

Referral Guidance

These guidelines are aimed to help referrers consider if the Perinatal Community Mental Health Team is the most appropriate service at the current time, and ensure women are receiving the most appropriate care and treatment. Please take time to read the guidelines. We also welcome discussions over the telephone prior to sending a referral for advice and helping decide the best care pathway with referrers **01962 897780**. (The current advice line is available **Mondays, Tuesdays, Wednesdays and Fridays 10.00am-4pm, Thursdays 1pm-4pm, however, there may be staff available at other times**).

Exclusion Criteria:

- Women with a primary diagnosis of organic disorder, drug and alcohol misuse, learning disability, eating disorder, will only be considered if there is a comorbid severe mental illness.
- Any young women under the age of 18 should be discussed with Child and Adolescent Mental Health Services in the first instance and where appropriate there will be a consultation or joint working with the perinatal mental health team.
- Women with mild to moderate anxiety/depression/PTSD – who need medication/psychological therapies can be managed in primary care with consideration for IAPT (Steps to Wellbeing/ ITALK). However, we can offer specialist advice via telephone consultation with professionals (e.g. advising GP's on prescribing). IAPT will prioritise women who are pregnant and up to 12 months postnatal for talking therapies in line with NICE Guidelines.
- We do not offer counselling for miscarriages, stillbirths or women considering termination, although if they are already under our service we would continue to support them until we can organise more appropriate services.
- Women with tocophobia or other birth specific related fears: we would anticipate that their needs would be best met through IAPT services and birth planning with consultant midwives, although we would be happy to discuss this and offer advice. Assessment could be indicated when level of anxiety is leading to risk concerns or affecting day to day functioning.

Crisis:

- Whilst we aim to assess women presenting with postpartum psychosis/bipolar or psychotic relapse urgently as they are likely to require an admission to a Mother and Baby Unit, we are **NOT** a crisis service and we work alongside the local acute Mental Health Teams. If you have immediate high concerns about a woman that requires on the day or next day assessment – please discuss with us, but we may advise a referral to one of the Acute Mental Health Teams, until we are able to offer an assessment. Acute Mental Health Teams can refer directly to the Mother and Baby Unit if felt an admission is required.

**Mother and Baby Units are nationally commissioned
so if the Winchester MBU is full an alternative MBU can be sought in England.**



Circumstances where joint working with other services are required:

- Women with a complex/longstanding mental health diagnosis (for example personality disorder) and/or complex social circumstances/high safeguarding concerns that requires regular crisis management, or risk of child being removed, we request to joint work with local Community Mental Health Teams to support with care planning. If there is a need for specialist perinatal interventions then we can work in consultation or alongside the regular/main care team (e.g. CMHT). We do not offer longer term therapies such as Dialectical Behavioural Therapy/ Cognitive Analytical Therapy.

Criteria:

We work with women in pregnancy, and the postnatal period. We also offer pre-conceptual counselling for women on psychiatric medication who are planning pregnancy. Our involvement in supporting a family can be up until baby is 1 year of age, **provided there remains a perinatal specialist role** (e.g. specialist medication advice in pregnancy and breastfeeding, maternity birth plans, attachment and bonding interventions).

New assessment for women with babies over 6 months need to be referred to the local Community Mental Health Team for joint assessment. If on assessment there is felt to be a role for perinatal specialist service we can joint work alongside the CMHT. Re-referrals for women with babies over 6 months old (e.g. previously known to the team) can be discussed on an individual basis.

Inclusion criteria/what we provide:

- Pre-pregnancy planning advice and assessment for high risk women (i.e. those on mood stabilising or antipsychotic medication, or with a history of bipolar disorder, schizophrenia, postpartum psychosis or severe antenatal or postnatal depression). This will be a one off telephone or face to face consultation with a medic.
- We would aim to meet and assess women in the antenatal period with a history of Bipolar disorder, psychotic illness (e.g. Schizophrenia), or previous postnatal psychosis; **even if these women are currently well**, to enable pre-birth planning to manage high postnatal risks and maintain wellness in pregnancy and beyond. We also welcome referrals for women who have had previous psychiatric/mother and baby admissions (admissions in antenatal or early postnatal period) for example, for severe depression/anxiety. If a woman is currently under a Community Mental Health Team we would recommend continuing care with her familiar team with additional perinatal specialist input alongside.
- Pregnant or postnatal women who develop a severe mental illness. We aim to respond promptly to new onset conditions from 28 weeks in pregnancy up to 6 weeks postnatal, particularly if there is high suicidality and/or estrangement from baby.
- Telephone consultation service for signposting and advice for women with mild to moderate mental health difficulties that could benefit from specialist advice to prevent further deterioration.
- Medication advice for pregnant or breastfeeding women who are prescribed psychotropic medication for psychiatric purposes. (This may be as part of wider multidisciplinary care plan or part of telephone consultation for mild to moderate needs).
- Specialised mother infant/family interventions for women with severe mental health difficulties, this can include Video Interaction Guidance, specialised Nursery Nurse care plans around bonding and attachments, access to tailored groups, maternal emotional wellbeing groups, short term therapy interventions such a couples therapy.

Perinatal Mental Health Service

Melbury Lodge
Romsey Road
Winchester
Hants
SO22 5DG

Tel: 01962 897780
Fax: 01962 897781