## Case vignettes

## *GP 7 about problems in referral/lack of staff in handling a case of acute psychosis after substance abuse.*

A 16 year old homeless undocumented Algerian boy came to the healthcare centre with symptoms of an acute psychosis. Because this boy was underage, he had the right to direct access to the healthcare system. The GP accompanied him to a psychiatric clinic in the ambulance and the boy was admitted to this clinic for a period of three weeks. His psychosis was most likely caused by substance abuse and his urine test was positive for cannabis.

After discharge from the clinic, he was placed in a shelter for underage migrants, because he had nowhere else to go. A few days later, he was brought to the healthcare centre again, and it turned out he was psychotic again after substance abuse. This time he had cut himself in the leg and became so aggressive that the GPs and nurses decided to lock him up in the healthcare centre while waiting for assistance from the police. Due to his violent behaviour and the lack of manpower in the centre, the GP was not able to give him an injection with a sedative. Unfortunately, he broke through the doors and damaged the healthcare centre.

Six hours later the police arrived with extra reinforcements and took the patient with them after the patient had been given a sedative. The GP had no idea how this case had ended, since there was no further communication between the GP and the clinic.

## GP 3 about problems with referral: lack of transport to the mental healthcare hospital

There was this case that the ambulance drivers did not want to bring an undocumented patient from the primary healthcare center to the nearest mental healthcare center. The man was suffering from a psychotic depression, and really needed to be admitted. As there was no alternative, the GP took this patient in her car and brought him to the mental healthcare hospital herself. She accompanied him to the clinic, and the patient was admitted. However, the undocumented migrant had difficulties in accepting the fact he needed to be admitted and that he had to receive therapy. It was very difficult for the GP to get the patient into the car and into the clinic; and the drive to the mental healthcare center was a very stressful event for both the GP and the patient. Reflecting on this situation, the GP stated that she probably would not do this again and that the risks that something would happen on their way to the clinic were too high.