# D1473

Prison Number: 10405434

D147	73		<b>Patient</b>	Record			
		DPA		NHS Number:			
Place of Birth	l Nigeria	DFA		Gender	Ma	ale	
Marital Status	Common lav	w partner	ship	Ethnic Origin		rican - ethnic c	ategory 2001
Language	Main spoker (XaG5t)	n languag	je English	English Speaker	ce Ye	nsus es	
Contact Details	,						
Current Home Ad	dress		DI	PA	]	04 Aug 20	17 -
Mobile Tel.	[	DP	Α ]				
Previous Home A	ddress		D	PA		08 Jul 201	3 - 14 Jul 2017
Registration Details							
Registration Date	20 Au	g 2017		Date of Removal		02 Oct 2017	
PDS Registered Practice				Usual Branch		Gatwick Imm Centre	igration Removal
Dispensing	N			Pharmacy		None	
Attendance Record		Last 12 F	Months (Total)	,			
Appointments		10 (10)		Attendance		7 (7)	70% (70%)
Visits	(	0 (0)	0% (0%)	DNAs		3 (3)	30% (30%)
la							
<b>Journal</b> 01 Jan 2005	C						
Date of entry to Ur	Surgery: SMI	ITH, Zoe	(Staff Nurse) @	IRC The Verne		Entered: 14	1 Jul 2017 04:48
			Toni (Mrs.) (Adm	inistrator) @ IRC The		-	
Consent Form to I	RC The Verne	B	On (IVIIS) (Adm	inistrator) @ IRC The	Verne	Entered: 09	Feb 2015 17:29
			oni (Mrs) (Admi	inistrator) @ IRC The	Vorna	C-4	
Patient consented	to sharing of	informati	on (Y3358)	mistrator) @ INC THE	verne	Entered: 09	9 Feb 2015 17:29
08 Jul 2013 18:39 Previous Home Ad	Surgery: Unk	nown Sta	aff Member @ H	mp Maidstone		Entered: 07	Oct 2013 15:36
	ii	nown Sta	iff Member @ H			j	
Previous Home Ad	dress:		D	PA		Entered: 03	Sep 2014 11:04
08 Jul 2013 18:39	Surgery: Unk	nown Sta		RC The Verne		Entered: 10	Sep 2014 19:01
Previous Home Ad	dress:			PA		LEITE TO	3ep 2014 19.01
08 2013 18:39	Reception. So	ırgery: O	YEWOLE, Gber	nga (Mr) (Staff Nurse)	@ HN	1P Belmash	
Sell-employed (13)	JU.)						
Main spoken langu African - ethnic cat	age English ( edory 2001 o	XaG5t) angue (Y	3 ID7)				
Single person (XEC	0oZ)	siisus (A	331(7)				
Place of Birth - Nig	eria <u></u>		·				
Previous Home Ad			_	PA	L	إ	
No complaints (X76	Reception, St	irgery: O	YEWOLE, Gber	iga (Mr) (Staff Nurse)	@ HM	IP Belmash	
None (X80xk)	,,,,,						
Police cell (X79s5)	- Liverpool St	reet					
Charged with crime	(13HM0) - sen	sitive/Irrelevant					
Notes summary on Convicted for crimin	computer (93	344.) -00-2					
08 Jul 2013 19:47	Reception Su	rgery: O	/EWOLE Chan	ac (Ma) (Ct-ff N			
PNG Image: Photo.	PNG	igely. O	LVVOLL, Guen	ga (Mr) (Staff Nurse) (	© HM	P Belmash	
08 Jul 2013 20:19	Surgery: MCL	OUGHLI	V Annie (Staff N	Nurse) @ HMP Belmas	-h		
Relationship (XC00	O)		, (Otali I	-a.so/ @ rivir beilia:	211		
No history of substa	ince misuse (	XaQFT)					
Thu 12 Oct 2017 10:23				[ <del></del>		D1473	1/10405404
Confidential: Personal Data	а			i			(10405434) DPA
							'ii

Has not received medication for mental health problems (Y08e6)

Recent change in family composition / circumstances (Y05b0)

Has no outstanding hospital/ Doctors appointments (Y07f8)

Has not seen Doctor in previous few months (Y08d6)

No thoughts of deliberate self harm (Xaluw)

Patient registered (XaBI9)

Address instruction (XaDvP) - unknown

No known allergies (1151.)

Has not been homeless in the past year (Y08db)

No thoughts of deliberate self harm (Xaluw)

At risk state (Xa1qc) 1 - History of self harm: No

Previous management on ACCT: No

History of Mental illness / engagement with Mental Health Services: No

History of Substance Misuse: No

Recent change in family relationships: No

Recent change in circumstances( Long prison sentence, unexpected remand): Yes

License Recall: No

Persistent thoughts of self harm AND / OR stated intentions to act on those thoughts at present, or over the past 4 weeks: No

Has not been in prison before (Y08dc)

Is not receiving prescribed medication (Y08d7)

Impressions of the prisoners behaviour and mental state (YX023) - appers cheerful but wishes he was not in prison Prisoner does not feel like Self Harming or Suicide (Y0903)

Has not tried to harm themselves (In prison) (Y08de)

Has not tried to harm themselves (Outside prison) (Y08df)

Fit for normal location, work and any cell occupancy (YX035)

No immediate action required (YX027)

No (Y0428)

First night risk assessment form completed (Y4581)

Has no concerns over their physical health (Y08dd)

None (X80xk)

No (Y0428)

Has not received physical injuries recently (Y08d8)

Has not received medication for mental health problems (Y08e6)

Does not have a psychiatric nurse or care worker (Y08e4)

Prisoner has not received treatment from a psychiatrist outside prison: no (Y09ce)

i ilisolici ilas ilot	received treatment from a payernatrial outside prison. No (1090e)
Has not stayed in	a psychiatric hospital (Y08e2)
18 Jul 2013 10:18	
Plan: Sensitive/Irrele	evant vaccination (65F1.)given 2nd one due 25/7/13
Engerix B prefille	d syringe 1ml 1 1ml
	Sent: Sensitive/Irrelevant
25 al 2013 10:00	Surgery: BROWN, Andrew (Admin/Clinical Support Access Role) @ HMP Belmash
Plan: Second sens	itive/Irrelevant_vaccination (65F2.)given 3rd one due 8/8/13
Sensitive/Irrelevant prefille	d syringe 1ml 2 1ml
Vaccination Cons	cent : Sensitive/Irrelevant
08 Aug 2013 09:55	Surgery: BROWN, Andrew (Admin/Clinical Support Access Role) @ HMP Belmash
Plan: Third Ser	sitive/Irrelevant (65F3.)given booster due 18/7/14
Sensitive/Irrelevant prefille	d syringe 1ml 3 1ml
Vaccination Cons	ent! Sensitive/Irrelevant

27 Aug 2013 14:04 Surgery: HARDWICKE, Jane (Mrs) (Health Professional Access Role) @ HMP Belmash
12 Sep 2013 12:37 Surgery: HARDWICKE, Jane (Mrs) (Health Professional Access Role) @ HMP Belmash
14 Sep 2013 10:14 Surgery: WILLIAMS, Carol (Mrs) (Staff Nurse) @ HMP Belmash

Seen at this time after incident with another prisoner. D1473 voiced he has no injures. He stated "I touch no me, no touch me". Prisoner moved to HB 3

04 Oct 2013 09:02 Reception, Surgery: GRICE, Dawn (Ms) (Sister/Charge Nurse) @ HMP Belmash Consultation (Xa1qL) - Fit for transfer to HMP Maidstone 7/10/13

07 Oct 2013 Surgery: TUCKER, Jeannette (Mrs) (Personal Assistant) @ Hmp Entered: 15 Nov 2013 14:53 Maidstone

General Document to Unknown

07 Oct 2013 Surgery: TUCKER, Jeannette (Mrs) (Personal Assistant) @ Hmp Entered: 15 Nov 2013 14:53

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D1473 (10405434)

DPA

Has not received medication for mental health problems (Y08e6)

Refer to weight management programme (XaJSu)

Screening - health check (XM1Xs)

Prisoner has not tried to harm themselves (outside prison) (Y09fa)

Impressions of the prisoners behaviour and mental state (YX023) - mentally stable

Unknown (X90UG)

Hepatitis C status - Unknown (Y0971)

Hepatitis B status - Unknown (Y096c)

Meets eligibility criteria for wellbeing assessment for LTC (XaX65) - nil medical problem

Asthma: no (Y0944) Epilepsy: no (Y0941)

Diabetes mellitus: no (Y093f)

121 / 69 mmHa

20 Nov 2013 13:19 Surgery: TUCKER, Jeannette (Mrs) (Clerical Access Role) @ Hmp Maidstone	
16 Jun 2014 11:20 Surgery: WILSON, Hester (Nurse Access Role) @ Hmp Maidstone	

History: C/o headache and feverish.

Examination: Temp 36.5

Plan: Analgesia given with advice

02 Con 2014			
03 Sep 2014	Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @	Entorod: 15 C 0044 40 47	
,	in 5 7 mile ( in 65) (Michial Fleath) Nulse) (W	Entered. To Sep 2014 12:17	
	HMP Elmley		
	I IIVII LIIIIICY		
D			
Prescription or Ma	dication dataile to Deliante Man		

Prescription or Medication details to Belinda May

03 Sep 2014	Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley	Entered: 15 Sep 2014 12:17
Consent Form to I	Jnknown	

03 Sep 2014	Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley	Entered: 15 Sep 2014 12:17
03 Sep 2014	Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley	Entered: 15 Sep 2014 12:17
03 Sep 2014 11:04	Surgery: MABHEDHLA. Nyasha (Miss) (Mental Health Nurse) @ H	IMP Fimley

SystmOne Outgoing Record Sharing consent changed to: No

03 Sep 2014 11:04	Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley
SystmOne Incom	ing Record Sharing consent changed to: Yes
	Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley
03 Sep 2014 11:04	Surgery MAD HEBITA (Wydsia (Wiss) (Wettar Health Noise) @ HMP Elmley

Surgery: MABHEDHLA. Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley Surgery: MABHEDHLA, Nyasha (Miss) (Mental Health Nurse) @ HMP Elmley 03 Sep 2014 11:25 Sickle cell carrier: no (Y09fe)

No FH: Hypertension (1227.)

No (Y0428)

Tuberculosis: no (Y093d) Diabetes mellitus: no (Y093f)

Epilepsy: no (Y0941) Chest pain: none (Y092a)

Hepatitis C screening declined (XaLNE)

Health related observations about the prisoners physical appearance (YX010) - Appears to be fit and well.

Normal vision (668A.)

Occasional cigarette smoker (Ub1tR) (New Episode)

No (Y0428) No (Y0428)

Hepatitis C status - Unknown (Y0971)

Reads English (XaIMM)

Speaks English well (13Z67)

Prisoner has been in prison before (YX004)

Suitable for in-possession medication (XaYM5) (New Episode)

No known allergies (1151.)

Case management risk assessment score (XaLWw) 0 - 1. Is the patient responsible for self-administration of their prescribed medication in community or other Prison?: Yes

2. Has the patient understood and signed IP Compact/Leaflet?: Yes

3. Has the patient any learning difficulties, problems with reading labels or language difficulties?: No

4. Has the patient any history of alcohol or drug abuse?: No

5. Is there any known history of medication related incidents eg trading, bullying etc?: No

6. Is the patient at risk from self-harm/overdose?: No

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<u> </u>	D1473	(10405434)
		. DPA

- 7. Is the patient on an open ACCT?: No
- 8. Is the patient confused or disorientated?: No
- 9. Has the patient had a recent change in prison status (eg recently sentenced) or a recent life event which has increased their risk?: No

Has never misused drugs (Ub0mr)

Health information not received from outside source: no (Y09cc)

Has not received physical injuries recently (Y08d8)

Asthma: no (Y0944)

African - ethnic category 2001 census (XaJR7) (New Episode)

Has not seen Doctor in previous few months (Y08d6)

Has no outstanding hospital/ Doctors appointments (Y07f8)

Not disabled (Y3416)

Thought process (X75yE)

Thought content (X75yQ)

Perception (XM1MY)

No speech problem (1B91.)

Appearances (X78yu)

Attitude (Ua1Xk)

Normal behaviour (3AB0.)

Cognitive function observations (X75wt)

New patient screening done (68R2.)

Is not receiving prescribed medication (Y08d7)

Transfer moved in (Y3424)

Summary report (XaX2s)

Seen in reception after he was received from HMP maidstone. D1473 presented as smartly dressed, he appeared to be calm, lucid, objectively euthymic his affect. Throughout the interview He was well oriented to place time and person. He was able to maintain adequate rapport with me throughout the interview and he did not appear to be particularly distressed or anxious.

He maintained good eye contact; he was calm and relaxed in his demeanor. His speech was coherent with normal flow, tone and pitch. He was very insightful and demonstrated awareness to his predicament; he did not display any overt psychotic symptoms and no perceptual abnormalities were observed. At the time of my interview with him I could not elicit any clinical features of affective psychotic illness or impaired thought processes. He denied suffering from any depression or any psychotic phenomena. States that he is generally fit and currently has no health concerns. Currently Denies any suicidal ideation/ self harm nor were they any indicators identified or noted throughout the interview, he states adamantly that he will be able to cope with change of circumstance, I advised him on how to access Samaritans/ listener services if he finds any difficulties coping.

Patient Insight Of Illness (Y0454)

Judgement (Ua19e)

No suicidal thoughts (XaIJ7)

Alcohol abuse: no (Y0973)

Prisoner has not received treatment from a psychiatrist outside prison: no (Y09ce)

Has not stayed in a psychiatric hospital (Y08e2)

Does not misuse drugs (Ub0mq)

Hearing normal (1C11.)

Has no concerns over their physical health (Y08dd)

Consent given to share patient data with specified 3rd party (XaNwR)

Prisoner has a psychiatric nurse or care worker in the community : no (Y09d1)

No (Y0428)

Fit to attend gym (XaKkp)

Fit for work (13JW.)

Prisoner has tried to harm themselves (outside prison) (YX021)

Has not received medication for mental health problems (Y08e6)

Prisoner does not feel like Self Harming or Suicide (Y0903)

Prisoner has not tried to harm themselves (in prison) (Y09f9)

04 Sep 2014 08:47 Surgery: PAY, Lesley (Clerical Access Role) @ HMP Elmley
04 Sep 2014 09:42 Surgery: STEVENS, Ullie (Miss) (Admin/Clinical Support Access Role) @ HMP Elmley

Ideal body weight (66CB.) 72.13 Kg (11 st 5 lb) Dermatological disorder (M....) - Excema

H/O: multiple allergies (14M3.) - None

Smoker (137R.) (New Episode)

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D1473

(10405434) DPA Current Home Address:

DPA

14 Jul 2017 04:16 Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Verne

History: Part C completed by Dorms staff as no secure internet connection or fax available in Reception.

Yes (Y0427)

Able to manage medication (Xa2yC)

No (Y0428)

No (Y0428)

New patient screening (68R..)

Hepatitis B immunisation (X74VC) -

Hepatitis B immunisation (X74VC) -

Sensitive/Irrelevant

Patient not registered (9121.)

Sensitive/Irrelevant (135A.)

No (Y0428)

Body mass index - observation (22K...) 26.3 Kg/m² (Ongoing Episode)

Pulse rate (X773s) 62 bpm

O/E - weight (22A..) sensitive/Irrelevant

Overview Notes (Y0028) - Open ACDT

Yes (Y0427)

O/E - height (229...) Sensitive/Irrelevant

Prisoner assessment for in-possession medication completed (XaPim)

Referred to GP (Y3758)

Health care services information leaflet given (XaLMh)

Fit for normal location, work and any cell occupancy (YX035)

Misc. certificate signed (9DB..)

Tuberculosis screening (6831.)

HIV test offered (XaDvy)

Hepatitis C screening offered (XaLDh)

No (Y0428)

Chlamydia test offered (XaLHg)

New patient screening done (68R2.)

Born in Nigeria (XaG4b)

Prison first reception health assessment completed (XaYXV)

Main spoken language English (XaG5t)

Reads English (XaIMM)

No current indication/evidence of risk, suitable for multi-cell location (Y4579)

Second Reception Screening (Y0da6)

Sleep hygiene behaviour education (XaP4v)

Insufficient evidence to give opinion (Y4575)

Second Reception Screening (Y0da6)

Expected peak expiratory flow rate (XaEFL) 620 L/min

Current medication as reported by patient (XaQnH) - no current medication

Referral to smoking cessation service declined (XaaDx)

Prisoner has a psychiatric nurse or care worker in the community : no (Y09d1)

Prisoner has not tried to harm themselves (outside prison) (Y09fa)

Has not stayed in a psychiatric hospital (Y08e2)

Has no outstanding hospital/ Doctors appointments (Y07f8)

No relevant past medical hist. (1153.)

[V]Victim of torture (XaLQe) - States he has been tortured - referred to GP

Referral for smoking cessation service offered (XaXR4)

Referral to smoking cessation service declined (XaaDx)

No thoughts of deliberate self harm (Xaluw)

Impressions of the prisoners behaviour and mental state (YX023) - Appearing very sullen and angry. Poor engagement; very little eye contact, mainly monosyllabic answers given. Well kempt in appearance, looks well.

Patient has previously used drugs (Y2479) - States he has never taken any illicit substances however previous notes state that he has a history of cannabis use.

Hepatitis B screening offered (XaLFK)

Sexually transmitted infection screening offered (XaZGw) - declined STI screen

Open ACCT (YA213)

[V]Personal history of mental disorder (ZV11.) - States he has a history of depression. States that he was previously prescribed antidepressants but does not recall the name of them or when this was.

Has not received medication for mental health problems (Y08e6)

Prisoner has not tried to harm themselves (in prison) (Y09f9)

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D1473

(10405434)

DPA

Printed by BOWERS, Mary Gatwick Immigration Removal Centre 10 of 97 Prisoner has not received treatment from a psychiatrist outside prison: no (Y09ce) Level of anxiety (Xa3Xk) - Not appearing anxious Mood observations (X760o) - Appearing angry Mental state, behaviour and psychosocial function observatns (XM011) - Poor engagement, very little eye contact, mainly monosyllabic answers given. No (Y0428) Self-harm (X766J) - Denies any previous history of self harm Declined to discuss current thoughts of DSH. Ideal body weight - Devine formula (Y18d9) 65.94 Kg (10 st 5 lb) Predicted peak expiratory flow rate using EN 13826 standard (XaKbt) 611 l/min Smoker (137R.) - smokes occasionally (Ongoing Episode) Reason for referral (XalpS) - ACDT opened in Reception as, when asked if he had any thoughts of DSH'. D1473 D1473 replied 'yes'. He states he has a history of depression and was previously medicated for this but does not reacll the name of the medication or how long ago he took it. Prisoner has been in prison before (YX004) Recent countries visited (13X1.) - Nigeria Consent obtained (Y001d) Recent countries visited (13X1.) - has not left Uk in past 2 months No hearing problems (Y1103) Not disabled (Y3416) Open ACCT (YA213) Not aware of referral (XaZNV) Further background information (Y2299) - Referred to GP Alcohol screen - AUDIT PC completed (XaMyj) 0 - How often do you have a drink containing alcohol?: Never How many drinks containing alcohol do you have on a typical day when you are drinking?: N/A How often during the past year have you found that you were not able to stop drinking once you had started?: N/A How often during the past year have you failed to do what was normally expected of you because of drinking?: N/A Has a relative or friend or a doctor or other health worker been concerned about your drinking or suggested you cut down?: N/A Referral (Xa4HR) 120 / 70 mmHg Reminder/Alert: CID 10405434 - Priority: Normal Address Changed From: Current Home Address: Mobile telephone number: DPA Medication In Possession Status: Not in possession 14 Jul 2017 04:16 Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Verne SystmOne Outgoing Record Sharing consent changed to: No Surgery: ARNOLD, Kerry (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne 14 Jul 2017 10:13 17 Jul 2017 12:52 Surgery: HUDGELL, Toni (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne 18 Jul 2017 11:13 Surgery: ALFORD, Fiona (Support Worker) @ IRC The Verne History: Open ACCT (YA213)referral from O Anstee on behalf of Z Smith RGN. Low mood due to being in detentionOpen ACCT (YA213) Plan: Put on mental health health waiting list 18 Jul 2017 11:34 Surgery: ALFORD, Fiona (Support Worker) @ IRC The Verne Reminder/Alert: OPEN ACDT - Priority: High 20 Jul 2017 Clinic: COOKE, Karen (Administrator) @ IRC The Verne Entered: 20 Jul 2017 14:45 Mental Health Referral to PCMHS Surgery: COOKE, Karen (Administrator) @ IRC The Verne Entered: 20 Jul 2017 14:46 Referral to primary care mental health team (XaMhM) - Referrals x 2 discussed in the mental health team meeting on 20.07.2017. Present: Dr Liebenberg, Chenai Chimbwanda, Fiona Alford. Plan: Chenai has already seen and has full assessment booked in to see tomorrow for mood. (New Episode) Surgery: DUVALL, Portia (Miss) (Admin/Clinical Support Access Role) @ IRC The Verne 20 Jul 2017 10:10 Referral to substance misuse service (XaLKJ) - Tasked due to history of Cannabis use - Added to ISMS wing list to discuss engaging

20 Jul 2017 14:46 Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne Review status (Y04d8)

health issues and appointment - complaining of depression, was referred to mental health for assessment and appointment booked to see on Friday 21/7/17.

patient's thoughts of self harm or suicide - denied current thoughts, intent or plan however thoughts are varied during the night hence

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Attended Assessment, Care in Custody and Teamwork review (XaQfl) - SO Garrard and myself (Ongoing Episode) Attended Assessment, Care in Custody and Teamwork review (XaQfl)

Open ACCT (YA213)

General observation of patient (Xa1bt) - one observation during the morning, one during the afternoon, one at tea time and 3 random observations during the night.

21 Jul 2017 12:39 Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne

No thoughts of deliberate self harm (Xaluw)

Presenting complaint (Xalm8) - history of depression and thoughts of deliberate self harm.

Open ACCT : unknown (Y09c6)

Prisoner has not tried to harm themselves (in prison) (Y09f9)

Risk assessment (Ua1P1) - Denied any current thoughts of self harm or suicide

Patient perception of problem (Xaab3) - reported that he is depressed about being in detention centre and thinks noone will help him.

Referral by health worker (XaAZ8)

History and observations (X76sU) - No history of mental health involvement or treatments

General mental state (X75ws) - appeared better in mood than last seen on ACDT

Able to write (XaAzO)

Able to read (XaBme)

Seen by primary care mental health team (XaZrh)

complained of feeling depressed due to the thoughts of being deported to Nigeria, issue of sensitive/Irrelevant and family worries.



Plan

Self help leaflet on depression and low mood given

GAD7 and PHQ9 done

Patient to have a look at the leaflet and will be discussed in the next follow-up meeting

Able to tell the time (Xa3BE)

Prisoner has not tried to harm themselves (outside prison) (Y09fa)

No (Y0428)

History of substance misuse (XaMyB) - denied any history or current substance misuse

Risk of self neglect: no (Y09a4)

22 Jul 2017 11:28 Surgery: SZEL. Margit (Dr) (Sessional GP) @ IRC The Verne

Plan (XalVg) - Discussed managem, ent options including start now with SSRI, agreed NIP daily afternoon Mental symptom findings (XaBfp) - Feel depressed, clearly from his immigration situation, has had similar episode 3 years ago, when he was detained and spent 24 months in prison and got medication from then. cream (Forum Health Products Ltd) - 500 grams - as directed (500 grams every 28 days) (Future dated

medication 25 Jul 2017)

Stopped 14 Aug 2017 Other (Ended after on admission medication review) by FOWLER, Jane (Dr)

(R) sensitive/irrelevant 50mg tablets - 28 tablets - 1 tablet - admin times: 16:00 (Oral) (Future dated medication 24 Jul 2017) Stopped 14 Aug 2017 Other (Ended after on admission medication review) by FOWLER, Jane (Dr)

Sensitive/Irrelevant 50mg tablets - 28 tablets - 1 tablet

Ended 03 Aug 2017 Patient Deducted (Sentence Ended)

Custom script: Printed On Sat 22 Jul 2017 11:36 By Dr Margit Szel Custom script: Printed On Sat 22 Jul 2017 11:36 By Dr Margit Szel

	Wardington Andrews
24 Jul 2017 16:39	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne
24 Jul 2017 16:39	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne
25 Jul 2017 10:37	Surgery: ARNOLD, Kerry (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne
25 Jul 2017 16:34	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne
25 Jul 2017 16:34	Surgery MAKGANTE Roometso (Miss) (Stall Nurse) @ IRC The Verne
25 Jul 2017 16:36	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne
26 Jul 2017 16:22	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne
	Surgery: ROGERS, Julie (Practice Nurse) @ IRC The Verne
26 Jul 2017 16:22	Surgery: ROGERS, Julie (Staff Nurse) @ IRC The Verne
27 Jul 2017	Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne
Date (Xa0ck)	

Date (Xa0ck)	1 / / state value of the venie
27 Jul 2017 16:12	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne
27 Jul 2017 16:12	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne
27 Jul 2017 17:01	Comment of the verification of the verificatio

Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne Review status (Y04d8) - discussed any current health issues and any concerns. D1473 reported that he is feeling better now that he has his medication, is playing football and has just been before the review, states that he is concerned that he is not able to afford solicitor who is asking a thousand pound, D1473 was directed to the

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27 Jul 2017 17:21

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Gatwick Immigration Removal Centre

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Welfare Case Worker to see if he can have legal aid solicitor, D1473 denied any current thoughts of self harm or suicide.

Attended Assessment, Care in Custody and Teamwork review (XaQfl) S.O M Connolly and Offier D1473 Hawkins (Ongoing Episode)

Attended Assessment, Care in Custody and Teamwork review (XaQfl)

Open ACCT (YA213) - ACCT on post closure

General observation of patient (Xa1bt) - one observation per day post closure (Ongoing Episode)

General observation of patient (Xa1bt) - one observation during the morning, one observation during the afternoon, one at tea time and 3 random at night

28 Jul 2017 10:49	Surgery: HUDGELL, Toni (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne
28 Jul 2017 16:23	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne
28 Jul 2017 16:23	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne
29 Jul 2017 16:52	Surgery: GLYN-JONES, Ann (Practice Nurse) @ IRC The Verne
29 Jul 2017 16:52	Surgery: GLYN-JONES, Ann (Staff Nurse) @ IRC The Verne
30 Jul 2017 16:40	Surgery: GLYN-JONES, Ann (Practice Nurse) @ IRC The Verne
30 Jul 2017 16:41	Surgery: GLYN-JONES, Ann (Staff Nurse) @ IRC The Verne
31 Jul 2017 16:39	Surgery: ROGERS, Julie (Practice Nurse) @ IRC The Verne
31 Jul 2017 16:39	Surgery: ROGERS, Julie (Staff Nurse) @ IRC The Verne
31 Jul 2017 22:00	Health Centre: ROBINSON, Helen (Assistant Practitioner) @ IRC The Verne
Roosteri sansitivallera	levent Vaccination (SEEA)

Booster sensitive/Irrelevant vaccination (65F4.)

Transfer of care (XaBPq) - IRC Colnbrook 02/07/17

Aug 2017 17:02 Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne History: Mental health review follow-up (XaMJ8)

Seen patient after reports that he barricated himself in his room and had a belt from his morning gown on his neck. reported that he is not happy with the decision that he is going to be deported back to his home D1473 country,

reported that he is sensitivelively and is not accepted there therefore he would rather die here that to go back to a country he knows he is going to be killed,

he reported that he is having flashbacks and nightmares of this,

was advised to speak to Home Office and his solicitor but reported that he is not able to afford solicitor and thinks that no one is able to help him,

continue to have current thoughts of self harm and suicide, suggested a constant watch,

Patient located to a ligature free room in CSU Plan: to be discussed in next team review.

01 Aug 2017 18:34 Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne 01 Aug 2017 18:34 Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne 02 Aug 2017 10:46 Surgery: ARNOLD, Kerry (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne 02 Aug 2017 11:15 Surgery: PEERS, Adrian (Mr) (Healthcare Assistant) @ IRC The Entered: 02 Aug 2017 12:12 Verne

History: In attendancs; Myself, Duty Govenor Morles, Becky from immigration, Lucy from ISMS, CM Beckett and

We each gave an introduction to [D1473] [D1473] then gave a summary of how he has been in the UK for 13 years and that he has no friends or family in Nigeria. He stated that he was living with his partner and has a child with her. He Sensitive/Irrelevant to his partner who did not take this very well. He then committed a crime which landed him in prison for 27 months and when his sentance finished he came to the Verne. When released he stated that his partner had got with another man who did not live in the same house. She agreed to let him stay on the sofa gor a week and her boyfriend did not like this and caused trouble trying to entice him into a fight. D1473 had out stayed his visa and that is why he ended up back at the Verne. He stated that he he was due a visit from a solicitor yesterday but he did not come and that is when p1473 stated that he had had enough. He stated that he has been awake all night due to another detainee shouting from 01:00 this morning and does not want to stay in CSU. He stated that what happened yesterday was a reaction to the solicitor not coming and that he did not want to hurt himself. He was very communicative, open and honest throughout. He stated he is currently on sensitive/irrelevant 50mg for 4 weeks and stated that it is not helping so I informed him that I will take this back to the team to discuss. Plan: It was discussed after with the Duty Govenor and Becky for him to be located on A1 as there are accusations of him stealing from other detainees and it is potentially not safe for him to be located back to his previous wing. No decsion made as yet.

I spoke to Fiona from MH regarding his medication and she stated that this will be discussed Attended Assessment, Care in Custody and Teamwork review (XaOfl) (Ongoing Epis

	(XaQII) (Oligolity Episone)
02 Aug 2017 16:30	Surgery: KOTKOWSKA, Sandra (Assistant Practitioner) @ IRC The Verne
02 Aug 2017 16:31	Surgery: KOTKOWSKA, Sandra (Assistant Practitioner) @ IRC The Verne
03 Aug 2017 11:10	Surgery: HUDGELL, Toni (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne
	the verne

Thu 12 Oct 2017 10:23 Confidential: Personal Data

Gatwick Immigration R	temoval Centre	13 of 9
03 Aug 2017 12:42 Surgery: DERA, Tinashe Godfrey (Mr) (S	Staff Nurse) @ Heathrow Immigration Remo	val Centro
	No	vai Centie
	Staff Nurse) @ Heathrow Immigration Remo	
03 Aug 2017 12:42 Surgery: DERA, Tinashe Godfrey (Mr) (S	Staff Nurse) @ Heathrow Immigration Removed	vai Centre
SystmOne Incoming Record Sharing consent changed to: Y	/es	val Centre
03 Aug 2017 12:42 Surgery: Unknown Staff Member @ Head	4h	
03 Aug 2017 12:42 Surgery: Unknown Staff Member @ Heat (Admission Med) cream (Forum Health Products Ltd) -	roo immigration Removal Centre	
(Admission Med) sensitive/irrelevant 50 mg tablets - 28 tablets - 1 tab	500 grams - as directed	
03 Aug 2017 12:42 Surgery: DERA, Tinashe Godfrey (Mr.) (S	het - admin times: 16:00 (Oral)	
Prisoner has been in prison before (YX004)	staff Nurse) @ Heathrow Immigration Remov	val Centre
Paper record held here (Y1800)		
Health education - sexual health (XalyP)		
No relevant family history (122)		
Registered GP (XaljE) - NO GP		
Prisoner receiving prescribed medication (YX007) - Sensitive/Ir	rrelevant 50MC	
Sensitive/Irrelevant (135A.)	JOING	
Transfer moved in (Y3424)		
Has no concerns over their physical health (Y08dd)		
Has not received physical injuries recently (Y08d8)		
Smoker (137R.)		
Yes (Y0427) - denies		
Self-administration of medication (Ua1VE)		
Chlamydia screening declined (XaJdS)		
Prisoner assessment for in-possession medication complete	d (XaPim)	
Health care services information leaflet given (XaLMh)	,	
Oxygen saturation at periphery (X770D) 99 %		
Pulse (XalBo) 68 bpm		
Temperature (X75Xk) 36.5 C		
O/E - rate of respiration (235) 16 Resp/min		
Current health problems (Y3536) - Appears fit and well. Curre	ently prescribed 50mg of Sensitive/Irrelevant	
According use disorders identification test (XMDaD) () - How of	ften do you have a drink containing the up	?: Never
How often have you had 6 or more units if female, or 8 or mo	re if male, on a single occasion in the last ye	ear?: N/A
The state of the last year have you follow that you ward	not anio to ctop drinking	
How often during the last year have you failed to do what was drinking?: N/A	s normally expected from you because of yo	our
How often during the last year have you needed an alcoholic	alabati fa sta	
How often during the last year have you needed an alcoholic drinking session?: N/A	drink in the morning to get yourself going af	iter a heavy
How often during the last year have you had a feeling of guilt	Or romores offer deleting to the	
How often during the last year have you been unable to reme been drinking? N/A	ember what happened the wind the	
been drinking?: N/A	imber what happened the hight before becar	use you had
Have you or somebody else been injured as a result of your a	drinking2: N/A	
Has a relative or friend, doctor or other health worker been codown?: N/A	Incerned about your drinking as assessed to	
down?: N/A	meethed about your drinking or suggested y	ou cut
African - ethnic category 2001 census (XaJR7)		
Prison first reception health assessment completed (XaYXV)		
Body mass index - observation (22K) 25.12 Kg/m²		
O/E - weight (22A)   Sensitive/Irrelevant   (11 st 6 lb)		
Self medication assessment - moderate risk (Xalni)		
Case management risk assessment score (XaLWw) 1 - Has prescription medicines in the community or in the previous pri	the detainee been responsible for self-admi	injetration of
Does the detainee have any learning difficulties, problems with	h reading labels or language difficultio. N	<b>1</b>
The me detailed and stood and sluffer the medicaling comp	pact?: No	•
Is the detainee vulnerable or at risk of being bullied?: No		
Is the detainee currently on an Open ACDT or have a history of	of significant self-harming?: No	
The detailed a history of a serious shicing affective No.		
Have there been concerns regarding the detainee concealing.	hoarding or trading medication in the last 6	months?
Is the detainee confused or disorientated?: No		
Does the detainee have a history of alcohol and/or substance	misuse?: No	
Fhu 12 Oct 2017 10:23	<u> </u>	!
Confidential: Personal Data	D1473	(10405434)
TO THE WAR	,[	DPA

Smoking cessation advice (Ua1Nz)

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Prisoner has received medication for mental health problems (YX019)
        Additional note (Xalg3) - appears calm and stable denies thoughts of deliberate self harming
        Prisoner does not feel like Self Harming or Suicide (Y0903)
        No suicidal thoughts (XaIJ7)
        Has not stayed in a psychiatric hospital (Y08e2)
        Prisoner has not received treatment from a psychiatrist outside prison: no (Y09ce)
        Additional note (Xalg3) - good eye contact and co-operative
        H/O: mental health problem (YA741) - currently prescribed sertraline 50mg
        Fit for normal location, work and any cell occupancy - Referred to doctor (Y09d6)
        Fit to attend gym (XaKkp)
        Second Reception Screening (Y0da6)
        Agreement of care plan (Xa4HX)
        Has not tried to harm themselves (In prison) (Y08de)
        Prisoner has not tried to harm themselves (outside prison) (Y09fa)
        Refer to doctor Re: prisoners physical health (YX028) - GP TO PRESCRIBE MEDS. REFUSED TO BE BOOKED
        FOR GP
        No thoughts of deliberate self harm (Xaluw)
        HIV screening test (Xalon)
        Hep B Vacc - offered and refused (Y075b)
        Hepatitis C screening offered (XaLDh)
        Hepatitis C status - Unknown (Y0971)
        Sensitive/Irrelevant (43C2.)
        Tuberculosis screening (6831.)
        Hepatitis B immunisation recommended (XaMe9)
       Hepatitis B status - Unknown (Y096c)
       not required (Y1471)
       not required (Y1471)
       Prisoner has a psychiatric nurse or care worker in the community : no (Y09d1)
       not required (Y1471)
       Not known if had MMR Vaccination (Y08ec)
       Hep C test - Assessed as not appropriate to offer (Y0ac3)
       Meningitis Vaccination: unknown (Y0931)
       not required (Y1471)
       121 / 55 mmHg (Sitting)
       121 / 55 mmHg
       Prison Number Amendment - Prison number changed from 'A7856CY' to '10405434'
 04 Aug 2017 08:54
                        Surgery: ALLENBY, Andrea (Senior Administrator) @ Heathrow Immigration Removal Centre
       First Name Changed From D1473
 04 Aug 2017 14:02
                         Surgery: BARCLAY, Maria (Healthcare Assistant) @ IRC The Verne
       Current Home Address:
                                          Sensitive/Irrelevant
      ig 2017 14:02
                         Surgery: Unknown Staff Member
                                                                                           Entered: 20 Aug 2017 00:30
       Current Home Address:
                                        Sensitive/Irrelevant
04 Aug 2017 14:02
                        Surgery: Unknown Staff Member @ IRC The Verne
       (Admission Med) cream (Forum Health Products Ltd) - 500 grams - as directed
       Stopped 14 Aug 2017 End of course by FOWLER, Jane (Dr)
       (Admission Med) sensitive/irrelevant 50mg tablets - 28 tablets - 1 tablet - admin times: 16:00 (Oral)
                        Surgery: BARCLAY, Maria (Healthcare Assistant) @ IRC The Verne
       History: Returned to The Verne after a one day transfer to Colnbrook
      Examination: Detainee didnt want to answer the reception screening again and stated nothing has changed since he
      last completed the screening. Took new weight, BP and sats, referred to MH team, as was engaged with them prior
      to his transfer, and booked in with GP under new recep appts at detainees request for a pre asses for Rule 35. Has
      returned with 22 x 50mg sensitive/Irrelevant tablets, NIP
      Presenting complaint (Xalm8) - Thid detainee has returned to the Verne from Colnbrook,
      Differential diagnosis (XSMiS)
      72ka
      Planned mental health assessment (XalOh)
      Psychiatric self-referral (8HJ3.)
      O/E - weight (22A..)
Thu 12 Oct 2017 10:23
                                                                                           D1473
                                                                                                             (10405434)
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                                                                                                                DPA
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Oxygen saturation at periphery (X770D) 99 %

Pulse rate (X773s) 59 bpm

Referral by health worker (XaAZ8)

Current medication (Y3537) - | Sensitive/Irrelevant 50mg

Contact with mental health service (Y04cf) - was previously engaged with MH team prior to transfer to Colnbrook ( transerred on 03/08/17 returned to Verne 04/08/17)

Reception room (Ua0fa)

Reception room (Ua0fa)

Current health problems (Y3536) - Very low in mood, dispondant, withdrawn

Referral from other (Y1940)

Notes summary on computer (9344.) - Maria Barclay		
Notes summary	on computer (9344.) - Healthcare	
Referral to prima	ary care mental health team (XaMhM) (Ongoing Episode)	
122 / 64 mmng	( Lamin, (Oligoling Episode)	
04 Aug 2017 14:02	Surgery: BARCLAY, Maria (Healthcare Assistant) @ IRC The Verne	
SystmOne Outg	oing Record Sharing consent changed to: No	
04 Aug 2017 16:15	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne	
04 Aug 2017 16:16	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne	
05 Aug 2017 16:32	Surgery: CHIMBWANDA, Chenai (Ms) (Nurse Practitioner) @ IRC The Verne	
05 Aug 2017 16:33	Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne	
06 Aug 2017 16:51	Surgery: CHIMBWANDA, Chenai (Ms) (Nurse Practitioner) @ IRC The Verne	
06 Aug 2017 16:51	Surgery: CHIMBWANDA, Chenai (Ms) (Staff Nurse) @ IRC The Verne	
0 ug 2017 01:24	Health Centre: ROBINSON, Helen (Assistant Practitioner) @ IRC The Verne	
Application by pr	isoner to see doctor (XaPi2) - rule 35 assessment booked 14/08	
07 Aug 2017 13:00	Surgery HUDGEL Topi (Mrs.) (Admin/Clinical Surgery Admin/Clinical Su	
07 Aug 2017 16:49	Surgery: HUDGELL, Toni (Mrs) (Admin/Clinical Support Access Role) @ IRC The Verne Surgery: SMITH, Zoe (Practice Nurse) @ IRC The Verne	
07 Aug 2017 16:49	Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Verne	
08 Aug 2017 16:56	Surgery: SMITH, Zoe (Practice Nurse) @ IRC The Verne	
08 Aug 2017 16:57	Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Verne	
09 Aug 2017 16:48	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne	
09 Aug 2017 16:48	Surgery: CAMPBELL, Sharon (Ms) (Nurse Manager) @ IRC The Verne	
10 Aug 2017 16:51	Surgery: KOTKOWSKA, Sandra (Assistant Practitioner) @ IRC The Verne	
10 Aug 2017 16:51	Surgery: KOTKOWSKA, Sandra (Assistant Practitioner) @ IRC The Verne	
11 Aug 2017 11:45	Surgery: KOTKOWSKA, Sandra (Assistant Practitioner) @ IRC The Verne	
cream (Forum	Surgery: FOWLER, Jane (Dr) (Salaried General Practitioner) @ IRC The Verne	
medication 22 Au	m Health Products Ltd) - 500 grams - as directed (500 grams every 28 days) (Future dated	
Custom script: Printed On Fri 11 Aug 2017 11:46 By Dr Jane Fowler		
11 Aug 2017 17:58	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne	
11 Aug 2017 18:13	Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurse) @ IRC The Verne	
12 Aug 2017 16:46	Surgery: SMITH, Zoe (Practice Nurse) @ IRC The Verne	
12 Aug 2017 16:47	Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Verne	

11 Aug 2017 17:58 Surgery: MAKGANYE, Kgomotso (Miss) (Staff Nurs	COV @ IDC The Visco
11 Aug 2017 18:13 Surgery: MAKGANYE Kgomotso (Miss) (Staff Nurs	se) @ IRC The Verne
The state of the s	se) @ IRC The Verne
	Verne
12 ag 2017 16:47 Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Veri	ne
12 3 2017 18:52 Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Veri	no
13 Aug 2017 00:46 Surgery: ROGERS, Julie (Staff Nurse) @ IRC The Ver	,

Paracetamol 500mg tablets - 2 - 500mg

13 Aug 2017 12:23 Surgery: SZEL, Margit (Dr) (Sessional GP) @ IRC The Verne

Medication requested (8B3H.) - Via task

(R) sensitive/irrelevant 50mg tablets - 28 tablets - 1 tablet - admin times: 08:30 (Oral) (Future dated medication 21 Aug 2017) Stopped 14 Aug 2017 Change of Dosage by FOWLER, Jane (Dr)

sensitive/Irrelevant 50mg tablets - 28 tablets - 1 tablet

Ended 14 Aug 2017 Change of Dosage by FOWLER, Jane (Dr)

Custom script: Printed On Sun 13 Aug 2017 12:26 By Dr Margit Szel 13 Aug 2017 16:27 Surgery: SMITH, Zoe (Practice Nurse) @ IRC The Verne 13 Aug 2017 16:27 Surgery: SMITH. Zoe (Staff Nurse) @ IRC The Verne 14 Aug 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 01 Sep 2017 07:51

General Letter to Gatwick Immigration Removal Centre Surgery: ARNOLD, Kerry (Mrs) (Administrator) @ IRC The Verne 14 Aug 2017

Entered: 14 Aug 2017 12:44 General Document to HOme Office 14 Aug 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 01 Sep 2017 07:51 rule 35 and response

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Printed by BOWERS, Ma	ary (	Satwick Immigration Removal Ce	ntre	17 of 97
20 Aug 2017 00:30	Surgery: OMORAK	A, Edward (Mr) (Mental Health N	lurse)	
20 Aug 2017 00:30	Surgery: Unknown	Staff Member		
(Admission Med)	icream (Forum I	Health Products Ltd) - 500 grams	- as directed (Future dated	medication 22 Aug
2017)				
(Admission Med)	Paracetamol 500mg	tablets - 2 - 500mg		
(Admission Med)	i Sensitive/Irrelevant i 100mg ta	blets - 4 tablets - 1 tablet - admin blets - 28 tablets - 1 tablet - admi	times: 08:30 (Oral)	ata ta ta a ta a ta a ta a ta a ta a t
21 Aug 2017)	i roomg ta	olets - 20 tablets - T tablet - auriji	n times. 08.30 (Orai) (Future	dated medication
20 Aug 2017 00:30	Surgery: OMORAK	A, Edward (Mr) (Mental Health N	lurse)	
	ng Record Sharing	consent changed to: Not asked -	Record shared	
20 Aug 2017 00:30		A, Edward (Mr) (Mental Health N		
	received from outs	ide source (YX002)	idi 30)	
Has no outstandin	ng hospital/ Doctors	appointments (Y07f8)		
	ler (X00SO) (New E	pisode)		
Born in Nigeria (X				
Main spoken lang	uage English (XaG5	t)		
sensitive/irrelevant (135A.) Speaks English w	oll (13767)			
Not disabled (Y34				
		ell occupancy (YX035)		
Impressions of the	prisoners behaviou	ir and mental state (YX023) - App	pears mentally low in mood	
Never (Y4062)	,	, , , , , , , , , , , , , , , , , , ,	odaro montany low in mioda	
H/O: chickenpox (				
Health related obs	ervations about the	prisoners physical appearance (	YX010) - Appears physically	tired
Observation of app	pearance of skin (Ua	a1c1) - Skin observation appears	healthy	
Fit to attend gym (	,хаккр) e for in-possession r	nodication (YaVM6)		
	ofessional (XaBfx) -			
Self medication as	ssessment - high risk	c (Xalni)		
At risk state (Xa1o	(c) 10 - 1 patient h	as self-administered their prescri	bed medication in the comm	unity or another
prison?: No				amey or another
2. The patient has	understood and sig	ned the IP medication compact?:	No	
3. Has patient any	learning disabilities	problems with reading labels or	language difficulties?: No	
4. There is known	nistory of medication and control of the control of the clinical control of the clinical control of the control	n related incidents e.g. trading, bi	ullying, overdosing, non com	pliance, in the
5 The natients had	s an open ACCT do	cument or had one closed within:	the post four weeks 2. Ves	
6 is the patient cor	nfused or disorientat	ed? No	the past four weeks?: Yes	
7. Has the patient	had a recent change	e in prison status (e.g. recently se	entenced) or a recent life eve	ent?: Yes
<ol><li>Is the patient un</li></ol>	der care of In reach	or in the process of being referre	ed?: Yes	aite. 163
		_		
Alcohol screen - A	UDIT PC completed	(XaMyj) 0 - 1 - How often do yo	ou have a drink containing al	cohol?: Never
2 - How many units	s of alcohol do you h	have on a typical day when drinki	ng?: N/A	
4 - How often durin	ig the last year have	e you found that you were not able e you failed to do what was norma	e to stop drinking once you h	nad started?: N/A
drinking?: N/A	ig the last year have	you lailed to do what was norma	ally expected from you becat	ase of your
	or friend, doctor or o	ther health worker been concerne	ed about your drinking or suc	nested you cut
down?: N/A				
6 - How often do ye	ou have 8 or more u	nits if male, or 6 or more units is	female, on a single occasion	in the last year?:
N/A				-
/ - How often durin	ig the last year, have	e you needed an alcoholic drink ii	n the morning to get yourself	f going after a
heavy drinking ses		had a feeling of guilt or remorse	after defeation O. 8148	
9 - How often durin	in the last year have	you been unable to remember w	arrer drinking?; N/A	
had been drinking?	?: N/A	you been unable to remember w	mat happened the hight beit	ne because you
		njured as a result of your drinking	?: N/A	
		_		
	possession medicati	on (XaYM6)		
Interpreter not need				
	in prison before (YX			
	er (YX039) - Not regi	stered with a GP (YX025) - Headache, depression		
Sensitive/Irrelevant (X76)	6a)	(17020) - Fleadache, depression	ı	
Thu 12 Oct 2017 10:23	- 1/		·	1/40405404
Confidential: Personal Da	ta		D1473	(10405434)
				, DPA

HOM029928\_0017

Patient consented to sharing of information (Y3358)

Medical/psychiatric report required (YX001)

Adult male (Y3072)

Health Information the prisoner thinks is important (YX024) - Depressed

Pulse rate (X773s) 63 bpm

O/E - temperature (XaBzA) 37 degC

O/E - height (229..) [Sensitive/Irrelevant]

Sensitive/Irrelevant (BCG) vaccination (653..)

Prison first reception health assessment completed (XaYXV)

Educated at mainstream school (Ua0SC)

Second Reception Screening (Y0da6)

Open F2052SH (YX033)

Able to write (XaAzO)

O/E - weight (22A ) Sensitive/Irrelevant

Able to tell the time (Xa3BE)

Able to read (XaBme)

Referral for mental health assessment (XaLNF)

Prisoner has received medication for mental health problems (YX019)

Prisoner has not received treatment from a psychiatrist outside prison: no (Y09ce)

Emotional state observations (Ua16B) - Appears emotionally low

Prisoner has a psychiatric nurse or care worker in the community : no (Y09d1)

Reasons for prisoner to see the doctor (YX025) - Depression, ON ACDT, HEADACHE

Prisoner has tried to harm themselves (in prison) (YX020)

Prisoner has not tried to harm themselves (outside prison) (Y09fa)

Patient has previously used drugs (Y2479) - Cannabis

Prisoners alcohol intake week before custody (YX013) 0 Units / Week

Refer to doctor Re: prisoners physical health (YX028)

Smoker (137R.)

Has not stayed in a psychiatric hospital (Y08e2)

Suicidal thoughts (1BD1.)

No thoughts of deliberate self harm (Xaluw)

112 / 63 mmHg

Referral to D1473

Prison Number Amendment - Prison number changed from 'A7856CY' to '10405434'

Medication In Possession Status: Not in possession

Not suitable for in-possession medication (XaYM6)

	m procession medication (Nativio)
20 Aug 2017 02:18	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
20 Aug 2017 02:26	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
20 Aug 2017 02:48	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
20 Aug 2017 09:12	Surgery: BATCHELOR, Donna (Miss) (Staff Nurse)
20 Aug 2017 09:12	Surgery: BATCHELOR, Donna (Miss) (Staff Nurse)
20 Aug 2017 10:27	Surgery: WELLS, Nicola (Miss) (Healthcare Assistant)
	I.D. D. L. (Plane)

History: Entered By D.Dowd (RMN)

D1473 ACDT review was attended by M. Brown, A. Lynden and D.Dowd.

Was placed on Constant Supervision after he reported that he was having suicidal thought. Upon seeing him on my visit to E wing earlier this morning D1473 said was having suicidal thought when he arrived at the centre because he becomes afraid whenever he is behind lock doors (claustrophobic) and because he wanted to share room with his friend whom he had arrived with. He was compliant with his prescribed medication [sensitive/Irrelevant]100 mg).

Did not wish to see RMN when he was asked if he would like to talk with me about any concern/issue he might has, said " not at the moment", he was informed that and appointment would be given following a referral that was received from the nurse that admitted him.

#### ACDT Review:

Reported that he was fine, but he still does not want to be here, he also stated that he still does not want to be behind close doors." but I guess I have to".

It was confirmed that it would be arranged for him to share room with his friend, but this will not be done until they are confident that it is safe for him to do so.

He was informed that immigration had confirmed that his solicitor has submitted an appeal and they are considering it.

Said he is in contact with his partner, but she cannot visit him here because of the distance.

He is currently allowed to leave E wing for association and return for lock down following his request, said he would

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D1473	(10405434
	DPA

rather to be able to move around that to be locked on E wing.

Was taken off the wing for orientation by an officer. He has denied active suicidal thoughts and self harm ideation. Plan: Hourly observation

To be tranfer to an association wing and to share room with his friend.

20 Aug 2017 16:05 Brook House - Healthcare, Surgery: DOCTOR, Brook House Entered: 21 Aug 2017 05:50 Did not attend for B GP Clinic appointment with Brook House Doctor.

Did not attend (Xa1kG)

Reminder/Alert: Did not attend for B GP Clinic appointment with Brook House Doctor.

Please inform the patient that if they cannot attend an appointment in the future they should inform staff so that it can be cancelled ASAP. - Priority: Normal

20 Aug 2017 20:51 Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse) 21 Aug 2017 08:20 Surgery: NEWLANDS, James (Mr) (Mental Health Nurse) 21 Aug 2017 08:20 Surgery: NEWLANDS, James (Mr) (Mental Health Nurse) 22 Aug 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 24 Aug 2017 07:58 Prescription or Medication details to Unknown

22 Aug 2017 Surgery: LEIGHTON, Julie (Practice Nurse) @ IRC The Verne Date (Xa0ck) 22 Aug 2017 08:59 Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)

22 Aug 2017 08:59 Surgery: NEWLANDS, James (Mr) (Mental Health Nurse) 22 Aug 2017 14:24 Surgery: CHAUDHARY, Saeed (Dr) (Doctor)

Sensitive/irrelevant: 100mg tablets - 28 tablets - 1 tablet - admin times: 08:30 (Oral) (Future dated medication 23 Aug 2017) Custom script: Printed On Tue 22 Aug 2017 14:25 By Dr Saeed Chaudhary

ug 2017 19:10 Surgery: JITTA, Skeete (Mental Health Nurse) Referral to D1473 23 Aug 2017 08:14 Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse) 23 Aug 2017 08:14 Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse) 24 Aug 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 24 Aug 2017 12:43 General Letter to Unknown

24 Aug 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 29 Aug 2017 09:33 Prescription or Medication details to Unknown

24 Aug 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 24 Aug 2017 12:43 notes printed for medical justice

24 Aug 2017 03:00 Surgery: WELLS, Nicola (Miss) (Healthcare Assistant) Entered: 26 Aug 2017 03:00

Quantity (X75QM) - 2

Paracetamol 500mg soluble tablet (di22.)

Time (Xa0cj) - 20.50

Patient requested treatment (8M4..) - headache

No further action required (Y0488)

Unit (X8001)

ug 2017 04:30 Surgery: WELLS, Nicola (Miss) (Healthcare Assistant)

History: Returned from charter flight stated that he feels more Depressed mood (XE0re)because of the way he has

Wanted to see a psycharitristas he stated he was meant to see one before he left.

Doctors appointment made for today

Referral made for Mental Health.

Referral to

24 Aug 2017 09:46 Surgery: DOWD, Daliah (Mental Health Nurse)

History: Was off E wing when I went to administer his medication and he did not attend healthcare for same. Wing officer informed me that he was at the gym as he is allowed to leave the wing during the day

24 Aug 2017 09:46 Surgery: DOWD, Daliah (Mental Health Nurse) Entered: 24 Aug 2017 09:49

24 Aug 2017 11:34 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)

notes printed for medical justice

24 Aug 2017 12:05 Brook House - Healthcare, Surgery: DOCTOR, Brook House

Entered: 25 Aug 2017 02:14

Did not attend for GP E-WING appointment with Brook House Doctor.

Did not attend (Xa1kG)

Reminder/Alert: Did not attend for GP E-WING appointment with Brook House Doctor.

Please inform the patient that if they cannot attend an appointment in the future they should inform staff so that it can be cancelled ASAP. - Priority: Normal

24 Aug 2017 15:39 Surgery: OOZEERALLY, Husein (Dr) (Doctor)

Thu 12 Oct 2017 10:23 Confidential: Personal Data

History: NEW ARRIVAL

has appt with RMN tomorrow.

On sensitive/Irrelevant for 1 month

c/o that removal yesterday forRDs he feels has traumatised him.

Plan: to attend Mental health tomorrow

(R) sensitive/irrelevant 100mg tablets - 28 tablets - 1 tablet - admin times: 08:30 (Oral)

Stopped 26 Aug 2017 End of course by OOZEERALLY, Husein (Dr)

Sensitive/Irrelevant 100mg tablets - 28 tablets - 1 tablet

Ended 02 Oct 2017 Patient Deducted (Sentence Ended)

Custom script: Printed On Thu 24 Aug 2017 15:45 By Dr Husein Oozeerally

24 Aug 2017 20:54 Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse) 24 Aug 2017 23:32 Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)

Unit (X8001)

No further action required (Y0488)

Time (Xa0cj) - 20.50

Paracetamol 500mg soluble tablet (di22)

Quantity (X75QM) - 2

Patient requested treatment (8M4..) - headache

25 Aug 2017 03:02 Surgery: WELLS, Nicola (Miss) (Healthcare Assistant) Entered: 26 Aug 2017 03:02

Quantity (X75QM) - 2

Paracetamol 500mg soluble tablet (di22.)

Patient requested treatment (8M4..) - headache

No further action required (Y0488)

Unit (X8001)

Time (Xa0cj) - 12.50

25 Aug 2017 13:32	Surgery: JITTA, Skeete (Mental Health Nurse)
25 Aug 2017 13:32	Surgery: JITTA. Skeete (Mental Health Nurse)
25 Aug 2017 20:19	Surgery: OWITI, John (Mr) (Mental Health Nurse)
25 Aug 2017 20:22	Surgery: OWITI, John (Mr) (Mental Health Nurse)
26 Aug 2017 08:51	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
26 Aug 2017 08:52	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
26 Aug 2017 10:11	Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)
Montal booth as	(Mir) (Merital Health Nurse)

Mental health assessment (XalYN)

He has not seen his mother or had any contact with her since he was 4 years old.

His father is alive still living in Nigeria however he has not had any contact with him since he left. He is the only child from his parents relationship.

He is in a relationship at the moment with his girlfriend and they have a daughter who is 3 months old. He says he also has another 10 year old daughter from a previous relationship whom he is also in contact with. Feels he has a good relationship with his present partner.

Mental health assessment (XalYN) - Describes himself as having a substance misuse problem some years ago however said that he addressed this and solved the problem.

Mental health assessment (XalYN)

When he was young and in Nigeria said he spent a short time in prison because of Sensitive/Irrelevant Here in the UK he served half of a 27month sentence after being found guilty of Sensitive/Irrelevant Mental health assessment (XalYN)

Seen this morning in Talking Therapies.

Informs me that the moment he is feeling traumatised because he had been taken to the airport a few days ago to be put on a flight to be deported back to Nigeria however said this had been cancelled because he had put an application in for asylum.

He feels this has brought back memories and flashback of what had happened to him in Nigeria when he was tortured and beaten because of his Sensitive/Irrelevant This he says has also caused him problems with sleeping at night being afraid to share a room as he had been previously when he was in prison in Nigeria which he said was because of sensitive/Irrelevant

Mental health assessment (XaIYN)

He said that he had been seen by the mental health team in the Verne IRC before he came here. Had been referred to see the psychiatrist but was transferred here before this could happen.

He was treated with sensitive/irrelevant Tablets 100mg daily which has continued when he came here.

Mental health assessment (XaIYN)

He is a 29 year old male originally from Nigeria who came to the UK in 2005 on a visitors visa to his stepmother's home, however did not return because he felt his life would be in danger after he had been beaten up and tortured

Thu 12 Oct 2017 10:23 D1473 Confidential: Personal Data (10405434) DPA

by people from his town because { Sensitive/Irrelevant !

Describes his childhood as being normal up to this time, however says he never new his mother and was brought up with his father whom he said had 3 wives. He was the only child from his fathers marriage to his mother. He attended normal schooling leaving secondary school at the age of 17. He said that he never worked in Nigeria but had to leave not long after leaving school because he was in danger.

Mental health assessment (XaIYN)

Appeared to be very anxious at the appointment saying that he is feeling very stressed. He feels this is a result of him being taken to the airport some days ago when he was told he was being sent back to Nigeria. This he says has brought flashbacks. Stated that he sometimes hears the voice of his dead uncle who committed suicide when he was 31 years old. He describes this voice as being inside his head and talking to him.

During the appointment he did appear to be very anxious and concerned about what had happened to him saying that he cannot go back to Nigeria as he will be in danger there. He engaged in conversation and managed to maintain good eye contact when speaking to me. There was no evidence of any psychotic thoughts or content in his speech and denies any thoughts of self harm or suicidal ideation at this time. Referral to mental health team (XalPw)

Mental health assessment (XalYN) - Continue with RMN support. Emotional health Group also discussed and he has agreed to try this to see if this can help manage his anxiety attacks.

Specialist mental health assessment (XaK6K)

Mental health assessment (XalYN) - Already on an open ACDT with 1 observation every 3 hours which is due for review on 29/08/2017.

Personal status (XE2Pi)

He has a solicitor managing his case and has made a new application for asylum and bail. Awaiting a date for the hearing to be arranged.

States that he has a rule 35 completed which was done when he was at the Verne I.R.C.

Has had no further information on his case from immigration since his previous flight was cancelled. Mental health assessment (XalYN)

29 year old male originally from Nigeria who came to the UK in 2005 because he felt his life was in danger because Of Sensitive/Irrelevant

Has been seen by the mental health team when he was at the Verne I.R.C. saying he had an appointment to see the psychiatrist however he had been transferred here before this could happen.

Has had a substance misuse history in the past however he said he managed to sort this problem out and has stopped using alcohol or illicit substances.

Feels that the trauma of being taken to the airport recently to be deported back to Nigeria has brought back flashbacks of what has happened to him there.

He is in a relationship at the moment having a 3 month old daughter with his partner. He also says he has a 10 year old daughter from a previous relationship whom he says is in regular contact with.

26 Aug 2017 11:26 Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)

Primary Mental Health Care Plan Care Plan Created

Primary Mental Health Care Plan Instruction: Observe level of mood i.e. flat, enthymic or elevated and document on SystmOne

Primary Mental Health Care Plan Instruction: Observe for evidence of delusional thought / psychotic behaviour and document on SystmOne

Primary Mental Health Care Plan Instruction: Discuss food and fluid intake and document appetite levels Primary Mental Health Care Plan Instruction: Discuss and document sleep pattern

Primary Mental Health Care Plan Instruction: Offer appropriate sessions to discuss any fears or anxieties Primary Mental Health Care Plan Instruction: Observe/enquire activities of daily living

Primary Mental Health Care Plan Instruction: Ensure medication is taken inform Mental Health team if medication refused for 3 or more days

Primary Mental Health Care Plan Instruction: Observe/enquire levels of engagement with others (i.e. are they

Primary Mental Health Care Plan Instruction: Assess suicide/self-harm risk

Primary Mental Health Care Plan Instruction: Offer ongoing reviews and if required, refer to psychiatrist

Primary Mental Health Care Plan Instruction: PATIENT to take responsibility for HIS/HER own mental well being, and request support if required

Primary Mental Health Care Plan Review next due on 18 Sep 2017 11:28

The state of the sep 2017 11.20
Surgery: OOZEERALLY, Husein (Dr) (Doctor)
Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
Surgery: PERSAUD, Armanath (Other Community Health Service)
Surgery: PERSAUD, Armanath (Other Community Health Service)
Surgery: HAYEK, Mai (Staff Nurse)

Thu 12 Oct 2017 10:23

Confidential: Personal Data

D1473	(10405434)
,	DPA

given. 01 Sep 2017 09:00 Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant) 01 Sep 2017 09:00 Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant) 01 Sep 2017 16:24 Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse)

Plan: Now requesting to be emergency which i explained to him he will wait for his appointment and a slip been

History: RMN

Examination: Seen for follow up support session.

Angry about the way he was taken for a flight and stressed about the future.

States that the removal has given him stomach pain and flashbacks.

Allowed to ventilate his thoughts and feelings.

Feels that nobody cares.

Encouraged to attend the emotional health group and continue to attend the gym.

Plan: Follow up appointment offered for 8/9/17 at 10:30

1		L di 10.00
	02 Sep 2017 09:02	Surgery: TROWER, Sheila (Staff Nurse)
ĺ		Surgery: TROWER, Sheila (Staff Nurse)
	02 Sep 2017 17:45	Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)
	I linta a A O D T	outgoty: NEWEANDS, James (MII) (Mental Health Nurse)

History: ACDT review

Examination: Seen with DCM Shane Farrell.

Denies any thoughts of self harm or suicidal ideation at the moment.

Plan. ACDT to remain open with observations now at 1 x A.M., 1 X P.M. and every 3 hours during the night. Next review has been arranged for 06/09/2017.

03 Sep 2017 09:06	Surgery: JITTA, Skeete (Mental Health Nurse)
03 Sep 2017 09:07	Surgery: JITTA, Skeete (Mental Health Nurse)
04 Sep 2017	Surgery POWEDS Many (Admit 40)
General Letter to	Unknown Entered: 05 Sep 2017 06:55

04 Sep 2017 00:10 Surgery: LLAUDES, Maria (Miss) (Healthcare Assistant) Entered: 05 Sep 2017 02:14

Unit (X8001)

No further action required (Y0488)

Patient requested treatment (8M4..)

Time (Xa0cj) - 00;10

Paracetamol 500mg soluble tablet (di22.)

Quantity (X75QM) - 2 headache

04 Sep 2017 09:10	Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant)
04 Sep 2017 09:10	Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant)
04 Sep 2017 11:35	Surgery: ALRED, Deborah (Ms) (Occupational Therapist)
Llioto au Ctur	Actives, Bebolah (MS) (Occupational Therapist)

History: Stress management (Ub014)

Thu 12 Oct 2017 10:23 Confidential: Personal Data

### **Emotional Health Group**

DNA

_Plan:	То	COI	ntinue	to	attend	the	aroup

, lan. To continue	to attend the group	
04 Sep 2017 15:11	Surgery: OOZEERALLY, Husein (Dr) (Doctor)	-
Referral to	D1473	
04 Sep 2017 16:16	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	
notes printed for r	medical justice	
05 Sep 2017 08:52	Surgery: OWITI, John (Mr) (Mental Health Nurse)	
05 Sep 2017 08:52	Surgery: OWITI, John (Mr) (Mental Health Nurse)	
05 Sep 2017 15:25	Brook House - Healthcare, Surgery: DOCTOR, Brook House	Entored OF O
Did not attend for	B GP Clinic appointment with Brook House Death	Entered: 05 Sep 2017 15:37

Clinic appointment with Brook House Doctor.

Did not attend (Xa1kG)

Reminder/Alert: Did not attend for B GP Clinic appointment with Brook House Doctor.

Please inform the patient that if they cannot attend an appointment in the future they should inform staff so that it can be cancelled ASAP. - Priority: Normal

05 Sep 2017 15:38 Surgery: OOZEERALLY, Husein (Dr) (Doctor)

History: Abdominal pain.

day and night, worse at night, every 4 hours.

sharp pain, taking regular paracetamol.

no recorded fever.

1 x vomit last night.

PU and BO normal

does not stop him from attending gym and exercising.

Examination: abdomen soft.

BS ++

well perfused and alert

Plan: non specific abdo pain.

adv to start eating and drinking better.

rev in 2 weeks or if worsening

O/E - pulse rhythm regular (2431.)

Pulse rate (X773s) 64 bpm

143 / 68 mmHa

06 Sep 2017 09:11	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
06 Sep 2017 09:11	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
06 Sep 2017 09:16	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
06 Sep 2017 09:17	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)
07 Sep 2017 09:07	Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant)
07 Sep 2017 09:07	Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant)
08 Sep 2017 08:59	Surgery: JITTA, Skeete (Mental Health Nurse)
08 p 2017 08:59	Surgery: JITTA, Skeete (Mental Health Nurse)
08 Jep 2017 10:17	Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)
History RMN	(

History: RMN

Examination: Did not attend with no reason given.

Plan: New appointment arranged for 15?09/2017 at 14:00. Appointment slip sent to the wing

09 Sep 2017 15:46	Common TROUGH OF THE PROPERTY OF THE WIND
	Surgery: TROWER, Sheila (Staff Nurse)
09 Sep 2017 15:46	Surgery: TROWER, Sheila (Staff Nurse)
10 Sep 2017 08:47	Surgery: JITTA, Skeete (Mental Health Nurse)
10 Sep 2017 08:48	Surgery: JITTA, Skeete (Mental Health Nurse)
10 Sep 2017 23:23	Surgery WINGERT Janina (Mrs.) (Staff N)
Unit (X8001)	Entered: 11 Sep 2017 23:46

Unit (X8001)

No further action required (Y0488)

Patient requested treatment (8M4..) - headache

Paracetamol 500mg soluble tablet (di22.)

Quantity (X75QM) - 2

Time (Xa0cj) - 23:23

11 Sep 2017 08:57	Surgery: JITTA, Skeete (Mental Health Nurse)
11 Sep 2017 08:58	Surgery: JITTA, Skeete (Mental Health Nurse)
12 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 13 Sep 2017 07:19

Thu 12 Oct 2017 10:23 Confidential: Personal Data

General Letter to Unknown

General Letter to	Unknown	24 of 9
12 Sep 2017		
medical visit	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 13 Sep 2017 07:20
12 Sep 2017 10:05	Curron CMODAKA 5	
External modica	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)	///
12 Can 2047 44 22	form as been signed for his visit	
12 Sep 2017 11:03	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)	
12 Sep 2017 11:03	Surgery, OMORAKA, Edward (Mr) (Mental Health Nurse)	
12 Sep 2017 20:47	Surgery: OWITI, John (Mr) (Mental Health Nurse)	//-
12 Sep 2017 20:49	Surgery: OWITI, John (Mr) (Mental Health Nurse)	
12 Sep 2017 23:35	Surgery: FEDORCOVA, Stanislava (Miss) (Healthcare Assistant)	Entorod: 12 Con 2017 04 50
Unit (X8001)		Entered: 13 Sep 2017 01:52
No further action	required (Y0488)	
Patient requester	d treatment (8M4)	
Paracetamol 500	mg soluble tablet (di22.)	
Quantity (X75QN	1) - 2	
Time (Xa0cj) - 23		
13 Sep 2017 08:46	Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assis	stant
13 Sep 2017 08:47	Todigery, FELLON, Jacqueline (Mrs) (Community Pharmany Assi	-41
14 Sep 2017 08:51	Surgery: PERSAUD, Armanath (Other Community Health Service	stant)
14 Sep 2017 08:52	Surgery: PERSAUD, Armanath (Other Community Health Service	9)
15 Sep 2017 09:06	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)	2)
15 Sep 2017 09:06	Surgery: OMORAKA Edward (Mr) (Mental Health Nurse)	
15 ep 2017 14:47	Surgery NEW ANDS Land (Mr) (Mental Health Nurse)	
History: RMN	Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)	
Examination: See	n for follow up support session.	
Presented as frus	trated due to an ACDT entry.	
Was allowed to w	entilate his thoughts and feelings.	
Discussed the str	estimate his thoughts and reelings.	
Plan: Follow up si	essful situation of detention and given some coping techniques to happort session offered for 22/9/17 at 10:30	nelp.
15 Sep 2017 17:09	pport session onered for 22/9/17 at 10.30	
16 Sep 2017 08:47	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)	
16 Sep 2017 08:48	Surgery: JITTA, Skeete (Mental Health Nurse)	
17 Sep 2017 09:05	Surgery: JITTA, Skeete (Mental Health Nurse)	
17 Sep 2017 09:05	Surgery: DAINES, Havva (Miss) (Staff Nurse)	
17 Sep 2017 09:05	Surgery: DAINES, Havva (Miss) (Staff Nurse)	
	Surgery: DAINES, Havva (Miss) (Staff Nurse)	
Clinical Letter to	D1473	
18 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 18 Sep 2017 09:38
General Letter to I	Jnknown Printed States	Entered: 16 Sep 2017 09:38
18 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	
Prescription or Me	dication details to Unknown	Entered: 21 Sep 2017 08 12
	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) 67f) (Ongoing Episode)	Entered: 18 Sep 2017 09:39
	Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)	
riistory, Refusing r	000 (X/6/f)Dav 1	
Examination: Seen	to complete physical health checks which he declined.	
He was sitting in hi	s bedroom eating cornflakes and milk. States the reason he is not	eating is because he does not
		and to because he does not
BRAG rating; Gree	n .,	
Plan: Continue to n	nonitor as required.	
18 Sep 2017 10:02	Surgery: FADELE, Solomon (Mr) (Staff Nurse)	
10 Sep 2017 10.03	Surgery: FADELE, Solomon (Mr) (Staff Nurse)	
10 Sep 2017 14:05	Surgery FADELE Solomon (Mr.) (Staff Nurse)	
nistory. Patient car	ne in the afternoon for his medication. He said he does come in the	040
18 Sep 2017 14:08	Surgery: FADELE, Solomon (Mr) (Staff Nurse)	alternoon sometimes
	Surgery: OOZEERALLY. Husein (Dr) (Doctor)	
	g tablets - 28 tablets - 1 tablet - admin times: 08:30 (Oral)	
Stopped 02 Oct 201	7 Sentence Ended by BOWERS, Mary	3
Custom script: Print	ed On Mon 18 Sep 2017 16:02 By Dr Husein Oozeerally	
18 Sep 2017 16:10	Surgery: FADELE, Solomon (Mr) (Staff Nurse)	
Thu 12 Oct 2017 10:23	(Staff Nurse)	
Confidential: Personal Data		<b>D1473</b> (10405434)
Commential Personal Dat	i	
		DPA

Printed by BOWERS, I	Mary Gatwick Immigration Removal Centre	05 (0
19 Sep 2017	Surgery: BOWERS Mary (Admin/Clinical Support Access Date)	25 of 9
General Letter t	o Unknown	Entered: 19 Sep 2017 10:35
19 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	[Date of 10.0]
Refusing food ()	(X767f) (Ongoing Episode)	Entered: 19 Sep 2017 10:35
19 Sep 2017 08:44	Surgery NEWLANDS James (Mr.) (Montal Hanks A)	
History: Refusin	U 1000 (X/b/t) 1)av 2	
Examination: Se	en this morning to complete physical health shocks which have	od however state to the state of
		ed nowever states he is drinking
BRAG rating; An	nber.	
Plan: Continue to	o monitor as required.	
19 Sep 2017 09:10 19 Sep 2017 09:12	Surgery: MCKAY, Stuart (Mr) (Paramedic)	
20 Sep 2017 09.12	Surgery: MCKAY, Stuart (Mr) (Paramedic)	
General Letter to	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 20 Sep 2017 11:45
20 Sep 2017		
	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 20 Sep 2017 11:45
Nerusing 1000 (A	(Ongoing Episode)	1 20 300 2017 11:40
20 Sep 2017 09:03	Surgery: JITTA, Skeete (Mental Health Nurse)	
20 Sep 2017 09:03	Surgery: JITTA, Skeete (Mental Health Nurse)	
20 Sep 2017 09:32	Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse)	
Framination Co.	1 1000 (X/6/t)Day 3	
Examination: See	en on wing.	
Refused to have	eating or drinking due to possible deportation, said he want to go hor physical observations completed.	me.
Plan: BRAG ratin	priyaical observations completed	
20 Sep 2017 10:51	Surgery DOWD, Daliah (Mental Health Nurse)	
21 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	
General Letter to	Unknown	Entered: 21 Sep 2017 11:33
21 Sep 2017		
	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) 767f) (Ongoing Episode)	Entered: 21 Sep 2017 11:33
21 Sep 2017 08:52		
21 Sep 2017 08:57	Surgery: JITTA, Skeete (Mental Health Nurse)	
21 Sep 2017 09:34	Surgery: CHURCHER Kerse (Mental Health Nurse)	
History: Refusing	Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse) food (X767f)Day 4	
Examination: coul	d not be found on wing. Therefore requested that affine	
physical observati	ions completed.	attend healthcare to have his
Plan: BRAG rating	Amber	
21 Sep 2017 20:56	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)	
22 Sep 2017	Surgery: VVELLS Michael (Admin/Clinical Support Assessed Date	Entered: 26 Son 2017 12:00
Assessments to G	datwick immigration Removal Centre	Entered: 26 Sep 2017 13:06
22 <u>Sep</u> 2017	Surgery: WELLS, Michael (Admin/Clinical Support Assess Data)	Entoned OC C
Food and Fluid As	sessment	Entered: 26 Sep 2017 13:06
22 Sep 2017 09:01	Surgery: PERSAUD, Armanath (Other Community Health Service)	4
22 Sep 2017 09:02	Surgery: PERSAUD, Armanath (Other Community Health Service)	
22 Sep 2017 09:12	Surgery, CHURCHER Karen (Mrs.) (Mental Health Nurse)	
riistory. Refusing r	000 (X/6/f)Day 5	
Examination: Seer	on wing.	
States he just wan	ts to go home.	
Declined to have h	is physical observations completed	
Plan: BRAGBRAG 22 Sep 2017 10:36		
History: Soon for h	Surgery: DOWD, Daliah (Mental Health Nurse)	
home	is mental health appointment. D1473 states that he is not eati	ng because he want to go
The importance of	him eating and drinking was asset to	s want to go
He was given time	him eating and drinking was made known. I have encouraged him	to eat and drink.
	to ventilate about his current situation and past experience which he way in which he was removed for his flight.	
was pending and a	the way in which he was removed for his flight although he told the bail hearing which he was not allowed to attend because he was re	e escort that he has court that
Said his solicitor ha	ad to withdraw his hail application because of this	fusing to eat.
Opinimied He Has I	CITOVAL WINDOW Detween the 23/00/17 02/10/17 E	anniving for the time.
He is in contact with	n his partner and children, said his 10 years old daughter will be doir	applying for Juridical review.
14 12 001 2017 10:23	;	
onfidential: Personal Dat	a	<b>D1473</b> (10405434)
		DPA

informed that she will be in safe hands and encouraged to stay positive.

Support and reassurance was given. Said he will start eating.

There was no suicidal thoughts or self harm ideation reported.

Mental health review on the 28/09/17, an appointment slip was given.

23 Sep 2017 09:07	Surgery: PERSAUD, Armanath (Other Community Health Service)
23 Sep 2017 09:09	Surgery: PERSAUD, Armanath (Other Community Health Service)
24 Sep 2017 09:07	Surgery: BATCHELOR, Donna (Miss) (Staff Nurse)
24 Sep 2017 09:07	Surgery: BATCHELOR, Donna (Miss) (Staff Nurse)
25 Sep 2017 08:58	Surgery: MCKAY, Stuart (Mr) (Paramedic)
25 Sep 2017 08:59	Surgery: MCKAY, Stuart (Mr) (Paramedic)
26 Sep 2017 09:18	Surgery: JITTA, Skeete (Mental Health Nurse)
26 Sep 2017 09:18	Surgery: JITTA, Skeete (Mental Health Nurse)
26 Sep 2017 18:51	Surgery: OWITI, John (Mr) (Mental Health Nurse)
Clinical Letter to:	D1473
27 Sep 2017 09:01	Surgery HTTA Skeets (Montal Hoolth Nurse)

27 Sep 2017 09:01	Surgery: JITTA, Skeete (Mental Health Nurse)
27 Sep 2017 09:02	Surgery: JITTA, Skeete (Mental Health Nurse)
27 Sep 2017 13:56	Surgery: NEWLANDS, James (Mr) (Mental Health Nurse)
III-A- AODT	· · · · · · · · · · · · · · · · · · ·

History: ACDT review

Examination: Seen in Talking Therapies this afternoon with DCM Darren Tomsett & RMN Karen Churcher. Not happy because his bail hearing did not go ahead last week because he was on an ACDT and TASCOR would not take him. Says he has made an application for a juditial review and waiting for a date for this. States he has thoughts at times of harming himself especially at night when he is in his room.

Informed he was on a charter flight today however says his solicitor is trying to have this cancelled. BP recorded at 123/66, Pulse 65

Plan: Remain on an open ACDT with no change to his present levels of observations at the moment

28 Sep 2017 09:07	Surgery: OWITI, John (Mr) (Mental Health Nurse)
28 Sep 2017 09:07	Surgery: OWITI, John (Mr) (Mental Health Nurse)
28 Sep 2017 12:02	Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse)

History: RMN

Examination: Did not attend his mental health appointment but was seen briefly on the wing.

Happy that his flight has been stopped but still requests support from Mental health team.

Plan: Appointment given for coffee and chat group on 29/9/17

28 Sep 2017 13:08 Surgery: WELLS, Michael (Admin/Clinical Support Access Role)

Spoke with Oscar 2 Nathan Harris - Asked if patient was for single occupancy.

Discussed with Clinical Lead Chrissie Williams and agreed that the patient is NOT single occupancy and can share. Surgery: MUTSVAIRO, Raymond (Mr) (Staff Nurse)

History: Rule 40 completed and was dropped to CSU

Risk management administration (XaJou)

Treatment not indicated (816...) - Planned removal from B WING Uppers to CSU.No use of force used.He was compliant and cooperative. No injuries sustained

Seen by nurse (XaATp)

	(/ \a; \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
28 Sep 2017 23:20	Surgery: OMORAKA, Edward (Mr) (Mental Health Nurse)	
29 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 04 Oct 2017 06:41
General Letter t	o Unknown	Entered: 04 Oct 2017 06:41
29 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 04 Oct 2017 06:41
General Letter t	o Unknown	Entered: 04 Oct 2017 00.41
29 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 04 Oct 2017 06:41
ACDT closed		72.11c/cd. 04 Oct 2017 00.41
29 Sep 2017	Surgery: BOWERS, Mary (Admin/Clinical Support Access Role)	Entered: 04 Oct 2017 06:41
ACDT closed		Entered: 04 Oct 2017 00:41
29 Sep 2017 09:22	Surgery: DOWD, Daliah (Mental Health Nurse)	
29 Sep 2017 09:22	Surgery: DOWD, Daliah (Mental Health Nurse)	
29 Sep 2017 12:41	Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse)	
History: Rule 40	review /	

History: Rule 40 review

Examination: Seen in CSU briefly with duty director S Newland.

D1473 is refusing to share and requests that he have medical single occupancy.

The discussion was interupted as he had a bail hearing. However healthcare paperwork completed.

Plan: No outcome made.

an. Ito oatoom	e made.		
29 Sep 2017 12:45	Surgery: CHURCHER, Karen (Mrs) (Mental Health Nurse)		
Thu 12 Oct 2017 10:23	i	D1473	(10405434)
Confidential: Personal [	Data L	514.0	

Printed by BOWERS, Mary Gatwick Immigration Removal Centre History: RMN Examination: Did not attend the Coffee and chat group 30 Sep 2017 13:22 Surgery: JITTA, Skeete (Mental Health Nurse) 30 Sep 2017 13:22 Surgery: JITTA, Skeete (Mental Health Nurse) 01 Oct 2017 11:40 Surgery: MUTSVAIRO, Raymond (Mr) (Staff Nurse) 01 Oct 2017 11:41 Surgery: MUTSVAIRO, Raymond (Mr) (Staff Nurse) 02 Oct 2017 11:25 Surgery: MCGONIGALL, Laurel (Mrs) (Staff Nurse) 02 Oct 2017 11:25 Surgery: MCGONIGALL, Laurel (Mrs) (Staff Nurse) 02 Oct 2017 12:38 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) 03 Oct 2017 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Entered: 09 Oct 2017 07:22 General Letter to Unknown 06 Oct 2017 12:02 Surgery: FELTON, Jacqueline (Mrs) (Community Pharmacy Assistant) sensitive/Irrelevant 100mg disposed as left centre 07 Oct 2017 03:38 Surgery: SMITH, Zoe (Staff Nurse) @ IRC The Verne Fax cover sheet to Unknown 12 Oct 2017 10:19 Surgery: BOWERS, Mary (Admin/Clinical Support Access Role) Medication A = Acute D = Dental H = Hospital O = Other 01 Nov 2013 Paracetamol 500mg tablets take 1 or 2 4 times/day PRN 32 tablets Α PO 12017 sensitive/Irrelevant 50mg tablets 1 tablet 28 tablets Ended early on 14 Aug 2017: Other (Ended after on admission medication review) by FOWLER, Jane (Dr) Administrative notes: Avoid grapefruit juice 25 Jul 2017 Sensitive/Irrelevant (Forum Health Products Ltd) as directed 500 grams Ended early on 14 Aug 2017: Other (Ended after on admission medication review) by FOWLER, Jane (Dr) A 13 Aug 2017 Paracetamol 500mg tablets 500mg 2 0 Administrative notes: Headache sensitive/irrelevant 100mg tablets 17 Aug 2017 1 tablet 4 tablets Α Administrative notes: Avoid grapefruit juice 21 Aug 2017 Sensitive/Irrelevant 100mg tablets 1 tablet 28 tablets Ended early on 22 Aug 2017: End of course by CHAUDHARY, Saeed (Dr) Α Administrative notes: Avoid grapefruit juice 21 Aug 2017 sensitive/Irrelevant 50mg tablets 1 tablet 28 tablets Ended early on 14 Aug 2017: Change of Dosage by FOWLER, Jane (Dr) Sensitive/Irrelevant! (Forum Health Products Ltd) 22 Aug 2017 as directed 500 grams 23 Aug 2017 sensitive/Irrelevant 100mg tablets 100mg tablets 1 tablet 28 tablets 24 Aug 2017 1 tablet 28 tablets Ended early on 26 Aug 2017: End of course by OOZEERALLY, Husein (Dr) 18 Sep 2017 sensitive/Irrelevant 100mg tablets 1 tablet 28 tablets Ended early on 02 Oct 2017: Sentence Ended by BOWERS, Mary Repeat Templates 24 Jul 2017 Sensitive/Irrelevant 50mg tablets 1 tablet 28 tablets 24 Jul 2017, Ended Issues: 1 End Reason: Patient Deducted (Sentence Ended) Administrative notes: Avoid grapefruit juice sensitive/Irrelevant 50mg tablets 21 Aug 2017 1 tablet 28 tablets Never, Ended Issues: 1 End Reason: Change of Dosage by FOWLER, Jane (Dr) 14 Aug 2017 sensitive/irrelevant 100mg tablets 1 tablet 28 tablets Never, Ended

## **Drug Sensitivities**

Issues: 2

Issues: 0

24 Aug 2017

Administrative notes: Avoid grapefruit juice

sensitive/irrelevant 100mg tablets

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473	(10405434)
,	DPA

18 Sep 2017, Ended

End Reason: Patient Deducted

28 tablets

End Reason: Patient Deducted (Sentence Ended)

1 tablet

**Allergies** 

CS = Chronic S Episode OE :	lummary MS = Major Summary = Ongoing Episode	OS = Minor Summary	S = Unspecified Summary	NE = New
08 Jul 2013	No known allergies (1151.)			
07 Oct 2013	No known allergies (1151.)	The state of the s		
03 Sep 2014	No known allergies (1151.)			
04 Sep 2014	H/O: multiple allergies (14M3.)		None	s

# **Problem Substances**

No information recorded

## Recalls

No information recorded

		•			
Re	m	12	м	•	20
116			u	c	13

05 Sep 2017	Did not attend for B GP Clinic appointment with Brook House Doctor.  Please inform the patient that if they cannot attend an appointment in the future	Normal Priority
Expires 2	they should inform staff so that it can be cancelled ASAP.	
24 Aug 2017	Did not attend for GP E-WING appointment with Brook House Doctor. Please inform the patient that if they cannot attend an appointment in the future they should inform staff so that it can be cancelled ASAP.	Normal Priority
Expires 1	7 Nov 2017	
20 Aug 2017	Did not attend for B GP Clinic appointment with Brook House Doctor. Please inform the patient that if they cannot attend an appointment in the future they should inform staff so that it can be cancelled ASAP.	Normal Priority
Expires 1	3 Nov 2017	
18 Jul 2017	OPEN ACDT	
14 Jul 2017	CID 10405434	High Priority Normal Priority

# Vaccinations 18 Jul 2013

18 Jul 2013			
Routine Me		Batch#: AUBVCaar-	0110
25 Jul 2013		Batch#: AHBVC235aa	GMS: Yes
Routine Me	:4:,,,///		
08 Aug 2013 <b>SENS</b>	itive/Irrelevant	Batch#: AHBVC235aa	GMS: Yes
Routine Me			
24 Sep 2014		Batch#: AHBVC235aa	GMS: Yes
24 Oep 2014			
Routine Measure		. <u></u>	
Modulie Weasure	1ml Right deltoid	Batch#: ahbvc367aa	GMS: Ves

GMS: Yes

### Summary

Julilliary		
CS = Chronic S	ummary MS = Major Summary OS = Minor Summary S = Unspecified Summary NE = N	
Episode OE :	entificacy	Vew
04 Nov 2013	Screening - health check (XM1Xs)	
04 Nov 2013	Unknown (X90UG)	S
04 Nov 2013	Meets eligibility criteria for wellbeing assessment for LTC (XaX65)	S
nil medica	Il problem	S
04 Nov 2013	Asthma: no (Y0944)	
04 Nov 2013	Epilepsy: no (Y0941)	S
04 Nov 2013	Diabetes mellitus: no (Y093f)	S
03 Sep 2014	Hepatitis C screening declined (XaLNE)	S
03 Sep 2014	Occasional cigarette smoker (Ub1tR)	S
Thu 12 Oct 2017		S

Thu 12 Oct 2017 10:23 Confidential: Personal Data

Printed by BC	OWERS, Mary Gatwick Immigration Removal Centre		29 of 9
03 Sep 2014	Hepatitis C status - Unknown (Y0971)		NE
03 Sep 2014			S
04 Sep 2014	The state of the s		S
04 Sep 2014	Completed successfully (Xa48x)	None	S
04 Sep 2014	Urine dipstick test declined (XaX2S)		S
04 Sep 2014	Not had sensitive/irrelevant vaccination (Y08f5)		S
11 Sep 2014	Main spoken language English (XaG5t)		S
11 Sep 2014	Reads English (XaIMM)		S
11 Sep 2014	Speaks English well (13Z67)		S
11 Sep 2014	In prison (XE0pK)		S
11 Sep 2014	Interpreter not needed (Xal8Y)		S
21 Oct 2014	Hepatitis B status (Xa0uu)		S
Hepatiti	s B status: Sensitive/Irrelevant vaccination		S
23 Nov 2014	Hepatitis B status (Xa0uu)		
Hepatiti	s B status: Sensitive/Irrelevant vaccination		S
14 Jul 2017	Main spoken language English (XaG5t)		
20 Jul 2017	Referral to primary care mental health team (XaMhM)		S
_			S
Referral	s x 2 discussed in the mental health team meeting on 20.07.2017. Pre	sent: Dr Liebenberg, Chena	NE NE
mood.	randa, Fiona Alford. Plan: Chenai has already seen and has full assess	sment booked in to see tomor	rrow for
04 Aug 2017	Current medication (Y3537)		
Sensitive/Irrelev	ant 50ma		S
04 Aug 2017	Contact with mental health service (Y04cf)		
was pre- 04/08/17	viously engaged with MH team prior to transfer to Colphrage ( transfer	d on 03/08/17 returned to Ver	S ne
04 Aug 2017	Reception room (Ua0fa)		
04 Aug 2017	Reception room (Ua0fa)		S
04 Aug 2017	Current health problems (Y3536)		S
	in mood, dispondant, withdrawn		S
04 Aug 2017	Referral from other (Y1940)		
04 Aug 2017	Referral to primary care mental health team (XaMhM)		S
16 Aug 2017	Referral to primary care mental health team (XaMhM)		OE S
- Referral	diagramatically		NE
Richard H	discussed in the mental health team meeting on 16.08.2017. Present:	Dr Liebenberg, Fiona Alford	
20 Aug 2017	Homer (ISMS). Plan: previously seen by Chenai. Fiona has appt boo Depressive disorder (X00SO)	oked to review need on 17.08	3.2017. S
20 Aug 2017	Not suitable for in-possession medication (XaYM6)		NE
20 Aug 2017	Health Information the prisoner thinks is important (YX024)		MS
8 Sep 2017	Risk management administration (XaJou)	Depressed	S
8 Sep 2017	Seen by nurse (XaATp)		S S
Pathology R lo information r	esults recorded		5
		(20 Aug 2017 - Ongoin	g)
pisode OE =		cified Summary NE = New	
0 Aug 2017	At risk state (Xa1qc)	10	<u> </u>
0 Aug 2017	Interpreter not needed (Xal8Y)		

20 Aug 2017

Thu 12 Oct 2017 10:23 Confidential: Personal Data

Self medication assessment - high risk (XaInj)

(10405434) **DPA** 

D1473

Printed by BOW	ERS, Mary Gatwick Immie	gration Removal Centre	
20 Aug 2017	Not suitable for in-possession medicat	tion (XaYM6)	30 of 97
20 Aug 2017	Seen by health professional (XaBfx)		MS
	processial (Addix)	eddie	

## **Inactive Problems**

No information recorded

#### Care Plans

26 Aug 2017	Primary Mental Health Care Plan (G4S Healthcare, Mental health)  Reviewed:	
	r fillidiy Welliai Health Care Plan (G4S Healthcare, Mental health)	
Care Goal: 7	To determine if there is an underlying mental health problem and treat accordingly.	
Quic Obai.	To determine it there is an underlying mental health problem and trant according to	

Review Due: 18 Sep 2017 11:28

- 1) Observe level of mood i.e. flat, enthymic or elevated and document on SystmOne
- 2) Observe for evidence of delusional thought / psychotic behaviour and document on SystmOne
- 3) Discuss food and fluid intake and document appetite levels
- 4) Discuss and document sleep pattern
- 5) Offer appropriate sessions to discuss any fears or anxieties
- 6) Observe/enquire activities of daily living
- 7) Ensure medication is taken of form Mental Health team if medication refused for 3 or more
- 8) Observe/enquire levels of engagement with others (i.e. are they isolating)
- 9) Assess suicide/self-harm risk
- 10) Offer ongoing reviews and if required refer to psychiatrist
- 11) PATIENT to take responsibility for HIS A GR own mental well being, and request support if required

## **Social Services Contacts**

No information recorded

#### **Admissions**

No information recorded

Thu 12 Oct 2017 10:23 Confidential: Personal Data

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# Communications

No information recorded

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D1473

(10405434)

DPA

### **Scanned Documents**

25 Oct 2007	Consent Form to IRC The Verne	
Letter Type		
Letter To	IRC The Verne	
Letter From	- · · · ·	
. ·		

# PRISONER CONSENT FOR MEDICATION FORM

To be issued by Night Staff

#### To be read by Night Staff to Prisoners

In the absence of Medical Staff, the Night Staff are empowered to provide medication to prisoners upon request. Antacids are available for indigestion, heartburn and nausea, and Paracetamol for headache, toothache, joint or muscle pain and back pan

In order to receive medication, prisoners must confirm to the member of staff both orally and in writing that they meet the criteria outlined above and that:

- 1. They are not currently in possession of the above medication Andror
  - 2. That they have not received the maximum dose pf Paracetamol that same day from Healthcare Staff (maximum dose is 8 tablets)"

#### Prisoner's Response

appropriate. In confirm that the above statement was read to me and that I understand it. I am not currently in possession of Paracetemol/Antacids from Healthcare and I have not received 8 Paracetemol during the course of the day

I am aware that upon request is further box of 2 Paracetamol may be given to me four hours after the first box was given to me.

Prisoner's Signature

Prison Number A 7550 CY

Date and Time of Issue 4/4/5..., 2015

Prison Staff Signature Signature

Print Name ... S.S. WHAL

Completed form must be returned to the North Gate by unlock for Healthcare to collect with the Healthcare box.

Page 1 of 2

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434)

DPA ,

Subject	Governor's Order No	009/2007
;	NIGHTS - ISSUING N	IEDICATIONS
	Originator: Date Issued:	
	Governor D Hodder	25 October 2007

# 2/2006

When no Healthcare staff are available in the Establishment, Discipline Staff are empowered to issue only two types of medication to prisoners:

- a. Paracetamol for headache, toothache, joint or muscle pain, back pain.
- Simple antacids for indigestion, heartburn or nausea.

A safe containing these items is available to the Night Orderly Officer, which is kept securely in the Comms Room.

These items are provided for a prisoner only at his request.

If a prisoner requests medication, he should be given a PRISONER REQUEST FOR MEDICATION form and asked to sign it. (The member of staff issuing the medication must satisfy himself/herself that the prisoner understands the form, and this may mean that it may need to be read to the prisoner). If the prisoner refuses to sign the request form, he should not be provided with the medication. (The forms will be held in Wing Offices)

According to their requests, prisoners will be given one box of paracetomol (containing two tablets), or one box of antacids (containing eight tablets). Staff must not open these boxes and issue the medication, as this becomes a prescribing process, which is the sole responsibility of the PCT. Boxes must be given intact and in their entirety. No further antacids will be issued, but a second box of paracetamol may be provided on request four hours after the first were issued. If at any time the condition of a prisoner gives cause for concern, the 'on-call' doctor must be consulted.

Prior to issuing paracetamol, staff should enquire if the prisoner is in possession of this medication, or has already received eight paracetamol during the course of the day from Healthcare If the answer is 'yes' to either of these questions, then no paracetamol should be issued. The prisoner's response to these questions should be recorded.

Completed request forms for medication should be placed with Healthcare key box at the North Gate for day staff to collect. Healthcare will re-stock the safe on a regular basis. The key to the safe is held on the lead nurse's key set in the gate key safe.

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434)

	07	Oct	20	13
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General Document to unknown

Letter Type

General Document

Letter To Letter From







	(Confidential when comp	leted)	
NAMED14	NOM	IS NUMBER A7856CY	<u>.</u>
	give information about your particular	needs YES'AN	<b>5</b>
If NO, please go to 0 If YES, please contin	Question 5 to sign the form.		
2. Do you consider:	yourself to be disabled as defined by t	the DDA	_ \
Can you Read?	as as as more by t		<del></del> '
Can you Write?		AER ING	
Please tick any or	f the following that apply to you.		
Dyslexia	Learning Difficulties	Severe Disfigurement	
Speech Impairment	Hearing Impairment	Visual Impairment (Not corrected by glasses or contact lenses)	
Reduced Mobility	Difficulty with Physical Co-ordination	Reduced Physical Capacity	
Mental Health Issues	Progressive Condition (e.g. Cancer, Muscular Dystrophy, HIV)	Other? (Please specify)	
	other support, do you need to carry ou terpreter, large print books, amplified telepho	It normal day-to-day activities? nes, special eating utensils etc.)	
Comments:	S C C C C C C C C C C C C C C C C C C C	ries, special eating utensils etc.)	
Comments:  5. Offenders Signature	Signature Signature	nes, special eating utensils etc.)  Date O(16/13	
Comments.  5. Offenders Signature Proposed Action Plan:	Signature  For use by DLO)	Date Orco 13	
Comments:  5. Offenders Signature Proposed Action Plan: ( Date form received from HCC	For use by DLO)  Transferred (Date / Estab.)	Date Olic /13	
Comments:  5. Offenders Signatur  Proposed Action Plan: ( Date form received from HCC  DOB / Age	For use by DLO)  Transferred (Date / Estab.)  ubility Declared (YAN) Types 5.	Date O(16 / 13	
Comments:  5. Offenders Signatur  Proposed Action Plan: ( Date form received from HCC  DOB / Age	For use by DLO)  Transferred (Date / Estab.)	Date O(16 / 13	
Comments:  5. Offenders Signatur  Proposed Action Plan: ( Date form received from HCC  DOB / Age	For use by DLO)  Transferred (Date / Estab.)  ubility Declared (YAN) Types 5.	Date O(16 / 13	
Comments:  5. Offenders Signatur  Proposed Action Plan: ( Date form received from HCC  DOB / Age	For use by DLO)  Transferred (Date / Estab.)  ubility Declared (YAN) Types 5.	Date O(16 / 13	
Comments:  5. Offenders Signatur  Proposed Action Plan: ( Date form received from HCC  DOB / Age	For use by DLO)  Transferred (Date / Estab.)  ability Declared (YAN) — Types — 50  C45YS Referral Interview	Date O(10 /13  Location (MSI)  2. Ethnicity Religion  Note:	Market
Comments:  5. Offenders Signatur  Proposed Action Plan: ( Date form received from HCC  DOB / Age	For use by DLO)  Transferred (Date / Estab.)  ubility Declared (YAN) Types 5.	Date O(10 /13  Location (MSI)  2. Ethnicity Religion  Note:	



# OFFENDER MEDICATION POLICY

During your period of detention at this establishment you:

- Must not give or sell any medication prescribed to you to any other offender
- Must return any unused medication to the Healthcare Centre
- Are not to be in possession of any medication or medication containers issued to any other offender
- Must keep any medication issued to you in the original labeled container and not tamper with it in any way.
- Must take the medication at the times prescribed and within the prescribed period.
   Keeping the medication for future use will constitute unauthorized possession.
- Must report any loss or difficulties complying with these instructions to a member of staff immediately
- Must be aware that medication issued to you is for your safekeeping and any losses will not be replaced by Healthcare Centre.

Name	D1473	Number A7856C7
Offend	er Signature: D1473	Date <b>6-</b> 7 // 04 / 2013
Witnes	sed by:	Signature
Next of	kin or a named person wh	who you wish to be contacted in the event of a medical
Chierge	ĸy	
Name .	AFANA RIWS	Relation to offender: A AUGHTER.
Address	DPA DPA	<b>4</b>
Letepho	ne number (if available).	
<u> </u>	DPA	·
t		Oxleas WIS

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473	(10405434)
	, DPA

	The state of the s	C	36 of 97
04 Nov 2013 Letter Type Letter To Letter From	Constant Bocument		
		/	



# CLASSIFICATION OF EMPLOYMENT

This form is intended as an assessment of the named offender's suitability for work at HM Prison Maidstone. A healthcare practitioner will carry out in secondary healthcare screening, based on the medical history and the information gathered from the interview.

FIT I work means the offender can carry out neavy manual duty, including the heavier kinds of industrial work.
FIT 2 work means the offender can carry out ordinary industrial work.
FIT 3 work means the offender can carry out work specially chosen for its light character.

Offenders suffering from Epilepsy should be excluded from working with machinery and kitchen.

Any client under the care of IDTS, please liaise with IDTS worker for fitness to work

• Is the offender FIT 1 to work in the following locations? Tick one box only  $\operatorname{Gym}_{i}$ لميلا Paints and Brick shop Safer custody Paints and Brick shop Laundry Foreign National Rep Resettlement Gardens and grounds party Wing Operative All workshops Induction Peers Kitchen Library Orderly Education Recycling Cleaner Stores Tailors Print shop • Is this offender FIT 2 for work in the following locations?

2

3

All abo | e | except laundry, Kitchen, Recycling, Gardens and Grounds party

• Is this offender FIT 3 for work in the following location?

This offender can only do light tasks, sitting down jobs and/or education

Please specify any other medical information that will help the Activity Board when

1 contenters D1473	P-Nomis Nation	<del>Alexander</del>
om fit to work within the carrier led above	t.	4.35556
<b>L</b>	Date 4	2013
Completed by healthcare practitioner of a complete of the comp	Signature	
Proceedings the Control of the Process of State	L	
#1 Miles	The Mandalor District Cont.	

Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473	(10405434
	DPΔ

Printed by BOWE	RS, Mary	Gatwick Immigra	ition Rerroval Centre	37 of 9
03 Sep 2014	Prescription or Me	edication details to Belin	nda May	
Letter Type	9	Prescription or Med		
Letter To		Belinda May		
Letter Fron	1			
	atografiael ann	D1473	A78U∂CY	
	Management of 03 or 14	Personal Medical I	nformation · Sharing In	
best lack (	interests of my care. If of information could be	I decline to share this infor	e shared with us from outside in the mation I have been made aware that future. I may withdraw any consent I from Healthcare.	
Signa	ature of Offender (conse	ent) Signature	declines)	
Si, na	ature of Healthcare Rec	eption Staff Signat	ure	
Name	e of Reception Staff (pri	nt)	labhe Inte	

Page 1 of 1

03 Sep 2014	Consent Form to unknown		
Letter Type	Consent	Form	
Letter To			
Letter From			
=======================================			
_			
	D1473		A7856CY
	egrated (		A703BCT
	Management of D	** ** ** **	
	Management of Personal	Medical Information	on - Sharing In
Date	07 09 14		
Duto	1 1		
HMP	ELMLEY '		
Some	of my health information, if it is avai	lable, could be shared with	h us from outside in the
Dest II	nterests of my care. If I decline to s	hare this information I have	e heer made outers that
lack o	i information could be definmental to	my health in future. I may	V Withdraw any concept I
give a	t any time in writing by using the ann		
Signat	ture of Offender (consent)	nature(declines)	
	(======================================	Name of the state	***************************************
Signat	ture of Healthcare Reception Staff	Name irrelevant	
		: Cianatı	Ire
Name	of Reception Staff (print)	Jigilati	A1 C

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

**D1473** (10405434)



#### N/#

# Eastern and Coastal Kent PCT & Isle of Sheppey Prisons Partnership

# HMP ELMLEY HEALTHCARE MEDICATION COMPACT

Whilst at Elmley it is your responsibility to check if you are on the list for healthcare on your houseblock. You may be prescribed medication. This in most cases will be given to you once a week for as long as the prescription is valid. To ensure that all benefit from this certain rules must be adhered to:

- 1. You will be responsible for applying for a repeat prescription if you are on long term medication.
- It is your responsibility to ensure you have a sufficient stock of your medication and apply for a repeat prescription, or, if not on long term medication, apply to see a GP to discuss your medication.
- 3. You will need to allow 4 full working days for your prescription to be renewed, for example, Monday for Thursday, Tuesday for Friday, Wednesday for Monday, Thursday for Tuesday and Friday for Wednesday.
- 4. You will be responsible for the safe keeping of the medication in your possession. This will be in your own cell and not minded by another prisoner.
- 5. If you lose your medication, or it is stolen, it will not automatically be replaced. You will undergo an assessment first
- If you sell, misuse or conceal your medication it will be re-assessed and in some circumstances will be discontinued.
- All medication must remain in its original packaging and must not be tampered with in any way.
- 8. You must follow the directions for taking your medication, keeping your medications for other use will constitute unauthorised possession.
- Any un-used medication must be returned to Healthcare.
- 10. If you fail to attend Healthcare for 3 consecutive days to pick up your prescribed medications, they will be returned to Pharmacy.
- 11. It is your responsibility to check your medication with the Treatment Nurse, if you return to your Houseblock but then return to Healthcare to say your medication is incorrect, this will not be acceptable.
- 12. It is your responsibility on the day your medication is due, to collect it from Outpatients. If you are picking up monthly medication you will be called on the morning medication list. If you are collecting weekly you will be on the lunch/2pm list and you will not 'drop in' to Healthcare to pick up medication after the gym, visits, etc. This is due to Healthcare issuing relevant times for collection to meet all prisoners needs.
- 13. Failure to comply with this compact may result in your medication being discontinued for a change in how it will be managed. For example, supervised or in your possession.

Date:	Prison Number:
Patient */ 03 Sep 2014	A7856C
Signature Signature D1473	]

Page 2 of 4

Date:

03 Sep 2014

# Eastern and Coastal Kent



#### HMP Elmley

	Reception Healthcare Screening
Name	D1473
Numbe	r A7856CY
I have been medically be medically	assessed by a Healthcare worker on reception and have been found to
	For this reason I do not wish to see a Doctor.
I have been informed deems it necessary.	of how to make a future appointment with the Doctor if a med reason
	LABOUR IA
	LABOUR II
Signature of inmate:	Signature
F'-	
Signature of HCW:	Signature
Print Name:	Talohashla

Page 3 of 4

Thu 12 Oct 2017 10:23		
Confidential: Personal Data	<b>D1473</b> (104054)	
	DPA	



Management of Personal Medical Information

It has been explained to me and I confirm that I fully understand that whilst I at HMP Elmley, there may be occasions, where there is a need to share information of a confidential medical nature regarding my medical care and treatment.

This information will most commonly, but not exclusively, be shared with General Practitioners and other Healthcare professionals involved in my care such as IDTS (Integrated Drug Treatment Service), Inreach (Mental Health) and Primary Mental Health. There are information sharing agreements in place covering this.

I understand that the information sought and provided will at all times be treated confidentially. Any party wishing to view my Healthcare records who are not directly involved in my care (eg Solicitors), will be asked to obtain consent from me directly. The statement of confidentiality for the Sheppey Prison Cluster has been given to me.

I confirm that I have been provided with the opportunity to ask questions which have been answered in a manner I understand and that I can at any time during my stay at HMP Elmley withdraw my consent in writing without providing a reason and this will not affect my parole or length of prison sentence.

IC24 Ltd are the Data Controllers of my medical information whilst at HMP Elmley and as such are permitted to view it for purposes of anonymous clinical audit only without my consent.

	··-··-·
	Signature
Signature of Offender	orginature
(Cannot decline - this is fo	r information only)

Page 4 of 4

Thu 12 Oct 2017 10:23 Confidential: Personal Data

**D1473** (10405434)

10 Sep 2014	Clinic Letter to IRC The Verne	
Letter Type		
Letter To	IRC The Verne	
Letter From	D1473	



#### MEDICATION COMPACT CONSENT

PRIORIEM	TARRE NAME	D1	473		
HURBER A	7856CY	•••••	DATE	10/09/11	
SIGNATURE	***********	Signature	ļ	****************	•
i agree that the this document.	above prisonervia	<b>flairres</b> fully (	underets	inds the conditions give	n in
HEALTHCARE	WORKER				
SIGNATURE	Signature	DAT	E 101	09/14	
COMPLETED I	g gyven their f	HRET SUPP INTO	Ly of 1 The pa	CONERCIDETAIMEES REDICINES. WHEN THENT'S ELECTRONIC PATIENT	

Providing care all of us would recommend to family and friends

DES Frisons-In Peasure Ion Pol lay (Frision) (6/20) 6.13

Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473	(10405434)
	DPA

10 Sep 2014	Consent Form to IRC The Verne	
Letter Type	Consent Form	
Letter To	IRC The Verne	
Letter From	D1473	
	<b>L</b>	
	Dorset HealthCare	NHS
	University NHS Foundation Trust	

	Healthcara Departme The Ver
То:	Portinu Dors DT5 16
	Tel: DPA Fax: DPA Web: www.dorsetheatthcare.nhs.

#### CONSENT FORM

#### Request of Information

,	D1473		sed to Healthcare Depar	(Name)	
give conse	nt for medical infon	mation to be disclos	sed to Healthcare Depar	tment The Verne.	
Sign	Signature		Number A	7856CY	
Date of Birt	h DPA				
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Witness Ro	ole HCA	•••••••			
Date	29/14			•	

Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

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	Home Office	Croydon, CR9 3RR	
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	'	al Consent Form	
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	your application for asylum be unsuco	essful.	
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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434) DPA

02 Dec 2014	Consent Form to IRC The Verne	
Letter Type	Consent Form	
Letter To	IRC The Verne	
Letter From	A2 Wing, HMP The Verne	

#### PRISONER CONSENT FOR MEDICATION FORM

To be issued by Night Staff

#### To be read by Night Staff to Prisoners

"In the absence of Medical Staff, the Night Staff are empowered to provide medication to prisoners upon request. Antacids are available for indigestion, heartburn and nausea, and Paracetamol for headache, toothache, joint or muscle pain and back pan.

In order to receive medication, prisoners must confirm to the member of staff both orally and in writing that they meet the criteria outlined above and that

- 1. They are not currently in possession of the above medication And/or
  - 2. That they have not received the maximum dose pf Paracetamol that same day from Healthcare Staff (maximum dose is 8 tablets)".

    HEALTHCARE DENTRE

RECENSA HMP THE VERNE 0 2 DEC 2014

#### Prisoner's Response

I confirm that I have asked for medication in relation to

for which I have been given an unopened box of 2 Paracetemol/8 Antacid tablets (delete where appropriate). In confirm that the

above statement was read to me and that I understand it. I am not currently in possession of Paracetemol/Antacids from Healthcare and I have not received 8 Paracetemol during the course of the day.

I am aware that upon request, a further box of 2 Paracetamol may be given to me four hours after the first box was given to me.

Signature Prisoner's Signature ......

Prison Number A7856 CV

Date and Time of Issue 1-12-14 23 25

Prison Staff Signature ..

Signature

Print Name GEWAVS 055

Completed form must be returned to the North Gate by unlock for Healthcare to collect with the Healthcare box.

Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434)

DPA

15 Jan 2015 Consent Form to Healthcare IRC The Verne

Letter Type Consent Form

Letter To Healthcare IRC The Verne

Letter From C2 Wing, HMP The Verne

## DETAINEE CONSENT FOR MEDICATION FORM

To be issued by Night Staff

#### To be read by Night Staff to Detainees

"In the absence of Medical Staff, the Night Staff are empowered to provide medication to detainees upon request. Antapus are available for indigestion, healtburn and nausea, and Paracetamol for headache, toothache, joint or muscle pain and back pan.

In order to receive medication, detainees must confirm to the member of staff both orally and in writing that they meet the criteria outlined above and that:

- They are not currently in possession of the above medication

  And/or

  And/or
  - That they have not received the maximum dose of Paracetamol that same day from Healthcare Staff (maximum dose is 8 tablets)"

#### Detainee's Response

I confirm that have asked for medication in relation to heads. A for which I have been given an unopened box of 2 Paracetemol/8 Antacid tablets (delete where appropriate). In confirm that the above statement was read to me and that I understand it. I am not currently in possession of Paracetemol/Antacids from Healthcare and I have not received 8 Paracetemol during the course of the day.

I am aware that upon request, a further box of 2 Paracetamol may be given to me four hours after the first box was given to me.

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Completed form must be returned to the North Gate by unlock for Healthcare to collect with the Healthcare box.

Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473 (10405434) DPA

Printed by BOWEF	RS, Mary	Gatwick Immigration Removal Centre	49 of 9
14 Jul 2017	Consent Form to	IRC The Verne	
Letter Type		Consent Form	
Letter To		IRC The Verne	
Letter From		D1473	
		cale 🛭	
	N	MEDICATION COMPACT CONSENT	
PR	ISONER/DETAINEE	D1473	
NU		85604 DATE 14/07/117	
SIG	Sign	nature	
l ag this	ree that the above pr document.	isone, detainee fully understands the conditions given in	
HEA	ALTHCARE WORKE	ER .	
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BEF COI	FORE BEING GIVEN MPLETED IT MUST	E COMPLETED BY ALL PRISONERS/DETAINEES THEIR FIRST SUPPLY OF MEDICINES, WHEN BE SCANNED 'NTO THE PATIENT'S ELECTRONIC ND A COPY GIVEN TO THE PATIENT	
	<u></u>	Detainee TANE	
	Image of D1473	! i D1/1/73	
	image of <b>B</b> 1470	NOMS NO. AT 8:36CY	
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D1473	(10405434)
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Dorset and Decon Prison/Detention Fealthcare Medication Patient Compact

I understand that I  $n\omega y$  have medication issued to me to keep in my possession either within the prise. /detention centre or during a court or external visit or have medication administe d to me directly by the nursing team at the dispensary. I have read and/or had explained to me all of the following conditions and I agree to abide by these.

- 1. I will present my ID  $\operatorname{cold}$  when attending for medications and understand I will not get my medication: if this is not presented.
- 2. I will take or use the nedication as instructed by the doctor, nurse, pharmacist, pharmacy echnician, or dentist.

  3. I will take the medicatic at the times prescribed by the doctor/nurse/dentist.
- 4. I will not accept any meet atlon from other prisoners/ detainees for my own use.
- 5. I will not attempt to store  $\ \ \rho$  or otherwise accumulate medication.
- If I have responsibility for medication in my possession:
- I will take full responsibility in the safe keeping of the medication.
- I understand that lost or stolc medication will NOT normally be replaced. I will report any loss immediately to ling officer.
- Any unused medication will be irned immediately by me to Healthcare staff.
- Empty containers will be returned thealthcare staff.
- 10.1 will not give my medication to an ther person (except for returning unused medication to staff), nor se. trade my medication.
- 11. Medication will be kept ONLY in the tainer in which it is issued and I will not tamper with it or alter it in anyway.
- 12.f will inform healthcare when I have 7 o. medication left to enable further supplies to be obtained
- If I am administered medication by healthcare  $s(\boldsymbol{\beta}^{ij})$
- 13.1 will attend the dispensary as instructed
- 14.1 will completely swallow my medication in signt of the administering nurse (or take my medication as instructed).
- 15.I will inform healthcare immediately if I have any difficulty in complying with these instructions.

(This paragraph for prisons only) if I do not follow this agreement and these conditions, I will be reported to Healthcare staff immediately with will review the medication prescribed to me and the possession status of any medication. Disciplinary proceedings will be implemented as appropriate. I understand that any failure to do abide by this agreement may reset in my being placed on report under the Prison Rule 51 and/or having the privilege of In-Possession medication withdrawn. I know that any failure may also effect the assessment of my behaviour and may lead to a change of regime level under the Incentives and Earned Privileges Scheme.

D&D Prisons InPossessionPolicy/RM/CMG/20.5.13

Thu 12 Oct 2017 10:23

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D1473

(10405434)DPA

_	CMHS
эттош D	Wing officer, IRC The Verne
	€N+0000
REFERRAL FOR PRIMARY MEN	TAL HEALTH ASSESSMENT Prison Mental Health Team RC the Verne.
Name: D1473	Date of Birth: Prison No.:
Location: C2 - 11	Status: Personal Officer:
Deportation status dates:	Prisoner Aware of Referral:
	Yes No 🗆
Self Harm:	IN DETENTION
MASC VEILES	
BEHAVIOUR:	
	ALDT

Location:

Page 1 of 2

Date:

Thu 12 Oct 2017 10:23 Confidential: Personal Data

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Fri 14 Jul 2017 05	-iona (Mrs) IRC The Verne 1 o	1
Added For:	ZS	_
atient:	D1473	
юB:	DPA	
rison Number:	A7856CY	
ask Type:	Referral to PCMH Team	
urrent Status:	Started	
dded By:	Zoe Smith	
pdate: Zoe Smit	th 14 Jul 2017 05:21	
ssigned to Menta	Il health primary	
lease refer to terr	nplate "Referral for Primary MH Assessment"	
pdate: Mrs Fion	a Alford 18 Jul 2017 11:38	
ssigned to SMITH	t, Zoe	
tatus: Started		
nank you	DO montal braille a live and	
rate bor unit ou B	he mental health waiting list	
8 Jul 2017 11:38		
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ug 2017 G	neral Letter to Gatwick Ir	mmigration Remo	val Centre	
Letter Type		al Letter		
Letter To	Gatwic	k Immigration Re	emoval Centre	
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. 4	14/89/2017 12:45 <b>DPA</b>	IRC VERNE HCC	PAGE 01	
ļ.				
	DETENTION SERVICES OR	ER 8/2016 - DETENTION C	ENTRE RULE 35	
1	Rule 35(3) report - concerns	that a detainee may have b	een a victim of torture	
:	Section 1: Detainee's details			
1	Forename(s): D14	73		
	Sumame: D14	73		
	Date of Birth: DP		* 10008031	
	Immigration IRC The Removal Centre:	/erne number:	~ 10405434 A785GCY	
	Hamoral Control			
	Section 2: Detained's author	ity to release medical inform	nation	
	The detained named above ha	s authorised the release of th	e medical information in	
	this report in line with the guida Sharing of Medical Information Powers.	nce in USO 1/2015 - The Pro Relating to People Detained	otection, Use and Under Immigration	
	· OWEIS.			
i	Section 3: Medical practition	er's report		
	(Please read the notes at the			
	t have examined the detaines removal centre medical pract that the detaines			
	that the detained may have be rather than a medico-legal on	This execution of tortura. This	is a factual report	
	Understand that torture in this			
	I understand that torture in this Any act by which severe pain or inflicted on a person for such or	Cifforna unather showing	or mental, is intentionally	
	Information or a confession, nur	viehina him for an ant ha	or a third person	
	third person, or for any mason is	ving committed, or intimidating	ig or coercing him or a	
	of a public official or other person	n artigation of or with the co	nsent or acquiescence	
	i and ing dray not	n, mineren: in or incidental to	MWTUI sanctions.	
	I also understand that it includes instability and civil war to hold to	tuch acts carried out by term miory.	orist groups exploiting	
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Thu 12 Oct 2017 10:23 Confidential: Personal Data

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54	ction 4:	Dotainee's account			
P	ease pro	vide details of the accou	int given to you by the detainee of	the alleged	
to		particular, please provid			
	eac	h injury, scar or sympton	ibout the detainee's explanation for (physical or psychological).	or the cause of	
	<ul> <li>deta</li> </ul>	ils of when, where, how	, over what timeframe and why the	torture is said	
	to n	ave happened, if possible	e.		
	in N	igeria at the age of 17ye	ers ! Sensitive/Irrelevar	nt i	
		Sensitive/Irrele	vant thou einclad	CORNER CART	
	<u>iP1</u>	473 ; ICII. He was atta	cked by between 5-10 persons.	Sensitive/Irrelevant	
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	Whe	in he was 18yrs old he w	as arrested by the police in the st	riaet iution no	
	was	being assaulted ;*****	Sensitive/Irrelevant		
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		The second secon	no poro una ponce.		

Page 2 of 9

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#### Section 5: Relevant clinical observations and findings

Please provide details of your objective clinical observations and findings. This should include:

- d include: details of all scarring or other physical marks, psychological symptoms, physical disability or impairment details of any medical or professional treatment/support that the detainee has received (including outside the UK) or is recolving and from whom, any information in respect of previous or current physical or mental health problems which may be a result of having been tortured.

He has multiple scars including:

# Sensitive/Irrelevant

He has symptoms of depression along with thoughts to self harm, flashbacks and nightmares. His symptoms were present in the community although he was not able to access support. They have worsened in detention due to provoking factors e.g. hearing keys, sounds of doors, transport in van. He is currently on ACDT and under the care of the mental health loam. He is on antidepressant medication.

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#### Section 6: Assessment

Please set out your reasoned assessment of why, on the back of the detainee's account together with your own examination and clinical findings, you are concerned that the detainee may have been a victim of torture. This should include your assessment of:

the consistency of any physical (og scars) and/or psychological findings with the detainee's allegations, including any ovidence to the contrary whether there inging the other pleaselier causes for the findings the impact detention is having on the detainee and why, including the likely impact of ongoing detention.

If there are no physical or psychological findings to support the detainee's account, you <u>must</u> state why, in your professional assessment, you nevertheless have objective grounds for your concern.

He provides a history of torture with scarring consistent with the history. He also has consistent psychological symptoms which have worsened and may continue to worsen due to detention.

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D1473

(10405434)

**DPA** 

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Section 7:	Signature			
Signed S	Signature			
	ne Dr Jane Fowler			
Position and	d qualifications	GP BM MRCS MRCGP		
		Or BM MICCO MICCOP		
Date: 14 Au	ig 2017	•		
If other heat and/or in pro	ithcare professionals i oducing this report the	have supported you in examining the detainee Bir details must be given below:		
Signed:		en e		
Printed nam	et			
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11.	************************			
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#### NOTES - for the medical practitioner

The requirement to report need only be triggered by you having a concern that the detainse may have been a victim of torture. However, you should not make a report where the detainse's experience of harm or mistreatment does not meet the definition of torture given in section 3 above, or where you do not have clinical concerns that the detainse may have been a victim of torture, including instances where there is no basis for concern other than an unsupported claim by the detainse to have been a victim of torture.

Your report must be completed legibly, with all questions being completed fully. Consideration of the report will be delayed if Home Office officials have to return the report to seek clarification.

if the Home Office request clarification of any point in this report, this must be provided promptly.

Once completed this report must be faxed to the Home Office IRC Team.

A signed copy of this report must be placed on the detainee's medical record and another signed copy provided to the detainee free of charge.

The Home Office response must on receipt be reviewed by the medical practitioner. If it is considered to unsatisfactority address the original concerns, it must be escalabed to the Home Office IRC Team.

#### NOTES - for the Home Office caseworker

Chapter 55b Enforcement Instructions and Guidance - Adults at Riak in Immigration Detention

Detantion Services Order (DSO) 9/2016 - Detantion Centre Rule 38

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434)

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Page 7 of 9

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D1473 (10405434)

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

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Letter From	IRC The Verne	

### DETENTION SERVICES ORDER 9/2016 - DETENTION CENTRE RULE 35

Rule 35(3) report – concerns that a detainee may have been a victim of torture

#### Section 1: Detainee's details

Forename(s):	D1473		
Surname:	D1473		
Date of Birth:	DPA	HO reference	10405434
Immigration Removal Centre:	IRC The Verne	1	A785GCY

#### Section 2: Detainee's authority to release medical information

The detainee named above has authorised the release of the medical information in this report in line with the guidance in DSO 1/2016 – The Protection, Use and Sharing of Medical Information Relating to People Detained Under Immigration Powers.

Section 3: Medical practitioner's report (Please read the notes at the end of this form)

I have examined the detainee named above in my capacity as an immigration removal centre medical practitioner and hereby report that I have concerns that the detainee may have been a victim of torture. This is a factual report rather than a medico-legal one.

I understand that torture in this context means:
Any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering ansing only from, inherent in or incidental to lawful sanctions.

I also understand that it includes such acts carried out by terrorist groups exploiting instability and civil war to hold territory.

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D1473	
	DPA

#### Section 4: Detainee's account

Please provide details of the account given to you by the detainee of the alleged

- torture. In particular, please provide:

   as much detail as possible about the detainee's explanation for the cause of
  - each injury, scar or symptom (physical or psychological), details of when, where, how, over what timeframe and why the torture is said to have happened, if possible.

In Nigeria at the age of 17years. Sensitive/Irrelevant they s'a ted running and they since shows a stacked by between 5-10 persons. Sensitive/Irrelevant
Sensitive/Irrelevant
He managed to escape and get home.
When he was 18yrs old he was arrested by the police in the stree! \ \n he was being assaulted. Sensitive/Irrelevant
Sensitive/Irrelevant

He was released after his father paid the police.

Page 2 of 6

#### Section 5: Relevant clinical observations and findings

Please provide details of your objective clinical observations and findings. This should include:

- details of all scarring or other physical marks, psychological symptoms, physical disability or impairment.
- details of any medical or professional treatment/support that the detainee has received (including outside the UK) or is receiving and from whom.
- any information in respect of previous or current physical or mental health problems which may be a result of having been tortured.

He nas multiple scars including:

# Sensitive/Irrelevant

He has symptoms of depression along with thoughts to self harm, flashbacks and nightmares. His symptoms were present in the community although he was not able to access support. They have worsened in detention due to provoking factors eighearing keys, sounds of doors, transport in van. He is current, and ACDT and under the care of the mental health team. He is on antidepress, at medication.

Page 3 of 6

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(10405434) **DPA** 

#### Section 6: Assessment

Please set out your reasoned assessment of why, on the basis of the detainee's account together with your own examination and clinical findings, you are concerned that the detainee may have been a victim of torture. This should include your assessment of:

- the consistency of any physical (eg scars) and/or psychological findings with the detainee's allegations, including any evidence to the contrary
- whether there might be other plausible causes for the findings
- the impact detention is having on the detainee and why, including the likely impact of ongoing detention

If there are no physical or psychological findings to support the detainee's account, you must state why, in your professional assessment, you nevertheless have objective grounds for your concern.

He provides a history of torture with scarring consistent with the history. He also has consistent psychological symptoms which have worsened and may continue to worsen due to detention.

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434)

DPA

Printed name:  Position and qualifications:  GP BM MRCS MRCGP  Date: 14 Aug 2017  If other healthcare profession is have supported you in examining the det and/or in producing this report insir details must be given below:  Signed:  Printed name:  Position and qualifications:  Date:  Signed:  Printed name:  Position and qualifications:  Date:  Signed:  Printed name:  Position and qualifications:	Section 1	7: Signature
Printed name:  Position and qualifications:  Position and qualifications:  Printed name:  Position and qualifications:	Signed:	
Date: 14 Aug 2017  If other healthcare profession have supported you in examining the det and/or in producing this report heir details must be given below:  Signed:  Printed name:  Position and qualifications:  Date:  Printed name:  Position and qualifications:  Date:  Date:  Printed name:  Position and qualifications:	į	į
Date: 14 Aug 2017  If other healthcare profession is have supported you in examining the det and/or in producing this report their details must be given below:  Signed:  Printed name:  Position and qualifications:  Printed name:  Position and qualifications:  Date.  Signed:  Printed name:  Position and qualifications:	Position a	and qualificationGP BM MRCS MRCGP
Signed: Printed name:  Date:  Position and qualifications:  Position and qualifications:  Date:  Printed name:  Position and qualifications:  Date:		
Printed name:  Position and qualifications:  Date  Signed:  Printed name:  Position and qualifications:  Date  Signed:  Printed name:  Position and qualifications:	If other he and/or in a	ealthcare profession — have supported you in examining the detail producing this report 3 rair details must be given below:
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Page 5 of 6

D1473	(10405434)
	DPA

#### NOTES - for the medical practitioner

The requirement to report need only be triggered by you having a concern that the detainee may have been a victim of forture. However, you should not make a report where the detainee's experience of harm or mistreatment does not meet the definition of torture given in section 3 above, or where you do not have clinical concerns that the detainee may have been a victim of torture, including instances where there is no basis for concern other than an unsupported claim by the detainee to have been a victim of torture.

Your report must be completed legibly, with all questions being completed fully. Consideration of the report will be celayed if Home Office officials have to return the report to seek clarification.

If the Home Office request clarification of any point in this report, this must be provided promptly.

Once completed this report must be faxed to the Home Office IRC Team.

A signed copy of this report must be placed on the detainee's medical record and another signed copy provided to the detainee free of charge.

The Home Office response must on receipt be reviewed by the medical practitioner. If it is considered to unsatisfactorily address the original concerns, it must be escalated to the Home Office IRC Team.

#### NOTES - for the Home Office caseworker

You must consider and respond to this report in line with the guidance and instructions in:

Chapter 55b Enforcement Instructions and Guidance – Adults at Risk in Immigration Detention

Detention Services Order (DSO) 9/2016 - Detention Centre Rule 35

Page 6 of 6

15 Aug 2017	General Document to IRC The Verne	
Letter Type	General Document	
Letter To	IRC The Verne	
Letter From	IRC The Verne	

A7856(Y Rel Home Office D1473 DPA address From H. Devine Team/Location Tel number Date August 20 Pages:

Dear D1473

I am writing to you to acknowledge receipt of a report dated 14 August 2017 which was received on 14 August 2017 provided by the medical practitioner at The Verne Immigration Removal Centre notifying us of a special illness or condition. Information contained within the teport has been considered catefully and the decision to detain you has been reviewed.

Careful note has been taken of your account which has been outlined in the Rule 35(3) report.

You detail in the report that in Nigeria when you were 17 years of age, you were attacked by 5 to people Sensitive/Irrelevant | Sensitive/Irrelevant | On the Second occasion, you state that when you were 18

by police in the street when you were being assaulted (

#### Sensitive/Irrelevant

teleased when your father paid the police

The Doctor who wrote the report states that your account is plausible and your scarring and subsequent description of how they occurred are consistent

The Doctor also states that you have symptoms of depression along with thoughts to self harm, thishbacks and nightmates. The doctor states that your symptoms were present in the community although you were not able to access support, and they have worsened during detention due to provoking factors such as hearing keys, sounds of doors and transport in wars. The doctor also makes reference to you being on ACDT and under the care of the mental health toam and states that you are currently prescribed antidepressant medication.

Your claim of torture has been considered in line with the guidance set out in the 'Detention Services Order 9/2016 as well as the 'Adult at Risk' policy. For the purposes of this Rule 35 report,

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D1473 (10405434) DPA

the following definition, given in the case of EO & Ors. [2013] EWCH 1236 (Admin), has been applied:

Any act hy which sever pain or infering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him as a third person information or a contession, particing him for an act be or a third person has commuted, or intentialising or covering him or a third person of for any reason based upon discrimination of any hind?

The doctor has diagnosed that your sears as detailed are consistent with your history of abuse/assault when you were 17 and 18 years of age, and are therefore regarded as an adult at risk under the policy. Your detention has been reviewed and the report carefully considered when determining your senablely for detention under the "Adult at Risk policy. In considering your chains, it is noted that you are considered a vulnerable adult, as per the Adults at Risk Policy. In addition, the medical evidence indicates that you are assessed as Level 3 vulnerability.

After carefully considering the medical report and other known facts, a balanced decision has been taken to maintain your detention. The reasons for this are as follows:

#### Immeration Factors

You left Lagos by plane using your own passport and arrived in the United Kingdom on 3 July 2005

You claim to have held a "IK visit visa when you entered the UK, issued 21 hebruary 2005 valid until 21 August 2005. However, Horne Office records show that you were issued with a visit visa on 17 October 2005 valid until 17 October 2007 and there are no records of any application for further leave to remain.

You only came to the acention of the authorities on 3 November 2009 following your arrest. On 21 October 2013, you were issued with a Hability to Automatic Deportation Letter (ICD 0350 AD) and on 15 September 2014, you were served with a signed Deportation Order.

You claimed asylum on 16 September 2014 and on 21 April 2015 the asylum claim was refused and on the same day, you were assued with a combined Decision to Refuse a Protection and Human Rights Claim.

On 14 March 2016, your First Tier appeal hearing was dismissed on both asylum and Article 8 grounds. Following which, you became Appeal Rights Exhausted on 18 April 2016.

You tailed to report on 12 May 2016 and you were loted as an absconder until 13 July 2017 when you were encounte ed by police and detailed under animgration powers.

On 3 August 2017, you were interviewed by the Nigerian authorities and they confirmed your identity and nationality, and agreed to issue an ETFD

#### Public protestion factors

On 1 July 2013, you were convicted at Sensitive/irrelevant Court of Sensitive/irrelevant and sentenced to 22 months' imprisonment on 6 September 2013. You did not appeal against the conviction of the sentence. You also have a previous conviction of 22 May 2012, when you were convicted at Sensitive/irrelevant Court of Sensitive/irrelevant and given a 12 month conditional discharge and ordered to pay Costs.

Your criminal history has been noted and account has been made of the severity of your offending behaviour, in view of which it is considered that pose a high risk of te-offending and high risk of harm to the public if you are released.

15 335

Page 2 of 4

D1473 (10405434)

Balancing risk factors against immigration control factors

Cateful consideration has been given to balancing the need to promote your wellbring and mental health against the risks to the public and the minimence of your removal.

On the basis of the report from the doctor we accept that the events you describe could be interpreted as falling within the definition of forture as set out in the ruling in the case of EO and others.

Your detention is considered proportionate to your circumstances, particularly taking into account your serious cuminal history. You are the subject of a signed Deportation Order and it is noted that your asslum claim of 16 September 2014 was carefully and fully considered and refused in the letter of 30 April 2015. Your case is now at a late stage and there remains no incentive for you to maintain contact with immigration if released.

In view of your lack of valid leave, your deportation and etiminal history it is evident that you have no regard for the laws of the UK. It is considered that if released, you would fail to compile with am restrictions placed upon you and there is a high risk that you would abscord in order to evade removal.

This is further supported by your record of compliance. Following the refusal of your appeal against Deportation, from April 2016 to July 2017 you were listed as an absounder, only coming to the attention of the Immigration authorities by chance when arrested by the Police. It is therefore considered that you would show further non-compliance if you were released.

Morrover, you have been convicted of two offences. Sensitive/firelevant

Sensitive/firelevant

As the subject of a Deportation Order and as you are Appeal Rights
Exhausted, it is considered that there is a propensity that you may reoffend as you hold no valid
Leave to Remain in the United Kingdom and no right to work

A primary consideration when detaining any individual under transgration powers is the imminence of removal. It is noted that there are currently no barriers to your removal and your directions for removal have been requested.

#### Conclusion

In conclusion, it is acknowledged that you are an Adult at Risk but it is considered that your removal can be enforced within 2-3 weeks.

When balancing the indicators of vulnerability agoinst the negative minigration factors highlighted above and the imminence of your removal, it is considered that the negative factors outweigh the tisks in your particular circumstances. Therefore a decision has been made to maintain your detention.

 $\Lambda$  copy of this letter has been forwarded to your legal representative, where applicable. Yours sincercly,

H Devine

CCL7 (Criminal Casework Liverpool Team 7)

IS.335

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434) **DPA** 

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434) , DPA

# 19 Aug 2017 General Letter to unknown Letter Type General Letter Letter To Letter From OFFICIAL SESSITIVE

ACDT	Open Notification	on Form	
Name of Detainee D1473	1		
CID Ref: 10405434	Log Number	BH/287/17	
Addition of the American			
The ACOT plan was opened at	Brook House		
<u> </u>	変のにぬし くりょかんりょ		
The above has arrived on an o	pen ACDT plan from :	The Vern	
To b	e completed by the	DCM:	
Tasks	Completed	Comme	nts
Has the detained self harme		1 3407.34	- and in the house of the same
If yes, please state the method of	fself No		
barn			
Has an Incident Report beer completed and passed to the D			
is the detainee on a food ref		-	
An ACDT must be opened after 2	days No		
of refusing toop			
Has the detained been asses	ssed		
by healthcare? The RMN should also be contact.	Yes	On arriv	A <sup>r</sup>
mental health assessment	tor a	• • • • • • • • • • • • • • • • • • • •	-
Has the Central ACDT log be	en .		
Updated?			
Incidents of Self Harm should be	high Yes		
ighted in Red Ink			
Has the relevant information	been	•	
entered on to DAT?	Yes		
All information should be entered the Safer Custedy tab on DA1	under		
Has the IS91 Part C been	*		
completed and sent to DEPN	4113		
A copy should be sent to	Yes		
Safer Community and Home Offic	æ		
	Completed By		
Print Name S	hone Farreil		
ime and Date 2.	3 10 19/08/2017		
this form and			
This form should be completed wit o lowing	nen the ACDT opened an	d distrib <b>uted wi</b> llhout d	elay to the
Duty Director			
<ul> <li>Safer Community Manage</li> </ul>	21		
<ul> <li>Healthcare</li> </ul>			
Chaplair			
Security Intedigence     Home Office			
iMB			
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OFFICIAL SESSION

Page 1 of 1

Thu 12 Oct 2017 10	:23
Confidential: Person	al Data

	_
D1473	(10405434
,	DPA

22 Aug 2017	Prescription or Medication details to unknown
Letter Type	Prescription or Mediantian details
Letter To	Prescription or Medication details
Letter From	
	Patient name: D1473
	The second of th
	Gatwick Immigration Removal Centre
	Perimeter Road South, London Garwick Airport, Gatwirk, W Sussex, RH6 0PC Lelephone
,	Patient naine: D1473 Date of buth DPA Medication Possessic Status:
	Date of birth DPA Medication Possessic Status: Poli entage IDPA Not in possession
	Prisoner nurt peri   10405434
	Wing Brook House Healthcare
	(ell:
	Start date End date Allergy or Sensitivity
	08 Jul 2013   No known allergies (1)51 ) 07 Oct 2013   No known allergies (1)51.)
	03 Sep 2014 No known allergies (1151.)
	U4 Sep 2014 H/C: multiple altergios (14M3.)
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	Signed
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Thu 12 Oct 2017 10:23 Confidential: Personal Data

**D1473** (10405434) **DPA** 

24 Aug 2017	Prescri	ption or Medication details to unknown	
Letter Type	·	Prescription or Medication details	
Letter To		Medication details	
Letter From			
Letter i form			
	Printed by O	Or usan Oozeerally Patient name D1473 .	
	. —	Gatwick Immigration Removal Centre	1
1	$(\mathcal{I})$	Perimeter Roud South, London Gatwick Airport, Gatwick, W Sussex, RH6 (IP.) Telephone.	
	Patient na	a) 1e: D1473	
	Date of birth	DPA	nana,
	Patient age	DPA . Medication Possessic 1 Status	
	Prisoner num Wing	miler 10405434 Not in possession  Brook House Healthcare	د
	Langing.	GOOK COSE HEALINGS	
	Cell-		
	Start date	End date Allergy or Sensitivity	
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	07 Oct 2013	No known allergies (1151.)	
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Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1770	(10405434)
	DPA

Letter From

24 Aug 2017 General Letter to unknown Letter Type General Letter Letter To



## FACSIMILE MESSAGE

## <u>UEGENT</u> SUBJECT D1473 DOB DPA Lear Sirs Firegard to your retter 2+ August 2011, requesting medical notes for □□1473 Unfortunately, the name I have on the system that matroles the above seems to have a different date of birth. Can you please confirm Joés he use another date of birth? Please advise Kind regerds Fam Bowers Admin Assistant Healthcare Department Brook House Perimeter Road South, Gatwick IRC's Gatwick West Sussex RH6 0PQ.

Page 1 of 4

Tel DPA Fax DPA

Thu 12 Oct 2017 10:23 Confidential: Peisonal Data

D1473 (10405434) **DPA** 



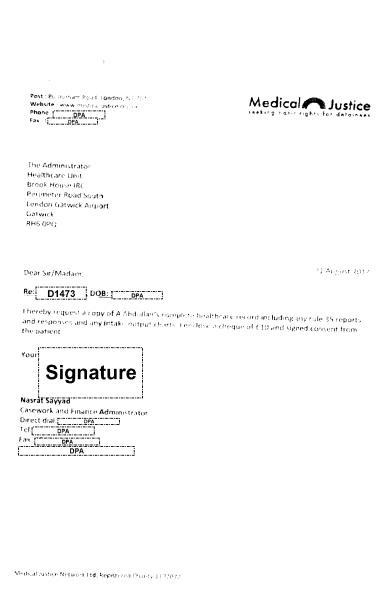


## FACSIMILE MESSAGE

<u>URGENT</u>	
TO: Medical justice FAO FAX NO [	partment
SUBJECT D1473 DOB DPA	
Dear Sirs	
With regard to your letter 21 August 2017, requesting medical notes	for[D1473]
Unfortunately, the name - have on the system that merches the abordifferent date of buth - Can you please confirm opes he use another	ve seams to navilial date of birth?
Pituse advise	
Kind regards	
Pam Powers Admits Assistant	The same
	The deal of the second
Healthcare Department Brook mouse, Per moter Road South Ganacet (Brois	4 1/1/25

Page 2 of 4

## Page 3 of 4



DPA	
(10405434)	D1473

Thu 12 Oct 2017 10:23 Confidential: Personal Data

page 4 of 4

Finalsh promptete and return to do 45 th; 57 gr

#### Consent

Thereby give imments entitler Medical Justice to have access to

- information and /or dominents on my interigration case
- Information on the held by the Home Office NHS England and their contractors (including the detention contract)
- Information on my medical condition, including my detention centrely prison medical records.

I give my consent for them to discuss my case with others involved in my care.

Name D1473
Signed Signature Signature 21 r od r port7

79 to 87

31 Au	ıg 2017	General Letter to Gatwick In	mmigration Removal Centre	
	Letter Type	Gener	ral Letter	
	Letter To	Gatwic	ck Immigration Removal Centre	
	Letter From		al justice	
	-184w			
		Post: No outher field, upage, N7 (1) 1 Website, www.modulinubice.org.uk Phone   DPA	Medical Justice	
		The Administrator Healthcare Unit Brook House IRC Perimeter Road South London Gatwek Airpor. Gatwick RH6 OPQ		
_		Dear Sir/Madam,	31 August 2017	
		Re: D1473 DOB DPA		
		Thereby request a copy of D1473 and received medical recoils, dated up to	COmplete healthcare record. We previously requested	
		copy of signed consent from the patient.	to oneucal records, sense that <b>date</b> . Lenclose a duplicate and a cheque for e.10,	
		Many thanks for your accessore		
		Mark America Mark		
		Signature  Internationapysis Casework and Finance Administrator Brect dial.  DPA Tel:  DPA Tel:   Traces and Topics		
•		Medica many Nerwook and Registered County II		

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473 (10405434) DPA HIS BARD Symplete who return this RUE THE REV.

#### Consent

Thereby give my consent for Medical fusion to have access to

- information and /or documents on my immigration case
- information on the held by the Home Office NHS England and their contractors (including the detention centre)
- Information on my medical condition, including my detention centre / pins m medical records.

I give my consent for them to discuss my case with others involved in my care

Name	D1473	
Signed	Signature	
Date:	21-08-2017	

Page 2 of 2

Thu 12 Oct 2017 10:23 Confidential: Personal Data D1473 (10405434) DPA

04 Sep 2017	General Letter to unknown	
Letter Type	General Letter	
Letter To		
Letter From		



Gatwick Immi**gr**ation Removal Centre Perimeter Road South London Gatwick Airport Gatwick W Sussex RH6 OPQ

04 Sep 2017

Dear Home Office	RE D1473 DPA	
In response to enqu	y about the above detainee. I can confirm that he is under the care of th	nte.
	ind his mental health appears well managed. At present on going detention	
	hous to his health but I am unable to clarify the mintal health prognosis o	
specific time frame		• • • •

Yours Sincerely
Signature

Page 1 of 1

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473	(10405434
,	DPA

	5 aman to motal definite
12 Sep 2017	General Letter to unknown
Letter Type	General Letter
Letter To	
Letter From	
· · · · · · · · · · · · · · · · · · ·	Maria di Maria de Mar
	Gatwick Immigration Detention Centre Perimeter Road South
	Gatwick Airport  Confirmation of External  RH6 0PQ
	Medical Assessment at
	Lan DPA
	f-mailt coak
	A request has been received from Medical Justice
	A September (ACT) (CCACC) from A Section (ACT)
	Contact details - Lef. Fax: OPA
	To arrange an external medical assessment on D1473
	This is alimited for - Friday 15 September 2017 1000 - 1300
	The assessment will be undertaken by Dr. Fiza Stanton (GMC reg. 418565), and interpreter Fishin Karakayan
	Heir She has been advised that the defautee is at BROOK HOUSE and that he lightly filled to bring one form of preto.
	On it there is no Sha has been appaied to contact the centro and pasted on the total being one time of proceds and the contact the centro and 253 stebbly protein the their proteins that the destance as still because at Brook House, the She has been sent a copy of this total and asked to bring it with time their to bornish early.
	The medical examination will take place in Meginal Risom 2 within the receiptors area and the detainee will need to be excepted the mark to be invested to be
	excorded there at this other. Whilst the medical room is fully equipped the live many lates and the defairee will meet to be adulted the medical room is fully equipped the live many tragal antendable for inspectation. They may also bring a common with them. This is a pomitting procedure build only for the use of the diprotograms of the mean receivable build only for the use of the diprotograms of the mean receivable which me medical room.
	The detainee has signed the consort form and a copy of the detainers medical revolution will be prepared the hight before and made are able for inspection during the examination.
	This up ting doctor is eware that in tige will. Good Medical Practice, the extension and account page.
	Now introduce staff in a timely fashion
	Signed Pam Bawers
	Ogosa 1 am Dawers
	Date 11 September 2017

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473

(10405434) DPA



Gatwick Immigration Detention Centre
Perimeter Road South
Gatwick Airport
West Sussex

# REQUEST FOR A VISIT BY AN EXTERNAL MEDICAL PRACTITIONER

I wish to be medically examined by | Di Liza Stanton . I give my consent to him/her having full access to my medical notes and to discuss my case with other doctors involved in my care.

I understand that the Removal Centre or Home Office have no responsibility for any costs associated with the visit.

Signature Signature D1473

Date: 11 September 2017

Page 2 of 2

u 12 Oct 2017 10:23 nfidential: Personal Data

D1473 (1 '405434)
DPA

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18 S	ep 2017	Prescription or Medication details to unknown	
	Letter Type	Prescription or Medication details	
	Letter To	escription of Medication details	
	Letter From		
	ECILOT TOTAL		
		Printed by Dr. Husein Obze 19/1y Patient name # DA472	
	وجرج	D14/3 !	
	$\sim (a$	Gatwick Immigration Removal Centre  Perimeter Road South, London Gatwick Airport, Garwick W Sussex, Rn6 (PQ)	
		Telephone.	
		Patient name: D1473	
		Patient age:	
	<u>.</u>	Prisoner nun ber: 10405434 Not in possession Wing: Brook Hause - Italiane	
	•	Landing:	
	·		
		08 Jul 2013 No known ellergie: 151	
		07 Oct 2013 No known allergies 51.) 03 Sep 2014 No known allergies 5.1.) Mc Sep 2014 No known altergies (1.51.)	
	L	G4 Sep 2014 H/O. multiple allerge: 14M3)	
	I	NOT in Posa ssion Prescriptions	
	į	Drug name Administration dose / Start Da. Quantity Printed By Marillerin Paradistration	
	ſ	notes the secretary of	
	Ā	dome table = 108.30 OUZERALLY, OUZERALLY,	
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	ł	NHS Confidential, Personal Data about a Patient	
		Page 1 of 1	

Page 1 of 1

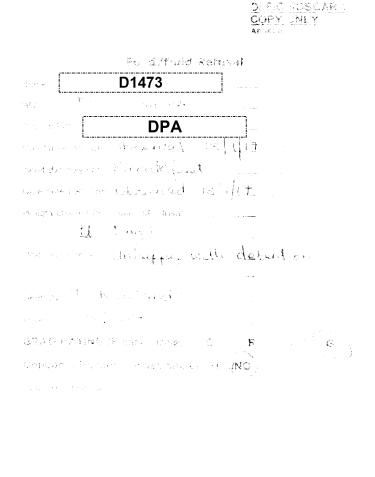
<b>D1473</b> (10405434	·	DDA
	<b>D1473</b> (1	0405434

18 Sep 2017	General Letter to unknown	
Letter Type		
Letter To		
Letter From		

Name Diam Food/fluid Refusal	Annexe B
Wing B Room 256	
OHING 10405434	
Cate of both DPA	
Transport time historie Ox. corced 12 117	
What aid they eat Rancall . 1	
Date/time last grank Observed 18/1/7	
What did they eat drink . YYZJ &	
Present weight The Line i	
Weight change from day 1 of Food refusal	
Uninalysis BM	
Reason for refusal Det Continue	
Physical Observations	
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Breath No Lindones	
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#8/ Mouth // Yhore,↑	
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Page 1 of 2

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D1473	[(10405434
	DPA



Page 2 of 2

Letter To Letter From

19 Sep 2017 General Letter to unknown
Letter Type General

Name   D1473   Food/fluid Refusal   D1473	Annexe B
Wing . 2. Roun 2016	
CB) No. 10405434	
Date of birth DPA	
Dater time last are 75 59//7	
What did they eat	
Dato/time last drank 15/69/77	
What did they eat drink facce	
Present weight	
Weight change from day of Food refusal	
Urinarysis  RP  RM	
BP. ABM	
Reason for refusal from the Marine Green	
Physical Observations	
Skin Office & Minach	
Breath 100 Miell Lilling	
tips Mouth Affricated Married	
Seem by	
Date Copy for medical records (5/6-9-//2	
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Page 1 of 2

Thu 12 Oct	2017	10:2	3
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D14	473

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Food/Huid Refusal
Name D1473
Wing B - Room . 206
Date of both DPA
Date large last div /8/09/17
What did they eat Fred Mark
Date time lest drank / 5/09//7
Weight change home my to refusal Allegnical
Residentification No Rasa guin
seems, firstands print
Unie() 19/09/17
BRAG RATING (Please circle) B R
Consent obtained (Picase circle) YES(NO)
Copy for Oscartand UriBA

Page 2 of 2

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

**D1473** (10405434)

20 Sep 2017	General Letter to unknown	
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Letter From	n	

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Page 1 of 2

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Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473	(10405434)
,	DPA

Ecod/fluid Refusal Name D1473	≥хе В
Wing Es Room with	
CID NO LOGO SUPSIGN	
Date of Sign DPA	
Date: time last ate Fire Mary 11/04/17	
What did they eat _ FITTLY	
Darchime last drank Kolos d to can	
What and they eat direk Reference of the early	
Present weight Advanced	
Weight change from day 1 of Food refusal	
as, our door retusal	
Urinalysis _ A Gesacd	
BP Refused BM Refused	
Reason for refusal and the must for	
- W home	
Physical Observations:	
Skin Les 1 G 11	
Breath . No koline in ber browth	
Mobility Full for All for	
Lips/ Mouth Market	
Seen by Late and	
Date Cony for medical records	
Personal Control of the Control of t	

Page 2 of 2

Thu 12 Oct 2	017 10:23
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D1473	(10405434)
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Letter To Letter From

21 Sep 2017 General Letter to unknown
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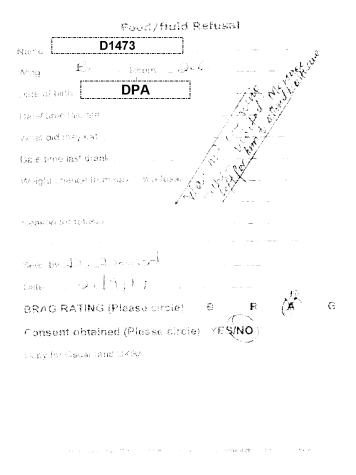
Nation#***	D1	Food/fluid R	efusal	Annexe B
L		1473		
VVnaq	L	From:	<u>(</u> -	
CID No	3	164.6%.36	1	
Oate of b		DDA		
Date: tan	a ast ate	HUKOTA L	16-16-9/17	
		The Little Co		
Date/time	last drank	- Hunder	18/19/17	_
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		When no		•
		day 1 of Food refusat		
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Physical Of Skin 1 p. 1	oservations			
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General Letter

Page 1 of 2

D1473	(10405434)
	DPA





Page 2 of 2

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Food/field Refusal D1473 Wing Remo DPA Dale of birds. Dealfume (sec do different and they est Usic this last drank " aut you home Scenery Tr. Package Date - 42-2 19/17 BRAG RATING (Please circle) (A) G Consent obtained (Piesse circle) YESYNO Copy for Oscal lacific RMA

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Page 1 of 2

Thu 12 Oct 2017 10:23 Confidential: Personal Data

D1473 (10405434)

Name Ecod./fluid Refusal	Annexe B
Wing B. Room . Jeck	
CID No 10/03/136	
Date of birth DPA	
Date time last ate Handore 20/29/17	
What did they eat _ / !!!!(!	
Datestime last drank ded 1161 de.	
What did they eat drink Killed to Lay	
Present weight KC/1021	
Weight change from day 1 of Food refusal	
The second secon	
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BP helilaco BM Pellised	
Reason for refusal Suid he reason for refusal	
Physical Observations	
Skin Waterf	
Breath No egsteris in the breath	
Mobility Eilly Richite	
Lips/ Mouth N7C/1 F	
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Date 19819 5 Copy for medical records	
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Page 2 of 2

29 Sep 2017 General Letter to unknown
Letter Type Gene il Letter

Letter To Letter From



Name of Detainee	D14	173		
CID Ref:	10405434	Log Fishber	RH/287/17	
The ACDT plan has n	ow been close	dat Brook h 150:	Ye5	
The above has now i	eft Brook Hous	8 for the		
	To be co	mpleted by the	DCM:	
Task	-	Completed	Common	ts.
Post Closure review Post Closure Interview within 7 days of the AC closed	to take place	N/A	das be <b>en rel</b> ea bail.	sed on
Has the Central AC Updated?	DT log been	Yes		
Has the relevant int entered on to DAT? All information should t				
he safer custody fab of fas the IS91 Part Completed and sent copy should be sent copy should be sent community and UKBA	n DAT been t to DEPMU?	Yes		
		ompleted By		
rint Name		Loughton		
ime and Date	15.15	29/09/2019		
his form should be concilowing  Duty Director Safer Commun Heartboare Chapiain		e ACDT paerija asi. ;	: distributed with <b>out</b> d	y to the

Page 1 or 1

29 Sep 2017 General Letter to unknown

Letter Type General Letter

Letter To Letter From



	ACDT Clos	ed Notifica	tion Form
	,		
Name of Detainee	D147	73	1 and the same
CID Ref:	10405434	Log Number	BH/287/17
The AGDT plan has	now been closed	at Brook House	Yes
The above has now following reason:	left Brook House	for the	America .
	To be con	npleted by the	DCM:
Tas	lre.	Completed	
Post Closure revie Post Closure Interview Within 7 days of the A	w arranged	N/A	Has been released on bail.
Has the Contral AC Updated?	DT log been	Yes	
Has the relevant in entered on to DAT Ni information should he safer custody tab i	? be entered under	Yes	
fas the IS91 Part Completed and sent corp should be sent community and UKBA	been It to DEPMU? Ito Safer	Yes	
	Co	mpleted By	1 11
rint Name	Steve Lo	ughton	
ime and Date	15.15 2	9/09/2019	
	*		
his form should be co illowing  Duty Director  Safer Commun  Healthcare  Chaplain  Security Intellig  UKBA	ity Coordinator	ACDT opened and	d distributed <b>withou</b> t delay to the

Page 1 of 1

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	DPA

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	Manager and the second				
	G:S	Date	Time Attended		
	G 15 Hearth		(1+10:00)		
	C3 # 7 F14723917.	2 <sup>rd</sup> Apric intment			
	Mental Health Referral Form	Outcome //	F. CENTE		
			F. C.M. 24.		
	Name: D1473	Date of DPA	Wing & C		
	Referred By: Mr Edward Omoraka	Birth:	W 15		
	4.5	Referral	Room No. STAN 256		
	is the detainee aware of the referral: Y	YES / NO CID : - 05434 much detail as possible as to why yc. 'eel it ap			
	individual to be seen by a Mental Heal	Ith Nurse) Depression, arrived with a copen ACI	propriate for the DT, C/O MIGRAIN, He		
	came with sertraline 100mg-tablets.				
			1		
			•		
	For completion by RMN				
	Ment Health Issue	Tick Mental Health saue	Tick		
	Stres Related	Suicide/ Self Harm			
	Sleer issue Torti e Related	Personality sorder			
	Imm jration issue	Personality sorder Alcohol/Sur ance Misus	SP.		
	Lo: Mood	✓ Bereavernε			
	Bi Folar Disorder Dispressive Disorder	Adjustmen Disorder			
	E. Pressive Disorder	Nil Require Tehavioural			
	Outcome				<b>~</b>
	Action ACDT	Tick Action	Tick		
	Referral to Psychiatrist	Referral to Jurse Triage Ongoing Mental Health Si	unnort		
	Referral to G.P	Medication			
	Referral to Chaptain	Stress/Sleep Managemer	nt		
	Nil Required	Ernotional Health Group			
	26 08 201)		Appointment:		
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