

Integration Joint Board 15 November 2018
Programme for Government funding for breastfeeding
To provide an update on work to improve local breastfeeding rates.
The Integration Joint Board is asked to: i) Note the additional funding NHS Ayrshire & Arran will receive; ii) Note the proposals for this funding.

Glossary of Terms	
ISD	Information Services Division, Scotland
UNICEF	United Nations International Children's Emergency Fund
SIMD	Scottish Index of Multiple Deprivation

1. EXECUTIVE SUMMARY

- 1.1 Ayrshire has low breastfeeding rates, with a low initiation rate and high drop off rates at discharge from hospital, at 10 days and 6-8 weeks.
- 1.2 As part of the Programme for Government (2017/18), the Scottish Government requested NHS Boards submit proposals to increase breastfeeding support for mothers, particularly in the earliest days following birth. A proposal entitled 'A new multidisciplinary model for infant feeding support" was submitted with the aim "To make Ayrshire the best place in Scotland to breastfeed."

A second proposal was submitted to increase the provision of peer support groups for expectant and new parents across Ayrshire. NHS Ayrshire & Arran will work in partnership with the Breastfeeding Network to introduce two new infant feeding groups.

NHS Ayrshire & Arran will receive £345,000 over three years to implement these proposals.

1.3 After the proposals were submitted, Scottish Government asked NHS Ayrshire & Arran to host and manage a Breastfeeding Advocacy Lead for Scotland post and will receive a further £175,000 over three years. The post holder will work in conjunction with Scottish Government to support the development and implementation of an advocacy and cultural change strategy.

2. BACKGROUND

2.1 There is compelling evidence on the benefits of breastfeeding on the short and long term health of mothers and their babies. Breastfeeding protects babies from ear, gastrointestinal and chest infections, diabetes and obesity later in childhood. Women who breastfeed are less likely to develop breast and ovarian cancer, hip

fracture as a result of osteoporosis and are more likely to return to their prepregnancy weight. The nutritional value of breastfeeding is clear, it is a living fluid designed to meet the needs of the individual baby, relative to their age and stage. However, in addition there are other benefits of breastfeeding; UNICEF describes breastfeeding as 'nutrition + protection + comfort'. Breastmilk contains antibodies, which provide protection from infections. Breastfeed babies are fed in a responsive way and breastfeeding provides comfort when tired or distressed. The hormones of breastfeeding also encourage a strong bond between mother and baby.

2.2 Breastfeeding rates in Scotland are low compared to the rest of the UK. It can be seen from Figure 1 that breastfeeding rates vary by geographical area and rates in Ayrshire are the lowest in Scotland. The most recent data published by Information Services Division (ISD) Scotland showed that in 2016/17, 18.5% of babies in NHS Ayrshire & Arran were exclusively breastfed at 6-8 weeks compared to 30.3% of babies in Scotland.

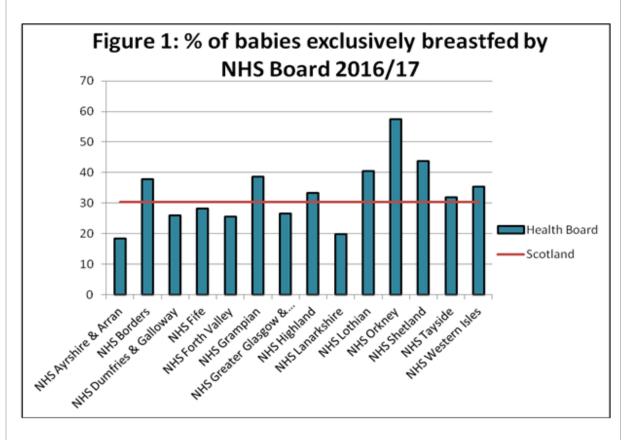
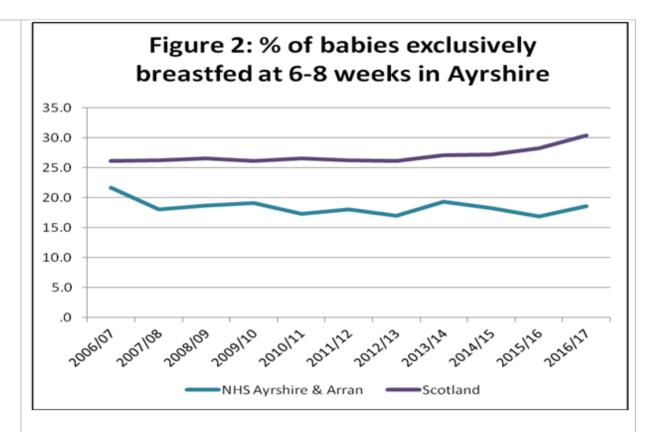
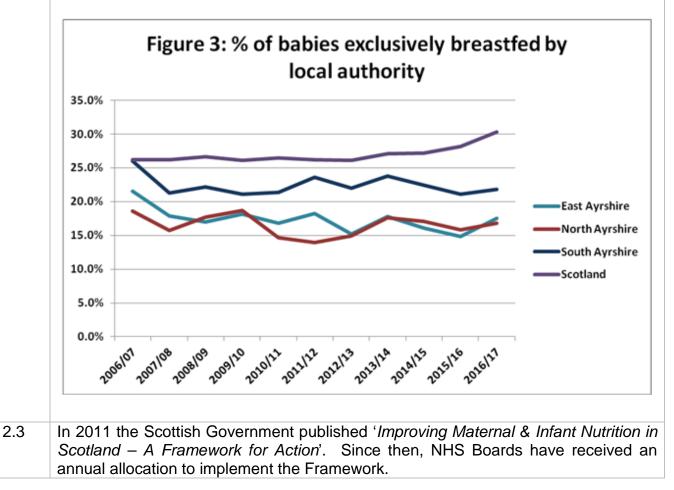


Figure 2 shows that national breastfeeding rates between 2006/07 and 2012/13 were relatively static, with a small gradual increase each year since then. Locally, rates have remained stubbornly low with some year to year fluctuation.



Breastfeeding is strongly linked to deprivation, maternal age and educational attainment of the mother. Women who live in the least deprived areas in Scotland are three times more likely to breastfeed than those who live in the most deprived areas; thus babies already vulnerable are further disadvantaged. Older women and those who go on to higher education are more likely to breastfeed. Within Ayrshire breastfeeding rates are higher in South Ayrshire compared to those in North and East Ayrshire (Figure 3).



2.4	The Maternal & Infant Nutrition Programme Board is a partnership between NHS Ayrshire & Arran, the three local authorities and the Breastfeeding Network (a national charity), whose purpose is to oversee implementation of a local maternal and infant nutrition action plan and the associated ring-fenced funding. The plan spans maternal nutrition, including maternal healthy weight; breast and formula feeding; weaning; oral health; and nutrition in early years. The Infant, Children and Young People Transformational Change Programme Board provides oversight of this work.
3.	PROPOSALS
3.1	Integrated infant feeding team
	Change 1: One point of contact for breastfeeding support
	Infant feeding support is provided by two key partners; NHS Ayrshire & Arran (maternity unit and community) and the voluntary sector (the Breastfeeding Network). We find that this can lead to some families finding it hard to know what support is available to them and what support best matches their needs. There can also be duplication of support and issues with communication between those practitioners supporting a family. The funding will be used to bring key NHS and Breastfeeding Network staff together to create one team. This Integrated Infant Feeding Team will consist of NHS infant feeding leads and a peer support lead, working together to offer a single point of contact for infant feeding in Ayrshire. The team will deliver a range of innovative, community-based antenatal and postnatal interventions to help increase breastfeeding initiation rates and reduce attrition rates. The team will also lead and co-ordinate activities which challenge the embedded formula feeding culture across Ayrshire. The funding will provide 0.8 WTE Band 6 Community Infant Feeding Support Nurse to support the existing community infant feeding lead, along with 0.6 WTE admin support. For peer support it will fund 2.0 WTE Breastfeeding Network peer supporters to provide proactive support for families.
	All requests for support will be triaged through the team, allowing decisions to be made about the most appropriate type of support for each family and which team member is best able to offer it. This decision will be made in conjunction with the family. This will allow access to the most appropriate type of support and develop a local model of universal, additional and specialist support, which UNICEF Baby Friendly Initiative recognise as the best model for infant feeding support. Inclusion of peer supporters in the team will result in continuity of support from the antenatal period, through the first days home from hospital until after the baby is 6 weeks old.
	As part of this change, all breastfeeding families in Ayrshire will be offered proactive, family centred, 1-1 breastfeeding support within 24 hours of discharge from Ayrshire Maternity Unit. A phone call will be made to the family and during this call a breastfeeding assessment will be completed. Where the results of the assessment suggest there are issues with breastfeeding, a same day home visit will be offered. There will be clear referral routes to specialist support if needed. The Team will be using the model for improvement to test methods of contact and support.
	Proactive support before problems arise should result in reduction in drop off rates at discharge from hospital and before day 10. Pregnant first time mothers and those who have had a previous poor experience of breastfeeding will be able to ask for contact with the infant feeding team before their baby arrives and then link in with a peer supporter or most appropriate member of the team from pregnancy right through their breastfeeding journey.

The integrated team will encourage mums to access support from local peer support groups once they feel able to attend to help them build supportive social networks with other parents to help reduce isolation. This is in line with the Maternal & Infant Nutrition Framework, which states that all families should have access to both professional and peer support.

Change 2: Access to support for parents of premature and sick babies

The team will test offering support for families with a baby in the neonatal and paediatric wards, with peer supporters visiting daily to offer evidence-based information and support around breastfeeding and social and emotional support for parents at what can be a very stressful time. Support in these areas will also focus on talking to parents about the importance of close loving relationships and attachment and bonding with their new baby in line with UNICEF Baby Friendly Initiative standards, alongside expressing and using breast pumps and skin to skin/kangaroo care as appropriate.

Peer supporters will be able to offer support around expressing and storing breastmilk, including for mums who choose to exclusively pump, skin to skin and concerns around milk supply to mums in both the antenatal and postnatal periods, alongside more specialist support in these areas from other members of the team. Mums who pump whilst their baby is in the neonatal unit or who express for long periods of time can be at particular risk of isolation and peer supporters will be able to offer social and emotional support to these mums to enable them to reach their feeding goals. There will be a clear pathway for peer supporters to be able to easily refer back to the Integrated Team to access specialist feeding support for these families if needed.

Change 3: Access to additional antenatal support

We are already in the early stages of testing an online breastfeeding antenatal course on Facebook and this will continue as part of this project, supported by the new Integrated Infant Feeding Team. The content of the course will include evidence-based information on breastfeeding alongside lots of hints and tips from other parents in Ayrshire about how to get breastfeeding off to a good start.

The aim of the course is to normalise breastfeeding and give families the information and knowledge they need to empower them to make informed choices about feeding their new baby. The course groups will be linked to a Facebook page called Ayrshire Breastfeeds which will be facilitated by the new Integrated Infant Feeding Team. Families will be able to join discussions on the page and send private messages, giving them an easy and quick way to access support whenever they need it.

Change 4: Making breastfeeding more culturally acceptable in Ayrshire

Community based work will focus on normalising breastfeeding and changing the culture across Ayrshire to be more positive about breastfeeding. New parents need the support of their families and community to succeed with breastfeeding. The Integrated Infant Feeding Team will give a single point of contact for any community group, school, business or individual who would like to find out more about breastfeeding or show their support. This work will focus on extending our Breastfeed Happily Here scheme; delivering infant feeding sessions in nurseries and schools; and extending our #AyrshireBreastfeeds social media campaign.

3.2 Infant Feeding Groups

Reduced opportunities for parents to meet other parents at child health clinics can add to social isolation of parents and the opportunity to meet parents with babies of a similar age. For the past year, with funding from North Health & Social Care Partnership, NHS Ayrshire & Arran and the Breastfeeding Network have piloted a small number of Parent & Baby Cafes welcoming both breastfeeding and formula feeding parents. This type of group was developed to address the need to make breastfeeding more visible in our communities, where many expectant and new mothers have never seen a mother breastfeed. Within these groups, breastfeeding are given the opportunity to consider breastfeeding their next baby or talk to family or friends about it.

The groups provide a hub for parents, offering information and signposting to a wide variety of other types of support such as information about Healthy Start, speech and language, dental health and income maximisation. Breastfeeding and infant feeding e.g. responsive bottle feeding and appropriate weaning, are at their core, however, they also focus on attachment and loving relationships between parents and their new baby. Support using the new baby box sling and activities such as baby massage, first aid training and Bookbug also contribute to supporting attachment and offer enjoyable social activities that may help encourage parents to attend.

It is proposed that the two new groups are set up in Ayr North and Arran. These will be delivered by the Breastfeeding Network in addition to the five volunteer led peer support groups already in existence in Ayr, Troon, Maybole, Irvine and Kilmarnock.

3.3 Anticipated Outcomes

Scottish Government has set all Boards a stretch aim to reduce the drop off in exclusive breastfeeding rates from birth to 6-8 weeks by 5% by 201/21 and 10% by 2024/25. Discussion is in progress to agree appropriate targets for breastfeeding initiation rates and exclusive breastfeeding rates at 6-8 weeks for each Health and Social Care Partnership area.

3.4 Measuring Impact

Specific measures will include:

- o Number of mothers who receive a phone call within 48 hours of discharge
- o Number of additional venues signed up to the Breastfeed Happily Here scheme
- Number of community events attended by peer supporters
- Number of women signed up to social media antenatal course
- Engagement and reach with #Ayrshirebreastfeeds campaign
- o Number of parents supported on neonatal unit and paediatric ward
- Number of parents attending infant feeding groups.

4. IMPLICATIONS

Financial:	NHS Ayrshire & Arran will receive a total allocation of £345,000
	over three years to March 2021 to implement the proposals
	outlined in this paper. In addition, NHS Ayrshire & Arran will
	receive £175,000 over the same time period to host and

	manage a national post.		
Human Resources:	A 0.8 WTE Band 6 Infant Feeding Support Nurse post will be		
	appointed to work alongside the current Community Infant		
	Feeding Nurse, on a pan Ayrshire basis.		
Legal:	There are no legal issues arising from this report.		
Equality:	An Equality Impact Assessment will be undertaken during the		
	development of the proposed services.		
Children and Young	The proposals will have a positive impact on health and		
People	wellbeing outcomes for infants and children, and their families.		
Environmental &	There are no environmental or sustainability issues arising from		
Sustainability:	this report.		
Key Priorities:	This work links to outcomes in the NAHSCP Strategic Plan,		
	Children's Services Plan and the North Ayrshire Local Outcome		
	Improvement Plan.		
Risk Implications:	There has been engagement with a wide range of professionals		
•	in the development of the proposals; therefore the actions		
	planned are realistic and achievable.		
Community	As this report does not deal with the outcome of a tendering or		
Benefits:	procurement exercise, there are no community benefits.		

Direction Required to	Direction to :-	
Council, Health Board or	1. No Direction Required	Х
Both	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

5. CONSULTATION

5.1 The proposals outlined in this paper have been developed by members of the Maternal & Infant Nutrition Programme Board, which has representation from NHS Ayrshire & Arran, the three local authorities, the three Health and Social Care Partnerships, and the third sector. The proposals have been approved by the NHS Ayrshire & Arran Transformation Leadership Group and the Infant, Children and Young People Transformational Change Programme Board.

6. CONCLUSION

6.1 Breastfeeding rates in Ayrshire have been stubbornly low for over a decade, despite breastfeeding being a key priority for NHS Ayrshire & Arran and its partners. The Programme for Government funding provides an opportunity to focus on changing cultural attitudes towards breastfeeding and normalising breastfeeding within our communities.

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