Perinatal Mental Health Network Scotland (PMHNS)

Annual Report
2021/22

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Perinatal Mental Health Network Scotland
National Managed Clinical Network

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Executive Summary

The last year has remained a very active one for the network, despite the continuing pandemic and its effect on a number of programmes. We continue to endeavour to support clinicians given the significant pressures facing clinical services, and have maintained regular forums meetings, at the request of our clinical members. Significant progress has been made on developing the Power-App which will underpin a national dataset of clinical activity for mother and baby units, community perinatal mental health teams and maternity and neonatal psychological interventions teams. The network has also been able to launch its monthly bulletins recording service developments across Scotland. Sustained work has gone into the development of animations to bring the national care pathways to wider attention, so that women and their families are aware of their entitlement to treatment. Finally, the network has played an important role, with colleagues from NES, in developing and delivering ongoing training to new perinatal mental health staff as they are recruited to new and expanding services nationwide.

The coming year presents many challenges for the network and the clinical services it supports, as the programme of dedicated investment in specialist service development is reviewed and evaluated. The network will continue to have a clear focus on quality improvement and support for services and, of course, for the women, infants and families who are helped by them.

Introduction

This report outlines the progress and key achievements of the Perinatal Mental Health Network Scotland (PMHNS) during 2021/22.

Current Position

Progress against the specific 2021/22 business plan objectives are set out against the six core principles of network, as detailed below and key highlights include:

1 Effective Structure

1.1 Professional Leadership Model

In the reporting period the network reviewed its Professional Leadership model in accordance with the recommendations from the PMHNS 2021.

The PMHNS steering group endorsed the leadership model in March 2022, but its implementation remains under review.

As the Covid-19 pandemic continued to impact on NHS capacity, the Lead Clinician and Infant Mental Health Professional Lead's tenures were extended to March 2023 in order to provide continuity to the network and its stakeholders.

2. Service Development and Service Delivery

2.1 Universal Perinatal Care Pathways

The network finalised its care pathways and these are available on the PMHNS website at: https://www.pmhn.scot.nhs.uk/care-pathways/.

2.2 Universal Perinatal Care Pathways (Animations)

A suite of animations will accompany the care pathways. These were developed with women and families in mind. They are a visual tool, which explains the pathways into care and what services women and families can expect. The animation scripts have been written, two of the five are at final stage of development. It is anticipated that these will be finalised by summer/autumn 2022.

2.3 Social Work Role Definitions

In collaboration with social workers from perinatal mental health teams, the network completed the social work role definitions. The completed suite of PMH Role Definitions is available at: https://www.pmhn.scot.nhs.uk/professionals-2/role-definitions/.

2.4 Supporting Women Reducing Harm

Following the publication of the Supporting Women, Reducing Harm report in summer 2022, the network, in collaboration with the Perinatal and Infant Mental Health Programme Board (PNIMH-PB), Scottish Government Policy Teams, third sector organisations and women with lived experienced, has facilitated an online stakeholder event to explore how care can be improved for women, infants and families affected by substance use in Scotland.

2.4 Mother Infant Interventions

One of the recommendations of the independent review of the PMHNS in 20?? was that:

"The plan to include Parent Infant Therapists in the specialist perinatal mental health teams was part implemented. Further work will continue to clarify the involvement of infant mental health workers in other areas where mental disorder is associated with problems with infant emotional and physical development, for example, alcohol and substance misuse and some of the women involved in the maternity psychological services.

However, the network should provide clarity for stakeholders which elements of infant mental health developments are within the perinatal mental health network scope and those which are beyond it in order for the network to be able to define and measure its impact".

During the reporting period the Infant Mental Health Clinical Forum provided education and guidance to NHS Boards and services on the different ways that IMH services can developed. Underpinning this work was the Perinatal Mental Health specialist assessment and intervention for mother-infant relationship difficulties (Care Pathway 5) in tandem with the PMHNS Parent Infant Therapist role definition.

Guidance developed by the network was also enriched by the forum facilitating education and information sessions on developments taking place in Scotland.

These included:

- Child Parent Psychotherapy and the Child Psychotherapist as Parent-Infant Therapist
- Institute of Health Visiting PIMH Champions Training
- Video Interactive Guidance
- Brazelton Neonatal Behavioral Assessment Scale
- Circle of Security: Parenting Intervention
- Invisible Truths: Maternal Mental Health Scotland project
- Art at the Start: University of Dundee project
- From policy to practice: An invitation to discuss the process of creating a new infant mental health service
- Regional Systems in Infant Mental Health

- NHS Lanarkshire Observational Indicator Set
- Health Visitor Development Project
- Early Years Evaluation: Scottish Perinatal Mental Health Care Pathways

2.5 National Mother and Baby Unit Beds

The network provided a conduit between NHS Scotland Commissioners, the PNIMH-PB and the Mother and Baby Unit (MBU) Clinical Forum in exploring a "common contract" between the NHS Board and Regions for the MBU Beds in NHS Scotland to ensure that there is equity of access to MBU's. This programme of work is now being taken forward by the PNIMH-PB.

2.6 Online Perinatal Interventions

The Maternity and Neonatal and Psychological Interventions (MNPI) Forum began collation of online tools and resources available to clinical teams. Unfortunately, the Covid-19 pandemic led to a suspension of the work. It will be progressed in the PMNHS 2022/23 Programme of Work

2.7 COVID -19 Guidance for Mother and Baby Units (MBUs)

During the reporting period the network collaborated with clinicians from the MBU clinical forum to review and update its COVID-19 guidance. The document is awaiting final sign-off from the MBU forum and will be published as a Good Practice Statement.

3. Education and Training

3.1 Perinatal Mental Health Specialist team case-based training design and delivery

In collaboration with National Education Scotland (NES) the PMHNS Lead Clinician helped design and deliver specialist team case-based training to new and existing CPMHT clinical staff.

4. Data and Quality Improvement

4.1 Scottish Patient Safety Programme (SPSP)

Prior to the Covid-19 pandemic, the network in collaboration with the Scottish Patient Safety Programme (SPSP) had commenced work with MBUs to develop a quality improvement (QI) proposal to adapt SPSP work on patient observation and risk assessment for an MBU setting.

The SPSP advised the network that they had to halt their programme of work to enable them to respond to the demands of the Covid -19 pandemic.

The SPSP informed the network and the MBUs that during the reporting period they were not able to fully remobilise their pre-pandemic programme of work and provide QI guidance and oversight to the project.

This work will be progressed without SPSP involvement through the MBU forum.

4.2 National Data collaborative

During the reporting period the network issued bi-annual proformas to capture what Perinatal and Mental Health data was being collected at a national level. Due to service pressures resulting from responding to Covid-19 these were not completed. The work started by the network is now being progressed by the PNIMH-PB .

4.3 Perinatal Infant Mental Health Power App Development

During the reporting period the network facilitated a short life working group (SLWG) of members from the clinical forums and the networks Data Analyst to agree a national data set for MBUs, CPMHTs and MNPI services. The agreed data set was submitted to the Power–App developer who transferred this into a Perinatal Mental Health prototype for the members of the SLWG to review.
The feedback on the PNIMH prototype was collated and shared with the Power–App developer in advance of the system being ready to use. It is expected that the online data collection tool will be launched in spring/summer 2021, followed by rollout to all specialist teams in Scotland over the subsequent year.

4.4 Evidencing Impact Effective:

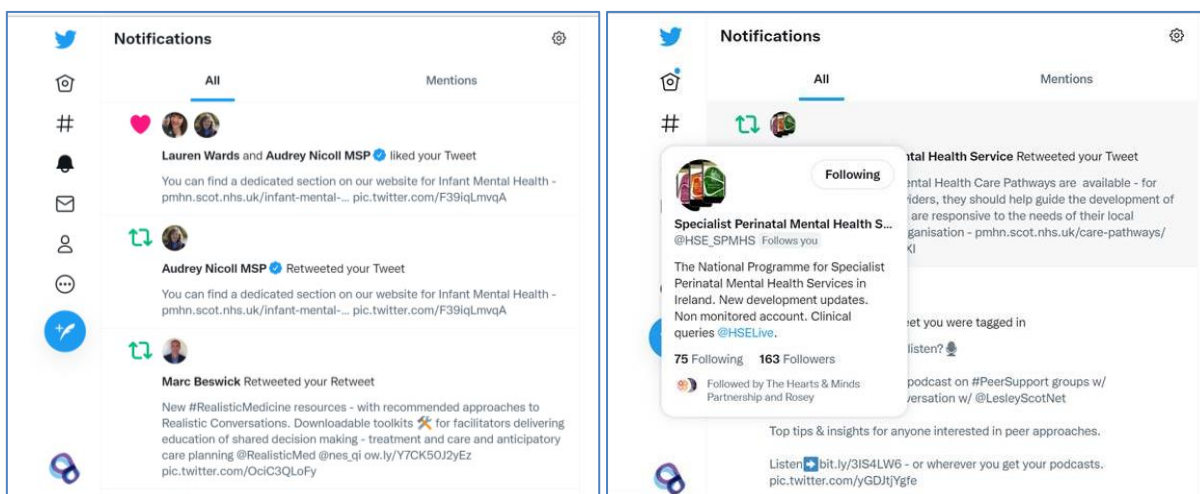## 4.4.1 Communication and Engagement with front line clinicians

The Independent review of the PMHNS recommended that:

"The network should communicate more proactively with frontline staff to ensure that information and guidance reaches them directly rather than relying on some staff engaging with conferences, websites etc. They also recommended that this was tested by digital means, as with other staff surveys"

4.4.2 PMHNS Twitter

During the reporting period the network progressed this recommendation through refining its Twitter communication and engagement plan. The PMHNS Twitter account provides daily updates on the resources available from its website as well as link to e-learning modules on NES, relevant information from Scottish Government and any other bodies linked with Perinatal and Infant Mental Health. At the point of the publication of this report the PMHNS Twitter account had 2218 followers, and increase of 702 since March 2021.

The information shared on the Twitter account is shared and used by other organisations including NHS Education Scotland, NHS Boards, Scottish Government, MSP's and by specific Perinatal services, examples of which are detailed below –

4.4.3 PMHNS Website

As well as the continued use of social media to engage with staff, the network continues to maintain and update its website. The network has published completed work online, which includes, but is not limited to:

- PMHNS Role Definitions
- National Care Pathways
- Service Development Guides
- Spotlight Bulletins
- Refreshed MBU C-19 guidance
- PMHNS Clinical Forum Bulletins
- Supporting Women, Reducing Harm report

In addition, the network has added web pages specifically for Infant Mental Health. A page will be added in due course for the work of the Participation Officer which would look to include content to describe the Participation Officer role, a link to information about experts by experience and some background about the involvement of people with lived experience in the work of the network.

4.4.4 PMHNS Spotlight Bulletins

As the investment and expansion of services and roles within Perinatal Mental Health continued during the reporting period, the network undertook a project to share the developments with the Perinatal Community and its stakeholders through issuing monthly "Spotlight Bulletins." This provides another mechanism for frontline professionals and services to be made aware of developments across Scotland and to share good practice.

Since commencing this programme of work the network has issued 5 Spotlight Bulletins.

5. Exceptions

The 2021/22 programme of worked was impacted by the ongoing unpredictable nature of COVID -19 which resulted in the following programmes of work not being progressed as anticipated:

5.1 Interface with General Adult Psychiatry

It is planned to establish a short life working group to recommend ways of improving links between perinatal mental health services and Unscheduled Care mental health teams (Crisis/Home Treatment/Liaison), General Adult Mental Health, CAMHS and primary care.

5.2 PMHNS Nursing Event

The three Regional Perinatal Mental Health Nurse Consultants, supported by the network, have begun work to plan a Perinatal Mental Health Nursing Education Event.
This was paused due to the pandemic but has now been restarted again with the aim of holding an event toward the end 2022.

5.3 PMHNS Public Benefit and Privacy Panel

Progress with the PMHNS Public Benefit and Privacy Panel (PBPP) application remains slow.
This data will enable the network to monitor the number of psychiatric admissions of women within one year of childbirth across Scotland to report the proportion of women not admitted with their babies, and to identify barriers to joint admission. The data will assist the Perinatal Mental Health National Managed Clinical Network to identify gaps in service provision and to improve standards of care for women with the most severe forms of perinatal mental illness, and their babies.

5.4 Evidencing Impact of the PMHNS Clinical Forums and Professional Groups

During the reporting period the network forum chairs developed a short survey that could be issued to the clinical forums and its professional groups. Unfortunately, due to the emergence of the Omicron variant of the COVID-19 pandemic, the network did not issue the form as clinical capacity was deployed to maintaining frontline services.

6. Finance

The PMHNS has not spent any of its allocated £5,000 budget in 2021/22 due to the impact of the COVID-19 pandemic. The network anticipates that the cost of the Perinatal and Infant Mental Health CAS power-app will be met from the funds allocated by Scottish Government to NSD for the network.

7. Looking forward

In addition to undertaking its business as usual activity, the PMHNS will progress the following programmes of work:

7.1 Effective Structure

- Succession planning for the Lead Clinician and Infant Mental Health Professional Lead
- Progress the recommendations of the PMHNS Professional leadership Review. Stage One will be the recruitment of a Regional Nurse Consultant Professional Lead and the continued collaboration with the Strategic Perinatal Network (SPN) regarding the Maternity Leadership. Stage 2 will be the Consideration of inclusion of Lived Experience in leadership structure
- Consultation response also included proposal for inclusion of Psychological Therapies Lead

- Review of the steering group membership
- Strategic planning day with the PNIMH-PB

7.2 Service Development/Communication and Engagement

- Launch of the Care Pathway animations
- Supporting Women Reducing Harm Round Table Event
- Service Development and Delivery
- Clinical Assessment tools
- Online Perinatal Interventions
- Interface with General Adult Psychiatry: Crises / Home Treatment Teams -Education & Training-Interface with General Adult Psychiatry referral pathways to PNMHS/ Interface with General Adult Psychiatry (preconception responsibilities)
- PMHNS Good Practice Statements

7.3 Communication and Engagement

- Collation and Publication of PMHN Spotlight Bulletins

7.4 Education and Training

- PMH Nursing Event

7.5 Data and Quality Improvement

- Perinatal Infant Mental Health (PN-IMH) Power app role out and training
- Perinatal Infant Mental Health (PN-IMH) reviewing and analysing the data to develop PMH Key Performance Indicators
- Rapid Access to Psychological Therapies
- Evidencing Impact of the PMHNS clinical forums and Professional Groups through bi-annual surveys via MST forms to discover if they are meeting the needs of frontline professionals