Patient survey report 2013



Survey of women's experiences of maternity services 2013 James Paget University Hospitals NHS Foundation Trust

The national survey of women's experiences of maternity services 2013 was designed, developed and co-ordinated by the Co-ordination Centre for the NHS Patient Survey Programme at Picker Institute Europe.



Making patients' views count

National NHS patient survey programme

Survey of women's experiences of maternity services 2013

CQC Maternity care pathway reports: labour and birth

The Care Quality Commission is the independent regulator of health and adult social care in England.

Our purpose:

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.

Our role:

We monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care.

Survey of women's experiences of maternity services 2013

To improve the quality of services that the NHS delivers, it is important to understand what service users think about their care and treatment. One way of doing this is by asking people who have recently used their local health services to tell us about their experiences.

Information drawn from the questions in the maternity survey will be considered by the Care Quality Commission (CQC) as part of its new Hospital Intelligent Monitoring. NHS England will use the results to check progress and improvement against the objectives set out in the NHS mandate, and the Department of Health will hold them to account for the outcomes they achieve. The Trust Development Authority will use the results to inform the quality and governance assessment as part of their Oversight Model for NHS Trusts.

The 2013 survey of women's experiences of maternity services involved 137 NHS acute trusts in England. We received responses from more than 23,000 service users, a response rate of 46%. Women were eligible for the survey if they had a live birth during February 2013¹, were aged 16 years or older, gave birth in a hospital, birth centre, maternity unit, or who had a home birth. NHS Trusts in England took part in the survey if they had a sufficient number of eligible women that give birth at their NHS trust during the sampling time frame.

Similar surveys of maternity services were carried out in 2010 and 2007. They are part of a wider programme of NHS patient surveys which covers a range of topics including acute inpatient, outpatient, and A&E services, ambulances, and community mental health services. To find out more about our programme and the results from previous surveys, please see the links in the further information section.

This report contains the benchmarked results for this trust for the labour and birth section of the questionnaire. When answering questions in the survey about labour and birth, we can be confident that in all cases women were referring to the acute trust from which they were sampled from. Hence it is possible to compare the results for labour and birth across all 137 NHS trusts that took part in the survey.

The survey also asked women about their experiences of antenatal and postnatal care, to cover the entire pregnancy and birth for completeness. However, some women who gave birth at an acute trust may not have received their antenatal and postnatal care from that same trust. This could be due to one of several reasons, such as: having moved home, having to travel for more specialist care, or due to variation in the provision of services across the country.

¹ Some trusts with a small number of women delivering in February would have also included women who gave birth in January 2013, one NHS trust included women who gave birth in March.For further details on women excluded from the survey, please see the survey guidance manual at: http://www.nhssurveys.org/survey/1250

For this survey, we asked trusts to complete an additional piece of work to identify which of the women in their sample were likely to have also received their antenatal and postnatal care from the same trust at which they gave birth, and 93 trusts that took part in the survey were able to do this for antenatal care and 86 trusts for postnatal care. The aim was to assist trusts to gain the insight to improve services, by improving the accuracy when attributing survey responses to the care provider.

The antenatal and postnatal survey reports will be published on the NHS Surveys website, but should be viewed with caution for the reasons contained within those documents.

Interpreting the report

This report shows how a trust scored for each question in the labour and birth section of the survey, compared with the range of results from all other trusts that took part. It is designed to help understand the performance of individual trusts and to identify areas for improvement.

A 'section' score is also provided, labelled S3-S5 in the 'section scores' on page 5. The scores for each question are grouped according to the relevant sections of the questionnaire, which are 'labour and birth', 'staff' and 'care in hospital after the birth'.

This report shows the same data as published on the CQC website: (http://www.cqc.org.uk/public/reports-surveys-and-reviews/surveys). The CQC website displays the data in a more simplified way, identifying whether a trust performed 'better,' 'worse' or 'about the same' as the majority of other trusts for each question and section.

Standardisation

Trusts have differing profiles of maternity service users; for example, one trust may have more 'first time' mothers than another. This is significant because whether a woman has given birth previously (parity) could influence their experiences and could potentially lead to a trust's results appearing better or worse than if they had a slightly different profile of maternity service users. To account for this, we 'standardise' the data. Results have been standardised by parity and age of respondent, to ensure that no trust will appear better or worse than another because of its respondent profile. This helps to ensure that each trust's age-parity profile reflects the national age-parity distribution (based on all of the respondents to the survey). It therefore enables a more fair comparison of results from trusts with different profiles of maternity service users.

Scoring

For each question in the survey, the individual responses were converted into scores on a scale of 0 to 10. A score of 10 represents the best possible response. Therefore, the higher the score for each question, the better the trust is performing.

It is not appropriate to score all questions within the questionnaire; this is because not all of the questions assess the trusts in any way, or they may be 'filter questions' designed to filter out respondents to whom following questions do not apply. An example of a filter question would be C4: 'Did the pain relief you used change from what you had originally planned?'

Graphs

The graphs in this report display the range of scores achieved by all trusts taking part in the survey, from the lowest score achieved (left hand side) to the highest score achieved (right hand side).

The black diamond shows the score for your trust. The black diamond (score) is not shown for questions answered by fewer than 30 people because the uncertainty around the result would be too great. The trust will also not have a section score for the corresponding section; this is because the section data is not comparable with other trusts, as it is made up of fewer questions.

The graph is divided into three sections:

- If your trust score lies in the orange section of the graph, your trust result is 'about the same' as most other trusts in the survey.
- If your trust score lies in the red section of the graph, your trust result is 'worse' compared with most other trusts in the survey.

• If your trust score lies in the green section of the graph, your trust result is 'better' compared with most other trusts in the survey.

The text to the right of the graph clearly states whether the score for your trust is 'better' or 'worse' compared with most other trusts in the survey. If there is no text here then your trust is 'about the same'.

You may find that there is no red area, and/or no green area in the charts shown for some questions. This can occur in the analysis of the data and is an acceptable consequence of the statistical technique that is used. The size of the orange area is constructed by considering how different all trust scores are across the range, as well as the confidence we can have in that particular trust's score (by looking at the number of respondents to that question). In some cases, this will lead to such a wide margin of error that the 'expected range' (the orange section) will be very wide, and therefore will also cover the highest or lowest scoring trusts for that question.

Methodology

The categories described above are based on a statistic called the 'expected range' which is uniquely calculated for each trust for each question. This is the range within which we would expect a particular trust to score if it performed 'about the same' as most other trusts in the survey. The range takes into account the number of respondents from each trust as well as the scores for all other trusts. This means that where a trust is performing 'better' or 'worse' than the majority of other trusts, this is likely to be a true reflection of all service users that have visited the trust, rather than being unique to those who responded to the survey.

A technical document providing more detail about the methodology and the scoring applied to each question is available on our website (see further information section below).

Tables

At the end of the report you will find tables containing the data used to create the graphs and background information about the service users that responded.

Scores from the 2010 survey where comparable are also displayed. A statistically significant difference means that the change in the results is very unlikely to have occurred by chance. The column called 'change from 2010' uses arrows to indicate whether the score for this year shows a statistically significant increase (up arrow), a statistically significant decrease (down arrow) or has shown no statistically significant change (no arrow) compared with 2010. Significance is tested using a two-sample t-test.

Where a result for 2010 is not shown, this is because the question was either new this year, or the question wording and/or the response categories have been changed. It is therefore not possible to compare the results as we do not know if any change is caused by alterations in the survey instrument, or variation in a trust's performance.

Comparisons are not shown if your trust has merged with other trusts since the 2010 survey. Please note that comparative data is not shown for the sections as the questions contained in each section can change year on year.

Notes on specific questions

The following questions were <u>not</u> answered by women who had a planned caesarean: **C1**, **C2**, **C3**, **C4** and **C5**.

Question C8 and C9 were not answered by women who had a planned or emergency caesarean.

Question C13: The question is compared with 2010 based only on the 'not at all' response, as the other response options were altered during the survey development.

The following questions were <u>not</u> answered by women who had a home birth and did not go to hospital: **D1**, **D2**, **D3**, **D4**, **D5** and **D6**.

Further information

The full national results for the 2013 survey are on the CQC website, together with an A to Z list to view the results for each trusts labour and birth questions, and the technical document outlining the methodology and the scoring applied to each question:

www.cqc.org.uk/PatientSurveyMaternity2013

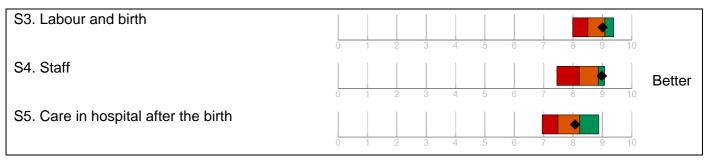
For the trusts that were able to carry out the attribution exercise, the reports for antenatal and postnatal care are available on the NHS surveys website, along with more detail on the attribution: www.nhssurveys.org

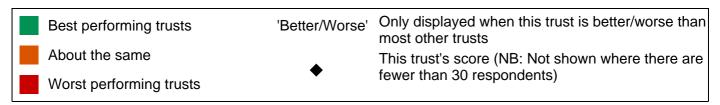
The results for the 2007 and 2010 surveys can be found on the NHS surveys website at: www.nhssurveys.org/surveys/299

Full details of the methodology for the survey can be found at: www.nhssurveys.org/survey/1250

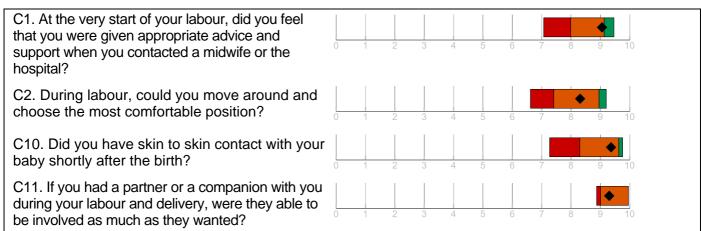
More information on the programme of NHS patient surveys is available at: www.cgc.org.uk/public/reports-surveys-and-reviews/surveys

Section scores

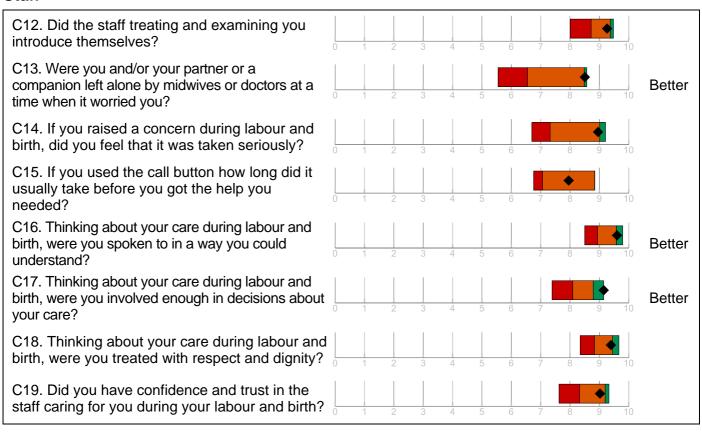


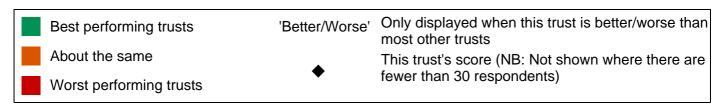


Labour and birth

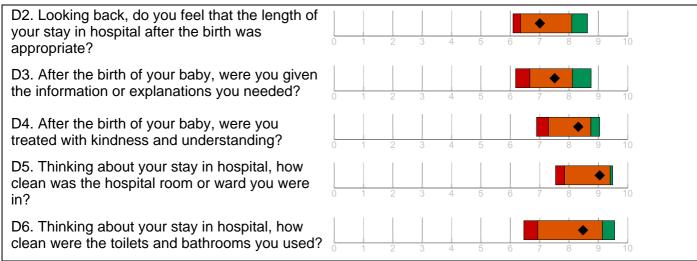


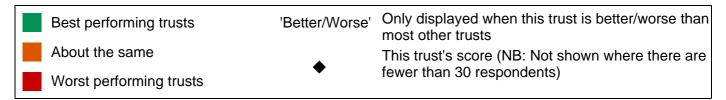
Staff





Care in hospital after the birth





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Tru		Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2010 scores for this NHS trust	Change from 2010
Lab	our and birth						
S3	Section score	9.0	8.0	9.4			
C1	At the very start of your labour, did you feel that you were given appropriate advice and support when you contacted a midwife or the hospital?	9.1	7.1	9.5	111		
C2	During labour, could you move around and choose the most comfortable position?	8.3	6.6	9.2	101	8.4	
C10	Did you have skin to skin contact with your baby shortly after the birth?	9.4	7.3	9.8	112		
C11	If you had a partner or a companion with you during your labour and delivery, were they able to be involved as much as they wanted?	9.3	8.9	9.9	125		
Sta	ff						
S4	Section score	9.0	7.4	9.1			
C12	Did the staff treating and examining you introduce themselves?	9.3	8.0	9.5	126		
C13	Were you and/or your partner or a companion left alone by midwives or doctors at a time when it worried you?	8.5	5.5	8.6	127	7.9	
C14	If you raised a concern during labour and birth, did you feel that it was taken seriously?	9.0	6.7	9.2	77		
C15	If you used the call button how long did it usually take before you got the help you needed?	8.0	6.8	8.8	55		
C16	Thinking about your care during labour and birth, were you spoken to in a way you could understand?	9.6	8.5	9.8	126	8.7	↑
C17	Thinking about your care during labour and birth, were you involved enough in decisions about your care?	9.1	7.4	9.1	126	8.3	↑
C18	Thinking about your care during labour and birth, were you treated with respect and dignity?	9.4	8.3	9.7	127		

↑ or ↓ Indicates where 2013 score is significantly higher or lower than 2010 score (NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2010 data is available.

C19 Did you have confidence and trust in the staff caring for you during 9.0 7.6 9.3 127 8.6

your labour and birth?

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room or ward you were in?

and bathrooms you used?

D6 Thinking about your stay in hospital, how clean were the toilets

Jar Tru	nes Paget University Hospitals NHS Foundation ist	Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2010 scores for this NHS trust	Change from 2010
Car	e in hospital after the birth						
S5	Section score	8.1	7.0	8.9			
D2	Looking back, do you feel that the length of your stay in hospital after the birth was appropriate?	7.0	6.1	8.6	119	7.3	
D3	After the birth of your baby, were you given the information or explanations you needed?	7.5	6.2	8.8	123	6.9	
D4	After the birth of your baby, were you treated with kindness and understanding?	8.3	6.9	9.0	125	8.0	
D5	Thinking about your stay in hospital, how clean was the hospital	9.0	7.5	9.5	124		

↑ or ↓ Indicates where 2013 score is significantly higher or lower than 2010 score (NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2010 data is available.

8.5 6.5 9.6 125

Background information

The sample	This trust	All trusts
Number of respondents	129	23077
Response Rate (percentage)	44	46
Demographic characteristics	This trust	All trusts
Percentage of mothers	(%)	(%)
First-time	55	48
Who have previously given birth	45	52
Age group (percentage)	(%)	(%)
Aged 16-18	1	1
Aged 19-24	20	10
Aged 25-29	31	23
Aged 30-34	23	35
Aged 35 and over	24	31
Ethnic group (percentage)	(%)	(%)
White	98	83
Multiple ethnic group	0	2
Asian or Asian British	2	8
Black or Black British	0	4
Arab or other ethnic group	0	1
Not known	0	3
Religion (percentage)	(%)	(%)
No religion	52	33
Buddhist	0	1
Christian	45	55
Hindu	0	2
Jewish	0	1
Muslim	0	6
Sikh	0	1
Other religion	2	1
Prefer not to say	2	1
Sexual orientation (percentage)	(%)	(%)
Heterosexual/straight	94	96
Gay/lesbian	0	0
Bisexual	1	1
Other	1	0
Prefer not to say	4	3