



**Little  
Minds  
Matter**

Bradford Infant Mental Health Service



**Bradford District Care**  
NHS Foundation Trust



# **Little Minds Matter: Bradford Infant Mental Health Service**

## **Fifth Annual Report October 2022 – September 2023**

Not to be shared without permission



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## Acknowledgements

I would like to thank the ever-expanding Little Minds Matter team; they are the most passionate, enthusiastic and nurturing team I have ever had the pleasure to work with. A particular thank you to Hayley McCann, Assistant Psychologist, for her efficiency, skill with data and warmth. I would also like to thank the teams within Bradford District Care NHS Foundation Trust, Reducing Inequalities in Communities, Better Start Bradford and the Local Authority Start for Life programme – not only for the funds which allow us to continue supporting families and the workforce, but for your passion and innovative ways of working which help us all move towards Bradford families having the best start in life.

# Foreword

We're five years old! This June, in Infant Mental Health Awareness Week, we celebrated turning five years old. Our party was a wonderful event and we were joined by professionals and families alike to celebrate all that we have achieved in the last five years.

These years have seen big changes for the Little Minds Matter team – just like the first few years of life. The team has doubled in size during the last two years, and we have recently doubled the population we serve; now working across Bradford Local Authority. We have expanded our midwifery, therapy and administrative staff teams and brought the skills of social workers, a team manager and a community support worker into the team.



Writing the annual report is a positive period of reflection for me. I enjoy hearing about the amazing work the team do and reading the feedback we receive from professionals and families who engage in our direct clinical work, training and consultation activities.

Being five years old can be a point of change and looking forward to new beginnings. This has been the case for the Little Minds Matter team this year. While the Start for Life funding secures the existence of the teams work until March 2025, our work, and even existence, beyond that is uncertain. We hope that by this time next year we can be more confident of our future – this report demonstrates the incredible support this team provides and Bradford families cannot afford to lose it.

Best wishes,

A handwritten signature in black ink that reads "C. Dunster-Page".

Dr Charlotte Dunster-Page

Principal Clinical Psychologist and Infant Mental Health Pathway Lead

# About Us

This is the fifth annual report for the Little Minds Matter: Bradford Infant Mental Health Service. We are commissioned by [Better Start Bradford](#) and delivered by Bradford District Care NHS Foundation Trust as part of the Child and Adolescent Mental Health Service (CAMHS). In our fifth year we have continued to receive funding from The National Lottery Community Fund, via Better Start Bradford, and the [Reducing Inequalities in Communities programme](#). This year we have also accessed funding from the [Start for Life programme](#).

Now over five years old, the Little Minds Matter team supports early relationships between babies and their caregivers by working across four strands.

1. Direct Clinical Work
2. Training
3. Consultation
4. Community Engagement

Our first strand directly supports families who would benefit from support around early relationships. Our training and consultation strands support the professionals, volunteers and students who support such families. Finally, our community engagement strand acknowledges that while not every family needs or wants support from a specialist service, every baby does need nurturing and responsive care. Our community engagement strand shares key messages widely so that the whole community understands that *parent-infant relationships matter*.

## About Better Start Bradford

Better Start Bradford (BSB) supports families during pregnancy and up to a child's third birthday in three Bradford wards: Bowling and Barkerend; Bradford Moor and Little Horton. They have developed and commissioned a range of projects which help give children the best start in life by supporting one of more of the following themes:

- Social and emotional development
- Language and communication
- Health and nutrition

## About Reducing Inequalities in Communities

Little Minds Matter received funding from Reducing Inequalities in Communities (RIC) from April 2020. RIC aims to reduce health inequalities and close the health gap in Bradford. This funding enabled the team to expand and begin working with families across the Bradford City area.

## About Family Hubs and Start for Life

Family Hubs and Start for Life is a joint programme from the Department of Health and Social Care and the Department for Education. Across England, 75 local authority areas have been provided with funding to develop services which support families in the first 1001 critical days. One of the funded streams is parent-infant relationship and perinatal mental health support. The funding from this strand has enabled the Little Minds Matter team to expand our reach to families across the Bradford Local Authority area, an increase of 96% in terms of birth rate when compared to the BSB and RIC areas we previously served.

# Direct Clinical Work

## Overview

The Little Minds Matter team offers a wide variety of interventions from a universal plus level to a specialist level, for families during pregnancy and up to a baby's second birthday. We support families where there is a parent-infant relationship difficulty and those with risk factors that suggest a difficulty may occur in the future. This year we have added Baby Massage, Cognitive Analytic Therapy, Dyadic Developmental Practice and Psychotherapy informed interventions, Family Therapy Clinics and Specialist Social Worker support to our available interventions. As well as having a Family Therapist within the team we also have a Trainee Family Therapist and additional members of staff with training in systemic practice. This has recently enabled us to establish a clinic using a multidisciplinary reflecting teams approach and we have families booked in to access this support in the coming months.

This year we have received additional funding (see [About Family Hubs and Start for Life](#)) to expand our Direct Clinical Work offer to families across the Bradford Local Authority area. Based on birth rates we anticipated a 96% increase in referrals and a small increase in consultations required. Both referrals and consultations offered have increased significantly more than anticipated.

## Referrals

Our launch across Bradford District happened gradually with the team initially accepting referrals for families into our Circle of Security groups, then those who were already open for out-of-area Consultation. Once new clinicians were recruited, we were able to advertise to the wider network that we could accept referrals from outside of the Better Start Bradford and Reducing Inequalities in Communities areas. This occurred during quarter three (April to June 2023) and is reflected in the dramatic increase in referrals since then, as shown in Figure 1. Overall, we have received 205 referrals; an increase of 188% compared to last year. However, almost half of our referrals have been received in the last quarter and a continuation of this level of referrals would mean an increase of 424% when comparing a full year.

Of the 205 referrals received, an outcome is still undetermined for the five most recent. Of the remaining 200 referrals, we have accepted 186 (93%), of which 170 were for direct work with the family.

Unfortunately, our higher-than-expected increase in referral rate, alongside delays to recruitment, have meant that we now hold a waiting list. As well as five groups of professionals awaiting consultation, 55 families are awaiting direct clinical work. Many of these (64%) are awaiting a group intervention and this wait is to be expected given the fixed start dates for groups. The remaining families are awaiting assessment (31%) or a specific one-to-one therapeutic intervention (5%).

In the first six months of the year, 27 of the 40 referrals (68%) were for families in the Better Start Bradford and / or Reducing Inequalities in Communities areas. In the later six months, we received 82 referrals for families within these areas and 83 referrals for families outside of these areas, suggesting our increased funding has had a positive impact for our original cohort alongside those from the wider area.

**Figure 1.**  
Rate of referrals from October 2022 to September 2023



We continue to see an increase in the number of referrals for unborn babies (n=58) and those under six months (n=97), as seen in Figure 2. The average age of gestation at referral is 25 weeks. This move towards earlier referrals is something we encourage in the knowledge that babies cannot wait.

#### Referral source

Families have been able to self-refer to Little Minds Matter for over a year and have utilised this option particularly in relation to baby massage courses. When considering all our referrals, we receive the most from the 0-19 team (26%), from families themselves (20%), midwives (14%) and social care (6%). When looking at our unborn baby referrals alone, midwives refer most frequently (38%) followed by social workers, health visitors and mental health professionals (12%, 10% and 10% respectively).

We have recruited two Therapeutic Social Workers this year, one through our existing funds when we recognised the need for this and the second as part of the Start for Life funding allocated to Little Minds Matter. They have been attending the Children’s Social Care pre-birth panels in the last quarter of this year and have recommended a referral to Little Minds Matter for 22 of the families discussed. We have received and accepted eight of these recommended referrals with a further three families declining a referral and another moving out of area. When families do not consent to a referral, we remain available to the professionals working with the family for consultation. In addition, nine families discussed at the panel had already been referred to Little Minds Matter.

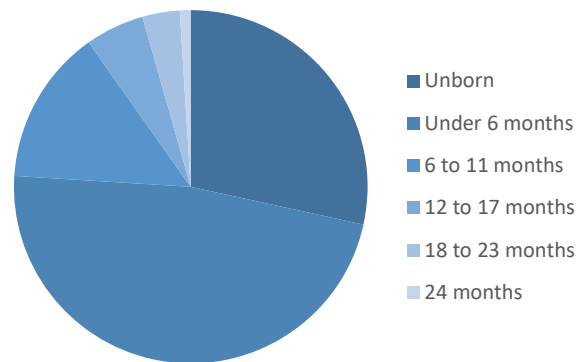
### Risk and Vulnerability at Referral

We ask referring professionals to complete a Risk and Vulnerability checklist which helps them to consider parent, infant and parent-infant factors that may be associated with a difficulty in the relationship for that family. When a clinician is taking a self-referral for the family, this document is completed based on what the family reports in the initial discussion. When excluding the forms where no risks or vulnerabilities are indicated, which suggests incompleteness as opposed to none being present, the mean number of factors reported was four with a range of 1 to 17. The majority (81%) of factors reported related to the parent, with the following being the most commonly reported:

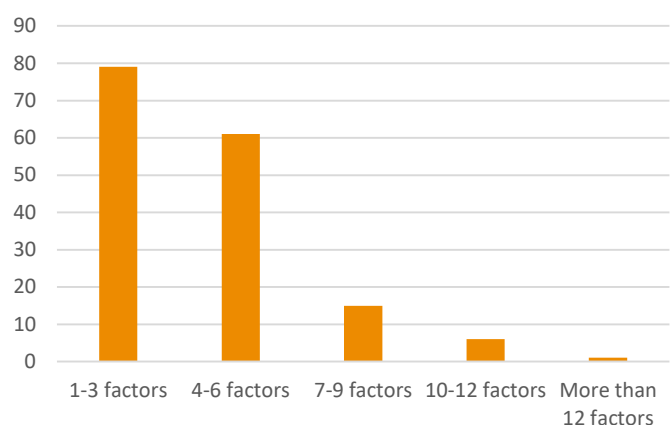
- History / current anxiety or depression (82%)
- Ongoing lack of support / isolation (36%)
- Acute family crisis / recent significant life stress (26%)
- Parent has experienced loss of a child (24%)
- Current / historical experience of abuse, neglect or loss (22%)

The initial three factors have been in the most-frequently reported in both the previous two years, while experience of abuse, neglect and loss was in the most-frequently reported last year too. Prior to the pandemic, a lack of support /

**Figure 2.**  
*Age of baby at time of referral*



**Figure 3.**  
*Number of Risk and Vulnerability factors reported for referred families*



isolation was only reported in 13% of referrals. Last year it increased to 46% of referrals and it has now decreased, although not to pre-pandemic levels.

## Therapeutic Interventions

The Little Minds Matter clinical team consists of therapists (including Assistant Psychologist, Trainee Clinical Psychologists, Clinical Psychologists and a Family Therapist), Midwives, Health Visitors, Social Workers and Community Workers. This allows us to support families with a variety of needs. Approximately a quarter of our families are discharged after a single intervention, with the remainder accessing more than one intervention. All families who attended a group intervention also receive psychoeducation on states and cues and attachment theory. In addition, 22% of families received a separate intervention in the form of video feedback (n=5), adult therapy (n=10) and / or systemic therapy (n=1). A case study describing the support offered to one of our families this year is at the end of this section.

For families who did not attend a group intervention, the most common offer was for attachment focused work (88%), followed by psychoeducation relating to states and cues and / or brain development (76%). Furthermore, 38% of families received an adult therapy, 16% received family or systemic therapy and 11% received video feedback work. On average these families received 2.7 intervention types.

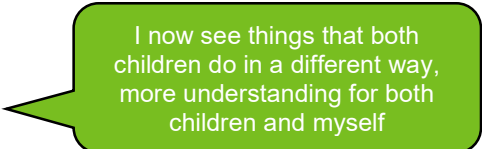
### Circle of Security

The Little Minds Matter team continue to offer the Circle of Security Parenting Programme, predominately in a group setting and occasionally on a one-to-one basis. We have facilitated four groups this year with a total of 18 parents attending. Six of the families (33%) who engaged with Circle of Security did not require another intervention from the service, while eight had previously engaged with another intervention (baby massage = 2, one-to-one intervention = 6). Four families engaged with another intervention after Circle of Security ended (baby massage = 1, one-to-one intervention = 3).

One of the Circle of Security groups was offered during the evening to widen access to families unable to attend during the day. The group was not specifically offered to dads; yet the team found that the evening supported their attendance as it was outside of working hours. The group consisted of four dads who travelled from across the city to attend. There was no drop-out from the group and on occasion when someone was not able to attend a session (for example due to pre-planned holidays) they arrived early the following week to catch up on material they missed.

One of the themes that occurred throughout the group, was the role of a 'dad' and how dads are viewed in society. The group spoke of their feelings of being a 'secondary caregiver' and feeling pushed out from their children's care. The group spoke of their experiences of parenting and of being parented and reflected on issues such as gender, power and social difference.

All attendees shared that they felt they benefited in having a space specifically for dads, where they felt included and not judged for their past parenting styles. Social care has previously been involved for all the families, with three families currently engaging with parenting assessments. The dads provided positive feedback at the end of the course, including how much they had valued being heard. They spoke of improvements in their relationships with their babies and how they felt more confident in their role as dad. The dads wanted to keep in touch to build their relationships as peers and continue to make space for talking about their experiences. They hoped to continue to seek advice and guidance from each other, something they didn't feel they had within their individual support networks.



I now see things that both children do in a different way, more understanding for both children and myself

One dad shared "*If only I knew about this earlier, things might have been different*".

### Baby Massage

The Little Minds Matter team started offering Baby Massage sessions in May 2023 which resulted in positive feedback from families and professionals alike. One professional explained: *“I’ve been promoting the baby massage and thought you must be filling up your classes!! Thank you we really did need this service.”*

Baby Massage courses enable parents to spend time with their baby using nurturing touch and communication which supports infant mental health. Massage can be used to promote bonding and the development of positive relationships between caregivers and baby. It assists in developing trust, kindness, security, love and respect. Our baby massage courses are held over five weeks and provide an opportunity for the facilitators to discuss baby states and cues and consider what further support a family may benefit from. Referrals can be made by a professional or families can self-refer.

All referrals are discussed in our referrals meeting and a short assessment is completed prior to commencing the course. We have adapted our usual assessment and evaluation paperwork to ensure it is suitable for universal families and we continue to use the MORS pre and post course. Courses have been held across all four family hub areas since May 2023 and will be held in each area again over the coming months, varying the location to make the courses accessible to as many families as possible across the district. A total of 45 families have attended a baby massage course.

Really beneficial in terms of how I talk about my child not using labels, using words more reflective for her nature, listen to baby, know when it is or isn't appropriate, helped to be in tune with [baby's name].

Little Minds Matter is a specialist infant mental health service and baby massage is offered as a universal offer. The rationale for offering this group is to reach families who may benefit from a short-term parent-infant relationship intervention yet might hesitate to contact an NHS service to ask for a different type of support. Two case studies are provided in [Appendix 1](#) which demonstrate this.

### Talking Therapies Sleep for two and Being us workshops

This year we have launched two workshops, co-created and facilitated with the Talking Therapies team (formally known as Bradford My Wellbeing Improving Access to Psychological Therapies team). These monthly 90-minute workshops alternate between Sleep for two: my baby and me; and Being us: finding my way with my baby (a focus on bonding). The content includes a mix of psychoeducation and practical skills.

The workshop was filled with lots of information which would be really helpful during pregnancy or with a new baby. There were lots of practical suggestions for how to support baby while looking after your own mental wellbeing. The session leaders were compassionate and encouraged discussion.

Being us workshop attendee  
Sleep for two workshop attendee

I like that different discussions were taking place in the chats as it made me realise myself that I am not struggling alone and others who had joined the session had been going through similar things as me.

Being us workshop attendee  
Sleep for two workshop attendee

It covered many things we didn't know, which will help us have a better understanding and be more confident when the baby comes

The content was well positioned and the real life examples from the facilitators was really helpful- really practical and well delivered

Since their conception in November 2022, 45 people have attended the Sleep for two workshops and 30 people have attended the Being us workshops. The majority of those who attended a workshop and completed the evaluation form stated that they would recommend it to another person (17 of 19 for the Sleep for two workshop; 11 of 12 for the Being us workshop).



These workshops have also enabled appropriate referrals to be made between Little Minds Matter and Talking Therapies, with six families being referred to or from Little Minds Matter and the workshops.

**Case Example of Clinical Work with single-parent ‘Annalise’ and baby ‘Leo’.**

Annalise was referred to Little Minds Matter because of worries about her pregnancy being unplanned, negative feelings towards her unborn baby, isolation, low mood and anxiety. Annalise also shared that she was worried about how she would manage becoming a mother in the circumstances, alongside financial and housing pressures. The role of Little Minds Matter was to support Annalise in her transition to motherhood, providing psychoeducation to help her understand her baby, dyadic work to strengthen parent-infant attachment and psychological support for Annalise to target her low mood and anxiety.

The case was joint worked by a Clinical Psychologist and Assistant Psychologist. We completed a thorough assessment which included a timeline and genogram. Both these helped us to understand Annalise’s experiences and cultural background and how this was impacting on her and her unborn baby. The intervention that we offered included psychoeducation on baby brain development, responsive parenting, states and cues, as well as attachment and bonding. We worked with mum and Leo up until he was five months old and offered parent-infant interaction work and Compassion Focussed Therapy for Annalise due to high levels of shame she was experiencing. Annalise also attended the baby massage group. We also worked with the system around Annalise and referred into Early Help for support around her finances.

After our sessions Annalise reported that she had completed her goals. This was reflected in the measures completed pre and post intervention. Prior to intervention the GAD-7 and PHQ-9 identified clinical levels of depression and anxiety (GAD-7: 14/21 & PHQ-9: 16/27). Post intervention these measures identified an absence of depression and anxiety symptoms, scoring zero on both measures. Furthermore, the Mullers was administered pre intervention and identified difficulties bonding with her unborn baby. The MORS was administered following intervention which identified a positive relationship with baby Leo, with high levels of warmth and low levels of invasion.

Annalise also made several changes including re-engaging with her local community and faith, finding joy in parenting, reduced levels of rumination and shame, and increased levels of mindfulness and acceptance. Annalise said she felt understood and validated by LMM. When we asked what was good about your experience in our service evaluation questionnaire, she responded:

“It helped me to understand my baby, for example, the different sleep states and cues. Baby massage helped my baby’s development.

When asked if there was anything that LMM could have done differently, they responded:

*“Nothing, I have found all the support extremely helpful”*

Annalise ended the work with positive reflections on the space that LMM had provided for her reporting that:

“Talking to LMM helped my mental state. It helped me be able to talk about my difficulties and be more compassionate to myself. I am now more able to notice my thoughts and not be consumed by them. I feel more accepting of where I am now and am looking forward to the future.”

Due to the involvement from LMM, this family were provided a safe base from which Annalise could navigate her transition into motherhood with support and compassion, in turn providing Leo with responsive and nurturing parenting.

***Names were altered to maintain confidentiality and details kept to a minimum for anonymity.***

## Endings

### Discharge from our care

We discharged 65 families from our direct clinical work offer this year, an average of 5.4 families per month compared to an average of 2.4 families per month last reporting period. The majority (72%) of families had a planned discharge with 20 families meeting their goals and / or completing the planned group intervention. Some families (n=22) decided that support from Little Minds Matter was not required, following the referral, which can be due to their situation improving naturally before the initial contact while others (n=2) were referred on to alternative services. For families who engaged in an intervention and were discharged during the last year, the mean length of time open to the service ranged from 11 to 83 weeks (mean = 33 weeks) demonstrating the varied offer we have, depending on the needs of the family.

### Family outcomes

The Little Minds Matter team uses parent-set goals, routine outcome measures and discharge evaluations to measure the effectiveness of the support we offer. We utilise the Mothers' Object Relation Scale (MORS) to explore the parent-infant relationships in cases where the infants have been born and the Mullers Prenatal Attachment Inventory if the referral is for a family who are expecting a baby. We use these measures with all carers, despite the use of the term mother. The MORS consists of two scales; measuring parental warmth to the infant and perceived invasion from the infant. If parents are attending two or more discrete interventions with the team they may be asked to complete the measures at the end of the first. The table shows these outcomes, alongside data comparing assessment to discharge measures.

**Table 1.**  
*Changes on MORS scores for families receiving care from Little Minds Matter*

	Pre-intervention to mid-intervention difference (n=3)	Pre-intervention to post-intervention difference (n=14)
Warmth	+9.3	+4.7
Invasion	-3	-1.6

We support parents to set their own goals to ensure our work is a good fit for their hopes and use scales to measure movement. Parents are initially asked *"Thinking about you as a parent to your baby. What is your main concern or worry? What would you most like to be different?"*. When families describe their difficulty they are asked to rate it using a scale from 1, a tiny worry, to 10 a huge worry. On average, parents scored their difficulties as 7.5 out of 10 with 83% of parents scoring it as a 7 or higher. By final measurement parents rated their worry or concern as an average of 3.3.

After establishing the main concern or worry, we ask families to set specific goals. Below are examples of goals families have worked towards this year, which demonstrate the breadth of work Little Minds Matter clinician's support.

*I would like to understand [baby's name] behaviours and emotional needs better. I will respond to [baby's name] more consistently and think of things from his point of view.*

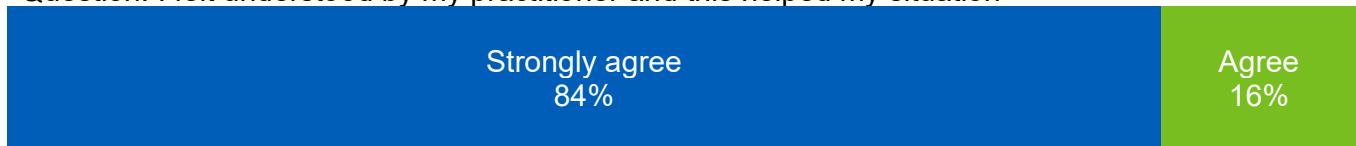
*I would like my own mental health to improve. I would like to (continue to) avoid any self-harming behaviours.*

*Begin to process grief re [baby's name] and have the space to explore this.*

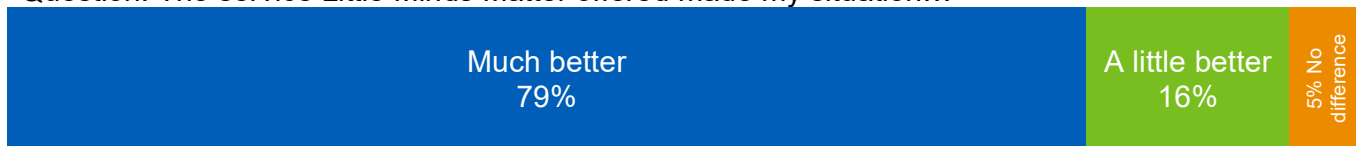
At assessment, families rated their progress towards their goals as 3.0 on average. By final ratings, the average score had increased to 6.9. Some families (18%) experienced a large increase (of 7 or more points) in their score ratings and 39% of families rated their progress towards their goals as at least an 8 at final rating.

We also ask families to complete a service evaluation at discharge and the feedback from the 19 families who completed it was positive again.

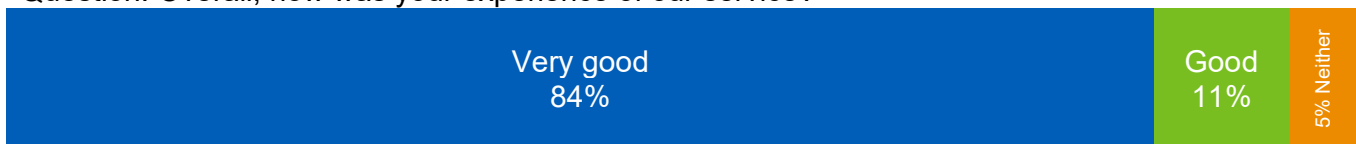
Question: I felt understood by my practitioner and this helped my situation



Question: The service Little Minds Matter offered made my situation...



Question: Overall, how was your experience of our service?



## Training

As an Infant Mental Health team one of our key priorities is upskilling the workforce, both present and future, in infant mental health concepts. Our training is interactive and engaging and helps those who attend to consider the importance of the 1001 critical days and reflect on how to incorporate parent-infant relationship interventions into their work. In April of this year we returned to face-to-face training delivery, much to the relief of the training facilitators and many of our attendees! This has resulted in an increase in evaluations returned and has assured us of the continued strength of our training packages.

### Infant Mental Health Awareness Training

This one-day awareness training is available to anyone working with babies or families in the Bradford area and discusses baby brain development, attachment and the importance of parent-infant relationships. This year the training was delivered to 61 people across five events; two held online before April and two after the return to face-to-face delivery. Unfortunately trust wide technology issues meant our March training event had to be cancelled.

The mean number of attendees on this training was 12.2 with a range of 10 to 17. Feedback (n=60) remains positive with 88% reporting that the training was 'Very useful' (n=39) or 'Useful' (n=14). In total over 700 clinicians have attended this training since 2018.

The whole training was extremely valuable. The section on attachment consolidated my knowledge. There was many areas that I did not feel confident in but I walk away feeling equipped with the knowledge to identify infant MH and the ability to better support the families I work with

Social Worker

Fantastic training- delivered clearly and confidently. Great discussions and activities! Videos were really interesting and informative.

Community Nursery Nurse

## Infant Mental Health in Action Training

Our Infant Mental Health in Action training is delivered as a half-day event and is open to clinicians who have already attended the awareness training. A total of 43 participants have attended across six events; four online and two since the return to face-to-face delivery. A further three events were cancelled due to low numbers.

Our group sizes are smaller for in Action training, compared with our Awareness training, to allow for reflection and discussion. The mean number of attendees was 7.2 with a range of 4 to 9. These figures are comparable to last year's total. Feedback was collected from a higher proportion of attendees compared to last year (n=39) and remains positive with 97% reporting that the training was 'Very useful' (n=29) or 'Useful' (n=9).

Today's training will help me in identifying any concerns when working with parents and confidently approaching the conversation.

BSB Project Worker

Face to face training is very beneficial, content and delivery methods were very good. The courses leaders were receptive to group needs, encouraged interaction and questioning.

Health Visitor

## Bespoke Training

The Little Minds Matter team also offers bespoke training to various teams to ensure the training is most appropriate to their roles. This year we have continued to offer training to Trainee Clinical Psychologists and have also trained student Social Workers, student Midwives, Assistant Psychologists and medical trainees. As a service that values and recognises the importance of timely intervention for families, we also recognise the importance of training our emerging workforce.

### Infant Mental Health Awareness for Trainee Clinical Psychologists

This annual half-day training event is offered to those on the University of Leeds Doctorate in Clinical Psychology course. All 30 attendees completed the evaluation form and 93% reported that the training was 'Very useful' (n=20) or 'Useful' (n=8) to their role. The trainees were asked to rate their knowledge of infant mental health, baby brain development, attachment and parent-infant relationships before and after the training. The cohort reported an average increase across all four domains, varying from a 1.6-point increase (attachment) to a 3.3-point increase (infant mental health) when using a one to ten scale.

Really passionate staff and informative training. It's definitely sparked my interest in the area.

### Infant Mental Health Awareness for Student Social Workers

A 3-hour training session was delivered to second year Student Social Workers at Bradford University. Nineteen students attended the training and completed evaluation forms. All attendees reported that the training was 'Very useful' (n=16) or 'Useful' (n=3) to their role. The students were asked to rate their knowledge of infant mental health, baby brain development and the importance of specialist parent-infant teams before and after training. On average these scores increased by 5.3, 3.9 and 3.7 points (using a one to ten scale). These scores are the highest average increases, compared to our other student training offers, and demonstrate the need for such training and the receptivity of Student Social Workers. The hope is to further develop relationships with Bradford University to offer different levels of training to Student Social Workers, so that they can grow their awareness, knowledge and confidence of Infant Mental Health and utilise this throughout their careers.

The whole thing was really interesting and eye opening. I thoroughly enjoyed it.

Fantastic presentation: Engaging and incredibly knowledgeable & passionate.

### An Introduction to Infant Mental Health Awareness for Student Midwives

A 90-minute training session was delivered to first year Student Midwives at Bradford University. Of the 52 students who attended, 90% completed evaluation forms with most reporting that the training was 'Very useful' (n=34) or 'Useful' (n=3) to their role. The students were asked to rate their knowledge of infant mental health, baby brain development and the importance of specialist parent-infant teams both before and after training. All three average ratings increased, by 3.5, 2.7 and 3.1 points respectively (using a one to ten scale).

I found the whole session really helpful but especially the interaction group work which allowed to visualise and understand more.

I really enjoyed it and found informative. Just highlighted the need for more of these services in Airedale area.

In addition to this teaching event Little Minds Matter provided interactive training to all three Student Midwife cohorts for International Day of the Midwife. The event included information on the importance of the 1001 critical days, brain development, identifying difficulties both ante and postnatally and having meaningful conversations with families. We had positive feedback from the organiser of the event: *"Thank you so much for your session the students really appreciated your session in the feedback and have taken a lot from it. I just wanted to share this with you and thank you again for your support on the day."*

### An Introduction to Infant Mental Health Awareness for Assistant Psychologists

A 1-hour training session was delivered to Assistant Psychologists employed by Bradford District Care NHS Foundation Trust at their away day. All 27 attendees completed evaluation forms and 89% reported that the training was 'Very useful' (n=13) or 'Useful' (n=11) to their role. The Assistant Psychologists expressed their interest in attending the full Infant Mental Health Awareness training. When asked to rate their knowledge of infant mental health, baby brain development and the importance of specialist parent-infant teams both before and after training the clinicians scored an average increase of 3.0, 1.2 and 1.7 points respectively (using a one to ten scale).

Loved the activities and being able to think about this in a visually engaging way.

### CAMHS Higher Trainee Medic Training

The Little Minds Matter team offered a 90-minute training event to CAMHS Higher Trainee Medics introducing Infant Mental Health and key messages around why babies can't wait, babies being born ready to relate, signs of difficulties in parent-infant relationships, having meaningful conversations with families and information about Little Minds Matter. Although the trainees completed evaluation forms prior to the training, unfortunately we did not receive any post-training evaluations.

### Let's think about baby sleep

In advance of our co-facilitated bonding and sleep workshops within Bradford Talking Therapies (see [Talking Therapies Sleep for two and Being us workshops](#) for more information) we trained 53 clinicians in Little Minds Matter key messages, biologically normal infant sleep, sleep myths and safe sleep.

Easy to understand, very practical, messages we can pass on and ways we can include it in our sessions.

For me, I had very limited knowledge around this area, so it was really helpful to explore this topic from the basics onwards and we seemed to cover a lot within the time given. Good mix of learning resources and really interesting findings on the cultural differences. Also, very refreshing to always relate back to such an open, honest, non-judgmental stance on these things.

This was a single bespoke event and 27 clinicians completed pre and post-training evaluations. Knowledge of sleep increased from an average of 3.7 to an average of 5.5, while confidence increased from an average of 3.8 to an average of 5.8 (using a one to ten scale). All attendees said they would recommend the training to others.

#### [An Introduction to Infant Mental Health for Newly Qualified Social Workers](#)

An hour-long workshop was offered to newly qualified social workers in their first year of qualified practice, known as the Assessed and Supported Year of Employment (ASYE). The workshop introduced Little Minds Matter and highlighted the importance of Infant Mental Health. Following the success of this session when initially delivered in March 2023, an arrangement has been set up with colleagues in Bradford Children and Families Trust (formerly Children's Social Care in Bradford Council) for this session to run quarterly with all newly qualified ASYEs. To date, we have delivered the workshop to 20 ASYEs.

#### [Voice of the Child training](#)

Our Specialist Health Visitor has continued to work closely with the Maternal Early Childhood Sustained Home Visiting programme Implementation Lead in 0-19 Service to deliver Voice of the Child training.

I felt the case studies really cemented the learning for me. Real situations are difficult but give clarity and perspective.

In total 175 staff have accessed the training, from a variety of professions including health visiting, school nursing, children in care nurses and safeguarding and vulnerability practitioners.

Understanding that every child has a voice regardless of age / gestation

## Consultation

The Little Minds Matter consultation offer is designed to support families indirectly, by supporting professionals who work with them. In consultation sessions we support clinicians to consider the work they do, the impact on their own wellbeing and the experience of babies in a family. We also build upon the knowledge provided in the [training](#) we deliver.

This year we offered a total of 321 consultation sessions, an average of 27 per month compared to 16 per month in the last reporting period. We offer four types of consultation: Triage Calls; Attachment Matters Drop-ins; Ongoing Consultations; and Reflective Discussions; and how we offer these has changed over our five years. We have seen a slight increase (8%) in the number of drop-ins offered this year and a higher proportion of them have been utilised. We've also seen increases in the number of Triage Calls (164% increase), Ongoing Consultations (100% increase) and Reflective Discussions (17% increase) facilitated.

### Triage Calls

Historically we required clinicians who wished to refer families to Little Minds Matter to engage in a triage call to ensure we had all the information we needed. We paused this process last year to encourage more referrals, however, found that many referrals required a follow-up conversation. We now book all referring clinicians in for a triage call. Refining these processes has allowed our team, and other clinicians, to utilise their time most effectively and ensures that families are not delayed being offered a service based on how soon clinicians are able to discuss the referral. Clinicians can also call us for advice or guidance, however, we now book these requests into Attachment Matters Drop-ins.

This year we facilitated 119 triages, an average of ten per month compared to an average of three per month last year. The majority (97%) of triages have occurred since the introduction of the new process. Most (n=96) triages led to a referral into Little Minds Matter. The most frequent professions to access

triage calls are health visiting (35%), midwifery (15%), children's social care (12%) and talking therapies (9%).

Reassured and helped me think in greater depth about the needs of the family and what support is available in achieving this.

Health Visitor

The phone call was extremely helpful and beneficial, and the team member I spoke with took time to work collaboratively to support the client at this time.

Psychological Therapist

Of the clinicians who completed an evaluation after the triage call (n=45), 93% found the call 'very helpful' (n=31) or 'helpful' (n=11). Almost all (95%) would be 'very likely' to recommend the service to a colleague.

### Attachment Matters Drop-ins

Our drop-in sessions continue to be held online as this is most accessible to clinicians. This year we have offered 113 drop-ins of which 35% have been utilised, a significant increase from the 13% utilised last year, likely as a result of moving to two sessions per week, instead of half a day each month.

All clinicians who completed the evaluation forms reported that the session was 'very useful' (n=20) or 'useful' (n=2). The majority (81%) also felt the session helped them feel more confident in working with parent-infant relationship issues.

It reassured me I'm on the right track when working with the parent/infant relationship and highlighted the area I can improve on, holding the experience of the baby (the voice of the child) in all interactions

Health Visitor

I had a home visit last week, I had discussed the visit at clinical supervision. Today I was gently guided and this allowed me to identify what had been concerning me during the visit that I hadn't been able to identify at the time

Health Visitor

### Ongoing Consultations

When the service receives a referral for a family we always consider if their needs would be best met with consultation to professionals working with them, either alongside, or instead of, direct clinical work for the family. Previously, families who were outside of our geographical area were offered this support, however, this is no longer needed with our expansion across Bradford Local Authority. This year we offered 20 Ongoing Consultation sessions, supporting 44 professionals relating to 13 families. A single consultation session was sufficient for 70% of the referrals.

The evaluations show that the clinicians who engage in ongoing consultations feel more confident in working with parent-infant relationship difficulties; 75% of attendees rating this with the maximum possible score. All attendees who completed the evaluations (n=12) found the sessions 'very helpful'.

It gave me direction as a professional, in how to work with the family I am working with, it gave me the confidence to open up questions and continue working with the family to improve outcomes of the mum and baby and helped me give the baby a voice

Health Visitor

Reminded to look at things from the baby's perspective.

Care Co-ordinator

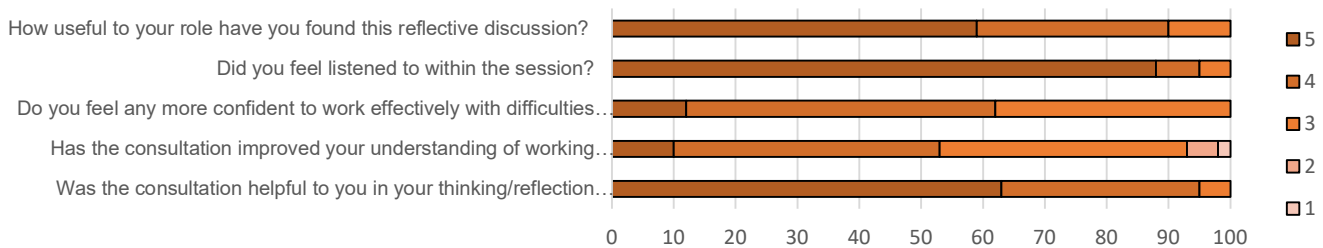
## Reflective Discussions

Our reflective discussions support teams to consider the impact of the work for the families they support and their own wellbeing, using a reflecting teams approach. This year we have offered 68 reflective discussions, to 18 different teams, of which 62% were attended. Attendees (n=157) are asked to complete an evaluation form (38% completed) and the results are shown in Figure 3.

I feel like I have a new confidence in my ability to work effectively within parent-infant relationship difficulties. I feel like this is because the session made me feel 'heard' and supported.

**Figure 3.**

*Reflective discussion attendees ratings (as a percentage) on five questions, with five being the highest score and one being the lowest.*



While ten of our reflective discussion are long-standing relationships, we have started to support eight new teams this year, six of which are midwifery staff. It can take some time to establish reflective discussions, especially when teams have high clinical caseloads. In an early midwifery reflective discussion staff were not able to attend, however, the Little Minds Matter clinicians used this opportunity to meet with student midwives to give an overview of baby brain development, attachment and the baby blindspot. The students reflected on their own experiences and observations.

The final two new reflective discussions are with the Safeguarding and Vulnerability team and with the perinatal and infant mental health champions in the 0-19 service. Our Specialist Health Visitor worked alongside the Specialist Perinatal and Infant Mental Health Practitioner in the 0-19 team to establish these consultations and is working towards making reflective spaces for all 0-19 staff mandatory, to ensure they have the protected time to attend twice per year.

I would just like to say a big thank you to you for letting me present a case. I feel I have learnt a great deal about mental health. I think if I was not a champion I would not have been confident or to say/use the tools or have a greater understanding that I do. Today has demonstrated this. I feel I have learnt a great deal about all mum's and their mental health.

The pilot groups with the champions have been well received and 23 clinicians have attended.

## Community Engagement

The Little Minds Matter team is privileged to include a specific strand devoted to engaging the community. Many of the team are involved with this work which is co-ordinated by our Community Engagement Worker in partnership with Family Action. We continue to interact with the community directly and via social media. We have also been joined by a Community Support Worker, as part of the Start for Life funding, who is involved in group delivery and in supporting the community engagement strand.

### Direct Community Engagement

The Little Minds Matter team continue to attend community events and groups, including as part of organised campaigns (see [National Campaigns](#) for more information). This year we held a stall at a Winter Wellness Event; Mental Health Trident Event; Family Hub launch events (see [Family Hubs and](#)



[Start for Life programme](#)); and Reevy Hill Summer Event. At the latter we supported parents and children to talk about emotions and had sensory items for younger children. We have also attended SEND group drop-in sessions run by community groups; breastfeeding clinics; Maternity Circle group; and continue to link in with the Family Action My Baby and Me group.

Our clinicians also attended two Play and Learn groups with the Early Years Alliance. The event was open to families and professionals and we shared information about the Little Minds Matter team and referral information for families.

The Little Minds Matter team have also continued to maintain links with Bevan House and offered support during their parent and baby group (Bevan Babies). The team have helped with referrals to POPI baby bank, liaised with the parental engagement team regarding workshops and signposted to HENRY starting solids classes. The families had questions around pregnancy, feeding and the newborn period so Little Minds Matter's Specialist Midwife attended the group to answer questions.

When recruiting new clinicians this year we invited a family who had engaged with the Little Minds Matter service to be part of our recruitment process. The family spent time with each candidate and then shared their experiences with the interviewing clinicians. This helped us to ensure we were holding the baby in mind during our recruitment process.

## Digital Community Engagement

As well as continuing to use Twitter, Facebook and Instagram the team have launched a TikTok account this year. Our Community Engagement Worker leads on our digital community engagement strand with clinicians contributing to the content of the posts.

We share activities for bonding and brain development, details of our offers and events for parents on Facebook, Instagram and TikTok. We know that not all families want, or need, a specialist service and wish to increase the awareness of the importance of parent-infant relationships in the wider community. We utilise Twitter to communicate our key events and successes with clinicians across the UK.

Advertising the launch of baby massage courses on our social media accounts has led to an increase in self-referrals (see [Referrals](#)). The first self-referral came from a parent who shared a compliment regarding our social media pages, saying that the content was really helpful, useful and well-written.

We publish at least 22 unique posts / tweets each quarter and reached our 1000<sup>th</sup> Facebook follower this year. We have a total of 2,239 followers across the four platforms, an increase of 41% in the last year. Bradford is the area of highest reach and the majority of our followers are either aged 25-34 (32%) or 35-44 (44%) suggesting we are reaching Bradford families. We are aware younger parents may utilise platforms that we do not yet use as frequently. More details on our reach can be found in [Appendix 2](#).

## Strategic and Leadership Activities

The Little Minds Matter team are a highly skilled group of clinicians and support staff from a wide variety of disciplines. The variety of experience, knowledge and qualifications enables the team to support the wider workforce and increase awareness of the importance of parent-infant relationships within the system.

## Family Hubs and Start for Life programme

This year has come with an exciting development for Bradford and 74 other areas across England in the launch of the Family Hubs and Start for Life programme. The Little Minds Matter team has led on the parent-infant relationships and perinatal mental health support funded strand and received funds to enable the expansion across the district. Other Bradford services have also benefitted from the funds including the Ready to Relate campaign and Family Action who deliver the perinatal support service. The Little Minds Matter team have worked alongside leads of the other strands and been involved in the Family Hubs launch, including attending the four launch events (see [Appendix 3](#)) to speak to local families about our offer. The service received referrals directly from these events and is now delivering groups in all four hub areas to improve accessibility for parents in Bradford.

...please pass our thanks to your team members who have been with us at our launch events. They have been really upbeat and a lovely part of the week so far. Exciting times.

The Little Minds Matter team have appreciated the opportunity to be involved in the Family Hubs and Start for Life programme, both in shaping the programme and receiving the funds to offer our services to more families. The programme truly has been an example of how Bradford services [Act as One](#).

## Influencing the local and national system

The passionate members of the Little Minds Matter team have attended or led 14 strategic groups or meetings across the district this year (see [Appendix 4](#)) to help the system hold the voice of the child in at the forefront of all we do. We have also visited 18 team or group meetings to increase awareness of the Little Minds Matter team (see [Appendix 5](#)).

### Social Care, pre-birth panels and Early Help support

During this year we have been joined by two Therapeutic Social Workers. They have been working tirelessly to become a source of support to the Family Hub and Early Help staff; helping them to hold the baby in mind and consider whether a referral to Little Minds Matter is appropriate. Being present in the Family Hubs has also allowed them to support families directly by offering advice and suggesting self-referrals when appropriate. The clinicians have also been supporting the pre-birth panels where families who are undergoing a Social Care pre-birth assessment are discussed. The clinicians ensure that the voice of the baby is heard within these meetings and support social care clinicians in learning more about the importance of bonding before birth and the support that could be available for a family. These activities have resulted in an increase in referrals from social care (see [Referrals](#) for more information).

### Maternal Early Childhood Sustained Home Visiting programme

Our Specialist Health Visitor has attended the re-launch day for the Maternal Early Childhood Sustained Home Visiting programme. The programme involves intensive home visiting for families who would benefit from extra support from a Health Visitor. Practitioners at the relaunch reflected on how the programme helped them to identify where a family may need support from Little Minds Matter with their parent-infant relationship. A link to our website and more information about Little Minds Matter has been added to the practitioner handbook which will be given to all health visitors who are trained to deliver the programme as part of the roll out across Bradford.

### Presentations

- Boyce (2023), *Successes, priorities and challenges in Little Minds Matter*, CAMHS visioning event
- Dunster-Page (2023), *Infant Mental Health Awareness*, BDCT Executive Broadcast
- Dunster-Page (2023), *The importance of parent-infant relationships*, BCB Radio
- Gallagher (2023), *Introduction to Little Minds Matter and Infant Mental Health*, Special Guardianship Order Team

- Gallagher and Daghli (2023), *Introduction to Little Minds Matter and Infant Mental Health*, Independent Reviewing Officers Team
- Gallagher and Daghli (2023), *Introduction to Little Minds Matter and Infant Mental Health*, Approved Mental Health Practitioners Forum
- Loftus (2023), *Connecting with the unborn baby through relaxation and mindfulness techniques*, Association for Infant Mental Health (AiMH) UK Conference. More details can be seen in the [Infant Mental Health Awareness Week 2023 section](#) below
- Wass and Gallager (2023), *Infant Mental Health Matters*, Early Years Connect (see below)
- Vincent (2023), *Social and Emotional Development*, A Better Start Conference (see below)

At this year's A Better Start conference the Little Minds Matter team contributed to the Social and Emotional Development workshop, which focussed on addressing the baby blindspot and parental mental health / wellbeing support. The theme was 'Improving early childhoods in the face of deepening uncertainty: learning from A Better Start'. Within this workshop we highlighted why infant mental health needs to be a priority, and how Little Minds Matter and other A Better Start services are supporting infant mental health both through offering specialist support to families directly and also by providing training and consultation support to professionals in the wider workforce. We included a call to action for those attending the conference, inviting the collective commitment to challenge the baby blindspot and recognise and respond to the needs of babies; ensuring their voice is heard.

...you and the additional contributors were all amazing and clearly expressed your enthusiasm, knowledge and commitment to the early years agenda and the difference you are making at a local level and then collectively to making ABS such a success and driving force...Today attendees were able to hear some very powerful messages and insights around the difference ABS is making and it is making that difference because you collectively care – when you have a minute, please take time to reflect on the difference you are making. It all starts with HOPE.

Head of Funding from the National Lottery Community Fund

This year two Little Minds Matter's clinicians presented at the Early Years Connect Event. There were 103 attendees including nursery nurses, childminders, toddler group leaders and pre-school staff. The clinicians spoke about healthy first relationships and shared information around supporting babies' mental health from the very beginning. They also supported discussions around the handover / transition to nursery or pre-school and the role of caregiver in a childcare setting. Verbal feedback during the session was gathered with attendees finding the training interesting and informative.

#### Support to other services

- Berkshire NHS Trust regarding using baby massage as a tool to focus on building parent-infant relationship
- Blackpool Better Start regarding establishing Circle of Security Parenting group
- Calderdale and North Lincolnshire NHS trusts regarding outcome measures on SystemOne
- Sheffield parent-infant relationship team regarding establishing their service
- Southampton NHS Trust virtual visit to team regarding establishing local service

#### Research

Our Specialist Health Visitor peer reviewed an Institute of Health Visiting Good Practice Points on strengthening parent-infant relationships. This involved reading an early draft and contributing to areas requiring change, prior to publication. Good Practice Points are based on the six high impact areas for health visitor public health outcomes within the Healthy Child Programme. They are written using up to date evidence, by topic experts and health visitors. Members of the Institute of Health Visiting can read the document at [www.ihv.org.uk](http://www.ihv.org.uk).

Our team have been involved in the Helping Little Minds Thrive research programme, a four-year programme of research which aims to support services to provide every family in need with meaningful, effective and accessible support which strengthens babies' mental health.

Finally, we are involved in the planning for a PhD project researching mother's experiences. We aim to support the placements required to bring a clinical perspective to the research.

## National Campaigns

### Baby Week 2022

Our team was involved in the Better Start Bradford Baby Week (14<sup>th</sup> to 18<sup>th</sup> November 2022), attending various community groups and events across the local authority; aiming to increase our reach across communities.

A family event at Bradford City Football Club was organised by Better Start Bradford, where 114 parents / carers attended with 105 babies. Four staff members from Little Minds Matter supported the event and gave families the opportunity to re-create one of the activities from their Moments that Matter campaign of blowing bubbles. The team engaged with 102 families and gave out bubble bottles as practitioners explained the importance of these quality interactions for building relationship, supporting speech and language and brain development.



Our Community Engagement Worker attended the My Baby and Me Group delivered by the Perinatal Support Service. The aim was to invite people to the Circle of Security group as additional support after this group finished. Three families showed an interest and began the assessment process for Circle of Security group. Our Specialist Health Visitor and Community Engagement Worker also attended a baby group specifically for people from the Roma community. We shared some key messages about the parent-infant relationship which was received positively.

Better Start Bradford held an event for the workforce; the Little Minds Matter team gave a brief presentation about the service. We also held a stall to share the key messages of the service and increase awareness in the local workforce by inviting wider professionals to sign up to our mailing list and training events.

We published information on our social media platforms each day. Furthermore, our Family Therapist, Specialist Health Visitor and Community Engagement Worker teamed up with the Perinatal Support Service to deliver an Instagram Live. The event reached 249 views and the clinicians answered live and pre-asked questions from families. Throughout the week, our Instagram reached 553 accounts, 317 having been non-followers and finding us through the Baby week hashtags as well as the infant mental health tags and there were 700 Tic Toc views.

Two of our clinicians are involved in the organisation of Baby Week 2023 and have contributed to the development of the key messages.

### Infant Mental Health Awareness Week 2023

During Infant Mental Health Awareness Week (12<sup>th</sup> to 16<sup>th</sup> June 2022) the focus was on 'Bonding Before Birth'. We increased our reach both to families and other services working with families including through our [birthday party \(see below\)](#) and pop-up events to discuss baby massage.



We also held pop-up coffee carts at the maternity wards at Bradford Royal Infirmary and Airedale General Hospital. The purpose was to provide a space for clinicians to easily access the Little Minds Matter team, to hear about our service and ask questions related to Infant Mental Health.

Our Specialist Midwife presented at The Association for Infant Mental Health (AiMH) UK Conference, on '*Connecting with the unborn baby through relaxation and mindfulness techniques*' which was aligned with the theme of Infant Mental Health Awareness Week 2023. There were over 150 attendees from across the globe. Resources were shared which practitioners can utilise in their own practice including: imagining baby; who will love and support baby; creating a safe and nurturing environment; the importance of touch; as well as demonstrating mindful meditations such as breathing with baby and compassion for baby and me.

During the week, the team reached over 7,000 accounts on social media. We hosted an Instagram Live with clinicians from the Perinatal Support Service in Family Action which was viewed by 65 different accounts.

#### We've turned five!

During Infant Mental Health Awareness week, we held our fifth birthday party. The team celebrated with both families and professionals who have been supported by the service since its conception. The event included activities to suit all attendees, including a stall focused on states and cues, baby massage and circle of security. Activities for families included arts and crafts tables, trough trays, a ball pool and a sensory corner.

Feedback from the event was positive, with 89% of clinicians stating they would be interested in attending training from the team; and 11% sharing that they had already accessed the training. In addition, 63% said they would access consultation from Little Minds Matter. All attendees stated that they would recommend us to a family member and / or friend.



## Team Development & Activities

### Offering High Quality Clinical Placements

Two Trainee Clinical Psychologists have joined us on placement this year, meaning we have now offered ten placements in total. This is an important aspect of our national role: to broaden the awareness of clinician's knowledge of infant mental health and grow the number of clinicians who can work in this specialist field once qualified; increasingly important as the number of specialist services increases.

A summary from Emily (across) and Ciara (below) can be read in [Appendix 6](#). Together they reported that *“We wanted to highlight how nurturing and containing the team have been at such a difficult time in clinical psychology training. We couldn’t have asked for a more supportive team where connection with each other is so valued; we have felt like we have a really secure base from which to go and explore the work. The team really embody the ‘relationships matter’ ethos of the work, and we really felt this shines through in every interaction.”*



This placement has highlighted the importance of relationships to me – the relationship I have with myself, my colleagues, and service users.

It really has been a privilege to be part of such a brilliant team, and I wouldn’t have wished to be anywhere else for my final year of training.

In collaboration with Better Start Bradford we have offered placements to 45 student midwives and student nurses. We also expanded this offer to two professionals interested in visiting our team. During the half-day placement students observe a case discussion and are supported to learn about the importance of infant mental health and parent-infant relationships. We encourage students to seek our support through consultation after the placement. All 32 participants who completed the evaluation said the placement was very useful (44%), useful (50%) or somewhat useful (6%).

I enjoyed the session; it was interesting and provided me with knowledge that will be very useful in the future when caring for women and partners.

I really enjoyed the team meeting and videos explaining the different support available.

## Clinician Skill Development

Our training focus this year has been on expanding our group and trauma intervention offer. Three clinicians have trained in baby massage and a further clinician in Circle of Security. Three of our psychologists have attended the Eye Movement Desensitisation and Reprocessing training and are supporting families with traumatic memories that are impacting on parent-infant relationships. Another focus this year has been on inclusivity, with the team working towards being trans / non-binary allies by seeking development opportunities and discussing this topic during team learning events. We also reach out to other organisations to ensure they are aware we can support families who identify as transgender, as well as those who identify as lesbian, gay, bisexual or another term they prefer to use which is related to their sexuality and / or gender.

### Training Courses Attended

- Circle of Security
- Cognitive Analytic Therapy training
- Dyadic Developmental Practice and Psychotherapy Level 1
- Eye Movement Desensitisation and Reprocessing
- International Association of Infant Massage Training
- Ready to Relate
- Systemic Family Therapy
- Trauma-Informed Leadership
- Transforming Trauma (Internal Family Systems)
- The Power of Language; Emotional Regulation; and Assessments
- Theraplay

#### Conferences / Workshops Attended

- Birth Trauma introduction
- Child Special Interest Group
- Introduction to Mentalizing and Early Patterns of Relating
- Enhancing emotional regulation in the parent-infant relationship using VIG webinar
- Parent-Infant Foundation Networking Day
- Parent-Infant Foundation Peer Learning Forums
- Parent-Infant Foundation Virtual National Networking Day
- Theraplay Web Supervision Observation session
- Trauma in the Womb webinar

# Appendices

## Appendix 1: Case studies for two families engaged with baby massage

Names were altered to maintain confidentiality and details kept to a minimum for anonymity.

### *Aabidah and Sabah*

Aabidah and baby Sabah accessed our first baby massage group following an internal referral from another Little Minds Matter clinician. Aabidah is partially sighted and she spoke of this having an impact on the bond between her and Sabah. She spoke of the difficulty in connecting when she could not see her daughters face. During the baby massage group, we ensured that a facilitator was working one-to-one with Aabidah and supporting her through the strokes. Aabidah was engaged and interacted with Sabah during the sessions. She spoke of realises how important touch is for her and her relationship with Sabah, and how the sessions had helped her. She spoke of not being able to see Sabah smile and how she would now uses touch; feeling the corner of Sabah's mouth to know that she is smiling and enjoying the massage.

At the end of the course Aabidah reported:

*I found it really beneficial in terms of how I talk about my child and not using labels, instead using words more reflective for her nature, I am now able to listen to baby, know when it is or isn't appropriate for massage and it has really helped to be in tune with baby. It's helped me to prioritise the bond.*

When asked how Sabah had benefitted, Aabidah responded:

*Having one to one quality time with her mum and create a better bond between us.*

### *Rabia and Zara*

Rabia has fibromyalgia and arthritis which became worse after Zara's birth. When a Little Minds Matter clinician first visited her, she was concerned that she was not being a good Mum to Zara as she was unable to do things that other parents could. Rabia was struggling with the buttons and poppers on baby clothes and was becoming increasing scared of picking up her daughter.

Rabia had heard that baby massage could be good for baby's development and was happy to attend a group session, however the intervention was offered on a one-to-one basis at home. Group baby massage is performed on the floor and Rabia would have struggled with this. A alternative provision in a group could have led to her feeling separate from the others.

Rabia learnt the baby massage strokes and decided to make this part of Zara's bedtime routine. Her older brother Zain also became interested in being massaged and Rabia was shown how to adapt the massage strokes for Zain so he could receive this special time from Mum too. Rabia said that she and Zain often chatted about his day and what he had done at nursery when he was receiving his massage. Rabia found that massaging Zara and Zain regularly benefitted them all with her experiencing increased flexibility and movement in her hands.

At the end of the course Rabia reported:

*I can feel [my hands] them being gently stretches as I do the massage strokes. I now feel more confident to pick up my daughter. I felt really nervous before as I had limited hand movement. I now massage my 3-year-old too. It has brought us all closer together.*

When asked how Zara had benefitted, Sabia responded:

*My baby is now more relaxed. She sleeps better when I massage her before bedtime. I feel better as a parent as I can spend some special time with her doing something that we both enjoy. It has helped with her muscle development. She is more active than my older child was at this age.*



## Appendix 2: Digital Community Engagement

	Twitter	Facebook	Instagram	TikTok (two posts to date)
<b>Total reach</b> <small>Tweet impressions / accounts reached</small>	22,000	24,893	7,155	1,828
<b>Reach of top post</b> <small>Tweet impressions / accounts reached</small>	17,000	4,399	612	1,018
<b>Total followers / page likes</b>	494	1,006	675	64

## Appendix 3: Family Hubs launch events

**Start for Life Family Hub Launch 2023:**  
*How Little Minds Matter were involved.*

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- 99.9% of families visiting the hubs found them to be welcoming
- 99.9% of families would recommend Family Hubs and Start for Life to their family and friends
- 95% of families felt that had learned more about Family Hubs after attending.



**Sensory Play**

**Engaging Families**

**Best Start for Babies**

**We set out our stall at all four launch days!**

**Partnership Working**



**Over 125 Families joined us over the four hubs!**

## Appendix 4: Strategic groups attended or led by Little Minds Matter

- 0-8 Subgroup meetings
- ATR Reset Day
- ATR Workforce Development subgroups
- Baby Week 2023 Steering Group
- Bradford District and Craven Health and Care Partnership Reset Engagement Event
- Family Hubs and Start for Life Joint Programme meetings
- University of Leeds supervisor update
- Universal Children's Sleep Support Model
- Parent-Infant Foundation Networking Groups
- Perinatal and Infant Mental Health Clinical Forum
- Perinatal and Infant Mental Health Steering Group
- Project Leads Meetings, Better Start Bradford
- Quality and Operations Meetings CAMHS
- Yorkshire and Humber Infant Mental Health Hub

## **Appendix 5: Meetings attended with teams / key individuals to share information on Little Minds Matter service**

0-19 Service, New Starters

Approved Mental Health Professional Forum

Bradford Children's Social Care teams including Friends and Family Fostering Team, Special Guardianship Order Team, Independent Reviewing Officers, Child Protection Co-ordinators, Approved Mental Health Practitioners, Pre-birth team and Edge of Care team

Child and Young People Mental Health Providers

City CMHT, South CMHT and West CMHT

Family Support Forum

Safeguarding and Vulnerability team leaders

Social Work Forum

Social Work students and Practice Educators

West Health Visiting Service Business meeting

## **Appendix 6: Feedback from Trainee Clinical Psychologists**

Where do we start?!

We wanted to highlight how nurturing and containing the team have been at such a difficult time in clinical psychology training. We couldn't have asked for a more supportive team where connection with each other is so valued; we have felt like we have a really secure base from which to go and explore the work. The team really embody the 'relationships matter' ethos of the work, and we really felt this shines through in every interaction.

We have had access to lots of different opportunities on placement which has made our time here feel really rich in terms of learning and growth. As well as lots of opportunities to work directly with families, drawing on different approaches to exploring the parent-infant relationship, we have been able to support therapeutic groups (e.g., Baby massage; Circle of Security). We have also had the experience of delivering training and consultation to other professionals, jointly running sleep and bonding workshops with IAPT, and offering a regular reflective space to assistant psychologists in CAMHS – and much more!

Before we joined the team, our placements had generally focused on 'intervention', rather than prevention. Whilst we came with some knowledge around the importance of early development and attachment, our eyes have been opened up so much more in terms of the role of the parent-infant relationship and the challenges that families can experience in this context. We've also learned so much about how amazing babies really are! Ultimately, it has felt like a real privilege to experience this placement at such a crucial time in terms of our development, but also at a time where the national landscape is really shifting and the importance of the first 1001 days is being increasingly recognised. We'll be sorry to wave goodbye to LMM!

*Emily: My placement with LMM has been hugely influential in my thinking about the psychologist I'd like to be post-qualification. I'm really keen to pursue this important area of work further and I'm leaving the service hoping to continue thinking about parent-infant relationships on the other side. It really has been a privilege to be part of such a brilliant team, and I wouldn't have wished to be anywhere else for my final year of training.*

*Ciara: This placement has highlighted the importance of relationships to me-The relationship I have with myself, my colleagues, and service users. I have appreciated having the time and space to reflect on my personal and professional development, as I transition to newly qualified life. I have really enjoyed working in a way that aligns with my values, where I've been able to work collaboratively with other professionals and services. Working in LMM has confirmed that I want to continue working with children and families going forward!*