APPENDIX 2.0

USE OF POWDERED INFANT FORMULA INSIDE & OUTSIDE OF THE HOME: A QUALITATIVE ANALYSIS OF PARENTS' AND CAREGIVERS BELIEFS, ATTITUDES, RISK PERCEPTIONS AND SELF-REPORTED PRACTICES.

Appendix 2.1 Documentation required for implementation of focus groups: Parents and Day Nursery Nurses

Day Nursery Nurse Recruitment Questionnaire Parent Recruitment Questionnaire Parent and Day Nursery Nurse / Manager Information Sheet and Consent form Invitation to Parent Focus Group Invitation to Day Nursery Focus Group Day Nursery Nurse Focus Group Discussion Guide Parent Focus Group Discussion Guide

Appendix 2.2 Documentation required for implementation of focus groups: NHS Professionals (Health Visitors, Hospital Nurses, Hospital and Community Midwives

Flow chart indicating stages of obtaining NHS Ethical approval from MREC and local NHS Trust approval for FSA study.

MREC Approved Research Protocol

MREC Approval letter: Main Study

MREC Approval letter: Amendment 1 - Inclusion of Midwives in the study

Call to Action Letters - NHS department Managers

Call to Action – NHS healthcare professionals information sheet and invitation to participate in the study

Approved Recruitment Questionnaire: NHS Professionals [e.g. Health Visitor]

Approved Participant Information Sheet / Written Guidance: NHS Professionals

Approved focus group Discussion Guide: Health Care Professionals

Appendix 2.1 Documentation required for implementation of focus groups: Parents and Day Nursery Nurses

		FOR OFFICE USE ONLY	Q.4	Do you have any other children?	
	INFANT POWDERED FORMULA RECRUITMENT QUESTIONNAIRE			Yes	1 → CHECK QUOTAS 8 CONTINUE
BEAUFORT	PARENTS FINAL			No	2 → CHECK QUOTAS & CONTINUE
R E S E A R C H 2 Museum Place, Cardiff, CF10	2007 BQ2734		SHOW	CARD 2	
3BG			Q.5	How do you currently feed your baby?	
	APPROACH PEOPLE AGED 18+			Breast Feeding Only Mix of powdered formula & breast milk	1 → CLOSE 2 → GO TO Q.6
Hello, my name is c by U.W.I.C – the University	of Beaufort Research. We are carrying ou y of Wales Institute Cardiff – on behalf of t	t some research undertaken he Food Standards Agency		Powdered Formula only	3 → GO TO Q.7
into feeding babies under 6 minutes to answer some que REASSURE IF NECESSA	6 months old and would like your opinions	. Could you spare just a few	Q.6	You say that you currently sometimes use powdered formula milk to feed your baby. Can you please tell me approximately how often you use powdered formula?	
SHOW CARD 1				At least once a day OTHER	1→CONTINUE 2 →THANK & CLOSE
	nber of your family ever been involved following areas?				
	Marketing	1	Q.7	CARD 3 How often do you prepare powdered infant formula for your	
	Market Research Journalism	2 3		baby? All feeds	1 → CONTINUE
	Broadcasting Medical Profession	4 5 IF ANY CLOSE		At least once every day A few times a week	2 → CONTINUE 3 → CLOSE
	PR / Advertising Government	6		Rarely / Never	4 → CLOSE
	Manufacturer or retailer of baby food / Milk / Formula	8			
Q.2 How old are you?	iver mint / Formuld		Q.8	How involved are you in the sterilizing and preparation of bottles used for feeding formula?	
	17 or under			Very involved Shared involvement	1 → CONTINUE 2 → CONTINUE
	18 – 30 31 - 45	2 → CONTINUE 3 → CONTINUE		Little / No involvement	3 → CLOSE
	46 or over	4 → CLOSE	Q.9	How long have you been using powdered formula feeds	
Q.3 How old is your baby	?			From birth In the last few weeks	
	0 – 3 months	1 → CHECK QUOTAS & CONTINUE		2 - 3 months 3 - 4 months	3→ SPREAD &
	4 – 6 months	2 → CHECK QUOTAS & CONTINUE		5 - 6 months	5 → CONTINUE
	7 months +	3 → CLOSE			
HOWCARD 4				IF SUCCESSFULLY SCREENED INVITE RESPONDENT T	O FOCUS GROUP:
	a most closely describes how you			We are holding a focus group to discuss different aspects of old with powdered infant formula, and would like to invite you	feeding babies under 6 mor
I/we had	d always planned to bottle feed	1 → PLANNED - CHECK		(READ OUT DATE)	personally to attend.
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SHOWCARD 1

Marketing

Market Research

Journalism

Broadcasting

Medical Profession

PR / Advertising

Government

Manufacturer or retailer of baby food / Milk / Formula

SHOWCARD 2

Breast Feeding Only

Mix of powdered formula & breast milk

Powdered Formula only

SHOWCARD 3

All feeds

At least once every day

A few times a week

Rarely / Never

SHOWCARD 4

I / we had always planned to bottle feed exclusively

I / we had always planned to breast feed but now use/also use powdered formula

I / we had always planned to do mixed feeding

SHOWCARD 5

The baby was premature/low birth weight/another medical condition/immuno compromised and was unable to feed properly initially

The baby did not take to breast feeding

I was uncomfortable with breast feeding

I wanted more freedom

We wanted the father to get more involved in feeding

I could not provide enough milk

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			FOR OFFICE USE ONLY
RE	EAUFORT SELATION CF10 3BG	INFANT POWDERED FORMULA RECRUITMENT QUESTIONNAIRE DAY NURSERY NURSES FINAL AUGUST 2007 BQ2734	
		APPROACH PEOPLE AGED 18+	
by inte min RE	U.W.I.C – the University o feeding babies under 6 nutes to answer some qu ASSURE IF NECESSA	f Beaufort Research. We are carrying o of Wales Institute Cardiff – on behalf of months old and would like your opinions lestions? RY: BEAUFORT RESEARCH IS AN INE E NOT SELLING ANYTHING	the Food Standards Agency s. Could you spare just a few
Q.1	Are you a professiona	Ily trained nursery nurse? Yes	
		No	2 → CLOSE
Q.2	What ages of babies of	do you work with nowadays?	
		0 – 6 months 6 – 12 months 12+ months	1 → CONTINUE 2 → CLOSE 3 → CLOSE
Q.3	Do you sometimes <u>pr</u> nursery?	epare powdered infant formula in the	
		Yes	1 → CHECK QUOTAS & CONTINUE
		No	2 → CHECK QUOTAS & CONTINUE
Q.4	Have you ever been to	a focus group before?	
		Yes- within last 6 months	→ ASK Q.5
		Yes- longer ago	→ RECRUIT
		No, never	→ RECRUIT
Q.5	What was the subject	of the focus group discussion?	→ IF RELATED TO INFANT FEEDING / FORMULA, THANK & CLOSE. OTHERS CONTINUE
		1	

IF SUCCESSFULLY SCREENED INVITE RESPONDENT TO FOCUS GROUP: We are holding a focus group to discuss different aspects of feeding babies under 6 months old with powdered infant formula and would like to invite you personally to attend. (READ OUT DATE) EXPLAIN FOCUS GROUP • Informal, relaxed discussion • £40 "Thank-you" for attending Will last about hour and a half
IF RESPONDENT WILLING TO ATTEND GROUP, HAND OUT INVITATION WITH RELEVANT DATE & TIME OF GROUP, THEN RECORD DETAILS BELOW
RESPONDENT DETAILS:
Name:
Address:
Postcode:
Telephone Number:
INTERVIEWER DECLARATION
I declare that I have conducted this interview in accordance with your instructions.
Signature:
Date:
ASK RESPONDENTS: Are you willing for us to pass on your details to UWIC so that they may contact you to take part in further research next year? The research will take the form of a self-completion which will be posted to you. Yes, I am willing for my details to be passed on to UWIC No, I am not willing for my details to be passed on to UWIC

Focus Group Invitation from	Focus Group Invitation from
BEAUFORT MRS.	MRS
R E S E A R C H 2 Museum Place, Cardiff, CF10 3BG Tel: 029 2037 8565 Fax 029 2037 0600	2 Museum Place, Cardiff, CF10 3BG Tel: 029 2037 8565 Fax 029 2037 0600
PLEASE BRING THIS INVITATION WITH YOU.	PLEASE BRING THIS INVITATION WITH YOU.
Dear Sir/Madam Thank you for agreeing to attend our Group Discussion. This Invitation is for you personally – please do not pass it on to anyone else.	Dear Sir/Madam Thank you for agreeing to attend our Group Discussion. This Invitation is for you personally – please do not pass it on to anyone else.
The discussion will be held at:	The discussion will be held at:
Place:	Place:
Time: Date:	Time: Date:
You will receive £30 to cover your expenses	You will receive £40 to cover your expenses
for attending the group discussion	for attending the group discussion
If for any reason you cannot attend, kindly contact	If for any reason you cannot attend, kindly contact
telephone number as soon as possible.	telephone number as soon as possible.
You have been asked to come along to talk with us because we are interested in your opinion as a [<i>Parent</i>]. We look forward to meeting you and may we assure you that in no way will you be asked to purchase anything. To help in the analysis of your views, the group will be recorded. The group will last 1 & a half hours.	You have been asked to come along to talk with us because we are interested in your opinion as a [<i>Day Nursery Nurse</i>]. We look forward to meeting you and may we assure you that in no way will you be asked to purchase anything. To help in the analysis of your views, the group will be recorded. The group will last one & half hours hours.
Yours sincerely,	Yours sincerely,
Lisa Williams Version 1 (01/10/2007)	Lisa Williams Version 1 (01/10/2007)

FSA RESEARCH: POWDERED FORMULA MILK

MAIN STUDY Focus Group Discussion Guide: Day Nursery Nurses

1. INTRODUCTIONS (~5mins)

- Moderator to introduce self, explain the process of market research to respondents and the format of the
 discussion, reiterate the need for honesty to help with the research and reassure confidentiality.
- The topic of this discussion involves your role as nursery nurses looking after and feeding babies aged <u>0</u>-<u>6 months</u> in day nurseries. In particular, we are interested in what they think about feeding babies with powdered formula milk and related matters. *(need to*
- Important to explain that the Food Standards Agency is not promoting bottle feeding, however it is keen to understand about aspects of preparation, feeding and storage of made up formula milks.
- Introductions: brief background details of respondents first name, job title, name of nursery, length of time in job

2. ROLES, RESPONSIBILITIES & GENERAL NURSERY PRACTICES (~10 mins)

- How many babies aged <6 months do you have in your nursery? (go round table & ask all participants)
- Ages of babies (<6months) in their care? (in weeks or months)
- Usually how long per day are such babies in their care? Usually how many feeds <u>per baby</u>, per day.
- How many members of staff (in total) look after all the babies aged <6 months?
- How is the care and feeding organised is it one nursery nurse responsible for one baby or could it be whoever is available when necessary?
- Just thinking about the babies aged <6months, what happens about formula feeding in your nursery do
 you make it up in the nursery or do parents bring it to the nursery already made up? Or something else?
- Do the parents have a choice as to whether your nursery makes the formula up for their baby or whether they bring reconstituted formula in ready to feed?

Do you have a standard policy in your nursery re such issues?

• In <u>your nursery</u>, are there any codes of practice or official standard procedures that you have to adhere to when:

a) preparing powdered formula milk in the nurseryb) storing reconstituted *(made up)* formula in the nurseryc) sterilising bottles and utensils?

• If there are codes of practice etc, are they specific to your nursery or nationwide standards? **PROBE** *Find out what they are and details + what they think about them.*

3a. SELF-REPORTED PRACTICES & ATTITUDES: PREPARATION & STORAGE (~25mins)

This section intends to determine reported accounts of how powdered formula milk is prepared and stored in day nurseries. Information detailing who is responsible for making feeds, where and when feeds are made up, the length of time powdered formula is made up before feeding and general organisation of preparation and storage will be determined.

Discuss different scenarios (re Showcard 1 section 2):

Only thinking about making up feeds from powdered formula milk in the nursery:

• Do you provide all of the **bottles and teats** etc for feeding babies in your nursery? Or do parents provide such items?

PROBE: investigate opinions / issues faced / preference re both options (talk about cleaning and sterilising in the next section)

- Do you provide the powdered formula for all feeds? (**PROBE**; are parents asked to bring in tins of formula that they use)
 - Once tins of powdered formula are opened in the nursery is the length of time they are opened monitored at all? (PROBE e.g. date of opening written on the lid of the formula tin)
 - Does your nursery have any policy re the length of time opened tins of formula are kept? (If YES PROBE for details)
 - In your nursery, how long can the tins of powdered formula be open for? Are they ever thrown away? After what period of time?
- Who is responsible for making the feeds up in your nursery?
 - Is it the same person every day have they had any special / extra training to do so?
 - Or is it whoever is available at the time? (confirm the respondents in the group do make up feeds)
- Where are the feeds made up? (Designated nursery kitchen?)

Approximate size of kitchen? and available work surface space? Is it big enough?

Is the kitchen <u>only</u> ever used for formula preparation? If not, what else is kitchen used for? (**PROBE**: or food preparation for other children or staff – ever include raw chicken/meat or eggs, washing up etc)

What is in the kitchen? (PROBE - sink? Fridge? Freezer? microwave? Kettle? Cooker? Hob?)

1 UWIC / FSA Powdered Infant Formula Focus Group Research: Day Nursery Nurses

UWIC / FSA Powdered Infant Formula Focus Group Research: Day Nursery Nurses

• Fridge: Is there a fridge in the kitchen?

- Where abouts in the fridge are the bottles of made up formula stored?
- Is the temperature of the fridge monitored?
- How is the temperature measured? (determine type of thermometer) Is ever checked to see if its working properly?
- Is the temperature ever written down and recorded?
- Do you think recording such information is necessary?
- (IF TEMP NOT RECORDED...) Would it be possible (e.g. every day)? Foresee any problems if you were asked to do this is in your nursery?
- Do you know the temperature of the fridge in your nursery?
- Do you know what temperature it should be?
- Is the fridge only used for storing formulas (PROBE; or e.g. other foods for older children / staff lunches / coffee milk etc)? If YES do you think this is ok?
- How often is the fridge opened and closed throughout the day? (all the time, once or twice etc)
- Is the fridge ever cleaned? (If YES) How is it cleaned? How often? Whose responsibility is it? What determines when it is cleaned?
- When are the feeds made up in your nursery? (PROBE separately or all at once; if all at once, what time
 of the day? in the morning or make up immediately before required feeding?)
- How many bottles of formula are usually made up at one time?

We would like to talk through the **process** of how bottles of powdered formula milk are made up in your nursery *open question, and then probe the following*:

- Do you ever clean the work surface before you start making the formula up?
 - If YES exactly how surface is cleaned use what cleaning agents? Use of a cloth? (if use of cloth ask if it's a new cloth or previously used).
 - Ask if the described practice is done every single time. Ever times when this is not done? Why
 - If NO why not? What stops them? How important do they think it is?
 - How can they tell when a work surface is 'clean'.
 - Is the cleanliness of the surface ever tested?
- Do you ever wash and dry your hands before making the formula up?
 - Do you think it's important to do this before preparing a feed? Why? Use show cards to determine reported practice (SHOWCARDS 2-5),
 - Is this how you wash your hands before preparing a feed sometimes always?
 Which of the descriptions you do think should be done –achievable all the time?

For the next bit go round the table to ask each participant / for each nursery

- Do you make up all feeds for babies aged <6months with water boiled in a kettle? (why?)
 - Is all of the water used always fresh from the tap? (why?)
 - After the water has boiled, what happens? (leave in the kettle or poured straight into the bottles?)
 - How long is it before you mix the boiled water with the powder?
 - How is this time before use judged? Is it ever timed?
 - Is the boiled water always poured into bottle first (i.e. before addition of powder?)
- Are all of the utensils (e.g. measuring scoop / knife to level top) used to measure powdered formula into bottles <u>always</u> sterilised? If NO, why not? If YES: find out sterilisation method used.
- When placing the teat and screw cap onto the bottle which part of the teat do you handle (get participants to demonstrate using whole bottles)
- Once powder has been added to the boiled water is it still too hot to feed to a baby? Y/N
 - How is the reconstituted formula cooled for immediate feeding? How often does this happen?
 - If reconstituted formula is prepared for later use where is it stored?

if response = fridge - How is the reconstituted formula cooled before storage in the fridge? (provide max & min times).

If placed in the fridge how long is it likely to be stored in the fridge for later feeding? (max & min times) How often does this happen?

if response = room temperature / on work surface etc - How long for? (provide max and min times)

- Labelling: How do you know which bottle / reconstituted feeds are for which baby? (PROBE find out
 what labelling system is used exactly what is written on the label every time a bottle is made up. Is it a
 new label for every new made up bottle???)
- Do you have any **concerns** about making powdered formula feeds up in the nursery? If so what? What about concerns about making feeds up for use throughout the day? If so what?

UWIC / FSA Powdered Infant Formula Focus Group Research: Day Nursery Nurses

Only thinking about when parents bring made-up powdered formula milk into the nursery:

(determine responses for each nursery)

• Do parents ever bring formula milk to your nursery that they have made up at home for use during the rest of the day?

IF NO. GO TO SECTION 3B. IF YES. CONTINUE

- How often does this happen (PROBE on a daily basis? determine relative frequency...)
- If made up formula is brought to the nursery, how are the bottles usually brought to the nursery? (PROBE e.g. in a carrier bag, rucksack, handbag, in cool bag, therma bag, other?)
- When the feeds arrive at the nursery are they usually very warm (having recently been made up)? or cold (already been refrigerated)?, or just room temperature? Varies??
- How are the made up feeds stored in the nursery before use? (probably responses will be in the fridge)
- Are all bottles given to the nursery placed in the fridge immediately? (probably response will be yes)
 - What about feeds that are still very warm?
 - Are there ever circumstances when you might be really busy with lots of children and babies arriving at once and bottles might not reach the fridge immediately?
 - What would you estimate is the maximum length of time a prepared feed might be left out of the fridge for?
- · How many bottles are usually brought in and stored in the nursery each day?
- · What do you think about parents making powdered formula feeds up for use throughout the day in the nursery? Any concerns?

(FOR ALL PARTICIPANTS)

- · Do you ever take made up powdered formula milk outside of the nursery e.g. if taking the baby for a walk?
 - Determine how the made up feed is stored and for approximately what length of time.
- Do you ever have to heat made-up feeds up before feeding? (i.e. if been in the fridge)
 - How do you do this? How long does it take to warm a bottle to the right temperature if its been in the fridge?
- Do babies sometimes prefer / have feeds that are at room temperature?
 - Do parents ever request this?
 - Are these feeds left out on the surface to get to the right temperature? For how long? 100

4. POWDERED FORMULA MILK (~15mins)

The aim of this section is to determine attitudes of day nursery nurses towards general and specific microbiological risks associated with stages of preparation, use and storage of powdered formula milk.

- Do you have any concerns about feeding babies aged <6months with powdered formula milk in your nursery? WHAT CONCERNS? WHY etc. (concerns may be nutrition orientated - need to probe re concerns re safety and hygiene)
- Do you think that powdered formula milk is a sterile product? (PROBE WHY to responses) (if nonsterile product find out WHY they think so & implications of it being not sterile)
- · What do you consider the most important actions are to ensure that made up powdered formula milk is safe to feed? (open question)

Obtain an understanding of microbiological hazards associated with feeding babies aged <6months with powdered formula milk.

- · Do you think there are there microbiological hazards associated with feeding babies aged <6months with powdered formula milk? Give examples of such hazards.
- Do you think it is safe to make up powdered formula milk in advance of use? PROBE extensively why to yes or no responses
 - How long in advance do you consider it to be safe?
 - If formula is prepared in advance do you think there any storage requirements necessary? If so what?
- Have you ever heard of Enterobacter sakazakii (SHOWCARD 8)
 - what do they know about it? Where from?
- · Are you aware of any other bacterial hazards associated with powdered formula milk? what do they know about it? Where from? What about Salmonella?

Determine understanding of risks of microbial cross contamination from unclean hands or unclean surfaces / utensils during preparation of powdered formula milk.

• Are you aware of cross contamination issues during preparation of a powdered formula feed?

If YES: give examples. (if not mentioned, PROBE unwashed hands and unclean surfaces / utensils)

If NO: show SHOWCARD 9: cross contamination is transferring bacteria from one surface to another (then PROBE unwashed / unclean hands and unclean surfaces / utensils)

· What difficulties to you think parents have when feeding babies away from the home (obtain separate responses for the following examples PROBE e.g. shopping trip / holiday)?

If a baby is fed away from the home do you think it is better to make the feed up at home before leaving or make up on the spot when required? PROBE Why?

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5. TRAINING / INFORMATION SOURCES (~5mins)

This section aims to establish whether nursery nurses working in day nurseries are educated specifically about the microbiological risks associated with preparation and storage of powdered infant formula, as well as cleaning and sterilisation of bottles used for feeding with powdered infant formula. Ascertain source of education.

 Have you ever been formally educated about the microbiological risks of preparation and storage of powdered formula milk?

Cleaning and disinfection of bottles and components? Expand on when, where, taught what – theory? practice? Formal training? On the job training? Information from colleagues?

- What did they teach you about preparation and feeding with formula in college?
- Do you ever receive / attend training updates structured / unstructured? Frequency etc.
- · Has anyone ever been on a hygiene course?
- Do you ever formally or informally talk to parents about safe methods of preparation, use or storage of
 powdered formula milk or cleaning and sterilisation methods? Do they ever ask your advice?
- Do you ever tell parents about microbiological risks associated with feeding powdered formula milk?
- Do you think it is part of your role as a nursery nurse to tell parents about safe preparation and feeding methods?

5. INFORMATION SOURCES (~15mins)

- Are you given any advice / information about using powdered formula milk in your nursery?
 - <u>IF YES</u>, where from? (any official sources?)
 - Is information and advice updated?
 - Frequency of updates?
 - IF NO, would you like information? Why?
 - Do you feel that information SHOULD BE available to you or other people like you working in nurseries?
 - Do you think the information is NEEDED?

Trust of sources of bottle feeding information (SHOWCARD 10)

- Which sources would you most trust as providers of credible information for yourselves and people like you WORKING IN DAY NURSERIES with young babies? Least trust? WHY?
- What sources do you think <u>should</u> provide bottle feeding information to nursery nurses like yourselves? Why?
- Have you ever contacted / asked any of these sources for bottle feeding advice in the past? Which? Why?
- Which if any would you contact in future? Why?
- What do you think about using the INTERNET as a source for formula feeding information?
- · Have you ever searched for any information about formula feeding on the internet before?

IF YES: What information did you look for? What made you think about looking for it? Did you find anything of use? What? *(if possible determine sources)*

IF NO: Is it something you have ever thought of doing in the past? Might think about doing in the future?

- Are you aware of any changes to recommendations re preparation / storage of powdered formula milk in recent years?
 - IF YES: Do you know why such changes have made?

Are they achievable in your nursery?

Good or bad thing? why?

Have these changes in the recommendations caused any changes in practices in <u>your</u> nursery? What? *IF NO* – see next question

UWIC / FSA Powdered Infant Formula Focus Group Research: Day Nursery Nurses

SHOWCARD 11 - GIVE ALL PARTICIPANTS THE FSA GUIDELINES - get them to have a look

• Anyone ever seen these recommendations before? When? Where from etc?

Go through the following key points and ascertain whether nursery nurses agree with components of the recommendations – are they achievable in the nursery or not and why.

- KEY POINTS:
 - a. It is best to make up formula 'fresh for each feed' / make one feed at a time Is this possible in your nursery? Why is it necessary? What do you think about it?
 - b. Use boiled water to cool to no less than 70°C Is this possible in your nursery? Why is it necessary? What do you think about it?
 - c. Discard any feed that has not been used within 2 hours. Is this possible in your nursery? Why is it necessary? What do you think about it?
- How achievable do you consider these recommendations to be in your nursery?
- Any other comments about the recommendations?
- Have you ever seen any formula guidelines such as shown on SHOWCARD 12 (show at the same time as WHO booklets) from the World Health Organisation? When? Where from?
- Would you like to have this information available in your nursery?

FSA RESEARCH: POWDERED FORMULA MILK Main Study Focus Group Discussion Guide: Parents

1. INTRODUCTIONS (~5mins)

- Moderator to introduce self, explain the process of market research to respondents and the format of the discussion, reiterate the need for honesty to help with the research and reassure confidentiality.
- Explain topic of discussion is parental experience of feeding babies of 0-6 months and in particular what they know and how they use **powdered formula milk**.
- Introductions: brief background details of respondents first name, name and age of baby, family
 composition –first/subsequent children, length of time using powdered formula milk.

2. WARM UP (~<5 mins)

Powdered formula milk word association exercise -

- What comes in to your mind when you think of powdered formula milk?
- What feelings and emotions come to mind?

3a. SRP & ATTITUDES: PREPARATION & STORAGE (<25mins)

This section intends to determine self reported practices (SRP) and accounts of how powdered formula milk is prepared and stored inside and outside of the home. Information detailing who is responsible for making feeds, where and when feeds are made up, the length of time powdered formula is made up before feeding and general organisation of preparation and storage will be determined.

- Usually how many powdered formula feeds (i.e. made up bottles) does your baby have within 24 hours? How many in the day? How many in the night? (go round the table to ask each participant)
- In your household who is responsible for: preparing the formula? (confirm they prep formula & bottles)
 cleaning and sterilising bottles?
- Where are the feeds made up? (presumably in the kitchen? aim is to determine that the same work surfaces where formula is made up is also used for preparation of other foods such as raw meat and chicken etc)
- Is formula made up in the same area / same work surface where you or anyone else prepares foods for yourself/family?

We'll talk about how you make the feeds up in a few minutes, but first of all can you tell me: (go round the table to ask each participant)

- When you make formula up (*i.e. add the powder & the water together*), is it for individual feeds or for the whole <u>day</u>? What about for <u>night</u> feeds?
- How many bottles are made up at a time?

3a. SELF-REPORTED PRACTICES & ATTITUDES: PREPARATION & STORAGE (~25mins)

This section intends to determine reported accounts of how powdered formula milk is prepared and stored in day nurseries. Information detailing who is responsible for making feeds, where and when feeds are made up, the length of time powdered formula is made up before feeding and general organisation of preparation and storage will be determined.

Discuss different scenarios (re Showcard 1 section 2):

Only thinking about making up feeds from powdered formula milk in the nursery:

• Do you provide all of the **bottles and teats** etc for feeding babies in your nursery? Or do parents provide such items?

PROBE: investigate opinions / issues faced / preference re both options (talk about cleaning and sterilising in the next section)

- Do you provide the powdered formula for all feeds? (PROBE; are parents asked to bring in tins of formula that they use)
 - Once tins of powdered formula are opened in the nursery is the length of time they are opened monitored at all? (PROBE e.g. date of opening written on the lid of the formula tin)
 - Does your nursery have any policy re the length of time opened tins of formula are kept? (If YES PROBE for details)
 - In your nursery, how long can the tins of powdered formula be open for? Are they ever thrown away? After what period of time?
- Who is responsible for making the feeds up in your nursery?
 - Is it the same person every day have they had any special / extra training to do so?
 - Or is it whoever is available at the time? (confirm the respondents in the group do make up feeds)
- Where are the feeds made up? (Designated nursery kitchen?)

Approximate size of kitchen? and available work surface space? Is it big enough?

Is the kitchen <u>only</u> ever used for formula preparation? If not, what else is kitchen used for? (**PROBE**: or food preparation for other children or staff – ever include raw chicken/meat or eggs, washing up etc)

What is in the kitchen? (PROBE - sink? Fridge? Freezer? microwave? Kettle? Cooker? Hob?)

UWIC / FSA Powdered Infant Formula Focus Group Research: Day Nursery Nurses

UWIC / FSA Powdered Infant Formula Focus Group Research - Main Study Parents

- Fridge: Is there a fridge in the kitchen?
 - Where abouts in the fridge are the bottles of made up formula stored?
 - Is the temperature of the fridge monitored?
 - How is the temperature measured? (determine type of thermometer) Is ever checked to see if its working properly?
 - Is the temperature ever written down and recorded?
 - Do you think recording such information is necessary?
 - (IF TEMP NOT RECORDED...) Would it be possible (e.g. every day)? Foresee any problems if you were asked to do this is in your nursery?
 - Do you know the temperature of the fridge in your nursery?
 - Do you know what temperature it should be?
 - Is the fridge only used for storing formulas (PROBE; or e.g. other foods for older children / staff lunches / coffee milk etc)? If YES do you think this is ok?
 - How often is the fridge opened and closed throughout the day? (all the time, once or twice etc)
 - Is the fridge ever cleaned? (If YES) How is it cleaned? How often? Whose responsibility is it? What determines when it is cleaned?
- When are the feeds made up in your nursery? (PROBE separately or all at once; if all at once, what time
 of the day? in the morning or make up immediately before required feeding?)
- How many bottles of formula are usually made up at one time?

We would like to talk through the **process** of how bottles of powdered formula milk are made up in your nursery *open question, and then probe the following*:

• Do you ever clean the work surface before you start making the formula up?

- If YES exactly how surface is cleaned use what cleaning agents? Use of a cloth? (if use of cloth ask if it's a new cloth or previously used).
- Ask if the described practice is done every single time. Ever times when this is not done? Why
- If NO why not? What stops them? How important do they think it is?
- How can they tell when a work surface is 'clean'.
- Is the cleanliness of the surface ever tested?
- Do you ever wash and dry your hands before making the formula up?
 - Do you think it's important to do this before preparing a feed? Why? Use show cards to determine reported practice (SHOWCARDS 2-5),
 - Is this how you wash your hands before preparing a feed sometimes always?
 Which of the descriptions you do think should be done –achievable all the time?

4. POWDERED FORMULA MILK (~15mins)

The aim of this section is to determine attitudes of parents towards general and specific microbiological hazards associated with stages of preparation, use and storage of powdered formula milk.

 Do you have any concerns about feeding babies aged <6months with powdered formula milk? What, why etc. (concerns may be nutrition orientated – need to probe re concerns re safety and hygiene)

Determine awareness amongst parents that powdered formula milk is a non-sterile product.

- Do you think that powdered formula milk is a sterile product? (PROBE WHY to responses) (if nonsterile product find out WHY they think so & implications of it being not sterile)
- What do you consider the most important actions are to ensure that reconstituted powdered formula
 milk is safe to feed? (open question)

Determine understanding of risks of microbial cross contamination from unclean hands or unclean surfaces / utensils during preparation of powdered formula milk.

Are you aware of cross contamination issues during preparation of a powdered formula feed?

If YES: give examples. (if not mentioned, PROBE unwashed hands and unclean surfaces / utensils)

If NO: show SHOWCARD 8: cross contamination is transferring bacteria from one surface to another (then **PROBE** unwashed / unclean hands and unclean surfaces / utensils)

Obtain an understanding of microbiological hazards associated with feeding babies aged <6months with powdered formula milk.

- Do you think there are there microbiological hazards associated with feeding babies aged <6months with powdered formula milk? Give examples of such hazards.
- Have you ever heard of *Enterobacter sakazakii* (SHOWCARD 7)

 what do they know about it? Where from?
- Are you aware of any other bacterial hazards associated with powdered formula milk? what do they
 know about it? Where from?

3

UWIC / FSA Powdered Infant Formula Focus Group Research - Main Study Parents

UWIC / FSA Powdered Infant Formula Focus Group Research: Day Nursery Nurses

5. INFORMATION SOURCES + EVALUATION (~25mins)

- Where does your knowledge about feeding your baby come from where do you get information and
 advice about feeding your baby? (open question re all sources, then specifically probe SHOWCARDS 9-13 – do all showcards at once (place on the table)
 - Showcard 9: Health care professionals = GPs, midwives (which ones community/hospital?), health visitors?

Showcard 10: Books, magazines, booklets, leaflets, internet, posters - what?

- · How likely are you to access information re bottle feeding from the internet?
- Ever use internet forums? What do you think of the info from the forums? Trust it? Accurate?

Showcard 11: Family and friends? who? Showcard 12: Organisations, clubs, groups – which? Showcard 13: On pack information, product labels / leaflets which?

• What is your preferred source of information? (could be combination?)

Information sources & what you've been told about feeding at different stages of pregnancy / after birth of baby (SHOWCARDS 14-16). Use each showcard to focus discussion re each stage.

• Before your baby was born

- Did you want / feel that you needed information about feeding with powdered infant formula before your baby was born?
- Who provided you with the information?
- What did they tell you?
- Did you feel you'd been given enough information?

• In hospital

- At this stage what information did you want / feel that you needed about feeding with formula?
- Who provided you with the information?
- What did they tell you?
- Did you feel you'd been given enough information?
- Once you and your baby have left hospital & are at home
 - At this stage what information did you want / feel that you needed about feeding with formula?
 - Who provided you with the information?
 - What did they tell you?
 - Did you feel you'd been given enough information?
- Overall, do you feel that you have been given **enough information** and advice about feeding your baby with powdered formula? Would you like to have been given more advice? from whom? when?

- Has a health professional (e.g. health visitor, midwife or nurse) ever **shown** you how to prepare formula safely? or how to sterilise bottles etc?
 - If YES PROBE WHO?

WHERE (in hospital, clinic in home)? WHEN (at what stage of babyhood?) GROUP? ONE TO ONE?

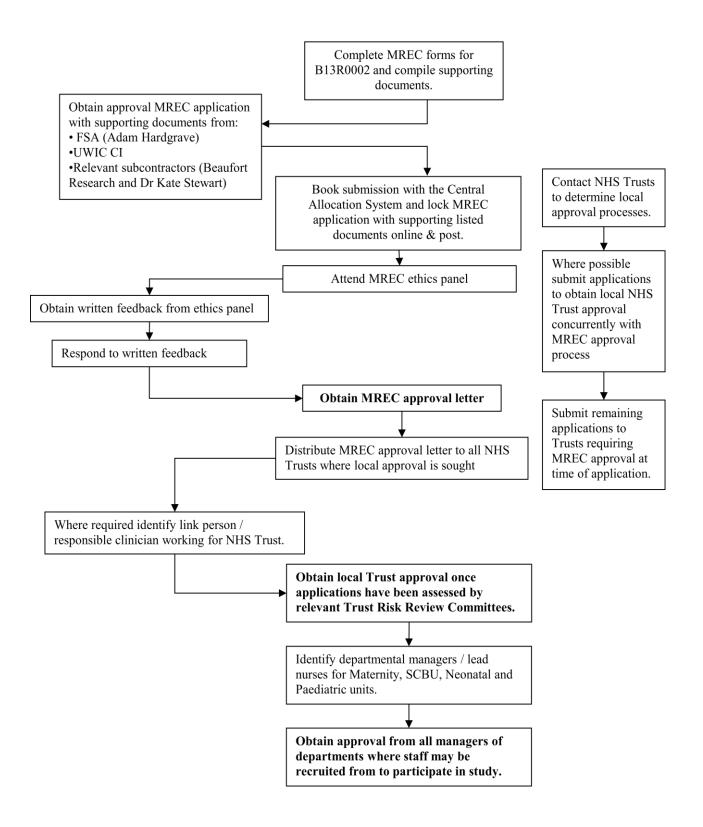
If NO - would you like someone to have demonstrated 'best practice' to you? Who and why? What stage?

- What do you think new Mums should be told about safe preparation of formula and sterilising? When should they be told this? By whom?
- Have you ever seen any formula guidelines such as from the UK Food Standards Agency, NHS or World Health Organisation?
- Would you like to have been given this information? At what stage?

UWIC / FSA Powdered Infant Formula Focus Group Research - Main Study Parents

Appendix 2.2.Documentation required for implementation of focus groups: NHS Professionals (Health Visitors, Hospital Nurses, Hospital and Community Midwives).

Flow chart indicating stages of obtaining NHS Ethical approval from MREC and local NHS Trust approval for FSA Study B13R0002





Aims and objectives relevant to the component of study involving NHS Health Visitors and Hospital Nurses. Health visitors and hospital nurses are leay health professionals that provide support to parents about appropriate feeding practices for new infants. Through a series of focus group discussions with such healthcare professionals this component of the study aims to:

- Understand beliefs, attitudes, practices and information provision relating to infant feeding with powdered milli formula.
- Determine information content and availability for health professionals and also for parents.
- Support and inform the development of a postal questionnaires which will aim to identify issues that health visitors and hospital nurses feel are important for safe preparation of powdered formula millt and effective communication.

METHODS FOR DATA COLLECTION

- Target population :

NHS Health Visitors and NHS Hospital Nurses from Special Care Baby Units (SCEU), matemity departments and paediatric departments.

- Methodology for Stage 1 of the study:

Qualitative focus group discussions with health visitors and hospital nurses will be conducted to explore attitudes and important procedures related to preparation and storage of powdered formula mills as well as identify and explore formula feeding information sources. Qualitative findings will be used to provide a rationale for the design and development of postal questionnaires.

A focus group is a group discussion on a given topic organised for research purposes. It is guided, monitored and recorded by a trained researcher. In this study focus groups will explore the roles and responsibilities of health visitors and nursery nurses as important information providers of information and advice at different 'baby stages'. Similarly, groups will be used to obtain an understanding of the preparation and storage practices hospital nurses implement while involved in the feeding process of babies while in hospital. In addition reasons why such practices are implemented will be discussed as well as attitudes towards current behaviours and recommended procedures.

- Methodology for Stage 2of the study:

Postal questionnaires administered to health visitors and hospital nurses across the UK will explore attitudes towards specifics procedures related to preparation and storage of powdered formula mill: determined in stage 1 of the study.

A questionnaire is a data-gathering device that elicits information from respondents' answers or reactions to printed (prearranged) questions presented in a specific order, the postal questionnaire is a typical form of self-administered study. This standard method for data collection through the post involves the transmission of a questionnaire to a respondent, accompanied by a letter of explanation and a return envelope; the respondent completes the questionnaire and returns it to the researcher through the mail.

In this study postal questionnaires will be sent to health visitors and hospital nurses. Use of this research method will facilitate obtaining information from such care givers all across the UK at a relatively low cost.

- Sample:

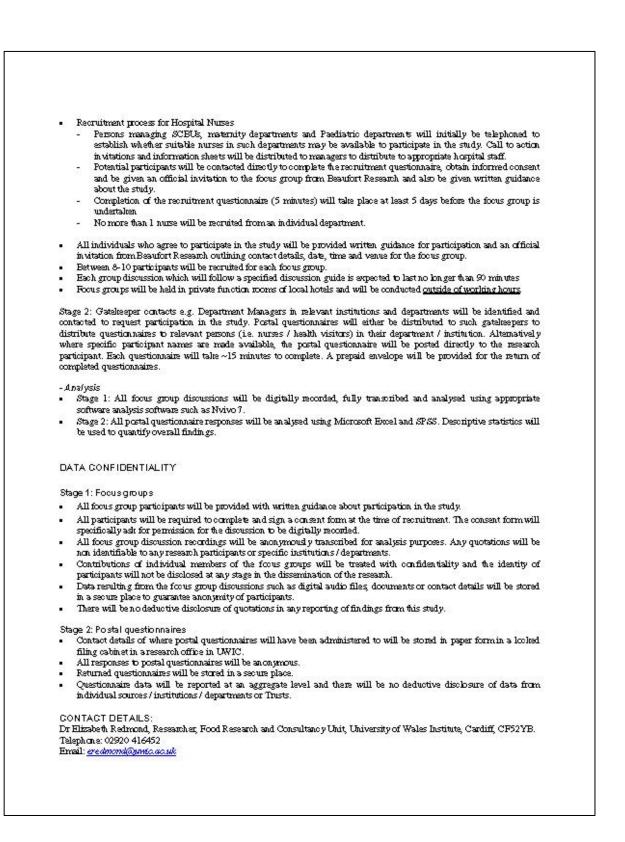
A non-probability purposive sampling strategy will ensure the samples include an appropriate geographical spread according to the research population.

- Stage 1 Focus groups: 3 health visitor focus groups (each involving 8-10 participants) and 3 hospital nurse focus groups (each involving 8-10 participants) will be conducted private hotel function rooms in five geographical locations of the UK.
- Stage 2 Postal questionnaires: Administration of postal questionnaires to Health Visitors across the UK and questionnaires to Hospital Nurses in SCBUs, maternity departments and paediatric departments across the UK.

- Research participants

Stage 1: Focus group participants will be recruited by a trained field researcher from Beaufort Research Ltd., (Cardiff). All recruitment and fieldwork will be in accordance with BS7911 which is a widely recognised fieldwork standard IQCS (Interviewer Quality Control Scheme) which sets out best practice in this area.

- Recruitment process for Health Visitors
 - Clinics and GP surgeries will initially be telephoned to establish whether suitable persons may be available to
 participate in the study. Call to action invitations and information sheets will be distributed to managers to
 distribute to appropriate hospital staff.
 - Potential participants will be contacted directly to complete the recruitment questionnaire, obtain informed consent
 and be given an official invitation to the focus group from Beaufort Research and also be given written guidance
 about the study.
 - Completion of the recruitment questionnaire (Sminutes) will take place at least 5 days before the focus group is undertaken.
 - No more than 2 health visitors will be recruited from an individual clinic / surgery.



MREC Approval letter: Main Study

0	7/MRE09/73		Page 1
	Multi-Centre-Research Ethics Committee for Wales	MREC for WALES	Pwyllgor Ymchwil Ethegau Aml-Ganolfan yng Nghymru
	Chairman/Cardeirydd : Dr Gordon Taylor	WALES	Administrator/Gweinyddes: Dr. Corinne Scott
		se, Fourth Floor, 17 Churchill Way, Ca rchill, 17 Ffordd Churchill, Caerdydd, (
	WHTN 0 1809	Telephone enquiries to: 02920 376 829	Fax No. 02920 376 824
		MREC website: http://www.nres.npsa.nhs.uk e-moil: mrye:2/bse.wales.nhs.uk	
	Universty of Wales Institut Western Avenue,	nd Consultancy Unit, UWIC	
	Cardiff, CF52YB		19 December 2007
	Dear Professor Griffith		
	Full title of study:	An Investigation into the Attitue Consumers and Caregivers in t Storage and Feeding of Powder and Outside the Home	he Preparation, Handling,
	REC reference number:	07/MRE09/73	
	Thank you for your letter of further information on the	of 14 December 2007, responding to the above research.	ne Committee's request for
	The further information wa	as considered by the Chairman.	
	Confirmation of ethical of	opinion	
	On behalf of the Committe above research on the ba- documentation.	ee, I am pleased to confirm a favourab sis described in the application form, p	le ethical opinion for the protocol and supporting
	Ethical review of researc	ch sites	
	There is no requirement for	gnated this study as exempt from site- or [other] Local Research Ethics Comr o be carried out at each site.	
	Conditions of approval		
	The favourable opinion is attached document. You	given provided that you comply with the are advised to study the conditions ca	he conditions set out in the refully.

07/MRE09/73

Page 2

Approved documents

The final list of documents reviewed and approved by the Committee is as follows:

Document	Version	Date	
Application		16 November 2007	
Investigator CV		16 November 2007	
Protocol	1	16 November 2007	
Covering Letter	signed Dr Elizabeth Redmond	16 November 2007	
Summary/Synopsis	(1) Flow chart to illustrate key stages in stage 1 of this study : focus groups (2) Flow chart to illustrate key stages in stage 2 of this study : postal guestionnaire; both version 1	16 November 200	
Letter from Sponsor	signed Professor Adrain Peters, Director of Research, UWIC; dated October 2007.		
Compensation Arrangements	(1) UM Association certificate of insurance : University of Wales, Institute Cardiff, expires 31 July 2008 (2) Hiscox endorsement; effective date 18 August 2005		
Interview Schedules/Topic Guides	Focus group discussuln guide : health professionals, version 1	16 November 2007	
Letter of invitation to participant	Focus Group Invitation, version	01 October 2007	
Participant Information Sheet: Front page of postal guestionnaire - Health visitors	1	05 November 2007	
Participant Information Sheet: Front page of postal guestionnaire - Hospital nursery nurses	1	08 November 2007	
Powdered formula milk study @ focus groups guidance for health care professionals	1	26 October 2007	
Focus groups : recruitment questionnaire and consent form for Health Visitors	1, BQ2734	01 October 2007	
Focus groups : recruitment questionnaire and consent form for Hospital Nursery Nurses	1, BQ2734	01 October 2007	
Letter from funder	Food Standards Agency		
References document	1	16 November 2007	
Postal questionnaire gatekeeper letter	1	16 November 2007	
Postal questionnaire respondent letter	1	06 November 2007	
Letter signed by Dr Elizabeth Redmond		14 December 2007	

R&D approval

All researchers and research collaborators who will be participating in the research at NHS sites should apply for R&D approval from the relevant care organisation, if they have not yet done so. R&D approval is required, whether or not the study is exempt from SSA. You should advise researchers and local collaborators accordingly.

Guidance on applying for R&D approval is available from http://www.rdforum.nhs.uk/rdform.htm. 07/MRE09/73

Statement of compliance

The Committee is constituted in accordance with the Governance Arrangements for Research Ethics Committees (July 2001) and complies fully with the Standard Operating Procedures for Research Ethics Committees in the UK.

After ethical review

Now that you have completed the application process please visit the National Research Ethics Website > After Review

Here you will find links to the following

- a) Providing feedback. You are invited to give your view of the service that you have received from the National Research Ethics Service on the application procedure. If you wish to make your views known please use the feedback form available on the website.
- b) Progress Reports. Please refer to the attached Standard conditions of approval by Research Ethics Committees.
- c) Safety Reports. Please refer to the attached Standard conditions of approval by Research Ethics Committees.
- Amendments. Please refer to the attached Standard conditions of approval by Research Ethics Committees.
- e) End of Study/Project. Please refer to the attached Standard conditions of approval by Research Ethics Committees.

We would also like to inform you that we consult regularly with stakeholders to improve our service. If you would like to join our Reference Group please email referencegroup@nationalres.org.uk.

07/MRE09/73

Please quote this number on all correspondence

With the Committee's best wishes for the success of this project

Yours sincerely

16

Dr Gordon Taylor Chair

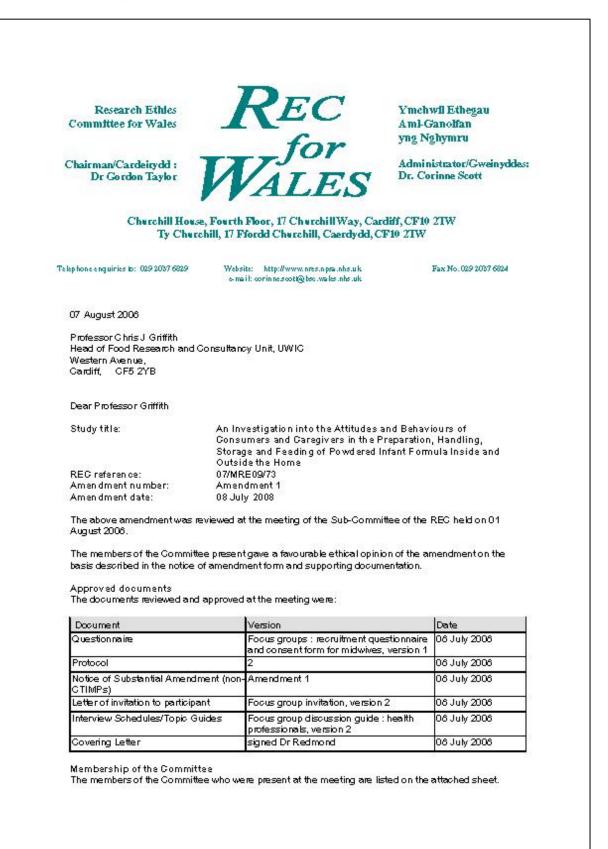
Email: mrec@bsc.wales.nhs.uk

Enclosures:

Standard approval conditions

Copy to:

R&D office



	d research collaborators in the NHS should notify the R&D office for the relevant tion of this amendment and check whether it affects R&D approval of the research.
	onstituted in accordance with the Governance Arrangements for Research Ethics 001) and complies fully with the Standard Operating Procedures for Research
07/MRE09/73:	Please quote this number on all correspondence
Yours since rely	
Dr. Gordon Taylor Chairman E-mail: corinne.sco	tt@bsc.wales.nhs.uk

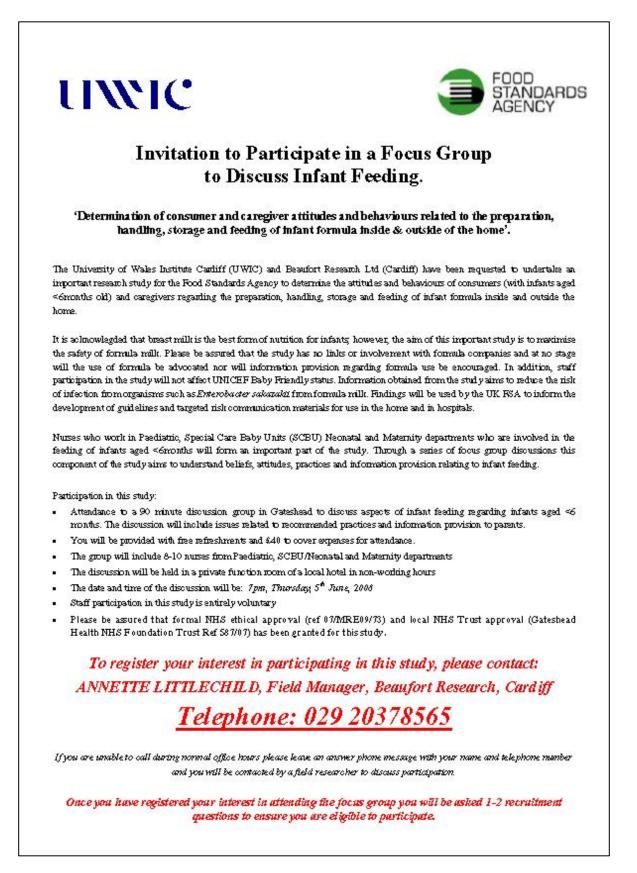
REC for Wales

Attendance at Sub-Committee of the REC meeting on 01 August 2008

Name	Profession	Capacity	
Dr Maurice Buchalter	Alternate Vice Chairman / Hospital Consultant (Cardiologist)	Expert	
Dr Gordon Taylor	Chairman / Statistician	Expert	
Dr Pete Wall	Vice Chairman / Clinical Physiologist	Expert	

	25 th April 2008
Dear	
University of Wal	es Institute Cardiff / UK Food Standards Agency Research Study 2007-2009: An Investigation
	s and Behaviours of Consumers and Caregivers in the Preparation, Handling, Storage and FormulaInside and Outside the Home.
Approved by MRE	C (reference 01.MRE09/13)
Approved by Gates	head Health NHS Foundation Trust (reference 587/07)
Women and Child regarding the resea (UWIC) has recen	nt telephone conversation I am writing to you in the capacity as the Assistant Division Manager for Services in The Queen Elizabeth Hospital in Gateshead to provide you with some information wh study that the Food Research and Consultancy Unit in The University of Wales Institute, Cardiff thy been commissioned to undertake. The study may involve staff from Matemity, SCBU/heonatal artments within your hospital.
Food Standards A during reconstitution sources of informs support to parents	that breast mills is the best form of nutrition for infants, however, this research, funded by the UK gency, aims to investigate attitudes and perceptions related to preparation behaviours important in and storage of formula mills inside and outside of the home. In addition, the study aims to identify tion about formula mills. Hospital staff are considered to be key health professionals that provide about appropriate feeding practices for new infants and therefore part of the study includes groups all around the UK to determine beliefs, attitudes, practices and information provision relating ith mills formula.
Health NHS Foun formula companie	en formally approved by MREC (reference 07/MRE09/73) and formally approved by Gateshead lation Trust (reference 587/07). Please be assured that the study has no links or involvement with s and at no stage will the use of formula be advocated nor will information provision regarding ouraged. In addition, staff participation in the study will not affect UNICEF Baby Friendly status.
SCBU/Neonatal ar participate in one f parents. This focus group will take pla staff. As we discu nursery nurses, s Queen Elizabeth number which pot researcher from Bs	s planned that 8-10 nursery nurses, healthcare assistants and paediattic nurses from Maternity, d Paediattic departments in hospitals in Gateshead and Newcastle will be recruited and voluntarily iccus group to discuss issues related to formula preparation and storage and information provision to s group is scheduled to take place on 5 th June, 2008. Recruitment of hospital nurses for the focus ce in two stages and your involvement is key to the success of the study by facilitating access to your ssad, I would be very grateful if you would distribute the enclosed information envelopes to and healthcare assistants in Maternity, SCBU/Neonatal and Paediatric departments in the Hospital. The envelopes include guidance about participation in the focus group and a telephone antial participants may call to register interest in the study. Secondly, before the focus group a field autort Research may telephone your department to speak to nurses involved with feeding infants to interested participants.
etter and research study. If you hav	information envelopes, I have enclosed a copy of the MREC approval letter, local Trust approval protocol for your information. I hope this will be sufficient information to facilitate progress of the e any queries or require further information, please do not hesitate to contact me via email cultor telephone: Cardiff (029) 20416452.
Yours Sincerely,	
Dr. Elizabeth Redr Ressarcher	rond

Call to Action – NHS healthcare professionals information sheet and invitation to participate in the study (page 1)



Call to Action – NHS healthcare professionals information sheet and invitation to participate in the study (page 2)

Explanation of Pro-	The Food Standards Agency, London
towards the use of i	l to participate in the research project to investigate the attitudes and perceptions of parents and caregivers Infant formula. The approach of the research is exploratory focus groups. A focus group is a small group of
Beaufort Research). advice / information	who meet together and discuss a chosen topic and answer some questions asked by a group leader (from You will be asked some questions about formula mill reconstitution and storage procedures and about what you provide to parents about feeding infants with such formula. In addition you will be asked your opinions sument advice about infant formula. Details of the date and location of the focus group are found on your
	group will last approximately 1-1 % hours. For analysis purposes the discussion will be digitally recorded and
Risks and Discomfo You will not be at pl	rts lysical or psychological risk and should experience no discomfort resulting from the research procedures.
Benefits As a tolien of than)	is for participating in the research you will receive £40 expenses and complimentary refreshments will be
available to you du Standards Agency a' methods of preparat	ing the time at the focus group. This research is expected to provide useful information to the UK Food bout how parents and caregivers prepare infant formula for babies aged 0-6months and what they think about ion and current information about recommended methods. It is hoped that information collected during the be used to inform the development of revised educational materials.
Alternative Proced If a person chooses r	ur es 10t to participate, an alternative procedure is not necessary.
Withdrawal Witho	ut Prejudice
Participation in this	study is voluntary; refusal to participate will involve no penalty. Each participant is free to withdraw consent icipation in this project at any time without prejudice from this institution.
Confidentiality	
unauthorised person:	hered from the study will remain confidential. Your identity as a participant will not be disclosed to any s; only the researchers at Beaufort Research will have access to the your contact details, which will be kept in a until the end of the study.
individual or specifi	from transcriptions may be used in reports and presentations but these quotes are never attributed to any one c organisation; all reporting is on an aggregate level. Any references to your identity that would compromise . be removed or disguised prior to the preparation of the research reports and publications. Digital audio files end of this study.
Ethical and Local T Formal NHS ethical 587/07) has been gra	approval (ref 07/MRE09/73) and local NHS Trust approval (Gateshead Health NHS Foundation Trust Ref
	you have any additional questions about participation in the focus group please contact:
Ал	nete Littlechild, Field Manager, Beaufort Research Ltd., 2 Museum Place, Cardiff CF103BG Telephone 02920 378565

April, 2008

For the attention of Health Visitors in Cardiff and the Vale NHS Trust

Research Study: An Investigation into the Attitudes and Behaviours of Consumers and Caregivers in the Preparation, Handling, Storage and Feeding of Powdered Infant Formula Inside and Outside the Home.

The University of Wales Institute Cardiff has been commissioned by the UK Food Standards Agency to undertake a 24 month research study concerning feeding infants with powdered infant formula. The study will involve parents, day nursery nurses, hospital nurses and health visitors from across the UK. Information will be obtained to identify and manage risks associated with preparation and storage of formula and identify when parents receive advice about such issues, from whom, type and content of information etc. The overall aim of the study is to maximise the safety of powdered infant formula preparation and storage.

This letter is to inform you that in April-May, 2008 one focus group is planned with Health Visitors from xxxxxxxxxx NHS Trust in Cardiff. A focus group is a small group of people (about 8-10) who meet together and discuss a chosen topic and answer some questions asked by a group leader (~90minutes). Please be assured that National Ethical Approval has been obtained for this study (MREC No. 07/MRE09/73) and Local NHS Approval has also been obtained from xxxxxxx Trust (Project ID: xxxxxxx). Furthermore, Health Visitor Managers [name(s)] within the area of xxxxxxxx have also been made aware of this study.

To participate in the focus group, a trained researcher from Beaufort Research will telephone Health Visitors (randomly selected) in your area to ask for interest in participating in the study. Participation in the discussion group is completely voluntary and interested persons who satisfy recruitment criteria will be provided with additional information about the study for their reference. The discussion group will be held out of normal working hours in a private function room of a local hotel and all participants will be given £40 expenses to cover time and transport costs.

All information collected during the course of study will remain strictly confidential at all times.

Yours Sincerely,

Dr Elizabeth Redmond Principal Investigator for the study. Senior Researcher, Food Research and Consultancy Unit, University of Wales Institute, Cardiff, CF149JJ eredmond@uwic.ac.uk

IF RESPONDENT WILLING TO ATTEND GROUP, HAND OUT INVITATION WITH RELEVANT DATE & TIME OF GROUP, THEN RECORD DETAILS BELOW RESPONDENT DETAILS Name:	Address:	Pestoode: Telephone Number: INTERVIEWER DECLARATION I declare that I have conducted this interview in accordance with your instructions. Signature:	Date:								2
BEAUFORT RECRUITMENT QUERED FORMULA RECRUITMENT QUERTONNAIRE HEALT H VISIORS 2 Museum Place, Cardifi, CF10 2 Museum Place, Cardifi, CF10	APPROACH PEOPLE AGED 13+	Hello, my name is of Beaufort Research. We are carrying out some research undertaken by U.W.I.C – the University of Wales Institute Candiff – on behalf of the Food Standards Agency into feeding babies under 6 months old and would like your opinions. Could you spare just a few minutes to answer some questions? REASURE IF NECESSARY: BEAUFORT RESEARCH IS AN INDEPENDENT CONSULTANCY & WE ARE NOT SELLING ANYTHING	Q.1 What ages of babies do you work with nowadays?	0 − 6 menths 1 → CONTINUE 6 − 12 menths 2 → CLOSE 12+ menths 3 → CLOSE	Q.2 Have you ever been to a focus group before?	Yes- within last 6 months → ASK Q.3	Yes- longer ago	No, never	Q.3 What was the subject of the focus group discussion? → IF RELATED TO INFANT FEEDING / FORMULA, THANK & CLOSE - ASK APPENDED QUESTION. OTHERS CONTINUE	IF SUCCESSFULLY SCREENED INVITE RESPONDENT TO FOCUS GROUP: We are holding a focus group to discuss different aspects of feeding babies with powdered infant formula under 6 months old and would like to invite you personally to attend. (READ OUT DATE) EXPLAN FOCUS GROUP • Informal, relaxed discussion • Reimbursement of expenses • Will last about hour and a haif	1

	Version I.	20 ⁴⁴ October, 2007	
		RMULA MILK STUDY: LTH CARE PROFESSIO	NALS
Ntle of Research:	Preparation, Handling and Storage of	of Powdered Infant Formula	
Research Team:	Beaufort Research Ltd., Cardiff		
	University of Wales Institute Cardia The Food Standards Agency, Londo		
	The FOOT Standards Agency, Lond.	M.	
Explanation of Pro	edures		
		NY 1000000000000000000000000000000000000	tudes and perceptions of parents and
			h is exploratory focus groups. A focus
	あってい かまし かち とうしき からし ちょうかん かんがく しょうかん アイ		opic and answer some questions asked powdered formula mill(reconstitution -
		그는 요즘 아직에 집에 있는 것은 것이 잘 하면서 지하는 것이 없다.	bout feeding infants with such formula.
이 동안의 상품이 이 관계에 통하는 것이 없는 것이 없다.		이번 그는 것은 것이 같은 것이 가지 않는 것이 없는 것이 없 않이 않은 것이 없는 것이 없 않이	owdered infant formula. Details of the
late and location of	the focus group are found on your inv	vitation. The focus group w	ill last approximately 1-1 % hours. For
analysis purposes the	discussion will be digitally recorded	and transcribed.	
Risks and Discomf	te.		
		l should experience no di	sconfort resulting from the research
procedures.		8	-
Benefits			
NAMES OF TAXABLE AND ADDRESS OF TAXABLE ADDRESS OF	for narticinating in the research so	ar secretive existent flive u	i complimentary refreshments will be
			ide useful information to the UK Food
	요구 이가 이 것은 것은 것 같아요. 이는 것 같아요? 이는 것 같아요. 그것 같아요? 것 같아요?	그는 이 사람이 있는 것은 것이 전해 집에서 가슴을 가지 못했다.	a for babies aged 0-6months and what
	이 사람이 잘 하는 것 같아. 김 사람이 가지 않는 것 것 같아. 가지는 것이 같아. 가지 않는 것이 같아.		l methods. It is hoped that information
collected during the	course of study will be used to inform	, the development of revised	l educational materials.
AlternativeP roced	ICES		
f a person chooses r	ot to participate, an alternative proces	lure is not necessary.	
Withdrawal Witho	it Prejudice		
Participation in this	study is voluntary; refusal to particip	pate will involve no penalty	9. Each participant is free to withdraw
consent and disconti	we participation in this project at any	time without prejudice from	n this institution.
Confidentiality			
	and from the study will remain conf:	idential. Your identity as a p	participant will not be disclosed to any
unauthorised person:	; only the researchers at Beaufort Ra	ssearch will have access to	the your contact details, which will be
kept in a locked filin	g cabinet until the end of the study.		
á non spyczys ou oteo s	now transcriptions way he wast in m	norte and presentations but i	hese quotes are never attributed to any
경기 영상 영향은 영향을 위한 이번 영향을 위한 것을 수 있다.		승규가 잘 잘 못 하는 것을 가지는 것이가 잘 가지지? 것이 같다.	references to your identity that would
			f the research reports and publications.
	ll be erased at the end of this study.		
1		19 2019: 64 19-046-074	10 12 44
	u have any additional questions abor		
Lisa Willi	ans, Senior Research Executive, Beau Telephon	utort Research Ltd., 2 Muse e 02920 20378565	um Place, Cardin CP103BG
	respicie	: 12920 20310303	
			FOOD
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-	CONSENT FO	RM	2
Title of the project: Prepa Formula	aration, Handling	and Storage of Powder	ed Infant
Name of Researcher: Lisa Wi	lliams, Senior Rese	arch Executive, Beaufort Res	earch Ltd.
			Please initial bo:
 I confirm that I have rece October, 2007 (version 1) for understand I have the opportu group takes place and may co to answer any questions. 	participation in a foo inity to consider the	information before the focus	
2. I understand that my par withdraw at any time without g		ry and that I am free to	
 I understand that all infor confidential and any contributi anonymity. 			h
4. Iagree to take part in the	e above study.		
Name of participant	Date	Signature	
Name of person taking consent	Date	Signature	
When completed, the 1 origina	al copy will be store	d in paper form at Beaufort F	lesearch for

	UWIC/FSA RESEAR CH: POWDERED FORMULA MILK
	Focus Group Discussion Guide: Health Professionals
1	INTR OD UCTI ONS
1	INTRODUCTIONS
	Moderator to introduce self, explain the process of market research to respondents and the format of the discussion, reiterate the need for honesty to help with the research and reassure anonymity and confidentiality.
	Explain topic of discussion is their role as a health care professional in advising parents about feeding young babies aged 0-6 months and in particular what they know about feeding babies with powdered formula millt and related matters.
1	Important to explain that the Food Standards Agency is not promoting bottle feeding, however it is lean to understand about aspects of preparation, feeding and storage of powdered formula millt and what information is provided to parents when bottle feeding and using powdered formula millt.
	Introductions: brief background details of respondents - first name, job title, length of time in job
2	
6	ROLES AND RESPONSIBILITIES
	d feedbar of hables used D-forcestas
Ex	<i>d feeding of babies aged 0-5months.</i> plain that we would like to understand the roles and responsibilities health professionals have in relation to advising rents about feeding their babiesparticularly with powdered formula mik.
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Ex	plain that we would like to understand the roles and responsibilities health professionals have in relation to advising rents about feeding their babiesparticularly with powdered formula mik. Ask the health professionals to explain their roles and responsibilities in this context: When and where do you have <u>first</u> and subsequent contact with parents? (HEALTH VISITORS ONLY) Frequency of visits? Approx length of visits? Do they hold clinics? Do you consider it is part of your role as a health professional to inform parents about safe preparation of powdered
Ex par	plain that we would like to understand the roles and responsibilities health professionals have in relation to advising rents about feeding their babiesparticularly with powdered formula mik. Ask the health professionals to explain their roles and responsibilities in this context: When and where do you have first and subsequent contact with parents? (HEALTH VISITORS ONLY) Frequency of visits? Approx length of visits? Do they hold clinics? Do you consider it is part of your role as a health professional to inform parents about safe preparation of powdered formula millt and storage of reconstituted formula mill? Which health care professionals do you think have the biggest influence on advising parents on feeding their babies –
Ex par • • 3.	plain that we would like to understand the roles and responsibilities health professionals have in relation to advising rents about feeding their babiesparticularly with powdered formula mik. Aslt the health professionals to explain their roles and responsibilities in this context: When and where do you have <u>first</u> and subsequent contact with parents? (HEALTH VISITORS ONLY) Frequency of visits? Approx length of visits? Do they hold clinics? Do you consider it is part of your role as a health professional to inform parents about safe preparation of powdered formula milk and storage of reconstituted formula milk? Which health care professionals do you think have the biggest influence on advising parents on feeding their babies – particularly re powdered infant formula in terms of preparation, storage and use?
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Ex par	plain that we would like to understand the roles and responsibilities health professionals have in relation to advising rents about feeding their babies, particularly with powdere d formula milk. Ask the health professionals to explain their roles and responsibilities in this context: When and where do you have first and subsequent contact with parents? (HEALTH VISITORS ONLY) Frequency of visits? Approximation of visits? Do they hold clinics? Do you consider it is part of your role as a health professional to inform parents about safe preparation of powdered formula mills and storage of reconstituted formula mill? Which health care professionals do you think have the biggest influence on advising parents on feeding their babies – particularly re powdered infant formula in terms of preparation, storage and use? POWDERED FORMULA MILK e atm of this section is to determine attitudes towards general & greatific microbial risks associated with stages of quaration, use & storage of powdered formula milk buside & cosside of the home. Do you have any concerns for parents feeding a baby <6months with powdered formula mill? If yes – probe what concerns? & why? Do you think that powdered formula mills is a sterile product? What do you consider the most important actions are to make sure that reconstituted powdered formula milk is safe to feed? Do you think there are there microbiological hazards associated with feeding babies aged <6months with powdered

Approved focus group Discussion Guide : Health Care Professionals

