

Health, Social Care and Sport Committee By email: <u>HSCS.committee@Parliament.Scot</u>

## 10 January 2022

Dear Convener,

Thank you for your letter dated 15<sup>th</sup> December 2021 requesting further detail following our appearance at the evidence session on 14<sup>th</sup> December.

Please see the information you requested below which addresses:

- Spending on perinatal mental health services.
- Percentage uptake of perinatal mental health training modules for midwives and health visitors, as well as details of what the Scottish Government is doing to ensure staff are allowed sufficient time to undertake training during working hours.
- Percentage of bereaved parents who have had access to care from a specialist bereavement midwife over the past five years.
- Further detail on what the Scottish Government is doing to support the provision of joined-up care, appropriately coordinated between the NHS, third sector services and those with lived experience.

## Spending on Perinatal Mental Health services

The roll out of funding to Health Boards has been in progress from the start of the Perinatal and Infant Mental Health Programme Board in 2019 with initial development funding to two Health Boards in the North of Scotland. Funding was then rolled out to all mainland Boards in 2020/21 and was then allocated to all Boards within Scotland in 2021/22. Please see below a breakdown of funding allocated per Board for specialist Community Perinatal Mental Health services for the last 3 financial years.



Health Board	Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde
Financial Year(s)	2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2019/20 2020/21 2021/22	2020/21 2021/22
Amount Allocated	£395,856	£119,471	£185,239	£300,750	£113,538	£979,196	£673,800
Health Board	Highland	Lanarkshire	Lothian	Orkney	Shetland	Tayside	Western Isles
Financial Year(s)	2019/20 2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2020/21 2021/22	2021/22
Amount Allocated	£420,720	£688,437	£1,150,340	£44,667	£14,902	£454,809	£26,663
				Specialist Mental He	£5,568,387		

In addition, we are also rolling out integrated Infant Mental Health teams and Maternity/Neonatal Psychological Interventions services to provide support to both parents and infants at the times it is most needed. Infant Mental Health investment started in 2019 with two Health Boards and has progressed to development of dedicated Infant Mental Health teams in five Health Boards and Infant Mental Health focussing provision being embedded in many others. Since 2019 there has been over £3.2m invested in Infant Mental Health services across Scotland. Maternity and neonatal psychological interventions services have been funded since 2020 in Boards with maternity hospitals with greater than 3 thousand births per annum. Across 2020/21 and 2021/22 there has been over £2.3m allocated for this provision.

Following conclusion of the current Programme Board in March 2023, £8m per annum has been earmarked as recurring funding to Health Boards to support the sustainability of perinatal and infant mental health services across Scotland. This includes £5m specifically for specialist Community Perinatal Mental Health services.

Additionally, Scotland has two Mother and Baby Units at St Johns Hospital in NHS Lothian and Leverndale Hospital in NHS Greater Glasgow and Clyde. Since 2019, we have invested over £1.5 million across both Mother and Baby Units to improve the experience of care for women in need of intensive support and to increase staffing levels.

Scottish Government is also investing in the third sector. In 2019 we provided funding to 11 third sector organisations in perinatal and infant mental health prior to launching the main Perinatal and Infant Mental Health Fund in 2020 and the Small Grants Fund in 2021. This funded work focuses on non-clinical peer support, parenting support and other types of one-to-one and group based support for parents and families who are experiencing mild to



moderate mental health concerns during pregnancy and for the first three years of infancy. To October 2021, over £1.8 million has been distributed to successful organisations via these Funds.

# Uptake of Perinatal Mental Health Training by Midwives/Health Visitors and Training Time

Within Scotland, there are two main types of perinatal mental health training which relate to the universal workforce.

The first is the Perinatal and Infant Mental Health Essentials E-Learning Modules which, although designed and aimed towards Mother & Baby Unit and specialist Community Perinatal Mental Health Teams is frequently accessed by other professionals. The Essentials modules are accessible to all mental health staff, (including adult, CAMHS, addictions etc.) as well as maternity, primary care, health visiting and third sector staff who work in an enhanced role, and staff working within specialist PIMH services. The modules cover seven topic areas of Essential knowledge.

Since the modules went live in a staggered release from May to September 2020 over seven and a half thousand modules have been completed. Of these 7852 completed modules, 415 were completed by Health Visitors and Family Nurses and 558 were completed by Midwives (7 of these by Maternity Support Workers). It is important to note that this data is for completed modules only and professional designation is self-reported which means that the figure of 973 for Health Visitors, Family Nurses and Midwives combined may be an underrepresentation of those accessing these resources. Board area is also self-reported with many participants not aligned to a specific Board when in education meaning that a representative breakdown of Health Visitors, Family Nurses and Midwifes is not available by Board.

The second relevant piece of training is the Institute of Health Visiting's Multi-Agency Perinatal and Infant Mental Health Champions training programme which is targeted specifically towards Health Visitors and Midwives. This programme is the core of NHS Education Scotland's (NES) perinatal and infant mental health offer to universal services. The training programme aims to improve family mental health by raising awareness, increasing professional competence and confidence, and developing place-based leadership for perinatal and infant mental health across complex systems of care. Trained Champions are equipped to deliver a cascade of multi-agency PIMH Awareness level training, ensuring knowledge, understanding and awareness is increased at a local level.

Uptake of this new training has been widely welcomed across Scotland. The first cohort of 20 Health Visitors and Midwives, from Health Boards in the north of Scotland were trained in February 2021 and they have now delivered training locally to more than 86 colleagues. The second cohort of 18 Health Visitor and Midwives from NHS Lanarkshire, NHS Ayrshire & Arran, Argyll & Bute, and NHS Dumfries & Galloway were trained in September 2021 and the third cohort of 20 Health Visitors and Midwives trained in November 2021 from NHS Forth Valley, NHS GG&C, NHS Borders, NHS Orkney and NHS Western Isles.



Two more cohorts of 20 have been commissioned before end of March 2022 and in 2022/23 there are plans for training a further 120 Champions. The national network of Perinatal and Infant Mental Health Champions will be supported by NES to continue to champion mental health matters locally and roll out training to colleagues.

With regard to training during working hours, we have worked with NHS Education Scotland to ensure that the right training is available and is delivered in a supported and manageable way. This is underpinned by the Perinatal Mental Health Curricular Framework and accompanying training plan which guide professionals to the right level of learning for their role. The NES Essentials E-Learning modules are designed to be taken in bite sized chunks and are delivered online for ease of access and flexibility. All training is developed and delivered by education professionals experienced in making resources as accessible as possible in the current context. We regularly review progress on perinatal mental health training including uptake through the Perinatal and Infant Mental Health Programme Board and associated Working Group.

For staff in maternity and neonatal settings there is a percentage of time built in for continuous professional development. This is in addition to education and training in perinatal health included in their pre-registration education programme.

## Bereavement services

As regards specialist baby loss units and access to specialist bereavement midwives, we would like to clarify that the commitment made by the Scottish Government in the Programme for Government 2021 – 22 <u>A Fairer, Greener Scotland: Programme for Government 2021-22</u> - <u>gov.scot (www.gov.scot)</u> published in September was to establish a dignified and compassionate miscarriage service by the end of 2023.

As part of delivering on this commitment the Scottish Government will support the development of individualised care plans after a woman's first miscarriage, take forward specific recommendations made in the Lancet series on miscarriage published on 26 April 2021 <u>https://www.thelancet.com/series/miscarriage</u> and ensure women's services in Health Boards have dedicated facilities for women who are experiencing unexpected pregnancy complications.

In the meantime we will continue to have discussions with stakeholders to see what more can be done to improve miscarriage care and to support women who experience complications during pregnancy.

Whilst we know that some Health Boards have specialist bereavement midwives and bereavement teams, bereavement care is the responsibility of all health professionals working in Maternity Services. Midwives, consultants and other workforce are all trained in bereavement care and the bereavement midwife role is often to coordinate and train the workforce and develop pathways of care, which should link with the primary midwife, not necessarily to provide direct care to all bereaved parents.

The standards of proficiencies for midwives specify the knowledge, understanding and skills that midwives must demonstrate at the point of qualification and this includes providing additional care for women and newborns with additional care needs including bereavement



care. The maternity workforce, inclusive of the primary midwife, are aiming to have an informed, skilled team who are able to provide the specialist care that bereaved parents need.

Additionally, the National Bereavement Care Pathways (NBCP) for pregnancy and baby loss in Scotland, funded by the Scottish Government and developed by Sands UK, other baby loss charities, royal colleges and bereaved parents, putting voices of bereaved parents at the heart of the development, are currently being piloted in 4 Health Boards. The pathways provide health professionals with evidence based care pathways and describes best practice for bereavement care following a miscarriage, termination of pregnancy for fetal anomaly, stillbirth, neonatal death, or the sudden unexpected death of an infant.

Full rollout was paused whilst Health Board resources are focused on dealing with the COVID pandemic, and we expect work to recommence in early 2022. A link to the NBCP can be found here: <u>Home | SANDS (nbcpscotland.org.uk)</u>

Sands UK have also produced Bereavement Care Standards <u>Bereavement Care Standards</u> <u>SANDS (nbcpscotland.org.uk)</u> and these complement the National Bereavement Care Pathways for Scotland. We encourage Health Boards to use the bereavement care standards wherever possible.

## Joined up care

Joined up care and a holistic approach is key for supporting women and families during the perinatal period and has been a core consideration within the development of specialist Community Perinatal Mental Health services across Scotland. The Perinatal and Infant Mental Health Programme Board and associated sub groups are committed to achieving joined up working in both policy and practice with representation from professionals in midwifery and health visiting including the Royal College of Midwifes, local Health Boards, NHS Education for Education Scotland and Scottish Government policy.

To support consistency of services at the implementation stage, detailed service development guides have been published by the Perinatal Mental Health Managed Clinical Network (MCN) for the development of specialist community Perinatal Mental Health services (as well as for Infant Mental Health and Maternity/Neonatal Psychological Interventions). The MCN has also set out a series of five national care pathways. Covering a variety of areas and types of care, these pathways outline mechanisms for successful joint management of care.

To support clinicians in the delivery of care the Managed Clinical Network has also created a series of clinical forums centred around Specialist Community Perinatal Mental Health Teams (CPMHT), Psychological interventions, Maternity and Neonatal Psychological Interventions Teams and Mother and Baby Units. These forums allow for the sharing of best practice between clinicians across all areas of Scotland.

We are also working with the Managed Clinical Network (MCN) to develop a service specification for perinatal mental health. This will allow for expectations for consistent, joined up delivery of perinatal mental health services to be laid out for women and families across Scotland.



It is key that joined up care is promoted beyond statutory services. The Perinatal and Infant Mental Health Fund and Small Grants fund provides funding to 33 third sector organisations, including grassroots organisations based on lived experience, to provide advice and support to women and families across Scotland. A key driver of the PIMH Fund is to support the portfolio of funded organisations to link in with local strategic networks and services in order to improve the experiences of women, infants and families accessing perinatal and infant mental health services.

We are also aware that we need to ensure that joined up care extends to services for women and families with complex needs. For that reason we are taking specific action to address service access for women who use substances during the perinatal period. In September 2021, the Perinatal Mental Health MCN published 'Supporting Women, Reducing Harm', a review of care across services for substance-using women and their infants in pregnancy and the postnatal period. Following this report, we are adopting a cross government approach in partnership with the MCN, the third sector and those with lived experience to deliver a stakeholder event designed to discuss the key issues identified in the report to improve the quality and consistency of support, services and joined up care for these women and families facing this challenge during the perinatal period.

In addition, we are supporting Universal Services by ensuring that we equip midwives with the skills to care for women with socially complex needs and their babies, through reduced caseloads, continuity of carer, additional training, clear pathways of care, and coordinated multi-agency support.

I hope you find this response helpful.

Yours Sincerely,

**KEVIN STEWART** 

MAREE TODD

