



ASSOCIATION FOR INFANT MENTAL HEALTH (NORTHERN IRELAND)

Conference and AGM – September 27th 2017

Conference Title: Can you help me

EVALUATION SUMMARY

Number of Delegates: 240

Evaluations Completed: 112

The AIMHNI annual conference and AGM was held this year on September 27th 2017 in Belfast City Hall. The conference was organised in collaboration with Belfast Health & Social Care Trust, Belfast City Council and the Public Health Agency.

It was a very popular event and was extremely well attended with over 240 delegates from across the voluntary, community and statutory sectors as well as education and government departments. There was good representation across the region and attendance from AIMH Ireland. The focus of the conference was on *Raising awareness and building an understanding of resilience in babies, children, families and practitioners.*

The Chairperson opened the Conference by welcoming all of the delegates and sharing an outline of the day.

During the conference the acclaimed film '**Resilience**' was shown and the NSPCC paper '*Looking after infant mental health in Northern Ireland: our case for change. A summary of research evidence*' was launched by Mary Black PHA and Richard Cotmore NSPCC.

A range of speakers then highlighted current thinking from research and policy and how this impacts on practice and service delivery for families and communities throughout Northern Ireland as follows:

- **Can you help me? – Building resilience in Communities** (Caroline Semple, Smoking Cessation Specialist Midwife from Belfast trust spoke about her smoking cessation service for pregnant women delivered via the Royal Jubilee Maternity Hospital). Caroline highlighted the complex nature of smoking cessation within pregnancy and the link with smoking and mental health issues. Why women begin to smoke and why they continue to smoke was highlighted specifically in relation to emotional wellbeing and mental health. In a small audit in 2017 over a three month period it was identified that over 50% of women referred into the maternity smoking cessation service had a history or ongoing mental health or emotional wellbeing concern. Smoking cessation cannot be achieved without addressing these issues. Perinatal smoking and ongoing mental health concerns were also considered in relation to infant mental health and beyond. The approach to make every contact count and a holistic approach to care was reinforced.
- **Can you help me? – Building resilience in Families** by Alison McNulty, CEO of Tinylife, the charity for babies born sick and born early beautifully illustrated the important work that this charity does. She highlighted recent research findings and introduced us to a valuable new resource for families leaving NICU and transitioning home. More information can be found at lifeathome.tinylife.org.uk
- **Can you help me? - Building resilience in babies** by Majella Connolly, Senior Infant Mental Health Practitioner & Team Leader in i-SHSCT i-CAMHS discussed her specialist pioneering role in supporting the baby in parent infant dyads where there are difficult issues within the dyad. An overview of the i-CAMHS service was presented highlighting common themes for attending parents and infants that impact upon this early relationship. Majella then presented an example of her specialist interventions offered to a mother baby dyad. Systemic practice and Video Interaction Guidance were highlighted with the Video Interaction Guidance Model utilised for the audience. Clips of her work were shown which the parent consented to. Acknowledgements to the SHSCT, AIMHNI, PHA, AViGuk and the mother who consented to her work being shown completed Majella's presentation.

- **Can you help me? – Building resilience in Practitioners** Grainne McHugh & Liz Davis from South Belfast Sure Start, Family Support Coordinator and Family Support Practitioner discussed the importance of organisational resilience when working with vulnerable service users. Using a psychoanalytic frame work, Grainne gave an over view of the importance of reflective space for practitioners in supporting them to deal with the anxiety provoked from the relationships with both services users and colleagues. Following this Liz gave a thought provoking account of her own experience as a practitioner, dealing with the pressures that can come from working in fragmented, vulnerable communities. Liz reflected on her own experience of feeling supported, as well as isolated within her organisation, and how this experienced was used to support reflective capacity within the organisation.

Afterwards attendees had the opportunity to discuss and consider the challenges of working with these real life issues in their practice and relevance to early year’s policy/service developments. This was facilitated through table discussions and a Question and Answer session with the panel.

Before leaving, delegates were requested to complete evaluation forms to gather feedback and suggestions as to how future gatherings could be made better. Ratings are summarised below Comments were collated and can be found in the appendix.

The event closed with thanks to the audience and speakers and a hope for ongoing change and maintenance of momentum.

Numbers indicate how satisfied delegates were with each of the following:
(1 = Poor 2 = Just OK 3 = Good 4 = Very Good 5 = Excellent)

Venue	1	2 (3)	3 (13)	4 (30)	5 (66)
Refreshments	1 (1)	2 (8)	3 (23)	4 (35)	5 (40)
Length of event	1	2 (4)	3 (13)	4 (54)	5 (40)
Overall level of satisfaction	1	2 (1)	3 (8)	4 (47)	5 (56)

(Any discrepancy in figures denotes question not answered)

We are delighted with the positive feedback and appreciate the time and effort spent by the respondents. Comments and ratings will help us deliver what members want in future events as well as strive to improve quality.

APPENDIX

What did you enjoy most / least about the event?

Most

- The DVD on resilience was very interesting and networking with others at the table.
- The speaker from the afternoon session on sharing evidence from practice.
- The ACE study and video was fantastic.
- Use of case study examples from practice.
- Keeping on time with program.
- All presentations were thoroughly enjoyed and very relevant to practice.
- Different speakers/views of agencies.
- The topic is so relevant IMH does have enormous impact, so important to know how to impart information/advice.
- Very informative relevant and appropriate.
- Resilience film was inspiring.
- All the speakers and their reflections – good balance.
- Different speakers, different perspectives, same goal.
- Enjoyed it all.
- The Tiny Life speaker, loved Alison's presentation.
- Looking forward to reading in more detail the NSPCC document.
- Discussions with other services, points of view, what they are doing re; IMH.
- Excellent range of practitioners – Liz Davis very brave and honest.
- The networking opportunity was invaluable.
- Information on research (NSPCC).
- Enjoyed adverse childhood experience, strengthen parental skills.
- VIG information from Majella.
- Practitioner support suggestions from Grainne.
- Enjoyed ICAMHS presentation and Tiny Life presentation.
- Use of round table discussion.
- Enjoyed Tiny Life and South Belfast Sure Start.
- The enthusiasm and positivity from all the presenters.
- Broad spectrum of speakers.
- Value strategic focus to promote co-ordination of agencies.
- Meeting people from multi-disciplinary team.
- Looking at everyone's perspective (Solihull).
- Solihull approach.
- ICAMHS presentation.
- Enjoyed the question time.

Least

- The cold room.
- Not being able to hear some of the speakers.
- Couldn't read slides from table at the back.
- Was unsure about what Ma training actually is?
- Being split up into tables initially.
- Poor sound quality. Audio of video not clearly audible.
- Trivial issue – Would have loved a bag to put all the information into.

Will you be able to use anything from today in your own work?

- The need to protect staff and build resilience in them too.
- More parent involvement.
- ACEs and self care in practice.
- Be aware of adverse childhood experiences from parents and service users.
- ACE screening tool.
- Consider ACE study.
- Mindful of background “What is happening”.
- A clearer idea of how to progress out IMH service.
- I would like to do research on the link between ACE and birth outcomes/engagement with services.
- Highlighting the importance of fathers.
- ACE guidelines and background can be applicable to my vulnerable client group.
- Hopefully take some learning that I can transfer to my own practice.
- Importance of supporting the practitioner. We have a wealth of experience and knowledge need resources to implement significant change.
- It reiterated the work I know about the importance of parental attachment and how important early intervention is.
- Take findings back, promoting any upcoming training and distributing literature brought back.
- We could look at how we engage with our hard to reach families and use the ACE indicators as a means of providing/offering them support early.
- I need time to process and assess how to best implement my learning in my work.
- Need to get the SET strategy written and also look at ICAMHs model.
- Multi-disciplinary approach is key, shared funds.
- Reiterate and re-emphasise the importance of what we are doing in our IMH focus – makes our ethos solid.
- It gives a context to the work I am currently carrying out in relation to the prevalence of trauma.
- Hope to put views forward for commissioning services.
- Focus on practitioner resilience in team planning.
- Need to support practitioners and be mindful of compassion fatigue.
- Useful research references to share with colleagues and families.
- The emphasis on antenatal period and baby brain development.
- The importance of joined up thinking/ownership in delivering good preventative services to support infants.
- Add research to academia.
- Reflective practice and plan to use VIG.
- Be wary of adverse experiences in adults and children and the impact on a parent’s ability to communicate with their child.
- “What’s happened to you” These few words mean so much.
- Importance of looking out for signs of mental health difficulties in others and self.
- Confirmation of approaches already used.
- The importance of IMH on outcomes, and the importance and significance of the relationships they have with parents

What issues would you like to see addressed at the next Conference?

- More parents included around the table.
- Local experience of how organisations are using ACE's in their work.
- Nicola's fellowship experience would be fabulous to hear.
- Implementing ACE's in NI.
- Collaborative approach throughout agencies in relation to use of ACE's scoring tool and possible services to enable these problems to be dealt with.
- Present Minding the Baby results.
- The effects of parental conflict on children's well-being and mental health especially after separation/divorce.
- Mental health needs of parents suffering psychosis after pregnancy to avoid separation from their child.
- Better sound system, it was very hard to hear from the back of the room.
- The demands of our role often doesn't support our personal needs for reflective practice.
- A focus on Solihull and the connection with IMH.
- How we can implement these changes and information practically through training.
- More information on 'Looked After Children' and longer term implications.
- More on moving from theory/research to practice.
- More information on the role of neurology and how there is hope to rewire the neural pathways.
- Temperature of the room – very cold.
- More rapid response to applications.
- How to get a consistent message across all trusts, communities & voluntary organisations?
- A speaker from Speech & Language therapy on early language development parent child interaction and IMH.
- Hand-outs provided and a focus on father's attachments/role/mental health.
- Better car parking.
- The impact of poverty on IMH.
- Implementation of knowledge into practice.
- Roles of mental health nurses and merging skills.
- Brain development and practice examples.
- Programme of training in IMH for health visiting.
- Infant mental health promotion in situation where baby has a disability.
- Keep mindfulness sessions at the end short.
- More time looking at outcomes of evidence based programmes when delivered in NI.
- Supporting children and parents who are hard to engage.
- Government support for mental health.
- Finding money to invest in what is already working well in communities.
- Practical steps or strategies to take into practice.
- How to engage families who are unwilling.
- Completion of ACE questionnaires would be interesting during break and feedback at end.
- How to educate, support infant mental health i.e. extended schools, parental support
- Consider a universal parenting tool for common use by all.
- Challenge of culture attitudes to infants and child mental health.

Any other comments or suggestions ...

- Fantastic venue and conference.
- Very informative and inspiring event.
- Very interesting to hear from practitioner who had resilience issues (Liz Davis) lots of useful resources available.
- Sound not good from back of room.
- Very well organised and well done to the association for a great event.
- Excellent conference, very informative and professional speakers.
- Maybe a 'Speed dating' workshop cycle were we can move around and allows people to choose what they want to hear in more depth.
- Good to hear what is going on outside the INCU world and how we can get help and support for our parents.
- Really helpful event for multi-agency interaction.
- To receive the agenda before arriving.
- Would like to have seen/completed adverse experience questionnaire.
- Great conference.
- Build resilience in staff, key topic with targets and deadlines.
- Great progress to date, movement getting stronger, onward direction.
- Good range of presenters.
- This information needs to be more widely spread to schools particularly.
- Room very cold.
- Evident that much time and effort has gone into this event.
- Pushing for the inclusion of IMH into undergraduate ECS degree programmes.
- CPD for teachers'/classroom assistants.
- Shame next study day on ACE in November is already fully booked.
- Would be useful to have an audit of interventions/their effectiveness and practitioners trained in these interventions for organisations to refer to.
- Have WELB been involved, informed, invited? They are so important in monitoring and intervening in our children's lives.
- Lack of health visitors attending the event. Practitioner/professional support.
- Allocated seating good opportunity for liaising/making links.
- Different venue, parking issues and venue drafty.
- How about the Minister for Health attending and joining the panel?
- IMH, poverty, disadvantaged communities are the same worldwide instead of evidencing what we already know start investing in children's futures with this money i.e. Sure Start.
- Train only people who are passionate about IMH as trainers.
- I liked the way the seating was allocated; it gave good variety at our table which led to great discussion.
- Will presentations be emailed?
- We have the knowledge and awareness of how adverse childhood experiences affect children but families in distress, my own included, are not getting the help they need.
- Maybe short presentation on impact of normalising breast feeding in order to present a full picture.
- Thank you to all, very informative and enjoyable session.

