

Case Notes

East Lothian & Midlothian Mental Health Services
Midlothian Health & Social Care Partnership
Director of Health & Social Care: Eibhlin McHugh
Head of Health: Allister Short
Clinical Director: Hamish Reid

Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8982 Fax 0131
536 8917
www.nhslothian.scot.nhs.uk



Mary Begg
Mental Health Nurse Therapist

Date 12 August 2015
Chi 2706830751
Our Ref PB/LW/

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mary

Re: Christopher Wright (27.06.83), 119 Woodburn Drive, Dalkeith, EH22 2BB

As you will recall you referred Christopher Wright to the Men's Survive & Thrive Course which commenced on Tuesday 21st April 2015. Please accept my apologies for the lateness of this letter, unfortunately my original letter was accidentally deleted after I had sent it for typing about half way after the course had commenced.

I met with Christopher on the 10th April 2015 for a meet and greet appointment. At this time he described episodes of feeling low, contrasted by episodes of increased energy, poor sleep and a lack of routine and no social contact other than his girlfriend, whom he saw regularly. We discussed the Survive & Thrive Course which seemed appropriate for him, however Christopher was uncertain whether he would attend. This was mainly due to his difficulties getting out and about, his low mood and lack of energy and also his anxiety about attending a group. I explained the nature of the course and tried to address his anxieties and encourage him to attend however he remained ambivalent about whether he would attend.

Sadly Christopher did not attend the course so I would be grateful if you would see him for a follow up appointment. My feeling is that the Survive & Thrive Course would be appropriate and perhaps he would feel able to attend the next group which commences on the 28th September, however I am uncertain whether much will have changed for him and whether he will feel more motivated to attend.

Please do not hesitate to contact me if you have any further questions.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Penny Balfour', written in a cursive style.

Penny Balfour
Clinical Associate in Applied Psychology



INVESTOR IN PEOPLE



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
Chair Mr Brian Houston
Chief Executive Tim Davison
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Primary Care / Psychological Therapies Service Initial Assessment

Responsible Clinician: *May Bn*
Clinician's Phone No: *031 531 9056*

Date assessment commenced *16/12/14*

1. Personal details	
Surname	
First name	
Preferred name	CHI: 2706830751 
CHI	Wright, Christopher 119 Woodburn Drive DALKEITH Midlothian EH22 2BB
Date of birth	MHI: 161306 Male 27/06/1983
MHI	
Address	
Postcode:	
Telephone no:	

Sex:	Male
Title:	<i>MR</i>
Surname at birth:	
Other previous surname:	
Ethnic group:	Not specified
1st language	<i>English</i>
Interpreter required?	☐ Yes ☒ No
Occupation:	<i>—</i>
Religion / beliefs:	Not Known
Address type:	Permanent / Temporary
UK Resident last 12months:	☒ Yes ☐ No

2. GP details	
GP	<i>Farrell</i>
Practice	<i>Newbattle</i>
Practice address	
Postcode:	
Telephone no:	
Fax no	

3. Next of Kin	
Surname:	
First name	
Relationship:	<i>partner Kelly</i>
Address:	<i>same address</i>
Postcode:	
Telephone no:	

Alerts

(e.g. Allergies, Safety issues, Routine Enquiry Gender Based Violence issues)

*in appropriate sexual behaviour towards boys and girls
claims of sexual abuse by an 18 year old girl then
subsequently whilst in secondary school*

3. Reason for Referral

History of presenting problems (Inc. referrer's diagnosis and the person's view of the problem)

Client sees himself as being depressed due to traumas from his past including rejection by family, particularly difficult up until mother, mainly between school, bullying, sexual abuse, domestic violence towards him by last 2 partners.

- No mention of own behaviour. Places responsibility for all the bad things on his life upon others.

4. Assessment

Current Social circumstances:

Lives with fiancée. Together 5 years. She is also reputed to be abusive towards him. Last meeting deep unemployed.

Education / Brief employment history (is the person's employment at risk?):

Schooling influenced by mainly between foster carers. Also said he went to Farnham Home School because of learning difficulties.

Self care / Home management:

Lives with partner.

Interests / Social and Leisure pursuits:

2 friends, mini dog, playing pool, gay.

Early experiences / early social history / relationships with family:

Extensively covered in case notes

Name:

CHI:

Current mental state examination (Please include examination of: Mood, Appearance & Behaviour, Speech & Communication, Sleep pattern/Energy levels/Motivation/Appetite, Concentration/Attention span/Memory recall (Short term and long term memory function), Suicidal ideation (Further details also required in Section 5/Risk assessment), Thought content/Abnormal beliefs/Abnormal experiences/Thought disorder).

- 20 mins late -

Well presented, Spee ad answered appropriately in session.

appetite poor

concentration - dependent on mood

deep - poor, - helped by anithypertensive

lies vagra.

energy levels reported to be low.

Past Psychiatric history:

attended Falkland Home School (residential 1996) for

- boys with emotional and behavioural difficulties

- outpt. - Shatford Hospital

- young peoples unit.

Any known family psychiatric history:

none - had psychological therapy - Brother Jerome
had couple therapy, designed plans etc whilst on leave for
3 1/2 years. - none had difficulties due to association.

Previous Psychological therapies / Self help / Matched care interventions (From whom and when?):

Physical health issues

Name:

CHI:

Current medication (include date when started, include over the counter medicines, name, dosage, concordance, previous medications):

Verapamil
Amitriptyline
Nagva

Current Alcohol use (note quantity, units if known, frequency):

Reports occasionally drinking 1 1/2 litres vodka daily

Past history of alcohol excess/ misuse (document details, including any previous treatment, fits/seizures):

? lost job - couldn't give details - blames for and responsibility

Risk of dependence/ withdrawal complications: ☐ Yes No ☐

Smoker: Never Smoked / Ex-smoker / Current Smoker: :per day

Other substance use:

Prescribed opiate substitute? ☐ Yes No ☐ If yes: Details of who prescribes and who dispenses:

Risk of dependence/ withdrawal: ☐ Yes No ☐

Risk of blood borne virus: ☐ Yes No ☐

5. Risk Screening

Current Risk to self (e.g. suicide, self harm, driving):

Yes ☐ No ☐ Unknown ☐

no suicidal ideation.

Previous episodes of suicide attempts / previous deliberate self harm:

⑮ - stepped by an American couple from jumping off North bridge Took to a cafe and spoke to him. Client claims they are still in contact.

Risk to children (e.g. neglect, abuse)

Yes ☐ No ☐ Unknown ☒

Is there a risk to children due to mental state? (e.g. child included in suicide plans, delusional thinking/psychotic depression):

History of inappropriate sexualised behaviour. Last four years continued to leave concerns due to "nudes incidents undisclosed" and supervised child contact with an own niece/nephews

Contact details Health Visitor:

Informed: ☐ Yes Date: No ☐

Contact details Social Services:

Informed: ☐ Yes Date: No ☐

Name:

CHI:

Risk to others

Yes ☐ No ☐ Unknown ☐

(e.g. Any forensic history, aggression, violence, driving, access to weapons, supervision failure):

- please see care notes
history of sexualised behaviour inappropriately
with boy, girls and a dog.

Risk from others (e.g. abuse, exploitation, domestic violence)

Yes ☐ No ☐ Unknown ☐

reports being subject to domestic violence by parent

GBV Routine Enquiry assessed: Yes ☒ No ☐

Data entered onto Pims: Yes ☐ No ☐

Further investigation required? Yes ☐ No ☐

By Whom?:

5. Risk Screening (continued)

Risk of neglect (e.g. health, alcohol/substance use, personal):

Yes ☐ No ☒ Unknown ☐

Further investigations required?

Yes ☐ No ☒

By whom?

Risk of physical impairment (e.g. memory, sensory):

Yes ☐ No ☒ Unknown ☐

Further investigations required?

Yes ☐ No ☒

By whom?

Sources of information available/used: GP, patient only

If other please specify:

diary, care notes.

Name:	CHI:
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Third party information documented/filed separately in Case notes: Yes ☐		
Is Level 2 Risk Assessment indicated?	Yes ☐	No ☐
Responsible team:		

Assessor – Name/Grade:	Signature:	Date
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6. Summary & plan

Formulation /Diagnosis: *low mood in association with a series of traumatic events dating back to childhood and more recently within 2 long term relationships. He does not appear to take any personal responsibility for any role he may have contributed to these events*

Does the patient have a treatment preference? Yes ☐ Please detail below No ☐

Patient consent to share information obtained? ☒ Yes ☐ No Further details:

Does person have Information leaflets on service and Code of Practice / Patient Confidentiality? ☐ Yes ☐ No

Is a Crisis plan required? Yes ☐ No ☐ (if Yes please include as part of the Agreed plan below)

Agreed plan (inc. plan to manage identified risks):

Placed on Mens Survive & Thrive waiting list

Any Actions to be taken by GP:

Copy sent to GP ☐ Yes Date: ☐ No

PHQ9 Score:-	GAD7 Score:-	DASS Score (if indicated):
CORE Score Total:- <i>22</i>		
Other Outcome Scores:-		
Patient given copy of information sheet about outcome scores and Agreed Plan? ☐ Yes ☐ No		

Assessor – Name/Grade: <i>DNB</i>	Signature: <i>MB</i>	Date: <i>18/12/14</i>
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Nome:

CHI:

PHQ-9, GAD-7 and CORE Scoring

PHQ-9 scoring

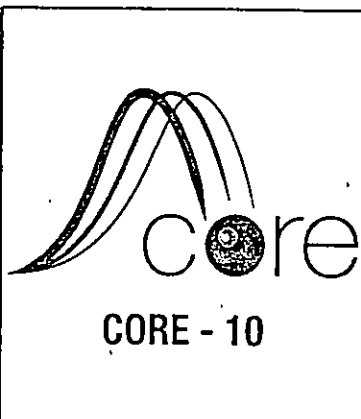
PHQ score	Interpretation (indicative)
0-9	Adjustment disorder/mild depression
10-14	Mild depression
15-19	Moderate/severe depression
> 20	Severe depression

GAD- 7scoring

GAD score	Interpretation (indicative)
5-10	Mild Anxiety
10-15	Moderate Anxiety
15-20	Severe Anxiety

CORE scoring (General Wellbeing function)

CORE score	Interpretation (indicative)	Clinical cut off
Severe	85 - 136	
Moderately Severe	68 - 84	
Moderate	51 - 67	
Mild	34 - 50	
Low Level	21- 33	
Healthy	0 - 20	



Site ID		Age		Male	☐
Letters only	Numbers only			Female	☐
Client ID		Stage Completed			
Therapist ID		S1 Screening	☐		
Numbers only (1)	Numbers only (2)	R1 Referral	☐		
Subcodes		A1 Assessment	☐	Stage	☐
ID FAD	ML PM	F1 First therapy Session	☐		
		P2 Pre-therapy (unspecified)	☐		
		D3 During therapy	☐		
		L4 Last therapy Session	☐		
		U1 Follow up 1	☐	Episode	☐
		U2 Follow up 2	☐		
Date form given					

IMPORTANT - PLEASE READ THIS FIRST

This form has 10 statements about how you have been OVER THE LAST WEEK.

Please read each statement and think how often you felt that way last week.

Then tick the box which is closest to this.

Please use a dark pen (not pencil) and tick clearly within the boxes.

Over the last week

	Not at all	Only Occasionally	Sometimes	Often	Most or all the time
1. I have felt tense, anxious or nervous	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4
2. I have felt I have someone to turn to for support when needed	☐ 4	☐ 3	☐ 2	☐ 1	☒ 0
3. I have felt able to cope when things go wrong	☐ 4	☒ 3	☐ 2	☐ 1	☐ 0
4. Talking to people has felt too much for me	☐ 0	☐ 1	☒ 2	☐ 3	☐ 4
5. I have felt panic or terror	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4
6. I made plans to end my life	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4
7. I have had difficulty getting to sleep or staying asleep	☐ 0	☒ 1	☐ 2	☐ 3	☐ 4
8. I have felt despairing or hopeless	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4
9. I have felt unhappy	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4
10. Unwanted images or memories have been distressing me	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4

Total (Clinical Score*)

22

* Procedure: Add together the item scores, then divide by the number of questions completed to get the mean score, then multiply by 10 to get the Clinical Score.

Quick method for the CORE-10 (if all items completed): Add together the item scores to get the Clinical Score.

THANK YOU FOR YOUR TIME IN COMPLETING THIS QUESTIONNAIRE

East Lothian and Midlothian
Psychological Therapies Service

Pre-Assessment Questionnaire



Your name:

Date:

1. Please, give a brief description of your difficulties and symptoms. Say how long you had them.

2. What effects have your difficulties and symptoms had on your life?
How do they affect you now?

3. How do you think these difficulties and symptoms have come about?

Woke - decided to go back with him
at 2:15 in new car. (had 3 years old)
named - she was also about a year -
Killing date let 6 1/2 - very close to him
man. severely disabled - fine spirit her
in home and the parents.

Went to deal with the car
above from Kelly.

Car 22
Buckley
Molly Sumner & Home

switched (18) right away turning off
battery in starting. In system, why

American cable pulled him off, took to age
all spoke to him. - Remained in car.

Choice of 2nd of cases. never have
here length too.

no dog
no dog
no dog

had to drive a car. Trying to be close
they used on today - see latest RIT

Chickadee pulled into local dog rate
current economy today / importantly

about 11/2 of vodka today.
saved from work no any and drive

Changcheng - (20 Feb)

put into case (6) man - step father with little
freedom (2) site late. Rained case (3) account
of seeing abuser after battle. Note s/p circuit
no evidence to suggest he dead. - stayed as wife

26. - Fetal cancer and metastatic case.
Stepfather: metastatic cancer, note can be
They split up. Cancer spread his 8 years ago. man
up ship always been different. Not really worried as he
son. No cancer found for years and thought as the
her near his name of equal girl.

Stead - handle. Primary from to auto so start drinking.
Rationalized shot the - due to underlying leaning difficulty.
Falsified (4) the reason. - Bullying + sexual abuse
- gave him ^{some} help to get ship, demands returns

3 years later is into handle - battered.
- been with been (5) - target. Similar situation with
as bus. He is getting deep into it.

- Deposition - - sees experiences from past as
being main reason for this.

/ this want to do nothing, poor sex life. (an naga ho)
Voluntary - feel burnt + diagnosed weekly
sleep - helped by antidepressants and hospital
apoptotic - app. impaired
Concentration - variable depending on mood.

Unemployment - last worked 2006. - AD spent
went to college HNC - dance, music, mathematics
technology - 3 - 6 - 6 - not completed

AD is 13 - got engaged to a female - dropped
as someone didn't like the money from a candy rights
(Jensen)

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Dr. Gaskell,
Newbattle Medical Practice,
Blackcot,
Mayfield,
Midlothian.

Date 23rd December 2014.
Chi 2706830751
Our Ref MB/VD

Enquiries to Margaret Scott, Secretary
Extension 58981
Direct Line 0131 536 8981

Dear Dr. Gaskell,

RE: Christopher Wright – d.o.b. 27.06.1983.
119 Woodburn Drive, Dalkeith. EH22 2BB.

? now 60 still at Mayfield
EH 22 5LR

Thank you for referring this gentleman. Alerts – there has been previous inappropriate sexual behaviour towards boys and girls and claims of sexual abuse perpetrated towards him by an eighteen year old girl then subsequently whilst in residential school.

Reason for referral

The client views himself as being depressed due to traumas from his past including rejection by his family and a particularly difficult relationship with his mother. He has moved between schools a number of times and has suffered from bullying, sexual abuse, domestic violence towards him by at least two partners in more recent times. There is no mention of his own behaviour in the past and he seems to place responsibility for all the bad things in his life upon other people/ situations.

Formulation/diagnosis

Low mood in association with a series of traumatic events dating back to childhood and more recently within two long-term relationships. He does not appear to take personal responsibility for any role he may have contributed to these events.

Agreed plan

I have placed him on the waiting list for the Men's Survive and Thrive Group. His CORE score total is 22. Risk assessment – there is no current suicidal ideation. He did tell me that at age eighteen he was stopped by an American couple from jumping off North Bridge. They then took him to a Café and spoke to him regarding his difficulties. He claims that they are still in contact with him.



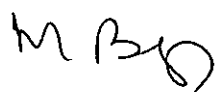
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2.

Yours sincerely,



Mary Begg.
Mental Health Nurse Therapist.

East Lothian & Midlothian Mental Health Services
Midlothian Health & Social Care Partnership
Director of Health & Social Care: Eibhlinn McHugh
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www.nhslothian.scot.nhs.uk



Mr Christopher Wright
60 Steele Avenue
Mayfield
Dalkeith
EH22 5LR

Date 4th December 2014
Chi 2706830751
Our Ref MB/KM/161306

Enquiries to Margaret Scott, Secretary
Extension
Direct Line 0131 536 8981

Dear Mr Wright,

As you know Dr A Gaskell has referred you to the Psychological Therapies Service for help with your difficulties.

I am writing to confirm your **initial assessment** appointment time is on **Tuesday 16th December 2014 at 10.00am at the Bonnyrigg Medical Centre, 109-111 High Street, Bonnyrigg, EH19 2ET.** (Please bring your letter with you and go to the Community Reception desk. The waiting area is the same as used by Podiatry and Physiotherapy).

If you do not attend this appointment and we don't hear from you within 7 days, you will be discharged from this service.

Please note that this is an assessment appointment to help agree a way forward which best meets your needs. There is usually a wait for treatment following this.

It will be helpful if you could complete the enclosed questionnaires and bring it with you.

If it is not possible for you to attend at this time, please contact our secretary as soon as possible on 0131 536 8981 between 9am and 2pm or leave a message on the answering machine, so that an alternative time can be arranged.

If for whatever reason this appointment is no longer required, please inform us as soon as possible so that it can be offered to someone else. This will help reduce waiting times and allow us to make the best use of our resources. Your assistance will be much appreciated.

Yours sincerely,

Mary Begg
Mental Health Nurse Therapist

Ce. Dr Gaskell, Newbattle Medical Practice



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Mr Christopher Wright
60 Steele Avenue
Mayfield
Dalkeith
EH22 5LR

Date 14th November 2014
Chi 2706830751
Our Ref KM/

Enquiries to Margaret Scott, Secretary
Extension 58981
Direct Line 0131 536 8981

Dear Mr Wright,

You have recently been referred to the East & Midlothian Psychological Therapies Service. We are now ready to offer you an appointment for an initial assessment. To give you some idea about how the Psychological Therapies Service operates and what to expect, we include with this letter a leaflet about our service.

If you would like us to arrange an assessment appointment, then please telephone us within the next two weeks on this number: 0131 536 8981.

Please note: If we have not heard from you within the next two weeks, we will assume that you do not wish to proceed and we will close the referral. If you later change your mind, then you would need to speak to your GP or psychiatrist about making another referral for you.

Our secretary is usually available between 9am and 2pm, but if no-one is available to take your call then please leave a message for us. Once we have received your reply then we will post you an appointment as soon as possible.

Yours sincerely

Secretary

Cc. Dr A Gaskell, Newbattle Medical Practice

Enc. Information Leaflet



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
Chair Mr Brian Houston
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3/11/14 OPT-14 (2) 82 17

TVSV

NHS Lothian - Referral Letter

Referral To	Mental Health Midlothian - Adult Psychiatry (Non Urgent Only) L Psychological Therapy Serv
Urgency of referral	Routine
Date of referral	29/10/2014
Date submitted	29/10/2014
UCPN	1010081349592

PATIENT DETAILS	Contact Details	
CHI number: 2706830751	60 STEELE AVENUE	Voice (Mobile) : 07925471675 ✓
Name: MR CHRISTOPHER WRIGHT	MAYFIELD	
Date of birth: 27/06/1983	DALKEITH	
Sex: Male	EH22 5LR	

161306

REFERRING PRACTITIONER DETAILS	Practice address
Name: Dr. Anna Gaskell (GMC: 6151087)	Blackcot
Practice: Newbattle Medical Practice (77106)	Mayfield
Phone: Voice : 0131 663 1051	Midlothian
	EH22 4AA

CLINICAL INFORMATION

Reason for Referral:	low mood
Main Referral Text:	Dear Colleague, I would be grateful for your assessment of this 31 year old gentleman who has had ongoing problems with low mood. He is currently on treatment with Venlafaxine and feels that this is helping. However, he has had a number of relationship difficulties over the past year and has recently found out that his partner has cheated on him once again. They are still together and she seems to be making a lot of demands. He feels that his mood is up and down. He was previously referred for counselling in the past but didn't manage to attend the appointment. He feels that this would be helpful in addition to his medication. Christopher is currently unemployed. He and his partner do not have any children. He is otherwise physically quite well. On examination today, he seemed reactive and chatty in consultation. We have not made any changes to his medication at present but I think he would benefit from a course of counselling given these ongoing life issues. Kind regards Yours sincerely, Dr. Anna Gaskell
Investigations	
Description	
Result	
Date	

Referral to specific professional/intervention : Mental Health Nurse Therapist
 Assessment Tool Used : Not appropriate
 Score on Scale : n result
 Impact of presenting mental health problems on social and occupational functioning : Moderate
 Significant Risk : No
 Drug/alcohol use (past and present) : No
 Other agencies currently involved (including non-NHS) : No
 Received previous psychological intervention : Yes
 If yes, please specify : Norma Frazer October 2013

Pre-existing conditions (High & Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Extension</u>	<u>Start Date</u>	<u>Date Recorded</u>
Epididymal cyst		-right	27/01/2011	27/01/2011
[X]Depressive episode	First ever		20/07/2009	20/07/2009
Epididymal cyst		-right	23/07/2003	23/07/2003
Other acne			10/02/2003	10/02/2003
Anxiety states			04/04/2001	04/04/2001
[X]Post - traumatic stress disorder			15/10/1999	15/10/1999
Atopic dermatitis/eczema			02/07/1999	02/07/1999
Allergic rhinitis			02/07/1999	02/07/1999
Closed fracture nose			26/04/1999	26/04/1999
Behavioural problem			05/06/1991	05/06/1991
Enuresis			30/01/1989	30/01/1989

Past procedures (High and Medium Priority)

<u>Procedure</u>	<u>Comment</u>	<u>Modifier</u>	<u>Date Performed</u>	<u>Date Recorded</u>
Operations for squint	-left		05/06/2013	05/06/2013
Eye operations			09/09/1997	09/09/1997

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

<u>Drug name</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>	<u>Last Prescribed Date</u>
Venlafaxine 150mg modified-release capsules	capsule	2 CAPSULES ONCE DAILY		24/09/2014		24/09/2014
Venlafaxine 75mg modified-release capsules	capsule	1 CAPSULE ONCE DAILY		24/09/2014		24/09/2014
Amitriptyline 25mg tablets	tablet	TAKE THREE AT NIGHT		24/09/2014		24/09/2014
Ibuprofen 600mg tablets	tablet	1 TABLET THREE TIMES DAILY		24/09/2014		24/09/2014
Sildenafil 100mg tablets	tablet	1 TABLET WHEN REQUIRED		24/09/2014		24/09/2014
Senna 7.5mg tablets	tablet	2 TABLETS AT NIGHT. THIS MEDI [more]		24/09/2014		24/09/2014
Paracetamol 500mg tablets	tablet	2 TABLETS AS REQUIRED UP TO 4 [more]		24/09/2014		24/09/2014

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

<u>Drug name</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>	<u>Last Prescribed Date</u>
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Sildenafil 100mg tablets	tablet	1 TABLET WHEN REQUIRED	24/09/2014	24/09/2014
Senna 7.5mg tablets	tablet	2 TABLETS AT NIGHT. THIS MEDICINE [more]	24/09/2014	24/09/2014
Paracetamol 500mg tablets	tablet	2 TABLETS AS REQUIRED UP TO 4 [more]	24/09/2014	24/09/2014
Paracetamol 500mg tablets	tablet	2 TABLETS AS REQUIRED UP TO 4 [more]	24/09/2014	24/09/2014
Amitriptyline 25mg tablets	tablet	TAKE THREE AT NIGHT	11/08/2014	11/08/2014
Venlafaxine 150mg modified-release capsules	capsule	2 CAPSULES ONCE DAILY	04/08/2014	04/08/2014
Venlafaxine 75mg modified-release capsules	capsule	1 CAPSULE ONCE DAILY	04/08/2014	04/08/2014
Amitriptyline 25mg tablets	tablet	TAKE ONE AT NIGHT	04/08/2014	04/08/2014
Ibuprofen 400mg tablets	tablet	1 TABLET UP TO THREE TIMES DAILY	04/08/2014	04/08/2014
Additional information				
Patient Weight in Kilograms:85				
Patient Height in Metres:1.92				

East Lothian & Midlothian Mental Health Services
Midlothian Health & Social Care Partnership
Director of Health & Social Care: Eibhlinn McHugh
Head of Health: Allister Short
Clinical Director: Hamish Reid

Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8982 Fax 0131
536 8917
www.nhslothian.scot.nhs.uk



Dr Chapman
Dalkeith Medical Practice
24-26 St Andrew Street
Dalkeith
EH22 1AP

Date 18 September 2014
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Waison, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Dr Chapman

Re: Christopher Wright (27.06.83), 119 Woodburn Drive, Dalkeith, EH22 2BB

Further to my letter dated 22/10/13 Mr Wright was offered a treatment appointment on 9th July 2014 and unfortunately did not attend.

He has not responded to a subsequent letter and I will therefore discharge him from our service.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
Chair Mr Brian Houston
Chief Executive Tim Davison
Lothian NHS Board is the common name of Lothian Health Board

East Lothian & Midlothian CHPs Management Team
Chairman (East Lothian): Mr Michael Ash
Chairman (Midlothian): Mr Peter Johnston
General Manager: Mr David Small

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Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 23 July 2014
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

I am sorry you were unable to attend your appointment.

Please let me know if you would like another appointment by contacting our secretary on 0131 536 8982 between 9 am and 1pm or by leaving a message on the answering machine, so that an alternative time can be arranged. However, if I do not hear from you within the next 14 days, I shall assume you no longer wish to be seen and will close your file accordingly.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

Cc. Dr Chapman, Dalkeith



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Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 24 June 2014
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

Following your initial assessment I would like to offer you an appointment for treatment on **Wednesday 9th July 2014 at 2pm at the New Bonnyrigg Health Centre, 109-111 High Street, Bonnyrigg (community reception)**. If it is not possible for you to attend at this time, please contact our secretary as soon as possible on 0131 536 8982 between 9 am and 1pm or leave a message on the answering machine, so that an alternative time can be arranged.

It will be helpful if you could complete the enclosed questionnaires and bring them with you.

If for whatever reason this appointment is no longer required, please inform us as soon as possible so that it can be offered to someone else. This will help reduce waiting times and allow us to make the best use of our resources. Your assistance will be much appreciated.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

Cc: Dr Chapman, Dalkeith



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
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EH19 2DA
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Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 01 April 2014
Chi 2706830751
Our Ref RB/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

As you will be aware, following your assessment appointment with a practitioner from the Psychological Therapies Service, your name was placed on the waiting list for the Survive and Thrive course.

I am pleased to inform you that I can invite you along for a "meet and greet" session, to review your current situation and discuss the course prior to it beginning in September. For those who don't know the venue, it is also a chance to establish its location and how long it will take to get there etc. This is to help minimise anxieties for the first session.

Your appointment has been booked for:-

- Monday 28th April at 13.15
- Musselburgh Primary Care Centre, 1st floor out-patient department

DNA will send opt letter close to time

This will last approximately half an hour.

If this appointment is unsuitable, but you still wish to come to the group, please contact me on 0131 536 8982.

If you do not attend the session and there has been no contact from you, we will assume you no longer wish our assistance and discharge you back to the care of your GP.

I have enclosed an information leaflet about the course and a map showing how to get to Musselburgh Primary Care Centre.

Yours sincerely,

Richard Browne
Clinical Associate in Applied Psychology

Cc Dr Chapman, Dalkeith



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
Chair Mr Brian Houston
Chief Executive Tim Davison
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Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

Dr Chapman
Dalkeith Medical Practice
24 St Andrew Street
Dalkeith
EH22 1AA

Date 22 October 2013
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Dr Chapman,

RE: Christopher Wright (27.06.83), 119 Woodburn Drive, Dalkeith, EH22 2BB

Thank you for referring this young man for assessment as to his suitability for psychological intervention, I met with him on the 14th October 2013 when he told me that his main problem was "my depression".

He said that he hates the depression and hates the fact that he's not working and sometimes feels "what's the point of being here". He then said that he looks at his partner and that answers this question.

He said he has been depressed since around the time that his sister died and he told me later that she had in fact been murdered. He said that since her death he has been more or less constantly depressed. He said that he first experienced depression at the age of 13 and you will be aware that he has experienced a range of aversive experiences in childhood which almost certainly will have contributed to his current difficulties.

He said that when he was about 8 years old his mother accused him of "molesting my little brother" which he said emphatically that he did not do anything. He added that at that age he didn't even know what it meant to molest someone.

He said that more recently he has started experiencing "flashbacks" of the period when he was abused. This appears to have been triggered when [REDACTED] his partner, "started hitting me". He said that when they argue she starts lashing out and then becomes extremely remorseful. He said that she is getting help to sort this out and in fact he had not been hit for approximately 8 months.

My impression is that Mr Wright does indeed require some help to overcome current difficulties which appear to stem from an aversive set of experiences in childhood. I have given him the Healthy Reading list and encouraged him to look at some of these texts. I have also informed him about the Survive & Thrive group which is being organised for men who have experienced traumatic life experiences. I have also placed his name on the waiting list and he will be offered a treatment appointment as soon as a therapist is available. Thank you again for referring this man.



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
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Chief Executive Tim Davison
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Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

East Lothian & Midlothian CHPs Management Team
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Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 13 September 2013
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

As you know Dr Chapman has referred you to the Psychological Therapies Service for help with your difficulties.

I am writing to offer you an **initial assessment** appointment on **Monday 14th October 2013 at 2pm** at **Dalkeith Medical Practice, 24 St Andrew Street, Dalkeith (community health reception)**.

Please note that this is an assessment appointment to help agree a way forward which best meets your needs. There is usually a wait for treatment following this.

It will be helpful if you could complete the enclosed questionnaires and bring them with you.

If it is not possible for you to attend at this time, please contact our secretary as soon as possible on 0131 536 8982 between 9am and 1pm or leave a message on the answering machine, so that an alternative time can be arranged.

If for whatever reason this appointment is no longer required, please inform us as soon as possible so that it can be offered to someone else. This will help reduce waiting times and allow us to make the best use of our resources. Your assistance will be much appreciated.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

Cc. Dr Chapman, Dalkeith



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Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 30 August 2013
Chi 2706830751
Our Ref LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

As you know Dr Chapman has referred you to the Psychological Therapies Service for help with your difficulties.

We would like to offer you an **initial assessment** session. The purpose will be to find out how things are for you, and to agree a way forward which best meets your needs.

Please can you contact the Secretary within the next 2 weeks on 0131 536 8982 to arrange a suitable appointment time. If we do not hear from you within this time we will assume that you no longer require an appointment and will close your file accordingly.

Our secretary can be contacted between the hours of 9am and 1pm, or you can leave a message on the answering machine and we will call you back.

Enclosed is some information that you may find helpful.

We look forward to hearing from you.

Yours sincerely

A handwritten signature in black ink that reads 'Lynda Watson'.

Lynda Watson
Medical Secretary

Cc. Dr Chapman, Dalkeith



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
Chair Mr Brian Houston
Chief Executive Tim Davison
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22/8/13. p/s✓
 OPT-IN (4)

NHS Lothian - Referral Letter

Referral To	Mental Health Midlothian - Adult Psychiatry (Non Urgent Only) L Psychological Therapy Serv
Urgency of referral	Routine
Date of referral	02/08/2013
Date submitted	13/08/2013
UCPN	101005743277H

PATIENT DETAILS		Contact Details	
CHI number:	2706830751	119 WOODBURN DRIVE	Voice (Home) : 07925471675
Name:	MR CHRISTOPHER WRIGHT	DALKEITH	
Date of birth:	27/06/1983	MIDLOTHIAN	
Sex:	Male	EH22 2BB	

REFERRING PRACTITIONER DETAILS		Practice address
Name:	Dr. Keith Chapman (GMC: 2748009)	The Health Centre
Practice:	Dalkeith Medical Practice (77197)	24-26 St Andrew Street
Phone:	Voice : 0131 561 5500	Dalkeith
		EH22 1AP

CLINICAL INFORMATION

Reason for Referral:	Depression		
Main Referral Text:	Dear Team I'd be grateful for you seeing this chap once again. He is a young man who has had a lot of contact with the Psychology Department over the years. He had a fairly long-term contact with the Department of Child & Family Psychiatry at the RHSC when he was a child. He went on to have contact with YPU and has also been seen by the Mental Health Team in Midlothian on a number of occasions. He has requested referral himself as he is having trouble with repeated ruminations about his childhood. There are other letters which describe details of his childhood but, essentially, he ended up in care due to problems with his own family where he was seen as being a difficult child and also had over-sexualised behaviour towards others in the household. He ended up at Dunbar with Foster Carers where he was allegedly sexually interfered with by a number of other children. He also alleges that he was sexually interfered with by an older woman. He has previously failed to engage much with Psychology Services, but on this occasion actually requested this himself. I would, therefore, hope that he would be able to make better use of this on this occasion. I think it is possible he may require some longer-term involvement and, therefore, may require Psychologist support. Many thanks for your assessment.		
Investigations	Description	Result	Date
Referral to specific professional/intervention :	Referral to specific professional/intervention :	Clinical Psychology	
Please specify reason for your selection :	Please specify reason for your selection :	Did not take up previous referral but feels is ready to do so now. Looking to get longer term input as numerous issues relating to childhood.	
Assessment Tool Used :	Assessment Tool Used :	PHQ-9	
Score on Scale :	Score on Scale :	18	

Impact of presenting mental health problems on social and occupational functioning : Moderate
 Significant Risk : No
 Drug/alcohol use (past and present) : No
 Other agencies currently involved (including non-NHS) : No
 Received previous psychological intervention : Yes

Pre-existing conditions (High & Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Extension</u>	<u>Start Date</u>	<u>Date Recorded</u>
Computer summary updated			25/01/2012	25/01/2012
[X]Depressive episode	New event		23/01/2012	23/01/2012
[X]Depressive episode		Severe	20/07/2009	20/07/2009
Notes summary on computer			07/01/2005	07/01/2005
Asthma resolved			07/01/2005	07/01/2005
Acne, unspecified			10/02/2003	10/02/2003
Anxiety states			04/04/2001	04/04/2001
[X]Post - traumatic stress dis		Possible	15/10/1999	15/10/1999
Allergic rhinitis - pollens			02/07/1999	02/07/1999
Atopic dermatitis/eczema			02/07/1999	02/07/1999
Fracture of nasal bones			26/04/1999	26/04/1999
Disturbance of conduct NEC			05/06/1991	05/06/1991
Enuresis			30/01/1989	30/01/1989
Asthma NOS			22/05/1987	22/05/1987
Constipation - functional			18/12/1984	18/12/1984

Past procedures (High and Medium Priority)

<u>Procedure</u>	<u>Comment</u>	<u>Modifier</u>	<u>Date Performed</u>	<u>Date Recorded</u>
Eye muscle operations	Bilateral		09/09/1997	09/09/1997

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

<u>Drug name</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>	<u>Last Prescribed Date</u>
Propranolol 40mg tablets	tablet	1 TABLET FOUR TIMES DAILY		02/08/2013		02/08/2013
Amitriptyline 10mg tablets	tablet	4 TABS AT NIGHT		02/08/2013		02/08/2013
Venlafaxine 75mg modified-release tablets	tablet	1 TABLET IN THE MORNING		02/08/2013		02/08/2013
Venlafaxine 150mg modified-release tablets	tablet	2 TABLETS IN THE MORNING		02/08/2013		02/08/2013
Sildenafil 100mg tablets	tablet	1 TABLET WHEN REQUIRED		02/08/2013		02/08/2013
Venlafaxine 75mg tablets	tablet	TAKE TWO TWICE DAILY		02/07/2013		02/07/2013
Amitriptyline 10mg tablets	tablet	4 TABS AT NIGHT		02/07/2013		02/07/2013
Propranolol 40mg tablets	tablet	1 TABLET THREE TIMES DAILY		02/07/2013		02/07/2013
Sildenafil 50mg tablets	tablet	1 TABLET WHEN REQUIRED. MAX 1[more]		02/07/2013		02/07/2013
Tramadol 50mg capsules	capsule	1 OR 2 CAPSULE 4 HOURLY WHEN [more]		02/07/2013		02/07/2013
Paracetamol 500mg		1 TO 2 TABLETS				

tablets	tablet	UP TO FOUR TIM [more]	02/07/2013	02/07/2013
Maxidex 0.1% eye drops (Alcon Laboratories (UK) Ltd)	ml	THREE TIMES A DAY TO LEFT EYE	13/06/2013	13/06/2013
Chloramphenicol 0.5% eye drops	ml	1 DROP THREE TIMES A DAY TO L[more]	13/06/2013	13/06/2013
Amitriptyline 10mg tablets	tablet	4 TAB5 AT NIGHT	13/06/2013	13/06/2013
Venlafaxine 75mg tablets	tablet	TAKE TWO TWICE DAILY	13/06/2013	13/06/2013
Propranolol 40mg tablets	tablet	1 TABLET THREE TIMES DAILY	13/06/2013	13/06/2013
Gauze swab type 13 light 8P 1988 8ply non-sterile 10cm x ...	swab		06/06/2013	06/06/2013
Propranolol 40mg tablets	tablet	1 TABLET TWICE DAILY	30/05/2013	30/05/2013
Ibuprofen 10% gel	gram	APPLY THREE TIMES A DAY	30/05/2013	30/05/2013
Almotriptan 12.5mg tablets	tablet	ONE TABLET AT ONSET THEN REPE[more]	16/05/2013	16/05/2013
Ibuprofen 10% gel	gram	APPLY THREE TIMES A DAY	16/05/2013	16/05/2013
Venlafaxine 75mg tablets	tablet	TAKE TWO TWICE DAILY	16/05/2013	16/05/2013
Amitriptyline 10mg tablets	tablet	4 TAB5 AT NIGHT	16/05/2013	16/05/2013
Diazepam 2mg tablets	tablet	TAKE ONE WHEN REQUIRED FOR ANXIETY	16/05/2013	16/05/2013
Additional information				
Smoking history (Encounters):Never smoked tobacco Date recorded:26-Sep-2011				
Alcohol history (Encounters):Teetotaler Date recorded:26-Sep-2011				
Patient Weight in Kilograms:73.5				
Patient Height in Metres:1.89				

NEWBYRES MEDICAL GROUP

Dr RS Lithgow
Dr M Storrie
Dr E Matear
Dr A Cremona
Dr E Scales
Dr SH McKeating

161306

15 Hunterfield Road
Gorebridge
EH23 4TP
Tel: 01875 820405
Fax: 01875 820269

12 May 1999

Young Peoples Unit
Royal Edinburgh Hospital
Edinburgh

Dear Doctor

KRIS CLOWE, 23 Lady Brae, Gorebridge EH23 4HT
Dob 27.6.83

I would be very grateful if you could arrange to see this 15 year old boy who has very recently joined our practice. He is in care and based at Gorebridge Close Support Unit. He attends Falkland House School in Fife. He was brought to see me six weeks ago by one of the carers complaining that recently his old problem with enuresis had recurred. Not knowing anything about Kris personally I contacted Dr Sally Anderson, consultant clinical psychologist at Falkland House School and she kindly supplied me with a letter briefly outlining his past history (copy of which is enclosed).

From his medical notes I gather his past medical history is as follows –

Marked constipation from age 10 months requiring hospital admission as a toddler. He was examined under general anaesthetic and underwent an anal stretch.

Attended the pre-school asthma clinic at RHSC.

In 1988 Kris and his mum began attending Rillbank Terrace at RHSC with apparent relationship difficulties. Kris's natural father was physically abusive to his mother and there had been no contact with him since shortly after Kris's birth. Kris's mother felt difficulty in relating to him because he reminded her of his father. Kris's behaviour was difficult to control and in particular bed wetting became a problem at this time.

In May 1989 following Kris being admitted to the Astley Ainslie Hospital for toilet training it was noted that mother was rejecting him and showing much affection for her younger son but none for Kris. He was receiving into care in the latter part of 1992 after the family had expressed concerns about Kris's behaviour and he had allegedly been appearing to invite sexual contact from other children, and also hurt his younger brother by putting his finger in his bottom.

In 1998 he began attending Playfield Unit as an out-patient at Stratheden Hospital in Cupar with regard to his inappropriate sexualised behaviour. I enclose a copy of the letter from Dr Semple to his then GP in Fife. I agree with Dr Anderson's point that Kris's recent problems with enuresis again are likely to be due to his emotional problems and I would greatly appreciate your assessment and input.

Yours sincerely

SH McKeating

DR SH MCKEATING

THE YOUNG PEOPLE'S UNIT
Tipperlinn Road,
Edinburgh EH10 5HF
Tel: 0131 537 6364 Fax: 0131 537 6102

DW/LRBB
Dictated: 27.9.99
Typed: 27.9.99

Dr. McKeating,
Newbyres Medical Group
15 Hunterfield Road,
Gorebridge EH23 4TP

Dear Dr. McKeating,

Kris Clowe (27.6.83) 23 Lady Brae, Gorebridge

This is just a brief note to let you know I met with Kris for the first time on 21st September and his key worker at Gorebridge Young People's Centre, Neil Gentleman, who also attended for part of the interview.

Kris did not describe any current problems and when the issue of his having behaved in a sexually inappropriate way in the past was raised by me, he denied any inappropriate behaviour. He also denied being in any way confused about sex.

I have arranged to see him again in some two weeks time to complete my assessment and will keep you informed as to progress.

Yours sincerely,

David Will
Consultant Psychiatrist

THE YOUNG PEOPLE'S UNIT
Tipperlinn Road,
Edinburgh EH10 5HF
Tel: 0131 537 6364 Fax: 0131 537 6102

DW/LRBB
15th October 1999

Dr. McKeating
Newbyres Medical Group
15 Hunterfield Road,
Gorebridge EH23 4TP

Dear Dr. McKeating,

Kris Clowe (27.6.83) 23 Lady Brae, Gorebridge EH23 4HT

I met with Kris for the second time on 14th October and Neil Gentleman from Gorebridge YPC attended the first part of the interview.

As before, Kris continued to maintain that he had not behaved in a sexually inappropriate way with younger boys. He remained adamant about this.

He did, however, reveal that he had recently been experiencing flashbacks and nightmares about an episode which occurred when he was about 6 and was sexually interfered with by a girl who was about 18. These flashbacks and nightmares had been precipitated by his visiting the block of flats in which he used to live, which was close to the site of the abuse. He went on to describe how some 4 years ago he had actually passed this girl in the street when in the company of some friends and had run away and started to cry. At that time too he experienced flashbacks and nightmares.

While I am sceptical about Kris' denial of any inappropriate sexual behaviour on his part, the account he gave of his experiences of nightmares and flashbacks was strongly suggestive of post traumatic stress disorder. I have therefore agreed to meet with him with a view to helping these symptoms resolve.

Yours sincerely,

David Will
Consultant Psychiatrist

THE YOUNG PEOPLE'S UNIT
Tipperlinn Road,
Edinburgh EH10 5HF
Tel: 0131 537 6364 Fax: 0131 537 6102

DW/LRBB
2nd December 1999

Dr. McKeating
Newbyres Medical Group
15 Hunterfield Road,
Gorebridge EH23 4TP

Dear Dr. McKeating,

Kris Clowe (27.6.83) 23 Lady Brae, Gorebridge EH23 4HT

I am writing to let you know that I discharged Kris on 24th November.

He has continued to deny that he has ever committed any acts of inappropriate sexual behaviour and there is very little further work that can therefore be done at present.

I have done some general work with him on inappropriate and appropriate sexual behaviour, on issues to do with consent to sexual behaviour, particularly in relation to the age of consent. I have also discussed the impact that sexual abuse has on children and young people, both in the short and the long term.

While Kris has co-operated with this work, I am afraid that we have now reached an impasse. I have made it clear to Kris and to Neil Gentleman of Gorebridge YPC that should Kris decide that he wishes to discuss his alleged inappropriate sexual behaviour or should he behave in a sexually inappropriate way, I shall be happy to see him again.

Yours sincerely,

David Will
Consultant Psychiatrist

CLINICAL PSYCHOLOGY REPORT

NAME: Christopher Wright AKA CLOWE
DATE OF BIRTH: 27th June 1983
ADDRESS: Gorebridge Close Support Unit, 23 Ladybrae,
Gorebridge, Midlothian
DATE OF REPORT: 13th November 2002

Reason for Referral

Christopher was referred by Emma Al-Kotobe, Support worker at Gorebridge Close Support Unit in order for the following to be assessed:

- Level of cognitive ability
- Level of risk he poses to himself and others
- Level of understanding of appropriate relationships with others

As such I arranged that his intellectual ability be assessed first of all. As explained in telephone conversations with Miss Al-Kotobe, this is a Learning Disability Service and as such provides for individuals who are classified as having an intellectual disability.

Background Information

Christopher attended several primary schools due to changes in his foster placement, these included Royal Mile, Newtongrange, Morden and Dunbar. He began his secondary education in January 1996 at Falkland House School, which is a residential establishment for boys with emotional and behavioural difficulties and he remained there until his current placement at Gorebridge Close Support Unit in July 1998. This unit provides housing for four adolescents. Christopher used to cook and do his own shopping when he first moved to the unit, but he reported that he now prepares food with the others as he and finances "did not mix".

After leaving school Christopher worked in a sports shop serving customers and dealing with stock. This job lasted only three weeks as Christopher left following an allegation that he had stolen the wallet of another employee, although he says that this was not true. He then attended a catering course through the Canongate Youth Project for seven months where he was involved in outside catering, food preparation and serving.

After a short period of unemployment he attended a taster course called 'Skill Power' for one year at Jewel and Esk Valley College where he was able to try woodwork, mechanics and computing. Following this he attended another catering service, 'Workstart', in Gorebridge.

From May to October he joined the Prince's Trust Personal Development Programme, taking part in outdoor activities, team building games and working on his CV.

Headquarters:
St. Roque, Astley Ainslie Hospital, 133 Crange Loan, Edinburgh EH9 2HL

Chairman Garth Morrison CBE
Chief Executive David Pigott

For the past two weeks he has been working as a breakfast and lunch waiter at a hotel in Edinburgh, but he says that he finds it boring and he plans to join the army. He mentioned that he had applied to join last year and had passed all the screening tests except for the medical test due to asthma. However he claimed if he was able to stop using his inhaler for one year then he could reapply. Christopher also mentioned that last year he attended the YPU at the Royal Edinburgh Hospital for a few months for weekly counselling sessions.

Previous Psychological Assessment

In 1998 a Risk Assessment was carried out by Dr Sally Anderson, Consultant Clinical Psychologist at Falkland House School. She concluded that he was "unable to assess the appropriateness of sexually related situations". She noted that he had "not been influenced by any of the staff comments during the assessment and that this may tend both a risk to other more vulnerable children as well as likely being unable to avoid situations which place him at risk".

Presentation

Christopher arrived on time for his appointment and he travelled by himself from Gorebridge, which involved catching two buses. He is right handed and he reported wearing glasses for reading, which he did not bring to the appointment but he said he never wears them anyway. He appeared to enjoy the testing procedure and was motivated throughout the appointment, which lasted two hours.

Intellectual Assessment

Christopher was assessed using the Wechsler Adult Intelligence Scale - Third Edition - UK (WAIS-III UK). This is the most recently revised edition of the standardised test. It consists of fourteen sub-tests from which IQ and Index Scores can be derived. The Full Scale IQ is the aggregate of the Verbal and Performance scores and is usually considered to be the most representative measure of global intellectual functioning.

IQ scores were also derived for verbal and performance abilities. Index scores were also derived for verbal comprehension, perceptual organisation, working memory and processing speed. The test was administered by Gillian Swan, Assistant Psychologist under my supervision.

a) General Intellectual Ability

Christopher's Full Scale IQ score (FSIQ = 75; 95% confidence interval = 71-80) places him in the borderline range of intelligence. His overall thinking and reasoning abilities exceed those of approximately 5% of adults his age.

b) Verbal Abilities

The Verbal IQ score is a measure of acquired knowledge, verbal reasoning and comprehension of verbal information. His verbal reasoning abilities, as demonstrated by his Verbal IQ score (VIQ = 78; 95% confidence interval = 74 – 84) are in the borderline range and above those of approximately 7% of his peers). On the verbal reasoning sub-tests, Christopher obtained his highest score on the Vocabulary sub-test and his lowest score on the Arithmetic sub-test. His performance suggests areas of strength and weakness in his profile of verbal reasoning abilities. His weak performance on the Arithmetic sub-test is below that of most of his peers.

The Verbal Comprehension Index (VCI) is similar to the Verbal IQ in that it provides a measure of verbally acquired knowledge and verbal reasoning. In Christopher's case, his VCI score is generally comparable to his Verbal IQ score (VCI = 82; 95% confidence interval = 77-78). His ability to understand and respond to verbally presented material is better than that of 12% of other people his age.

c) Performance Abilities

The Performance IQ score provides an indication of an individual's non-verbal reasoning, spatial processing skills, attentiveness to detail and visual motor integration. His performance abilities, as demonstrated by his Performance IQ (PIQ = 76; 95% confidence interval = 71-84), are in the borderline range and better than those of approximately 5 % of his peers. Once again there are areas of strength and weakness in his profile of non-verbal reasoning abilities. He obtained his highest score on the Symbol Search sub-test and his lowest score on the Picture Completion sub-test. His weak performance on the Picture Completion sub-test is below that of most of his peers.

The Perceptual Organisation Index (POI) measures fluid reasoning, spatial processing, attentiveness to detail and visual motor integration. In Christopher's case, his POI score is comparable to his Performance IQ score (POI = 76; 95% confidence interval = 70-85). His performance on the POI exceeds that of 5% of his peers.

d) Working Memory Abilities

The Working Memory Index (WMI) provides information on an individual's ability to attend to verbally presented information, to process information in memory and to formulate a response. Christopher score (WMI = 73; 95% confidence interval = 68-81) and his performance on the sub-test requiring working memory is in the below average range and better than 4% of his peers. His performance across these sub-tests showed little variation suggesting comparable abilities within this domain.

e) Processing Speed Abilities

The Processing Speed Index (PSI) provides a measure of an individual's ability to process simple or routine visual information quickly and efficiently, and to quickly perform tasks based on that information. His PSI score (PSI = 84; 95% confidence interval = 77-95) was better than that of 14% of his peers and places him in the below average to average range. His performance across these sub-tests show little variation suggesting that his abilities are comparable across this domain.

f) Summary of Intellectual Abilities

His abilities to process visual information quickly, his verbal comprehension skills, his non-verbal reasoning abilities and his working memory abilities are comparable. Christopher's overall Full Scale IQ score places him in the borderline range of intelligence. This refers to the IQ band 70-79, which lies above the intellectual disability range and below the low average range of intellectual functioning.

Summary and Opinion

Christopher is functioning in the borderline range of intelligence. As such, it is not particularly appropriate to carry out further assessments in a service designed for people with intellectual disabilities. However, we can discuss this further if you have difficulty in obtaining further assessments.



Dr Amanda M Michie
Consultant Clinical Psychologist

YPU: District Will.



Dr. A. M. Michie
Lead Clinical Psychologist
Learning Disabilities Service
65 Morningside Drive
Edinburgh
EH10 5NQ

Telephone: 0131 446 6823
Facsimile: 0131 446 6821

Our ref: AMM/JA/161306
13th November 2002

Emma Al-Kotobe
Support Worker
Gorebridge Close Support Unit
23 Ladybrae
Gorebridge
Midlothian
EH23 4HT

Dear Ms Al-Kotobe

Re: Christopher Wright (aka Clowe), dob 27.06.83
C/o Gorebridge Close Support Unit, 23 Ladybrae, Gorebridge

Please find enclosed a copy of my clinical psychology report on the above named.

Yours sincerely,

A handwritten signature in cursive script that reads 'Amanda Michie'.

Dr. A. M. Michie
Consultant Clinical Psychologist

Encl/

CLINICAL PSYCHOLOGY REPORT SHEET

UNIT No:

NAME:

Christopher Wright

PSYCHOLOGIST IN CHARGE:

Richard Bone

PSYCHOLOGIST:

28.06.14 - 13.15

↳ Survive + Thrive - Meet and Greet

↳ DNA

↳ Will send another appt later in the year.

Richard Bone CAAP

O.P. CLINICAL NOTES

(Psychiatry)

NUMBER

NAME

Kris Clare

DATE

21/9/99

Neil Bentham Key Worker. Support W-1. SHEET No. 1
Gorebridge.

Get some of my problems..

Gorebridge - h. Lyon 5 months.

SW - David Adams Talkith..

Christine Cochran Senior SW.

Left Falkland in Summer

Been at College.. Esk Valley.. didn't like it v. much.
left 3/52.

Looking for a job.

Neil - Kris can be quite mature

Settled in well. Gets on well with staff & other residents..

Conans? - stayed out overnight one night.. v. dislike him..
overnights at other people's houses.

at Xmas 98. made allegations about a boy

Neil at school - allegations about inapp. sexual behavior
? exploring ? concern with young boys..

Made it difficult for us to let him be involved with other boys.

eg. CRADERS... just allowed to be with other laddies....

no concerns at Gorebridge.

only a 4 bedded unit. slow turnover..

s

Plans - staying at Unit till 19

working.

supported accommodation..

DATE

Yrns

Gaelbridge - more freedom. more things to do...
that's abt it....

excellent to staff...

Kids? 3 at mt 2 grls....

Spr time - help my pal fix his motorbike.
football, cycling. a lot of exercise...

Problems.

allegations that I've made & other people have made against me...

allegations I've made.

staying at pal's house...

EBT - one to pick me up. in morn.

slept in same bed in morn. Paul had my pants down & he was masturbating me

Yrns spoke to 1 of residents. got so upset I got sick.

Police involved - didn't press charges...

went back to school. told not to speak to Paul...

left Falkland 2/82 b/c I was supposed to leave...

Taken roughly by members of staff...

I was heavily pregnant then to him... don't know why he done it...

from I told staff...

have nightmares abt it... last one 2/82 ago...

went go at my head...

if I hadn't stay that night it wouldn't happen.

I became a day pupil...

ambushingly - as soon as his name mentioned it feel "here we go again"

saw him once when I left Falkland.

Paul - some yrs lives in Tranent...

O.P. CLINICAL NOTES

(Psychiatry)

NUMBER

NAME

Kristin Clare.

DATE

SHEET No.

21/9/99

Allegations is A laddie in football. I made an allegation against him.
 we were playing football in my room... I was in my shorts & vests.
 He put his hands down my trousers... he pulled my hair.
 He put his hand over my mouth to stop me from screaming.
 I was a total shaft... police were called... he was charged.
 Hungry out of school... I was older than him... I was 11/12

Apr 5

4c 99

3 years ago

2. Sexual allegation - made by some boy. We were hillwalking
 He made an allegation that I'd had sex with him..
 He made it up... didn't know why he came on to it..
 Police were involved. I denied it... can't recall David..
 2-3 years younger..
 Shaft took it v. seriously... never done it.....

Dr. Sample - never spoke about that.....

* Not confused about sexual things....

Other upsetting sexual experiences...

No worries about doing sexual things he shouldn't do..

Interested in g/hole.

had sex since I've been Cambridge.

none at the moment.

last in Cadet Camp. weekend... met ?...

She asked me out. went for a walk... I said 'aye'

Started kissing.

DATE

Legat: Claire. 3 years..

~~when~~ She died of a heart attack.... 4 years ago..

She asked me to marry her.. I would have got married this weekend.

She asked me to marry her in Assembly... ^{get} 11/12

Teresa - at Dunbar - 6/12...

Moved to Exeter - 18/12.

He 1 year ago... been out to house 2x

I got ~~at~~ ~~the~~ Lindsay...

↓ no sexual relationships. still a virgin....

work - 6/12.. gone off that...
can't think about funerals

Worries - not that I can think of.

College - office & admin..

<u>4 'S' grades</u>	Maths	Eng	Science	So & Rec
6	5	6...	5....	

Work - Calceolman Hotel - spoke to personnel..

↳ 2/82 ago - trainee chef job..

always wanted to be a chef..

asthma - Calmed down. don't take anything.

Emerson - still a problem. waiting for a appn to university..

was in Ashley House when I was in R.I. 2.

comes & goes. one step in 2 1/2 years.

when you go to it before

John:

O.P. CLINICAL NOTES

(Psychiatry)

NUMBER

NAME

Kns Clark

DATE

SHEET No.

21/9/99

Problems - my behavior

being out late

stop-hitting...

Panas - 252

DW

have tried to rape me

DW

O.P. CLINICAL NOTES

(Psychiatry)

NUMBER

NAME

Kristopher Clave

DATE

SHEET No.

14-10-99

Neil Gentlemen

Kris. 'up a damn'

Had a job at airport - 2 hrs. - 1 end as it was
but disappointed

anxious about coming today - ...
issues are really hard subjects. ...

Not keen to come today...

Let on my mind - got a new girl 'and ... anxious about meeting her.
the night - Theres a girl was dared to kiss me ...
"my girlfriend" was upset.

I asked her to meet me next Saturday...

* never did anything - never...

"bothered me at that time - not now...
schizophrenic have been at Falkland..."

Goxbridge - love it...
living at home...

Problems

Job

Nothing else I am like g...

DATE

Like we lived in New Langranga

My (A) accused me of being on Graham.

"I shag a bream up his bream."

(9/2/93)

Michelle the next door neighbour had done it to Graham (7)

(13)

or threatened Graham not to tell anyone but to say it was me...

"I was raped by an older girl - 18..."

6/7/94

She threatened me... go to the police...

Living in Edinburgh...

18 - v. good friends to her... I lived across from us...

v. good friends to (M's) friends...

Flashback when visiting the Old Parts... 2 days ago...

Nightmares of her shoving at me...

her taking my hand into the bedroom.

4 yrs ago passed her in street - started to run... in tears...

Bed into bedroom - her taking her clothes off... her taking more off...
had dream of spiders.

after it had happened I was in tears - had to tell my (A) she'd been fathered.
can't remember her name...

19/6/94

NUMBER

NUMBER

NAME

Kris Clare

O.P. CLINICAL NOTES

(Psychiatry)

DATE

SHEET No.

9.11.99

Neil Gentlemen + KRISNeil - Things going okay

Pacemeter at C4T

Cecile's continues - dinner dance.

Not much contact w family...

Left money by a relative^{now} until he's 25.)Kris

Dinner dance went well.. drunk a lot....

Still seeing her -- new girlfriend -

C4T - alright... eating... ~~mental~~

° Flashbacks: ° Nightmares.....

not a worry that they'll come flooding back.....

Clare.....

Lassie at the Unit....

never told my (M)....

(M) - I thought she wouldn't believe me.... & would end up falling out w me...
she fell out w me a lot.

eg. 1° school - something happened there: saw headmistress... (M) started bally...

1° Outing at me... a wee lassie said I'd been playing doctors n nurses.2° number of people thought I had been doing sexual things I didn't &
doing.....

9 need to kill myself by jumping off balcony - only shame was absent

DATE

That no 9 was about to have sex & the money back -

Still a bit of money

Girl had was raped sat 12 by hynd

3 yrs ago didn't with Clea

Clea - Brewster... 3rd Anniversary
no girl 18/12

Wards - Annual Dinner Days Cadets

~~19/11~~

O.P. CLINICAL NOTES

(Psychiatry)

NUMBER

NAME

Mrs Clare

DATE

Mrs & Neil Gentlemen

SHEET No.

29.11.99

Starting at the Castle Clinic.

- Eurus more of a problem..

- Contact w mother via the phone..

- Visited over at Dunbar

CYP - guy excellent.. built E 75 people....

Gorebridge - okay he's been fine
problem w money..Beal-wetty - seen G.P..
comes o if goes....DW

CLINICAL PSYCHOLOGY REPORT SHEET

UNIT No:

NAME:

Christopher Wright

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

14/10/13 c/o My depression - I hate it. I hate the fact I'm not working. Days I feel what's the point in being here. Then look at partner & that answers the question.

HPI. Been depression around since sister died ~ 2008 or 2006. "Her death hit me very hard." Had depression since before - from 13 - since sister died worse. Not worked since Lisa murdered - worked at JD Sports. Did everything lay back - given compassionate leave. Helped brother who had drug problem & he phoned my work & told them I'd been lying - they sacked me. That was 2006. Heard from friends he was jealous that my life going well.

Current

Mood? Take each day as it comes, because can't see day when I'll be ok. On 1-10 - at 2 - lot happened in past couple of weeks. Partners aunt died last ~~year~~ week - traumatic time for whole family.

Future? been getting nightmares starting about trying to deal w abuse thru counselling. Tried before but hit brick wall. Felt I couldn't talk about it. Now 31 maybe time I tried to get over it. Partner knows - been ok tho occasionally things things up when arguing. Was in care so didn't stay in mum.

Suicide? don't think I could. Tried before & 2 american tourists stopped me. Couldn't put family thru that. That stops me from doing anything.

Self? I know I'm not myself at the moment

before used to be doing / helping go lucky / doing
 lot angles / better me. Not been good for years
 was DJ & used to do that to take mind off
 it. Got signed to bring record label & people
 patron & getting don't forgets that. Just books.
 Been asked to go back to it but don't know if
 could go back to it. Having more torn down was
 lost stream.

Feel should get over it. It annoys me. Think would
 be useless / stupid. Partner talks in Spanish. the
 never been teased. Not good at writing.
 do like so affairs relationship. Been a
 manager ~ 1 yr ago - remembered my feelings
 Dr. Been getting progressively worse.

FTI. I care for 8 yrs old for over 1 childhood.
 Mum accused me of molesting little brother. I didn't
 do anything - I didn't know that it was. Really
 hard time. Still see brother occasionally - he has
 problems - was jailed for taking people hostage & a gun.
 He shouts & swears & he wants to blame.

When sister Jennifer - having me long next month.
 She doesn't speak to me. Told her to trust as her step
 father & she didn't like it. Had always thought he was
 my dad - he told me my Aunt & Uncle weren't my family.
 In care - bullied constantly, now suffer severe
 panic attacks because of it. At residential school
 - room mates for 4 yrs - raped constantly, threatened
 with knife & threat, forced to give blow jobs. Terrified
 for life. Didn't say anything till broke down &
 then stay at home. Police involved but no charges
 brought. Having horrendous nightmares relating
 all over again. Get flashbacks - since Kelly
 started hitting me. Kelly women partner.

CLINICAL PSYCHOLOGY REPORT SHEET

UNIT No:

NAME:

C Wright

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

14/10/13 (cont) when argue de lashed out then really remorseful. She is getting help to sort that out. Has hit me for 8 months. Still get them now. When out very anxious looking over shoulder. Was still getting self out but past few weeks getting lot of verbal hassle - youngsters call me 'squint yak' because of eye & freckles become support Celtic. → hide self in house.

Typical day - play computer or read. If fix mind or something it helps.

Friends? got a few see them every now & again. Chris works a lot. Another friend Chris tutoring him re music scene. - he's trying to get me into it again. Do a monthly mix. In future might go back.

Alan Headley reading

w/c for induced

? group - C. not sure will speak to Kelly.

CLINICAL OUTCOMES in ROUTINE EVALUATION

OUTCOME MEASURE

Site ID		Age		Male	☐
letters only		numbers only		Female	☐
Client ID					
Therapist ID		numbers only (1)		numbers only (2)	
Sub codes					
Date form given					

Stage Completed	Stage
S Screening	☐
R Referral	☐
A Assessment	☐
F First Therapy Session	☐
P Pre-therapy (unspecified)	☐
O During Therapy	☐
L Last therapy session	☐
X Follow up 1	☐
Y Follow up 2	☐

IMPORTANT - PLEASE READ THIS FIRST

This form has 34 statements about how you have been OVER THE LAST WEEK.
Please read each statement and think how often you felt that way last week.
Then tick the box which is closest to this.
Please use a dark pen (not pencil) and tick clearly within the boxes.

Over the last week

Not at all Only Occasionally Sometimes Often Most or all the time OFFICE USE ONLY

1	I have felt terribly alone and isolated	☐	☐	☒	☐	☐	2	F
2	I have felt tense, anxious or nervous	☐	☐	☐	☐	☒	4	P
3	I have felt I have someone to turn to for support when needed	☐	☐	☐	☐	☒	0	F
4	I have felt O.K. about myself	☐	☒	☐	☐	☒	3	W
5	I have felt totally lacking in energy and enthusiasm	☐	☐	☐	☐	☒	4	P
6	I have been physically violent to others	☒	☐	☐	☐	☐	0	R
7	I have felt able to cope when things go wrong	☒	☐	☐	☐	☐	4	F
8	I have been troubled by aches, pains or other physical problems	☐	☒	☐	☐	☒	4	P
9	I have thought of hurting myself	☐	☒	☐	☐	☐	1	R
10	Talking to people has felt too much for me	☐	☐	☒	☐	☐	2	F
11	Tension and anxiety have prevented me doing important things	☐	☐	☐	☐	☒	4	P
12	I have been happy with the things I have done.	☐	☒	☐	☐	☐	3	F
13	I have been disturbed by unwanted thoughts and feelings	☐	☐	☐	☒	☐	3	P
14	I have felt like crying	☐	☐	☐	☐	☒	4	W

Please turn over

38

Over the last week

Not at all Only Occasionally Sometimes Often Most or all the time
OFFICE USE ONLY

15	I have felt panic or terror	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	☐ 5	P
16	I made plans to end my life	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	R
17	I have felt overwhelmed by my problems	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4	☐ 5	W
18	I have had difficulty getting to sleep or staying asleep	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	☐ 5	P
19	I have felt warmth or affection for someone	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	☐ 5	F
20	My problems have been impossible to put to one side	☐ 0	☐ 1	☒ 2	☐ 3	☐ 4	☐ 5	P
21	I have been able to do most things I needed to	☐ 0	☒ 1	☐ 2	☐ 3	☐ 4	☐ 5	P
22	I have threatened or intimidated another person	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	R
23	I have felt despairing or hopeless	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4	☐ 5	P
24	I have thought it would be better if I were dead	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	R
25	I have felt criticised by other people	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4	☐ 5	F
26	I have thought I have no friends	☐ 0	☒ 1	☐ 2	☐ 3	☐ 4	☐ 5	F
27	I have felt unhappy	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	☐ 5	P
28	Unwanted images or memories have been distressing me	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	☐ 5	P
29	I have been irritable when with other people	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	☐ 5	F
30	I have thought I am to blame for my problems and difficulties	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4	☐ 5	P
31	I have felt optimistic about my future	☐ 0	☒ 1	☐ 2	☐ 3	☐ 4	☐ 5	W
32	I have achieved the things I wanted to	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	F
33	I have felt humiliated or shamed by other people	☐ 0	☐ 1	☒ 2	☐ 3	☐ 4	☐ 5	F
34	I have hurt myself physically or taken dangerous risks with my health	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	R

THANK YOU FOR YOUR TIME IN COMPLETING THIS QUESTIONNAIRE

Total Scores

Mean Scores

(Total score for each dimension divided by number of items completed in that dimension)

(W)	(P)	(F)	(R)	All items	All minus R		

38 + 47

25

swere

Christopher Wright 161306

13 → 16
9 → 18
17 → 34

DASS

For each of the statements below, please circle the number which best indicates how much the statement applied to you **OVER THE PAST WEEK**. There are no right or wrong answers. Do not spend too much time on any one statement.

	Not at all	Some of the time	A good part of the time	Most of the time
1. I found it hard to wind down.	0	1	2	3
2. I was aware of dryness of my mouth.	0	1	2	3
3. I couldn't seem to experience any positive feeling at all.	0	1	2	3
4. I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness in the absence of physical exertion).	0	1	2	3
5. I found it difficult to work up the initiative to do things.	0	1	2	3
6. I tended to over-react to situations.	0	1	2	3
7. I experienced trembling (e.g. in the hands).	0	1	2	3
8. I felt that I was using a lot of nervous energy.	0	1	2	3
9. I was worried about situations in which I might panic and make a fool of myself.	0	1	2	3
10. I felt that I had nothing to look forward to.	0	1	2	3
11. I found myself getting agitated.	0	1	2	3
12. I found it difficult to relax.	0	1	2	3
13. I felt down-hearted and blue.	0	1	2	3
14. I was intolerant of anything that kept me from getting on with what I was doing.	0	1	2	3
15. I felt I was close to panic.	0	1	2	3
16. I was unable to become enthusiastic about anything.	0	1	2	3
17. I felt that I wasn't worth much as a person.	0	1	2	3
18. I felt I was rather touchy.	0	1	2	3
19. I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat).	0	1	2	3
20. I felt scared without any good reason.	0	1	2	3
21. I felt that life was meaningless.	0	1	2	3



CLINICAL PSYCHOLOGY REPORT SHEET

LHB 1212

NAME Kris Clowe.

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

1/8/02

Referral from Janette Homer (Dalkeith Social Work Dept - 0131-270-7500). Contacted Janette. Kris attended normal schools and has always been seen within mainstream services. He has no significant difficulties in his daily living skills. Was seen by David Will VPH and Sally Anderson, consultant psychologist, Fife. No suggestion that he has a learning disability.

Main issues are emotional immaturity, living in a 'fantasy land' and inappropriate sexual behaviour. Kris has been a perpetrator of abuse in the past, but was not charged.

I advised Janette to contact Mark Raman or Laura Black at the Orchard Centre (forensic service) to see if a referral would be appropriate. If not I will pass on referral to my colleagues in adult psychology.
UM

3/8/02

Message from John Ferrier - he had contacted Laura + wanted more info. I said I would speak to Laura. Phoned + left message with Laura.
UM

7/8/02

Laura called back. At present she understands that the Orchard Clinic can't provide risk assessments for clients external to the service as there are too many demands for these. She will contact John Ferrier to suggest he refer to Norman Fraser in the adult department. Laura will also

Speak to Herman

MM

13/8/02

Phone call from Emma (Christopher's
 key-worker). I fed back re: my conversation
 with Paula and also suggested she
 call Amanda Michie (L.D. forensic
 service) as Mandy will sometimes
 accept referrals for people who don't
 fall within the learning disability
 range.

MM

CLINICAL PSYCHOLOGY REPORT SHEET

LHB 1212

UNIT No.

NAME

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

11/7/02

Phone call from Margaret Elliot. Christopher has a history of making allegations of abuse + was thought to be abuser himself (unproven).

He was taken into care age 9 + lives in Lislebridge (closed support unit). Has received input from psychology and counselling. Due to have own tenancy with visiting support from ELCP, but at recent interview said he may abuse children.

Margaret is unsure what risk he presents + if he has a learning disability. She has asked Jeannette Horner (S.W.) to make a formal referral.

um.

11.7.02

Phoned Jeannette - left message asking her to call me back.

um.

16.7.02

Jeannette called back. I returned her call + left message.

um.

GEN.19

CLINICAL PSYCHOLOGY REPORT SHEET

LHB 1212

UNIT No.

NAME

DATE

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

Dear NOIMEN

21/8

Re: W Christopher Wright (19 y/o)
Close Supervision Unit (4 bedded close sup. unit)
23 Lady Bae
Gorebridge

Case Manager Jeanette Lorimer 271-3860 (Dakota SWD)
C/N John Ferrer 01875 820 307
Previously Karen McKenzie
YPU consultant Dr Will

I am writing to provide background info - Jeanette Lorimer
(Case manager) may be contacting you
(left msg)

1. Jeanette re me + the work on AIL
2. John Ferrer re rap
3. On my return for AKI contacted Jeanette Lorimer 20/8.

(which she can send to you)
Karen has background information but in summary.

As Wright is 19 years old who has been living in
residential care since he was 13 years old.
(seen by Dr Will at YPU aged 13-14)

Currently he is to be moved to supported accommodation.

provided by ELCAP in midlothian. (ELCAP is a residential
care provider for people with LD - Karen works closely
with them)

ELCAP are requesting a risk assessment to help
with care planning.

CLINICAL PSYCHOLOGY REPORT SHEET

LHB 1212

UNIT No.

NAME

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

I understand that he has not been stated wanted to say he has a learning disability but still suspect learning difficulties (e.g. dyspraxia/dyslexia)

John Fenne has experience of autism + ~~he~~ suspects he may have Aspergers (but no formal dx as yet)

Additionally they indicate abusive rel in family

Wright has been involved in sex activity with under age people. He has not been charged + is not on S.O. register...

ELCAP are requesting independent risk assessment.

I have spoken with Karen - on the basis of available evidence I have felt that he does not have a learning disability.

I spoke to Jeanette written 20/8. + confirmed that

I am able to provide assessment for people who are not resident at O/C.

Jeanette was aware that Wright does not have a learning disability so may well contact you to see if you could see Wright.

* For you info - Bob Wheeler is currently providing input to people with Aspergers (01383-623 623). I don't know if it would be helpful to establish if he indeed could receive a dx

CLINICAL PSYCHOLOGY REPORT SHEET

LHB 1212

UNIT No.

NAME

PSYCHOLOGIST IN CHARGE:

PSYCHOLOGIST:

If you would like to chat about this -
it might be easier to catch me at
O/C - my Xn is 45825

Mon pm
Tues all day
Thurs all day.

Regan

Carr

cc Karen McKenzie

Clinic Letters & Notes

East Lothian & Midlothian CHPs Management Team

Chairman (East Lothian): Mr Michael Ash
Chairman (Midlothian): Mr Peter Johnston
General Manager: Mr David Small

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8982 Fax 0131 536 8917
www.nhslothian.scot.nhs.uk



Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 30 August 2013
Chi 2706830751
Our Ref LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

As you know Dr Chapman has referred you to the Psychological Therapies Service for help with your difficulties.

We would like to offer you an **initial assessment** session. The purpose will be to find out how things are for you, and to agree a way forward which best meets your needs.

Please can you contact the Secretary within the next 2 weeks on 0131 536 8982 to arrange a suitable appointment time. If we do not hear from you within this time we will assume that you no longer require an appointment and will close your file accordingly.

Our secretary can be contacted between the hours of 9am and 1pm, or you can leave a message on the answering machine and we will call you back.

Enclosed is some information that you may find helpful.

We look forward to hearing from you.

Yours sincerely

A handwritten signature in blue ink that reads 'Lynda Watson'.

Lynda Watson
Medical Secretary

Cc. Dr Chapman, Dalkeith



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
Chair Mr Brian Houston
Chief Executive Tim Davison
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Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

Dr Chapman
Dalkeith Medical Practice
24 St Andrew Street
Dalkeith
EH22 1AA

Date 22 October 2013
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Dr Chapman,

RE: Christopher Wright (27.06.83), 119 Woodburn Drive, Dalkeith, EH22 2BB

Thank you for referring this young man for assessment as to his suitability for psychological intervention, I met with him on the 14th October 2013 when he told me that his main problem was “my depression”.

He said that he hates the depression and hates the fact that he’s not working and sometimes feels “what’s the point of being here”. He then said that he looks at his partner and that answers this question.

He said he has been depressed since around the time that his sister died and he told me later that she had in fact been murdered. He said that since her death he has been more or less constantly depressed. He said that he first experienced depression at the age of 13 and you will be aware that he has experienced a range of aversive experiences in childhood which almost certainly will have contributed to his current difficulties.

He said that when he was about 8 years old his mother accused him of “molesting my little brother” which he said emphatically that he did not do anything. He added that at that age he didn’t even know what it meant to molest someone.

He said that more recently he has started experiencing “flashbacks” of the period when he was abused. This appears to have been triggered when [REDACTED], his partner, “started hitting me”. He said that when they argue she starts lashing out and then becomes extremely remorseful. He said that she is getting help to sort this out and in fact he had not been hit for approximately 8 months.

My impression is that Mr Wright does indeed require some help to overcome current difficulties which appear to stem from an aversive set of experiences in childhood. I have given him the Healthy Reading list and encouraged him to look at some of these texts. I have also informed him about the Survive & Thrive group which is being organised for men who have experienced traumatic life experiences. I have also placed his name on the waiting list and he will be offered a treatment appointment as soon as a therapist is available. Thank you again for referring this man.



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Chief Executive Tim Davison
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Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

East Lothian & Midlothian CHPs Management Team

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Chairman (Midlothian): Mr Peter Johnston
General Manager: Mr David Small

Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8982 Fax 0131
536 8917
www.nhslothian.scot.nhs.uk



Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 24 June 2014
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

Following your initial assessment I would like to offer you an appointment for treatment on **Wednesday 9th July 2014 at 2pm at the New Bonnyrigg Health Centre, 109-111 High Street, Bonnyrigg (community reception)**. If it is not possible for you to attend at this time, please contact our secretary as soon as possible on 0131 536 8982 between 9 am and 1pm or leave a message on the answering machine, so that an alternative time can be arranged.

It will be helpful if you could complete the enclosed questionnaires and bring them with you.

If for whatever reason this appointment is no longer required, please inform us as soon as possible so that it can be offered to someone else. This will help reduce waiting times and allow us to make the best use of our resources. Your assistance will be much appreciated.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

Cc: Dr Chapman, Dalkeith



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Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8982 Fax 0131
536 8917
www.nhslothian.scot.nhs.uk



Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 23 July 2014
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

I am sorry you were unable to attend your appointment.

Please let me know if you would like another appointment by contacting our secretary on 0131 536 8982 between 9 am and 1pm or by leaving a message on the answering machine, so that an alternative time can be arranged. However, if I do not hear from you within the next 14 days, I shall assume you no longer wish to be seen and will close your file accordingly.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist

Cc. Dr Chapman, Dalkeith



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
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East Lothian & Midlothian Mental Health Services
Midlothian Health & Social Care Partnership
Director of Health & Social Care: Eibhlinn McHugh
Head of Health: Allister Short
Clinical Director: Hamish Reid

Psychological Therapies Service
Department of Clinical Psychology
East and Midlothian

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8982 Fax 0131
536 8917
www.nhsllothian.scot.nhs.uk



Dr Chapman
Dalkeith Medical Practice
24-26 St Andrew Street
Dalkeith
EH22 1AP

Date 18 September 2014
Chi 2706830751
Our Ref NF/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Dr Chapman

Re: Christopher Wright (27.06.83), 119 Woodburn Drive, Dalkeith, EH22 2BB

Further to my letter dated 22/10/13 Mr Wright was offered a treatment appointment on 9th July 2014 and unfortunately did not attend.

He has not responded to a subsequent letter and I will therefore discharge him from our service.

Yours sincerely,

Norman A Frazer
Consultant Clinical Psychologist



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Psychological Therapies Service
East and Midlothian

35-37 High Street
Bonnyrigg
EH19 2DA
Tel 0131 536 8981 Fax 0131
536 8917
www.nhslothian.scot.nhs.uk



Mr Christopher Wright
60 Steele Avenue
Mayfield
Dalkeith
EH22 5LR

Date 14th November 2014
Chi 2706830751
Our Ref KM/

Enquiries to Margaret Scott,
Secretary
Extension 58981
Direct Line 0131 536 8981

Dear Mr Wright,

You have recently been referred to the East & Midlothian Psychological Therapies Service. We are now ready to offer you an appointment for an initial assessment. To give you some idea about how the Psychological Therapies Service operates and what to expect, we include with this letter a leaflet about our service.

If you would like us to arrange an assessment appointment, then please telephone us within the next two weeks on this number: 0131 536 8981.

Please note: If we have not heard from you within the next two weeks, we will assume that you do not wish to proceed and we will close the referral. If you later change your mind, then you would need to speak to your GP or psychiatrist about making another referral for you.

Our secretary is usually available between 9am and 2pm, but if no-one is available to take your call then please leave a message for us. Once we have received your reply then we will post you an appointment as soon as possible.

Yours sincerely

Secretary

Cc. Dr A Gaskell, Newbattle Medical Practice

Enc. Information Leaflet



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East and Midlothian

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536 8917
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Mr Christopher Wright
60 Steele Avenue
Mayfield
Dalkeith
EH22 5LR

Date 4th December 2014
Chi 2706830751
Our Ref MB/KM/161306

Enquiries to Margaret Scott,
Secretary

Extension
Direct Line 0131 536 8981

Dear Mr Wright,

As you know Dr A Gaskell has referred you to the Psychological Therapies Service for help with your difficulties.

I am writing to confirm your **initial assessment** appointment time is on **Tuesday 16th December 2014 at 10.00am at the Bonnyrigg Medical Centre, 109-111 High Street, Bonnyrigg, EH19 2ET. (Please bring your letter with you and go to the Community Reception desk. The waiting area is the same as used by Podiatry and Physiotherapy).**

If you do not attend this appointment and we don't hear from you within 7 days, you will be discharged from this service.

Please note that this is an assessment appointment to help agree a way forward which best meets your needs. There is usually a wait for treatment following this.

It will be helpful if you could complete the enclosed questionnaires and bring it with you.

If it is not possible for you to attend at this time, please contact our secretary as soon as possible on 0131 536 8981 between 9am and 2pm or leave a message on the answering machine, so that an alternative time can be arranged.

If for whatever reason this appointment is no longer required, please inform us as soon as possible so that it can be offered to someone else. This will help reduce waiting times and allow us to make the best use of our resources. Your assistance will be much appreciated.

Yours sincerely,

Mary Begg
Mental Health Nurse Therapist



Headquarters
Waverley Gate, 2-4 Waterloo Place, Edinburgh EH1 3EG
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Cc. Dr Gaskell, Newbattle Medical Practice

East Lothian & Midlothian Mental Health Services
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Dr. Gaskell,
Newbattle Medical Practice,
Blackcot,
Mayfield,
Midlothian.

Date 23rd December 2014.
Chi 2706830751
Our Ref MB/VD

Enquiries to Margaret Scott,
Secretary
Extension 58981
Direct Line 0131 536 8981

Dear Dr. Gaskell,

RE: Christopher Wright – d.o.b. 27.06.1983.
119 Woodburn Drive, Dalkeith. EH22 2BB.

Thank you for referring this gentleman. **Alerts** – there has been previous inappropriate sexual behaviour towards boys and girls and claims of sexual abuse perpetrated towards him by an eighteen year old girl then subsequently whilst in residential school.

Reason for referral

The client views himself as being depressed due to traumas from his past including rejection by his family and a particularly difficult relationship with his mother. He has moved between schools a number of times and has suffered from bullying, sexual abuse, domestic violence towards him by at least two partners in more recent times. There is no mention of his own behaviour in the past and he seems to place responsibility for all the bad things in his life upon other people/ situations.

Formulation/diagnosis

Low mood in association with a series of traumatic events dating back to childhood and more recently within two long-term relationships. He does not appear to take personal responsibility for any role he may have contributed to these events.

Agreed plan

I have placed him on the waiting list for the Men's Survive and Thrive Group. His CORE score total is 22. Risk assessment – there is no current suicidal ideation. He did tell me that at age eighteen he was stopped by an American couple from jumping off North Bridge. They then took him to a Café and spoke to him regarding his difficulties. He claims that they are still in contact with him.



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2.

Yours sincerely,

Mary Begg.
Mental Health Nurse Therapist.

East Lothian & Midlothian Mental Health Services
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Head of Health: Allister Short
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Mr Christopher Wright
119 Woodburn Drive
Dalkeith
Midlothian
EH22 2BB

Date 17 March 2015
Chi 2706830751
Our Ref PB/LW/161306

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mr Wright,

As you will be aware, following your assessment appointment with a practitioner from the Psychological Therapies Service, your name was placed on the waiting list for the Survive and Thrive course.

I am pleased to inform you that the course will commence on the afternoon of **21st April 2015**. Prior to the course starting I would like to meet you for an individual “meet and greet” appointment, so we can review your current situation, discuss the course in more detail and I can answer any questions that you may have. If you do not know the venue, it is also a chance to establish its location and how long it will take to get there etc. This is to help minimise anxieties for the first session.

Your appointment has been booked for:-

- **Wednesday 8th April 2015 at 12 noon**
- **Musselburgh Primary Care Centre, 1st floor out-patient department**

This will last approximately half an hour.

If this appointment is unsuitable, but you still wish to come to the group, please contact me on 0131 536 8982.

If you do not attend the session and there has been no contact from you, we will assume you no longer wish our assistance and discharge you back to the care of your GP.

I have enclosed a map, with directions to the department.



Headquarters
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Yours sincerely

Penny Balfour
Clinical Associate in Applied Psychology

Cc: Mary Begg, Mental Health Nurse Therapist
Dr Gaskell, Newbattle

East Lothian & Midlothian Mental Health Services
Midlothian Health & Social Care Partnership
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Mary Begg
Mental Health Nurse Therapist

Date 12 August 2015
Chi 2706830751
Our Ref PB/LW/

Enquiries to Lynda Watson, Secretary
Extension 58982
Direct Line 0131 536 8982

Dear Mary

Re: Christopher Wright (27.06.83), 119 Woodburn Drive, Dalkeith, EH22 2BB

As you will recall you referred Christopher Wright to the Men's Survive & Thrive Course which commenced on Tuesday 21st April 2015. Please accept my apologies for the lateness of this letter, unfortunately my original letter was accidentally deleted after I had sent it for typing about half way after the course had commenced.

I met with Christopher on the 10th April 2015 for a meet and greet appointment. At this time he described episodes of feeling low, contrasted by episodes of increased energy, poor sleep and a lack of routine and no social contact other than his girlfriend, whom he saw regularly. We discussed the Survive & Thrive Course which seemed appropriate for him, however Christopher was uncertain whether he would attend. This was mainly due to his difficulties getting out and about, his low mood and lack of energy and also his anxiety about attending a group. I explained the nature of the course and tried to address his anxieties and encourage him to attend however he remained ambivalent about whether he would attend.

Sadly Christopher did not attend the course so I would be grateful if you would see him for a follow up appointment. My feeling is that the Survive & Thrive Course would be appropriate and perhaps he would feel able to attend the next group which commences on the 28th September, however I am uncertain whether much will have changed for him and whether he will feel more motivated to attend.

Please do not hesitate to contact me if you have any further questions.

Yours sincerely

Penny Balfour
Clinical Associate in Applied Psychology



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Referrals

NHS Lothian - Referral Letter

Referral To	Mental Health Midlothian - Adult Psychiatry (Non Urgent Only) L Psychological Therapy Serv
Urgency of referral	Routine
Date of referral	29/10/2014
Date submitted	29/10/2014
UCPN	1010081349592

PATIENT DETAILS		Contact Details	
CHI number:	2706830751	60 STEELE AVENUE	Voice (Mobile) : 07925471675
Name:	MR CHRISTOPHER WRIGHT	MAYFIELD	
Date of birth:	27/06/1983	DALKEITH	
Sex:	Male	EH22 5LR	

REFERRING PRACTITIONER DETAILS		Practice address
Name:	Dr. Anna Gaskell (GMC: 6151087)	Blackcot
Practice:	Newbattle Medical Practice (77106)	Mayfield
Phone:	Voice : 0131 663 1051	Midlothian
		EH22 4AA

CLINICAL INFORMATION

Reason
for
Referral:

Main
Referral

Text: I would be grateful for your assessment of this 31 year old gentleman who has had ongoing problems with low mood. He is currently on treatment with Venlafaxine and feels that this is helping. However, he has had a number of relationship difficulties over the past year and has recently found out that his partner has cheated on him once again. They are still together and she seems to be making a lot of demands. He feels that his mood is up and down. He was previously referred for counselling in the past but didn't manage to attend the appointment. He feels that this would be helpful in addition to his medication.

Christopher is currently unemployed. He and his partner do not have any children. He is otherwise physically quite well.

On examination today, he seemed reactive and chatty in consultation. We have not made any changes to his medication at present but I think he would benefit from a course of counselling given these ongoing life issues.

Kind regards

Yours sincerely,

Dr. Anna Gaskell

Investigations

Description	Result	Date
Referral to specific professional/intervention :	Mental Health Nurse Therapist	
Assessment Tool Used :	Not appropriate	
Score on Scale :	n result	
Impact of presenting mental health problems on social and occupational functioning :	Moderate	
Significant Risk :	No	
Drug/alcohol use (past and present) :	No	
Other agencies currently involved (including non-NHS) :	No	

Received previous psychological intervention :
If yes, please specify :

Yes
Norma Frazer October 2013

Pre-existing conditions (High & Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Extension</u>	<u>Start Date</u>	<u>Date Recorded</u>
Epididymal cyst		right	27/01/2011	27/01/2011
[X]Depressive episode	First ever		20/07/2009	20/07/2009
Epididymal cyst		right	23/07/2003	23/07/2003
Other acne			10/02/2003	10/02/2003
Anxiety states			04/04/2001	04/04/2001
[X]Post - traumatic stress disorder			15/10/1999	15/10/1999
Atopic dermatitis/eczema			02/07/1999	02/07/1999
Allergic rhinitis			02/07/1999	02/07/1999
Closed fracture nose			26/04/1999	26/04/1999
Behavioural problem			05/06/1991	05/06/1991
Enuresis			30/01/1989	30/01/1989

Past procedures (High and Medium Priority)

<u>Procedure</u>	<u>Comment</u>	<u>Modifier</u>	<u>Date Performed</u>	<u>Date Recorded</u>
Operations for squint	left		05/06/2013	05/06/2013
Eye operations			09/09/1997	09/09/1997

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

<u>Drug name</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>	<u>Last Prescribed Date</u>
Venlafaxine 150mg modified-release capsules	capsule	2 CAPSULES ONCE DAILY		24/09/2014		24/09/2014
Venlafaxine 75mg modified-release capsules	capsule	1 CAPSULE ONCE DAILY		24/09/2014		24/09/2014
Amitriptyline 25mg tablets	tablet	TAKE THREE AT NIGHT		24/09/2014		24/09/2014
Ibuprofen 600mg tablets	tablet	1 TABLET THREE TIMES DAILY		24/09/2014		24/09/2014
Sildenafil 100mg tablets	tablet	1 TABLET WHEN REQUIRED		24/09/2014		24/09/2014
Senna 7.5mg tablets	tablet	2 TABLETS AT NIGHT. THIS MEDI[more]		24/09/2014		24/09/2014
Paracetamol 500mg tablets	tablet	2 TABLETS AS REQUIRED UP TO 4[more]		24/09/2014		24/09/2014

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

<u>Drug name</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>	<u>Last Prescribed Date</u>
Sildenafil 100mg tablets	tablet	1 TABLET WHEN REQUIRED		24/09/2014		24/09/2014
Senna 7.5mg tablets	tablet	2 TABLETS AT NIGHT. THIS MEDI[more]		24/09/2014		24/09/2014
Paracetamol 500mg tablets	tablet	2 TABLETS AS REQUIRED UP TO 4[more]		24/09/2014		24/09/2014
Paracetamol 500mg tablets	tablet	2 TABLETS AS REQUIRED UP TO 4[more]		24/09/2014		24/09/2014
Amitriptyline 25mg tablets	tablet	TAKE THREE AT NIGHT		11/08/2014		11/08/2014
Venlafaxine 150mg modified-release capsules	capsule	2 CAPSULES ONCE DAILY		04/08/2014		04/08/2014
Venlafaxine 75mg modified-release capsules	capsule	1 CAPSULE ONCE DAILY		04/08/2014		04/08/2014
Amitriptyline 25mg tablets	tablet	TAKE ONE AT NIGHT		04/08/2014		04/08/2014
Ibuprofen 400mg tablets	tablet	1 TABLET UP TOTTHREE TIMES DAILY		04/08/2014		04/08/2014

Additional information

Patient Weight in Kilograms:85

Patient Height in Metres:1.92