

RCPsychiS Perinatal Faculty: Response to the Perinatal & Infant Mental Health 2021/22 Delivery Plan

Date: 13/07/2021

Overall comments

- **Administrative support** – There was felt by members that services having the right operational, administrative and IT supports in place to ensure effective service provision was critical. It was suggested a possible audit as to whether IT/ managerial and administrative support infrastructure is adequate would be a positive workstream. This administrative support should also extend to the gathering of national data, both within audit and research activities, within the health sector and academic institutions.
- **Safe delivery of care** – Ensuring there was space within in-patient services for the safe delivery of socially distanced assessment and interventions face to face was said to be a key challenge, and one that may continue for some time due to the pandemic's impact.
- **Training** – The future workforce for our perinatal services needs the right training. We must, going forward, seek to consolidate and develop world class teaching and training interventions, including the use of simulation-based training across disciplines. This should sit alongside the existing suite of modules and follow-on training, that link to the academic expertise held within the universities of Scotland.
- **Equalities** – we need to make sure the services we provide are equality-proofed. This includes supporting community-based engagement activities across the regions of Scotland to hear the lived experience of women and families from our ethnically diverse communities, our LGBTQ communities, refugees and asylum seekers in conjunction with national equalities subgroup. Activities in this regard could range from initial meetings and scoping out individual communities' experiences, to targeted anti-stigma campaigns.
- **Pathways** – across both the voluntary sector and health services, there must now be further developed single points of access to join-up services across perinatal, MNPI and infant mental health.

- **Impact of the pandemic** – we are yet to fully understand the impact of the Covid-19 pandemic on pregnant and postnatal women and their infants, in particular the impact of any differential effects on vulnerable groups and families across Scotland. Working with Scottish Government to explore the possibility of a national perinatal research fund to understand the impact of the pandemic should be prioritised.

Comments on the details of the Plan

- **Peer workers** – We welcome their inclusion, and would advocate for the learning available on how these roles have evolved in other areas of the UK to be used to optimise the benefit to women and families.
- **Training plan** – We welcome the training plan and, in particular, the strengths of both multidisciplinary and unidisciplinary training approaches. We would also like to advocate for simulation-based training opportunities including cross-disciplinary learning e.g. maternity and mental health staff.
- **Third sector support** – Ideally, we would like to see equality of service provision across the voluntary sector agencies across Scotland. At present there are some pockets of good practice, but availability of social network and parenting support remains variable across Scotland, as does funding. Supporting a clear expectation of what is available, regardless of where you are based, would be a positive ambition.
- **Pathways** – We would like to ensure there are clear areas of interface between specialist services and other tiers of service to ensure smooth transitions of care for women and their families, single points of access and collaborative working.
- **Digital exclusion** – resisting a system that cuts off mothers with a lack of digital access and/or knowledge should be a priority. There is a need to continue to deliver interventions for digitally excluded parents and families.