

**MENTAL HEALTH GUIDELINE  
MATERNITY SERVICES**

NAME.....  
DOB.....  
ADDRESS.....  
.....  
.....  
HOSPITAL NO.....  
NHS NO.....  
GP.....

**E.D.D.....PARITY.....**  
**TEL:.....**

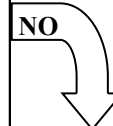
**Midwife Assessment**

Questions at antenatal booking:

- During past month, have you been bothered by feeling down, depressed or hopeless?
- During the past month, have you been bothered by having little interest or pleasure in doing things?

If **YES** is this something you feel you need or want help with?

- Have you had depression before or currently?
- Have you had issues with self harm before or currently
- Have you had anxiety or panic problems before or currently?
- Have you had severe mental health problems after a pregnancy such as puerperal psychosis?
- Have you had a diagnosis of Bipolar disorder/Manic Depression or schizophrenia?
- Have you had a problem with eating disorders, behavioural problems or OCD before?
- Is there anything in your life (present / past) which might make the pregnancy difficult?  
i.e. sexual abuse, domestic abuse, drug/alcohol issues.
- Is there a family history (including father/partner) of mental illness?



**Midwifery Management**

- Usual midwifery care
- Antenatal education re: postnatal illness
- Ongoing assessment of mental health issues and referral if required

**YES**

**What kind of help do you / did you receive?**

**Emergency Concerns, notify:**  
GP and refer to  
Single Point Access (this includes Crisis Team) Secondary Mental Health services (24/7 number 03001239015)  
**Consider Safeguarding**

**Support from Midwife, Health Visitor, Brief talking therapies: counselling/CBT**

**GP and Antidepressants**

**Psychiatric Outpatient Clinic Mental Health Services e.g CPN, Mental Health Social**

**Psychiatric inpatient care/Crisis Team**

**Obstetric/Midwife Management**

- If medication in pregnancy  
MEDICATION.....  
for Obstetric opinion / appointment—DB ANC
- Antenatal education re: postnatal illness
- Consider additional midwifery appointments/listening visits—ask about mental health each visit
- Liaise with GP
- Liaise with Health Visitor, consider antenatal visit from Health Visitor
- Suggest children's centre, voluntary agencies / support groups
- Refer Mental Health Midwife
- Contact First Step or SPA for advice /referral

Single Point Access (SPA) 0300 123 9015 (24/7 number)  
First Step 0300 123 9122 (9am to 5pm number)

Midwife to forward copy to:

- GP
- Health Visitor
- Mental Health Midwife *to contact: YES / NO*

**Are you still seeing someone?**

**NO**

**YES**

- Inform GP
- Inform Consultant Obstetrician-DB
- Offer referral via SPA to CMHT if previous serious mental health problem
- Management Plan
- Regular CMW input
- Refer Mental Health Midwife
- Inform Health Visitor

- Inform Care Co-ordinator (lead Mental Health Practitioner)
- NAME.....
- MEDICATION.....
- Follow agreed Management Plan
- Refer Consultant Obstetrician DB
- Will need regular CMW input
- Refer Mental Health Midwife
- Inform GP / Health Visitor

Psychiatric Service to assess in antenatal period and determine Management Plan with woman—Plan to be forwarded to GP, Midwife, Obstetrician, Health Visitor

Please circle answers to questions + additional information on reverse as necessary

Reviewed by.....

Date.....



