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Deputy Catherine Murphy.
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

08th August 2023

PQ Number: 33784/23

PQ Question: To ask the Minister for Health the number of WTE mental health midwives; the training they receive; and the role of mental health midwives within the perinatal mental health integrated care pathway. -Catherine Murphy

Dear Deputy Murphy,

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

Role of the perinatal mental health midwife

The perinatal mental health midwife is a key member of the maternity and obstetric workforce who works collaboratively with midwives and obstetricians and is an integral member of the specialist perinatal mental health team which provides specialist care to women and their families throughout the perinatal period. The primary purpose of the perinatal mental health midwife role is to provide specialist care to women at risk of or experiencing mild to moderate mental health problems in the perinatal period (such as depression, anxiety, adjustment disorders and distress), and to support women and partners who have experienced birth trauma or who have fear of birth.

The following gives an overview of the role of the perinatal mental health midwife:

- Primary role - to promote parity between physical and mental health care in maternity services
- Member of the maternity unit/hospital midwifery workforce - key role in working with midwives and obstetricians at all levels from booking & review clinics to postnatal wards
- Expert midwife who leads work to ensure that women with common perinatal mental health problems and their families receive prompt mental health care and support
- Raise awareness of common perinatal mental health issues and organise early management and treatment
- Provide expert advice, assessment and therapeutic interventions in conjunction with the Specialist Perinatal Mental Health Team or Liaison Psychiatry Team to women and families experiencing mild to moderate mental health issues

- Act as a resource and provide education and training on issues relating to the identification, assessment and management of mental health problems in conjunction with the SPMH Team or the Liaison Psychiatry Team
- Clinical links are to specialist perinatal mental health services in hub hospitals and liaison psychiatry services in spoke hospitals

Currently, there are 19 perinatal mental health midwives working in each of the 19 maternity hospital. These posts are funded by NWHIP.

Education, Training and Continuing Professional Development

Training and supervision is available for all professionals involved in the care of pregnant women and new mothers, as well as those involved in the care of pregnant and postnatal women with mental illness, so they can deliver high quality care in keeping with NICE guidance.

Mental Health Midwives must be on the NMBI Midwifery Division of the Register, have 3 years post registration experience and also have a special interest in mental health. To advance to specialist level the midwife must have in addition:

- (i) Specialist knowledge and experience (2 years minimum) in maternal and infant mental health developed through training and practice
- (ii) An additional qualification in mental health or a counselling qualification
- (iii) Evidence of high quality group teaching and training experience together with an ability to influence, motivate and lead others.

Training and continuous professional development of staff working in Specialist Perinatal Mental Health Teams and Mother and Baby Units is crucial. It must cover the range from screening and detection of mental health problems to the assessment and treatment of those with the most severe mental illnesses. This area of specialism must include: the mother, the baby and their relationship in the context of the family.

Topics which should be addressed in training include:

- Antenatal and postnatal care and the role of the midwife
- Perinatal care planning
- The perinatal period and the perinatal frame of mind
- Infant mental health
- Understanding defensive processes and attachment behaviour
- Mood and anxiety disorders: nature, treatment, risk
- Experience of the baby when mother has OCD and GAD
- Creating the 'safety net': working as part of a multi-disciplinary team and across agencies.
- Depression and anxiety disorders – nature, treatment, risk
- Experience of baby when a mother is emotionally ill
- Personality disorder: the psychiatric perspective
- Psychotic illnesses – nature, treatment, risk
- Experience of the infant when the mother has psychosis
- An evolutionary perspective on how personalities form and become disordered
- The complexity of managing risk and the need to work with other agencies
- Complex safeguarding including understanding substance misuse through the lens of attachment theory
- Cultural competence in perinatal mental health: a complex issue
- The sick baby and the role of the neonatal intensive care unit

Reference: Royal College of Psychiatrists, UK (RC Psych 2017)

Training must be delivered by professionals with the relevant competencies. Training should include ongoing supervision and reflective practice.

In addition, the HSE has developed a Handbook for Spoke Perinatal Mental Health Midwives to provide information and guidance to newly recruited perinatal mental health midwives.

Further information on Specialist Peri Natal Mental Health Services including the role of the Mental Health Midwife can be found here: [specialist-perinatal-mental-health-services-model-of-care-2017.pdf \(hse.ie\)](#)

I trust this information is of assistance to you.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Amir Niazi', is centered within a light gray rectangular box.

Dr Amir Niazi
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Clinical Design and Innovation
Health Service Executive