



**Parent & Infant
Mental Health
Scotland**

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Scotland**

Annual Report

Year Ending 31 March 2022

Trustees' Annual Report for the financial year ended 31 March 2022

The trustees have the pleasure in presenting their annual report for the year ended 31 March 2022.

Reference and Administrative Information

Registered name of charity: Parent and Infant Mental Health Scotland

Charity Number: SC044891

Registered address: Studio 1015, Mile End Mill, Abbeymill Business Centre, Seedhill Road, Paisley, PA1 1TJ

Background

Scottish Perinatal Mental Health Forum was established in 2009 by a group of health and social care professionals who at the time either worked directly with pregnant women or up to 12 months after the birth of their baby or had a particular interest in perinatal mental health. This like-minded group of individuals have over the years championed their local NHS Boards throughout Scotland over the provision of services for women and their families. At the AGM held in August 2015 it was agreed to change the organisations name to Maternal Mental Health Scotland. In June 2022, the organisation changed its name to Parent and Infant Mental Health Scotland. The organisation was registered as a Charitable Incorporated Organisation (SCIO) on 29 May 2014, with the Office of the Scottish Charity Regulator.

Objectives of the charity:

- i) The advancement of education, by the promotion of research and public and professional awareness in perinatal mental health.
- ii) The advancement of good perinatal mental health for women and families, by promoting service innovation and quality perinatal mental health care across the health and social care spectrum.
- iii) The saving of lives promoting best evidence for prevention, detection and timely treatment for women, who may experience serious mental illness during pregnancy and following childbirth.

Growing our ambition: the future of Parent and Infant Mental Health Scotland

Following extensive consultation with our membership, prospective membership and strategic stakeholders, we have created a revised strategy, vision and mission. These can be summarised as follows:

Vision

Perinatal and Infant Mental Health provision in Scotland: comprehensive and universally accessible, whenever and wherever

Mission

To bring together lived and professional experience of perinatal and infant mental health into one voice. We use this to educate the public, health professionals and policy makers and campaign for change

Trustees for year ending 31 March 2022:

Joanne Smith	Chair
Dr Ashleigh Macaulay,	Clinical Lead
Sharon McMenemy,	Treasurer
Dr Anna Wroblewska,	Secretary
Emma Currer	
Susan McConachie,	
Michelle Miller, Resigned November 2021	
Nikki O'Hara	
Dr Christine Puckering	
Helen Sloan, Resigned November 2021	

Chair's Report:

Background

This year's report documents the transition from Maternal Mental Health Scotland to Parent and Infant Mental Health Scotland. The past year represents a step change in approach to better align our collective efforts with the changing policy, health and social care landscape.

The need for a coordinated and increased response to perinatal and infant mental health care has never been greater, and especially so now as the effects of Covid and the increasingly challenging economic context bite down.

Strategic Context

The Perinatal and Infant Mental Health Programme Board is due to come to an end in spring 2023. The Chair, Hugh Masters has been keen to stress that this is not the end of the workstream, but will signal a step back in terms of strategic oversight. We are supporting the PIMH-PB in making the case for sustained investment and interest in perinatal and infant mental health and we have been reassured that the early years remains a strategic priority for the Minister of Social Care and Mental Wellbeing, Kevin Stewart.

Having said that, we are aware that the Head of the Mental Health Directorate, Hugh McAloon has written to all health boards to stress the 'difficult financial context' and the need for 'rephrasing and reprioritising' to align with the revised budget. He called for pragmatized. At the time of writing the prioritisation of budgets had not been signed off.

Additional challenges continue to arise from COVID 19 and a diminishing financial settlement from the UK Government. We remain concerned about how these contextual factors will impact on perinatal and infant mental health especially for women, and families from minority ethnic and socially disadvantaged groups. The pandemic and cuts to budgets has undoubtedly placed additional strain on services and the staff who work in them. Longstanding issues around recruitment and retention have been further exacerbated by

Brexit. Ongoing pressures within primary care has led to conversations arising around the potential need for industrial action.

Capacity issues within the North of Scotland remain present despite the Scottish Government consulting for a second time on an options appraisal for expansion of MBU capacity. The consultation is now closed but the PIMH-PB was unsuccessful in tendering for analysis of consultation responses. The work has now stalled. There is a role for PIMHS to lobby to generate movement within the Govt when we expand our capacity.

Operating Context

Board meetings have largely remained online, and it was agreed that we would continue this approach to increase participation, particularly beyond the central belt. This shift on-line has proven to be a positive development in making meetings easily accessible to all. We hope to broaden out engagement when we recruit to the Development Manager role and expand membership in line with the new strategy aims.

A significant challenge arising from Covid – 19 on MMHS has been the cancellation of the annual conference over the past two years.

Annual Conference

The annual conference is a main source of income for PIMHS the impact of this in context of finances is laid out in the treasurer's report. The conference provides a platform to educate the needs for mums, dads, children and the wider family while raising public and political awareness of service provision around Scotland. There is an ambition to reinstate the conference in 23/24.

Funding

We have secured funding from The Robertson Trust, Cattannach Trust and The William Grant Foundation, to expand our reach and remit to better reflect our growing ambition for parents and babies in the perinatal period. In line with the Parent and Infant Mental Health Scotland (PIMHS) Strategy 2020 - 23 we are now recruiting a Development Manager and Communications Lead to harness our memberships and drive forward the new strategy.

Achievements

Despite underfunding and minimal resources, PIMHS has managed to make a notable impact. The following are examples of some successes in 21/22:

- Influenced the Perinatal and Infant Mental Health Programme Board Delivery Plans 2022/23
- Support board development through the Participation Officer roles
- Contributed to the PIMH-PB interim final report to Minister and are supporting legacy planning
- Collaborated with a range of partners to deliver specific initiatives, for example with Maternal Mental Health Alliance (MMHA) Everyone's Business campaign coordinator to set up a parliamentary event in Feb, 2023
- Secured funding from Robertson's Trust and Cattannach to take forward the next phase of the PIMHS Strategy
- Evolved MMHS into Parent and Infant Mental Health Scotland, a robust and well governed charity with wide representation.

PIMHS continues to work in partnership with various stakeholders.

Maternal Mental Health Alliance

<https://maternalmentalhealthalliance.org/>

We have developed a strong working relationship with new MMHA, CEO, Laura Seebohm. The monthly meetings with Maternal Mental Health Alliance continue as well as ad hoc meetings when required. The forum has been a useful driver in bringing strength to campaigning for better services while recognising the unique needs of the devolved nations.

Everyone's Business Campaign Co-ordinator

<https://maternalmentalhealthalliance.org/campaign/>

Everyone's Business Campaign Coordinator: Report to Trustees April - November 2022

From starting in the role in April 2022, early weeks in post involved establishing new contacts across clinical, policy and charity sectors and generally getting a lay of the land. This included joining the Programme Board and Equalities sub-group. As opportunities for making new contacts arise, these are routinely pursued.

I contributed to stakeholder engagement events and submitted responses to the MBU consultation and Mental Health Strategy refresh. Ahead of the MBU consultation, I met with organisations providing services in the North East to hear first-hand experiences. My feedback to the consultation highlighted the importance of equitable access to specialist services for all women across Scotland. Regarding the Mental Health Strategy, it was essential that PMH support be recognised as a cornerstone for families across Scotland. At present, PMH seems to be 'siloes' in its own policy workstream, and this is hopefully the start of it being brought into more mainstream policy ambitions and commitments.

Tess White, Scottish Conservative MSP for North East Region and Shadow Minister for Public Health, Women's Health and Sport, has been established as a parliamentary ally. We are working with her office to propose a petition to increase access to MBU services to two years post-partum and host a parliamentary roundtable event. This is likely to go ahead in Spring next year, bringing a range of voices in front of policymakers to support and promote the sustainability of the programme.

Data is currently being collected to produce the next iteration of Everyone's Business mappings. For the first time, this will also include a Freedom of Information request regarding Health Board PMH budgets and expenditure. I am liaising with the Programme Board chair and deputy chair to ensure information from the health board updates and regional modelling guidelines can be captured within the supporting narrative. Messaging surrounding the mapping will need to be carefully considered to balance the need to maintain pressure, while also celebrating progress. Publication is expected early 2023. A communications plan is in the works, with key messages dependant on the final survey results.

My membership to the Cross-Party Group on Women's Health is pending approval at their next meeting. I have previously participated in the stakeholder consultation on the Women's Health plan, to highlight the need to hold mental and physical health in equal regard and encourage cross-policy working.

Other activities include providing updates to the MMHA EB newsletters, and presenting the work of the campaign among various networks, such as the GGC perinatal mental health network.

Looking ahead, I feel it is unlikely that the EB coordinator (and other non-operational roles) will have a seat on the new iteration of the Programme Board, coming into effect April 2023. This would be unfortunate, but perhaps presents other opportunities, such as hosting an 'EB forum' to coordinate other voices no longer at the table.

Perinatal, Infant Mental Health and Equalities Participation Officers – Kat Masterton and Rach Barlee. Key activities include:

Kat – co chairs Voice of the Infant work producing infant rights statement, good practice guidance and infant pledge (now being finalised to publish).

Kat – worked to maintain relationships with perinatal experts by experience group; working and linking boards up with third sector organisations.

Rach – attended Scottish Government filming day for Wellbeing for Wee Ones website update on using baby box materials to support infant-parent bonding and mental health, in my sling consultant role; and attended meeting with Scottish Government on new mental health and wellbeing strategy re: importance of centring infant mental health.

Rach – turned LE slides into interactive workshop with added equalities section, titled “Respectfully engaging with lived experience”. And organised and facilitated LE workshops with every board and both MBUS (currently 2 left to complete).

Both – created an lived experience discussion video for PIMH-PB Families at the Centre event; wrote updates for minister report on PO roles and LE work; met with third sector organisations and discussed how to link them with boards; presented at GGC Perinatal Collab on our work; attended PIMHS development day; attending Scottish Government monitoring visits to boards focused on lived experience work.

Both – attended PIMH Board meetings, working group, (incl some in person days), equality subgroup, monitoring and evaluation subgroup, supported NHS PIMH teams 1:1 in meetings and answered their questions around lived experience inclusion.

Both – fed back on our work to trustees; worked alongside healthcare improvement Scotland for the LE workshops, including meeting community engagement officers before workshops; highly engaged with core of Scottish Government PIMH group, giving our insight and ideas and advocating for lived experience inclusion, equality inclusion, third sector inclusion; considered future of PO role and LE inclusion in Scottish Government.

Community Enterprise, Accelerate Programme

<https://communityenterprise.co.uk/>

We have worked with Claire Martin at Community Enterprise to align the work of PIMHS with the external operating context. Whilst we are proud of our achievements to date, we recognise that there is more we want to do and more that demands to be done. We hosted a PIMHS development day in October to develop strategic priorities for the year ahead.

Claire is developing a draft plan following our discussions which will be circulated to trustees in advance of the AGM.

Brand for Growth

[Brand For Growth - Bold Studio \(bold-studio.co.uk\)](http://bold-studio.co.uk)

Joanne Smith

Joanne Smith

Chair & Trustee

16 December 2022