

Husbands and Families need this information !

An independent investigation by the Patients Association found over 50% of Primary Care Trusts are failing to implement national care quality standards and are failing to provide the written information to mums, dads and the families of those suffering Postnatal Depression that's required.

Even where specialist services do not exist there are treatment options you should be aware of and information to help you that should be made available.

This leaflet is to help you understand your rights, and the checklists help you ask for and obtain the support you need.

Rights of the Patient – Treatment Options

Patients have the right to be treated with a professional standard of care, by appropriately qualified and experienced staff.

You have the right to drugs and treatments that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you.

You have the right to be given information about your proposed treatment in advance.

Treatment Options

NHS National Service Framework – Maternity Standard 11
Seriously ill women, whose needs cannot be met by primary care, will require the assistance of:

1. Specialist Perinatal Psychiatric Services
2. Admission to a Specialist Mother and Baby Psychiatric Unit

NICE Guideline (CG90) – Depression in Adults

3. Admission to an acute inpatient unit, is traditionally how depression with serious risk to self (suicide) is managed
4. Crisis Resolution and Home Treatment Teams (CRHTTs) intensive home-based treatment for sufferers of depression.

NICE state there is insufficient evidence to determine the value of CRHTTs and the main benefit is cost savings against admission. Hence the clinical need when treating acute perinatal mental illness for specialist perinatal psychiatric services.

“I suffered with PND, I thought I was going mad, it was a terrible time and most of it I went through on my own! I eventually got help through medication and counselling and when my daughter was two I had fully recovered.”

Rights of Patient and Carers – Informed Consent

To be able to give valid consent to treatment is a fundamental right and absolutely central in all forms of health care. This is especially important when a person has severe depression.

So a patient can make “informed decisions” they need access to impartial, evidence based, accurate, readable, information.

Informed Consent Checklist

The care worker (or CPA Care Coordinator) who performs the initial patient assessment is also responsible for writing up the care plan and providing information to the patient, carer and family who are giving support.

The Care Worker (or CPA Care Coordinator) should ensure:

- A person with depression can give meaningful and informed consent before treatment starts.
- Consent is based on the provision in advance of clear information about proposed treatment, risks and options
- Information provided should be in writing and include:
 - Any alternative treatments which may be available
 - Any significant risks
 - The risks involved in doing nothing
 - What any intervention comprises
 - What is expected of the person while having treatment
 - What are the likely outcomes (including any side effects)
 - Inform people with depression about self-help groups, support groups and other resources
- Comprehensive written information is available to families and/or Carers and should include:
 - Information on depression and its management,
 - How to support the person suffering depression,
 - Local family or carer support groups and Voluntary organisations,
- Carers are informed of their rights and offered a Carers Assessment
- Confidentiality and the sharing of information and negotiate between the person and their family or carer

“I received no information on treatment options or on how to care for my wife when the crisis team assessed her. I did not know what help to ask for, 10 days later she committed suicide ____and it was too late to ask”

Mental Health (Risk) Assessments

Anyone experiencing mental health problems is entitled to an assessment of their needs by a mental healthcare professional.

The Care Programme Approach (CPA) is a particular way of assessing, planning and reviewing someone's mental health care needs. Someone should get CPA support if they:

- are diagnosed as having a severe mental disorder
- are at risk of suicide, self harm, or harm to others
- have parenting responsibilities

The CPA care coordinator is responsible for:

- the assessment and planning process
- writing the Care Plan
- discussing and agreeing the Care Plan
- providing written information
- informing the carer of their rights

Care Plans

People who don't meet the criteria for CPA support won't be assigned a CPA coordinator. However, they should still expect an assessment of their needs, care planning and reviews of care plans by an appropriate health care professional.

Every mental health patient should be involved in:

- discussing choices for care and the support available
- the assessment of their needs
- the development of the Care Plan to meet those needs.

The Care Plan should be a formal written document that:

- details the treatment and care that has been agreed
- details the expected outcomes of treatment
- details any risks and actions to be taken
- details what should happen in an emergency or crisis.
- identifies the Carer and the Care Coordinator

The care coordinator should make sure that the care plan is reviewed regularly and consider whether the patient should be transferred to CPA support.

Care Pathways

The Care Pathway is an important technique for continuous quality improvement in healthcare. It provides evidence that multi-disciplinary care is provided and shows clear, evidence based protocols are in place.

- If a woman is given a copy of her own care pathway and it is explained to her, it will enable her to understand exactly how to access additional services should the need arise.

Carers' (Risk) Assessments

If you are looking after someone with mental health problems on a regular and substantial basis, you have a right to have a carer's assessment. You have a legal right to be told you are entitled to an assessment and this assessment should take place before you accept being a carer.

Risk assessments of carer's are key to ensuring those who provide care have the ability and capability to do so. Guidance by the Department of Health details you are a carer if you're looking after someone:

- ❑ With mental health problems who is on the Care Program Approach
- ❑ With mental health or neurological problems waiting for, or trying to prevent, the next crisis.

Department of Health guidance says that following an assessment of your own needs as a carer, that you should have your own written care plan that includes:

- ❑ Information about the mental health needs of the person you are looking after,
- ❑ Information about what would happen in an emergency.
- ❑ How your own physical and mental health needs will be met.
- ❑ Any advice you need on financial, employment or housing matters
- ❑ Arrangements for you to take a break and have social support.

You should be kept up to date and involved in the care plan for the person you're looking after. In extreme cases, where your health or safety may be at risk, you should be given information whether or not the person you're looking after has agreed to it.

"Supporting someone with a mental illness is one of the biggest challenges."

Want more help and information?

If you have an electronic copy of this leaflet click on the links otherwise Google the titles in blue

NHS Choices Carer Rights

- > <http://www.nhs.uk/carersdirect/guide/rights/page/carers-rights.aspx>

NHS Choices Carers Assessments

- > <http://www.nhs.uk/CarersDirect/guide/assessments/Page/Carersassessments.aspx>

NHS Choices Care Program Approach

- > <http://www.nhs.uk/carersdirect/guide/mental-health/pages/care-programme-approach.aspx>

NHS National Service Framework Maternity – Standard 11:

- > http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_4094336

Screening and Assessing Mental Illness in Mums

"I suffered severe depression after the birth of my first child and I am waiting for an ante-natal assessment and care plan to be written. Now 10 days before the birth of my next child I have not been told what this means and I don't know what to expect"

National Service Framework – Maternity Standard 11

All NHS maternity care providers have in place joint-working arrangements for direct access to a perinatal psychiatrist.

All NHS maternity care providers have in place policies and protocols for identifying and supporting women who are at high risk of developing a serious postpartum mental illness.

Health Visitors are required to ensure they receive handover information from the appropriate midwife and where relevant this details any risk factors for postnatal depression or puerperal psychosis, previous history or current diagnosis and any care plan information if necessary.

Midwives, Health Visitors and all Care Professionals should be following quality standards and clinical guidelines to screen mums and identify the risks of any occurrence or recurrence of mental health illness during or after pregnancy.

Pre Birth Care.

- ❑ All pregnant women are provided with information that helps them disclose and discuss mental health issues.
- ❑ All pregnant women are asked about previous history of mental illness and/or family history of mental illness
- ❑ Each woman identified as at risk of severe mental illness has a written plan of agreed multi-disciplinary interventions and actions to be taken.

Postnatal Care

- ❑ Each woman has an evidence based health and social needs assessments performed before week 12

NICE Guidelines (CG90) – Depression in Adults:

- > <http://www.nice.org.uk/nicemedia/live/12329/45896/45896.pdf>

Care Pathways and Managed Maternity Care Networks

- > http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_4967010

Care Programme Approach

- > http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/DH_083650

4Children

- > www.givemestrength.org.uk

Family Action

- > <http://www.family-action.org.uk/home.aspx?id=11578>

Joanne (Joe) Bingley Memorial Foundation

- > <http://www.joebingleymemorialfoundation.org.uk/>

"Supporting someone with a mental illness is one of the biggest challenges."

Be informed and know what to ask for

Severe Postnatal Depression and Puerperal Psychosis

A fact sheet for dads, carers and families and a checklist for Care Workers

Normally PND will occur in the first 10 to 12 weeks after birth but it can occur anytime in the first year and can range from the mild to the very severe.

Over 22,000 mums suffer from either Severe Postnatal Depression or Puerperal Psychosis and for them the risks to themselves and baby are extremely high.

They need the specialist perinatal mental health care as described in NHS Service Frameworks and NICE Care Quality Standards.

50% of Primary Care Trusts have failed to commission the specialist perinatal psychiatric services as recommended by NICE clinical standards and NHS Service Frameworks

"I am currently going through severe post natal depression, and I have been met with so much misinformation through different GP's, counsellors and Mental Health care workers."

The information in this leaflet is taken directly from NHS Policies and Care Quality Standards that patients and their families should expect healthcare professionals to adhere to.

"To all of you who are suffering now please believe me there is light at the end of tunnel."



www.dadsmatteruk.org

Dads Matter UK

Supporting Dads and Mums suffering from Anxiety, Depression and Post-traumatic Stress