

Citizen Participation and Public Petitions Committee
Wednesday 17 April 2024
6th Meeting, 2023 (Session 6)

PE2017: Extend the period that specialist perinatal mental health support is made available beyond one year

Introduction

Petitioner Margaret Reid

Petition summary Calling on the Scottish Parliament to urge the Scottish Government to:

- amend section 24 of Mental Health (Care and Treatment) (Scotland) Act 2003 to extend maternal mental health support beyond one year,
- introduce a family liaison function at adult mental health units across all health boards,
- introduce specialised perinatal community teams that meet Perinatal Quality Network Standard Type 1 across all health boards, and
- establish a Mother and Baby Unit in North East Scotland

Webpage <https://petitions.parliament.scot/petitions/PE2017>

1. [The Committee last considered this petition at its meeting on 28 June 2023](#). At that meeting, the Committee agreed to write to the Scottish Government.
2. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
3. The Committee has received new written submissions from the Scottish Government, and Tess White MSP which are set out in **Annexe C**.
4. [Written submissions received prior to the Committee's last consideration can be found on the petition's webpage](#).
5. [Further background information about this petition can be found in the SPICe briefing](#) for this petition.
6. [The Scottish Government gave its initial position on 2 May 2023](#).
7. [The Health, Social Care and Sport Committee wrote to the Minister for Social Care, Mental Wellbeing and Sport on 28 November 2023](#) to seek an update on progress towards the recommendations of its inquiry into perinatal mental health.

[The Minister for Social Care, Mental Wellbeing and Sport provided an update on perinatal mental health to the Health, Social Care and Sport Committee on 24 January 2024.](#)

8. Every petition collects signatures while it remains under consideration. At the time of writing, 623 signatures have been received on this petition.

Action

The Committee is invited to consider what action it wishes to take.

Clerks to the Committee
April 2024

Annexe A: Summary of petition

PE2017: Extend the period that specialist perinatal mental health support is made available beyond one year

Petitioner

Margaret Reid

Date Lodged

3 April 2024

Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to:

- amend section 24 of the Mental Health (Care and Treatment) (Scotland) Act 2003 to extend maternal mental health support beyond one year
- introduce a family liaison function at adult mental health units across all health boards,
- introduce specialised perinatal community teams that meet Perinatal Quality Network Standard Type 1 across all health boards, and
- establish a Mother and Baby Unit in North East Scotland.

Previous action

I contacted one of my North East regional MSPs in December 2021 who raised the situation during First Minister's Questions. I contacted another North East regional MSP, Tess White MSP, in early 2022 about maternal health services and she has been supporting us on the issues raised in this petition in the intervening period.

Background information

A member of my family who lives in NE Scotland, developed postpartum psychosis and relapsed after receiving initial treatment at a Mother and Baby Unit. Her experience shows that difficulties with maternal mental health are not just confined to the first year of motherhood.

After being diagnosed with postpartum psychosis, she and her baby were admitted to the Mother and Baby Unit in Livingston. They received exceptional care, while her family were kept up-to-date with her treatment and progress.

However, she experienced a relapse some months later and was sectioned in a mental health unit. Her experience was profoundly different to the MBU where she had made so much progress. She said to me that 'it was like living a nightmare; the whole experience just didn't seem real.'

CPPP/S6/24/6/8

To watch someone you love be so ill, to put her in the hands of a system with people you should be able to trust, and be let down so badly is one of the hardest experiences of my life. It has driven me to make change.

Annexe B: Extract from Official Report of last consideration of PE1975 on 28 June 2023

The Convener: Item 2 is consideration of new petitions. As always, I say to petitioners who might be tuning in to watch our proceedings for the first time that, ahead of our consideration of each new petition, we invite preliminary views from the Scottish Government and the Scottish Parliament information centre, which is the Parliament's independent research service.

The first of our new petitions is PE2017, which was lodged by Margaret Reid and is on extending the period that specialist perinatal mental health support is made available beyond one year. I welcome Tess White—a former colleague of ours on this committee—who joins us for the consideration of the petition.

The petition calls on the Scottish Parliament to urge the Scottish Government to amend section 24 of the Mental Health (Care and Treatment) (Scotland) Act 2003 to extend maternal health support beyond one year, to introduce a family liaison function at adult mental health units across all health boards, to introduce specialised perinatal community teams that meet perinatal quality networks standard type 1 across all health boards, and to establish a mother and baby unit specifically in the north-east of Scotland

The SPICe briefing highlights a short inquiry undertaken by the Health, Social Care and Sport Committee in 2021. One of that committee's recommendations—recommendation 26 in its report—was that perinatal mental health services should not be restricted to the one-year period after the birth of the child. In its written submission, the Scottish Government says that it is considering the two-year review of mental health law that was undertaken by Lord Scott, and it expects to provide an initial response by this summer.

The Health, Social Care and Sport Committee report also said that there is a strong and compelling case for the establishment of a new mother and baby unit serving the north of Scotland. The Scottish Government's written submission notes that it consulted on the best way to increase mother and baby unit capacity and says that it will produce a report on its options appraisal in late autumn 2023.

On meeting perinatal quality network standard type 1, the Scottish Government highlighted that it was invested in delivering new services in 11 health boards and expanding services in three. It also noted that the provision model recognised that PQN standards are less easily suited to areas of low population and more rural areas.

Before asking colleagues how we might proceed, I ask Tess White to contribute to our thinking.

Tess White (North East Scotland) (Con): I am here to represent my constituent Maggie Reid, who has worked tirelessly over the past year to advocate for her sister. This is an emotional petition, and it deals with an issue that is of critical importance. I

pay tribute to those two extraordinary women, and I hope that I can do justice to their voices.

Maggie's sister was diagnosed with postpartum psychosis after she had a baby girl, and she was initially treated at the mother and baby unit in the central belt, which was a long way for her to travel from the north-east. However, the treatment was successful and her condition improved. Unfortunately, she had a relapse and she could not be admitted to an MBU because her baby was too old and, instead, she was sectioned at the Carseview centre in NHS Tayside. Maggie shared with me that her sister was frightened, confused and very scared. It was a truly traumatic experience, and she was also separated from her baby at that time.

For many mothers with mental ill health, the 12-month mark is a precipice where the nature of support changes or falls away, but it should not be that way. As you have pointed out, convener, the Scottish Government committed to look at the parameters for perinatal mental health support two years ago, when the Health, Social Care and Sport Committee recommended that mental health support should not be restricted to the one-year period following the birth of a child. Since then, however, it feels like the Scottish Government has been dragging its feet. Recently, I went to the newly constructed maternity hospital in Aberdeen, and I found that there are no plans for any mother and baby units there. That issue needs to be considered now, while that hospital is being constructed. If it is not, we could just build in delays.

No health authority in the north-east is any closer to establishing a mother and baby unit, and research conducted by the Maternal Mental Health Alliance shows that women outside the central belt are missing out on the highest standard of specialist perinatal mental health services, as perinatal mental health services are concentrated in NHS Lothian and NHS Greater Glasgow and Clyde.

I thank the Citizen Participation and Public Petitions Committee for its consideration of PE2017, and I urge the committee to use all the available levers to ensure that women such as Maggie's sister have the access to the treatment and support that they need. The issue must be addressed with urgency, so that no other women experience the trauma that Maggie's sister has experienced.

The Convener: Thank you. In the lifetime of this Parliament, as we have successfully sought to destigmatise issues of mental health, we have brought to light the inadequacies of some of the provision and policies that exist in various fields of life. It seems arbitrary to determine that, irrespective of the personal circumstance of the person concerned, when someone's child reaches the age of one, the ability of that person to be treated as they would have been when their child was not yet one disappears, with—as is the case in the petitioner's sister's circumstance—potentially harrowing consequences.

Do members have any suggestions for further action?

Alexander Stewart: I thank Tess White for her evidence, which has highlighted some areas of real concern. I think that we could further investigate some areas. I

suggest that we write to the Scottish Government requesting an update on how it is progressing recommendation 26 of the Health, Social Care and Sport Committee's report, which Tess White spoke about. We should also ask whether the Scottish Government plans to amend section 24 of the Mental Health (Care and Treatment) (Scotland) Act 2003 and request that its report and options appraisal to expand mother and baby unit capacity be shared with the committee when they are published in autumn 2023. I think that that would give us much more information about where we are and would help to progress the petition.

The Convener: In respect of that last recommendation, in the light of the evidence submitted by Tess White and given that the Scottish Government is considering the issue of establishing a mother and baby unit in the north-east, we could ask what consideration has been given to the incorporation of that unit into a hospital that is currently under design and construction, because that seems to afford an obvious opportunity. It would be interesting to know whether that is being considered and, if it is not being considered, why it is not being considered, and whether the Government believes that not considering it would delay significantly the ability to realise the ambition. Given the lead time to identify suitable premises, if there is an opportunity to do that in the shorter term, we should seize it rather than simply having an aspiration, which might take a long time to fulfil.

Do we agree with the suggestions?

Members *indicated agreement.*

Annexe C: Written submissions

Scottish Government submission of 24 August 2023

PE2017/C: Extend the period that specialist perinatal mental health support is made available beyond one year

Please see the information requested below. This addresses:

- an update on how the Scottish Government has progressed recommendation 26 from the Health, Social Care and Sport Committee's inquiry into perinatal mental health;
- an indication of whether there are plans to amend section 24 of the Mental Health (Care and Treatment) (Scotland) Act 2003; and
- Mother and Baby Unit provision in Scotland.

Update on how the Scottish Government has progressed recommendation 26 from the Health, Social Care and Sport Committee's inquiry into perinatal mental health

Community Perinatal Mental Health Teams have a remit to support women in pregnancy or who have an infant under one year of age, who require secondary mental health care, whether their difficulties arise in pregnancy/postnatal period or are pre-existing. Interventions may continue to be provided by a Community Perinatal Mental Health Team beyond the first postnatal year if the work is likely to be concluded within a defined period and it is in the woman's and infant's best clinical interests for that to happen. In some circumstances, it may be clinically more appropriate for women whose infants are close to 12 months to receive assessment and treatment by their local general adult mental health service. Additionally, there may be circumstances where a new referral beyond 12 months would be seen by the community perinatal mental health team, if there is a clear need and that need is best met by the specialist service.

It is important for Boards to identify the service which is most helpful for the patient, which may sometimes be a Community Perinatal Mental Health Team but could also be Maternity and Neonatal Psychological Interventions (MNPI) or Adult Mental Health Services. We are committed to taking an integrated approach to service provision, reducing barriers to ensure that women and infants get the most appropriate service for their needs and can easily transition between services if needs change.

Indication of whether there are plans to amend section 24 of the Mental Health (Care and Treatment) (Scotland) Act 2003

The Scottish Government recently published our response to the Scottish Mental Health Law Review, setting out initial views on the proposals. We have taken time to carefully consider Lord Scott's recommendations and we will now establish a new Mental Health and Capacity Reform Programme. This will look at how we can update and modernise our mental health and capacity legislation to better reflect

international human rights standards. Alongside efforts to strengthen legislation, the programme will drive action to support decision-making and improve the way that human rights are put into practice across mental health services. It will aim to bring changes that give people greater control over their own lives, care and treatment.

In order to deliver the most effective approach, there needs to be more detailed work undertaken so that we can fully consider and develop any proposals which would seek to change existing provisions including those covered by s.24. Therefore, as part of the Mental Health and Capacity Reform Programme, we will consult with key partners and stakeholders to examine the full range of policy options before making any decision. Not all reforms will require legislative change and we will reserve any final decision until further policy development has taken place.

The Reform Programme will include work to scope options for changes to the Mental Health (Care and Treatment) (Scotland) Act 2003 and we are working to publish an initial plan by the end of year, including likely timescales.

Mother and Baby Unit Provision in Scotland

We have noted that the Committee wishes to see the report from the options appraisal which NHS National Services Scotland (NSS) have conducted to expand Mother and Baby Unit capacity. NSS have been utilising the earlier [consultation report](#) along with other relevant information and discussions with stakeholders as part of the options appraisal process. NSS are currently producing their report and we anticipate delivery of that to the Scottish Government in October 2023. We will update the Committee further upon receiving the report.

In terms of what consideration has been given to the incorporation of a Mother and Baby Unit into the new maternity hospital in Aberdeen, NSS have been assessing possibilities in relation to both existing and new infrastructure as part of the options appraisal process, with a focus on affordability, equity of access, safety and sustainability. Their conclusions and recommendations will be detailed in the forthcoming report.

Perinatal and Early Years Mental Health Policy Team

Tess White MSP submission of 3 April 2024

PE2017/D: Extend the period that specialist perinatal mental health support is made available beyond one year

I thank the Citizen Participation and Public Petitions Committee for its continued consideration of PE2017. We are now one year on from the date my constituent, Margaret Reid, lodged this petition. She has shared with me her concern and frustration that the Scottish Government is no further forward on progressing the issues it raises.

1. Extending the period that specialist mental health support is made available

Ms Reid's overarching concern remains that access to specialist perinatal mental health (PMH) support is limited to the first year following the birth of a child.

The Health, Social Care and Sport Committee's 2021 inquiry into perinatal mental health recommended that access to these services should not be restricted to the perinatal period.

Recommendation 12.23 of the Scottish Mental Health Law Review, published in September 2022, stated that the duty in section 24 of the Mental Health (Care and Treatment) (Scotland) Act 2003 should be "broadened" to allow for a "wide range of in-patient and community supports for parents who need perinatal mental health care and their children."

In June 2023, after this petition was lodged, the Scottish Government published its response to the Scottish Mental Health Law Review. It has undertaken to carry out a Mental Health and Capacity Reform Programme as it believes further research and policy development are required.

There has been no firm commitment from the Scottish Government to update section 24 of the 2003 Act.

2. Perinatal mental health workforce and access to specialist services

The Scottish Government has indicated that mental health interventions could already be provided beyond the first postnatal year if there is clinical need.

However, in response to a written question from Oliver Mundell MSP on 8 December 2023, Minister Maree Todd acknowledged that this is based on "what the service can realistically provide given current caseloads, waits and capacity."

Capacity is a persistent issue in perinatal mental health service provision. A February 2024 briefing on perinatal mental health services by Parent and Infant Mental Health Scotland (PIMHS) and the Maternal Mental Health Alliance (MMHA) highlights that recruitment and retention for the perinatal mental health workforce are "challenges for specialist teams throughout Scotland but are most profound the further North you go."

PIMHS and MMHA point to a postcode lottery in perinatal mental health services which favours those living in proximity to the Central Belt. They have called for "clear, precise steps" on workforce planning for specialist PMH teams. Meanwhile, gaps in access continue – especially for those in rural and remote areas.

PIMHS and MMHA have also expressed concern that the new Joint Strategic Board for Children and Family Mental Health – which replaces the dedicated Perinatal and Infant Mental Health Programme Board – will weaken the focus on perinatal mental

health, which they believe is in a “potentially vulnerable position” in Scotland, jeopardised further by cuts to the mental health budget.

In light of these developments, women and their families need assurances that sustained effort and investment in PMH services by the Scottish Government will continue.

3. Expanding mother and baby unit provision

In November 2023 I requested another update from Minister Maree Todd on establishing a mother and baby unit (MBU) in North East Scotland, following the February 2022 consultation on the options to increase MBU capacity. In the consultation analysis, Aberdeen was heavily favoured as the location for a new unit.

The Minister informed me that the options appraisal has been completed and that the Scottish Government was considering its response. This position was restated in January 2024 in the Minister’s correspondence to the Health, Social Care and Sport Committee providing an update on Perinatal Mental Health and related areas.

In February 2024, the Scottish Government put NHS building projects on hold for up to two years citing budgetary pressures, meaning there is further uncertainty over the expansion of mother and baby units.

4. NHS Tayside’s mental health services

The Independent Inquiry into Mental Health Services in NHS Tayside by Dr David Strang was published in July 2020. In January 2023, the Independent Oversight and Assurance Committee published its Final Report on progress towards implementing the inquiry’s recommendations. It found that NHS Tayside had failed to fully rectify 31 of the 49 issues identified.

Continued oversight of this process is required to ensure that the persistent issues affecting mental health services in NHS Tayside are satisfactorily resolved.