

What is Lothian PAIRS?

Lothian PAIRS is a multidisciplinary team who will work with infants, from conception to their 3rd birthday, their parents/carers, and the people who support them.

The aim of our service is to deliver a compassionate, inclusive, and effective service which views the parent -infant relationship as the vehicle for change for **optimal infant mental health**.

We aim to do this by:

- providing specialist support for those working with infants and their families in the universal and universal plus workforce, including Health Visitors, third sector organisations, and social care, and
- offering a direct service to infants and their parents / carers, through group and one-to-one evidence-based interventions which target the relationship.

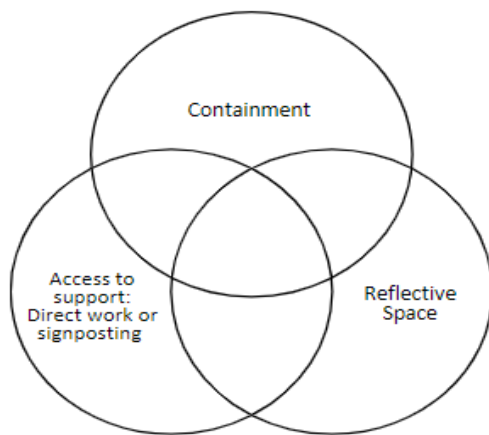
What can I access?

The PAIRS team offer a MS Teams session during which we can think together about the needs of the family. This can be up to 45 minutes but can be adapted to meet the needs of the referrer.

Consent must be obtained from the family.

This meeting will highlight which services might be helpful for the infant and their parent/carer and ideas for working with the relationship. This may be a one off, we may offer further meetings, or we may decide to meet the family for direct work as an outcome of this request.

What we offer in Consultation:



Who can refer?

We are open to referrals from health visitors, FNP, Midwives, Community Paediatricians and some third sector organisations in Edinburgh City and Midlothian.

Infant may present with (for example):

withdrawn, inhibited behaviour, significant sleep and feeding problems, infant distress, development delay.

Parents may present with (for example):

Bonding difficulties / difficulties with relationship, insecure attachment patterns, reported or observed difficulties in parent-infant relationship, sense of disconnection/indifference towards infant, excessive worry about relationship.

How do I access this?

If you have an infant that meets the referral criteria and you would like a consultation for them, please complete the details overleaf and send to loth.pairs@nhslothian.scot.nhs.uk.

You will be contacted to book a consultation appointment.

We will aim to respond within three working days and offer a consultation slot within 10 days.

Lothian Parent and Infant Relationship Service (PAIRS) Consultation Request Form

| Child's Name | Child's DOB or EDD | Child's NHS Number (CHI) | Address | |
|--------------------------|--------------------|---------------------------|--|---------------------------------|
| | | | | |
| Preferred Name of Parent | Parent's DOB | Parent's NHS number (CHI) | Parental responsibility | Address (if different to Child) |
| 1 | | | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| 2 | | | YES <input type="checkbox"/> NO <input type="checkbox"/> | |

Other Professionals supporting the family

| Service | Practitioner Name & Practice or Team | Telephone number | Work already undertaken |
|---------------------|--------------------------------------|------------------|-------------------------|
| GP | | | |
| Midwife/Sp Midwife | | | |
| HV | | | |
| Social worker | | | |
| Adult mental health | | | |
| Other | | | |

Briefly outline your concerns and describe what would be a good outcome of the consultation:

Which, if any, of the wellbeing indicators are not being met or at risk? (Please refer to the Wellbeing Wheel if needed on next page)

| | | | |
|----------------------------------|------------------------------------|--------------------------------------|-----------------------------------|
| Safe <input type="checkbox"/> | Achieving <input type="checkbox"/> | Respected <input type="checkbox"/> | Included <input type="checkbox"/> |
| Healthy <input type="checkbox"/> | Nurtured <input type="checkbox"/> | Responsible <input type="checkbox"/> | Active <input type="checkbox"/> |

The PAIRS service requires patient consent to refer and liaise with professionals

Has the parent/carer consented to this consultation with the team? Yes ☐ No ☐

Is there consent for liaison/transfer to partner services if referral is out with PAIRS criteria (e.g. MNPI or Perinatal MH team)? Yes ☐ No ☐

Is there consent for us to access the parent/carer patient record as well as that for the infant? Yes ☐ No ☐

Referrer's details

| | |
|--------------------------------------|--------------|
| Name: | Designation: |
| Telephone number: | Email: |
| Weekdays available for consultation: | |

