

Supplementary Materials

Annual eBF rates at discharge 2016

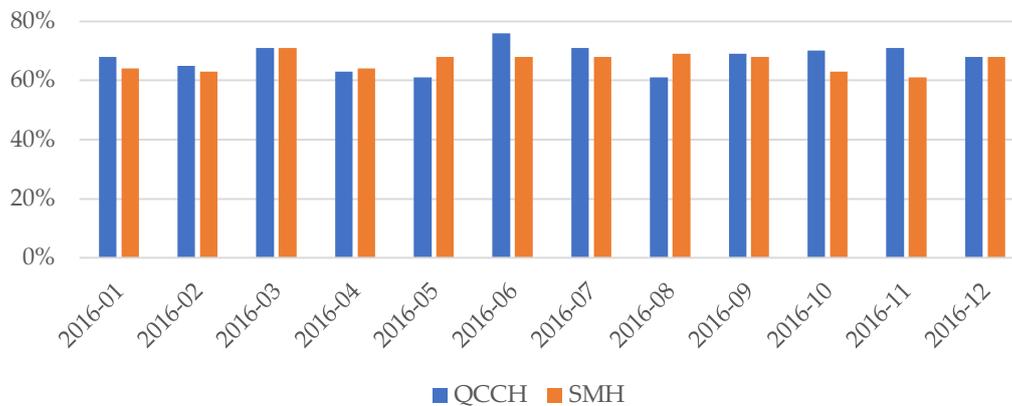


Figure S1: Annual eBF rates at discharge on the postnatal wards at QCCH and SMH in 2016. Percentages (%) are based on the feeding methods recorded at discharge of 4388 infants. Monthly eBF rates for QCCH and SMH are shown. The overall annual eBF rate was 67%. QCCH; Queen Charlotte's and Chelsea Hospital, SMH; Saint Mary's Hospital: eBF; exclusively breastfed. Clinical supplementation: 78 (58.7%) of non-clinical supplementation occurred between the hours of 22.00-06.00. Clinical reasons to supplement included infant hypoglycaemia and very low birth weight (<1500g). Most commonly recorded supplementation reason was maternal request.

Barriers to supporting BF on postnatal ward

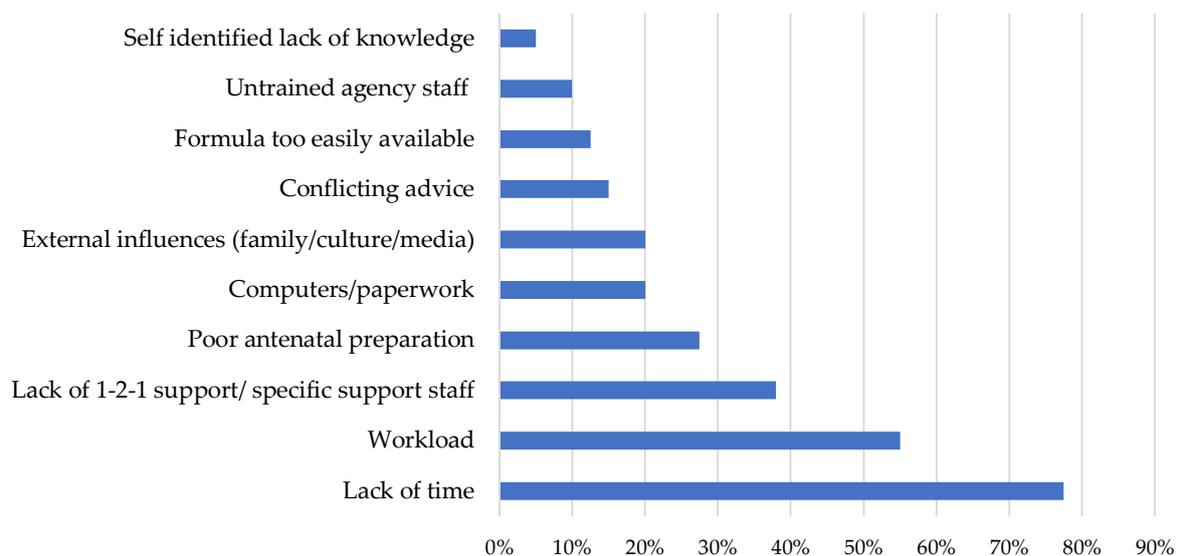


Figure S2: Staff's perceived barriers to supporting breastfeeding on the wards. Percentage (%) of total staff (n=31) expressing each theme is graphically represented.

Table S1: Midwife characteristics

Midwife characteristics	
Staff age	38 (28, 50)
Years' experience as midwife	7 (4, 18)
Ward Type	
<i>Postnatal</i>	18 (58)
<i>Birth Centre/Private ward</i>	13 (42)
Ethnicity: White Caucasian	22 (71)
Educated to degree level	27 (87)
NIFS-AMI	20 (65)
Non-clinical supplementation rate (%)	0.6 (0.0, 2.8)
Attended training sponsored by a formula company	9 (29)
Primiparous/multiparous	14 (45)
eBF own infants	8 (57)
Longest BF duration (months)	14 (5, 23)
Earliest age child received non-breast milk (months)	3 (1,6)
eBF as infant	17 (57)
Duration of BF as infant (months)	6 (4, 12)

All data are displayed; number (% or IQR) as shown. Ethnic groups represented in the non- Caucasian midwives were Black African 8 (25.8) and Asian 1 (3.2). 100% staff attended BF training course within the Imperial College London NHS Trust. BF-breastfeeding; eBF –exclusively breastfeeding; NIFS-AMI-neonatal infant-formula supplementation in the absence of medical indication.

Table S2: Midwife characteristics according to their supplementation categorisation (n = 31).

	Supplementing midwives n = 20	Non-supplementing midwives n = 11	p =
Descriptive characteristics			
Staff age	41 (28, 56)	30 (28, 39)	0.044
Years' experience as midwife	8 (4, 23)	5 (4, 9)	0.212
Ward Type			
<i>Postnatal</i>	15 (75)	3 (27)	0.02
<i>Birth Centre/ Private Ward</i>	5 (25)	8 (73)	
Ethnicity: White Caucasian	12 (60)	10 (91)	0.11
Educated to degree level	16 (80)	11 (100)	0.269
Personal experiences			
Positive attitudes to BF in social/cultural background	16 (80)	8 (73)	0.676
Primiparous/multiparous	11 (55)	3 (27)	0.26
eBF own infants	5 (46)	3 (100)	0.209
Longest BF duration (months)	12 (4, 16)	24 (16, 27)	0.29
Earliest age child received non-breast milk (months)	2 (1, 5)	4 (3, 5)	0.456
eBF as infant	10 (50)	7 (64)	0.708
Duration of BF as infant (months)	11 (5, 12)	6 (3, 6)	0.17
Staff perceptions and professional experiences			
Perceived impact of BMS (1-10)	7 (5, 9)	8 (7, 10)	0.183
Time satisfaction for infant feeding support (1-10)	3 (1, 6)	6, 3, 9)	0.032
Attended training sponsored by a formula company	6 (30)	2 (18)	0.429
Received training on finger-feeding	12 (60)	7 (64)	1

Satisfied with time available for finger-feeding	4 (20)	6 (55)	0.106
Confidence in finger-feeding (1-10)	7 (2, 10)	10 (8, 10)	0.07
Correctly identify three correct reasons for supplementing	7 (35)	4 (36)	1
Time allocation by percentage			
<i>Computer/paperwork</i>	45 (24, 60)	50 (30, 60)	0.594
<i>General patient care</i>	25 (20, 33)	30 (20, 40)	0.729
<i>Infant feeding support</i>	12 (10, 20)	10 (10, 20)	0.945
<i>Observations and medication</i>	11 (10, 20)	10 (5, 10)	0.077

Data is shown as median (percentage or interquartile range). Mann-Whitney U Test and Fisher's Exact Test (2-tailed) were used. BMS-breast milk supplements; BF-breastfeeding; eBF –exclusively breastfeeding; NIFS-AMI- neonatal infant-formula supplementation in the absence of medical indication.