

KIRK, Maurice

Client ID: A7306AT

Patient Summary: Discharge Summary

KIRK, Maurice
NHS Number: 612 051 8118

Date of Birth 12 Mar 1945 00:00 (73 y)

Gender Male

Language

English Speaker

Unknown

Contact Details

No Fixed Abode

19 Dec 2017 -

Registration Details

PDS Registered

Practice

Usual Branch HMP Parc (01656 300200)

22 Aug 2012		GP	
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Organisation court road

Address Barry

31 Jul 2013		GP Practice	
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Organisation ely bridge

Quick Glance Template Overview

BP	145/60 mmHg - (19.33/8.0 kPa)	20 Nov 2018	
Pulse rate	74 bpm	20 Nov 2018	(27)
Pulse rhythm	O/E - pulse rhythm regular (2431.)	10 Jun 2014	(2)
BMI	23.82 Kg/m ²	21 Nov 2018	(7)
Weight	84.2 Kg (13 st 4 lb)	21 Nov 2018	(20)
Height	1.88 m (6' 2")	15 Dec 2017	(10)
Alcohol intake	6 Units/Week	14 Dec 2017	(1)
Smoking Status	Non-smoker (Ub0oq) (Added from Questionnaire)	17 Jul 2018	(12)

Current Medication Summary

Current Medication (last reviewed 10-Sep 2018)

Omeprazole 20mg gastro-resistant capsules, Paracetamol 500mg tablets

16 Apr 2018	Paracetamol 500mg tablets	2 tablets maximum To be taken Four Times Daily When Required	1 pack of 30 tablet(s)	16 Apr 2018
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Issues: 1 out of 6

Review: 16 Oct 2018

23 Nov 2018	Omeprazole 20mg gastro-resistant capsules	1 capsule	56 capsules	03 Dec 2018
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Issues: 1 out of 6

Review: 23 Nov 2019

Clinical Summary

CS = Chronic Summary MS = Major Summary OS = Minor Summary S = Unspecified Summary NE = New

Episode OE = Ongoing Episode

24 Dec 2011	Consent given to share patient data with specified 3rd party (XaNwR)		S
08 May 2012	Drug misuse behaviour (Ub0mp)	no drug use	S
09 May 2012	Reduced mobility (Ua1nH)		S

hip pain

wears glasses

21 Sep 2012	Referral to mental health team (XaIPw)		S
21 Sep 2012	Referral to community mental health team (Xalkd)		S

CMHT - referral received. To be booked for a triage appointment.

24 Sep 2012	Consent given to share patient data with specified 3rd party (XaNwR)		S
25 Sep 2012	Prison Read Codes (YX000)		S

Fri 07 Dec 2018 23:52

Confidential: Personal Data

Mr Maurice Kirk (A7306AT)

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Attempted to access Rlo record at Dr Jones's request but unable to do so readily as his data is only on the national spine.

26 Sep 2012	Prison Read Codes (YX000)		S
Attended CSRA meeting - concurred with current high CSRA assessment.			
04 Oct 2012	Referral to community mental health team (Xalkd)		S
CMHT - did not attend today's MH triage appointment.			
19 Nov 2014	Prisoner does not take drug intravenously (Y08f9)		S
19 Nov 2014	Referral to mental health team (XaIPw)		S
20 Nov 2014	Referral to community mental health team (Xalkd)		S

HMP Bristol CJLS:

Referral recieved, Rio check completed and review os sys1 notes. No on-going involvement with MH Services.

Reviews in Prison (Cardiff and Swansea) have not found any indication of severe or enduring mental illness. Routine triage appointment to follow

22 Nov 2014	Consent given to share patient data with specified 3rd party (XaNwR)		S
24 Nov 2014	Wheelchair (Xa1cc)		S

on further inspection mr kirk is sat in a wheel chair

24 Nov 2014	Occupational therapy (8F3..)	referral sent	S
24 Nov 2014	Home visit (XaBQf)		S

I visited Mr Kirk in cell. he was very abrupt and aggressive in manner when I asked about his mobility and if he is able to transfer on and off bed and toilet . He kept asking for a private doctor and replied by saying we have doctors here that he can see if he wishes and that I was visiting him due to assess his mobility. Mr Kirk was unable to show me how he mobilises as he stated he was in pain . . He kept repeating about an operation that has been cancelled and again I said I was here about his mobility . I have made an Occupational therapy referral.

25 Nov 2014	Seen by community mental health nurse (XaAUA)		S
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HMP Bristol CJLS:

Met with Mr Kirk in his cell to complete mental health screening, Mr Kirk demanded to see my identification and was dismissive of my profession stating "you don't know anything about me". I explained to Mr Kirk I had familiarised myself with his notes and my purpose was to establish if he required on-going support from Secondary mental health services.

Mr Kirk began to recite a list of various demands including, finding out his prescriptions, his g.p, his history in relation to brain injury, his prison property and his "mental health file".

Mr Kirk claims to be unable to mobilise however documentation of NOMIS suggests that he did so whilst at HMP Swansea and was capable of walking with a walking frame.

He took notes during the assessment and elected to ask deliberately misleading and confusing questions in order to attempt to assert his superiority within the assessment. I felt this was a calculated move in order to obstruct the assessment process.

Mr Kirk was abrupt and rude but refrained from using overt profanity, instead he elected to make derogatory remarks regarding my professional abilities and also in relation to other "healthcare professionals" he had previously been involved with.

Objectively there was no indication Mr Kirk was suffering a severe or enduring mental illness. He was orientated in all spheres and his speech was normal in rate, tone and volume. He was absent from any formal thought disorder and although he deliberately avoided my questions and attempted to manipulate the assessment for his own agenda there was no overt evidence to suggest he was responding to any unseen stimulus.

Plan - No indication for input from mental health services at this time, discharge at SPEM

26 Nov 2014	Telephone encounter (9N31.)		S
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HMP Bristol CJLS: copy of email sent to MH team

Hi all,

There have been various issues regarding Maurice Kirk in Brunel including (but not limited to) his mobility. I have reviewed system one and can see from HMP Swansea that his wheelchair was removed due to over dependence and developing oedema in his legs from lack of movement. (Sys 1 entry by Dr R. Jones on 30/09/2014) Other entries from Early November identify he is mobilising with a zimmer frame. Dr Batrkiene has reviewed today in regards to physical frailty and has no concerns in regards to Mr Kirk_s ability to mobilise himself. HCA Quinn has also made a referral to OT.

Mr Kirk is making persistent requests to staff to _lift him_. Under no circumstances (barring an emergency situation) should staff be lifting Mr Kirk. This information has been handed over to Brunel Officers. It is also well documented that Mr Kirk has utilised hunger strikes in the past as a way of _manipulating his environment_ whilst in a prison

setting, this has been apparent at HMP Cardiff and HMP Swansea.

I have completed his MH screening and found no indication of acute mental illness, this is concurrent with letter from Dr. Seeley (Dec 2013 _ accessible on sys1) who concluded the following: _Certainly his presentation was very much as when I have seen him previously in that I could find no acute evidence of on-going mental illness. I have not made any plans to review him again._

Regards
Rob Williams_
Mental Health Practitioner

Criminal Justice Liaison Service,
HMP Bristol,
19 Cambridge Road,
Horfield,
Bristol,
BS7 8PS.
T: (0117) 3723203

27 Nov 2014	Seen in clinic (XaBKC)		S
disability clinic - led on bed refused to move , room smelt of urine and unclean . Asked about medication to which I informed RMN s james about. No other issues raised . will chase up ot			
01 Dec 2014	Carer to be contacted to make appointment (XaYOW)		S
Have rang Occupational therapy team and left message to visit mr kirk as an urgent referral			
03 Dec 2014	Telephone encounter (9N31.)		S
with community therapy team they will visit mr kirk on 11/12/2014			
16 Dec 2014	Abdominal pain (1969.)		S
14 Dec 2017	Served in armed forces (Ua0T3)	RAF	S
19 Dec 2017	Consent given to share clinical information with GP (XaXTf)		S
11 Feb 2018	Open F213SH (YA707)		S
24 Jun 2018	F213 report of injury to inmate completed (XaYgE)		S OE
25 Jun 2018	F213 report of injury to inmate completed (XaYgE)		S
26 Jun 2018	F213 report of injury to inmate completed (XaYgE)		S
13 Jul 2018	F213 report of injury to inmate completed (XaYgE)		S
26 Jul 2018	F213 report of injury to inmate completed (XaYgE)		S
07 Aug 2018	F213 report of injury to inmate completed (XaYgE)		S
03 Sep 2018	Open F213SH (YA707)		S
20 Nov 2018	Open F213SH (YA707)		S
26 Nov 2018	F213 report of injury to inmate completed (XaYgE)		S
07 Dec 2018	F213 report of injury to inmate completed (XaYgE)		S

Drug Sensitivities & Allergies

31 Jul 2013	PENICILLIN V (all components considered allergens - penicillin v capsules 250mg)	
23 Aug 2013	PENICILLIN V (all components considered allergens - penicillin v capsules 250mg)	
15 Oct 2013	PENICILLIN V (all components considered allergens - penicillin v capsules 250mg)	
14 Dec 2017	PHENOXYMETHYLPENICILLIN (all components considered allergens - Phenoxymethylpenicillin 250mg tablets)	
08 May 2012	Penicillin allergy (Xa5sH)	
21 Sep 2012	Penicillin allergy (Xa5sH)	Penecillin

Mental Health

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21 Sep 2012	Other mental disorders (XaB97)		
13 Jul 2014	Mental health disorder (E....)		
21 Jul 2014	Mental health disorder (E....)		
19 Nov 2014	Other mental disorders (XaB97)		
15 Dec 2017	Alcohol abuse (Xa1yZ)		

not dependent

Substance Misuse

15 Dec 2017	Alcohol abuse (Xa1yZ)		
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not dependent

Infectious Disease

No information recorded

Data recorded in HMP Wales BBV/Sexual Health Results 2017**Blood Borne Virus**

17 Apr 2018	Referral to gastroenterology service (8H48.)		
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All Read coded entries matching On hepatitis C treatment plan (XaZDE)

No information recorded

Hepatitis B Vaccination status

18 Aug 2013	Booster hepatitis B vaccination (65F4.)		
15 Dec 2017	Third hepatitis B vaccination (65F3.)		
15 Dec 2017	First hepatitis B vaccination (65F1.)		
15 Dec 2017	Second hepatitis B vaccination (65F2.)		

Recalls

23 Aug 2018	Medication IP RA review	Pending, Due 23 Feb 2019
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Outstanding appointments

Sun 09 Dec 2018 09:30	Booked	ON UNIT FOUR, The	PRERELEASE AM
Details	Empty Urine Bottle		
Location	HMP Parc		