Breastfeeding in Brighton and Hove

Reducing health inequalities in the city through a locally commissioned breastfeeding service

FOR CPHVA CONFERENCE OCTOBER 2011

Introduction

- My role – Breastfeeding Coordinator

- Plan for session:
  - How project developed
  - Process
  - Outcomes
  - What next

How project developed

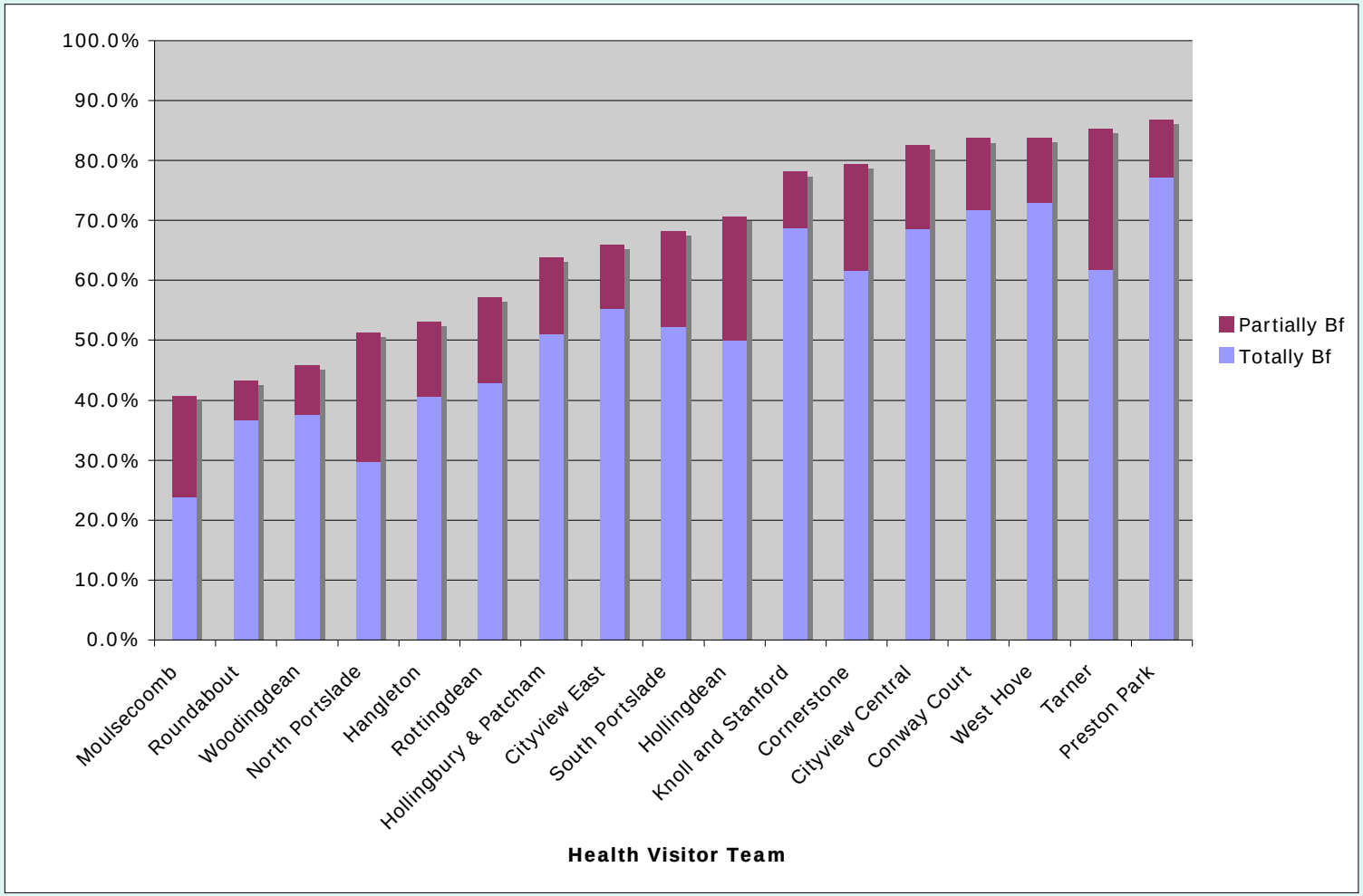
- Data Collection
- Breastfeeding Rates
- Strategic View

Data Collection

- 2008 PCT's have to calculate prevalence of breastfeeding at 6-8 weeks.
- 2011/12 NHS Operating Framework: Increase in breastfeeding prevalence each quarter. (i.e. Q1 2011/12 must be greater than Q1 2010/11).
- Data coverage also monitored. Must be 95%.

Breastfeeding Rates

Prevalence by Children's Centre teams, Q3 2009/10



Strategic View

- Breastfeeding Steering Group
- Social Marketing Work
- Brighton and Hove Breastfeeding Strategy

“Commissioning services that will provide sustainable, high-quality, universal support and targeted support for mothers who are least likely to breastfeed and who are at risk of poor outcomes is central to delivering better long term outcomes for local children and to having a positive impact on reducing health inequalities.”

Commissioning Local Breastfeeding Support Services (2009) DH / DCFS

Process

- Breastfeeding Peer Support Volunteer Programme.

  2 Peer Support Coordinators

- Six full training courses completed since November 2008.

  40 active volunteers from 66 trained.

- Almost daily presence on postnatal ward and at many community groups.

Peer Support Volunteers outside Brighton hospital

Process

- Breastfeeding Support worker.

Started October 2010. Initially seconded for 6 months on 18.75 hours.

Early Years Visitor (EYV) appointed.

Secondment extended, in Dec 2010, by 12 months. So now funded to March 2012.

BF prevalence data by Children's Centre.

Brighton & Hove Q1 2010/11

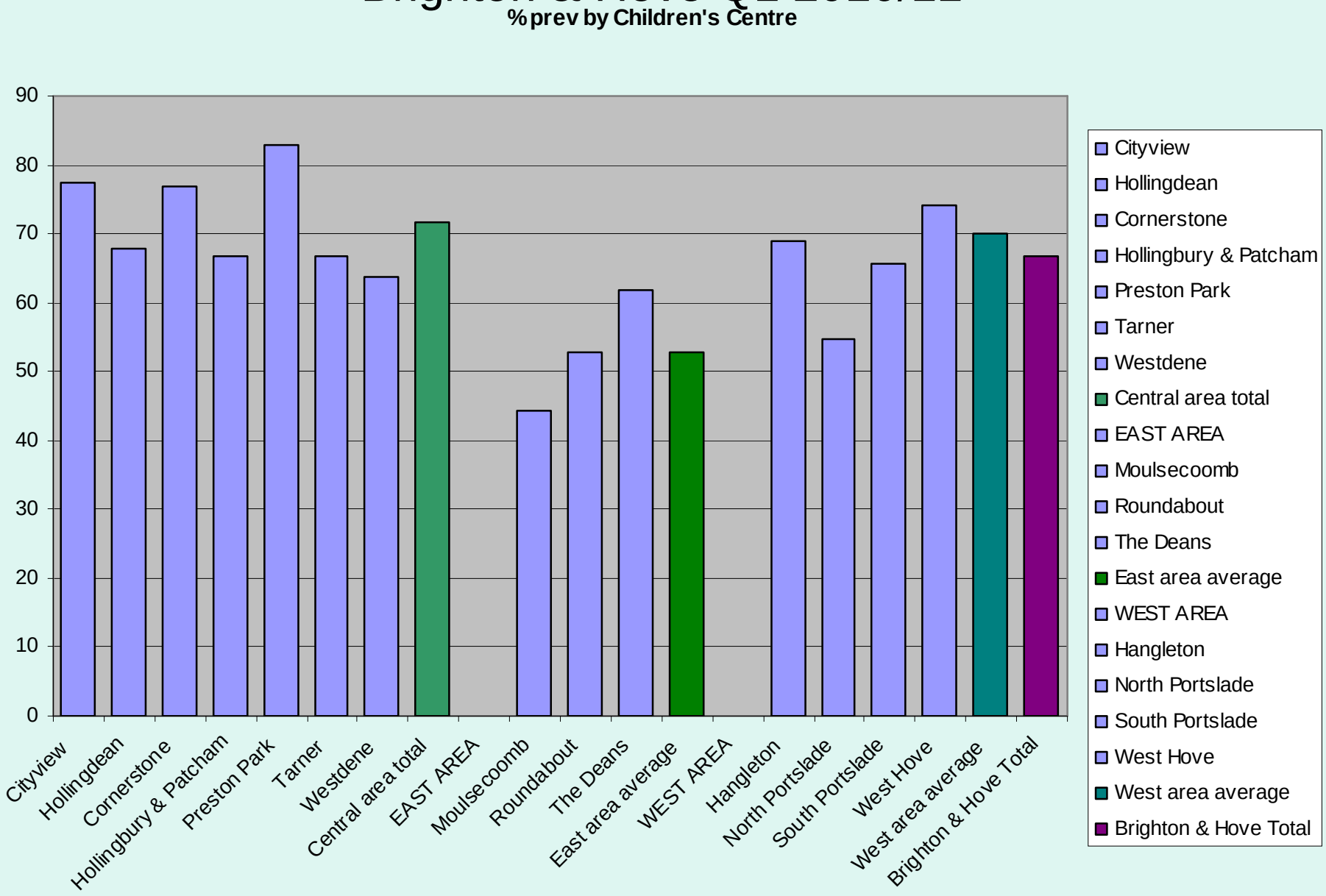


Image from Forster.

Key insights

No obvious area specific reasons for women not continuing to breastfeed to 6-8 weeks

Key themes and barriers identified include:
•Isolation and lack of support
•Fear and uncertainly
•Unexpected problems arising

The first point could have some links to the target areas:
•A number of participants had recently moved out to location
•Quite low awareness of services available in area
•Poor quality provision in Woodingdean specifically
•Some comments about „cliquey" groups in North Porstlade

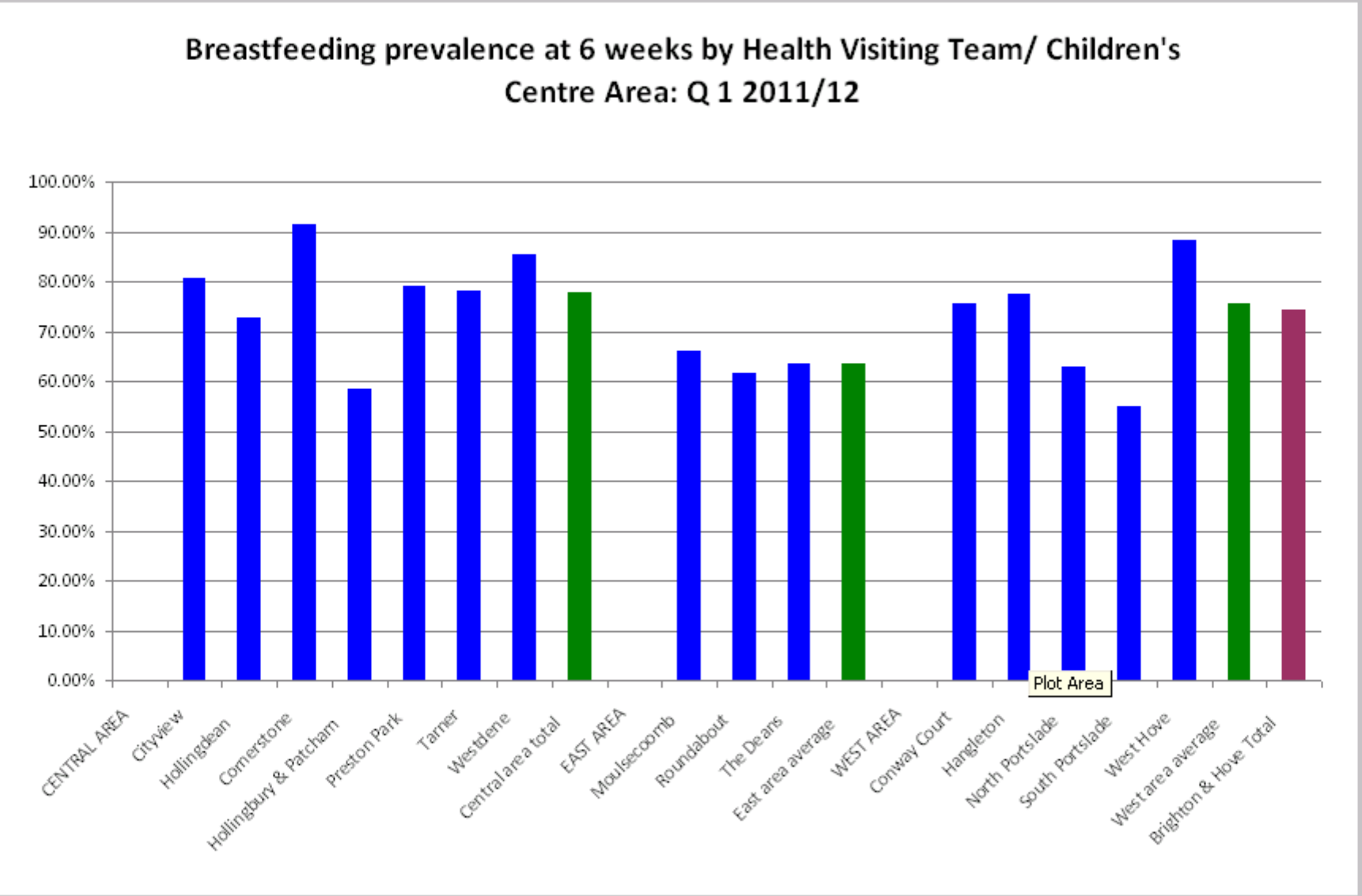
Text from FORSTER

Breastfeeding Support Worker

- Antenatal contact
- Early, proactive, postnatal support
- Signposting to other support services
- Consistency and continuity of care

Monitoring of Project

- Service Level Agreement (SLA) for 2010/11 covering both projects
- Quarterly reporting on data and other outcomes to PCT and at Breastfeeding Steering Group
- Annual report
- SLA for 2011/12 moving onto second area


Breastfeeding prevalence at 6 weeks by Health Visiting Team/ Children's Centre Area: Q 1 2011/12
100.00%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
Plot Area
CENTRAL AREA
Cityview
Hollingdean
Cornerstone
Hollingbury & Patcham
Preston Park
Tarner
Westdene
Central area total
EAST AREA
Moulsecoomb
Roundabout
The Deans
East area average
WEST AREA
Conway Court
Hangleton
North Portslade
South Portslade
West Hove
West area average
Brighton & Hove Total

North Portslade Breastfeeding data, 6-8 weeks.

	Q1	Q2	Q3	Q4	Inequality Gap/west	Inequality Gap/city	City Inequality
2009/10	43.2%	54.5%	51.4%	57.7%	18.8%	18.2%	35.9%
2010/11	53.1%	54.8%	63.9%	58.5%	15.2%	12.5%	25.1%
2011/12	62.9%				12.7%	11.4%	36.7%

Other outcomes of project

- More involvement in, and understanding of, whole commissioning and bidding process. Both Breastfeeding coordinators actively involved in SLA content.

- Active involvement in the new PCT to DH reporting framework for breastfeeding at 6 weeks.

What next…?

- Increased and extended funding
- Funding to be ‘mainstreamed’, perhaps within Health Visiting budget
- Data – even better!

Thank you.

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