

ATSP, asking to self discharge

Hx and BG noted.

Handover from ward doctor received and advised that pt is not detainable unless presentation massively changed.

Simon is keen to be discharged today, he wants to visit his civil partner, take his dog out for a walk and "get back to normal". He also intends to go to AED for ?CXR of his distal phalange of L small finger which he believes to be broken following an accident on the ward - slipped in the bathroom. Advised by staff that this was examined by duty doctor and it was felt it is unlikely to be a fracture. He admits that he has benefited from his stay on the ward but feels that no further IP stay is necessary as he would feel much more comfortable at home. He initially suggested to go home today, stay over night and return to the ward. The plan from the day team was for pt to go out on escorted leave with staff and then gradually increase his leave and let him go out alone. He refused going out with staff due to "embarrassment" of walking with staff if he is seen by his neighbours/friends .

I asked if he would be happy to be visited by HTT at home on discharge and he agreed. He confirmed he is happy to take his meds and to engage with HTT.

He denied any suicidal thoughts or thoughts of self harm, denied thoughts of harming others. Denied any hallucinatory experiences.

MSE

Looks kempt, good eye contact, rapport established

Speech - normal rate, tone, volume, coherent

Mood - euthymic, reactive affect

Thoughts - no formal thought disorder, no thoughts of harming self/others, no delusional beliefs, forward looking

Perception - denied hallucinations, not responding to unseen stimuli

Risks:

Risk of harm to self - low

Risk of harm to others - low

Risk of meds non compliance and non engagement with services- however pt confirms he will engage with HTT and take his meds and is not detainable

Plan

discharge with HTT follow up - NS to kindly arrange HTT referral

Px 2 weeks TTA

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Originator Details: 27 Aug 2016 05:55 Mary Doherty Nursing

Originally Entered By Details: 27 Aug 2016 06:07 Mary Doherty

Last Amended By Details: 27 Aug 2016 06:07 Mary Doherty

Validated By Details: 27 Aug 2016 06:07 Mary Doherty

Significant: No Added to Risk History: No

Contains Third Party Info: No Conceal From Client: Not Concealed

CP1; Simon was in his room using his computer when the shift began, only coming out to attend to his needs. He appears pleasant and calm and interacting well with staff and peers alike.

CP2; He had his night drink.

CP5; He complied with his prescribed night medication.

He had a good night sleep and remains asleep at the time of writing this report.

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