

Personal Details**AXEL RUDAKUBANA** (DPA)**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**

NHS Number (DPA)

Preferred Name

Gender **Male**

Paris ID (DPA)

Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****Alerts**

Alert	Reason	Alerted	Created	Type

Details

Title		Line 1	10 OLD SCHOOL CLOSE
Surname	RUDAKUBANA	Line 2	BANKS
Forename 1	AXEL	Line 3	
Forename 2		Town/City	SOUTHPORT
Pref. Forename		County	MERSEYSIDE
Pref. Surname		Postcode	PR9 8SB
Birth date	07/08/2006	Country	
Gender	MALE	Foreign postcode	
Sex		Address is outside of trust within UK	☐
N/A		N/A	
GP	DR OKAS STEVENS	Resp. Authority	LANCASHIRE COUNTY COUNCIL
Practice	ROE LANE SURGERY	Living status	LIVES WITH PARENTS
Prac. Address	ROE LANE SURGERY PR9 7PN	N/A	
Prac. Telephone	(DPA)	N/A	
Client's CCG	NHS SOUTHPORT AND FORMBY CCG	NHS number	(DPA)

Contact Details

Primary	Type	Prefix	Suffix	Text Opt Out	Valid From	Valid To
☐	MOBILE 1			☐	13/12/2019	
☐				☐		
☐				☐		
☐				☐		

Additional Details**AXEL RUDAKUBANA** (DPA)**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**

NHS Number (DPA)

Preferred Name

Gender **Male**

Paris ID (DPA)

Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****Additional Details**

N/A

Religion/Belief

NOT STATED

N/A

Religion status

N/A

SOUTHPORT

Nationality

Culture

N/A

Ethnicity **BLACK/BLACK BRITISH - AFRICAN**

Ethnicity details

Birth / Death Information

Birth cert no

Social worker seen birth certificate?

☐

Cert location

Town of birth

Country/Region of birth

Death date

Death confirmed

☐**Service User Status**

Main	Status	Valid From	Valid To
☒	IS A SERVICE USER	13/12/2019	
☐	ASSOCIATED PERSON	13/12/2019	
☐			
☐			
☐			

Programmes Of Care

Main	Group	Sub-Group	Valid From	Valid To
☐				
☐				
☐				

File Locations

File Number	Date Created	Type	Location	Status	Destroy On	Description

Civil Status

Current	Status	From	To
☐	SINGLE		
☐			
☐			
☐			

More Additional Details**AXEL RUDAKUBANA** (DPA)**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**

NHS Number (DPA)

Preferred Name

Gender **Male**

Paris ID (DPA)

Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****NB**

Please use this space to record non-clinical advisories only

NB text

GP Details (WARNING: GP NO LONGER AT PRACTICE)

GP Name OKAS STEVENS

Practice Telephone (DPA)

Practice Name ROE LANE SURGERY

Practice Fax

Practice Email

Practice Address ROE LANE SURGERY, 172 ROE LANE, SOUTHPORT, MERSEYSIDE, PR9 7PN

GP History

GP Name OKAS STEVENS

GP Code G6825298

From 13/12/2019

To

Practice Name ROE LANE SURGERY

Address ROE LANE SURGERY, 172 ROE LANE, SOUTHPORT, MERSEYSIDE, PR9 7PN

Practice Code N84611

Warning WARNING: GP NO LONGER AT PRACTICE

GP Name

GP Code

From

To

Practice Name

Address

Practice Code

Warning

GP Name

GP Code

From

To

Practice Name

Address

Practice Code

Warning

GP Name

GP Code

From

To

Practice Name

Address

Practice Code

Warning

Partial Details

Contact Type	Contact Name	Contact Details	Valid From	Valid To
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More Additional DetailsAXEL RUDAKUBANA DPA**Sexual Orientation**

Note: Sexual Orientation recording has now been moved to the 'Sexual Orientation' form within the Central Index tree view on the left.

Service User Maternity Status**Maternity Status****Date Recorded/Updated****Armed Forces Status****Armed Forces status****Armed Forces served in****Date Recorded/Updated****Other Roles/Involvements**

Service User Role/involvement	Date From	Date To	Detail

European Health Insurance Card

Card Type	Country Of EHIC/PRC	Country Of Residence	Start Date	Expiry Date

CCG History

CCG Code 01V
CCG Name NHS SOUTHPORT AND FORMBY CCG
Start Date 13/12/2019
End Date
Referral Type COMMUNITY CHILDRENS MH
Referred To CA - FCAMHS NW
Referred On 13/12/2019
Referral Status REFERRAL CLOSED
Referral ID 2174254

CCG Code
CCG Name
Start Date
End Date
Referral Type
Referred To
Referred On
Referral Status
Referral ID

CCG Code
CCG Name
Start Date
End Date
Referral Type
Referred To
Referred On
Referral Status
Referral ID

CCG Code
CCG Name
Start Date
End Date

More Additional DetailsAXEL RUDAKUBANA **DPA**

Referral Type
Referred To
Referred On
Referral Status
Referral ID

Commissioner Overrides (LA Only)

Commissioner Type?	Override Code?	Date Started	Date Ended

Status Of The Child

Care Leaver? ☐ YES ☐ NO ☐ N/A

Fostered? ☐ YES ☐ NO ☐ N/A

Privately Fostered? ☐ YES ☐ NO ☐ N/A

Subject to CAF/Early Help Assessment? ☐ YES ☐ NO ☐ N/A

Subject to TAC (Team around the Child)? ☐ YES ☐ NO ☐ N/A

Child in Need? ☐ YES ☐ NO ☐ N/A

Under a Care Order? ☐ YES ☐ NO ☐ N/A

Universal Services? ☐ YES

Placement Order? ☐ YES ☐ NO ☐ N/A

Adoption Order? ☐ YES ☐ NO ☐ N/A

Asylum Seeker? ☐ YES ☐ NO ☐ N/A

Young Carer

Young Carer?	Date Of Record

Looked After Child

Looked After Child?	Date Of Record

Child Protection Plan

Child Protection Plan	Date Of Record

Appointment Choices

Requesting home visit ☐ YES ☐ NO

Evening appointment ☐ YES ☐ NO

Disability ☐ YES ☐ NO

More Additional Details

AXEL RUDAKUBANA

DPA

Location

☐ YES ☐ NO

Additional information

Gender preferred

Copying letters to patient

Waiting List (All History)						
Waiting List	Date Active	Date Off List	WL Priority	WL Status	Reason On WL	Associated With

Addresses

AXEL RUDAKUBANA DPA

RUDAKUBANA, Axel	Born 07-Aug-2006 (18y)	NHS Number DPA
Preferred Name	Gender Male	Paris ID DPA
Address 10 Old School Close, Banks, Southport, Merseyside, PR9 8SB	Contact	Not Known

Addresses

Current	Type	Address	Postcode	Outside Trust	From	To
☒	USUAL RESIDENCE	10 OLD SCHOOL CLOSE, SOUTHPORT	PR9 8SB	☐	13/12/2019	
☐				☐		
☐				☐		
☐				☐		

Living Statuses

Living Status	Valid From	Valid To
LIVES WITH PARENTS		

Associated People**AXEL RUDAKUBANA** DPA**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**NHS Number DPA

Preferred Name

Gender **Male**Paris ID DPAAddress **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****Partial Details**

Contact Type	Contact Name	Contact Details	Valid From	Valid To

Associated People

Contact name
Relationship MOTHER
Association CARER
DoB / age / sex Unknown / Unknown / FEMALE
Ethnicity Unknown
Client / person status ASSOCIATED PERSON
Client / person ID DPA
Parental responsibility? ☐
PR reason
Association from
To
Address Not Known
Primary contact
Languages / accessible info No languages

Contact name
Relationship
Association
DoB / age / sex
Ethnicity
Client / person status
Client / person ID
Parental responsibility? ☐
PR reason
Association from
To
Address
Primary contact
Languages / accessible info

Contact name
Relationship
Association
DoB / age / sex
Ethnicity
Client / person status
Client / person ID
Parental responsibility? ☐
PR reason
Association from
To
Address
Primary contact
Languages / accessible info

Contact name
Relationship
Association
DoB / age / sex
Ethnicity
Client / person status

Associated People

AXEL RUDAKUBANA (DPA)

Client / person ID

Parental responsibility? ☐

PR reason

Association from

To

Address

Primary contact

Languages / accessible info

Involved Staff

Staff HICKLIN, JOHN
Profession CLINICAL NURSE SPECIALIST
Allocation type CARE CO-ORDIN/RESPON CASE MGR
Allocation date 13/12/2019
End date 11/03/2020
Allocation status
Team details CA - FCAMHS NW
Address FCAMHS NW TEAM
GARDENER UNIT
BURY NEW ROAD
PRESTWICH
GREATER MANCHESTER
M25 3BL
Telephone (DPA)
Email
Referral ID 2174254
Date of ref. 13/12/2019
Referral reason CONDUCT DISORDERS

Staff
Profession
Allocation type
Allocation date
End date
Allocation status
Team details
Address
Telephone
Email
Referral ID
Date of ref.
Referral reason

Staff
Profession
Allocation type
Allocation date
End date
Allocation status
Team details
Address
Telephone
Email
Referral ID
Date of ref.
Referral reason

Staff
Profession
Allocation type
Allocation date
End date
Allocation status
Team details
Address

Associated People

AXEL RUDAKUBANA DPA

Telephone
Email
Referral ID
Date of ref.
Referral reason

External Agencies / Other Professionals

Person	Contact name	Company	Active?	Address	Contact details
			☐		
			☐		
			☐		

Care Level And S117 Aftercare**AXEL RUDAKUBANA** DPA**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**NHS Number DPA

Preferred Name

Gender **Male**Paris ID DPAAddress **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****Care Level**

Care Level	From	To	Entered By	Team
UNDER ASSESSMENT	13/12/2019	11/03/2020	ALEXANDRA CHISNALL	CA - FCAMHS NW

S117 Aftercare Eligibility

Aftercare eligibility according to Paris Mental Health records ONLY

Earliest applicable <Section details placeholder>

Referrals status: NOT CURRENTLY OPEN TO GMMH SERVICES

Care Coordinator : <Care coordinator placeholder>

Section 117 Aftercare Status

Date Of Review

Date Originally Placed On 117

Review Outcome

Local Authority Responsible

Notes

Discharge Date

Review By Team

Record Source

Date Of Review

Date Originally Placed On 117

Review Outcome

Local Authority Responsible

Notes

Discharge Date

Review By Team

Record Source

Date Of Review

Date Originally Placed On 117

Review Outcome

Local Authority Responsible

Notes

Discharge Date

Review By Team

Record Source

Community Childrens Mh

AXEL RUDAKUBANA DPA

RUDAKUBANA, Axel

Born **07-Aug-2006 (18y)**

NHS Number DPA

Preferred Name

Gender **Male**

Paris ID DPA

Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**

Contact **Not Known**

Details

Type of referral	COMMUNITY CHILDRENS MH	Current status	REFERRAL CLOSED (11/03/2020)
Date of referral	13/12/2019		
Time of referral			
Referred to	CA - FCAMHS NW	Priority	ROUTINE
Who		Care aim	
Referral reason	CONDUCT DISORDERS	Specialty	
Method			
Source	CAMHS	Who received	ALEXANDRA CHISNALL
Client aware	☐	Date received	13/12/2019
Family aware	☐	Time received	10.13
Referral ID	2174254		

Referrer Details

Title

Forename STEPHANIE

Surname HALLARON

Priority

Reference

Referrer to stay anonymous

☐

Contact type

Detail

Contact type

Detail

Referral Description

Notes

Comments And Recommendations

Notes

Identifiers

Type Of Identifier	Alternate ID	From	To
NHS NUMBER	DPA		

Additional Reasons For Referral

Reason

Additional Referral Information [GMMH]

Additional Referral Source

Admission Type (Functional/Organic)

Do you wish for your family member(s) to be involved in your care? YES

FCAMHS Details

Is this the lead/co-ordinating professional? ☒ YES ☐ NO

If no, please provide details

Previous CAMHS (not FCAMHS) contact? ☒ YES ☐ NO ☐ NOT KNOWN

Current CAMHS involvement (aside from FCAMHS) ☒ YES ☐ NO ☐ NOT KNOWN

If yes, please provide details

Merseycare Stephanie Hallaron mental health practitioner (DPA)

Previously known to this service (FCAMHS, CAHBS, horizon, L&D)? ☐ YES ☒ NO

If yes, select service

Add Services

Living Arrangements (at time of referral) BIRTH FAMILY

Social Care Status NO SOCIAL CARE STATUS

Education Status SPECIAL SCHOOL

Criminal Justice Status (FCAMHS) RECENT POLICE CONTACT

If other, please provide details

Education and Health Care Plan in place? ☐ YES ☒ NO

Other agencies involved at time of referral (FCAMHS)

Add Agencies

Previous Suicide Attempts

Has Client Attempted Suicide With Intent?	Date Of Record
---	----------------

Young Carer

Young Carer?

Date Of Record

Child Protection Plan

Child Protection Plan

Date Of Record

Looked After Child

Looked After Child?

Date Of Record

Administrative Category

Administrative Category

Start Date

End Date

Overseas Visitor Status

Overseas Visitor Status

Charging Category

Start Date

End Date

First Mental Health Treatment

Date of client's first ever MH treatment

Previous Psychiatric Status

Previous Psychiatric Episode With Another
Provider (prior to the first psychiatric hospital
provider spell recorded on Paris for this client)☐

Reasonable Appointment Offers

Date Of Appointment Offer

Offer Accepted?

☐
☐
☐

Clinical Commissioning Groups

Clinical Commissioning Group

Address

Start

End

NHS SOUTHPORT AND FORMBY CCG

5 CURZON ROAD, SOUTHPORT, MERSEYSIDE, PR8 6PL

13/12/2019

CPA Levels

Level

Start

End

Entered By

UNDER ASSESSMENT

13/12/2019

11/03/2020

ALEXANDRA CHISNALL

Pathways [pathways Not In Use]

Pathway	Pathway Status	Date From	Date To	Authorised By	Notes

Document Details

File AR FCAMHS referral form.pdf
Document Type REFERRAL FORMS
Document Date 13/12/2019
Reason ASSESSMENT
Title AR FCAMHS referral form.pdf
Recorded By ALEXANDRA CHISNALL
Recorded On 13/12/2019
Recorded At 10.19

File
Document Type
Document Date
Reason
Title
Recorded By
Recorded On
Recorded At

File
Document Type
Document Date
Reason
Title
Recorded By
Recorded On
Recorded At

File
Document Type
Document Date
Reason
Title
Recorded By
Recorded On
Recorded At

Actions Taken

Type Of Action	Date	Time	Comment
ACCEPTED & ALLOCATED	13/12/2019	10.15	
REFERRAL CLOSED	11/03/2020	14.59	

Employment & Education

AXEL RUDAKUBANA (DPA)

RUDAKUBANA, Axel	Born 07-Aug-2006 (18y)	NHS Number DPA
Preferred Name	Gender Male	Paris ID DPA
Address 10 Old School Close, Banks, Southport, Merseyside, PR9 8SB		Contact Not Known

Employment Education Vocation

Employment / Education Status	Weekly Hours Worked	From	To
EDUCATION/TRAINING	NOT APPLICABLE	13/12/2019	11/03/2020

Schools

Date From	Date To	School	Contact	Address	Reason For Leaving	Notes/Impact

Housing + Accommodation

AXEL RUDAKUBANA DPA

RUDAKUBANA, Axel	Born 07-Aug-2006 (18y)	NHS Number DPA
Preferred Name	Gender Male	Paris ID DPA
Address 10 Old School Close, Banks, Southport, Merseyside, PR9 8SB		Contact Not Known

Housing And Accommodation

Valid From	Valid To	Accommodation Status	Accommodation Type	Settled Accommodation Indicator
13/12/2019	11/03/2020	MAINSTREAM HOUSING	LIVING WITH FAMILY/FRIENDS	SETTLED

Fcamhs Pathway**AXEL RUDAKUBANA** **DPA****RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**NHS Number **DPA**

Preferred Name

Gender **Male**Paris ID **DPA**Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****Header Details****Type** FCAMHS PATHWAY**Date started** 13/12/2019**End date** 11/03/2020**Time started****Reason****Outcome****Location****Planned comp date.****Team** CA - FCAMHS NW**Reason for delay****Carried out by** ALEXANDRA CHISNALL**Link info** Ref**Recorded by** ALEXANDRA CHISNALL**Care document ID** 4733718**Referral ID** 2174254**Goal at time of recording****Other People Involved**

Who	Type Of Involvement	Role	Date

Protected Characteristics**Please review the below protected characteristics when making clinical decisions**

Gender	MALE	Age	18
Gender Identity Same at Birth	None	Type of Disability	
Ethnicity	BLACK/BLACK BRITISH - AFRICAN	Religion/Belief	NOT STATED
Sexual Orientation	None	Civil Status	None
Maternity/Pregnancy	None	Main Language	None

Note: This information reflects the service user's current recorded details. These details may have changed since the date this form was created.**FCAMHS Pathway****Reason for referral**CRIMINAL JUSTICE, VIOLENCE/AGGRESSION, OTHER
Add Reason(s)**If other, please provide details**

Prevent involvement - possible radicalisation

Reason for treatmentAdd Reason(s)**If other, please provide details****Type of case involvement** FORMAL INDIRECT INVOLVEMENT**If other, please provide details**

Ongoing mental health involvement as part of integrated care plan?

☐ YES☒ NO

Integrated care plan co-produced with Child/Young person?

☐ YES☐ NO

Feedback

Feedback Type	Feedback Received	Feedback Date	Standard Of Feedback
REFERRER			
FAMILY OR CARER			
CHILD OR YOUNG PERSON			
OTHER PROFESSIONALS			

-- Authorisation Helper --

Complete Authorisation

Adds current staff name and date in "Authoriser" and "Carried out by" fields, except when already completed. Will need to Save to finalise.

Generate form print

Uses print profile if exists, otherwise, prints full form.

Unauthorise form

Clear Authorisation 'Authorised By' and 'Authorised On' fields. Restricted to System Administrators and users with Custom Permission = 'UNAUTH'.

Escape Save loop

Allows to stop save loop when loading forms and no change made. Bug needs raising with Dev Team so it can be fixed. Systems Administrators only.

Version Control - Care Document Amendments

Amended By	Amended On	Amended At	Main Team	Comments
ALEXANDRA CHISNALL	11/03/2020	14.59	MCR - INPATIENT TEAM	
ALEXANDRA CHISNALL	13/12/2019	10.22	MCR - INPATIENT TEAM	
ALEXANDRA CHISNALL	13/12/2019	10.18	MCR - INPATIENT TEAM	

Authorisation Details

Carried out by	ALEXANDRA CHISNALL	Date	11/03/2020
Authoriser	ALEXANDRA CHISNALL	Date	11/03/2020
Notify authoriser	☐		

Outcome

Notes

Progress Notes Summary (V2)

AXEL RUDAKUBANA DPA

RUDAKUBANA, Axel	Born 07-Aug-2006 (18y)	NHS Number DPA
Preferred Name	Gender Male	Paris ID DPA
Address 10 Old School Close, Banks, Southport, Merseyside, PR9 8SB	Contact	Not Known

Record Search (Previous Search: 0 Seconds / 1 Results)

View: Grid (All Results) ☐ Summary (Notes, Incidents, Authorisations only) ☒ SE/

Search Word/Phrase Search criteria where Paris ID = DPA and DATE FROM after 13/07/2024 and NOT REVOKED

Date from 13/07/2024 Date to

Show Advanced Filters

Summary (Notes, Incidents, SE/

☐ ASCENDING ☒ DESCENDING Show formatted content? [Note: fonts and colours may appear differently to o

100 entries per page <<<< FIRST << PREV

Notes Summary (1 - 1) / 1

Type: INCIDENT: DEATH Date: 29/07/2024 Time: [Record ID: 857046] LOCAL MANAGER REVIEW

Staff: IAN MOGGRIDGE Team: FACTS NURSING

Reasons: DEATH - DEATH OF MEMBER OF PUBLIC

DESCRIPTION: On 30/07/2024 at 16:23, IM (Advanced Practitioner) was contacted by SR, an AMHP for Sefton Council, seeking the details of a S12-approved forensic doctor, with CAMHS experience who could join an MHA assessment at Copy Lane Police Station, Liverpool. SR informed IM that a 17-year-old male had been arrested following a major incident in Southport earlier that day, where multiple members of the public had been attacked with a knife. An immediate response was raised from the Gardener Unit Medium Secure Unit to support the MHA assessment. NM, a consultant psychiatrist, and RC, an advanced practitioner in training, attended the police station and joined the MHA. This assessment found that the young person did not meet the criteria for detention under the MHA. The alleged details of the incident are as follows. At approximately 11:50 hours on 29/07/2024, AR arrived at Hart Street, Southport, via Taxi and entered the premises where a school holiday dance class for children was taking place. AR is said to have attacked several individuals with a knife. Armed officers attended the scene and arrested AR, who was taken to Copy Lane Police Station, Liverpool, and subsequently charged with murder.

ACTIONS: An immediate response was arranged from the Gardener Medium Secure Unit to support the MHA assessment of AR whilst in police custody. Clinical information held by GMMH was shared with the AMHP to support this assessment. Once the organisation knew about AR s involvement in the incident, RG associate director informed the Trust Executive Board, and Silver and Gold On Call of the incident. The FCAMHS team has been notified that a young person previously known to the service has been involved in the incident, and support has been offered to all staff members. An Executive Briefing has been written and shared with the Trust Executive Board.

MANAGER: IAN MOGG

Search criteria - internal	Search criteria - int clob	Notes transfer fiel
AND Least(coalesce(start_date, end_date, created), coalesce(end_date, start_date, created), coalesce(created, end_date, start_date)) >= TO_DATE('13/07/2024', 'dd/mm/yyyy') AND (item_status is null or item_status not like 'REVOKED')	AND Least(coalesce(start_date, end_date, created), coalesce(end_date, start_date, created), coalesce(created, end_date, start_date)) >= TO_DATE('13/07/2024', 'dd/mm/yyyy')	
Type(s) - codes	Type(s) - descriptions	
Staff types - descriptions	Staff members - codes	Staff members - names
Staff types - codes	Teams - codes	Teams - descriptions

TYPE(S)

Total results 1

Service User Progress Note History

Progress Notes for Person ID: **DPA**

Between **12/05/2010** and **12/08/2024**

Ordered by **START DATE**

Client Name: **AXEL RUDAKUBANA**

NHS Number: **DPA**

Address: **10 OLD SCHOOL CLOSE, BANKS, SOUTHPORT,
MERSEYSIDE. PR9 8SB**

DoB/Gender: **07/08/2006, MALE**

Date-Time: **12/12/2019 11:27**

Team: **CA - FCAMHS NW**

Recorded By: **ALEXANDRA CHISNALL**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

JMA providing telephone advice to Stephanie Hallaron.

See telephone advice form for further details.

JMA advised to make a referral.

(Alexandra Chisnall, 16/12/2019: 11.28, SECRETARY)

Date-Time: **13/12/2019 15:39**

Team: **CA - FCAMHS NW**

Recorded By: **JOHN HICKLIN**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Hi Lyndsey

Thank you for your recent referral of JBP to FCAMHS. The case has been allocated to me. As you may be aware we ask referrers to arrange a meeting of key professionals we can attend at. This is so we can gain a better understanding of risk and needs in relation to the young person and be clear as to the role our service can take. I can attend such a meeting on the 22nd of January at 11hrs and will travel to you for this. Please let me know if this is convenient for you and others involved or if any clarification is needed

Thanks

John Hicklin

CNS

(John Hicklin, 13/12/2019: 15.40, CLINICAL NURSE SPECIALIST)

Date-Time: **02/01/2020 11:53**

Team: **CA - FCAMHS NW**

Recorded By: **JOHN HICKLIN**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Hi Stephanie

Just checking through my cases are we ok to meet up on the 21st as originally proposed. Let me know

John Hicklin

CNS

From: Hallaron Stephanie <Stephanie.Hallaron@merseycare.nhs.uk>

Sent: 13 December 2019 16:25

To: John Hicklin <John.Hicklin@gmmh.nhs.uk>

Subject: [EXTERNAL] RE: Referral of AR to FCAMHS

[External Email - This Email has come from outside GMMH. Do not click any links or open

Service User Progress Note History

Progress Notes for Person ID DPA

Between 12/05/2010 and 12/08/2024

Client Name: **AXEL RUDAKUBANA**

NHS Number: DPA

Address: **10 OLD SCHOOL CLOSE, BANKS, SOUTHPORT,
MERSEYSIDE. PR9 8SB**

DoB/Gender: **07/08/2006, MALE**

attachments if the sender is not known and trusted]

No worries. I appreciate it is a long way and very short notice! Thank you for trying. I will defo call on Monday and we can talk through what I need to do

Thanks Steph

From: John Hicklin [<mailto:John.Hicklin@gmmh.nhs.uk>]

Sent: 13 December 2019 16:24

To: Hallaron Stephanie

Subject: RE: Referral of AR to FCAMHS

Hi Stephanie I am available Monday morning if you can give me a ring. I don't think I can come to the strategy meeting I am trying to clarify if another meeting is taking place or not on the 17th

John Hicklin

CNS

From: Hallaron Stephanie <Stephanie.Hallaron@merseycare.nhs.uk>

Sent: 13 December 2019 15:56

To: John Hicklin <John.Hicklin@gmmh.nhs.uk>

Cc: Alexandra Chisnall <Alexandra.Chisnall@gmmh.nhs.uk>; Kelly Annie <Annie.Kelly@merseycare.nhs.uk>

Subject: [EXTERNAL] RE: Referral of AR to FCAMHS

[External Email - This Email has come from outside GMMH. Do not click any links or open attachments if the sender is not known and trusted]

Hi John,

Thanks for this. Is it OK to give you a call next week and talk it through? I've not arranged one before and just want to make sure we have all the info you need etc to make the process as easy as possible.

There is also an urgent strategy meeting planned for:

Date: Tuesday 17th December

Venue: West Lancs Youth Zone, Yeadon, Skelmersdale WN8 6LT

Time: 10am

Would any of your team be able to make it for support around initial risk management? I fully appreciate this is very short notice

Kind Regards

Stephanie Hallaron

Criminal Justice Liaison and Diversion Practitioner

Criminal Justice Liaison and Diversion Team

Service User Progress Note History

Progress Notes for Person ID DPA

Between 12/05/2010 and 12/08/2024

Client Name: **AXEL RUDAKUBANA**

NHS Number: DPA

Address: **10 OLD SCHOOL CLOSE, BANKS, SOUTHPORT,
MERSEYSIDE. PR9 8SB**

DoB/Gender: **07/08/2006, MALE**

South Sefton Magistrates Court

Merton Road

Bootle

Merseyside

L20 3XX

DPA

DPA

Stephanie.Hallaron@merseycare.nhs.uk

Secure: stephanie.hallaron@nhs.net

From: John Hicklin [<mailto:John.Hicklin@gmmh.nhs.uk>]

Sent: 13 December 2019 15:38

To: Hallaron Stephanie

Cc: Alexandra Chisnall

Subject: Referral of AR to FCAMHS

Hi Stephanie

Thank you for your recent referral of AR to FCAMHS. The case has been allocated to me. As you may be aware we ask referrers to arrange a meeting of key professionals we can attend at. This is so we can gain a better understanding of risk and needs in relation to the young person and be clear as to the role our service can take. I can attend such a meeting on the 21st of January at 1400hrs and will travel to you for this. Please let me know if this is convenient for you and others involved or if any clarification is needed

Thanks

John Hicklin

CNS

The information contained in this message and any attachments

(John Hicklin, 02/01/2020: 11.54, CLINICAL NURSE SPECIALIST)

Date-Time: **22/01/2020 16:19**

Team: **CA - FCAMHS NW**

Recorded By: **JOHN HICKLIN**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Hi Stephanie, thanks for arranging the meeting yesterday. As agreed I have tried to contact Skott and have left a message for him to contact when he is back. I hope to write a brief summary letter detailing concerns expressed about AR by professionals once I have spoken to Skott. As agreed I could attend a follow up professionals meeting on the 27th of February at 2pm can you test out with colleagues whether this is a date that is convenient

Thanks

John Hicklin

(John Hicklin, 22/01/2020: 16.20, CLINICAL NURSE SPECIALIST)

Date-Time: **28/01/2020 12:39**

Team: **CA - FCAMHS NW**

Recorded By: **JOHN HICKLIN**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Run Date: **12/08/2024 at 10:21:20**

Page 3 of 5

Service User Progress Note History

Progress Notes for Person ID: **DPA**

Between **12/05/2010** and **12/08/2024**

Client Name: **AXEL RUDAKUBANA**

NHS Number: **DPA**

Address: **10 OLD SCHOOL CLOSE, BANKS, SOUTHPORT,
MERSEYSIDE. PR9 8SB**

DoB/Gender: **07/08/2006, MALE**

I have left a second message for Skott Morgan to contact me to discuss the referral to our service.
(John Hicklin, 28/01/2020: 12.40, CLINICAL NURSE SPECIALIST)

Date-Time: **11/02/2020 12:59**

Team: **CA - FCAMHS NW**

Recorded By: **JOHN HICKLIN**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Hi Skott I have left a few messages for you to contact me to discuss AR following an initial consultation with our service. Can you give me a ring when you get chance thanks

John Hicklin

CNS

FCAMHS

(John Hicklin, 11/02/2020: 13.00, CLINICAL NURSE SPECIALIST)

Date-Time: **12/02/2020 09:45**

Team: **CA - FCAMHS NW**

Recorded By: **ALEXANDRA CHISNALL**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

AC sending FCAMHS consultation letter to stephanie.hallaron@merseycare.nhs.uk by secure email password protected.

(Alexandra Chisnall, 12/02/2020: 09.46, SECRETARY)

Date-Time: **14/02/2020 13:32**

Team: **CA - FCAMHS NW**

Recorded By: **ALEXANDRA CHISNALL**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Stephanie Hallaron confirmed receipt of FCAMHS consultation letter by email.

(Alexandra Chisnall, 14/02/2020: 13.34, SECRETARY)

Date-Time: **09/03/2020 14:14**

Team: **CA - FCAMHS NW**

Recorded By: **ALEXANDRA CHISNALL**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

NOTE: HISTORIC VERSIONS OF THIS PROGRESS NOTE EXIST

AC sending FCAMHS second consultation letter to stephanie.hallaron@merseycare.nhs.uk by secure email password protected.

Stephanie confirmed receipt by email.

(Alexandra Chisnall, 09/03/2020: 14.14, SECRETARY)

Service User Progress Note History

Progress Notes for Person ID DPA

Between **12/05/2010** and **12/08/2024**

Client Name: **AXEL RUDAKUBANA**

NHS Number: DPA

Address: **10 OLD SCHOOL CLOSE, BANKS, SOUTHPORT,
MERSEYSIDE. PR9 8SB**

DoB/Gender: **07/08/2006, MALE**

(Alexandra Chisnall, 10/03/2020: 08.52, SECRETARY)

Date-Time: **09/03/2020 11:47**

Team: **CA - FCAMHS NW**

Recorded By: **JOHN HICKLIN**

Progress Note Type: **PROGRESS NOTE AND ACTIVITY**

Progress Note Reason: **CLINICAL**

Attended a second consultaion meeting in Skelmesdale last week and will write a brief summary letter and discharge the case

(John Hicklin, 09/03/2020: 11.49, CLINICAL NURSE SPECIALIST)

External Documents**AXEL RUDAKUBANA** (DPA)**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**

NHS Number (DPA)

Preferred Name

Gender **Male**

Paris ID (DPA)

Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****Document Details**

File AR FCAMHS referral form.pdf
Document Type REFERRAL FORMS
Document Date 13/12/2019
Reason ASSESSMENT
Title AR FCAMHS referral form.pdf
Recorded By ALEXANDRA CHISNALL
Recorded On 13/12/2019
Recorded At 10.20

File AR FCAMHS telephone advice form.pdf
Document Type REFERRAL FORMS
Document Date 16/12/2019
Reason ASSESSMENT
Title AR FCAMHS telephone advice form.pdf
Recorded By ALEXANDRA CHISNALL
Recorded On 16/12/2019
Recorded At 11.26

File AR clinical notes.pdf
Document Type CLINICAL CORRESPONDENCE
Document Date 11/03/2020
Reason ASSESSMENT
Title AR clinical notes.pdf
Recorded By ALEXANDRA CHISNALL
Recorded On 11/03/2020
Recorded At 14.55

File AR case checklist.pdf
Document Type CLINICAL CORRESPONDENCE
Document Date 11/03/2020
Reason ASSESSMENT
Title AR case checklist.pdf
Recorded By ALEXANDRA CHISNALL
Recorded On 11/03/2020
Recorded At 14.55

File
Document Type
Document Date
Reason
Title
Recorded By
Recorded On
Recorded At

File
Document Type
Document Date
Reason
Title
Recorded By
Recorded On
Recorded At

File
Document Type
Document Date
Reason
Title

Recorded By
Recorded On
Recorded At

Return completed form to:

gmmh-ft.fcamsnw@nhs.net

DPA

JH.

FCAMHS NW Team, The Gardener Unit, Bury New Road, Prestwich,
Manchester M25 3BL

DPA

FCAMHS Referral Form

Please complete as fully as possible

Date of Referral: 13/12/19	Office use only Referral received: AS Yes ☐ No ☐
Consultation date:	

Client Information:

Name: Axel Rudakubana	Date of Birth: 07.08.06	Age at referral: 13
Gender: M ☒ X ☐ F ☐	Ethnicity: Black British Unclear	Religion:
NHS Number: DPA		
Home Address: 10 Old School Close, Banks, Southport, Lancashire PR9 8SB	Address at time of referral (if different): Postcode: Telephone Number: [REDACTED]	
Consent obtained for referral: Yes ☐ No ☐		

Next of Kin/Carer/Person with Parental Responsibility:

GP:

Name: [REDACTED] Address: As above Postcode: Telephone Number: [REDACTED] Aware of the referral: Yes ☒ No ☐	Name: [REDACTED] Address: As above Postcode: Telephone Number: Aware of the referral: Yes ☐ No ☐
---	--

Referrer Details:

Name: Stephanie Hallaron Profession/designation: Mental Health Practitioner Merseycare Address: Bootle Magistrates court, 3 Merton road, Bootle L20 3XX Postcode: L20 3XX Telephone Number: DPA Email address: stephanie.hallaron@merseycare.nhs.uk	
---	--

Is this the lead/co-ordinating professional?

Yes

No

If No please give details below

--

Other Professionals Involved:

Name: West Lancashire Social Care
 Profession/designation:
 Address:

 Safeguarding referral completed today

 Postcode:
 Telephone Number: 03001236720

 Email address:

Other Professionals involved:

Name: Jan Lewis

 Profession/designation: Safeguarding Lead

 Address: Acron Specialist School

 Postcode:
 Telephone Number: DPA

 Email address:

Other Professionals involved:

Name: Anne Cookson/Lucy Parkinson
 Profession/designation: Senior Practitioner Early Help

 Address:

 Postcode:

 Telephone Number: DPA

 Email address:

Other Professionals involved:

Name:
 Profession/designation:
 Address:

 Postcode:
 Telephone Number: Telephone:

 Email address:

Other Professionals involved:

Name:
 Profession/designation:
 Address:

 Postcode:
 Telephone Number:
 Email address:

Other Professionals involved:

Name:
 Profession/designation:
 Address:

 Postcode:
 Telephone Number:
 Email address:

Other Professionals involved:

Name:
 Profession/designation:
 Address:

 Postcode:
 Telephone Number:
 Email address:

Other Professionals involved:

Name:
 Profession/designation:
 Address:

 Postcode:
 Telephone Number:
 Email address:

Previous CAMHS (not fCAMHS) Contact?Yes ☐ X No Not Known ☐**Living Arrangements (at time of referral):**

Birth Family	☒	Foster Care	☐	Independent Living	☐	Semi-Independent living	☐
Adoptive Family	☐	Residential care	☐	Residential school	☐	Secure Care (welfare)	☐
Other Family	☐						
Criminal justice setting:	YOI	☐	Secure Care (CJS)	☐	STC	☐	
Mental health setting:	Low/medium secure	☐	Open unit	☐	PICU	☐	
Other (state):							
If mental health – Diagnosis if any?							
Under Mental Health Act? Y ☐ N ☐							

Social Care Status:

LAC: S20	☐	S31	☐	Leaving care	☐	Child in need	☐	Subject to CP plan		None	☒ X
Secure Accommodation Order	☐	TAC	☐	Guardianship Order	☐						
Other (please state) ☐											
Referral made today so unclear of the level of management to be offered											

Education Status:

NEET	☐	Special schooling	X ☐	Home tuition	☐	Hospital School	☐	CFE	☐
Mainstream		PRU	☐	Left school (is employed)	☐	Vocational Training	☐		
Other (please state):		Mainstream SEN		EHCP Yes ☐ No ☐					

Criminal Justice Status:

Not Applicable	☐	On Bail	X ☐	Recent Police Contact	x
On Remand	☐	Pre-Court Order	☐	Sentenced to Custodial Order	☐
Sentenced to Community Order	☐	Other:			

Reason(s) for Referral (please include concerns about mental health AND details of high-risk forensic behaviours including specific incidents of concern include dates):

Discussion with Justine Mason for phone advice. Offence detailed below.

Refer to Social Care and request urgent strategy meeting
Refer to CAMHS for Urgent assessment

Axel is currently open to PREVENT for concerns around radicalisation and is thought he has been accessing beheading videos, mass school shooting videos and information about ISIS on his devices.

Reason for Referral / Assessment

Axel was arrested and produced at St Anne street police station in regards to a charge of possessing a bladed article in a school premises along with Sec 47 Assault and possession of

an offensive weapon.

Nature of offence DP is an ex pupil of The Range high school and attended the school today with a hockey stick and used it to hit another student. Police called and spoke with DP who admits to having a knife also. Knife recovered, c&a, no reply.

Please see previous entries for further details of the nature of offence and reported circumstances of this.

Confidentiality and role explained and Axel was able to provide examples of when I may need to breach this. He was informed that I would be asking questions relating to his arrest and acknowledged that this information would need to be shared with Police. Grace Hatton also present.

CN: DPA

Carer Involvement – I met with Mum and she has provided consent for me to speak with Axel.

Presenting Problem and History of Presenting Problem / Complaint

Axel reports that the student he went to see at The Range today is a male who had assaulted him a number of weeks ago. He reported that this took place at school and that the student had pulled him to the ground and hit him. This was observed by other students and Axel reports they helped him and that he has not been bullied since leaving the school. Axel reports he has found this distressing. Axel reports that he wouldn't have felt sad if he hurt him. He reports not planning to use the knife but states that he would have if the Hockey Stick did not work. Axel states that he had wrapped tissue paper around the handle to get a better grip. Axel was asked if he was planning on killing the student and he replied "I did want to kill him but I don't think I would. Ideally, I wish I did it. But they were in assembly so it wouldn't have happened". He is clear this was revenge. We explored his decision making around going to school etc and Axel reports that he has not been thinking about this for a long time but he had a random thought on Saturday. He then decided that he would book a taxi for today as he normally gets a taxi to school so this would not be out of the ordinary for him and that he would simply ask for the taxi to take him somewhere else. I asked if the male he had assaulted was involved in the original bullying and Axel stated he was not. When asked why he had assaulted him, Axel responded by saying "the Head Teacher and someone else was chasing me and I'm not going to get taken to the Police Station for nothing so I thought I would hit him". Axel reports that he liked the student he hit and had never had any problems with this boy. Axel reports it doesn't bother him that he assaulted the boy as he didn't get hurt that bad. We discussed the consequences of his action and Axel demonstrated an awareness of going to Jail, however, he appears to struggle with abstract concepts and did not fully understand what this would mean. His response was I would probably be less bored in Jail.

Axel firmly denies any thoughts of harm to himself or others and has no history of this. We discussed the possibilities of him harming the male who had assaulted him. Axel reports that he is unlikely to do anything now. He reports that school is too protected. I asked what would happen if he saw this male in the street and Axel responded by saying that he doesn't carry weapons so nothing would happen.

Psychiatric History

Reported 2 referrals to CAMHS over the past few months but neither have been accepted. No other history known and Axel denies ever undergoing any assessments. Axel reports that he

has never been tested for ASD and his Dad has discussed this with him but Axel believes he has ADD. He does not believe he has ADHD because he is not hyperactive.

Social History

Axel was born and raised in Cardiff until approx. 5 years ago. He reports being excluded from The Range High School due to having a knife on his person. He reports that he is not involved in any out of school activities and has no friends. Axel believes that this is due to his school recent school move as he now attends Acorn School for those with behaviour difficulties. He reports he has friends previously but that he has never socialised outside of school with them. Axel does report frequently playing on Fortnite and does talk to people he does not know through this site. He also reports enjoying watching You Tube. He denies ever meeting anyone face to face but acknowledges talking to strangers. He reports that h does not watch violent videos.

Family History

Family Composition:

Dad – [REDACTED]

Mum – [REDACTED]

Brother – [REDACTED] It is reported that [REDACTED] is a ☐ DPA child and is in a wheelchair.

Axel reports he and his Brother were both born in Cardiff and his parents have been in the UK for about 20 years. He reports they are from Rawanda. Axel reports he still has family there but denies having any personal contact with them. He reports his parents have regular contact with them. Axel would like to go to Rawanda one day. Axel was able to tell me about the recent War there and informed me that 800,000 people died in 100 days, some of which he believes were his family. He reports this makes him sad but he does not think about it a lot. He reports difficult relationships with both his parents and his Brother. His parents used to be Catholic's but are now Evangelical Christians. He tells me that he does not like this religion and he was made to go to Church. He reports he does not have to attend anymore. He reported that he didn't like it due to the noise. Axel reports that his parent's are strict. He states he does not like his Brother very much and feels that his parents sometimes give him more attention. He alleges that he does not believe that his Brother is actually ☐ DPA and that he is putting him on. Axel reports that his parents also "allude" to this. Axel did not report any extended family. Axel is unaware of any mental health problems or drug and alcohol issues within the family.

Physical Health History

Nil

Current Service Involvement

Further clarification required. It appears that the family are involved with Lancashire Care PREVENT Team but due to location of GP, will fall to Merseycare/Liverpool CAMHS for mental health support. I was initially unaware of Lancashire address so all enquires have only been made with Sefton Services and therefore there may be further information to be gained.

Not known to Sefton YOT

PREVENT – Paul Harrison Community Safety Team West Lancashire

Social Care – Not previously open to services but will undergo assessment as a result of this offence

Acorn School

Activities Of Daily Living Skills

Axel is well kempt and attends school. He reports no engagement in social activities and states that hi Mum and Dad do not really let him socialise with other children outside of school.

Current Medication and Compliance

Nil

Forensic

No history of offending. This is Axel's first offence. However, Axel has been excluded from the Range High School for being in possession of a knife.

Mental State Examination

Appearance/behaviour – Axel was dressed appropriately with no on going signs of self neglect. Axel did not make contact with myself or Grace at any point during the assessment. He was calm and engaged well in assessment. Rapport was established and Axel was able to respond to humour at times.

Speech – Normal rate, rhythm and tone.

Mood – Axel denies nay issues with his mood. He reports his mood is a 7 now (1 being worst, 10 being best) and this is due to not being bored whilst in the Police Station. He reports his mood was a 5 when he woke up. He reports that sometimes he feels sad but he is happy more than sad and normally his sadness is related to issues at school. Objectively, Axel presents as euthymic.

Perceptions – Axel understood was hallucinations were and denies this in any modality. We discussed paranoia and Axel reports that sometimes he feels paranoid. Axel reported that he has had a thought that when he eats out in restaurants that he thinks people may be poisoning him. We explored this further and Axel did not display any level of delusion of this and this appears to a random and exploratory thought rather than any belief that he is at risk. He denies feeling afraid of people or a belief that people are out to get him.

Thoughts – Axel firmly denies any thoughts of harm to self. He denies ever having these thoughts. He firmly denies any homicidal ideation or watching of video games. Axel has no thoughts about harming his family and reports he has never done this previously. There is no evidence of formal thought disorder.

Substance use – Denies any substance or alcohol misuse.

Cognition- Fully orientated to time, place and person.

Capacity – Appears in tact. However Axel's ability to fully comprehend the enormity of his actions and the consequences of this is questionable.

Eat – Axel reports not eating well as his parents give him food he does not particularly like.

Sleep – No issues noted or disclosed.

Traits of ASD displayed during assessment:

- Inability to form and maintain stable peer relationships
- Interaction to achieve specific goals
- No eye contact
- Use of overly complex/awkward language
- Flat voice tone
- Black and White thinking style
- Difficulties with abstract concepts
- High intellectual ability (not formally assessed)
- Increased fixation on computers i.e. playing and building
- Poor problem solving skills
- Sensory difficulties i.e. loud noise, touch, smells i.e. Church singing, noise in corridors at school, doesn't like strong smells
- Difficulty concentrating when not specifically interested in a topic – limited understanding of its relevance to his life
- Lack of empathy

Risks –

To self: SA10 low – Has no history of this and denies any current thoughts.

To Others: SA10 Medium – Axel has no history of previous offending or violent behaviour. Initial context of offence suggests this was retaliation. However, Axel's response to why he assaulted a different child is of concern along with his lack of empathy/remorse. Axel has already been excluded from school for carrying a knife and his current offence also includes the use of weapons and a direct statement that he was intending to seriously harm someone. This appears related to poor problem solving ability consistent with a possible ASD diagnosis. There are also serious concerns about Axel's use of the Internet and the nature of the information he has been accessing. Axel is currently open to the PREVENT Team around

possible radicalisation.

From Others: SA10 Medium. – Axel reports previous bullying. Due to Axel's limited ability to understand relationships and vulnerability, Axel may be at risk of harm from others through the internet/radicalisation.

Impression – Axel is a pleasant young male with a Rawandan heritage. He presents as a bright young man who displays limited understanding of the consequences of his behaviour. Whilst Axel can describe the consequences of his behaviour, his level of understanding around this remains unclear. Axel has demonstrated multiple indicators of ASD which would suggest a formal assessment is required however, due to the risk Axel currently poses to others, a Forensic CAMHS referral will be made in addition to this. This will also support management of the risk posed to him from others and possible radicalisation. At this time, Axel does not display any evidence of SMI that would warrant diversion from custody at this time however he does require some additional support and through risk management in the community. He is clear that he does not plan on trying to harm this young man again and has no history of harming others until today.

Immediate risk management plan:

- Lancashire Social Care are fully involved in the case and Sergeant 3086 has informed me that they do not have concerns about him returning home this evening and will be sending out a Social worker in the morning to begin assessment of the family.
- Case has been discussed with SPR On Call Dr Anwar and Sadie Canning Dosser CJLT Operational Manager who agree that Axel does not appear to be detainable under the act but does require some further input from services. Dr Anwar advised sharing information with the family to ensure they are updated of all risks and feel they are able to keep themselves and others safe
- Axel to be released from Police Custody on bail to return to St Anne's Street Police Station at 2pm on 12.12.19
- Custody contact completed
- Discussed with Dad who is aware of the content of what Axel said. I have suggested that Axel does not attend school tomorrow to give time for agencies to create a safe and robust risk management plan of the risk he presents to others

Further risk management plan:

- Contact to be made with Lancashire Social Services to share assessment – Submit MARF
- Refer for Asperger's/Autism assessment
- Refer to Forensic CAMHS for management of offending behaviour in the context of forensic risk to others
- CJLT to obtain outcome of interview and support as required
- Email sent to update Merseycare Safeguarding Team
- Discuss with Band 7 Annie Kelly if a SAVRY assessment is appropriate

Referrers anticipated outcome:

Possible assessment and risk management plan

Help to formulate risk planning

Ensuring best possible care is accessed for Axel

OFFICE ONLY: Info checked at consultation ☐

gmmh-ft.fcamsnwn@nhs.net

FCAMHS NW Team, The Gardener Unit, Bury New Road, Prestwich,
Manchester M25 3BL

DPA

FCAMHS Telephone/Advice Form

Please complete as fully as possible

Date of Telephone
Call: 12/12/19Name of Duty
Clinician

Jushine Mason

Client Information:

Name: Axel Rudakubana Date of Birth: 7/8/06 Age at referral: 13

Gender: ☒ M ☐ F

Ethnicity: Black British Religion:

NHS Number:

Home Address:

10 Old School Close
Bonks, Southport

Address at time of referral (if different):

Postcode:

Telephone N

Next of Kin:

Father

Name:

Address:

as above

Postcode:

Telephone Number:

Referrer Details

Name: Stephanie Hallaron

Profession/Designation Nurse (RMN)

Address:

Postcode:

Telephone Number:

Email Address: stephanie.hallaron
@merseycare.nhs.uk

Living Arrangements (at time of referral):

Birth Family ☒ Foster Care ☐ Independent Living ☐ Semi-Independent living ☐Adoptive Family ☐ Residential care ☐ Residential school ☐ Secure Care (welfare) ☐Other Family ☐Criminal justice setting: YOI ☐ Secure Care (CJS) ☐ STC ☐Mental health setting: Low/medium secure ☐ Open unit ☐ PICU ☐

Other (state):

If mental health - Diagnosis if any?

2 ASD

Under Mental Health Act? Y ☐ N ☒

Social Care Status:

LAC: S20 ☐ S31 ☐ Leaving care ☐ Child in need ☐ Subject to CP plan ☐ None ☒Secure Accommodation Order ☐ TAC ☐ Guardianship Order ☐Other (please state) ☐Early Help ☒

Education Status:

NEET ☐ Special schooling ☒ Home tuition ☐ Hospital School ☐ CFE ☐Mainstream ☐ Mainstream SEN ☐ PRU ☐ Left school ☐ Vocational Training ☐
(is employed)

Criminal Justice Status:

Not Applicable	☐	On Bail	☐	Recent Police Contact	☒
On Remand	☐	Pre-Court Order	☐	Sentenced to Custodial Order	☐
Sentenced to Community Order	☐	Other:	open to PREVENT TEAM		

Reason(s) for Telephone Contact with Fcamhs (please include concerns about mental health AND details of high-risk forensic behaviours including specific incidents of concern include dates):

Arrested yesterday - possession of bladed article, offensive weapon & s47 assault. No previous contact YJS. Known & open to Prevent Team. Argued about mass killings, beheadings, ISIS. Took ~~knife~~ Hockley shoe into school & assaulted boy. Previous exclusion for taking knife into school. ASD presentation - no diagnosis. no remorse & empathy. Lives - Parents & 15 yr old brother - no risk to family identified

FCAMHS Advice:

Advised to Refer to FCAMHS ☒ Yes • No •

Advised Strategy meeting. (No S/S, no camhs involved) Invite all relevant organisations - *fcamhs will attend given notice. Check bedroom for any potential weapons - other aspects of safety planning completed. Refer to camhs for ASD assess & mental health screening

	Very useful (1)	Useful (2)	Neutral (3)	Not useful (4)	Not at all useful (5)
How useful has this discussion been?	☒	☐	☐	☐	☐

HISTORY SHEET		
SURNAME	Axel Kodakband	
FORENAME		HOSPITAL No.
DEPT/WARD	Prof Court - background.	
CONSULTANT		NHS No.
Date/Time	21/1/20	DPA Print Name & Sign
	with zone	
	Ycaela skelm	
	WN80LT	monitored for not accepted
	Referred to Social care / CAMHS	
	PREVENT - Behaving violent	
	- School Shootings - 10/11	
	(13)	
	Possession of bladed article + assault	
	Assaulted if hockey stick in school. 3	
	- wanted to kill	
	- random pre thought	
	Bleed dog previously	
	3 ASC - Scientific rationale for ASD - eye contact	
	Daniel Cardiff Francis	
	DPA	brother - Axel believe
	KAWANNA - family background	
	family Evangelical Christians - not like noise	
	3 across borders.	
	ASC - waiting for f. CAMHS anen - done via out service.	
	what will Brenja anen add	
	- Social Issues	
	- Empathy - consequential thinking	
	- alternative strategies - Raine	
	- can't repeat if CJD	

HISTORY SHEET

SURNAME	Azel Rudakubana	
FORENAME		HOSPITAL No.
DEPT/WARD	Prof Consultation	NHS No.
CONSULTANT	21/1/10	DPA
Date/Time		Print Name & Sign
EAMHS - working with him - attend meeting - Therapy & Emotions - MI		
Peadar - Vadox ASC		
Premeditated. Victim of bullying - 3 ° true - liked victim ° remarkable - Hit over head. - Had Knife.		
Acorn School - pressured on but in class * Started being bullied Misinterprets was negative on member of staff. Felt assault building up.		
Strat meeting ° Social care issues CIN ° CP. family engaging. Brother 3		
DPA		
PREVENT - ° met crited. ° Radicalised Comments sympathy Manchester bomber. Police downloading content of computer. ° moved on. ° right way ideology.		
Roll - SS awareness risk awareness Tutor - Home - Library - Rth other children + staff		

Joan Hickman

SIGNATURE

HISTORY SHEET		
SURNAME	Axel Rodakabana	
FORENAME		HOSPITAL No.
DEPT/WARD	Prof Consult	NHS No.
CONSULTANT	21/1/10	DPA
Date/Time		Print Name & Sign
	Edel	
	Clear Art symptoms	
	[REDACTED] - older brother has	DPA
	Black + white re Rufe	
	SW - liberal Orenne	Anna - SW
	Regul in thinking	John - SW
	epi calant	Sarah - SW
	Denial	Step - "
		Jo - "com"
	Parents (after)	
	° Rnam pveness	
	church	
	appropriate	
	° challenges in here	
	Complacent with RFEs	
	Parents - Educative - Strategic	
	2 yrs DA	
	Parenting 2000	
	canon that know - Gap till dx	
	CPS ° made down re offence	
	Wally downloaded material	
	Arrested see 67 2 out of court	
	disposal	
	long deadline - long police	

John Rodakabana
SIGNATURE

HISTORY SHEET

SURNAME	Axel Kodakabana	
FORENAME		HOSPITAL No.
DEPT/WARD	Ref. Consult	NHS No.
CONSULTANT	21/1/20	DPA
Date/Time		Print Name & Sign
	Man presently kept driver away from him.	
	Ed - Ppt Accen.	
	All info on car taken.	
	Scott CAMM.	
	Pressure READS.	
	Scott Morgan	
	DPA	
	Gave them	
	SIGNATURE	

HISTORY SHEET		
SURNAME	axel Rvdakakana	
FORENAME		HOSPITAL No.
DEPT/WARD	Reg Points for letters + discussion of	NHS No.
CONSULTANT	CHUMLEY	DPA
Date/Time	21/1/10	Print Name & Sign
	• Pressure needs putting on Head Team due to level of risk + need for specialist Ed provision • Parents need training for managing children with autism - 2 specialist support groups - 2 High level support • Risk management strategies such as hiding knives has not worked to date - He has highlighted his own perception of increased risk • Needs specialist intervention alongside - Education social support in psychological strategies adapted to specific high risk behaviours including social stories - capacity for empathy - consequences thinking - developing a range of strategies to manage anger + stress - Emotional recognition + regulation • Needs EHEP / formal safeguarding to ensure he has access to education - Education need to complete own risk assessment • Great police involvement - possible at court disposal - 2 not see full police involvement complete • concerns from CSC perspective • met criteria for prevention	Travelled information * known boy PREMEDITATED STRAUN * Some intensive behaviour in Acom School
	Drake Dr Jeyaraj	
	possible 2nd meeting 27/2/20 2pm	* See next

SIGNATURE

HISTORY SHEET		
SURNAME	Axel Roda Kahara	
FORENAME		HOSPITAL No.
DEPT/WARD	Ind professionals dealing	NHS No.
CONSULTANT	4/3/20	DPA
Date / Time		Print name & sign
	10 month Referral Order - 19th FEB	
	SMD - information advice service - Support to parents	
		for EHC application
	Score community areas } No concerns.	
	+ home areas }	
	NFA → Prevent.	↓
		PRIMARY
		TO SPECIALIST
		pharmac
	Dad Email - re Education	
	- comment re effect on mental state.	
	- R/L self or others	
	- Bullying.	
	- Needs T.A.	
	ARM (offense wraps - hockey stick / Knife	
	- frank in description / Black + white	
	- Victim OK compensation.	
	School sending work at not returned - no contact w/ family	
	TA at all times at school previously.	
	→ See as finding.	
	Parents perspective different to education	
	EXPLORED - complete risk picture.	
	Issues yr 7 ↑ problems last 18/12	

HISTORY SHEET		
SURNAME	apel Rodakaband	HOSPITAL No.
FORENAME		NHS No.
DEPT/WARD	2nd Perinatal Meeting	DPA
CONSULTANT		Print Name & Sign
Date / Time	4/3/20	
	Friated behavior staff + pupils ↳ Misperception	DPA
	Not continuing amendment	EMCP - EPD
	Had generic parenting course	
	Stepping down to Early Help.	OBSESSIONS ROUTING Social Care M411 BLACK + WHITE THINK
	outcome - Same GPs Ref:	
	Alcohol history - AYC °MI - °OSH	
	Risk - ASC PROGNOSIS	
	Placement - INSURE LACKING BUT NOT ANOMALOUS	
	Education - Spectrum Program - ELLIP	
	Spoken - 4 - MC interview	
	Anna Jameson - SON	
	Julie Mammill - PSOL	
	Carra Danson - wellbeing service	
	Anna Croll - CAMS for children	

Case Checklist

(To be completed and given to Data Champion)

Paris ID: **DPA** Age: **13**.....

Date of first contact: **21/1/20**

Involvement:

1 Consultation ☐ Ongoing Consultation ☒

Consult & Assess ☐ Consult, assess & intervention ☐

At time of referral

State provided support	Yes	No	Unknown
Benefits			✓
Social Housing			✓
Family Relationships	Present	Not present	Unknown
Family mental health			✓
Criminal Activity		✓	
Alcohol Abuse		✓	
Drug Abuse		✓	
Failing to care			✓
Inconsistent supervision	✓		
Abuse		✓	
Witnessing violence in the family		✓	

Bereavement/loss	☒		
Care of own children			☒
Other			
Trauma History of Young Person	Present	Not present	Unknown
Neglect/maltreatment		☒	
Sexual abuse			☒
Physical abuse			☒
Emotional abuse			☒
Domestic abuse			☒
Community violence	☒		
War/political violence	☒		
Serious accident		☒	
School based trauma	☒		
Natural disaster		☒	
Terrorism			☒
Kidnapping			☒
Sexual assault/rape		☒	
Interpersonal violence	☒		
Bereavement			☒
Other			
Living Conditions	Yes	No	Unknown

Instability (neglect, unemployment, addiction, financial)		✓	
Absconding		✓	
Short term/temporary		✓	
Over crowded		✓	
Unhealthy/ unsafe			✓
Offending in residential/family home		✓	
Living with offenders		✓	
Living across multiple placements		✓	
Other			
Referral reason	Present	Not present	
Violence/aggression	✓		
Harmful Sexual Behaviour		✓	
Second opinion in complex case	✓		
Firesetting		✓	
Criminal Justice	✓		
Other			
Family's contact with services	Present	Not present	
Prior to referral e.g. another child on CP plan or family previously in CJS		✓	

Previously known to this service	Yes	No	
		✓	
Mental Health/Wellbeing	Present	Not present	Unknown
Psychosis		✓	
Anxiety		✓	
Depression		✓	
Post Traumatic Features		✓	
ADHD		✓	
Autism			✓
Conduct & longstanding behaviour	✓		
LD		✓	
Other			
What type of intervention did FCAMHS provide?	Yes	No	
Specialist intervention in offending behaviour			
Standard CAMHS intervention			
Ongoing direct involvement			
Multi-agency case management			

Ongoing indirect involvement			
Who was involved in the intervention?	Yes	No	
Individual			
Family			
Parent/foster			
Working with wider system			
Group			
Other			
	Yes	No	
MDT meeting within FCAMHS		✓	
Ongoing Mental Health Involvement from FCAMHS Direct & Indirect		✓	

Discharge

Date of discharge: 9/3 Age at discharge: 13

Discharge Reason (Please pick one only):

1) FCAMHS no longer required:

- ☐ a) Ongoing community management by local CAMHS/ other MH services
- ☐ b) Ongoing community management by local CAMHS/ other MH services with other agency

- ☒ c) Ongoing community management. No need for local CAMHS/ other MH services. Other agencies remained involved
- ☐ d) Transition to new specialist setting (e.g. custody, secure, residential, inpatient etc)
- ☐ e) No need for CAMHS/ other MH service or agency involvement.

- ☐ 2) FCAMHS oversight still required, CYP moved out of area/ moved to another FCAMHS

3) Over 18:

- ☐ a) Transition to adult services effected
- ☐ b) No need to transition to adult services
- ☐ c) Transition to adult services needed, but not accepted

4) Other (please state).....

How concerned are you now about the following:	Less of a concern	Still a concern	N/A
Violence/aggression	SIGNATURE	✓	
Harmful Sexual Behaviour			✓
Firesetting			✓
Criminal Justice		✓	
Living Conditions at discharge	Yes	No	Unknown
Instability (neglect, unemployment, addiction, financial)		✓	

Absconding		✓	
Short term/temporary		✓	
Over crowded		✓	
Unhealthy/ unsafe		✓	
Offending in residential/family home		✓	
Living with offenders		✓	
Living across multiple placements		✓	
Other			

Living Arrangements at discharge:

Birth Family	☒ Foster Care	☐ Independent Living	☐ Semi-Independent living	☐
Adoptive Family	☐ Residential care	☐ Residential school	☐ Secure Care (welfare)	☐
Other Family	☐			
Criminal justice setting:	YOI ☐	Secure Care (CJS) ☐	STC ☐	
Mental health setting:	Low/medium secure ☐	Open unit ☐	PICU ☐	

Social Care Status at discharge:

LAC: S20 ☐	S31 ☐	Leaving care ☐	Child in need ☒	Subject to CP plan ☐	None ☐
Secure Accommodation Order ☐			TAC ☐	Guardianship Order ☐	
Other (please state) ☐					

Education Status at discharge:

NEET ☒	Special schooling ☐	Home tuition ☐	Hospital School ☐	CFE ☐
Mainstream ☐	Mainstream SEN ☐	PRU ☐	Left school (is employed) ☐	Vocational Training ☐
Other (please state):				EHCP Yes ☐ No ☐

Criminal Justice Status at discharge:

Not Applicable ☐	On Bail ☐	Recent Police Contact ☐
On Remand ☐	Pre-Court Order ☐	Sentenced to Custodial Order ☐
Sentenced to Community Order ☒	Other: ☐	

Other agencies involved at discharge:

CAMHS ☐	Education ☒	Social care ☒	Criminal Justice ☒	Other Health ☐	None ☐
Self/family ☐	Third Sector ☐		GP ☐		
Other (please state) ☐					

Care Plan	Yes	No	
Does the CYP have an integrated care plan in place		☒	
Who was involved in formulation of care plan?			
Young Person			
Family/carers			
Other FCAMHS professional			
Other agency Please specify			
Mental Health/Wellbeing at discharge	Present	Not present	Unknown
Psychosis		☒	
Anxiety		☒	
Depression		☒	
Post Traumatic Features		☒	
ADHD		☒	
Autism			☒
Conduct & longstanding behaviour	☒		
LD		☒	
Other			

Please specify			
-------------------------	--	--	--

Has the case escalated in support?

E.g. transitioned from indirect to direct contact/indirect contact only but escalation from a single agency consultation to a multi-agency consultation/from multi-agency consultation to direct clinical assessment and intervention.

Yes ☐ No ☒

Is the young person under the MHA?

Yes ☐ No ☒

SAVRY completed?

Yes ☐ No ☒

Clinical Summary

NHS NO:

DPA**RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**

NHS Number

DPA

Preferred Name

Gender **Male**

Paris ID

DPAAddress **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**

Contact

Not Known**NB**

Please use this space to record non-clinical advisories only

NB text

Current Care Status

Primary Diagnosis None

Current Cluster Not Applicable

Inpatient Status None

Leave Status None

Current MH Section None

Current CPA Status None

Psychological Formulations None

Key Staff

Responsible Clinician

Care Coordinator None

Others None

Last Clinical Contact None

Next Clinical Contact None

Record NumbersExternal Documents 7 external documents existCare Documentation 1 care documents existProgress Notes 10 progress notes exist

Next Review None

GMMH Specific Requirements

Advanced Decision No Advanced Decisions

Risk None

Current Forensic Cluster Not Applicable

Inpatient History



**Greater Manchester
Mental Health**
NHS Foundation Trust

NHS No: DPA

Our ref: DPA
NHS Number: DPA

Tuesday 11th February 2020

STRICTLY PRIVATE AND CONFIDENTIAL

Stephanie Hallaron
Mental Health Practitioner
Merseycare
L20 3XX

By Email:
stephanie.hallaron@merseycare.nhs.uk

Dear Stephanie,

Re: Axel Rudakubana **D.O.B:** 07/08/2006
Address: 10 Old School Close, Banks, Southport, PR9 8SB

Thank you for your recent referral of Axel to FCAMHS and for arranging the meeting of professionals which took place on the 21st of January 2020. I agreed at this meeting to send this letter as a brief overview of the salient issues discussed and initial recommendations. We have a second meeting arranged for the 4th of March to review the case. I have now had opportunity to discuss the case with Skott Morgan from CAMHS. I have made Skott aware of the concerns of professionals. Skott will be attending the meeting on the 4th of March and will be able to give feedback as to the role of CAMHS.

At the time of referral Axel was open to PREVENT in relation to him accessing beheading and mass shooting videos. The case has now been closed to PREVENT. Axel has been arrested on a charge of possessing a bladed article in a school setting. Seemingly Axel returned to the school following him being the victim of an assault and assaulted another boy and was prevented from escalating this assault further. He demonstrated little insight into the potential consequences of his behaviour for himself or others. His computer is currently being searched by the police as part of an ongoing investigation. You reported that he is likely however to receive an out of court disposal

Axel's presentation is seen as likely to meet criteria for a diagnosis on the autistic spectrum and there is a family history of this. He is on a waiting list with the local paediatric team for assessment. At the meeting of the professionals the expected time before a diagnosis for ASC was confirmed as being



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Bury New Road, Prestwich, Manchester M25 3BL Tel: 0161 773 9121.**

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Tel: DPA

Fax:

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NHS No: DPA

approximately 2 years. We commented that a diagnosis will be fundamental in categorising and managing Axel's high risk behaviour, in supporting of an EHCP application and in identifying a specialist education provision. Given the level of concern that was felt by professionals, liaison with the paediatric team needs to take place to ensure that they are aware of the concerns and that the paediatric team contribute to the risk management plan. I discussed this with Skott Morgan and Skott will discuss with colleagues at CAMHS how escalation of concerns to the paediatric team can be supported by CAMHS.

I highlighted that the most important factor in managing the risk posed by Axel will be identification and integration into an appropriate educational provision. I commented that the education service will need to complete their own risk assessment of the suitability of any identified placement. This will need to be completed in line with the process of gaining an EHCP.

We were informed that risk management strategies such as his parents hiding knives from Axel had not worked as these strategies were in place before his offence. The pre-meditated nature of his offence was also highlighted in that Axel booked a taxi to the school and altered the handle of the hockey stick he took to use as a weapon. It was also highlighted that the boy he assaulted was someone he has previously "liked". Professionals questioned whether his being the victim of bullying was accurate or rather related to Axel's propensity to misjudge social interaction. It was reported that Axel has identified and communicated to teaching staff when he perceives himself to be at increased risk of acting out behaviour. It was concerning that he had begun to develop an "intensity" to some of his interactions with staff and pupils at the specialist provision 'Acorn School' similar to how he had behaved at his previous mainstream school. This behaviour has contributed to him being suspended from this specialist provision and being outside of access to full time education.

We discussed the need for parents to be provided with additional support in their parenting of children with autism. Skott Morgan highlighted that the family has been signposted to support agencies and that there may be additional services that could be accessed if needed. Axel is socially isolated. Clearly the routine and structure of an appropriate education placement is important but Axel will likely need additional support in accessing social activities outside of formal education. CSC highlighted that there may be no formal role for their service as parents are compliant with the plan but Axel would benefit from a mentor/support in accessing social provision.

I also highlighted that Axel would likely benefit from psychologically informed interventions to address his high risk behaviour delivered with him taking into consideration his likely diagnosis of ASC. In considering reducing the risk of Axel engaging in interpersonal violence he would benefit from such interventions being focussed on improving his ability to think consequentially; improving his capacity for an empathic response; developing a range of alternative strategies to anger and developing strategies to manage stressors in his life. These interventions should focus on emotional recognition and regulation. Skott Morgan will liaise with colleagues in CAMHS and make comment at the forthcoming meeting as to how this need may be met.

I trust this is a helpful summary. Please contact me if any clarification is needed.

Yours sincerely

SIGNATURE

John Hicklin
Clinical Nurse Specialist



**Greater Manchester
Mental Health**
NHS Foundation Trust

NHS No: DPA

Our ref: DPA
NHS Number: DPA

Monday, 09 March 2020

STRICTLY PRIVATE AND CONFIDENTIAL

Stephanie Hallaron
Mental Health Practitioner
Merseycare
L20 3XX

By Email:
stephanie.hallaron@merseycare.nhs.uk

Dear Stephanie

Re: Axel Rudakubana **D.O.B:** 07/08/2006
Address: 10 Old School Close, Banks, Southport, PR9 8SB

I am writing to thank you again for coordinating the second professionals meeting on the 4th March 2020 following your referral of Axel to FCAMHS. I am aware that the case has been closed to your service but I am writing this summary for your record and for you to share with local agencies if this is felt to be helpful.

Subsequent to our initial consultation on the 21st of January 2020 Axel has received a 10 month referral order. Anna Croll (YOT) is completing an AssetPlus assessment and will then be coordinating interventions to address offending behaviour. She concurred with professionals as to Axel's presentation being consistent with a likely ASC diagnosis.

CAMHS were not present at the meeting. The case has been closed to them as Axel is not felt to have additional mental health needs and a referral has been made on the ASC pathway. As previously indicated I had hoped that CAMHS would be able to advise as to access to local support provision and support escalation of priority to the paediatric team.

It was reported that CSC have signposted parents to the Information Advice Service to support them in an application for an EHCP. There was extended discussion as to the risk posed by Axel in the context of his ASC presentation and concerns were raised as to his parent's lack of insight into the



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complexities of his needs and presentation. Education staff made comment on the likely pathway to specialist education provision and indicated that there is scope for this to be expedited.

I made comment that risk assessment will be complicated by his likely diagnosis of ASC. The known evidence in this field concurs with the discussion we had about Axel with professionals. The following aspects of young people with an ASC diagnosis should be taken into account when considering the risk

- *Disruption in routines and lack of motivation to change to adaptive behaviour*
 - *Social naivety*
 - *Specialist interests associated with the condition*
 - *Experiences of being bullied/rejected and desire for retribution "this may lead to assault on a perpetrator or displacement onto another often completely innocent person" (as demonstrated by Axel)*
 - *Hostility to parents*
 - *Sensory sensitivities*
 - *Following the lead of strong influencer*
 - *Lack of awareness of wrong doing*
 - *Deficits in empathy or lack of recognition of fear in others*
 - *Not seeing consequences*
 - *Comorbid mental health diagnosis (although this has been not to be the case by CAMHS in Axel's case)*
 - *Any combination of the above*
- Bailey, Chitsabesan & Tarbuck (2017)

I am of the opinion that assessment by our service is not indicated as until his diagnosis is complete we would not be able to contribute further to the understanding of risk. I made comment though that Axel being outside of access to fulltime education increases the risk and we would therefore support access to appropriate provision being expedited. He would also likely benefit from access to social support outside of the family. It was reported that the case will step down to early help and as suggested this letter can be shared with relevant professionals. The case will now be closed to FCAMHS but any professional can contact the service for clarification of this letter or if review is indicated because of a significant change in circumstances or risk behaviour.

Yours sincerely

SIGNATURE

John Hicklin
Clinical Nurse Specialist

Case Note Tracking**AXEL RUDAKUBANA** **DPA****RUDAKUBANA, Axel**Born **07-Aug-2006 (18y)**NHS Number **DPA**

Preferred Name

Gender **Male**Paris ID **DPA**Address **10 Old School Close, Banks, Southport, Merseyside, PR9 8SB**Contact **Not Known****View Documents By Person**

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