

Cynulliad Cenedlaethol Cymru / National Assembly for Wales  
Y Pwyllgor Plant, Pobl Ifanc ac Addysg | Children, Young People and  
Education Committee  
Iechyd Meddwl Amenedigol | Perinatal Mental Health  
PMH 22  
Ymateb gan: Coleg Brenhinol y Bydwagedd  
Response from: Royal College of Midwives

**The Royal College of Midwives**

**8th Floor, Eastgate House, 35–43 Newport Road, Cardiff, CF24 0AB**

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## **The Royal College of Midwives' response to National Assembly for Wales' Children, Young People and Education Committees Inquiry into Perinatal Mental Health**

The Royal College of Midwives (RCM) is the trade union and professional organisation that represents the vast majority of practising midwives in the UK. It is the only such organisation run by midwives for midwives. The RCM is the voice of midwifery, providing excellence in representation, professional leadership, education and influence for and on behalf of midwives. We actively support and campaign for improvements to maternity services and provide professional leadership for one of the most established clinical disciplines.

The RCM welcomes the opportunity to respond to this consultation and our views are set out below.

### **Background**

The RCM finds it shocking that suicide is a leading cause of death of women during pregnancy and particularly up to one year after the birth of baby. Also,

- Approximately 10–15% of women suffer from some form of mental health problems during pregnancy or following the birth of a child

- Approximately 15–20% of women suffer from postnatal depression

Perinatal mental ill health is devastating not only for women but also children, partners and wider family.

The RCM therefore welcomed the significant investment set aside by Welsh Government in 2016 for improving mental health services for pregnant women and new mothers. £1.5 million (per year) allocated for women with perinatal illnesses has had the opportunity to transform services in many Health Boards. It has been a significant step forward and has resulted in many women receiving timely and high quality care when they most need it. Midwives in Wales feel reassured that there are services for them to refer women in need to now.

### **Perinatal Services – Outpatient**

Each Health Board in Wales has established a perinatal mental health community specialist service to offer prenatal and postnatal treatment, care and support for women and their families experiencing perinatal illnesses. This care is provided by doctors, nursing and midwifery staff and other health care professionals. The care in each health board is tailor-made for the population needs of that individual health board but a Community in Practice network, managed by Public Health Wales, brings together key stakeholders to share good practice and encourage development. This structure has developed excellent collaborative work enhancing good communication between the multi professional groups. The RCM welcomes midwives involvement within the perinatal mental health teams.

It is likely that the developing and enhancing of Perinatal Mental Health Services in Wales at an outpatient level has the potential to modestly reduce the demand for inpatient services. However, some acute perinatal mental health diagnoses will need inpatient services regardless of the quality of outpatient facilities.

## **Perinatal Services – Inpatient**

There is currently no Mother and Baby Unit provision in Wales. The service in Cardiff closed in 2013 and the RCM understands that this was due to a combination of staffing and resource issues combined with low demand. If a women with acute perinatal mental health illness requires an adult mental health inpatient bed, this will either be provided for the mother only within a health board facility or a mother and baby unit facility bed can be commissioned from England.

Based on current population demographics, it can be estimated that between 50–70 women a year in Wales will require an admission for mental health illnesses within the first postpartum year. Welsh Health Specialist Services Committee (WHSSC) state that annually for the past 3 years, less than 5 women from Wales have been given placements in mother and baby units in England. Therefore it can be estimated that 45–65 women are being separated from their baby’s for their inpatient mental health care in Wales annually.

## **Recommendations**

The RCM believes that much good work has been undertaken in the last 12–18 months in Wales to develop perinatal mental health services. We would encourage the committee to consider exploring the following issues to increase the standard of care still further:

- *The RCM supports enhanced training of midwives*

The RCM is aware that there is often a significant delay in seeking and receiving appropriate treatment for perinatal mental health and that is likely in part, to be due to lack of knowledge and confidence from front line health care professionals in recognising signs and symptoms in the earliest stages. Consider the level of training that is necessary for midwives (and health visitors), the front line staff who care for all new mothers, to identify as early as possible any mental health issues that may be developing. Midwives and Maternity Support Workers play a

pivotal role in identifying mental health issues but report feeling on the back foot, adequate quality training would minimise this.

- *The RCM would welcome national auditable standards of care*  
Consider clear and nationally recognised referral pathways that have timelines and are consistent throughout Wales. The RCM believes there needs to be flexibility between Health Boards to ensure local needs are met but that cannot be at the expense of a service that is clear and consistent to clinician's and service users regardless of health board boundaries
  
- *The RCM wants appropriately skilled staff within specialist perinatal mental health services that want to work in Wales*  
Investment and recognition that perinatal mental health services is a specialist area that requires appropriate strategic leadership. This will ensure adequate training is available to develop and maintain skills as well as job plans that will attract the most skilled candidates to apply to work and stay in Wales. These roles include Maternity Support Workers, Midwives, Occupational Therapists, Counsellors, Clinical Nurse Specialists, Psychologists and Psychiatrists amongst others. Some specialist roles are currently extremely difficult to recruit into with Wales. The RCM supports the role of the Specialist Midwife being an essential part of all perinatal mental health teams.
  
- *The RCM believes that no woman should be separated from her baby unless it is clinically indicated.*  
The RCM recognises that in some situations, for the safety of the baby separation is necessary but anecdotally the RCM is aware that women in Wales can be separated from their baby because of a lack of a Mother and Baby Unit. This can have long term consequences on bonding and establishing relationships and should be avoided if at all possible. Mother and Baby Unit's in the right locations have the potential to achieve the RCM's goals:
  - The right treatment is required in the right place

- Care should be delivered as close to the woman's family as is possible
- Separation of mother and baby should only occur if clinically indicated
- Women are at the centre of their care package

## **Conclusion**

The RCM welcomes the opportunity to respond to the National Assembly for Wales' Children, Young People and Education Committee's Inquiry into Perinatal Mental Health. Maternal mental health has rightly been given increased attention over the last several years as it has a profound long-term effect on many families. A caring, compassionate service that can be delivered in a timely and appropriate manner by skilled professionals is within our capabilities. This should be an achievable goal within the short to medium term.

**The Royal College of Midwives**  
**May 2017**