

Freedom of Information Act 2000 disclosure log entry

Reference

21-22202

Date sent

24/11/2021

Subject

Mental Health Provider Collaborative

Details of enquiry

1. Is your mental health trust part of a mental health provider collaborative?
 - a. If yes, could you please provide the name of the mental health provider collaborative that you are a part of?
 - b. Could you please provide the name of the person (people) who represent your organisation at the mental health provider collaborative?
2. Is your mental health trust a member of a place-based collaborative?
 - a. If yes, could you please provide the name of the place-based collaborative that you are a part of?
 - b. Could you please provide the name of the person (people) who represent your organisation at the place based collaborative?

Response sent

1. Is your mental health trust part of a mental health provider collaborative?

Yes

 - a. If yes, could you please provide the name of the mental health provider collaborative that you are a part of?
NCEL T4 Collaborative
 - b. Could you please provide the name of the person (people) who represent your organisation at the mental health provider collaborative?
Sally Hodges and Dinesh Sinha
2. Is your mental health trust a member of a place-based collaborative?

YES

 - a. If yes, could you please provide the name of the place-based collaborative that you are a part of?
North Central London Providers Collaborative

- b. Could you please provide the name of the person (people) who represent your organisation at the place based collaborative?
Chris Caldwell, Sally Hodges, Dinesh Sinha