

University Hospital Ayr
Dalmellington Road
Ayr

MMA Legal Limited
Stok
43-59 Princes Street
Stockport
SK11RY

Date 29/04/2026
Our Ref MF1506936172
Your Ref 100049
Enquires to Maryann
Telephone 01292 616452

E-mail Maryann.Findlay@aapct.scot.nhs.uk

Dear Sir/Madam

RE: Craig Healy, Stok

I refer to your recent request to myself regarding the above and enclose the relevant documents. I would be grateful if you could return the tear-off slip confirming receipt.

Yours faithfully,



Mr R H Bryden
Head of Health Records Services

Please return to: Maryann, Health Records, University Hospital Ayr, Dalmellington Road, Ayr, KA6 6DX
I acknowledge receipt of the copies of medical records pertaining to: Craig Healy 1506936172

Signed: _____

Date: _____

Designation: _____

Healy, Craig (Mr)

Date of Birth 15-Jun-1993 (32y) undefined Male CHI Number 1506936172

History for Summary of contact/details

From 24/04/1926 Until 24/04/2026

Assessed 19th Dec 2012 at 12:16

Summary of contact/details

Dear Craig

As you did not attend your appointment on Tuesday 18th December 2012, and we have received no contact from you, I am now discharging you from my caseload.

Your GP has been informed by copy of this letter. Therefore, should you require any further input, please contact your GP.

Assessed 19th Dec 2012 at 12:10

Summary of contact/details

Dear Dr Horne

RE: CRAIG HEALY, 92A HAINING AVENUE, KILMARNOCK, KA1 3QP, DOB: 15.06.1993, CHI NO: 1506936172

Please see attached activity record for the above patient.

Please do not hesitate to contact me on the above number should you require any further information.

Assessed 18th Dec 2012 at 13:44

Summary of contact/details

-Craig did not attend arranged appointment today and has not contacted to cancel or rearrange as this is the second appointment he has not attended I will discharge him today. I will ask GP to re-refer should he require further assistance.

Assessed 7th Dec 2012 at 14:07

Summary of contact/details

Dear Craig

I am sorry you were unable to attend our arranged appointment with myself on 6th December 2012. I would therefore like to offer you a further appointment with myself

On: Tuesday 18th December 2012

At: 1.30pm

In: Central Clinic, Old Irvine Road, Kilmarnock

If this appointment is not suitable, please contact me on the above number to re arrange.

Assessed 6th Dec 2012 at 14:29

Summary of contact/details

Healy, Craig (Mr)

Date of Birth 15-Jun-1993 (32y) undefined Male CHI Number 1506936172

History for Summary of contact/details

From 24/04/1926 Until 24/04/2026

-Craig did not attend appointment today, spoke to him on telephone later and he stated he has been sick. Craig agreed to attend another appointment in 2 weeks, no immediate concerns raised, Craig agreed to contact should situation change and contact numbers provided.

Assessed 5th Dec 2012 at 16:47**Summary of contact/details**

Appointment offered for tomorrow North West Centre 2pm.

Assessed 4th Dec 2012 at 17:02**Summary of contact/details**

Phone call from Dr Melanie Horne at London Rd. Has spent 45 minutes with Craig and concerned re. mental health and presentation. Craig reports feelings of completing suicide, no current plans or intent although has superficially cut his arms, little evidence of this being a regular coping strategy.

Grew up in the care system from the age of 12 after living with his mum [REDACTED], went to stay with his dad who he had a good relationship with, a day before his 16th birthday his dad died [REDACTED].

Craig has managed to find his own flat and get an apprenticeship at a local garage and sort his life out. Around three weeks ago started to feel his mood deteriorate and stopped going to work. Has lost his job as a consequence. In danger of losing tenancy and due to see social work today. Trouble with sleep and has lost weight due to lack of appetite and not having any money.

Appears to be a vulnerable young man, Dr Horne not asking for immediate response today but this week. Appointed for central clinic tomorrow. Dr Horne will send SCI referral tomorrow.

Assessed 21st Nov 2012 at 12:08**Summary of contact/details**

Request by Jackie Roxborough for information as an Adult Protection Alert has been raised.

Craig was taken to Crosshouse hospital by police on 19/11/12 following concerns raised by his family and Craig voicing suicidal ideation. The alert indicated that he had been assessed by Euan McMillan and deemed fit to go home. No assessment details on FACE. Jackie will liaise with assessor for further information.

Assessed 13th Sep 2012 at 09:20**Summary of contact/details**

Craig telephoned to request today's appointment be rearranged as he would have to walk to the appointment and was not sure exactly where the centre is. He reports that he has made enquires with Dundonald Road surgery about registering as a new patient but they have asked him provide his birth certificate which is with his Mum in Glasgow and he states he does not have the money to go to collect it.

Assessed 20th Aug 2012 at 09:46**Summary of contact/details**

Dear Craig

I would like to offer you an appointment with myself

On: Thursday 13th September 2012

Healy, Craig (Mr)

Date of Birth 15-Jun-1993 (32y) undefined Male CHI Number 1506936172

History for Summary of contact/details

From 24/04/1926 Until 24/04/2026

At: 9.30am

In: North West Kilmarnock Area Centre

If this appointment is not suitable, please contact me on the above number to re arrange.

Assessed 10th Aug 2012 at 13:58**Summary of contact/details**

Information following todays' meeting, DNA risk clinic this week, Siobhan to discuss referral with Jim.

Assessed 8th Aug 2012 at 14:59**Summary of contact/details**

- Mr Healy phoned this afternoon to apologise for missing appointment, claiming not to have received letter until lunchtime today.
- feeling better than last week.
- accepting he had been isolating himself and overanalising things last week but returned to work on Friday and has felt better by occupying himself.
- continues to complain of low mood but suicidal thoughts much decreased.
- feels he would benefit from input from team but happy to await routine appointment.
- aware of contact numbers if required.
- agreed on need to register with GP and promises to do this tomorrow.
- mobile phone number obtained.
- for discussion at Fridays MDT meeting for allocation.

Assessed 8th Aug 2012 at 10:05**Summary of contact/details**

- DNA arranged risk clinic assessment.
- no communication received.
- no means of contacting him as no phone number or NOK recorded and no GP.
- due to information available, discussion required with wider team re. need for welfare check.

Assessed 6th Aug 2012 at 09:41**Summary of contact/details**

Dear Craig

Following referral to the Community Mental Health Team, I would like to offer you an appointment with my colleague, Jim Young, Charge Nurse

On: Wednesday 8th August 2012

At: 9.30am

In: Central Clinic, Old Irvine Road, Kilmarnock

If this appointment is not suitable, please contact me on the above number to re arrange.

Healy, Craig (Mr)

Date of Birth 15-Jun-1993 (32y) undefined Male CHI Number 1506936172

History for Summary of contact/details

From 24/04/1926 Until 24/04/2026

Assessed 3rd Aug 2012 at 17:02**Summary of contact/details**

Referral recieved from Joanna Franz via clinical email, telephone call to discuss. Discussed with CN Smillie - risk clinic Wednesday, Joanna in agreement. Letter to be sent.

Assessed 2nd Aug 2012 at 21:21**Summary of contact/details**

Assessed in A&E with ANP nurse Bruce

* Attended with low mood and suicidal ideation. Had been brought in by police. ?friend/family had not been able to contact him and he had not attended work therefore concerned. Police encouraged him to attend A&E.

States low mood and fleeting suicidal ideation for years.

Not been to work for 4 days. Fed up with earning no money, getting hassle at work

* States tried to hang self yesterday from lightbulb but sheet didn't work and light came down. Did not try anything afterwards.

* stated confused because sometimes doesn't seem to see an end to all stress but wants to live and doesn't want to kill self. Confused by the ambivalence.

* Stressors: arguments with family at weekend. Got letter saying social work may repossess his flat. has not done anything about this. avoided it.

* Had been trying to discuss low mood but had family telling to "not be a girl" or to "pull self together". made him angry. Had been drinking at weekend with family.

decreased appetite last days. Feels isolated in Kilmarnock. family in Glasgow. Not looking after self or flat in last week.

* dwelling on death of father and stresses caused by childhood.

had been doing well. mechanic apprenticeship. but money very tight.

colleagues tried door. but didn't answer. Feeling not worth it. struggling not sure what to do. fed up of routine of working hard, not much money and then going home and playing computer games alone and sleeping.

past medical history

asthma

not registered with GP in Kilmarnock

past psychiatric history

none. never seen by services. Offered someone to talk about mothers alcoholism with but declined.

family history

Healy, Craig (Mr)

Date of Birth 15-Jun-1993 (32y) undefined Male CHI Number 1506936172

History for Summary of contact/details

From 24/04/1926 Until 24/04/2026

personal

* twin sister and older brother.

[REDACTED] He began to refuse to go to school. All children were taken into care.

got into alcohol and drugs then. siblings went back to Glasgow after in supported accommodation but he stayed in Kilmarnock and got apprenticeship. Here 2 years. but isolated. mother still alive. Not many friends

social history

* lives alone council flat

apprentice

smoker - dep on money

cannabis 1-2 weekly 1 joint. No problems through this as described by patient

no other substances any more. Infrequent alcohol

money is very tight. no debts

forensic.

* problems when in care home. Nil in last years. nil pending

Impression

* emotional trauma from childhood, vulnerable young man isolated and without advocate. depressive disorder. Current situation precipitated by verbal abuse and difficulty with family and stress regarding tenancy.

Would be willing to receive some help and signpost what support may be out there for him.

plan

will register with GP

referral to CMHT appointment by letter as no phone number known for him

OOH numbers given should he require help before or wanting someone to talk to.

**CROSSHOUSE HOSPITAL
EMERGENCY DEPARTMENT**



RAH Rm1

A/E No:
XH-12-066435-1

CHI No: 1506936172

Date: 19 Nov 2012 Time: 17:40

Consultant:
Dr Alan Lannigan

GP
**Dr. ROBERT RD BEVERIDGE
LONDON ROAD MEDICAL
PRACTICE
12 LONDON ROAD
KILMARNOCK
AYRSHIRE
KA3 7AE**

Incident Date:
19 Nov 2012

Incident Time:
17:40

Marital Status:
Single

Sex:
M

Ethnicity **Scottish**

Religion **None**

Attendances in last 12mths
1

Total Attendances Count
2

**HEALY
Craig**

Date of Birth: 15 Jun 1993 Age: 19 Years

Address:
**92A HAINING AVENUE
KILMARNOCK**

KA1 3QP

Phone Numbers:
Home: **NOT KNOWN**

Employer/School
hughie bird Not at School

Next of Kin:

Brother

Accompanied By:
Police

Special case

Triage Time 17:46

Triage Nurse **Laura Muir**

Triage Group **Yellow**

Resp Rate 15 02 Sat% 99 PFR

Pulse 74 BP 132/58 E 4 M 6 V 5

Allergies: **No Known Allergy**

BMstix 5.8 Alcohol Temp 36.2 Weight

Visual Acuity R L Pain Score (Triage) 99 Pain Score (Discharge)

Triage details

BIBP - phoned his mum stating he was going to harm himself - arrested by police for his own safety

Treatment
Advice - verbal

Special Needs
Asthma brittle

Re-assess in 15 30 60 minutes

See: Argon

Against Medical advice I decline the treatment offered. I know this may affect my recovery.

Signed..... Witness.....

I give consent for details of my injury to be given to the Police.

Signed.....



* 1 5 0 6 9 3 6 1 7 2

Disch A+E clinic Paed Tr. # eye ENT Max Facial Ward OP Ward IP

Drug	Dose	route	time/frequency	signature	quantity/given by

PVC1	Size/Colour	Location	Initials	PVC2	Size/Colour	Location	Initials

Device	Flow Rate l/min	%O2 for Venturi	Target SpO2	Prescribed by	Started by	Stopped by
Oxygen						
Changed to						

DOCTOR / ENP: *M. M. M.* Time: *1830*

See MM Performer.

n/c to police custody

[Signature]

NHS Ayrshire & Arran Emergency Departments Mental Health Triage



this side to be completed by triage nurse

Craig Healy
DOB: 15/08/1993
CHI Number: 1506936172
Date: 19 Nov 2012
Time: 17:40

patient accompanied by... *Police*

Description *light brown hair
slim build
dark t-shirt & trackie bottoms*

Triage Observations		document physiological measurements	
GCS	15	Pulse	74
BP	132/58	Resps	18
SatO2	99	BM	5.5

2. Outline of presentation

overdose (will require medical assessment)		BIBP - phoned his mum stating he was going to harm himself - arrested by police for his own safety
self injury (will require wound management)		
other psychiatric presentation (will require medical problems excluded)		

3. Initial presentation, appearance and behaviour

respond yes/no to each question	Yes	No
Is the patient violent, aggressive or threatening?		☒
Is the patient obviously distressed, markedly anxious or highly aroused?	Yes	☒
Is the patient behaving inappropriately to the situation?	Yes	☒
Is the patient quiet and withdrawn?	Yes	☒
Do you think the patient presents an immediate risk to you, him/herself, or others?	Yes	☒
Do you think the patient is likely to abscond prior to assessment?	Yes	☒
Do you think the patient is experiencing delusions or hallucinations?	Yes	☒
Do you think the patient feels influenced or controlled by external forces?	Yes	☒
Are you aware of a history of violence or self harm?	Yes	☒
Are you aware of a history of mental health problems or psychiatric illness	Yes	☒

4. Triage Risk Assessment

Any responses in the first column - the patient should be categorised P1, moved into the clinical area immediately (accompanied if appropriate), and assessed as soon as possible.

All responses in the last column - the patient should be categorised P3, and can wait for assessment (accompanied if possible), ideally in a place other than the main waiting room.

All other patients should be categorised P2, and can wait for assessment, ideally in a place other than the main waiting room, although they should be moved into the department as soon as possible (accompanied if appropriate).

Nurse Referral To: ☐ Psych. Liaison

Time: ☐ ANP /Crisis

☐ Med Review requested by Psych - Reason:

any responses in the first column:

HIGH RISK (P1)
Red / Orange

unless all responses in third column:

MODERATE RISK (P2)
Yellow ✓

unless all responses in third column:

LOW RISK (P3)
Yellow

Signature: *[Signature]*

Date: *19/11/12* Time: *17:50*

Outline of current presentation and precipitating factors

Keen ↑ financial stress. Works as mechanic. Finding it hard to make ends meet. Fell low since his son died. 1x previous SM, attended Aug. Has now registered in GP. Keen good appetite, hard all the time. Sleeps well.

Previous mental health problems or self-harm, including addiction: current medication etc

Argument in car, accused of stealing money. (She stated as he threatened suicide. In prison. No idea how he would do this. No ongoing)

Other relevant information- physical health, drug history, housing, relationships, childcare etc

Not married / [REDACTED]
No drugs.
No previous history.

Appearance

Easy to engage - conversative, talks freely. Well dressed.

Behaviour

Easy to engage - conversative, talks freely. Well dressed.

Speech

Clear speech. No risk of self-harm thoughts.

Mood

Nervous, good & bad days.

Thought

No hallucinations / delusions.

Insight

✓

No suicidal ideation

Suicide Risk Screen Yes No Unk

Male Gender			
Age <18 >65			
Depression			
Alcohol and drug use			
Evidence of psychosis			
Separated, widowed, divorced			
Suicide plan/concealment			
Lack of social support			
Ongoing suicidal intent			
Chronic physical illness/pain			
Family history of suicide			
Family concerned about risk			
Disengaged/poor compliance			
Unemployed or retired			
Access to lethal means of harm			
Previous use of violent methods			
History of self-harm or overdose			
Previous psychiatric treatment			
Current psychiatric treatment			
Current use of benzodiazepines			

Summary and Risk Assessment

Formulated on the basis of clinical assessment. More risk factors are suggestive of greater risk. Negative responses in the four categories highlighted may allow patients to be categorised as low risk and discharged to community follow up.

No ongoing or forced suicidal ideation. Imminent threat after 1st.

Indicate likelihood of a further episode of self harm in the short term (48hrs)

High Risk
Moderate Risk
Low Risk

Plan for further assessment

For Agnes to see in GP.

* "A Clinical Tool for Assessing Risk After Self-Harm". Cooper et al. Annals of Emergency Medicine. Oct 2006.
~ "Self-Harm", NICE Guideline 16.2004 focuses on the assessment of risk in this period of immediate and short term care.
U Unknown

Signature

Date/Time

19/11



CHI Number: 1506936172



Accident & Emergency Nursing Documentation Form

SITUATION

HEALY Craig
92A HAINING AVENUE
KILMARNOCK
KA1 3QP

Date: 19 Nov 2012
Time: 17:40

DOB: 15/06/1993

Additional information for admission
complaint:
BIBP - phoned his mum stating he was
going to harm himself - arrested by police
for his own safety

Receiving Nurse(s):

LAURA MURKIN

BACKGROUND

Relevant PMH relating to presenting complaint:

Allergies: PENICILLIN
Warfarin: yes/no/unknown
Insulin: yes/no/unknown

Next of Kin details: (if difference from A&E Card)

Name: _____
Relationship: _____
Address: _____
Telephone no: (if diff from above) _____

With patient: Yes/No
To be contacted?
If yes-time
contacted _____
If no - reason _____

Police present

ASSESSMENT

MEWS/PAWS score: 0

GCS: 15

Any medications given by paramedics

Name band in situ: Y/N

Own medications: Y/N

Belongings taken for
safe-keeping: Y/N

O2 therapy: yes/no Amount: _____

RECOMMENDATION

XH-12-066435-1

CHI Number: 1506936172

Treatment plan/Nursing Notes:

[illegible]

Transferring Nurse Signature: _____ Receiving Nurse _____

Time of transfer: _____ Relatives aware yes/no _____

**CROSSHOUSE HOSPITAL
EMERGENCY DEPARTMENT**



A/E No:
XH-12-044308-1

CHI No: 1506936172

Date: 02 Aug 2012 Time: 17:13

Consultant:
Dr Katy McCarthy

**HEALY
Craig**

GP
ROBERT RM TROLLEN

**DR ROBERT M TROLLEN & DR
PAMELA GED**
MILTON MEDICAL CENTRE

0141-772 1183

Incident Date:
02 Aug 2012

Incident Time:
17:13

Marital Status:
Single

Date of Birth: 15 Jun 1993 Age: 19 Years

Sex:
M

Address:
**77 MORRIS CRESCENT
HURLFORD
KILMARNOCK**

Next of Kin:

Ethnicity **Scottish**

Brother

Religion **None**

Attendances in last 12mths
0

KA1 5BH

Total Attendances Count
1

Phone Numbers:
Home: 01563525486

Accompanied By:
Unaccompanied

Special case

Employer/School
hughie bird Not at School

Triage Time 17:19

Triage Nurse Susan Stirling

Triage Group Orange

Resp Rate 02 Sat% PFR

Pulse BP E M V

Allergies: No Known Allergy

BMstix Alcohol Temp Weight

Visual Acuity
R L
Pain Score (Triage) 10
Pain Score (Discharge)

Triage details

BIBA - missing for 4 days, police entered property - suicidal, poor eye contact, has made plans to jump in front of train

Treatment
NONE

Special Needs
Asthma brittle

Re-assess in 15 30 60 minutes

Against Medical advice I decline the treatment offered. I know this may affect my recovery.

Signed.....Witness.....Witness.....

I give consent for details of my injury to be given to the Police.

Signed.....

Disch A+E clinic Pacd Tr. # eye ENT Max Facial Ward OP Ward IP



Drug	Dose	route	time/frequency	signature	quantity/given by

DOCTOR / ENP: McLEWAN

Time: 17⁴⁵19⁰⁷

PC Brought to hospital by police - ? low mood.

HPC Brought to hospital by ambulance after police gained access to his house after family became concerned that they couldn't reach him for 4 days.

Patient says has had low mood for over 5 years but feels that things are getting worse.

Has been at home for past 4 days "doing nothing" - feels has no interest

in doing anything and wishes he was dead. Says has tried to choke himself. Uses drugs or alcohol.

Denies any PMHx of note

G/A Abt. appears withdrawn.

Temp 35.5°C

Not making any eye contact.

P 73

Imp

Withdrawn, mood low

BP 118/72

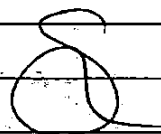
expressing suicidal intent.

SpO₂ 98

RR 16

Plan

Will ask psych to review.



NHS Ayrshire & Arran Emergency Departments Mental Health Triage



this side to be completed by triage nurse

Craig Healy DOB: 15/06/1993 CHI Number: 1506936172 Date: 02 Aug 2012 Time: 17:13	patient accompanied by... Description: <i>light blue tracksuit trousers, Red + white striped shirt.</i>
---	--

1. Triage Observations		document physiological measurements	
GCS	15/15	Pulse	146 *
BP	118/72	Resps	16
SaO2	98	Temp	35.5

2. Outline of presentation		tick those categories which apply and provide a brief summary
overdose (will require medical assessment)		BIBA - missing for 4 days, police entered property - suicidal, poor eye contact, has made plans to jump in front of train.
self injury (will require wound management)		
other psychiatric presentation (will require medical problems excluded)		

3. Initial presentation, appearance and behaviour		respond yes or no to each question
Is the patient violent, aggressive or threatening?	Yes	No
Is the patient obviously distressed, markedly anxious or highly aroused?	Yes	No
Is the patient behaving inappropriately to the situation?	Yes	No
Is the patient quiet and withdrawn?	Yes	No
Do you think the patient presents an immediate risk to you, him/herself, or others?	Yes	No
Do you think the patient is likely to abscond prior to assessment?	Yes	No
Do you think the patient is experiencing delusions or hallucinations?	Yes	No
Do you think the patient feels influenced or controlled by external forces?	Yes	No
Are you aware of a history of violence or self harm?	Yes	No
Are you aware of a history of mental health problems or psychiatric illness	Yes	No

4. Triage Risk Assessment		indicate a category of risk by circling one
Any responses in the first column - the patient should be categorised P1, moved into the clinical area immediately (accompanied if appropriate), and assessed as soon as possible. All responses in the last column - the patient should be categorised P3, and can wait for assessment (accompanied if possible), ideally in a place other than the main waiting room. All other patients should be categorised P2, and can wait for assessment, ideally in a place other than the main waiting room, although they should be moved into the department as soon as possible (accompanied if appropriate).	any responses in the first column: HIGH RISK (P1) Red / Orange	unless all responses in third column: MODERATE RISK (P2) Yellow
		unless all responses in third column: LOW RISK (P3) Yellow

Nurse Referral To:	☐ Psych. Liaison
Time:	☐ ANP / Crisis
	☐ Med Review requested by Psych - Reason:

Signature _____
Date: ____/____/____ Time: ____:____:____

Outline of current presentation and precipitating factors

Previous mental health problems or self-harm, including addiction: current medication etc

Other relevant information- physical health, drug history, housing, relationships, childcare etc

Appearance

Behaviour

Speech

Mood

Thought

Insight

Suicide Risk Screen Yes No Unk

Male Gender

Age <18 >65

Depression

Alcohol and drug use

Evidence of psychosis

Separated, widowed, divorced

Suicide plan/concealment

Lack of social support

Ongoing suicidal intent

Chronic physical illness/pain

Family history of suicide

Family concerned about risk

Disengaged/poor compliance

Unemployed or retired

Access to lethal means of harm

Previous use of violent methods

History of self-harm or overdose

Previous psychiatric treatment

Current psychiatric treatment

Current use of benzodiazepines

Summary and Risk Assessment

formulated on the basis of clinical assessment, more risk factors are suggestive of greater risk; negative responses in the four categories highlighted may allow patients to be categorised as low risk and discharged to community follow up *

Indicate likelihood of a further episode of self harm in the short term (48hrs)

Plan for further assessment

High Risk

Moderate Risk

Low Risk

* "A Clinical Tool for Assessing Risk After Self-Harm". Cooper et al. Annals of Emergency Medicine. Oct 2006.
 - "Self-Harm", NICE Guideline 16 2004 focuses on the assessment of risk in this period of immediate and short term care.
 U Unknown

Signature _____

Date/Time _____



CHI Number: 1506936172

**Accident & Emergency Nursing Documentation Form****SITUATION**

HEALY Craig
77 MORRIS CRESCENT
HURLFORD
KAI 58H

Date: 02 Aug 2012
Time: 17:13

DOB: 15/06/1993

Additional information for admission complaint:

BIBA - missing for 4 days, police entered property - suicidal, poor eye contact, has made plans to jump in front of train

Receiving Nurse(s): _____

BACKGROUND

Relevant PMH relating to presenting complaint:

Allergies: _____

Warfarin: yes/no/unknown

Insulin: yes/no/unknown

Next of Kin details: (if difference from A&E Card)

Name: _____

Relationship: _____

Address: _____

Telephone no: (if diff from above) _____

With patient: Yes/No

To be contacted?

If yes-time contacted _____

If no - reason _____

ASSESSMENT

MEWS/PAWS score: _____

GCS: _____

Any medications given by paramedics

Name band in situ:

Y/N

Own medications

Y/N

Belongings taken for safe-keeping:

Y/N

O2 therapy: yes/no

Amount: _____

XH-12-044308-1

Treatment plan/Nursing Notes:

Transferring Nurse Signature: _____ Receiving Nurse _____

Time of transfer: _____ Relatives aware yes/no



Write or attach label

HCR Number:

CHI Number: 1506936172

Surname: Healy

Sex: Male

Forename: Craig

Address: 77 MORRIS CRESCENT, HURLFORD
22a Haining Bedford
KILMARNOCK ~~KA15 5BN~~

Date of Birth: 15 Jun 1993

MEDICAL CONTINUATION SHEET

DATE	
2/8/11	CT ₂ + SWP Ψ R/V.
	Low mood ~ 4 yrs. $\uparrow$ suicidal thoughts over years.
	NO been going to work in 4 days.
	Now unable to think about other things
	Tried to hang self yesterday - Had sheets to light. Light collapsed
	Was in Glasgow at home. Arguments with family.
	Tried to discuss low mood. Told to pull self together.
	Very negative, feel alone isolated.
	- Angry at times. Can have temper.
	$\downarrow$ appetite. Not looking after self / flat.
	Tired. $\downarrow$ energy. Not doing anything. Swelling in feet
	Saw no future for self. Wanting to kill self death + this fact
	but doesn't want to
	• hallucinations • thoughts of / passivity.
PMH	PMH asthma. on inhalers
PMH	Once when first in care ? support work re. victim / abuse family
PMH	[REDACTED] prob.
Personal	thin sister + older brother
	[REDACTED]
	Refusing to attend school + [REDACTED]
	him + pt. taken into care. Brother allowed to stay
	Father died [REDACTED] Never coped to death
	Siblings back in supported accom in Glasgow
	Decided to stay
SH	Wives alone ~ 2 yrs Own let.
	Mechanic apprentice - getting grief from work colleagues
	Sunder - dep. on money
	Family in Glasgow.
	Gumms 1-2x weekly. 1 joint.
	N. other substances. Alcohol at weekend not daily
	Money tight but no debts.
Forensic	Prev. problems surge especially when in car
	nil in last year

Forename: Craig

Surname: Healy



Date: 02 Aug 2012

DATE		
	Colleagues tried door - he did not answer	
	worried about him.	
	Background - Emotional distress + trauma, isolated	
	+ vulnerable young man.	
	Precip - Argument + family	
	letter for social work + repossessing house	
	MSG	
	A+B - dressed casual clothes	
	- dirty trousers.	
	Arms folded.	
	Avoiding eye contact	Appropriate
	Sp - Normal VO. ↑ speech	
	Mood - O/I/S - subjective	
	Obj - low but reactive mild	
	reactive at times	
	Suicidal thoughts over last year	
	anxiety group	
	Perception - no halluc / illusion	
	Belief - no overvalued / delusion	
	Cognition - no problems	
	Insight - aware deficits not dealt with	
	feels low, willing to accept some	
	help	



HCR Number:

Surname: Healy

Sex: Male

Forename: Craig

Address: 77 MORRIS CRESCENT, HURLFORD

KILMARNOCK KAI SBH.

Date of Birth: 15 Jun 1993

DATE _____

Die unith Dr + ANP re: plan

- ambivalence re: suicidal ideation
 - long wandering thoughts
 - worsened by visit to Glasgow + arguments
 - Stating cannot kill self - weapon using
 - Talking helps a bit
 - Ready now to look at some support + deal with the

Plan

Reffer to CMHT
Help numbers for OOH support.
Bus pass home
Register with GP.

A. Happy with plan. Will contact if need

TRANZ
C7

7042328

1350K 04-01-03-02

10 mm/mV



10 mm/mV 25 mm/s Filter: H50 d 35 Hz 10 mm/mV

Vent rate 75 bpm
 PR int 30 ms
 QRS dur 86 ms
 QT/QTc int 370/396 ms
 QT/QTc axis 60/86/25
 RV5/SVL amp 1.960/1.415 mV
 RV5/SVL amp 8.205 mV
 AV 3.205 mV

Unconfirmed Report
Reviewed by

DOB: 15/06/1993
 HEALY Craig
 77 MORRIS CRESCENT, HURLFORD
 KA1 5BH



1100 sinus rhythm
 0102 artifact present
 9110 ** normal ECG **

2 Aug 2012 17:46

19 years

sex: male
 birth date: 15 Jun 1993
 kg

**CROSSHOUSE HOSPITAL
EMERGENCY DEPARTMENT**



06157

A/E No:
XH-11-026789-1

CHI No: 1506936172

Date: 18 May 2011 Time: 11:01

Consultant:
Dr Julie Gordon

GP
ROBERT RM TROLLEN
MILTON MEDICAL CENTRE
109 EGILSAY STREET

Incident Date:
18 May 2011
Incident Time:
11:01

Marital Status:
Single

Sex:
M

**HEALY
Craig**

Date of Birth: 15 Jun 1993 Age: 17 Years

Address:
77 MORRIS CRESCENT
HURLFORD
KILMARNOCK

0141 772 1183

Next of Kin:

Brother

Religion: None

Previous Attendance Count:
0

KA1 5BH

Phone Numbers:
Home: 01563525486

Employer/School
hughie bird

Accompanied By:
Unaccompanied

Special case

Triage Time 11:10

Triage Nurse STEPHANIE STAINES

Triage Group Yellow

Resp Rate 02 Sat % PFR

Pulse BP

E M V

Allergies: No Known Allergy

BMstix Alcohol Temp Weight

R L

Pain Score (Triage) 5
Pain Score (Discharge)

Triage details

Self presentation knocked down by car approx speed 25-30mph abrasion to rt side of face and swelling, pain and swelling over rt lower leg.

Treatment
NONE

Special Needs
Asthma brittle

Re-assess in 15 30 60 minutes

Against Medical advice I decline the treatment offered. I know this may affect my recovery.

Signed..... Witness..... Witness.....

I give consent for details of my injury to be given to the Police.

Signed.....

Disch A+E clinic Paed Tr. # eye ENT Max Facial Ward OP Ward IP



* XH-11-026789-1 *

Monday

Drug	Dose	route	time/frequency	signature	quantity/given by
Co-Codone 30/su	200	o	1130	D. [signature]	SPRANES
Co-codone	200	o	1145	D. [signature]	SPRANES
Bupren	600	o	8h	D. [signature]	SPRANES

DOCTOR/ENP: Cleary

Time: 1145

- Patient was struck in front and a car dived him in (b) leg, spine was

injured.

- fell into bucket, but not killed or if

- injured to face + back, hands

- [unclear] on [unclear]

A - phy - cope - not full, full [unclear]

B - [unclear] ME R = C = [unclear]
[unclear] [unclear] on [unclear]

C - phy 80, BP 120/70

- [unclear] on [unclear]
- [unclear] on [unclear]

Cos 15/15

NHS Ayrshire & Arran

MEWS CHART

(with Neuro - Observations)



HEALY, Craig
77 MORRIS CRESCENT, HURLFORD
KA1 5BH

DOB: 15/06/1993



Date of birth 15/06/1993

DATE

TIME (24 hour clock)

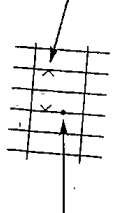
15/11/11

Temperature
(°C)

36.5

BLOOD
PRESSURE

Record this way



Record this way

HEART RATE

Respiratory Rate



Saturation 100

MEWS SCORE for EACH of the INDIVIDUAL OBSERVATIONS

Temperature (°C)
BP (Systolic)
Heart Rate
Respiratory Rate
SpO₂
Urine Output
CNS

0
0
0
0
0
0
0

MEWS SCORE - TOTALS

Record the total MEWS scores for each set of observations this way

Sedation Score
Pain Score (On Movement)
Nausea Score

0
2
0

G
Eyes
O
C
n
M
Best
Verbal
Response
S
C
Best
Motor
Response
E

Spontaneously 4
To speech 3
To pain 2
None 1
Orientated 5
Confused 4
Inprop. words 3
Incomp. sounds 2
None 1
Obeys commands 6
Localise pain 5
Withdrawl to pain 4
Abnormal flexion to pain 3
Extension to pain 2
None 1

GCS TOTAL

15

P
U
P
I
L
S

R

L

Size
Reaction
Size
Reaction

4
4
4
4

L
I
M
B
M
O
V
E
M
E
N
T

A
R
M
S

L

Normal power
Mild weakness
Severe weakness
Spastic flexion
Extension
No response
Normal power
Mild weakness
Severe weakness

5
5
5
5
5
5
5
5
5

PUPIL SCALE (mm)

1
2
3
4
5
6
7
8



HCR Number:

Sex: Male

Forename: Craig

KILMARNOCK KA1 5BH

Date of Birth: 15 Jun 1993

DATE _____

- across (N) for, long by

On 12/11/20

$$= (R) + (L) \text{ up to } W$$

- Clock $\neq$ fgs - No big teachers

abnormal over knowledge but not an

(L)ly - NAD

(R) $\log =$ know our lateral aspect leg/walks plan

- Army / Post $\rightarrow$ Non-Few.

No direct NV defect in (R) or (L) leg

- $\chi_{ij} = P_b / P_s \Rightarrow NBI$

1-p-51 (10) long

- cateter, anjerna, pital, vns

→ Close your Sdys

R DAVID C. JUNG
CONSULTANT IN EMERGENCY
MEDICINE
CG NO 4304124



CHI Number: 1506936172.



Accident & Emergency Nursing Documentation Form

SITUATION

HEALY Craig
77 MORRIS CRESCENT
HURLFORD
KA1 5BH
DOB: 15/06/1993

Date: 18 May 2011

Time: 11:01

Additional information for admission

complaint:

Self presentation knocked down by car
approx speed 25-30mph abrasion to rt side
of face and swelling, pain and swelling over
rt lower leg.

Receiving Nurse(s):

BACKGROUND

Relevant PMH relating to presenting complaint:

N.L.

Allergies: NONE

Warfarin: yes/no/unknown

Insulin: yes/no/unknown

DNACPR order in place: yes/no/unknown

Next of Kin details: (if difference from A&E Card)

Name: _____

Relationship: _____

Address: _____

Telephone no: (if diff from above) _____

With patient: Yes/No

To be contacted?

If yes-time contacted _____

If no - reason _____

ASSESSMENT

MEWS/PAWS score: 0

GCS: 15

Waterlow: /

Any medications given by paramedics

N.L.

Name band in situ:

Y/N

Own medications

Y/N

Belongings taken for
safe-keeping:

Y/N

O2 therapy: yes/no Amount: _____

XH-11-026789-1

CHI Number: 1506936172

Treatment plan/Nursing Notes:

MEWS/PAWS score transfer from A&E: _____

Time of transfer: _____ Receiving Nurse _____

Relatives aware yes/no

A&E Nurse Signature: _____

13-050860

Name: an Burns Birth Date: 5 Nov 1960

50 years

Sex: male

Medical History:

Symptoms:

History:

Heart rate:

PR Int:

QRS dur:

QT/QTc Int:

P/QRS/T axis:

PV5/SV1 amp:

PV6/SV1 amp:

80 bpm

156 ms

82 ms

358/409 ms

27/12/71

0.835/10.493 mV

1.930 mV

10 mm/mV 25 mm/s Filter: 150 Hz 35 Hz 10 mm/mV

1109 50ms rhythm
9410 40mm/mV ECG

unconfirmed report
Reviewed by:

10 mm/mV

10 mm/mV

18 MAR 2011 10:57 AM

[Signature]

