



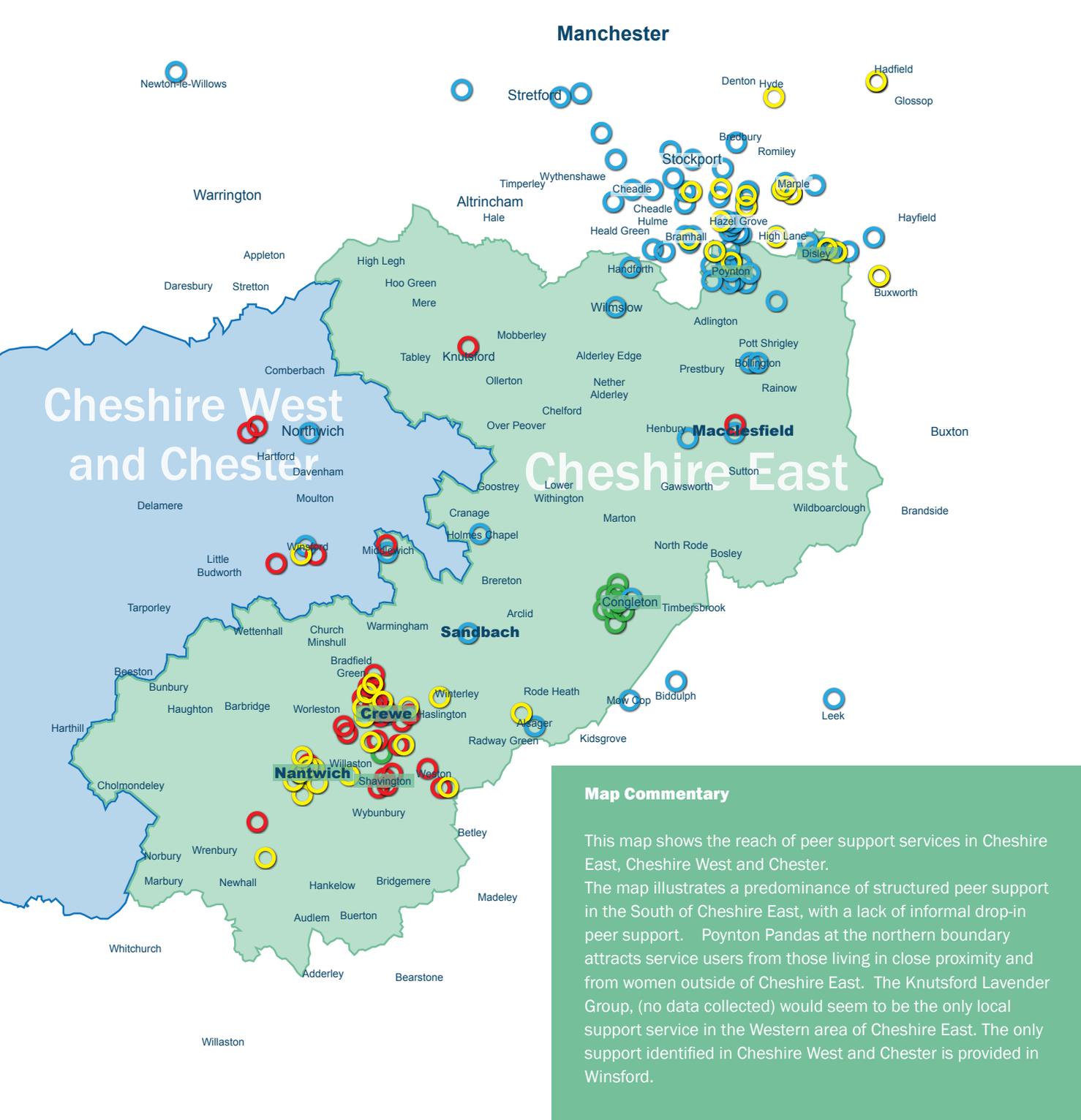
Cheshire East Joint Strategic Needs Assessment

# Perinatal Mental Health Report

November 2016

Delivered by





# Perinatal Mental Health Report: Geographical Mapping of Reach of Service

**Service users who accessed:**

- Structured peer support programme**  
**93 Attendees**  
 Delivery locations:  
 Crewe  
 Knutsford (service user data not available)  
 Macclesfield (service user data not available)  
 Winsford

- Informal drop-in peer support**  
**Approximately 200 attendees**  
 Delivery locations:  
 Congleton  
 Macclesfield  
 Poynton

- Informal activity-based support**  
**Approximately 60 attendees**  
 Delivery locations:  
 Crewe  
 Poynton  
 Winsford

- Family peer support activities**  
**Approximately 20 attendee families**  
 Delivery locations:  
 Congleton  
 Crewe

### Map Commentary

This map shows the reach of peer support services in Cheshire East, Cheshire West and Chester. The map illustrates a predominance of structured peer support in the South of Cheshire East, with a lack of informal drop-in peer support. Poynton Pandas at the northern boundary attracts service users from those living in close proximity and from women outside of Cheshire East. The Knutsford Lavender Group, (no data collected) would seem to be the only local support service in the Western area of Cheshire East. The only support identified in Cheshire West and Chester is provided in Winsford.

### A changing picture

The SMILE group will be establishing a new informal drop-in group in Sandbach from the end of November, and will also be providing 1-2-1 home visiting sessions in Macclesfield, Congleton and Sandbach.

- ### What we don't know but would like to know
- Post code data of service-users from the Knutsford and Macclesfield Lavender Group
  - Post code data from the yet to be established SMILE initiatives.

Approximate figures taken from service provider data available.

# What peer support is currently available?

The project was initially tasked to cover the Cheshire East region. However, this was expanded to include Cheshire West and Chester (CWaC).

Four service providers were identified and interviewed within Cheshire East, but only one service was identified in CWaC: Motherwell CIC operating in Winsford. There are three service-providers from the Voluntary, Community and Faith Sector (VCFS) Motherwell CIC, SMILE and Poynton Pandas, and one public service provider: Wirral Community Trust, whose health visitors run 'Lavender Groups'.

For full details of the menu of services and peer support provided by these organisations, please see Appendix 1.

Mums tend to 'journey' through the menu of services as their need for the support changes over time. A number of the mums have stayed on with groups who provide informal drop-in sessions as peer supporters themselves, and are trained by the groups (these positions are either voluntary or paid, but all are provided with training).

Online support is available through Netmums' Coffee House, Poynton PANDAS Tea and Chat and the PND Hour on Twitter (#PNDHour). Action for Postpartum Psychosis also offer online 1-2-1 support using peer supporters with lived experience. User location data is not collected as this is seen as a potential barrier to support.

## Key Findings

- There is a predominance of structured peer support in the south of Cheshire East with a lack of informal drop-in peer support.
- Poynton PANDAS at the northern boundary attracts service users outside of Cheshire East.
- The Knutsford Lavender Group appears to be the only local support service in the West of Cheshire East.
- The groups offer a range of services including: structured peer support programmes; informal drop-in peer support sessions; informal activity-based support and family support activities and events (including We Are Family Motherwell sessions for LGBT parents).

- The SMILE Group will be providing a new informal drop-in peer support group in Sandbach from the end of November.

- Motherwell CIC have experience, with their 6 week programme, of supporting mums who have had children removed.

**All VCFS groups can be accessed by self-referral or professional referral**

## What we don't know but want to know

- More about the Lavender Groups in Knutsford and Macclesfield (user numbers and referral criteria for all groups)
- Whether there is a need for Lavender Group support for women after the 12 month post-natal period
- If there are safeguarding issues or duties of care for groups of mums who continue to meet after structured courses have finished

- Postcode data from the SMILE Group from the 3 Children's Centres, which will increase peer drop-in figures and possibly fill in gaps for Knutsford and Alderley Edge.
- The capacity of groups to deal with current and future levels of demand.

## Opportunities for Improvement

- Facilitation of cross-sector partnership working between service providers ie further explore the perinatal mental health (PMH) forum model in Stockport.
- Consider expanding the Cheshire East Maternal Mental Health Working Group to include VCFS organisations.
- Facilitate the sharing of best practice between all perinatal peer support groups in Cheshire.

*"We want mums and families to realise that they can get better and they will get better and they will move on. You know, it's not going to be a forever type thing."*

**- SMILE co-founder.**

# The experience of mums

**A survey was created for mums who had used peer support groups in the Cheshire region (Cheshire East and Cheshire West and Chester) within the last two years for perinatal mental health (PMH) issues. The survey was made available online and in paper format and was widely-publicised. 26 responses were received (3 of which were postal) and all respondents were from Cheshire East.**

## Key Findings

- A significant number of the women had approached their GP or Health Visitor for help and support prior to attending a peer support group.
- Some of the women had attended IAPT sessions, others were on the waiting list.
- Good links exist between two of the VCFS groups and health visiting teams.
- Improved links with GPs and other relevant professionals would help to increase peer support provision.
- The issue of peer supporters having lived experience was important for VCFS groups & service users.
- Health visitor led Lavender Groups have received

**96% of survey respondents felt that of the peer support available, group sessions had had the most impact on them and their recovery**

positive feedback from mums who have attended. The mums also continue to meet as a group after the formal 6 weeks of facilitated group sessions.

- Feelings of isolation and loneliness were common. The women highly-valued non-judgmental support within a safe and supportive environment.
- Shared experience was cited as a powerful connector, and creating new support networks through meeting other women at the groups is part of a mum's peer support 'journey'.
- Peer support group environments are not for everyone and some mums only attend one session and do not return.
- The blanket use of the term 'post-natal depression' for all Perinatal Mental Health issues can further isolate mums.
- Anxiety and fear of stigma was identified as the largest barrier to mums attending peer support groups.
- Mums surveyed had found out about local peer support provision via: the internet/ social media (54%); word of mouth/ a friend (31%); health visitors (23%) and GPs (8%).\*

## Opportunities for Improvement

### Ensure mums know about all the support available:

The Pregnancy Care Record folder, given to all expectant mums, should include contact details of local support for PMH issues. Explore a process where current and newly formed support services and activities can be included on the Cheshire East Local Offer.

Encourage leaders of the VCFS groups to work within any cross-sector group to **remove the misconception that a child will be taken away** if help is sought from health visitors.

**Raise awareness among all relevant professionals** (including GPs, midwives, health visitors and Children's Centre staff) of perinatal mental health service providers and how users can access them.

**23% of survey respondents said that online forums made the biggest difference for them.**

**Improve training** for all groups of staff to recognise and deal with Perinatal Mental Health (PMH) problems to include:

- Increased awareness of **PMH Toolkit** by Health professionals which includes open access e-learning modules (Royal College of General Practitioners).
- Awareness raising around use of language for target audiences and range of conditions.

\*The percentages do not add up to 100% as several women returned multiple responses to this question.

# The practicalities of setting up peer support

## Key pointers identified in the setting up of robust and sustainable services

- The importance of a legal form for the group.
- Support for new VCFS organisations from CVS Cheshire East - Setting up legal and financial structures.
- **Partnership-working, and sharing of 'models' that work.** The founder of Poynton Pandas formed a perinatal mental health forum in Stockport, facilitating better cross sector partnership working.
- Best practice in place.
- Support and training for staff and volunteers.
- The importance of professional supervision.
- **Buy in and referrals from health professionals.** Good working relations (with Health Visiting teams and GPs) is key to increasing numbers of women accessing perinatal peer support.
- Easy access to the service.
- A straightforward and clear referral process.

*"...my main aim is that it's a safe place for parents to come to, and for professionals to feel they can refer to..."*

**- Poynton PANDAS leader**

- Being able to make contact either face-to-face or via social media before attending a group.
- Being able to bring along small children to sessions.
- A safe and non-judgmental environment.
- **Sustainability:** The VCFS services 'recruit' new volunteers from the mums who attend sessions. Three out of the four support organisations have some paid staff and one is run completely by volunteers. All of the groups would like/aim to see their services expand, (number of sessions/programmes and/or the number of locations they can cover). This is dependent upon further funding and staffing.
- **Use of social media to promote the service and to enable communication.** For example online forums provide out of hours support for existing support group members and for women who are unable to get to group sessions (barriers included anxiety, lack of transport or work commitments). Online forums that Mums are using: PND Hour, the Netmums' Coffee House, and Poynton Pandas Tea and Chat.
- **The establishment of robust quality assurance systems.** All of the groups have some form of quality assurance in place (see Appendix 1 for further details).

- The establishment of systems for evaluating the impact of the support provided.

- **Plans to 'grow' the service.** There are two new initiatives planned in Cheshire East: the SMILE group will be delivering a structured home-visit programme in their 3 locations, and will be providing their drop in service in Sandbach.

## What we don't know but want to know

How peer support services developed their working relationship with health professionals, GPs and Health Visitors.

## Opportunities for improvement

The setting up of a cross-sector partnership: a vehicle for all service providers to work together to share resources and good practice. This group could explore:

- Opportunities and benefits of replicating the Stockport Forum model across Cheshire East and Cheshire West and Chester (including the successful working with local hospitals)
- Promotion via social media of all services
- Embedding recognised QA system/s across all services and the benefits of using a consistent approach across different services
- The establishment of evaluation mechanisms to demonstrate service impact upon users
- Filling the gap in provision in Cheshire West and Chester.

*"...there's no more powerful thing than somebody saying, 'I'm there as well' or 'I was there.'"*

**- Motherwell founder.**

## APPENDIX 1: Summary of Service Provision

Question	SMILE	Poynton PANDAS	Motherwell		Lavender Group
			Crewe	Winsford	
Types of support provided:					
1-2-1 support	> 10 users	x	21-40 users (estimation)		x
Peer support groups	100+ users	65 users	44 users	6 users	20 users
Online support	x	100+	Figures not available		x
Telephone support	x	x	x		x
Family support	8-9 families per monthly session	x	x		Figures not available
Delivery location	Macclesfield, Congleton and Sandbach at the Children's Centres	St. George's Church Hall, Poynton	Everybody Lifestyle Centre	Everybody Lifestyle Centre	Brook's Children's Centre, Crewe
How often regular peer support groups meet	Weekly, all year round	Weekly, term-time	6 week structured programme, 1 day per week 9-5		6 week structured programme, 1 morning per week
What days/times?	M: Friday am C: Wednesday am S: Tuesday pm	Monday 10:45 - 12:15	Thursday	Wednesday	Thursday mornings (2.5 hours)
Any additional regular sessions?	Monthly Saturday family day (Ruby's Fund, Congleton)	Monthly evening session in Adlington	#Riseandshine (Buggy Fit & Baby Yoga); and Mum Shine creative group		A dad's session in week 7
Length of time regular sessions established	1-2-1 as a 3 month pilot, peer 5 years+	2-5 years	Less than 12 months		2-5 years
Potential barriers cited to accessing support	Anxiety and transport	Anxiety	Agencies not knowing how to refer to them		Anxiety
Can women attend sessions with:					
Child/children	✓	✓	Very young children only		✓
Friend	✓	✓	x		x
Relative	✓	✓	x		x
Can users attend on a drop-in basis?	✓	✓	Not for the peer support group session		x
Do users have to commit to a certain number of sessions?	x	x	Yes for the peer support group		✓
Mode of referral	Self-referral or professional referral	Self-referral or professional referral	Self-referral or professional referral (social care, Health Visitors)		Referral by Health Visitor. Mums can ask to be referred by their HV if aware of group
How is the group funded?	Eastern Cheshire CCG, fundraising activities, Cheshire Community Foundation, Peaks and Plains	Donations and fund-raising	Big Lottery funding, donations and fund-raising activities		Venue provides refreshments, funded as part of service level agreement with Eastern Cheshire CCG
Is your service quality assured?	✓	✓	✓		✓
	Portfolio of policies	Varied training programme	Working towards GRIPP		Care Quality Commission (CQC) and Ofsted QA'd
	Part of the Perinatal Mental Health Partnership	Disclosure & Barring Service (DBS) training	Uses HAD Scoring (Health, Anxiety and Depression scale)		
	Works to encourage best practice in peer support with network of perinatal mental health charities	Range of policies and procedures	Working towards becoming a charity		
	Clinical supervision	Clinical supervision	Clinical supervision		
	Has become a Charitable Incorporated Organisation (CIO) with 8 trustees	Has a Board and constitution	Has a Board and constitution		
Mode of impact measurement	CORE10	No specific mechanisms	HAD Scoring		Pre-course and post-course evaluations
	Anecdotal evidence	Anecdotal evidence	Anecdotal evidence		Stepping Stones activity
When can service be accessed?	Antenatal and up to 3 years	Antenatal and up to 3 years	Antenatal and up to 2 years		Up to 1 year after birth

# Perinatal mental health peer support in the Cheshire region



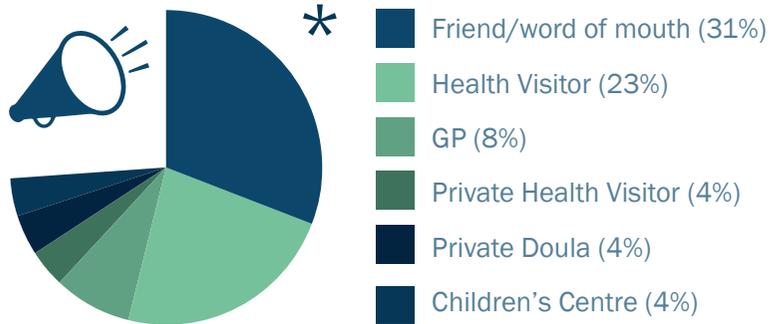
Just under **7,200** maternities in Cheshire (Cheshire East and CWAC). An estimated **15-20%** of women develop depression or anxiety within a year of giving birth which could mean between **1,080 women (15%)** and **1,440 women (20%)**.

The four providers worked with:

Peer support: up to **300 women**  
 Counselling: up to **50 women**  
 Online support: more than **100 women**

Still leaving a large shortfall of women who have not used their support but who could benefit from it.

**54%** of mums found out about the peer support group through the internet/Facebook followed by (in order):



**100%**

of survey respondents had used a **peer support** group.

**96%**

of survey respondents said the **peer support** group had made the biggest difference to them out of all the support given.

\*Does not add up to 100% as some respondents ticked more than one option.



**17 out of 20**  
(85%)

said they felt lonely and isolated while waiting for support.



Up to **69%**

of survey respondents had used online support (1-2-1 and forums).

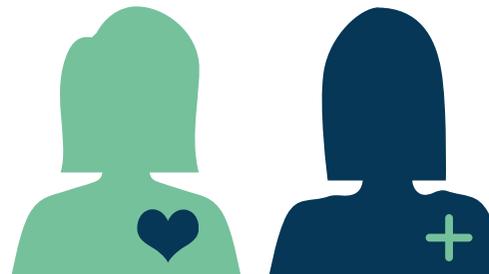


**3 out of 4**

service providers and **55%** of service users said that **anxiety** is the biggest barrier to attending a **peer support** group.

**88%**

of mums using VCFS services said they wanted someone with **lived experience** to run the groups.



**100%**

of survey respondents said it had a positive impact on them – 'normalising', 'reducing isolation', 'sharing'.



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