Summary of Key Revisions to the PQN Community 6ᵗʰ Edition Standards

Previous Standard Number	Previous Standard Type	Previous Standard	New Standard Number	New Standard Type	New standard Criteria	Changes Made	CCQI Core Standard
1.9	1	When the team are unable to conduct an emergency assessment, there is an agreed approach in place. *Guidance: This may include having arrangements in place with another service to cover this, e.g. crisis; liaison.*			When the team are unable to conduct an emergency assessment, there is an agreed approach in place. *Guidance: This may include having arrangements in place with another service to cover this, e.g. crisis; liaison. If possible, perinatal teams should try to attend, otherwise this should be done by crisis, liaison, home treatment teams, or an equivalent service.*	Updated PQN guidance wording	
1.13	1	The team has a timetabled meeting at least once a week to discuss allocation of referrals, current assessments and reviews. *Guidance: Referrals that are urgent or that the team feel do not require discussion can be allocated before the meeting.*			The team has a timetabled meeting at least once a week to provide oversight of allocation of referrals and clinical activity. *Guidance: During the working week teams may also screen referrals daily.*	Updated CCQI Core standard and guidance wording	5.2

1.15	1	The service has clear joint working protocols regarding working with patients with: · Disordered eating; · Substance misuse problems; · A severe, diagnosed personality disorder; · A learning disability.			The service has clear joint working protocols regarding working with: · Patients with disordered eating; · Patients with substance misuse problems; · Patients with a severe, diagnosed personality disorder; · Patients with a learning disability; · Unscheduled care teams/home treatment/crisis/liaison teams.	Updated PQN standard wording	
			1.17	2	The team offers appointments both in person and virtually, and patient preference is taken into account. *Guidance: This should include at least one 'face to face' contact either in person or via video call.*	New CCQI Core Standard	1.7
1.18	3	Everyone can access the service using public transport or transport provided by the service.			Where appointments are face-to-face, these should be in accessible settings. Everyone can access the service using public transport or transport provided by the service.	Updated CCQI Core standard wording	1.2
2.1	1	Teams assess women who are experiencing an episode of moderate to severe mental illness (in pregnancy and until at least 12 months postpartum with follow up until 24 months if clinically indicated).			Teams assess women who are experiencing an episode of moderate to severe mental illness (in pregnancy and **until at least 12 months postpartum** with follow up beyond 12 months postpartum if	Updated PQN standard wording	

		Guidance: Any women who are not yet fully recovered by 12 months postpartum, were referred late with postpartum illness or were already pregnant again should be discussed with the referrer. If necessary the referral is diverted to the appropriate service.			the womens' needs are best met by the perinatal service).		
			2.2	2	Teams assess women who are experiencing an episode of moderate to severe mental illness (in pregnancy and **until at least 24 months postpartum** if the womens' needs are best met by the perinatal service).	New PQN Standard	
2.3	1	The team assess women who are referred to the service within 28 days for routine cases (or four hours for emergencies).			The team assesses women, who are referred to the service, within an agreed timeframe. *Guidance: There should be a process to ensure urgent referrals are seen within the team or by another team following an agreed protocol. This should include an understanding of perinatal risks and the need for joint working.*	Updated CCQI Core standard wording Guidance added	1.6
2.5	1	For non-emergency assessments, the team makes written communication in			For non-emergency assessments, the team makes written communication in advance to	Updated CCQI Core standard wording	2.1

		advance to patients that includes: · The name and title of the professional they will see; · An explanation of the assessment process; · Information on who can accompany them; · How to contact the team if they have any queries, require support (e.g. an interpreter, child care, breast feeding facilities), need to change the appointment or have difficulty in attending appointments.			patients that includes: · The name and role of the professional they will see; · An explanation of the assessment process; · Information on who can accompany them; · How to contact the team if they have any queries, require support (e.g. an interpreter, child care, breast feeding facilities), need to change the appointment or have difficulty in attending appointments.		
2.6	1	If the service receives a referral for a woman who has been prescribed Sodium Valproate or Semi-Sodium Valproate (Depakote), it is the responsibility of the service to have an urgent discussion (within two working days) with the referrer and other appropriate clinical services. *Guidance: This discussion should include a rigorous assessment of the indications for using Sodium Valproate or Semi-Sodium Valproate (Depakote). If it has been prescribed as a mood*			If the service receives a referral for a patient who has been prescribed Sodium Valproate or Semi-Sodium Valproate, it is the responsibility of the service to ensure MHRA guidance is followed. An urgent discussion is had (within two working days) with the patient, referrer and other appropriate clinical services. *Guidance: This discussion should include a rigorous assessment of the indications for using Sodium Valproate or Semi-Sodium Valproate. If it has been prescribed*	Updated PQN standard wording	

		stabiliser by mental health services, this should be escalated to the relevant authority e.g. the clinical or medical director.			*as a mood stabiliser by mental health services, this should be escalated to the relevant authority e.g. the clinical or medical director.*		
2.8	1	A physical health review takes place as part of the initial assessment, or as soon as possible.			A physical health review takes place as part of the initial assessment, or as soon as possible. *Guidance: The patient's assessment should include a general health review taking into account the patient's pregnant or postnatal state. Any concerns identified result in further assessment and investigation by either the team or another appropriate service such as their GP or Maternity Service.*	Updated CCQI Core standard Guidance added	3.3
2.13	1	Women identified as requiring a psychological intervention are offered an assessment with a clinical psychologist and any treatment commenced within 28 days of the assessment. *Guidance: Any exceptions and reasons for this are documented in the patient's notes. Treatment could be offered by another suitably qualified member of the*			Women identified as requiring a formal psychological intervention are offered an assessment with a qualified psychological practitioner and any treatment commenced within 28 days of the assessment. *Guidance: Any exceptions and reasons for this are documented in the patient's notes. Practitioners delivering therapy must be*	Updated PQN standard wording	

		team, under the supervision of the team's psychologist.			*appropriately trained and supervised.*		
2.16	1	Confidentiality and its limits are explained to the patient and partner/family member, both verbally and in writing. Patient preferences for sharing information with third parties are respected and reviewed regularly.			Confidentiality and its limits are explained to the patient and partner/chosen other, both verbally and in writing. Patient preferences for sharing information with third parties are respected and reviewed regularly.	Updated CCQI Core standard wording	16.1
2.19	1	Patients feel welcomed by staff members when attending the team base for their appointments. *Guidance: Staff members introduce themselves to patients and address them using the name and correct pronouns.*			Patients feel respected by staff members when attending their appointments. *Guidance: Staff members introduce themselves to patients and address them using their name and correct pronouns, titles, and name pronunciations.*	Updated CCQI Core standard wording	3.1
2.25	1	There is a system by which staff are able to raise an alarm if needed.			There is a system by which staff are able to raise an alarm if needed. *Guidance: There should be a protocol in place to ensure staff are safe.*	Updated CCQI Core standard wording	17.5
3.1	2	A discharge letter is sent to the patient (with the patient's consent) and all relevant parties within 10 days of discharge. The letter includes the plan for:			A discharge letter is sent to the patient (with the patient's consent) and all relevant parties within 10 working days of discharge. The letter includes the plan for:	Updated CCQI Core Standard wording	9.1

		• On-going care in the community/aftercare arrangements; • Crisis and contingency arrangements including details of who to contact; • Medication, including monitoring arrangements; • Details of when, where and who will follow up with the patient as appropriate; • Assessment of the quality of mother-infant interaction; • Risk assessment (mother and child).			• On-going care in the community/aftercare arrangements; • Crisis and contingency arrangements including details of who to contact; • Medication, including monitoring arrangements; • Details of when, where and who will follow up with the patient as appropriate; • Assessment of the quality of mother-infant interaction; • Risk assessment (mother and child).		
3.5	1	The potential for admission is communicated verbally to the patient and her family, and written information provided. This is recorded in the written care plan and communicated to the patient's GP, midwife and health visitor if appropriate.			The potential for admission is communicated verbally to the patient and their family, and written information provided. This is recorded in the written care plan and communicated to the patient's GP, midwife and health visitor if there has been any potential for admission to inpatient care.	Updated PQN Standard	
3.8	1	Partners/family members (with patient consent) are involved in discussions and decisions about the patient's care, treatment and discharge planning. This includes attendance at review			Partners and/or chosen others (with patient consent) are involved in discussions and decisions about the patient's care, treatment and discharge planning. This includes attendance at review meetings where the patient consents.	Updated CCQI Core standard wording	13.1

		meetings where the patient consents.					
4.2	1	All patients have a documented diagnosis and a clinical formulation. Where a complete assessment is not in place, a working diagnosis and a preliminary formulation is devised.			All patients have a documented diagnosis and/or formulation which is shared with the patient. Where a complete assessment is not in place, a working diagnosis and a preliminary formulation is devised. *Guidance: This can be devised by any suitable clinician.*	Updated CCQI Core standard wording	3.5
4.5	1	The teams provide a range of therapeutic interventions for the mother, the baby, and the family including: · Pharmacological interventions; · Evidence-based psychological therapies; · Evidence-based mother and baby interventions; · Occupational therapy.			The teams provide a range of therapeutic interventions for the mother, the baby, and the family/chosen others including: · Establishing and maintaining a therapeutic relationship with the team; · Nurse-led therapeutic interventions; · Pharmacological interventions; · Evidence-based psychological therapies, such as individual, couple's or family-based interventions; · Evidence-based mother and baby interventions; · Occupational therapy.	Updated CCQI Core standard wording	6.1.1

4.6	3	The teams provide a range of therapeutic interventions for the mother, the baby, and the family including: · Evidence-based family and couple's interventions; · Recreational and creative activities. *Guidance: If not provided directly by the service, patients are supported to access these within their local area.*			The teams provide a range of therapeutic interventions for the patients, the baby, and the family including: · Sustainable interventions such as walking groups and using green space; · Recreational and creative activities. *Guidance: Teams should maintain an awareness of, and follow, evidence around sustainable and recreational interventions.*	Updated CCQI Core standard wording	6.1.7
4.7	2	The team provides information and encouragement to patients to access local organisations for peer support and social engagement. *Guidance, this might include:* *· Activities that promote enjoyment and interaction with the baby and social engagement (such as swimming lessons, sensory activities, music groups);* *· Voluntary organisations;* *· Community centres;* *· Local religious/cultural groups;*			The team supports patients to access activities that are meaningful to them. *Guidance: this might include:* *· Activities that promote enjoyment and interaction with the baby and social engagement (such as swimming lessons, sensory activities, music groups);* *· Voluntary organisations;* *· Community centres;* *· Local religious/cultural groups;* *· Peer support networks;* *· Recovery colleges.*	Updated CCQI Core standard wording	6.1.6

				4.8	3	The team supports patients to access local green and blue spaces on a regular basis. *Guidance: This could include signposting to local walking groups or arranging regular group activities to visit green spaces. Consideration should be given to how all patients are able to access these sessions including, for example, access to appropriate foot- or rainwear. Examples of blue spaces include rivers, lakes, and coastal waters.*	New CCQI Core Standard	6.1.7
			· *Peer support networks;* · *Recovery colleges.*					
4.9	1		The team supports patients to access organisations which offer: · Housing support; · Support with finances, benefits and debt management; · Social services; · Domestic abuse services; · Immigration services. *Guidance: The team should have joint working protocols with relevant organisations.*			The team supports patients to access organisations which offer: · Housing support; · Support with finances, benefits and debt management; · Social services; · Domestic abuse services; · Immigration services; · Drug and alcohol services. *Guidance: The team should have joint working protocols with relevant organisations. Staff should*	Updated CCQI Core standard wording Guidance added	10.2

					know how to access policies and protocols around joint working.		
4.11	1	Patients have their medications reviewed regularly. Medication reviews include an assessment of therapeutic response, safety, management of side effects and adherence to medication regime. *Guidance: Side effect monitoring tools can be used to support reviews.*			Patients have their medications reviewed regularly. Medication reviews include an assessment of therapeutic response, safety, management of side effects and adherence to medication regime. *Guidance: Side effect monitoring tools can be used to support reviews.*	CCQI Core Standard Sustainability Principle applied: Consider Carbon	6.2.2
4.12	1	Women in pregnancy or with a newborn who are taking mood stabilisers or antipsychotics receive regular medical reviews at a frequency determined by the gestation, with particular emphasis on the potential effects of the medication on the pregnancy and changes in the bioavailability of medication as the pregnancy progresses. The team ensures that the relevant maternity services are aware of these issues.			All women taking medication will receive regular medication reviews at a frequency determined by the gestation, with particular emphasis on the potential effects of the medication on the pregnancy and changes in the bioavailability of medication as the pregnancy progresses. The team ensures that the relevant maternity services are aware of these issues.	Updated wording to PQN standard ([merged previous](#) standards 4.13 and 4.14)	
4.13	1	Patients who are prescribed mood stabilisers or antipsychotics have the			Patients who are prescribed mood stabilisers or antipsychotics have the appropriate physical health	Updated CCQI Core standard wording	7.4

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		appropriate physical health assessments at the start of treatment (baseline), at three months and then annually (or six-monthly for young people). If a physical health abnormality is identified, this is acted upon.			assessments at the start of treatment (baseline), at three months and then annually (or six-monthly for young people). The team maintains responsibility for monitoring their physical health and the effects of antipsychotic medication for the duration that the patient is under the team (carried out by the team or in a shared care arrangement with the patient's GP). *Guidance: Abnormalities or changes in the patient's condition or treatment should prompt a medical review or be acted upon appropriately. Teams should use the most up to date NICE guidelines or equivalent for the frequency of physical health assessments for each medication, taking into account any modifying effects of pregnancy, childbirth, or lactation on biochemical/neurohormonal markers.*		
4.14	1	Patients and carers are able to discuss medications with a specialist pharmacist.		3	Patients and carers are able to discuss medications with a specialist pharmacist. *Guidance: A Specialist Pharmacist*	Updated CCQI Core standard wording Standard type	6.2.3

					needs to have mental health knowledge but not necessarily perinatal, and should have established links to the service. The Pharmacist does not have to be directly contactable by the patients or carers but could meet with them via a request from other members of the MDT. It would not be expected for a service to routinely give details of pharmacist to patients or carers.	changed Guidance added	
4.22	2	The team provides each partner/family member with accessible carer's information. *Guidance: Information is provided verbally and in writing (e.g. carer's pack). This includes the names and contact details of key staff members in the team and who to contact in an emergency. It also includes local sources of advice and support such as local carers' groups, carers' workshops and relevant charities.*			The team provides each partner and/or chosen other with accessible carer's information. *Guidance: Information is provided verbally and in writing (e.g. carer's pack). This includes the names and contact details of key staff members in the team and who to contact in an emergency. It also includes local sources of advice and support such as local carers' groups, carers' workshops and relevant charities.*	CCQI Core Standard wording change applicable to PQN	13.4
4.23	1	Partners/significant others are supported to access a statutory carers' assessment, provided by an appropriate agency.			Partners/chosen others are supported to access a statutory carers' assessment, provided by an appropriate agency.	Standard wording change	13.2

		Guidance: This advice is offered at the time of the patient's initial assessment, or at the first opportunity.			*Guidance: This advice is offered at the time of the patient's initial assessment, or at the first opportunity.*		
4.24	2	Partners/significant others are offered individual time with staff members to discuss concerns, family history and their own needs.			Partners/chosen others are offered individual time with staff members to discuss the needs of the family. *Guidance: This should be offered where appropriate. Staff should signpost partners to support (i.e. appropriate local services) as required.*	Updated wording CCQI Core standard Guidance added	13.3
4.25	3	The team actively encourages partners/family members to attend carer support networks or groups. There is a designated staff member to support carers.			The team actively encourages partners and/or chosen others to attend carer support networks or groups. There is a designated staff member to support carers.	CCQI Core Standard wording change	13.5
4.26	1	The team follows a protocol for responding to partners/significant others when the patient does not consent to their involvement.			The team follows a protocol for responding to partners/chosen others when the patient does not consent to their involvement.	CCQI Core Standard wording change	16.2
4.28	1	Staff members treat patients and partners/family members with compassion, dignity and respect.			Staff members treat patients and partners/chosen others with compassion, dignity and respect. *Guidance: Staff should make an active effort to be aware of, and*	Updated CCQI Core standard wording	14.1

					provide sensitive care in line with, individuals' cultural and religious differences.		
4.30	1	When talking to patients and partners/family members, health professionals communicate clearly, avoiding the use of jargon.			When talking to patients and partners/chosen others, health professionals communicate clearly, avoiding the use of jargon.	PQN Standard wording change	
5.1	1	Patients are given accessible written information which staff members talk through with them as soon as is practically possible. The information includes: · Their rights regarding consent to treatment and consent to treatment; · Their rights under the Mental Health Act; · How to access advocacy services; · How to access a second opinion; · How to access interpreting services; · How to view their health records; · How to raise concerns, complaints and give compliments.			Patients are given accessible written information which staff members talk through with them as soon as is practically possible. The information includes: Their rights regarding consent to treatment and consent to treatment; · How to access advocacy services; · How to access a second opinion; · How to view their health records; · How to raise concerns, complaints and give compliments · Where relevant, how to access interpreting services; · Where relevant, their rights under the Mental Health Act.	Updated CCQI Core standard wording	2.2

			5.5	1	The team records which children or vulnerable adults the patient has responsibility for and takes safeguarding action where needed.	New CCQI Core Standard	8.1
5.9g	1	The mother's thoughts and behaviours about estrangement from the baby and severe maternal inadequacy.			Thoughts and behaviours about estrangement from the baby and severe maternal inadequacy.	Updated PQN standard wording	
6.1		The multi-disciplinary team comprises, as a minimum:			The multi-disciplinary team comprises, as a minimum (per 10,000 births): *Guidance: All teams ought to complete 6.1 regardless of offering.*	Updated PQN standard wording and guidance	
6.1i	3	1 WTE Parent-Infant Therapist.		2	1 WTE Parent-Infant Therapist.	Change to PQN standard type	
			6.2		For teams providing a service up to 24 months postpartum, the multi-disciplinary team comprises, as a minimum (per 10,000 births): *Guidance: Standards 6.2a - 6.2l can be scored as N/A for services not currently providing a service up to 24 months postpartum.*	New PQN staffing standards based on NHS Long Term Plan	
			6.2a	2	2.5 WTE Consultant Perinatal Psychiatrist	New PQN staffing standards	

			6.2b	3		2.5 WTE non-consultant Psychiatrist	New PQN staffing standards
			6.2c	2	8 WTE Perinatal Community Psychiatric Nurses *Guidance: This ratio should be adjusted based on geographical area.*		New PQN staffing standards
			6.2d	3	2 WTE Social Worker *Guidance: This should be comprised of no more than two Social Workers*		New PQN staffing standards
			6.2e	3	5 WTE additional psychological professionals. *Guidance: This could include counselling psychology, CBT therapist, systemic psychotherapist and adult psychotherapist. This would be in line with the objectives set out in the NHS Long Term Plan.*		New PQN staffing standards
			6.2f	3	2 WTE Team Manager. *Guidance: This should include 1 WTE Band 8a managerial, 05 WTE Band 7 deputy and 0.5 WTE clinical/managerial.*		New PQN staffing standards
			6.2g	3		4 WTE Nursery Nurses	New PQN staffing standards

			6.2h	2	2 WTE Occupational Therapists	New PQN staffing standards	
			6.2i	3	2 WTE Parent-infant Therapist/ staff trained in parent-infant therapy	New PQN staffing standards	
			6.2j	3	4 Peer support workers (band 4 or above or local equivalent) *Guidance: This should include a peer support lead.*	New PQN staffing standards	
			6.2k	2	5 WTE Administrator (band 3 or above or local equivalent)	New PQN staffing standards	
			6.2l	3	0.5 WTE Pharmacist	New PQN staffing standards	
			6.3	3	There is dedicated sessional input from arts or creative therapists.	New CCQI Core Standard	6.1.5
6.9	1	There is an identified senior clinician available at all times who can attend the team base within an hour. Video consultation may be used in exceptional circumstances. Guidance: Some services may have an agreement with a local GP to provide this medical cover.			During operational hours, there is an identified senior clinician available at all times who can attend the team base within an hour. *Guidance: The senior clinician can be available over the phone or video. The service can decide who fulfils this role. Some services may have an agreement with a local GP to provide this medical cover.*	Updated CCQI Core standard wording	19.3

| 6.11 | 1 | New staff members, including agency staff, receive an induction based on an agreed list of core competencies (such as the HEE Perinatal Mental Health Competencies Framework or NHS Education for Scotland's Curricular Framework).

Guidance: This should include arrangements for shadowing colleagues on the team, jointly working with a more experienced colleague, being observed and receiving enhanced supervision until core competencies have been assessed as met.

This induction should also include self-assessment using an agreed competency framework, which can be used to identify areas for further development and to inform staff's personal development plan. | | | New staff members, including agency staff, receive an induction based on an agreed list of core competencies (such as the HEE Perinatal Mental Health Competencies Framework or NHS Education for Scotland's Curricular Framework).

Guidance: This should include arrangements for shadowing colleagues on the team, jointly working with a more experienced colleague, being observed and receiving enhanced supervision until core competencies have been assessed as met. | Updated CCQI Core standard wording | 20.2 |
| 6.12 | 2 | All new staff members are allocated a mentor to oversee their transition into the service. This should be a mentor | | | All new staff members are allocated a mentor to oversee their transition into the service.

Guidance: A mentor does not need | Updated PQN standard wording | |

		with experience in perinatal mental health.			*to be a formal supervisor and may be an established member of the team who has experience in perinatal mental health.*		
6.14		Staff members receive training consistent with their role, which is recorded in their personal development plan and is refreshed in accordance with local guidelines. This training includes:			Staff members receive training consistent with their role, which is recorded in their personal development plan and is refreshed in accordance with local guidelines. This training includes: *Guidance: Teams should review the need for refresher trainings at regular intervals to ensure staff competencies remain current.*	CCQI Core Standard Guidance Added	22.1
6.14f	1	Basic infant development including emotional developmental milestones.			Basic infant development including emotional developmental milestones. *Guidance: This should be refreshed annually.*	PQN Standard Guidance added	
6.14h		Understanding and promoting mother-infant interaction and relationship.			Understanding and promoting mother-infant interaction and relationship. *Guidance: This should be refreshed annually.*	PQN Standard Guidance added	
			6.14m	1	Inequalities in mental health access, experiences, and outcomes	New CCQI Core standard	22.1f

					for patients with different protected characteristics. Training and associated supervision should support the development and application of skills and competencies required in role to deliver equitable care.		
6.14o	1	Infant feeding (including breastfeeding).			Infant feeding (including breastfeeding). *Guidance: This should be refreshed annually.*	PQN Standard Guidance added	
			6.16	1	All staff members who deliver therapies and activities are appropriately trained and supervised.	New CCQI Core Standard	6.1.9
6.21	2	Staff members in training and newly qualified staff members receive weekly supervision, in line with professional requirements.			Staff members in training and newly qualified staff members receive weekly supervision, in line with professional requirements. *Guidance: The duration of this will be agreed with supervisor and supervisee at the beginning and be in line with the new starter's needs.*	PQN Standard Guidance added	
6.27	1	The team has a fixed base and office accommodation, which adequately meets the need of the staffing group.			The team has a fixed base and office accommodation, which meets the need of the staffing group, including adequate clinical space.	Updated PQN standard wording	

7.4	2	The service has a meeting, at least annually, with all stakeholders to consider topics such as referrals, service developments, issues of concern and to re-affirm good practice. *Guidance: Stakeholders could include staff member representatives from inpatient, community and primary care teams as well as patient and partner/significant other representatives.*			The service has a meeting, at least annually, with all stakeholders to consider topics such as referrals, service developments, issues of concern and to re-affirm good practice. *Guidance: Stakeholders could include staff member representatives from inpatient, community and primary care teams as well as patient and partner/chosen other representatives.*	Updated PQN standard wording	
			7.11	2	Feedback received from patients and partners/chosen others is analysed and explored to identify any differences of experiences according to protected characteristics.	New CCQI Core standard	12.2
7.13	2	The team is actively involved in QI activity.			The team is actively involved in QI activity. *Guidance: This may include audits, developing policies/protocols, activities around development of service and involving patients and partners/chosen others.*	CCQI Core Standard Guidance added	24.4

| | | | 7.15 | 3 | The service reviews the environmental and social value of its current practices against the organisation's or NHS green plan. It identifies areas for improvement and develops a plan to increase sustainability in line with principles of sustainable services (prevention, service user empowerment, maximising value/ minimising waste and low carbon interventions).

Guidance: Progress against this improvement plan is reviewed at least annually with the team. | New CCQI Core Standard | 18.3 |
| | | | 7.16 | 3 | The organisation has a research friendly culture which provides staff with the opportunity to take part in research projects. | New PQN Standard | |