physically abused by his mum, step dad and gran. He reports he was removed from their care and put into care system at age 13. Mr Weir advised he was sexually abused by a worker whilst in care. He advised as a young adult, he pressed charges and the abuser was found guilty. Mr Weir is currently not working and appears to have little structure / meaningful activity. He does feel very supported by his sister Debbie.

Forensic:
Mr Weir advised when he was younger he "ran with gangs" in Glasgow. He also has spent 10 months in prison for housebreaking and carrying 2 knives with the intent to harm the men who he claims raped his sister. James advised he no longer carries knives with him however did admit to sleeping with knives under his pillow. Also reported that last month he assaulted three people who were allegedly involved in sexually abusing his sister. It is also documented that Mr Weir has been known to also be aggressive at A&E attendance and feels "let down" by NHS and judicial services. There appear to be no outstanding charges for Mr Weir and he denies any on-going cases / charges.

Children:
No children

Plan / Outcome: (agreed with Mr Weir)

- Allocate to Ren ADRS for harm reduction work
- Consider possible KIP admission
- inform GP of outcome of assessment
- Request GP prescribe Forceval and Thiamine.
- James given local and national crisis numbers

I would be grateful if you could provide a prescription for Mr Weir for Forceval vitamins and also for Thiamine 50mg QDS

Should you have any further concerns or questions, please do not hesitate to contact me on 0300 300 1199

Yours sincerely,

Alison McPhee

Alison McPhee
Senior Addiction Nurse
Integrated Alcohol Team

.

Carenap Basic Information Sheet

Person's full name : JAMES WEIR
Mr / Mrs / Miss / Ms / Other MR
Preferred name : James
DOB : 12 / 03 / 1989
Lives alone – (Yes) / No (please circle)

CHI number : 1203893450
Social work number :
Other number *(specify)* :
Gender (M) / F / Transgender / Other :
Ethnic Background : White British

Referrer

Name of Referrer : DR WEBB
Address : Linden Med Centre Johnstone
Profession GP
Telephone : 01505 321 733
Is person aware that referral has been made? Yes / No (please circle)

Reason for assessment

ALCOHOL DEPENDANCY

Date of referral : 3 / 6 / 2020

Person lives in? *(tick box)*

Rented – Local Authority	☑	Sheltered Housing	☐	Residential Home – Local Authority	☐
Rented – Housing Assoc.	☐	Supported accommodation	☐	Residential Home – Private	☐
Rented – Private Landlord	☐	Hospital	☐	Residential Home – Voluntary	☐
Rented – Other (specify what)	☐	Nursing Home	☐	Hostel	☐
Privately Owned	☐	Care Home	☐	Homeless	☐
Relatives home (specify who)	☐	Other (specify what)	☐		

Present address : 270 MacDowall ST
Post town : JOHNSTONE
Post code : PA5 6QJ
Telephone : 07572 333 730

Home address *(if different)* **:**
Post town :
Post code :
Telephone :

Contact Details	**Main carer**	**Next of Kin (if different)**	**Keyholder (if different)**
Name (include title) :		Debbie Weir	
Relationship to person :		Sister	
Keyholder :	Yes / No *(circle)*	(Yes) / No *(circle)*	
Address :		[redacted]	
Post town :			
Post code :			
Tel (Day) :			
Tel (Night) :			
Tel (Mobile) :			

Who is the GP? Dr. WEBB

Address: Linden m/c

Post town : JOHNSTONE

Post code :

Tel (Day) :

Tel (Night) :

Practice number :

Communication Needs

Preferred language : English

Is an interpreter required? Yes / (No) *(circle)*

Language required ? Yes / (No) *(circle)*

Hearing aid used? Yes / (No) *(circle)*

Spectacles used? Yes / (No) *(circle)*

Other - please speciify

Struggles with reading & writing

Relevant Background History

To include where appropriate : *Work/employment, Family, Marital Status, Religion, Any other factors – Housing/Accommodation issues, recent change in abilities/function, Concerns, Risks, Social network, Bereavement,*

Info as per SSA

Relevant Medical History (including current medical conditions and medication)

Mirtazepine 15mg nocte - weekly dispense

Renfrewshire Joint Care

NHS Greater Glasgow and Clyde
1948-2008 60 years of the NHS

Partnership
Shared Information
Client Details

Surname: WEIR	**Date of Birth:** 12/03/89
Forename: James	**Social Work ID:**
Contact Agency: Ren ADES	**Department:**

I (Mr/Mrs/Ms ---James Weir---have had the principles of joint care planning explained to me by my health/~~social~~ worker.

Alison McAlee. I understand that it may be necessary for information relating to me to be shared between the various agencies involved in my care, i.e.. health and social work professionals and voluntary agency staff. Where appropriate. The information shared will only be that relevant to my care and those I care for and it will be only on a "need to know " basis unless there is a risk to myself or others.

I give my consent to the sharing of my personal information for the joint care planning purposes explained to me.

I give ~~restricted~~ consent to the sharing of my personal information for the joint care planning purposes explained to me.

I do not give my consent to the sharing of my personal information for the purposes explained to me and I understand that this could place restrictions on the integrated service within my care plan. These restrictions have been explained to me.

I * ~~have~~/have not received a copy of an information leaflet which explains how information about me is used.

*Please delete as appropriate

Signed Verbal Consent given by phone - 23/06/20 Date ----------

Status if not client: _____

Health/~~Social~~ Worker Statement:

I confirm that I have explained to James Weir the principles of joint care planning, including the fact that information may be shared with others on a "need to know" basis. I have also explained that should information sharing consent be refused the level of integrated service could be restricted.

Signed ---------- Date 23/06/2020

Designation SAN

Single Shared Assessment

Drug / Alcohol Support
Needs Assessment Package

14th April 2008: Version 12

Person's Name:	James Weir
Person's DOB:	12/03/89
Lead Assessor's Name:	Alison McPhee
Agency of Lead Assessor:	Ren ADRS
Date of Assessment:	23/06/2020
Date of Review:	
Date of Review:	
Date of Review:	

Section 1: BASIC INFORMATION

Person's Full Name:	James Weir	CHI / PIMS Number:	1203893450
ADDRESS	27d Macdonall ST Johnstone	SWIFT/CARE FIRST/REFERENCE Number:	
GP NAME, ADDRESS AND TEL NUMBER	DR WEBB Linden m/c Johnstone 01505 321733	Date Consent Form Completed:	23.06.2020
Location (where seen):	Phone Consultation	Date of Birth:	12/03/89

Section 2: ALCOHOL / DRUG CURRENT USE & HISTORY

Drugs / Alcohol History: Please indicate onset / development of difficulties, short history leading to present use (present use should be more detailed). Indicate type of substance (legal (L), illegal (I) or prescribed (P). Method of Use

Current

Substance Used (What, How much, How often, and Last used)	Type (L, I or P)	Consequences
Alcohol Buckfast wine - 2 bottles per day. Starts around noon & drinks until he passes out. Has been same pattern for approx 12months - will have 1-2 days sober pe week		- low mood - poor diet - poor sleep - withdrawals Tremor/sweating - poor memory.

Have you ever injected?	YES		NO	✓	~~Denied IV use~~
Have you ever shared injecting equipment?	YES		NO	✓	

Comments – relating to above

Daily Cannabis use - 6 Joints pe day has been same pattern for 6yrs.

~~Denied IV use~~ however review of notes indicate previous - IV use & Methadone ~~use~~

Section 2: ALCOHOL / DRUG CURRENT USE & HISTORY (contd)			
History			
Age	Substance Used (What, How much, How Often)	Type (Legal, illegal or prescribed)	Consequences
13 -	Started drinking - not clear on this - poor historian - stated would hide dad's drink around the house - however then states he was in care @ age 13.		
20	- Drinking most days after release from prison for knife crime/house breaking		
30	- Drinking daily - Backfoot		

Section 3: SERVICE HISTORY DETAILS	Yes	No	N/A
Current and Previously Known Details: Please indicate whether client has any other current involvement, and whether s/he is previously known to this agency and / or other agencies			

Contact Details Named Worker (address & telephone) Dates of Involvement	Interventions	Outcomes (please include dates)
2 x RCMHT	- case closed currently	
2 x Leverndale	- admitted for m/h	
Turning-point	- 6 weeks - feels this wasn't long enough	
* James unable to describe timeline for above events *		

Section 4: GENERAL INFORMATION / PROFILE

HOUSING (Tenancy, Problems, Complaints, Arrears, Length of Tenure)	Yes	No	N/A

Details: Lives alone - no issues Re-Tenancy reported

FIRE RISK: Information given	YES	NO	Leaflet Given	YES	NO	Referral On	YES	NO	DECLINED

FINANCE (Present Income, Outgoings and Debts)	Yes	No	N/A

Details: ESA & PIP - no issues reported

Income Maximisation Required? Yes No N/A

EMPLOYMENT (Past/Current Difficulties, Literacy and Numeracy)	Yes	No	N/A

Details: Unemployed - last worked 5yrs ago
Doesn't feel work would be appropriate "for some time"

EDUCATION (Past/Current Difficulties, Literacy and Numeracy)	Yes	No	N/A

Details: Attended Pawley Schools - reports bullying
Left age 15 - struggles with reading & writing

CURRENT LEGAL STATUS (Please indicate status below)	Yes	No	N/A

None	Probation	Licence	DTTO
Community	In Prison	Other	DTTO Assessment

Details:

Previous Offences:	Yes	No	N/A

10 month sentence for house breaking & knife possession

Current / Outstanding Offences	Yes	No	N/A

NO

Any Other Details (including any periods in Prison)

Section 5: HEALTH INFORMATION / PROFILE

Physical Health (including hospital admissions, current prescribed medication, Hepatitis B vaccination, Hepatitis C information, Pregnancy).

Smoker - Reports "only cannabis" - 6 joints per day

Diet - "not great" - ① meal per day

Sleep - Broken, naps through the day

Hernia op 5yrs ago

No other chronic conditions reported

Has withdrawals when not drinking - Body tremor & Sweating

Denies Hx of seizures | DTs

Psychological Health (including hospital admissions and current prescribed medication).

Feels mood is low due to current alcohol use.

Hx of DSH - cutting, tried to set self on fire - unable to say when this happened

2 x Ieverndale | Dykebar admissions - unable to say when (writer unable to identify when on R/V of notes)

Review of notes indicated diagnosis - EUPD & PTSD.

Hx of childhood trauma - abuse - physical @ home
- sexual when in care

Section 6: SOCIAL SITUATION / CONTEXT

Living / Domestic Arrangements; Family Relationships (Past and Present); Current/history of domestic violence

Current

Lives @ home alone - little structure to his day.
Sister Debbie visits often & is a good support
Does not speak to mum or dad - close to 2 out of 3 brothers.

Past

Born & raised in paisley - mum, dad - 3 Brothers & 1 sister
Reports physical abuse @ home - mum, dad & gran.
Entered care system age 13-16 & reports sexual abuse throughout this time
involved in gang's around age 17
10 months in prison for possession of knife & house-breaking
Sleeps with knifes under his pillow.

Section 7: INFORMATION ON CHILDREN, PRENANCY & OTHER CARE RESPONSIBILITIES					
Children?	Yes	No	Contact with children	Yes	No
			Frequency of contact		

Name	D.O.B	Address	Main Carer	Nursery /School	SW Status

Who is the main carer?	Relationship to Adult / Child	Any Care Responsibilities to Children / Child Under 16
Who is in the household (over the age of 16 either resident or on a regular basis)	Relationship to Adult/Child	Do they hold any care responsibilities to Children/Child Under 16 (e.g school run , baby sitting e.t.c.
1.		
2.		

3.		
4.		
Children seen?	Yes	No
Comments (Clarify if this information has been verified) Where were the children seen Any issues arising from this		

Partner Pregnancy					
Is partner pregnant	Yes	No	Is partner a drug user Is partner a dependant alcohol user Is partner attending ante natal	Yes	No
If Yes, stage of pregnancy / Expected date of delivery					
Who has this been verified with (GP, e.t.c.)					
Is client currently on Methadone or prescribing in relation to alcohol dependency					
Is further support required? (if yes identify)					

Client Pregnancy		
Is client Drug/Alcohol Users:	Yes	No
Are they attending ante-natal care	Yes	No
Are maternity services aware of drug/alcohol use:	Yes	No
Have they had regular contact with support services (establish contact with SNIPS / New Expectations / SW Referrals to determine level of contact/careplan and summarise, discuss any prescribing issues in relation to stability during pregnancy. Potential of neo-natal withdrawal).		
Has a Pre-Birth initial or full discussion been arranged? **Date for Same**		
If no – initiate with senior a SW pre-birth process to inform support needs		

Section 7: INFORMATION ON CHILDREN, PREGNANCY & OTHER CARE RESPONSIBILITIES *(continued)*

Other care Responsibility?			Yes	No	N/A
Name	DOB	Address			Main Carer

Relatives / Other Agencies Arranging Childcare:	Yes	No	N/A
Is childcare arrangements made on a regular basis by extended family.			

Who provides this, benefits of support

How often (This will establish planned respite for children/networks and areas of potential resilience)

Help Required with Children or Arranging Childcare:	Yes	No		N/A	

What assistance could be provided and by whom

Has client agreed to action suggested	Yes	No
If yes specify action		

Social Work Contact	Yes	No

Contact with other allocated worker/s and summarise priority areas for parent and child joint careplanning
If no state why

Health Visitor Contact	Yes	No

Clarify what child(ren) involved with Health Visitor?
Frequency of nursery placements (a.m. /p.m. daily e.t.c.)
Summarise priority areas for parent and child joint careplanning.
If no state why

School nurse contact –	Yes	No
Specific school concerns? Summarise priority areas for parent and child joint careplanning Homelink involvement Attendance		

Children's Health Issues:	Yes	No
Any current applications to be applied/medications to be dispensed by parent.	Yes	No
Regular Hospital or clinic appointments for child	Yes	No
Any issues in relation to above		

Client's Perceived Effects of their Own or others Alcohol / Drug Use on Children

Ability to manage income and prioritise everyday bills/household expenditure
Ability to emotionally respond to children given the potential physical and mental health impact of alcohol/drug use
Ability to provide activities for children e g, visits to park, mother and toddler groups
Older children assuming parental role for younger children
What Arrangements are Made for Children when Drug / Alcohol Use Is Being Pursued / Consumed?

Current routines/frequency for alcohol/drug consumption (who with/where/what time)
Discuss areas of potential risk in relation to above and any impact on children. Identify areas of action
Risk from other adults in household
What arrangements are made for Safe Storage of Alcohol / Drugs and associated paraphenalia (both illegal and prescribed) Where are all medications kept (verify at first HV) Discuss potential risks from both and summarise Identify any action to be taken.
Is an appropriate storage box required. If no identify action e.g. purchase of box. Timescales Who will purchase

Please identify any factors related to children's issues arising from assessment and action taken

When clients stability of alcohol/drug use is obtained how would this change clients lifestyle/parenting

Section 8: ASSESSMENT OUTCOME / INITIAL PLAN OF CARE

Identified Need (Should be in order of priority of user)	**Proposed Interventions** (Demonstrate how intervention will take account of gender, ethnicity and disability)	**Timescale** Include person responsible
Harmful alcohol use	- allocate to IAT for harm reduction work - ? ICIP? - wants abstinence.	ASAP All involved

Section 8: ASSESSMENT OUTCOME / INITIAL PLAN OF CARE (contd)

Summary of Assessment

- 31yr old male. well known to CMHT.
- Dx of EUPD & PTSD.
- Previous charges for carrying knived & house breaking
  Sleeps with knived under pillow
- previous DSH (cutting). Tried to set self on fire.
- Has been aggressive @ A&E attendance in the past
- wants support to gain abstinence

Very difficult to asses as unable to recall details or would change details several times through-out assesment

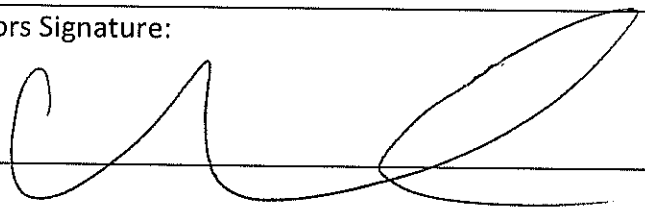
Poor historian.

Unmet Need	N/A	Reasons
	✓	

Client's Perception of the Above

Agrees ✓

No further action / Referral to other agency (please give details why)

Service Users Signature:	Date
Assessors Signature: 	Date 23/6/2020

[redacted]

Renfrewshire Health & Social Care Partnership

Date: 22ndJune 2020
Our Ref: /GW
Your Ref: 1203893450
Dictated: 12th June 2020
Tel: 0141 618 5600

Private & Confidential

James Weir
Flat D
27 MacDowall Street
Paisley
Renfrewshire
PA5 8QJ

Dear James,

Thank you for attending the Community Mental Health Team for the purpose of assessment. Despite the full assessment being unable to be completed, your case was discussed within the multi disciplinary team and it was agreed that your engagement with alcohol services is the most appropriate input for you at this time and we would encourage you to engage with this service. It was also agreed that there does not appear to be a clear role for the Community Mental Health Team at this time however, should you feel that you require support from our service in the future then you can be re-referred by your GP for this purpose.

May I take this opportunity to wish you well for the future.

Yours sincerely

Amy Hamilton
Community Psychiatric Nurse
Paisley Community Mental Health Team

Paisley Community Mental Health Team
Charleston Centre
49 Neilston Road
PAISLEY
PA2 6LY

Renfrewshire
Health & Social Care
Partnership

Date: 22nd June 2020
Our Ref: DH/GW
Your Ref: 0210000422
Dictated: 12th June 2020
Tel: 0141 618 5600

Private & Confidential

Dr Sim,
Quarryside Practice
Linden Medical Centre
25 Floors Street
Johnstone
Renfrewshire
PA5 8PZ

Dear Dr Webb,

Re: James Weir, Flat D, 27 MacDowall Street, Johnstone, Renfrewshire. PA5 8QJ.
CHI: 0210000422

Thank you for referring the above named gentleman to the Community Mental Health Team for the purpose of assessment. Mr Weir attended on 9th June 2020 for this purpose. Unfortunately, due to presenting with alcohol withdrawal, we were unable to complete our full assessment and due to physcial health difficulties, Mr Weir was encouraged to seek medical attention urgently. His case discussed within the multi disciplinary team and after discussion it was agreed that he would benefit from engaging with alcohol services and I believe a referral has been completed for this service and an appointment has been arranged.

Should you feel that Mr Weir requires input from our service in the future then we would welcome a following referral.

Should you wish to discuss anything in this letter then please do not hesitate to contact me on the above number.

Yours sincerely

Amy Hamilton
Community Psychiatric Nurse
Paisley Community Mental Health Team

Paisley Community Mental Health Team
Charleston Centre
49 Neilston Road
PAISLEY
PA2 6LY

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow (Glasgow, v17.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Renfrewshire Integrated Alcohol Team
GGC Mental Health

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

CAT (Community Addiction Team)
SCI Gateway Virtual Location Code

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

Hospital location code.
G004G

Email address
-

Urgency of referral Urgent - within 5 working days
Date of referral 03-Jun-2020 **Date sent** 03-Jun-2020

PATIENT DETAILS

Surname	Weir
Forename(s)	James
Title	Mr
Sex	Male
Date of birth	12-Mar-1989
CHI no.	1203893450
Area of Residence	-

Patient's address

27d Macdowall Street
JOHNSTONE
PA5 8QJ

Contact number(s)
-

1010211308007 Unique Care Pathway Number: 1010211308007

REGISTERED GP DETAILS

Name	Dr Juliet Sim		
GMC code	4092975	GP code	36994
Practice name	Quarryside Practice		
Practice code	87305		

Practice address

Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Contact number(s)
Voice: 01505 321733
E-mail: GG-UHB.GP87305@nhs.net

REFERRING GP DETAILS

Name	Dr. Jacqueline Webb		
GMC code	4036582	GP code	39918
Practice name	Quarryside Medical Practice (87305)		
Practice code	87305		

Practice address

Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Contact number(s)
Voice: 01505 321733

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Alcohol, depression, suicidal ideation

Comment: This patient has a long and chequered psychiatric history. We tells me he was sexually abused in childhood and is tormented by his abuser, who lives locally, on a regular basis. He has a long history of drug (cannabis, may yrs ago cocaine but not now) and alcohol (8 cans beer, one bottle Buckfast and 1/2 bottle vodka) per day. He reduced this to only 4 bottles beer daily over the last week or so and certainly does not sound inebriated when I speak to him today. He has low mood, poor sleep with EMW at 2-3 am, poor conc and memory, anhedonia and social isolation. he says he has physically assaulted 3 members of the public, including his accused abuser, over the past few weeks. He tells me the Police have not been involved in the alleged crimes although he is known to the police through his alcohol abuse. He has been experiencing auditory and visual hallucinations while drinking until he weaned his amounts recently. He has suicidal ideation when drunk. He is currently sober and in the care of his sister, who is safe-guarding him. He was referred to APC before lockdown but missed his appointment as the police confiscated his phone at this time. He is desparate for a chance at alcohol rehabilitation. I do think he will drink himself to death if this is not offered. His sister will support him to appointments going forward and is supportive and stabilising atm. He has emergency numbers if needed. many thanks for your assessment and advice.

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
[X]Emotionally unstable personality disorder	strong narcissistic traits. Uses large amounts of cannabis	21-Sep-2017	21-Sep-2017
Anxiety with depression	-	03-Aug-2017	03-Aug-2017
Suicidal ideation	-	11-Aug-2016	11-Aug-2016
[X]Adjustment disorders	-	11-Aug-2016	11-Aug-2016
Fracture of metacarpal bone (Right)	closed fracture of metacarpal bone. Right hand base 4th metacarpal	03-Nov-2015	03-Nov-2015
[D]Collapse	?alcohol or drug related; absconded from hospital	11-Aug-2015	11-Aug-2015
Gastritis unspecified	-	22-May-2015	22-May-2015
History of sexual abuse	-	22-May-2013	22-May-2013
Acute pericarditis	-	03-Oct-2012	03-Oct-2012
Inguinal hernia	-	16-Aug-2012	16-Aug-2012
Death of mother	RTA	01-Jan-2012	01-Jan-2012
[X]Assault	facial injury	23-Dec-2011	23-Dec-2011
Overdose of drug	paracetamol	13-Oct-2011	13-Oct-2011
[X]Intentional self poisoning/exposure to noxious substances	paracetamol overdose	21-Jun-2011	21-Jun-2011
Neurotic depression reactive type	-	17-Jan-2011	17-Jan-2011
Death of father	RTA	01-Jan-2011	01-Jan-2011
Hydrocele (Left)	-	02-Nov-2010	02-Nov-2010
Prison sentence	-	01-Feb-2010	01-Feb-2010
Closed fracture proximal tibia, lateral condyle (plateau) (Right)	-	07-Oct-2009	07-Oct-2009
Closed fracture shaft of fibula (Right)	-	07-Sep-2009	07-Sep-2009
[X]Intentional self poisoning/exposure to noxious substances	ate noxious substance	01-Feb-2008	01-Feb-2008
[X]Overdose - paracetamol	-	01-Sep-	01-Sep-

		2007	2007
[X]Overdose - paracetamol	-	01-Aug-2007	01-Aug-2007
Laceration of arm (Left)	-	01-Mar-2007	01-Mar-2007
Dental abscess	-	01-Jan-2007	01-Jan-2007
[X]Accidental drug overdose / other poisoning	secondary to alcohol	01-Jan-2007	01-Jan-2007
Intoxication - alcohol	/collapse (x4)	01-Jan-2006	01-Jan-2006
[X]Overdose - paracetamol	accidental	01-Jan-2006	01-Jan-2006
Alcohol problem drinking	-	01-Jan-2006	01-Jan-2006
Suicide + selfinflicted poisoning by drug or medicine NOS	loperamide	01-Jan-1998	01-Jan-1998
[X]Attention deficit disorder	-	01-Jan-1997	01-Jan-1997
[V]Behavioural problems	-	01-Jan-1996	01-Jan-1996
O/E - failure to thrive	-	01-Jan-1990	01-Jan-1990
On child protection register	removed in 1990; older sibling 'cot death', 2 other siblings adopted	01-Aug-1989	01-Aug-1989

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
Benzodiazepine dependence detoxification	residential	27-Jan-2017	27-Jan-2017
Benzodiazepine dependence detoxification	-	18-Sep-2016	18-Sep-2016
Gastroscopy NEC	gastritis	22-May-2015	22-May-2015
Gastroscopy NEC	duodenitis	08-Apr-2013	08-Apr-2013
Emergency hospital admission	epigastric pain and vomitting	03-Apr-2013	03-Apr-2013
Primary repair of inguinal hernia (Left)	-	09-Nov-2012	09-Nov-2012
Other primary open reduction of fracture of bone	right tibial plateau	07-Oct-2009	07-Oct-2009
Closed reduction of fracture	of orbit bone - assault	01-Nov-2005	01-Nov-2005

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

No current medications recorded

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 15 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	03-Jun-2020	03-Jun-2020
Mirtazapine Tablets 15 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-Mar-2020	10-Mar-2020

Blood Pressure

Date Recorded	Systolic	Diastolic
24-Feb-2016	110	74
08-Apr-2015	132	72
12-Jan-2015	130	68

Body Measurements

Date Recorded	Height	Weight	BMI
08-Apr-2015	176	58	18.72
12-Jan-2015	178	63	19.88

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Current smoker :		28-Oct-2015
Cigarette smoker, 10 Cigarettes/day:		08-Apr-2015
Cigarette smoker, 1 Cigarettes/day:		12-Jan-2015
Alcohol consumption, 20 units/week:		08-Apr-2015
Alcohol consumption, 20 units/week:		12-Jan-2015
Aerobic exercise 0 times/week:		08-Apr-2015

Aerobic exercise 3+ times/week: 12-Jan-2015

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information

Risk of Suicide:Yes

If yes to Risk of Suicide, please give details:Some suicidal ideation when inebriated

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:Yes

If yes to Risk to others including children / dependents / clinicians / other, please give details:when inebriated has thoughts of assaulting people. tells me he has assaulted 3 people who "wronged him" in the past, over the past few weeks.

Risk from others:No

Risk of Self Neglect:Yes

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:No

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

GREATER RENFREWSHIRE
DIVISION
Renfrewshire
Community Mental Health Team
Mile End Mill
Studio 1001 -1011
12 Seedhill Road
PAISLEY

Tel: 0141 849 2200

Date: 08 June 2026

Private and Confidential

Alison Black
Social Work
West Renfrewshire HSCP
Renfrewhire House
Cotton Street
Paisley

Dear Dr Alison

Re: James Weir, 27d MacDowall Street, Johnstone PA5 8QJ
CHI: 1203893450

A referral was received by the Renfrewshire Sector Screening Group and subsequently screened at the meeting of 12th June 2020. Following discussion, it was passed to the Duty Team at Renfrewshire Community Mental Health Team, Mile End Mill, Seedhill Road, Paisley.

Please do not hesitate to contact me should you have any queries.

Yours sincerely

Nurse Team Leader
For and on behalf of
Renfrewshire Sector Screening Group

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:		Time of Assessment:	

Personal Details			
Surname:	Weir	CHI Number:	1203893450
Forename:	James	Relationship Status:	single
Dob:	12-03-89	Sex:	Male
Age:	31	Referral Urgency:	Urgent
E-Mail Address:		Registered GP :	Quarryside medical service
Clients Address:	27D MacDowall St	Practice Code:	
	Johnstone	Client Telephone No:	07538889630
Post Code:	PA5 8QJ	Client Mobile No:	0754556732

Additional Information			
Children:	Yes - Not at home	SW Involvement:	No
Legislation:	Informal	Involved Parties:	Other (please specify)
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below;		

Service	**Assessment Required**
Network Services	Network Service Profile
Addictions	DAST/AUDIT
Doing Well	PHQ
CMHT	GAD7

Consent to Referral:	Patient is not aware of referral	
Brief History/Current Issues/Known Forensic History Risks:	has a history of alcohol and drug use, also informed Standby referral he has mental health issues. Stand by referral informed Mr Weir was verbally aggressive and incoherant in parts, with conversation moving from one aspect to another. Mr Weir discussed suicide of a friend and would not be drawn asto his thoughts around completeing suicide. He would avert conversation or state he knew what happened and wasn't going back there, as he has been sectioned before. Referral has been made to IAT where he is awaiting allocationn.	

Reason for Referral:
Mr Weir called Standby at 3pm on Sunday 31 st May , he initially was asking for food stating he couldn't leave the home due to his mental health, stating everyone had let hime down and family , who owed him money, would not answer his calls. Later calls he was stating he had no clothes or shoes,
He was very erratic, emotional and verbally aggressive, refusing all support offered.
Staff contacted police for a welfare check, however they did not attend due to ambulance being called for him.
I have been unable to secure information as to whether they attended and what the outcome was.
I have been trying to make contact with Mr Weir since Monday, on both numbers and have had no success, due to the nature of his standby call as well as the levels of addiction and period of being sectioned, he appeared to be in a distressed state and has not be heard from since Monday am by Advice works,
Standby note saved to Info@work.

I was advised to send in referral for CPN, I was advised by GP she would not as she had no inforation and felt SW should complete the referral.

I had picked Mr Weir up from being on duty on Monday, he is not a case of mine and I have had no contact with him, and information was found on AIS. Due to his presentation I feel he will need support or intervetion by metal health team.

Referred By:	Alison Black
Location:	West Renfrewshire HSCP
Designation:	Adult services cooordinator
Contact Information/Number:	07534081687
Date Referred:	03-06-20

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk
Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow (Glasgow, v17.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Renfrewshire Integrated Alcohol Team
GGC Mental Health

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

CAT (Community Addiction Team)
SCI Gateway Virtual Location Code

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

Hospital location code.
G004G

Email address
-

Urgency of referral	Routine		
Date of referral	11-Mar-2020	**Date sent**	11-Mar-2020

PATIENT DETAILS

Surname	Weir
Forename(s)	James
Title	Mr
Sex	Male
Date of birth	12-Mar-1989
CHI no.	1203893450
Area of Residence	-

Patient's address

27d Macdowall Street
JOHNSTONE
PA5 8QJ

Contact number(s)
-

1010208899742 Unique Care Pathway Number: 1010208899742

REGISTERED GP DETAILS

Name	Dr Juliet Sim		
GMC code	4092975	GP code	36994
Practice name	Quarryside Practice		
Practice code	87305		

Practice address

Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Contact number(s)
Voice: 01505 321733
E-mail: GG-UHB.GP87305@nhs.net

REFERRING GP DETAILS

Name	Dr. Jacqueline Webb		
GMC code	4036582	GP code	39918
Practice name	Quarryside Medical Practice (87305)		
Practice code	87305		

Practice address

Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Contact number(s)
Voice: 01505 321733

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Alcohol addiction, low mood

Comment: This patient was sexually abused as a child. He still lives in the same area as his abuser and finds this very difficult, esp if he accidentally meets him. He has a long history of alcohol abuse, most recently drinkin one bottle of fortified wine every two waking hours, with alternate days of not drinking simply because he remains hungover and unable to access supplies at off licence then. He drinks the cheapest alhocol available. He has subjective and objective low mood, suicidal ideation but no current plan. He feels let down by services, incl Psych and Psychology in the past, but has also defaulted from FU appts here. He decided last week to stop drinking alcohol altogether; he has been shaky but no DTs and seems determined to remain off as I currently assess him. He has smoked cannabis in the past but not for several months. He was cautioned by the police for verbally assaulting his abuser a few weeks ago. He was not charged. He seks help and currently appears motivated to attend. I have asked him to contact RCA in the meantime. Many thanks.

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
[X]Emotionally unstable personality disorder	strong narcissistic traits. Uses large amounts of cannabis	21-Sep-2017	21-Sep-2017
Anxiety with depression	-	03-Aug-2017	03-Aug-2017
Suicidal ideation	-	11-Aug-2016	11-Aug-2016
[X]Adjustment disorders	-	11-Aug-2016	11-Aug-2016
Fracture of metacarpal bone (Right)	closed fracture of metacarpal bone. Right hand base 4th metacarpal	03-Nov-2015	03-Nov-2015
[D]Collapse	?alcohol or drug related; absconded from hospital	11-Aug-2015	11-Aug-2015
Gastritis unspecified	-	22-May-2015	22-May-2015
History of sexual abuse	-	22-May-2013	22-May-2013
Acute pericarditis	-	03-Oct-2012	03-Oct-2012
Inguinal hernia	-	16-Aug-2012	16-Aug-2012
Death of mother	RTA	01-Jan-2012	01-Jan-2012
[X]Assault	facial injury	23-Dec-2011	23-Dec-2011
Overdose of drug	paracetamol	13-Oct-2011	13-Oct-2011
[X]Intentional self poisoning/exposure to noxious substances	paracetamol overdose	21-Jun-2011	21-Jun-2011
Neurotic depression reactive type	-	17-Jan-2011	17-Jan-2011
Death of father	RTA	01-Jan-2011	01-Jan-2011
Hydrocele (Left)	-	02-Nov-2010	02-Nov-2010
Prison sentence	-	01-Feb-2010	01-Feb-2010
Closed fracture proximal tibia, lateral condyle (plateau) (Right)	-	07-Oct-2009	07-Oct-2009
Closed fracture shaft of fibula (Right)	-	07-Sep-2009	07-Sep-2009
[X]Intentional self poisoning/exposure to noxious substances	ate noxious substance	01-Feb-2008	01-Feb-2008
[X]Overdose - paracetamol	-	01-Sep-2007	01-Sep-2007
[X]Overdose - paracetamol	-	01-Aug-2007	01-Aug-2007

Laceration of arm (Left)	-	01-Mar-2007	01-Mar-2007
Dental abscess	-	01-Jan-2007	01-Jan-2007
[X]Accidental drug overdose / other poisoning	secondary to alcohol	01-Jan-2007	01-Jan-2007
Intoxication - alcohol	/collapse (x4)	01-Jan-2006	01-Jan-2006
[X]Overdose - paracetamol	accidental	01-Jan-2006	01-Jan-2006
Alcohol problem drinking	-	01-Jan-2006	01-Jan-2006
Suicide + selfinflicted poisoning by drug or medicine NOS	loperamide	01-Jan-1998	01-Jan-1998
[X]Attention deficit disorder	-	01-Jan-1997	01-Jan-1997
[V]Behavioural problems	-	01-Jan-1996	01-Jan-1996
O/E - failure to thrive	-	01-Jan-1990	01-Jan-1990
On child protection register	removed in 1990; older sibling 'cot death', 2 other siblings adopted	01-Aug-1989	01-Aug-1989

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
Benzodiazepine dependence detoxification	residential	27-Jan-2017	27-Jan-2017
Benzodiazepine dependence detoxification	-	18-Sep-2016	18-Sep-2016
Gastroscopy NEC	gastritis	22-May-2015	22-May-2015
Gastroscopy NEC	duodenitis	08-Apr-2013	08-Apr-2013
Emergency hospital admission	epigastric pain and vomitting	03-Apr-2013	03-Apr-2013
Primary repair of inguinal hernia (Left)	-	09-Nov-2012	09-Nov-2012
Other primary open reduction of fracture of bone	right tibial plateau	07-Oct-2009	07-Oct-2009
Closed reduction of fracture	of orbit bone - assault	01-Nov-2005	01-Nov-2005

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

No current medications recorded

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 15 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-Mar-2020	10-Mar-2020
Mirtazapine Tablets 15 mg	28	28 Tablet(s)	ONE TO BE TAKEN AT NIGHT	-	10-Oct-2019	10-Oct-2019

Blood Pressure

Date Recorded	Systolic	Diastolic
24-Feb-2016	110	74
08-Apr-2015	132	72
12-Jan-2015	130	68

Body Measurements

Date Recorded	Height	Weight	BMI
08-Apr-2015	176	58	18.72
12-Jan-2015	178	63	19.88

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Current smoker :		28-Oct-2015
Cigarette smoker, 10 Cigarettes/day:		08-Apr-2015
Cigarette smoker, 1 Cigarettes/day:		12-Jan-2015
Alcohol consumption, 20 units/week:		08-Apr-2015
Alcohol consumption, 20 units/week:		12-Jan-2015
Aerobic exercise 0 times/week:		08-Apr-2015
Aerobic exercise 3+ times/week:		12-Jan-2015

Clinical warnings

Additional Support Needs
No known ASN requirements

Additional relevant information

Risk of Suicide:Yes

If yes to Risk of Suicide, please give details:Some suicidal ideation. May pose risk when intoxicated with alcohol but when sober this is not the case.

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

If yes to Risk to others including children / dependents / clinicians / other, please give details:Socially isolated
Verbal abuse of his childhood sexual abuser if he meets him in street. Somewhat agitated with me at assessment but no risk identified and easily talked down.

Risk from others:No

Risk of Self Neglect:Yes

If yes to Risk of Self Neglect, please give details:Poor self-care and hygiene

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:No

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

Renfrewshire Health & Social Care Partnership

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Date 12/03/2020
Our Ref CB
Your Ref 1203893450
Enquiries: Integrated Alcohol Team
Tel: 0141 618 7820
e-mail

PRIVATE & CONFIDENTIAL
James Weir
27D MacDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

I write to advise you that an assessment appointment has been arranged for you to meet with a member of the Integrated Alcohol Team at:

1:30pm on Thursday 2nd April, 2020
At Back Sneddon Centre
20 back Sneddon Street, Paisley

Please contact me on the above number if you are unable to attend. Kindly also note that if you do not attend it will be assumed that you no longer require this service and your case will be closed.

Yours sincerely

Rena Ballantyne

Admin Support Officer
Integrated Alcohol Team

cc: Dr J Webb, Quarryside Medical Practice, Linden Medical Centre, 25 Floors Street, Johnstone

"Staff should not be exposed to second hand smoke during home visits. To protect staff who visit clients in their own homes, clients and their families will be requested not to smoke for the duration of the visit".
no smoking policy 2017

Patients and visitors can visit – www.nhsggcsmokefree.org.uk
Or call Smokeline - 0800 84 84 84 for support to quit.

Torley Unit
Dykebar Hospital
Grahamston Road
Paisley PA2 7DE

Our ref: MMcQ/SJ/CHI 120389
Date: November 1, 2019

Tel: 0141 314 4106

PRIVATE & CONFIDENTIAL
Dr Amin
Quarryside Medical Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Dear Dr Amin

James Weir, dob 12.03.89, 27d Macdowall Street, Johnstone PA5 8QJ

Thank you for your referral of the above gentleman. He was assessed at the Torley Unit on the 28.10.19 by Nursing Staff. It was noted that James is currently involved in the 'Turn Around' project for 6 weeks for support with is alcohol issue.

His case was discussed at our multidisciplinary team meeting on the 30.11.19 and it was decided that due to him already receiving support for his alcohol use he will be discharged fully from the Torley Unit. Should you wish to re-refer him in the future we would be happy to engage with him.

Yours sincerely

Mark McQueen
Student Nurse
Torley Unit

Jane Forrest
Nurse
Torley Unit

Renfrewshire
Health & Social Care Partnership

Renfrewshire Council

NHS Greater Glasgow and Clyde

Mr. James Weir,
27d Macdowall Street,
Johnstone
PA5 8QJ.

Date: October 16, 2019
Our Ref: AH/IP/CHI:
1203893450

Torley Unit
Office – 0141 314 4106
Appointments - 0141 314 4435

Dear Mr. Weir,

Your GP, Dr. Amin, has referred you to the alcohol services at the Torley Unit, Dykebar Hospital or the Integrated Alcohol Team, Paisley.

An assessment appointment has been arranged for you to attend the **Torley Unit, Dykebar Hospital** on:-

Monday, October 28, 2019 at 1.30pm

I hope this is convenient. If this date is not suitable or you no longer require this appointment please call prior to the appointment to cancel.

If you fail to attend and do not contact the clinic within seven days, a further appointment may not be offered.

If in the future you wish a further appointment you would be required to contact your GP or self refer via ASeRT.

We would advise you not to drive to your appointment – have someone else drive you or use public transport.

Yours sincerely

Isobel Prior

Secretary
Torley Unit

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow (Glasgow, v17.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Renfrewshire Integrated Alcohol Team
GGC Mental Health

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

CAT (Community Addiction Team)
SCI Gateway Virtual Location Code

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

Hospital location code.
G004G

Email address
-

Urgency of referral Urgent - within 5 working days
Date of referral 10-Oct-2019 **Date sent** 10-Oct-2019

PATIENT DETAILS

Surname	Weir
Forename(s)	James
Title	Mr
Sex	Male
Date of birth	12-Mar-1989
CHI no.	1203893450
Area of Residence	-

Patient's address

27d Macdowall Street
JOHNSTONE
PA5 8QJ

Contact number(s)
-

1010197893227 Unique Care Pathway Number: 1010197893227

REGISTERED GP DETAILS

Name	Dr Juliet Sim		
GMC code	4092975	GP code	36994
Practice name	Quarryside Practice		
Practice code	87305		

Practice address

Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Contact number(s)
Voice: 01505 321733

REFERRING GP DETAILS

Name	Dr. Omar Amin		
GMC code	7608025	GP code	99999
Practice name	Quarryside Medical Practice (87305)		
Practice code	87305		

Practice address

Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Contact number(s)
Voice: 01505 321733

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Alcohol Dependence

Comment: Dear Dr,

Mr Weir has been having longstanding issues with mental health problems.
He has previously been seen by integrated alcohol team however was discharged from their care.
Being seen by Turning Point charity - is now keen to stop drinking alcohol together and seek out help.
He has been started on mirtazapine 15mg nocte, and I advised him that I was making a referral to yourselves.

Many Thanks,
Dr Omar Amin
FY2 @ Quarryside Practice

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
[X]Emotionally unstable personality disorder	strong narcissistic traits. Uses large amounts of cannabis	21-Sep-2017	21-Sep-2017
Anxiety with depression	-	03-Aug-2017	03-Aug-2017
Suicidal ideation	-	11-Aug-2016	11-Aug-2016
[X]Adjustment disorders	-	11-Aug-2016	11-Aug-2016
Fracture of metacarpal bone (Right)	closed fracture of metacarpal bone. Right hand base 4th metacarpal	03-Nov-2015	03-Nov-2015
[D]Collapse	?alcohol or drug related; absconded from hospital	11-Aug-2015	11-Aug-2015
Gastritis unspecified	-	22-May-2015	22-May-2015
History of sexual abuse	-	22-May-2013	22-May-2013
Acute pericarditis	-	03-Oct-2012	03-Oct-2012
Inguinal hernia	-	16-Aug-2012	16-Aug-2012
Death of mother	RTA	01-Jan-2012	01-Jan-2012
[X]Assault	facial injury	23-Dec-2011	23-Dec-2011
Overdose of drug	paracetamol	13-Oct-2011	13-Oct-2011
[X]Intentional self poisoning/exposure to noxious substances	paracetamol overdose	21-Jun-2011	21-Jun-2011
Neurotic depression reactive type	-	17-Jan-2011	17-Jan-2011
Death of father	RTA	01-Jan-2011	01-Jan-2011
Hydrocele (Left)	-	02-Nov-2010	02-Nov-2010
Prison sentence	-	01-Feb-2010	01-Feb-2010
Closed fracture proximal tibia, lateral condyle (plateau) (Right)	-	07-Oct-2009	07-Oct-2009
Closed fracture shaft of fibula (Right)	-	07-Sep-2009	07-Sep-2009
[X]Intentional self poisoning/exposure to noxious substances	ate noxious substance	01-Feb-2008	01-Feb-2008
[X]Overdose - paracetamol	-	01-Sep-2007	01-Sep-2007

[X]Overdose - paracetamol	-	01-Aug-2007	01-Aug-2007
Laceration of arm (Left)	-	01-Mar-2007	01-Mar-2007
Dental abscess	-	01-Jan-2007	01-Jan-2007
[X]Accidental drug overdose / other poisoning	secondary to alcohol	01-Jan-2007	01-Jan-2007
Intoxication - alcohol	/collapse (x4)	01-Jan-2006	01-Jan-2006
[X]Overdose - paracetamol	accidental	01-Jan-2006	01-Jan-2006
Alcohol problem drinking	-	01-Jan-2006	01-Jan-2006
Suicide + selfinflicted poisoning by drug or medicine NOS	loperamide	01-Jan-1998	01-Jan-1998
[X]Attention deficit disorder	-	01-Jan-1997	01-Jan-1997
[V]Behavioural problems	-	01-Jan-1996	01-Jan-1996
O/E - failure to thrive	-	01-Jan-1990	01-Jan-1990
On child protection register	removed in 1990; older sibling 'cot death', 2 other siblings adopted	01-Aug-1989	01-Aug-1989

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
Benzodiazepine dependence detoxification	residential	27-Jan-2017	27-Jan-2017
Benzodiazepine dependence detoxification	-	18-Sep-2016	18-Sep-2016
Gastroscopy NEC	gastritis	22-May-2015	22-May-2015
Gastroscopy NEC	duodenitis	08-Apr-2013	08-Apr-2013
Emergency hospital admission	epigastric pain and vomitting	03-Apr-2013	03-Apr-2013
Primary repair of inguinal hernia (Left)	-	09-Nov-2012	09-Nov-2012
Other primary open reduction of fracture of bone	right tibial plateau	07-Oct-2009	07-Oct-2009
Closed reduction of fracture	of orbit bone - assault	01-Nov-2005	01-Nov-2005

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

No current medications recorded

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 15 mg	28	28 Tablet(s)	ONE TO BE TAKEN AT NIGHT	-	10-Oct-2019	10-Oct-2019
Zopiclone Tablets 7.5 mg	14	14 tablet	ONE TO BE TAKEN AT NIGHT	-	01-Jul-2019	01-Jul-2019

Blood Pressure

Date Recorded	Systolic	Diastolic
24-Feb-2016	110	74
08-Apr-2015	132	72
12-Jan-2015	130	68

Body Measurements

Date Recorded	Height	Weight	BMI
08-Apr-2015	176	58	18.72
12-Jan-2015	178	63	19.88

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Current smoker :		28-Oct-2015
Cigarette smoker, 10 Cigarettes/day:		08-Apr-2015
Cigarette smoker, 1 Cigarettes/day:		12-Jan-2015
Alcohol consumption, 20 units/week:		08-Apr-2015
Alcohol consumption, 20 units/week:		12-Jan-2015
Aerobic exercise 0 times/week:		08-Apr-2015
Aerobic exercise 3+ times/week:		12-Jan-2015

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information

Risk of Suicide:Yes

If yes to Risk of Suicide, please give details:Says always has thoughts of taking life - jumping in front of a train, cutting wrists and cutting neck.

Past history of suicide attempt:Yes

If yes to Past history of suicide attempt, please give details:Has previously poured petrol and himself and tried to light himself on fire, however could not go through with it.

Risk of deliberate self harm:Yes

If yes to Risk of self harm, please give details:Past hx of self-harm

Is patient responsible for children?:No

Risk to others including children/dependents/clinicians/other:Yes

If yes to Risk to others including children / dependents / clinicians / other, please give details:Says has problems with anger. Has voices in his head which tell him to kill himself. Voice from a person he was sexually abused as a child - telling him to go and kill this person aswell.

Risk from others:No

Risk of Self Neglect:Yes

If yes to Risk of Self Neglect, please give details:Appears malnourished. Says normally drinks 12-13 bottles of buckfast per day. Seen by Turning Point Charity, has not had a drink in 4 days. Did not appear as though he was in withdrawal.

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:No

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

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Strictly Private & Confidential
Dr G Harris
Quarryside Practice
Linden Medical Centre
25 Floors Street
Johnstone
PA% 8PZ

Date 03.04.2019
Our Ref CB/SM/1203893450
Your Ref
Enquiries:
Tel: 0141-618-7820
e-mail

Dear Dr Rosbottom

James Weir, DoB 12.03.1989, Flat D, 27 MacDowall Street, Johnstone PA5 8QJ

This gentleman was referred to our services 28.01.2019 by Social Worker Paul McGlinchey, Criminal Justice Services, Paisley Area Team. It was deemed prudent to refer Mr Weir to alcohol services as it presented as a contributing factor to criminal behaviour perpetrated by him.

Mr Weir did not attend our offered service 20.03.2019, due to our current waiting list and service demands referred patients are not being offered automatic re-appointment unless there is enhanced mental health risks and or child protection issues identified. Neither of these are the case with Mr Weir.

In liaison with Paul McGlinchey we were able to ascertain that this referral is not part of the recent Community Payback Order Mr Weir is serving. It was recommended that Mr Weir be referred to our colleagues at The RCA Trust service.

We have discharged Mr Weir from our service.

Yours sincerely,

Stuart McMillan
Community Addictions Nurse
Integrated Alcohol Team
Renfrewshire Health and Social Care Partnership

Service Request Template – Adult Services

To help us progress your enquiry, we need to take some details from you to put onto our information system. We may need to share this information and talk to people involved in helping you/person you're calling about, such as social work and health staff. Is that ok? Choose an item.	
Full Name of Service User & Address: Mr James Weir Flat D,27 Macdowall Street, Johnstone, Renfrewshire, PA5 8QJ	
Date of Birth: *(must be asked)* 12-MAR-1989	**Telephone Number:** *(must be asked)* 07399991672
CHI Number: *(must be asked for RES, RLDS or IAT referrals)* **Please provide details.**	
NOK: **(name, add, tel no. and relationship to client)** **Not Kown**	**GP, Practice & Telephone Number:** **Please provide details.** Dr Harris Quarryside Practice Linden M/C Johnstone 01505 321 733
Referral Taken by: Choose an item.	
Contact Route: Choose an item.	

CHECK / UPDATE FRONTSHEET TAB ON SWIFT WITH CLIENT'S DETAILS

Referrer Details: **(name, add, tel no. and relationship to client)** Paul McGlinchey, Social Worker (Criminal Justice), Paisley Area Team, Abbey House, 8 Seedhill Rd, Paisley. Telephone No. – 0141 618 6615.
Is client aware of referral: Yes. **Date of Referral: 28.01.19** **Time of Referral:**

What service is being requested? *(must be asked - except for MHO, VI & HI referrals)*

Alcohol Assessment

Why is this referral needed?
Mr Weir has a long standing alcohol problem which appears linked to most of his offending behaviour.

Is the referral urgent? *(must be asked - except for CATS, MHO, VI & HI referrals)*
Choose an item.
Referral is not considered urgent although alcohol misuse has been a feature of offending and therefore important that this issue is addressed.

Does Client Live Alone: *(must be asked - except for MHO, VI & HI referrals)*
Choose an item.

Yes
Key safe in place:

N/A

Door Entry System in place:

Yes

Can client allow access:

Yes.

Does client use any walking aids? *(must be asked - except for MHO, VI & HI referrals)*

No

Please detail clients medical conditions: *(must be asked - except for MHO, VI & HI referrals)*

Does client have a terminal condition?

No

Does client have confusion?

No

Is the client within RAH at present?

No

Is the client over 18 years of age?

Yes

Relationship Status:

Single

Children: None

Who lives in the house with the client? Lives alone
SW Involvement: Mr Weir was made subject to a Community Payback Order on 9.10.18 with a 12 month supervision requirement following conviction for threatening and abusive behaviour (whilst under the influence of alcohol).
Known Risk Factors: Mr Weir has no convictions for violent behaviour, but has several convictions of threatening and abusive behaviour.
Known Involved Parties: Dr Kaur, Charleston Centre. Mr Weir is currently being treated for an Emotionally Unstable Personality Disorder with strong narcissistic traits. His attendance and compliance with medication can be sporadic, consequently impacting on the current treatment plan.
Client's current daily / regular alcohol use: ***(Collect as much information as possible, about alcohol use / pattern)*** Mr Weir reports that he is currently drinking on a daily basis but is unable to provide details of the level of alcohol consumption.

Save referral script in 1997-2003 format

Referral script should be emailed to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

Renfrewshire Health & Social Care Partnership

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Date 31/01/2019
Our Ref CB
Your Ref 1203893450
Enquiries: Integrated Alcohol Team
Tel: 0141 618 7820
e-mail

PRIVATE & CONFIDENTIAL
James Weir
Flat D
27 MacDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

I write to advise you that an assessment appointment has been arranged for you to meet with a member of the Integrated Alcohol Team at:

1:30pm on Wednesday 20th March, 2019
At Johnstone Health Centre
60 Quarry Street, Johnstone

Please contact me on the above number if you are unable to attend. Kindly also note that if you do not attend it will be assumed that you no longer require this service and your case will be closed.

Yours sincerely

Rena Ballantyne

Admin Support Officer
Integrated Alcohol Team

"Staff should not be exposed to second hand smoke during home visits. To protect staff who visit clients in their own homes, clients and their families will be requested not to smoke for the duration of the visit".
no smoking policy 2017

Patients and visitors can visit – www.nhsggcsmokefree.org.uk
Or call Smokeline - 0800 84 84 84 for support to quit.

Renfrewshire Health & Social Care Partnership

Date:	29th October 2018
Date Dictated:	23rd October 2018
Our Ref:	BK/AAM
CHI:	120 389 3450
Enquiries:	0141 849 2243
Tel:	0141 849 2200

PRIVATE & CONFIDENTIAL

Dr E Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE
PA5 8PZ

Dear Dr Renwick

Re: James Weir (DoB : 12/13/1989), Flat D, 27 MacDowall Street, Johnstone, PA5 8QJ

James did not attend his appointment with me on 22nd October 2018. We received a message from Paul McGlinchey, The Criminal Justice Social Worker that James had received an 18 month Payback Order under supervision. He had decided to do the Payback Order in Edinburgh due to staying at his sister's house and his Case from the Criminal Justice Service has been transferred to Edinburgh.

I will now discharge him from the outpatients' clinic.

Please do not hesitate to refer him back if this is required in the future.

Yours sincerely

Dr B Kaur
Consultant Psychiatrist

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2243 Telephone No: 0141-849-2200

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Renfrewshire Health & Social Care Partnership

Date	10/10/2018
OurRef	HA/RB
Your Ref	120389
Enquiries:	Integrated Alcohol Team
Tel:	0141 618 2585
e-mail	

PRIVATE & CONFIDENTIAL
Dr Renwick
Quarryside Practice
Linden Medical Practice
Floors Street
Johnstone
PA5 8P2

Dear Renwick

James Weir DOB 12.03.1989, Address :Flat D 27 MacDowell Street Johnstone PA5 8P2

As you are aware from previous correspondence the above gentleman has failed to attend two assessment appointments at our integrated alcohol team. A telephone call was received from Paul McGliinchey (Criminal Justice) to inform us that James had received an 18month pay back order under supervision from 09.10.18 which was agreed to be carried out in Edinburgh where he is currently living with his sister. Paul reports James case will be transferred to Edinburgh in the near future.

James will now be discharged from our services due to living out of area.

Yours sincerely

Hilda Anderson

Staff Nurse

CC: Dr Kaur Consultant Psychiatrist, CMHT Mill End MIll
Paul McGlinchey, Criminal Justice Worker

Renfrewshire Health & Social Care Partnership

PRIVATE & CONFIDENTIAL

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE
PA5 8PZ

Date: 10th September 2018
Dictated: 10th September 2018
CHI: 1203893450
Ref: BK/KE
Tel: 0141 849 2243

Dear Dr Renwick

Re: James Weir, Flat D, 27 MacDowall Street, Johnstone, PA5 8QJ
Date of Birth: 12.03.89

Diagnosis:	Emotionally Unstable Personality Disorder Strong narcissistic traits
Medication:	Mirtazapine 45 mgs per day Chlorpromazine 25 mgs – up to six tablets per day

James came to see me in my outpatient clinic on the 10th September 2018. He arrived 20 minutes early. He was reasonable in his presentation. He was not intoxicated and he was very focused on the court hearing tomorrow. He was very worried about the outcome of tomorrow's hearing as it is about the breach of his probation order and he is worried in case he gets a custodial sentence.

James has been fairly chaotic for many months now, as you are aware. Cannabis use and alcohol play a huge part in his presentation. Today he seems to be very thoughtful about the problems he has with drinking. He talked about how he started drinking when he was aged 14 and how he needs to get on top of his drinking and work with the integrated alcohol team. He already has an appointment with them.

He feels that his medication does not do anything for him. I am not sure about his compliance with medication. When he is feeling unwell and chaotic he is not able to take his medication as prescribed. He knows that his medication will not work properly if he continues to drink.

He talked about how his family are trying to help him and motivate him. His sister is trying to organise his presents for Christmas time for his family. He feels that he has no choice but to work with the alcohol services at present. This is because of family pressures as well as worries of a custodial sentence. I pointed out how he seems quite motivated today and how he needs positive things in his life to be able to make changes.

I have offered him another appointment in 6 weeks time to review things. Please do not hesitate to contact me if you have concerns.

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2205 Telephone No: 0141-849-2200

Renfrewshire
Health & Social Care
Partnership

Yours sincerely

Dr Baljeet Kaur
Consultant Psychiatrist
Renfrewshire Community Mental Health Team

Cc Paul McGlinchy, Criminal Justice Social Worker

Renfrewshire Health & Social Care Partnership

Ref: BK/KE
CHI: 120 389 3450

Date: 4 September 2018

PRIVATE & CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
Johnstone,
Renfrewshire
PA5 8QJ

Dear Mr. Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Monday 10th September 2018**
Time:	**12.00noon**
Appointment with:	**Dr Kaur, Consultant Psychiatrist**
Location:	**Mile End Mill**

If this appointment is not suitable, please telephone 0141 849 2243 so alternative arrangements can be made.

Please see enclosed leaflets about the service, your appointment and how the NHS protects your personal health information (available online at http://www.nhsggc.org.uk/patients-and-visitors/faqs/data-protection-privacy/)

Yours sincerely

Administration

Renfrewshire Community Mental Health Team

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2205 Telephone No: 0141-849-2200

/RenfrewshireHSCP @RenHSCP www.Renfrewshire.HSCP.scot

Renfrewshire Health & Social Care Partnership

Ref: BK/JS
CHI: 120 389 3450

Date: 2nd August 2018

PRIVATE & CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
Johnstone,
Renfrewshire
PA5 8QJ

Dear Mr. Weir

I am sorry you did not attend your Outpatient clinic appointment on the 1st August 2018. A further appointment has been made for you to be seen as follows:

Date:	**Monday 22nd October 2018**
Time:	**1.40pm**
Appointment with:	**Dr Kaur**
Location:	**Mile End Mill**

If this appointment is not suitable, please telephone the above number so alternative arrangements can be made.

Yours sincerely

Administration

Renfrewshire Community Mental Health Team

Cc Paul McGlinchey, Criminal Justice Social Worker, Social Work Department.

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2205 Telephone No: 0141-849-2200

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Renfrewshire Health & Social Care Partnership

Date	28/08/2018
Our Ref	CB
Your Ref	1203893450
Enquiries:	Integrated Alcohol Team
Tel:	0141 618 2585
e-mail	

PRIVATE & CONFIDENTIAL
James Weir
Flat D
27 McDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

I write to advise you that an assessment appointment has been arranged for you to meet with a member of the Integrated Alcohol Team at:

1:30pm on Tuesday 2nd October, 2018
At Linwood Health Centre (Room 5)
5 Bridge Street, Linwood

Please contact me on the above number if you are unable to attend. Kindly also note that if you do not attend it will be assumed that you no longer require this service and your case will be closed.

Yours sincerely

Rena Ballantyne

Admin Support Officer
Integrated Alcohol Team

Renfrewshire
Health & Social Care
Partnership

NetWork Team
Mile End Mill
Studio 1001
12 Seedhill Road
PAISLEY
PA1 1JS

Date: 24th July 2018
Our Ref: 1203893450
Tel: 0141 849 2297

Mr. James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear James,

Re: Discharged from Network Vocational Rehabilitation Service (NHS GG&C)

I am writing to inform you that you have now been discharged from the NetWork service. This is because you have not engaged with Denise McDaid since you contacted NetWork after you received an opt in letter.

As NetWork is closing, Please feel free to contact **Invest in Renfrewshire, Russell Institute, 30 Causeyside Street, Paisley** if you require help in the future with Further Education or Employability. If you have any queries please contact NetWork service on the above number.

We wish you well for the future.

Yours sincerely,

Laura Lynch

Laura Lynch
Administration

Renfrewshire
Health & Social Care
Partnership

Ref: **BK/MS**
CHI: **120 389 3450**

Date: **21 June 2018**

PRIVATE & CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
Johnstone,
Renfrewshire
PA5 8QJ

Dear Mr. Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**1st August 2018**
Time:	**10.00am**
Appointment with:	**Dr Kaur**
Location:	**Mile End Mill**

If this appointment is not suitable, please telephone the above number so alternative arrangements can be made.

Please see enclosed leaflets about the service, your appointment and how the NHS protects your personal health information (available online at http://www.nhsggc.org.uk/patients-and-visitors/faqs/data-protection-privacy/)

Yours sincerely

Team Medical Secretary

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2205 Telephone No: 0141-849-2200

Renfrewshire
Health & Social Care
Partnership

NetWork Team
Mile End Mill
Studio 1001
12 Seedhill Road
PAISLEY
PA1 1JS

Date: 21st June 2018
Our Ref: 1203893450
Tel: 0141 849 2297

Mr. James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear James,

I am sorry we have been unable to contact you by telephone.

If you are still interested in working with our service please contact us within ten days of receiving this letter. If we do not hear from you we will assume you no longer wish to engage with our service and will discharge you.

We look forward to hearing from you.

Yours sincerely,

Laura Lynch

Laura Lynch
Administration assistant

Renfrewshire
Health & Social Care
Partnership

Mental Health Services

Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ

Date	21/06/2018
Our Ref	CB
Your Ref	1203893450
Enquiries:	Integrated Alcohol Team
Tel:	0141 618 2585
e-mail	

PRIVATE & CONFIDENTIAL
James Weir
Flat D
27 Macdowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

I write to advise you that an assessment appointment has been arranged for you to meet with a member of the Integrated Alcohol Team at:

2:30pm on Tuesday 10th July, 2018
At Linwood Health Centre (Room 5)
5 Bridge Street, Linwood

Please contact me on the above number if you are unable to attend. .

Yours sincerely

Rena Ballantyne

Admin Support Officer
Integrated Alcohol Team

Service Request Template – Adult Services

To help us progress your enquiry, we need to take some details from you to put onto our information system. We may need to share this information and talk to people involved in helping you/person you're calling about, such as social work and health staff. Is that ok? Choose an item.	
Full Name of Service User & Address: James Weir, Flat D, 27, Macdowall Street, Johnstone, PA5 8QJ	
Date of Birth: *(must be asked)* 12-MAR-1989	**Telephone Number:** *(must be asked)* 07956881339
CHI Number: *(must be asked for RES, RLDS or IAT referrals)* **Please provide details.**	
NOK: **(name, add, tel no. and relationship to client)** **Please provide details.**	**GP, Practice & Telephone Number:** **Please provide details.** Dr Harris Linden Medical Centre Floors Street Johnstone PA5 8PZ Tel: 01505 321 733
Referral Taken by: Choose an item.	
Contact Route: Choose an item.	

CHECK / UPDATE FRONTSHEET TAB ON SWIFT WITH CLIENT'S DETAILS

Referrer Details: **(name, add, tel no. and relationship to client)** Paul McGlinchey, Social Worker (Criminal Justice), Paisley Area Team, Kersland School, 10, Ben Nevis, Road Telephone No. – 0141 618 6615.
Is client aware of referral: Yes. **Date of Referral: 19.06.18** **Time of Referral:**

What service is being requested? *(must be asked - except for MHO, VI & HI referrals)*

Alcohol Assessment

Why is this referral needed?
Mr Weir advises that he began to experiment with alcohol when he was approximately 14 years old in an effort to be accepted by his peers. He was referred for alcohol counselling by Throughcare Services in 2008 following concern regarding his excessive use of alcohol. Mr Weir admitted that during periods of binge drinking he consumed excessive amounts of alcoholic drinks including; strong cider, fortified wine and vodka. He acknowledged that his behaviour could be disruptive whilst under the influence of alcohol and that the misuse of alcohol was a significant factor with regard to his involvement in offending behaviour.

Is the referral urgent? *(must be asked - except for CATS, MHO, VI & HI referrals)*
Choose an item.
Referral is not considered urgent however as stated above alcohol misuse has been a feature of offending and therefore important that this issue is addressed.

Does Client Live Alone: *(must be asked - except for MHO, VI & HI referrals)*
Choose an item.

Yes

Key safe in place:

N/A

Door Entry System in place:

Yes

Can client allow access:

Yes.

Does client use any walking aids? *(must be asked - except for MHO, VI & HI referrals)*

No

Please detail clients medical conditions: *(must be asked - except for MHO, VI & HI referrals)*

Does client have a terminal condition?

No

Does client have confusion?

No

Is the client within RAH at present?

No

Is the client over 18 years of age?

Yes
Relationship Status: Single
Children: none
Who lives in the house with the client? Client resides alone
SW Involvement: Mr Weir is currently subject to a Community Payback Order with 12 months Supervision requirement following conviction for an offence of threatening and abusive behaviour.
Known Risk Factors: Mr Weir's convictions include; Theft By Shoplifting, Attempt Theft, Possession of Offensive Weapon (Knife), Reset, Theft By Housebreaking, Breach of Probation, Breach of CPO, and Threatening and Abusive Behaviour. Mr Weir reports that his offending behaviour is generally committed whilst under the influence of drugs and/or alcohol. Mr Weir has no convictions for physical violence however he has been convicted of threatening and abusive behaviour in addition to possession of an offensive weapon (knife) whilst under the influence of alcohol which had the potential to cause harm.
Known Involved Parties: Dr Kaur, Adult Psychiatry
Client's current daily / regular alcohol use: ***(Collect as much information as possible, about alcohol use / pattern)*** Mr Weir reports that he is not drinking daily but tends to binge drink for days at a time.

Save referral script in 1997-2003 format

Referral script should be emailed to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

Renfrewshire Health & Social Care Partnership

Date: 17/5/18
Our Ref: BK/MS
Chi No: 120 389 3450
Enquiries: 0141 849 2250
Dictated Date: 25/4/18

Private & Confidential

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE
PA5 8PZ

Dear Dr Renwick

Re: James Weir, Flat D, 27 MacDowall Street, Johnstone, PA5 8QJ
Date of Birth: 12.03.89

Diagnosis:	Emotionally Unstable Personality Disorder Strong narcissistic traits
Medication:	Mirtazapine 45 mgs per day Chlorpromazine 25 mgs – up to six tablets per day

James was seen in my outpatients clinic on 24th April 2018, the situation is pretty much unchanged, there are times when he is more motivated and engages with services, for example he was engaging in the Network Services recently but ther are other times when he starts using drugs and alcohol to a greater degree again and becomes more unsettled and more irritable and smashes up thing then he feels angry. He stopped seeing his sister and his nephew and there are various concerns expressed about him in these situations for example recently there was a police concern where he had been quite irritable with bank staff and the police had been alerted. He can be quite oppositional with the police as well, when he feels out of control he does not care who he is talking to.

He tells me that he was in court on 17th April and he was found guilty for acting in an aggressive manner, he does not know about sentencing yet.

As you are aware his mother lives in Ferguslie, she has not seen him in the last ten years, he would love to see his mother in fact whenever he is emotional and talks about his difficulties he would like to actually say this to his mother, she does not see him because of his drug use and alcohol problems.

He has sporadic contact with his sister and her son, when he is okay he interacts with them but when he uses drugs and alcohol he falls out with them and does not see them.

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2205 Telephone No: 0141-849-2200

Renfrewshire
Health & Social Care
Partnership

His father is in prison for two accounts of rape.

We talked about how his life has been very complex and there are so many issues but he needs to make a start of his drug and alcohol misuse first. I have given him all the numbers again and will see him in the clinic again in a few months time.

Yours sincerely

B Kaur (Electronically signed)

Dr Baljeet Kaur
Consultant Psychiatrist

Studio 1001 – 1011, Mile End Mill,
Abbeymill Business Centre, 12 Seedhill Road, Paisley PA1 1JS
Direct Line: 0141 849 2205 Telephone No: 0141-849-2200

Ref: BK/HG
CHI: 120 389 3450

Date: 4 April 2018

PRIVATE & CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
Johnstone,
Renfrewshire
PA5 8QJ

Dear Mr. Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Tuesday 24th April 2018**
Time:	**12.40pm**
Appointment with:	**Dr B Kaur, Consultant Psychiatrist**
Location:	**Mile End Mill**
Contact details:	**Helen Gaffney, Secretary**

If this appointment is not suitable, please telephone the above number so alternative arrangements can be made.
If we have your up to date mobile number a text reminder stating “You have an NHS appointment” will be sent to you.

Access Information on how the NHS protects your health information at www.nhsggc.org.uk/patients-and-visitors).

Yours sincerely

Team Medical Secretary

NetWork Service
INITIAL CONTACT

Name: James Weir. **Address:** 27 PH Dowall Street Johnstone **Tel No:** **Mob No:** **Email :**	**Date of Birth:** 12/03/1989. **Chi No:** **N.I Number** **Emergency Contact:** **Tel No:** 07956881339.

What do you want to achieve as a result of us meeting today?

Information on what's out there to get you out of house.

What are your hopes regarding 'work'?

Want to work in future.

What is standing in your way? What do you think are your barriers? (see over)

Poor mental health & convictions.

What are your concerns about work?

Not ready for work at this moment.

Potential Barriers (prompt list)

Age Related	Ethnic Minority	Literacy / Numeracy
Over 50	Prison Leaver	Workless Household
Alcohol Issues	History of Substance abuse	Lack of Work Experience
Lone parent	Mental health	Physical disability
Refugee	Asylum Seeker	Disadvantaged AreaHomeless
Learning Disability	Long term Unemployed	Travel to work
No Qualifications	Family/Caring Responsibilities	Criminal Record (Ex Offender)

NetWork Service
INITIAL CONTACT

What welfare benefits or other financial assistance do you receive?

- ☐ Income Support
- ☑ Incapacity Benefit/Employment Support Allowance
- ☑ Disability Living Allowance/PIP
- ☐ Job Seekers Allowance
- ☐ Invalid Care Allowance
- ☐ Severe Disability Allowance
- ☐ Carers Allowance
- ☐ Housing Benefit/ Council Tax Reduction
- ☐ Working Tax Credits
- ☐ Mortgage Payments
- ☐ Travel Card
- ☐ Other

Do you need any financial advice? (debts, benefits, better of in work calc) Yes/No

Work Dev/IPS	**Job Retention**
Involved with Work Programme (Ingeus/ Working Links/Other) Or Job Centre?	Line Manager .....
Can I speak to the Work Programme Provider/ Job Centre to say I am working with you? Yes / No Name.....	HR Contact ..... Union Contact .....

Who else is supporting you?
(eg Job brokers, Personal Advisers, CPN, OT, Social Work, Psychiatrist, Family, Carer)

Dr Kaur -

If you woke up one morning and you had a day as good as it could be what would that day be like? What would you be doing? How would you feel? What would people notice about you on this good day?

debt free, having a holiday - feel more positive about future,

10

Today a 5 as I'm not getting better.

Still having nephews + sister.

What is your dream Job?

What type of job would you like next?

If 10 represents all of the 'good day' and 0 is no signs of the good day where are you on a scale between 0 and 10 now?

0.....1.....2.....3.....4.....5.....6.....7.....8.....9.....10

NetWork Service
INITIAL CONTACT

Initial Action Plan

Attend horticulture at West College Scotland. 1 - 3pm.

Guitar Group - St. Mathews Church. 1.30pm - 3.30pm

Appt to be made financial Literacy worker. for a few weeks time.

Consent: Please tick this box if you agree/consent to the below information ☐

Please read this carefully, complete the restriction box if appropriate and then sign, and date the form. If you have any concerns please discuss them with a member of staff.

- ☑ I agree that the information provided in my discussions or my assessments with the NetWork Service may be shared with agencies/organisations that I am or may be involved with eg Job Centre Plus/ DEA/Work Prog Providers/ Employer/ HR/ Union Representative
- ☑ I understand that this information will be used for the purpose of providing a service or care to me.
- ☑ I understand that anonymous information will be collated for statistical purposes.
- ☑ I understand that I may withdraw/ restrict my consent to share information at any time.
- ☑ I understand that my information will be held securely on paper and on computer in accordance with the Data Protection Act 1998.

I have made the following restrictions: (if applicable)
Restrictions:

What is your preferred method of contact?
Letter: ☐ Email: ☐ Text: ☐ Home Telephone: ☐ Mobile Telephone ☐

Do we have permission to email or text you? Yes ☐ **No** ☐

Signed (client):	**Signed/Job Title:**
Date: 22/02/18.	**Date:** 22/02/18

Renfrewshire
Health & Social Care
Partnership

NetWork Team
Mile End Mill
Studio 1001
12 Seedhill Road
PAISLEY
PA1 1JS

Date: 2nd February 2018
Our Ref: 1203893450
Tel: 0141 849 2297

James Weir
Flat D
27 MacDowall Street
Johnstone

Dear James

An appointment has been made for yourself with Denise McDaid on:

THURSDAY 8TH FEBRUARY 2018, 3.00PM
ROOM 27
JOHNSTONE HEALTH CENTRE, 60 QUARRY STREET, JOHNSTONE, PA5 8EY

Please contact the office on the above telephone number to confirm your attendance. If you are unable to keep this appointment another more suitable time can be arranged.

Yours sincerely

Debbie Lessels

Debbie Lessels
Administrator

Renfrewshire
Health & Social Care
Partnership

NetWork Team
Mile End Mill
Studio 1001
12 Seedhill Road
PAISLEY
PA1 1JS

Date: 12/02/2018
Our Ref: 1203893450
Tel: 0141 849 2297

Mr. James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear James,

If you are still interested in working with our service please contact us within ten days of receiving this letter. If we do not hear from you we will assume you no longer wish to engage with our service and will discharge you.

We look forward to hearing from you.

Yours sincerely

Laura Lynch

Laura Lynch
Administration assistant

Renfrewshire
Health & Social Care
Partnership

NetWork Team
Mile End Mill
Studio 1001
12 Seedhill Road
PAISLEY
PA1 1JS

Date: 23/01/18
Our Ref: 1203893450
Tel: 0141 849 2297

Mr. James Weir
Flat D
27 MacDowall Street
Johnstone
Renfrewshire
PA5 8QJ

Dear James,

We have received a referral from Mile End Mill.

You have been allocated to Denise McDaid who will be in touch in due course to arrange an appointment.

Yours sincerely

Laura Lynch

Laura Lynch
Administration assistant

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Service Users Name: James Weir	Chi No / DoB: 1203893450	PIMS No:
Legal Status: Informal ☒ Detained ☐ Community Order ☐	Ward / Dept / CMHT:	

Context of Assessment

On admission ☐	Engagement with Crisis Services ☒	MDT / C.P.A. review: ☐
Annual review: ☐	Significant change in presentation / circumstances: ☐	Other ☐ specify

Sources of Information

Service user ☒	Carer ☐	Consultant ☐	Other Dr. ☐	Occupational Therapy ☐
Named Nurse ☐	Social Work ☐	Psychology ☐	CPN ☐	Voluntary agency worker ☐
Pharmacy ☐	GP ☐	Support worker ☐	Other ☐ specify	

Guidance

This screening form should be completed as fully as possible. It is a clinical judgement when this should take place however as a general guide this may be on admission to hospital or at the point of engagement with secondary mental health services. Thereafter it should be reviewed on a regular basis as pre-determined by the clinical team or as significant changes in circumstances or clinical presentation dictate. It is expected that reviews would routinely take place at multidisciplinary meetings, the point of transition from one aspect of service to another, as part of a planned annual review, at the point of CPA review, at the point of engagement with Crisis Services. In relation to admissions to hospital, the initial screening and formulation of risk should be reviewed at the next multi-disciplinary team meeting.

- Dependant on the information collected consideration should be given to carrying out a more detailed, specific risk assessment e.g. suicide risk assessment.
- This document should form an integral part of a comprehensive mental health assessment and care planning process, and the factors listed are not necessarily in any ranked order.
- This does not attempt to be an exhaustive list of safety issues or risk factors, merely an initial guide informing clinical management.
- The expectation that all safety risks can be predicted is unrealistic, and initial assessment may be based on incomplete information.
- If completed by one person (eg. out of hours), this assessment should be discussed as soon as is practicable with the Consultant and multi-disciplinary team (including users and carers where appropriate).
- The assessment should include the service user and carer perspective of risk.
- The assessment must take account of parenting responsibilities and contact with children.
- Please refer to the Clinical Risk Screening & Management Policy for guidance.

Screening completed by

Print name: Paul Phillips	Signature:
Designation: Senior IHT Practitioner	Date & Time 23/06/17 17:15

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Suicide &/or Self Harm			Violence			Other Risk Factors		
History and Situational Factors								
S1	Mental illness diagnosed or diagnosis uncertain	☒	V1	Previous violent acts	☐	O1	Vulnerable due to learning disability, cognitive impairment or mental illness	☐
S2	Use of violent methods	☐	V2	Use of weapons	☐	O2	History of stalking others	☐
S3	Previous self-harm	☒	V3	Previous admission to secure units	☐	O3	History of social, financial or sexual exploitation of others	☐
S4	Socially isolated	☒	V4	Convictions for violence / assault	☐	O4	History of falls	☐
S5	Past diagnosis of personality disorder,	☒	V5	Past diagnosis personality disorder or psychopathy	☒	O5	History of self-neglect,	☐
S6.	Major physical illness	☐	V6	Alcohol or drug misuse	☒	O6	Lacks basic housing amenities	☐
S7.	Alcohol/drug misuse	☒	V7	Male under 35	☒	O7	Previous fire setting	☐
S8.	Family history of suicide	☒	V8	Prior supervision failure	☐	O8	Socially or culturally isolated	☐
S9.	Previous treatment non-compliance	☐	V9	Previous treatment non-compliance	☐	O9	Neglect- children or other dependents	☐
S10	Impulsivity	☐	V10	Impulsivity	☐	O10	History of exploitation by others	☐
Short Term or Precipitating Factors								
S11	Planning suicide	☐	V11	Intoxicated	☐	O11	Difficulty communicating needs/views/comprehension difficulties	☐
S12	Access to lethal method	☒	V12	Acute psychosis	☐	O12	Confusion or disorientation	☐
S13	Hopeless / helpless	☐	V13	Violent fantasies	☐	O13.	Sexually disinhibited or aggressive	☐
S14	Recent major loss	☐	V14	Identified target	☒	O14	Significant financial problems	☐
S15	Recent psych hospital discharge	☐	V15	Access to weapons	☐	O15	Current self-neglect	☐
S16	Current or recent treatment non-compliance	☐	V16	Current or recent treatment non-compliance	☐	O16	Current neglect of children or other dependents	☐
Protective Factors								
S17	Willing to respond to advice/carers	☒	V17	Willing to respond to advice	☒	O17	Willing to respond to advice/carers	☒
S18	Has close relationship	☒	V18	Appropriate services available	☒	O18	Appropriate services available	☒
S19	Religious beliefs	☐						

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Please write N/A if no risks identified or no risk management actions required.

Management plan	Action by:
Suicide/Self Harm Previous cutting States that he had a previous incident of setting himself alight Voiced a number of ways that he intended on ending his life today however then agreed to maintain his safety by utilisng crisis numbers if required	
Violence Stated that he would like to stab the person he accused of abusing him when he was 17. Later said that he had no intent to carry out any act of violence	
Other Risk Factors	

Outcome of screening/management plan discussed with

Service User ☒	Carer ☐	Consultant ☒	Other Dr. ☒
CPN ☐	Ward Nurse ☐	Social Work ☐	Occupational Therapy ☐
Psychology ☐	Pharmacy ☐	Other ☐ specify	

Management Plan completed by

Print name: Paul Phillips	Signature:
Designation: Senior IHT Practitioner	Date & Time 23/06/17 17:17

NHS Greater Glasgow and Clyde

Date	Review of Identified or New Risks	Review of Mangement Plan	Setting e.g. MDT	Completed by
24/06/17	Patient does not require IHTT daily contact	Reduced to 1/48	Phone call	John Hyndman
18 1-18	seen in ouypatients no active ideas of selfharm at presen, suicidal ideation a few days ago sister supportive, wants to focus on his future taken to police station few days when intoxicated, alledges police used excessive force	referred to network service		Dr Kaur

REFERRAL

What Service/Discipline is referral for:	NetWork Services		
Date Assessed:	18-1-18	Time of Assessment:	

Personal Details			
Surname:	Mr James Weir	CHI Number:	3450
Forename:		Relationship Status:	
Dob:	12/03/89	Sex:	Male
Age:		Referral Urgency:	Non-Urgent
E-Mail Address:		Registered GP :	Dr Renwick
Clients Address:	Flat D, 27 MacDowall Street, Johnstone	Practice Code:	
		Client Telephone No:	07956881339
Post Code:	PA5	Client Mobile No:	

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	SW
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below;		
Consent to Referral:	Patient is aware of referral		
Brief History/Current Issues/Known Forensic History Risks:	diagnosis of Personality disorder chatic lifestyle canabis and alcohol miuse unable to work with CPN and drug service in the past mostly does things himself when stable woould like to get back to courses and employment attended Venture Scotland and benifitted from it History of CSA abuser lives locally supportive sister who works for te counci completed standar grades worked as a cleaner, packaging at Amazon warehouse not worked for 5 yearsl		

Service	**Assessment Required**
Network Services	Network Service Profile
Addictions	DAST/AUDIT
Doing Well	PHQ
CMHT	GAD7

Reason for Referral: for working towards gaining employment
would like to work in caring professions

Referred By: B kaur
Location: MEM
Designation: Consultant
Contact Information/Number: 0141-8492200
Date Referred: 18-1-18

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk
Council Staff Email to: gg-uhb.DykebarHealthRecords@nhs.net

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Version 2, Dec 13

Renfrewshire
Health & Social Care
Partnership

Date: 19th September 2017
Dictated: 13th September 2017
Chi No: 120 389 3450
Ref: MMcK/AAM
Tel: 0141 849 2200
Fax: 0141 849 2254

Private & Confidential
Dr E Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Dear Dr Renwick

Re: James Weir (DoB : 12/03/1989) Flat D, 27 MacDowall Street, Johnstone PA5 8QJ

I write to advise that James has been reviewed within the CMHT recently. His attendance with CPN has been sporadic and as you will be aware he has issues with engagement.

It was agreed that he would be discharged from CPN caseload at this time.

He remains on Dr Kaur's Out Patient Clinic.

I trust you find this satisfactory.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Renfrewshire Health & Social Care Partnership

Private & Confidential
Mr James Weir
Flat D,
27 MacDowall Street,
Johnstone,
Renfrewshire
PA5 8QJ

Date: 21st November 2017
Dictated: 14.11.17
Chi No: 120 389 3450
Ref: BK/HG
Tel. No: 0141 849 2205

Dear Mr Weir

We are sorry that you did not attend your recent out patient appointment at the above location on 9h November 2017. A further appointment has been made for you to be seen at

Mile End Mill, Unit 1001, Anchor Mills, 12 Seedhill Road, Paisley, PA1 1JS

Date: **Tuesday 6th February 2018**
Time: **10.20am**
Consultant: **Dr Kaur, Consultant Psychiatrist**
Clinic: **Mile End Mill OPC**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely

Helen Gaffney

Secretary to:
Dr B Kaur
Consultant Psychiatrist

Renfrewshire
Health & Social Care
Partnership

Date dictated: 31st August 2017
Date typed: 1st September 2017
CHI no: 120 389 3450
Our Ref: MMcK/AAM

Tel: 0141 849 2200

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
PA5 8QJ

Dear James

I hope all is well with you. I am sorry you missed our appointment on 24th August 2017. If you would like a further appointment please contact me within the next 14 days (Friday 15th August 2017).

If I do not hear from you by that time I will assume you no longer require a further appointment and you will therefore be discharged from my caseload.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Renfrewshire
Health & Social Care
Partnership

Date: 14th September 2017
Dictated: 13th September 2017
Chi No: 120 389 3450
Ref: MMcK/AAM
Tel: 0141 849 2200
Fax: 0141 849 2254

Private & Confidential
Dr E Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Dear Dr Renwick

Re: James Weir (DoB : 12/03/1989) Flat D 27 MacDowall Street, Johnstone PA5 8QJ

I write update you with regards to the above named young man. Mr **Weir's** attendance has been sporadic over the last several months. As you will be aware he does tend to pitch up in periods of crisis.

Following a recent review it was agreed that he should be offered a 14 Day Opt In which he has not responded to.

I have now discharged him from my CPN Caseload. He remains on the Outpatient List.

I trust you find this satisfactory.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Renfrewshire Health & Social Care Partnership

Date dictated: 10th August 2017
Date typed: 11th August 2017
CHI no: 1203893450
Our Ref: MM/KE
Tel: 0141 849 2200

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
PA5 8QJ

Dear James

I hope all is well with you. I am sorry you were unable to attend your appointment with me today, **Thursday 10th August 2017** at **12.45 pm** within Johnstone Health Centre.

I would like to offer you a further appointment on **Thursday 24th August 2017** at **12.00 pm** within **Johnstone Health Centre, 60 Quarry Street, Johnstone.**

If this is unsuitable please contact me on the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Renfrewshire
Health & Social Care
Partnership

Date dictated: 8th August 2017
Date typed: 10th August 2017
CHI no: 120 389 3450
Our Ref: MMcK/AAM

Tel: 0141 849 2200

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
Renfrewshire
PA5 8QJ

Dear James

I hope all is well with you. Can I see you on **Thursday 10th August 2017** at **1245** within Johnstone Health Centre, 60 Quarry Street, Johnstone.

If this is not suitable please contact me on the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

MENTAL HEALTH DIRECTORATE
(RENFREW)
DYKEBAR HOSPITAL
GRAHAMSTON ROAD
PAISLEY PA2 7DE
TELEPHONE: 0141 884 5122
FAX: 0141 884 7162

NHS
Greater Glasgow and Clyde

IF TELEPHONING, PLEASE ASK FOR

DATE: 29/6/17

Fax — 01505 800 997

Dear Dr: N Webb / Dr Renwick Gharryside Prac.

Re: James Weir DOB 12/3/89

I saw your patient at the out patient clinic on

I would be grateful if you could prescribe the following medication:

- ↑ mirtazapine to 45mg/day

- Prescribe prn Chlorpromazine 25mg upto 6 tablets/day

A letter containing further details will follow.

Yours sincerely

faxed 30/6/17

Renfrewshire Health & Social Care Partnership

PRIVATE & CONFIDENTIAL

Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE PA5 8QJ

Date: 03 August 2017
CHI: 1203893450
Ref: BK/ML
Tel: 0141-849 2205

Dear Mr Weir

Thank you for advising me of your non-attendance on 31st July, 2017. Please note your next appointment with me is on **Friday, 15th September, 2017 @ 12.40 p.m**.

Yours sincerely

Electronically signed on behalf of

Dr B Kaur - Consultant Psychiatrist
Renfrewshire Community Mental Health Team

c.c. Dr Renwick
Quarryside Medical Practice
Linden Medical Practice
25 Floors Street
JOHNSTONE PA5 8PZ

Renfrewshire Health & Social Care Partnership

Date: 18th July 2017
Dictated: 04.07.17
Chi No: 1203893450
Ref: BK/HG
Tel. No: 0141 849 2205

Private & Confidential
Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE

Dear Dr Renwick

Re: James Weir, Flat D, 27 MacDowall Street, Johnstone PA5 8QJ
Date of Birth: 12.03.89

James Weir is currently getting input from the Intensive Home Treatment Team. He had mixed feelings about his medication. He felt that Mirtazapine 30 mgs was not doing enough and he has been trying to cut it back.

The main problem seems to be the ongoing instability of his emotions in relation to drug misuse and alcohol. He knows that he is on a very destructive path and he needs to change his ways.

I have asked him to work with the Home Treatment Team to re-establish a plan of treatment. We had a long discussion about his medication. He agreed to stick with Mirtazapine, as any new medication will take longer to take effect. I have asked him to take Mirtazapine 45 mgs, also use Chlorpromazine 25 mgs as required up to six tablets a day to regulate emotional instability.

He will be seen in the clinic after he is discharged from the Home Treatment Team. Thank you.

Yours sincerely

Pp Helen Gaffney
Secretary to:
Dr B Kaur
Consultant Psychiatrist

Copy to: Intensive Home Treatment Team, Charleston Centre, Paisley.

Renfrewshire
Health & Social Care Partnership

Renfrewshire Council

NHS Greater Glasgow and Clyde

Date: 14th June 2017
Date Dictated: 14th June 2017
CHI: 1203893450
Ref: DS / LF

PRIVATE & CONFIDENTIAL
Dr Ragi
Linden Medical Centre
25 Floor Street
Johnstone

Dear Dr Ragi,

RE: James Weir, Flat D, 27 MacDowall Street, Johnstone PA5 8QJ
Date of Birth: 12.03.89 (3450)

Period of IHTT Contact:	25th June 2017 – 10th July 2017
Discharge Diagnosis:	Emotionally unstable personality disorder
Medication on Discharge:	Nil
Follow up:	Mary McKenzie, CPN Dr Kaur Outpatient Clinic

As you are aware via previous correspondence James had presented in crisis with suicidal ideation and multiple psychosocial stressors though no concrete plans. Unfortunately he did not engage particularly well with the Intensive Home Treatment Team; he would agree to attend appointments but then fail to do so and on our last face to face contact with him on 10th July 2017 he said he would attend the Charleston Centre for further review and transfer of care. Once again he did not attend and it was therefore agreed that he could be discharged from the IHTT with follow up from his normal care team as detailed above.

Should you require any further information please do not hesitate to contact the team on the telephone number below.

Yours sincerely

Donna Stewart
Senior Intensive Home Treatment Practitioner
Intensive Home Treatment Team

Cc Dr Kaur / M McKenzie, RCMHT, Mile End Mill

Ref: BK/HG
CHI: 120 389 3450

Date: 13 July 2017

PRIVATE & CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
Johnstone,
Renfrewshire
PA5 8QJ

Dear Mr. Weir

A follow up appointment has been made for you to be seen as follows:

Date:	**Monday 31st July 2017**
Time:	**11.00am**
Appointment with:	**Dr B Kaur**
Location:	**Mile End Mill**

If this appointment is not suitable, please telephone the above number so alternative arrangements can be made.

Yours sincerely

Medical Secretary



ACUTE ADMISSION UNIT
DYKEBAR HOSPITAL

NHS Greater Glasgow and Clyde

COMMUNICATION WITH GP/REFERRER FOLLOWING EMERGENCY ASSESSMENT

ENSURE FULL COMPLETION INCLUDING DEMOGRAPHICS ON PAGE TWO (ONLY PAGE ONE TO BE FAXED)

PATIENT INITIALS	JW	POST CODE	PA5 8QJ
CHI	1203893450		
GP NAME	Dr Ragi	PRACTICE CODE	
GP SURGERY	Quarryside Medical Practice		

PATIENT KNOWN TO PSYCHIATRIC SERVICES YES ☑ NO ☐
IF YES: KNOWN TO:-Dr Kaur CPN Mary McKenzie

SOURCE OF THIS REFERRAL

GP /**A&E** /FIRST /NHS24 /NHS24 GP /REMS /CMHT /CPN /POLICE /SW /PSYCHOLOGY/SELF

OTHER : SPECIFY-

REASON GIVEN FOR REFERRAL

Brought to A&E by police as feeling mentally unwell-asking for help

PRESENTING PROBLEM

Multiple current stressors-recent argument with sister
-CPN off sick
-Drug dealing neighbours
-Sexually assaulted (perpetrator recently released from prison)
Feels unable to sleep this week
Wants a change in medications

MENTAL STATE

-angry but good rapport established
-no psychotic features - no suicidal ideation
-feels abandoned by services and that no one is helping him

ASSESSMENT OUTCOME (Medication/Referrals/IHTT/Admission etc)

-referred to RAMH First Crisis for daily support
-crisis numbers given
-5mg Diazepam NOCTE prescribed for 3 nights to help with sleep (dispensed by A&E)
-I will phone Dr Kaur tomorrow and ask for an urgent appointment.

ADMITTED YES ☐ NO ☑	HOSPITAL		WARD	
TIME OF ADMISSION			

ACCEPTED FOR HOME TREATMENT YES ☐ NO ☑

REFERRED FOR/TO - APC/ OUT PATIENT APPT/**CMHT**/SOCIAL WORK/POLICE
OTHER- SPECIFY:-RAMH First Crisis

ASSESSORS SIGNATURE		ASSESSORS SIGNATURE	
PRINT NAME	Maytal Wolfe	PRINT NAME	Eddie McGhee
DESIGNATION	CT3 Psychiatry	DESIGNATION	Senior IHT Practitioner

DATE	22/06/17	TIME COMPLETED	18:30

FAXED TO:			
FAXED BY			
DATE		TIME	

ACUTE ADMISSION UNIT
DYKEBAR HOSPITAL

Patient Surname			Weir						
Forename			James						
Address									
Flat D									
27 MacDowall Street									
Town			Johnstone						
Post Code	P	A	5			8	Q	J	

THE ABOVE MUST BE COMPLETED TO ENSURE COMPLIANCE WITH MEDICAL RECORDS INFORMATION

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Service Users Name: JAMES WEIR	Chi No / DoB: 120389-3450	PIMS No:
Legal Status: Informal ☒ Detained ☐ Community Order ☐	Ward / Dept / CMHT:	

Context of Assessment

On admission ☐ Engagement with Crisis Services ☒ MDT / C.P.A. review: ☐
Annual review: ☐ Significant change in presentation / circumstances: ☐ Other ☐ specify

Sources of Information

Service user ☒ Carer ☐ Consultant ☐ Other Dr. ☐ Occupational Therapy ☐
Named Nurse ☐ Social Work ☐ Psychology ☐ CPN ☐ Voluntary agency worker ☐
Pharmacy ☐ GP ☐ Support worker ☐ Other ☒ specify

Guidance

This screening form should be completed as fully as possible. It is a clinical judgement when this should take place however as a general guide this may be on admission to hospital or at the point of engagement with secondary mental health services. Thereafter it should be reviewed on a regular basis as pre-determined by the clinical team or as significant changes in circumstances or clinical presentation dictate. It is expected that reviews would routinely take place at multidisciplinary meetings, the point of transition from one aspect of service to another, as part of a planned annual review, at the point of CPA review, at the point of engagement with Crisis Services. In relation to admissions to hospital, the initial screening and formulation of risk should be reviewed at the next multi-disciplinary team meeting.

- Dependant on the information collected consideration should be given to carrying out a more detailed, specific risk assessment e.g. suicide risk assessment.
- This document should form an integral part of a comprehensive mental health assessment and care planning process, and the factors listed are not necessarily in any ranked order.
- This does not attempt to be an exhaustive list of safety issues or risk factors, merely an initial guide informing clinical management.
- The expectation that all safety risks can be predicted is unrealistic, and initial assessment may be based on incomplete information.
- If completed by one person (eg. out of hours), this assessment should be discussed as soon as is practicable with the Consultant and multi-disciplinary team (including users and carers where appropriate).
- The assessment should include the service user and carer perspective of risk.
- The assessment must take account of parenting responsibilities and contact with children.
- Please refer to the Clinical Risk Screening & Management Policy for guidance.

Screening completed by

Print name: EDWARD MCGEE	Signature:
Designation: IHTT	Date & Time

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Suicide &/or Self Harm			Violence			Other Risk Factors		
History and Situational Factors								
S1	Mental illness diagnosed or diagnosis uncertain	☒	V1	Previous violent acts	☐	O1	Vulnerable due to learning disability, cognitive impairment or mental illness	☐
S2	Use of violent methods	☒	V2	Use of weapons	☐	O2	History of stalking others	☐
S3	Previous self-harm	☒	V3	Previous admission to secure units	☐	O3	History of social, financial or sexual exploitation of others	☐
S4	Socially isolated	☐	V4	Convictions for violence / assault	☐	O4	History of falls	☐
S5	Past diagnosis of personality disorder,	☐	V5	Past diagnosis personality disorder or psychopathy	☒	O5	History of self-neglect,	☐
S6.	Major physical illness	☐	V6	Alcohol or drug misuse	☒	O6	Lacks basic housing amenities	☐
S7.	Alcohol/drug misuse	☒	V7	Male under 35	☒	O7	Previous fire setting	☐
S8.	Family history of suicide	☐	V8	Prior supervision failure	☐	O8	Socially or culturally isolated	☐
S9.	Previous treatment non-compliance	☒	V9	Previous treatment non-compliance	☒	O9	Neglect- children or other dependents	☐
S10	Impulsivity	☐	V10	Impulsivity	☐	O10	History of exploitation by others	☐
Short Term or Precipitating Factors								
S11	Planning suicide	☐	V11	Intoxicated	☐	O11	Difficulty communicating needs/views/comprehension difficulties	☐
S12	Access to lethal method	☐	V12	Acute psychosis	☐	O12	Confusion or disorientation	☐
S13	Hopeless / helpless	☒	V13	Violent fantasies	☐	O13.	Sexually disinhibited or aggressive	☐
S14	Recent major loss	☐	V14	Identified target	☐	O14	Significant financial problems	☐
S15	Recent psych hospital discharge	☐	V15	Access to weapons	☐	O15	Current self-neglect	☐
S16	Current or recent treatment non-compliance	☒	V16	Current or recent treatment non-compliance	☐	O16	Current neglect of children or other dependents	☐
Protective Factors								
S17	Willing to respond to advice/carers	☒	V17	Willing to respond to advice	☒	O17	Willing to respond to advice/carers	☐
S18	Has close relationship	☒	V18	Appropriate services available	☐	O18	Appropriate services available	☐
S19	Religious beliefs	☐						

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Please write N/A if no risks identified or no risk management actions required.

Management plan	Action by:
Suicide/Self Harm HISTORY OF PARASUICIDE ATTEMPTS FIRE SETTING, HANGING,DSH CUTTING. VAGUE SUICIDAL THOUGHTS TODAY,,,,DISTRESSED BY GP,,,NOT LISTENING TO HIM,,,,IN KEEPING WITH DIAGNOSIS OF EUPD. NOT ACTIVELY SUICIDAL AND CONTACTED TO SAFETY,,,FUTURE FOCUSSED GOMIN ON HOLIDAY IN 3 WEEKS….ANTICIPATING SAME. WANTS SOMEONE TO LISTEN TO HIM. RUMINATING ON SEXUAL ABUSE BEING LET DOWN BY SERVICES AND JUSTICE SYSTEM. AGREEABLE TO NIGHT SEDATION PRESCRIPTION AND SEEING GP TOMORROW. PLAN TO LIAISE WITH OUTPATIENTS DR KAUR RE APPT AND NETWORK SERVICES REFERRAL MADE BY CPN.	
Violence	
Other Risk Factors HISTORY OF ALCOHOL BINGE….PAST AND PRESENT SMOKES CANNABIS AND TOOK COCAINE 2 NIGHTS AGO.	

Outcome of screening/management plan discussed with

Service User ☒	Carer ☐	Consultant ☐	Other Dr. ☐
CPN ☐	Ward Nurse ☐	Social Work ☐	Occupational Therapy ☐
Psychology ☐	Pharmacy ☐	Other ☒ specify	

Management Plan completed by

Print name: EMCGEE	Signature:
Designation: IHTT	Date & Time 22/06.17

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Service Users Name: James Weir	Chi No / DoB: 1203893450	PIMS No:
Legal Status: Informal ☒ Detained ☐ Community Order ☐	Ward / Dept / CMHT: IHTT	

Context of Assessment

On admission ☐	Engagement with Crisis Services ☐	MDT / C.P.A. review: ☐
Annual review: ☐	Significant change in presentation / circumstances: ☐	Other ☒ specify

Sources of Information

Service user ☐	Carer ☒	Consultant ☐	Other Dr. ☐	Occupational Therapy ☐
Named Nurse ☐	Social Work ☐	Psychology ☐	CPN ☐	Voluntary agency worker ☐
Pharmacy ☐	GP ☐	Support worker ☐	Other ☐ specify	

Guidance

This screening form should be completed as fully as possible. It is a clinical judgement when this should take place however as a general guide this may be on admission to hospital or at the point of engagement with secondary mental health services. Thereafter it should be reviewed on a regular basis as pre-determined by the clinical team or as significant changes in circumstances or clinical presentation dictate. It is expected that reviews would routinely take place at multidisciplinary meetings, the point of transition from one aspect of service to another, as part of a planned annual review, at the point of CPA review, at the point of engagement with Crisis Services. In relation to admissions to hospital, the initial screening and formulation of risk should be reviewed at the next multi-disciplinary team meeting.

- Dependant on the information collected consideration should be given to carrying out a more detailed, specific risk assessment e.g. suicide risk assessment.
- This document should form an integral part of a comprehensive mental health assessment and care planning process, and the factors listed are not necessarily in any ranked order.
- This does not attempt to be an exhaustive list of safety issues or risk factors, merely an initial guide informing clinical management.
- The expectation that all safety risks can be predicted is unrealistic, and initial assessment may be based on incomplete information.
- If completed by one person (eg. out of hours), this assessment should be discussed as soon as is practicable with the Consultant and multi-disciplinary team (including users and carers where appropriate).
- The assessment should include the service user and carer perspective of risk.
- The assessment must take account of parenting responsibilities and contact with children.
- Please refer to the Clinical Risk Screening & Management Policy for guidance.

Screening completed by

Print name: Paul Phillips	Signature:
Designation: Senior Practitioner	Date & Time 13/03/17 19:00

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Suicide &/or Self Harm			Violence			Other Risk Factors		
History and Situational Factors								
S1	Mental illness diagnosed or diagnosis uncertain	☒	V1	Previous violent acts	☐	O1	Vulnerable due to learning disability, cognitive impairment or mental illness	☐
S2	Use of violent methods	☐	V2	Use of weapons	☐	O2	History of stalking others	☐
S3	Previous self-harm	☐	V3	Previous admission to secure units	☐	O3	History of social, financial or sexual exploitation of others	☐
S4	Socially isolated	☒	V4	Convictions for violence / assault	☐	O4	History of falls	☐
S5	Past diagnosis of personality disorder,	☐	V5	Past diagnosis personality disorder or psychopathy	☐	O5	History of self-neglect,	☐
S6.	Major physical illness	☐	V6	Alcohol or drug misuse	☐	O6	Lacks basic housing amenities	☐
S7.	Alcohol/drug misuse	☒	V7	Male under 35	☐	O7	Previous fire setting	☐
S8.	Family history of suicide	☐	V8	Prior supervision failure	☐	O8	Socially or culturally isolated	☐
S9.	Previous treatment non-compliance	☒	V9	Previous treatment non-compliance	☐	O9	Neglect- children or other dependents	☐
S10	Impulsivity	☐	V10	Impulsivity	☐	O10	History of exploitation by others	☐
Short Term or Precipitating Factors								
S11	Planning suicide	☐	V11	Intoxicated	☐	O11	Difficulty communicating needs/views/comprehension difficulties	☐
S12	Access to lethal method	☐	V12	Acute psychosis	☐	O12	Confusion or disorientation	☐
S13	Hopeless / helpless	☐	V13	Violent fantasies	☐	O13.	Sexually disinhibited or aggressive	☐
S14	Recent major loss	☐	V14	Identified target	☐	O14	Significant financial problems	☒
S15	Recent psych hospital discharge	☐	V15	Access to weapons	☐	O15	Current self-neglect	☐
S16	Current or recent treatment non-compliance	☒	V16	Current or recent treatment non-compliance	☐	O16	Current neglect of children or other dependents	☐
Protective Factors								
S17	Willing to respond to advice/carers	☒	V17	Willing to respond to advice	☒	O17	Willing to respond to advice/carers	☒
S18	Has close relationship	☒	V18	Appropriate services available	☒	O18	Appropriate services available	☒
S19	Religious beliefs	☐						

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Please write N/A if no risks identified or no risk management actions required.

Management plan	Action by:
Suicide/Self Harm Not suicidal at point of assessment Agreed to maintain his own safety whilst awaiting follow up from addiction service. Advise CPN of contact 14/03/17	All involved
Violence	
Other Risk Factors Will attend Charleston Centre 14/03/17 to collect a food voucher	All involved

Outcome of screening/management plan discussed with

Service User ☐	Carer ☐	Consultant ☐	Other Dr. ☒
CPN ☐	Ward Nurse ☐	Social Work ☐	Occupational Therapy ☐
Psychology ☐	Pharmacy ☐	Other ☐ specify	

Management Plan completed by

Print name: Paul Phillips	Signature:
Designation: Senior Practitioner	Date & Time 13/03/17 19:05

Mental Health Partnership
Clinical Risk Screening and Management Tool

NHS Greater Glasgow and Clyde

Date	Review of Identified or New Risks	Review of Mangement Plan	Setting e.g. MDT	Completed by
22/06/17	James contacted the duty hub raising concerns about his own safety and the safety of others. James reported he had plans to kill himself by either using knifes in his kitchen or by wrapping a bin liner round this throat. Following this he stated he was going to kill the man who he states raped him 8 years ago and appeared to know this mans address. Hostile and aggressive in tone and manner. Difficult for writer to attempt to de-escalate. [redacted] James called again stating he was on a bus however would not give details of what bus or where he was going which raised more concerns. [redacted]	[redacted] James was picked up by police and taken to a place of safety, RAH for psychiatric assessment. Awaiting outcome. Staff to ahere to lone working policy at all times and strong consideration for 2x members of staff. James to be reminded of zero tollerance for aggression towards staff and others. [redacted]	Duty Hub	Amy Hamilton CPN



ACUTE ADMISSION UNIT
DYKEBAR HOSPITAL

NHS Greater Glasgow and Clyde

COMMUNICATION WITH GP/REFERRER FOLLOWING EMERGENCY ASSESSMENT

PATIENT INITIALS	JW	POST CODE	PA5 8QJ
CHI	120383 9345		
GP NAME	DR RAGI	PRACTICE CODE	
GP SURGERY	QUARRYSIDE MEDICAL PRACTICE, JOHNSTONE		
PATIENT KNOWN TO PSYCHIATRIC SERVICES	YES ☑ NO ☐		
IF YES: KNOWN TO:-	DR KAUR – CONSULTANT PSYCHIATRIST		

SOURCE OF THIS REFERRAL

GP /A&E/FIRST /NHS24 /NHS24 GP /REMS /CMHT /CPN /POLICE /SW /PSYCHOLOGY/SELF

OTHER : SPECIFY-

REASON GIVEN FOR REFERRAL

BROUGHT TO A+E BY POLICE AS FEELING MENTALLY UNWELL – ASKING FOR HELP.

PRESENTING PROBLEM

MULTIPLE CURRENT STRESSORS – RECENT ARGUMENT WITH SISTER
– CPN OFF SICK
– DRUG-DEALING NEIGHBOURS
– ~~LONER~~ SEXUALLY ASSAULTED (PERPETRATOR RECENTLY RELEASED FROM PRISON)

FEELS UNABLE TO SLEEP THIS WEEK.
WANTS A CHANGE IN MEDICATIONS

MENTAL STATE

- ANGRY BUT GOOD RAPPORT ESTABLISHED.
- NO PSYCHOTIC FEATURES. NO SUICIDAL IDEATION.
- FEELS ABANDONED BY SERVICES AND THAT NO ONE IS HELPING HIM.

ASSESSMENT OUTCOME (Medication/Referrals/IHTT/Admission etc)

- REFERRED TO RAMH FIRST CRISIS FOR DAILY SUPPORT.
- CRISIS PHONE NUMBERS GIVEN
- 5mg DIAZEPAM NOCTE PRESCRIBED FOR 3 NIGHTS TO HELP WITH SLEEP (DISPENSED BY A+E)
- I WILL PHONE DR KAUR TOMORROW AND ASK FOR URGENT APPOINTMENT.

ADMITTED YES ☐ NO ☑	HOSPITAL		WARD
TIME OF ADMISSION			
ACCEPTED FOR HOME TREATMENT YES ☐ NO ☑			
REFERRED FOR/TO - APC/ OUT PATIENT APPT/CMHT/SOCIAL WORK/POLICE			
OTHER- SPECIFY:-	RAMH FIRST CRISIS		

ASSESSORS SIGNATURE		ASSESSORS SIGNATURE	
PRINT NAME	MAYTAL WOLFE	PRINT NAME	
DESIGNATION	CT3 PSYCHIATRY	DESIGNATION	

DATE	22/06/17	TIME COMPLETED	1830

FAXED TO:	01505800997
FAXED BY	
DATE	26/06/17 TIME 1045

ACUTE ADMISSION UNIT
DYKEBAR HOSPITAL

NHS Greater Glasgow and Clyde

COMMUNICATION WITH GP/REFERRER FOLLOWING EMERGENCY ASSESSMENT

ENSURE FULL COMPLETION INCLUDING DEMOGRAPHICS ON PAGE TWO (ONLY PAGE ONE TO BE FAXED)

PATIENT INITIALS	J W.	POST CODE	PA3 [redacted]
CHI	1 2 0 3 8 9 3 4 [redacted]		
GP NAME	Dr. SHOBAT	PRACTICE CODE	
GP SURGERY	QUARRYSIDE MP		

PATIENT KNOWN TO PSYCHIATRIC SERVICES YES ☐ NO ☑

IF YES: KNOWN TO:-

SOURCE OF THIS REFERRAL

GP /A&E /FIRST /NHS24 /NHS24 GP /REMS /CMHT /CPN /POLICE /SW /PSYCHOLOGY/SELF

OTHER : SPECIFY-

REASON GIVEN FOR REFERRAL

Suicidal Ideas.

PRESENTING PROBLEM

- Reported Suicidal Ideas to Social Care Staff hence referred a Crisis Team.

MENTAL STATE

- No evidence of depressive features.
- Suicidal Ideation with no plan or intent in context of Alcohol Binge and Self Harming this Morning. Yesterday AM reports disappointed at not being received crisis team.

ASSESSMENT OUTCOME (Medication/Referrals/IHTT/Admission etc)

- CPN to be contacted re APC. Staff + Carers.
- Focus Voice message to row via Clerks
- Aware of crisis numbers.

ADMITTED YES ☐ NO ☑ HOSPITAL WARD

TIME OF ADMISSION

ACCEPTED FOR HOME TREATMENT YES ☐ NO ☑

REFERRED FOR/TO - APC/ OUT PATIENT APPT/CMHT/SOCIAL WORK/POLICE

OTHER- SPECIFY:-

ASSESSORS SIGNATURE	K DOCK	ASSESSORS SIGNATURE	P PHILLIPS.
PRINT NAME	K DOCK	PRINT NAME	
DESIGNATION	S. NURSE	DESIGNATION	

DATE 14/03/17 TIME COMPLETED 19:10

FAXED TO: 01505 [redacted]

FAXED BY

DATE 14/03/17 TIME 01:10

ADULT EMERGENCY ASSESSMENT & ADMISSION FORM

Date Assessed:	1	3	0	3	1	7	Time of Assessment: (24 Hour Clock)	1	7	5	0

Personal Details				
Surname	Weir	CHI Number	1203893450	
Forename & Initial	James	Marital Status	Single	
Previous Name(s)		Legal Status	Inf	Review Date: / /
Date of Birth	12.03.89	Advanced Statement	Yes ☐ No	
Address	27d McDowall Street	Named Person	Nil	
	Johnstone	CPA	Yes ☐ No ☑	
Post Code	PA5 8QJ	Religion		
Telephone No.		Present Occupation		
Mobile No.	07804 985 347	Interpreter Required	Yes ☐ No ☑	
		ADULT AT RISK AP1	Yes ☐ No	
Risk to Staff: states he has a 10 inch kitchen knife that he sleeps with for protection in case of a break in.				
Next of Kin	Refused to give NOK	Resides with	Lives alone	
Relationship		Relationship		
Address		Tel No.		
		Consent to Involve	Yes ☐ No ☐	
Post Code		**Dependants: Names**		**DOB**
Telephone No.		Nil		
Mobile No.				
Consent to Involve	Yes No			
Height	5ft 9”	Hair Colour	Short, brown	
Weight	10st	Eye Colour	Blue	
Build	Slim	Distinguishing Marks	Tattoos neck (J)	
Sex	Male ☑ Female	General Appearance	Tall and slim	
Allergies	NKDA	Driving	Yes No ☑	

REFERRED BY (Name) :- Heather Pearsall												
& AGENCY/DESIGNATION :- Johnstone Social Work												
CONTACT No.-												

ASSESSMENT LOCATION: GLENIFFER UNIT, DYKEBAR

ASSESSMENT OUTCOME		
ADMISSION YES ☐ NO ☑		CMHT YES ☐ NO ☐
HOSPITAL	WARD	OUT PATIENT REQUEST YES ☐ NO ☐
		IHTT YES NO ☑
ANY OTHER INFORMATION:		

ASSESSED BY -			
NAME	Kenny Dock, Snr IHTT Practitioner	NAME	Paul Phillips, Snr IHTT Practitioner

Existing Services involved in care (next appointment due)	
GP: Dr Shadbolt Quarryside MP, Johnstone	Psychiatric Consultant: Dr Kaur
	RCMHT
Telephone No:	Telephone No:
Social Worker:	CPN: Mary McKenzie, RCMHT
Telephone No:	Telephone No: 849 2200
Other: Torley Unit, Dykebar Hospital	Other:
8 months ago (last appt)	
Telephone No:	Telephone No:

PRESENTING PROBLEMS AND ASSESSMENT OF RISK
(as expressed by client/carer and assessor):

28 year old male, referred to IHTT today by Social Worker Heather Percell. Went to Social Work for a crisis loan and told them he was suicidal.

States brother and friends were at his home last night. States he believe he was "spiked" last night. Wallet, keys stolen allegedly. Went to Barrhead for a drink yesterday, went to nephew's party in Johnstone also. Was under the influence of alcohol. Can't remember getting home. Had to make an apology to sister as he told her he wished she was dead. Sister has told him to get off drink and drugs. No evidence of deteriorating mood, psychosis prior to yesterdays events.

Was refused a crisis loan today and felt this was really unfair. He responded by telling staff he was going to kill himself.

Went to Social Work to get a food parcel. States to Social Worker he had a hard time thinking about previous sexual abuse. States he has thoughts to kill previous abuser. No plans to do so. Police aware of allegations as this went to court about a year ago.

Nil deterioration, concentration "all normal", until events last night and yesterday. "Drinking session".

PREVIOUS MENTAL ILLNESS EPISODES (including history of engagement, dates of hospital admissions, detentions, past medications, history of risk eg. Suicide attempts/DSH):

History of deliberate self harm – cutting arms and chest with Stanley knife. Has scarring.
Attempted to set self of fire 2 years ago.
Attempted to hang self 18 months ago.
Reports numerous attendance at Dykebar in the past.
Sertraline prescribed by GP "for years".

One week admission to South Ward (September 2016)
Claimed to be suicidal today.

CURRENT HEALTH ISSUES/MEDICAL HISTORY (including any disabilities, smoking status, investigations)

Nil.

MEDICINES RECONCILIATION

Source (please tick all used)

Patient	Relative/ Carer	Patient order slip	GP ref letter/ print out	GP ECS	GP phone call	Patient's own drugs	Other

Admission Medicines			Plan for medicines (Dr must complete)				Comments
Name	**Dose**	**Freq**	**Continue**	**Amend**	**Suspend**	**Stop**	**Reason for alteration/other comments**
Mirtazapine	15mg	Stopped					Stopped a few months ago (he was on it for a couple of weeks)

Pharmacy comments:

FAMILY HISTORY (including family, education, occupation, parental/siblings relationships, childhood trauma):	
Mother	Mary Weir, lives in Ferguslie. Haven't spoken in years. Apparently tells him to "go away".
Father	Parents separated when he was young. Dad in prison. No contact.
Siblings	Has siblings – no contact. Sister, Debbie – [redacted]
Children	Nil.
Family Psychiatric History	None known.

PERSONAL HISTORY	
Birth / Childhood	Born in Paisley. Brought up in care from age 13 – children's home. Physically abused by his gran.
School / Education	Attended school in Paisley. Left school aged 15.
Primary/ Secondary Qualifications	Cannot remember.
Occupations	Various jobs.
Relationships (including psycho sexual)	Nil.
Premorbid Personality	Not known at present.

SOCIAL CIRCUMSTANCES

ACCOMMODATION and FINANCES:

ESA and PIP benefits. Rent paid for.
Council flat. Drug dealers in close.
Has debts, reports having financial debt, no drug dealers debts.

OCCUPATIONAL and DAYTIME ACTIVITIES:

Not much, smokes cannabis, last on Saturday.

PERSONAL CARE and DAILY LIVING SKILLS:

No issues with daily living skills.

CHILD WELFARE (including Child Protection issues – physical injury, emotional abuse, sexual abuse, neglect**):**

Nil.

RELATIONSHIP WITH OTHERS (including current support mechanisms & effect of presenting problems on relationships**):**

Reports friends are all involved in drugs. Spoke of his sister being helpful and encouraging.

ALCOHOL and ILLICIT DRUG USE (current and past, previous detox programmes/seizures, Methadone, IV use, cigarette smoking, misuse of prescribed medications)

Wants to stop smoking due to health in future.
Drinks too much. Drinks every day.
Uses cannabis every day. 3.5g cannabis over 2 days £35. Tried heroin once.
Smokes cigarettes.

FORENSIC HISTORY (past and present)

Sleeps in his house with a 10 inch meat knife for protection from past sexual abuser.
Worried he may come to his home.
Prison sentence 5 ½ months shoplifting / housebreaking aged 19.
Nil homicidal thoughts.
No ongoing charges.

MENTAL STATE EXAMINATION

APPEARANCE & BEHAVIOUR:

New Nike jacket, kempt, well presented, wearing up to date rangers top.

MOOD & AFFECT (Objective & Subjective):

Subjectively – "alright, just feel like an idiot".
Objectively – Affect reactive, frustrated with his behaviours yesterday – "drinking binge".

SPEECH & THOUGHT FORM:

Normal rate, rhythm and tone.

THOUGHT / CONTENT

Wants help with alcohol.
Wants to deal with childhood sexual abuse. Agrees to consider this with CPN.

PERCEPTUAL ABNORMALITIES:

Nil – denies any.

COGNITION:

Orientated, no obvious issues.

INSIGHT:

Poor.

INFORMATION GAINED FROM OTHER SOURCES (collaborative information):

Social Work on referral.
Dishcarge letter from Stuart Gibson.

CLIENTS EXPECTATION OF REFERRAL/SERVICE (recovery focused):

Not sure, just wants help.
Wants to get help with alcohol.

CARER'S EXPRESSED NEEDS and EXPECTATIONS OF REFERRAL/SERVICE:

Attempted to call sister Debbie – no answer.

ADULT EMERGENCY ASSESSMENT
DYKEBAR HOSPITAL

SUMMARY (including impression, identified strengths and risks):
28 year old male with diagnosis of EUPD. Referred today secondary to Social Work appointment where he attended for crisis loan. Was refused so said he was suicidal. Had no money as he spent money on drinking binge yesterday. Feels made a "clown" of himself.
RELEVANT STRESSORS:
Lack of finances. Guilt regarding his drink binge yesterday.
PROTECTIVE FACTORS:
Wants help. Wants to get "off the drink".
PLAN:
? CPN to arrange medical review. Contact CPN – Mary McKenzie tomorrow. Appointment to be made to Torley Unit – agreed to this. Will attend Charleston Centre for a food voucher.
DISCUSSED WITH: Dr L Wilson, On Call Spr
Assessors signatures:
PRINT& DESIGNATION

1: Kenny Dock Senior IHTT Practitioner	
2: Paul Philips Senior IHTT Practitioner	

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 1st March 2017
Dictated: 27th February 2017
CHI: 120 389 3450
Ref: MMcK/AAM

Private and Confidential
Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
Renfrewshire
PA5 8QJ

Dear James

Thank you for telephoning to request a further appointment. I would like to offer you a further appointment on **Thursday 9th March 2017** at **1130** within Johnstone Health Centre, 60 Quarry Street, Johnstone.

If this is not suitable please contact me on the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 13th December 2016
Dictated: 5th December 2016
CHI: 120 389 3450
PIMs: 2144714
Ref: MMcK/AAM

Private and Confidential
Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
Renfrewshire
PA5 8QJ

Dear James

I hope all is well with you. I write to apologise for cancelling your appointment on Thursday 1st December 2016. This was due to unforeseen circumstances. I would like to offer you a further appointment for **Thursday 15th December 2016** at **0900** within Johnstone Health Centre.

If this is unsuitable please contact me on the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E C Renwick
Linden Medical Centre
25 Floors Street
Johnstone
PA5 8PZ

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 1st January 2017
Dictated: 21st December 2017
CHI: 120 389 3450
PIMs: 2144714
Ref: MMcK/AAM

Private and Confidential
Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
Renfrewshire
PA5 8QJ

Dear James

I hope all is well with you. I was sorry you were unable to keep my appointment on Thursday 15th December 2016 within Johnstone Health Centre. I would like to offer a further appointment on **Thursday 12th January 2017** at **0900** within **Johnstone Health Centre, Outpatient Department, Johnstone Health Centre, 60 Quarry Street, Johnstone, PA5 8EY.**

If the appointment is unsuitable please contact me at the above number. If you no longer require a CPN appointment then please advise me again at the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E C Renwick
Linden Medical Centre
Floors Street
Johnstone
PA5 8PZ

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 2nd October 2016
Dictated: 2nd October 2016
CHI: 120 389 3450
PIMs: 2144714
Ref: MMcK/AAM

Private and Confidential
Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
Renfrewshire
PA5 8QJ

Dear James

I hope all is well with you. I would like to offer you a further appointment on **Thursday 1st December 2016** at **1000** within **Johnstone Health Centre, Outpatient Department, 60 Quarry Street, Johnstone, PA5 8EY.**

If this is unsuitable please contact me at the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

Cc: Dr E C Renwick
Linden Medical Centre
Floors Street
Johnstone
PA5 8PZ

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 21.10.16
Dictated: -
CHI: 1203893450
PIMs: 2144714
Ref: MMCK/JS

Private and Confidential

James Weir
Flat D
27 MacDowall Street
JOHNSTONE
PA5 8QJ

Dear James,

I hope all is well with you. I would like to offer you an appointment with myself for:

Thursday 27th October 2016 at 10.00am
within Johnstone Health Centre

If this appointment is not suitable please contact me at the above number.

Yours sincerely

Mary McKenzie

Mary McKenzie
Community Psychiatric Nurse

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 9th September 2016
Dictated: 9th September 2016
CHI: 120 389 3450
PIMs: 2144714
Ref: MMcK/AAM

Private and Confidential
Dr E C Renwick
Linden Medical Centre
Floors Street
Johnstone
PA5 8PZ

Dear Dr Renwick

RE: James Weir (DoB : 12/03/1989) Flat D, 27 MacDowall Street, Johnstone, PA5 8QJ

I write to advise that the above named young man was admitted to Turnaround Rehabilitation for a 6 week period. I understand he has been sober since Wednesday prior to this admission this morning.

I have subsequently contacted Paul McGlinchey, Criminal Justice Social Worker, to advise.
I trust you find this satisfactory.

Yours sincerely

Mary Mckenzie

Mary Mckenzie
Community Psychiatric Nurse
Renfrewshire Community Mental Health Team

cc: Dr Stuart Gibson, CT1 in Psychiatry to Dr B Kaur Consultant Psychiatrist
Dr B Kaur, Consultant Psychiatrist, RCMHT
Dr Audrey Hillman, Consultant Psychiatrist, Torley Unit, Dykebar Hospital
Patricia Curran, CPN, " " " "
Paul McGlinchey, Criminal Justice Social Worker

Date: August 19, 2016
Our Ref: PC /SJ/CHI: 120389 3450

Torley Unit
Office – 0141 314 4106
Appointments - 0141 314 4435

Dictated: 18.08.16
Typed: 19.08.16

PRIVATE & CONFIDENTIAL
Dr E C Renwick
Linden Medical Centre
Floors Street
Johnstone
PA5 8PZ

Dear Dr Renwick

James Weir, dob 12.03.89, Flat D, 27 MacDowall Street, JOHNSTONE, PA5 8QJ

Mr Weir had been attending our clinic several times weekly for some counselling and support around his alcohol use. I believe he had an admission to the psychiatric ward last week due to suicidal ideation. I contacted the ward and there appears to be alcohol involved however they have not carried out an alcohol detox which they felt was not required.

He continues to work with our colleagues at RCA Trust and will remain with them in the meantime. We have discharged him from service at this time and I believe he has a follow up appointment with Dr Kaur on the 22.08.16.

Yours sincerely

Patricia Curran
Senior Nurse
Torley Unit

Renfrewshire
Health & Social Care
Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2205

Date: 23rd August 2016
Dictated: 22.08.16
CHI: 12.03.89-3450
PIMS: 2144714
Our Ref: SG/HG

Private & Confidential

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE
PA5 8PZ

Dear Dr Renwick

Re: James Weir, Flat D27 MacDowall Street, Johnstone, Renfrewshire PA5 8QJ
Date of Birth: 12.03.89

I write to advise you that Mr Weir did not attend his clinic appointment on Monday 22nd August 2016) and I have sent him an 'Opt in' letter and hope that he will respond to this. In the meantime I know that he continues to receive support from Patricia Curran, CPN with the Alcohol Problem Clinic, Dykebar Hospital.

Please do not hesitate to contact us if you have any further concerns or questions.

Yours sincerely

Stuart Gibson (Electronically signed)

Dr Stuart Gibson
CT1 in Psychiatry to:
Dr B Kaur
Consultant Psychiatrist

Copy to: Dr Audrey Hillman, Consultant Psychiatrist, Alcohol Problems Clinic, Dykebar Hospital.
Patricia Curran, CPN, " " " " "
Mary McKenzie, CPN, RCMHT.

Renfrewshire
Health & Social Care
Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2205

Date: 5th September 2016
Dictated: 29.08.16
CHI: 12.03.89-3450
PIMS: 2144714
Our Ref: SG/HG

Private & Confidential

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE
PA5 8PZ

Dear Dr Renwick

Name:	James Weir,	**d.o.b.** 12.03.89
Address:	Flat D 27 MacDowall Street, Johnstone PA5 8QJ	
Admitted:	11.08.16	
Discharged:	15.08.16	
Legal status:	Informal	
Type of admission:	Emergency	
Type of discharge:	Planned	
Source of Admission:	Intensive Home Treatment Team	
Reason for Admission:	Suicidal ideation	
Diagnosis:	1. Adjustment Disorder F43.2	
Medication on discharge:	1 Setraline 200 mgs oral once daily 2 Folic Acid 5 mgs oral once daily 3 Chlorpromazine 50 mgs oral three times daily	
Follow-up:	Outpatient follow-up with Dr Gibson, CT1 at Mile End Mill. Input from Mary McKenzie, CPN with RCMHT. Ongoing input from the Alcohol Problems Clinic and from Key Worker Patricia Curran.	

On 11th August 2016, James Weir was brought to A&E by the Police following a request from RAMH. He had phoned them at 08.40am and informed them that he didn't want to be here and reported an intention to cut his wrists with a stanely knife. Upon assessment, he reported that his mood had been worsening since discharge from Dykebar Hospital in June and that he had been experiencing ongoing ruminations regarding his alleged rape, including flashbacks. He reported feeling that his mood had deteriorated since his alleged abuser had been released from custody recently and that he had been increasingly isolated losing contact with some of his family members. He also reported poor appetite and sleep.

James also stated that he had bought a 9 mm gun two weeks ago with the intention of using this on his sexual abuser and his mother, stating that he had "thought about this for years" and felt that his mother wasn't there when he needed her most. Of note, he had also recently broke up with his girlfriend.

James has a history of heavy alcohol intake and is known to the Alcohol Problems Clinic, he reported that up until ten days ago he had been drinking a few bottles of Buckfast daily but had been completely abstinent in the past ten days leading up to admission. He denied any other substance use.

Mental State Examination on admission

James appeared well kempt and casually dressed. He exhibited good eye contact and we established a good rapport. He was quite teary throughout the assessment.

Speech:	Normal in rate, rhythm tone and volume.
Mood and affect:	Objectively tearful, irritable and angry, subjectively "terrible" and "don't want to go on".
Thoughts:	Quite over inclusive at times and pre-occupied by thoughts surrounding childhood abuse and raped when sixteen, continually reflecting on the unfairness of his life situation.
Perception:	Reported pseudo hallucinations of the voice of his perpetrator.
Cognition:	Alert, orientated to time, person and place, although this was not formally assessed.
Insight:	Accepting of hospital treatment with perhaps unrealistic expectations that treatment will resolve him of his social stressors.

Progress on admission

James was informally admitted to South Ward on a constant observation initially. His physical examination, bloods and ECG were all unremarkable. The Police were informed of the alleged fire-arm, which James had admitted to obtaining but James had disclosed that he had disposed of this. He was reviewed by Dr Kaur, Consultant Psychiatrist, who ascertained that he had badly missed his ex partner and felt disgruntled at being discharged so quickly on his previous admission to Leverndale Hospital. He admitted "I will do anything that helps me". He was therefore offered a one-week admission and his Chlorpromazine was increased to 50 mgs t.d.s. During the admission he appeared settled and appropriate on the ward and upon speaking with his ex girlfriend on the phone, who was willing to give him another chance in their relationship, he admitted to feeling much more settled and was determined to go home to address his problems. He was discharged to receive Outpatient follow-up with Dr Gibson and ongoing follow-up from Alcohol Problems Clinic

and Turning Point. Please do not hesitate to contact us if you have any further questions or concerns.

Yours sincerely

Stuart Gibson (Electronically signed)

Dr Stuart Gibson
CT1 in Psychiatry to:
Dr B Kaur
Consultant Psychiatrist

Copy to: Mary McKenzie, CPN, RCMHT.
Dr Audrey Hillman, Consultant Psychiatrist, Torley Unit, Dykebar Hospital
Patricia Curran, CPN, " " " "

Renfrewshire
Health & Social Care
Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2205

Date: 23rd August 2016
Dictated: 22.08.16
CHI: 12.03.89-3450
PIMS: 2144714
Our Ref: SG/HG

Private & Confidential

Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
Renfrewshire
PA5 8QJ

Dear Mr Weir

As you did not attend your appointment today (22nd August 2016) I have not made any further appointments at present but would like to offer you to 'Opt in' for further review.

Please get in back in touch with us if you would like to request a further outpatient appointment on **0141 849 2205.**

If we do not hear from you within the next two weeks we will then close your case to our team and discharge you back to the care of your General Practitioner.

Yours sincerely

Stuart Gibson (Electronically signed)

Dr Stuart Gibson
CT1 in Psychiatry to:
Dr B Kaur
Consultant Psychiatrist

Copy to:

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE
PA5 8PZ

CHI No: **1203893450**
PiMS No: **2144714**

Date: 08 Jun 2026

CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
JOHNSTONE,
PA5 8QJ

Dear Mr. Weir,

A follow up appointment has been made for you to be seen at

Mile End Mill, Unit 2004, Anchor Mills, 12 Seedhill Road, Paisley, PA1 1JS

on:

Date: **Monday 22 August 2016**
Time: **12:00noon**
Consultant: **Dr. Kaur's Team**
Clinic: **Dr Kaur Junior Monday Mile End Mill OPC**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely

Secretary

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2205

Date: 1st July 2016
Dictated: 27th June 2016
CHI: 120 389 3450
PIMs: 2144714
Ref: VN/AAM

Private and Confidential
Dr E C Renwick
Linden Medical Centre
Floors Street
Johnstone
PA5 8PZ

Dear Dr Renwick

RE: Mr James Weir (DOB: 12/03/1989) Flat D, 27 MacDowall Street, Johnstone PA5 8QJ

Admission Date: **17th June 2016**

Discharged Date: **23rd July 2016**

Medication on Discharge: **Folic Acid 5mg daily**
Sertraline 200mg daily
Chlorpromazine 50mg nightly

James had been admitted to hospital following a suicide attempt by drinking petrol and attempting to set fire to his house. He also requires an alcohol detox programme as he has been drinking alcohol heavily on a daily basis and smoking Cannabis regularly. He states he self medicates because of the emotional distress.

James reported struggling with his low mood for almost all of his life, in particularly a couple of weeks prior to admission it was very difficult. He thinks his mood was lower because of memories of his childhood sexual abuse and also he feels he lacks support from his family. James believes that his abuser might be released earlier from prison and might come looking for him. James has experienced a lot of social isolation and anxiety. He admitted that it is very difficult for him to manage his emotions and when he is angry he might actually throw stuff or crash furniture against the walls.

James was diagnosed with ADHD as a child and Social Services were involved. He did not have a good relationship with his mother and thinks that his mother actually prefers his sisters. He was disappointed meeting his dad; especially he found that his father was a sexual predator.

James is a very lonely young man with no friends or a social circle. He meets people just for alcohol and drugs on which he spends the majority of his money because it helps him to 'feel numb'. The only example of positive emotions was the relationship with his girlfriend which is currently over. James could not manage his emotions and took his aggression out towards himself. He is drinking, taking drugs, cutting his wrists and an intention to set himself on fire.

James was initially withdrawn and fails to speak but when he started he was expressing all this bad experience. He was saying that no “one is listening to me” and afterwards started to punch the furniture.

He was started on detox but a few times he was craving for alcohol. Later on James denied any suicidal ideation or thoughts to deliberate self harm. It has been decided to discharge him under the care of Home Treatment with input from the Renfrewshire Community Mental Health Team. These referrals have been done.

If you have any questions or worries please do not hesitate to contact me on the above number as soon as possible.

Many thanks

Yours sincerely

Violetta Nadet (Electronically amended and signed)

Dr Violetta Nadet
Dr CT1 in Psychiatry to:
Dr B Kaur
Consultant Psychiatrist

Copy to: Mary McKenzie, CPN, RCMHT.
Dr Audrey Hillman, Consultant Psychiatrist, Dykebar Hospital.
Intensive Home Treatment Team, Charleston Centre, Paisley.

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2200

Date: 21st July 2016
Dictated:
CHI: 1203893450
PIMs: 2144714
Ref: MMCK/MT

Private and Confidential

James Weir
Flat D
27 MacDowall Street
JOHNSTONE
PA5 8QJ

Dear James,

Following your recent discharge from our Home Treatment colleagues, I would like to offer you an appointment with myself for:

Monday 25th July 2016 at 1.00pm
within Johnstone Health Centre

If this appointment is not suitable please contact me at the above number.

I look forward to meeting you then.

Yours sincerely

Administration

Mary McKenzie, CPN
Renfrewshire Community Mental Health Team

Renfrewshire
Health & Social Care Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2205

Date:	21st July 2016
Dictated:	21.07.16
CHI:	12.03.89-3450
PIMS:	2144714
Our Ref:	BK/HG

Private & Confidential

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE

Dear Dr Renwick

Re: James Weir, 27d MacDowall Street, Johnstone PA5 8QJ
Date of Birth: 12.03.89

James was seen in my Outpatient clinic on 20th July 2016. As you are aware James had a brief hospital admission a few weeks ago. He was discharged from hospital with follow-up from IHTT. His contact with IHTT was sporadic and he missed a few appointments towards last. He has been allocated to a Community Psychiatric Nurse but has not make contact with her yet.

He tells me that things have been difficult in the last few weeks. He went away to Yorkshire to see his family but did not take his tablets with him. He has also been drinking and not taking his tablets frequently.

He finds any news of his abuser quite difficult because this abuser has abused members of his family and many others; it is quite frequent that he hears things about him.

On the positive note, he met RCA Worker and also attended APC yesterday. Despite keen to stop drinking and also quite keen to make some changes in his life, he knows that his situation is very complex and that there are no straight forward answers, although he would hope that there are straight forwards answers.

For today, I have asked him to restart his medication properly and not miss it, stay off alcohol and work with his Community Psychiatric Nurse. I will see her again in six to eight weeks time. Thank you.

Yours sincerely

Dr B Kaur
Consultant Psychiatrist

Copy to: Mary McKenzie, CPN, RCMHT
Dr Audrey Hillman, Consultant Psychiatrist, Dykebar Hospital
Intensive Home Treatment Team, Charleston Centre, Paisley

Renfrewshire
Health & Social Care Partnership

Renfrewshire Council

NHS Greater Glasgow and Clyde

Date: 18th July 2016
Date Dictated: 17th July 2016
CHI: 1203893450
Ref: PP/SC

PRIVATE & CONFIDENTIAL
Dr Renwick
Quarryside Practice
Linden Medical Centre
25 Floors Street
JOHNSTONE

Dear Dr Renwick

Re: James Weir, 27D McDowall Street, Johnstone PA5 8QJ
Date of Birth: 12.03.89 (3450)

Date of I.H.T.T. contact:	23.06.16 to 15.07.16
Discharge Diagnosis:	Adjustment disorder
Medication on Discharge:	Sertraline 200mgs mane Folic acid 5mgs mane Chlorpromazine 50mgs nocte
Follow Up Care:	Dr Kaur, Consultant Psychiatrist, RCMHT Mary McKenzie, CPN, RCMHT

With reference to our letter dated 24.06.16 please be advised the above named gentleman's care has been transferred from Intensive Home Treatment Team to Renfrewshire Community Mental Health Team.

During our time working with Mr Weir his engagement has been sporadic and indeed his last face to face contact was on 08.07.16 when he attended the Charleston Centre. At this appointment he appeared bright and was responding to humour, he was not voicing any suicidal ideas or plans and was future focused with plans to meet up with his ex girlfriend. He had attended the Advocacy service the previous day which he stated he had found helpful and was awaiting a further appointment for the following week. He claimed at this point that he was remaining free from alcohol and illicit drug use and had information on RCA Trust which he stated he would contact them.

Unfortunately he failed to attend his next arranged appointment on 11.07.16 and staff were unable to make contact with him via the telephone. As such as letter was sent to his home address asking him to make contact to opt in for ongoing treatment by 14.07.16. A phone call was received from Mr Weir on that day apologising for not being in contact, claiming this was due to him feeling physically unwell. He did agree to attend the Charleston Centre on 15.07.16 but unfortunately he failed to attend that appointment also and as such as letter has been sent to him advising that he is now discharged from I.H.T.T. caseload back to the care of RCMHT as above. On the letter he was reminded that his next appointment at Dr Kaur's out patient clinic is 21.07.16 at 10.40am in Mile End Mill and we encouraged him to attend this appointment.

Re: James Weir, 27D McDowall Street, Johnstone PA5 8QJ
Date of Birth: 12.03.89 (3450)

Should you require any further information please do not hesitate to contact the team on the number below.

Yours sincerely

Paul Phillips
Senior Intensive Home Treatment Practitioner
Intensive Home Treatment Team

Cc Dr Kaur, Consultant Psychiatrist, RCMHT

Renfrewshire
Health & Social Care Partnership

Date: 15th July 2016
Date Dictated: 15th July 2016
CHI: 1203893450
Ref: PP/SC

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 McDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

As you did not attend for your appointment today, 15.07.16, and have missed several other scheduled appointments with the team, we have now discharged you from the Intensive Home Treatment Team.

As you may be aware you have an appointment with Dr Kaur, Consultant Psychiatrist, at Renfrewshire CMHT, Mile End Mill, Paisley on **21.07.16 at 10.40am**. We would strongly encourage you to attend this appointment and wish you all the best for the future.

Yours sincerely

Paul Phillips
Senior Intensive Home Treatment Practitioner
Intensive Home Treatment Team

Cc Dr Kaur, RCMHT

Renfrewshire
Health & Social Care Partnership

Renfrewshire Council

NHS Greater Glasgow and Clyde

Date: 12th July 2016
Date Dictated: 12th July 2016
CHI: 1203893450
Ref: KD/SC

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D, 27 McDowall Street
JOHNSTONE
PA5 8QJ

Dear Mr Weir

As you are aware you are currently working with Intensive Home Treatment Team although we have not had face to face contact with you since last Friday 08.07.16. We are keen to meet with you and would request that you contact the team on 0141 618 3333 to make an appointment. If we do not hear from you by Thursday 14.07.16 we shall presume you do not require our service and will discharge you back to your usual supports at RCMHT.

Yours sincerely

Kenny Dock
Senior Intensive Home Treatment Practitioner
Intensive Home Treatment Team

Renfrewshire
Health & Social Care
Partnership

Renfrewshire Community Mental Health Team
Mile End Mill
Studio 1001-1011
12 Seedhill Road
PAISLEY
PA1 1JS

Telephone: 0141 849 2205

Date:	14th July 2016
Dictated:	14.07.16
CHI:	12.03.89-3450
PIMS:	2144714
Our Ref:	BK/HG

Private & Confidential

Mr James Weir
Flat D
27 MacDowall Street
JOHNSTONE
PA5 8QJ

Dear Mr Weir

Report to the RCMHT reception on the first floor marked Community Mental Health Services (first door on left-hand side).

You have been referred to the Renfrewshire Outpatient Services by Denise Gallagher.

You have been allocated an appointment on **Thursday 21st July 2016 at 10.40am** at Mile End Mill with Dr Kaur, Consultant Psychiatrist. This appointment is so that an initial assessment can be carried out with you and will take approximately an hour.

Yours sincerely

Helen Gaffney
Secretary to:
Dr B Kaur
Consultant Psychiatrist

Enc: Confidentiality Leaflet

Copy to: **Denise Gallagher, Charge Nurse, South Ward, Dykebar Hospital.**

Dr Renwick
Quarryside Practice
Linden Medical Centre
Floors Street
JOHNSTONE

ADULT EMERGENCY ASSESSMENT & ADMISSION FORM

Date Assessed:	2	3	0	6	1	6	Time of Assessment: (24 Hour Clock)	1	7	4	0

Personal Details				
Surname	Weir	CHI Number	1203893450	
Forename & Initial	James	Marital Status	Single	
Previous Name(s)		Legal Status	Inf	Review Date: / /
Date of Birth	12.03.89	Advanced Statement	Yes ☐ No	
Address	27d McDowall Street	Named Person	Nil	
	Johnstone	CPA	Yes ☐ No ☑	
Post Code	PA5 8QJ	Religion		
Telephone No.		Present Occupation	Unemployed	
Mobile No.	07804 985 347	Interpreter Required	Yes ☐ No ☑	
		ADULT AT RISK AP1	Yes ☐ No ☑	
Risk to Staff: states he has a 10 inch kitchen knife that he sleeps with for protection in case of a break in.				
Next of Kin	None	Resides with	Lives alone	
Relationship		Relationship		
Address		Tel No.		
		Consent to Involve	Yes ☐ No ☐	
Post Code		**Dependants: Names**		**DOB**
Telephone No.		Nil		
Mobile No.				
Consent to Involve	Yes No			
Height		Hair Colour	Short, brown	
Weight		Eye Colour		
Build	Slim	Distinguishing Marks	Tattoos	
Sex	Male ☑ Female	General Appearance	Tall and slim	
Allergies		Driving	Yes No ☑	

REFERRED BY (Name) :- Dr Okuneye												
& AGENCY/DESIGNATION :- Ward 3b, Leverndale Hospital												
CONTACT No.-												
ASSESSMENT LOCATION: LEVERNDALE HOSPITAL												

ASSESSMENT OUTCOME		
ADMISSION YES ☐ NO ☑		CMHT YES ☐ NO ☐
HOSPITAL	WARD	OUT PATIENT REQUEST YES ☐ NO ☐
		IHTT YES ☑ NO ☐
ANY OTHER INFORMATION:		

ASSESSED BY -			
NAME	Brian Gibson	NAME	Steven Watt

Existing Services involved in care (next appointment due)	
GP: Dr Renwick, Linden MC, Johnstone	Psychiatric Consultant:
Telephone No:	Telephone No:
Social Worker:	CPN:
Telephone No:	Telephone No:
Other:	Other:
Telephone No:	Telephone No:

PRESENTING PROBLEMS AND ASSESSMENT OF RISK
(as expressed by client/carer and assessor):

Wants to get better. Taking each day at a time.
Denies any suicidal ideation.

Feels angry about sexual abuse perpetrator being out of prison – seen recently. Feels angry that he was moved hospitals, considering legal action. Feels let down. Triggers to admission – perpetrator of abuse and agitation. Reports sleep as "shite". On Zopiclone in hospital "didn't help". Appetite not good. Concentration "crap".

"Everything's crap just now". Wants home.
Feels "fed up" though not leading to suicidal thoughts but rather related to let down and frustration at perceived poor treatment.

Flashbacks to previous sexual abuse. Nightmares.

Reports feeling low for past 2 years. Worse over past few months.
Recent break up with girlfriend.

Prior to admission had been consuming 2x bottles of Buckfast daily and £20 worth of cannabis per day. Had thoughts and desire to set self on fire. [redacted] Admitted following assessment by GP.

PREVIOUS MENTAL ILLNESS EPISODES (including history of engagement, dates of hospital admissions, detentions, past medications, history of risk eg. Suicide attempts/DSH):

History of deliberate self harm – cutting arms and chest with Stanley knife. Has scarring.
Attempted to set self of fire 2 years ago.
Attempted to hang self 18 months ago.
Reports numerous attendance at Dykebar in the past.
Sertraline prescribed by GP "for years".

CURRENT HEALTH ISSUES/MEDICAL HISTORY (including any disabilities, smoking status, investigations)

Nil.

MEDICINES RECONCILIATION

Source (please tick all used)

Patient	Relative/ Carer	Patient order slip	GP ref letter/ print out	GP ECS	GP phone call	Patient's own drugs	Other

Admission Medicines			Plan for medicines (Dr must complete)				Comments
Name	**Dose**	**Freq**	**Continue**	**Amend**	**Suspend**	**Stop**	**Reason for alteration/other comments**
Folic Acid	5mg	Mane					
Sertraline	200mg	Mane					
Chlorpromazine	50mg	Nocte					

Pharmacy comments:

Nil compliance issues at present. Was utilising Zopiclone and Diazepam during admission however little effect reported.

FAMILY HISTORY (including family, education, occupation, parental/siblings relationships, childhood trauma):	
Mother	Mary Weir, lives in Ferguslie. Haven't spoken in years. Apparently tells him to "go away".
Father	Parents separated when he was young. Dad in prison. No contact.
Siblings	Has siblings – no contact. Sister, Debbie – [redacted]
Children	Nil.
Family Psychiatric History	None known.

PERSONAL HISTORY	
Birth / Childhood	Born in Paisley. Brought up in care from age 13 – children's home. Physically abused by his gran.
School / Education	Attended school in Paisley. Left school aged 15.
Primary/ Secondary Qualifications	Cannot remember.
Occupations	Various jobs.
Relationships (including psycho sexual)	Broke up with partner a few weeks ago.
Premorbid Personality	Not known at present.

SOCIAL CIRCUMSTANCES
ACCOMMODATION and FINANCES:
ESA and PIP benefits. Council flat. Nil issues reported.
OCCUPATIONAL and DAYTIME ACTIVITIES:
Enjoys getting tattoos. Goes for walks and cycling but not recently. Socially isolated of late.
PERSONAL CARE and DAILY LIVING SKILLS:
Basic care reasonable but not to standard in past.
CHILD WELFARE (including Child Protection issues – physical injury, emotional abuse, sexual abuse, neglect**):**
Nil.
RELATIONSHIP WITH OTHERS (including current support mechanisms & effect of presenting problems on relationships**):**
Has no support.
ALCOHOL and ILLICIT DRUG USE (current and past, previous detox programmes/seizures, Methadone, IV use, cigarette smoking, misuse of prescribed medications)
Says no longer using cannabis. Wants to stay away from drugs and obtain drivers licence. 2x bottles of Buckfast daily prior to admission.
FORENSIC HISTORY (past and present)
Sleeps in his house with a 10 inch meat knife for protection from past sexual abuser. Worried he may come to his home. Prison sentence. Nil homicidal thoughts.

MENTAL STATE EXAMINATION
APPEARANCE & BEHAVIOUR:
Casually dressed, reasonably well kempt. Angry about treatment. Non threatening.
MOOD & AFFECT (Objective & Subjective):
Subjectively – "okay". Objectively – reactive, frustrated, angry.
SPEECH & THOUGHT FORM:
Normal rate, tone and volume.
THOUGHT / CONTENT
No formal thought disorder. Frustrated and angry regarding perceived poor treatment from NHS. Seems slightly preoccupied.
PERCEPTUAL ABNORMALITIES:
Nil evident.
COGNITION:
Orientated.
INSIGHT:
Feels he has post traumatic stress disorder. Future focused.
INFORMATION GAINED FROM OTHER SOURCES (collaborative information):
From inpatient staff and medical notes.
CLIENTS EXPECTATION OF REFERRAL/SERVICE (recovery focused):
"Help…deserve it". "Help to move forward and get better". "Get a job one day".
CARER'S EXPRESSED NEEDS and EXPECTATIONS OF REFERRAL/SERVICE:
Has no carer. States no next of kin.

ADULT EMERGENCY ASSESSMENT
DYKEBAR HOSPITAL

SUMMARY (including impression, identified strengths and risks):
27 year old male referred to IHTT for facilitated early discharge. Long history of low mood. Self harm and attempt to hang self 18 months ago. Previous threats to set self on fire. Nil current suicidal ideation, intent or plans. Victim of previous sexual abuse. Perpetrator recently out of prison. Feels angry about this and treatment from NHS.
RELEVANT STRESSORS:
Perpetrator of sexual abuse recently released from prison. Has seen him on occasion.
PROTECTIVE FACTORS:
Future focused. Wants to get better. No ongoing suicidal thoughts. Recent cessation of cannabis and alcohol.
PLAN:
1. IHTT follow up. 2. Appointment at Charleston Centre 24.06.16 at 2pm – joint visit. 3. For medical review in the next week. 4. Ongoing assessment of mental state and risk. 5. Already referred for CMHT follow up.
DISCUSSED WITH:
Assessors signatures:
PRINT& DESIGNATION

1: Brian Gibson	IHTT Senior Practitioner
2: Steven Watt	IHTT Practitioner

Renfrewshire
Health & Social Care Partnership

Renfrewshire Council

NHS Greater Glasgow and Clyde

Date: 24th June 2016
Date Dictated: 23rd June 2016
CHI: 1203893450
Ref: BG / LMcG

PRIVATE & CONFIDENTIAL
Dr Renwick
Quarryside Practice
Linden Medical Centre
25 Floor Street
Johnstone

Dear Dr Renwick,

RE: James Weir, 27d McDowall Street, Johnstone PA5 8QJ
Date of Birth: 12.03.89 (3450)

Please be advised the above named gentleman was referred to the Intensive Home Treatment Team on 23rd June 2016 for facilitation of early discharge from Ward 3b, Leverndale Hospital. As you will be aware Mr Weir was initially admitted due to ongoing suicidal ideation and threats to set himself on fire, triggered by the recent break up of his relationship and discovering that the man who sexually assaulted him in the past was now out of prison.

Mr Weir was assessed by myself and my colleague, Steven Watt, IHTT Practitioner on Ward 3b today. At this time he presented as future focused, reporting to be "taking each day at a time" and denied any current suicidal ideation or thoughts to deliberately harm himself or others. Subjectively he described his mood as okay, objectively he appeared reactive but frustrated and angry though denied any intent to act on same. He remains angry at the release of his abuser and that the man is now living locally, however was clear that he would try not approach him. It is also worth note that Mr Weir is angry with his perceived mistreatment whilst in hospital, due to being moved from South Ward, Dykebar Hospital over to Ward 3b, Leverndale Hospital. He is extremely unhappy with this and plans to seek legal advice. Despite this he remains future focused with plans to seek employment and obtain his drivers licence.

Following assessment it was agreed that Mr Weir should be provided with short term care and support via the IHTT. He will be seen on a daily basis initially and we shall arrange for a medical review with our Consultant Psychiatrist at the earliest available opportunity. He has been provided with crisis numbers and is willing to utilise same if necessary. Please do not hesitate to contact the team on the above telephone number should you have any further queries or concerns regarding this matter.

Yours sincerely

Brian Gibson
Senior Intensive Home Treatment Practitioner
Intensive Home Treatment Team

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: HA/IP/CHI: 1203893450

Date: December 7, 2015

Alcohol Problems Clinic

Office – 0141 314 4106
Appointments - 0141 314 4435

Dictated: 04.12.15
Typed: 07.12.15

PRIVATE & CONFIDENTIAL
Dr. G. Harris,
Quarryside Practice,
Linden Medical Practice,
25 Floors Street,
Johnstone.

Dear Dr. Harris,

James Weir, dob 12.03.89, 27d McDowall Street, Johnstone PA5 8QJ.

Following on from my letter dated November 26, 2015, unfortunately Mr. Weir has failed to engage with our services since Friday, November 27, 2015. No contact has been made.

Following discussion at our multi-disciplinary team meeting on Wednesday, December 2, 2015, it was decided that Mr. Weir would be discharged from our day services.

However if you wish to re-refer him in the future, please do not hesitate to do so.

Yours sincerely,

Hilda Anderson
Staff Nurse
Alcohol Problems Clinic

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: HA/IP/CHI: 1203893450

Date: December 7, 2015

Alcohol Problems Clinic

Office – 0141 314 4106
Appointments - 0141 314 4435

Dictated: 04.12.15
Typed: 07.12.15

PRIVATE & CONFIDENTIAL
Mr. James Weir,
27d McDowall Street,
Johnstone,
PA5 8QJ.

Dear Mr. Weir,

As you are aware, you have disengaged with our services at this time. Following discussion at our multi-disciplinary team meeting on Wednesday, December 2, 2015, it was decided that you would be discharged from our day services.

Yours sincerely,

Hilda Anderson
Staff Nurse
Alcohol Problems Clinic

REFERRAL

What Service/Discipline is referral for:	Community Mental Health Team - West Renfrewshire		
Date Assessed:	13/06/16	Time of Assessment:	

Personal Details			
Surname:	JAMES	CHI Number:	1203893450
Forename:	WEIR	Relationship Status:	SINGLE
Dob:	12/03/89	Sex:	Male
Age:	26	Referral Urgency:	Non-Urgent
E-Mail Address:		Registered GP :	RENWICK EILIECLK
Clients Address:	27D MC DOWALL STREET	Practice Code:	LINDEN MEDICAL PRACTICE
		Client Telephone No:	NONE GIVEN
Post Code:	PA5 8QJ	Client Mobile No:	

Additional Information			
Children:	No	SW Involvement:	No
Legislation:	Informal	Involved Parties:	SW
Risk Factors:	Other (Please state)	Disabilites:	N/a
Assessment Documentation:	**All Referrals must be accompanied by a Glasgow Risk Screen**. Additional information must be completed for the services below; **Service** **Assessment Required** Network Services Network Service Profile Addictions DAST/AUDIT Doing Well PHQ CMHT GAD7		
Consent to Referral:	Patient is aware of referral		
Brief History/Current Issues/Known Forensic History Risks:	James has history of sexual abuse the petrator of abuse has recently been released from prison .James belives he knows where he is staying James has been in care system during his childhood,he has known history of drug and alcohol abuse James ? diagnois of A.D.H.A History of 2 bottles buckfast a day,long term cannabis nmisuse ocassional use of heroin ,cocaine and amphetamines Appears in old letters that he frabicates about his life As talks about his father and mother however S.C.I gateway refferal formNov2015 states they are both dead . James presented to acute admission after he was taken to his G.P by police police had been called to his home police found he had a knife and a can of petrol threatening suicide [redacted] He was detained on E.D.C in hospital but now is informal		

Reason for Referral: James has been under the care of doctor Kaur who has requested a C.P.N and Community consultant referral
During his in patient care James has had sucidal ideation detox regime for alcohol abuse . He feel his problems are emotional related to depression which he feels has not lifted for long peroids of his life James has had a previous admission to St john livingstone trated for depression and drug alcohol misuse James antidepressants were increased frm 100mgs to 150mgs of today .
he has remained on constant observation due to sucidal ideation he has had laces taken off him he has tied together

Referred By:	DENISE GALLAGHER
Location:	SOUTH WARD DYKEBAR
Designation:	CHARGENURSE
Contact Information/Number:	01418103250
Date Referred:	13/06/2016

Email to: healthrecords.dykebarhospital@ggc.scot.nhs.uk

PLEASE NOTE: ALL REFERRALS SUBMITTED WITHOUT THE RELEVANT ASSESSMENT DOCUMENTATION WILL NOT BE PROCESSED!

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: HA/IP/CHI: 1203893450

Date: November 30, 2015

Alcohol Problems Clinic

Office – 0141 314 4106
Appointments - 0141 314 4435

Dictated: 26.11.15
Typed: 30.11.15

PRIVATE & CONFIDENTIAL
Dr. G. Harris,
Quarryside Practice,
Linden Medical Practice,
25 Floors Street,
Johnstone.

Dear Dr. Harris,

James Weir, dob 12.03.89, 27d McDowall Street, Johnstone PA5 8QJ.

Thank you for referring the above gentleman to the Alcohol Problems Clinic. He was seen for assessment on Wednesday, November 25, 2015 where he breathalysed negative for alcohol. He completed the Severity of Alcohol Dependence questionnaire scoring 19 indicating minimal withdrawals. No withdrawals were evident during assessment.

Presenting problem
Mr. Weir reports that he has been abstinent from alcohol for approximately five days. He says he binge drinks sometime three days over seven or two days over seven. He admits drinking three bottles of Buckfast wine. His withdrawals are vomiting, shakes and sweats and he reports seizures. Bloods were obtained for analysis. He reports he uses illicit drugs in the form of cannabis and cocaine which he says he had taken the night before attending the Clinic. A urine was obtained for a full drug screen.

Social history
Mr. Weir was born in Paisley and brought up with his mum and dad. He did not see his dad since he was five years old and his mother drank alcohol. James was taken into care at the age of 13 to 16 years due to his mother's physical abuse. He started working at 16 in Glasgow Airport. He has nine siblings at present and has minimal contact with them all apart from his sister, Debbie.

He is currently living alone. He has a partner, [redacted] He is unemployed at present. I believe during assessment Mr. Weir was providing incoherent and contradictory information which complicated the accuracy of clinical assessment and decision making. He reported his mother presently lives in Ferguslie and his father is serving a ten-year sentence for rape. However according to medical notes, both his parents are deceased.

Dr. Harris re James Weir (1203893450) – 26.11.15

Physical health
Mr. Weir reports that he has no physical ailments at present. His current medication is Acamprosate.

Mental health
Mr. Weir reports on a scale of 0 – 10 (0 being the lowest) his mood as 4. Good eye contact was made throughout assessment. He appeared reactive in speech, however appeared to be suspicious at times. He reported having previous impulsive overdoses due to disclosed sexual abuse aged 17 years. He reports this was from a teacher at St. Andrew's High School who was a befriender for the Social Work Department. He stated that this case was recently in the local paper and the accused is serving two years in prison. However medical notes refer to the man living in Livingstone, West Lothian.

He denies any thoughts of self-harm or suicide at present.

Forensic history
He reports to having no current outstanding charges. However reports to having previous offences in the form of house breaking, resetting and carrying weapons. He admits he served a five and a half months sentence in Greenock Prison approximately six years ago.

Treatment plan
After further discussion with Mr. Weir, it was agreed that he would like to remain abstinent at this time and would like to attend our groupwork programme at the Alcohol Problems Clinic. It was agreed that he would attend the clinic three times weekly to be breathalysed.

Mr. Weir reports that he would like to be considered for Disulfiram treatment, however I feel that, due to his impulsive behaviour in the past, I would need to discuss this further at our weekly M.D.T. meeting on Wednesday, December 2, 2015 with our Consultant, Dr. Hillman.

If you require any further information regarding the above gentleman, please do not hesitate to contact myself on the above number.

Yours sincerely,

Hilda Anderson
Staff Nurse
Alcohol Problems Clinic

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: AH/IP/CHI : 1203893450

Alcohol Problems Clinic

Date: November 20, 2015

Appointments - 0141 314 4435

Dictated: 20.11.15
Typed: 20.11.15

PRIVATE & CONFIDENTIAL
Mr. James Weir,
27d McDowall Street,
Johnstone
PA5 8QJ.

Dear Mr. Weir,

Your GP, Dr. Harris, has referred you to the Alcohol Problems Clinic, Dykebar Hospital or the Alcohol services at the Integrated Alcohol Team.

An assessment appointment has been arranged for you to attend the **Alcohol Problems Clinic at Dykebar Hospital** on :

Wednesday, November 25, 2015 at 9am

I hope this is convenient. If this date is not suitable or you no longer require this appointment please call prior to the appointment to cancel.

If you fail to attend and do not contact the clinic within seven days, no further appointments will be offered.

If in the future you wish a further appointment you would be required to contact your GP or self refer via ASeRT.

We would prefer you did not drive to your appointment – have someone else drive you or use public transport.

Yours sincerely

Isobel Prior

Secretary
APC

c.c. Dr G. Harris, Quarryside Practice, Linden Medical Centre, 25 Floors Street, Johnstone.

Adult Mental Health
Mental Health Directorate
Dykebar Hospital
Grahamston Road
PAISLEY, PA2 7DE

Telephone : 0141-884-5122 (Main Switchboard)
Medical Admin. Fax : 0141-434 4923

Date : 23.11.15
Dictated : 18.11.15
CHI No. : 1203893450
PIMS No : 2144714
Our Ref : JET/AJH
Direct Line : 0141 314 4293

PRIVATE & CONFIDENTIAL

Dr. Renwick
Quarryside Practice
Linden Medical Centre
25 Floor Street
Johnstone
PA5 8PZ

Dear Dr. Renwick,

Re: James Weir, (12.03.89), 27D McDowall Street, Johnstone PA5 8QJ

You had referred Mr. Weir to Outpatient Psychiatry where I saw him on 13.07.15.

He spoke of sexual abuse which had happened for 7 years, ending just 3 years before. He alleges that this was by a Math Teacher at St. Andrew's Academy, who had befriended him through Renfrew Council. He said that this person used alcohol to intoxicate him before he was assaulted. The man has been convicted and is to serve a 2 year sentence.

The main effect that Mr. Weir said that he had from this was that he was having difficulty sleeping.

At that time he was living in his own house. It was a council house which he was doing up. He said that he wanted to work. He'd had his Benefits agreed for a further year, but said that he had difficulties in getting a job because of his criminal record which is for carrying a knife, housebreaking and reset. He had served a 5 ½ month sentence for this.

His parents split up when he was young. His father was in prison serving a 10 year sentence for rape. He said that his father was a constant drug and alcohol abuser and was often violent. His mother is aged 48 and lives in Ferguslie, Paisley. He said that their relationship is non-existent. He didn't describe her as having mental illness or alcohol problems, but his mother had beat e.g. striking him with a cup when 11 years old. He was put in Children's Homes from the age of 14, but kept on running away. He really only has contact with his sister, Debbie, who lives 3 streets away. She works as a carer for Renfrewshire Council..

He tells me that he got Highers and A levels and said that he had Maths, English, Science, History, Modern Studies and P.E. He hasn't worked for 4 years and his last job was in Glasgow Airport.

Re: James Weir, (12.03.89), 27D McDowall Street, Johnstone PA5 8QJ

It was quite clear that he was drinking too much. He described Buckfast and Vodka. He said that he could drink 4 bottles of Buckfast or ½ to 1 bottle of Vodka and not remember what happened the day before. He said that he had lied to Dr. Renwick about his alcohol intake. He continues with Cannabis because he said it makes him feel happy and motivated.

He had worked with Renfrewshire Drugs Service and the APC in the past and was put on Acamprosate. He said that he would think about referral to the Alcohol Problems Clinic and I arranged to meet him again in 5 weeks time. In the meantime, he had an admission to RAH after having collapsed on 11.08.15 having had a possible pseudo seizure. He was seen by the Acute Addiction Liaison Nurse who made arrangements for him to attend the APC in August 2015. He didn't attend and he didn't contact the Services. No further appointment was arranged for him to be seen at the General Psychiatry Clinic.

Yours sincerely,

Dr. J.E. Thomson
Consultant Psychiatrist

Mental Health Directorate
Dykebar Hospital, Grahamston Road, Paisley, Scotland, PA2 7DE
Telephone : 0141-884-5122 (Switchboard) **Medical Admin. Fax : 0141-434 4923**

Dykebar Hospital
Grahamston Road
Paisley
PA2 7DE

Date Dictated: 18th August 2015
Date Typed: 18th August 2015
Our Ref: DJ/SR/1203893450
Fax: 0141 314 4085
Tel: 0141 314 4472

Private & Confidential
Dr Renwick
Quarryside Practice
Linden Medical Centre
25 Floor Street
Johnstone
PA5 8PZ

Dear Dr Renwick

James Weir, DoB: 12.03.1989, 27D McDowall Street, Johnstone, PA5 8QJ

This gentleman was referred to the Addiction Liaison Service having been admitted to the Royal Alexandra Hospital in Paisley on the 11th August 2015 having collapsed and had a possible pseudo seizure.

As I was unable to conduct an assessment during this gentleman's hospital admission, an appointment was arranged for him to attend the Alcohol Problems Clinic on the 18th August 2015. However Mr Weir failed to attend this appointment and he has made no contact with the Clinic.

Yours sincerely

Denise Johnston
Acute Addiction Liaison Nurse

Dykebar Hospital
Grahamston Road
Paisley
PA2 7DE

Date Dictated: 11th August 2015
Date Typed: 12th August 2015
Our Ref: DJ/SR/1203893450
Fax: 0141 314 4085
Tel: 0141 314 4472

Private & Confidential
Mr James Weir
27D McDowell Street
Johnstone
PA5 8QJ

Dear Mr Weir

Due to your recent admission to the Royal Alexandra Hospital in Paisley, you have been referred to the Addiction Liaison Service.

I would be grateful if you would attend an appointment at the Alcohol Problems Clinic at Dykebar Hospital on **Tuesday 18th August 2015 at 10am**.

If you are unable to attend on this date or you require further information regarding this appointment then please do not hesitate to contact me on the telephone number above.

Yours sincerely

Denise Johnston
Acute Addiction Liaison Nurse

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our Ref: NG/SR/1203893450

Alcohol Problems Clinic
Direct - 0141 314 4106
Fax No. 0141 314 4085
Appointments only - 0141 314 4435

Date: 9th March 2015

Dictated: 9th March 2015
Typed: 9th March 2015

PRIVATE & CONFIDENTIAL
Dr Clarke
The Health Centre
20 Duncan Street
Greenock

Dear Dr Clarke

James Weir, DoB: 12.03.1989, Flat D, 27 McDowall Street, Johnstone, PA5 8QJ

This gentleman was referred to the Addiction Liaison Service by our colleagues from the Liaison Psychiatry Team having been admitted to the Royal Alexandra Hospital on the 1st March 2015 experiencing chest pain and abdominal pain.

An appointment was arranged for him to attend at the Alcohol Problems Clinic at Dykebar Hospital on Monday 9th March 2015 at 10.30am. Unfortunately Mr Weir has failed to attend this appointment and has made no contact with the Clinic.

Should he wish to address any issues in the future then please do not hesitate to refer him to the Alcohol Problems Clinic at Dykebar Hospital.

Yours sincerely

Nichole Gallacher
Acute Addiction Liaison Nurse
Telephone 0141 314 4472

Adult Mental Health
Mental Health Directorate
Dykebar Hospital
Grahamston Road
PAISLEY, PA2 7DE

Telephone : 0141-884-5122 (Main Switchboard)
Medical Admin. Fax : 0141 434 4923
Direct Line: 0141 314 4293
Ref: JET/AJH
CHI No: **1203893450**
PiMS No: **2144714**

Date: 08 Jun 2026

CONFIDENTIAL

Mr. James Weir
Flat D,
27 MacDowall Street,
JOHNSTONE,
PA5 8QJ

Dear Mr. Weir,

As you will be aware, you were recently referred to our service for an outpatient consultation by your GP Dr. Renwick at Linden Medical Centre.

Arrangements have been made for you to be seen at

Hollybush Building, Dykebar Outpatient Department

on:

Date: **Monday 13 July 2015**
Time: **2.30 p.m.**
Consultant: **Dr. Thomson**
Clinic: **Dr Thomson Monday Dykebar OPC**

If this appointment is not suitable, please telephone me on the above number so alternative arrangements can be made.

Yours sincerely

Secretary
c.c. Dr. Renwick, Quarryside Practice, Linden MC, 25 Floors St, Johnstone

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ
CHI: 120389 3450
0141 618 2585
14/01/2015

PRIVATE & CONFIDENTIAL
Mr James Weir,
Flat C, 69 Dundonald Road,
Paisley PA3 4NB

Dear Mr Weir

I would like to offer you an appointment to meet with a member of the Integrated Alcohol Team at:

09:30am on Wednesday, 21st January 2015
At 20 Back Sneddon Street, Paisley

Kindly contact me on the above number if this appointment is not suitable.

Yours sincerely

Rena Ballantyne

Admin Support Officer
Integrated Alcohol Team

cc: Dr Hallam, Barony Practice, Northcroft Medical Centre, Northcroft Street, Paisley PA3 4AD

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our Ref: NG/SR/120389

Date: 4th March 2015

Alcohol Problems Clinic
Direct - 0141 314 4106
Fax No. 0141 314 4085
Appointments only - 0141 314 4435

Dictated: 3rd March 2015
Typed: 4th March 2015

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat D
27 McDowall Street
Johnstone
PA5 8QJ

Dear Mr Weir

Due to your recent admission to the Royal Alexandra Hospital in Paisley, you have been referred to the Addiction Liaison Service.

Unfortunately you were discharged prior to being seen by our service, there fore I would like to offer you a follow up appointment to attend at the Alcohol Problems Clinic at Dykebar Hospital on Monday 9th March 2015 at 10.30am.

If you are unable to attend on this date or should you require further information regarding this appointment, then please do not hesitate to contact me on the number below.

Yours sincerely

Nichole Gallacher
Acute Addiction Liaison Nurse
Telephone 0141 314 4472

Cc Dr Foster, The Health Centre, 20 Duncan Street, Greenock, PA15 4LY

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
20 Old Sneddon Street
Paisley
PA3 3DJ
0141 618 2585
CHI: 1203893650
16/09/2014

PRIVATE & CONFIDENTIAL
Mr James Weir
C/O
69C Fitzallan Court
Dundonald Road
Paisley

Offer of Appointment

Dear Mr Weir,

Further to your assessment 15th August 2014 with Dr Duncan and Elaine McLellan, Renfrewshire Drug Services, you have been referred to our service(s).

We have previously offered you two appointments 4th and 15th September but unfortunately that correspondence was sent to another address provided for you.

We have been contacted by Linda Murray, Social Work Services, Renfrew Area Team who informed us of your current homeless status and your present address.

The purpose of our visit is to discuss any service support we can provide.

Can I offer you an appointment at your current home address;

Monday 22nd September 2014 at 1.30p.m.

Kindly contact me on the above number if this appointment is not suitable.

Yours sincerely

Stuart McMillan
Community Addictions Nurse
Integrated Alcohol Team
Renfrewshire Community Health Partnership

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
20 Old Sneddon Street
Paisley
PA3 3DJ
0141 618 2585
CHI: 1203893450
28/08/2014

PRIVATE & CONFIDENTIAL
Mr James Weir
3B Mitchell Avenue,
Renfrew
PA4 8DT

Offer of Appointment

Dear Mr Weir,

Further to your recent assessment 15th August 2014, with Dr Duncan and Elaine McLellan, Renfrwshire Drug Services, you have been referred to our service(s).

Can I offer an appointment at our clinic at the Addiction Services Resource Centre, 20 Back Sneddon Street, Paisley.

Thursday 4th September 2014 at 2.30p.m.

Kindly contact me on the above number if this appointment is not suitable.

Yours sincerely

S. McMillan

Stuart McMillan
Community Addictions Nurse
Integrated Alcohol Team
Renfrewshire Community Health Partnership

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our Ref: DJ/SR/120389

Alcohol Problems Clinic
Direct - 0141 314 4106
Fax No. 0141 314 4085
Appointments only - 0141 314 4435

Date: 22nd August 2014

Dictated: 15th August 2014
Typed: 22nd August 2014

PRIVATE & CONFIDENTIAL
Dr Sunderland
Kings Inch Medical Practice
Renfrew Health Centre
10 Ferry Road
Renfrew
PA4 8RU

Dear Dr Sunderland

James Weir, DoB: 12.03.1989, 3b Mitchell Avenue, Renfrew, PA4 8DT

This gentleman was referred to the Addiction Liaison Service having been admitted to the Royal Alexandra Hospital in Paisley on the 14th August 2014 with alleged alcohol and illicit drug withdrawal.

At assessment Mr Weir initially advised that he consumes 1 bottle of vodka plus 2 – 3 litres of cider on a daily basis and this has been a daily dependence for the last 6 months. Subsequently he also highlighted that he consumes £20 worth of cannabis on a daily basis. For the last 6 months has been utilising 2 – 3 grams of cocaine at weekends only. Also has been injecting £10 - £20 worth of heroin into his right thigh area on a daily basis for the last 6 months. Although on his admission he advised that he has had none these substances since Monday as he was taken into Police custody in relation to a breach of the peace charge been alleged against him.

At assessment there was small withdrawal symptoms evident from Mr Weir in relation to either alcohol or illicit drug withdrawal and in discussing this further with him subjectively his accounts of his alcohol and drug use appeared very variable and I was unable to ascertain specific amounts for each illicit drug and legal drug that he had highlighted that he uses on a daily basis.

He advised that he had previously been referred to the Renfrewshire Drug Service but had failed to attend and gave again variable stories regarding his upbringing and social and domestic situation at this current time. Health promotion was provided to him in relation to alcohol and illicit drug use and the effects this could have on both his physical and mental health status and it was observed and expressed by this gentleman throughout the interview that he required diazepam medication to help him minimise his degree of withdrawals and again it was discussed with him that there was none evident at assessment. At this point Mr Weir decided to take his own his discharge from hospital against medical advice and he declined referral to any of the local community addiction services.

No further input is required from the Addiction Liaison Service at this time.

Yours sincerely

Denise Johnston
Acute Addiction Liaison Nurse
Telephone 0141 314 4472

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our Ref: NG/SR/1203893450

Date: 8th April 2014

Alcohol Problems Clinic
Direct - 0141 314 4106
Fax No. 0141 314 4085
Appointments only - 0141 314 4435

Dictated: 7th April 2014
Typed: 8th April 2014

PRIVATE & CONFIDENTIAL
James Weir
Flat 1/7
17 Abercorn Street
Paisley
PA3 4AA

Dear Mr Weir

I note that you failed to attend your follow up appointment on the 7th April 2014 at the Alcohol Problems Clinic, Dykebar Hospital. If you would wish further input from the Alcohol Services please could you contact me to arrange a further appointment.

If I do not hear from you by Friday 18th April 2014 I will assume that you wish no further input from the Addiction Liaison Service.

Yours sincerely

Nichole Gallacher
Acute Addiction Liaison Nurse
Telephone 0141 314 4472

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
Back Sneddon Centre
20 Back Sneddon Street
Paisley
PA3 2DJ
0141 618 2585
CHI: 120389 3450
REF: /SM
13/01/14

PRIVATE & CONFIDENTIAL
Dr Johnstone
Barony Practice
Northcroft Medical Centre
Northcroft Street
Paisley

Dear Dr Johnstone

James Weir, DOB 12.03.89, 1/7 17 Abercorn Street, Paisley

This young man was assessed by the Integrated Alcohol Team in October2013. At that time he stated the he was drinking 2 bottles of Buckfast on a daily basis, however there was little evidence of this. He gave many conflicting accounts of his alcohol use and his life history making it very difficult to accurately assess his current problem.

He did ask to be referred to the Psychologist but failed to attend the majority of offered appointments and when seen gave contradictory accounts of his life experiences again, he was subsequently discharged.

I have spoken with James today regarding his alcohol use; he states that it is now longer an issue as he rarely drinks alcohol. The staff at his accommodation have confirmed that they have seen no evidence of regular alcohol use by James.

I have discharged him from the I.A.T at his request. He is aware that he can self refer to the R.C.A or to the A.P.C in the future if needed.

Please contact the number above if more information is needed.

Yours sincerely

Suzanne Martin
Community Addictions Nurse
Integrated Alcohol Team

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: DJ/SR/1203893450

Alcohol Problems Clinic
Direct - 0141 314 4106
Fax No. 0141 314 4085
Appointments only - 0141 314 4435

Date: 6th January 2014

Dictated: 3rd January 2013
Typed: 6th January 2013

PRIVATE & CONFIDENTIAL
Mr James Weir
Flat 1/7
17 Abercorn Street
Paisley
PA3 4AA

Dear Mr Weir

Due to your recent attendance at the Accident and Emergency Department at the Royal Alexandra Hospital in Paisley you have been referred to the Alcohol Liaison Service.

I would be grateful if you would attend an appointment at the Alcohol Problems Clinic, Dykebar Hospital on Monday 13th January 2014 at 11am.

If you are unable to attend this appointment or should you require any further information regarding this appointment please do not hesitate to contact me on the number below.

Yours sincerely

Denise Johnston
Alcohol Liaison Nurse
Telephone 0141 314 4472

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: DJ/SR/1203893450

Alcohol Problems Clinic
Direct - 0141 314 4106
Fax No. 0141 314 4085
Appointments only - 0141 314 4435

Date: 14th January 2014

Dictated: 13th January 2014
Typed: 14th January 2014

PRIVATE & CONFIDENTIAL
Dr Sunderland
Kings Inch Medical Practice
Renfrew Health Centre
10 Ferry Road
Renfrew
PA4 8RU

Dear Dr Sunderland

James Weir, DoB: 12.03.1989, Flat 1/7, 17 Abercorn Street, Paisley, PA3 4AA

This gentleman was referred to the Addiction Liaison Service having attended the Accident & Emergency Department of the Royal Alexandra Hospital in Paisley on the 2nd January 2014 due to experiencing an alcohol withdrawal seizure.

Post hospital discharge, an appointment was arranged for this gentleman at the Alcohol Problems Clinic, Dykebar Hospital on the 13th January 2014. However he failed to attend this appointment and has made no contact with the Clinic.

Should he approach you for assistance with any alcohol related issues then please do not hesitate to refer him to the Alcohol Problems Clinic at Dykebar Hospital.

Yours sincerely

Denise Johnston
Alcohol Liaison Nurse
Telephone 0141 314 4472

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
20 Back Sneddon Street
Paisley PA3 2AF
0141 618 2585
CHI: 12.03.89 3450
REF: LM/CB
23/10/2013

PRIVATE & CONFIDENTIAL
Mr. James Weir,
c/o Blue Triangle,
94 Paisley Road,
Renfrew.

Dear Mr Weir

You have been referred to me by Suzanne Martin of Integrated Alcohol Team.

I would like to offer you an appointment for:-

09:30am on Friday 8th November, 2013
At Back Sneddon Clinic, 20 Back Sneddon Street, Paisley

If you are unable to attend this appointment please contact me on the above number.

Yours sincerely,

Dr Laura Mitchell
Clinical Psychologist
Integrated Alcohol Team

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
Back Sneddon Centre
Back Sneddon Street
Paisley
PA3 2DJ
LM/CB
0141 889 1223
CHI: 1203893450
6th December 2013

PRIVATE & CONFIDENTIAL
Mr James Weir
C/o Loretto Care
17 Abercorn Street
Paisley
PA3 4AA

Dear Mr Weir

I was sorry that you were unable to attend your appointment with me this morning.

I would like to offer you another appointment for:-

9.30am on Friday 20th December 2013
At Back Sneddon Centre, 20 Back Sneddon Street

It is important that you phone me at your earliest convenience to let me know if you are unable to make this appointment, or if you no longer wish to be seen by psychology.

Yours sincerely,

Dr Laura Mitchell
Clinical Psychologist

Renfrewshire
Community Health Partnership

NHS
Greater Glasgow and Clyde

Renfrewshire Integrated Alcohol Team
Back Sneddon Centre
Back Sneddon Street
Paisley
PA3 2DJ
LM/CB
0141 889 1223
CHI: 1203893450
8th November 2013

PRIVATE & CONFIDENTIAL
Mr James Weir
C/o Loretto Care
17 Abercorn Street
Paisley
PA3 4AA

Dear Mr Weir

You did not attend your first appointment with me on Friday 8th November 2013 at 9.30am. I am prepared to offer you one final appointment. If you do not attend I will assume that you no longer wish to be seen for a psychology assessment and I will remove you from the waiting list.

Your appointment will be on:

Friday 22nd November 2013 @ 9.30am
At Back Sneddon Clinic, 20 Back Sneddon Street, Paisley

It is important that you phone me at your earliest convenience to let me know if you are unable to make this appointment, or if you no longer wish to be seen by psychology.

Yours sincerely,

Dr Laura Mitchell
Clinical Psychologist

C.c. Suzanne Martin, IAT, Back Sneddon Centre

Dykebar Hospital
Grahamston Road,
Paisley PA2 7DE.

Our ref.: AH/IP/CHI 12.03.89 Alcohol Problems Clinic
3450

Date: October 3, 2013 Appointments - 0141 314 4435

Dictated: 03.10.13
Typed: 03.10.13

PRIVATE & CONFIDENTIAL
Mr. James Weir,
c/o Blue Triangle,
94 Paisley Road,
Renfrew.

Dear Mr. Weir,

Dr. Claire Duncan, CT3 in Psychiatry, has referred you to the Alcohol Problems Clinic at Dykebar Hospital.

An out-patient appointment has been arranged for you to attend the **Integrated Alcohol Team, Back Sneddon Centre, 20 Back Sneddon Street, Paisley PA3 2DJ** on:-

Thursday, October 10, 2013 at 9am

And I hope this is convenient. If this date is not suitable, please let me know and a further appointment can be arranged.

We would prefer you did not drive to your appointment – have someone else drive you or use public transport.

Yours sincerely,

Isobel Prior

Secretary
Alcohol Problems Clinic

c.c. Dr. Shotton, Kingsinch Medical Practice, Renfrew Health Centre, 10 Ferry Road, Renfrew.