

## Unicef UK Baby Friendly Initiative

# Stage 2 assessment report Children's Centres

## North Yorkshire County Council 0-19 Prevention Service

on 25-26 April 2018

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#### Assessment result

#### What we found overall:

We found that North Yorkshire County Council 0-19 Prevention Service has met all of the standards to enable Stage 2 assessment to be passed.

North Yorkshire County Council 0-19 Prevention Service presents a positive approach towards implementing the Baby Friendly standards and has consistently displayed enthusiasm and commitment towards providing an effective training programme. The assessment revealed the staff are equipped with the knowledge and skills to implement Baby Friendly standards to support parents to have close and loving relationships with their baby, promote breastfeeding and support mothers with feeding their baby.

Family workers are involved in the care of vulnerable young people. The assessment team were impressed at how, when discussing the value of breastfeeding and close and loving relationships, they tailored discussion to their client group, particularly related to mothers with long term mental health.

Family Service workers identified from Baby Friendly training that some of the 'Incredible Years' training pack challenged some of the Baby Friendly standards. This was fed to managers who, together with the University of York contacted the programme author, resulting in the content being changed on a national level. Managers are commended for commitment to resolve this challenge, to ensure that parents receive accurate information, particularly as a huge investment had been made to the programme.

Commitment has also been made to identify 4 champions to ensure that training and workshops can be co-delivered with Health Visiting services, enabling training to be provided locally, reducing the cost of mileage, demonstrating a good example of integrated working.

The assessment team's recommendation to the Designation Committee is that Stage 2 be considered passed and that North Yorkshire County Council 0-19 Prevention Service is now eligible to move onto Stage 3 assessment.

Janette Westman 26 April 2018

## How we *recommend* you achieve and maintain the standards

**Recommended** actions are those that have proven valuable in other units in helping them to achieve and maintain the requirements. In some cases implementation (or not) of these recommendations is likely to make a significant difference to practice and thus to the ability of the facility to achieve and subsequently maintain the Baby Friendly standards. The recommendations made by the assessment team are listed in this report. Further recommendations may be made in the future in relation to any changes made, and in light of practice found or current research evidence.

1. Although the majority of staff had attended training, some of the staff interviewed had not attended training. This was checked against staff training records, which confirmed that although over 80% of staff had attended, there were some who had not. We recommend that discussion takes to determine how to ensure attendance of all staff at the mandatory training days.

#### Any additional advisory comments

**Advisory** suggestions relate to areas where we feel some change would be beneficial or could readily be achieved. They are offered purely as advice and do not affect designation of the facility as Baby Friendly, either now or in the future (unless the assessment criteria nationally are changed, in which case prior notice would be given).

1. Some of the staff interviewed stated that although it is not considered to be a part of their role, they felt equipped by the training they had received, to support mothers with practical skills. Indeed they were able to demonstrate this when assessed as a level 3 worker. We would advise that consideration could be given to establish whether those staff who receive this training could then work alongside health visitors in clinics (as they do already) and once confident could support mothers with practical skills. At present most mothers would be referred to a health visitor, whereas if help could be given sooner, this would support mothers in a more timely way and may result in mothers continuing to breastfeed for longer.

### What happens next?

Respond to recommendations by **26 July 2018** 

Plan for Stage 3 assessment by **April 2019** 

- Please send written acknowledgement to the recommendations in this report and any actions you will take to <a href="mailto:bfi@unicef.org.uk">bfi@unicef.org.uk</a> by **26 July 2018.**
- Plans should be made for Stage 3 assessment to be carried out by **April 2019.**

#### The results in detail

#### The sample

All staff were randomly selected for interview:

Number of staff interviewed	<b>33</b> (+4
Level 1	managers)
Level 2	8
Level 3	17
	4

#### Level 1

Criterion		Result	Standard required
The value of breastfeeding	Staff who were able to describe the value of breastfeeding for the health and wellbeing of babies and mothers	89%	80%
Welcoming breastfeeding	Staff who were able to explain how the children's centre welcomes breastfeeding	100%	80%
Protecting breastfeeding	Staff who were able to demonstrate an understanding of the impact of advertising of infant formula, bottles teats and dummies	96%	80%
Support with feeding and caring for baby	Staff who were able to explain how they would refer mothers for appropriate support	96%	80%

### Level 2

Criterion		Result	Standard required
Close and loving relationships	Staff who understood the importance of close and loving relationships and how to support this	100%	80%
Support for mothers who formula feed	Staff who demonstrated understanding of how to support formula feeding mothers with making up feeds / understanding of responsive bottle feeding	86%	80%
Introducing solid food	Staff who understood why waiting until around six months of age is important	90%	80%

#### Level 3

Criterion		Result	Standard required
Effective breastfeeding	Staff who were able to describe how they would support a mother to achieve effective breastfeeding	100%	80%
Responsive breastfeeding	Staff who were able to describe responsive feeding	100%	80%
Referral pathway	Staff who were able to recognise breastfeeding challenges beyond their remit and refer appropriately	100%	80%

## **Supporting information**

Criteria	Result	Standard required
Staff who have been orientated to the policy	>80%	80%
Staff who have completed the training programme	>80%	80%
The written curriculum meets the standards	Meets standards	Meets standards

	Knaresborough Children's Centre
Children's centres visited as	Scarborough Children's Centre
part of this assessment	Thirsk Children's Centre
	Selby Children's Centre

#### **Achieving Sustainability**

Unicef UK is aiming for the Baby Friendly Initiative standards to become sustainable over time, thereby reducing the need for the current level of continued external re-assessments. In order to achieve this, we anticipate that facilities will start working towards new Achieving Sustainability standards which are summarised below. These standards will help facilities to embed and maintain Baby Friendly practices in the longer term.

For further guidance on Achieving Sustainability and how to implement these standards please visit unicef.uk/sustainability

Themes	Standard/Criteria
Leadership	<ul> <li>Baby Friendly lead/team with sufficient knowledge, skills and capacity.</li> <li>Effective updating for Baby Friendly team</li> <li>Baby Friendly Guardian in post</li> <li>Leadership structures support proportionate responsibility and accountability</li> <li>Managers are educated to support the maintenance of the standards</li> </ul>
Culture	<ul> <li>Support for ongoing staff learning</li> <li>Mechanisms to support a positive culture</li> <li>Positive feedback from staff, managers and mothers</li> </ul>
Monitoring	<ul> <li>Robust, consistent monitoring and reporting mechanisms in place</li> <li>Evidence of analysis and action planning</li> </ul>
Progression	<ul> <li>Demonstrates innovation and progress</li> <li>Improvement in outcomes</li> <li>Evidence of integrated working</li> </ul>

#### **Comments:**

- 1. All managers interviewed had good knowledge around the implementation of Baby Friendly standards and as well as understanding the challenges faced
- 2. Four Champions have been identified who help the infant feeding Co-ordinator with training and audit, which enables delivery of training on a more local level, which is also cost effective
- **3.** There are robust, consistent monitoring and reporting mechanisms in place. There is an integrated working group, which looks at specifications for the service.
- **4.** There is good working relationships with Health Visiting services and the University of York, as demonstrated above. Work with maternity services are more challenging, due to the large number of maternity services across the district.
- **5.** The specialist service has been set up with champions and a referral pathway in place. However very few referrals have been made and the team were unsure as to whether the

- existing support is reducing the numbers needing referral to specialist clinics, or whether some mothers are being missed. Audits of mothers and evaluation of the specialist service is recommended to see whether the service needs to be reviewed.
- **6.** There is to be a Children and family service review, so there may be changes to structure but it is not anticipated that this will have an impact on the implementation of Baby Friendly standards. Hopefully it should improve contact with vulnerable families.
- **7.** There are some challenges with making savings, but in the model being developed it is anticipated that current standards are sustainable and embedded.

## **Background information**

Progress with Baby Friendly accreditation	Stage 1 accreditation awarded April 2016. Stage 2 assessment due April 2018. Registered intent October 2014		
Number of children's centres	Children's Centre's = 25 (Some satellite units)		
Births per year	6,000		
Local demographics	Covering over 3000 square miles, North Yorkshire ranges from isolated rural settlements and farms to market towns such as Thirsk and Pickering and larger urban conurbations such as Harrogate and Scarborough. Whilst North Yorkshire is in overall terms more affluent than a typical local authority in England, there are nevertheless areas of profound deprivation, including some parts of the County that are ranked within the 10% most deprived areas in England. The County is also home to a significant military presence, including UK Army's largest garrison at Catterick in the North of the County. It is estimated that 17,000 MOD personnel may be based in North Yorkshire and this figure is likely to grow with redeployment to this area.		
Main languages spoken other than English			
Project lead hours	37.5 hours		
Any additional support for the project lead	There are about 20 Health Visiting Breastfeeding Champions who help the Community Infant Feeding Co-ordinator with training and audit. There are 4 Children's Centre Service Leader's who help the Community Infant Feeding Co-ordinator with training and audit. The Community Infant Feeding Co-ordinator gains monthly supervision and support from her manager which is beneficial.		
Classroom and practical training (hours provided)	The BFI 'Breastfeeding and Relationship' training that we are undertaking in our area is a joint approach and run over half a day, one day or two days dependent on roles.  'Day 1' training is for all Health Visiting staff members and Children's Centre staff members who are working directly with families. 'Day 2' training is for Health Visitors only.		

The Half Day (3 hours) training is for HDFT Health
Visiting Services and NYCC Children's Centre Services
clerical and administration staff.
BFI Annual Update training sessions are now being
rolled out. They continue to be run as a joint approach.
The first 1.5 hours is for all HDFT Health Visiting Staff
members and Childrens Centre staff members and the
second part of the session (1.5 hours) is for Health
Visitors only. The training curriculum is devised from
the audit results obtained.

#### **Appendix: About the Baby Friendly Initiative**

The Baby Friendly Initiative is a worldwide programme of the World Health Organization and Unicef. It was established in 1992 to encourage maternity hospitals to implement the Ten Steps to Successful Breastfeeding and to practise in accordance with the International Code of Marketing of Breastmilk Substitutes. The Unicef UK Baby Friendly Initiative subsequently extended the principles to include community health-care services and university programmes for midwifery and health visiting/public health nursing.

In 2012, following a comprehensive review, the Baby Friendly standards were updated to include parent infant relationship building and very early child development, plus enhanced requirements in communication skills for staff. The new standards were introduced over several years of transition with full compliance from July 2017.

Initial accreditation as a Baby Friendly facility takes place in three stages:

**Stage 1** of the assessment procedure is designed to ensure that the necessary policies, guidelines, information and mechanisms are in place to allow health care providers to implement the Baby Friendly standards effectively.

**Stage 2** involves the assessment of staff knowledge and skills.

**Stage 3** assesses the implementation of the Baby Friendly standards in the care of pregnant women and new mothers.

Re-assessment takes place after two years with the aim of ensuring that the standards are maintained. Ongoing assessment is carried out every three-five years with the same goal of ensuring the maintenance of standards.

The work of the Baby Friendly Initiative within the UK is overseen by the Designation Committee, a panel of impartial experts in the field of breastfeeding and neonatal care including representatives from paediatrics, midwifery and health visiting, voluntary organisations and mother support groups as well as representatives from Baby Friendly accredited facilities. The findings from all assessments are reviewed by the Designation Committee in order to ensure consistency and fairness.

