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| To: SOCIAL WORK (OPERATIONS AND SERVICES) SUB COMMITTEE | | Subject: COATBRIDGE INFANT MENTAL HEALTH PROJECT |
| From: DIRECTOR OF SOCIAL WORK | | |
| Date: 5 OCTOBER 2004 | Ref: MB/KL | |

1. PURPOSE OF REPORT / INTRODUCTION

This report informs committee on the development and progress of the Infant Mental Health Project in Coatbridge.

2. BACKGROUND

- 2.1. The Infant Mental Health Project is a multi-agency, professional project designed as an early intervention to support parents and families. Building upon a systemic approach it endeavours to identify risk factors in the ante-natal period, which can often contribute to post natal depression, low parenting capabilities and poor outcomes for children.
- 2.2. The project has endeavoured to provide support to these parents and families by designing a continuum of supportive programmes. The national programme action plan 2003 - 2006 from the Scottish Executive identifies infant mental health as one of it's national priorities.
- 2.3. This project endeavours to strengthen the inter-agency work between a range of professionals within the Coatbridge area. It is targeted at children under 5 and in particular those most vulnerable in our communities. The project has witnessed a significant shift in the day to day activity of Health Visitors in particular and has provided a platform for local planning.
- 2.4. SIP funding of £48,000 was secured in 2003 to act as a catalyst to enable this development to move forward.

3. PROPOSALS / CONSIDERATIONS

3.1 A Steering Group has been established to oversee the project. The steering group is a multi-agency, multi-disciplinary group with representatives from the following;

- Infant Mental Health Project Co-ordinator
- Psychologist
- LHCC Manager
- Child and Family Clinic
- Social Work
- South Coatbridge SIP
- Community Learning and Development
- Health Promotion Representative

- Education / Community Schools
- User representative / Health council representative

3.2 The steering group's purpose is to facilitate the following;

- Provide a focus of direction for the project by overseeing the process of design, development and continuum of supportive services. Building on existing good practice and assisting the shift towards an integrated service delivery.
- Ensuring communication links are established and maintained between agencies.
- Providing a forum for the development of multi-agency training / awareness.
- Overseeing the evaluation process and agreeing any changes in direction according to identified need.
- Monitoring the production of regular reports from the service.
- Supporting and giving direction to the project team.
- Providing a strategic link to the planning forum for each agency to raise awareness of the project and its work.

4. PROGRESS TO DATE

4.1. A service directory and parent information pack has been made available to parents.

4.2. A Health Visitor's Clinic review group has facilitated a new approach to the monitoring and assistance provided to parents.

4.3. A core programme for vulnerable families has been developed to offer a range of parenting programmes for vulnerable families. These include the following;

- Baby massage - this has occurred within two health visiting clinics within Coatbridge.
- Pram to primary - a positive parenting behavioural approach - delivered by Sure Start (home link), Health and community learning and development. With training cascaded to Health Visitors.
- The Solihull approach - is an integrated model and a comprehensive resource pack for Health Visitors and care professionals who work with families and children under 5.
- Mellow babies - this is a positive approach to parenting which is targeted in engaging those parents who have experienced a less than positive upbringing themselves.
- First time parenting - a parenting course for first time mothers / fathers.
- Living with tots - a parenting course provided solely for fathers.

4.4. The project has also developed links with the community schools agenda and has also secured a research post to ensure that "what works" is secured and consolidated.

5. FUTURE ACTION

5.1 A sub-group has been developed to carry forward an audit and evaluation of the progress made to date. A link has also now been developed with midwives to strengthen their contribution at the initial stage following the birth.

5.2 Links have also been made with the Community Addiction Team to ensure that their case loads are reviewed and considered along with the "Getting Our Priorities Right" protocol (reducing the risk of Child Protection)

5.3 Health Visitors are also taking forward vulnerability profiles with families to ensure there is liaison with the Social Work Department.

5.4 In summary therefore the project is about the following

- Social Inclusion - strengthening communities and parents.
- Tangible support to those most in need, to do the most important difficult and demanding tasks that life provides; ie parenting.
- A preventative strategy.
- An integrated approach. Working together in partnership in line with the Executive's recommendation in relation to child protection services.
- A project focused on better results and better outcomes for service users / children.

6. POLICY / PERSONNEL / FINANCIAL IMPLICATIONS

6.1. The infant Mental Health Group illustrates the need to co-ordinate and align services between partner agencies. There are implications in relation to ensuring that Early Years Services and Early Intervention is reintegrated. This project provides a useful platform.

6.2. SIP Funding of £48, 000 was secured at 2003 to assist with development of the project.

7. RECOMMENDATIONS

7.1. Committee is asked to:

- (i) note the contents of this report
- (ii) note the progress made to date and the developments within this service



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Date: 08/09/04

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