

Patient survey report 2015



Survey of women's experiences of maternity services 2015

Homerton University Hospital NHS Foundation Trust

The national survey of women's experiences of maternity services 2015 was designed, developed and co-ordinated by the Co-ordination Centre for the NHS Patient Survey Programme at Picker Institute Europe.



National NHS patient survey programme

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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.

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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 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 2015 survey of women's experiences of maternity services involved 133 NHS acute trusts in England. We received responses from more than 20,000 service users, a response rate of 41%. Women were eligible for the survey if they had a live birth during February 2015, were aged 16 years or older, gave birth in a hospital, birth centre, maternity unit, or who had a home birth¹. 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 2007, 2010 and 2013. 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 the labour and birth care 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. For this section, it is then possible to compare the results for labour and birth across all 133 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.

We asked trusts 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. This voluntary attribution exercise was completed for the first time in the 2013 survey. For 2015, 118 trusts that

¹Some trusts with a small number of women delivering in February also included women who gave birth in January 2015. For further details on women excluded from the survey, please see the survey instruction manual at: <http://www.nhssurveys.org/surveys/843>

took part in the survey were able to do this for antenatal and postnatal care. The aim was to improve the accuracy with which survey responses are attributed to the care provider and allow trusts to gain better insight to improve services.

The antenatal and postnatal survey data from the trusts that completed the attribution exercise will be shared with those trusts. The data will be considered by the Care Quality Commission (CQC) to inform its Intelligent Monitoring and will be shared with CQC inspectors. The reports will be published on the Survey Co-ordination Centre 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.

Section scores are also provided, labelled S4, S5, and S6 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) and enables a fairer 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, since not all of the questions assess the trusts in some way (demographic questions, for example).

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 confidence interval around the trust's question score is considered too large to be meaningful and results are not reported. Additionally, 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 and/or 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 so 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 the Further Information section).

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.

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 2013 survey are also displayed where comparable. A statistically significant difference means that the change in the results is very unlikely to have occurred by chance. The column called 'change from 2013' 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 2013. Significance is tested using a two-sample t-test.

Where a result for 2013 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. As a result, it is 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 2013 survey. Please note that comparative data is not shown for the section scores as the questions contained in each section can change year on year.

Notes on specific questions

The following questions were not answered by women who had a planned caesarean: **C1, C2, C3, C4, C5, C6, C8 and C9.**

Question C6: was not answered by women whose choice of pain relief did not change.

The following questions were not answered by women who had a home birth and did not go to hospital: **D1, D2, D3, D4, D5, D6, D7 and D8.**

Further information

The full national results for the 2015 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:

<http://www.cqc.org.uk/maternitysurvey>

For the trusts who compiled attribution data, the reports for antenatal and postnatal care are available on the NHS surveys website, along with the labour and birth reports for all trusts, at:

<http://www.nhssurveys.org/surveys/876>

The results for the 2007, 2010 and 2013 surveys can be found on the NHS surveys website at:

<http://www.nhssurveys.org/surveys/299>

Full details of the methodology for the survey can be found at:

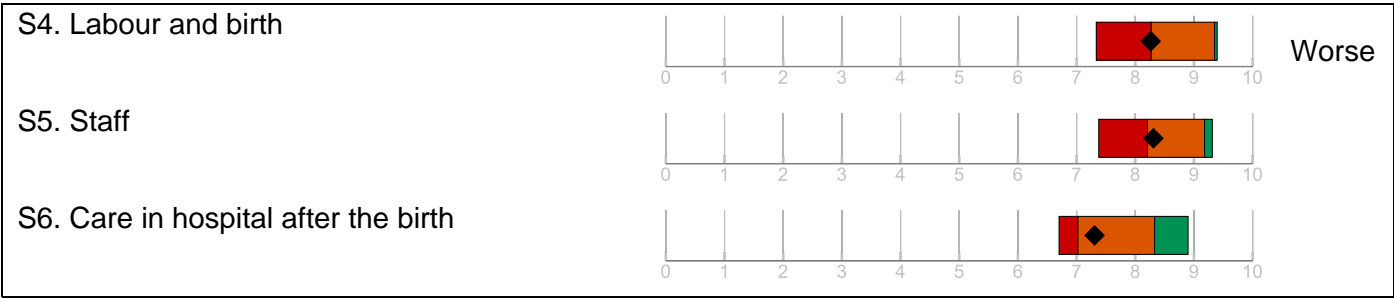
<http://www.nhssurveys.org/surveys/843>

More information on the programme of NHS patient surveys is available at:

www.cqc.org.uk/public/reports-surveys-and-reviews/surveys

Survey of women's experiences of maternity services 2015 Homerton University Hospital NHS Foundation Trust

Section scores

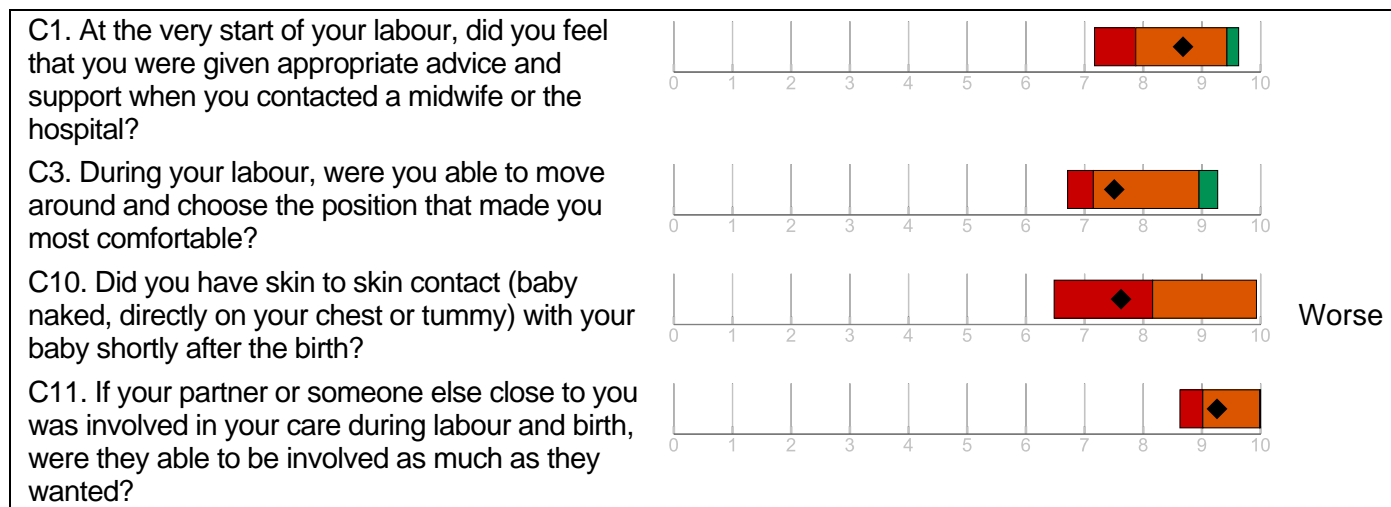


Best performing trusts	'Better/Worse'	Only displayed when this trust is better/worse than most other trusts
About the same	◆	This trust's score (NB: Not shown where there are fewer than 30 respondents)
Worst performing trusts		

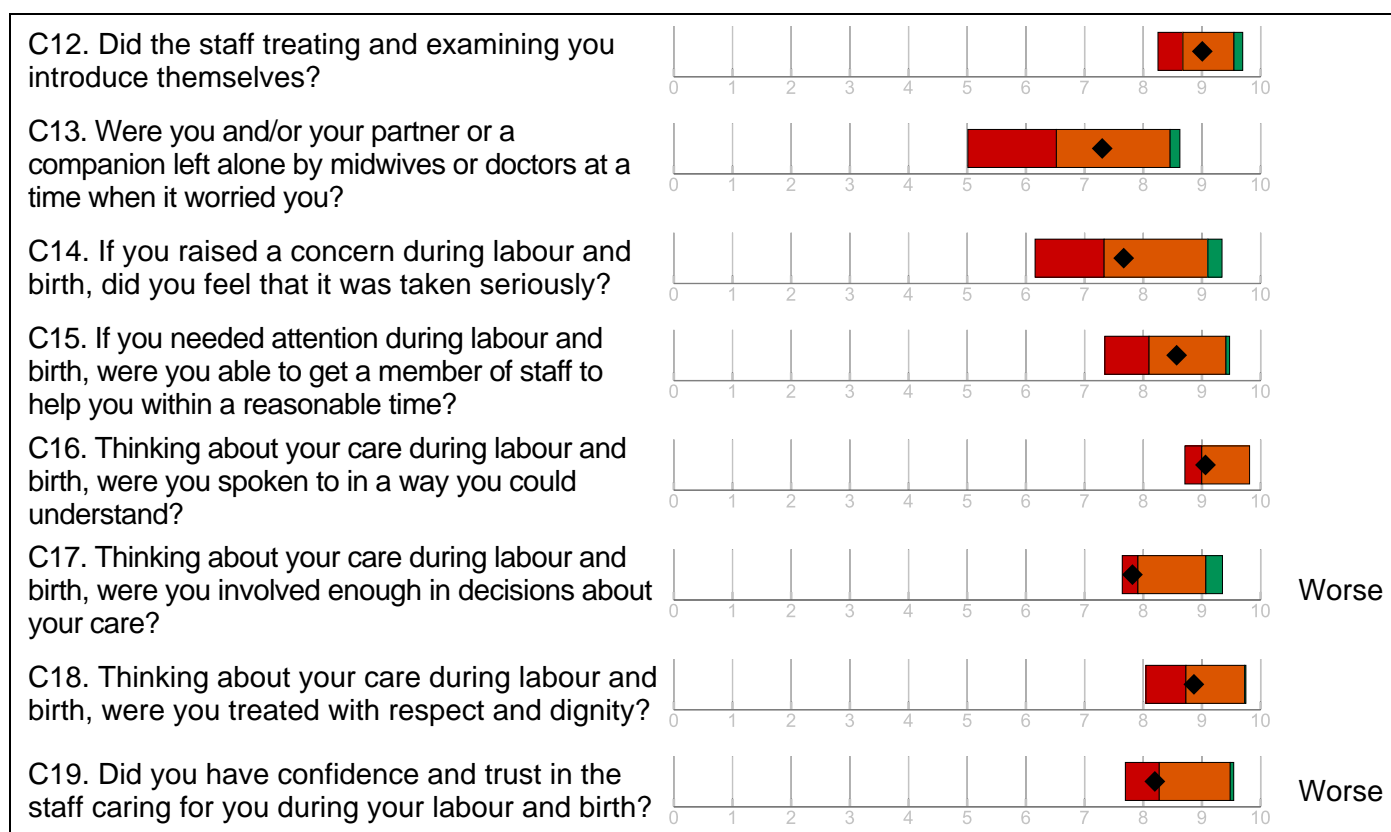
Survey of women's experiences of maternity services 2015

Homerton University Hospital NHS Foundation Trust

Labour and birth

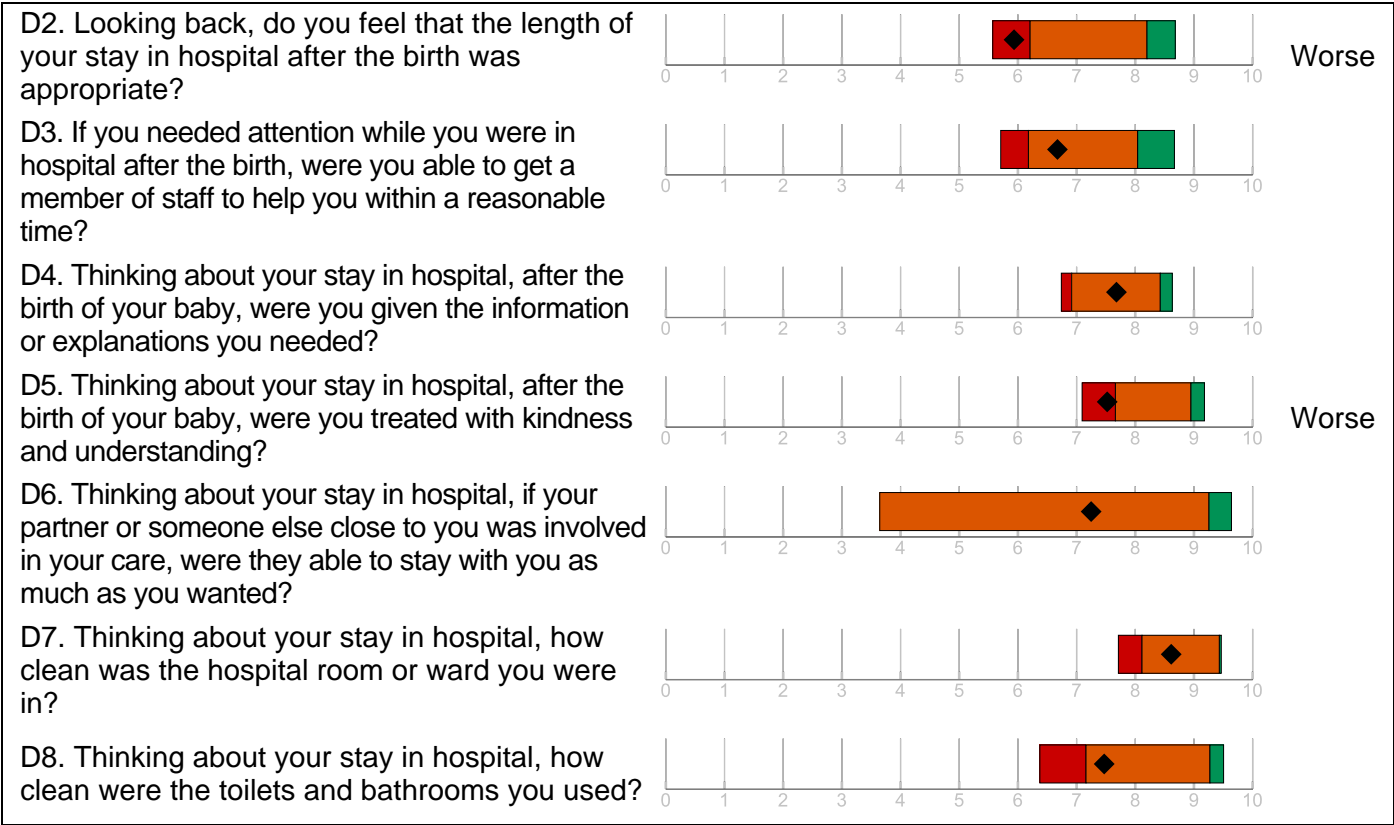


Staff



Survey of women's experiences of maternity services 2015 Homerton University Hospital NHS Foundation Trust

Care in hospital after the birth



Survey of women's experiences of maternity services 2015

Homerton University Hospital NHS Foundation Trust

		Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2013 scores for this NHS trust	Change from 2013
Labour and birth							
S4	Section score	8.3	7.3	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?	8.7	7.2	9.6	99	8.6	
C3	During your labour, were you able to move around and choose the position that made you most comfortable?	7.5	6.7	9.3	102		
C10	Did you have skin to skin contact (baby naked, directly on your chest or tummy) with your baby shortly after the birth?	7.6	6.5	9.9	117	7.9	
C11	If your partner or someone else close to you was involved in your care during labour and birth, were they able to be involved as much as they wanted?	9.3	8.6	10.0	137	9.2	
Staff							
S5	Section score	8.3	7.4	9.3			
C12	Did the staff treating and examining you introduce themselves?	9.0	8.3	9.7	138	8.8	
C13	Were you and/or your partner or a companion left alone by midwives or doctors at a time when it worried you?	7.3	5.0	8.6	137	6.6	
C14	If you raised a concern during labour and birth, did you feel that it was taken seriously?	7.7	6.2	9.3	95	7.3	
C15	If you needed attention during labour and birth, were you able to get a member of staff to help you within a reasonable time?	8.6	7.3	9.5	126		
C16	Thinking about your care during labour and birth, were you spoken to in a way you could understand?	9.1	8.7	9.7	140	8.9	
C17	Thinking about your care during labour and birth, were you involved enough in decisions about your care?	7.8	7.6	9.3	131	7.7	
C18	Thinking about your care during labour and birth, were you treated with respect and dignity?	8.9	8.0	9.7	140	8.4	
C19	Did you have confidence and trust in the staff caring for you during your labour and birth?	8.2	7.7	9.5	140	8.1	

↑ or ↓

Indicates where 2015 score is significantly higher or lower than 2013 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2013 data is available.

Survey of women's experiences of maternity services 2015

Homerton University Hospital NHS Foundation Trust

		Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2013 scores for this NHS trust	Change from 2013
Care in hospital after the birth							
S6	Section score	7.3	6.7	8.9			
D2	Looking back, do you feel that the length of your stay in hospital after the birth was appropriate?	5.9	5.6	8.7	132	6.5	
D3	If you needed attention while you were in hospital after the birth, were you able to get a member of staff to help you within a reasonable time?	6.7	5.7	8.7	133		
D4	Thinking about your stay in hospital, after the birth of your baby, were you given the information or explanations you needed?	7.7	6.7	8.6	138	6.9	
D5	Thinking about your stay in hospital, after the birth of your baby, were you treated with kindness and understanding?	7.5	7.1	9.2	138	6.9	
D6	Thinking about your stay in hospital, if your partner or someone else close to you was involved in your care, were they able to stay with you as much as you wanted?	7.2	3.8	9.6	125		
D7	Thinking about your stay in hospital, how clean was the hospital room or ward you were in?	8.6	7.7	9.5	138	7.9	↑
D8	Thinking about your stay in hospital, how clean were the toilets and bathrooms you used?	7.5	6.4	9.5	137	6.6	↑

↑ or ↓

Indicates where 2015 score is significantly higher or lower than 2013 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2013 data is available.

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Background information

The sample	This trust	All trusts
Number of respondents	145	20631
Response Rate (percentage)	38	41
Demographic characteristics	This trust	All trusts
Percentage of mothers	(%)	(%)
First-time	50	48
Who have previously given birth	50	52
Age group (percentage)	(%)	(%)
Aged 16-18	0	0
Aged 19-24	8	8
Aged 25-29	19	23
Aged 30-34	34	36
Aged 35 and over	40	32
Ethnic group (percentage)	(%)	(%)
White	59	83
Multiple ethnic group	6	2
Asian or Asian British	13	8
Black or Black British	10	3
Arab or other ethnic group	2	1
Not known	9	3
Religion (percentage)	(%)	(%)
No religion	26	37
Buddhist	0	1
Christian	38	51
Hindu	2	2
Jewish	15	1
Muslim	14	6
Sikh	1	1
Other religion	1	1
Prefer not to say	4	2
Sexual orientation (percentage)	(%)	(%)
Heterosexual/straight	83	96
Gay/lesbian	1	0
Bisexual	0	1
Other	2	1
Prefer not to say	14	3