Mental Health (Wales) Measure 2010
Part 1 Scheme
‘Local Primary Mental Health Support Services’
for
Abertawe Bro Morgannwg University Health Board
and
Partner Local Authority areas of
Bridgend, Neath Port Talbot and Swansea.
Contents

1. Introduction ................................................. 2
2. Partners .................................................. 3
3. Purpose/scope of the scheme .................. 3
4. Vision for the Local Primary Mental Health Support Services 4
5. Responsibilities ........................................ 4
6. Eligibility for assessment .......................... 5
7. Equality ................................................. 5
8. Provision of services in English and Welsh 6
9. Where services are to be provided ............ 6
10. Local Primary Mental Health Support Services 7
11. Joint working arrangements .................... 12
12. Performance management .......................... 13
13. Governance ............................................ 13
14. Promoting the Local Primary Mental Health Support Services 14
15. Arrangements for Review of the Scheme 14
16. Arrangements for altering the scheme ....... 14

Appendix 1 Services to be delivered ............... 16
Appendix 2 Signatories to the Scheme .............. 16
Appendix 3 Version Control .............................. 18
1. Introduction
This joint scheme for the provision of local primary mental health support services is a regional scheme for the local authority areas covered by the Abertawe Bro Morgannwg University Health Board. It has been developed under the provisions of section 2 of the Mental Health (Wales) Measure 2010 which require that the local mental health partners for a local authority area must take all reasonable steps to agree a scheme:

(a) which identifies the treatment which is to be made available for the area (local primary mental health treatment), and

(b) for securing the provision for that area of the local primary mental health support services (described in section 5 of the Measure)

The provisions of the Measure have been extended by the Mental Health (Regional Provisions) (Wales) Regulations 2012 which allow joint schemes to be established for combined areas of local authorities coterminous with the relevant LHB.

This joint scheme seeks to assist the delivery of local primary mental health support services across the Health Board area. It provides a framework for the provision of the local primary mental health support services that the Health Board and Local Authorities have a duty to deliver for their populations under Part 1 of the Mental Health (Wales) Measure 2010 (the Measure). Local primary mental health support services are:

a) the carrying out of primary mental health assessments in accordance with Part 1 of the Measure;

b) the provision for an individual of local primary mental health treatment (interventions), following assessment;

c) the making of referrals concerning services which might improve or prevent a deterioration in the individual’s mental health;

d) the provision of information for service users (of the service) and carers of information and advice about services that are available to them; and

e) information, advice and other assistance for primary care providers (GPs) so as to improve the services related to mental health which they provide or arrange.

The aim of these services is to improve access to mental health care within primary care settings, and to improve the outcomes for individuals accessing these services. This will be achieved by increasing the availability of mental health services in primary care, providing support for individuals in meeting their non-medical needs and increasing the support available to primary care providers to help them improve the health and well-being of people with common mental health problems.

The National Institute for Health and Clinical Excellence (NICE) suggests that common mental health disorders, such as depression, generalised anxiety disorder, panic disorder, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD) and social anxiety disorder, may affect up to 15% of the population at any one time. It is essential therefore to ensure services are provided for this group. Furthermore morbidity studies estimate that 17.6% of the adult population (21% women and 12% men have a common mental health problem. A further 17% of the population experience sub clinical threshold common mental health problems, 6% have sub threshold psychosis and 24% drink at levels defined as hazardous to their health. These sub threshold presentations provide us with opportunities for prevention, health promotion and early interventions. For most GP’s this means 1 in 4 of their service users would benefit from this service and currently would not receive any care from Mental Health Services.
The Scheme is an enabling agreement which identifies the mental health partners who are responsible for ensuring the provision of local primary mental health support services. It sets out the local vision for these services, the responsibilities of the partners, eligibility criteria, the treatments that will be provided and on what basis they will be provided for specific groups, and addresses governance issues. It builds on the guidance set out in the National Service Model and the agreement of the local services model, but it does not provide operational detail. The scheme also enhances existing Primary Care Mental Health Services.

The local primary mental health support services which this scheme supports will be effective from 1 October 2012. This scheme will support the planning for the introduction of these services and it is expected that the scheme will be revised periodically in the future as the services mature.

2. Partners
As defined by the Measure and amended by the Mental Health (Regional Provision) (Wales) Regulations 2012 the local mental health partners’ are:

- Abertawe Bro Morgannwg University Local Health Board
- City and County of Swansea
- Neath Port Talbot County Borough Council
- Bridgend County Borough Council

Others who will be included in the provision of services are:

Local third sector partners who will deliver services which directly support local primary care mental health services providing interventions such as information and advice, counselling or issue specific support or may already deliver services of benefit to users of primary care services. Local third sector organisations who deliver mental health services are members of the Council for Voluntary Services for Neath Port Talbot and Swansea and the Bridgend Association of Voluntary organisations (BAVO). Representatives from these organisations are integral to the implementation and steering groups for primary care mental health support services and the ABMU Mental Health Joint Planning Group.

3. Purpose/scope of the Scheme
The scheme will support and secure the provision of local primary mental health support services for all ages across the local authority areas of Swansea, Neath Port Talbot and Bridgend. The prime purpose of the scheme is to identify the local primary mental health treatments which are to be provided for these populations and the arrangements for securing the provision of these services between ABMUHB and its Local Authority mental health partners, in accordance with section 2(1) of the Measure.

The scheme also identifies:

- the extent of the responsibilities of each of the mental health partners for the provision of the services
- eligibility of individuals who are subject to the provisions of the Mental Health Act 1983 or who are in receipt of secondary mental health services, and categories of individuals who would not otherwise be entitled to an assessment, to be referred to the local primary mental health support services,
- persons who can refer such individuals to these services
- arrangements for altering the scheme
- governance arrangements
4. Vision for the Local Primary Mental Health Support Services

The overall objectives of local primary mental health services as set out in the National Service Model for Local Primary Mental Health Support Services 2011 are to:

a) increase the availability and uptake of mental health services at the primary care level, in order to improve outcomes for individuals of all ages and to increase effectiveness and efficiency in accessing secondary care, where this is indicated;

b) provide age inclusive effective primary mental health support services that are accessible and close to those who require them. These services should be appropriate, acceptable and outcome-focussed, with an emphasis on promotion of an individual’s well-being, recovery and resilience. This means that care is not compartmentalised or interrupted on the grounds of chronological age and minimises transitional issues that occur with traditional patterns of service.

c) work with and develop close relationships with GPs and practice staff, and to provide support, consultation, advice on clinical management, education, training, and liaison in order to develop capacity for, and approaches to, managing mental health problems in primary care.

Building on this the ABMUHB partnership vision is to develop and deliver a quality local service that will increase the availability and uptake of mental health services at the primary care level, in order to improve outcomes for individuals of all ages and to increase effectiveness and efficiency in accessing secondary care, wherever this may be required. The scheme will aim to provide people of all ages across the ABMU region with effective primary mental health support services that are accessible and close to those who require them. These services will be appropriate, acceptable and outcomes-focussed, with an emphasis on promotion of an individual’s well-being, recovery and resilience.

An integrated health and social care service will ensure that agencies work together to provide a seamless service as people’s needs often span health, social and 3rd sector care. Partnership working is crucial to the success of the new service development and in achieving its objectives.

Community networks are an integral aspect of the delivery of Primary Care Services and the relationship between all statutory, non statutory, third sector and key partners in the community is essential. There are significant resources available in the community that surround Primary Care and engagement with all relevant partners is vital. This will be reflected in day to day operational delivery and in strategic terms.

5. Responsibilities

Sections 2(3) and 2(4)(a)) require this scheme to outline to what extent each of the partners within the ABMU scheme are responsible for providing local primary mental health support services in each of the local authority areas.

Within the ABMU ‘region’ the responsibility for providing the local primary mental health support service in Bridgend, Neath Port Talbot and Swansea will lie with ABMU Health Board.

The Health Board will work with Local Authority partners who deliver a wide range of community services including social care, education, employment, accommodation and information/advice services.

The Health Board will work in partnership with third sector organisations who deliver a wide range of generic community support services including health and well being, education, day
services, volunteering and employment opportunities, accommodation and information/advice/advocacy services.

General Practitioners will remain responsible for providing the services to patients outlined within their general medical services contract. Provision of the local primary care mental health support service will not supplant general medical services but will enhance the range of services available to patients at a primary care level.

Clinical responsibility for a patient will be shared between the GP and the local primary care mental health support service in respect of individuals referred by the GP.

6. Eligibility for assessment

The service is intended for people of all ages who seek help for a mental health problem from their Primary Care Service who are appropriately referred to the services. The local primary mental health support services will be available for individuals of all ages, from children and young people to older adults. The Measure does not allow for self-referral to local primary mental health support services.

Referrals can only be made by:

- the GP with whom the individual is registered; or
- a GP with whom the individual is not registered, or is eligible to be referred under the Mental Health (Primary Care and Eligibility to Undertake Primary Mental Health Assessments) (Wales) Regulations 2012
- a person working in secondary mental health services in respect of an individual subject to the provisions of the Mental Health Act 1983, or in receipt of secondary mental health services, providing individuals are eligible for the services provided and the person making the referral is eligible to do so.

As the proposed service is based on a tiered whole-system model arrangements for the provision of services for individuals referred from secondary care for interventions provided within the LPMHSS will be agreed via a formally agreed care pathway with a clear lines of communication facilitating ease of referral (on a two way basis) from one to the other. In such circumstances the responsibility for their care coordination and care and treatment plan will remain with their care co-ordinator in secondary care.

Referrals may be made in respect of individuals of any age who present with any form of common and/or stable severe and enduring mental health problem, regardless of whether that individual may also be experiencing any co-occurring condition such as a learning disability or a substance misuse problem. Individuals subject to 117 of the Mental Health Act (1983) may also be referred to the service providing that their condition is appropriate for a referral to the LPMHSS.

The target maximum waiting time between referral by a primary care practitioner and the assessment being carried out by the local primary mental health support services will be 28 calendar days.

There will be regular reviews of referral protocols to ensure that they remain relevant to local need, and that the skills of the Local Primary Mental Health Support Services staff are being used appropriately.

7. Equality

An equality impact screening assessment has been undertaken and the decision not to undertake a full assessment was made as there is no negative impact identified.
8. Provision of services in English and Welsh
ABMUHB and the Local Authorities have Welsh Language Scheme Documents that outline commitments and obligations under the Welsh Language Act 1993, and have adopted the principle that in the conduct of its public business, it will treat the English and Welsh language on an equal basis.

Social Services Departments and Social Care providers are to be expected to:
- implement a systematic approach to Welsh language services as an integral element of service planning and delivery.
- build on current best practice and plan, commission and provide care based on the ‘Active Offer’.
- increase the capability of the workforce to provide Welsh language services in priority areas and language awareness.

The Welsh Government believes that desired actions should not require additional resources, what they need is a different way of working.

Social Services will be expected to nominate a senior manager as Welsh Language champion, to support implementation of Welsh Language Strategic Framework and Action Plan for the services, which may include mainstreaming the Welsh language into all transformational developments linked to Sustainable Social Services in Wales.

9. Where services are to be provided
In keeping with the philosophy of the Measure local primary mental health services will operate within or alongside GP practices. ABMUHB area is composed of 11 GP Community Networks (77 practices in total). These consist of 5 community networks in Swansea, 3 in Neath Port Talbot and 3 in Bridgend. In order to ensure equity in the delivery of the local primary mental health support services the delivery will be located within each of the Local Authority areas ensuring each community network of GP practices is provided for.

Some services will need to be developed at a locality level and effective use of resources made across the networks to enable the delivery of less common interventions.

The service will be delivered via a mixture of centralised and locality based static and peripatetic services which will be determined by local demand and demographics.

It is intended that practitioners will undertake ‘face to face’ assessments with service users and provide ‘face to face’ support and liaison for GP’s and the primary care teams within each practice, however it is likely that accommodation issues in some GP practices and branch surgeries will mean some service users will be asked to visit alternative premises for assessment.

Telephone consultations will also be available as deemed appropriate to the needs and wishes of the clients and for discussions with professionals in primary care. Similarly 1 to 1 interventions provided by members of the locality team will, where practical, be provided in GP practices however, a broad range of community resources will be utilised to provide and deliver a wide range of health and social care interventions.

Arrangements for the provision of special groups such as the homeless, prisoners, asylum seekers and refugees within ABMU will be agreed in partnership with third sector providers.
10. Local Primary Mental Health Support Services

Fig 1. ABMU Local Primary Mental Health Support Service Model Pathway Diagram
See Appendix 1 for list of interventions available within the LPMHSS.
Fig 2. ABMU Local Primary Mental Health Support Service Model Delivery Diagram

The local service model will deliver strong, accessible and focussed local primary mental health support services in the spirit of the National Service Model for Local Primary Mental Health Support Services (WG August 2011).

The Measure seeks to eliminate variability in the core characteristics and qualities of local primary mental health support services, but allows for flexibility in how services are delivered locally.

Local primary mental health support services within the ABMUHB region will provide local access to support for people of all ages who have common and/or stable severe and enduring mental health problems, including psychosocial, behavioural and emotional difficulties experienced by children and young people and memory impairment experienced by older people, and will enrich and enhance relationships between primary and secondary care.

In keeping with the Glasgow model (Greater Glasgow and Clyde NHS) an essential feature of the service model is the Tier 0 (community level) service developments which will be organised on a pan locality basis and which will enable direct community access to lower level options such as: stress-control, self help/bibliotherapy, guided self help (including reading groups), assisted or self directed Computerised Cognitive Behaviour Therapy and well-being groups.
The local primary mental health support services will comprise of one team organised over the three localities of Bridgend, Neath Port Talbot and Swansea. This team will have one integrated manager covering the three localities.

Within each locality the service will comprise of the following staff:

- Team Leader will lead the locality team on an operational basis, support strategic service development within the locality, audit and monitor outcomes and efficiency, undertake assessments, provide information and advice to GPs and practice staff and provide interventions appropriate to knowledge and skills

- Mental Health Practitioners will undertake assessments, provide information and advice to GPs and practice staff and provide interventions appropriate to their knowledge and skills

- Therapists*/Practitioners will provide counselling and therapeutic interventions including time limited Cognitive Behavioural Therapy (CBT) and Solution Focused therapies

- Occupational therapists will provide assessments in terms of life roles, patterns of function and occupation, well being and symptoms, and barriers to personal/family/social/leisure and economic functioning. The occupational therapists use a range of approaches along with group/individual interventions

- Assistant Practitioners will primarily provide interventions such as self management and psycho-educational courses and 1 to 1 interventions appropriate to their knowledge and skills

- Primary Care Support Workers will support the locality team to deliver self management and educational courses, provide information and advice to service users and carers and liaison with third sector partners. They will develop a full understanding of the resources available in the community and develop links to key players and organisations.

- Community Development Workers will support the locality team and will primarily, be located within the community network areas. The community development worker will map community resources and develop strong relationship with 3rd sector and other key players with the community.

- Consultant Psychiatrist – sector consultants will provide a liaison and consultation service to GPs within the clusters in their locality via email and telephone and offering a ‘face to face’ consultation service for service users experiencing issues which relate to their mental health but would not qualify them for referral to secondary care mental health services.

- **Note. This service will be provided to support the GPs to maintain a service users' mental health not provide ongoing treatment for unstable and complex mental illness.**

- Child and Adolescent Mental Health Service Primary Mental Health Workers will operate as members of the LPMHSS with policies and protocols in place to ensure GP referrals for children and young people are appropriately responded to and to offer consultation to primary care workers. Working closely with other primary care mental health service professionals these workers will support children, young people, their family and carers to identify appropriate services, undertake assessments and provide interventions.
The staff member in the locality will be the contact point for all LPMHSS- CAMHS related referrals received from GPs (and other tier one professionals) in that area. They will provide advice and support as appropriate and be responsible for arranging other services as necessary.

The provision of services provided by Education Services. Education Department of LA provided services generally include; Behaviour Support Services, Educational Psychology Services, Specialist non-mainstream units, and School based Counselling services in Secondary schools. In addition many schools have developed a broader curriculum supporting emotional health and well-being activities for targeted children e.g. short courses for anxiety management, anger control etc., as well as whole school programmes, e.g. School Assistance Programme.

*Suitably qualified therapists within the service may also provide supervision sessions to other therapists and practitioners within the team who are delivering therapeutic interventions.

Older People

Services within the LPMHSS from an older person's perspective will consist of memory clinics including drugs for dementia multidisciplinary teams and dementia service coordinators. In addition to this will be the provision of liaison teams including general hospital and residential home advisory and educational team.

Veterans

The veterans' service provides care, treatment, advice and support to those who have served in the British Army, Navy, Royal Marines and Air Force, including reservists who are experiencing common mental health problems as a result of that service. Access to the service is open and will be accepted via any route. Provided the essential criterion is met assessment is offered followed by therapy. This will be either one to one or in groups as considered appropriate for their presenting need following assessment. EMDR will also be offered as a part of this service.

Working closely with other statutory and non-statutory organisations ensures the best information; support and direction will be recommended and facilitated. The veterans' service will also provide expert advice and support to local services including GP's and primary care staff, raising awareness and easing access to care and treatment for ex servicemen.

Prisons

Within the ABMUHB geographical area, there are two prison establishments, HMP Swansea and HMP Parc (Bridgend). All primary care services within these establishments are provided in partnership with the Health Board and managed/monitored through respective Prison Health Partnership Boards that are convened on a quarterly basis. This arrangement has resulted in the provision of primary mental health services being largely delivered by the respective health care departments within the individual establishments.

The uniqueness of HMP Parc is seen in the health care provision managed and delivered by a private company – presently G4S Integrated Services.

In conjunction with prison health directives there has long been a commitment to ensure that health services within the prison are delivered by suitably qualified staff and to this end each establishment has a complement of Registered Mental Nurses.
Unlike community based primary care services, each prisoner who enters the individual establishment is subject to a general health screening which incorporates mental health wellbeing assessments. Early identification of mental ill health is significantly achievable through this process, allowing for appropriate levels of intervention to be gauged.

Primary mental health services within the respective prison establishments are relatively well developed with primary care mental health staff providing various levels of brief and longer term therapeutic interventions and management (e.g. EMDR, Bibliotherapy, stress management, problem solving, etc). These services have been developed in adherence to relevant Nice Guidelines and are actively reviewed and audited by prison authorities. Services are aimed at common mental health problems and as such are now an integral part of the service. Any individual presenting with serious mental illness will be progressed for management by the integrated secondary mental health services – Prison In-Reach Teams.

The co-morbidity of other health presentations is significantly prevalent within the prison population (e.g. substance misuse, behavioural disturbance, personality traits, self-harm), which are jointly managed with general prison staff.

Robust arrangements are in place to ensure the effective onward management of identified prisoners upon release or transfer to another establishment within the prison estate. Primary care staff will routinely provide external General Practitioners with any relevant interventions or treatment programmes their service user has been subject to whilst in custody. Similar information is equally shared between prison establishments as necessary.

Levels of intervention and primary mental health care vary in the respective establishment and it is envisaged that this will need to continue given the differing demographical profile of the respective prisons and the contractual arrangements in existence.

Existing arrangements will continue with the prison health care departments in the individual establishments under the current structure with the Health Board and respective Local Authorities being able to discharge their responsibilities in respect of the Measure. Further work will be undertaken to enhance the current provision as far as possible within the restrictive environment of prison regime.

Local Authorities provide a broad range of community services in Life Long Learning, Adult Education, leisure, social and vocational opportunities. They support community developments and provide a wide range of amenities. Assisting Recovery in the Community (ARC) provides assessment and individualised support to people to assist them to access existing community facilities and resources with the aim of maximising independence, regaining or learning skills, building confidence and maintaining social contacts. The Primary Care Service will develop strong links to the services provided and map out opportunities for individuals which may address the core reason for some common mental health issues. They also provide housing, welfare benefit services and Coastal employment and training opportunities across Swansea, Neath Port Talbot & Bridgend and it is essential that the Primary Care Service has links to this.

A range of third sector services are available (subject to commissioning arrangements). These will provide the following types of interventions/services on referral from the LPMHSS:

- Counselling
- Debt Advice/Welfare Rights/ Accommodation/Advocacy
- Peer Support
- Advice, information
- Social Support
- Emotional Literacy training
• Relationship handling
• Tenancy Support
• Family support
• Carers support
• Homelessness and supported housing
• Advocacy (Informal advocacy)
• Bereavement Support
• Eating disorders.
• Addiction dependency
• Financial Advice
• Learning and Skills Development
• Self help/facilitated support groups
• Peer support & mentoring
• Support for BME groups and asylum seekers and refugees
• Support for young people
• Condition specific support e.g. cancer
• Befriending
• Mediation
• Suicide & survivor support
• Support for Care Leavers
• Support for sufferers of domestic abuse
• Support for those not in Employment, Education or Training

This list is not exhaustive and is subject to change; however any amendments made, as agreed, will be by the LPMHSS monitoring group. Notifications of any changes are the responsibility of the Third Sector Services.

11. Joint working arrangements

a) Details of partnership arrangements

Details of partnership arrangements for development and delivery of the ABMU and LA regions Part 1 Scheme are set in Section 2 (above).

The Local Health Board has developed a strong foundation of partnership working with Local Authorities, Third Sector Organisations, Staff, Independent Practitioners, and other key partners which underpin excellent working relationships in the delivery of health and social care services to the people of Bridgend, Neath Port Talbot and Swansea.

The statutory requirements remain separate with each of the three Local Authorities and the Health Board’s commitment to the partnership arrangements within the three areas.

b) Management arrangements for the local primary mental health support services

ABMU’s local primary mental health support services will be managed within the Mental Health Directorate of the Health Board.

c) Funding

Funding of the scheme will hosted by ABMU/LAs and will be governed by the steering group. Management of the funding will be the responsibility of ABMU Health Board.
Funding will include that which is allocated by Welsh Government for the purpose of developing and delivering Part 1 of the Mental Health (Wales) Measure. The Health Board will also utilise existing resources currently vested in the delivery of its Primary Care Liaison/gateway services and psychological therapies teams to ensure a comprehensive service is provided.

d) Governance of the joint partnership arrangements

Governance of the partnership arrangements for the ABMU Scheme once established will be monitored by the ABMU ‘region’ Steering Group on a monthly basis and via the Mental Health Programme Board on a quarterly basis.

The scheme will be overseen by a multi agency, multi sectoral steering group representing all partners and chaired on a joint basis. Terms of reference will be developed prior to the implementation of the group. The Manager of the service will report to the steering group and will be employed by ABMU/LA.

The Mental Health Partners to this scheme will share information about Service Users in order to improve the quality of care provided and to promote integrated working. Arrangements for such information sharing will be in accordance with Section 42 of the Measure. This permits a local mental health partner to supply to other partners information obtained in the discharge of its functions under Part 1 or 3 of the Measure which relates to an individual for whom LPMHSS are being or might be provided by the other partners, where this information is not prevented from being disclosed by any other Measure, Act of Parliament or Act of National Assembly for Wales.

12. Performance management

The local mental health partners are committed to ensuring the best use of resources and optimum outcomes. The service will have clear performance management arrangements. Standardised data collection and analysis and regular audit and service evaluation will be agreed and conducted via joint management structures.

13. Governance

Governance arrangements will be agreed with partners and regularly monitored via formal use of outcome measurement, client satisfaction, supervision and audit.

Service users remain under the normal care of their GP whilst in the Local Primary Mental Health Support Service. Practitioners and therapists working within the service who provide assessment and/or interventions to the patient/service user will be responsible for working within their competence and within locally agreed protocols.

Where services are delivered by a third sector organisation the provider will ensure that services are delivered to the standard as set out in the Standards for Healthcare Wales, Doing Well Doing Better (Welsh Assembly Government 2010).

The full document can be found at: 
14. Promoting the Local Primary Mental Health Support Services
Arrangements for promotion of the service will be the responsibility of the manager of the LPMHSS and the steering group.

15. Arrangements for Review of the Scheme
Regular performance monitoring and reporting will take place monthly via the manager of the service providing monthly reports for scrutiny by the LPMHSS monitoring group. Quarterly reviews will take place in the first 2 years of the scheme to ensure the service is performing optimally and reported to the Mental Health Directorate Board.

Section 48 (3) of the Measure places a duty on Welsh Ministers to review the operation of the Measure within 4 years of commencement of each of the Parts. To support this, and to support local management decisions, the ABMU scheme will be regularly monitored for outcomes and quality.

16. Arrangements for altering the scheme
The development and progress of the ABMUHB and partners joint Scheme once established will be monitored by the ABMUHB LPMHSS steering group. Any minor changes to the scheme can be agreed by this group. It will be necessary however for any service redesign or major changes to the scheme to be presented the Mental Health Programme Board and the Western Bay Collaborative.
APPENDIX 1

Services to be delivered within the Mental Health (Wales) Measure Part 1 Scheme for the ABMU region;

1. The Local Primary Mental Health Support Service

2. Child and Adolescence Mental Health Primary Mental Health Workers

3. Other services provided by ABMUHB who will provide interventions;
   - Memory Clinics and Dementia Advisors
   - Veterans Service
   - Psychology
   - Occupational Therapy

4. Local Authority Services

5. Third Sector
# APPENDIX 2

## Signatories to the Scheme

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## Version Control

### Revision History:

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<td>Paragraph added to page 13. The Mental Health Partners to this scheme will share information about Service Users in order to improve the quality of care provided and to promote integrated working. Arrangements for such information sharing will be in accordance with Section 42 of the Measure. This permits a local mental health partner to supply to other partners information obtained in the discharge of its functions under Part 1 or 3 of the Measure which relates to an individual for whom LPMHSS are being or might be provided by the other partners, where this information is not prevented from being disclosed by any other Measure, Act of Parliament or Act of National Assembly for Wales.</td>
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