



## **Evaluation Report on West Midlands Infant Feeding Programme**

An evaluation survey was circulated to the West Midlands Infant Feeding Co-ordinator Network (WMIFCN) and West Midlands Health Visiting Clinical Leads Group which consist of over 100 Infant Feeding Co-ordinators and Health Visiting Services Clinical Leads and includes representatives from the Voluntary Sector and Children's Centres.

The aim of the survey was to establish what the NHS, Local Authority and Voluntary Sector (NGOs) think about the Department of Health West Midlands Infant Feeding Programme plus the support and capability building activities they have received since January 2008 when the WMIFCN was restructured.

22% of those approached responded to the survey and the overall response has been very positive.

Overview of responses to the evaluation survey:

- 91% stated they are members of the WMIFCN (memberships range from 3 months to 18years)
- One worker responded that she is not a member of the WMIFCN as she is not the designated representative for her locality, but is kept well informed by their area locality representative on the network. She emphasised that other grades of staff who are not the designated WMIFCN representatives are gaining input from the network via cascade methods, support and training.
- 95% stated positive feedback from the meetings (the remaining 5% do not attend these meetings as they are members of the HV Network)
- 95% stated they were very satisfied with the IFC (of the remaining 5%, 3% stated they were satisfied with their WMIFC and 2% did not complete this section on the form hence could not be counted)
- 59% had experienced the WMIFCN before and after its restructuring in March 2008. Of this response, 100% expressed a positive improved service since the restructuring and strong leadership from DHWM.
- 86% stated the DHWM team were easily contactable and accessible (the remaining 14% did not complete this section of the form)

**Evaluation results** – each bullet point is a separate IFC response

**1. Are you a member of the West Midlands Infant Feeding Co-ordinators Network?** (Please delete as appropriate)

**Yes / No**

**1. a If yes, how long have you been a member?**

- Approximately from 1997 – 2006 (as a Health Visitor with Breastfeeding lead) and again since January 2009
- 6 months
- 2 years
- 10 years
- 1 year- since commencing in post
- 8 years
- Over 10 years
- 2½ years
- 1 year
- 3 months
- 18 months
- Since it Started
- Many years but with a break of 2 years until last year
- 18 years
- 6 years
- 7 years
- Since 2005
- 10 months
- 6 months

**1. b What are your experiences of the meetings? Can you describe what you have gained from the meetings and / or what you expect in the future?**

- Information, professional support (particularly from Caroline Mansell), networking, ideas, latest Government directives, resource ideas and I would expect much the same in the future. The meetings are invaluable as there are only 2 people working for breastfeeding in our PCT, so the meetings also encompass peer support.
- Very informative, useful to link to the bigger picture and get ideas and knowledge from other areas of the county and different positions of attendees. I have personally linked with other people with similar jobs which has helped with developing my role.
- Valuable information, peer support, network of resources
- Networking, information sharing. Support from colleagues re baby friendly assessment.
- Beneficial – I have learnt a lot of good practice and benefited from the network as a resource
- Fantastic updates, information sharing, support
- Networking, Information, Support, New initiatives disseminated, Sharing good practice, CPD, Signposting
- Very informative about what is happening regionally and nationally – keep updates – sharing practice info
- Since a WMIFC has been appointed, the meetings have become more business like – sharing information, ideas both up and down, peer support
- Really enjoy meetings – look forward to attending – networking – new information invaluable

- Excellent. Networking generally, sharing of up to date information, sharing good practice / ideas.
- Clear leadership as to national policy rolled out at local level. Information / signposting of what is coming next. Valuable networking with other boroughs.
- Networking, information, ideas, reassurance expect this now and in the future
- Networking, sharing good practice, knowledge by listening to others, find out what needs to be addressed and what barriers exist
- They originally were a positive experience as I learnt a great deal from others and how they were dealing with the frustrations of promoting breastfeeding
- The meetings have been educational. As a voluntary LLL leader, it has been important to have contact with local health professionals
- Older meetings just a talking shop, little achieved
- Very informative
- Invaluable, supportive and informative. The guidance and advice of other co-ordinators has assisted me greatly in my role. Updates and information to cascade to my team are vital. Training to maintain high standards of knowledge

## **2. The West Midlands Infant Feeding Co-ordinators Network was restructured in March 2008 with Chairship provided by DHWM since March 2007. What do you think has been the result of these changes?**

- Direct information from the DH -Structure to the meetings - An educational aspect is included - More focus on breastfeeding in the West Midlands - A good, full, relevant agenda - Organisation of distribution of the WM Peer Support Training handbook - Open discussion on breastfeeding matters - Coordination across the West Midlands when events such as NBW occur - Variety of speakers and workshops - West Midlands web site, full of useful information and links
- I didn't attend before hand but have always been very pleased with the structure and chair. Caroline Mansell has been fantastic
- As a group under leadership of a WMIFC we have become much more proactive. The meetings are no longer about the identification of problems but more around examining solutions
- Clear leadership and support for local infant feeding co-ordinators  
Good communication - Improved access to direct advice and support - Raised the profile of Infant feeding coordinators
- What I have seen has been good but I came in to post after the changes
- Focus, professional approach giving clarity and value
- HUGE improvement – having a WMIFC and the support of DH has made it really effective
- Chairship is excellent – brilliant resource – well organised, up to date, mentorship and support invaluable
- Prior to a WMIFC being in place, meeting lacked direction, were poorly run as no funding for minute taking etc – lots of moaning, little activity or movement forward. CPD sessions on topics relevant to post but this information would not have been gained from other areas. Now feel practitioner views are being fed back to DH and as a result, changes made.
- Brilliant leadership we are lucky to have it
- Did not really experience the others, but the Chair creates an atmosphere that crosses traditional professional boundaries e.g. Midwife v Health Visitor. Confidentiality. Brings in voluntary services. Makes for more cohesive working.
- Excellent. Much more awareness – networking support and multi agency focus
- More professional, see the bigger picture. More of an overall picture of breastfeeding in the West Midlands and Nationally.
- Increased and improved range of multi agency representation
- It is now more business like and effective – the links with the Department of Health

- and feedback from the regional office contributed to a joined up approach
- I felt that the group has had a higher profile and had more impact since the change
- Brilliant. Now much more progress and sharing of information. We feel we are able to be a part of DH Agenda

## **One to One Support and Guidance To your organisations or your localities:**

### **3. What type of service or support did you receive?**

- I have had a lot of support from Caroline with the UNICEF UK BFI and a lot of input was given to me from Caroline when the PCT made the Bid for breastfeeding money from the DH  
Guidance has also been given regarding [development of] the WM Peer Support training manual  
Caroline has always answered emails and been helpful with whatever I have asked
- Support with the WM Breastfeeding Peer Support Training Handbook, covering costs of handbooks and support to develop it further in line with UNICEF Baby Friendly.
- Policy information.
- The commissioning of BFI training by the region has meant that staff could be sent when a service might not otherwise be able to commission its own training.
- Clear and timely responses to queries raised by practitioners – with information supported by evidence.  
Up to date guidance and information  
News from the Department of Health  
Information about and access to training and development activities  
Co-ordination of resources to support relevant events –e.g. National Breastfeeding Week
- Caroline informed of key contacts and guided me in developing my post
- Signposting
- One-to-one support and guidance when concerned with writing business cases, policy and strategy
- Support completing DH bid, attendance at [our local] events, telephone support, supervision – mentoring
- Excellent, always supportive and helpful – nothing ever too much
- As new to this area of work, it has been an excellent source of information
- Caroline is there where needed – approachable. Spoke to senior managers supported our commissioners
- A lot of support from Caroline Mansell re BFI and DH Bid and Stage 1 Assessment
- Relevant and responsive
- I find the availability at the end of the phone as both helpful and encouraging. I have contacted the WMIFC when I completed bids and other questions – however trivial
- Emails have meant I have known what is going on even if I am not directly involved
- Caroline Mansell is a good resource and always supportive
- Explaining, telephone calls
- Developing co-ordinator post [in my locality]
- Help with training and development

### **4. Were the DHWM Team easily contactable / accessible?** (Please delete as appropriate)

**Yes by phone and email**

## 5. What support services could we offer in the future?

- Direction in what areas to focus on – so we don't go reinventing everything, we can see what areas have been successful in other areas of the county.
- Carry on as you are. There is always something new to discuss. I also enjoy the CPD sessions.
- Examining regional best practice and its effectiveness.
- Regional guidance
- I would like to see some kind of Regional Breastfeeding Knowledge and Skills passport
- To avoid duplication of training when staff (particularly doctors) move around the region. This way local coordinators could focus on supporting staff with their local guidelines.
- As Above – plus more visibility of the Locality Infant Feeding Co-ordinators in each PCT area – to promote best practice in infant feeding and raise awareness in all relevant staff groups, supporting local infant feeding co-ordinators.  
These should be a full-time role as the issues are so important for the future health of the population.  
The WM lead needs to have a high profile in the local media
- Continue with the regional coordinator post to support and inform staff at a local level
- Influence change through examples of good practice
- BFI, Children Centres. All that is currently on our agenda.
- Keep up to date CPD Sessions, One-to –ones, sharing with other members, training sessions
- Continue as doing – Brilliant!
- More of the same – but aware WMIFC is only part-time
- Keep LLL as involved as NCT and BFI
- More training please
- To continue with what is currently offered

## 6. Overall, how satisfied are you with the support you have received? (Please delete as appropriate)

(1= Very Satisfied, 2= Satisfied, 3= Unsure, 4=Unsatisfied, 5=Very Unsatisfied)

( Responses received are indicated in blue in the table below)

<b>Co-ordinator</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Administration</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Senior Public Health Manager</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Wider DHWM Support Team at DHWM</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

## 7. How did you receive your support?

- a. Conference / Seminars
- b. Telephone Support / Information
- c. E-mail Support / Information
- d. One to One Support Visits
- e. Visits to Meetings / Events in your area
- f. Regional Infant Feeding Co-ordinator Network Meetings
- g. Via website
- h. CPD sessions / Workshops
- i. Feedback from National DH / Other Governmental Departments via the WMIFCN

## 8. Was the information that you were given helpful?

Yes

If yes, in what way?

- All information has been relevant to increase the prevalence of breastfeeding in the PCT and across the West Midlands. Information is relevant to BFI and my practice
- All emails replied to quickly, information and guidance was useful, direct and I knew it was up to date and correct for the whole of the area from government recommendations
- Helped me to channel time and resources
- Meant always felt kept in the loop which made disseminating knowledge to local colleagues far more effective
- Kept up to date  
Able to plan for changes and developments  
Supported progression towards Baby Friendly Initiative status
- Updated information and guidance  
Ability to network with colleagues
- Timely, personal, valued
- Provides signposting and focussed information, updating i.e. CPD
- Very relevant to individual issues, situations. Informative / up to date, current information
- Explained and clarified issues
- Always appropriate and applicable
- Able to share with colleagues in the PCT and understanding of how others have dealt with issues
- WMIFC responds promptly to enquiries / clearly answering or signposting to who may have the answer either by email or phone call. She will also speak to Managers and her input is respected by them.
- Positive feedback and suggestions
- Clarification and understanding
- The WMIFC has been supportive, informative and explained statistics and other things of which I was unsure. A coordinated approach so that sharing of information is both encouraging and helpful
- Some subjects not easily accessible in other ways

## 9. What future topics would you like to see in CPD Sessions / Workshops?

- Tackling breastfeeding in the white teenage / younger age women within the PCT [areas]
- I think this is hard to answer because the CPD session we have done wouldn't have crossed my mind. I think this is often the best way of learning new skills and information.
- Some practical sessions that could be provided by members of the group who are specialised in that area e.g. Neo-Natal Units (NNU), Older babies and Tongue Tie
- Development of teaching packages to cascade to practitioners  
The normalization of breast feeding – how to be assertive without parents feeling that they are being coerced into breast feeding
- To continue in same format – latest information and guidance
- Practical roll out of requirements for us as Trusts to achieve and how.
- Engaging Commissioners
- Lactation Consultants – Career development pathways
- How to deliver behavioural change / motivational interview / where to 'buy in' these services. Briefings on the relevance of new papers e.g. Marmot Review Audit – giving children a healthy start – how we can use to influence service / commissioners etc.
- Perhaps more about BFI and the whole process. PCT and Acute are at varying

stages – so could discuss the process of how they have got to where they want to be. There are lots of different ways and means which could be shared.

- BFI implementation: how to manage 'criteria not met' / need for reassessment and how to maintain momentum towards NEXT reassessment
- Interpreting data and examples of good practice

## 10. What topics or pieces of developmental work would you like to see explored in the future?

- Social marketing with young white population
- Regional training passport
- Everything relevant to breastfeeding and Public Health
- Ensure diabetes work completed – Provide Regional / National Website to replace fact file – Further tongue-tie service provision – Opportunities to share best practice – BFI
- More local work away from Birmingham i.e. NBW assistance – How to engage Commissioners, more time for networking with other UNICEF leads and time to share information on how to overcome challenges
- Info sharing between agencies – if we want Peer Supporters to work with antenatal women, we need contact information and agreements with other agencies.
- Skills for effective project management for BFI implementation
- Protecting Breastfeeding behaviours of ethnic minority communities
- Developing, negotiating and influencing skills, Project Management
- Setting up on line 'fact file' resource for staff
- Update on any changes in policy guidelines

## 11. Are you a Start4Life Registered Supporter? (Please delete as appropriate)

**Yes / No / Unsure**

## 11. a If not, are you going to join Start4Life as a Registered Supporter? (Please delete as appropriate)

**Yes / No / Unsure**

## 12. Any other comments

- The Group is an extremely valuable resource and it would be a great disservice to the advance of breastfeeding if it did not continue. I have personally had a lot of input from the group.
- Just wanted to thank you for your time and diligence in support of breastfeeding
- When I first started coming to the group I like many of the other participants was doing so in my own time. Over time we have seen the development of Infant Feeding roles in maternity units and in PCTs. These I believe have made a real difference to the service women receive. And whilst we still have a lot to achieve we have a lot to celebrate. At times when budgets are being cut it is important to demonstrate our effectiveness.  
Caroline and Karen have been instrumental in changing our direction from one that focused on the barriers to one that demonstrated what we can achieve.
- WM Co-ordination and leadership around infant feeding has been invaluable:
  - In supporting the development and training of health visitors to raise knowledge and standards in their role of supporting breast feeding and providing nutritional advice to parents.
  - As a resource for the answering of specific queries around safety and best practice in infant feeding
  - Raising awareness of national developments and policies and their impacts on local delivery of services
- Fantastic job to all who support this group