

### Universal Perinatal Mental Health Services

**National Findings Overview** 

#### **Overview**

- This report summarises the results of a survey conducted by NHS Benchmarking of large NHS providers throughout England, where they were asked to provide data on any specialist perinatal given by obstetrics, midwifery and health visiting staff in their area during 2016.
- NHS Benchmarking Network were commissioned by Health Education England, funded by NHS England, and partnered with the Royal College of Obstetricians and Gynaecologists, the Royal College of Midwives and the Institute of Health Visiting, to complete the data collection, which took place from February to May 2017 and referenced the 12 month calendar year January to December 2016.
- The aim of the project was to give an overview of perinatal mental health care within maternity and health visiting services, including associated education and training, to better inform Health Education England of the provision of perinatal mental healthcare across universal maternity services, so that this may inform their work with NHS England to further develop formal dedicated specialist inpatient and community perinatal mental healthcare.
- This report provides a baseline data collection, alongside some associated analysis of universal perinatal mental health care including the scope and scale of specialist service provision within universal services, and the uptake of national and regional training at the time it was completed. These are important findings for driving forward change and supporting delivery of specialist perinatal mental health care that supports the universal pathway.





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#### Strategic context

- Since the data collection was completed there have been significant changes made to the perinatal mental health landscape. This includes a large expansion in specialist inpatient and community perinatal mental health service provision across England as part of the Five Year Forward View for Mental Health (MHFYFV).
- NHS England is part way through the delivery of the MHFYFV perinatal mental health transformation programme, which with the support of £365m of funding is expanding specialist community and inpatient perinatal mental health services so that by 2020/21, 30,000 more women are able to access evidence based care closer to home.
- NHSE are collaborating with HEE to identify workforce education and training priorities to develop specialist inpatient and community provision still further.
- As part of this funding it is a requirement of each of these specialist services to support their colleagues in universal services by delivering supervision, training and consultation to: (a) raise awareness of perinatal mental health difficulties; (b) to support the early identification of perinatal mental illness; (c) improve access to evidence-based treatment.
- There have also been a number of changes in service models since the data collection was completed. During 2018/2019 and for the remainder of the MHFYFV programme, Health Education England and NHS England will continue to work in collaboration to support the expansion of specialist perinatal mental health care.
- This will focus on urgently training the specialist workforce, but also as a result, maternity and health visiting services will be supported by these specialist teams to develop the required skills and knowledge to support better identification of perinatal mental illness, resulting in early intervention and improved recovery rates.





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### Background

### **Background – Universal Services Collection**

- Not every woman experiencing mental distress during pregnancy will come into contact with specialist mental health services, but it is expected that the vast majority will access midwifery, obstetric and health visiting services during pregnancy and in the postnatal period. Through their contacts with mothers to be and new mothers, these services can play a significant role in the early identification of perinatal mental health services and signpost women on to other services including specialist secondary mental health services as required.
- While it is acknowledged that universal services, including obstetrics, midwifery and health visiting, play an important role in supporting mothers with mental health concerns, there is no existing national data on the scope and scale of this provision.

This report aims to:

- 1. review specialist input within:
  - Obstetric Services
  - Midwifery Services
  - Health Visiting Services
- 2. Describe the scale and scope of provision, and its geographical spread



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#### **Specialist Perinatal Mental Health Service at the time of data collection**

During Jan – Dec 2016 (when the data collected refers to) perinatal transformation was in its genesis.

- 20 Wave 1 Community Services Development Fund sites began receiving funding in October 2016 to set up their new or enhanced specialist community perinatal mental health services. Whilst these services began mobilising during the time of the survey, it should be noted that most Wave 1 services were not fully operational during this time.
- Plans to develop the 4 new MBUs were underway the procurement notice was issued in August 2016 and contracts were signed with providers that year but the units were not mobilised.
- Some limited expansion of beds numbers in existing units was underway.
- Health Education England were in the process of formalising their Perinatal Mental Health competency framework, identifying the skills, knowledge and abilities required for staff to work with people in the perinatal period.



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### **Process and Timeline**

#### **Participant Profile**

- Data collection period 9<sup>th</sup> February 31<sup>st</sup> March 2017 (collecting 2016 calendar year data)
- Feedback to stakeholders June and July 2017
- Final reports to providers July 2017
- 161 NHS provider organisations participated, and 211 individual service submissions were received
- Response rate:
  - Obstetric and Midwifery providers 83%
  - Obstetric and Midwifery and Health Visiting providers 86%
  - Health Visiting providers 76%



## **Participant profile**

Of the 198 organisations contacted, 161 participated in the project, making a response rate of 80%. The map shows where submissions were received from across England. There is a variety of service models in the provision of these services which is discussed later in this report.

#### Number of organisations responding

Health Visiting (only) providers	50
Obstetrics & Midwifery providers	73
Obstetric, Midwifery & Health Visiting providers	38
Total organisations	161

Organisations were able to submit data separately for services in different units, hospitals, or localities. The total number of services participating was as follows:

Obstetric services	141
Midwifery services	123
Health Visiting services	88







### **Findings**

## Demographics

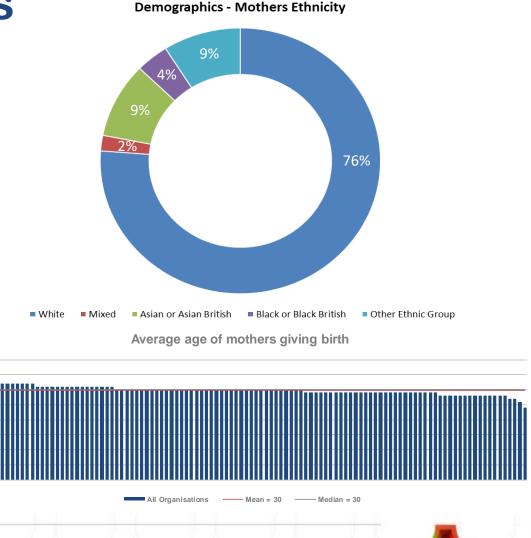
**Mothers** 

- The chart opposite shows a breakdown of ethnicity of mothers giving birth in 2016.
- From the services who provided data, 76% of mothers were white, with both Asian or Asian British and Other Ethnic Group each accounting for 9%.

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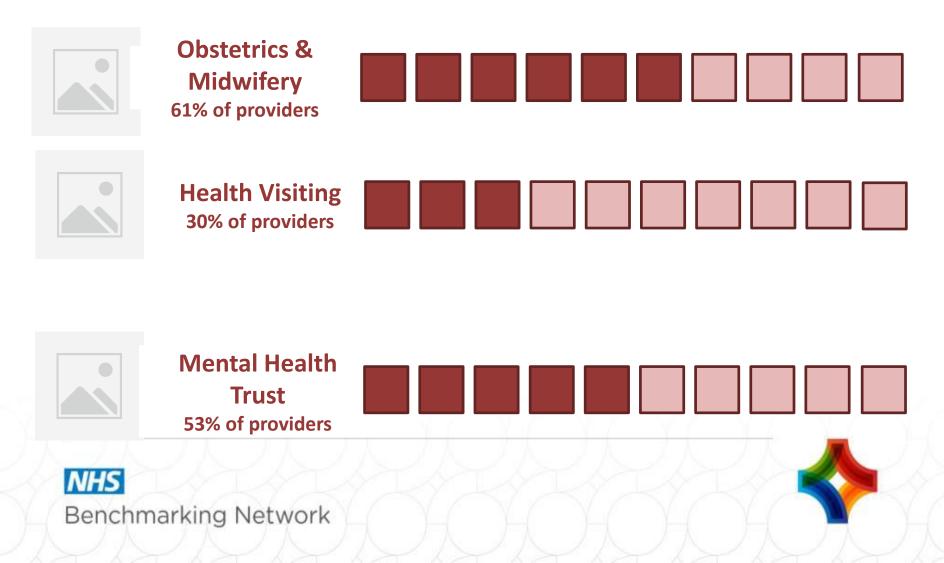
 The average age of women giving birth during 2016 was 30 years old. The average ranged from 26 to 35 years old across the submissions. The age Beprofile is in line with vork England wide data from



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### **Summary of provision**

% of providers who reported that they believe that they have some 'specialist provision'





### **Obstetrics and Midwifery**

### **Obstetric and Midwifery Workforce**

#### **General Obstetricians**

8 WTE per 1,000 live births



**Specialist Obstetricians** 

0.1 WTE per 1,000 live births

40.8 WTE total (= 1.3% of the workforce)



42 WTE per 1,000 live births



**Specialist Midwives** 

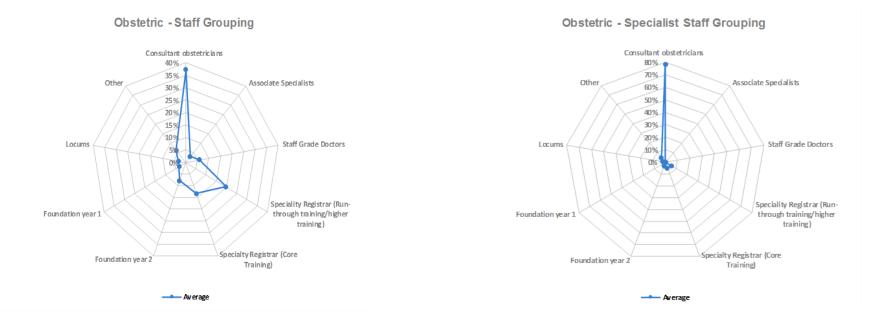
0.5 WTE per 1,000 live births

233.2 WTE total (= 1.4% of the workforce)





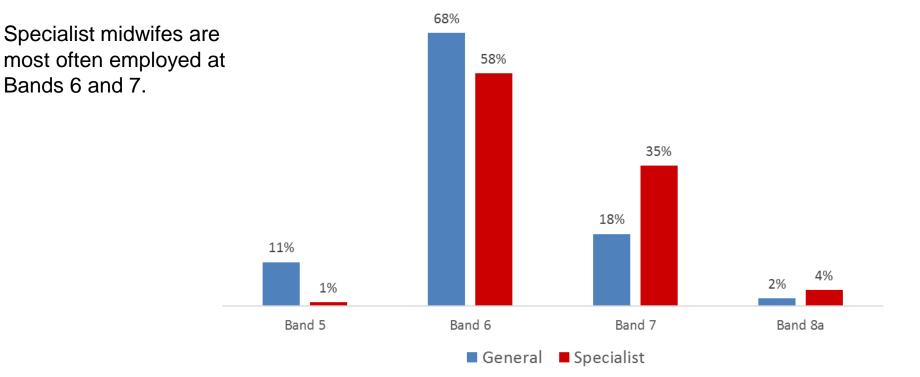
#### **Obstetric Workforce – General vs Specialist**



Specialist obstetricians are more likely to be in Consultant posts (78%) than general obstetricians (37%).

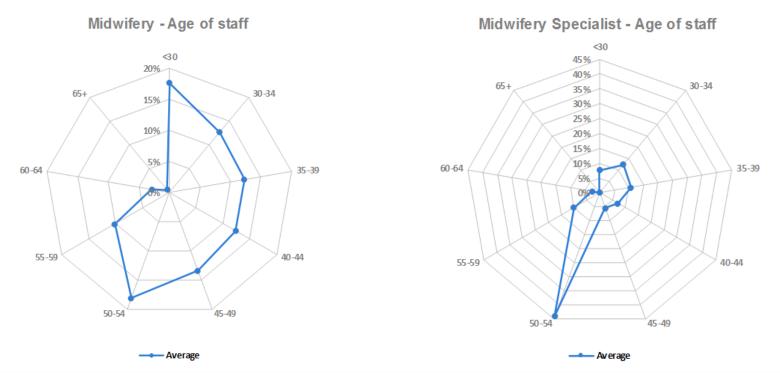


#### Midwifery Workforce – General vs Specialist





#### **Midwifery Workforce Demographics**



Specialist midwives are generally older – 57% are age 50+. General midwifes have a more even age spread (only 32% are 50 years old older).





### **Pathways**

# **Obstetrics and Midwifery Pathways and Protocols**

Does your service have a?	Yes	Νο
Protocol in place for the management of women at high risk of postpartum major mental illness	89%	11%
Protocol for women with severe and enduring mental disorders	88%	12%
Protocol for referring women identified with perinatal mental health problems to Health Visitors	81%	19%



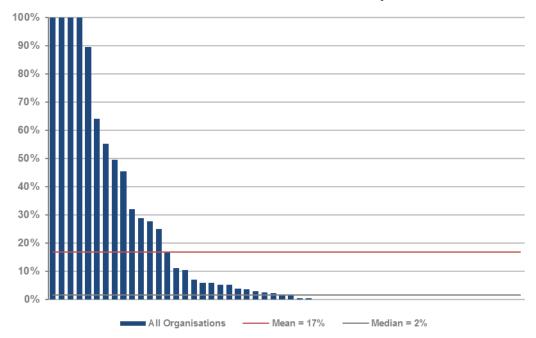


# Training

### **Specialist Perinatal MH Obstetric Training**

- Notable variation in local training provision
- A small number of organisations report all their obstetricians have undertaken local training

Percentage of obstetricians that have taken part in local perinatal mental health training programmes as a % of total obstetricians in post



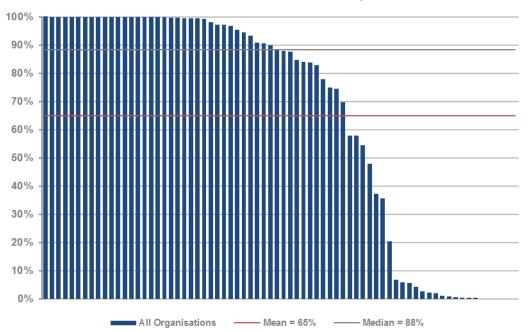


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### **Specialist Perinatal MH Midwifery Training**

- Midwifery training is more consistent
- Almost all participants have midwifes who have undertaken some local perinatal training
- There may be differences in the form this training takes including duration and scope

Percentage of midwives that have taken part in local perinatal mental health training programmes as a % of total midwives in post







### **Health Visitors**

### **Health Visiting Workforce**

#### General Health Visitors



32 WTE per 100,000 population

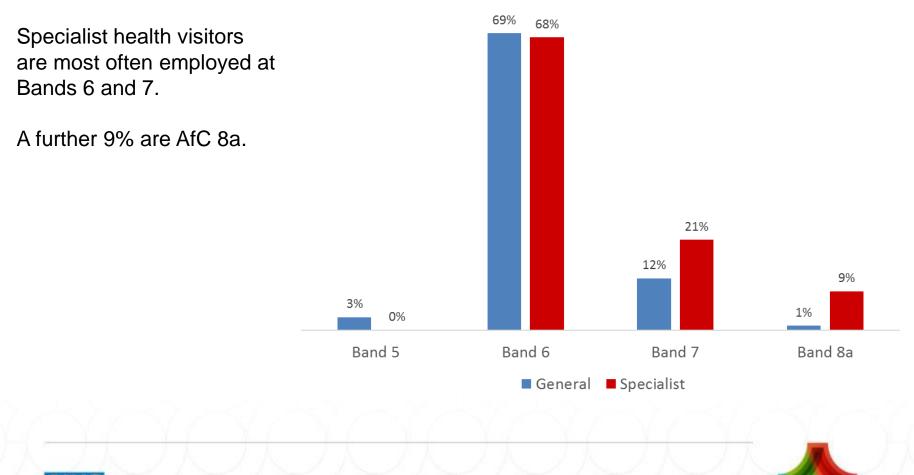
#### Specialist Health Visitors

0.2 WTE per 100,000 population

60.6 WTE total (= 0.8% of the workforce)



#### **Health Visiting Workforce**





#### Health Visiting Workforce Demographics



Specialist Health Visitors tend to be older. 83% are over 40 years old (compared to 48% of general health visitors).





### **Pathways**

### Locally agreed protocols

Does your service have a?	Yes	Νο
Local protocol for antenatal care of women with a perinatal MH problem	81%	19%
Protocol in place regarding management of women with mild to moderate anxiety or depression in pregnancy	74%	26%
Protocol in place in relation to the management of women with severe and enduring mental disorder	72%	28%
Protocol in place relating to the management of women at high risk of postpartum major mental illness	69%	31%
Local protocol regarding the management of pregnant women on antidepressant medication	47%	53%
Threshold for accepting patients onto the specialist perinatal Health Visitors caseload	23%	77%







# Training

#### **Local Training Offer**

 75% of participants have locally developed perinatal mental health training programmes



# Summary

- 61% of Obstetric and Midwifery providers have some (limited) specialist perinatal provision
- 30% of Health Visiting providers have some (limited) specialist perinatal provision

#### **Specialist Obstetricians**

- 1.3% of obstetric workforce
- More likely to be Consultant grade

#### **Specialist Midwives**

- 1.4% of midwifery workforce
- More likely to be Band 7 or Band 8a
- Older age profile

#### **Specialist Health Visitors**

- 0.8% of health visiting workforce
- More likely to be Band 7 or Band 8a
- Older age profile



### **Further Information**

Please direct any questions or comments to the NHS Benchmarking team:

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### **Thank You**