

EXPLORING CHALLENGES IN ACCESSING PERINATAL MENTAL HEALTH CLINIC IN A TERTIARY CARE UNIT

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OBJECTIVE

Barriers to accessing maternity services often arise at various points in the care pathway. This study aimed to identify the **obstacles patients face in attending antenatal clinic appointments**, with the goal of improving patient experience and attendance, ultimately translating into better ongoing care and support.

DESIGN

A retrospective study was conducted. Service users who **missed their perinatal mental health clinic appointments** in a three-month period were contacted by telephone within seven days, with each patient receiving up to three attempted telephone calls.

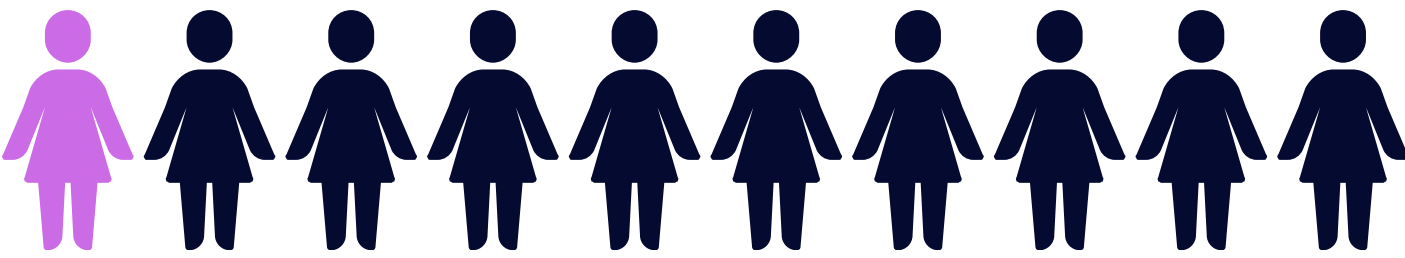
METHODS

Participants: all service users who **missed perinatal mental health clinic appointments** between **October and December 2024**.

Procedure: patients were contacted **within seven days** of their missed appointments to explore the **reasons for non-attendance** and gather **suggestions for improving service accessibility**.

Additional data: **obstetric history, maternal health, social background** were retrieved from electronic systems (BadgerNet and EPR).

RESULTS



26 out of 200 (13%) service users missed their scheduled perinatal mental health clinic appointments
Of these, **15 responded** to follow-up calls, while **11 did not answer**.

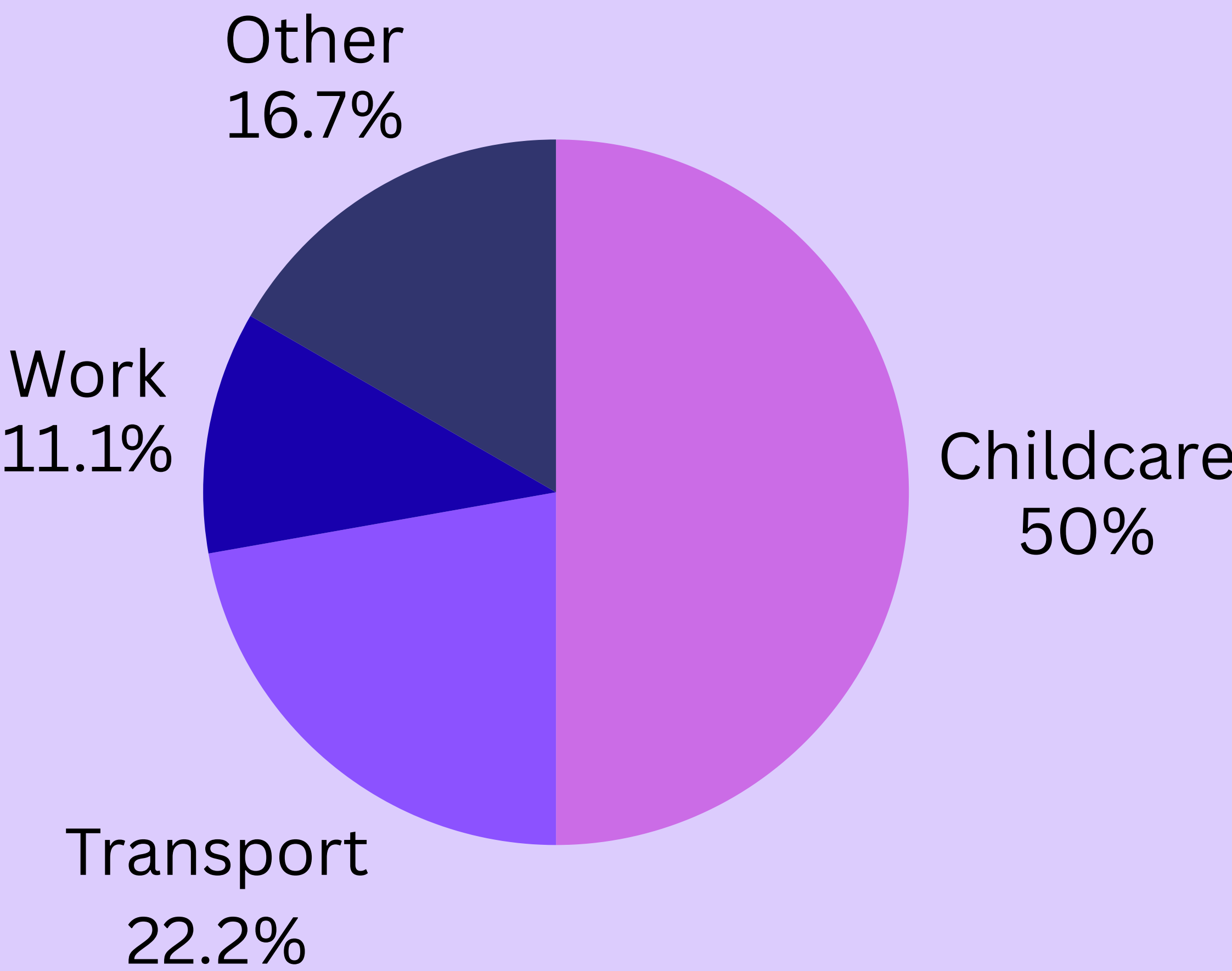


Figure 1. Reasons for missing appointments

RESULTS

The most frequently cited reasons for missing appointments were:

- **childcare** responsibilities
- **transport** and **parking** issues
- **work** commitments
- **short notice** ahead of appointment, making it difficult to arrange help with childcare or work commitments
- Many service users reported challenges in contacting the clinic team to inform them of their inability to attend.

RESULTS

Suggestions to improve the service included:

- **enhancing communication** methods through email and text
- **highlighting the option of telemedicine appointment** to increase accessibility

Among the patients who did not answer the calls, 2 service users required an interpreter as English was not their first language, and the mean age of this group was lower than the average for the studied population.

CONCLUSIONS

The study highlighted the barriers to accessing perinatal mental health clinics and identified improvements to the service based on recommendations from service users themselves. The team are committed to implementing these changes to improve appointment attendance. Notably, patients who missed appointments and did not engage via telephone were **younger and non-native English** speakers, emphasising the need for **tailored support throughout their pregnancy**.

