



Dear Colleague

**NUTRITION OF WOMEN OF CHILDBEARING AGE, PREGNANT WOMEN AND CHILDREN UNDER FIVE IN DISADVANTAGED AREAS - FUNDING ALLOCATION 2008 - 2011**

Annex A of this letter expands on the commitment in *Healthy Eating, Active Living – An action plan to improve diet, increase physical activity and tackle obesity (2008-2011)* (<http://www.scotland.gov.uk/Publications/2008/06/20155902/0>) to make £19m available over the 3 year period to improve the nutrition of women of childbearing age, pregnant women and children under five in disadvantaged areas.

In summary, funding is being allocated to NHS Boards to

- increase the uptake of Healthy Start
- support delivery of the HEAT target on breastfeeding.
- invest in specialist nutritional services
- support delivery of existing programmes where they meet the general criteria set out in this letter.
- enable existing training for anyone involved in interventions with the target group to be taken up

See annex 1 for the particular focus for year 1 and for information on further forthcoming guidance.

NICE public health guidance 11, [Improving the nutrition of pregnant and breastfeeding mothers and children in low-income households](#) (published in March 2008) provides an evidence base for the use of the funding.

**Health Inequalities and Joined-up Working**

The commitment to tackle health inequalities is a priority. [Equally Well: report of the Ministerial Task Force on health inequalities](#) (June 2008) highlighted improving maternal nutrition during pregnancy as an effective action to address future inequalities in health. In particular, the Task Force recommended that NHS Boards should improve breastfeeding rates in deprived areas and among disadvantaged groups.

Yours sincerely

**PAM WHITTLE**

Director of Public Health and Health Improvement

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## NUTRITION OF WOMEN OF CHILDBEARING AGE, PREGNANT WOMEN AND CHILDREN UNDER FIVE IN DISADVANTAGED AREAS

### FUNDING ALLOCATION FOR 2008/2009

#### Policy context

1. The need to improve maternal nutrition during pregnancy as an effective action to address future inequalities in health was highlighted in [Equally Well: report of the Ministerial Task Force on health inequalities](#). The commitment also appears in [Healthy Eating, Active Living – an action plan to improve diet, increase physical activity and tackle obesity 2008 - 2011](#).
2. Health Boards also have two HEAT targets which are of relevance
  - To increase the proportion of new-born children exclusively breastfed at 6-8 weeks from 26.6% in 2006/07 to 33.3% in 2010/11, and
  - to achieve agreed completion rates for child healthy weight intervention programme by 2010/11.

#### Supporting Evidence

3. NICE public health guidance 11, published in March 2008 supports improvements in the nutrition of pregnant and breastfeeding mothers and children in low-income households. The document, together with a quick reference guide for professionals and the public, and supporting documents, including an evidence review and an economic analysis can be downloaded at [www.nice.org.uk/PH011](http://www.nice.org.uk/PH011). The guidance makes 22 recommendations with associated actions for
  - health professionals working with women and young children
  - Child Health Commissioners, managers of maternity and child health services and CHP Directors.
  - public, community, voluntary and private sector organisations.

#### Funding

4. Over the next three years funding of £3m/£6m/£10m is available for this agenda. Allocations are at Annex B. Key priorities for the use of this funding are set out below and are supported by the evidence in the NICE guidelines.

#### Key priorities

5. We are identifying the following areas as key priorities for implementation. (see also <http://www.nice.org.uk/nicemedia/pdf/PH011guidance.pdf>). In taking forward this agenda Health Boards and their partners should assess local needs and inequalities and target their activities accordingly.
  - **Healthy Start** – Health Boards should consider and implement strategies to increase the uptake of the Healthy Start benefit, working with relevant partners.

- **Breastfeeding** - Health Boards may use a proportion of their allocation to assist with progress towards achieving the breastfeeding HEAT target, however they must be able to demonstrate progress also on the other priorities. There is also the connected Equally Well recommendation that NHS Boards should improve breastfeeding rates in deprived areas and among disadvantaged groups.
- **Specialist nutritional support services** – Health Boards should invest in these services to support for example
  - education of health professionals on importance of Vitamin D supplements for all pregnant and breastfeeding women
  - planning and delivering appropriate health professional interventions on Vitamin D and folic acid with pregnant and breastfeeding women
- **Training** - Health Boards should enable health professionals, midwives, health visitors, and support workers who come into contact with the specific population groups to take up training opportunities to support this agenda

6. Boards may also use this funding to continue, or build on existing programmes where the need for them is supported by the evidence in the NICE guidelines.

7. Boards may consider that delivery of this agenda would be facilitated by appointment or identification of a co-ordinator. That decision is one to be taken locally.

### ***Further support***

8. During year 1 a reference group will be convened, which will include representation from Health Boards, professional bodies, and the third sector. The group will provide guidance to support NHS Boards and their partners to make evidence-informed decisions on what actions they should be undertaking. It is also likely that a separate or sub-group will be set up to consider training related issues.

9. The Healthy Start website (<http://www.healthystart.nhs.uk/>) includes a great deal of information both for recipients, and for health professionals, including a Healthy Start CPD course <https://elearning.healthystart.nhs.uk/>)

10. Health Scotland are currently preparing a Scottish commentary on the NICE guidelines which will be available later this year.

### ***Partnership***

11. In taking forward this agenda Health Boards should work with local authorities and community health partnerships. They have a strong contribution to make to support delivery of the national performance framework, which includes national indicators and targets on reducing the rate of increase in the proportion of children with their body mass index outwith a healthy range by 2018, and increasing healthy life expectancy at birth in the most deprived areas.

12. Third sector agencies, including Community Food and Health Scotland, should also be involved to ensure that community based initiatives such as food co-operatives, fruit and vegetable initiatives, cookery clubs etc particularly those involving women and children, become an integral part of funded activities locally.

## **Screening Services**

13. Health Boards should also consider the opportunities to improve co-ordination of activities aimed at pregnant women provided by the changes in screening services highlighted in [CEL 31/2008](#).

## **Impact and Evaluation**

14. Information on progress towards achieving the breastfeeding HEAT target will be collected through the Annual Review process. We are also considering how best to collect information to allow the impact of measures taken over the 3 year period as a result of this funding to be assessed.

## **Infant Nutrition Strategy**

15. Scottish Government has recently appointed an Infant Nutrition Co-ordinator whose role will be to develop an infant nutrition strategy. The actions described in this letter will be a key contribution to that strategy.

**NHS Boards – 2008 to 2011 allocations**

1. A decision has been taken to allocate a minimum amount in each year to ensure that each Board has a realistic amount to begin, and then continue work on this agenda. The basic amounts are £13,000, £26,000 and £43,000, with the remaining funding allocated per the Arbuthnott formula.

| <b>NHS Board</b>      | <b>2008/09<br/>Allocation<br/>(£)</b> | <b>2009/10<br/>Allocation<br/>(£)</b> | <b>2010/11<br/>Allocation<br/>(£)</b> |
|-----------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Ayrshire and Arran    | 230,099                               | 460,197                               | 767,022                               |
| Borders               | 76,095                                | 152,190                               | 253,421                               |
| Dumfries and Galloway | 103,599                               | 207,197                               | 345,146                               |
| Fife                  | 203,525                               | 407,050                               | 678,399                               |
| Forth Valley          | 162,129                               | 324,257                               | 540,342                               |
| Grampian              | 269,692                               | 539,383                               | 899,064                               |
| Greater Glasgow       | 724,263                               | 1,448,526                             | 2,415,055                             |
| Highland              | 195,550                               | 391,100                               | 651,802                               |
| Lanarkshire           | 315,033                               | 630,066                               | 1,050,278                             |
| Lothian               | 395,487                               | 790,974                               | 1,318,591                             |
| Orkney                | 25,000                                | 49,558                                | 82,284                                |
| Shetland              | 26,865                                | 53,729                                | 89,238                                |
| Tayside               | 237,961                               | 475,922                               | 793,242                               |
| Western Isles         | 34,924                                | 69,848                                | 116,116                               |
| <b>Total</b>          | <b>3,000,222</b>                      | <b>5,999,997</b>                      | <b>10,000,000</b>                     |