



# INEQUALITIES SENSITIVE PRACTICE INITIATIVE MATERNITY PATHWAYS

## Common Mental Health Problems



## Standard of Care

### Antenatal Care

1. Any health or social care professional who is already engaged in the care or support of a pregnant woman who has mild to moderate mental health needs, should encourage her to inform maternity staff of her needs. Where there are concerns about the welfare of the infant, pertinent information should be shared with maternity staff. Maternity staff should be informed of any language or communication support needs.
2. Maternal history taking, particularly private time, should be actively used by midwives to undertake an initial assessment of emotional and psychological wellbeing. Psychosocial factors that can contribute to stress and anxiety such as money, debt, housing or relationship concerns, should be raised and support options discussed. Midwives should be sensitive to and explore non-verbal signs of distress.
3. Midwives should introduce the mental health section of the pregnancy record by providing information on emotional wellbeing in pregnancy and enquiring more generally about feelings and mood.
4. Midwives should have knowledge of the role and remit of the range of mental health services available and the respective referral pathways.
5. Where there is current evidence of non-severe mental illness e.g. expressions of anxiety or low mood that is impacting on a woman's daily life or wellbeing, midwives should provide information on the support offered through the Primary Care Mental Health (PCMH) Team and the contact details of local services. Where there are ongoing concerns midwives should contact the local PCMH Team for advice or facilitate referral into the service. Primary Care should be informed of any referral.

### Ongoing Care

6. Midwives should be sensitive to changes in a woman's circumstances and/or mental health status throughout the maternity episode. Where concerns are identified these should be raised and options for support discussed.
7. Midwives should link with community based mental health services to develop programmes of care that meet the emotional, social and psychological needs of pregnant women.
8. A tailored session on mental health and wellbeing should be included in all parenthood education programmes.

## Postnatal Care

9. Women should be informed of possible changes in mood associated with the first few days following childbirth and be offered reassurance and support where appropriate.
10. Information resources on health and wellbeing during pregnancy and following childbirth should be available on postnatal wards. This should include information about Primary Care Mental Health services.

## Postnatal Care: Community

11. Community staff should use observational skills and sensitive enquiry to assess emotional and psychological wellbeing. Women's experiences of anxiety or low mood should be discussed and information and support provided. The health visitor should be informed.

## System

12. A protocol of care should be developed for women who have experienced a traumatic birth.
13. Information on mental health and wellbeing in pregnancy should be provided to all newly pregnant women e.g. "So you've had a baby" booklet, along with contact details of local Primary Care Mental Health services.

## Staff Competencies

- Midwives should be familiar with the stepped care model of service provision in perinatal mental health care: General Practitioner Care, Primary Care Mental Health Team, Community Mental Health Team and Perinatal Mental Health Team.
- Midwives should be skilled in conducting an initial assessment of mental health needs through sensitive enquiry, raising and discussing issues of concern and facilitating referral on to local Primary Care Mental Health services, Perinatal Mental Health services or other services, as appropriate. (1)
- Midwives should be skilled in developing a helping relationship with women, using listening skills and basic counselling skills in the provision of support.

- Midwives should have a basic understanding of mental health issues in pregnancy and be able to provide women with information on normal psychological and emotional responses during pregnancy and childbirth, offering reassurance where necessary and promoting positive mental health.
- Midwives should be familiar with risk and needs assessment as it applies to mental health.
- Midwives should be aware of the relationship between inequalities and family stress and be competent to identify needs and facilitate support in relation to wider health and social care issues e.g. social isolation, financial concerns, housing, gender based violence.
- Midwives should be competent to manage sensitively women's concerns with regard to confidentiality, discrimination and recovery in relation to mental health and work responsively to reassure and empower.

## References

1. NHS Greater Glasgow and Clyde, Perinatal Mental Health Pathway

## Pathway: Common Mental Health Problems

