

**Glasgow City
Community Health Partnership
North West Sector**

**North West Glasgow
Primary Care Mental Health Team**
The Sandy Road Centre
12 Sandy Road
Partick
GLASGOW
G11 6HE



Tel: 0141 232 9270
Fax: 0141 232 9289

Private & Confidential

Mr Stephen Kearins
2 Sandbank Avenue
GLASGOW
G20 0DB

PiMs: RH/T/1736576
CHI: 1802796037
Date Dictated: 09 April 2015
Date Typed: 13 April 2015

Enquiries to: PCMHT
Direct Line: 39270

Dear Mr Kearins

We were sorry not to see you for your assessment appointment on Thursday 09 April 2015.

As we have not heard from you, you have been discharged back to the care of your GP.

If you would like further help from this service, you can refer yourself again by ringing the above number to arrange a further appointment.

Yours sincerely

**Rena Hilling
Team Medical Secretary**

cc Dr D Spence
Maryhill Health Centre
41 Shawpark Street
GLASGOW
G20 9DR

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PiMs	KA/1736576
CHI	1802796037
Date	13 January 2015

Mr Stephen Kearins
2 Sandbank Avenue
Glasgow
G20 0DB

Dear Mr Kearins

Following referral to PCMHT Services and discussion at our multi disciplinary allocation meeting, we would like to invite you to telephone our admin staff on the above number to arrange an assessment appointment or alternatively inform us if you no longer require our service.

If we do not hear from you by **27 January 2015** we will assume that you no longer require help from our service and we will refer you back to your GP's care.

Yours sincerely

**On Behalf of the
North West Primary Care Mental Health Team**

Cc Dr Spence
Maryhill Health Centre
41 Shawpark Street
Glasgow
G20 9DR

North West Glasgow Primary Care
Mental Health Team

Screening/Allocations

Date of referral :

Date Received:

Date notes requested:

Date of screening & Initials:

Patient Name: *Stephan
Kearns*

PIMS no: *1736576*

Chi No:

Patient Postcode:

Name of Referrer/GP:

Pre-screening:

New to Services Yes ☐

No ☒

(if new to services put for screening if previous contact with services await casenotes)

Retain ☒

Await Notes ☐

For Discussion ☐

Screening Actions:

Outcome:

Access Clinic two 12/1/14

Allocated to:

1736576

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER**MEDICAL IN CONFIDENCE**

GGC Mental Health Referral Protocol - Glasgow (Glasgow, v17.0)

REFERRAL TO	
PCMHT North West GGC Mental Health	— Consultant / receiving practitioner and/or specialty clinic
PCMHT (Primary Care Mental Health Team) SCI Gateway Virtual Location Code	— Hospital and hospital address
	Hospital location code. G006G
	Email address -
Urgency of referral ROUTINE	
Date of referral 05-Jan-2015	Date sent 05-Jan-2015

PATIENT DETAILS		Patient's address
Surname	Kearins	2 Sandbank Ave Glasgow G20 0DB
Forename(s)	Stephen	
Title	Mr	Contact number(s) Voice: 07753311884
Sex	Male	
Date of birth	18-Feb-1979	
CHI no.	1802796037	
Area of Residence	-	

1010084793960

Unique Care Pathway Number: 1010084793960

REGISTERED GP DETAILS		Practice address
Name	Dr Des Spence	Maryhill Health Centre (Green Wing) 41 Shawpark Street Glasgow G20 9DR
GMC code	3455256 GP code 05436	
Practice name	Barclay Medical Practice	Contact number(s) Voice: 0141-531-8811 Facsimile: 0141 531 8808
Practice code	43576	

REFERRING GP DETAILS		Practice address
Name	Dr. David Blane	Maryhill Health Centre 41 Shawpark Street Glasgow G20 9DR
GMC code	6129516 GP code 04863	
Practice name	Barclay Medical Practice (43576)	Contact number(s) Voice: 0141 531 8811 Facsimile: 0141 531 8808
Practice code	43576	

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Anger management / bereavement

Comment: Dear colleague,
I would be grateful for your counselling input with this gentleman, who has been struggling to come to terms with the death of his brother around 6mths ago. He has had a difficult life to date and has always struggled to express his emotions, which has led to addiction issues and anger outbursts. He has been sober from drugs and alcohol for many years (occasional cannabis only) and is currently doing well with a stable relationship and 2 children.
He is keen at this relatively stable period to have some one-to-one counselling (if possible - does not do well in groups) to help with controlling his emotions and at times angry outbursts.
He is currently on citalopram and prn diazepam and doing well on this.
Many thanks,
Dr D Blane

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Chest pain	admitted investigations normal	15-Nov-2013	15-Nov-2013
Inguinal hernia NOS	mesh repair	14-Aug-2006	14-Aug-2006
Fracture of scaphoid	-	29-Jan-1997	29-Jan-1997
Asthma	-	30-Dec-1996	30-Dec-1996
Umbilical hernia	spontaneously resolving	13-May-1981	13-May-1981
H/O: birth asphyxia	required intubation	12-Mar-1979	12-Mar-1979

Past procedures (High and medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date performed</u>	<u>Date recorded</u>
Endoscopy normal	upper GI	11-Mar-2011	11-Mar-2011

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

No current medications recorded

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Diazepam Tablets 2 mg	42	42 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	05-Jan-2015	05-Jan-2015
Diazepam Tablets 2 mg	56	56 tablet	ONE OR TWO TO BE TAKEN THREE TIMES A DAY	-	22-Dec-2014	22-Dec-2014
Diazepam Tablets 2 mg	28	28 tablet	TWO TO BE TAKEN THREE TIMES A DAY	-	17-Dec-2014	17-Dec-2014
Citalopram Hydrobromide Tablets 10 mg	28	28 TABLET	ONE TO BE TAKEN EACH DAY	-	15-Dec-2014	05-Jan-2015
Diazepam Tablets 2 mg	14	14 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	12-Dec-2014	15-Dec-2014
Diazepam Tablets 2 mg	21	21 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	02-Dec-2014	02-Dec-2014

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Current smoker:		22-Jun-2011
Light smoker - 1-9 cigs/day: Smoker\$\$ Status.clm		20-Jan-2010

Current smoker: priority=2 10-Dec-2009

Clinical warnings

Additional relevant information

Administrative information

Risk of Suicide:No

Past history of suicide attempt:No

Risk of deliberate self harm:No

Is patient responsible for children?:Yes

If yes to patient responsible for children, please give details:has 2 children

Risk to others including children/dependents/clinicians/other:Yes

If yes to Risk to others including children / dependents / clinicians / other, please give details:Low risk, but has had angry outbursts before - do not think has actually physically assaulted anyone

Risk from others:No

Risk of Self Neglect:No

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

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