

SITM: Perinatal Mental Health (PMH)

SECTION 1: CAPABILITIES IN PRACTICE

PMH CiP 1: The doctor optimises the care of the pregnant woman through their understanding of the commonly encountered perinatal mental health issues and recognition of major psychiatric illness.

Key Skills	Descriptors
Is able to counsel the woman with mental health issues who wishes to embark upon pregnancy	<ul style="list-style-type: none"> Is able to discuss mental health issues with women who wish to embark upon pregnancy and assess the potential impact on her pregnancy and the impact of pregnancy on her mental health. Reviews pre-pregnancy drug therapy and advises where modifications should be made.
Is able assess the mental health needs of women in pregnancy	<ul style="list-style-type: none"> Can make an assessment of the pregnant woman presenting with a history of mental health issues and liaise with the perinatal mental health services to make a management plan. Can make an assessment of the pregnant woman presenting with risk factors perinatal mental health issues and liaise with the perinatal mental health services to make a management plan. Can make and assessment of the pregnant whose previous pregnancies were complicated by pregnancy induced mental health issues and liaise with the perinatal mental health services to make a management plan. Is able to recognise significant deteriorations in the mental health of a pregnant woman and can access the appropriate acute services. Has experience of non- pregnancy mental health assessment and support.
Is able to support the woman with severe perinatal mental ill-health	<ul style="list-style-type: none"> Recognises severe perinatal mental health issues including puerperal psychosis. Liaises with the perinatal mental services to optimise the care of the woman in both the antenatal and post-natal period. Is able to support the ongoing care of the woman in a mother and baby unit (or equivalent when this is not available locally). Works with primary care and local specialty teams in the community and hospital settings to optimise outcomes for the mother and her baby.



Supports the woman with obstetric PTSD	<ul style="list-style-type: none">• Explores the woman's birth history and understands the areas of trauma.• Helps her understand events and gives clarity.• Recognises when referral for therapy e.g CBT is needed and refers to appropriate services.
Evidence to inform decision	
<ul style="list-style-type: none">• Reflective Practice• NOTSS• TO2• CbD• Mini-CEX	<ul style="list-style-type: none">• RCOG Learning• Local and deanery teaching• Attendance at appropriate courses and conferences• Participation in perinatal mental health clinic and MDTs• Clinical attachment to a Mother and Bay unit• Attendance at non-obstetric psychiatry clinics• Log of cases and outcomes
Knowledge criteria	
<ul style="list-style-type: none">• Factors in personal and family history increasing the risk of mental ill health• The effect of pregnancy and new parenthood on pre-existing mental ill health• The effect of pregnancy and new parenthood on precipitating psychiatric illness de novo• The legal issues around mental health – Mental Health Act and consent, child protection• The prevalence, effects of pregnancy, management strategies and prognosis of<ul style="list-style-type: none">○ Chronic psychotic condition○ Mood disorder: chronic depression /anxiety○ Bipolar condition○ Postpartum psychosis• Recurrence risk and the management of pregnancies in women with a history of pregnancy induced/related psychiatric disease• Local psychiatric services for pregnant women, or those who have recently given birth, including mother and baby unit• Structure of local psychiatric services and the role of community and hospital based components of this service along with the acute and chronic pathways for care• Differences in clinical manifestations and management of mental illness and personality disorders	

PMH CiP 2: The doctor understands the role of psychoactive medication on pregnancy and can optimise the safety of mother and baby.

Key Skills	Descriptors
Can advise on the drugs commonly used in the treatment of mental health issues in women who are pregnant or who wish to be pregnant	<ul style="list-style-type: none">• Is familiar with the common drugs that can and cannot be used safely during pregnancy.• Is familiar with the common drugs that can and cannot be used safely in breast feeding.• Discusses with the woman any significant risk posed by continuing or discontinuing drug therapy.



		<ul style="list-style-type: none"> Is able to advise on the best treatment regime for women who need to continue drug therapy throughout pregnancy and the postnatal period. Is aware of the impact of drug therapy on the woman and the neonate and discusses risks and benefits with the woman.
Evidence to inform decision		
<ul style="list-style-type: none"> Reflective Practice NOTSS TO2 CbD Mini-CEX 		<ul style="list-style-type: none"> RCOG Learning Local and deanery teaching Attendance at perinatal mental health MDT Log of cases and outcomes
Knowledge criteria		
<ul style="list-style-type: none"> The pharmacology and the maternal, fetal, neonatal and long-term effects of tricyclics, SSRIs, phenothiazines, butyrophenones (e.g. haloperidol), benzodiazepines, lithium and carbamazepine The role of non-pharmacological treatments and their application to the management of pregnant people The risks in continuing and stopping psychoactive drugs in pregnancy and breastfeeding and how to balance these risks in an individual How to minimise impact of therapy on the neonate 		

SECTION 2: PROCEDURES

There are no procedures in this SITM.

SECTION 3: GMC GENERIC PROFESSIONAL CAPABILITIES

Mapping to GPCs
Domain 1: Professional values and behaviours
Domain 2: Professional skills <ul style="list-style-type: none"> Practical skills Communication and interpersonal skills Dealing with complexity and uncertainty Clinical skills (<i>history taking, diagnosis and management, consent; humane interventions; prescribing medicines safely; using medical devices safely; infection control and communicable diseases</i>)
Domain 3: Professional knowledge <ul style="list-style-type: none"> Professional requirements National legislative requirements The health service and healthcare systems in the four countries



Domain 4: Capabilities in health promotion and illness prevention

Domain 5: Capabilities in leadership and teamworking

Domain 6: Capabilities in patient safety and quality improvement

- Patient safety
- Quality improvement

Domain 7: Capabilities in safeguarding vulnerable groups

SECTION 4: MAPPING OF ASSESSMENTS TO PMH CiPs

PMH CIP	OSATS	Mini-CEX	CbD	NOTSS	TO1/ TO2	Reflective practice
1: The doctor optimises the care of the pregnant woman through their understanding of the commonly encountered perinatal mental health issues and recognition of major psychiatric illness		X	X	X	X	X
2: The doctor understands the role of psychoactive medication on pregnancy and can optimise the safety of mother and baby		X	X	X	X	X