

Home visit today as arranged with Amal Pomphrey from EIS. Client previously under EIS from 2015 discharged in January this year, difficult to engage. History well known so not repeated.

Simon was friendly and welcoming into his home. Put his pet dog out side in the garden, visible through patio doors. Dog appeared in good health though Simon reported that his dog is stressed about his neighbours the police and mental health services to the point it has chewed some of the fur off his front paws.

Simon stood for sometime keen to talk about the evidence he has gathered against the police, and local authority, has taped and logged everything on a website. Showed his website says not live as yet, all he has to do is click a button and it will show how he has been unfairly treated by the local authority and police. Website and all written video and audio recordings linked. Showed a couple of examples CCTV inside his flat, conversation with ASBO team and written documents. Also showed us paper files that he has maintained in large ring binders, containing copies of e-mails and all correspondence. Informed us that he tapes all conversations he has with health, local authority and police staff. Has CCTV cameras placed internally and externally around his flat.

Spoke of how his issues began many years ago trouble with the police over holding illegal parties. Reported that he is currently not going out feels afraid. No restrictions placed on him regarding going out other than not allowed in Industrial areas or 24 hour venues such as MacDonalds or Tescos. Reported recently in court with regards to his neighbour, representing himself does not feel he needs a solicitor. Recommendation is that he has an assessment with a psychiatrist. However said he will not attend as the letter has not been properly dated and stamped and therefore believes he is not bound by it.

**Mental state:**

Simon was casually dressed, his hygiene appeared fair. He maintained good eye contact and rapport. His speech appeared slightly pressured difficult to interrupt but not irritable when interrupted.

Grandiose ideas around his intelligence, says he is a millionaire properties from wealthy relatives who have deceased, successful businesses, earning hundreds and thousands of pounds. Paranoid about his neighbours, believes they and others have spread information that he may have had herpes. Paranoid delusions believes his neighbours are deliberately following him from room to room banging on his ceiling. Believes they want to kill him. Though he did not express any thoughts of wanting to harm anyone. Believes he is being paid to look after vulnerable people in poor situations.

Appears to be a mood element to his condition pressured speech grandiose, tangential jumping from topic to topic. However reported that at times his mood can be depressed and upset by his neighbours. On one occasion he drank some liquid in an attempt to poison himself, found by mother and taken to A&E discharged. Denied having any current suicidal ideation or thought to harm himself.

There was no evidence of any hallucinations. Personality appears to be intact.

Simon appears to lack insight, asked if he believes he has a mental health condition denied this said he has never taken medication as he does not believe he has any mental health problem to require medication.

**Impression:**

37 year old male appears to have had a difficult childhood spoke about scars on his legs from beatings from his father. Wants to protect children, and vulnerable people believes it is his duty. 2015 diagnosed with psychotic illness and referred to EIS does not appear to have engaged with treatment offered. previously prescribed Olanzapine. Does not appear to require crisis team or mental health act assessment at this time. But would benefit from assertive follow up in the community. EIS state that has gone beyond EIS three year treatment period.

Plan therefore to refer to North Locality Team Locality Team. E-mail sent.

EIS agree to liaise and advise court regarding the request for a report.

**Closed to EIS.**

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