Parent-Infant Mental Health & Wellbeing
Steering Group: Warwickshire & Coventry

TERMS OF REFERENCE

1. Purpose of Group

To strengthen and ensure equitable and quality mental health and wellbeing support for all parents and infants during the 1001 Critical Days, with a more intense focus on the period from conception to 1 year after birth.

The group will be responsible for driving the design, development and implementation of a parent-infant mental health & wellbeing strategic plan for Warwickshire and Coventry, in co-production with parents with lived experience of perinatal mental health issues. All group members will act as advocates for the Parent-Infant Mental Health and wellbeing agenda, raising its profile within relevant strategic forums and ensuring its integration within key strategic plans.

The group and strategic plan will be tasked with considering the full spectrum of parent-infant mental health and wellbeing support, from prevention up to tier 3-4 mental health support.

2. Background

It is estimated that up to one in five women in Warwickshire and Coventry experience mental health issues in pregnancy or the first year after birth, and more than one in ten expectant or new dads develop mental health issues during this period.

Warwickshire's Smart Start Foundation Project research findings (Jan-May 2016) - from 1,135 parents and carers of children under 5 years of age, and 274 frontline staff who support families with children under 5 years of age - highlighted the need for more specific parent-infant (dyadic/triadic) mental health and wellbeing support and expertise (including professional supervision), and interventions to promote secure attachment - particularly in babies of parents with low mood and anxiety.

These findings support the recommendations of the cross-Government 1001 Critical Days Manifesto (2015) http://www.1001criticaldays.co.uk/manifesto, which counsels on multi-agency coordination in order to promote parent-infant wellbeing and to meet the mental health needs of parents and their infants. The manifesto recommends a parental-infant mental health and wellbeing pathway that: (a) promotes parental self-efficacy, (b) early intervention and prevention of problems from developing or deteriorating, (c) effective, evidence-based interventions, and (d) timely interventions.

On 23 May 2017 a large cross-sectoral, multi-agency 'Parent-Infant Mental Health and Wellbeing' workshop was held in Warwickshire. One of the key recommendations of this event was the need to set up a county-level parent-infant mental health and wellbeing steering group, with representation from all three CCGs across Warwickshire and Coventry. On the request of the Coventry and Warwickshire Mental Health Commissioning Group, this group will cover both Warwickshire and Coventry.

In order to lead on the improvement of parent-infant mental health support for local parents and infants, the Steering Group will feed into a number of strategic forums:

- Coventry & Warwickshire STP Mental Health and Emotional Wellbeing Steering Group
- Coventry & Warwickshire STP Local Maternity System Board
- CAMHS Transformation Programme Board for Coventry & Warwickshire[1]
- Warwickshire Children's Joint Commissioning Board
- Coventry Children's Joint Commissioning Board
- Warwickshire Children's Transformation Programme Board
- Coventry and Warwickshire Mental Health Commissioning Group
- CRCCG and WNCCG Children's Programme Delivery/Matrix Group (PDG.

3. Objectives of the Steering Group

The Steering Group will:

4. Raise awareness of parent-infant mental health issues in order to reduce stigma, prompt mental wellbeing and increase early identification and support for those experiencing mental health issues. Harness behavioural insights approaches and expertise for this purpose, where appropriate.

5. Work with stakeholders to develop a coherent, culturally competent support pathway, with a range of ways to access help in the community, to meet the different levels of mental health and wellbeing needs of parents and their infants in the 1001 Critical Days. This pathway will also need to take account of the needs of vulnerable groups.

6. Develop an appropriate range of robust and evidence-based services to be commissioned in the right place at the right time, to help achieve national and local best practice outcomes for parents and infants.

7. Ensure consistency of parent-infant mental health and wellbeing support across Coventry and Warwickshire by adopting and promoting national perinatal and infant mental health and developing effective supervision model between agencies.

8. Ensure effective joined up working between all professional groups and agencies involved in the care of parents and infants in the 1001 Critical Days standards, by establishing a professional network and forum for coordination and shared learning.

9. Empower a skilled multi-agency workforce by providing them with additional training so that they can provide better care for parents with mental health issues in the 1001 Critical Days.

10. Empower a skilled multi-agency workforce to be able to support and help nurture healthy parent-infant relationships (i.e. dyadic/triadic work), particularly for those parents experiencing perinatal mental health issues.

11. Produce a Warwickshire and Coventry Parent-Infant Mental Health & Wellbeing strategic plan. This will require the group to prioritise recommendations and outcomes from the 23 May 2017 Parent-Infant Mental Health and Wellbeing' workshop, alongside consideration of MABIM mapping findings.

12. Establish a parent-infant mental health & wellbeing service users network to help co-produce and oversee the delivery of the strategic plan.

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[1] This is the board that leads on the CAMHS Transformation funds from NHSE. It is also the main board for CAMHS developments in Coventry

13. Accountability of Steering Group

The Steering Group will:

a) be directly accountable to the Coventry and Warwickshire Mental Health Commissioners Group

b) report directly to the Coventry and Warwickshire Mental Health Commissioners Group

c) have reporting links to:

- Coventry & Warwickshire STP Mental Health and Emotional Wellbeing Steering Group
- Coventry & Warwickshire STP Local Maternity System Board
- CAMHS Transformation Programme Board for Coventry & Warwickshire
- Warwickshire Children's Joint Commissioning Board
- Coventry Children's Joint Commissioning Board
- Warwickshire Children's Transformation Programme Board
- Coventry and Warwickshire Mental Health Commissioning Group
- CRCCG and WNCCG Children's Programme Delivery/Matrix Group (PDG) – chaired by Jo Dillion

d) work in equal partnership with the parent-infant mental health & wellbeing service users network, once it is established.

The group may:

e) set up time limited multidisciplinary working sub-groups to include user members to work on specific priorities within the strategic plan and report back to the Steering Group. These sub-groups may co-opt members as appropriate.

14. Functioning of Steering Group:

a) A quorum shall be one third of the terms of the full core membership, including deputies.

b) The terms of reference will be reviewed in 12 months. Proposed amendments to the terms of reference shall be circulated to all members in writing at least one month before the meeting at which such amendments are to be considered.

c) The group may at times have to consider confidential information or issues that are commercially sensitive. Members are required to declare known conflicts of interest prior to commencement of meetings.

d) Agendas are to be circulated at least seven days before each meeting. Any members may ask for items to be included on the agenda.

e) The minutes of the meetings will be considered as public documents. They will be circulated to members and be available to others on request.

f) The group will be given training on co-production and will be required to use Smart Start 'Making It Real Markers' (see Appendix) to monitor the quality of the co-production experience with partners and the parent- infant mental health & wellbeing service users network.

15. Membership of Steering Group

The membership of this group will include cross-sectoral commissioners, clinicians, managers, public health practitioners, third sector organisations and parents with lived experience from across Warwickshire and Coventry.

Each member of the group will need to be the nominated representative from their organisation. They will be responsible for disseminating information as appropriate back to their respective management, clinical and decision making groups/arrangements.

Name	Role	Organisations
Paula Mawson	Health Improvement Commissioning & Performance Lead, Mental Health	Public Health, WCC
Claire Taylor	Health Improvement Commissioning & Performance Lead, Mental Health	Public Health, WCC
Kate Sahota/Sophy F-L	Commissioning Lead, Health Improvement (Children & YP)	Public Health, WCC
Sue Frossell/ Christina Walding/Harbir Nagra	Consultant in Public Health /Commissioning Lead, Health Improvement for early Years, Children & YP/ PH Programme Officer	Public Health, CCC
Jane Fowles/Adeola Agbebiyi	Consultant in Public Health Public Health/ Registrar for Mental Health	Public Health, Coventry
Andrew Sjurseth	Strategic Commissioning CAMHS	Strategic Commissioning, WCC
Michelle Rudd [TBC]	Warwickshire Emotional Well-being & Mental Health for CYP Service	CWPT
Jak Lynch [TBC]	CAMHS Programme Manager	Children's Joint Commissioner, CRCCG & CCC
Lisa Lissaman	Mental Health & Autism Commissioner	Strategic Commissioning, WCC
Marina Kitchen/Monika Rosanski	Service Manager: Children & Families Transformation/ 0-5 Redesign Coordinator	WCC
Vic Jones	Children's Commissioner	Strategic Commissioning, WCC
Rachel Tompkins/Katie Coates	General Manager, SWFT	Health Visiting Service and FNP Service
Mary Haider	Coventry Health Visiting Service	CWPT
Angela Doherty	Matron for community midwifery (secondment)	Midwifery, UHCH
Alison Talbot	Head of Midwifery	Midwifery, GEH
Sarah Noble	Head of Midwifery	Midwifery, SWFT
Helen Stephenson	Integrated Community Services Manager Head of IAPT, Lifestyles, MH Triage and COPE Services	CWPT
Kirstie McKenzie	Consultant Clinical Psychologist PMH Service	SWFT

Sue Drewitt	Mental Health Service Team Manager	CWPT
Emma Adams and/or Dr Sukhi Dhesi	Commissioning Manager GP Mental Health Lead	South Warks CCG South Warks CCG
Anne Allan and/or Sue Turner	Commissioning Manager CCG Clinical Mental Health Lead	North Warks CCG North Warks CCG
Eleanor Cappell	Senior Commissioning Manager, MH & LD	Coventry & Rugby CCG
Dr Andrew Smithers	GP Mental Health Lead	Coventry & Rugby CCG
Zoe Harwood [TBC]	IDS 0-5 Strategic Manager	Integrated Disabilities Service, WCC
Elizabeth Pfute/Jessica Brooks	Service User Involvement Co-ordinators	Making Space, (Warks only)
[TBC]	Service User Involvement representative	Coventry
Charles Barlow	Localities & Partnerships Team Manager (North)	Communities Group, WCC
CVS Warwickshire	Membership to be agreed by Steering Group	
CVS Coventry	Membership to be agreed by Steering Group	
Housing sector representation	To be decided by Steering Group	

Others to be co-opted onto the group and/or any sub-group, as required, at the discretion of the Chair

16. Roles and Responsibility of Group Members

a) Members of the group are expected to be able to represent the views of other colleagues that they work with, and feed back to them. This will ensure that infants and parents needs are as broadly represented as possible which should ensure that they receive the most appropriate care to meet their mental health and wellbeing needs.

b) It is expected that members will attend the group on a *regular* basis.

c) If a named member/s nominates someone to represent them at a group meeting, the member/s needs to ensure the representative is of sufficient seniority to make decisions and represent the views of the member/s. The representative needs to effectively feedback all information to the absent member/s, but the member/s should also take responsibility for reading related minutes and outputs from each meeting.

d) All group members should be respectful to each other at all times.

17. Frequency and recording of Steering Group meetings:

- Meetings will initially take place quarterly and will then be reviewed, once the group and its sub-groups are well established.

- Minutes will be taken at all meetings and distributed.

Smart Start

Warwickshire 0-5 Strategy Programme
Co-Production: **From Words to Action**

Co-production means making something happen together

Co-production is about working in partnership with parents, carers, families and communities who use 0-5 services. It means recognising and utilising their lived experience and expertise to help improve service provision, thinking of solutions to needs and developing early help innovations.

Co-production Principles

Equality: Co-production starts from the idea that no one group or person is more important than anyone else and everyone has skills, abilities and time to contribute.

Diversity: Co-production should be as inclusive and diverse as possible. Particular efforts to include seldom-heard groups are important.

Accessibility: Making everything accessible is the way to ensure that everyone has an equal opportunity to participate fully in the way that suits them best.

Reciprocity: Reciprocity means people get something back for putting something in – this should always involve a feeling of having made a difference, but may also include something tangible, like reward or reimbursement.

What is important? 10 Top tips

1. Co-production needs to start as an idea that blossoms with everybody involved having an equal voice.

2. Come to the table with a blank agenda and build it with 0-5 parents, carers, families and communities who use your services

3. Involve them in all service aspects: planning, development, delivery, monitoring etc

4. In order to achieve meaningful, positive outcomes, everybody involved must have the same vision, from front line staff to management and strategy group/board members

5. Start small and build up to bigger projects, letting people lead, not professionals.

6. Acknowledge that a range of skills are needed for co-production

7. Recruit the right people that support co-production

8. People who use 0-5 services, carers and families should be clear about what their expectations are and be fully engaged in the process

9. Those who use 0-5 services know what works, so you can't get it right without them.

10. Don't take responsibility for solving every problem—allow the group to find collective solutions.

How can you support co-production?

▸ Ensure appropriate and adequate resources are available to support co-production (expenses, easy read and needs).

▸ Ensure frontline staff have everything they need to for co-production (time, flexibility).

▸ Ensure no one group/person is more important than anyone else. Everyone can contribute given the right support.

▸ It is important to have good facilitation and listening skills, and access to reflect and act upon what is heard.

▸ Acknowledge and respect what people say.

▸ Ensure everything in the co-production process is accessible to everyone taking part.

▸ Before you start the work, decide together how you are going to work and what will make it successful, then stick to it.

▸ Accept that sharing power means taking risks.

▸ Learn to share power. Doing things differently means we can work across a whole range of issues that confront us.

▸ Work with the group to support a clear set of identified values with a collective sense of direction.

▸ Use plain English; no jargon or acronyms

▸ Create the expectation that people who use 0-5 services will be involved in every aspect of service planning, design and delivery at every level.
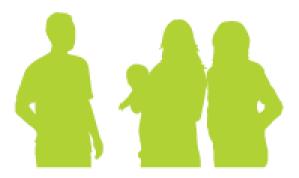
(Adapted from Think Local Act Personal 10 Top Tips)
See Warwickshire County Council's 'Co-Production: A Guide for Staff'. For a copy, contact: lauraedwards@warwickshire.gov.uk

Making it Real Markers

These statements articulate what good co-production should feel like to those involved.
They can also be used to monitor and measure the co-production experience.

Respecting People's Contributions

"I feel welcomed and am treated with respect by everyone in the group"

"I have the opportunity to share my views, and feel people are actively listening to what I have to say"

"I feel confident that there is a culture of openness and honesty within the group"

"I feel my knowledge and life experience are recognised and valued"

Confidence and Personal development

"I am supported to build my skills and confidence to participate in co-production activities"

"I feel I am able to confidently present to a range of audiences"

"I feel empowered to support and represent other parents and can access peer support when required"

"I am given information and knowledge to enable me to make an informed contribution"

Making the process work: How, What, Where and When

"I receive clear information in good time, in a form that works for me (with unfamiliar terms/jargon explained)"

"I feel I am fully supported to prepare for meetings and other events"

"I am able to actively participate in meeting and events, because they are held in locations and at times that are convenient for me"

"I am supported to participate in co-production activities by being able to access appropriate crèche facilities and payment of travel cost"

Making a difference: How do we know

"I receive prompt feedback about the contribution I've made and how my input will be used"

"I understand how and why decisions are made, and feel my views have been given fair consideration"

"I have opportunities to be actively involved in all stages of the process, including the review and assessing of impact"

"I receive on-going communications that keep me informed of progress at all stages"

These 7 statement were co-produced with parents and frontline workers who attended the 'Co-Production: From Words to Action' workshop on 17 September 2015 at Stockingford Children's Centre.

Updated TOR from 2 November 2017 meeting: author SF-L