



Maternity care pathway reports: Labour and birth

Survey of women's experiences of maternity services 2017 Gateshead Health NHS Foundation Trust

NHS patient survey programme

Survey of women's experiences of maternity services 2017

Maternity care pathway reports: labour and birth

The Care Quality Commission

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 2017

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.

The 2017 survey of women's experiences of maternity services involved 130 NHS acute trusts in England. We received responses from more than 18,000 service users, a response rate of 37%. Women were eligible for the survey if they had a live birth during February 2017, were aged 16 years or older, and gave birth in a hospital, birth centre, maternity unit, or at home¹. NHS trusts in England took part in the survey if they had a sufficient number of eligible women giving birth at their trust during the sampling time frame.

Similar surveys of maternity services were carried out in 2007, 2010, 2013 and 2015. They are part of a wider programme of NHS patient surveys which covers a range of topics including acute inpatient services, A&E services, 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.

The Care Quality Commission (CQC) will use the results from the survey in the regulation, monitoring and inspection of NHS trusts in England. Survey data will be used in CQC's Insight, an intelligence tool which indicates potential changes in quality of care to support decision making about our regulatory response. Survey data will also form a key source of evidence to support the judgements and inspection ratings published for trusts.

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. NHS Improvement will use the results to inform their oversight model for the NHS.

Antenatal and postnatal data

This report contains the benchmarked results for the labour and birth section of the questionnaire. When answering survey questions about labour and birth, we can be confident that in all cases women are referring to the acute trust from which they were sampled. It is therefore possible to compare results for labour and birth across all 130 NHS trusts that took part in the survey.

The survey also asked women about their experiences of antenatal and postnatal care. However, some women may not have received their antenatal and/or postnatal care from the same trust at which they gave birth. We therefore asked trusts to identify which of the women in their sample were

¹Some trusts with a small number of women delivering in February also included women who gave birth in January 2017. For further details on the sampling criteria, please see the survey instruction manual at: http://www.nhssurveys.org/surveys/1078

likely to have also received their antenatal and postnatal care from the trust. The antenatal and postnatal survey data from the trusts that completed this attribution exercise is published in separate reports. However, due to the limitations of the attribution exercise, the antenatal and postnatal data cannot be considered as statistically robust as the data for labour and birth and should be viewed with caution. Please see the antenatal and postnatal reports for further information.

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. 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'.

Standardisation

Trusts have differing profiles of maternity service users. For example, one trust may have more first-time mothers than another. This can potentially affect the results because people tend to answer questions in different ways depending on certain characteristics. This could 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 by parity (whether or not they have given birth previously) and age of respondents. 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. In most cases this standardisation will not have a large impact on trust results.

Scoring

For each question in the survey, 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 some questions do not assess the trust in any way.

Graphs

The graphs in this report show how the score for your trust compares to the range of scores achieved by all trusts taking part in the survey. The black diamond shows the score for your trust. The graph is divided into three sections:

- If your trust score lies in the grey 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 orange 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'.

Methodology

The 'about the same', 'better' and 'worse' categories are based on an analysis technique called the 'expected range' which determines the range within which the trust's score could fall without differing significantly from the average, taking into account the number of respondents for each trust and the scores for all other trusts. If the trust's score is outside of this range, it means that it is performing significantly above/below what we would expect. If its score is within this range, we say that the trust's performance is 'about the same'. Where a trust is performing 'better' or 'worse' than the majority of other trusts, this result is very unlikely to have occurred by chance.

In some cases there will be no orange and/or green area in the graphs. This occurs when the

expected range for your trust is so broad it encompasses either the highest possible score for all trusts (no green section) or the lowest possible score for all trusts (no orange section). This could be because there were few respondents and/or a large amount of variation in their answers.

If fewer than 30 respondents have answered a question, no score will be displayed for this question (or the corresponding section). This is because the uncertainty around the result is too great.

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).

Tables

At the end of the report you will find tables containing the data used to create the graphs, the response rate for your trust, and background information about the women that responded.

Scores from the 2015 survey are also displayed where comparable. The column called 'change from 2015' uses arrows to indicate whether the score for 2017 shows a statistically significant increase (up arrow), a statistically significant decrease (down arrow) or has shown no statistically significant change (no arrow) compared with 2015. A statistically significant difference means that the change in results is very unlikely to have occurred by chance. Significance is tested using a two-sample t-test with a significance level of 0.05.

Where a result for 2015 is not shown, this is because the question was either new in 2017, or the question wording and/or response options have been changed. Comparisons are also not shown if a trust has merged with another trust(s) since the 2015 survey, or if a trust committed a sampling error in 2015. Please also note that comparative data is not shown for the questionnaire 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** and **C3**.

The following questions were <u>not</u> answered by women who had a home birth and did not go to hospital: **D2**, **D3**, **D5**, **D6**, **D7**, **D8** and **D9**.

Further information

The full England-level results for the 2017 survey are on the CQC website, together with an A to Z list to view the results for each trust's labour and birth questions, and the technical document outlining the methodology and the scoring applied to each question: http://www.cqc.org.uk/publications/surveys/surveys

For the trusts who submitted 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/1055

The results for the 2007, 2010, 2013 and 2015 surveys can be found on the NHS surveys website at:

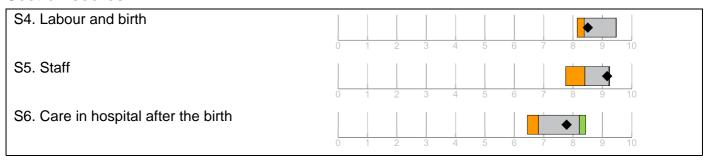
http://www.nhssurveys.org/surveys/299

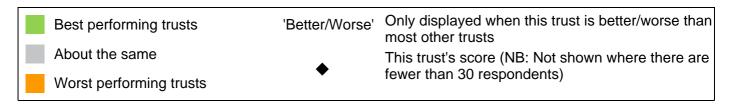
Full details of the methodology for the survey can be found at: http://www.nhssurveys.org/surveys/1055

More information on the programme of NHS patient surveys is available at: http://www.cqc.org.uk/publications/surveys/surveys

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Section scores





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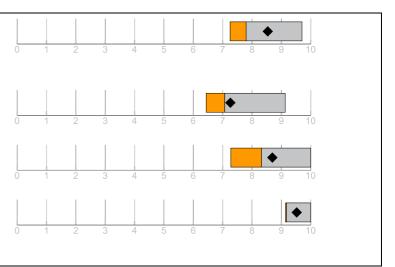
Labour and birth

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?

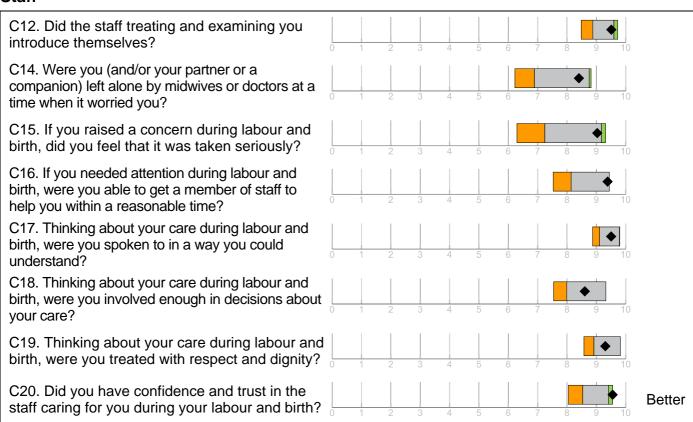
C3. During your labour, were you able to move around and choose the position that made you most comfortable?

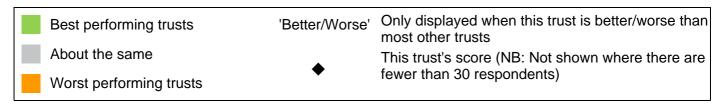
C10. Did you have skin to skin contact (baby naked, directly on your chest or tummy) with your baby shortly after the birth?

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?



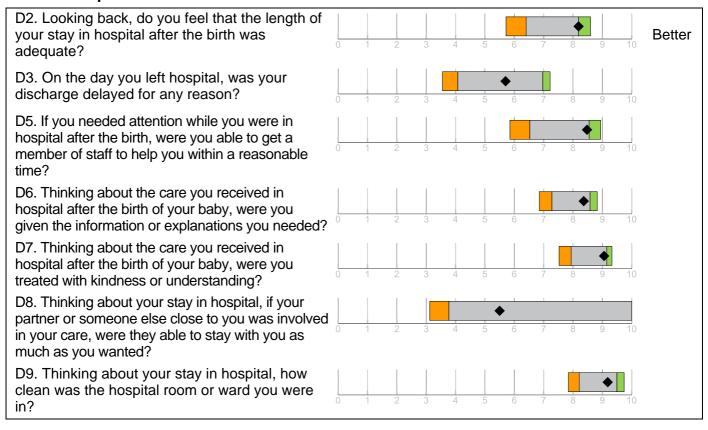
Staff

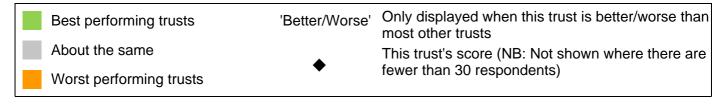




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Care in hospital after the birth





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Survey of women's experiences of maternity services 2017							
	eshead Health NHS Foundation Trust	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2015 scores for this NHS trust	Change from 2015
Lab	our and birth						
S4	Section score	8.5	8.1	9.5			
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?	8.5	7.3	9.6	62	9.3	
C3	During your labour, were you able to move around and choose the position that made you most comfortable?	7.3	6.4	9.1	54	8.0	
C10	Did you have skin to skin contact (baby naked, directly on your chest or tummy) with your baby shortly after the birth?	8.7	7.3	9.9	71	8.6	
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?	9.5	9.1	10.0	86	9.4	
Sta	ff						
S5	Section score	9.2	7.8	9.2			
C12	Did the staff treating and examining you introduce themselves?	9.5	8.5	9.7	86	9.2	
C14	Were you (and/or your partner or a companion) left alone by midwives or doctors at a time when it worried you?	8.4	6.2	8.8	86	7.6	
C15	If you raised a concern during labour and birth, did you feel that it was taken seriously?	9.0	6.3	9.3	41	9.1	
C16	If you needed attention during labour and birth, were you able to get a member of staff to help you within a reasonable time?	9.4	7.5	9.4	74	9.1	
C17	Thinking about your care during labour and birth, were you spoken to in a way you could understand?	9.5	8.9	9.8	85	9.6	
C18	Thinking about your care during labour and birth, were you involved enough in decisions about your care?	8.6	7.5	9.2	84	8.8	
C19	Thinking about your care during labour and birth, were you treated with respect and dignity?	9.3	8.6	9.7	86	9.5	
C20	Did you have confidence and trust in the staff caring for you during your labour and birth?	9.6	8.0	9.6	86	9.5	

↑ or ↓ Indicates where 2017 score is significantly higher or lower than 2015 score (NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2015 data is available.

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Gat	teshead Health NHS Foundation Trust	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2015 scores for this NHS trust	Change from 2015
Car	e in hospital after the birth						
S6	Section score	7.8	6.4	8.4			
D2	Looking back, do you feel that the length of your stay in hospital after the birth was adequate?	8.2	5.7	8.6	85	6.3	↑
D3	On the day you left hospital, was your discharge delayed for any reason?	5.7	3.6	7.2	86		
D5	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?	8.5	5.8	8.9	78	6.7	1
D6	Thinking about the care you received in hospital after the birth of your baby, were you given the information or explanations you needed?	8.4	6.9	8.8	85	7.1	1
D7	Thinking about the care you received in hospital after the birth of your baby, were you treated with kindness or understanding?	9.1	7.5	9.3	86	7.7	↑
D8	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?	5.5	3.1	9.8	82	5.1	
D9	Thinking about your stay in hospital, how clean was the hospital room or ward you were in?	9.2	7.8	9.7	86	9.0	

↑ or ↓ Indicates where 2017 score is significantly higher or lower than 2015 score (NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2015 data is available.

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Background information

The sample	This trust	All trusts
Number of respondents	86	18426
Response Rate (percentage)	36	37
Demographic characteristics	This trust	All trusts
Percentage of mothers	(%)	(%)
First-time	49	49
Who have previously given birth	51	51
Age group (percentage)	(%)	(%)
Aged 16-18	1	0
Aged 19-24	7	7
Aged 25-29	26	22
Aged 30-34	34	37
Aged 35 and over	33	34
Ethnic group (percentage)	(%)	(%)
White	93	82
Multiple ethnic group	1	2
Asian or Asian British	2	8
Black or Black British	1	3
Arab or other ethnic group	1	1
Not known	1	4
Religion (percentage)	(%)	(%)
No religion	45	40
Buddhist	1	0
Christian	50	47
Hindu	0	2
Jewish	0	1
Muslim	2	6
Sikh	0	1
Other religion	0	1
Prefer not to say	1	2
Sexual orientation (percentage)	(%)	(%)
Heterosexual/straight	96	96
Gay/lesbian	1	0
Bisexual	1	1
Other	0	1
Prefer not to say	1	3