

Co-designed solutions:

#MindNBody - a holistic approach  
to perinatal mental health

*Best practice case studies*



An exciting collaboration  
across three regions



WHOSE SHOES!<sup>®</sup>

January 2019

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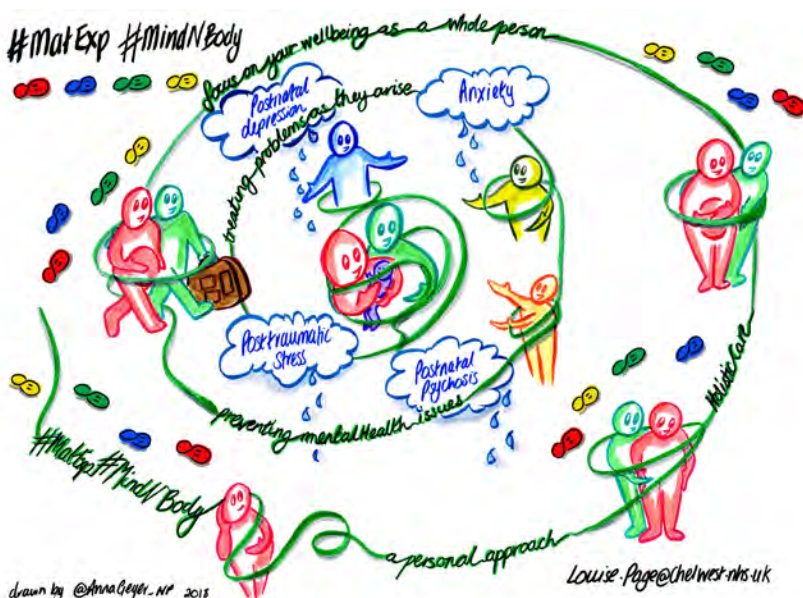


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# INTRODUCTION

[#MindNBody](#) is the third in our series of ‘major’ *Whose Shoes?*® projects to improve maternity care. It is a natural development from our [#MatExp](#) and ‘Nobody’s Patient’ projects. Florence Wilcock, consultant obstetrician at Kingston Hospital NHS FT, has once again played a key role.

In a powerful collaboration, three NHS regions (London, the South West and the West Midlands), have worked with Nutshell Communications to crowdsource new *Whose Shoes?* scenarios and poems around a holistic approach to perinatal mental health care. The scope of the project is extremely broad, tackling everything from wellbeing and prevention (so important!) to serious mental health issues. In addition, we have included specific challenges women face in their daily lives, for example from inner city problems through to rural isolation.

Hundreds of people have been involved: a very diverse mix of ‘just do it’ people, wanting to bring positive change. We held three regional events (London, Birmingham and Exeter) to test and source ideas with people from a very wide range of perspectives, to end up with over 100 scenarios and 14 poems. Over 20 contributors made short videos, which they posted on Twitter and we compiled into a [fascinating, insightful film](#).

The [#MindNBody](#) resources were formally launched at the RCOG Perinatal Mental Health conference, December 2018 and sent out to 50 NHS trusts (and internationally) who use the *Whose Shoes?* approach. The existing [#MatExp](#) resources have sparked crucial conversations and brought about innovative solutions in many maternity units, so we are all excited to see the added impact of this carefully researched new material. Trusts are already setting up workshops, encouraging people to talk about perinatal mental health issues and, most importantly, to take positive action to improve experiences of women and families everywhere.

Developing and testing [#MindNBody](#) resources has given us the opportunity to identify existing best practice, as well as develop some new co-produced solutions to improve care for women and families. Patient leaders Leigh Kendall, Catherine MacLennan and Emma-Jane Sasaru commented:

*“It is about seeing women as whole human beings; about their mental health counting just as much as their physical health. It is about helping women source the perinatal mental health support they need and in a timely fashion, whether or not they have their baby in their arms. It is about raising awareness of this topic that is still very taboo. It is about saving lives: suicide remains the leading cause of death for new mothers in the UK. The campaign is a crucial point of progress in supporting women in maternity care – and their partners too”.*

**We are very grateful to all the organisations and individuals who have been willing to share their experiences in putting these solutions in place. We believe sharing the challenges will make it easier for others to successfully replicate the solutions and improve care for women and families.**



Louise Page  
@L6UPY

Lots of great conversations underway [#MindNBodyLdn](#) [#MatExp](#)



### Perinatal Positivity – Looking after your mental wellbeing through pregnancy and beyond

#### Aims

That new families are aware of the signs of perinatal mental ill-health, to know that they are not alone, to know what steps to take for self-care, and where they can get the support they need. A resource for professionals and charities working with new families.

Our ultimate goal is that 'Perinatal Positivity' is watched by EVERY new family-to-be in the UK (distributed via ante-natal classes, midwives and health visitors and at *Whose Shoes?*<sup>®</sup> workshops).

#### Rationale

Film is a powerful medium for helping people understand information, filling the gap between written materials and face-to-face support from healthcare professionals.

'Perinatal Positivity' is a short animated film to emotionally prepare families-to-be. The film promotes mental wellness and helps people identify early signs of mental health issues around pregnancy and early parenthood. It supports people to take positive steps to improve their wellbeing.

The film draws closely on the personal stories of people who have experienced mental health issues before and after childbirth, as well as being guided by health professionals.

#### Development

- A 6 minute animated film – which can be publicly shown, shared and embedded
- A website containing: the full film; short clips; audio interviews; self-care and support resources; professional resources, including a printable poster and postcard
- Free resources to share and embed in websites or social media

Produced by ForMed Films CIC (a not for profit) over three years, in collaboration with parents, obstetricians, midwives, health visitors, and specialist charities in London and Bristol.

225 people with lived experience of perinatal mental health problems contributed in some way, ranging from people who took part in our survey to those featured in our final film.

Details of our exciting mix of project funders, sponsors and executive producers can be found

#### Top tips for providers & commissioners



A film is like a big puzzle, to be tackled with curiosity and openness.

Make sure all participants have access to support.

Collaborate with professional film-makers, research and find the right production company. Aim to make the most powerful and useful film so it will be seen and used more and last for longer.

on [perinatalpositivity.org](http://perinatalpositivity.org). You can also find out about our survey here, seeking feedback from professionals and the general public.

#### Challenges

- Creating a short and engaging film that covers such a broad range of experiences
- Creating a film that has a positive message but doesn't shy away from potentially difficult experiences
- Working with a range of stakeholders from different professional backgrounds, as well as representing those with lived experience

#### Outcomes

In the first three months after the launch, the film:

- has been seen by over 13,000 people, online and at professional events and conferences
- is being used in professional training
- is embedded in the following websites: Tommy's, Maternal OCD, Acacia, MumsAid, Bluebell Care, RCGP toolkit, the IHV resources, the Burdett Hub
- is being shown in NHS waiting rooms at St Michaels and UHB in Bristol.

[Perinatalpositivity.org](http://Perinatalpositivity.org) has had over 9,000 visitors.

We are currently planning a thorough evaluation with Bristol University.

#### Contact

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## Case study 2: By Your Side



### Stay and Play for mums with experience of perinatal mental health services

#### Aims

Mums being seen by the Perinatal Mental Health Team (PMHT) often report feeling unable to attend 'standard' mother and baby groups due to their perception that other mums are coping better than they are.

We wanted to create a safe space where mums could come and spend time playing with their babies and meet other mums in an environment they felt comfortable in.

#### Rationale

We wanted to create a weekly Stay and Play which was only for mums who were current patients of the PMHT or recently discharged. It was therefore vital for us that the stay and play would only be staffed by volunteers who all had first-hand experience of the PMHT service. Another important factor was ensuring that no healthcare professionals would be in attendance so that it could be a neutral space for mums.

Whilst all volunteers would be trained peer supporters, this would be a subtle theme and not something forced upon the mums attending. For any mums wanting to chat to a peer supporter, a private space would be available for this purpose.

#### Development

We have sourced a venue in a local community centre and the PMHT have written to all patients on their current caseload, informing them of the Stay and Play. We have offered to meet mums outside to welcome them into the group, if they might struggle to walk in alone. We have contacted local transport companies to assist with providing discounted travel to ensure distance is not an issue. The hope is that these steps will help



#### Top tips for providers & commissioners



Speaking to mums who have previously used the PMHT service, provides a good base for recruiting volunteers who can take the idea forward. We have found that mums are always keen to give back to the service which has helped them.

Look into local community grants and/or fundraising so that some money can be put aside for refreshments, toys and travel expenses.

remove barriers to mums attending the scheme.

#### Challenges

Finding a venue we could hire free of charge was hard. We didn't want the venue to be at the hospital as we felt it should be a separate neutral and safe space, totally unconnected to the care the mums were receiving from healthcare professionals.

It was important to ensure we had a sufficient number of volunteers and that they could commit to the Stay and Play on a regular basis. Some of the mums attending could be vulnerable and we needed to make sure it was a group which would run every week at the same time and the same place so mums knew it was a safe space they could go to at that time.

#### Outcomes

Women attending the PMHT are very positive about the Stay and Play. They immediately identify with the concept of a group just for women who are struggling with their mental health, and are more willing to consider attending this group than any of the groups which are aimed at everyone. They are positive about having peer volunteers run the group – as one new mother said "well, they've been there and done that, haven't they? It will be really good to see women who have got better because then I know I can do it too".

#### Contact

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### Cultivating Wellbeing

#### Aims

To promote mental health and wellbeing for all pregnant women in an innovative setting.

To collaborate with a local social enterprise charity.

To offer mums and dads-to-be a range of wellbeing activities.

#### Rationale

We knew many women had limited access to activities that focused on wellbeing through both geographical and financial challenges.

There was nothing available locally that focussed on men's emotional wellbeing and transition to fatherhood.

We contacted a local social enterprise charity called Cultivate London and explored with them a collaborative approach using their urban garden as a local venue that was easy to access by women.

The aim of the Salopian Kitchen Garden in Isleworth is to grow seasonal organic produce. They use this at various events to promote healthy eating, as well as providing a relaxed wellbeing space for education sessions, which seemed a very good 'fit' with our project aims.

#### Development

It took six months of planning before the first event in March 2017.

The timing of workshops was planned to fit within school term times and hours to facilitate as many women attending as possible. We also kept to summer months due to the weather constraints of a mainly outside location. We agreed a fixed rate for the charity and speakers.

We included short sessions on mindfulness with an IAPT therapist, pregnancy yoga and breathing for wellbeing, pelvic floor health with a physiotherapist, and an introduction to gardening – all women took home a pot of herbs to grow. A homemade pizza lunch was included using fresh produce from the garden.

#### Challenges

An administrator was key to the success of the project, acting as a vital link between stakeholders and supporting the time-poor clinical project team!

Advertising of the workshops was important to

#### Top tips for providers & commissioners



Collaboration is key to the success.

Explore a variety of avenues for funding.

Advertise everywhere.

Women loved accessing services at a local, convenient venue rather than in the hospital setting.

ensure adequate take-up as there is a natural drop-out rate for free events.

The venue hire was relatively expensive but we felt it was worthwhile in terms of feedback and promotion of wellbeing, given the demographics of the local population who are often unable/unlikely to access wellbeing services.



#### Outcomes

Feedback was incredibly positive, and has led the project team to fund yoga classes in the maternity unit, particularly aimed at women struggling with their emotional wellbeing.

*"The venue was perfect for relaxation and the day flowed very well. ...it's great to make new parents aware of mindfulness, IAPT and self-referral, as it will probably be in the back of their minds should they experience any depression or baby blues post birth."*

*"I really enjoyed the activities and the environment. The venue itself was very calming - the gardening took me by surprise it's quite therapeutic!"*

#### Contact

Louise Nunn

PNMH Specialist midwife and evaluation and education lead for the HEE NWL PIE.

[louise.nunn@chelwest.nhs.uk](mailto:louise.nunn@chelwest.nhs.uk)

### Development of the Rainbow Clinic

#### Aims

To listen to the experience of families during pregnancies after loss, and offer specialist antenatal care and support.

#### Rationale

Members of the Bereavement Midwifery team became aware of the need for the Rainbow Clinic as parents, who they had cared for when they experienced the loss of their baby, contacted them for additional support in their subsequent pregnancy. Parents spoke of how challenging it was to be pregnant again, sharing how difficult it was not to be consumed by fear and anxiety as the pregnancy progressed.

#### Development

The Bereavement Midwifery team made contact with the Rainbow Clinic in St Mary's Hospital, Manchester and invited Professor Alex Heazell and Rainbow Specialist Midwife Louise Stevens to our unit to facilitate a multi-disciplinary team study day on best practice in pregnancies after loss. We explored the logistics of forming a genuinely multi-disciplinary team approach to care.

We heard first-hand family experiences of navigating the challenges of pregnancy after loss, explored the evidence behind optimal care in such pregnancies and gathered ideas as to how such a clinic and service might work in our own maternity setting. We also worked closely with our local Maternity Voices Partnership and the Willows Support Group (a local support group for, and facilitated by, bereaved parents) to seek the voices and experiences of local families who had used our maternity services.

Our Fetal Medicine Specialist and I visited the Rainbow Clinic at St Mary's and received training in relation to placental profile ultrasound scans and the pathway of care provided by the clinic.

#### Top tips for providers & commissioners



Work with parents every step of the way to ensure their voices are heard and their stories and experiences are incorporated into the development of the service.

We received very positive support from our midwifery managers who allocated a 0.6 hour equivalent band 7 midwife role to work alongside a Lead Consultant Obstetrician and Fetal Medicine Specialist to make up the Rainbow Clinic Team.

#### Outcomes

The Rainbow Clinic was launched on 8th October 2018.

A member of the Willows Support Group, who supported the set up of the clinic and funded rainbow stickers for antenatal notes and support materials for parents, commented:

*"The primary role of the Willows Support Group is to offer parents, who like me have experienced baby loss, a place to come to share their stories with parents who understand, and to listen to other people's stories. Often, along with the grief, is a huge amount of anxiety for future pregnancies. At Willows, we can offer a listening ear and support but we cannot provide the same care and reassurance that a clinical specialist can give. It has been a privilege to be a part of this development and I know it will make a significant difference to parents who have gone through traumatic times."*

#### Contact

Juliette Ward  
Rainbow Specialist Midwife  
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Supporting my wife with PND who will support me?

Dads can experience depression too!

# Dads

Info for dads... mental ill health

Should we go to dads rather than waiting for them to come to us?

More group sessions

Practical tips for dads to do

# Dads

Involve them from day 1

Ensure Dads get to debrief & share their experience



# Support

# Self Care

- ✓ Positive Birth movement
- ✓ Yoga/Pilates

helped me!

Early Help

Before it takes over our life!

Mindfulness for staff & patients

my vulnerability impacts on my ability to use my voice!

# Advocacy

Using Case Studies

Sharing Stories

## Workforce Support

SO I can continue to be empathetic.

Debriefing

Supervision

mentoring

Training: GPs, Communication, talking mental health, Trauma informed care

- Training
- Handling difficult
  - Listening
  - Yoga
  - mental
  - safe s

#MindNBody  
A holistic approach to Perinatal Mental Health

Gloucester

Lemon light ideas from our co-production events

Exeter

People with Lived Experience of PERINATAL MENTAL HEALTH

are powerful advocates + change agents.

# Peer Support

Meeting others with similar experience

# Buddying schemes





### Combatting anxiety, loneliness, isolation and depression

#### Aims

To identify areas within the family practice patient list, and indeed the wider community, where volunteers can support our professionals by developing non-medical alternative projects to help in combatting anxiety, loneliness, isolation and depression to improve the wellbeing of the community.

#### Rationale

The group first met in March 2017 and, partly based around skill sets identified within the group, quickly established various ideas on which to build. Out of those early meetings were spawned the ideas for singalong sessions, continuing and expanding the 'walking for health' scheme, phone calls with lonely and isolated people, and the initial 'growing for health' schemes.

#### Development

Through the past 18 months, the group has developed the initial schemes and added more. We very early on developed, designed and produced a 'wellbeing prescription' outlining our offers which the clinicians can use as a reference/talking point for patients and suitable persons.

This now lists the fully developed monthly singalongs (which are held in our local community coffee shop, but which are also run on request at other venues), weekly walks, chat and natter sessions, telephone conversations and many more which we are in the process of developing.

For example, our community allotment where we have plans to "grow, cook and eat your own vegetables", nature walks and starting work with forces' veterans.

#### Challenges

The main challenges are those of time. The ideas come flooding out but we have needed to take a step back and develop our ideas as they come before undertaking the next big project. Otherwise we run the risk of overload and not fulfilling each project to its fullest potential.

#### Outcomes

Apart from the obvious signs of outcomes in the joy and gratitude we get from patients and members of the community who have joined us, the practice management and clinicians have measured some

#### Top tips for providers & commissioners



Don't give up. If you identify and research a need, go for it. Give it your best shot and don't expect everything to fall into place from day one. People don't always immediately go for what you're offering. Try to avoid making it come from a clinical direction, more of a friendly community perspective.

of the effects of referral and now see on average 12 patients per session each, as opposed to 15 patients twelve months ago.

This allows them to extend the appointment to give each patient more time.

### WELLBEING PRESCRIPTION

**NOTE** Did you know that Alvanley Family Practice Health Champions can offer so much more than you think. Check the list below to see if any of the services or activities may be of interest to YOU. Just put a tick in the box of those you like the look of, complete your name and contact details and pop it in to reception. Alternatively you can email us with your inquiry and details to: [stoccg.healthchampions@nhs.net](mailto:stoccg.healthchampions@nhs.net) or telephone 0161 426 5757

**PART 1** I am interested in receiving more information about the following:


- Weekly Walks** - Every Wednesday 12 o'clock from practice
- Coffee and Conversation** - Feeling alone, fancy a chat?
- Social Events for New Mums** - Don't feel isolated and alone
- Pram Pushers Walk** - Bring along junior for a friendly walk
- Singing for Health** - Monthly Singalongs with the Champions
- Knit and Natter** - Friendly banter with like minds
- IT Skills** - Let's get you started with the basics
- Telephone Support** - A friendly voice on the end of the line
- Practice Allotment** - Growing and much, much more!
- "Veg on prescription"** - Gro it, cook it. eat it !!!!
- SMILE Sessions** - Armchair Exercise; Walking Football etc.
- Feed the Birds** - Our scheme for wildlife and wellbeing
- Arc Centre** - A variety of arts for relaxation & wellbeing
- Introduction to Volunteering** - Why not get involved?
- Community Organising and Listening** - Short course

**PART 2** I understand that the details I give will be passed to the Alvanley Family Practice Health Champions who will then contact me with the information I have requested

Name: \_\_\_\_\_

Contact Number/Email address: \_\_\_\_\_

**PART 3** Signed: \_\_\_\_\_

 Alvanley Family Practice HEALTH CHAMPIONS

DATA PROTECTION: We will NEVER share your personal information with any third party without your specific permission © Dave Chorlton June 2018

#### Contact

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Chair, Alvanley Family Practice Health Champions  
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## Case study 6: Shine PND Support



### Creative workshops

#### Aims

To arm mums with a toolbox of coping strategies for their postnatal depression and anxiety, focusing on high standard crafts workshops with local artists. We offer a qualified crèche to ensure mums have optimum 'me time' for creativity, sharing and supporting. With lived experience, I empathise hugely and know how much art therapy can help. Mums often continue creativity at home to ease anxiety and low mood. We also offer yoga and hypnotherapy tasters, and hands-on nutrition workshops.

#### Rationale

High standard crafts with workshops led by local artists... the mums are SO proud of what they produce! Often quite surprised at how much creativity helps, and hugely boosts their confidence in what they are capable of. With the tasters, we offer opportunities to try new activities. Mums are able to continue with their recovery with confidence and long-lasting support, along with their new coping strategies.

#### Development

The peer support is the magic that holds it all together, as mums bond and create friendships for life, supporting each other and meeting up long after their course has ended. And of course, our wonderful qualified crèche, easing mums into being away from their babies, and enabling total 'me time' for communication, interaction and focus on their workshops.

For continued support, I also facilitate an online private page of peer support, Shine Mummies, where all mums who have been through a Shine course can support and advise each other at any time ... it is amazing how strong they are when supporting each other!

Have a look at Shine ...  
[facebook.com/shineoncemore](https://www.facebook.com/shineoncemore)

#### Challenges

Took four years to set up but now there are four in Gloucestershire and just starting up in Wiltshire.

Volunteer expert by experience present at all meetings.

#### Top tips for providers & commissioners



Lived experience crucial for the role of project manager. High quality crafts with easy to follow steps. Referrals from Health Visitors and GPs.

#### Outcomes

Increased confidence, 'me time' and peer support for mothers.

#### Contact

Lauraine Cheesman  
[laurainecheesman@yahoo.co.uk](mailto:laurainecheesman@yahoo.co.uk)



Lauraine speaking about Shine in Gloucester, at the first ever #MindNBody Whose Shoes? event



The lively #MindNBody Whose Shoes? event in Gloucester, ahead of our three regional workshops

## Case study 7: By Your Side

### Discharge hampers for mums following a stay in a Mother and Baby Unit (MBU)

#### Aims

After receiving intensive support on a daily basis whilst in the MBU, mums can often find it hard to adjust to life outside of the unit upon discharge to the community Perinatal Mental Health Team.

We wanted to help local mums to adjust to life outside of the MBU and to enable them to enjoy the family time they had missed whilst they were an inpatient by encouraging them to spend quality time with themselves, their babies and their partners.

#### Rationale

Supporting the mums to adjust to life at home with their babies by helping them to fit into the parenting community and enabling them to spend quality time with partners they have been apart from could aid their recovery by reducing their feelings of isolation. By providing mums with these opportunities, it is hopefully easier for them to access and utilise them.

We considered what parents miss out on when experiencing perinatal mental illness and came to the following conclusions:

- They find it hard to attend standard mother and baby groups and meet other mums
- It can be hard to make quality time for themselves
- By the time they are discharged from an MBU, they have spent a significant period away from their partners so have been missing quality time as a couple as well as time as a family
- They may have missed celebrating baby's achievements and milestones due to illness

#### Development

We appealed to local businesses to donate items for the hampers and also for donations of hamper baskets, cellophane and ribbon. We work from a core list we have put together and use fundraising proceeds to top up where necessary.

We aim to ensure each hamper consists of the following:

- Voucher for a term of baby classes
- Present for baby (eg teddy, toy, outfit)
- Pamper treatment for mum (eg. haircut, manicure, massage)
- Chocolate treat
- Voucher for a family photo shoot and free prints

#### Top tips for providers & commissioners



Speak to service users and see what would have helped them.

Talk to local companies to establish links and hopefully gain their long term support in filling hampers.

- Voucher for a family day out
- Voucher for a meal out for the parents to spend quality time together
- Milestone cards from a local company which are not time specific (eg. Why am I wearing this?; I am the boss around here)
- Sentimental gift (eg. personalised print, personalised jewellery)



#### Challenges

There were some items we wanted to include (e.g. vouchers for a cleaner) which we have struggled to source.

Some items we have been unable to obtain donations for and have had to use our own funds to complete hampers.

We have had some discussions around when is the optimum time to deliver the hampers (immediately upon discharge or a couple of months later when settled) and, whilst initially deciding to deliver them immediately, have since decided it may be better to wait until they are settled and less overwhelmed.

#### Outcomes

The idea is only newly implemented but feedback from mums is that the hamper was a lovely gift for them and a helpful tool in them settling back home and adapting to being a mum in their community.

#### Contact

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### Perinatal mental health support in prisons

#### Aims

To provide specialised perinatal mental health (pmh) assessments and support to women in prison over the perinatal period.

To provide specialist pmh advice/training and support to the mental health team and wider multi-disciplinary team.

To develop the pmh pathway in prisons, in collaboration with the prison team.

To work closely with psychology colleagues in developing a trauma-informed pmh service.

#### Rationale

An existing gap was identified around providing pmh support to women in prisons. This includes support to all pregnant women, women in the postnatal period who have a place in the Mother and Baby Unit, and women separated from their babies over the perinatal period.

#### Development

A 0.4 WTE senior pmh nurse post was commissioned to work across two female prison estates, with the aim of providing specialist pmh expertise across the prisons. An additional aim of the post was to develop a pmh pathway of care across the two prisons.

#### Challenges

Cultural challenges and lack of understanding of perinatal mental health.

Custodial versus rehabilitative culture.

Limitations around the capacity of the role and level of demand.

Lack of integration between the mental health team and the prison.

Lack of integration between the pmh team and the generic mental health team.

Primary care level service, working at times with women who need more extensive and intensive mental health support.

Gaps around NHS perinatal mental health provision around working with people with forensic mental health issues during the perinatal period of an acuity that requires hospital level care. No existing forensic pmh 'mother and baby' beds.

#### Top tips for providers & commissioners



Resource allocation for pmh role, including clinical and leadership aspects.

Joined up working across the perinatal pathway (prison, NHS, academia, criminal justice system).

Increase pmh resource for midwifery.

Collaborative work with third sector, including Birth Companions and peer support.

Project support and evaluation.

Commission/develop specialist perinatal risk assessment tool/clinical assessment tool and embed pmh into all mental health and prison assessments (triage, first night centre, mother and baby board, care planning).

Develop integrated model of pmh care, rather than stand alone pmh input.

Invest in OD work between prison, health care and wider MDT to ensure that the new model is fully embedded and that cultural change occurs. Access to specialist pmh support to women who have been separated from their babies over the perinatal period, but whereby support is required beyond the perinatal period.

Invest in multi-disciplinary training between health care and the prison team on perinatal mental health.

Ensure pmh model is trauma informed.

Lack of joined up approaches between NHS perinatal mental health services and specialist prison-based perinatal mental health.

#### Outcomes

Access to specialist perinatal mental health support for women in prison.

Feedback from mothers has been very positive around the role of advocacy and support from pmh nurses, during imprisonment.

Increased profile and understanding of perinatal mental health in prisons.

#### Contact

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### OneFitMama exercise class

#### Aims

OneFitMama is designed to help and support mums on their journeys to healthier minds and bodies.

Our exercises and programmes are designed specifically to be safe for postnatal mums. Our classes are circuit training: a variety of exercises using your body weight or light weights and resistant bands. The exercises are adjusted to meet mums' postnatal needs.

All our circuits are also designed by an antenatal and postnatal fitness specialist Sophia Cooper, founder and creator of One Fit Mama UK, with input from midwives and other health professionals, so completely safe for mums.

#### Rationale

[A study in August 2017](#) found that exercise can help new mothers manage postnatal depression.

Exercise helped me tremendously.

#### Development

Going to a baby group as a new mum can be very scary. You are often sat facing other mums with a coffee, and almost forced to socialise. With OneFitMama classes you can start with just coming in, doing your workout and going. Then, once you feel comfortable, make friends and chat to other mums.

The little ones are on baby mats in the middle making friends whilst mums work out around them. If babies need cuddles, then either I will pick them up or the mums do and just move babies with them to each exercise.

For the toddler class, we have a ball pit and a few ride-on toys, however the toddlers often follow their mums around or even join in.

We also offer 6 free sessions (2 spaces every 6 weeks) for mums who were diagnosed with postnatal depression. The free sessions are currently self-funded by the instructors. To my knowledge, we are the only fitness organisation that offers this service.

We also offer six-week specialist classes called OneFitCore to help restore the pelvic floor and core at a very reasonable price and it's been designed by a physiotherapist.

#### Top tips for providers & commissioners

Explore more formal links between exercise classes and maternity and community mental health services so that women can access free classes more easily.



#### Challenges

I am aware that, in other areas of the UK, some instructors have good relationships with healthcare professionals and get referrals on a regular basis.

Even though lots of healthcare professionals seem to know me and think what I do is great, I have not yet had any mum attend my class and tick the box to say that she found out about me from a health professional. Most of them are from Facebook or recommended by a friend.

Some instructors have also managed to build relationships with the council and received funding to offer free exercise classes to mums.

I am really trying to make connections with health professionals, including health visitors and maternity staff. I just want to help form a community for mums and give them something they can do for themselves, without needing childcare.

#### Outcomes

Regular exercise:

- relieves stress
- fights and prevents postnatal depression
- eases anxiety
- clears your head
- helps you sleep better
- makes you feel happy

#### Contact

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## #StopNcelebrate

### Aims

Each time a new mother passes through labour ward to be transferred to the postnatal ward, whether she has come out of obstetric theatre or a labour room, every member of staff they pass on their journey stops what they are doing, looks up from the computer, stops walking etc and congratulates the mother and her family on the birth of their baby.

### Rationale

This was an idea following the *Whose Shoes?*® workshop we held at South Warwickshire NHS Foundation Trust with Gill Phillips, imagining what it is like to be taken through the labour ward when you have just given birth and the staff / team around you just carry on as normal or ignore you. It is a time that should be celebrated, to make the mothers feel as special as possible.



### Development

This was a simple, free idea to implement and, following the *Whose Shoes?*® event, this started immediately and is now embedded in the culture of our labour ward.

We just ask staff always to stop and acknowledge every mother as they transfer through labour ward.

We send staff a gentle reminder from time to time.

### Challenges

Getting every member of the team to engage in this, especially as we have a large, varying

### Top tips for providers & commissioners



So easy to implement, no cost, just changing culture and making people feel special.

All staff members can do it, all members of the multi-disciplinary team.

Introduce it when a new starter starts.

Send out gentle reminders.

multi-disciplinary team on labour ward, including theatre staff, domestic staff etc.

The challenges have been when sometimes the staff are very busy and they forget and also ensuring all temporary members of staff know about StopNcelebrate.

### Outcomes

We have seen on patient feedback forms and at 'birth listening' face-to-face sessions that women and their families felt special and feel that the staff really care.

Gill helped us spread the word on social media, introducing the #StopNcelebrate hashtag. It was lovely to exchange ideas and see how other teams celebrated births. We were amazed that, within two days of our workshop, the idea was picked up and replicated in Melbourne, Australia.

We made a video which was shared as part of the [#MindNBodyAdvent series](#). In total, the series attracted 25,000 views on Twitter.

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With special thanks to the Health Education England (HEE) North West London Partnership in Innovative Education (PIE) PNMH project team, the South West Clinical Networks and the West Midlands Clinical Network and Senate who co-funded the #MindNBody project through a forward-thinking collaboration and have been key partners, including hosting research and development workshops in each region.

HEE supports the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place. The Perinatal Mental Health project was funded as part of the PIE programme, which focuses on non-traditional healthcare education training models that work across boundaries, are multi-professional and include patients and carers.

We would also like to thank the London Clinical Networks who produced the original case studies booklet and hosted the 'Nobody's Patient' case studies, produced as part of the NHS England #MatExp Challenge Fund. All our partners have been keen supporters of the whole #MatExp project.