

CABINET

26 SEPTEMBER 2023

INFANT FEEDING STRATEGY 2023-2028

Portfolio Holder: Councillor Teresa Murray, Deputy Leader of the Council

Report from: James Williams, Director of Public Health

Author: Scott Elliott, Head of Health and Wellbeing

Summary

The following paper presents the draft Medway Infant Feeding Strategy for Cabinet approval. This is a refresh of the 2018 Infant Feeding Strategy, to ensure the strategic ambitions and actions are fit for purpose.

The strategy outlines the steps taken to refresh the strategy, including the detailed data analysis, community and stakeholder engagement and the assessment of best practice. The strategy concludes with the Infant Feeding priorities for Medway, that will need to be delivered by a range of partners over the next five years.

The Strategy was considered by the Health and Wellbeing Board at its meeting on 7 September 2023 and its comments are set out at section 8.

1. Recommendations

- 1.1. The Cabinet is asked to note the comments made by the Health and Wellbeing Board, as set out at section 8 of the report.
- 1.2. The Cabinet is asked to approve the Infant Feeding Strategy 2023-2028, as attached at Appendix A to the report.
- 2. Suggested reasons for decisions
- 2.1. The outcomes set out in the Infant Feeding Strategy 2022-2028, aim to produce better outcomes for the local population.
- 3. Budget and policy framework
- 3.1. Since 1 April 2013, local authorities have been responsible for improving the health of their local population and for public health services. Medway Council's strategic priorities include 'supporting residents to realise their potential'. Improving infant feeding rates and behaviours specifically links to the aspiration of creating 'health and active communities'. Increasing breast feeding rates in more disadvantaged communities, will support action to reduce health inequalities.

- 3.2. Approval of the Infant Feeding Strategy 2023-2028 is a matter for Cabinet.
- 4. Options
- 4.1. Option 1 -to not approve the strategy.
- 4.2. Option 2 to approve the strategy. **This is the recommended option.**
- 5. Advice and analysis
- 5.1. Appendix A details the draft Medway Infant Feeding Strategy, which outlines the steps taken to refresh the strategy, including the detailed data analysis, community and stakeholder engagement and the assessment of best practice. The strategy concludes with the Infant Feeding priorities for Medway, that will need to be delivered by a range of partners over the next five years.
- 6. Risk management
- 6.1. A Diversity Impact Assessment (DIA) has been completed and is attached at Appendix B. No issues were identified within the DIA that would impact this strategy implementation.

Risk	Description	Action to avoid or mitigate risk	Risk rating
Partner engagement	Critical stakeholders fail to engage and do not prioritise the infant feeding agenda over the life of the strategy	Regular partner meetings, ensuring the priority is raised at suitable meetings such as Health and Wellbeing board and Health and Care Partnership Board	CIII
Impact	The proposed strategy goals and actions do not have the desired impact and breastfeeding and infant feeding does not improve in Medway	Progress will be reported to Medway Council and Health and Wellbeing Board with annual actions revisited	CII

Likelihood	Impact:
A Very likely	I Catastrophic
B Likely	II Major
C Unlikely	III Moderate
D Rare	IV Minor

7. Consultation

7.1. Section two of Appendix A details how residents were heavily consulted during the development of the strategy. Activity included a series of focus groups and 1 to 1 interviews with key stakeholders.

8. Health and Wellbeing Board

- 8.1. The draft Infant Feeding Strategy 2023-2028 was considered by the Health and Wellbeing Board on 7 September 2023. The draft minutes of the discussion are as follows:
- 8.2. The Head of Health and Wellbeing introduced the report, which was the third iteration of the Infant Feeding Strategy 2018 and outlined the steps taken to refresh the strategy, and the Infant Feeding priorities to be delivered over the next five years.
- 8.3. Medway Community Health had been instrumental in the recruitment and training of peer supporters across Medway. Peer supporters assisted mothers and families with breast feeding. A specialist team was being put in place through Medway NHS Foundation Trust which could include a new Infant Feeding Specialist post at the hospital. A paid peer support model was being explored and this may stimulate recruitment of more supporters and increase the trained workforce in years to come. Increasing peer supporters would reinforce the importance of the service. There was also alignment with the Start for Life and Family Hubs programme. There was the possibility of collaboration with this initiative should resources to fund paid peer supporters not be available in the future.
- 8.4. Members then made the following comments and suggestions:
 - A view was expressed that there was a variation and prevalence in breast feeding for which there were many drivers including social factors. The work to promote breast feeding included promotion of the health benefits for the infant, financial benefit for families, as well as working with local businesses and encouraging them to be more breast feeding friendly.
 - It was acknowledged that the Strategy was clear and pragmatic in ways to
 overcome barriers to breastfeeding and promote the role for all in the family
 unit to ensure that women were supported.
 - Concern was raised at the low uptake of young white women breast feeding and the importance of doing all that was needed to encourage and support this cohort of women was stressed by the Board.
 - Members recognised that there were a number of key factors that contributed
 to the high numbers of certain demographics that had been identified as not
 breastfeeding and the importance of understating the barriers faced, which
 included but was not limited to health, anxiety, physical emotional and cultural
 factors. The importance of joined up thinking and solutions through other
 Strategies was suggested.

- With respect to social isolation, it was important to find ways to encourage
 joining of groups and promoting the idea that support groups were inclusive for
 all regardless of whether challenges were faced with breastfeeding or not.
- It was suggested that there was a role for the Council to lead on some of the work by exploring and ensuring that the Return to Work policy reflected the work of the Strategy.
- 8.5. The Integrated Care Board Officer in attendance welcomed offline conversations with different partners of the Board on how to ensure that the work being done aligned with the wider Integrated Care Systems Strategy, providing the best start for children, and reducing health inequalities.
- 8.6. Officers assured the Board that the focus of the Strategy was on collaboration with all partners and sectors, both paid and voluntary, on driving forward aspirations and the priorities identified. It was acknowledged that there was always scope for increased collaboration and ways to add value, the challenge was how to facilitate some of the work that needed to be done. In order to achieve this, the Place Based Approach was being adopted across all areas, reaching out and working with businesses and organisations to promote the importance of creating safe spaces for mothers to breastfeed and infant feeding in general.
- 8.7. Partners on the Board were urged to work together to drive forward the priorities and aspirations of the Infant Feeding Strategy 2023-2028.

8.8. **Decision:**

The Health and Wellbeing Board recommended that:

- 1) The report be noted.
- 2) The Portfolio Holders support the Infant Feeding Strategy 2023-2028 and explore ways that it aligns with the work of their areas of responsibility across the Council.
- 3) The Council ensures its Return to Work policy aligns with the aspirations of the Strategy.
- 9. Climate change implications
- 9.1. The Council declared a climate change emergency in April 2019 item 1038D refers, and has set a target for Medway to become carbon neutral by 2050.
- 9.2. Increasing breastfeeding rates correlates to improved infant and adult health and helps to reduce greenhouse gases and lessen the environmental impact of food alternatives. When compared with breastmilk, formula milk production uses large amounts of water and has a high carbon footprint. Increasing breastfeeding rates in Medway will have a positive impact on the environment and aligns with the climate change aspiration of Medway Council.

10. Financial implications

10.1. There are no new financial implications related to this briefing paper. All the current identified infant feeding actions are funded by either the ring fenced Public Health grant, the NHS or children's social care based budgets. New funding was recently made available via the Family Hubs and Start for Life project with specific grant conditions relating to infant feeding topics for these specific initiatives include a focus on infant feeding.

11. Legal implications

11.1. There are no legal implications arising from this report.

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Appendices

Appendix A – Draft Medway Infant Feeding Strategy

Appendix B – Diversity Impact Assessment

Background papers

None