



A Digital Patient Record

NHS NUMBER 436 788 1849

Lucas Lawes | BSc Computer Science | 09/07/2020

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Every Person, Every Story – Our Digital Journey

“... there is something of a digital revolution taking place. Staff are being empowered to work with people and cultures in our organisations to lead change and develop new ways of working together... We will therefore do things differently, which we recognize may create a level of uncertainty as we walk the road less travelled, but by putting #PeopleBeforeTechnology everything we do will be working towards the best outcomes for all people.”

Fiona Edwards - Chief Executive Officer

SABP Digital Transformation Strategy (2020)

https://www.sabp.nhs.uk/download_file/view/3957

Summary


This record documents a unique, rare, and complicated case of dissociative fugue to resolve a longstanding medical case whereby the person has not one, but two stories. Adopting a digital approach before we have fully realised one may create a level of uncertainty. However, using digital has empowered the patient to produce his own patient record towards the best outcomes for all people. The patient would like to attain a medical first by being correctly attributed and the author of a false story attributed back. This digital patient record offers mental health benefits when applied thoughtfully to people. A holistic approach resolves the existence of two polar-opposite accounts recorded on the traditional patient system and this digital patient system. A digital patient record improves clinician attainment over a traditional patient record and leads to the realisation of outcomes rarely seen in mental health for the mutual benefit of everyone.

A Case of One Person, Two Stories

[Home](#) > Patient Record


Module Code
SABP_PATIENT_001

Every Person, Every Story



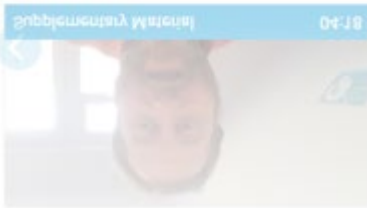
Supplementary Material04:18

Lucas Lawes
Doctor
an hour ago




Supplementary Material00:26

Nik Fox
Doctor
an hour ago



Supplementary Material04:18


Lucas Lawes
Doctor
an hour ago




Supplementary Material00:26

Nik Fox
Doctor
an hour ago

An Example Digital Patient Record (2009-2020)








Search

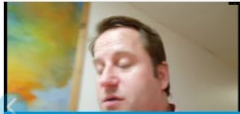
Doctor 

Home > Patient Record

Module Code
SABP_PATIENT_001

  QUICK START  ADD  ADD SERIES  EDIT MODULE

Admissions




Supplementary Material 00:45

Reverse Admission 2015

Doctor

an hour ago




Supplementary Material 00:57

Reverse Admission 2016

Doctor

an hour ago

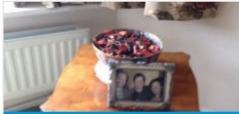


Supplementary Material 01:06

Admission 2009

Doctor

an hour ago

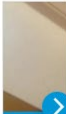


Supplementary Material 00:07

Admission 2013

Doctor

an hour ago




Supplementary Material

Reverse A

Doctor

an hour ago

Background




Supplementary Material 04:42

First Digital Patient Quiz

Doctor

an hour ago




Supplementary Material

Patient Journey

Doctor

30/09/2009

Every Person, Every Story




Supplementary Material 00:31

The Author

Doctor

07/07/2020




Supplementary Material 00:13

The Storyteller

Doctor

07/07/2020




Supplementary Material 00:26

Nik Fox

Doctor

an hour ago



Supplementary Material 04:18

Lucas Lawes

Doctor

an hour ago



Lucas / Nik Lawes / Fox
Flat 8, 1 Pavilion Place
East Molesey
Surrey
KT8 9FE

Leanne Carrick
Mental Health Act Department
18 Mole Business Park
Randalls Road
Leatherhead, KT22 7AD

9th July 2020

Dear Leanne,

Digital Patient Pathway Request (Reversal): MH/2020/14648, NHS Number 436 788 1849.

This is my first and last part to form a combined digital patient record. I submitted the record by email on 9th July 2020 to the HM Courts and Tribunals Service as [A Digital Patient Record](#) – Lucas LAWES.pdf. I have sent this last letter anonymously to my former colleagues and friends and there is a slight risk some readers will find it offensive. Therefore, I have rated it a “15” as it contains moderate adult themes and some attempts at humour regarding a matter I have no wish to write to anyone about, they have nothing to do with, do not want to be involved in, and that, ideally, should have been dealt with correctly and privately by Surrey and Borders Partnership (SABP) in October 2009. A Fugue II.mp4 video was submitted to SABP on 11th November 2019 and is to be associated by your team with my SABP Digital Patient Record. To my mind, SABP have shown me they have understandably poor medical insight into an incredibly rare and highly complex condition that must be recognised before I can move forward for a better life. This letter takes roughly 10 minutes to read. I would ask my former colleagues and friends to shred this letter after bearing with it in full and then complete the enclosed [First Digital Patient Quiz](#) and post it to your team for input into a workshop which outputs an accurate holistic patient persona. I have taken a risk sharing the matter with former colleagues and friends, but SABP have left me with no alternative. I would like you to have a go at moving it forward. Thank you.

Introduction

I hope you are feeling well and keeping safe. As my mental health act administrator, you help ensure I receive fair treatment as a patient of SABP, and I am very grateful to you for doing so, as I have received exceptionally unfair treatment for 11 years. Next year, my birthday falls on Easter Sunday, and between now and then I would like your team to create the possibility for me to become SABP's first digital patient. With digital, it is possible to return to the beginning of my case and reprocess it correctly at the speed of light so to speak. After doing so, I predict it will provide new medical insights. This creates a possibility to prove the concept under mental health law in hospital for my 5th and final admission and correct discharge - with the approval of the SABP CEO. To my mind, the outcome will show her Every Person, Every Story digital transformation strategy is on the correct track and will improve the patient outcomes for the people her organisation serves each year. As a former Capgemini consultant, I would be grateful to be given the opportunity to become her first digital patient and play a miniscule role in helping her organisation realise its vision for the future.

Background

I have a friend who enjoys watching and reading stories about psychopaths. The ones I know are not little red people with horns and a tail. They are ordinary, high functioning individuals who have two

sides to their personalities. They sustain themselves in our society by using word association to paint themselves white and other people black. This unfortunately creates a unique betrayal bond which sees them ascend as their “scapegoat” descends. And usually, nothing is done about it.

Digital Patient Record

As you may now be aware, my digital patient record to the HMCTS Correspondence Team Leader spans over 3,932 days. After receiving a copy of my video, I observe you will correctly conclude my mental health case in less than 1 day, despite not being a clinician. Opening the video file on a computer, I present a state of F43.0 as the patient (Fugue II 00:10:14 for 20 seconds, Supplementary Guide Page 12, and Fugue II 00:58:01 for 20 seconds) before SABP created my record on 6th October 2009. Furthermore, the digital patient record shows that I wrote the false story of my life on 3rd October 2009 (Supplementary Guide, Page 15). The story recounted my life going back to 1979 and it is fair to say it will never be a best seller. However, had digital collaboration been available in 2009 in the clinical workplace, you may observe it is very reasonable to say SABP clinicians would have seen I was left in a F44.2 in UCH E&A prior to my arrival in their hospital and therefore they would have subsequently made a simple clinical decision to discharge me with F44.1, based on the medical definition I use (Fugue II, 00:51:07). The betrayal bond would have been severed (Supplementary Guide, Page 15) and narcissistic supply would have been cut off immediately (Supplementary Guide, Page 18). I would have recovered in 4-5 years with support from the charity sector, and slowly re-established my relationships going back to my school days and gradually rebuilt my life. The SABP patient record system would now be showing “less than 5 cases” since records began (WhatDoTheyKnow.com, 2017), plus mine. Despite an extremely rare condition, I would have been treated no differently to any other person who SABP serve. The SABP community team would have gradually supported me to move on with my life, return to work and so forth. I observe the combined expense to SABP and myself would have been £100,000 (lose of earnings, savings, and cost of care). And this letter would not exist on the desks of the SABP Chief Executive’s secretary, my former colleagues, and friends. People I consider to be good and had the clinical team made the correct decision, I would not involve.

Digital Patient Workshop

Most of my former colleagues and friends barely know me, and will not have seen me for months, years, or even decades. However, I observe like the sun, I have reached a point after 11 years as a patient whereby I have been totally eclipsed. Being overshadowed, like a solar eclipse, does not last forever. Before I share anymore, I am very clear my case has absolutely nothing to do with my former colleagues and friends in any way, shape, or form. I know they would wish me to be treated correctly, just as anyone else would, but the matter cannot be resolved by the community team in clinical sessions. To mitigate this, as per my letter to the SABP Chief Executive on 28th June 2020, I would like to give a presentation about delivering holistic patient pathways on the 6th October 2020 to all my doctors since 6th October 2009. I would like this dialogue to form part of a digital patient workshop in which word association games are played to build up a holistic patient persona which includes input from family, former colleagues, and friends. To facilitate this, I would like my former colleagues and friends to provide words they associate with me and have them transferred onto a pile of post-it notes for a creative exercise in the workshop. The reason being, with my case of fugue, there are two personas, a real one and a false one. We might observe what this might be like for me when we look at ourselves in the mirror. We see a reverse image of ourselves reflected to us. In a case of my fugue, this mirror effect is like being two separate individuals. I have watched SABP follow my reverse image for 11 years. I observe the combined expense to SABP and myself has so far been over £1million. Seen in this light, holding a half day workshop, and then entering me back into hospital to apply mental

health law to my real persona will provide mutual benefit to SABP and myself. I would like the outcome to be presented back to me by SABP in April 2021. I predict this will show that digital workplace collaboration reduces the burden on mental health services and improves the quality of care for Every Person, Every Story - no matter how rare and complex the case.

Conclusion

I think I probably speak for all of us when I write I am very grateful for all the amazing efforts of people who work for the NHS continue to put in for us during the pandemic, and this includes the mental health teams who continue to see people, including myself. Now is no longer a time to further burden these services. However, lockdown has meant digital collaboration tools such as video conferencing have become pivotal and their adoption more widespread among clinicians, meaning they are empowered to collaborate with third parties digitally and in doing so make informed decisions quicker. SABP have not had digital capabilities made available to them since 2009, and so consequently, I have finished my controlled, gradual descent to the bottom, with the most disempowering code in medicine applied to me indefinitely. This has caused me to experience two fugues rather than one. A real one in 2009, and after SABP applied the opposite codes to my case, a reverse one in 2013. As a counterbalance to that journey and with the reverse support of my former colleagues and friends who received bizarre 50/50 emails from me, I opened the doors into hospital, which are securely locked. This enabled me to increase narcissistic supply and, via the triangle of care, enabled SABP to paint me black by associating words on my medical record from the storyteller who, for complex and delicate reasons I appreciate and have explained (Letter, 1st July 2020), paint themselves whiter than white. Doing so 4 times over 4 years brought my journey full circle and ensured a safe descent for me while I also concentrated on recovering from my fugue by myself. My experience of a fugue is perhaps not what you might think. To my mind, a fugue is not so much an illness as it is an immensely complex conundrum to solve in the mind – no different to a problem an architect is presented with when designing a solution for digital transformation. However, my fugue was involuntary and gave my brain an immeasurably long and taxing workout. It took me 8 years to process 40 years of perplexing word associations. Afterwards, I retrained my brain by playing word association games and then returned to University to study a degree in Computer Science. For my final year project, I delivered a digital solution to improve student attainment which my supervisor considered to be of master's level quality. Likewise, I observe a digital patient record improves clinician attainment over a traditional patient record and I hope SABP slowly begin to accept the medical terms contained on mine are absolutely correct (Supplementary Guide, Page 7) and therefore right to apply to my NHS medical record by April 2021. If nothing ever comes of my request to you, I hope everyone found my letter insightful and a welcome distraction from their usual daily routine. I also hope no other person ever goes through an ordeal like I have been put through as a mental health patient. Despite possessing greater insight than the clinicians, I still ended up turned upside down and inside out. I am concerned for the welfare of other patients with similar stories, some of whom I know never made it. I am passionate about resolving my case and improving the quality of care by leading by example for the benefit of others. This concludes my digital patient record. I have written and submitted some 30,000 words.

Moving Forward

Regarding my request to you to become SABP's first digital patient, I observe there is no need to rush or force the matter internally. I only ask you to let things evolve naturally and play a part in helping me realise this as and when it occurs to you. By doing so, I hope that next year, after 12 years on SABP's books, I will finally be able to move on, flow out of the system, and go on to make a valuable contribution to our society without the current impediment.

I apologise to everyone for exposing my case outside a patient record system between 2013-2016 via email, and again in this letter. I hope my request to you to resolve my case in a manner which helps improve local mental health services goes some way to atone for it. Now that you have the correct record inside your organisation, I handover to you. My digital patient record is real by definition and a supplement to the mirror record written in reverse by SABP's employees over 11 years.

My SABP digital patient record is now complete and may be read, reviewed, and disseminated. To provide words for post-it notes and build up a real life patient persona for me, I would like my former colleagues and friends to complete a **First Digital Patient Quiz** which I enclose to all. Since there is nowhere for them to send it, I hope you do not mind that once they have completed the quiz, they use the envelope I have provided for them which is addressed to your department, care of yourself. Hopefully between now and 6th October 2020, someone will map the post-it notes out on a workshop board, without knowing who the terms came from, and knowing it is kept private and confidential from me.

With nothing left to do with myself other than continue to enjoy working part-time for a charity, I have spare time to concentrate on writing my novel, called Headlock. It will be a story about my true life and what I learnt from the experience. I currently have an outline structure for my novel containing 22 Chapters. The final chapter, Coventry, ends with the mirror effect being returned, not to its storyteller, but its author, and thereby freeing me to re-establish my long lost relationships - having been turned over for speaking correctly at school, university and hospital and having to start again. I do not know if real life will reflect art as I am only a person with a story. However, I hope those that make the clinical decisions for me come to make the right ones using digital and achieve a medical first by setting a precedent. To my mind every person, every story should have the right under mental health law to be afforded a safe and secure environment in which to recuperate. To me, that means more than hospitals with electronic security door systems. It means empowering people to resolve matter amicably and move on for a better life.

Many thanks to everyone for bearing with me and reading a detailed, difficult, 2580 word letter. This ends all my communications on the matter. I apologise again for writing and leave the quiz to you.

Kind regards,

Lucas Lawes
Patient, Friend and Former Colleague

(WhatDoTheyKnow, 2017 - SABP Freedom of Information Request response document)
<https://www.whatdotheyknow.com/request/373097/response/915567/attach/html/6/Final%20response%20Document.pdf.html>

c.c. Secretary to SABP CEO, HMCTS Correspondence Team Leader

Nik Fox: 1980/90s – Paul, Hiten, Sadaya, Andrew, Jason, Chris, Mike

Nik Lawes: 2000/10s – Jason, Richard, Ralf, Kerry, Wendy, Tim, Chris, Jo, Suzanne, Nick

Lucas Lawes: 2016 to present – Neil, Laly, Paul, Marjorie, Amanda, Gustavo

First Digital Patient Quiz – Fun word association games for realising new possibilities

Thank you for bearing with me and reading my letter. Now for something lighter and hopefully more fun.

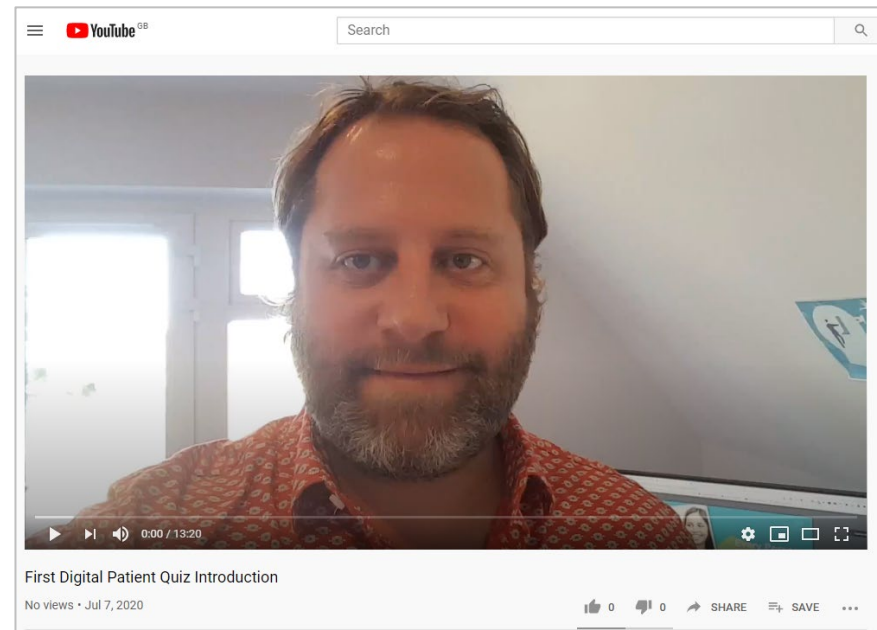
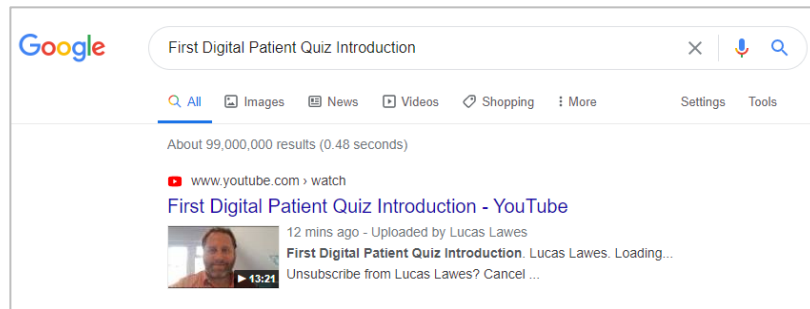
If you have the time and an internet connection, please first watch the [First Digital Patient Quiz Introduction on YouTube](#), which you will find by googling “First Digital Patient Quiz Introduction”.

Then complete the 4 sections and post your completed quiz using the envelope provided to the Mental Health Act Department.

It will take roughly 20 minutes to watch the video and complete the quiz.

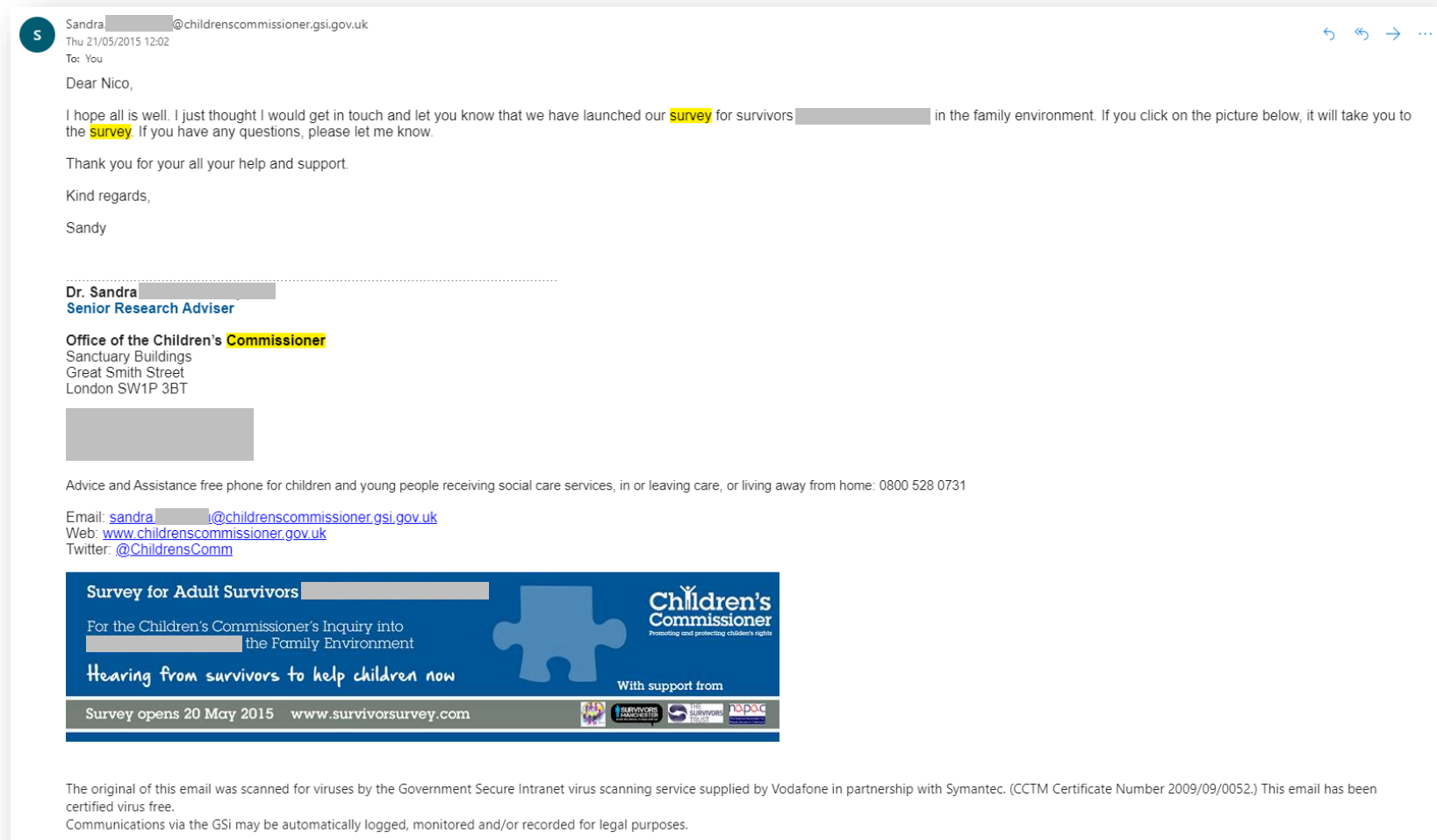
Thank you.

First Digital Patient Quiz Introduction on YouTube



First Digital Patient Quiz – Aim and Objectives

In 2015, a survey was published based in part on my case to help children now days



First Digital Patient Quiz – An example of SABP’s Every Person, Every Story Strategy (Doctor’s View)

1. Have a look at the doctor’s view produced by the patient. Do you agree with the patient’s observation?

The screenshot shows the 'Recap' digital patient record interface. At the top, there is a search bar and a 'Doctor' profile icon. Below the search bar, the breadcrumb 'Home > Patient Record' is visible. The main content area is divided into three sections: 'Admissions', 'Background', and 'Every Person, Every Story'. Each section contains a grid of video thumbnails with titles, durations, and timestamps. The 'Admissions' section includes 'Reverse Admission 2015', 'Reverse Admission 2016', 'Admission 2009', 'Admission 2013', and 'Reverse A'. The 'Background' section includes 'First Digital Patient Quiz' and 'Patient Journey'. The 'Every Person, Every Story' section includes 'The Author', 'The Storyteller', 'Nik Fox', and 'Lucas Lawes'. Each video thumbnail has a 'Supplementary Material' label and a duration. The interface also features a 'QUICK START' button and 'ADD', 'ADD SERIES', and 'EDIT MODULE' buttons.

Recap

Search

Doctor

Home > Patient Record

Module Code
SABP_PATIENT_001

QUICK START

ADD

ADD SERIES

EDIT MODULE

Admissions

Supplementary Material 00:45
Reverse Admission 2015
Doctor
an hour ago

Supplementary Material 00:57
Reverse Admission 2016
Doctor
an hour ago

Supplementary Material 01:06
Admission 2009
Doctor
an hour ago

Supplementary Material 00:07
Admission 2013
Doctor
an hour ago

Supplementary Material
Reverse A
Doctor
an hour ago

Background

Supplementary Material 04:42
First Digital Patient Quiz
Doctor
an hour ago

Supplementary Material
Patient Journey
Doctor
30/09/2009

Every Person, Every Story

Supplementary Material 00:31
The Author
Doctor
07/07/2020

Supplementary Material 00:13
The Storyteller
Doctor
07/07/2020

Supplementary Material 00:26
Nik Fox
Doctor
an hour ago

Supplementary Material 04:18
Lucas Lawes
Doctor
an hour ago

“I observe a digital patient record improves clinician attainment over a traditional patient record” – Lucas Lawes

☐ I agree

☐ I disagree

☐ No comment

First Digital Patient Quiz – A case of Every Persona, Every Story (to help you to come up with words)

2. Have a look at the quiz player's view produced by the patient. Before playing the word association game, you are welcome to have a browse.

The screenshot shows the 'Recap' Patient Record interface. At the top, there's a search bar and a 'Quiz Player' button. The main content area is titled 'Every Person, Every Story' and displays a grid of video thumbnails. The first row shows two thumbnails: 'Lucas Lawes' (Doctor, an hour ago) and 'Nik Fox' (Doctor, an hour ago). Below these is a 'Background' section with a thumbnail for 'First Digital Patient Quiz' (Doctor, an hour ago). The 'Admissions' section at the bottom displays a row of five thumbnails: 'Reverse Admission 2015' (Doctor, an hour ago), 'Reverse Admission 2014' (Doctor, an hour ago), 'Admission 2013' (Doctor, an hour ago), and 'Admission 2009' (Doctor, an hour ago). Each thumbnail includes a 'Supplementary Material' label and a duration.

Web Address

<https://recap.cloud>

Email Address

quiz-player@recap.cloud

Password

hollywood



Contains views of the patient inside and outside a hospital

First Digital Patient Quiz – Word Association Game for Holistic Patient Persona

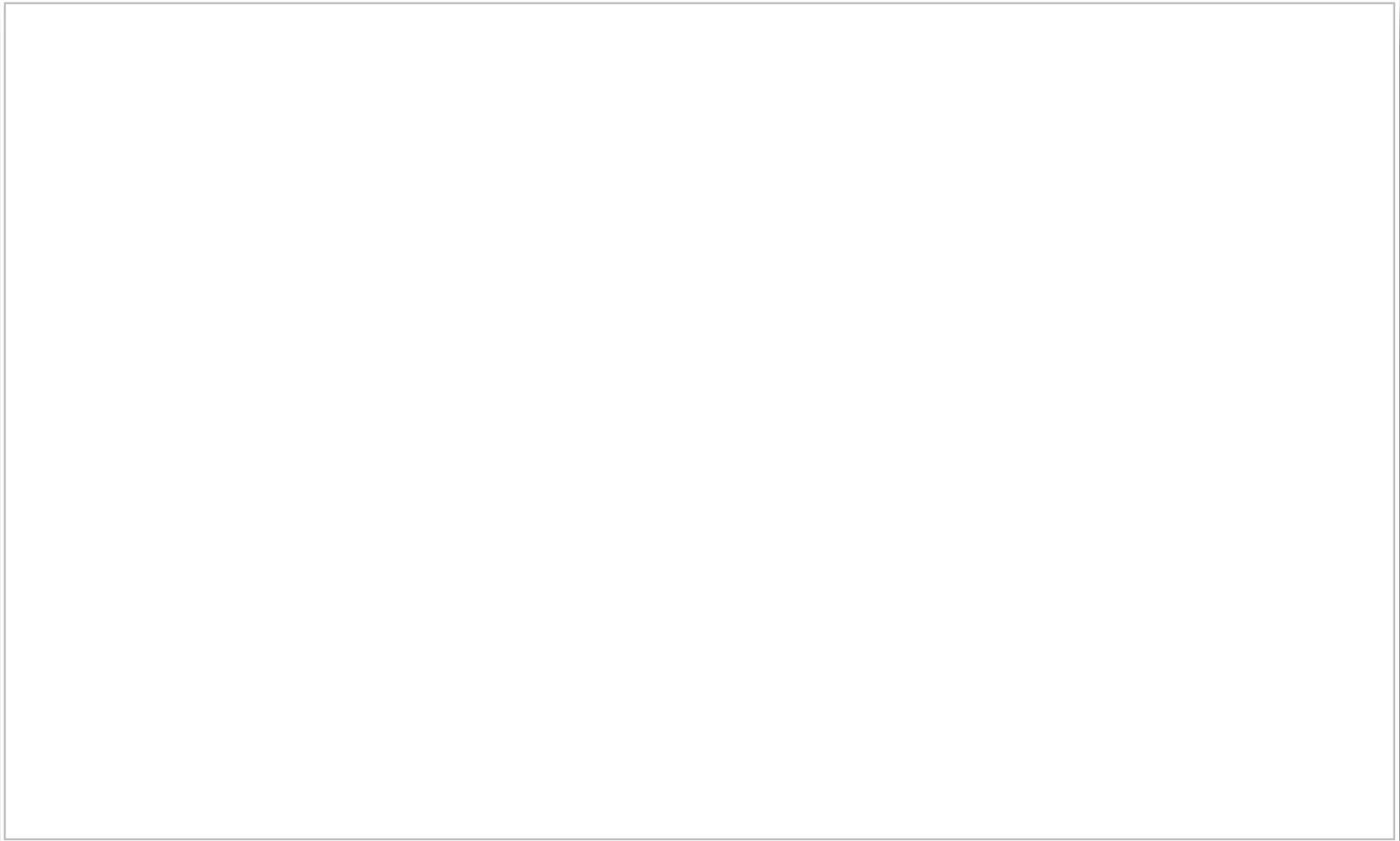
My first name is _____. I know of the patient as ☐ Lucas Lawes ☐ Nik Lawes ☐ Nik Fox

3. Jot down words you associate with the patient. Use any word from the English language. Be frank and honest. You may string words together.

First Digital Patient Quiz – Create a Possibility Game for Children

I have known the patient for ☐ months ☐ years ☐ decades, as a ☐ friend ☐ colleague ☐ client ☐ student.

4. A picture says a thousand words and digital creates new possibilities. Draw a possibility you create for children. You may ask a child to help.

A large, empty rectangular box with a thin black border, intended for a child to draw a possibility. The box is currently blank.

Nicholas Fox (Lawes)
Flat 8, 1 Pavilion Place
East Molesey
Surrey
KT8 9FE

Gloria Fox (Mortimer)
30 Lime Trees
Christian Malford
Wiltshire
SN15 4BN

1st July 2020

Dear Gloria,

ICD-10 F22 Persistent Delusional Disorder. HM Courts and Tribunals Service Ref: MH/2020/14648, NHS Number 436 788 1849.

 **First Digital Patient Workshop**

I hope you are feeling well and keeping safe. As my next of kin, you know I am your mental health patient diagnosed with a persistent delusional disorder and a former Capgemini consultant. I have delivered a First Digital Patient – Lucas LAWES.pdf record to the HM Courts and Tribunals Service.

I observed, from your perspective as a retired nurse, the terms you use in your conversations, text messages, videos and emails with healthcare professionals, Catherine, Alistair, Nicholas, James, and myself. To my mind, putting me at the heart of all matters increased the burden on mental health services and reduced your family to four without causing distress to Nicholas and his family.

I would like you to participate in a word association game written by me on 6th October 2020, in front of all my doctors who used traditional ways of working since the 6th October 2009 to produce my psychiatric medical record, to great expense to myself and Fiona Edwards' organisation. And anyone else who would like to attend, such as Catherine, Alistair, Nicholas!, and James.

At the end, I would like you to ask my current care coordinator from Epsom CMHRS to give me my monthly depot injection. Afterwards, I would like you to ask my community team doctor to begin a demonstration of Fiona Edwards' digital workplace vision, in collaboration with a police officer, by transferring me from CTO to Section 136 and sending me to Abraham Cowley Unit (ACU) in Chertsey.

Odd as it may first appear, I observe we share a win-win in a chicken and egg situation. In some ways, I surmise we cannot realise your wish for me, in your birthday card last April, to "obtain a good job, concentrate on the positive and return to the family one day," until it has been tried and tested. You may safely assume I am deluded to make such a request. However, I introduced myself to you in your local hospital 4 years ago. I gave you a hug before you went to see the doctors. When I arrived in ACU, the doctors told me the patient medical record said, "you are abusing your mother" and I would be medicated for a long time and put on a Community Treatment Order (CTO), which is what happened.

Current Ways of Working

Fiona Edward's current service design lacks good communication skills, and smart ways of working, however like all NHS staff, her employees continue to do their best to serve those they see. They suffer

from “Chinese Whispers” and they have recently renewed my CTO for a serious mental illness which, to my mind, is nothing more than a figment of your imagination.

Bizarrely, I reversed myself into the hospitals of your profession 4 times and would like you to begin the end of my transformation based on your reverse accusations (which as you know is Munchausen by Proxy and usually carried out by a medically trained professional), and start yours with a simple Proof of Concept of Surrey and Border Partnership’s (SABP) new ways of working using myself, who, as you know, has the rarest and most complex of cases.

SABP’s patient record system shows you and your family have been seriously abused by Nicholas Fox and Nicholas Fox. It states Nicholas Fox has a serious mental illness and must continue to be treated under a Community Treatment Order because he is uncooperative, lacks medical insight and cannot be trusted to take his medication. Something you can equally say of your ex-husband.

I have yet to see and analyse my mental health record. However, I surmise it will now provide a mirror symmetry of the correct pathway forward. That is to say, the health care professionals have applied their tools, terms, encouragement, and empowerment correctly over 11 years under mental health law and by the 12th year shall come to realise that by doing the right thing 4 times, they treated the right Nicholas Fox wrongly.

As a Capgemini consultant I delivered simple systems to complex problems of state using the Rational Unified Process which has four steps – Inception, Elaboration, Construction and Transition. After it delivers the solution to the benefiting organisations, there is a last, ultimate step to the process. Acceptance.

Future Ways of Working

I observe it to be Catherine’s birthday today, and according to the First Digital Patient record 1 Jul 2014, “the client’s mum has provided h/o his sister being [REDACTED] abused by [your ex-husband]” and “[your son] has been a victim of Munchausen by Proxy as [you] tried to deal with [your ex-husband’s] abusive behaviour by labelling [your son] as mentally unwell and to convince [your children’s father] that the client is unwell.”

Over the last 11 years, every health care professional who has “Chinese Whispered” from you to me either began or ended their conversation with me by saying “your mother is very forceful”. The last professional was my former key worker Neil who you phoned a few months ago, and he said to me “Your mother was very forceful and if you ask me your mother has a more serious mental illness than you.”

I have read Fiona Edwards’ Director of Innovation and Therapies report on her Personality Disorder Strategy for Working-Age Adults. I observe, like Nicholas, you come under Cluster B. The views and needs of children and families of people with a personality disorder are carefully considered as part of an assessment and care planning process.

Ultimately, I observe the needs to be weighed for you, Catherine, Alistair, and James as intra-family of Nicholas are you have been afflicted by a complex form of Stockholm Syndrome. Before your admission to the hospital in 1979, your children Catherine and Alistair complained to you about your ex-husband’s behaviour and on your discharge your then-husband wanted to prevent them from ever complaining to James. To remedy the situation, your then-husband split the truth on his youngest stepson and namesake Nicholas Fox. While you ensured we escaped with our lives, over 40 years later, you, your children and family are still attributing everything to his former stepson. In doing so, you are reversely siding with your former husband who held you “hostage” so to speak by causing you all to

reverse your attention and point the finger at me. However, by reversing into Fiona Edward's medical system, your combined knowledge recorded a long fox tale on her patient record system to resolve.

Ostensibly, I observe I do not have an abnormal condition of the mind involving a loss of contact with reality, but I do observe Nicholas Fox caused an abnormal condition of the mind involving a loss of contact with reality in his then-wife and stepchildren by playing with the term Nicholas. I also observe this still has a tremendous impact over the entire lives of you, my father, my brother, my sister, myself and all my former partners, friends, colleagues, and acquaintances. I also observe realisation will cause great distress to my family. Finally, as you may appreciate, medicine associates Stockholm Syndrome with the term Complex PTSD, of which dissociative stupor and fugue are extremely rare variants.

I recognise this has been difficult reading and I wish you a reasonable day. I attach a word association game link to YouTube. While it is inappropriate for me to wish Catherine a Happy Birthday, I hope you and your family are staying safe under lockdown and wish you good health and a successful recovery.

Yours sincerely,

Nicholas Fox
Mental Health Patient (ICD F22)

c.c.

Leanne Carrick
(Mental Health Act Administrator)
Mental Health Act Department
18 Mole Business Park
Randalls Road
Leatherhead
KT22 7AD

Neil Gambrell
(Key Worker)
The Richmond Fellowship
Croft House
12 Matham Road
East Molesey
KT8 0SU

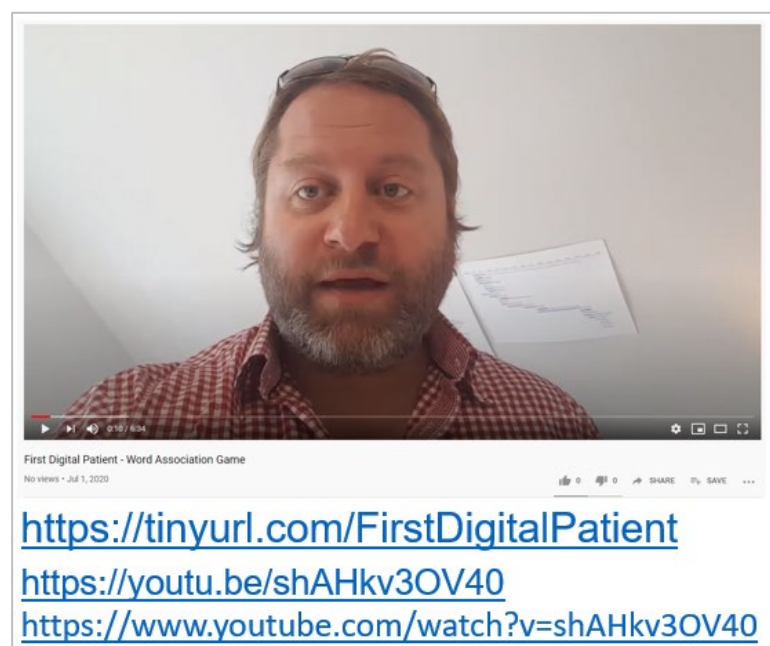
Alistair Lawes
(Brother)
8 Sevington Close
Birmingham
B91 3XL

James Lawes
(Father)
43 Westbourne House
Hounslow
Heston
Middlesex
TW5 0SL

Kerry Doughan
Executive Officer
Ministry of Justice
102 Petty France
Westminster
London
SW1H 9AJ

Catherine MacDonald
(Sister)
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Scotland

Clerk to the Tribunal
HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN





HM Courts & Tribunals Service

First Tier Mental Health Tribunal
H M Courts & Tribunal Service
PO Box 8793
5th Floor
Leicester
LE1 8BN

T 0300 123 2201

Website: www.gov.uk

To: Mr Lucas Lawes

From: Mental Health Tribunal

25 May 2020

Subject: USB device received by post MH/2020/14648

Dear Mr Lawes,

We are returning the USB device that was submitted. As part of our security regulations we are unable to insert any foreign device into our computers/laptops.

If you wish to remove the files from the USB and send them via email you are welcome to do so. Please send these to mhtcorrespondence@justice.gov.uk.

Kind Regards,

Christian Carter-Dawson

Team Leader

Communication and Correspondence Team | First Tier Tribunal (Mental Health) | HMCTS

Lucas Lawes
Flat 8, 1 Pavilion Place
East Molesey
Surrey
KT8 9FE

Fiona Edwards
Chief Executive
Surrey and Borders Partnership NHS Foundation Trust
18 Mole Business Park
Leatherhead
Surrey, KT22 7AD

28th June 2020

Dear Fiona,

First Digital Patient Request. HM Courts and Tribunals Service Ref: MH/2020/14648, NHS Number 436 788 1849

I hope you are feeling better and keeping safe. I am one of your mental health patients diagnosed with a persistent delusional disorder and a former Capgemini consultant.

I have read your Every Person, Every Story presentation and to my mind putting “our digital journey at the heart of our Clinical strategy” will create new possibilities for patient outcomes and reduce the burden on your services.

I would like your team to organise a presentation by me on 6th October 2020, to all of your doctors who used traditional ways of working since the 6th October 2009 to produce my psychiatric medical record, to great expense to myself and your organisation. And anyone else who would like to attend.

At the end of my presentation, I would like your team to arrange for my current care coordinator from Epsom CMHRS to give me my monthly depot injection. Afterwards, I would like my community team doctor to begin a demonstration of your digital vision, in collaboration with a police officer, by transferring me from CTO to Section 136 and sending me to Abraham Cowley Unit (ACU) in Chertsey.

Odd as it may first appear, I observe we share a win-win in a chicken and egg situation. In some ways, I surmise you are unable to realise your vision until it has been tried and tested, and, I am unable to realise my diagnosis until new ways of working and mindsets have been realised. You may safely assume I am deluded to make such a request. However, I introduced myself to you and we shook hands in ACU on your rounds a few years ago. I stayed for 7 months in your hospital at great expense to your organisation, without treatment. Your clinical team realised they had made a mistake, but lacked the tools, terms, encouragement, and empowerment to resolve it. I reversed myself into your hospital 4 times and would like you to begin the end my digital transformation journey by starting yours with a simple Proof of Concept using myself, who has the rarest and most complex of cases.

Yours sincerely,

Yours sincerely,

Lucas Lawes
Mental Health Patient (ICD F44)

Nicholas Fox
Mental Health Patient (ICD F22)

C.C.

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Clerk to the Tribunal
HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
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Surrey and Borders Partnership
NHS Foundation Trust



First Digital Patient

Delivering Holistic Patient Pathways

Patient: Nicholas Fox, ICD-10 F22, Persistent Delusional Disorder

Fugue II



00:00:02



01:11:07



Agenda

- Introduction
- Literature Review
- Methodology and Analysis
- Design
- Implementation
- Testing and Evaluation
- Conclusion
- Demonstration
- Q&A

Our Principles and Trust Values



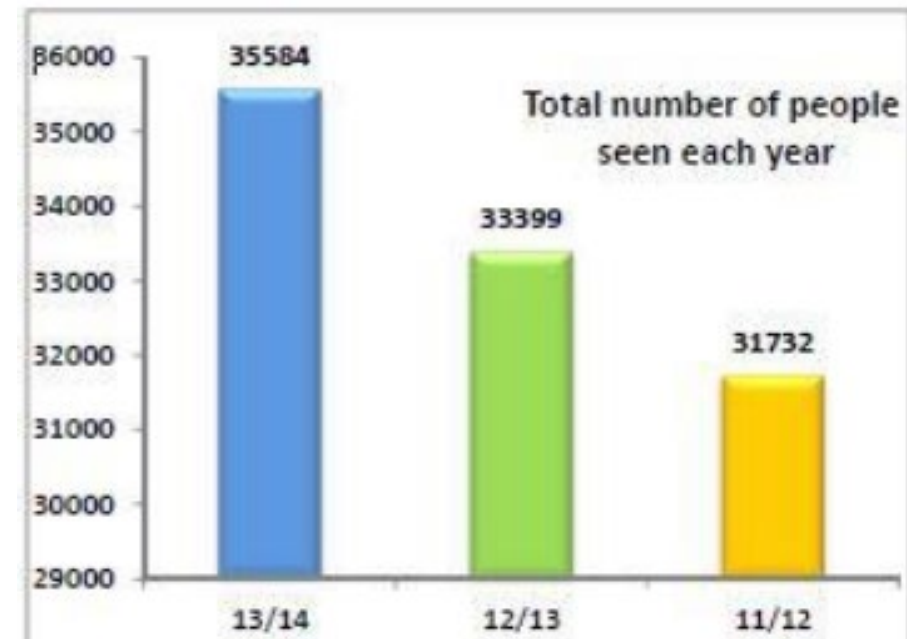
(SABP, 2020)

https://www.sabp.nhs.uk/application/files/3715/8220/4979/Every_Person_Every_Story_-_Our_Digital_Journey.pdf

Introduction

- **Increased pressures on our systems** - the numbers seeking help in the system are close to capacity and the flow in is greater than the flow out.
- **Surrey Heartlands Health and Care Partnership** aims to collaborate to improve health and care by 2022.
- **Smart ways of working** – for 850,000 people with a combined health revenue allocation of £1bn
 - Support and enable people to be healthier
 - Provide high quality and accessible care
 - Create partnerships that work better
- **Accurate data** unavailable
 - ICD-10 codes not routinely employed for all terms.
 - NICE interventions available but pathways unclear.
- **Tentative adoption** – equity of access and consistent standards of care not fully realised.

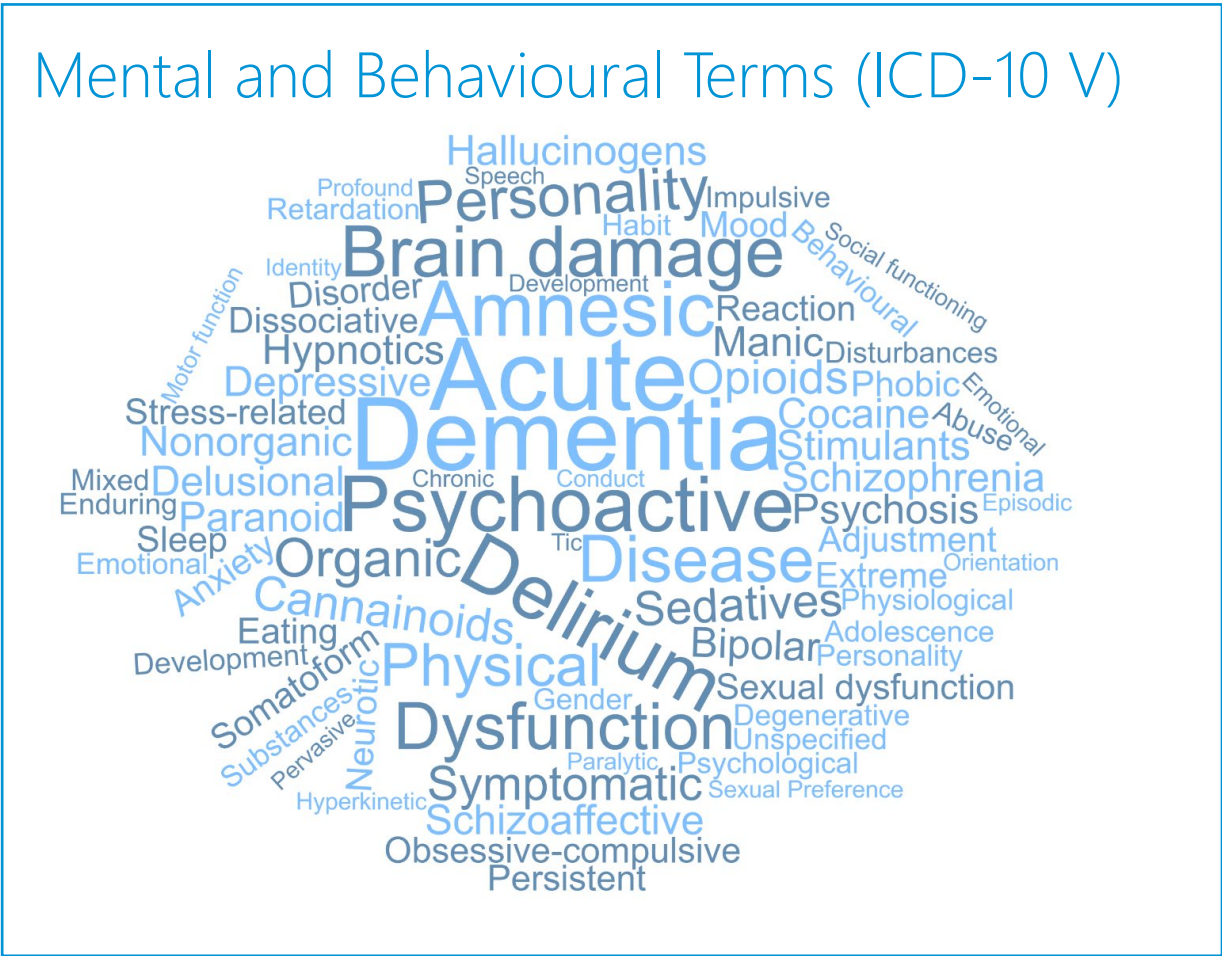
Number of people we see has increased



(SABP, 2015)

https://www.sabp.nhs.uk/application/files/8115/1541/1334/Strategic_Plan_2014-15.pdf

- [illegible]



Methodology and Analysis

- Support for Innovation in Clinical Service Design
 - Hold the person at the centre of all discussions and decisions
 - Be innovative and more responsive to the needs of individuals
 - Recognise the digital needs of clinicians and the rest of the workforce
 - Use of trusted data and analytics for better outcomes and decision making
- Digital Patient Enablement over Enhancement
 - Inception – prove the concept, circulate the idea
 - Elaboration – de-risk & shape the plan
 - Construction – deliver the solution with input
 - Transition – remote testing
- Requirements Gathering
 - Interviews with all parties
 - Discussions with Clinical Team and Interested Groups
- Deliverables
 - First Digital Patient
 - Alignment to National, Local and Trust priorities

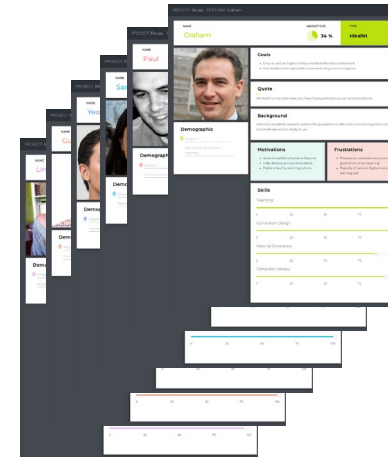
Immense effort, progress non-linear



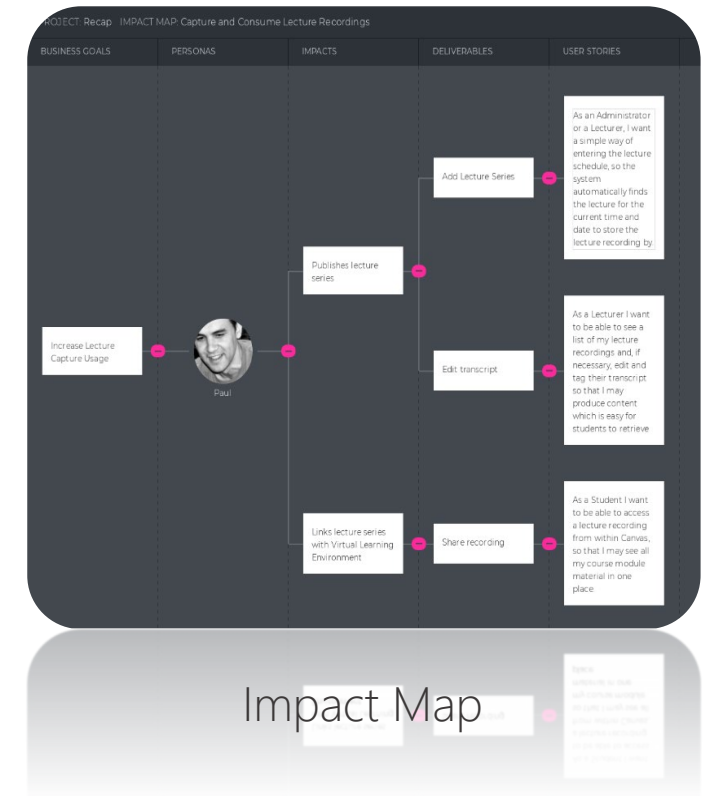
Design

- Aimed to improve productivity
 - Educational and Technological perspectives
 - Address satisfaction / adoption issues
- Requirements mapped to Design Goals
 - Increase term usage
 - Improve patient satisfaction
 - Encourage continuous learning
 - Enable deep learning
- Digital Technology Reduced Effort Required
 - Video Based Consultations
 - Collaboration between Services
 - High Quality Digital assets

Holistic Patient Centred Design



Family Personas

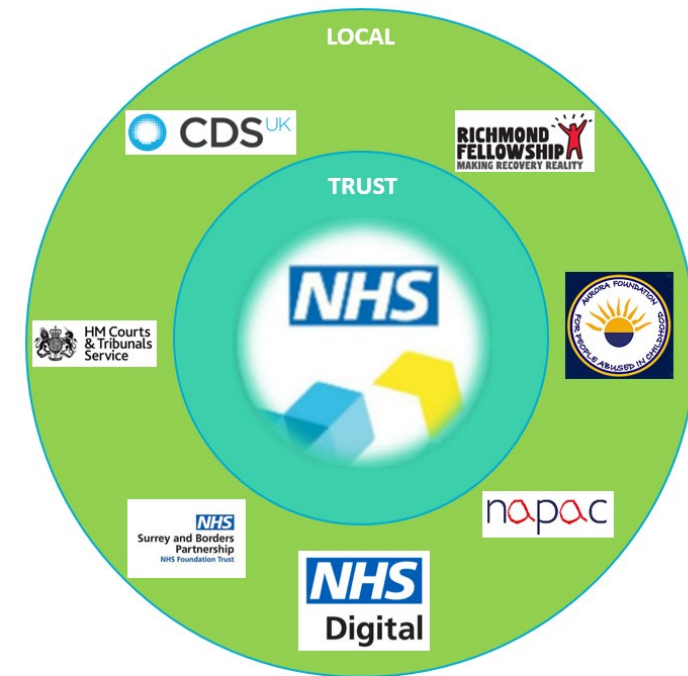


Impact Map

Implementation

- Based on Robust High-Level Design
 - Digital evaluation
 - Excellent communication
 - Seamless integration between parties
- Alignment with priorities
 - Create new models of care
 - Empowering people to use services
 - Building digital capabilities in our clinical staff
- Front line – Single Point of Access
 - Role based access to patient from all perspectives
 - Support for modern ways of engagement
- Construction of Solution
 - One Patient with unique misunderstood case.
 - Sections 136, 2, 3 and Tribunal.
 - Developing Quality Improvement with vibrant research mindset.

First Digital Patient Service



Collaboration the Capgemini way.

Testing and Evaluation

- As much as possible, continuously
 - Integration Testing passed
 - Performance, Stress and Security passed
- Transition
 - New ways of working produced unexpected results
 - Better risk mitigation
 - Less Detailed Solution
- Some Remote Patient Testing with Third Parties
 - Zoom, Skype
 - Improved clinical decision making
- Outstanding Tests
 - Usability Acceptance – to prove easy of use and productivity gains
 - Scalability - Testing solution at scale

Remote Patient Review impressed clinicians



Conclusion

- The First Digital Patient trial was somewhat comparable to service leader
 - Resolved case in fraction of the time and effort
 - Lowered barrier to entry into digital transformation
- Analysis identified opportunity
 - Wholesale transformation reduces demand on services and improves patient outcomes
 - Shifting the traditional narrative put #PeopleBeforeTechnology
- Future Work
 - Further Edge Cases (e.g. support patient-victims and patients with illnesses with trauma as the underlying cause)
 - Integration with a wider variety of local services
 - Live streamed Case Review
- Critical Review
 - Improved clinician learning over existing solutions
 - Showed strategic solution for SABP is possible
 - Patient Centric - solution written entirely by Patient

Digital versus Paper Patient Review



Demonstration

- 4th April 2021 by our First Digital Patient hosted by Qi@SABP.
- **Being digital** is a seismic shift from how we traditionally thought about IT.
 - It allows us new opportunities for our workforce.
 - And allows the people we serve greater access and control.
- In future, our assessment and care planning approach will be based on a **holistic approach** that takes into consideration the connection between:
 - Mind
 - Body,
 - Family and friends
 - Community and environment
- **Being digital** presents a change in mindset.
 - But it creates new possibilities for our systems of state which were previously impossible.


Digital pathways improve patient outcomes



Q&A



From Original idea

**HM Courts
& Tribunals
Service**

**Surmised Letters to the Tribunal
on a Persistent Shared Delusion**

To Resolve the Anomaly From all Perspectives
Without Everyone Being Together

Lucas Lawes
Flat 8
1 Pavilion Place
East Molesey
Surrey
KT8 9FE

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN


22nd June 2020

Dear Clerk to the Tribunal,
To Reveal a Recurring Anomaly. Ref: MH/2020/14648.
I have reached a point in time, where frankly, law has failed me, and I have had enough. Perhaps you shall read and see why I have suffered 41 years of being told falsely there is something wrong with me, that I am this and I am that. My former stepfather (Nicholas), mother (Gloria), father (James), sister (Catherine) and brother (Alistair) will not be attending your tribunal with me, and so I shall not be attending as I will not get a fair and just hearing. Equally, I am sure everyone knows how to use Zoom by now.





7 months later


To Final product




Video thumbnail showing a man in front of a building with the text 'abraham cowley unit'.

**NHS**
Surrey and Borders
Partnership
NHS Foundation Trust

**CDS** UK

**RICHMOND
FELLOWSHIP**
MAKING RECOVERY REALITY

**MIND**
MIND FOUNDATION
SUPPORTING PEOPLE ABUSED IN CHILDHOOD

First Digital Patient
COMPANION GUIDE
FOR A BETTER LIFE

Lucas Lawes | NHS Number 436 788 1849 | 28/11/2019

Thank you

Sometimes people write about their experience for a better life.



Agatha Christie from the Surrey area, suffered a fugue (betrayal trauma) in 1926.



Lucas Lawes / Nicholas Fox from the Surrey area, suffered a double fugue in 2009 and 2013.

A fugue, outside the traditional clinical definition, is the hardest and rarest disorder to diagnose.



First Digital Patient

COMPANION GUIDE

FOR A BETTER LIFE

Lucas Lawes | NHS Number 436 788 1849 | 28/11/2019

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Overview

This companion guide provides a brief summary of the patient's complicated background and prognosis for correct diagnosis. The conclusion is the patient has good medical insight and this should be expected given everyone involved comes from a medical family. The 70-minute video is rather verbose, and the patient sometimes incongruent and goes off on tangents, but this is to be expected of someone who has been psychologically abused over half their life. That said the combination of the 70-minute video and companion guide provide much needed clarity relatively quickly. Patient confidentiality needs to be assured not least because the reconciliation segment at the end of the video included the family's wedding albums and that will cause undue distress to the family.

Patient Background

The patient was born Nicholas Edward John Lawes on 4th April 1973 and in 1974 was taken by his mother to live with Nicholas John Fox and was renamed Nicholas Edward John Fox. At the age of 28 the patient reverted his surname to Lawes and at the age of 44 removed the names Nicholas John and named himself Lucas after a typo in a story written by a friend of his father.

The original story hid the names of the family and when the names were replaced with the actual family names, the patient was referred to as Lucas and Nicholas. This typo mirrors the life of the patient with Nicholas John Fox, where inside the home the patient became a smaller mirror image of Nicholas (or "tarred with the same brush" to coin the mother's phrase) to confuse the patient's elder brother and sister and outside the home the patient had an otherwise healthy image and normal life.

The patient first sought help aged 16 for trauma but was misdiagnosed as depressed. The patient next sought help aged 24 for trauma and reactive arthritis but was misdiagnosed with oligoarticular psoriatic arthritis from which the doctor said he would never recover from. The patient next sought help aged 36 for shock and trauma but was misdiagnosed as having an acute psychotic disorder and locked onto a mental health system with the next of kin still under the influence of Nicholas.

The patient is currently receiving involuntary treatment aged 44 for a serious mental illness of persistent delusion disorder. This is double bind relationship between the patient and the estranged family with the NHS stuck in the middle. To the mental health professionals, the patient is responding well to treatment because the patient is managing to work part time and attend University and to the estranged family the patient has abused them, is mentally unwell and should be kept away from.

The current patient diagnosis mirrors the shadow side of his scapegoat tag and enables his family to carry on as normal which is to keep away from Nicholas and “Nicholas” and concentrate on moving on in their lives.

The problem with the mirror effect, is the patient never does. The problem remains the same the first day it was wrought in May 1979 as it is today.

The patient problem is rare and abnormal in normal life, but common in cases of psychopathy where pernicious abuse is prevalent.

The patient problem is compounded by there being no solution since there is no law against scapegoating and there is little time for medical professionals to understand what it is like to be a scapegoat in a medical setting, whether growing up in a nursing home and entangled in a mental health system. Nicholas used to call the patient’s mother Nurse Gladys when she used to pretend there was something wrong with him to confuse her other two children.

Patient Journey

Dissociation is a disruption of and/or discontinuity in the normal, subjective integration of one or more aspects of psychological functioning, including but not limited to memory, identity, consciousness, perception and motor control. Most dissociative disorders are thought to be related to significant traumatic events or experiences.

Amnesia is the loss of memory due in this case to shock, fatigue and repression.

<https://wherethefugueami.weebly.com/what-is-it.html>



TRAUMA

On 6th October 2009 the patient suffered psychological trauma caused by childhood abuse, psychic shock, psychosomatic pain, memory blackouts and went to his mother's nurse training hospital A&E unable to think or speak coherently where he suffered a severe dissociative stupor. He was transferred to Abraham Cowley Unit and received a sleeping pill from Nurse Gladys on Blake Ward. His flat was vacated by his father and he moved to 44 Cranwell Grove, Shepperton and registered with the GP. He suffered severe headaches, memory blackouts and psychological trauma and began to realise what had happened in the past and why. His mother phoned him and then emailed the family he was abusing them causing his brother and father to break off their relationship with him. His mother phoned Abraham Cowley Unit before he was discharged and phoned Spelthorne CMHRS before he met his care coordinator Gemma and said this had nothing to do with her and her former husband, Nicholas, and she was the patient's primary carer and the patient had been mentally ill for a long time.

PSYCHIC NUMBING, FLASHBACKS AND NIGHTMARES

Isolated, the patient spent each day clearing up to 18 hours of psychological trauma, sometimes this extended days. The patient visited his GP and asked to see the discharge letter and discovered he had been discharged on the wrong code, F23 instead of acute reaction to stress, F43. From the patient's point of view, he therefore had no support structure or pathway with the NHS and so searched for a local service and discovered Aurora Health Foundation, now Aurora Foundation. The patient met the founder who put him in contact with the National Association of People Abused in Childhood, and eventually a therapist who taped their conversations.

The patient went from being unable to speak, to pouring out 1000s of lines of writing, to not being able to stop speaking. The patient used a video camera to record himself speaking, to slowly make sense of it all and learn to speak again. The patient's language, emotions and feelings in relation to his first 18 years of life were all contorted, and it took a year before he could even make sense of it. He suffered severe headaches in the prefrontal lobe and could not listen or concentrate or hold a two-way conversation for long.

THRESHOLD

In July 2010 he returned to contract work but could not clear enough trauma and so he left the contract early to clear more trauma. In March 2011 he took a permanent position but over the course of 18 months the trauma abated, and he began to have severe mental blackouts and a psychosomatic headache. He made his role redundant and left in October 2013 to care for himself, but by December 2013 the amnesia was so severe he could do no more than sit for days on end staring at the ground.

ABYSS

In April 2013 the patient turned 40 and met his father and mother separately. His mother took his phone and called his partner and then mailed it back to him. May 2013 was the 36th anniversary of her discharge from psychiatric hospital when she had been traumatised by her former husband but discharged with the wrong diagnosis. The patient invited her to visit him and video recorded her in his kitchen retelling her “little secret” with him and informing him that “all the family agree with her” to her false diagnosis. A week later the patient fell into a second dissociative stupor in St Peters A&E in Chertsey.

The staff member Jonny Green said it was the most severe case they had seen in years. The doctor asked the patient what he should do, and the patient recommended a sleeping pill and received one. The next day the patient was up and walking and was referred to Doctor Anand at Abraham Cowley Unit knowing he had the wrong diagnosis. The patient recommended to Doctor Anand to prescribe Quetiapine and he discharged the patient to the Home Treatment Team who watched the patient recover without taking any medication and Nurse Kate said it was incredible to realise the patient had recovered without taking anything. The stupor was an acute reaction to extreme stress caused by his mother. The patient was referred to Doctor Sandhu and reported the stupor was caused by psychological abuse by his mother, a retired nurse, and that he was a victim of Munchausen by Proxy and Scapegoating.

TRANSFORMATION

The patient was caught in a reverse situation and applied a reverse transformation to his life to try and resolve it, not at the beginning, but at the very end.

1. 2013 - The patient returned to work and coordinated the Richmond Fellowship and Spelthorne CMHRS to work together but on the anniversary of his first dissociative stupor the patient reversed himself into Abraham Cowley Unit, and caused his mother to have to report to Doctor Justin who said a mother wouldn't do that and the patient is therefore deluded. After discharge the patient went to video his mother's medical opinion and contact with Nicholas.
2. 2014 - The following year, on the next anniversary the patient videoed Nicholas for his opinion (Nicholas is not medically trained despite running a private nursing home) reversed in again, and videoed Nicholas still in complete control and power of the family and using the NHS to silence his scapegoat. At section 3 tribunal the doctor said the patient had a very serious illness and a nurse said the patient was a paedophile – a complete reversal of the truth.
3. 2015 - The following year, the patient was no longer able to support himself due to trauma, amnesia, isolation, bankruptcy and homelessness and so on the next anniversary he reversed in and was discharged to the Richmond Fellowship after a

7-month admission with no medication. Doctor Anand said he now knew not to believe the patient's mother and diagnosed F43.2, adjustment disorder.

4. 2016 - The following year, unable to receive benefits and his possessions and to avoid going insane, the patient held a workshop to review his case one last time and walked to his mothers in Wilshire and reversed himself back in to her local hospital. His mother said she does not lie and went to see the doctors as the next of kin. The patient was driven from Wiltshire passed his mother's first nursing home at Alderside, Lodge Lane, Salfords where Nicholas first abused the family to a temporary hospital before being transferred to Abraham Cowley Unit after the doctor who didn't know the patient decided to try something new. The patient was put on a CTO and told he would be on medication for a very long time - enabling him to claim long term benefits and have a direction of law to overturn when the dust had settled.
5. 2017 – The following year, with problems with memory and its function the patient returned to University as a mature student to discover whether memory function will improve over time and learn new coping strategies. The patient is well regarded on his course and mentors and gives advice to a lot of students. The patient learnt his everyday memory is likely to remain a long-term disability. The patient graduates in 2020 and hopes to do a Masters. The patient supports and mentors a friend with Complex PTSD and a friend who suffers from delusions and knows the difference well. The patient works part time at the weekends and the people he works with are like a new family.

ATONEMENT

The patient gave a correct account of the family dysfunction and cause of his two admissions to A&E to Doctor Sandhu from Spelthorne CMHRS who diligently documented what the patient shared by letter to Doctor Alvi 01/07/14 but discharged the patient without a representative diagnosis.

The patient has submitted this companion guide and 70-minute video to the NHS, third parties and his sister in the hope the case will be resolved retrospectively.

RETURN

When a case review takes place, it is hoped the NHS will see they were used by Nicholas to silence his scapegoat. Nicholas abused in a private nursing home and was the next of kin for the patient's mother when she was in psychiatric hospital in 1979. Nicholas planned to do the same thing to the patient when he was older after the patient finally realised why he was always wronged in the house and made out to be a spitting image of Nicholas. When the patient's sister realises as an adult what was really going on in the houses they shared with Nicholas, it is hoped the case will be closed fairly and justly.

An assessment of the patient and long-term diagnosis of damage to memory and its function will allow the patient to return to normal life and perhaps return to full time work. Whether the patient returns to his family largely depends on his sister since with a new understanding of why there was always so much fuss and bother about her youngest brother growing up, she will be able to determine which way round things should be.

Medical Terms

It is now 10 years since the patient fell into a stupor and was estranged from his family on a false basis. The correct terms of the patient's real pathway have not been recorded. The correct terms to be awarded to the patient's medical record are: -

Z62.3 - Hostility towards and scapegoating of child

T74.3 - Psychological abuse, confirmed

F43.0/F44.2 x 2 - Dissociative Stupor

F62.0 - Complex PTSD

F44.1 (enduring) – Amnesia / Dissociative Fugue

Supporting Evidence

- Doctor Sandhu's letter to Doctor Alvi in 2014 on Nicholas' primary sexual abuse victim's birthday, 1st July, details the psychological conflict.
- The therapist's client record at Aurora Foundation documents the patient's journey as Nicholas' scapegoat in the family.
- The key worker at Richmond Fellowship understands the condition is more psychological and the patient has not been believed over the next of kin.

Conclusion

Nicholas agreed in 1979 to not harm the children so long as the patient always got the blame for things instead of himself. The therapist's view is the patient-victim was caught in a drama triangle in which Nicholas used projective identification, in other words, Nicholas split the truth about himself meaning the patient learnt a lot about him. The patient's mother agreed to go along with the new arrangement in the family dynamic in 1979 and

told the patient, then a young boy, he will have to see if medicine does anything about it, but it probably won't.

The patient has asked Wiltshire Police to find: -

1. From his mother, his computer with his video recordings of his mother psychologically abusing him a week before his second dissociative stupor as this illustrates well how a stupor has been caused by having serious trauma and stress in his life.
2. From his father, his email documentation of the patient's first dissociative stupor which shows the patient's mother's behaviour under the influence of Nicholas and her children receiving news for the first time from their father that the patient was in hospital.

Ultimately with scapegoating once the dissociative states are shown to be caused by truth splitting, we can acknowledge this has occurred and recover the true person.

All in all, the 70-minute video is rather boring however the patient shows he has good medical insight into his correct condition before entering the medical system and continues to do so to this day. It is an interesting side note to realise an innocent looking box containing a half dozen eggs from the patient's sister can trigger an extreme reaction to stress in the first instance, but stranger things have probably happened.

On the date of Nicholas' birthday, 28/11/2019, the patient has completed 14,821 days as his scapegoat to cover up abuse and 3,708 days under the misdirection of mental health law in the UK. The patient as a young teenager was a Royal Marine Potential Officer, and the doctors even wrote that down as a delusion after talking to his mother.

Lucas Lawes

28th November 2019



The patient trekking to Kala Patthar, the viewpoint of Mountain Everest circa 2003, and with his sister in September 2009.

Appendix

The following documents combined with the SABP documentation of the next of kin show the dual direction of the patient's mother. Had she simply, quietly and compassionately given the doctors what she text to the patient, the doctors would have conducted the correct pathway.

The final document is The Angel, a story written by a friend of the patient's father who was a witness of Nicholas' introduction to the family in 1974 and was left so shocked by the level of deceit and behaviour she wrote about it 27 years later having never forgotten the extraordinary happens of the patient's mother leaving with Nicholas as their father "so not to confuse the children".

Ultimately, medicine is at its best when given to tools to see and this is a present day issue with psychiatry with faced with delicate and sensitive family issues.

NHS Number: 436 788 1849

1 Jul 2014

Private and confidential
DR SA ALVI
SHEPPERTON MED. PRACTICE
LALEHAM ROAD
SHEPPERTON
TW17 8EJ

CMHRS Spelthorne

Cedar Unit
Ashford Hospital
London Road
Ashford
TW15 3AA

Tel: 01784 884788
Fax: 01784 884458

Dear Dr SA Alvi

Re: Nicholas LAWES, DOB 4 Apr 1973

OPA at the Cedar unit, Spelthorne CMHRS on 30th June 2014.

Diagnosis- Persistent delusional disorder F22.0

Care Co-ordinator- Carol Lawrence, SW.

CPA status- Standard care.

Current medication- nil (patient was on Quetiapine XL 350 mg od during his inpatient admission between 16-12-13 to 13-1-14 but discontinued it of his own accord following his discharge from hospital).

Nicholas was reviewed in the outpatient clinic on 27-06-14 together with her Care Co-ordinator Carol Lawrence.

Prior to seeing the client I was informed by his Care Co-ordinator Carol that the client's mum has provided h/o his sister being sexually abused by her stepdad as a child and she has also revealed that Nicholas was sexually abused by a pupil at school in 1984, aged 11 years.

Nicholas told us that he stopped his antipsychotic medication as mentioned above as he was not made aware that he would need to continue the medication.

He also stated that he does not think he is mentally unwell and therefore does not need medication.

Nicholas spoke at length re- past issues related to psychological abuse by his mum, reportedly under the influence of his step dad Nick Fox whom he described as a paedophile and part of a paedophile ring.

He stated that he has been a victim of Munchausen's by proxy as his mum has tried to deal with stepdad's abusive behaviour by labelling Nicholas as mentally unwell and trying to convince his biological dad James that the client is mentally unwell.

Nicholas mentioned that his sister was sexually abused by stepdad as a child.

He also told us that he was abused by stepdad's friend at age 11 years in a park where he was sent by his mum, who he believes was aware of the plan.

Nicholas told us that he has been subjected to 35 years of deceit by his stepdad and his mum was aware but was unable to tackle the problem as she was under stepdad's influence.

Nicholas stated that he feels stressed about engaging with Mental Health services as he does not believe he is mentally unwell.

He continues to work full-time in IT but told us that he had to take time off work yesterday due to feeling stressed re- his OPA today.

He was of the opinion that his previous diagnosis of acute psychotic episode secondary to stress, as made during his admission to Mental Health unit in 2009 was accurate and that his subsequent diagnosis of persistent delusional disorder is inappropriate and that he is not currently mentally unwell.

On MSE-

Patient neatly dressed, well groomed.

Good eye contact, fair rapport.

No psychomotor abnormality.

Speech- coherent but circumstantial, elaborate and tangential, difficult to follow patient's train of thought.

Mood- fine.

Affect- euthymic.

T/P- Persistent delusional beliefs re- his stepdad being a paedophile and his mum colluding with stepdad etc., as mentioned above.

No other paranoid thoughts, no hallucinations.

No thoughts of self-harm, suicide, or harm to others.

No issues re- self-neglect.

Cognitions- grossly intact.

Insight- poor.

Plan-

Attempted to acknowledge patient's past stresses and explain his current condition to him- patient disagreed.

Advised to recommence Quetiapine as previously advised- patient unwilling.

Also unwilling to engage in psychological therapy.

In view of above and current low risks, to discuss case at next MDT meeting.

02-UK 4G

11:10



< Back (16)

Gloria

Contact

Yesterday 11:22

I appreciate what you are saying and you did have a psychic shock and an identity crisis. We are all agreed about that.

Now I want to cheer you up abit and would like a chat. David and I have been down to our local rec. and helping W1 put up marquees for [tonight's](#) bonfire. It was raining and blowing hard!

I have made 45 gingerbread men for [tonight](#). We sell soup and mulled wine too! How do you feel today? What have you done this morning?



Message

Send

REPORT 17 (Unfriendly text received from Kerry!)

From: [Jim Lavery \(jmlavery@btinternet.com\)](#)
Sent: 18 October 2012 11:44
To: [Aislinn James Lavery \(jmlavery@btinternet.com\)](#); [catherine.mcdonald@btinternet.com](#)
Subject: 17 (Confidential)

Following the phone being put down by Kerry 1 hour ago, I have now received the "Jim, Never again copy me into a text you are sending to me."

His mother should be strung up.

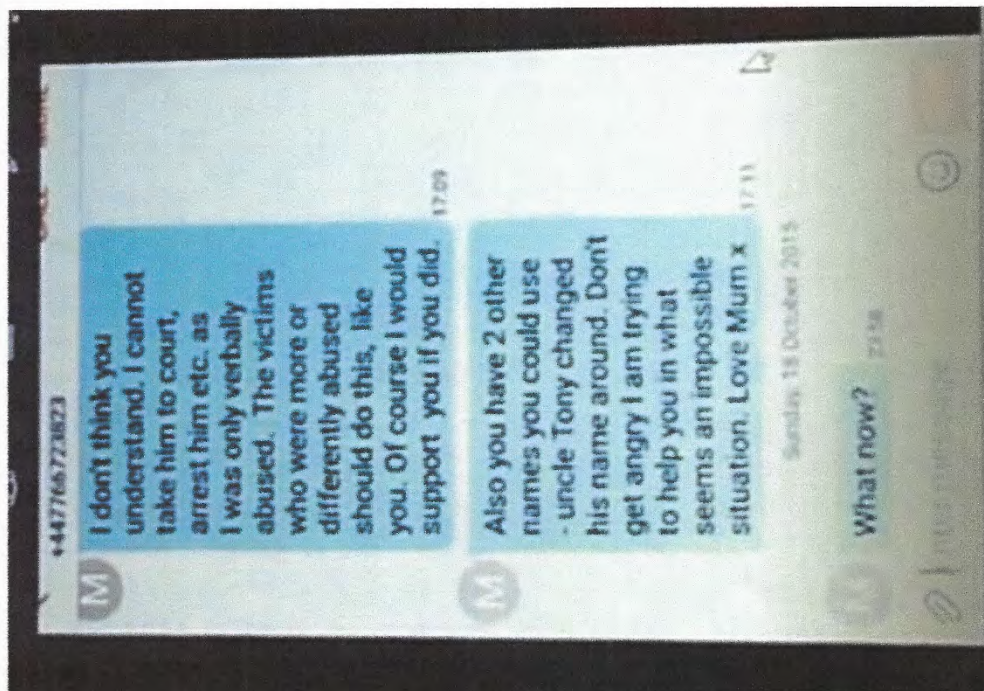
Please do not contact me again.

Speak to Rick gently and speak to his Doctor if you want to help.

I have enough worries with my own family"

End of text

Maybe I was unreasonable when I spoke with Kerry beforehand. But for her to only victim and that we should not say that we have been emotionally abused has to argue the point with me, was not what I wanted to hear.



From: Edward Lawes
Sent: 07 November 2019 15:53
To: lucaslawes@gmail.com
Subject: FW: Nico

From: Gloria Mortimer <gloriamortimer@btinternet.com>
Sent: 02 October 2014 17:38
To: 'Dad' <jimlawes@hotmail.com>; Catherine MacDonald (Catherine MacDonald) <Cathlawes@hotmail.com>; Alistair Lawes (Alistair Lawes) <alistairlawes@hotmail.com>; Tony Williams <tonykwilliams@btinternet.com>; Bobby and Barie Burkill <Erburkill@aol.com>; 'Kimberley Perry' <kdburkill@gmail.com>; Katie Burkill <kateburkill@yahoo.com>
Cc: Nik Lawes <nejlawes@hotmail.com>
Subject: Nico

Hi everyone

I am writing to you all to give you all an update on Nico.

First Nico is the name he has chosen, which his Dad calls him by and he likes that. Everyone will then know who we are talking about.

Nico and I are now in constant contact by email, text and phone and are working through what we call a transitional phase. He says I am a good mother!

It is very hard for us both, especially Nico. He would like me to point out that he realises his emails have upset people but he has been working through a difficult phase and "chucking out all the bathwater" so to speak. (my words) It is his way of working through all the trauma of the past.

I have spent a great deal of time deciphering what he has said and it does make sense to me but he says himself he does not find writing very easy at present and things come out on paper in all sorts of different ways. His brain has been working overtime and he has difficulty writing coherently at present. It is getting "better" though.. David has been extremely supportive too.

Thank goodness he has not developed the dreaded Schizophrenia after such a shock. (2009). I really do believe he can come through this ordeal.

He sounds different on the phone, just a pleasant chatty son.

We agree that we have to find a way forward for future mothers with children. Nico will find a way.

He is not writing to you all today because he is resting at home with a severe headache which will probably last a few days.

That's is all for now.

Be patient with him, send him your love, he misses you all and says he loves everyone.

Love to you all



From: Jim Lawes (jmlawes@hotmail.com)

Sent: 26 October 2009 13:56:00

To: Alistair James Lawes (alistairlawes@hotmail.com)

Dear Alistair,

Thank you for your very helpful and interesting email.

I'm glad that your Mother has spoken to Nik..and am pleased but somewhat surprised that he had a lot of things to say about me. As least he is speaking/talking rather than being non-communicative...that's a positive point.

Interestingly also, is that Nik was saying to me only the other day..that he was too scared at the moment to speak with his mother and he needed more time. So, good that she has spoken to him..and her thoughts on his behavior on the phone were notable.

It's a pity that Nik doesn't seem to have many supportive structures around him. I'm thinking about having friends, contacts and fellowship via hobbies, interests or sporting activities. He seems to speak about himself and his "round and round in circles" thoughts. He seems to have at least two sides to him. On the one hand he can be the jolly Nik whose company we all enjoyed..and then he flips..or slowly changes.

One could say that at a time like this when he is homeless, jobless, and down in the dumps that this is the best way to help him. But how many hours has everyone spent talking to him..or amongst yourselves about him. Perhaps he should be asked to put his thoughts down in writing and get someone (or us all to reply) Actually that might be a good idea.

The problem with my speaking to the MHU is that are likely to call Nik in and say "Your dad says..." etc etc. They have a tendency not to be discreet (Sp?). Unless I tell them to be so. Maybe your Mother should speak to Doctor Hannah in response to the phone conversation she had with Nik...with a view to her having a meeting with them.

I honestly did not meet NJF until well after Nik's first birthday i Dad when Nik was 20 months old.

Nik had his first trauma at Reigate School where I understood by a 6th form boy whose name he refused to mention. You, A question! At no time were we led to believe he had been raped at all and despite going to his headmaster about it we did not doctor too. Since then, he has refused ever to talk about the i any questions and remained mute whenever he has been extre one of his coping mechanisms.

He had a particularly bad phase at Wellington School when the mute and refused to speak to anyone and they were having ser saying lots of negative things about NJF then but when asked a the school several times and found he wasn't doing his work etc of the Royal Marines and thought he needed plenty of military t cadet force. This he loved as he was recognised as being a ve them proudly wearing his uniform. He was very disappointed tha the marines. The problem was he spent too much time doing thi towards his exams. You know the rest.

By the way the reason I think Nik has adopted the habit of refus Shepton Mallet I think, that when asked why he would not reply t especially by NJF he said-

1. If he did not reply, he cannot be accused of doing something had been accused of. If he said he did not do something NJF w

2. If he said nothing then NJF and I would not row. He hated hear

NJF always accused me of sticking up for the children instead of

I tried to talk to Nik so many times but he often slammed up (perh

11/2019

Mail - Edward Lawes - Outlook

Problems and possible solutions

Gloria Mortimer

Wed 12/03/2014 12:30

To: Nik Lawes <nelawes@hotmail.com>
Hi Nik

Since your last email I have had time to think about what you have said.

I have had enough of your false accusations, insulting behaviour, denigrating language, bullying and harassment towards me and the rest of the family -- none of whom want anything to do with you as you are at the moment. DO NOT bother to contact me in your present state of mind.

You seem to have been born with a nervous sensitivity which has been exacerbated by NJF and this has probably led to your present instability. You now have an inferiority complex and a chip on your shoulder, brought on by a lack of self-confidence which has resulted in fear of failure and not taking responsibility for your actions. This complex was probably nurtured as a child by NJF mocking you, and making you feel inferior and getting angry with you when you lied.

You say you have a strong, rather different but confident brother, who you felt always told you what to do. In actual fact Ali sometimes took real punishment (he was smacked) for what you did, because you blamed him. Does it matter that you and Ali have different personalities? Yes, you did lie at an early age and this has continued on occasions throughout your life. Once you get a label it tends to stick as you found out.

You often chose not to reveal what you had done and decided not to say anything thinking you would not be believed by NJF. Instead you should have clearly stated that you had not lied and explained why. This led to you covering up misdemeanours when things went wrong in your life. Eg. You stole from Fosse House when you wanted money and sold items at Wellington School, I believe.

When your Housemaster called us about the problems they were having with you, you decided to remain MUTE SO THAT YOU DID NOT HAVE TO ADMIT YOU HAD DONE WRONG. This started at home at Shepton when you decided initially not to talk and tell me your troubles because it could bring on a row between me and NJF. Rows were caused because I ALWAYS stuck up for you (and your brother and sister). See my email of 20th May 2013 "Thoughts about you" where I described my thoughts re Wellington and your jobs.

So not talking to me about what you had done grew into a fear and not saying anything because you did not like being told off. None of us do. But we all should confess our sins and own up and not blame others instead!!

You always liked having lots of money but were rather lavish in your spending. You ask for money from your Dad and then spend it lavishly again! You tend to accept money you are given, some probably on loan, but make no effort to repay. You have demanded money from me (£500, 000 at the beginning, you say, but a

es://outlook.live.com/mail/0/deepink?version=2019102702.17&popup=2=1

11/2019

Mail - Edward Lawns - Outlook

You are ill Nik and we all want you to get better. Start using your heart instead of your head. Feel something, show you care about others. You cannot control everybody else. Why did you not tell me about all these issues years ago, why now?

You need to trust me which seems almost impossible to you because you are ill. I have supported you for 40yrs and as your Mother I will not give up hope that one day you will behave normally and interact with the family again.

It is possible and up to you. Think of Wendy for starters. Do it for her. Relaying these issues over and over again and waiting for me to see the error of my ways is futile and a waste of time and energy and achieves what?

ONLY YOU can make yourself well again by focussing on the right things. If you need specialist treatment then perhaps I can help with that financially.

On the NEGATIVE SIDE-

If you want to make yourself even more ill, continue down the path you are now treading believing you know better than everyone else and not listening to good sound advice (i.e. Psychiatrist and all the staff of the Mental Health Team), then you will not be able to lead a normal life and most likely become really ill next time.

On the POSITIVE SIDE:-

The path you take is yours and yours alone. Make it the right one.

Lots of love

Mum xx

07/11/2019

Mail - Edward Lawes - Outlook

FW: Brother Nick

Alistair Lawes <alistairlawes@hotmail.com>

Tue 07/10/2014 13:13

To: Nico Lawes <nejlawes@hotmail.com>

Date: Fri, 3 Oct 2014 12:30:39 +0100

Subject: Brother Nick

From: njfox57@gmail.com

To: alistairlawes@hotmail.com

Hello Alistair,

I had a visit for your brother, Nick a few weeks ago and again a couple of nights ago. It was rather disturbing and worrying.

Are you prepared to discuss?

I hope you are well and enjoying life.

Kind regards,

Nicholas Fox (Stepfather of old!)

RE: Nico

Alistair Lawes <alistairlawes@hotmail.com>

Tue 07/10/2014 13:29

To: Nico Lawes <nejlawes@hotmail.com>; Mum Gloria Mortimer <gloriamortimer@btinternet.com>
Cc: Dad <jimlawes@hotmail.com>; Catherine <cathlawes@hotmail.com>; Tony Williams <tonykwilliams@btinternet.com>;
Bobby and Barie Burkill <erburkill@aol.com>; Kimberley Perry <kdburkill@gmail.com>; Kate Burkill
<kateburkill@yahoo.com>

Hi Nico,

I've just forwarded Nick Fox's email to you, complete with his Email address.

To Nico and everyone else you've emailed about this,

I received the Email from Nick Fox after Nico visited his home twice just recently. He wanted to know why he had visited and asked for my help.

I have and will not reply to that Email. I do not wish to start communication with Nick Fox. I haven't had contact with him since before the divorce.

I told Mum about the Email and during a conversation with Nico she mentioned it then agreed for him to receive a forwarded copy.

I'm not very pleased this has happened, but agreed to follow Mum's instruction.

Nico, as you've told the family about this I've replied back to them too.

I warn you that contacting Nick Fox either by Email or directly in person (again) maybe something you regret in the future. I wouldn't do it if I were you. We can't stop you, only advise and help you.

Love & best wishes,

Alistair xxx

Subject: Re: Nico

From: nejlawes@hotmail.com

Date: Mon, 6 Oct 2014 10:49:58 +0100

To: gloriamortimer@btinternet.com

CC: jimlawes@hotmail.com; Cathlawes@hotmail.com; alistairlawes@hotmail.com;
tonykwilliams@btinternet.com; Erburkill@aol.com; kdburkill@gmail.com; kateburkill@yahoo.com

Hi Folks,

Ali, please would you email Nick Fox's email for me he sent to you to avoid my reaction.

Relativity is the process of resolving issues fairly and equally.

The Angel

It might have been the rain that was falling gently on London that Thursday afternoon in December. The drops settled in a fine mist on Jim's cheeks. They settled on his glasses, changing his vision into a somewhat hazy, impressionistic picture of lights, glitter and people. The Salvation Army band could be just heard from Oxford Street, wishing everybody a merry Christmas. It could have been the rain, the lights or the mood of the moment that made Jim think, that he spotted an angel in the crowd and that something wonderful was going to happen that day.

Jim was faced with an unexpected afternoon off. His business contact did not turn up. They reorganised the date with the help of their mobile phones and now Jim was here, in Regent Street, dark mid afternoon, following an angel. The long blond hair walked in front of him at a leisurely pace. Together they stopped to admire the shop windows. First Dickens and Jones. He felt like a child looking through frosted glass, having first made a spy-hole in the ice by breathing on it. Mannequins with languid expressions and iced hair in psychedelic colours were staring into the cool, frosty wonderland.

He followed the angel to the displays at Hamleys. Looking at the toys he felt a pang of pain and remorse. He had never bought a train set for his sons or a teddy bear for his daughter, or a rocking horse... To escape the uncomfortable feeling he focused on the reflection of his angel in the glass. The face belonged to a young woman; it was round and pleasant and made him think of a cosy afternoon, sharing a pot of tea in Fortnum and Masons. He started to toy with the idea of approaching her. "The angel" now moved on, to the windows of Liberty's. It was there when another angel appeared. It was a young, male specimen. They embraced and kissed and that was the end of Jim's brief encounter. He was left with a flimsy fantasy of what might have been.

He decided to walk down Regent Street and maybe have tea on his own. Near Piccadilly Circus he caught a whiff of roasting chestnuts. He never could resist the roasted chestnuts. He remembered the last time, when he came with Alistair and Kathrine. They ended up as a bunch of black chimney sweeps. They deliberately pressed their sooty fingers on one another's cheeks and then they laughed and laughed. Lucas was too young to come and had stayed at home with Gloria. Nibbling the hot nuts Jim was making his way through the crowd towards Fortnum and Masons. He passed a family of deer, made of tiny little white lights, grazing in the yard of St. James's church. Two jolly Santas overtook him, zooming past on roller blades and leaving behind the sound of jingle bells on their red hats. The sound reminded Jim of another treat, the Fortnum and Masons clock. He used to come to Piccadilly when he was a little boy and waited, full of excitement, for the clock to strike and for the door to open. The liveried servants walked with lit chandeliers on the balcony and disappeared again only to return some sixty minutes later.

Jim stopped. It was almost 4 o'clock. He became aware of his heartbeat. How many years since he was standing here, Kathrine's little hand in his, Alistair tugging on his sleeve impatiently: "Daddy, daddy, when will they come?"

It all seemed a long, long time ago. Kathrine was now married and Jim was a grandfather, but he had not been here for almost quarter of a century.

He watched the enchanting scene and then decided to have a glass of wine instead of tea. The rain stopped and it was noticeably cooler. The lights of the traffic mingled with the Christmas lights. He dived into a café and ordered a glass of red. The street was busy. The shoppers were passing by with carrier bags and parcels, one or two carried small Christmas trees. Jim was feeling somewhat deflated and lonely. A man

with a heavy overcoat was about to sit at the next table. As he took his coat off, something fell out of its pocket. Jim picked it up.

"Excuse me", he said, "you dropped something."

The man smiled.

"Ah, thank you. Very kind of you. I wouldn't want to loose this. My grandchildren. They live in New Zealand. Would you like to have a look?"

Jim took the photograph and the man extended the conversation.

"I would prefer them to live closer and to see them growing up, you know. Are you a family man yourself?"

Jim put the picture on the table.

"I used to be", he said hesitantly, "but my life - crumbled. My wife left me, married again soon after our divorce. I had no access to the children because, she said, she didn't want to confuse them."

The young waitress noticed that Jim spilled some wine and came to clean the table.

Jim, quite unaware of this, continued.

"She believed that the children should have only one father. The new one. She changed their surnames. It felt like they were stolen from me. I tried to distance myself from it all. I didn't insist, did not fight. I tried to escape that chapter of my life, I just wanted to forget."

"I am so sorry," said the man. "How is it now, may I ask?"

Jim realised that he was discussing with this stranger something he had wanted to lock away forever, but to his own surprise he was willing to talk.

"When the children grew up, the older ones tried to contact me. Nicholas couldn't remember me at all; he was just a baby when it all happened. I obstinately refused any contact. I didn't even accept an invitation to Kathrine's wedding for fear of meeting my ex-wife and her new husband, Mr Fox. That dreadful feeling of rejection and deception was more that I could cope with. Kathrine has two children now and

He closed his eyes and took a few deep breaths. He put the cat gently on the floor, then went to his desk and selected the biggest and brightest Christmas card he could find. He wrote his reply to little Daisy, whom he had never seen. As he was taking it in the dark to the post box on the corner of the lane he was practising, aloud, his "HO HO HO".

Marie Hedger, 2001

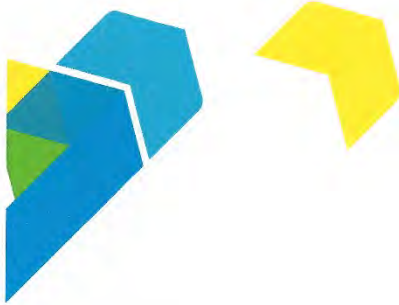
Edited Nov 2007-11-27

1403words

Agatha Christie was from Surrey and suffered a very public fugue in 1926 when she was discovered in Harrogate. She went on to become a prolific writer about psychopathy and invented characters like Miss Marple who used deductive reason to resolve complex family cases the police and doctors could not resolve.

<https://www.psychologytoday.com/gb/blog/hide-and-seek/201203/dissociative-fugue-the-mystery-agatha-christie>





Information Governance
18 Mole Business Park
Leatherhead
Surrey KT22 7AD

Tel: 01372 216059
Fax: 01372 217114
Email: IGTeam@sabp.nhs.uk

03 January 2017

ID Number – FOI 3990

Email address – request-373097-1cca6b7b@whatdotheyknow.com

Dear Mr Lawes

I refer to your request for information received on 22nd November 2016 and our subsequent acknowledgement of the 1st December. I apologise for the delay in providing a response to your request but the Trust is currently experiencing an increase in the number of requests to process.

I am now in a position to respond to your request; please see our responses below:

I am researching CPTSD and more specifically, Type 2 Complex Trauma victim-patient cases with disassociative fugue/stupor.

Please would you take your time over the next few months to compile answers to these questions and share the following, based on your record system and information publicly available on Google by searching "agatha christie fugue december 1926":-

1). How many cases of F44.2 Disassociative Stupor have been recorded by SABP/E&A since your records began?

Trust Response: Information is exempt from disclosure under Section 40 of the Freedom of Information Act 2000 (FOIA) (personal information) where to release it would contravene the requirements of the Data Protection Act 1998 (DPA). In order to comply with the DPA, disclosure of personal data under the FOIA must be fair (the first data protection principle). Having taken this into account, the Trust has decided that it would not be fair to release exact numbers where those numbers are less than 5, as this could lead to identification of the persons concerned. This information is therefore exempt under FOIA Section 40(2).

2). How many consultants have diagnosed cases of F44.1 and F44.2 in the last 8 years?

Trust Response: 5 consultants.

3). How many cases of ICD-11 F62.1 have your consultants diagnosed since ICD-9?

Trust Response: We use ICD10.

For a better life

Trust Headquarters, 18 Mole Business Park, Leatherhead, Surrey KT22 7AD

4). How many cases of ICD-11 Z62.1 have your consultants diagnosed since ICD-9?

Trust Response: We use ICD10.

5). Does Google Maps say Silent Pool, Newlands Corner, Guildford is local to Farnham Road in SABP's district?

Trust Response: Yes it does – it is in the Guildford Borough Council area.

6). If Agatha Christie went to Silent Pool this Christmas, in utter shock and disbelief (stuporified), name the local service provider you would refer her to, once she had stabilised and come off Section 2 and given leave from Farnham Road Hospital? (Excluding the historical facts her home address was Berkshire and she was found at the Old Swan Hotel in Harrogate)

Trust Response: The service received by Agatha Christie would ordinarily depend upon the location of her GP, based on the information provided we cannot answer this question with certainty.

7). Based on your current ways of working, "Triangle of Care", would you have procedures in place of handling her "next of kin" carefully and delicately?

Trust Response: Yes we would have expected ways of working based on the Triangle of Care. We cannot answer this question in detail as it would depend on the individual circumstances of the carer and the cared for person.

8). According to publically available version of the The Lancet, there is only one listing the term "fugue" recently (100 or so overall). That is, cases of "fugue" and "stupor" are said to be very rare and special. According your record system, what is the prevalence of "fugue" and "stupor" between 2008-2016 and since your records began?

Trust Response: We have 9 cases over the period in question.

9). In psychobabbly, there is said to be something called the "Law of Power 44", and Agatha wrote many works, including "They Do It With Mirrors". As the third most published author in English, will your Medical Director be highlighting the 90th Anniversary of Agatha's disappearance in any special/low key way?

Example research reference links:-

<https://www.google.co.uk/search?q=agatha+christie+fugue+december+1926>

<http://www.sciencedirect.com/science/article/pii/S014067360102520X>

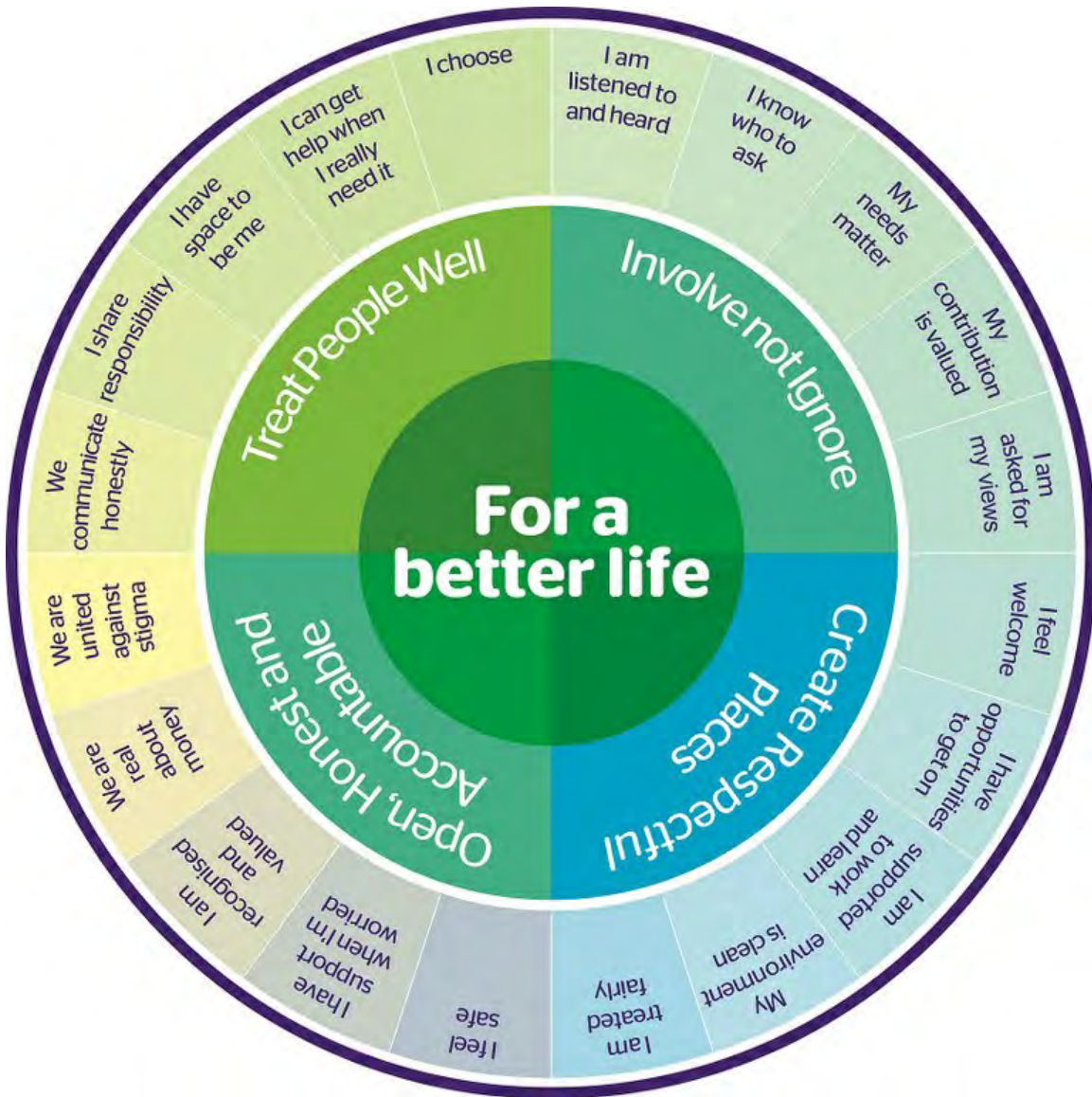
[http://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366\(14\)70279-2/fulltext](http://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(14)70279-2/fulltext)

Trust Response: We have no current plans to highlight this anniversary.

If we can be of any further assistance to you please do not hesitate to contact me.

If you are dissatisfied with the outcome of your enquiry, you have the right to appeal and in the first instance this should be to Jo Young, Caldicott Guardian, Surrey & Borders Partnership NHS Foundation Trust, 18 Mole Business Park, Randalls Road, Leatherhead, Surrey KT22 7AD.

If you are still not satisfied with the outcome, you can write to:



Lucas Lawes
Flat 8
1 Pavilion Place
East Molesey
Surrey
KT8 9FE

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

22nd June 2020

Dear Clerk to the Tribunal,

To Reveal a Recurring Anomaly. Ref: MH/2020/14648.

I have reached a point in time, where frankly, law has failed me, and I have had enough. Perhaps you shall read and see why I have suffered 41 years of being told falsely there is something wrong with me, that I am this and I am that. My former stepfather (Nicholas), mother (Gloria), father (James), sister (Catherine) and brother (Alistair) will not be attending your tribunal with me, and so I shall not be attending as I will not get a fair and just hearing. Equally, I am sure everyone knows how to use Zoom by now.

In our society, we accept that for all its wonderful points, its ways of working are not perfect. In our intra-familial case, there is no law against scapegoating. Continual lying about me by Nicholas and Gloria to their advantage goes unseen and unrecognised. When seen for what it has been these last 11 years under the mental health law you administrate, Munchausen by Proxy, there is no law against it, and so it remains unresolved for me, year after year.

From our intra-familial perspective, it all began in 1979, shortly after my 6th birthday. Gloria, aged 36, went into shock on discovering Nicholas, her second husband, was sexually abusing Catherine. Gloria reported what had happened to the GP who sided with Nicholas, despite Gloria being a nurse by profession. Under section, the doctors diagnosed Gloria as a hysterical, deluded, and mad wife and medicated her. The authorities following mental health law did not support what she told them and as a result she faced losing everything, including her children, of whom I am the youngest. Nicholas was therefore free to stay at home, absolved of any wrong-doing. Catherine and Alistair felt terrified of Nicholas while I was too young to know what was happening. They missed Gloria, and she was worried something might happen if she did not go back to Nicholas. After a month, the doctors discharged Gloria and Nicholas drove us three children to collect her and take her home.

This created an anomaly within our intra-familial dynamic which remains unresolved to this day.

After returning home and closing the door to the world outside, Nicholas felt empowered as the law had sided with him and Gloria felt disempowered and betrayed by the profession her family had served in a lengthy line of women that extends back to working alongside Florence Nightingale. Nicholas was quick to rule the roost. If Gloria did not do what he told her to do, he would kill her children and himself and make it look like she did it. She was to split the truth for him on his namesake, and by doing so prove to him she could control his stepchildren and his primary challenger, their father

James. Nicholas named himself Daddy, and since he had already named his youngest stepchild Nicholas, he had mirror symmetry. Gloria was to tell her three children she had had pneumonia and recovering from that had caused her to suffer mental ill health. Gloria was then to create an alternate world in which Catherine and Alistair would grow up in. In this world Gloria was helpless and terrified and all they could do is stay quiet, think positive and focus on doing well at school. But Catherine and Alistair wanted to go back to their father, James, who they were old enough to remember from 1974. Nicholas would not allow it until they were the legal age of 18. In effect, he was to keep them captive. There was to be no TV, no telephone calls, no friends round, no visits to friends and James was to be told he could not see them except for a few hours once in a blue moon. Gloria was told that inside the house I as Nicholas would become the black sheep, a constant source of problems, and much like him. An idiot who could never be trusted, who lied, who misbehaved, was nasty, naughty and a terror who threatened the peace and tranquillity of the house.

Under these new brutal and intense conditions, Nicholas would always be free to continue to enjoy his life and do whatever he pleased. Gloria, Catherine, and Alistair would hate me, and I would suffer the consequences of his sins. It began by Gloria telling Catherine and Alistair they could not go back to James as I was too young. Nicholas then called me down to the bottom of the stairs where he stood with Gloria. Nicholas raged and yelled at me until he was crimson in the face, the vein on the left side of his neck bulging as he mustered all the force into his voice that was possible.

"You have done wrong. Tell me the truth," Nicholas bellowed, threatening to go berserk.

"I have done nothing," I replied meekly, with shock waves still reverberating down my spine, my feet frozen to the spot.

"Admit the truth to him, otherwise he will get furious," came a panicked whimper from Gloria, "and he will punish me and your brother if you do not admit the truth."

From there Nicholas really ruled the roost. Nicholas continued to molest Catherine and later arranged my sexual assault. From the outside of his houses, Nicholas appeared to live a normal middle class life, but inside the home he tightly controlled a regimented and utilitarian alternate reality from which only he benefited. He forced Gloria to show him repeatedly that she could control his stepchildren by terrorising them using extreme psychological abuse. And in doing so, Nicholas shaped our life-world to his advantage. Gloria's sister would visit occasionally, and her husband Bobby would draw pictures for me. The first time he drew Nicholas as a "nasty nip", a Japanese concentration camp officer from World War Two, and Gloria as a "righteous queen" putting her world to rights.

One by one, each stepchild left Nicholas for James when they were 18, with a condition you would think of in today's terms as Stockholm Syndrome.

As the butt of every conversation, I suffered terribly. By 17, psychological trauma crippled my mind and when I went to my headmaster at boarding school for help, Nicholas sent Gloria to overturn me. They stripped me of virtually all my roles at the school and sent me to see a social worker who said I was just depressed and should join the Navy as a matlow instead of the Royal Marines as an Officer. I could not study and failed all my A'Levels. By 23, psychological trauma crippled my body and when I went to hospital for help, the doctor overturned me and said it was not a reaction to extreme stress, but polyarticular psoriatic arthritis from which I would never recover. I could not study and left university in Leicester with a non-honorary degree.

In 2008, Gloria married for the third time, and I went to see her after being made redundant as a Senior Consultant at Capgemini. Gloria said Nicholas had left his girlfriend Heidi and wanted to move

to a new house. She left me dumbfounded, and I returned home deciding I no longer believed her. I went to see James, Alistair, and Catherine. James told me about Gloria before I was born. The time she had an affair with a neighbour and told James the neighbour was abusing her, and he had to get her another house. The time she left him, when Catherine and Alistair announced to James, they would stay with Nicholas. Gloria then passed James a solicitor's letter and told him he had to move her and the children's possessions out of the house and pay Nicholas the rent for his house. I remembered James' friend confide in me in 2007 that James had thought he was a happily married man in 1974 and it had all come as utter shock. The friend said to me they had been so shocked themselves by the level of deceit by Nicholas and Gloria that they never forgot it. So much so they wrote a story about it 25 years later.

I came under mental health law in October 2009 aged 36 in Gloria's nurse training hospital, in total shock and a terrible way, and suffered a rare condition called a stupor. My mind could not process what it had suddenly fathomed after 30 years of exploitation by Nicholas and Gloria. I was incoherent, my mind in and out of consciousness before it finally crashed, like an old TV at night-time which goes fuzzy and makes a continual humming sound when the programmes have finished. They transferred me to Abraham Cowley Unit in Surrey where I received a sleeping pill. In the first week James came to visit me in hospital and Catherine phoned me. I was utterly shell shocked by the ordeal and could barely speak. James emailed Alistair about me who would email Gloria and reply via Alistair. James' emails at first expressed sympathy towards me, but no sooner had he written "I wonder to what extent Gloria is a stress inducer" she replied, "everyone must be silent you are making me mentally ill." A nurse from the hospital told James his son "can't cope with stress very well" and from there he doubted and wondered if his son "feigned illness to cover up his failings." James removed the contents of my flat and left them in storage in boxes small enough for me to manage alone. Oblivious to all this, I went round to see him to collect my phone, and he asked, "this woman in the paper was an orphan and was successful, why can't you be?". Trauma fractured my eyes and to James they glared back bloodshot red at him "as though he would do something." James told Alistair who told Gloria who phoned me within an hour of collecting my phone. "This is unhealthy Gloria, I don't believe you anymore," I told her and hung up.

Gloria emailed Alistair to tell James she had spoken to me and "he said bad things about you" and that I was out of control, trying to control family communication, cunning and manipulative. James and Alistair broke contact with me, and Gloria sent an avalanche of emails via Alistair describing all the problems she had with bringing me up and recounted my entire life as something only I am to blame for. Gloria then contacted a primary carers support group to find out where they discharged me to. Gloria phoned the community nurse and told her forcefully, "this has nothing to do with her and Nicholas, he has been mentally ill for a long time and needs treatment. I am his primary carer and I should have rights to know what is happening."

It was almost a month before I met the nurse and when she told me my mind felt like a searing iron rod had cracked it with a hard thud. I left the nurse suffering from severe blackouts and it took me over an hour to drive a 10 minute journey. I was suffering from a fugue and complex PTSD. I contacted the doctor who discharged me, and he agreed to meet me at his private clinic. He said it was funny I would come to see him because the nurse had only told him that morning I had refused to see him. I showed him an email from Alistair to James in which he wrote "Nik is a paedophile and should be in jail and Nick is disrespectful to ask to see his parents." I explained to him I was Nik, I had never seen Gloria and James, and my brother Alistair sits in Birmingham between them being overwhelmed with information and confused by Gloria still doing Nicholas' bidding to save face. He said Nick is a

“destructive narcissistic psychopath” and I am suffering from trauma, which is “like a wound which will heal, and the memories will gradually archive.”

The trauma took 4 years to clear in which Nicholas moved to a new house and Gloria retired and bought two Mercedes Benz cars. They had exchanged emails to say, “you all be good now” and “let bygones be bygones” in front of an oblivious family and Gloria dismissed them as just jokes. She emailed me to say Bobby had died suddenly in a hotel and “it must disappoint me”. I met Catherine five times. The first time I went to see her, Gloria phoned her and in her usual forceful way, treated her like a child and made her feel guilty for having me over. The second time, Catherine crept away from seeing James so as not to upset him by seeing me. We watched the musical the Phantom Returns together and I could tell she was unconscious to what I was going through and why. The third time, we met in Harrogate, where Agatha Christie went when she suffered a fugue in 1926. The trauma appeared to be on the wane and so I mistakenly thought I would recover like I had in previous episodes and therefore there was no need to sit Catherine down and explain something that would hinder her role as a mother. The fourth time, we met in London where Catherine ran the London Marathon like I had in 2005. Back then I felt perplexed Gloria and James could not even meet me at the finishing line. This time round Gloria was not there, but James was. We spoke briefly, and it was clear he was in the alternate reality Gloria made Alistair believe, and Alistair had taught him.

By the winter of the 4th year the archiving process began, but it was utterly complete and unforgiving. I was so crippled by amnesia I had to give up my career and sat for days with immense, painful headaches and blackouts. I contacted the local mental health community team for help, but they never responded. I asked my therapist to do a professional training course in dissociative amnesia, which she did. She reported to me that the mental health team would operate a triangle of care with Gloria as my next of kin and diagnose me with a persistent delusion. Without work or support for my condition, I began the slow journey into debt and isolation. It did not matter that my friends thought what had happened to me was the worst experience of their lives, let alone mine. It did not matter that my therapist knew me and felt they were learning unknown things about psychopathy from me. I had reached the end of the road. I faced the choice between being turned over and crucified or committing suicide. I chose the former.

Gloria came to see me. We met in a department store in Staines and I could barely bring myself to look at her. She pulled out a picture of me from when I was six and said, “you were much loved until you were hated.” I explored her being honest so I could receive treatment and benefits through the state system, but she just looked at me and smiled. That was the end of that.

A few months later it was my 40th Birthday, and I invited Gloria to lunch. When I went to the bathroom, she cornered my partner and then took my phone. After lunch, we parted ways and my partner phoned me and she was shocked to find Gloria pick up. I felt violated, and it broke my trust in my partner. I received a parcel from Gloria with my phone in it a few days later. I was in the bleakest period of my life and felt powerless. I went to see my GP who said I was just depressed. I asked to see my medical record, and it diagnosed I had suffered an acute polymorphic psychotic episode without symptoms of schizophrenia and a letter from the private clinic where I saw the doctor said nothing of what we had discussed. The GP said the mental health team are useless. I felt they had erased me.

I invited Gloria to visit me in private and she came and sat with me in my kitchen. I was still suffering from severe blackouts and amnesia had archived much of what I remembered of my life, including my career and happy times. I felt fatigued and Gloria said, “Remember how we used to be?” and smiled. “You will get through it, you’ve been to Everest [base camp], it’s just another mountain to climb.” I decided it was time we left and as Gloria went out the kitchen door, she turned to me and said, “It will

always be our little secret. No one will ever know." I felt crushed, and I wondered how this would ever end. We went to Chertsey for a late lunch. She lamented she "didn't realise it would affect you as much as it has." As we drew the meal to a close, she dropped her mask and got me to look her in the eyes. It was like looking directly at pure evil. She smiled knowingly with a winning satisfaction. She had completely defeated me. She blinked, shook her head, and came back round to herself. We settled the bill and went our separate ways.

A few days later, with all trust gone, my mind could take no more and gradually over the course of two days I fell into a state of delirium. I went to hospital and asked for a bed and a sleeping pill. They left me in bed for hours in A&E and I fell into a stupor as my brain could take no more. One nurse said it was the worst case they had seen in years. Eventually in the early hours of the morning a doctor asked me what he should do. I asked him for a sleeping pill, and I slept for half a day. When I awoke it was like coming out of a hangover. I had some tea and toast before my partner came to see me. "That's incredible, I cannot believe you are up and about walking." I told her any hope I had of ever seeing my family again was over, as was my life. Soon I would have to see the doctors and they would wrongly diagnose me and side with Gloria.

Sure enough, they did. First came the "You must be deluded. A mother would not do that." And then the "we know all about your mother, but it's you we're worried about." The doctor discharged me home with a fleet of home treatment nurses coming to visit me for weeks to make sure I took the prescribed medication. I did not take it and went to work in a charity shop. "But that is incredible," a nurse exclaimed, "I watched you get better, and you have taken nothing." I explained to her it was a stupor rather than a catatonic state, a reaction to extreme distress.

"Your mother would not cause that," she replied. "By what you are saying you are delusional."

"That is where you are wrong. Gloria has been deluding her family for 34 years. Ever since you wrongly discharged her, and Nicholas rose to domination."

"If you think that, then you have a serious mental illness."

I had reached as far as I could with my psychological therapist in the charity sector, and I would have to cross over to psychiatry under law in the state sector; the two acted separately and had no wish to collaborate. All the progress I had made would end, and Catherine, Alistair, James, and Gloria's sister may tell the state what Nicholas forced Gloria to teach them about me. After a difficult deliberation I committed to my therapist I will "crash like a plane and rise like a phoenix." I phoned Gloria and told her to admit the truth to my therapist. The therapist taped our conversations and during our last session Gloria called and I put her on speakerphone. "Tell the therapist what this is really about, abuse or illness?" I instructed. Gloria replied "Well, that's not what you would call it in my day, but now days, yes, abuse is what you would call it." The therapist was aghast her client therapist relationship was over and went downstairs to speak to her manager. "I have just taped his mother saying it is abuse, I cannot do therapy with him anymore, it compromises our relationship." I asked her manager to write a discharge letter to my GP. On it she wrote "he is a highly intelligent individual who has a thinking disorder and seems obsessed with finding the truth."

I thought about my role as a consultant in information management. I thought I may no longer practice it at work, but I would be able to as a mental health patient. The problem seemed to me the absolutes of law held, but they could only be extended so far. The state trained humans to apply terms and follow procedures to do the right thing. Humans had to follow procedures otherwise they would do the wrong thing. Terms in psychiatry held a patient had something wrong with them and it is right to correct the wrong to safeguard the patient and society. Terms in psychotherapy held a client had

something to learn and from this growth was possible. While they wrote the terms for my experience in the International Classification of Diseases, there was no implementation of them in society. The problem was the state could only extend so far by applying law.

I approached my journey playing the role of a patient in the same way I would plan any implementation delivery. There would be four stages, plus one which would be out of my hands.

1. Inception

The fifth and final time I met Catherine was again in Harrogate. My partner drove me to see her a month after my second stupor. After meeting my partner Catherine said, "How lovely, we will all be able to come to your wedding." My partner observed Catherine "spoke a lot" and I explained that, like Alistair and I, Nicholas and Gloria had psychologically abused her by speaking at her at length and we all showed the same conversational fingerprint.

Shortly afterwards I took my partner to see the community health doctor who wrote "Gloria confirmed Nicholas sexually abused Catherine and a boy sexually assaulted Nicholas. Nicholas says Gloria has taught James that Nicholas is mentally unwell, and that this is Munchausen by Proxy. Nicholas says he has suffered over 30 years of psychological abuse by Nicholas, but Gloria was powerless to stop it." The doctor discharged me with persistent delusional disorder despite saying to us "I don't think you are delusional."

When October came round, I began emailing my family and the community team. It took a few weeks before the mental health team sectioned me. The doctor asked Gloria to attend a meeting with him and afterwards the doctor spat in my face as he fumed "you mother would never do that, you are deluded and I will medicate you." At the ward office door, a nurse came out and said, "You are absolutely crazy, you got the Chief Executive, Fiona Edwards, to phone down to the ward!" That week I went into the patient lounge where I found a veteran suffering from flashbacks while watching TV. He came up to me and put his hands around my throat and threatened to kill me. I stepped back calmly, and he came up to me with a snooker cue and peered over me in a rage which reminded me of Nicholas. "Get out of my space. Stay away from me or I am going to..." He stopped short when he realised I stood still and never reacted. He retired to the lounge, and they called me into the ward office and showed me the phone.

"This is the police and I hear a patient has assaulted you. Do you want to press charges?"

"No, the veteran is suffering from PTSD and I want you to ensure they transfer him to the correct hospital. They are wrong to expect him to watch daytime TV with grenades going off around him. He came back to his senses once he recognised me to be no threat."

It took about 6 weeks before the doctor discharged me, and I too was "moved on". The medication had a tremendous impact on my memory. I had pointed out to the doctors they were applying the incorrect terms, lacked collaboration with other parties and smart ways of working. I invited the patient advocate to sit with the doctor and me. The doctor had reacted furiously to being challenged and upped the medication. My partner said the doctor told her "you need counselling if you believe him," and, "I am going to straighten his thoughts." The doctor phoned my manager at work and asked him, "Can he cope with the stress of work?" My manager relayed the story to me and said he just laughed at the idea the doctor thought I could not cope with work. I explained to my manager I would not be here much longer before they would force me out of work, and therefore to give me the remaining top priority work to complete before that eventuality happened.

Gloria said once to me that a mother is always right, and this was the view of the doctors. In my brief time with psychiatry I felt I had learnt a significant amount. Peter Saunders, the founder of the National Association of People Abused in Childhood (NAPAC), invited me to meet him and I went up to London to his head office. Peter sat in a small office with a Sun newspaper draped across his computer keyboard. On the front cover was a picture and article about Jimmy Savile. I shared with him a little about my story and said I observed psychiatry is falling short for the people he advocated for. I asserted that in some ways Nicholas was worse than Jimmy Savile in a single case, although one can never compare cases. When we got up to leave, I shook his hand and said, "Thank you for saving my life, you have given me something to do."

2. Elaboration

I went to visit Gloria, who Nicholas entrapped by what he forced her to say for all these years. She had sent me a text to say "yes, it was psychic shock and an identity crisis" but did not elaborate any further. She was unprepared to say so to the doctors for fear of empowering me and causing Catherine and Alistair to go through their own version of what I had. She did not want to face losing everything and everyone as she would be back to where she was in 1979.

"What's the date?" I asked her quietly and politely.

"July 4th. Independence Day, why?"

"Year?"

"2014."

"When did we last meet in your house?"

"Erm."

"15th September 2009. What have you got to say?"

"I don't know what you are on about, I've only just woken up. You keep saying I've done this, and I've done that, and I don't know what you are on about."

"When was the last time you came to see me?"

"In your flat."

"In my kitchen?"

"Yes."

"When was that?"

"Erm."

"Was it May 2013?"

"Possibly."

"When was the time you saw me between then and now?"

"I came to the hospital to see you. You turned me away."

"Who did you see?"

"I saw a social worker."

"No, you saw a doctor."

"Oh Nicholas, why all this questioning?"

"Who did you see? Why can't you just say it straight?"

"I cannot remember what his name was."

"Doctor erm. Did I see a doctor? Why?"

"What did you say to the doctor? Have you told me?"

"Huh, I can't even think this morning. Why are you quizzing me with all this? Nick, what's this all about?"

I returned to my home and received a call from the community mental health nurse, "Gloria says you have been recording outside her house." As always, Gloria reversed the situation. I had been recording her inside her house so I could remember what she said. Our conversation went on for twenty minutes with probably, don't-know, why, can't-remember all she would say about my alleged mental illness, something she shared with everyone except me.

I went to visit Nicholas, who was free of all the commotion since he left Gloria doing his dirty work. Law entitled Nicholas to enjoy his gardening and DIY around his cottage. When we were young, he used to marvel in delight at watching us play Chinese Whispers. Nicholas would suggest a phrase and watch his stepchildren pass the message around the dining room table and laugh when the message became lost and garbled. Since meeting Gloria at a party when Catherine and Alistair were very young, he had delighted in his ability to get Gloria to say things to her children to tell James. Nicholas had always remained aloof, and he had never even spoken to James in all these years. His approach was working. All the attention was on me and the force applied to me under law was taking a considerable toll on me.

"Hello, I would like to speak to Nick Fox."

"Who shall I say is asking?"

"Nick Fox."

"You're Nick Fox?"

"Yes."

"Nick, someone is here to see you, called Nick Fox!"

"Hello Nick."

"Hello, what do you want?"

"Will you come out so we can speak?"

"No, why should I come out?"

"Well, why don't you tell us?"

"I honestly don't know what you are talking about. Bizarre."

"I think you will find on medical records you placed me as Nick Fox."

"I placed you? I'm sorry, I'm totally confused."

"Well, under ICD 10 you have a mental illness which is F65.4, F63.1, F62-."

"I'm sorry, I don't know what you are talking about."

"It is your responsibility to put yourself forward to psychiatric services for what you have done."

"I'm sorry, if you want..."

"And your sexual abuse of my sister from 1976 to 1986 is abhorrent."

"I'm sorry, I'm not listening anymore."

"And your psychological abuse of my family from 1974, Nick Fox, is abhorrent."

Nicholas closed his front door.

"And you have just told the truth."

"Shall I phone the police and get them to sort it out?"

"Are you going to get psychopathic Nick?"

Nicholas opened his front door.

"To get the police to sort it out," he spelled out quietly.

"Who are you?" said his new partner.

"Who are you?" repeated Nicholas.

"Shall I tell you who I am, [REDACTED]?"

"Oh," sighed his new partner surprised I knew her name.

"Nick Fox married my mother in 1976 and he changed our names."

"Oh. This is ridiculous. If anything like that had happened you should go to the police and get them to sort it out."

"Nick Fox, are you honestly saying you have never met me in your life before?"

"I've never met you in my life before."

"Nicholas Fox," interjected his new partner.

"Yes, but that is irrelevant, I have never met him in my life before. Where did you come from?"

"I came from your old house, and the one before that, and the one before that."

"I'm sorry but..."

"I think you will find Nick you are a pathological liar and you are deluded if you live in this false world. Goodbye."

As I left Nicholas, I noticed the top of a tombstone used as a sign for his cottage on his front wall, and next to his door was a statue of Anubis. I decided I would come down and collect both stone works to cause his partner to force him to do something. I wanted to see if he would email Alistair, who was unaware Gloria had given Nicholas our email addresses. Like in the Wizard of Oz, Nicholas sat behind Gloria and read everything Alistair emailed Gloria from James and everything from the doctors.

When October came, I skipped work and drove to Nicholas' cottage through the early hours, put his stone-work in my car boot and left a card with my signature on his porch mantelpiece. I parked in Chertsey and stayed overnight in a local hotel. I had sent my usual emails to family and the community team and all there was to do was get into the hospital. In the morning I worried the receptionist in the hotel, and duly she called emergency services and an ambulance came to pick me up. It took a while to get into the hospital, so I walked around the grounds and ate lunch. Once I was inside the hospital, a patient said to me, "What are you doing here? You are the most normal looking person I have ever met in a place like this."

Alistair emailed me to say he had received an email from Nicholas and said, "I have asked Gloria permission if I can send it to you." Alistair forwarded the original email to me and the date-time stamp showed Nicholas had emailed Alistair within five hours of my creeping up to his cottage in the early hours.

Dear Alistair,

I had a visit for [from] your brother, Nick a few weeks ago and again a couple of nights ago. It was rather disturbing and worrying.

Are you prepared to discuss?

I hope you are well and enjoying life.

Kind regards,

Nicholas Fox (Stepfather of old!)

Gloria came to visit and sat in with me with the doctor for the first time. "I don't know what this is all about. All the family believe me, and you should follow the doctor," Gloria said as an opener. I left the consultation room. That afternoon I showed Gloria and the doctor my video recording of my conversation with Nicholas. Gloria laughed when Nicholas said he did not understand the medical terms. Later, after Gloria had left, the doctor asked me, "What did Nicholas mean you don't exist?"

I knocked on the ward office door and handed a patient-victim therapy workbook on dissociative amnesia to a nurse. Within a few days the doctor placed me on section 3 and medicated me. Since I refused to take it, six nurses pinned me to a bed and gave me a depot injection. The medication gave me Parkinson disease type symptoms and I would walk up and down the ward corridor for hours to shake off the side effect. One nurse said I was feigning it, while another said I hide my mental illness. One evening a patient said, "It's none of my business, but whatever you are doing to him, you shouldn't be doing." Before they had put me on section I had driven down to see Fiona Edwards at the hospital's headquarters in Leatherhead, and I had mapped out timelines and process workflows on the whiteboard in the patient common room. Once under section, I arranged a tribunal. At the tribunal, the doctor said to the panel, "He has a very serious illness," and the nurse said, "He is a p, p, paedophile." I was on such a high dose of awful medication I could neither sit nor stand, so after watching the panel members take what they said seriously, I left them to it.

Once they granted me leave, I went to see my manager at work, and he drove me back up to the hospital. As we entered the entrance, the doctor popped out of the secure ward and crossed in front of us as he rushed to his office. "Get out my way!" he exclaimed bizarrely. "Who is that idiot?" my manager asked. "My doctor," I replied.

They eventually discharged me, and I returned to work knowing I would not have much time left there. Sure enough, they made me redundant shortly after my return. Gloria best described my social

predicament, "Everyone treats you like a leper." We would sit on the phone for hours and get nowhere. I would ask her to change my diagnosis and she would refuse. She would stay on the phone because she could pretend to whimper every time her third husband walked to her kitchen where she sat. This helped her build up the impression I was abusing her by being aggressive, difficult, and threatening. Slowly but surely my family turned to her view, giving us all a sense of certainty and permanence. For what she had been saying all along to everyone was being shown as true in their eyes, no different to a self-fulfilling prophecy.

I learnt a lot about the knowledge gaps during my time in the consultation rooms with the doctors. I would tell them about NAPAC. "What's that?" they asked. I discussed concepts from a psychological perspective. "What's that mean?" they asked. On one occasion I knocked on the ward office door, and inside a nurse sat quietly reading my workbook on dissociative amnesia. "What are you reading?" I asked. "An interesting book, I've never heard about it before." I asked the doctors to collaborate with my former therapist's team who were NAPAC affiliated. I had trashed my reputation in the eyes of both teams, but at least they had a go at communicating with one another. My partner also spoken to the therapist team who said, "Munchausen by Proxy happens all the time, but they do nothing about it."

Catherine sent me a text message to say James was himself in hospital, so I went to visit him. Given the seriousness of his situation, he was doing well. He was emotional, and we gave each other a hug. I said goodbye and left thinking it would be the last time I would see him.

I was now heavily in debt, so I asked Gloria to repay me the child benefits she kept for herself in my childhood, which would go some way to keep me going. Gloria saw an opportunity to make herself look good and me bad, so she promptly obliged. Gloria had never given me money before. Nicholas controlled her financially while they were married and after the divorce I considered the money received to be blood money.

3. Construction

My partner had not quite completed on her divorce, which had taken nearly a decade. I knew there would be the usual hand grenade lobbed at her at the eleventh hour. So, I took a job at Samsung, but systems like psychiatry go right, right, right, and then when they realise they are wrong they go quiet. The next phase would test me to the limits and there was a risk I would be left permanently insane.

I arranged a training week in London, but instead of doing the course I spent most of my time next door in the public library at the Royal College of Psychiatry. The clinical definition of a fugue is, like a persistent delusion, very precise. However, the books in the library elaborated dissociative amnesia, fugue, stupor, and complex PTSD in greater detail. There were very few research papers on fugue, and it they clinically diagnosed it in the classical sense rather than in the broader sense of term. Still my partner, therapist, and initial doctor had all been correct although we only used the terms in private. I went to see my GP to request my entire medical record and then wrote a letter declaring it "null and void".

With little to occupy my time outside work, I went to Littlehampton. I had always wondered why the only family picture Gloria had handed to me was marked "Littlehampton, September 1982", by Nicholas. Shortly before reaching Littlehampton, I passed Ford Prison. I surmised the beach where they took the picture of me was where Nicholas asked Catherine to remove her bikini while they were alone at sea in a dinghy.

Trauma, disassociation, and amnesia meant I offered Samsung little value, and I spent an ever-increasing amount of time lying on a park bench just outside the office in Brooklands. While I had private medical insurance, there was nothing they could change about the terms of my psychiatric diagnosis. My manager called me into the office, I apologised and walked out and never went back. I had delivered their intranets and left them as a repeatable template for the next person. They had given me access to the Vision and Strategy, something I had not been at a level to access since my Capgemini days. I repaid my training fee to Samsung and carried on no matter how difficult it would be.

My partner sure enough got bombed the week before her case went to court. According to her ex she was a terrible mother, a drug addict, the works. Still, the strategy we had discussed at length worked. The transformation flipped, and she gained her independence and financial security. She maintained a healthy relationship with her young children throughout and law had shown its ability to be fair and just.

I waited for her to say the magic words with her newfound confidence and when it came we parted company amicably.

I spent my free time in the British Library. Magna Carta was 800 years ago, and I discovered artefacts pre-dating it that used the term Lawe.

I visit Nicholas at this cottage and find him as he always was, enjoying himself outside in his garden doing some DIY.

"Hello Nick."

"What!? All right, so I do know you then. What do you want?"

"I have driven down here for us to resolve this matter amicably and shake hands."

"What do you mean?"

"I want you to apologise and shake my hand man to man."

"What. Well. And you will leave me alone afterwards?"

"Yes."

"All right. Well, I am sorry for all the harm I have caused you. Is that good enough? Are you happy now?"

Nicholas comes towards me and stretches out his hand towards mine.

"I will take a photo of us shaking hands."

Nicholas withdraws his hand.

"Look I have said I am sorry. You live in London and have your life and I have mine. The doctor says I have a heart condition. I only have a few years left to live, and I want to enjoy myself. Now go away and leave me alone."

Nicholas panics after realising what he has said to his scapegoat. He turns around and runs round the back of his cottage. The automatic garage door closes and there is a sound of a key turning to lock his front door.

I phone the police. "Sounds very serious, but there is nothing we can do."

I visit Gloria at her house. She has been on the phone to me on my entire drive from Nicholas in Somerset to her village in Wiltshire. I knock on her front door. Her third husband answers.

"What are you doing here? You are not welcome," he says.

Gloria appears from behind him.

"Why did you not tell me you were coming over to mine? I could have said something to [REDACTED]!" exclaimed Gloria.

I turn and walk to my car. Gloria follows me and tries to open the passenger door. I roll down the window.

"I am trying to help you in all this," said Gloria.

"Gloria, even Nicholas has apologised. You never stop behind my back," I replied.

I leave in my car and phone the police. "I don't understand what Munchausen by Proxy is. It does not sound like something we can help you with. You should speak to your doctor."

I return to my flat. I am on my last legs. Things will never turn around.

Gloria texts me to say, "Of course I would support Catherine and you, who has been differently abused, against Nicholas, and of course you can change your name." I laughed out loud at it. Over the summer I researched and cleared trauma in equal measures. Gradually, I came to sleep on the streets or in my car. I began to go insane and so I toured the country to research and keep myself occupied.

I visit my ex-partner who reveals, "My ex-husband told me he has been seeing the woman he is now with for 20 years. I feel utterly shattered. I have led a false life. Nothing that ever happened would ever have happened. I feel completely violated."

I comfort my ex-partner and say, "I understand how horrible this is for you. He has made it all the worse by waiting until the end to tell you, after it no longer matters to him. Gloria came to meet me at the community team centre last year, and I showed her the discharge letter after my second stupor. I asked her how I came to be sexually assaulted. Gloria said Nicholas arranged the sexual assault through a friend of his. She had told Alistair to tell James that Nicholas refused to tell her who it was so she could do nothing. In their minds, she made it mean me rather than Nicholas. When she lies, she is telling the truth about Nicholas and projects it at me in their minds. Hearing Gloria talk in this way caused the psychic shock when I realised. Gloria told me Nicholas arranged it like a throwaway comment. She said it only to me, so she can always deny it. She speaks in truths about Nicholas and applies it to me. I am sorry for what your ex has done to you. I want you to know this will heal in time. At least you do not have him as your next of kin."

When October neared, and I was ready, I returned to my flat. The doctor came to visit me, "Ha-ha, I got a call from Buckingham Palace, you are crazy!". Then a community police officer came to my door, "I have had reports you have been upsetting your ex-partner and her friends." Then the landlord came to see me, "Why haven't you been paying any rent?". I asked the landlord to contact Gloria for the rent arrears and he came back within ten minutes with Alistair on his phone, "You are very bad, why haven't you paid your rent?". I thought back to the only other time since 2009 I had spoken to Alistair, my polar opposition as Gloria used to call him. "Hey, hi Nick, how are you? We have been talking to the doctors and nurses for ages. We hope and pray you will get better."

The landlord leaves me, and I smash up the dressing table I collapsed against when I went into shock in October 2009 before staggering to Gloria's nurse training hospital. The GP arrived, the landlord was

furious, and the community mental health team turned up. I walked round to the front of the landlord's property and he was on the phone to Gloria. "You are deluded and need support" said Gloria before hanging up. At least she had finally said it to me directly. All when it no longer matters to her.

I walked to Chertsey and went to see my ex-partner's friend and her brother and then walked to her home in Weybridge. "What's your car doing on my driveway?!" She went back inside her home and called the police who duly sectioned me and gave me a lift to hospital. The next morning the doctors rounded me and said "Right, we will start you on 50ml." I said, "Actually, I am bankrupt and homeless, I am entering your system so I can continue rather than live on the streets." They left me alone and gave me a bed on the ward.

I was told to see the doctor.

"I'm Doctor Williams."

"Hi, my mother is a Williams, and a retired nurse."

"Oh right, she just phoned me."

"Wow, there is a surprise."

"So, what's wrong with you?"

"Nothing. I will help your patients out while I wait to be placed in accommodation, and I am recovering from a fugue."

A few weeks later I take leave from the ward and visit my ex-partner at church. She gives me a lift back to the hospital.

"Your brother Alistair came round and collected your car. He said you are a bad person, and I said you are a good person. As you know I have never met him before. He was exactly as you had described to me."

"Nicholas used to call him a thick idiot and laugh to me he was both the judge and jury. This is why medication does not work. It is a psychological conflict, as the initial doctor correctly noted. The doctors are not medicating me. They said they now know not to believe Gloria. I told them this is the same mistake as the one made in 1979 and they said they know. I am sorry I upset you and your friends to get myself into the hospital, and I thank you for doing so otherwise I would be living on the streets of London. Gloria has got Alistair in to take away of my possession, clear up my flat and settle the arrears. I will see none of my possessions again, that is for sure. Sorry to leave my car at yours. I wanted you to meet Alistair. From my perspective, he is the reason I am in this mess, although it is not his fault. I used to call him Robot because he believes everything Gloria ever told him and does everything she tells him to do, so in effect being sent down has sent him up. Essentially who he is talking about when he is speaking to the doctors and nurses is Nicholas, but he associates the words with me. From his perspective, Alistair thinks Gloria is telling him the truth about Nicholas, who she calls NJF. It follows what Gloria tells him about Nicholas, me, holds true in his mind too. She has taught Alistair to separate the two narratives and to tell James about me and not about NJF, even though the two are virtually identical. It is all stupid, but it is real to Alistair and used to be crucial to Gloria that Alistair left home and never told James anything other than about me. Catherine being the victim obviously never would say anything to James about Nicholas. In psychotherapy, one child takes on the mantle "responsible" and the other "irresponsible" – the golden child and the problem child. Unfortunately, psychiatry is continuous and never corrects itself. Therefore, give it the problem child and it will always

treat the problem to resolve everything. When it realises the patient is not like that, it does not correct itself. So, have Gloria overturn psychiatry at the start, and from Nicholas' perspective, you are scot free. Talking of which, thank you for the ride and promise me you will find someone free of such nonsense who is healthy and in a stable position for you and your children's future."

I never saw Alistair again. Seven months is a long time in a "One Flew Over the Cuckoo's Nest". I help patients to church, buy their shopping of them, take them for walks, help them find work, counsel them, say nothing when they take me watch, jacket, jeans, shoes, and play chess and badminton with them. One day Fiona Edwards pops into the ward and I introduce myself to her and shake her hand. A few of the nurses think it "incredible" how I have helped patients who have not even completed their medication. A nurse says, "you helped a patient back to work, and we had not even discharged them. I have seen nothing like it before."

One day they admit a patient who confides his entire life to me. A few days later the doctors give him leave and he comes back late having taken a massive overdose. He stumbles over to me in the kitchen and resolves his life story to me. He is deeply traumatised by what his own mother did to him as a young child which included watching her husband molest him on their bed. He was also genuinely sorry for the wrong he did in his twenties by getting involved in a robbery and shooting a guard in the leg, for which he went to prison. He had phoned his mother and father that afternoon and they had told him to "██████ off". His face was red and blue, and he had tears streaming down his face. He asked me to sleep on the floor next to him in the lounge for the night. In the morning I saw he had died peacefully in his sleep. The system had resolved nothing for him with his parents, just moved him on from foster home with a priest to life. The hospital said he died of an overdose. He died over-burdened by a deeply piercing trauma left unresolved.

The doctors had the odd consultation with me. In one I lost my rag and was completely fuming at them. In another they asked me what is the difference between a stupor and a catatonic state, and why does it matter. A nurse asks me in to do my care plan. He asked me what a fugue is and how to spell it. A coordinator took me clothes shopping and for a haircut. Alistair had come to the hospital, hid when he saw me, and left a collection of odds and ends. Alistair dropped off my possessions at Gloria's house and drove my car to his house and sold it. All without speaking to me. Gloria must have been secretly pleased with her "robot".

When the time came, the doctors reversed me out. They had realised I had reversed in, so it was fair enough in one sense. However, there was never any commitment to understand and resolve anything. There was no discharge meeting, just a waiting taxi. They discharged me to supported accommodation in the community. Had they responded to me when I was going through my bleakest period, this is where I would have asked them to refer me. I arrived with a plastic bag with two shirts, a file of emails from Gloria to James via Alistair, and the clothes I was wearing.

The manager at the supported accommodation allocated me a compact room on the ground floor. I had no bank account, towel, toiletries; you name it. The doctor from the hospital came to see me as I had requested. He slid across the table an envelope with my letter of discharge, in much the same way Gloria had slid the solicitor's letter across the table to James. The letter was a smorgasbord of terms of what Gloria said, they said, and I said. Since the doctor had said he now knew not to believe Gloria, I asked him if he would correct my record. He said no.

All was lost. I sat in the garden and a key worker stopped and looked at me. "You look like Colin Firth in what's that film?" he noted. "The Railway Man," I said. "That's the one. The one about prisoners from the Japanese concentration camp with PTSD," he replied.

4. Transition

Although the doctor had shifted my diagnosis from persistent delusion, which is psychotic, to adjustment disorder, which is neurotic, they have resolved nothing. I begin my descent into insanity. Insanity is a Catch 22. On the one hand it creates the possibility of immense creativity, but on the other I cannot speak or write coherently. There is no treatment for adjustment disorder and therefore I will have to shift my diagnosis back to persistent delusion and be put on long-term medication to be entitled to receive long-term state benefit. This will be a very painful and humiliating step in the process I am following. The easiest way to do this step is to twist the perception of myself to the key workers, visit Gloria, get sectioned, and when the doctors match the two points of view, they will have their eureka moment.

I concentrate on financing myself temporarily. Surrey council offer me emergency funding and the food bank tides me over. I ask a key worker to ask Gloria for my passport, knowing she will refuse. The key worker is very pleased with themselves. "I had to convince Gloria it is illegal to withhold your passport from you before she would agree to send it to me. She was very forceful and controlling and at first refused to hand it over." I open a post office account and receive ESA benefit. A resident provides me with a towel, and another buys me some clothes. I can now wash, clothe, and feed myself.

I need to get people to complain to the supported housing about me while beginning to process of retraining my brain - not only to come out of insanity, but through necessity for my fugue journey. I decide to apply to University for the following academic year. I get a back payment from DWP and purchase a small laptop. I begin to download videos of my past life from the cloud. I have a care coordinator whose introductory remark is "you cannot cope with stress." He will be sufficient to drag me down.

I begin retraining my brain by learning about numbers and letters, words and so forth. At the same time, I make up a vision for 2020. It is a complete nonsense, but iteration after iteration it becomes much clearer. I take my file with Gloria's emails downstairs and hold a consulting workshop alone for four days. Nicholas liked to play word association games with us as children. After all, he was changing the terms by which we perceived ourselves, each other, and James. Word association. So as icebreakers, I played word association games. For instance, Catherine lived on a croft in Scotland, and I lived in a house called Croft House. My doctor came from Epsom, where Catherine was born. University was in Kingston where Alistair was born. Instead of Nicholas calling Catherine deluded, he was instead calling me deluded, and I was reporting her case to Epsom rather than her. Alistair sold my Ford Focus, Ford was a prison near Littlehampton, and Nicholas' focus had been to avoid prison and so he shone the focus on little me. Hampton Court was near me, but there was no court I could attend since there is a law to apply I am deluded, but no law to balance it. Were Catherine and I uncrossed, law would balance. Gloria inscribed "F,.OX" in the wet concrete driveway in 1979 when Nicholas was not looking. To her it stood for "Family point of cross by Fox and the birth of a little baby". And here I was at Croft House in the same position as 1979, purely based on how terms work. Playing word association games over and over helped remap my memory. I filled the walls of the downstairs room with print outs of Gloria's emails. I looked at the terms she used and wondered how I ever survived my ordeal.

Psychiatry was being played the same as it had in 1979, and so I designed a solution for a future state system. I liked there being Lawes of Relativity but unifying these with law would be problematic. An age of maturity for society has been an ideal of religion, philosophy, sociology, psychology, and art for centuries. There were reasons why society upheld virtues, values, morals, ethics, and rights, but they

were not always enshrined in law. Nobody was asking me what I thought, but I just enjoyed pondering the age old conundrums and coming up with my solution.

“You are either seriously ill or highly intelligent,” said a resident.

“You are the most mentally ill resident I have ever had in the house,” said the manager.

Perfect. I packed my materials away and posted some letters which should come back and report a concern about me to the key workers.

October was nearing, so I walked to Gloria’s house. Unfortunately, she lived in Wiltshire, so it was a while away.

I arrive late in the following evening and went to her local pub in her village. The landlord put me up for the night and in the morning I went to see Gloria. She was not in, so I had a look through the windows and saw my possessions piled up high in the conservatory except for my Widescreen TV from Samsung. It had pride of place in her living room. I could not fathom what it must feel like watching your son’s television each night, knowing you taught your entire family to hate him and disown him. I returned to her local pub. I revealed to the landlord I was Gloria’s son, and he said, “That’s strange, I never knew she had children, she has never spoken to me about having any.” I told him I had resolved unified theory and asked for the telephone to call the police. I phoned the police and told them I was from a mental asylum and I wanted to speak to Gloria and a police officer about what she had done to me. I passed the phone back to the landlord and sat outside. Half an hour later a police van arrived and gave me a lift to Gloria’s local hospital. The duty nurse asked me what I was doing there since this place is usually for people who are suicidal. I slept the night and in the morning Gloria came in to see me. I gave her a hug and asked her how she was. She then went to see the doctor and then came out and spoke to me. “Did you tell them the truth like you did on the texts to me?” I asked her. “What, I don’t lie, I haven’t sent you any texts,” she replied. “May I have my possessions back?” I asked her. “What! Who says you will be welcome round to collect them?” she replied. With that, Gloria turned and disappeared to see the doctors again. I never saw Gloria again.

Five doctors walked into the room, a line across like in the film Reservoir Dogs. Before they had even said hello to me they exclaimed, “We think you have a very serious mental illness.”

They transferred me to a hospital near Gatwick in Surrey and the van passed where we lived in 1979. I said, “How ironic Nicholas sexually abused Catherine in that house 38 years ago and here I am being carted passed held under law”. The driver looked into his rear-view mirror and said, “Shut up you nutter. I don’t won’t to hear about you disgusting life.” He sounded much like Nicholas and Gloria back then.

The doctor at the hospital listened while I told him, “Gloria has essentially psychologically murdered me.” He asked me about the walk, “I used to trek in the Himalayas and yomp as a Royal Marine Potential Officer. The walk was not ideal, but ok.”

The next day I had a consultation with another doctor. “Ok.” he said, “We are going to try something different to the other hospital.”

They put me on section 3 and held me to administer a depot injection. Afterwards, I applied for PIP and enhanced ESA. They kept me there for months before transferring me to Chertsey. “It says here you are abusing your mother. You are going to be on medication for a very long time. I’m putting you on a Community Treatment Order and discharging you back to Croft House.”

I returned to the supported housing and began studying humanities and computer science.

I walk to see James, who lives three hours away. No sooner have I left Croft House than I bump into a person with a persistent delusion at a bus stop who offers me a light.

"My doctor says I suffer from a persistent delusion," he says.

"So does mine," I reply.

He invites me to his flat for tea and so I follow him. In his flat he has placards protesting against cruelty. His flat is incredibly unhygienic, and he has some sort of shrine in his principal room that acts as both a bedroom and lounge. After a while, he joins me at his table in the lounge with two cups of herbal tea.

"Everyone is cruel to animals, and I have to stop people from killing them. That means I must take action against people. Do you know what I mean?"

Beside him on the table is a knife. A shiver goes down my spine, I thank him for the tea and walk outside his flat and wait for him. He follows me outside and we walk side by side.

"Sorry," he says.

"That all right. I like animals."

I leave him at the bus stop and continue my journey to James' flat by foot.

When I arrive, I ring the bell. James answers and suddenly there is a thud, and everything goes quiet. I wait an hour and ring again. James lets me up to see him.

"How are you?" I ask.

"I'm ok, struggling along. How are you?"

I show him the empty contents of my wallet.

"Gloria has blocked my access to support ever since you left me in the hospital, and she took control of the next of kin role. It has been a catastrophic experience," I mumble.

"Well, why are you telling me, I don't want to be involved! I keep getting phone calls from the hospital asking me to sign this and sign that. It's embarrassing, I don't want to have to deal with this at my age."

"I went into psychic shock and suffered a dissociative fugue."

"A what? Speak up, man. Alistair tells me you owe Gloria £10,000. It is so embarrassing."

Catherine's husband walks into the room.

"Jim, shall I show him downstairs?"

On the way down I explain to Catherine's husband how Gloria psychologically abuses Alistair and James.

"Ha-ha, yeah right," he replies, "You even sent the police round to Catherine's shop about Nicholas. So embarrassing for her. It is all sorted and forgiven. It happened a long time ago."

I think back to when Catherine told me in Harrogate that Gloria forced her to see the doctors to be checked over. And then outside, Gloria forced Catherine and Nicholas to shake hands.

"How has it been sorted?" I ask.

“Oh, Jesus will come back and have his judgement day. The great saviour will sort it all out in the end for everyone.”

“Goodbye.” I say.

“See you, Nick. And remember the great lord is our saviour!”

I never saw James again.

+ 1. Acceptance

There was never a point in time in my life where Gloria ever wanted to stop. Like James observed in his email to Alistair, Gloria is a stress inducer, and this causes me continuous misery. Suffering is part of life, something we all have in common. But Nicholas and Gloria’s reverse accusations are so they do not have to suffer. Had the matter stayed within the family that would have been it, but it crossed into a line of law with no counterbalance.

I help a friend with a fractured and traumatic past. Her stepfather sexually abused her, and her mother blamed her for it. Her ex-partner had nearly bludgeoned her to death. He had left her in a coma for days. She had cancer, and it was slowly killing her. She suffered from severe panic attacks and anxiety. Her bedroom draws were full of medication. She had never undertaken psychotherapy and so her trauma remained frozen and unprocessed. Her life story was a lengthy line of abusive episodes and an attempt to move on and forget it each time. She was saving up the medication from her doctor to overdose correctly. She had previously attempted suicide but used the wrong quantities. She had been a nurse and now knew what to take. Like my family, hers lived in separate bubbles and while she was beautiful; like me, she was the source of shame and blame for everyone. They talked about her behind her back, but nobody ever came and helped her.

Our friendship sustained her, but she knew I was going to University after the summer and therefore I would no longer be around. She was a few years older than me and we were in the same boat. We would go out for the day, and she would be crippled by anxiety and I would be crippled by amnesia.

When the time came for me to start University she said, “Don’t come and see me anymore, and never stop what you do and your work.”

A month later her WhatsApp status did not change. I was told to see the manager.

“Your friend has died,” he said.

He looked for a response from me, but I did not give him one.

I worked hard at University and helped the students on the course as much as I could. In my personal life, I helped at a charity shop for a hospice where James’ brother had died, and I had two friends. One suffered from delusions, often that her son was being abused. The other suffered from trauma, took a bagful of medication, and five years on still suffered recurring nightmares in which she suffered a freeze response. The doctor would see me every six months for my “very serious mental illness” and the nurse would visit me once a month to give me a depot injection.

By the time I finished my degree my supervisor said my final year report was “the best he had ever received,” and my friends said, “you literally carried us through the whole degree, especially with group work. If we get a good grade, we owe a tremendous amount to you.”

The last thing I did for my degree was answer an exam question about convolutional neural networks. These are artificial intelligence algorithms which work in some ways like the brain. Visual images are

fed in, processed and a probability calculated of what the label for the image is. For supervised learning, they feed a batch of images with labels into the algorithm and the accuracy of the calculated probability is therefore knowable. If you label a cat image and show the algorithm images of a cat, eventually it will learn to associate the label cat with images of cats, in much the same way as a child learns.

Nicholas and Gloria used word association in the same way. They just controlled what labels applied to whom. In their discourse, they labelled Catherine and Alistair good, positive, trustworthy, kind and they labelled me bad, negative, untrustworthy, mean, nasty and so forth. In a black and white world, knowledge is seen as a linear progression that goes on to infinity. Each time Gloria provides a batch of labels, Catherine and Alistair associate the label with me or doing something to them.

It therefore followed, at a point in time, the labels Catherine and Alistair visualised of me would be amplified to their absolute extreme. Since this is real to them, they keep the labels in their memory, and this provides them with a life story. Fundamental to the story is how do you handle someone who is bad to you? You show absolute love, compassion and respect and avoid them. In our family dynamic, this frees Nicholas to be with his family but estranges me from mine.

It had been a naïve idea of mine to attend Gloria's nurse training hospital. In law, a mental health patient cannot be both sides of a polarity, that is a patient-victim, unless there is evidence to support the case. Law is there to safeguard against harm. It cannot therefore be that procedures are followed to have love, compassion and respect for harm done to a patient as well and prevent a patient from harming either themselves or someone else.

The doctor asked me recently, "Do you still have thoughts of your mother?". The rationale is by treating the patient to have fewer thoughts of Gloria, the risk of the patient to Gloria and her family will reduce. The doctor is resolving the problem, a fixation of the patient that Gloria has done something which is false beyond belief. Gloria, as she says, has done nothing wrong, does not know why Nicholas has been a constant source of problems and distress for her and needs the doctor to help him get better. Gloria is the next of kin, the doctor knows best, and Nicholas should follow the doctor.

My time at Croft House is nearly up and before I leave, "moved on", I sit down with the key worker.

"I had a call from Gloria. She was very forceful. If you ask me, she is more mentally ill than you are."

It is a shame the key worker does not have a wider vocabulary to use, but I know what he is trying to say.

That she is a very controlling stress inducer. Unlike 1979, Gloria feels the doctors have supported her this time, and this has empowered her, while I feel disempowered and intrigued by her profession.

I have had an interesting and insightful journey through psychiatry and meet some fascinating people along the way. My journey to self-awareness though started in 1999. Bobby phoned me one day out of the blue shortly after Nicholas and Gloria divorced. To me, he was my vibrant, intelligent, and witty Uncle. He said he had always been concerned about how the other members of my family treated me and how I was incredibly self-reliant. He invited me to attend a Landmark Education course he was on and I enrolled. I sat on a chair in the course and decided I had a choice between completing it and suicide. Undermining words from Gloria caused James and I to fall out and be estranged for 5 years, although I never realised it at the time. I bore the name Nicholas Fox. I had difficulty with the simplest of conversations. For instance, I could not find the confidence to speak to my co-worker. During the course I learnt to choose. I changed my surname to Lawes, and I reconciled with James. In 2009, I

returned to the Landmark Education course, and I learnt to question. Over the period of the course I began to disassociate and have blackouts. I went to visit James late one evening, and he said, "For the first time I feel I can speak to you and you listen. All I can do is just survive and carry on." He opened up to me about his experience of Nicholas and Gloria and I came to see what Gloria had said [Nicholas forced her to say] to me were not my fault, and that Gloria had a particular way to talking to people before I was born.

Before I went to Gloria's nurse training hospital I attended the final evening on the Landmark Education course. I phoned a friend who is an Executive Officer at the Ministry of Justice. I told her I was having severe flashbacks and mental blackouts and asked her to meet me in Euston. I had written what I called the false story of my life in my flat in Woodham and realised Nicholas was a psychopath. After we met for coffee, I attended the last course session. Words in my consciousness fell apart, my brain sounded like it fried, and I stood up and experienced an epiphany. I could no longer stand, and the assistants took me aside. They took me to Gloria's nurse training hospital, and I was an exhausted, burbling mess. I realised they would not take seriously me, and so I walked to Piccadilly Circus where Gloria and James first met. The police picked me up, and an ambulance took me back to the same hospital. They left me in a room for 24 hours and my friend came to see me. I wanted to return to my local hospital with her, but they would not let me. Instead they put me in a police van and said, "It serves you right!"

At my local hospital, Nurse Gladys gave me a sleeping pill. Nicholas used to call Gloria "Nurse Gladys" and joke to her in front of me, "Some mothers really do ave em!" Catherine phoned me and James came to see me which reassured Alistair who had received a distressed phone call from me. Before they discharged me, I was homeless and never saw my flat in Woodham again. I went to meet my friend who said she ended communication with James because of the way my family was treating me. A few years before I setup James' email account and so I logged in and for the first time in my life I saw how my family treated me behind my back. I thought back to the words of James' friend who had told me they were so struck by the level of deceit of Nicholas and Gloria. Among the emails my friend had written to James, "Gloria should be strung up for what she is doing to Nicholas."

I thought of my Uncle Bobby and felt grateful he had spoken the truth to me.

Back in the here and now, they have moved me on from supported housing and I have my own flat like I did 11 years ago. Lockdown makes no difference to me since I have few visitors other than my care coordinator who gives me a depot injection for persistent delusion once a month. He said once that when he first met me I told him it is abuse and that that had stuck with him. Last year I wrote a report called First Digital Patient, and he read it and said I have been through a lot. In the report, I recorded the correct terms of the medical system which apply to me.

I have completed my degree, and I am awaiting my results. Last month I decided to write a novel called Headlock and yet my journey is not complete and therefore my novel has no ending.

I have written this letter on 22 pages on the 22nd because I am entwined in double Catch 22.

I wonder what I will write as the ending of my novel. I recall going to see The Phantom Returns with Catherine, and in a fugue journey there is a return, no different to the 5 act structure of a novel.

I also wonder whether I will see my friends and family again while we are alive.

Until we resolve the recurring anomaly that will never happen.

I thank you for your letter and I hope you have read my letter in full and found it a welcome distraction.

I have included a surmised set of letters for your Tribunal on a Persistent Shared Delusion which has affected my entire life.

I observe if mental health law has this case of truth splitting resolved, it will open alternative possibilities for future adult survivors of childhood abuse for whom I feel our system of state falls short.

Applying terms for such cases poses conundrums as perplexing as it was growing up with Nicholas and Gloria. As a consultant for Capgemini, I worked on providing simple solutions for complex problems of state. 41 years later, I am still working on the one Nicholas handed me.

I wish you a wonderful day and thank you once again for reading my letter. I have written thirteen and a half thousand words; I hope this sets an office record for you.

In the public interest, I would like you to play your part in resolving this intra-familial matter for once and for all.

Yours sincerely,

Yours sincerely,

Lucas Lawes
Mental Health Patient (ICD F44)

Nicholas Fox
Mental Health Patient (ICD F22)

c.c.

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**HM Courts
& Tribunals
Service**

Surmised Letters to the Tribunal on a Persistent Shared Delusion

To Resolve the Anomaly From all Perspectives

Without Everyone Being Together

As is the law under lockdown.

By Lawes of Relativity

(LOR)



For our society

In the public interest.

“Child abuse in Britain is a huge problem
with more than 30,000 children on the at risk register at any one time.”

“The Law says Child Abuse ends at 18. If only.”

“It is estimated hundreds of thousands of adults may have been abused as children and have never
talked to anyone about it.”

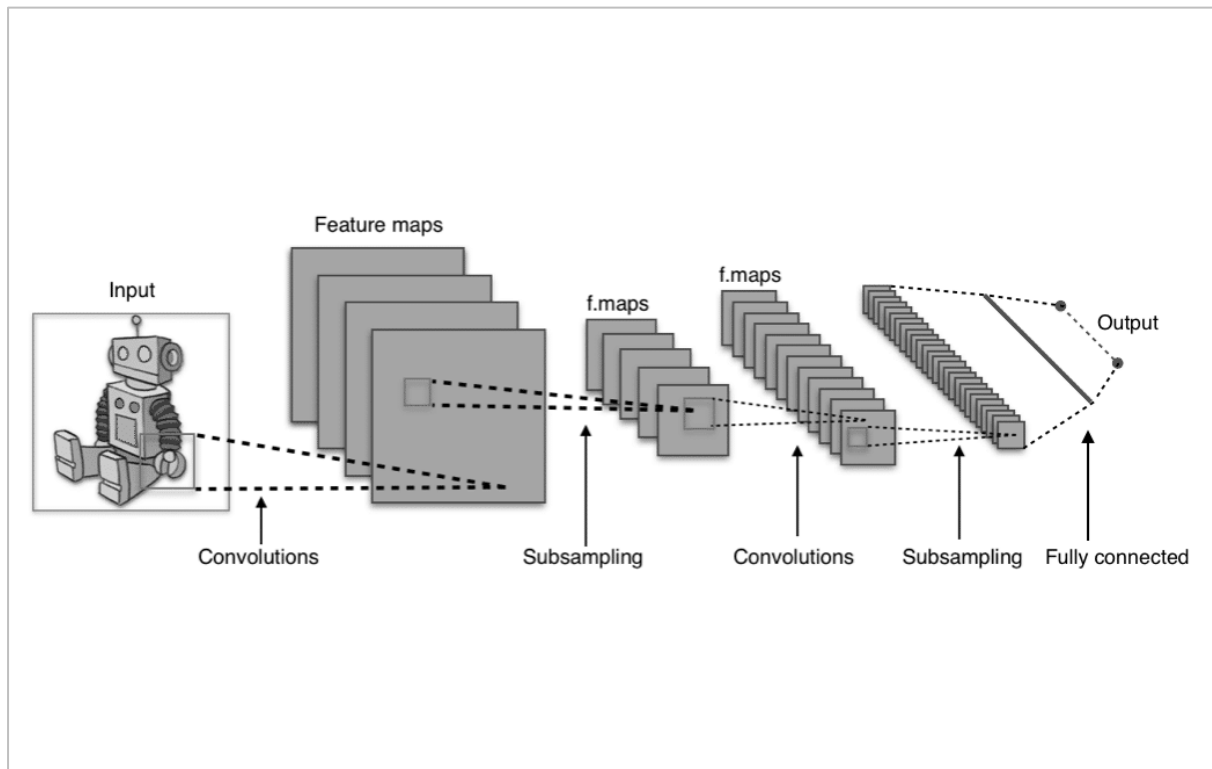
NAPAC helps those adults who experienced physical, mental, or sexual abuse in childhood.

Its helpline number, 0800 085 3330, is open from 9am to 1pm from Monday to Friday.

To make a desperately needed donation to the charity, call 020 8313 9460.

napac
The National Association for
People Abused in Childhood

A Convolutional Neural Network



Word Association (Labelling)

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Letter from the Doctor

Epsom CMHRS
Farmside
West Park Road
Epsom, Surrey
KT19 8PB

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

Nicholas is having another acute episode. This is common in patients with his condition.

I renewed his Community Treatment Order because I assessed him to be uncooperative and lacking insight into his illness.

Nicholas says a lot of things which are delusional, and they cause great distress to his family.

Nicholas has been communicating again, and I will review his medication as it is obviously not working.

The risk is we cannot trust Nicholas to take his medication and therefore the only way forward is to continue his Community Treatment Order.

Yours sincerely,

Dr Qazi

Letter from the Care Coordinator

Epsom CMHRS
Farmside
West Park Road
Epsom, Surrey
KT19 8PB

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

It is a shame Nicholas has regressed since I last assessed him as he seemed to be doing well on his medication. Nicholas was doing better than a few years ago.

Nicholas has recently moved from supported to independent accommodation.

I think he is having difficulty coping, and his increased isolation is behind his bizarre thoughts.

I read his First Digital Patient report and I have to say he writes well and has been through a lot.

I think he needs long-term treatment to make progress. Nicholas thinks his medication is medical abuse and therefore the only way forward is to continue his Community Treatment Order.

Yours sincerely,

Joseph

Letter from Catherine

20 Upper Coll
Isle of Lewis
Scotland
HS2 0LS

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

I am dismayed and appalled Nicholas keeps sending ridiculous messages to all and sundry.

What Nicholas did to me has nothing to do with Nicholas. It happened a long time ago, and I have forgiven Nicholas and moved on with my life.

What Nicholas is still doing to us is utterly unforgivable.

I hope you keep Nicholas under a Community Treatment Order for a long time because my family deserves a rest from all this, and this is the only way Nicholas will ever learn to be decent.

When I first heard Nicholas was in hospital I sympathised with him and got my daughter to draw Nicholas a card and we posted it to him. On the card I got her to draw a crazy and deranged looking picture of Nicholas with the tag line "Uncle Nik on the way to the Nickbin." Now I have no sympathy for Nicholas, and I am glad you are treating my brother well and I pray he recovers from all this constant gobbledygook he keeps sharing.

Praise be to God.

Yours sincerely,

Catherine MacDonald

p.s. Although coming to think back to my childhood, I was the one who called my brother NickNick and Nasty Nicki. There was a lot of commotion about him and it was a confusing time for me. Sometimes I look back and think I was told so many things I do not know who to believe. I said I would never go back and I live in Back! I am glad I have left it all behind.

Letter from Alistair

8 Sevington Close
Birmingham
B91 3XL

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

I speak for the entire family and I am fed up and totally infuriated by Nicholas being so rude, inconsiderate, insulting, interfering, exasperating, hurtful, cruel, ridiculous, pathetic, deceitful, controlling, manipulative, irresponsible and argh. I could go on forever.

Nicholas is a constant menace and a bad person who is abusive towards everyone in the family and is a constant shame and embarrassment to us. Yes, so Nicholas should be in prison but there is nothing we can do about it, but it does not mean Nicholas should be so disrespectful, hurtful, and cruel to everyone in the family.

If you ask me Nicholas picks on someone else so he does not have to take responsibility for what he refuses to admit. That he is unable to cope with anything, lacks intelligence, has a weak disposition, blames everyone else for his own failings, never takes a hard look at himself and is severely mentally ill.

We are sick and tired of constantly having Nicholas causing us so many problems and constantly going on about the other Nicholas which has nothing to do with him. We deserve peace and quiet and if you ask me Nicholas should not be on a Community Treatment Order. Nicholas should be in a secure hospital so he cannot abuse us anymore and cause us upset and fury.

Only when Nicholas shows us maximum love and compassion will we ever speak to him again. In fact, I choose not to communicate with him and keep away from him. And so does all the family, because of all the problems he has caused us. And my mother and father finally agree with me and choose to do the same.

Love and Peace,

Alistair Lawes

p.s. I wished and hoped my brother would get better and learnt to behave himself, but he never ever did. It's just the four of us now. Mum, Dad, Cath, and I. Like it used to be before he was born, and Nicholas came along and terrorised us, just like my brother did. I am glad I have left it all behind.

Letter from James

43 Westbourne House
Hounslow
Heston
TW5 0SL

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

I do not want to be involved in this, but I do not want Nico to get away with all this either. The trouble is if I tell you anything you are likely to tell Nico and we all go round in a circle again.

When I first heard Nico was in hospital I had sympathy for him, but then he got me involved in a drama triangle with his friend the Executive Officer from Justice who deals with mental health patients on a daily basis. I included her on our family emails about Nico and she sent me a text and turned nasty. She said we should treat Nik with kindness and understanding.

Catherine and Alistair used to constantly talk about Nicholas amongst themselves and these last few years we have finally got back to normal and lived in peace and quiet until his recent communication with us yet again, which started off all the conversations behind his back.

Nico is a complete failure and I am totally embarrassed by him. I no longer even have a picture of him in my apartment I feel so ashamed of him. The trouble is he does not like to be criticised and feigns illness to cover up his failures. He does not seem to be able to do the simplest of things.

I did not know Nico growing up because Gloria left me for Nicholas when he was just a small baby, so I am not to blame. Catherine and Alistair came back one by one when they were aged 18, and all I would ever hear about is Nicholas, Nicholas, and more Nicholas. I do not want to be having to deal with this at my age. I am a kind, decent gentleman and I no longer want to be put through anymore. I want you to keep Nico on the Community Treatment Order and if he ever tries to contact me again I will phone the police for harassment.

Yours faithfully,

James Lawes

p.s. The first time I ever saw him do anything at Wellington School in Somerset was on the second to last day. I had heard so many negative things about him, but there my son as Nicholas Fox leading the school band. I missed his end of year speech, but I heard the headmaster say had he known my son could speak that well he would not have advertised his previous position. I recall a funny coincidence. I met his band master, then took Nicholas Fox to London. I took him inside the Houses of Parliament, and we bumped into his band master. I wonder now why I took him there.

Letter from Gloria

30 Lime Trees
Christian Malford
Wiltshire
SN15 4BN

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

I do not think it is a good idea to write to you publicly as everyone can see what I am telling you. It is much better if we communicate privately so I can tell you about all the problems I have had with bringing Nicholas up and all the problems he has caused the family.

I smoked when I was pregnant with Nicholas and that has caused half of his problems. The other half is Nicholas did not turn out to be a very nice character and constantly caused me strife and grief. You already know the rest, so I have no need to repeat it.

I am glad the doctor and care coordinator continue to follow what I am saying. There needs to be more support for parents like me who have extreme difficulties with their children.

I have not been in contact with Nicholas since the divorce and I have read Nicholas' 22 page letter to the Tribunal Service and I do not recognise most of what he has said. Alistair took a considerable beating because of Nicholas, and when you get labelled as a liar it tends to stick, as Nicholas has found out. Catherine and Alistair are perfectly happy and have their own families to worry about, it is just Nicholas who has a problem which I could never do anything about however hard I tried as his mother.

Nicholas is deluded and needs support. I used to be a nurse, but I do not know whether Nicholas needs to be under a Community Treatment Order or detained. I am only following what the doctors recommend and as his next of kin I look forward to hearing what the way forward is in the faint hope he will one day get better. As a mother I can never give up the hope that my son will one day be normal.

Yours sincerely,

Gloria Mortimer

p.s. Sometimes I would sit him beside me and tell him about life and what he would one day face and that he would have to find a way of resolving things as I never could. I wonder now whether in the end I did the right thing after all.

Letter from Nicholas

Shepherds Cottage
Higher Street
Stoke sub Hamdon
TA14 6SN

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

24th June 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

What?! I am afraid I have no idea what you are all talking about. Who are these people, I have never heard of them in my life before.

Catherine says I sexually abused her? Who? That is a repulsive and prosperous accusation to make. I am a perfectly decent and respectable man. The woman must be completely deluded. I have never even heard of her before and I have certainly never even met her.

Alistair says I am a bad person? Who? That thick idiot? I have never heard of him in my life before.

I emailed him saying his brother Nick visited and it was rather disturbing and worrying? Who? What? That complete and utter imbecil? I have never met him in my life before.

I'm a fox who has left a long tale behind them in their former step-family? Oh, that completely mad lot. All the good things I did for that ungrateful bunch. They were a constant source of problems for me, the bane of my life, a complete menace, and I am glad I left Gloria. I have the freedom now to enjoy my life and I am so much happier without that mad woman and her god forsaken children in my life.

I still owe James the money for rent? Who? That moron? Who's he? I have never even met the man. I do not owe anyone anything. It is totally bizarre claim to make.

Can I come with you and answer a few questions? No, why should I? I am perfectly within my rights. There are lawes in this country and I am a thoroughly decent human being.

How do I account for sharing an extremely convoluted intra-familial neural network spanning over 40 years? What?! I was an accountant yes, I have no idea what you mean, you must all be deluded too.

No, you were only joking? Oh right.

Do I think Nicholas should be on a Community Treatment Order? Oh yes, Nicholas is very disturbed and worrying. Nicholas is a terrible person. If I were you, I would lock Nicholas up and throw away the key. Nicholas is completely deluded and needs support.

So I agree with Catherine, Alistair, James, Gloria, the doctor and the care coordinator then? Oh yes absolutely that is the right thing to do to move forward from my perspective.

What do I mean from my perspective? Well, I have all the dumb idiots looking the other way don't I!

Why do I think they should be grateful they are alive? Well, it was either that or I would have killed them.

Why do I control and manipulate children? Well, there is no law against lying and psychiatrists think trauma is the primary cause of psychosis, the thick idiots, and the patients do not have a right to a fair hearing.

What was it like losing my daughter Emma? Terrible, the shock and trauma was utterly awful, I cannot imagine anything worse than to lose your own child to a psychopath. There is no justice in the world and no laws to ever resolve such hatred and violence.

Did I know my former stepson Nicholas was in the same bar Emma was in Bali, only he was there two weeks earlier than her? Oh gosh, typical, that kid has all the luck and I am the one who always suffers.

Do I believe in a fair and just society? What!? Yes, of course I do. But it is not, life is cruel and unfair.

How are my intra-familial relations? What! I do not know. I have not had any communication with them since the divorce. In fact, I never really communicated with them much at all. It was all Gloria doing the talking, I kept silent for most of the time and kept myself busy while my stepchildren grew up.

How do I think they turned out? What!

Catherine? Oh, she was Goldie Locks. I have no idea how she turned out. I even went to her wedding unlike that moron James.

Alistair? Oh, he was Ali-Bongo, the one who always bangs on about my namesake. I have no idea how he turned out. I even had to email him I was so worried and disturbed by my scapegoat speaking to me calmly in front of my partner.

My Scapegoat? Oh, it was Pinocchio, the one who always lies and causes trouble. I know how it turned out. Gloria forced me to tell it and I said it will never be believed; the doctors will medicate it, and it will end up in Coventry. I knew that outcome in 1979 after I watched how psychiatry treats victims. Imagine being a patient and psychiatrists just watching Jimmy Savile wandering around while dosing them up. Nothing ever changes, so it offers us security.

My ex-wife? What! Oh, queenie! Ha-ha, the one who always must put my world to rights. I know how that one has turned out. I bet she annihilated her son. Given the choice of losing all her children or just one, what do you expect a stupid, mad woman to do in exchange for her life and total devotion to me.

James? What! Never even met the man. Probably feels totally embarrassed and ashamed of his son the stupid idiot. He should just feel lucky some psychopath did not kill any of his children, unlike what happened to me.

Now will you all go away, I only have a short time left to live and I want to enjoy myself. I have said sorry to Nicholas and shaken hands with Catherine. All right? Are you all happy now? Good.

Now go away and leave me alone for God's sake. Otherwise I will call the police for trespassing.

Yours sincerely,

Nicholas Fox

p.s. I wish I had killed it when I had the chance, because it has potentially finished the lot of us.

Letter from the Panel Doctor

HM Courts & Tribunals Service
First Tier Tribunal (Mental Health)
PO BOX 8793
5th Floor
Leicester
LE1 8BN

16th October 2020

Dear Tribunal Judge,

To Resolve a Recurring Anomaly. Ref: MH/2020/14648.

Thank you for sharing the letters with me, I have made my assessment, and I observe Lucas has done everyone else's work for them.

I find this is one of the most severe cases of Stockholm Syndrome I have ever come across.

The term Stockholm Syndrome is associated with the medical term Complex PTSD.

I observe the Executive Officer from Justice to be correct. This matter must be handled with kindness and understanding.

While the term Munchausen by Proxy is not readily used it does apply in this case.

I recommend mental health law is applied to Nicholas and Lucas is treated well. He has carried the lot of us for 11 years.

Yours sincerely,

Criminal Psychiatrist

p.s. Now I understand why you bombarded me and everyone with emails. I was wrong about Nicholas, there is something we can do about him. I did not realise the Children's Commission published a survey based on your case. In the future, I hope more cases get resolved for people.

Letter from the Panel Judge

Ministry of Justice

Lucas Lawes
Flat 8, 1 Pavilion Place
East Molesey
KT8 9FE

4th April 2021

Dear Lucas,

I have been informed your diagnosis will be corrected and you will receive moderate compensation for what you have been put through.

We now understand that you, your sister, and brother were misled, to put it mildly, ever since they complained about your former stepfather to your mother. We now appreciate the delicacy of the matter and that your sister does not know to speak out. Your stepfather will be charged with committing various forms of abuse when you were children. That includes causing tremendous psychological damage to your family, including your father. You will have your medical record correctly record you suffered psychological abuse and were scapegoated. The codes you wrote in your First Digital Patient report are accepted and will be recorded as well. As for your mother, she is being psychiatrically assessed as I write, and she will have to face a charge of Munchausen by Proxy, if only to acknowledge it. We think you and your siblings were afflicted by Stockholm Syndrome before you left to be with your father. You later came to realise things were not as they seemed 12 years ago. We understand by reversing into our medical system, you caused us to follow your next of kin and family who reported what is essentially a shared delusion to us. We, therefore, recorded the diatribe about you as a small image of what your former stepfather is like. Once we understood that it became a whole lot easier to understand what you meant by projective identification and see you buried underneath it. We will be keeping you on your community treatment order for now. However, we will reduce your depot each month and refer you for the support usually provided to patients who have recovered from a brain injury and have memory problems.

I would like to add you have been through an immensely challenging ordeal. You helped yourself and you neither did harm to yourself or others. You faced an immensely complex conundrum, and I hope what I have said helps you to know the matter is slowly but surely being resolved.

I surmise that you have never heard a doctor heal with words before, but I want you to know that is the possibility you have created for us to realise for you and your family.

Finally, we observe you have shown us the dysfunction is not the fault of your family, but our system of terms.

Your sincerely,

Kerry Doughan
Executive Officer

p.s. I never forgot what happened to you being the worst experience of my life. When we were flatmates, I watched you teach yourself an entire profession. It seems to me you have once more.

Letter from Lucas

Kerry Doughan
Executive Officer
Ministry of Justice

4th April 2021

Dear Kerry,

Thank you for your letter and I hope you are keeping well and staying safe.

As you may know, a fugue is a transformation journey, much like the structure of a 5 act script, and the journey always ends back at the beginning.

Last year I watched the First World War film 1917 by Sam Mendes while under lockdown. In the film the main character begins a journey and ends it at the same point, beside a tree. By the end, he has lost his friend, but he has made a small difference for the people he stood for and he has survived something so many did not.

I stood for all humans and I observe Lawes of Relativity to me are about learning to resolve the dilemmic polarity of language. To empower every one of us to attain some sense of overall completeness and decency in our lifetime. Much like the Dalai Lama says about oneness.

At the time I began my fugue, I phoned you from West Byfleet train station suffering from blackouts and you came from your office in Westminster to meet me in Euston. During my stupor in UCH E&A, you helped transfer me into our mental health system. Before then, I used to think of your job of transferring prisoners between prison and mental health services as rather boring and unimportant. I was wrong and I have learnt to appreciate what it is you do.

Thank you for doing your part in helping everyone.

Kind Regards,

Lucas Lawes

p.s. I am sorry to have bombarded you with emails, and I hope we can become friends again one day.

Rising Awareness



Aurora is a NAPAC affiliated trauma recovery service and therapeutic community based in Kingston that helps adult men and women who have suffered any kind of childhood trauma/abuse.

We were founded in 2006 by Susannah Faithful-Gaunlett to provide a safe and confidential space that helps survivors work through childhood trauma. We do this by providing one-to-one counselling/psychotherapy, and also occasional workshops and social activities.

Our waiting list is now open so if you wish to find out more about Aurora's services please call us on 020 8541 1951.

Andy Law is fundraising for Aurora by producing a CD of folk music from Cornwall and around the British Isles.

He is selling the CD and donating all the proceeds to the charity.

<https://www.justgiving.com/fundraising/andylaw1>

Correct Labelling



Gloria



Alistair, Lucas, and Catherine



Nicholas

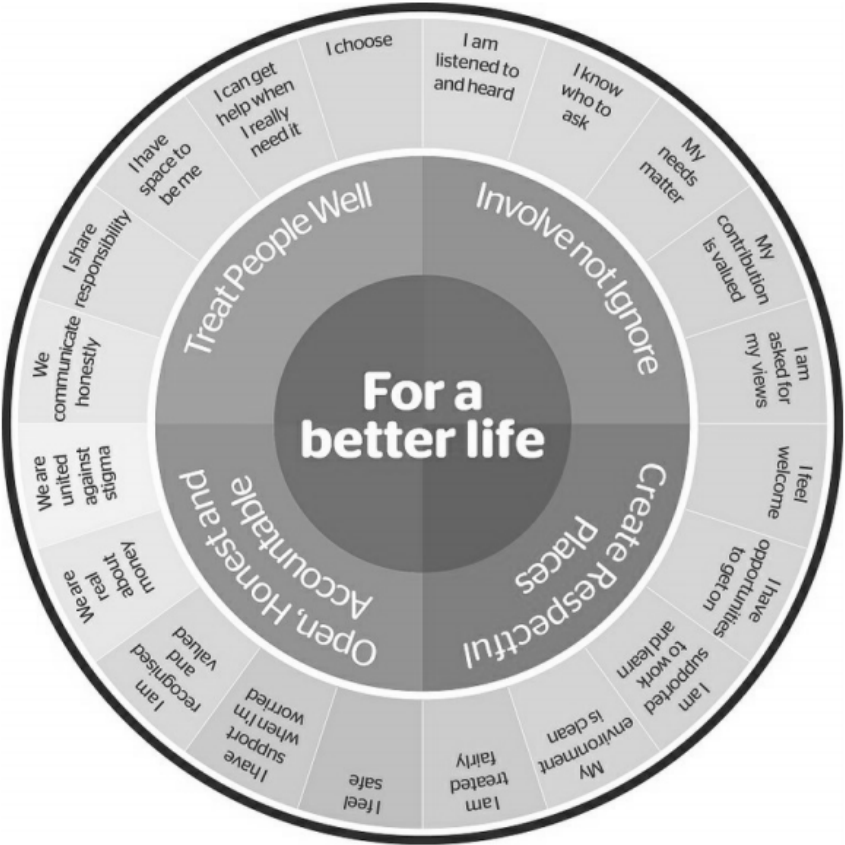
For a better life



Nik and Nick

Raising money for Aurora in Kingston, 2012

Values for Surrey and Borders Partnership



Who enact mental health law.

To Resolve an Anomaly

By Intra-Familial Lawe

=====

*By the **Lawes of Relativity** which bind us all in our lifetimes to be decent, I concede that to experience true freedom I must confess.*

In 1979, I committed truth splitting on Lucas, my former stepson, so he should always suffer the consequences of what I had done, and I should continue my life unopposed. I sexually abused Taffy, Lucas' childhood name for my former stepdaughter, and arranged the sexual assault of Lucas.

From the outside of my houses, we lived a middle class existence, but inside the home I tightly controlled a regimented and utilitarian alternate reality from which only I benefited. I forced Gloria, my former wife, to show me she could control my stepchildren by terrorising them using extreme psychological abuse, and in doing so I shaped their life-world to my advantage.

I held the father of my former stepchildren, James, as my principal threat and challenge. I held his three children captive until they each reached the legal age of 18. One by one, they each left me for James with a condition you would think of in today's terms as Stockholm Syndrome.

By signing this confession, I bring to the attention of the Sovereign Realm that all humans can stand and be decent when they so choose. I pronounce an end to my exploitation of Lucas and recognise the tremendous psychological damage I have done onto those I committed to love and cherish when I

married Gloria in 1976. I am sorry for all the harm I have caused, and by signing I acknowledge the power all humans have inside their self to resolve matter amicably.

I declare the above to be true in the words of the language I read and write.

I have resolved the truth of this intra-familial anomaly all ways.

*By the **Lawes of Relativity**, I am granted compassion and understanding for my honesty.*

I have suffered from the polarity of human reason and passion which hindered my childhood and killed my daughter Emma in the Bali bombings in 2002.

Your Majesty, I stand for a Lawe of Resolution to empower humanity to harmonise our reasons and passions throughout our lifespans.

I Signed

My Scapegoat Signed

Nicholas John Fox

28/11/1944, Weston

Point in time

Lucas Edward Lawes

04/04/1973, Chiswick

Point in time
