

# **Perinatal and Infant Mental Health Programme Board/ Infant Mental Health Implementation and Advisory Group Final Report**

January 2024

# Perinatal and Infant Mental Health Programme Board/Infant Mental Health Implementation and Advisory Group Final Report

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## Summary of Achievements

- Delivery of the recommendations of *Delivering Effective Services* in partnership with *The Women and Families Mental Health Pledge*
- Creation of a multi-agency model of infant mental health provision to meet the needs of families experiencing significant adversity, including infant developmental difficulties, parental substance misuse, domestic abuse and trauma
- Increase from 4 to 14 Community Perinatal Mental Health Services, with enhanced staff levels and functionality
- Creation of 14 new Infant Mental Health Services, with 7 established and 7 in development
- Increase from 1 to 10 Maternity and Neonatal Psychological Intervention Services (enhanced staffing in 1, 7 new services created and 2 in development)
- Enhanced staffing in Mother and Baby Units including the appointment of parent-infant therapists and peer support workers
- Options appraisal to consider how to expand MBU provision
- Creation of Mother and Baby Unit Family Fund
- Increase from 1 to 3 nurse consultants in perinatal mental health to support development of a regional approach to service provision
- Enhancement of third sector infant and perinatal mental health provision through direct funding in partnership with Inspiring Scotland
- Increased awareness and tackling of stigma through Wellbeing for Wee Ones at ParentClub and contribution to the Babybox
- Workforce training across all areas in partnership with NHS Education for Scotland
- Development of peer support action plan and structures with implementation in 3 health boards
- Coproduction across all specialties including the development of the Voice of the Infant Best Practice Guidelines and Infant Pledge
- Development of a life-stage model of mental health care

## Background

This document outlines the breadth of work overseen by the Perinatal and Infant Mental Health Programme Board/Infant Mental Health Implementation and Advisory Group to deliver on the following priorities:

- The recommendations outlined in [Delivering Effective Services](#) (DES) (2019)
- Work to establish services and increase awareness of Infant Mental Health
- Emerging priorities which have come about both as work progressed and in line with changes in the wider landscape

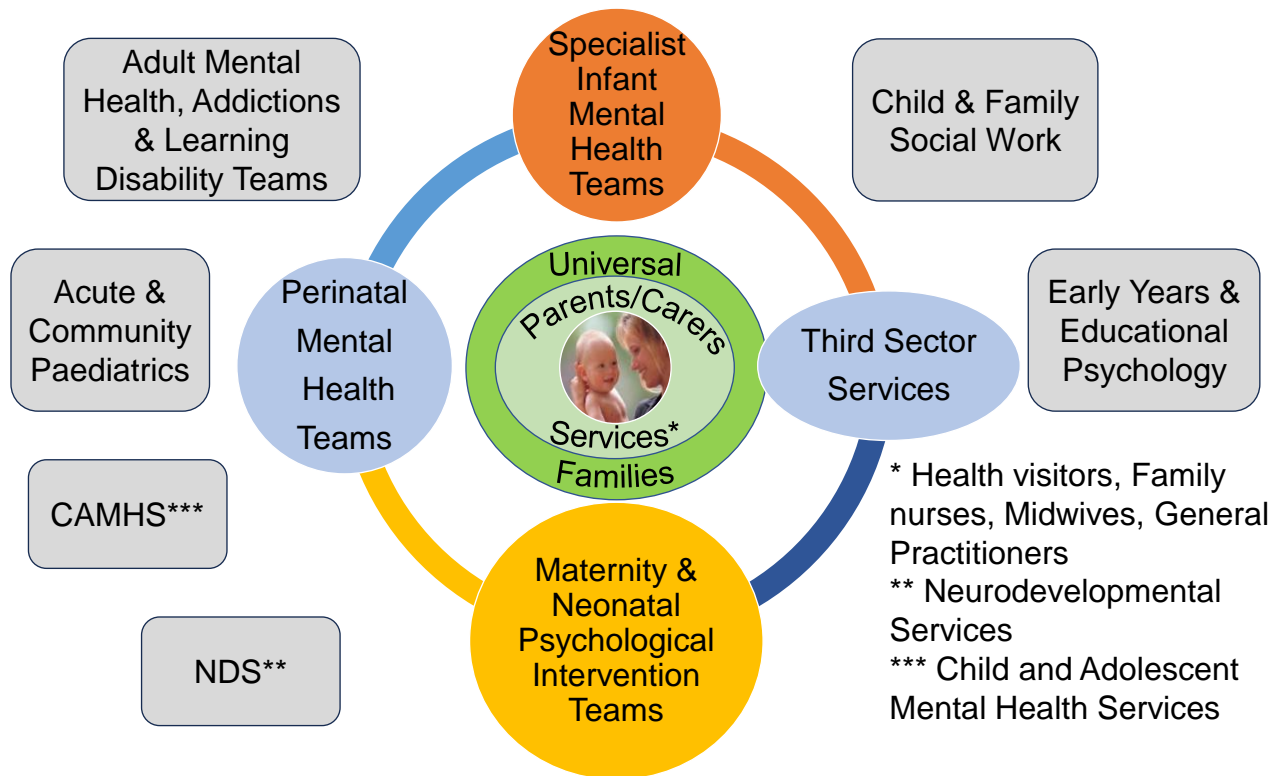
The Programme Board took, as a starting point, the 28 recommendations contained in DES and the commitment in the Programme for Government, but recognised that additional work was required, particularly with regard to infant mental health and third sector support.

For perinatal mental health, the Programme Board worked closely with NHS Boards to develop or expand mother and baby units, community perinatal mental health teams, and maternity and neonatal psychological interventions services. There was close liaison with clinicians and boards in the development of regional approaches to service provision. Other partners critical to the work of the Programme Board have included:

- Perinatal Mental Health Network Scotland, who developed the DES report and subsequent national care pathways, professional role definitions and service development guides
- NHS Education for Scotland, who wrote the [Perinatal Mental Health Curricular Framework: a framework for maternal and infant mental health](#), and created and delivered a range of educational programmes aimed at universal and specialist services
- Perinatal and Infant Mental Health Scotland, a national charity who were funded to employ Participation Officers to support boards in taking a co-production approach to service development and provision
- Inspiring Scotland, who managed the Third Sector funds, produced a national directory of voluntary sector provision and hosted a number of events on behalf of the Programme Board
- Public Health Scotland, who have developed a research programme to evaluate the work of the Programme Board
- NHS Scotland National Planning, who have undertaken an Options Appraisal on the provision of inpatient mother and baby beds for Scotland
- NHS Scotland National Services Division, who provided programme management support
- Other collaborators with whom the Programme Board engaged on specific pieces of work included See Me and the Scottish Recovery Network

For infant mental health, Protecting Scotland's Future: The Government's Programme for Scotland 2019-20 committed to creating "a multi-agency model of infant mental health provision to meet the needs of families experiencing significant

adversity, including infant developmental difficulties, parental substance misuse, domestic abuse and trauma.”



The Infant Mental Health Implementation and Advisory Group was subsequently set up as part of the Perinatal and Infant Mental Health Programme Board to develop a national model of infant mental health provision which can be put in place across Scotland. The model recognises that support for infant mental health is provided by families themselves, by universal services, by specialist services and in partner local authority, health and third sector teams (see figure).

An Infant Mental Health Evaluation subgroup, chaired by Professor Minnis, focussed on service development in 2 health boards and has published research about professional attitudes and structural factors influencing the clinical journey of infants and their parents.

Subsequently, specialist infant mental health services were established or expanded in a number of health boards.

# Progress Update

## Summary of key areas of work

- Developing and embedding statutory services:
  - Funding statutory services (Mother & Baby Units, Specialist Community Perinatal Mental Health Teams, Maternity & Neonatal Psychological Interventions and Infant Mental Health Services)
  - Supporting work across standards/specifications, regionality and integrated working
  - Progressing the options appraisal for additional Mother and Baby Unit provision
  - Supporting the inclusion of new roles such as parent-infant therapists and peer support workers
  - Supporting workforce development, including the work of NES derived from the [Perinatal Mental Health Curricular Framework: a framework for maternal and infant mental health](#)
  - Supporting the evaluation and quality assurance of services and models of care to ensure they remain fit for purpose and responsive to clinical need, including the work of the Managed Clinical Network
- Supporting wider provision:
  - Supporting third sector provision through national funding
  - Continuing to prioritise the development of peer support across statutory and third sector services
  - Supporting work to meet the needs of infants and parents affected by substance use in the perinatal period
- Increasing awareness, reducing stigma and promoting a rights based approach:
  - Centring lived experience in local provision
  - Developed the [Voice of the Infant Best Practice Guidelines and Infant Pledge](#), and working toward an Infant Rights Statement
  - Increasing awareness of perinatal and infant mental health through work with See Me, Parent Club (Wellbeing for Wee Ones) and the Managed Clinical Network
  - Supporting families and practitioners to access the right information in a way which meets their needs

These priority areas are reflected in the actions in the [Mental Health and Wellbeing Delivery Plan 2023-2025](#).

Public Health Scotland has undertaken an [evaluability assessment](#) of the work of the Board to find out if the mental health of women in the perinatal period and the mental health of infants, up to the age of three years, had improved as a result of changes in services and improved access to appropriate help and support'. The evaluability assessment described four main objectives:

1. To assess if women in the perinatal period are able to access appropriate mental health care services in a timely manner.
2. To assess if primary care givers are able to access appropriate mental health care services for their infants in a timely manner.
3. To assess if practitioners in contact with young families understand the importance of mental health in the perinatal period for both mothers and their babies and are able to appropriately identify, support and refer women and infants who may need more specialist intervention.
4. To assess if offering women and their families early intervention helps to prevent referral to more specialised mental health services.

The evaluability assessment developed a Theory of Change model for perinatal and infant mental health service evaluation and recommended seven studies to meet the four main objectives. These studies are expected to be completed by summer 2024.

The following tables present a more detailed view of the work which has been undertaken between 2019 and 2023. Please note: the work below reflects work completed shortly after the conclusion of the Board and also ongoing work which is being taken forward by various partners. In addition, a new Joint Strategic Board will have a strategic overview of mental health work spanning preconception, the perinatal period, parent-infant relationships, early years (up to 5), children and young people (5-24 year olds or 26 years for care leavers), their families and carers - with a particular focus on the most vulnerable groups. This will build on the work of the Board and also the [Children and Young People's Mental Health and Wellbeing Joint Delivery Board](#) and will be jointly chaired with COSLA.

Information is also available through the following links for a more in-depth account of aspects of the work of the Programme Board:

- Third sector funding: [PIMH Report Sept 22 \(inspiringscotland.org.uk\)](https://inspiringscotland.org.uk)
- Service updates: [Perinatal and infant mental health services: update - gov.scot \(www.gov.scot\)](https://www.gov.scot)
- Training and workforce reporting: [Perinatal and infant mental health | NHS Education for Scotland](#)
- Perinatal Mental Health Network Scotland: [Delivering Effective Services - Perinatal Mental Health Network Scotland](#)

## Progress Update against Delivering Effective Services Recommendations

### Mother and Baby Units (MBUs)

\* DES Delivering Effective Services Recommendation

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 1	MBU staffing	Staffing levels fully enhanced including parent-infant therapists		Health boards
Rec. 2	MBU Peer Support Workers	Peer Support Workers appointed in both MBUs	Role evaluation	Perinatal Mental Health Network (PMHN) Scotland  Health boards
Rec. 3	MBU bed numbers	Public consultation completed Options Appraisal completed		NSS National Planning
Rec. 4	MBU equity of access	Support MBU joint working and agreement on admission based on clinical need	Continued consultation with MBU health boards and health boards without regional contracts Support work toward joint MBU admission standards	PMHN Scotland
Rec. 5	Accommodating partners & families	Mother and Baby Unit Family Fund (MBUFF) established  MBUFF review completed, to be published in the coming months.		



## Community Perinatal Mental Health Teams (CPMHTs)

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 2	CPMHT Peer Support Workers		Support development of models of peer support posts in CPMHTs	Health boards
Rec. 6, 7, 8, 9	CPMHT service development for large, medium and small health boards & regional provision	CPMHT Service Development Guides published (PMHN Scotland) CPMHTs established in almost all health boards Regional model agreed	Completion of CPMHT provision and staffing Regional model implementation with particular focus on small and island health boards	Health boards
Rec. 10	CPMHT parent-infant lead provision	Established in a limited number of health boards	Support rollout to larger health boards - ongoing Regional model implementation - ongoing	Health boards

## Infant Mental Health Teams (IMH)

DES*	Description	Work Completed	Work Remaining	Key Partners
N/A	Leadership and Coproduction	Participation Officer time expanded to address IMH and Equality Voice of the Infant Best Practice Guidelines and Infant Pledge produced. Participation Officers delivered co-production workshops to all boards	Consideration of an Infants Rights Statement.	Parent and Infant Mental Health Scotland
	Raise awareness and promote understanding of the importance of infant mental health	IMH Campaign Wellbeing for Wee Ones hosted at Parentclub.scot. In partnership with See Me Scotland, SG has produced Addressing Stigma in Perinatal and Infant Mental Health: Good practice guidelines for practitioners, commissioners and providers	Relaunch Wellbeing for Wee Ones campaign  Stigma reduction and awareness raising work needs progressed to ensure a whole population approach is taken	Parent Club  Inspiring Scotland  Parent Club
	Ensure equity of access to IMH services	IMH needs assessment in one board confirmed 'inverse care law'. PO appointed to addressing equality	Ensure equity of access to IMH services	Health boards (PIMH services and broader)
	Develop a model for the delivery of IMH services and care pathway development	IMH services and care pathways have been developed in some health boards	Support remaining health boards to develop	Health boards  Parent Infant Foundation
	Use and disseminate learning from Quality Improvement work in early adopter boards	Good practice shared in IMH Forum and Parent Infant Foundation Scottish IMH-Development community. Learning from HV and FNP	Encourage attendance by reps from all boards. Continued learning from Quality Improvement work	Health boards

		experience and evaluation	in early adopter boards	
	Research, Evaluation and the development of outcome measures	Ongoing in boards and via national IMH Evaluation group. Papers published about Scottish experience	Link in boards as new services develop	Health boards

### Maternity and Neonatal Psychological Interventions Services (MNPI)

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 11	Perinatal mental health midwives	Guidance on roles and competencies completed Appointments made to the majority of MNPI services	Ongoing role evaluation	PMHN Scotland  Health boards
Rec. 12	MNPI service provision and training for larger boards	MNPI provision in most larger board areas Psychological interventions training undertaken by some PMH midwives	Completion of MNPI provision Psychological interventions training for all PMH midwives in MNPI services	NHS Education Scotland (NES)
Rec. 13	MNPI provision for smaller boards	Funding provided and some services established	Completion of provision in all board areas Continue to support and review model of service delivery in smaller boards	Health boards  PMHN Scotland
N/A	Enhance the delivery of services to neonates with complex needs returning to their home area after inpatient specialist interventions	MNPI service development has led to support for babies and their families in the context of prematurity and other physical health challenges	Ensure the voices of the infant is equally centred across all MNPI services	

## Regional Provision and Equality of Care

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 4	MBU equity of access	Decisions on admission based on clinical need	Ongoing consultation and engagement with MBU boards and boards without regional contracts	
Rec. 6, 9, 10	CPMHT regional provision	Regionality paper published Appointments to most posts with regional responsibilities	Regional model full implementation Work with health boards to ensure regional roles are protected	Health boards
Rec. 18	3 <sup>rd</sup> Sector involvement in regional networks	Several boards have incorporated third sector into forums on service design and provision Third sector funds established, administered by Inspiring Scotland	Review best model for regional oversight Monitor and close gaps in third sector involvement with regional structures	Health boards Inspiring Scotland
Rec. 23	Board implementation groups and regional networks	Board implementation groups established in all areas	Review best model for regional oversight	Health boards
Rec. 25	Care pathways	<a href="#">National Care Pathways</a> published (PMHN Scotland)	Monitoring of incorporation of national pathways into locally developed care pathways	PMHN Scotland
N/A	Develop a regional or national framework which ensures access to IMH services across rural areas	Initial model of regional support and provision developed	Support boards to implement regional provision and to engage with third sector partners	NHS boards  Third sector partners

## Resources for Women and Families

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 14	Self-help and digital resources	<a href="#">National Care Pathways</a> videos for women and families published online (PMHN Scotland) Silvercloud cCBT module rollout	Further consultation to consider the development of single access point for online information	PMHN Scotland NES
Rec. 17	Awareness of 3 <sup>rd</sup> Sector services	Inspiring Scotland directory of 3 <sup>rd</sup> sector services published Completed <a href="#">Addressing stigma in perinatal and infant mental health</a>	Further consultation to consider the development of single access point for online information	Inspiring Scotland See Me PMHN Scotland

## Psychological Therapies

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 15	Monitoring of waiting times for psychological therapies	Perinatal mental health national dataset developed and launched (PMHN Scotland)	Complete national dataset rollout Incorporate into service specification or mental health standards work	PMHN Scotland
Rec. 16	Additional psychological therapies workforce	Programmes for DClinPsy, CAAP, CBT, child psychotherapy and EPP in place	Review learning from current programme	NES
Rec. 17	Awareness of 3 <sup>rd</sup> Sector services providing counselling and support	Inspiring Scotland directory of 3 <sup>rd</sup> sector services published Raising Awareness and stigma reduction work completed	Support development of local and national information resources	Inspiring Scotland PMHN Scotland Health boards

## Third Sector

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 17	Awareness of 3 <sup>rd</sup> Sector services providing counselling and support	Inspiring Scotland directory of 3 <sup>rd</sup> sector services published  <a href="#">Local and national information resources</a> developed.		
Rec. 18	3 <sup>rd</sup> Sector involvement in regional networks	Several boards have incorporated third sector into forums on service design and provision	Review best model for regional oversight Monitor and close gaps in third sector involvement with regional structures	Health boards
Rec. 19	Peer support	<a href="#">Peer Support Action Plan</a> published Two annual Peer Support Events held <a href="#">Bump, Birth and Beyond Guide</a> to planning and delivering peer support published with Scottish Recovery Network		

## Education and Training

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 20	Staff knowledge, skills and attitudes	Tiered training programmes in place for specialist and universal staff, based on <a href="#">Perinatal Mental Health Curricular Framework</a>		NES
Rec. 21	Induction training for all staff new to specialist services	Training programmes in place	Review learning from current programme	NES
Rec. 22	Digital resource for training	Programmes maintained on TURAS/NES webpages		NES
N/A	Training and Workforce Development and Retention	Delivery of NES training modules as per curricular framework, accessible by third sector, universal and specialist staff	Continued training resource required to support new staff recruited and maintain skills in current workforce	NES Third Sector

## Governance, Workforce and Monitoring

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 23	Board implementation groups and regional networks	Health board implementation groups established in all areas	Review best model for regional oversight	Health boards
Rec. 24	Workforce plan	Review of workforce challenges by workforce subgroup	PIMH needs and characteristics reflected in upcoming mental health workforce plan	Health boards
Rec. 26	RCPsych Perinatal Quality Network membership	Both MBUs and two of 4 larger CPMHTs are accredited members	Support larger CPMHTs to join	PMHN Scotland Health boards
Rec. 27	National perinatal mental health dataset	Perinatal mental health national dataset developed and launched (PMHN Scotland)	Complete national dataset rollout	PMHN Scotland Health boards

## Substance Misuse

DES*	Description	Work Completed	Work Remaining	Key Partners
Rec. 28	Substance misuse service review	Supporting Women, Reducing Harm report published (PMHN Scotland) and public event held	Working group to be established by Drugs Policy team in collaboration with Mental Health and Children & Families Policy team.	Statutory and third sector services



## Annex A – 22<sup>nd</sup> March 2023 Celebratory Event Report

### Perinatal and Infant Mental Health Programme Board Celebratory Closing Event Report

22<sup>nd</sup> March 2023 - Ps&Gs Church, Edinburgh

#### Background and Purpose

This event aimed to celebrate the work of the Perinatal and Infant Mental Health Programme Board (PB) and the Infant Mental Health Implementation and Advisory Group (IAG) 2019-2023 across perinatal and infant mental health services, as well as to hear from the voice of lived experience and the difference that has been made to women, infants and families in Scotland.

#### Attendance

3 babies and 75 adults, including 2 Ministers, attended the event.  
8 health boards, 9 Third Sector organisations and 6 Universities were represented.

#### Speakers, Presentations and Posters

Prof. Hugh Masters introduced and chaired the day, which began with a summary of PB, IAG, and third sector achievements from Dr. Roch Cantwell, Dr. Anne McFadyen and Leanne Anderson.

Inspiring Scotland led an interactive session using Menti and asked the group what they were most proud of from the past four years of work (see Evaluation section, below.)

Mr. Kevin Stewart, Minister for Mental Wellbeing and Social Care, and Ms. Clare Haughey, Minister for Children and Families, reflected on the Perinatal and Early Years Mental Health landscape in Scotland, and announced the [Voice of the Infant Best Practice Guidelines and Infant Pledge](#).

Rach Barlee and Lizzy Archibald gave a presentation on the difference that has been made to women and families, and also to staff in the new and expanded perinatal and infant mental health services.

After the speeches and presentations, event attendees were invited to move around the room to look at a series of posters created by PB and IAG subgroups and key partner organisations showing more detail on specific workstreams and projects. Please see the last section of this report for a full list of posters displayed at the event.

## Evaluation

Of those who responded to the evaluation, 94% thought that the event achieved its purpose (as outlined above) very well, and 92% found the event very useful.

All presentations scored 4.5 or above out of 5 (5 being excellent, 1 being not good at all) and were described as the 'Perfect balance of brevity and information'.

*"It was brilliant to meet people face to face and the event felt like a real celebration of all we have achieved across Scotland. Thank you for a fabulous day."*

When asked what they enjoyed the most about the event, attendees said the opportunity to network, see people in person, and hear and share information about the wide range of work and achievements that have taken place since 2019.

Thoughts were written on flipcharts by attendees throughout the event, including;

- *Life course model – how to connect adult mental health with infant mental health?*
- *Gathering data of non-birth partners and kinship carers*
- *Develop Infant Psychiatry role training, and Infant Observational Training in Child and Adult Psychiatry*
- *Infants with disabilities, exceptional health needs, born preterm and their families*

Event attendees were asked to use Menti, the online engagement platform, to respond to the question ;

What are you most proud of?

The 132 total responses have been grouped into themes here;

- Increased awareness and understanding of perinatal and infant mental health
- New and expanded specialist services offering support across Scotland
- Increase in numbers of trained staff and available therapies
- The work of the third sector, in challenging times
- Progress of Infant Mental Health; new services, recurring funding, dedicated training, and published resources supporting the infant voice
- Collaborative effort and partnership working, with lived experience and participation at the centre
- Passionate/ motivated/ committed/ talented workforce

What are you most proud of?

*"The vast amount of work across a huge range of services which make a real impact for women, infants and families [...] as a parent I can see how beneficial it all is. Well done!"*

## Posters

List of the posters displayed at the event, and their creators.

- [Women and Families Maternal Mental Health Pledge](#) – Perinatal Mental Health Network Scotland
- [Infant Pledge](#) – Voice of the Infant subgroup
- [Scottish Perinatal Mental Health Care Pathways](#) – Perinatal Mental Health Network Scotland
- What We Do – Perinatal Mental Health Network Scotland
- Perinatal and Infant Mental Health Third Sector Fund Summary – Inspiring Scotland
- Perinatal and Infant Mental Health Third Sector Fund Locations – Inspiring Scotland
- Perinatal and Infant Mental Health Third Sector Fund Family Feedback – Inspiring Scotland
- Voice of the Infant Short-Life Working Group
- Infant Mental Health Needs Assessment Summary – Anne McFadyen ([Full NHS Lanarkshire Infant Mental Health Needs Assessment Report](#))
- Infant Mental Health Indicator Set Summary – NHS Lanarkshire ([Full Infant Mental Health Observational Indicator Set](#))
- Perinatal and Infant Mental Health Workforce and Sustainability subgroup
- Perinatal and Infant Mental Health Equalities subgroup (with support from Aberlour)
- Perinatal and Infant Mental Health Monitoring and Evaluation subgroup (with support from Public Health Scotland)
- Using the Candidacy Framework to Conceptualise Systems and Gaps when Developing Infant Mental Health Services: A Qualitative Study – Fifi T H Phang, Alicia Weaver, David N Blane, Fionnghuala Murphy, Andrew Dawson, Sophie Hall, Anna De Natale, Helen Minnis, Anne McFadyen
- “Breaking the cycle”: A Qualitative Study Exploring General Practitioners’ Views on Infant Mental Health – Anna De Natale, Sophie Hall, Anne McFadyen, Helen Minnis, David Blane

- A qualitative study examining barriers and enablers to infant mental health service development – Alicia Weaver, University of Glasgow
- Perinatal and Infant Mental Health Champions' Programme – NHS Education for Scotland
- Infant Mental Health Training Update – NHS Education for Scotland
- Perinatal and Infant Mental Health Training Programme – NHS Education for Scotland



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