MINUTES OF THE SIXTEENTH MEETING AND ANNUAL GENERAL MEETING
OF THE CROSS PARTY GROUP ON MENTAL HEALTH HELD ON 23
SEPTEMBER 2015 AT 5.30PM IN CR4, SCOTTISH PARLIAMENT

1. PRESENT

Mark McDonald MSP (Chair); Mary Scanlon MSP, Shaben Begum; Shane
Buckeridge; Jude Clarke; Alastair Cook; Alastair Moodie; Chrys Muirhead; Jim
Hume MSP; Alice Gentle; Derek Barron; Aileen Blower; Juliet Brock; Chief
Inspector McCann; Jackie Clark; Mig Coupe; Michael-John De Haye; Jennifer
Fingland; Laura Gibson; Doreen Graham; James Jopling; Elaine Lockhart;
Willie MacFadyen; Tony McLaren; Claire Muir; Chrys Muirhead; Rob Murray;
Hilary Robertson; Aiveen Ryan; Gillian Smith; Emma Youens

In attendance

Laura Hudson (Minutes)
Roch Cantwell
Anne McFadyen
Elaine Clark

2. APOLOGIES

Apologies for absence were received from:

Malcolm Chisholm MSP; Janis McDonald; David Atiyah; Brian Magee; Laura
Hastings; Fiona Thakeray; Stacey Webster; Grant Thoms; Jen Richards;
Linda McGonigle; Robert MacBean; Mary McFarlane; Phil Watson; Susan
Donelly; Mahmud Al-Gailani; Nigel Henderson; Isobel Kerr; Hamish MacLeod;
Alison McInnes; Fiona McLeod.

3. ANNUAL GENERAL MEETING AND ELECTION OF OFFICE BEARERS

Malcolm Chisholm MSP, Mark McDonald MSP and Mary Scanlon MSP were all
re-elected as Co-convenors of the group for a further year.

The Royal College of Psychiatrists agreed to continue to provide the
Secretariat of the group.

The Annual Return would be submitted to the Administrator for the
Parliamentary Standards Committee.

4. MINUTES OF THE MEETING HELD ON 18 JUNE 2015

The minutes of the previous meeting were accepted as accurate.

5. MATTERS ARISING

6. 'HEALTHY START, HEALTHY SCOTLAND – IMPROVING THE MENTAL
HEALTH OF MOTHERS AND BABIES FOR SCOTLAND’S FUTURE’
Dr Roch Cantwell, Consultant Perinatal Psychiatrist & Clinical Lead for the Glasgow Perinatal Mental Health Service and West of Scotland Mother and Baby Unit. Chair of Perinatal Psychiatry at RCPsychiS

Dr Anne McFadyen, Consultant Child and Adolescent Psychiatrist in Hamilton and Chair of Child and Adolescent Faculty at RCPsychiS

Elaine Clark, Nurse Consultant & Professional Nurse Lead for NHS Greater Glasgow & Clyde Perinatal Mental Health Service and West of Scotland Mother and Baby Unit

The group heard from the 3 speakers, please see attached copies of Dr Anne McFadyen and Elaine Clark’s presentations

Two attendees were asked by the convenors to give courtesy to those in attendance, and on failing to do so were requested to leave the meeting.

Mark McDonald MSP thanked all the speakers for their contributions and opened up the floor to questions:

Tony McLaren asked how the campaign will dovetail with the voluntary sector and how paternal mental health fits in. Elaine Clark responded that Bluebell are an active member of Maternal Mental Health Scotland. Dr Roch Cantwell said that a joined-up approach between services and the voluntary sector will be a crucial piece of work for this campaign. Elaine Clark also mentioned the E-learning module available for free on NES’ website, which could be a valuable tool for voluntary organisations.

Jude Clarke asked how it will tie in with the women’s prison service. Roch Cantwell agreed that this is an area that needs attention, suggested linking up at a later date to discuss further.

Jude also asked of the link-up with Clinical Psychology (not expressly mentioned in the briefing paper) as the engagement could be valuable. Roch Cantwell said that whilst not expressly named in the document, this is certainly an area which will be involved. Anne McFadyen added that Child and Adolescent services are served by multi-disciplinary teams, not just Psychiatrists, and she welcomes the partnership with clinical Psychologists.

Alastair Cook, as Chair of RCPsych in Scotland, added that this campaign launch is a starting point and the College is eager to broaden out further and involve multiple parties, as this cause is everyone’s business.

Mary Scanlon MSP asked Anne McFadyen if there is a screening tool available to help detect at risk individuals during pregnancy, and if so, is this something midwives/health visitors have access to? Anne McFadyen responded that midwives are much better attuned these days to recognise those at risk.
Roch Cantwell added that the creation of women-held records include questions that all pregnant women will be asked during their very first meeting which should help to identify those at risk during. Furthermore, maternity services on the whole are better trained now to recognise triggers. He also added that whilst it is not always possible to prevent incidences of mental ill health, early detection is still extremely effective for mothers, babies and their families. Elaine Clark added that tackling stigma is important here, hence the need for a campaign raising awareness that it is ok to say you are struggling, and correcting misconceptions that showing any weakness could mean that your baby will be taken away.

Mark McDonald MSP mentioned the relevance of a recent article from SAMH regarding social prescribing, and how this is a good fit with the campaign. Social isolation can exacerbate conditions and therefore there should be a focus not only on raising awareness, but also the importance of signposting to appropriate community support groups. This is especially important for families with babies with complex needs. Roch Cantwell agreed that this is a very important point and highlighted the current efforts to map voluntary and other available services available in the community.

Gillian Smith, in her role as Director of the Royal College of Midwives, commended the campaign and the E-learning tool available from NES, which they have found to be of great value. She added that midwives try to pick up nuances of behaviour during antenatal stages, however, looming staffing crisis risks having significant impact on their ability to do so. She highlighted the very short-staffed post-natal care available, and the risk this has in damaging opportunities for early intervention. The College would be very happy to support the campaign and lend assistance where possible.

Lindsay Paterson added that the Royal College of Physicians are also keen to support this campaign, and their current President - Professor Derek Bell - has an active interest in maternal mental health.

Hilary Robertson, from Human Development Scotland, would also be keen to contribute on the education side of the campaign, in particular with a focus on infant mental health.

Willie MacFadyen reminded the group that mental health services available for deaf people are still very limited. Gillian Smith commented that Royal College of Midwives will shortly be hosting a speaker on this topic.

Derek Barron added that this campaign links directly with RCN’s December CPG topic, and also felt it was important to mention the link with integration and social work (in particular to break down the misconceptions and fear regarding social workers). Elaine Clark answered that she has been meeting with the Chief Nursing Officer to discuss the role of midwives, health visitors, mental health nurses and nurse practitioners.
Alastair Moodie stressed the importance of promoting emotional literacy, particularly during the pre-natal stage, and of addressing social support needs.

Jude Clarke added that this was an appropriate time to bring up the issues of funding/access to third sector care. Shortages in this area meant that individuals could wait a very long time to be seen, which could be very detrimental, particularly given that pregnancy offers a short window of opportunity. Anne McFadyen agreed with this and stressed the importance of correct distribution of funding and that the campaign’s aim was not targeted solely at mental health services.

Juliet Brock advised that the Mental Welfare Commission are undertaking a study on perinatal healthcare at the moment, and she commended the campaign.

Shane Buckeridge raised the value of schools-based counselling services, and the fact that whilst mandatory in England, Wales and Northern Ireland, this is not currently the case in Scotland. Another member of the group added that whilst there have been successful schemes in place in some regions, funded via community partnerships, however, this funding is being withdrawn and services are already planning exit strategies.

Shane also stressed the importance of reaching out to those who don’t engage with services; and the fact that the connection with midwives/health visitors allows access to an otherwise difficult to reach group.

Mark McDonald MSP thanked everyone for attending and added that he would be putting down a motion for a member’s debate on the topic.

7. DATE AND TIME OF NEXT MEETING

3 December 12.30pm CR2