Progress Report	LOIP Aim 3.3 100% of urgent requests for first stage infant formula and nutritional support for pre-school children are met by 2024
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Governance Group	CPA Management Group – 26 February 2025

Purpose of the Report
This report presents the results of the LOIP Improvement Project 4.1 which sought to ensure 100% of urgent request for first stage infant formula and nutritional support for pre-school children support are met by 2024.

Summary of Key Information

1. BACKGROUND

1.1 Cost of living pressures for pregnant women and families have exacerbated food insecurity difficulties. All children have the right to the best possible health (article 24) and an adequate standard of living (article 27) which includes appropriate nutrition to meet their developmental needs. All parents and carers of infants should be supported in ways that help them provide this safely and sustainably, whether the baby is breastfed, formula fed or a combination of both (The UNCRC, 2024).

1.2 Feed UK suggest that the lack of direct provision of a safe referral pathway can lead to unsafe infant feeding practices (Feed UK, 2020). UNICEF UK and First Steps Nutrition reported that it is the responsibility of Statutory Services to support families with both short- and long-term feeding needs (UNICEF UK, 2020). UNICEF UK strongly recommends that all local authorities have a clear pathway for the distribution of infant formula as part of the local authority emergency food provision system. They recognised the efforts undertaken by food banks to support local families, however, food banks cannot guarantee timely or consistent supplies of infant formula. Their staff and volunteers cannot be expected to assess, plan, and put in place the strategies needed to ensure that the short- and long-term needs of babies are met in what can often be very complex situations.

1.3 Scottish Government developed a plan to test a Cash First Approach to ending the need for food banks in Scotland (Scottish Government, 2023). From this, a toolkit was developed (Scottish Government, 2024). The aim of which was to provide a supportive resource to aid local agencies, front line workers and volunteers in supporting families with infants with money worries, including those who are struggling to afford infant formula and at crisis point. Testing a Cash First Approach will minimise financial hardship, maximise dignity and reduce future need.

2. IMPROVEMENT PROJECT AIM

2.1 Against this background, the CPA Board approved the project charter for the initiation of an improvement project which sought to ensure 100% of urgent request for first stage infant formula and nutritional support for pre-school children are met by 2024.

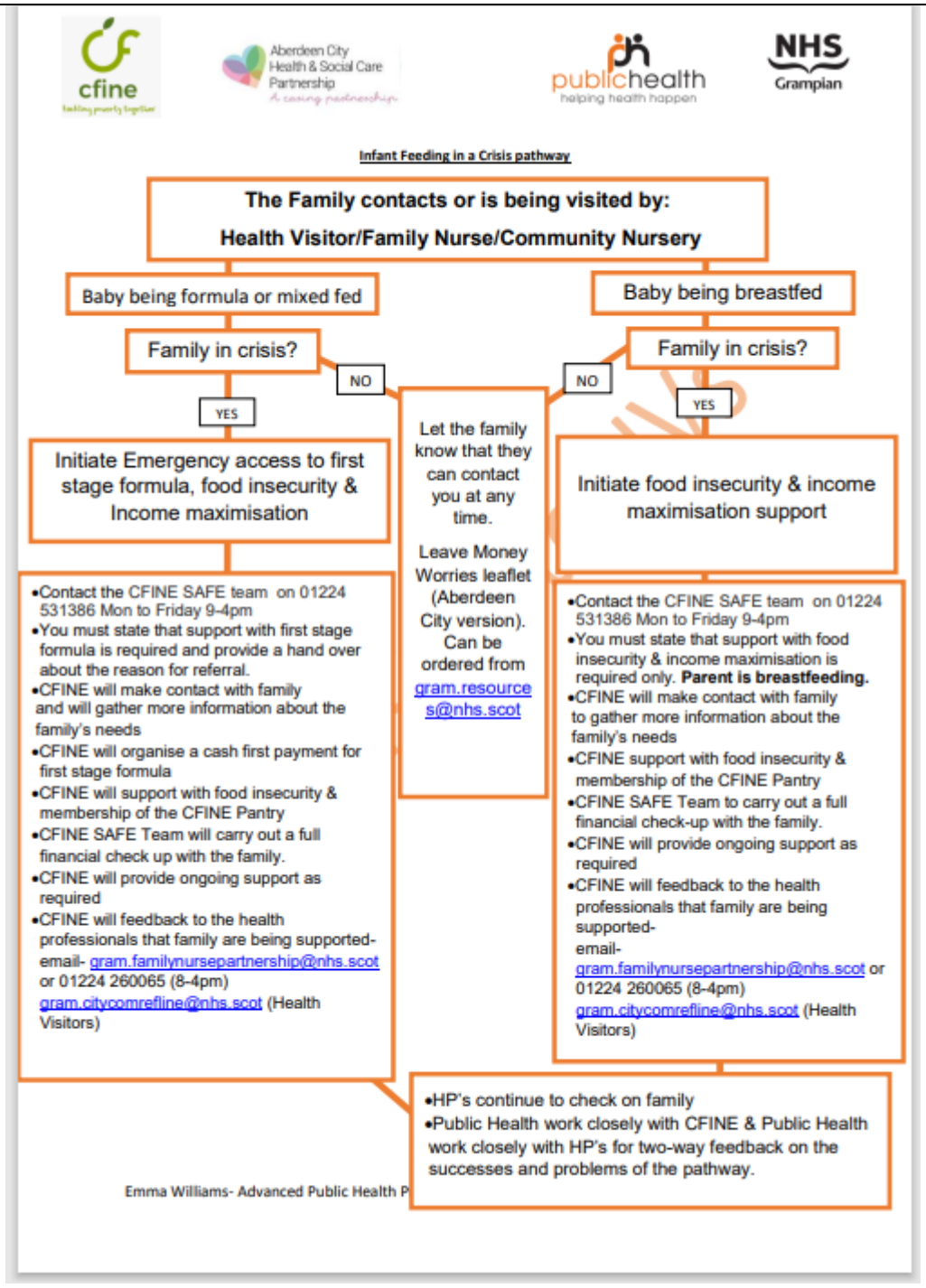
2.2 This multi-agency project team agreed to focus a number of approaches with a view to:

- Supporting staff to better identify and refer those in need of emergency formula.
- Developing a robust mechanism for delivering cash to those in urgent need.
- Support family to complete a full benefit check.

3 WHAT CHANGES DID WE MAKE?

3.1 The following changes were tested by the project:

- Develop an Infant Feeding in a Crisis Pathway (see below) that delivers a Cash First Approach, supports the family with food insecurity and gives support to maximise income.
- Develop an information sheet for health professionals to use when using the pathway (see below).
- CFINE created the Cash First Approach using Paypoint via family mobile phones.
- The pathway was tested with Aberdeen City Family Nursing Service initially.
- The pathway was then expanded to the Aberdeen City Health Visiting Service.
- CFINE staff were also able to use the pathway if families came direct to them. CFINE trained relevant staff to use the pathway.
- We tested giving different amounts of cash if there was concern about the amount the family were going to get.
- The pathway was originally just for first stage formula access but from public feedback, we renamed it the Infant Feeding in a Crisis Pathway and added Breastfeeding or mixed feeding families into the pathway. (See community involvement)


cfine
Aberdeen City Health & Social Care Partnership
publichealth
helping health happen
NHS Grampian
Infant Feeding in a Crisis pathway
The Family contacts or is being visited by:
Health Visitor/Family Nurse/Community Nursery
Baby being formula or mixed fed
Baby being breastfed
Family in crisis?
Family in crisis?
NO
NO
YES
YES
Let the family know that they can contact you at any time.
Leave Money Worries leaflet (Aberdeen City version). Can be ordered from gram.resources@nhs.scot
Initiate Emergency access to first stage formula, food insecurity & Income maximisation
Initiate food insecurity & income maximisation support
•Contact the CFINE SAFE team on 01224 531386 Mon to Friday 9-4pm
•You must state that support with first stage formula is required and provide a hand over about the reason for referral.
•CFINE will make contact with family and will gather more information about the family's needs
•CFINE will organise a cash first payment for first stage formula
•CFINE will support with food insecurity & membership of the CFINE Pantry
•CFINE SAFE Team will carry out a full financial check up with the family.
•CFINE will provide ongoing support as required
•CFINE will feedback to the health professionals that family are being supported- email- gram.familynursepartnership@nhs.scot or 01224 260065 (8-4pm) gram.citycomrefline@nhs.scot (Health Visitors)
•Contact the CFINE SAFE team on 01224 531386 Mon to Friday 9-4pm
•You must state that support with food insecurity & income maximisation is required only. Parent is breastfeeding.
•CFINE will make contact with family to gather more information about the family's needs
•CFINE support with food insecurity & membership of the CFINE Pantry
•CFINE SAFE Team to carry out a full financial check-up with the family.
•CFINE will provide ongoing support as required
•CFINE will feedback to the health professionals that family are being supported-
email- gram.familynursepartnership@nhs.scot or 01224 260065 (8-4pm) gram.citycomrefline@nhs.scot (Health Visitors)
•HP's continue to check on family
•Public Health work closely with CFINE & Public Health work closely with HP's for two-way feedback on the successes and problems of the pathway.
Emma Williams- Advanced Public Health P

Information sheet for Health professionals only

Aberdeen City

Supporting families who require infant feeding support in a crisis

If family identify during a home visit or phone contact, that they are in need of emergency formula and DO NOT have the means to do this, explain to the family that we can support and gain consent to refer to CFINE SAFE Team

Human infants require a milk only diet until developmentally ready to add other foods and drinks (around 6 months). This should ideally be breast milk or where not possible, first stage Infant formula, with clear instructions to make up safely. Any breastfeeding is valuable to the infant's health and should be protected, ensuring access to specialist support for help and advice to maximise their breast milk supply.

The purpose of the Infant Feeding in a Crisis Pathway is to support both breastfeeding and formula feeding families faced with food insecurity, ensuring income maximisation and support to feed their infant with the correct milk when parents/carers do not have the means to do so.

STEP 1

As all health professionals routinely do, have a meaningful conversation about infant feeding.

Having meaningful conversations with mothers (unicef.org.uk) (see page 5)

- **Explore if breastfeeding is possible** & support with any issue that may be occurring- if you feel that specialised help is required, contact the Infant feeding coordinator gram.infantfeedingcity@nhs.scot
- **Discuss responsive bottle feeding** and making up feeds- ensure family has the '**Formula Feeding- How to feed your baby safely' book (easy read available) ordered from NHSG resources catalogue** Health Information Resources Service (nhsgrampian.org). There is also easy to understand information available on Parent Club.
- **Types of formula**- Ensure family know that there is no advantage to purchasing expensive infant formula. Further information can be found here

STEP 2

Refer family direct to urgent support

Obtain consent from parent/carer to call CFINE SAFE Team 01224 531386

Available normal office hours 09:00am to 4.00pm Monday to Friday

Consent not given- ensure family understand that they can contact you via the number in their Child Health Record (red book), and leave the "Worrying about Money" Leaflet with them. Orders can be placed via the Resources webpage at www.nhsghpcat.org OR via our Resources Team at gram.resources@nhs.scot

STEP 3

CFINE: what happens now?

- The parent/carer will be contacted directly by a member of the CFINE/SAFE team to assist them to obtain first stage formula, if required, that day. This will be in the form of a cash first approach- money will be paid direct to them.
- The SAFE team member will also support the family to ensure income is maximised and all benefits such as Universal credits, and Best Start Grant and Foods are applied for and being received
- The CFINE team member will ensure ongoing support is available to the parent/carer with food insecurity
- If further assistance is required for relevant resources **CFINE** will submit a referral form to Abernessecities
- The CFINE team member will also contact the health professional to reassure family have been supported or if they have been unsuccessful in contacting family & require further help to make contact

STEP 4

What If the family have went direct to CFINE and not to the health professional?

- The CFINE team will ask for consent to inform health professional that they have supported a family
- If the family did not consent-The family will be encouraged to speak to health professional about infant feeding to ensure that they know how to make up formula feeds safely and understand responsive bottle feeding

STEP 5

- **Health professional Follow-up**: Contact family to ensure that they have been supported and that they can contact you if they need any more support

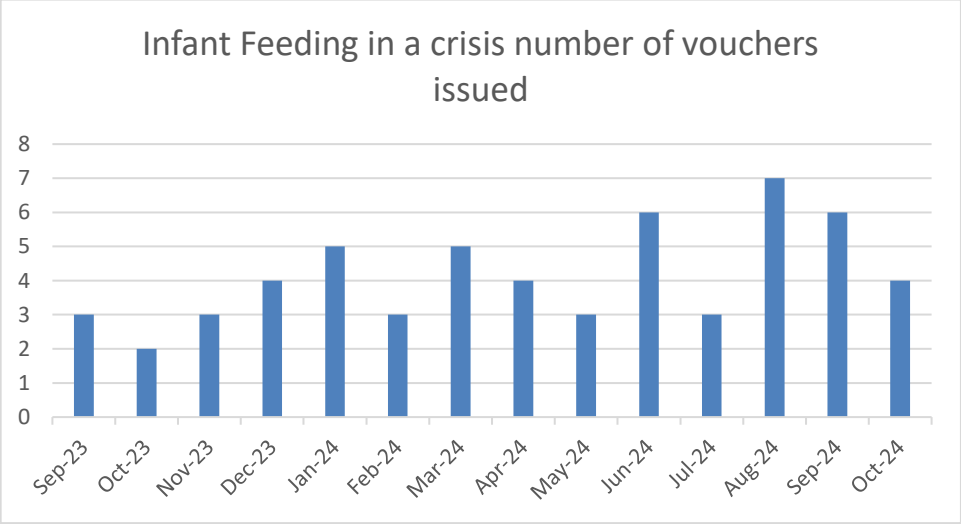
Further reading

Supporting families with infants in food insecurity - Baby Friendly Initiative (unicef.org.uk)
Cash-First - towards ending the need for food banks in Scotland: plan - gov.scot (www.gov.scot)
Infant food insecurity: summary report - gov.scot (www.gov.scot)

Cash-First - towards ending the need for food banks in Scotland: plan - gov.scot (www.gov.scot)

4. HAVE OUR CHANGES RESULTED IN IMPROVEMENT?

4.1 Yes, 100% of referrals made through the pilot pathway with Aberdeen City Family Nursing Service initially and then expanded to the Aberdeen City Health Visiting Service have been supported. To date 58 vouchers have been issued to 41 families (11 families have had repeat support and multiple vouchers) as shown in the chart below.



4.2 All families referred received follow up contact from an adviser from the SAFE team, most with instructions as to how to use the vouchers and offered a financial screening appointment via phone, home visit or agency appointment.

4.3 For those referrals where no contact was established, they were sent a contact letter with details for accessing an appointment with SAFE team and their referral paused at this stage. 6 referrals were noted to be closed with no return contact from the family. These were also families where only one voucher was issued and no repeat referrals were made by the health visitor, family nurse or midwife.

4.4 35 families were offered a benefit check and additional support with food access, grants for energy support and referrals for additional child related items such as from Abernecessities.

4.5 19 families were identified as having the full entitlements in place or were on maternity leave and receiving maternity pay. Some were awaiting Child Benefits payments to start and did not require additional support with this from SAFE.

4.6 To date 16 families, have had follow up support resulting from a benefit check. This has included support to claim additional welfare support via Social Security Scotland and the Department of Work and Pensions including best start grant/food cards and Scottish Child Payment. There has been a variety of support with UC new claims /transfers from legacy benefits and noting additional elements to be added to the existing UC claim, Child benefit applications and advice on claiming childcare costs.

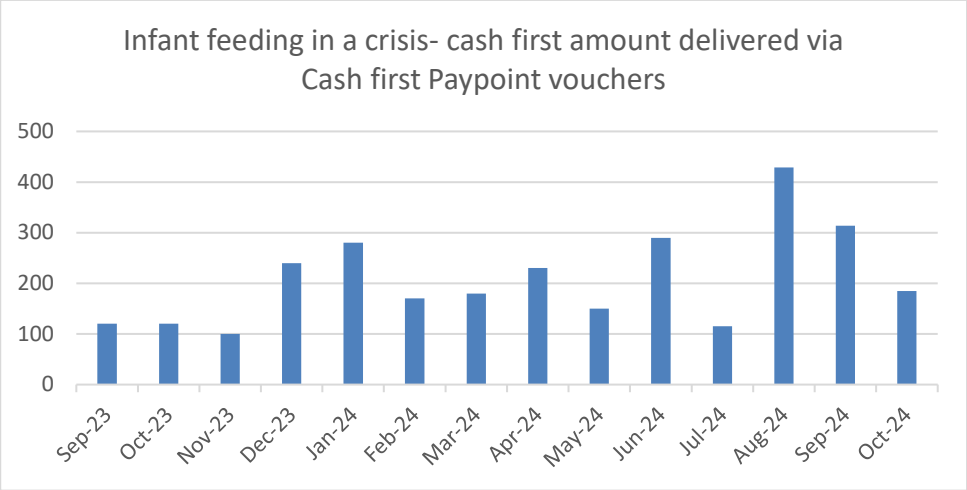
4.7 From this support the financial gain is estimated to be in the region of £15,000. p/a. This cannot be noted as an exact figure without cross referencing all case outcomes for individual cases on the SAFE CRM system alongside the pay point system. Additionally, some families will still be awaiting outcomes from applications made in 2024.

4.8 All families were also offered access to emergency food and a food pantry application, nappies, and baby toiletries such as bath wash and wipes. Families were also informed about support with energy related costs such as the VSA fuel fund grant of £500.

4.9 From those referred or signposted to the static pantry or the mobile pantries 2 families have continued use longer term while others have either used it short term for between 3-6 months or never used the pantry.

4.10 **Postcode data**

AB11	5
AB12	3
AB15	5
AB16	10
AB21	2
AB22	2
AB24	11
AB25	3



Participants have provided positive feedback on the approach:

"The vouchers were a massive help to our family since our daughter requires the anti-reflux formula. This is about 133% of the price of an already expensive one. Monthly this adds up quickly. This has allowed us to prepare for winter, an expensive time generally. The other services such as the safe team and pantry have been a great help also. The pantry really helps us maintain cooking healthy meals without forking out an arm and a leg. The safe team have guided us through almost our first year financially which without, we would be struggling a lot more." Local father who Received help from SAFE, IFP vouchers twice and attends the pantry on a regular basis.

"You give me £60 voucher for formula, and I also received pantry food, thank you, it has really helped". Local mum who received lots of help with various issues relating to their baby.

5. HOW HAVE OUR COMMUNITIES/PROTECTED GROUPS PARTICIPATED IN THE PROJECT AND THE IMPACT OF THIS

5.1 Early feedback from mothers in the Aberdeen City area was to expand the pathway to include breastfeeding mothers. This pathway was originally called "Access to emergency Formula" Pathway but was renamed "Infant Feeding in a Crisis Pathway" and added support for food insecurity for breastfeeding just in case they too required support.

5.2 Feedback from a Family Nurse via one of their clients was to reduce the amount of money that may be given at one time. The client was worried that they would be tempted to use the money for something else. They were not used to having a large amount of cash.

5.3 Families that did join the pantry long-term benefited from extra food for a small amount of payment each week which makes a difference to the family's weekly costs. We want to use the voice of the new pantry members from this pathway to encourage others to join.

6. HOW WILL WE SUSTAIN THESE IMPROVEMENTS?

6.1 We will continue to expand the use of the pathway to Midwifery colleagues and Allied Health Professionals (AHP) who support families with infants in Aberdeen City.

6.2 The pathway will require amended to incorporate AHP so that they know to inform the family's midwife, HV or FN if they required crisis support.

6.3 We will continue a rolling programme of awareness raising sessions with all relevant staff to know about, and use, the pathway in Aberdeen City.

6.4 Public Health and CFINE meet regularly to discuss data capture and pathway progress.

7. HOW WILL WE MONITOR THESE IMPROVEMENTS?

7.1 We will continue to use the database that CFINE developed for data capture and monitor data monthly and this will be reported to the best Start in Life Group and Children's Services Board and reported annually through the Children's Services Plan.

7.2 We will continue to seek qualitative feedback from service users and staff that submit referrals.

7.3 We can utilise the Morse and Badgernet systems to collate referrals made by HV/FN or Midwife.

8. OPPORTUNITIES FOR SCALE UP AND SPREAD

8.1 Whilst the pathway has been successful, it is recognised that the support is only accessible through the two professional groups at present. Therefore, it is likely given the ongoing cost of living pressures that other families who may require this support and not accessing it. Given the pathway has now been tested over a sustained period and with two settings, it recommended that it now be scaled up and spread across the partnership agencies to ensure that people can access support regardless of touchpoint.

8.2 It is proposed to take a phased approach to the spread of the pathway, focusing on services that directly engage with families, for example Early Learning and Childcare, other Allied Health Professionals who see families with infants under 1 year, School Nursing Service, Childsmile Health Care Support Workers who carry out home visits in Aberdeen City and self-referrals. Thereafter it can be expanded to police, fire, and rescue service etc.

8.3 Opportunity to spread the approach to nutritional support for pre-school children.

Recommendations for Action
That the CPA Management Group i) Note that the aim has been achieved with 41 families (100% of referrals) supported through the initial pathway, and the opportunity for scale up and spread of the pathway as detailed at section 8.1 to widen the reach and ensure families requiring support are aware and accessing it; and ii) Agree the opportunity for scale up and spread of the pathway as detailed at section 8.1 to widen the reach and ensure families requiring support are aware and accessing be implemented; and iii) Note that the dataset for the overall aim will continue to be reported via the Children's Services Board and through the annual outcome report to ensure progress is monitored

Opportunities and Risks
Opportunities: Expansion to other Allied Health Professionals who see families with infants under 1 year. Expansion to the School Nursing Service. They may be supporting a family that have a child under 1 year of age.

Expansion to Childsmile Health Care Support Workers who carry out home visits in Aberdeen City.

Risks:

- Continued access to funds to deliver a Cash First Approach for first stage formula and food insecurity.
- Families not having the confidence to contact their midwife, health visitor or family nurse if they need support.
- Families not engaging with the income maximisation part of the pathway.
- Staff who use the pathway need to be clear about the standard operating procedure.

CONSULTATION

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Best Start in Life Group
Children's Services Board

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