

Children's Centre interview: Staff

Standards to be met

The staff member demonstrates (according to role):

- the importance of breastfeeding for the health and wellbeing of mothers and babies;
- why a baby needs love, comfort and security and how to support parents to provide this;
- how a baby breastfeeds;
- why skin to skin contact is good for mothers and babies;
- what is meant by responsive feeding and how to explain this to parents;
- how to support parents to bottle feed their baby in ways which will encourage the best possible outcomes for the baby;
- why advertising of breastmilk substitutes, teats and dummies should not be allowed within children's centres;
- the recommended age for introducing solid foods;
- the importance of creating a welcoming environment for breastfeeding within the centre;
- when and how to refer mothers for additional breastfeeding support.

Options for interviewing techniques

The questions are laid out in sections and the audit can be stopped at the end of each section depending on the different staff roles. It is therefore useful to have a clear understanding of the various roles within the children's centres before starting the audit. For example, a member of the reception staff would only be expected to answer the questions in the first section, whereas a family support worker who works with families but who does not have a direct role in supporting breastfeeding would be expected to answer the first two sections. A staff member who directly supports breastfeeding mothers or who helps runs a breastfeeding group would be expected to answer the questions in all sections.

It is important to create a relaxed, non-threatening environment when auditing staff. Reassure them that the questions are being asked to help plan and evaluate the training, rather than to test individuals. It can be helpful to avoid terms such as audit or interview, but rather to explain that this is an opportunity to talk about the work they are doing to support mothers, babies and families.

Marking the answers

Below each question is a brief description of the standard of care required (for more detail see the *Guide to the Baby Friendly Initiative Standards* at unicef.org.uk/babyfriendly/standards). There is also a guide to the number of points needed for an answer to be considered adequate. **This is a guide not a prescription**, the auditor still needs to base their final decision on the overall answer given and whether given the interviewee's role, overall knowledge and communication style, their answer was good enough.

For each question decide whether the staff member's knowledge and skills are:

- **Criteria met** = Meets the standard.
- **Criteria not met** = Does not meet the standard.
- **Opted out** = Does not meet the standard but would not be expected to in their role.

Each question should be marked on the scoring sheet as one of:

✓ = Criteria met

× = Criteria not met

O = Opted out

When deciding whether or not the staff member's answer has met the criteria for any given question, consider the following:

- Did they demonstrate enough knowledge / skill to effectively support a mother?
- What is their role? For example, if the staff member has a supportive role rather than primary responsibility for caring for mothers, less expertise would be required.
- Do they deliver the care related to the question? If not, opt them out for that question.

Children's Centre interview: Staff

Questions for all staff (Level 1)

- 1a. In what way does this children's centre create a welcoming environment for breastfeeding families?

Signs make it clear breastfeeding welcome, run breastfeeding drop-in groups, provide comfortable areas for feeding, offer private space if required, other suggestions.

- 1b. Tell me what you know about why breastfeeding is important for mothers and babies.

Understanding of basic health benefits (at least three specific ones) and a recognition that it also helps provide a foundation for positive mother-baby relationship.

- 1c. A baby milk company representative comes to the centre and offers to provide leaflets and DVDs for use in parenting groups. They assure you that their name is not printed anywhere on the information. How would you handle this?

Awareness that staff should not accept any company literature, and some understanding that advertising undermines confidence in breastfeeding.

- 1d. If a mother asks for help or information on feeding or caring for her baby, what do you do?

Response should be appropriate to role. Staff without appropriate training should be aware not to give advice and be clear about how local referral system works.

Additional questions for staff who directly support families (although not necessarily specific to breastfeeding) (Level 2)

- 2a. In what ways do you promote loving and responsive relationships between parents and their babies?

Aware of importance of skin contact as a means of calming babies, talking to and responding to babies, not leaving baby to cry, picking up and comforting won't spoil them. (Three needed)

- 2b. Why is it important for babies not to be left to cry for long periods?

Understanding that this helps babies feel secure, keeps levels of stress low and that this is good for brain development.

- 2c. How would you explain responsive bottle feeding to a mum?

Hold close, eye contact, invite baby to take teat by gently rubbing it against his upper lip, pace the feed, don't force a full feed, limit the number of people who feed the baby. (Three needed)

Scoring for all staff

Staff understand

1a. How the centre creates a welcoming environment

(✓/ ×/ O) ▶ 1a

1b. Why breastfeeding is important for mothers and babies

(✓/ ×/ O) ▶ 1b

1c. Why it's important to avoid allowing advertising of formula milks

(✓/ ×/ O) ▶ 1c

1d. Awareness of roles, responsibilities and appropriate signposting

(✓/ ×/ O) ▶ 1d

Scoring for staff who directly support families

Staff can describe / demonstrate

2a. How they promote loving and responsive parenting

(✓/ ×/ O) ▶ 2a

2b. Why it's important not to leave babies to cry

(✓/ ×/ O) ▶ 2b

2c. How to explain responsive bottle feeding

(✓/ ×/ O) ▶ 2c

2d. What other information does a bottle feeding mother need?

How to sterilise equipment, how to make up feeds as safely as possible, the type of milk to use (for instance first/newborn milks is suitable until the baby is a year old).

2e. A mother tells you that she is thinking of starting solid food when her baby gets to four months old. What would you say?

That it is best for most babies to start solids at around six months as their gut is then mature enough to cope with food other than milk.

Additional questions for staff who are involved in running breastfeeding groups or supporting breastfeeding mothers at home (Level 3)

3a. You are chatting to a new mum at the breastfeeding group and she tells you that her nipples hurt during feeds. Why might this be and what would you do to help?

Ineffective attachment. If expected of role – observe a feed and provide basic guidance with positioning and attachment. Could use leaflet or doll / breast to talk through this if comfortable or outline key principles of positioning (close, head free, in line, nose to nipple) and signs of effective attachment (wide open mouth, chin pressed into breast, full cheeks, more areola visible above top lip, rhythmic suck swallow pattern. (All needed)

If not expected of role, need to ensure they are familiar with appropriate referral mechanism.

3b. A mum (who is breastfeeding) tells you she is feeling unwell, has a sore breast and thinks she should not feed her baby in case she makes him unwell. How would you manage this situation?

Important not to stop breastfeeding, appropriate referral. Probe to ensure awareness of additional service. (Both needed)

3c. A grandmother who has accompanied her daughter to the centre complains to you that her daughter is 'always feeding the baby' and she is worried that she will overfeed and spoil him if she carries on. How would you explain responsive breastfeeding to her?

Feeding when the baby shows feeding cues, offering the breast when mother's breasts feel full, when the baby needs comforting, when mother or baby need to rest and relax. Parents being aware that breastfed babies cannot be overfed and that it is always appropriate to offer the breast. (All needed)

Scoring for staff who directly support families

Staff can describe / demonstrate

2d. What information a bottle-feeding mother needs

(✓/ ×/ O) ▶ 2d

2e. Why waiting to start solids at around six months is important

(✓/ ×/ O) ▶ 2e

Scoring for staff who are involved in supporting breastfeeding

Staff can describe / demonstrate

3a. What would cause, and how to address, sore nipples whilst feeding

(✓/ ×/ O) ▶ 3a

3b. How to support an ill breastfeeding mother

(✓/ ×/ O) ▶ 3b

3c. How to explain responsive breastfeeding

(✓/ ×/ O) ▶ 3c