Commissioning local breastfeeding support services in times of austerity

Professor Mary Renfrew and Francesca Entwistle

1: overview of planning and commissioning priorities for maternity, children's services and public health.

2: example of good practice

3: achieving health and wellbeing outcomes for future practice



RCM Conference, Brighton

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Breastfeeding in the UK is a priority

Each of the four nations, Scotland, Wales, Northern Ireland and England identify increasing breastfeeding initiation and prevalence as a priority to improving the health of infants.

Breastfeeding is considered a positive way to improve public health, maternal and infant wellbeing and mother and infant attachment.



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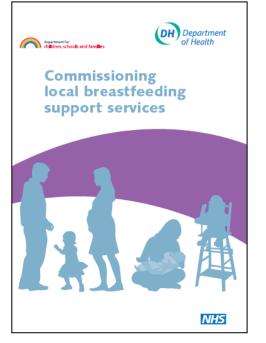
3: achieving health and wellbeing outcomes for future practice

NB: This presentation uses England as an example to illustrate how we can achieve the priority to increase breastfeeding initiation and prevalence.





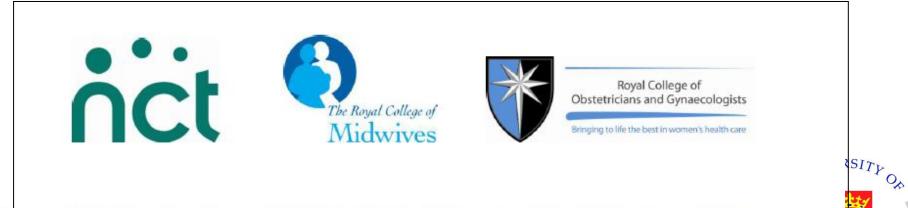
Shaping commissioning and planning



- NHS Commissioning of Maternity Services, Payment By Results PbR
- Community Services Local Health
 and Wellbeing Boards

DEE

 Responsibility lies with Clinical Commissioning Groups (CCGs)



Making sense of commissioning Maternity Services in England – some issues for Clinical Commissioning Groups to consider

To deliver:

Inclusion of Breastfeeding indicator to improve the short and long term health and wellbeing.
To increase;
Breastfeeding initiation

Breastfeeding prevalence 6-8 weeks



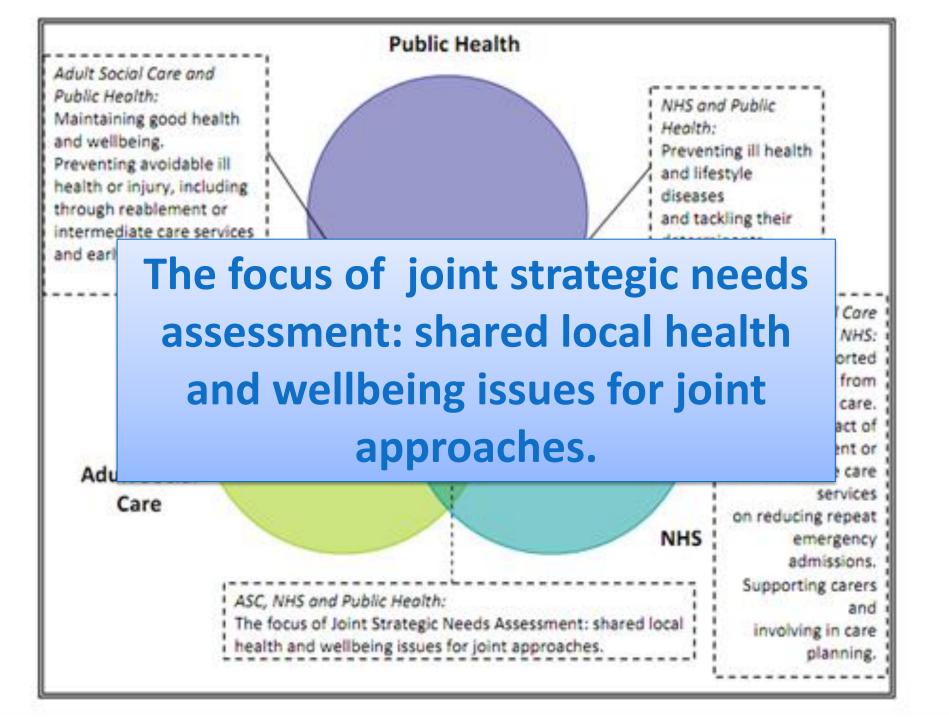


Furthermore Children's Centres:

- Breastfeeding indicators:
- Breastfeeding initiation
- Breastfeeding prevalence at 6–8 weeks
- Prevalence of exclusive breastfeeding at 4 months
- Percentage of babies on exclusive breast milk at discharge from neonatal units







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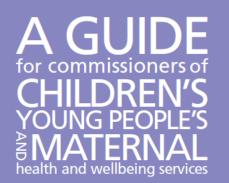
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Example of good practice:

NHS North West





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Lancashire Children's Trust

Statement of Strategic Intent for Infant Feeding in Lancashire



Ten priorities for commissioning effective, local infant feeding support services

- Maternity services in both the hospital and community setting to gain the World Health Organisation / UNICEF Baby Friendly Initiative accreditation 'Ten steps to successful breastfeeding' and the 'Seven Point Plan for sustaining breastfeeding in the community'
- 2. Peer, 'mother to mother' support programmes to be implemented alongside health professional care
- Universities to gain UNICEF UK Baby Friendly Initiative accreditation in pre-registration midwifery and postregistration health visiting programmes
- Neonatal networks trained to implement effective breastfeeding support for sick and premature babies
- 5. Provision of 'donor' breast milk where a mother is unable to breastfeed her baby and including the most vulnerable such as premature babies, those in neonatal units and babies aged less than 6 months who are to be adopted
- A robust and critical support service to filter harmful advertising and marketing of formula milks
- Strategic leadership, local and regional, to implement evidence-based policy and practice, including those areas that impact on infant feeding practice such as where babies sleep
- Breastfeeding welcome' employer, community and public spaces
- Schools programmes that promote breastfeeding
 Services that support women who are artificially feeding their babies to minimise the risks



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Talk to your neighbour list your priorities for commissioners in the new NHS and Public Health England – feedback to the group





Key points for planning and for commissioners...

1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		







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Tools we can use to achieve the outcomes



Calculations from a handful of illnesses where breastfeeding is thought to have a protective effect revealed potential annual savings to the NHS from a moderate increase in breastfeeding rates of about £40 million per year. In 2010 the CQC identified support of infant feeding experiences, consistent advice, information and support as areas of concern.



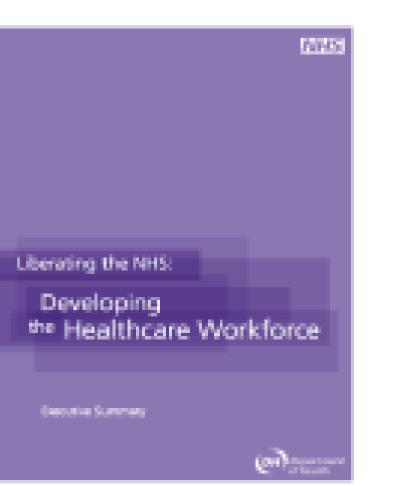


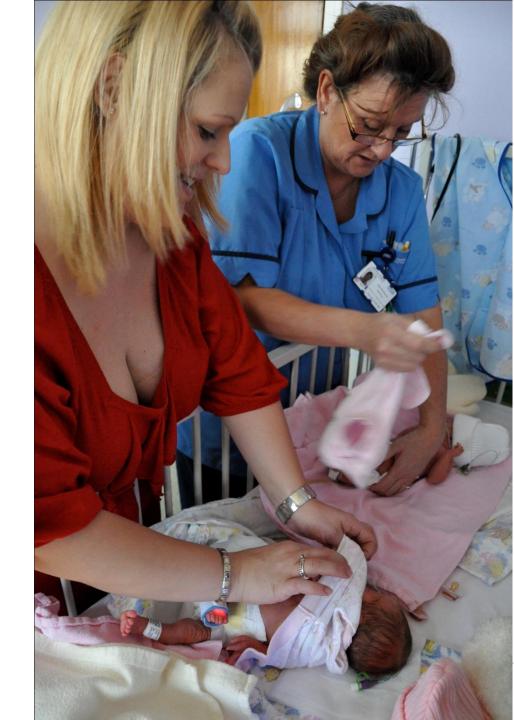


Images courtesy of Best Beginnings and magnetofilms.com Yorkshire & Humber HIEC



Liberating the NHS: developing the healthcare workforce





Health Technology Assessment 2009; Vol. 13: No. 40

Neonatal Outcomes

Small Wonders DVD

Small Wonders Programme

Breastfeeding promotion for infants in neonatal units: a systematic review and economic analysis

MJ Renfrew, D Craig, L Dyson, F McCormick, S Rice, SE King, K Misso, E Stenhouse and AF Williams



Health Technology Assessment NIHR HTA programme www.hta.ac.uk









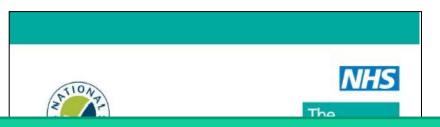
What works to support breastfeeding:

- Face to face support
- Scheduled and pro-active
- On-going beyond the early days and weeks
- That reflects local need, individualised and practical
- With trained lay and professional support workers





National Infant Feeding Survey



Breastfeeding Initiation rates increased from 76% in 2005 to 81% in 2010.

Further results to be published later this month on Breastfeeding duration





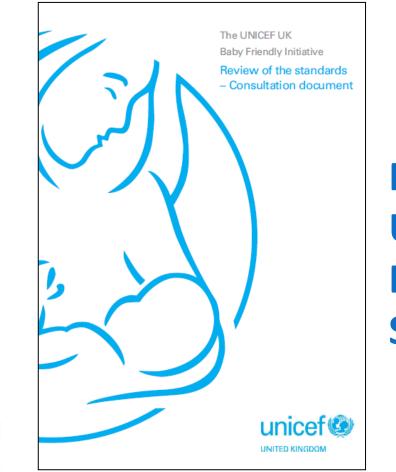


A survey carried out on behalf of the NHS Information Centre by IFF Research in partnership with Professor Mary Renfrew, Mother and Infant Research Unit, Department of Health Sciences, University of York

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Recommendations from NICE, national and international policy is implementation of UNICEF Baby Friendly Initiative



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Review of UNICEF UK Baby Friendly Standards 2012





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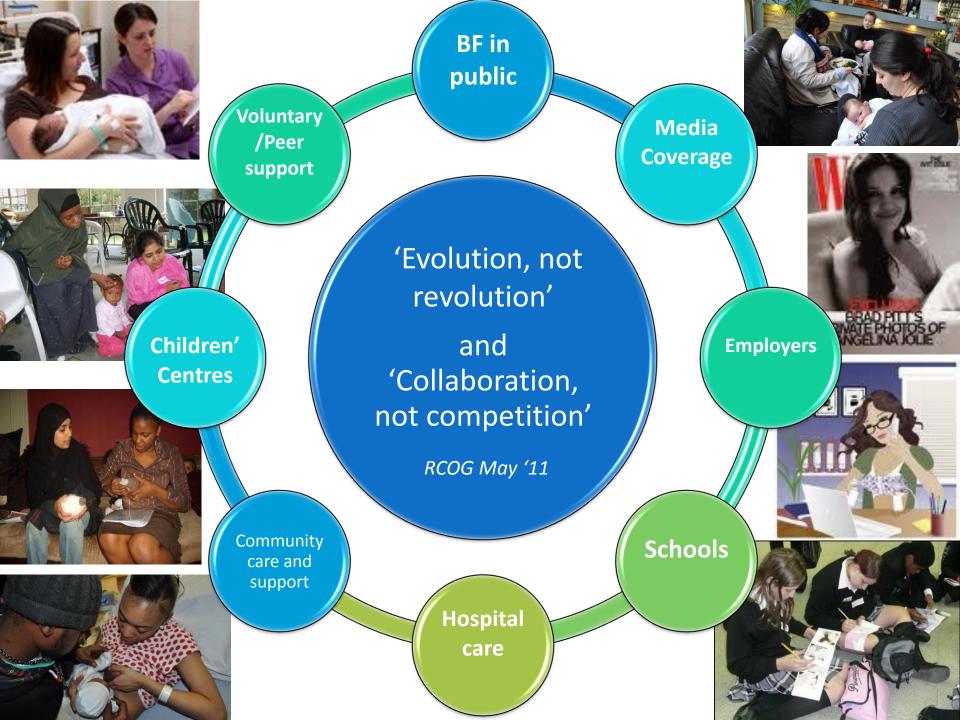
BFLG Baby Feeding Law Group Stengthening UK baby food laws



Preventing the intergenerational health & wellbeing inequality trap

Conclusions:

- Increase the initiation of breastfeeding
 Increase prevalence of exclusive breastfeeding
- Promote secure parent-child interaction and attachment in children age 0–2 years
- Commission and invest in breastfeeding and the early years, starting in pregnancy



Thank you and any questions

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