

09th March 2021

Dublin 2

Dáil Éireann, Leinster House Clár Sláinte Náisiúnta do Mhná & do Naíonáin

Feidhmeannacht na Seirbhíse Sláinte, Aonad 7A, Áras Dargan, An Ceantar Theas, Baile Átha Cliath 8 T: 076 695 9991

National Women and Infants Health Programme

Health Service Executive, Unit 7A, The Dargan Building, Heuston South Quarter, Dublin 8 T: 076 695 9991

PQ Ref 8317/21: To ask the Minister for Health the status of the implementation of actions 19 to 25 outlined in the National Maternity Strategy Implementation Plan; the action being taken to address those not fully implemented; and if he will make a statement on the matter

Dear Deputy Carroll MacNeill,

Deputy Carroll MacNeill

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

Specialist Perinatal Mental Health Teams are now established in all 6 Hub Sites, that is three Dublin maternity hospitals and in University Maternity Hospital Limerick (UMHL), Cork University Maternity Hospital (CUMH) and Galway University Hospital (GUH). Since the Model of Care for specialist Perinatal Health Services and the National Maternity Strategy was published the number of staff working in Perinatal Mental Health has gone from just 4.0WTEs to 55.0WTEs. This number includes Specialist Mental Health midwives working in 12/13 spoke sites.

All new frontline staff working in Specialist Perinatal Mental Health Services have been provided with specific induction and specialist training in line with their discipline and role within the multidisciplinary team. The National Programme specifically for perinatal mental health services also set up a National Oversight Implementation Group (NOIG) which consists of a psychiatrist from each hub site as well as a national nominee from each other discipline on the SPMH multidisciplinary team. The NOIG meet every two months and addresses:

- the recruitment of hub teams and spoke staff
- clinical activity
- training needs
- accommodation and other relevant matters.

Additional national training days have also been organised which included staff from Adult Mental Health Teams and midwives from maternity hospitals. The perinatal mental health app is also regularly updated with the latest information on PMH. Just recently the SPMHS worked with GP Buddy to complete a training webinar especially for GPs. This is available to GPs on GP Buddy website and also available to all health professionals on the PMH App.

Psychology services are in place in 4 out of 6 hub sites, with the remaining 2 hub site – CUMH & GUH actively recruiting these posts in 2021.

All mental health midwives are available to women who would like support following a traumatic birth and tocophobia. Some midwives also provide a birth reflection service for those who request it.

The perinatal mental health pathway is working well with a clear pathway identified for women with milder mental health problems and one for those with more complex needs. Women are usually seen in a timely manner too which is particularly important for this patient cohort. Please see below an algorithm outlining the referred pathway in place in this regard.

All women referred to the Specialist Perinatal Health Teams receive a comprehensive mental health assessment. This follows the recognised format of such assessments and consists of a history obtained from the women by the assessing clinician together with a mental status examination. A collateral history from partner, relative or equivalent other is also taken, provided the women consents. From all of this a diagnosis is made and appropriate care and treatment discussed and agreed with the women.

The focus in 2018/2019 was in establishing the 6 SPMHS Hub Sites (in the 3 Dublin Maternity Hospitals and in UMHL, CUMH and GUH). Planning for Irelands first Mother and Baby Home began in 2019 and meetings were held with St. Vincent's Hospital, CHO6, HSE Estates and members of the SPMHS. A business case was developed and approved.

Work will continue in 2021 to progress this much needed facility, with unfortunately the COVID-19 pandemic causing delays in this regard in 2020.

I trust this clarifies the matter.

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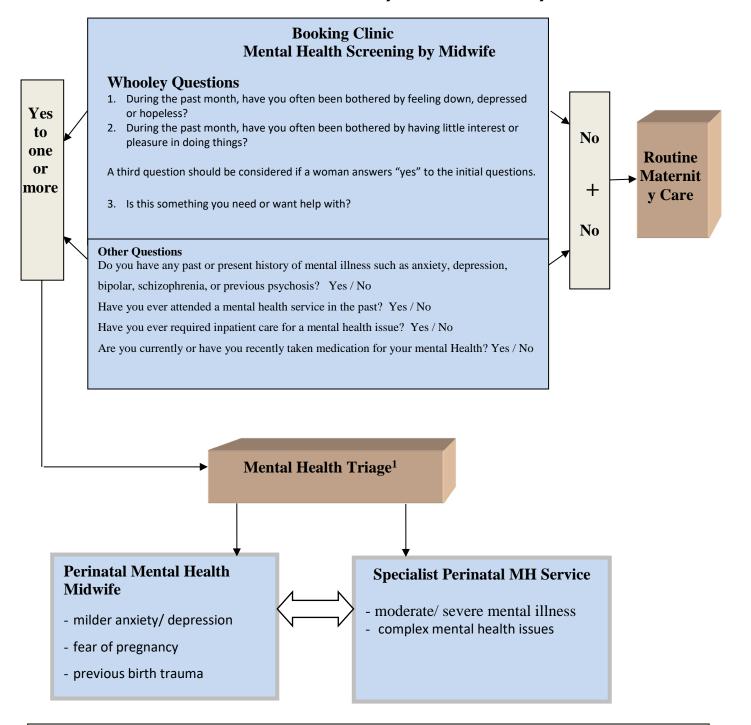
Yours sincerely,

Mary-Jo Biggs, General Manager, National Women and Infants Health Programme



National Specialist Perinatal Mental Health Service Model of Care.

Perinatal Mental Health Referral Pathway – within Maternity Services



¹The implementation of a Mental Health Referral Triage System in each maternity service to review all mental health referrals is recommended by this Report. This system should involve the perinatal mental health midwives and the specialist service together determining the most appropriate route of response for each referral i.e. perinatal mental health midwife or specialist team. The specialist service in the hubs will be specialist perinatal mental health services and in the spokes the liaison psychiatry services.

Whooley M. et al (1997). Case finding instruments for depression: two questions are as good as many. Journal of General Internal Medicine 12, (7), p439- 445.

