Babies Can't Wait: developing an integrated perinatal and parent-infant mental health pathway using the THRIVE model

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Attachment Relationships in Children aged 0-3 years Tameside and Glossop (ONS 2006)

- Securely attached: (n= 6,996)
- Possibly struggling with attachment relationship: (n= 2332)
- Struggling with attachment relationship: (n= 1166)
- Concerning parent / infant relationship: (n= 1166)
More about Thrive in Tameside and Glossop

- Parents and infants on the **Thriving Pathway** can expect to receive appropriate information on wellbeing and maintaining good mental health, and to access universal services.
- Parents and infants on the **Getting Advice and Getting Help Pathways** can expect GPs, a Lead Midwife (or Health Visitor if the Midwife has already discharged) to monitor mental health and liaise and plan care and access to targeted group support.
- Parents and infants on the **Getting More Help and Getting Risk Support Pathways** can expect a Lead Professional or Care Coordinator to monitor mental health. Multi-agency meetings should be convened and a clear plan of care developed for pregnancy and in the postnatal period. This will include social care if there are significant risks of harm to the baby.
• Simon & Anne’s Story
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