

## Call to ACT

The Maternal Mental Health Alliance's (MMHA) Everyone's Business campaign is calling for all women throughout the UK with perinatal mental health conditions to receive the treatment they need, where and when they need it, as outlined in numerous national guidelines.

# Take Action

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#everyonesbusiness

## Turning the map green in England: fantastic progress, but risks remain

We were delighted to hear the **announcement from NHS England** (NHSE) about specialist perinatal mental health (PMH) services opening in the remaining areas of England, meaning all women should be able to access life-saving care in their community.

National commitment to PMH has enabled **great strides forward** and it is important to acknowledge the impact this is already having on women and families.

### Risk 1: Local commitment

All Clinical Commissioning Groups (CCGs) have now received money intended to strengthen specialist PMH service provision in their local area. Whilst it is encouraging to see NHSE monitoring procedures in place (see page 2), we are concerned about local competition for funds and the lack of clarity on how spend will be reported.

**"As mental health commissioners, it is our job to ensure that specialist perinatal community services are purchased and provided on our patch to meet the needs of women experiencing PMH problems. There is now money in baselines throughout England for increasing and improving specialist services which women and families urgently need."**



Dr Phil Moore,  
Chair of the Mental  
Health Commissioners  
Network, NHSCC

### Risk 2: Workforce numbers

Funding is one thing, having the workforce to recruit from is another. In order to have quality specialist PMH services, workforce is paramount!

**"Providing everyone with access to the right care in the right place has always been our hope, and it's now finally being realised in England. Hopefully this will cause a tipping point for other nations too. We now need to focus on building the PMH workforce whose job it will be to deliver these vital services."**

Dr Trudi Seneviratne, Chair of the Perinatal Faculty at the Royal College of Psychiatrists



### Risk 3: Training for staff across the pathway

It is vital that **all professionals** who work closely with families in the perinatal period can distinguish normal emotional changes from a PMH problem and are aware of when and how to make referrals.

**"After becoming a mum, I became acutely aware of the gaps in my clinical knowledge of PMH. It has been great to see investment in education for GPs, but in order to make sustained progress this funding needs to be protected, so we can educate the next generation to confidently identify and manage maternal mental health problems."**

Dr Laura Davies, GP Champion for PMH in Devon and expert by experience



## Monitoring local investment in England

Procedures set up by NHSE centrally will play a valuable role in holding local areas to account, and we would like to thank NHSE colleagues for all their hard work in this area.

### Specifically, CCGs have been asked to:

1. meet the required **investment standard for mental health**
2. deliver the commitments set out in the **5 Year Forward View**
3. report their PMH spend to NHSE.



Currently, expenditure is only visible to NHSE internally, meaning the public cannot see how much their area is spending on specialist perinatal teams. In the interest of accountability, a core component of the Campaign's **Call to ACT NOW, we call for local spend to be openly reported** so we can feel confident that the money for PMH is invested as intended and delivers for women and families.

**Our network of experts by experience have been writing letters to their CCGs to ask what local budget plans are for sustainable specialist services. Email [info@everyonesbusiness.org](mailto:info@everyonesbusiness.org) to find out what support we can offer you.**

## Scotland

### Next steps for £50 million pledge

The Scottish Government have appointed Hugh Masters, Chief Nursing Officer, to chair the Infant and Perinatal Mental Health Programme Board, intended to oversee implementation of the **Managed Clinical Network Recommendations** and the **Government's commitments on mental health**.

How the **announced funding** is invested will be crucial for women and families. We're delighted that the important role of lived experience has been recognised and is at the heart of this work. Several board members are linked to the MMHA, so watch this space as meetings progress.



## Wales

### Women and families need an MBU

MMHA supporters and experts by experience, Mark Williams and Charlotte Harding are working with Sharon Fernandez, National Clinical Lead for PMH, and the All Wales PMH Steering Group towards urgently re-establishing an MBU.

We will do all we can to support this development, to ensure women and families no longer have to travel hundreds of miles for specialist inpatient treatment.



### Positive steps taken to identify and remove barriers to inpatient care

We welcome the **proactive measures** introduced to improve access to Mother and Baby Units (MBUs) for women across Scotland. It has been a legal duty for Health Boards to provide joint mother and baby admissions when hospitalisation is needed, but we know from the **Needs Assessment report** that this has not been possible in many cases.

To address this, every general adult psychiatric ward will now be required to contact the Mental Welfare Commission if a mother of a baby under 1 is admitted to their care.

The information will be shared with the PMH Network to help identify ongoing barriers and achieve equal access.

## Northern Ireland

### Case for PMH services made "beyond doubt"



There has been some exciting progress following the **Consensus Statement**, drafted as part of the Everyone's Business campaign, and signed by all political parties in November 2018.

Since then, MMHA members, including the Royal Colleges, published an **open letter** to the Department of Health and a delegation met with Richard Pengelly, Permanent Secretary, who acknowledged the desperate need for specialist PMH services.

Currently, we are eagerly waiting for the Public Health Agency to deliver an "options paper", due mid-summer, which will include considerations for specialist PMH community and in-patient services.

We remain hopeful in the wake of these promising developments but are mindful of the women and families who are without support **now**. The Alliance must continue to apply pressure and offer any guidance necessary to help secure urgent funding and prevent further avoidable suffering.

#### Stark statistics

- **500+** women will be affected by severe PMI between the Consensus Statement signing and the delivery of the options paper.
- **80%** of the country will not have access to specialist PMH services.
- **0** will have access to an MBU if hospitalisation is required.

## Maternal suicide acknowledged in Parliament

During PMQs on World Maternal Mental Health Day, Charlie Elphickie MP told the former Prime Minister about the tragic death of one of his constituents and asked if she agreed that more needs to be done to support the mental health of new mothers. In response, Theresa May said:



**"This is an area the Government is looking at in a number of ways and we will aim to ensure nobody else suffers in the way his constituent and her family did."**

Suicide is a **leading cause of death** for women during pregnancy and the first postnatal year, so this **public acknowledgement** and commitment is vital.

### MMHA members prove maternal mental health matters

Public awareness of PMH continues to grow thanks to the fantastic work of Alliance members and supporters, with campaigns like **PMHP UK's** third annual **Maternal Mental Health Matters week**. By working together to keep PMH front of mind, we will turn the map green and ensure EVERY woman gets the support she and her family deserves!



### Peer support in action

With funding from NHS Bromley CCG, MMHA member Mind has supported over 600 women through the peer-led '**Mindful Mums**' programme. We were so pleased to hear about a CCG seeing value in commissioning peer support and the difference it's making to pregnant women and new mums.

Later this year, we will share some new principles, developed by Mind and The McPin Foundation, intended to help support organisations delivering perinatal peer support. More details in the next e-bulletin.

## Media moments



Everyone's Business champion **Lindsey** shared her story with **UTV** and **BBC NI** to help raise the profile of PMH in Northern Ireland and increase pressure to urgently establish specialist services.

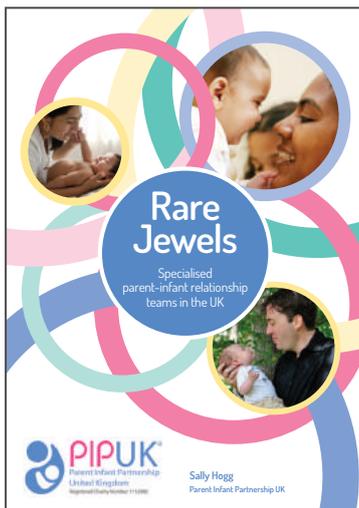
**Mothers on the Edge – BBC 2**

**The NHS mental health units bringing new mums back from crisis – BBC**

**The vulnerable patients forced to travel out of Wales for treatment – Wales Online**

MMHA's Emily Slater, spoke to BBC Hereford and Worcester about the launch of a new **specialist PMH service in Herefordshire.**

**Almost a third of Northern Ireland's children have a mum with mental illness – Belfast Live**



## New PIP UK report, Rare jewels

PIP UK's report on specialist parent-infant service provision in the UK has just launched and is available in the **MMHA resource hub.**

**Have a PMH resource we should add?**

**Email [amyt@maternalmentalhealthalliance.org](mailto:amyt@maternalmentalhealthalliance.org).**

Maternal Mental Health Alliance is a Charitable Incorporated Organisation (CIO) registered in England and Wales (no. 1178152).

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## New permanent MBU opens in Exeter

It was fantastic to see **Jasmine Lodge** open its doors in May.

**"It is difficult to overstate the difference that this new unit will make to the lives of new mums from across the south west region – and their families."**

Dr Jo Black, Consultant Psychiatrist and Clinical Lead for Perinatal Services

There are now 19 MBUs in England. And while this is cause for celebration, still with no unit in Wales or Northern Ireland, it brings the inequality for women into sharper focus.



## Member spotlight

The MMHA has **over 90 members** working together to make PMH Everyone's Business. This quarter, we focus on the **Birth Trauma Association (BTA)**, who support women experiencing post-traumatic stress disorder (PTSD) after birth.



Professor Pauline Slade, Clinical Psychologist and Trustee of BTA, explains the importance of specialist treatment for those affected:

**"Intrusive experiences from memories of the birth can be difficult to accept or make sense of. Understanding that positive feelings about having a much-wanted baby can also coexist with feeling traumatised about the process of the birth is not easy, which is why specialist intervention is key."**

**"PTSD after childbirth needs to be talked about and recognised by professionals and the public. Most importantly, services need to ensure that all women who need input can easily access trauma focussed specialist psychological intervention."**

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