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Lynne Neagle AM
Chair
Children, Young People and Education Committee
National Assembly for Wales
Cardiff Bay
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Dear Chair,

Follow-up on the inquiry into perinatal mental health

I am replying to your kind invitation to provide evidence as the National Clinical Lead (NCL) for Perinatal Mental Health to the Children, Young People and Education Committee on Wednesday 26 February 2020.

Including in this invitation, was the request to provide a written paper, to include a response to the points outlined below. I have therefore provided a comprehensive overview of the work undertaken since my appointment, which covers each of the points you have raised.

General information on the role of the Clinical Lead – working being undertaken, progress made and outcomes achieved

In January 2019, I commenced the role of National Clinical Lead for Perinatal Mental Health, the aim of this role being, to provide national leadership, co-ordination and expertise for the further development of perinatal mental health services and workforce, including quality standards, care pathways, professional competencies and training resources.

The main roles and responsibilities of this position are to:

- Lead the development and implementation of a national improvement programme.
- Focus on prevention, early identification and intervention in perinatal mental health, and promote positive infant mental health.
- Ensure timely access to proportional perinatal mental health assessments and support and treatments that are evidence based.
- Ensure Wales has an appropriately trained workforce, competencies and outcome framework, and National and All Wales Standards of Care are integrated and implemented.

- Establish and lead the Perinatal Mental Health Network (PNMH), ensuring key stakeholders are engaged and supported to develop an annual framework for the work programme.
- Engage with other clinical networks to promote good practice within the scope of particular programmes.
- Engage and work with stakeholders at all levels to promote good perinatal mental health and identify opportunities for continual service improvement.
- Provide expert advice to NHS organisations on how to successfully achieve targets in relation to specific policies and enable practical implementation of policies.

During January 2019, through to March, in the role of the National Clinical Lead I facilitated opportunities for practitioners, third sector and voluntary organisations, working to provide services and support for those identified as needing additional mental health support during the perinatal period, to come together. The aim of the workshops was to:

- Understand where we were at across Wales
- Give all the opportunity to share what was working well, and what could be improved
- Gather thoughts on what would make, and what we would need to do, to have quality perinatal services across Wales.

I also met with those who had used, or were using services, to ascertain their views. This information was collated, reviewed and themed into four key objectives, the '4P's':

Partnerships – strengthening collaborative working, across services, health boards and across Wales

Pathways – strengthen seamless service delivery at the right time and by the right people.

Performance – strengthen the quality of the services we deliver, and best possible experience for all.

People – strengthen our workforce, ensuring all have the right skills, knowledge, supervision and support.

In 2018, the NHS Wales Mental Health Network was established to support NHS Wales in the implementation of national strategy and the improvement of mental health outcomes in Wales. As part of the Network, four formal standing sub groups have been identified, one of which is the Perinatal Mental Health Network Board.

A comprehensive overview of the work undertaken against the CYPE Committee recommendations, is included in Appendix A below.

Monitoring of the National Clinical Lead role and budget attached to this role

As the National Clinical Lead, I have been providing quarterly reports for the Mental Health and Vulnerabilities Team, Welsh Government (WG) and updates for the All Wales Mental Health Network. I also attend monthly meetings with key

team members in Welsh Government. Going forward, reports will also be provided for the Perinatal Mental Health Board. I now report to the National Programme Director for Mental Health who has recently been appointed and is based within the NHS Collaborative.

As well as funding for my role, recruitment to the Network Team, has included – Programme Support 0.5 WTE, Senior Project Manager 0.5 WTE and Admin Support. Additional funding for further training across Wales has also been secured.

Current position of each Health Board in terms of the PMH services

As a Network, we are in the process of reviewing the function of the specialist perinatal mental teams, so that we can address the variation in service provision across Wales. We are working towards ensuring all health boards are providing a specialist assessment for women who are experiencing an episode of moderate to severe mental illness, in pregnancy and until at least 6 months postpartum, with follow up to 12 months. This will also include the opportunity for referrers to seek guidance and advice, for women who present later in the postnatal period, and, who are likely to need care beyond one year postnatal. This will be in line with recommendations from the Royal College of Psychiatrists.

A draft outline model has been shared with colleagues for further discussion with the aim of securing agreement from all health board. The model can then be incorporated within the All Wales Fully Integrated Care Pathway.

Role of the Clinical Lead in relation to MBU provision

As the National Clinical Lead, I have been actively involved in working alongside colleagues in Swansea Bay to shape the proposed clinical model for the mother and baby unit in South Wales. This proposed model was shared wider, with colleagues during a Community of Practice meeting in July 2019, where colleagues were given the opportunity to share their views on the draft model. I will also be involved in the preparation for the development of the interim mother and baby unit at Tonna.

I have also visited a Mother and Baby Unit in Exeter and made links with the Dr Giles Berrisford, Associate National Clinical Director for Perinatal Mental Health for NHS England.

Data – what is being reported and what data is available, particularly around psychological therapeutic support

I understand that all health boards are providing Welsh Government with the data they have requested. This is an interim solution until an agreed all Wales data collection process can be put in place. Over the last year the Network has facilitated a workshop and follow up meeting, where clinicians from all health boards, WG, NWIS and third sector colleagues, have been brought together, to begin to identify key performance indicators and outcome measures to be implemented across Wales

I have recently met with psychologists working within the Specialist Perinatal Mental Health Teams, and have contacted each health board's Psychological Therapies Management Committee. Within the delivery plan there is a focus on strengthening the psychological therapies infrastructure in Wales that will further support service improvement, workforce development and strengthen governance. This work will include ensuring that Matrics Cymru and the associated evidence tables are reviewed and updated where appropriate, which will take into account perinatal mental health.

Health boards signed up to the PQN and clinical lead involvement

Three health boards across Wales have already signed up to the Perinatal Quality Network (PQN) - Cardiff & Vale University Health Board, Aneurin Bevan University Health Board and Swansea Bay University Health Board.

All health boards are aware of the expectation to have signed up to the PQN by March 2021, and my role has been to provide information on the process, identify the benefits and support and encourage them to sign up as soon as possible.

Current position on a consultant midwife in Powys

Powys are exploring funding options for a Specialist Perinatal Mental Health Midwife, and the Consultant Midwife continues to be actively engaged with developments and attend Network meetings and events, whilst the recruitment process takes place.

I hope that the information that I have included above, provides clarity with regards to my role within the Perinatal Mental Health Network, and the work that I have been undertaking since January 2019 to date.

Yours sincerely,



Sharon Fernandez
National Clinical Lead
Perinatal Mental Health
NHS Wales Health Collaborative

Cc Carol Shillabeer – Chair of all-Wales Mental Health Network
Joanna Jordan – National Programme Director for Mental Health
Hazel Powell - Chair of Perinatal Mental Health Network

Appendix A

Key Priorities	Work undertaken	Where we are at?	Timescale
To develop a base understanding of where PNMH Service were at, across Wales	The NCL has made contact with each health board, identifying, engaging and connecting with colleagues across Wales	Connected with all Health Boards	Dec-19
	The NCL has brought clinicians together to develop a stronger 'team' ethos across all Health Boards and Wales	PNMH Workshops facilitated	Mar-19
		PNMH Board, Clinical Steering Group & Community of Practice (CoP) re-established	Nov-19
Funding for National Team Clinical resource, administrative time, and training budget (Recommendation 1 & 2)	The National Clinical Lead recruited to the National Team – Programme Support 0.5 WTE, Senior Project Manager 0.5 WTE and Admin Support	Programme Support	May-19
	Additional funding for further training across Wales has also been secured	Senior Project Manager Recruited	Jun-19

		Admin Support	Unable to successfully recruit, agency support provided
		Additional Funding secured	Dec-19
Reporting Mechanism	Quarterly reporting to the Mental Health and Vulnerabilities Team, Welsh Government (WG), and monthly meetings with key team members	Quarterly Reports	Ongoing
	Updates for PNMH Board and All Wales Mental Health Network	Monthly Meetings	Ongoing
		Update/ Reports to PNMH Board	Ongoing

Partnership

<p>Establish Clinical Network and Maintain the current Community of Practice (Recommendation 1 & 2)</p>	<p>Over the last year the PNMH Board and the National Clinical Network Steering Group (NCNSG) has been set up. The Network reviewed the Community of Practice (CoP) membership, to include practitioners from all services across Wales, and have held one CoP, with a view to facilitating these events bi-annually. An annual PNMH Conference is being planned for November 2020</p>	<p>PNMH Board established</p>	<p>Nov-19</p>
		<p>NCNSG – Re-established</p>	<p>Sep-19</p>
		<p>CoP –Re-established</p>	<p>Nov-19</p>
		<p>Annual Conference planned</p>	<p>Jan-20</p>
	<p>The NCL supported the re-establishment & establishment of Steering Groups in Health Boards, encouraging each to consider the need for multi-disciplinary and agency membership across all service areas</p>	<p>Steering Groups established in each Health Board</p>	<p>Jan-20</p>
	<p>The NCL brought practitioners from midwifery, health visiting specialist team leads, and mental health nurses together as Professional Forums</p>	<p>Professional Forums established</p>	<p>Oct-19</p>
	<p>The NCL is now working with the Maternal Mental Health Alliance (MMHA) to strengthening the service user and community voice, with plans in place to facilitate a third sector and voluntary organisation workshop at the beginning of 2020</p>	<p>Plan to strengthen third sector, charitable organisations, the voice of those that use our services and communities</p>	<p>Dec-19</p>

	The NCL has also linked with professional bodies and key colleagues in WG	Linked with Royal College of Midwifery (RCM) Institute of Health Visiting iHV, Royal College of General Practitioners (RCGP Wales), Royal College of Psychiatrists RCPsych (Wales)	Jan-20
Strengthen collaborative working by engaging and undertaking joint work with other services (Recommendation 26)	All Health Boards encouraged to review membership of steering groups to include all disciplines, agencies and service user voice	Linked with colleagues leading on Substance Misuse and Alcohol. CAMHs Eating Disorders Adult Mental Health Heads of Midwifery & Health Visiting Incarceration Gypsy Roma Traveller Boater Community	Jan-20
Appropriate levels of third sector provision are properly funded (Recommendation 20)	Information regarding funding opportunities shared with all Health Board colleagues Steering Groups encouraged to link with and influence Regional Partnership Boards (RPBs)	Relevant information reference funding Opportunities shared with all health boards	Ongoing
Collaborative working	The Network are working closely with 3 rd Sector and voluntary organisations - Action on Post-Partum Psychosis, NSPCC, Family Action, Pandalas, MIND and NCMH	Members of National Clinical Steering Group, PNMH Board and Community of Practice (CoP)	Nov-19

<p>Raise awareness of perinatal mental health issues amongst the public and health professionals (Recommendation 13)</p>	<p>The NCL has been out meeting colleagues, who work with women, men and their families during the perinatal period</p> <p>Consideration of suitable models to increase awareness within our communities and for all professionals is needed</p>	<p>Exploring models and ways in which we can raise awareness of mental health issues</p>	<p>Ongoing</p>
	<p>This is an area that we will explore more in 2020</p> <p>The Network also developed a National Clinical Network Newsletter, and plan to distribute this three times/ year</p> <p>Our intranet and internet pages are also under construction</p>	<p>Quarterly distribution</p>	<p>Ongoing</p>
		<p>Review and agree content Intranet/ Internet pages for PNMH</p>	<p>Jan-20</p>
<p>Action plan to ensure that centres providing MBU beds are closely integrated with specialist community perinatal mental health teams (Recommendation 8)</p>	<p>Colleagues in each health board have already established excellent working relationships with MBU colleagues in England</p> <p>Further work will be undertaken, to ensure that there are clear admission and discharge pathways for the South Wales MBU and North Powys and BCU, once plans regarding provision are confirmed</p>	<p>Recognise the need to develop and agree MBU admission and discharge pathways for Wales</p>	<p>Nov-20</p>

Pathway

<p>Development of an all-Wales clinical care pathway – outcomes - referral windows and waiting times (Recommendation 1, 2 & 12)</p>	<p>The Network facilitated an All Wales PNMH Fully Integrated Care Pathway workshop where colleagues were encouraged to share their thoughts on what good for Wales would look like</p> <p>Colleagues in Hywel Dda are leading on the development of a draft pathway, to be inclusive of both women and men</p>	<p>Workshop undertaken and pathway being drafted for consultation</p>	<p>Ongoing</p>
	<p>Swansea Bay colleagues have developed a model for the function of the Specialist PNMH Teams, although, this will need further consultation and agreement from all health boards, before being incorporated within the pathway</p>	<p>Specialist PNMH Team function drafted for further consultation</p>	<p>Dec-19</p>
	<p>Further work will also need to take place to review paperwork, policies and guidelines, and we have approached colleagues within Cwm Taf Morgannwg to lead on this piece of work</p>	<p>Development of draft all Wales paperwork, policies and guidelines</p>	<p>Nov-20</p>

Further work on the link between health inequalities, focusing on early identification and treatment of those populations in greatest need (Recommendation 27)	The NCL has linked with the ACE Hub, Local Authority colleagues – Flying Start (FS) / Early Integration pathfinder areas; initial contact has been made with the Gypsy, Roma, Traveller, and Boater Community. Further work needs to be undertaken to fully understand the needs of these communities	Links made with ACE Hub/ FS and LA colleagues	Aug-19
	With regards to early identification and treatment; the ethos of all our work going forward, will be to convey a culture where the right care, is provided by the right people and at the right time	Further work needed to understand the specific needs of the Gypsy, Roma, Traveller, Boater community	Ongoing
Provides for the Welsh language needs of the population (Recommendation 25)	Ensure all resources are available in Welsh has been identified. It is proposed that those needing further screening will be offered the Edinburgh Post Natal Depression Questionnaire (EPDS). This resource is already translated and validated in 58 languages, but unfortunately, Welsh is not one of them	Welsh Government recognises the importance of this screening tool being available in the Welsh Language. However as part of any translation process, the need to ensure that the translated tool is appropriately validated and the approach to this work is being considered by Welsh Government at present	Ongoing
Established standards, advice and guidance on psychological medication during pregnancy and breastfeeding (Recommendation 24)	The NCL has been working together with the Neonatal and Midwifery Network, Specialist Midwives, Swansea Bay, BCU and Cardiff and Vale colleagues to review, and standardise the following – Guidance	To clarify position of each and ensure dates are set for consultation and ratification	Ongoing

	<p>for Mental Health Prescribers and GPs Psychotropic Medication in Utero</p> <p>There are many free resources for professionals, women, men and their families available to access on the internet; with this information being included in our first Perinatal MH Network newsletter</p>		
		Information included in PNMH Network Newsletter	Sep-19
<p>Impact of feeding on perinatal mental health and translate this into guidance for professionals and the public. (Recommendation 23)</p>	<p>Following the publication of the All Wales Breastfeeding 5 Year Action Plan, the NCL have been invited to join this work. This recommendation will also be considered within the work plan</p>	Awaiting date for meeting. Contact made with Infant Feeding Lead for BCUHB, meeting arranged	Ongoing
	<p>The NCL has met with women attending breastfeeding support groups, to further understand, their experiences, their concerns and what their key messages for others would be.</p>	Attended Breastfeeding Support Group	Nov-19
<p>Psychological support for neonatal and bereaved parents to be addressed and standards to be met (Recommendation 21)</p>	<p>The NCL has worked with colleagues from the Neonatal Network and Neonatal Units across Wales, to understand what psychological support is presently available for neonatal and bereaved parents. With this information, we will now be working together to understand where the gaps are, and consider how this can be addressed</p>	Benchmarking of psychological provision in neonatal units	Dec-19

	The NCL has made contact and met with colleagues from the Women and Children's team in WG, who are leading on the development of the All Wales Bereavement Pathway	Contact and meeting with WG Women and Children's team	Jun-19
	The NCL has worked with the Midwifery Network, and made contact with Bereavement Midwives/ Midwives with a role in supporting those bereaved. Work has been undertaken to understand each health board's position, with a view to identify gaps, areas of best practice and work that will need to be undertaken to ensure equity of provision	Benchmarking of psychological provision for parents bereaved during the perinatal period	Dec-19
Continued relationship with midwife or health visitor (Recommendation 19)	Continuity and importance of the relationship with midwives and health visitors, has been prioritised within the Healthy Child Wales Programme and Maternity Care in Wales 5 Year Vision	Continuity of relationships identified within relevant maternity and health visiting programmes/visions	Aug-19
	The Network will continue to work with maternity and health visiting colleagues, to ensure that therapeutic relationships are included within work plans	Continue working in collaboration with midwifery and health visiting colleagues	Ongoing
National framework for antenatal classes (Recommendation 15)	The NCL has been working together with the Neonatal and Midwifery Network to begin to identify key pieces of work that will need a collaborative approach. With the midwifery clinical lead having taken up post in November, work to identify where we are at with antenatal class provision will be undertaken	Meeting with Neonatal and Midwifery Network to identify priorities	Mar-19
		Scoping antenatal Class Provision across Wales	Jan-20

	The NCL been working together with colleagues from Public Health Wales (PHW) to shape the content of the refreshed Bump, Baby and Beyond resources	Links made with PHW colleagues	May-19
Review information provided in standard pre- and post-natal packs (Recommendation 14)	The NCL linked PHW colleagues with women and their families who had used resources, to ensure that key messages, identified by them, have been included	PHW colleagues linked with women and families who have used services	Jul-19
	PHW colleagues will be producing a draft of these resources for consultation and agreement	Awaiting draft resources for consultation and agreement	Jan-20
Improving access to psychological therapies for perinatal women and men (Recommendation 10)	The NCL has just started working with colleagues to consider the need to review Matrics Cymru through a perinatal lens	Contacting health boards' Psychological Therapies Management Committees to ensure perinatal psychologists are linked to each	Mar-20
	The NCL has made contact with national and local psychological therapies management committees, to explore where each health board is at, from a perinatal mental health perspective	In the Welsh Government's Together for Mental Health delivery plan 2019-2022 there is a continued focus on improving the access, quality and range of psychological therapies. Within the delivery plan there is a focus on strengthening the psychological therapies infrastructure in Wales that	Ongoing

		<p>will further support service improvement, workforce development and strengthen governance.</p> <p>This work will include ensuring that Matrics Cymru and the associated evidence tables are reviewed and updated where appropriate, which will take into account perinatal mental health</p>	
<p>Establish an MBU in South Wales (Recommendation 6)</p>	<p>The NCL, has been actively involved in working alongside colleagues in Swansea Bay and WHSSC to shape the proposed clinical model for the mother and baby unit MBU in South Wales. This model was shared wider, with colleagues during a CoP meeting in July. The NCL also visited an MBU in Exeter, and colleagues there have offered to be our 'buddies' and support us to develop our provision within Wales</p> <p>The NCL has been involved in discussions around the suitability of, and suggestions for interim and permanent provision</p>	<p>Shaping of proposed model for South Wales MBU</p> <p>Paper to WHSSC committee</p> <p>Further exploration and discussion undertaken for North Powys and BCUHB</p>	<p>Nov-19</p> <p>Jan-20</p> <p>Jan-20</p>

<p>Engage with NHS England to discuss options for the creation of a centre in North East Wales (Recommendation 7)</p>	<p>WHSSC are leading on the provision of inpatient facilities for residents of North Wales. However, the NCL has engaged with colleagues in North Wales and North Powys, to discuss suitable options for inpatient facilities. More recently the NCL, met with North Wales colleagues whilst visiting the specialist team in BCUHB</p>	<p>Discussions undertaken with National Programme Director for Mental Health, WHSSC and BCUHB colleagues</p>	<p>Jan-20</p>
<p>Guidance for professionals and information for patients on the evidence-based benefits admission to an MBU</p>	<p>The Network is working with Swansea Bay and Action for Postpartum Psychosis colleagues, to ensure we have appropriate information and resources for both patients and professionals, prior to admission and following discharge</p>	<p>Admission Leaflet being drafted</p>	<p>Sep-20</p>
	<p>Admission criteria and checklists for admission to MBU has also been identified, with Swansea Bay colleagues leading on the development of this work</p>	<p>Relevant documentation identified</p>	<p>Sep-20</p>

Performance

Development of perinatal mental health services quality standards (Recommendation 1 & 2)	The NCL has been working with all health boards to understand where they are at against the Guidance for the Delivery of Integrated Perinatal Mental Health Services in Wales 'All Wales Standards' all are aware, of the expectation to meet these standards by March 2020	Benchmarked against All Wales Standards	Jan-20
	The NCL has also shared the Maternal Mental Health Alliance Pathway Assessment Tool and will be encouraging all health boards to assess their service provision using this tool kit throughout 2020	MMHA Pathway Assessment Tool shared	Dec-19
	The NCL has started to consider how we can introduce an in-house peer review process, replicating the work already being undertaken by the CAMHS Network	Considering how we can implement a PNMH In-house peer review process	Jan-20
Sign up to the PQN (Recommendation 11)	3 health boards across Wales have now signed up to the perinatal quality network (PQN) – Cardiff & Value, Aneurin Bevan and Swansea Bay	All health boards aware of expectation to have signed up to the PQN by March 2021	Mar-19

	All health boards are aware of the expectation to have signed up to the PQN by March 2021, and we are working with them to encourage and support this to be achieved		
Additional funding to Health Boards to better address variation so that service development and quality improvement can be achieved by expanding existing teams	Additional funding has been made available to health boards, with perinatal services being recognised at a priority	Additional Funding made available by WG	Jul-19
	With the support of the MMHA, the NCL have been working with all health boards to understand where they are at against the Standards for Community Perinatal Mental Health Services	Re-benchmarking of specialist service provision	Dec-19
	The Network are also in the process of reviewing the function of the specialist perinatal mental teams, so that we can address the variation in service provision across Wales. We are working towards ensuring all health boards are providing a specialist assessment for women who are experiencing an episode of moderate to severe mental illness, in pregnancy and until at least 6 months postpartum, with follow up to 12 months. This will also include the opportunity for referrers to seek guidance and advice, for women who present later in the postnatal period, and, who are likely to need care beyond one year postnatal	Consultation on all Wales model/ function of specialist PNMH teams/ services	Jan-20

	<p>Colleagues in Hywel Dda are leading on the development of an All Wales Fully Integrated Care Pathway, which will be inclusive of both women and men</p>	<p>Hywel Dda colleagues leading on the development of a draft All Wales Fully Integrated Care Pathway</p>	<p>Jan-20</p>
	<p>The Network has identified the need to gain a better understanding of how many women had been identified as needing a MBU bed, how many accepted that offer and those declining; for those declining, we also asked for clarification of what support was offered to these women and their families and the reasons given for declining a MBU bed outside of Wales. This data was not being routinely collected by all, however, this has now been included in the 6 monthly data requested by WG</p>	<p>MBU admission data included within 6 monthly WG data requests</p>	<p>Dec-19</p>
<p>Agree, collect and publish, both local and national outcome-based performance measurements and data (Recommendation 1 & 2)</p>	<p>The Network has run a workshop and a meeting, where colleagues from health boards, WG and NWIS, have been brought together, to identify key performance indicators that can be collected by all health boards</p>	<p>1 x workshop and 1 x meeting facilitated</p>	<p>Dec-19</p>
	<p>Further work also needs to be undertaken on the suggested data collection/ audit questions previously identified as part of the guidance for the delivery of integrated perinatal mental health services in Wales</p> <p>The Network has been working with NWIS, WG and Powys Teaching Health Board to</p>	<p>Identified a further six performance indicators to complement the data collection outcome measures within the Guidance for the delivery of integrated perinatal</p>	<p>Dec-19</p>

	shape the PNMH content of WCCIS; and with Midwifery and Health Visiting colleagues, to ensure that the right questions are being asked, to provide meaningful data for future service development and resource allocation	mental health services in Wales	Jan-20
		Shape and agree PNMH content for WCCIS	

People

<p>Development of workforce & professional competencies training resources (Recommendation 1 & 2)</p>	<p>The NCL has encouraged health boards to undertake a review of training needs and through our workshops, have identify training gaps. Relevant training has been identified and WG has provided additional funding to train - Specialist Team Leads, Specialist Mental Health Practitioners, Psychiatrist, Trainee Psychiatrists and 60 'Movers & Shakers/Champions' in perinatal and infant mental health and Post-Partum Psychosis</p> <p>Colleagues in BCUHB are also leading on the development of a resource for midwives</p> <p>Links for relevant, free and easily accessible training opportunities shared with colleagues</p>	Health boards identified training needs	Mar-19
		Additional funding secured for training from WG	Dec-19
		Links for self-directed training provided to colleagues	Jul-19

Develop and deliver a workforce strategy/competency framework and All Wales training (Recommendation 17)	Permission has been sought, and given, from Scotland to adapt their recently refreshed Curricular Framework for PNMH & Parent-Infant Mental Health To explore, develop and agree competency framework for Wales	Permission sought and gained to adapt Scottish Curricular Framework	Sep-19
		Date set for training task & finish group	Jan-20
Perinatal mental health is included in the pre-registration training and continuous professional development (CPD) (Recommendation 16)	The NCL linked with Universities in Wales to get a better understanding of what perinatal mental health training is provided in pre-registration across Wales	Linked with Universities and HEIW	Dec-19
Specialist perinatal mental health midwife (Recommendation 18)	The NCL has brought specialist midwives together Powys are exploring funding options for a Specialist PNMH Midwife, and the Consultant Midwife continues to be actively engaged with developments, whilst the recruitment process takes place The Network is in the process of developing an All Wales Job Description and reviewing the role, in line with the RCM Specialist Mental Health Midwives Role recommendations	Bi-monthly meetings	Mar-19

<p>Specialist health visitor in perinatal and infant health role in Wales (Recommendation 22)</p>	<p>There is 1 specialist health visitor for PNMH in Wales at the moment. The Network has worked with all health boards to identify health visitors with an interest and additional skills, bringing them together in a professional form</p> <p>The NCL has identified the need to develop an all Wales Job Description in line with recommendations from Health Education England</p>	<p>Bi-monthly meetings</p>	<p>Jul-19</p>
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