

Perinatal mental health services

The 10 key messages below are drawn from the Joint Commissioning Panel for Mental Health's guide on commissioning perinatal services. To read the full guide, please visit www.jcpmh.info

- 1 Ensure that a regional perinatal mental health strategy is present and that all providers of care for perinatal mental health problems are participating.
- 2 Ensure that there is a perinatal mental health integrated care pathway in place which covers all levels of service provision and severities of disorder.

All service providers should be compliant with this so that there is equitable access to the right treatment at the right time by the right service.
- 3 Mother and baby units should be accredited by the Royal College of Psychiatrists' quality network for perinatal services, and have formal established links with a number of specialised community perinatal mental health teams in their region.
- 4 Specialised perinatal community mental health teams should be members of the Royal College of Psychiatrists' quality network for perinatal services and should case manage serious mental illness. They should have a formal link with a mother and baby unit.
- 5 Parent-infant services provided by child and adolescent mental health services (CAMHS) and maternal mental health teams provided in primary care and by non-health organisations are an addition to, not a substitute for, services provided for women with serious mental illness. They should work collaboratively with specialist services.
- 6 When commissioning adult mental health services there is a need to ensure that:
 - these either provide a mother and baby unit, or have formal links to ensure access to one
 - all women requiring admission in late pregnancy or after delivery are admitted with their infant to a mother and baby unit not an adult admission ward.
- 7 Ensure that adult mental health services:
 - counsel women with serious affective disorder about the effects of pregnancy on their condition
 - provide information and advice about possible effects of their medication on pregnancy
 - provide additional training to psychiatric teams about perinatal mental health
 - routinely collect data on which female patients are pregnant or in the postpartum (following childbirth) year.

Launched in April 2011, the Joint Commissioning Panel for Mental Health is comprised of leading organisations who are aiming to inform high-quality mental health and learning disability commissioning in England. The JCP-MH:

- publishes briefings on the key values for effective mental health commissioning
- provides practical guidance and a framework for mental health commissioning
- supports commissioners in commissioning mental health care that delivers the best possible outcomes for health and well being
- brings together service users, carers, clinicians, commissioners, managers and others to deliver the best possible commissioning for mental health and wellbeing.

For further information, please visit www.jcpmh.info

8 Ensure that when commissioning maternity services the needs of pregnant and postpartum patients are met. This includes:

- midwives receiving additional training in perinatal mental health and the detection of at-risk patients
- maternity services asking all women at early pregnancy assessment about previous psychiatric history, and referring on those with a past history of serious mental illness
- maternity services should routinely inform the GP about the pregnancy, and ask for further information
- maternity services should have access to perinatal mental health teams
- maternity services should have access to designated specialist clinical psychologists
- maternity service midwives should routinely enquire about women's current mental health during pregnancy and the early postpartum period.

9 Ensure that when commissioning IAPT services (Improving Access to Psychological Therapies) that the needs of pregnant and postpartum patients are met. This includes:

- routinely collecting data on whether referrals are pregnant or in the postpartum year
- receiving additional training in perinatal mental health
- ensuring that pregnant and postpartum women are assessed and treated within three months.

10 Ensure that when commissioning primary care services that the needs of pregnant and postpartum patients are met. This includes:

- General Practitioners (GPs) and other primary care staff receiving additional training in perinatal mental health
- GPs and other primary care staff being made familiar with the perinatal mental health integrated care pathway
- Health Visitors receiving additional training in perinatal mental health.