

Buffy Williams, MS
Chair of the Children, Young People and Education Committee
Welsh Parliament,
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1st July 2025

Re: Serious concerns about perinatal mental health in Wales

Dear Buffy Williams, MS

We are writing to you, with support from the perinatal mental health sector, to express our serious concerns regarding the future of perinatal mental health provision in Wales. We feel that the recent proposal by NHS Wales Performance and Improvement to disband the Perinatal Clinical Implementation Network and National Clinical Lead role and replace it with a Community of Practice/Peer Group, raises significant issues.

We fear that this change will negatively impact service development and delivery, quality assurance, joint working, training, and the vital support available for new and expectant parents and their babies struggling with their mental health. This proposal would not only impact on specialist perinatal mental health services, but also on the whole system that supports families in the perinatal period. This includes health visiting, maternity, neonatal, local authorities and the third sector. The Perinatal Clinical Implementation Network provides the critical link between services across the pathway and specialist commissioners, and Welsh Government. This proposal fails to recognise the crucial work of the network in bringing the perinatal mental health system together to protect and help give babies the best start in life. The proposal would also mean that services across the perinatal system would have no formal voice at Executive level within NHS Wales Performance and Improvement.

A Backward Step in National Progress

This proposal would put Wales out of step with other parts of the UK leaving us without a Perinatal Mental Health Clinical Lead and national focus to drive forward progress to support parents and their families. This will be a giant step backwards. Having a perinatal mental health clinical network in Wales was a key recommendation from the fifth Senedd's Children, Young People and Education Committees Inquiry into Perinatal Mental Health¹.

The Committee recommended that Welsh Government should establish a network with the necessary resources (including senior clinical and administrative time and a training budget) to enable national leadership, coordination and expertise to develop services and workforce. This recommendation was accepted by Welsh Government, and it was agreed that there was a need to establish a clinician-led managed clinical network to support the development of perinatal mental health services in Walesⁱⁱ. It is also important to note that the Inquiry identified that the former Perinatal Mental Health Community of Practice lacked formal authority and resourceⁱⁱⁱ.

A move to disband the Perinatal Clinical Implementation Network puts at risk all the work that has been done over the last few years to create cohesion, multi-disciplinary working and the standardisation of specialist service tools. It also represents a marked departure from Welsh Government's exciting new ambition to become the world's first official "Marmot Nation"^{iv}, central to which is giving every child the best start in life. The proposal also appears to contradict plans within Welsh Government's new Mental Health and Wellbeing Strategy^v, for parent-infant relationships support to build on the work of the Perinatal Clinical Implementation Network.

Ongoing Gaps in Perinatal Mental Health Provision

As a result of the strong leadership and coordination provided by the National Clinical Lead for Perinatal Mental Health, and the wider Perinatal Clinical Implementation Network, there has been lots to celebrate over the last six years. This includes the creation of clear perinatal mental health pathways, the development of specialist perinatal mental health teams, the opening of Uned Gobaith (the MBU in South Wales), and many training opportunities to develop workforce skills across the pathway. The network has been the key driving force for these changes, critical in unifying services and promoting innovation at scale.

Despite progress, the work to develop perinatal mental health care is not complete, and significant challenges remain. None of the Specialist Perinatal Mental Health Teams are currently meeting Type One of the CCQI Standards for Perinatal Mental Health Services, which are the minimum standards needed to ensure patient safety, rights, dignity, the law and fundamentals of care. This is despite the commitment in the *Together for Mental Health Delivery Plan 2019-2022*^{vi} for all services to achieve these standards by 2021. Four years on, this has still not been achieved. This leaves significant parts of the pathway vulnerable to under development and to services across different health boards reverting back to inequity and variable accessibility without a dedicated network driving equitable development at and all Wales level.

Furthermore, recommendations from the one-year review of Uned Gobaith^{vii} (in 2022) have not been actioned, the MBU in Chester (Seren Lodge) with two ring fenced beds for women from Wales has not yet opened its doors, and there is a lack of dedicated perinatal mental health support for dads and partners. Work also needs to be undertaken around birth trauma, babies on the edge of care and admissions to adult inpatient wards. These gaps alongside the move towards open access, same day, seamless care in the new Mental Health Strategy^{viii}, makes the Perinatal Clinical Implementation Network and the clinical

leadership role absolutely vital. Now is the time to build on support for vulnerable new parents struggling with their mental health, not take a significant step backwards.

Lack of Formal Consultation

We are deeply concerned that no formal or informal mechanisms have been put in place to consult with the Perinatal Clinical Implementation Network or families with lived experience about this proposal. They have not had the opportunity to contribute feedback, share evidence, or express their concerns about the impact these proposed changes could have. This risks decisions being made in isolation from those they affect most.

Concerns raised by Specialist Perinatal Mental Health Teams in Wales

In the absence of formal consultation, we have engaged with Specialist Perinatal Mental Health Teams across Wales, who have raised the following concerns about the proposal;

- Losing the supervisory role that the network provides through regular meetings, which enables the sharing of ideas and service development opportunities and helps promote staff well-being.
- A loss of the 'All Wales Approach', including the loss of standardisation of PMH pathways, service leaflets and interventions, without the network to monitor, review and update in response to new research and innovation
- Concerns about quality assurance and how teams will meet CCQI standards and get accredited, without the support and direction of the network
- A lack of equitable opportunities for new training for teams across Wales, and funding for new or ongoing training which have been resourced and organised by the Perinatal Clinical Implementation Network.
- The development of adequate and equitable services across Wales for co-parents/partners/dads experiencing mental health problems and trauma in the perinatal period.
- The impact on the development of new parent-infant relationship services and ensuring these are closely aligned to perinatal mental health services
- The impact on improving multiagency working
- The work that needs to be done to support women admitted to adult inpatient wards
- The unfeasibility of already overstretched perinatal services facilitating a COP/Peer Groups
- The lack of formal consultation with perinatal services and service users about the proposal

These concerns highlight the value of the Perinatal Clinical Implementation Network and clinical lead for perinatal mental health role, in supporting frontline teams and improving outcomes for families and babies across Wales. There is critical need for the network to drive the development of the next phase of the perinatal and parent-infant pathway, and without this there is a real risk that services will develop in silo, giving rise to inequity of access to support for families.

Views of parents with lived experience

We have also worked with some parents with lived experience of perinatal mental health problems to understand concerns about the proposal to disband the network.

“The proposal for the network and perinatal clinical lead role to disappear gives me great concern. With this decision, Wales risks losing vital perinatal focus and the strong connections among professionals in this field that the network has been facilitating. Wales will become the only UK nation without such clinical oversight, setting us back, and causing the good momentum that has been created to be halted”. - Mark Williams, International parental mental health campaigner.

What needs to happen?

We are calling on the Welsh Government and NHS Wales Performance and Improvement to:

- Retain the Perinatal Clinical Implementation Network and National Clinical Lead role
- Commit to resourcing the Network and Clinical Lead post, recognising the role it plays in tackling health inequalities for new and expectant parents and their babies
- Ensure a formal consultation is conducted with perinatal services across the pathway, parents and families for any proposed changes to the network
- Commit to building on the perinatal mental health progress already made; of which the infrastructure behind this has been, and will be, integral to achieving progress

Meeting and Next Steps

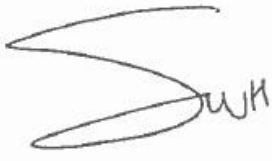
We urge the Committee to investigate this proposal as a key priority. We would like the Committee's support in recommending that NHS Wales Performance and Improvement reconsider the proposal to disband the Perinatal Clinical Implementation Network and National Clinical Lead role, particularly in light of previous Welsh Government commitments^{ix}. We would also welcome a recommendation from the Committee for NHS Wales Performance and Improvement to establish a formal consultation for this proposal, giving perinatal services and service users an opportunity to share evidence about the importance of the Perinatal Clinical Implementation Network and National Clinical Lead role, which must be considered in the decision-making process.

We would be happy to meet with the Committee to discuss this in more detail, if that would be useful at this time.

We would be very grateful for the Committee's support in this matter.

We look forward to hearing from you soon.

Yours sincerely,



Dr. Sarah Witcombe-Hayes
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Izzabella James
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Wales Coordinator for The Maternal Mental Health Alliance

This letter is endorsed by:

Action on Postpartum Psychosis (APP), Barnardo's Cymru, The Birth Trauma Association, Bliss, Early Years Action Group, Institute of Health Visiting, The Parent-Infant Foundation, Parent-Infant Network Cymru, RCM Wales, Samaritans Cymru, Sands, Save the Children/ Achub y Plant, and West Wales Action for Mental Health.





Royal College
of Midwives



ⁱ See Children, Young People and Education Committee (2017) Perinatal Mental Health in Wales. National Assembly for Wales. Accessed via: [cr-ld11234-e.pdf](#)

ⁱⁱ See letter from the Cabinet Secretary for Health and Social to Lynne Neagle, MS as the Chair of the Children, Young People and Education Committee. Available at: [gen-ld11290-e.pdf](#)

ⁱⁱⁱ See Children, Young People and Education Committee (2017) Perinatal Mental Health in Wales. National Assembly for Wales. Available at: [cr-ld11234-e.pdf](#)

^{iv} Welsh Government (2025) Wales to become world's first 'Marmot nation' to tackle health inequalities. Available at: [Wales to become world's first 'Marmot nation' to tackle health inequalities | GOV.WALES](#)

^v Welsh Government (2025) The Mental Health and Wellbeing Strategy 2025–2035. Available at: [Mental health and wellbeing strategy 2025 to 2035](#)

^{vi} Welsh Government (2020) Review of Together for Mental Health Delivery Plan 2019-2022 in response to Covid 19. Available at: [review-of-the-together-for-mental-health-delivery-plan-20192022-in-response-to-covid-19 0.pdf](#)

^{vii} Welsh Health Specialised Services Committee (2023) A Review of Uned Gobaith Mother and Baby Unit at Tonna Hospital, Swansea Bay University Health Board Following 1 Year of Opening. (Public Version)

^{viii} Welsh Government (2025) The Mental Health and Wellbeing Strategy 2025–2035. Available at: [Mental health and wellbeing strategy 2025 to 2035](#)

^{ix} See letter from the Cabinet Secretary for Health and Social to Lynne Neagle, MS as the Chair of the Children, Young People and Education Committee. Available at: [gen-ld11290-e.pdf](#)