Title of Policy / Procedural Document

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| --- | --- |
| Version number : |  |
| Consultation Groups |  |
| Approved by (Sponsor Group) |  |
| Ratified by: |  |
| Date ratified: |  |
| Name of originator/author: |  |
| Executive Director lead : |  |
| Implementation Date : |  |
| Last Review Date |  |
| Next Review date: |  |

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| --- | --- |
| Services | Applicable |
| Trustwide |  |
| Mental Health and LD |  |
| Community Health Services |  |

Version Control Summary

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| **Version** | **Date** | **Author** | **Status** | **Comment** |
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