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Dear Participants,

We want to give you a very warm welcome and say how delighted we are that you are able to participate in the 2023 series of Perinatal Psychiatry Masterclasses, funded by HEE and hosted by the Royal College of Psychiatrists. Drs Liz McDonald and Lucinda Green have developed this current programme and we will be present each day of the course to facilitate and contribute to the training

There will be 23 participants from England, two from Wales, and one from the Republic of Ireland.

You will receive a link to your masterclass programme where you can view the programme and read about the requirements for using ZOOM. Below you will find the full programme and recommended reading lists, as well as biographies of the expert trainers and teachers you will meet during your week.

We would like you to encourage you to get yourself a journal to support your reflections on the course. This will be for your own learning and will not be submitted to the College.

Feedback is extremely important to us:

- to ensure that we provide and maintain a high and consistent standard of training
- to provide feedback to HEE that the funding of this programme has been worthwhile in developing the psychiatric workforce
- to provide a basis for future provision of masterclasses in perinatal psychiatry

We would like you to complete this form after each day. Once your feedback is received you will be issued with a CPD certificate for the day. Each day will contribute to 6 CPD points.

On the first day we would like everyone to introduce themselves to the group saying something about where you work, why you have wanted to join this course, what your future career plans are and what you hope to achieve by attending the course.

There are some rules we would like you to abide by during your participation in the programme:

- we very much hope that you will attend all the sessions
- we will ensure you get handouts if you miss a session but there will not be recordings of the sessions available
- please do not record the sessions
- please do not share the materials
- please attend each day promptly
- please have your name displayed on your ZOOM profile
- please keep your video on
- please keep mute on when not speaking

- please maintain confidentiality in relation to case discussion and clinicians' own personal experiences

We look forward to meeting you all.

Best wishes  
Liz and Lucinda

The aims of this masterclass programme are to:

- enable and support SAS doctors to develop skills and knowledge in their assessment, understanding and care of the complex clinical work involved in working with women of childbearing potential and in the perinatal period
- encourage participants to integrate current evidence into clinical practice
- develop self-reflection skills
- emphasise the importance of the perspectives of women, infants, partners and families throughout the perinatal pathway
- improve patient safety
- improve the experience of women and families during the perinatal period and within perinatal mental health services.

The following key issues are fundamental aspects of perinatal mental health care and will be discussed and considered throughout the programme:

- safeguarding children and adults
- culture and difference
- collaborative working with women, partners and families
- women's own experience of perinatal mental disorders and care
- legal issues

Themes

Day 1	Introductions Overview of perinatal mental health service development in the UK and Ireland; perinatal frame of mind; assessment and communication; the infant
Day 2	Mental disorders in the perinatal period; pre-birth planning
Day 3	Personality disorder; psychological interventions; infertility, perinatal loss, birth trauma and late TOP requests
Day 4	Prescribing in pregnancy and lactation; eating disorders; partners
Day 5	Child safeguarding; risk; implementation

Programme:

The facilitators for the week will be Dr Liz McDonald and Dr Lucinda Green

Each session within the day will have a didactic component and small group work/discussion

Day 1 Monday 27<sup>th</sup> February 2023

Facilitators: Drs Lucinda Green and Liz McDonald

09:00-09:15	Registration	
09.15–10.15	Welcome and introductions Participants and facilitators introduce themselves	Drs Lucinda Green & Liz McDonald
10.15 – 10.45	Perinatal Mental Health Services – what’s happening across the nations?	Dr Lucinda Green
10.45 – 11.00	<i>BREAK</i>	
11.00 - 12.00	How does the Perinatal Frame of Mind inform our assessments?	Dr Liz McDonald
12.00 – 13.00	Formulating and communicating assessments	Dr Lucinda Green
13.00–13.45	<i>LUNCH</i>	
13.45–14.45	What does the literature tell us about women’s experience of care and treatment in the perinatal period?	Dr Clare Dolman
14-45 - 15.00	<i>BREAK</i>	
15.00–16.45	Approaches to evaluating infant emotional development in perinatal clinical practice	Dr Maddalena Miele
ILOs	<ol style="list-style-type: none"><li>1. Understand the development and delivery of PMH services within the different nations.</li><li>2. Describe the range of factors that can affect a woman’s mental health in the perinatal period and her experience of pregnancy and parenting.</li><li>3. Summarise, formulate and communicate assessments to enable women, families and professionals to understand the factors which have contributed to her mental health problems, associated risks and/or her risk of developing a perinatal mental illness.</li><li>4. Demonstrate an awareness of the barriers to care for women in the perinatal period</li><li>5. Understand the factors influencing women’s decision-making around pregnancy and childbirth</li><li>6. Outline the determinants of a sensitive parent-infant interaction</li></ol>	

	<ol style="list-style-type: none"> <li>7. Understand the key ways in which perinatal mental health problems can affect the ability of women to interact with their infant</li> <li>8. Demonstrate a basic knowledge of the current clinical approaches to assessing parent-infant relationships</li> </ol>	
Recommended reading:	<ol style="list-style-type: none"> <li>1. Perinatal Mental Health Services - CR232 (rcpsych.ac.uk)</li> <li>2. <b>Scotland:</b> <a href="https://www.pmhn.scot.nhs.uk/delivering-effective-services/delivering-effective-services-report/">https://www.pmhn.scot.nhs.uk/delivering-effective-services/delivering-effective-services-report/</a></li> <li>3. Scottish care pathways</li> <li>4. England care pathways</li> <li>5. Wales: together-for-mental-health-delivery-plan-2019-to-2022.pdf (gov.wales)</li> <li>6. Ireland: <a href="https://www.hse.ie/eng/services/list/4/mental-health-services/specialist-perinatal-mental-health/specialist-perinatal-mental-health-services-model-of-care-2017.pdf">https://www.hse.ie/eng/services/list/4/mental-health-services/specialist-perinatal-mental-health/specialist-perinatal-mental-health-services-model-of-care-2017.pdf</a></li> <li>7. NHS England (2019) The NHS Long Term Plan</li> <li>8. Dolman, C., Jones, I., &amp; Howard, L. M. (2013). Pre-conception to parenting: a systematic review and meta-synthesis of the qualitative literature on motherhood for women with severe mental illness. <i>Archives of women's mental health</i>, 16(3), 173–196.</li> <li>9. Svanberg, P.O., Barlow, J., &amp; Tigbe, W.W. (2013). The Parent–Infant Interaction Observation Scale: reliability and validity of a screening tool. <i>Journal of Reproductive and Infant Psychology</i>, 31, 14 - 5.</li> <li>10. Stein A, Pearson RM, Goodman SH, et al. (2014) Effects of perinatal mental disorders on the fetus and child. <i>Lancet</i>, 384(9956), 1800-1819.</li> </ol>	

**Day 2 Tuesday 28<sup>th</sup> February 2023**

Facilitators: Drs Lucinda Green and Liz McDonald

09.15–09.45	OCD and anxiety disorders in pregnancy and postnatally	Dr Lucinda Green
09.45-10.30	Small group discussion: Case examples of anxiety in the perinatal period	Drs Lucinda Green & Liz McDonald
10.30–11.00	Depression in the Perinatal period	Dr Lucinda Green
11.00-11.15	<i>BREAK</i>	
11.15–12.00	Small group discussion:	Drs Lucinda Green &

	Case examples of depression in the perinatal period	Liz McDonald
12.00-13.00	Schizophrenia – what does this diagnosis mean for women in the perinatal period?	Dr Liz McDonald
13.00–13.45	<i>LUNCH</i>	
13.45 – 14.45	Postpartum Psychosis and Bipolar Disorder	Dr Liz McDonald
14.45–15.15	Pre-birth planning	Dr Lucinda Green
15.15-15.30	<i>BREAK</i>	
15.30–16.30	Small group discussion Writing a pre-birth plan.	Drs Lucinda Green & Liz McDonald
ILOs	<ol style="list-style-type: none"> <li>1. Understand the course of depression, OCD, schizophrenia, bipolar disorder and postpartum psychosis within the perinatal context and the importance of identifying women who have, or who are at risk of, severe mental disorders.</li> <li>2. Understand women and families experience of mental disorders in the perinatal period.</li> <li>3. Recognise and manage risk related to mental disorders in the perinatal period.</li> <li>4. Understand how to organise and chair a perinatal mental health pre-birth planning meeting to ensure that the woman, her partner, other relatives and the relevant professionals have a shared understanding of any concerns, needs and risks as well as the woman and family’s strengths.</li> <li>5. Develop effective perinatal mental health care plans collaboratively with women, partners, other carers and professionals.</li> </ol>	
Recommended reading:	<ol style="list-style-type: none"> <li>1. Challacombe, F. L., Bavetta, M., &amp; De Giorgio, S. (2019). Intrusive thoughts in perinatal obsessive-compulsive disorder. <i>BMJ (Clinical research ed.)</i>, 367, l6574.</li> <li>2. Dazzan, P. (2021). Schizophrenia during pregnancy. <i>Current opinion in psychiatry</i>, 34(3), 238–244.</li> <li>3. Forde, R., Peters, S., &amp; Wittkowski, A. (2020). Recovery from postpartum psychosis: a</li> </ol>	

	<p>systematic review and metasynthesis of women's and families' experiences. <i>Archives of women's mental health</i>, 23(5), 597–612.</p> <p>4. Howard, L. M., &amp; Khalifeh, H. (2020). Perinatal mental health: a review of progress and challenges. <i>World psychiatry : official journal of the World Psychiatric Association (WPA)</i>, 19(3), 313–327.</p> <p>5. Perry, A., Gordon-Smith, K., Jones, L., &amp; Jones, I. (2021). Phenomenology, Epidemiology and Aetiology of Postpartum Psychosis: A Review. <i>Brain sciences</i>, 11(1), 47.</p> <p>6. Stewart, D. E., &amp; Vigod, S. N. (2019). Postpartum Depression: Pathophysiology, Treatment, and Emerging Therapeutics. <i>Annual review of medicine</i>, 70, 183–196.</p> <p>7. Pre-Birth Planning: Best Practice Toolkit for Perinatal Mental Health Services (2019) Pan-London Perinatal Mental Health Networks. <a href="http://www.transformationpartnersinhealthandcare.nhs.uk/wp-content/uploads/2019/01/Pre-birth-planning-guidance-for-Perinatal-Mental-Health-Networks.pdf">www.transformationpartnersinhealthandcare.nhs.uk/wp-content/uploads/2019/01/Pre-birth-planning-guidance-for-Perinatal-Mental-Health-Networks.pdf</a></p>	
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**Day 3 Wednesday 1<sup>st</sup> March 2023**

	Facilitators: Drs Lucinda Green and Liz McDonald	
09.15-11.00	Personality Disorder in women: what do we need to consider in the perinatal period?	Dr Nic Horley
11.00–11.15	<i>BREAK</i>	
11.15-12.30	Psychological interventions for women in the perinatal period. Followed by Q&A.	Dr Nic Horley
12.30–13.15	<i>LUNCH</i>	
13.15–14.45	Infertility, Perinatal Loss, Birth Trauma and Late TOP requests	Dr Lucinda Green
14:45 - 15.00	<i>BREAK</i>	
15.00-16.30	Infertility, Perinatal Loss, Birth Trauma and Late TOP requests	Dr Lucinda Green
ILOs	<ol style="list-style-type: none"> <li>1. Understand how personality function may become disordered in pregnancy and postnatally</li> <li>2. Appreciate the importance of assessment and treatment for women who have a diagnosis of personality disorder in perinatal mental health services</li> </ol>	

	<ol style="list-style-type: none"> <li>3. Understand the different psychological therapies for women with mental disorders and their use during the perinatal period</li> <li>4. Understand the factors which contribute to birth trauma (PTSD)</li> <li>5. Understand how pregnancy related trauma and loss can affect women and partners.</li> <li>6. Demonstrate knowledge and understanding of the challenges and complexities for women and partners associated with assisted conception.</li> <li>7. Understand the mental health problems associated with infertility and infertility treatment.</li> </ol>	
<p>Recommended reading:</p>	<ol style="list-style-type: none"> <li>1. Adshead, G. (2015). Parenting and personality disorder: Clinical and child protection implications. <i>BJPsych Advances</i>, 21(1), 15</li> <li>2. Bhat, A., &amp; Byatt, N. (2016). Infertility and Perinatal Loss: When the Bough Breaks. <i>Current psychiatry reports</i>, 18(3), 31.</li> <li>3. Eyden, J., Winsper, C., Wolke, D., Broome, M. R., &amp; MacCallum, F. (2016). A systematic review of the parenting and outcomes experienced by offspring of mothers with borderline personality pathology: Potential mechanisms and clinical implications. <i>Clinical psychology review</i>, 47, 85–105.</li> <li>4. Herbert, D., Young, K., Pietrusińska, M., &amp; MacBeth, A. (2022). The mental health impact of perinatal loss: A systematic review and meta-analysis. <i>Journal of affective disorders</i>, 297, 118–129.</li> <li>5. McCluskey, G. and Gilbert, P. (2015) Implications counselling for people considering donor-assisted treatment. Fully updated version. BICA Publications</li> <li>6. Newman, Louise. &amp; Stevenson, C. (2005). Parenting and Borderline Personality Disorder: Ghosts in the Nursery. <i>Clinical Child Psychology and Psychiatry</i>. 10, 385-394.</li> <li>7. Quagliata E (Ed.). (2013) <i>Becoming Parents and Overcoming Obstacles: Understanding the Experience of miscarriage, premature births, infertility and postnatal depression</i>. Karnac Books.</li> <li>8. Svanberg, E. (2019) <i>Why Birth Trauma Matters</i>. Pinter &amp; Martin</li> <li>9. Risholm Mothander, P., C. Furmark, and K. Neander (2018), Adding “Circle of Security–Parenting” to treatment as usual in three Swedish infant mental health clinics. Effects on parents’ internal representations and quality of parent-infant interaction. <i>Scandinavian Journal of Psychology</i>. 59: p. 262-272</li> </ol>	

Day 4 Thursday 2<sup>nd</sup> March 2023

	Facilitators: Drs Liz McDonald Lucinda Green	
9.15-9.45	General principles when prescribing for women of childbearing potential.	Dr Liz McDonald
09.45-10.45	Prescribing anti-psychotic medication and mood stabilisers in pregnancy and breastfeeding	Dr Angelika Wieck
10.45-11.00	<i>BREAK</i>	
11.00-11.45	Prescribing anti-depressant medication in the perinatal period: how do we translate evidence into practice?	Prof Ian Jones
11.45-12.30	Prescribing Q&A	Dr Angelika Wieck Prof Ian Jones Dr Lucinda Green Dr Liz McDonald
12.30-13.15	<i>LUNCH</i>	
13.15–15.15	Eating Disorders in the perinatal period	Dr Catia Acosta
15.15-15.30	<i>BREAK</i>	
15.30-16.30	Partners in the perinatal period	Dr Lucinda Green
ILOs	<ol style="list-style-type: none"> <li>1. Be able to apply current evidence and general principles for the pharmacological management of pregnant and breastfeeding women to clinical scenarios.</li> <li>2. Be familiar with currently available evidence on the reproductive safety of the main psychotropic drugs, resources that provide high quality evidence updates and current influential prescribing guidance</li> <li>3. Identify and assess women who have eating disorders in the perinatal period, including assessment of the risk to the woman, the foetus and the infant, requesting physical investigations and discussing risk concerns with women.</li> <li>4. Devise a perinatal mental health care plan for a woman who has an eating disorder in the perinatal period, in partnership with the woman, the eating disorder service and other relevant professionals.</li> <li>5. Recognise the effect of a woman’s perinatal mental illness on her partner.</li> </ol>	







	<p>6. Recognise how healthcare professionals can improve the experience for partners and families of women receiving perinatal mental healthcare</p>	
<p>Recommended reading:</p>	<ol style="list-style-type: none"> <li>1. Bye, A., Martini, M. G., &amp; Micali, N. (2021). Eating disorders, pregnancy and the postnatal period: a review of the recent literature. <i>Current opinion in psychiatry</i>, 34(6), 563–568.</li> <li>2. Bye, A., Shawe, J., Bick, D., Easter, A., Kash-Macdonald, M., &amp; Micali, N. (2018). Barriers to identifying eating disorders in pregnancy and in the postnatal period: a qualitative approach. <i>BMC pregnancy and childbirth</i>, 18(1), 114.</li> <li>3. Fogarty, S., Elmir, R., Hay, P. et al. (2018). The experience of women with an eating disorder in the perinatal period: a meta-ethnographic study. <i>BMC Pregnancy Childbirth</i> 18, 121.</li> <li>4. Acosta, C., Treasure, J. (2015) Eating Disorders: Overview and Management in Women. Current progress in obstetrics and gynaecology, volume 3. Ed: Studd J, Tan SL</li> <li>5. McAllister-Williams, R. H., Baldwin, D. S., Cantwell, R. et al (2017). British Association for Psychopharmacology consensus guidance on the use of psychotropic medication preconception, in pregnancy and postpartum. <i>Journal of psychopharmacology</i> (Oxford, England), 31(5), 519–552.</li> <li>6. National Institute for Health and Care Excellence (2014). Antenatal and Postnatal Mental Health - Clinical Management and Service Guidance. Clinical Guideline 192.</li> <li>7. MHRA: Valproate use by women and girls (2018). <a href="http://www.gov.uk/guidance/valproate-use-by-women-and-girls">www.gov.uk/guidance/valproate-use-by-women-and-girls</a></li> <li>8. Pre-conception advice: Best Practice Toolkit for Perinatal Mental Health Service (2019) Pan-London Perinatal Mental Health Networks. <a href="http://www.healthylondon.org/wp-content/uploads/2019/05/Pre-conception-advice-Best-Practice-Toolkit-for-Perinatal-Mental-Health-Services.pdf">www.healthylondon.org/wp-content/uploads/2019/05/Pre-conception-advice-Best-Practice-Toolkit-for-Perinatal-Mental-Health-Services.pdf</a></li> <li>9. Delivering preconception care to women of childbearing age with serious mental illness - <a href="https://www.tommys.org/pregnancy-information/health-professionals/free-pregnancy-resources/guide-delivering-preconception-care">https://www.tommys.org/pregnancy-information/health-professionals/free-pregnancy-resources/guide-delivering-preconception-care</a></li> <li>10. Ruffell, B., Smith, D.M. &amp; Wittkowski, A J. (2019) The Experiences of Male Partners of Women with Postnatal Mental Health Problems: A Systematic Review and Thematic Synthesis. <i>Child Fam Stud</i>.28, 2772–2790.</li> <li>11. Darwin, Z., Domoney, J., Iles, J. et al. (2021) Involving and supporting partners and other family members in specialist perinatal mental health services. NHS England. <a href="https://www.england.nhs.uk/wp-">https://www.england.nhs.uk/wp-</a></li> </ol>	



	<p>content/uploads/2021/03/Good-practice-guide-March-2021.pdf</p> <p>12. Lever Taylor, B., Billings, J., Morant, N., Bick, D., &amp; Johnson, S. (2019). Experiences of how services supporting women with perinatal mental health difficulties work with their families: a qualitative study in England. <i>BMJ Open</i>, 9(7):e030208.</p>	
	<b><u>Day 5 Friday 3<sup>rd</sup> March 2023</u></b>	
	Facilitators: Drs Lucinda Green & Liz McDonald	
09.15–10.45	Child safeguarding in the perinatal period	Dr Lucinda Green
10.45–11.00	Break	
11.00–12.30	Child safeguarding in the perinatal period	Dr Lucinda Green
12.30–13.15	Lunch	
13.15–14.45	Risk in the perinatal period: what have we learned from maternal psychiatric deaths?	Dr Roch Cantwell
14.45–15.00	Break	
15.00–15.30	Going forward: what else do you need to do to improve your skills and knowledge as a perinatal psychiatrist?	Dr Lucinda Green Dr Liz McDonald
16.00–16.30	Taking learning into practice	Dr Lucinda Green Dr Liz McDonald
ILOs	<ol style="list-style-type: none"> <li>1. Describe the factors highlighted in child serious case reviews which can affect children’s safety and wellbeing and increase the risk of abuse and neglect.</li> <li>2. Recognise how perinatal mental health services, working effectively in partnership with a range of professionals, can ensure child safeguarding concerns are identified early and that effective care, treatment and support for women and families can reduce the risk of harm to infants and children.</li> <li>3. Describe the epidemiology of self-harm and suicide in the perinatal period.</li> <li>4. Describe the distinctive clinical features of maternal suicide.</li> <li>5. Recognise risk in relation to maternal suicide and apply this to clinical assessment.</li> </ol>	
Recommended reading:	<ol style="list-style-type: none"> <li>1. Department for Education (2018). Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children. London: HM Government</li> </ol>	

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|  | <ol style="list-style-type: none"> <li>2. Department for Education (2020) Complexity and challenge: a triennial analysis of serious case reviews 2014-2017. London: Department for Education.</li> <li>3. Department for Education (2022) Learning for the future: final analysis of Serious Case Reviews, 2017-19. London: Department for Education.</li> <li>4. Cantwell R, Knight M, Oates M, Shakespeare J on behalf of the MBRRACE-UK mental health chapter writing group (2015) Lessons on maternal mental health. In Knight M, Tuffnel D, Kenyon S, Shakespeare J, Gray R, Kyrinczuk JJ (Eds.) on behalf of MBRRACE-UK. Saving Lives, Improving Mothers' Care – Surveillance of maternal deaths in the UK 2011-13 and lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2009-13. Oxford: National Perinatal Epidemiology Unit, University of Oxford 2015: p22-41.</li> <li>5. Cantwell R, Youd E and Knight M on behalf of the MBRRACE-UK mental health chapter-writing group (2018) Messages for mental health. In Knight M, Bunch K, Tuffnell D, Jayakody H, Shakespeare J, Kotnis R, Kenyon S, Kurinczuk JJ (Eds.) on behalf of MBRRACE-UK. Saving Lives, Improving Mothers' Care - Lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2014- 16. Oxford: National Perinatal Epidemiology Unit, University of Oxford 2018: p42-60</li> <li>6. Cairns A, Kenyon S, Patel R, Bunch K and Knight M on behalf of the MBRRACE-UK mental health chapter-writing group. In Knight M, Bunch K, Patel R, Shakespeare J, Kotnis R, Kenyon S, Kurinczuk JJ (Eds.) on behalf of MBRRACE-UK. Saving Lives, Improving Mothers' Care Core Report - Lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2018-20. Oxford: National Perinatal Epidemiology Unit, University of Oxford 2022: pp 10-15.</li> </ol> |  |
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Course leads and facilitators

	<p><u>Dr Liz McDonald</u></p> <p>Dr Liz McDonald is former Chair of the Perinatal faculty at the RCPsych (2012-16), former Chair of the Pan London PMH Clinical Network (2013-2017). She worked clinically and in service development in east London, was a Guideline Development Group member for the NICE APMH guidelines (2007 and 2014), was a regional assessor for psychiatric maternal deaths and was a member of the IAG for MBRRACE. She was Clinical Lead for the NHSE funded Bursary Project for training perinatal psychiatrists at the RCPsych and is now a joint clinical lead for the HEE funded masterclass programme for perinatal psychiatrists. She is a visiting lecturer at the Tavistock and Portman NHS Foundation Trust. She has extensive experience of teaching at regional, national and international levels. She has been an active mentor of trainee and consultant psychiatrists. She is currently co-editing a Seminar Series Perinatal Psychiatry textbook with the RCPsych and Cambridge University Press.</p>
	<p><u>Dr Lucinda Green</u></p> <p>Dr Lucinda Green developed and led the perinatal mental health service at St. Thomas' Hospital (South London &amp; Maudsley NHS Foundation Trust) from 2002 to 2016. She then moved to West London NHS Trust where she was Perinatal Clinical Lead. She currently works in private practice at the Portland Hospital in London.</p> <p>For the Pan London Perinatal Mental Health Network Dr Green has been chair of both the South and North West London Perinatal Mental Health Clinical Networks. She was joint lead for the London Perinatal Mental Health Care Pathway and lead for the Pan London Perinatal Mental Health Network's Perinatal Pre-Birth Planning Best Practice Toolkit. She was a member of the British Association for Psychopharmacology Perinatal Guideline Development Group. She has been an elected member of the Royal College of Psychiatrists Perinatal Faculty and was the lead for the development of a series of perinatal information leaflets for the RCPsych. She is a former chair of the London &amp; South Perinatal Consultant Psychiatrists Association.</p> <p>Dr Green has many years' experience of designing and delivering perinatal mental health training for a range of professionals. She has been a clinical supervisor for senior trainees and a mentor for consultant perinatal psychiatrists. She was a mentor for the Royal College of Psychiatrists Perinatal Bursary Programme and is now a joint clinical lead for the HEE funded masterclass programme for perinatal psychiatrists at the RCPsych. She is a visiting lecturer in perinatal mental health for the Tavistock and Portman NHS Foundation Trust. <a href="http://www.drucindagreen.co.uk">www.drucindagreen.co.uk</a></p>

	<p><u><a href="#">Dr Catia Acosta</a></u></p> <p>Dr. Acosta is Consultant Perinatal Psychiatrist at Chelsea and Westminster Hospital (CNWL NHS Foundation Trust). She previously worked as an Eating Disorder consultant and has a special interest and expertise in eating disorders in the perinatal period. She is certified in the neonatal behaviour observation (NBO) by the Brazelton centre and is part of the RCPsych's Expert Reference Group for Fabricated and Induced Illness (FII) by proxy/in children (previously known as Munchausen syndrome by proxy) and co-authored the guidelines for assessment and work as an expert witness in this area for family courts. She previously trained in obstetrics and gynaecology. <a href="http://www.catiacosta.com">www.catiacosta.com</a></p>
	<p><u><a href="#">Dr Roch Cantwell</a></u></p> <p>Roch Cantwell is Lead Clinician for Scotland's National Perinatal Managed Clinical Network and Vice-Chair of the Scottish Government Perinatal and Infant Mental Health Programme Board, tasked with establishing specialist services across Scotland. He was the lead psychiatric assessor and chapter author for the UK and Ireland Confidential Enquiries into Maternal Deaths from 2011-2021 and chaired the SIGN guideline development group on Perinatal Mood Disorders. He led the development of Scotland's first MBU and community perinatal mental health team. He chairs the Royal College of Psychiatrists' Perinatal Quality Network Accreditation Committee and is past chair of the College's UK and Scotland Perinatal Faculties.</p>
	<p><u><a href="#">Dr Clare Dolman</a></u></p> <p>Clare Dolman is a journalist and researcher whose PhD focused on women with bipolar disorder's decision-making regarding pregnancy and childbirth. She is Patient and Public Involvement Lead for the NIHR-funded ESMI project on the effectiveness and cost-effectiveness of perinatal mental health services, based at the IOPPN, King's College and lectures there and at the Royal College of Psychiatrists on service user perspectives. Clare, who has a personal interest in this subject, is Co-chair of the Bipolar Commission and an Ambassador for Bipolar UK (<a href="http://bipolaruk.org">bipolaruk.org</a>). She is also a trustee of the MMHA (Maternal Mental Health Alliance) <a href="http://maternalmentalhealthalliance.org">maternalmentalhealthalliance.org</a>, and APP - Action on Postpartum Psychosis (<a href="http://app-network.org">app-network.org</a>)</p>
	<p><u><a href="#">Dr Nic Horley</a></u></p> <p>Dr Nic Horley is a Chartered Clinical Psychologist working for the West London Perinatal Mental Health Service. Prior to working in Perinatal Mental Health Services her background is in severe and enduring mental health, working therapeutically with people diagnosed with Personality Disorder. Dr Horley offers evidence based individual and group interventions to women who are pregnant or in the early postnatal period using a range of therapies, all of which are underpinned by attachment theory. Dr Horley is a qualified Dialectical Behaviour Therapist and has completed additional training in Schema Therapy and Trauma Focussed Therapy. She has trained in and regularly uses the Circle of Security and Video Feedback Interventions. Since</p>

	<p>the expansion of the West London Perinatal Mental Health Service in February 2016, Dr Horley has worked to develop the psychological intervention pathways offered during the perinatal period.</p> <p>Dr Horley is a visiting lecturer with the Tavistock and Portman NHS Foundation Trust and is a member of the Perinatal Faculty there. She lectures and supervises clinical psychology trainees and MSc students in the areas of personality disorder, treatment planning and psychological assessment and formulation.</p>
	<p><u>Prof Ian Jones</u></p> <p>Ian Jones is Professor of Psychiatry and Honorary Consultant Perinatal Psychiatrist at Cardiff University. He is Director of the National Centre for Mental Health (NCMH.info) and with colleagues leads the Bipolar Disorder Research Network (BDRN.org). NCMH has recruited over 20,000 people with mental health problems to its research cohort and BDRN has involved over 7,000 people with bipolar disorder from around the UK in research. He leads the Cardiff University Psychiatry Service (CUPS) and a clinical service offering pre-conception counselling to women with severe mental illness. He is Director of BEP-C, a group psychoeducation programme for bipolar disorder. He is a Trustee of The Maternal Mental Health Alliance (maternalmentalhealthalliance.org) and a Trustee and Scientific Advisor to Action on Postpartum Psychosis (app-network.org). His research focuses on bipolar disorder and postpartum psychosis. He has authored or co-authored over 300 publications and book chapters. He has been awarded the Marcé Medal for his research on Postpartum Psychosis and was named Academic Psychiatrist of the Year at the RCPsych Awards 2013. In 2014 BEP-C was awarded the British Medical Journal (BMJ) award for innovation in medicine.</p>
	<p><u>Dr Maddalena Miele</u></p> <p>Dr Miele is a consultant in perinatal psychiatry at St Mary's Hospital, where she established the service in 2009. has a background in Obstetrics and Gynaecology, a PhD in neuroscience (Oxford University) and trained in Infant Mental Health with Dr PO Svanberg (Care Index and Parent Infant Interaction Observation Scale). Dr Miele has been heavily involved in perinatal mental health service development. She chaired the North West London division of the London Perinatal Mental Health Network (NHS England) from 2015 to 2022, she was Perinatal Clinical Lead for CNWL (2017-2020), she was a member of the Perinatal Faculty Executive and the Perinatal Quality Network Advisory Group of the RCPsych and the College representative for the Maternal Mental Health Alliance (2015-2018). She is actively involved in perinatal and infant mental health training and teaching programs. She is the creative director of the animation movie "Building Better Perinatal Mental Health Services" and the lead author of the Pre-conception advice: Best Practice Toolkit for Perinatal Mental Health Services (2019). She is a trainer for the Parent Infant Interaction Observation Scale course at Warwick University Medical School. In 2020 she was appointed on the board of trustee of the AIMH and the Brazelton UK.</p>

Dr Angelika Wieck



Dr Wieck is Honorary Consultant in Perinatal Psychiatry at the Greater Manchester Mental Health NHS Foundation Trust and Honorary Senior Lecturer at the University of Manchester. She was Consultant in General Adult Psychiatry, a Consultant for the Northwest Specialist Service for Affective Disorders, the Lead Consultant for the North West Perinatal Psychiatry Service, the Clinical Lead for the Perinatal Mental Health Clinical Network in Greater Manchester, and a member of the National Clinical Reference Group for Perinatal Mental Health. She was the perinatal psychiatry expert for the Bipolar Valproate Advisory Group at the European Medicines Agency, the chair of the Women, Gender and Mental Health Section at the European Psychiatric Association (2016- 2022) and serves on the Editorial board of European Psychiatry and the Archives of Women’s Mental Health. Dr Wieck’s research interests and publications are in reproductive psychopharmacology, psychoneuroendocrinology and perinatal psychiatry.