

# NHS Maternity Services Survey 2022 Benchmark Report

Royal Devon and Exeter NHS Foundation Trust



# Contents



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# Background and methodology

## This section includes:

- explanation of the NHS Patient Survey Programme
- information on the Maternity 2022 survey
- a description of key terms used in this report
- navigating the report



# Background and methodology

## The NHS Patient Survey Programme

The NHS Patient Survey Programme (NPSP) collects feedback on adult inpatient care, maternity care, children and young people's inpatient and day services, urgent and emergency care, and community mental health services.

The NPSP is commissioned by the Care Quality Commission (CQC); the independent regulator of health and adult social care in England.

As part of the NPSP, the Maternity Survey started in 2007 and the 2022 Maternity Survey will be the ninth carried out to date. The CQC use the results from the survey in the regulation, monitoring and inspection of NHS trusts in England.

To find out more about the survey programme and to see the results from previous surveys, please refer to the section on further information on this page.

## The Maternity Survey 2022

The survey was administered by the Coordination Centre for Mixed Methods (CCMM) at Ipsos. A total of 45,621 mothers were invited to participate in the survey across 121 NHS trusts. Completed responses were

received from 20,927 respondents, an adjusted response rate of 46.5%.

Individuals were invited to participate in the survey if they were aged 16 years or over at the time of delivery and had a live birth at an NHS Trust between 1 February and 28 February 2022. A full list of eligibility criteria can be found in the survey [sampling instructions](#). If there were fewer than 300 people within an NHS trust who gave birth in February 2022, then births from January were included.

Fieldwork took place between April and August 2022.

## Trend data

In 2021 the Maternity survey transitioned from a solely paper based methodology to both paper and online. This dual approach was continued in 2022.

Analysis conducted prior to the 2021 survey, concluded that this change in methodology did not have a detrimental impact on trend data. Therefore, data from the 2021 survey and subsequent years are comparable with previous years, unless a question has changed or there are other reasons for lack of comparability such as changes in organisation structure of a trust.

Where results are comparable with previous years, a section on historical trends has been included. Where there are insufficient data points for historical trends, significance testing has been carried out against 2021 data.

## Further information about the survey

- For published results for other surveys in the NPSP, and for information to help trusts implement the surveys across the NPSP, please visit the [NHS Surveys website](#).
- To learn more about CQC's survey programme, please visit the [CQC website](#).

# Background and methodology continued

## Antenatal and Postnatal data

The maternity survey is split into three sections that ask questions about:

- antenatal care
- labour and birth
- postnatal care

It is possible that some respondents may have experienced these stages of care in different trusts. This may be for many reasons such as moving home, or having to travel for more specialist care, or due to variation in service provision across the country. For the purpose of benchmarking, it is important that we understand which trust the respondent is referring to when they are completing each section of the survey.

When answering survey questions about labour and birth we can be confident that in all cases respondents are referring to the trust from which they were sampled. It is therefore possible to compare results for labour and birth across all 121 NHS trusts that took part in the survey.

Trusts were asked to carry out an “attribution exercise”, where each trust identifies the individuals in their sample that are likely to have also received their antenatal and postnatal care from the trust. This is done using either electronic records or residential postcode information. This attribution exercise was first carried out in the 2013 survey. In 2022, 114 of the 121 trusts that took part in the survey completed this exercise.

The survey results contained in this report include only those respondents who were identified as receiving care at this trust.

Those trusts that did not provide the results of the attribution exercise to the CCMM at Ipsos do not receive results on the postnatal and antenatal sections of the survey.

## Limitations of this approach

Data is provided voluntarily, and not all trusts provided this data. The antenatal and postnatal care sections of this report are therefore benchmarked against those other trusts that also provided the required information.

Some trusts do not keep electronic records of antenatal and postnatal care. Where this is the case, location of antenatal and postnatal care is based on residential location of respondents. This is not a perfect measure of whether antenatal and postnatal care was received at the trust. For example, respondents requiring specialist antenatal or postnatal care may have received this from another trust. This may mean that some respondents are included in the data despite having received care from another trust.

# Key terms used in this report

## The ‘expected range’ technique

This report shows how your trust scored for each evaluative question in the survey, compared with other trusts that took part. It uses an analysis technique called the ‘expected range’ to determine if your trust is performing ‘about the same’, ‘better’ or ‘worse’ compared with most other trusts. This is designed to help understand the performance of individual trusts and identify areas for improvement. More information can be found in the [Appendix](#).

## Standardisation

Demographic characteristics, such as age can influence care experiences and how they are reported. Since trusts have differing profiles of maternity service users, this could make fair trust comparisons difficult. To account for this, we ‘standardise’ the results, which means we apply a weight to individual patient responses to account for differences in profiles between trusts. For each trust, results have been standardised by parity (whether or not a mother has given birth previously) and age of respondents to reflect the ‘national’ age distribution (based on all respondents to the survey).

This helps ensure that no trust will appear better or worse than another because of its profile of maternity service users, and enables a fairer and more useful comparison of results across trusts. In most cases this standardisation will not have a large impact on trust results.

## Scoring

For selected questions in the survey, the individual (standardised) responses are converted into scores, typically 0, 5, or 10 (except for questions B3 and D8). A score of 10 represents the best possible result and a score of 0 the worst. The higher the score for each question, the better the trust is performing. Only evaluative questions in the questionnaire are scored. Some questions are descriptive and others are ‘routing questions’, which are designed to filter out respondents to whom subsequent questions do not apply (for example C3). These questions are not scored. Section scoring is computed as the arithmetic mean of question scores for the section after weighting is applied.

## Trust average

The ‘trust average’ mentioned in this report is the arithmetic mean of all trusts’ scores after weighting is applied.

## Suppressed data

If fewer than 30 respondents have answered a question, no score will be displayed for that question (or the corresponding section the question contributes to). This is to prevent individual responses being identifiable.

## Further information about the methods

For further information about the statistical methods used in this report, please refer to the [survey technical document](#).

# Using the survey results

## Navigating this report

This report is split into **five** sections:

- 1. Background and methodology** – provides information about the survey programme, how the survey is run and how to interpret the data.
- 2. Headline results** – includes key trust-level findings relating to the mothers who took part in the survey, benchmarking, and top and bottom scores. This section provides an overview of results for your trust, identifying areas where your organisation performs better than the average and where you may wish to focus improvement activities.
- 3. Benchmarking** – shows how your trust scored for each evaluative question in the survey, compared with other trusts that took part; using the ‘expected range’ analysis technique. This allows you to see the range of scores achieved and compare yourself with the other organisations that took part in the survey. Benchmarking can provide you with an indication of where you perform better than the average, and what you should aim for in areas where you may wish to

improve. Only trusts that provide data on antenatal and/ or postnatal care and have sufficient respondent numbers are also provided with survey results for antenatal and postnatal care within this report.

- 4. Trends over time** – includes your trust’s mean score for each evaluative question in the survey. This is either shown as a historical trend chart or a significance test table, depending on the availability of longitudinal data.

Where possible, significance testing compares the mean score for your trust in 2021 to your 2022 mean score. This allows you to see if your trust has made statistically significant improvements between survey years.

**Historical trends** are presented where data is available, and questions remain comparable for your trust. Trends are presented only where there are at least five data points available to plot on the chart. Historical trend charts show the mean score for your trust by year, so that you can see if your trust has made improvements over time. They also include the national mean score by year, to allow you to see

whether your performance is in line with the national average or not.

**Significance test tables** are presented where there are less than 5 data points available and questions remain comparable between 2021 and 2022.

- 5. Appendix** – includes additional data for your trust; further information on the survey methodology; interpretation of graphs in this report.

# Using the survey results continued

## How to interpret the graphs in this report

There are several types of graphs in this report which show how the score for your trust compares to the scores achieved by all trusts that took part in the survey.

The two chart types used in the section 'benchmarking' use the 'expected range' technique to show results. For information on how to interpret these graphs, please refer to the [Appendix](#).

## Other data sources

More information is available about the following topics at their respective websites, listed below:

- Full national results; A-Z list to view the results for each trust; technical document: [www.cqc.org.uk/maternitysurvey](http://www.cqc.org.uk/maternitysurvey)
- National and trust-level data for all trusts who took part in the Maternity 2022 survey: [www.cqc.org.uk/maternitysurvey](http://www.cqc.org.uk/maternitysurvey). Full details of the methodology for the survey, instructions for trusts and contractors to carry out the survey, and the

survey development report can also be found on the NHS Surveys website.

- Information on the NHS Patient Survey Programme, including results from other surveys: [www.cqc.org.uk/content/surveys](http://www.cqc.org.uk/content/surveys)
- Information about how the CQC monitors services: <https://www.cqc.org.uk/what-we-do/how-we-use-information/using-data-monitor-services>



# Headline results

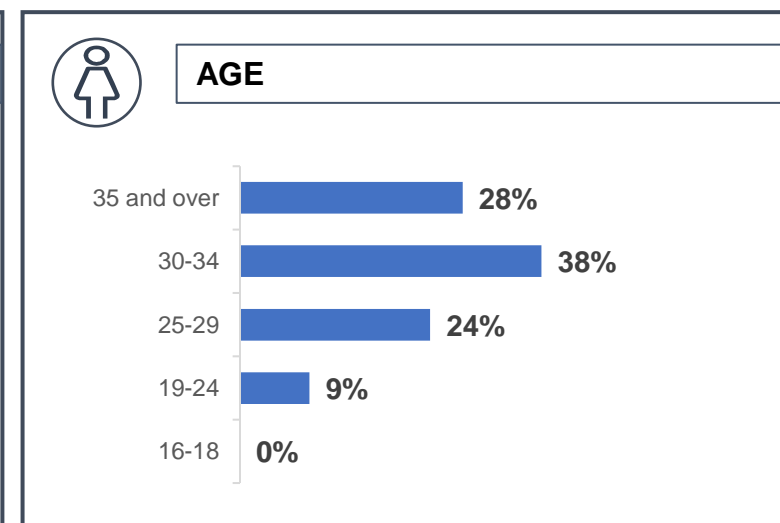
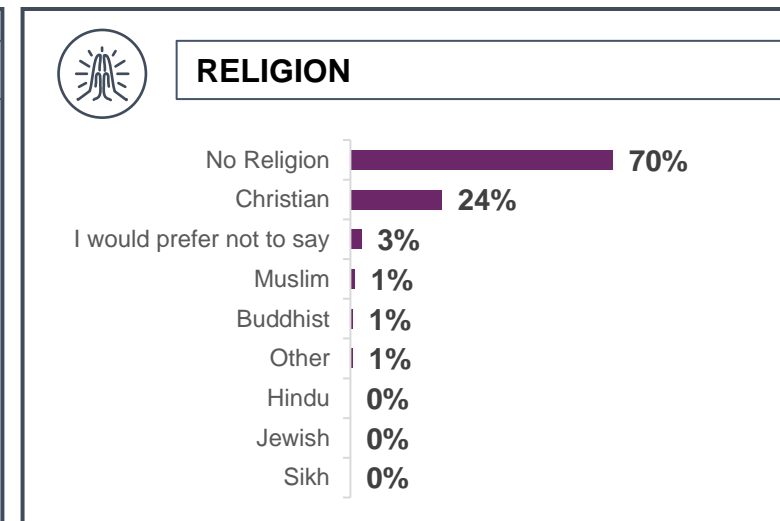
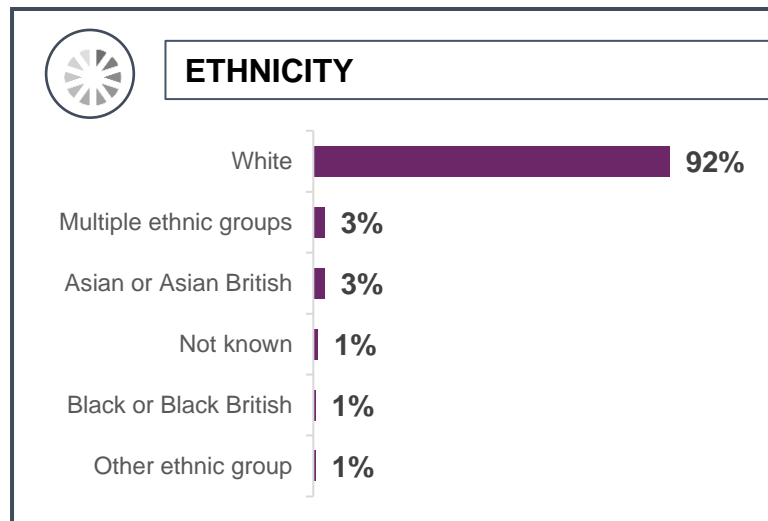
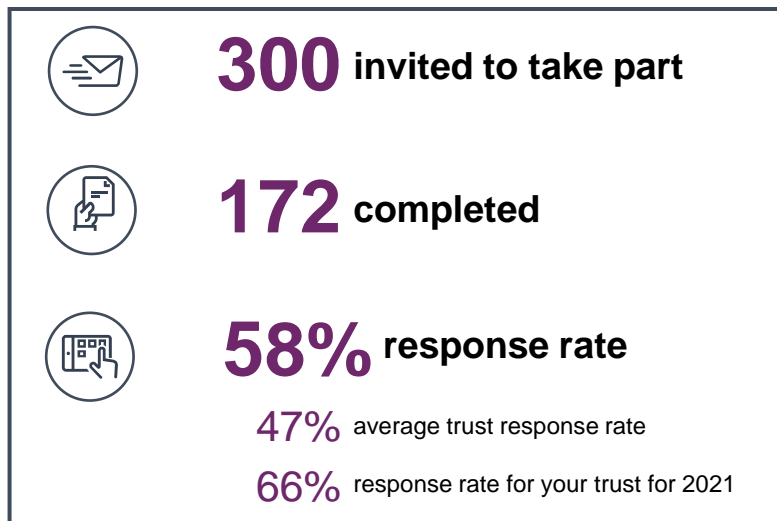
## This section includes:

- information about your trust population
- an overview of benchmarking for your trust
- the top and bottom scores for your trust



# Who took part in the survey?

This slide is included to help you interpret responses and to provide information about the population of mothers who took part in the survey.



# Summary of findings for your trust

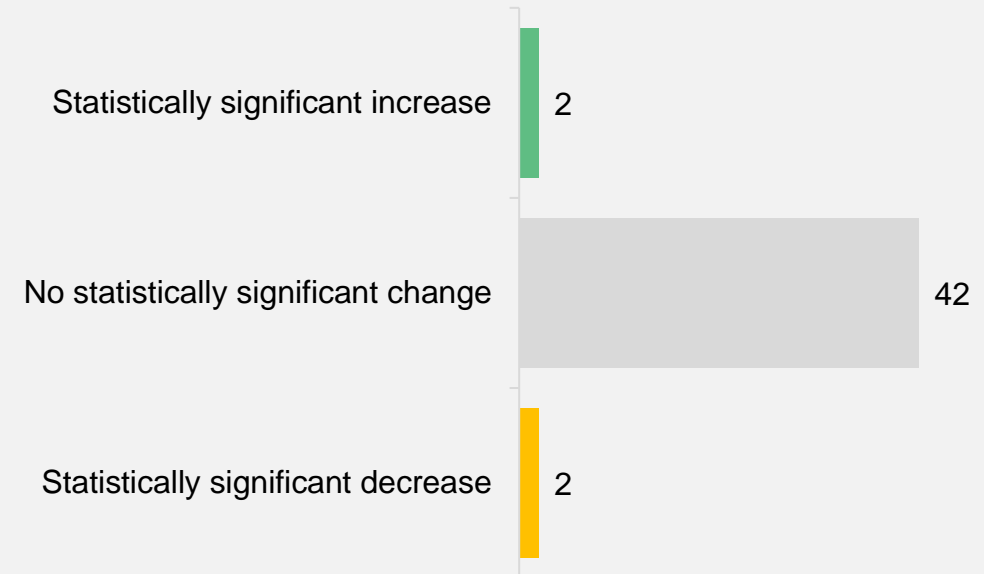
## Comparison with other trusts

The **number of questions** in this report at which your trust has performed better, worse, or about the same compared with most other trusts.



## Comparison with results from 2021

The **number of questions** in this report where your trust showed a statistically significant increase, decrease, or no change in scores compared to 2021 results.



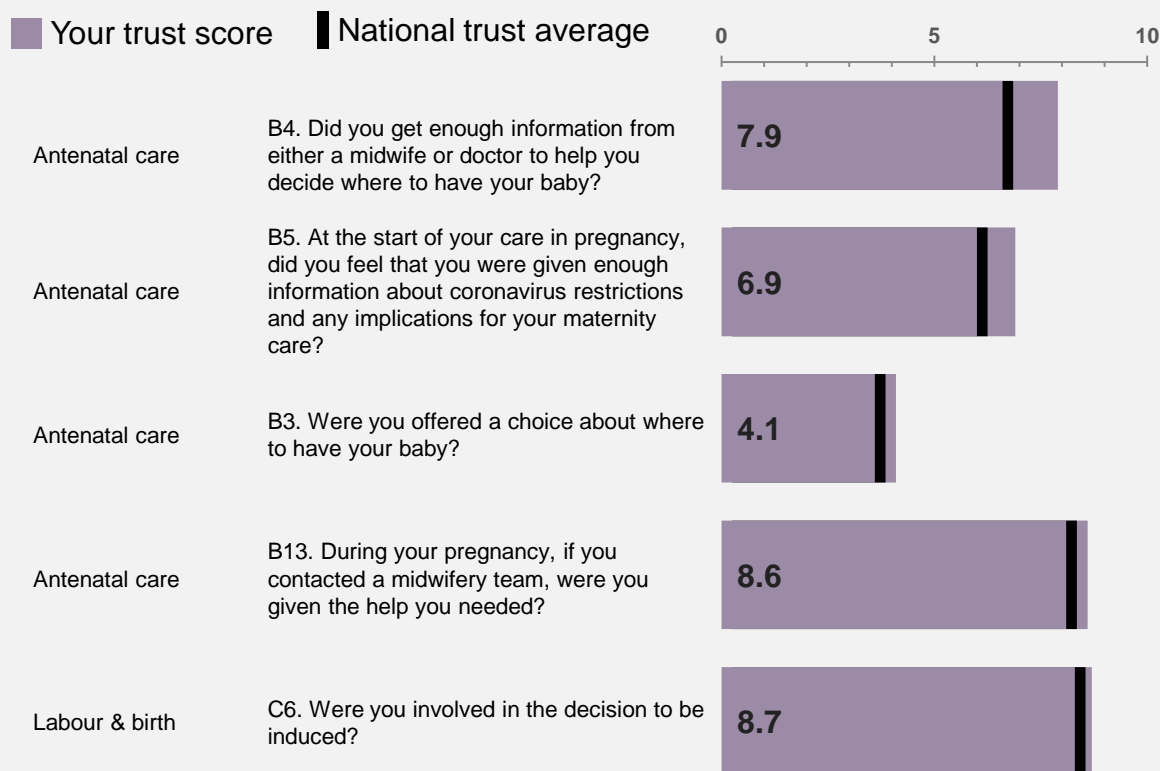
For a breakdown of the questions where your trust has performed better or worse compared with all other trusts, please refer to the appendix section [“comparison to other trusts”](#).

# Best and worst performance relative to the trust average

These five questions are calculated by comparing your trust's results to the trust average (the average trust score across England).

- **Top five scores:** These are the five results for your trust that are highest compared with the trust average. If none of the results for your trust are above the trust average, then the results that are closest to the trust average have been chosen, meaning a trust's best performance may be worse than the trust average.
- **Bottom five scores:** These are the five results for your trust that are lowest compared with the trust average. If none of the results for your trust are below the trust average, then the results that are closest to the trust average have been chosen, meaning a trust's worst performance may be better than the trust average.

## Top five scores (compared with average trust score across England)



## Bottom five scores (compared with average trust score across England)



# Benchmarking

## This section includes:

- how your trust scored for each evaluative question in the survey, compared with other trusts that took part
- an analysis technique called the ‘expected range’ to determine if your trust is performing about the same, better or worse compared with most other trusts.
- for more guidance on interpreting these graphs, please refer to the [appendix](#)



# Benchmarking

## Antenatal care



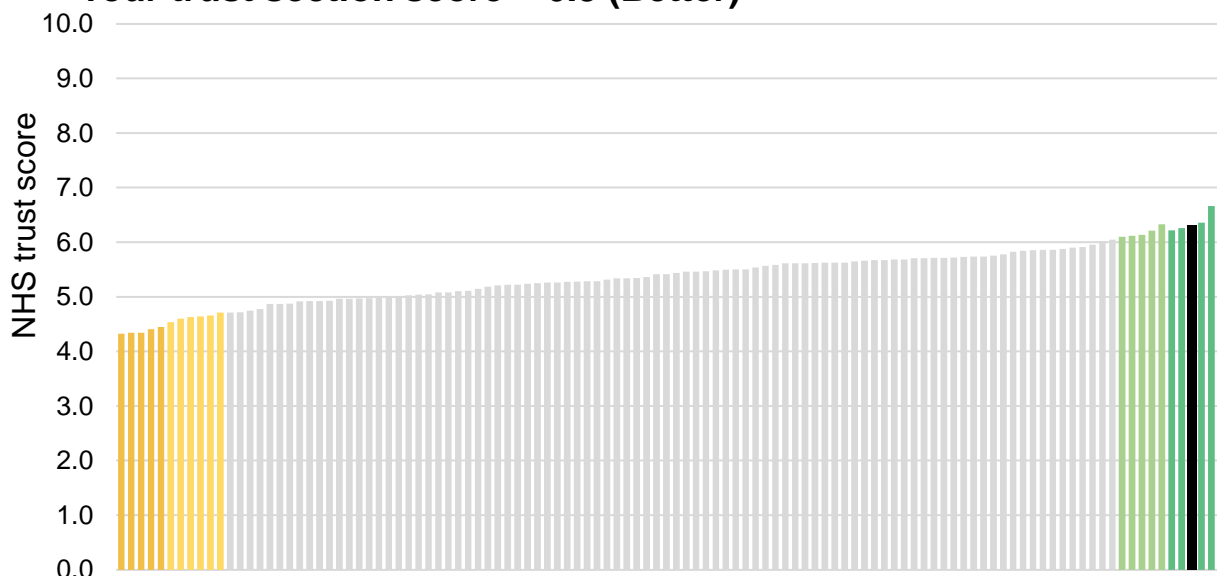
# The start of your care during pregnancy

## Section score

This shows the range of section scores for all NHS trusts included in the survey that submitted attribution data for antenatal care received. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'the start of your care during pregnancy' is calculated from questions B3 to B5. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



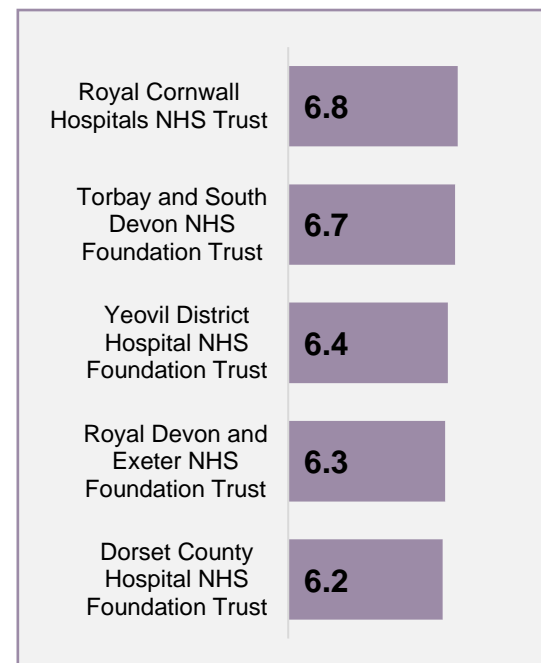
### Your trust section score = 6.3 (Better)



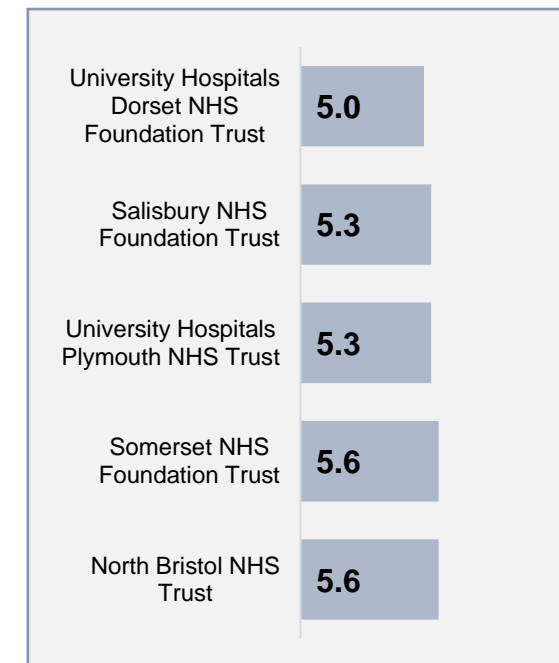
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores



### Trusts with the lowest scores



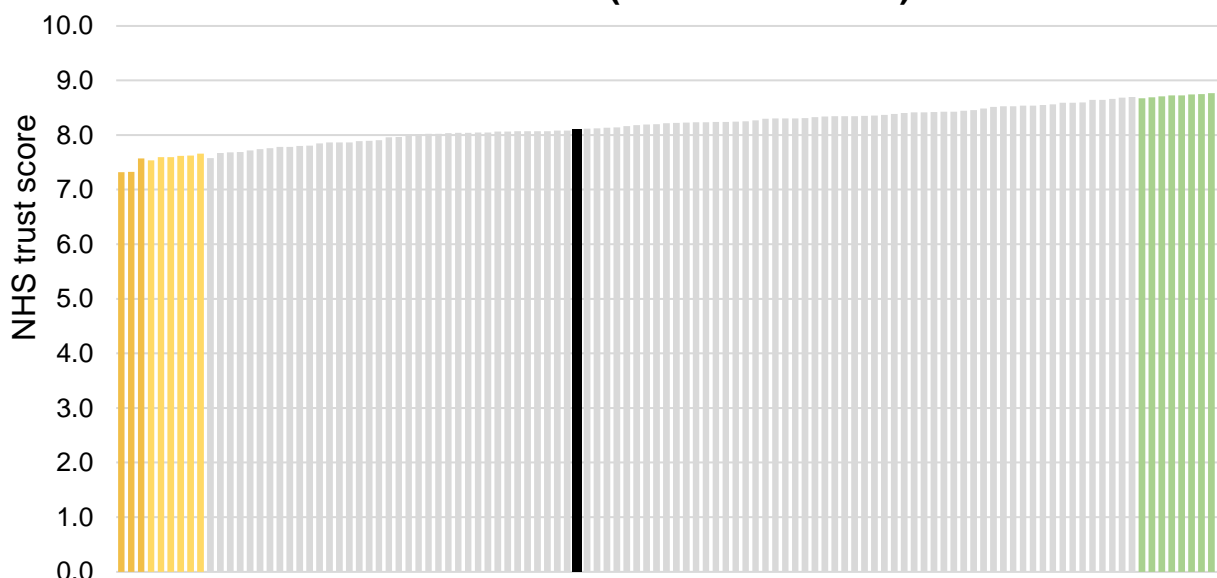
# Antenatal check-ups

## Section score

This shows the range of section scores for all NHS trusts included in the survey that submitted attribution data for antenatal care received. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'antenatal check-ups' is calculated from questions B8 to B11. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



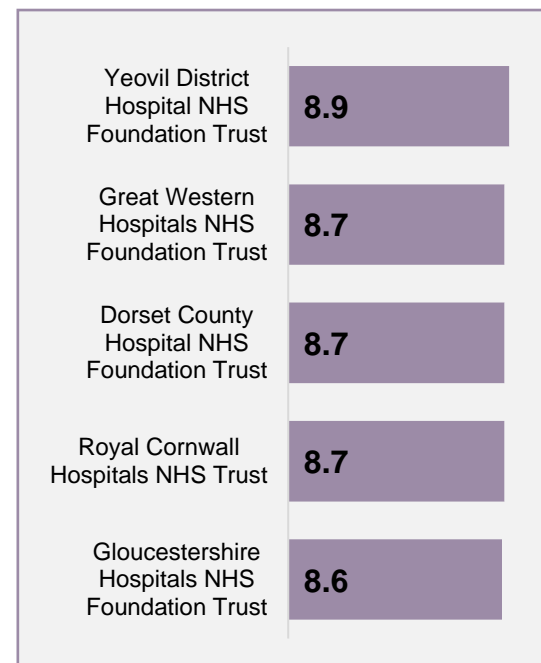
### Your trust section score = 8.1 (About the same)



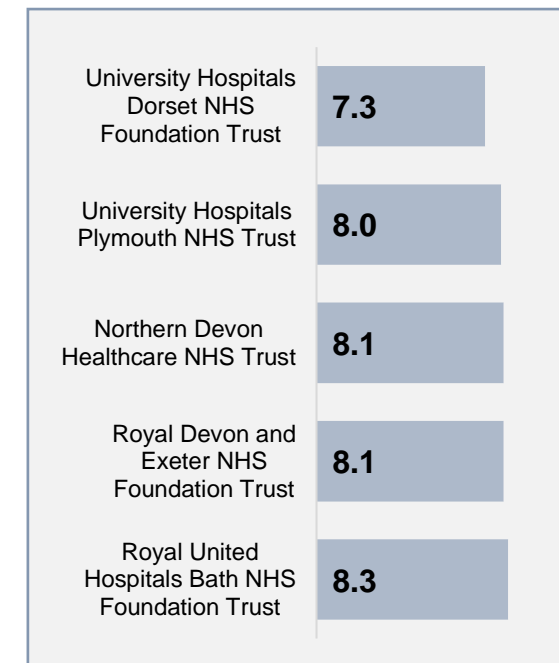
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores



### Trusts with the lowest scores





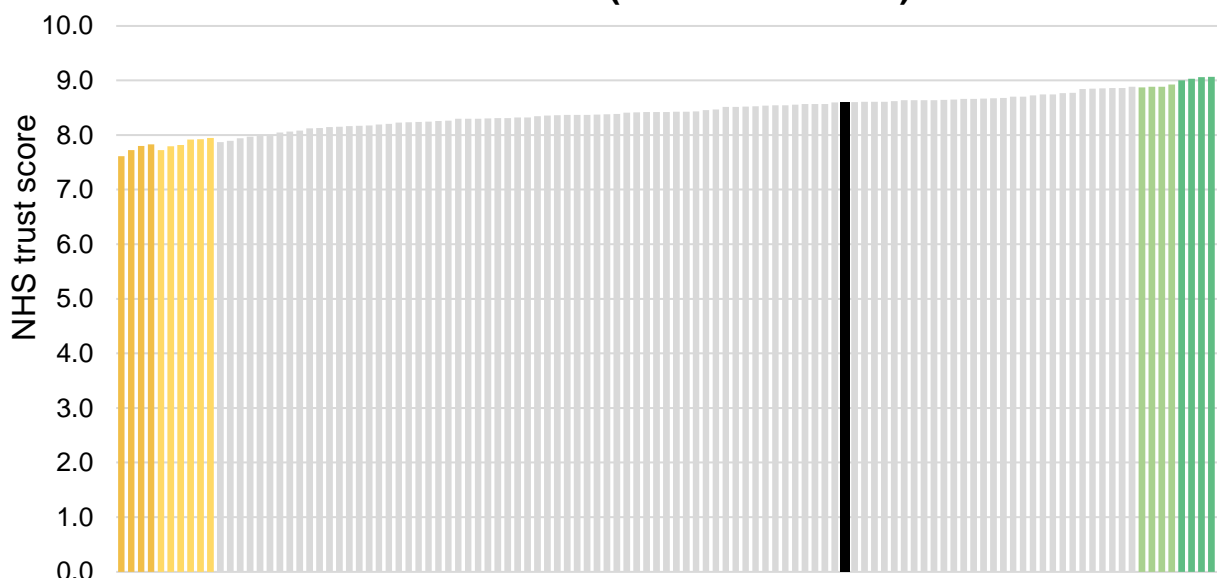
# During your pregnancy

## Section score

This shows the range of section scores for all NHS trusts included in the survey that submitted attribution data for antenatal care received. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'during your pregnancy' is calculated from questions B12 to B18. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



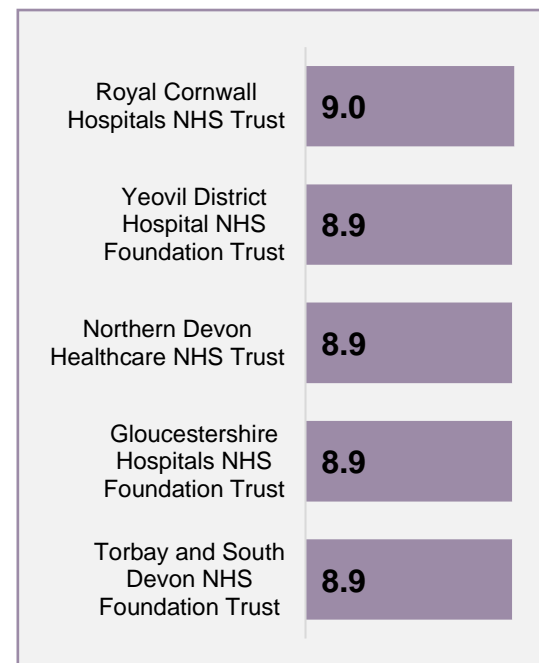
### Your trust section score = 8.6 (About the same)



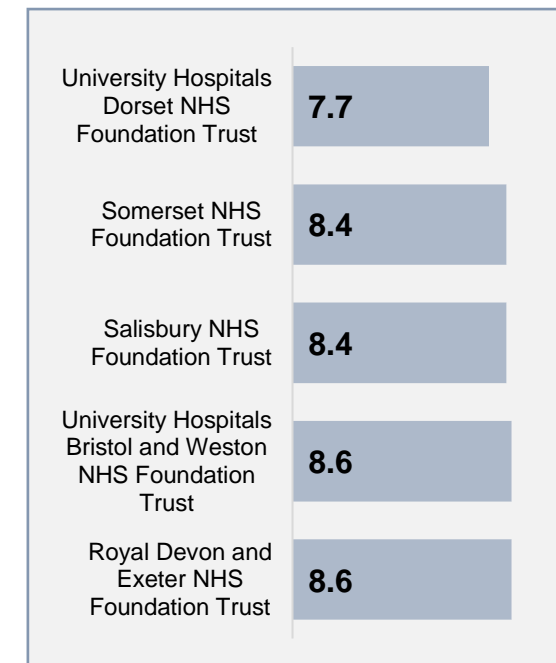
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores

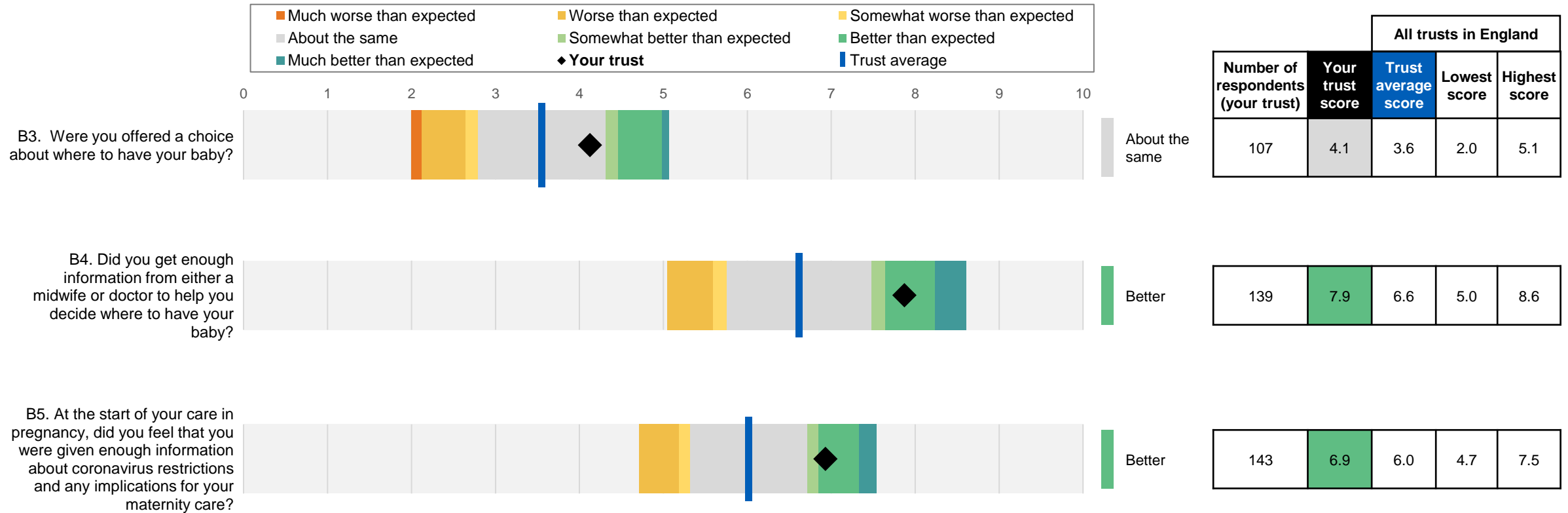


### Trusts with the lowest scores



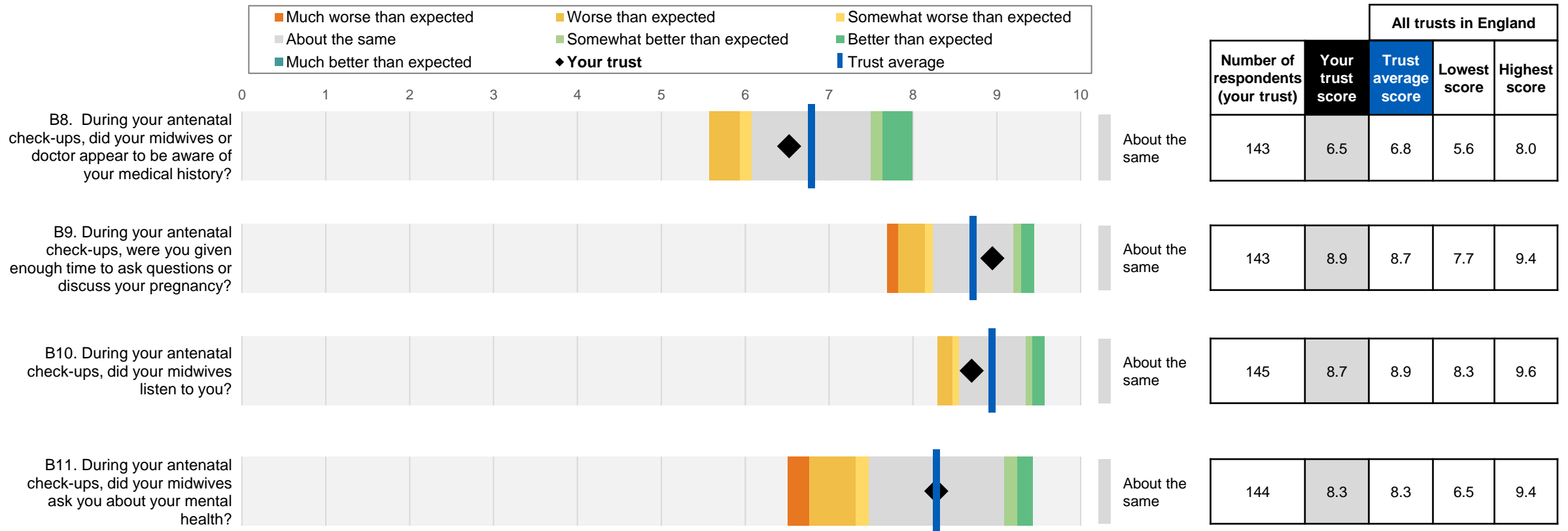
# Benchmarking - Antenatal care

## Question scores: Start of your pregnancy



# Benchmarking - Antenatal care (continued)

## Question scores: Antenatal check-ups



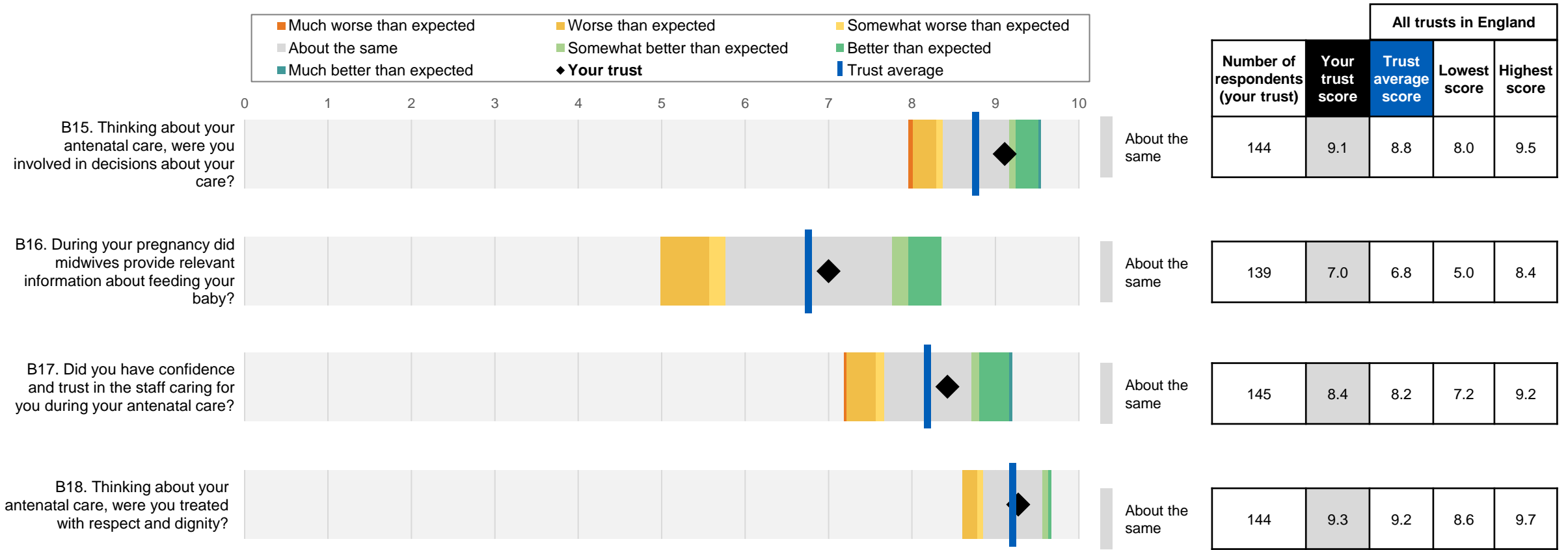
# Benchmarking - Antenatal care (continued)

## Question scores: During your pregnancy



# Benchmarking - Antenatal care (continued)

## Question scores: During your pregnancy



# Benchmarking

## Labour and birth



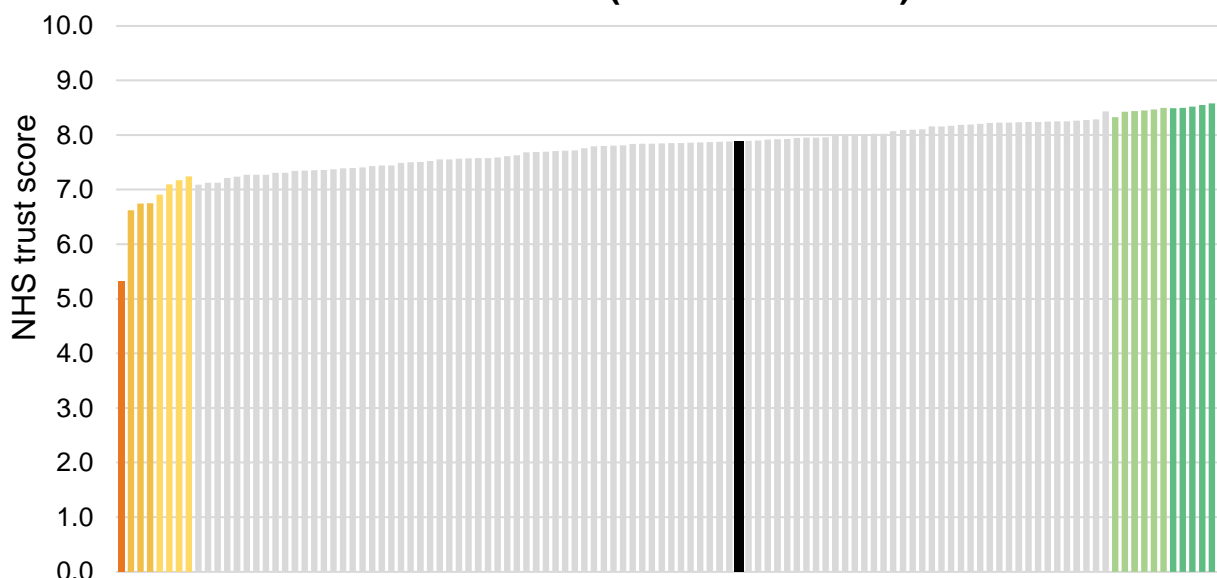
# Your labour and birth

## Section score

This shows the range of section scores for all NHS trusts included in the survey. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'your labour and birth' is calculated from questions C4 to C7 and C12. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



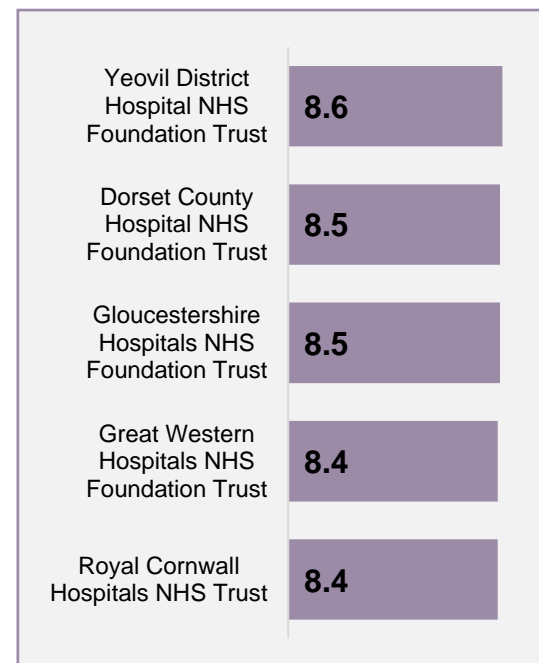
### Your trust section score = 7.9 (About the same)



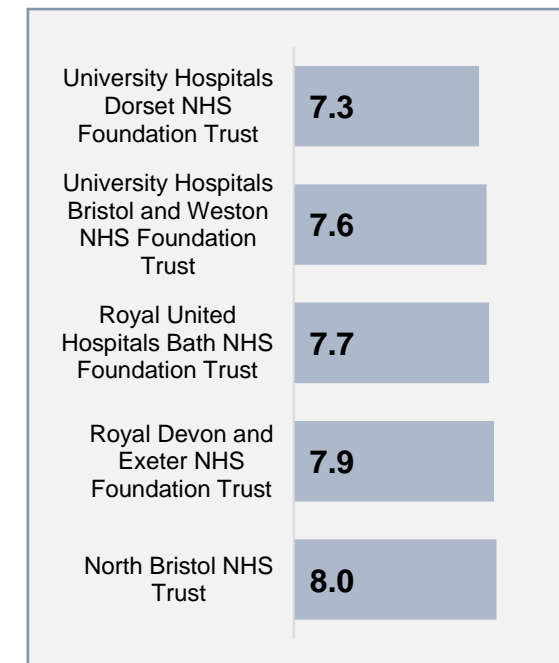
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores



### Trusts with the lowest scores



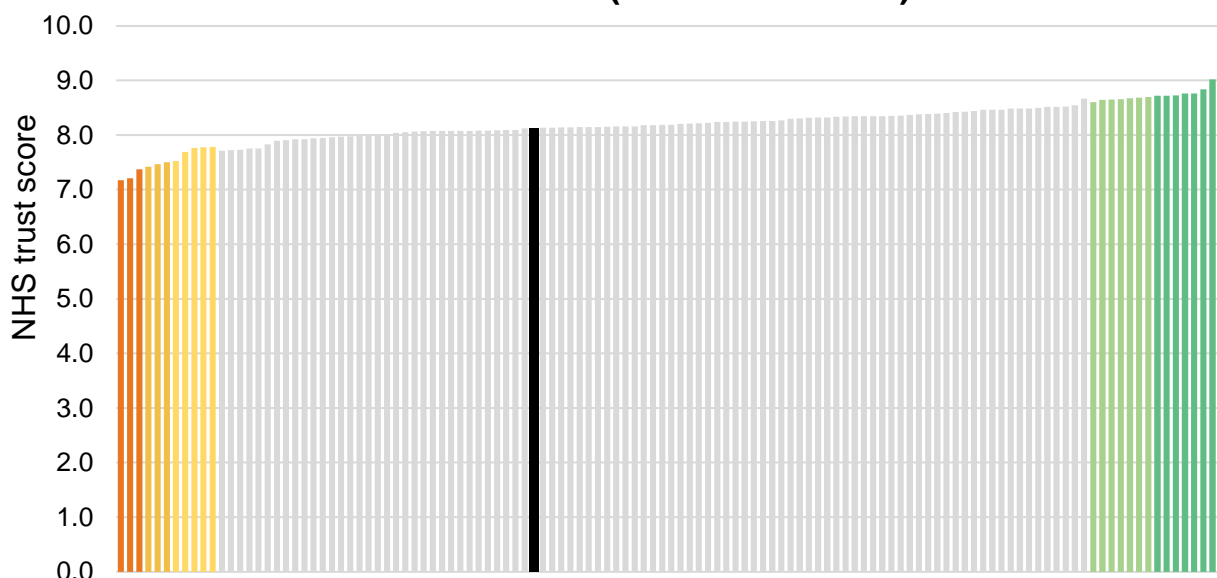
# Staff caring for you

## Section score

This shows the range of section scores for all NHS trusts included in the survey. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'staff caring for you' is calculated from questions C14 and C16 to C24. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



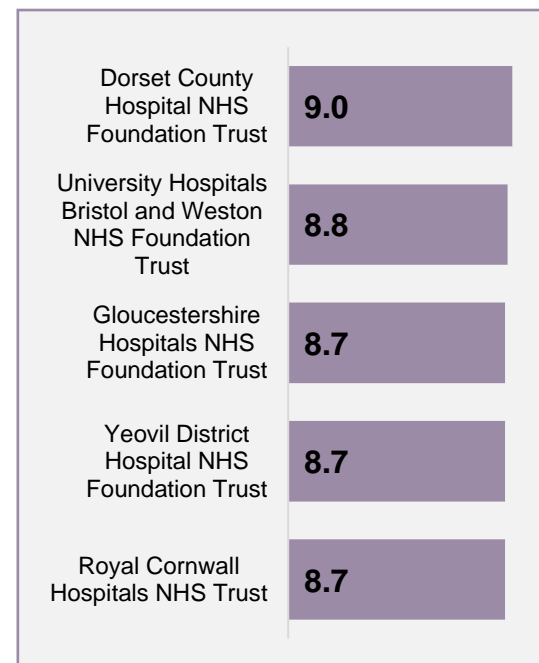
### Your trust section score = 8.1 (About the same)



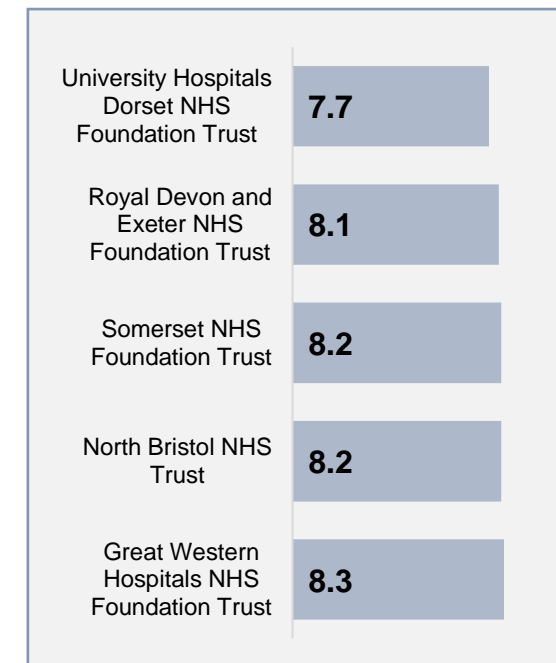
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores



### Trusts with the lowest scores





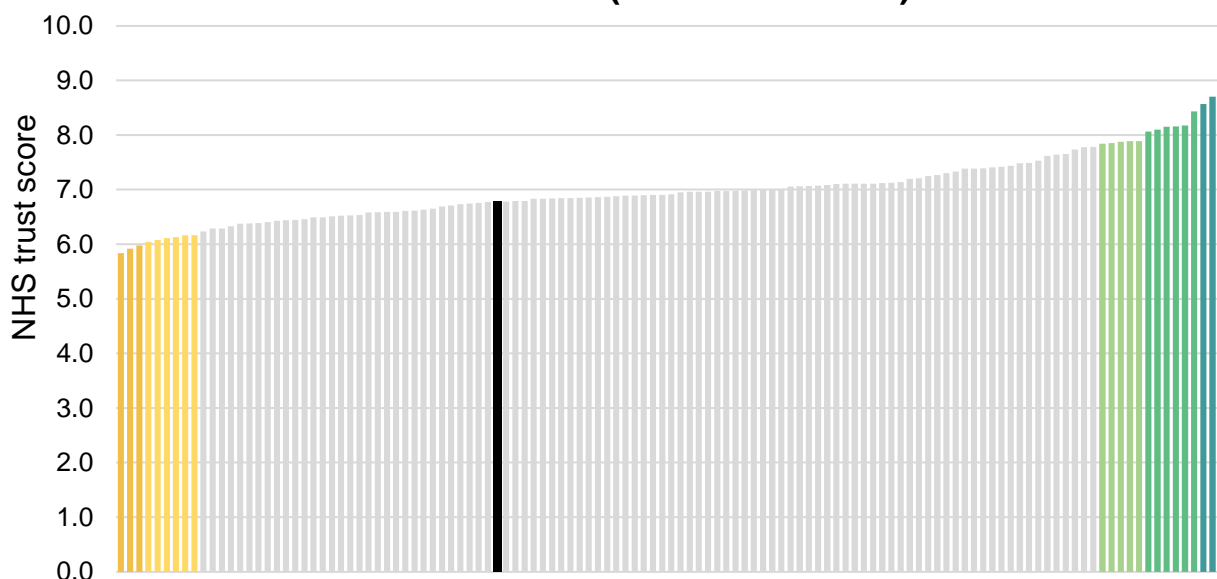
# Care in hospital after birth

## Section score

This shows the range of section scores for all NHS trusts included in the survey. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'care in hospital after birth' is calculated from questions D2 and D4 to D8. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



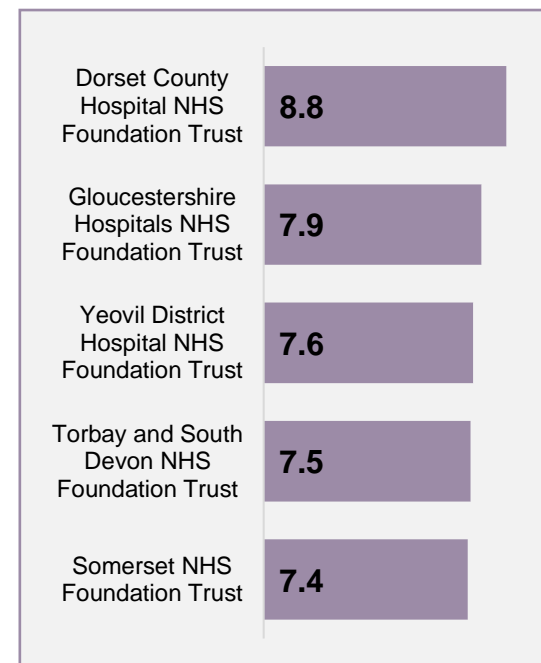
**Your trust section score = 6.8 (About the same)**



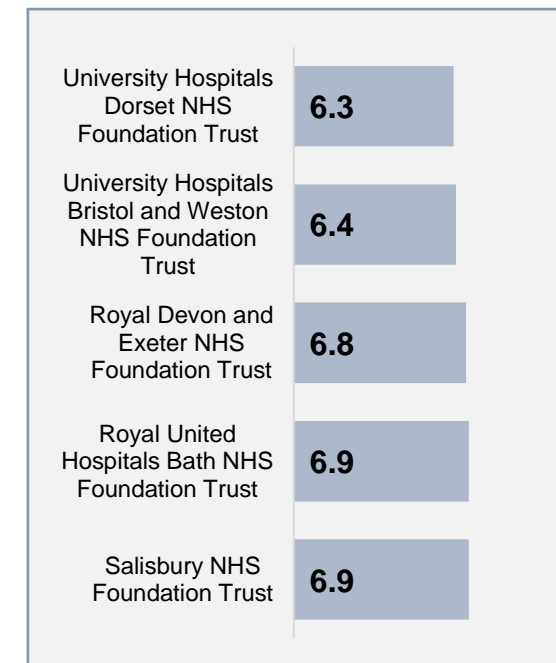
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores

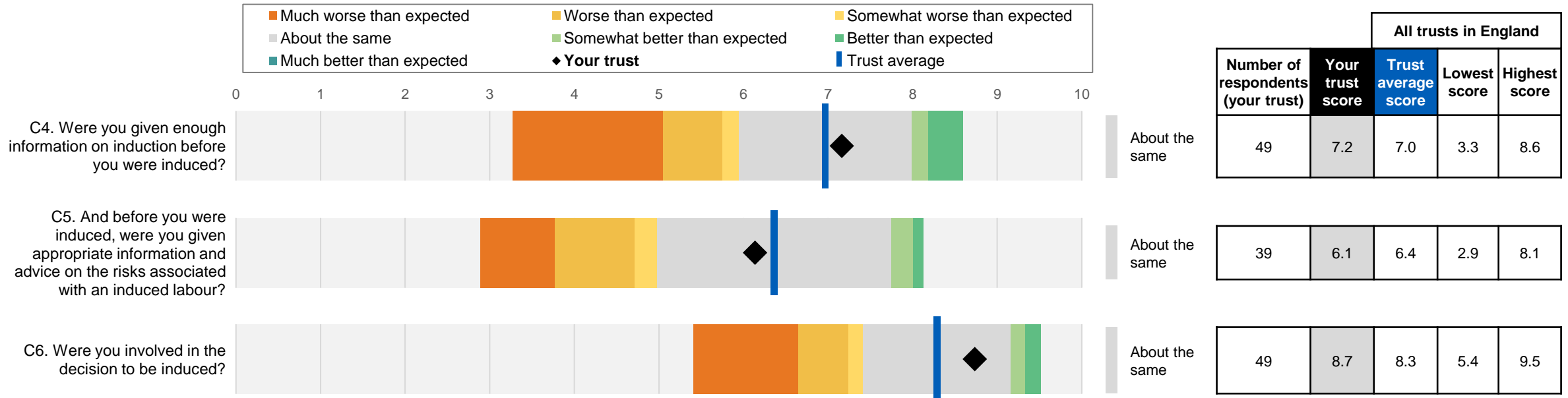


### Trusts with the lowest scores



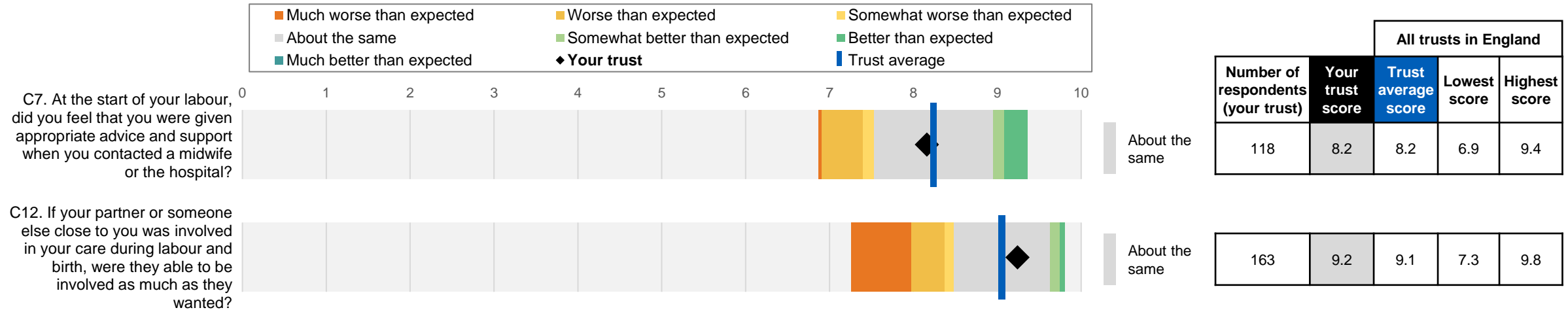
# Benchmarking - Labour and birth

## Question scores: Your labour and birth



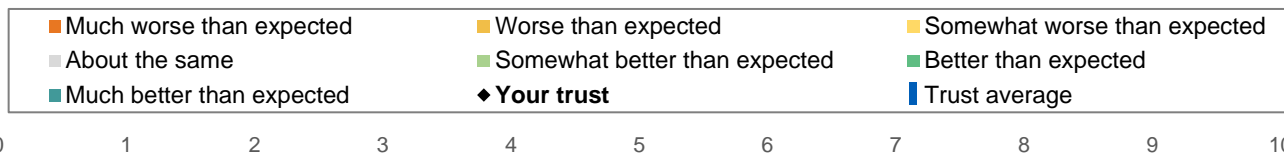
# Benchmarking - Labour and birth (continued)

## Question scores: Your labour and birth

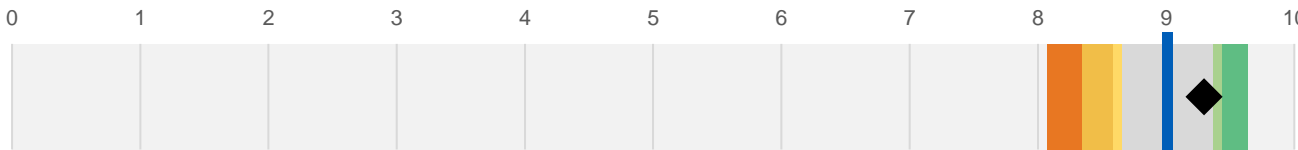


# Benchmarking - Labour and birth (continued)

## Question scores: Staff caring for you



C14. Did the staff treating and examining you introduce themselves?



About the same

Number of respondents (your trust)	Your trust score	All trusts in England		
		Trust average score	Lowest score	Highest score
163	9.3	9.0	8.1	9.6

C16. Were you (and / or your partner or a companion) left alone by midwives or doctors at a time when it worried you?



About the same

169	7.4	7.4	5.4	9.0
-----	-----	-----	-----	-----

C17. If you raised a concern during labour and birth, did you feel that it was taken seriously?



About the same

100	7.7	7.8	6.4	9.0
-----	-----	-----	-----	-----

C18. During labour and birth, were you able to get a member of staff to help you when you needed it?



About the same

154	8.2	8.5	7.2	9.4
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C19. Thinking about your care during labour and birth, were you spoken to in a way you could understand?

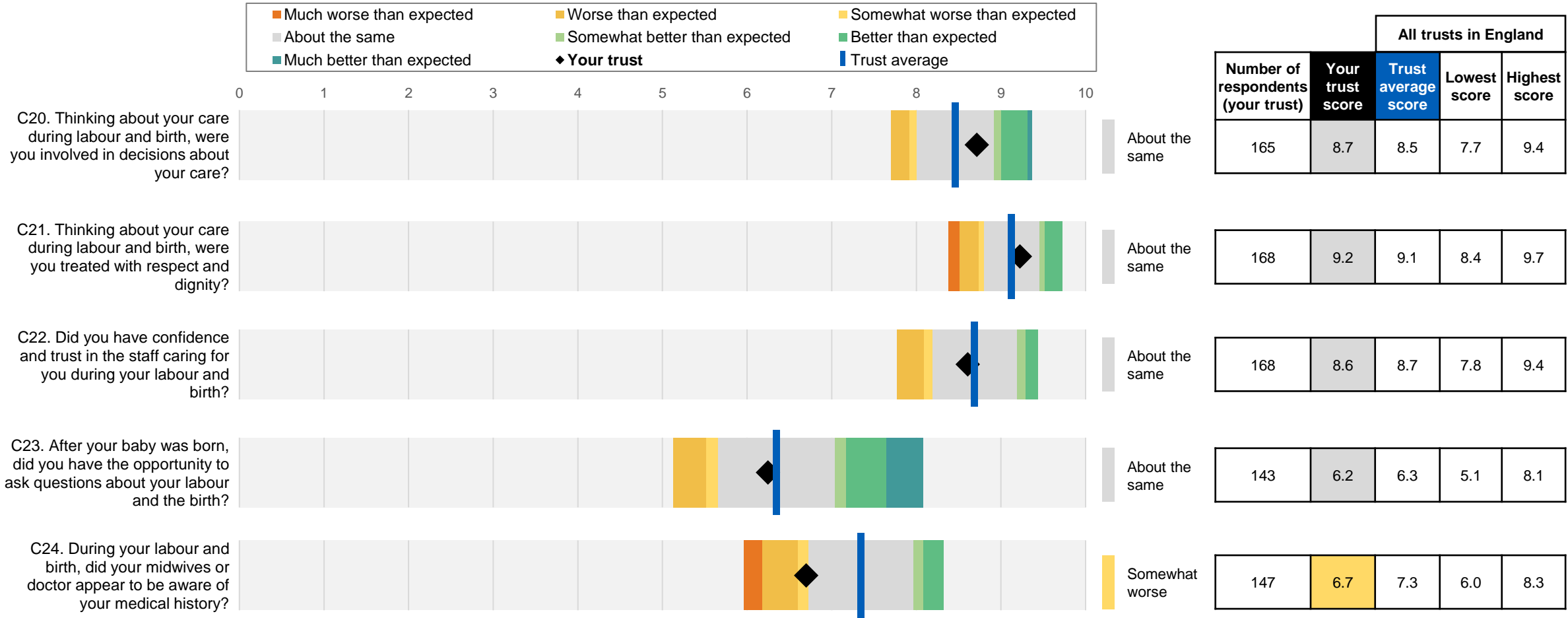


About the same

168	9.2	9.2	8.5	9.7
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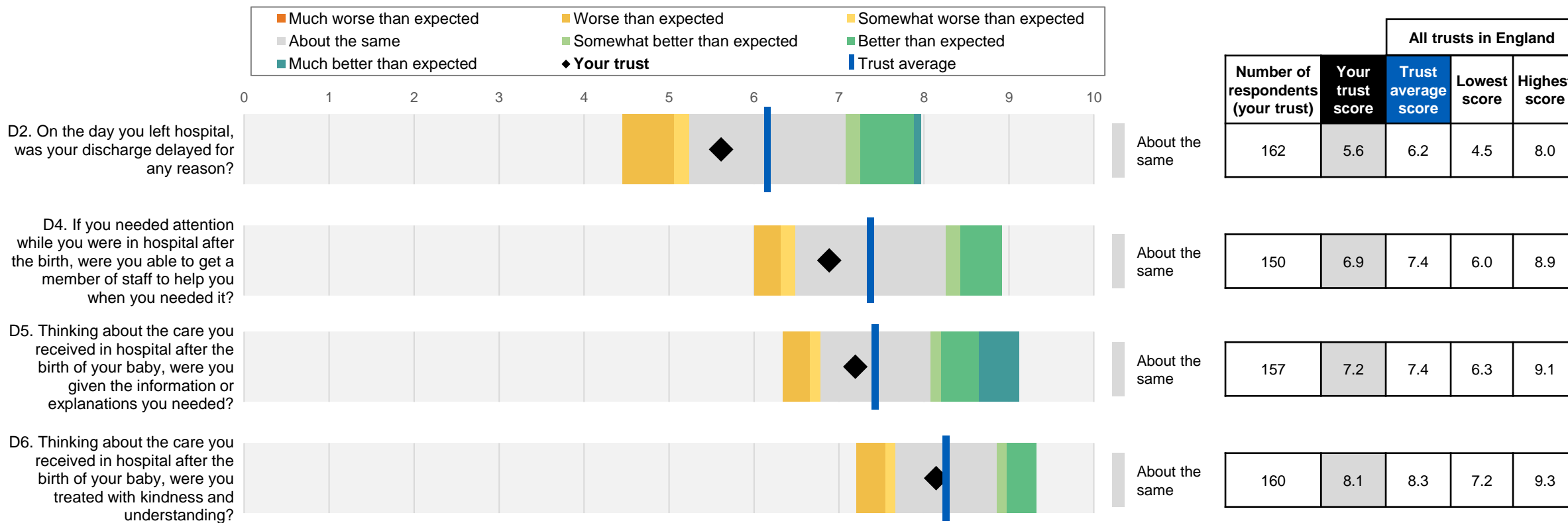
# Benchmarking - Labour and birth (continued)

## Question scores: Staff caring for you



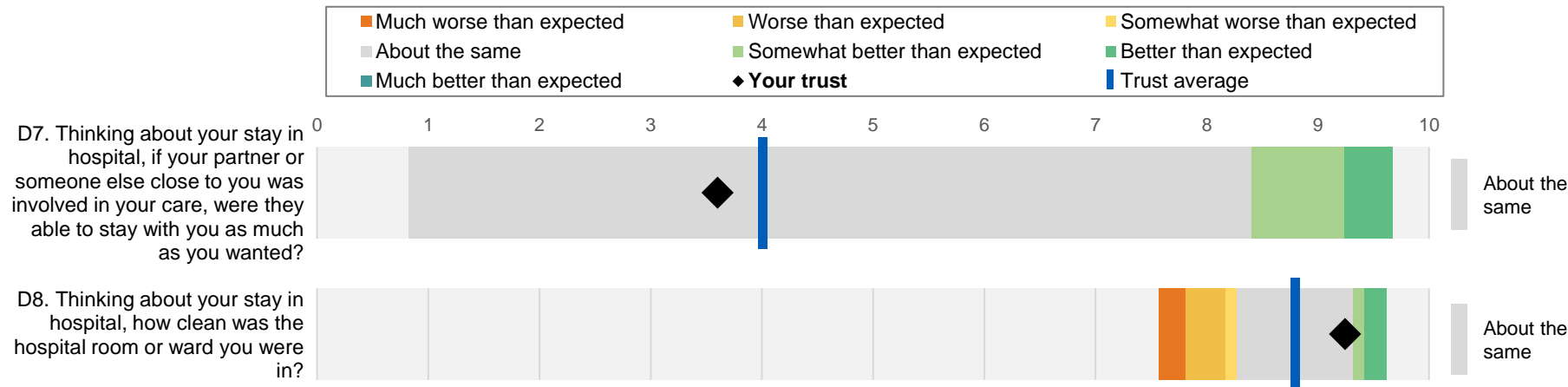
# Benchmarking - Labour and birth (continued)

## Question scores: Care in hospital after birth



# Benchmarking - Labour and birth (continued)

## Question scores: Care in hospital after birth



Number of respondents (your trust)	Your trust score	All trusts in England		
		Trust average score	Lowest score	Highest score
144	3.6	4.0	0.8	9.7

162	9.2	8.8	7.6	9.6
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# Benchmarking

## Postnatal care





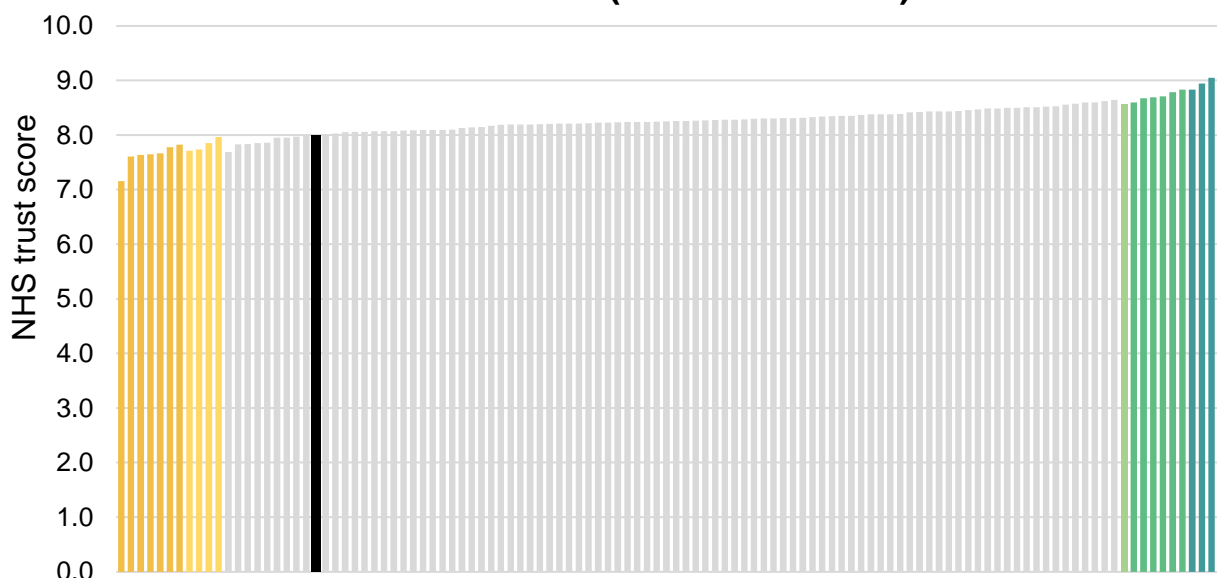
# Feeding your baby

## Section score

This shows the range of section scores for all NHS trusts included in the survey that submitted attribution data for postnatal care received. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'feeding your baby' is calculated from questions E2 and E3. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



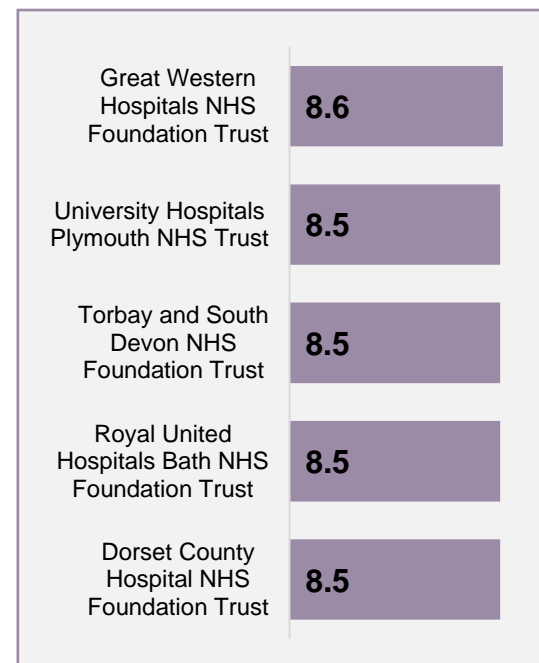
### Your trust section score = 8.0 (About the same)



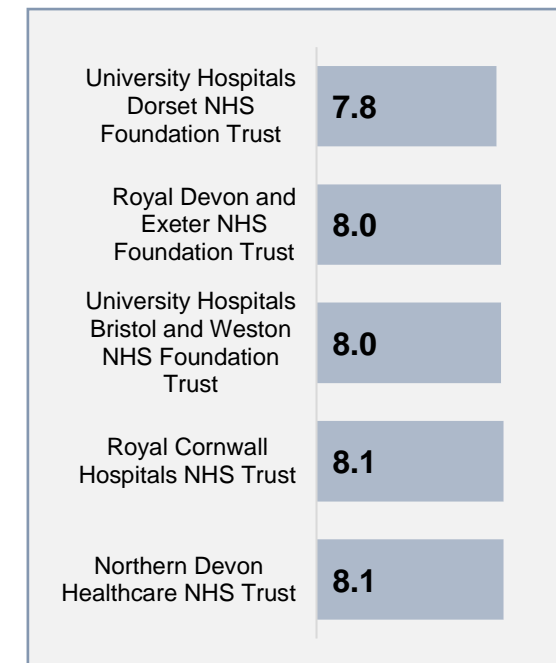
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores



### Trusts with the lowest scores



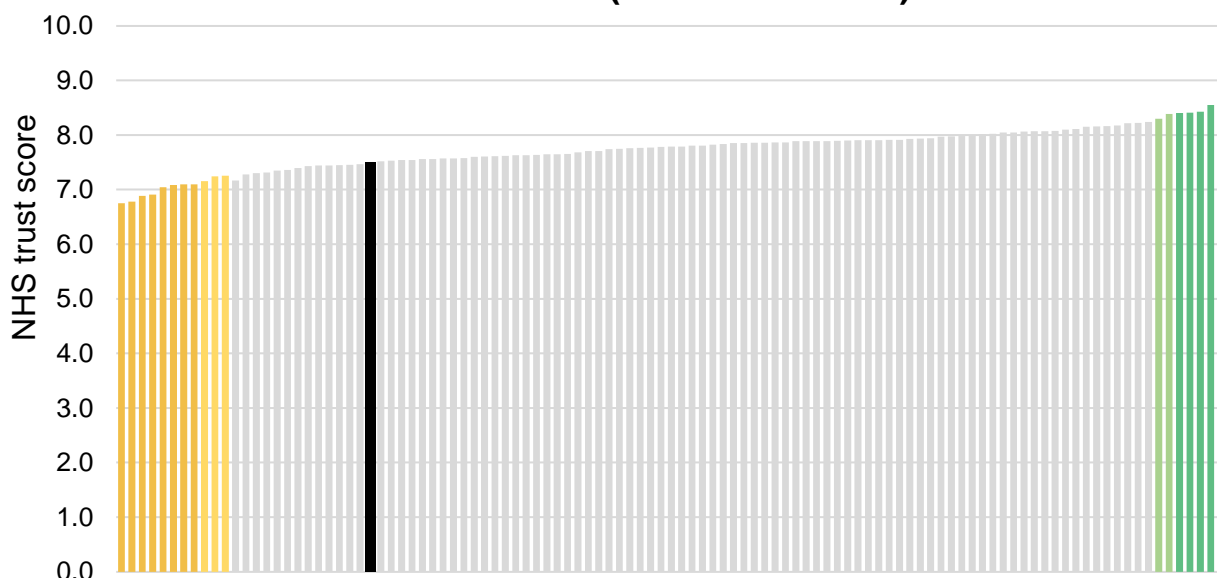
# Care at home after birth

## Section score

This shows the range of section scores for all NHS trusts included in the survey that submitted attribution data for postnatal care received. Section scores are calculated as the mean of a selection of questions that fall under a particular theme. In this case, 'care at home after birth' is calculated from questions F1 to F2, F5 to F9 and F11 to F17. The colour of the line denotes whether a trust has performed better, worse, or about the same compared with all other trusts (as detailed in the legend). The result for your trust is shown in black. The 'expected range' analysis technique takes into account the number of respondents for each trust, and the scores for all trusts. As a result, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust.



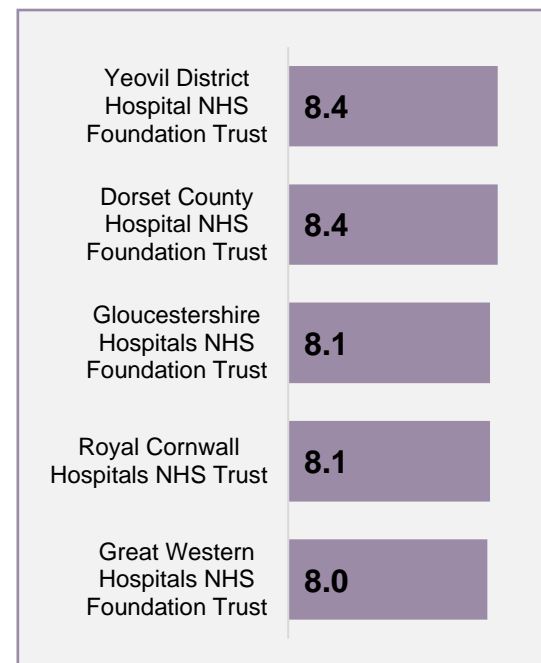
### Your trust section score = 7.5 (About the same)



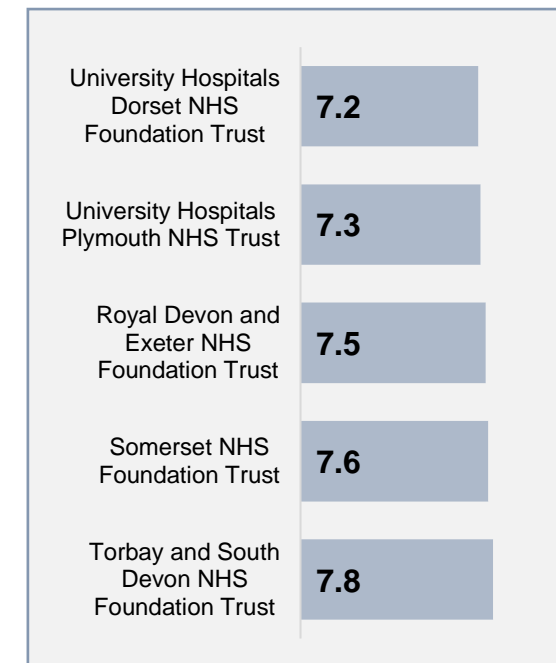
Each vertical line represents an individual NHS trust  
Trust score is not shown when there are fewer than 30 respondents

## Comparison with other trusts within your region

### Trusts with the highest scores

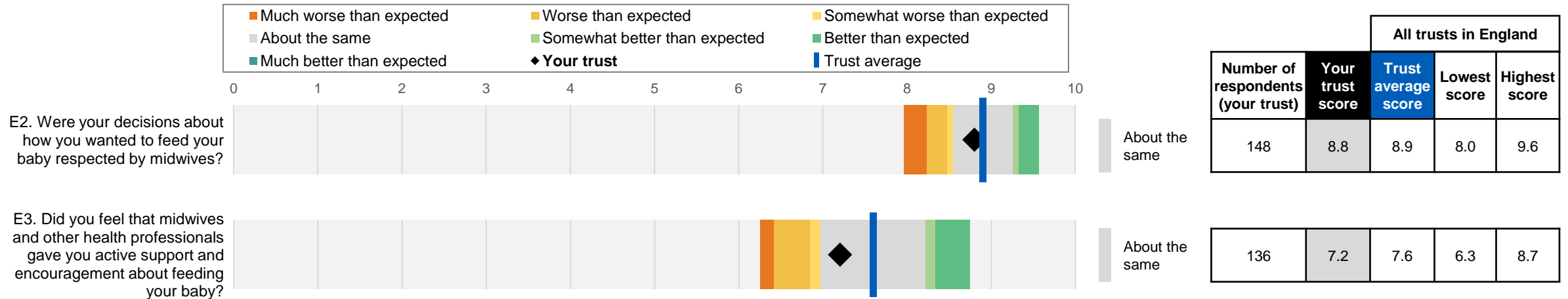


### Trusts with the lowest scores



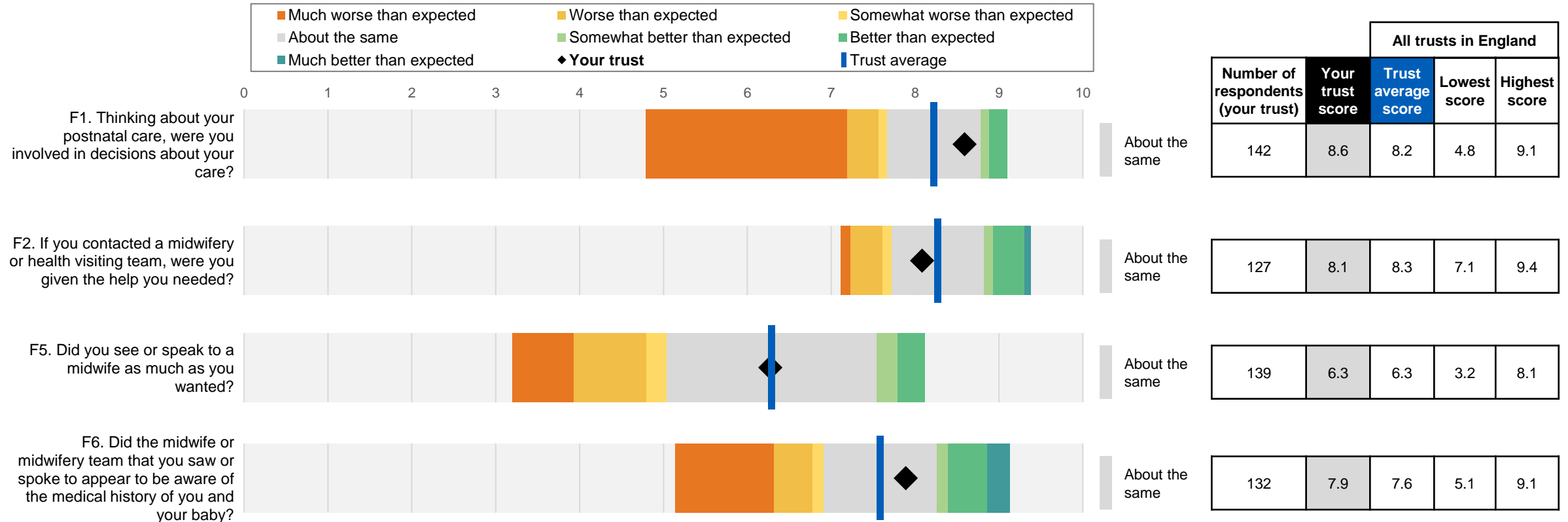
# Benchmarking - Postnatal care

## Question scores: Feeding your baby



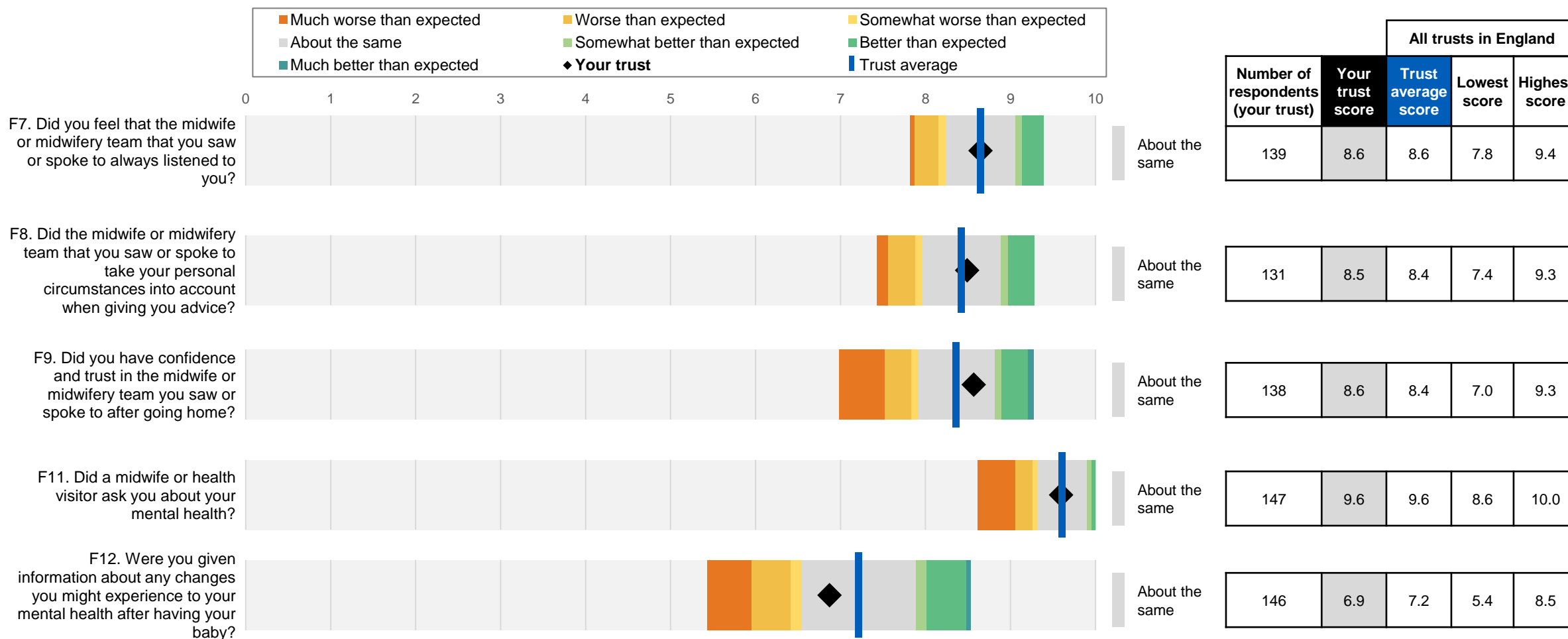
# Benchmarking - Postnatal care (continued)

## Question scores: Care at home after birth



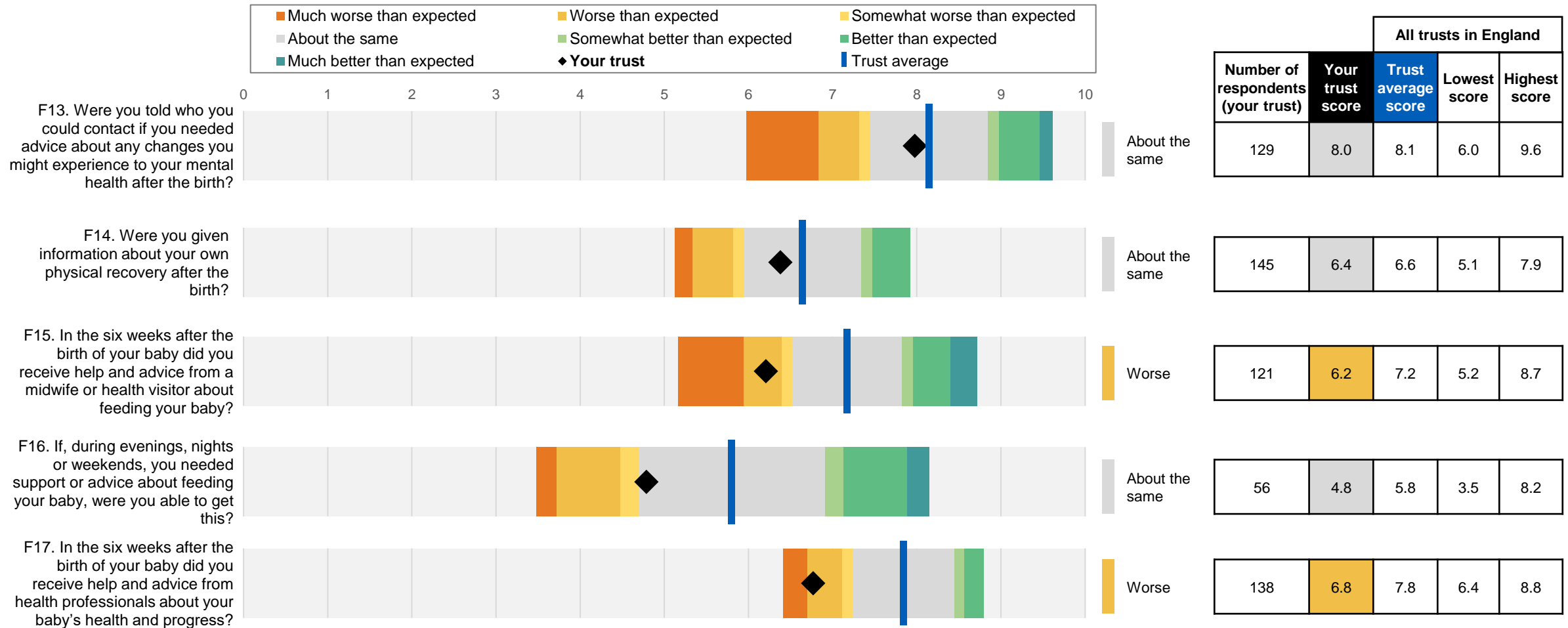
# Benchmarking - Postnatal care (continued)

## Question scores: Care at home after birth



# Benchmarking - Postnatal care (continued)

## Question scores: Care at home after birth



# Trends over time

## This section includes:

- your mean trust score for each evaluative question in the survey. This is the average of all scores that mothers from your trust provided in their survey response
- where comparable data is available over at least the past five surveys, the trend charts show the mean score for your trust by year. This allows you to see if your trust has made improvements over time
- they also include the national mean score by year, to allow you to see whether your performance is in line with the national average or not
- where consistent data are not available for at least the past five surveys statistical significance testing has been carried out against the 2021 survey results for each relevant question
- for more guidance on interpreting these graphs, please see the next slide



# Trends over time

The following section presents comparisons with previous survey results. Statistically significant differences in the trust mean score between 2021 and 2022 are highlighted to show where there is meaningful change between years.

**Historical trend charts are presented when there are at least five data points available** to plot on the chart. Five data points may not be available due to:

- changes to the questionnaire mean that a question is no longer comparable over time;
- organisational changes which impact comparability of results over time; or,
- historical errors with sampling or issues with fieldwork which impact comparability.

Statistically significant differences in the trust mean score between 2021 and 2022 are highlighted. These are carried out using a two sample t-test. Where a change in results is shown as 'significant', this indicates that this change is not due to random chance, but is likely due to some particular factor at your trust. Significant increases are indicated with a filled green circle, and significant decreases are in red.

**Where comparable data is not available, statistical significance test tables are provided.** Statistically significant changes in your trust score between 2021 and 2022 are shown in the far right column 'Change from 2021 survey', significant increases are indicated with a green arrow and significant decreases are indicated with a red arrow.

The following questions were new or changed for 2022 and therefore are not included in this section: B17, B18, C5, C24 and F1.

## Historical trend chart example



## Significance test table example

	2022 Trust Score	2021 Trust Score	No. of respondents	Change from 2021 survey
<b>The start of your care in pregnancy</b>				
B4. Did you get enough information from either a midwife or doctor to help you decide where to have your baby?	4.3	7.1	178	▼



# Trends over time

## Antenatal care

## Trends over time - Antenatal care

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

		Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>The start of your care in pregnancy</b>												
B3.	Were you offered a choice about where to have your baby?								4.1	4.0	107	
B4.	Did you get enough information from either a midwife or doctor to help you decide where to have your baby?								7.9	6.9	139	▲
B5.	At the start of your care in pregnancy, did you feel that you were given enough information about coronavirus restrictions and any implications for your maternity care?								6.9	5.5	143	▲

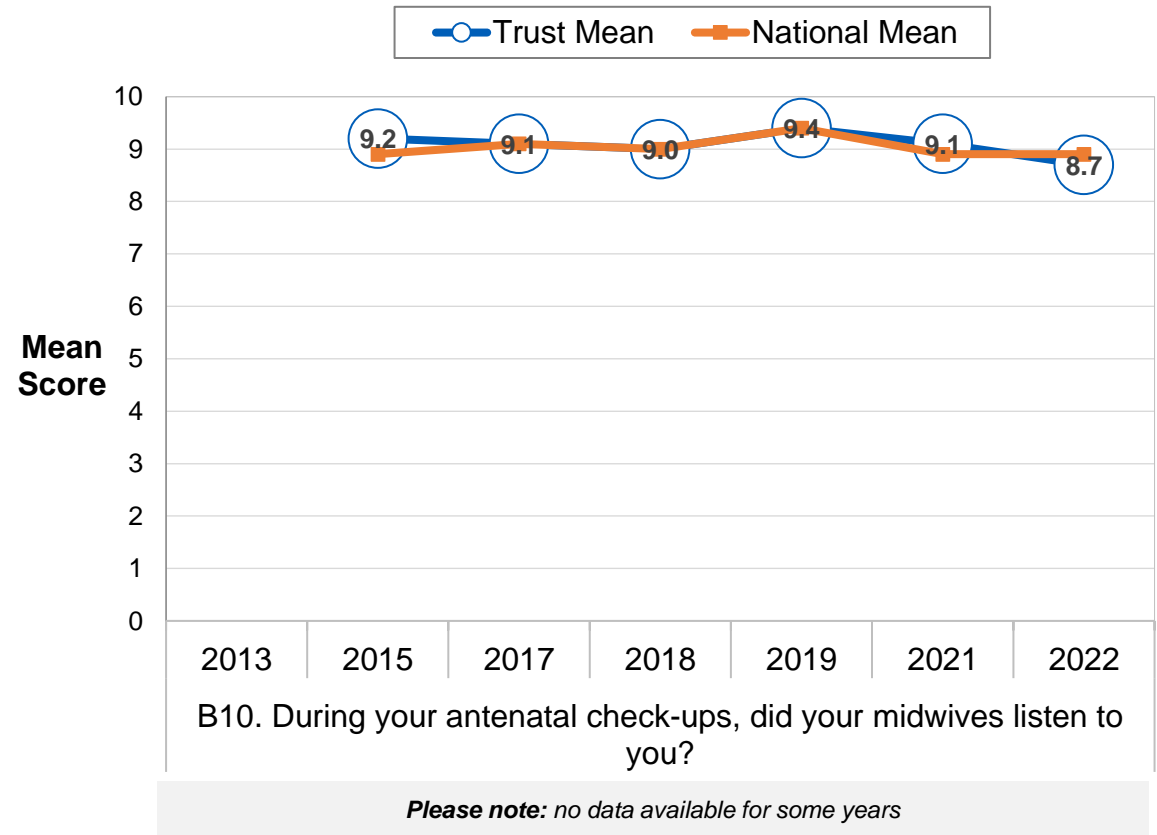
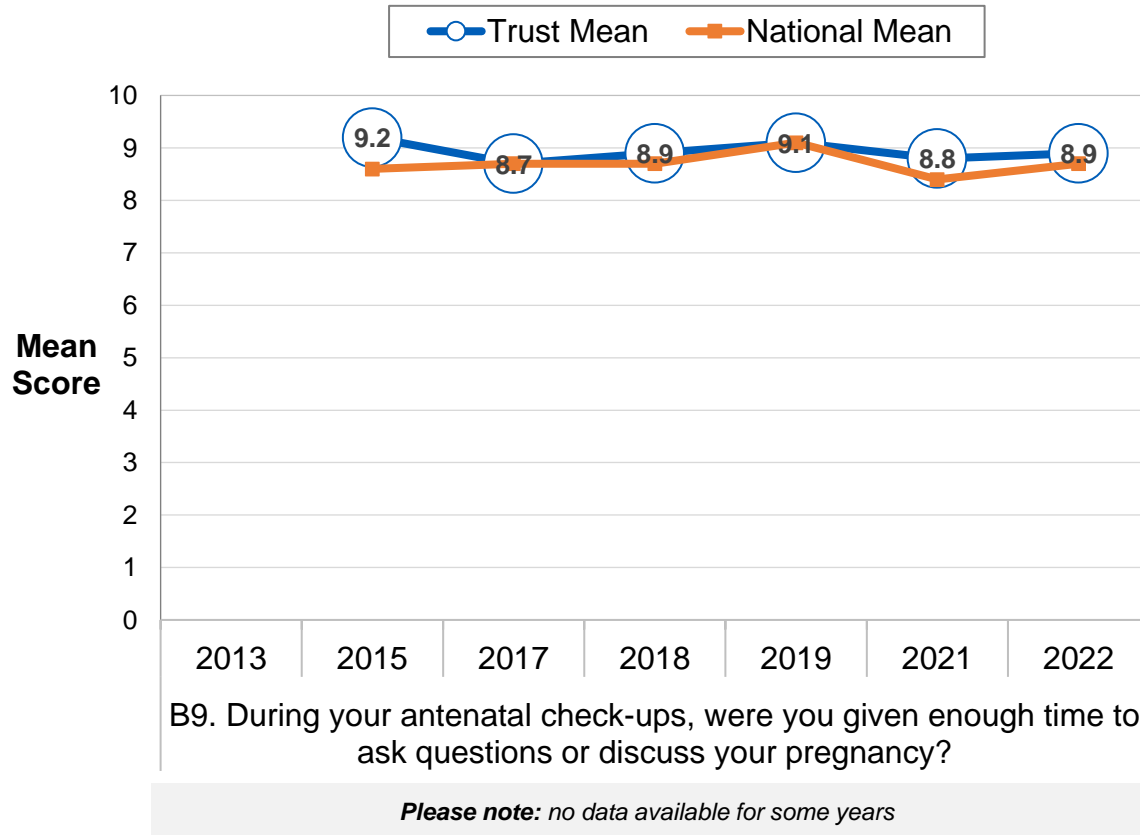
▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

# Trends over time - Antenatal care

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## Antenatal check-ups



- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

## Trends over time - Antenatal care (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

		Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Antenatal check-ups</b>												
B8.	During your antenatal check-ups, did your midwives or doctor appear to be aware of your medical history?								6.5	6.7	143	
B11.	During your antenatal check-ups, did your midwives ask you about your mental health?								8.3	7.9	144	

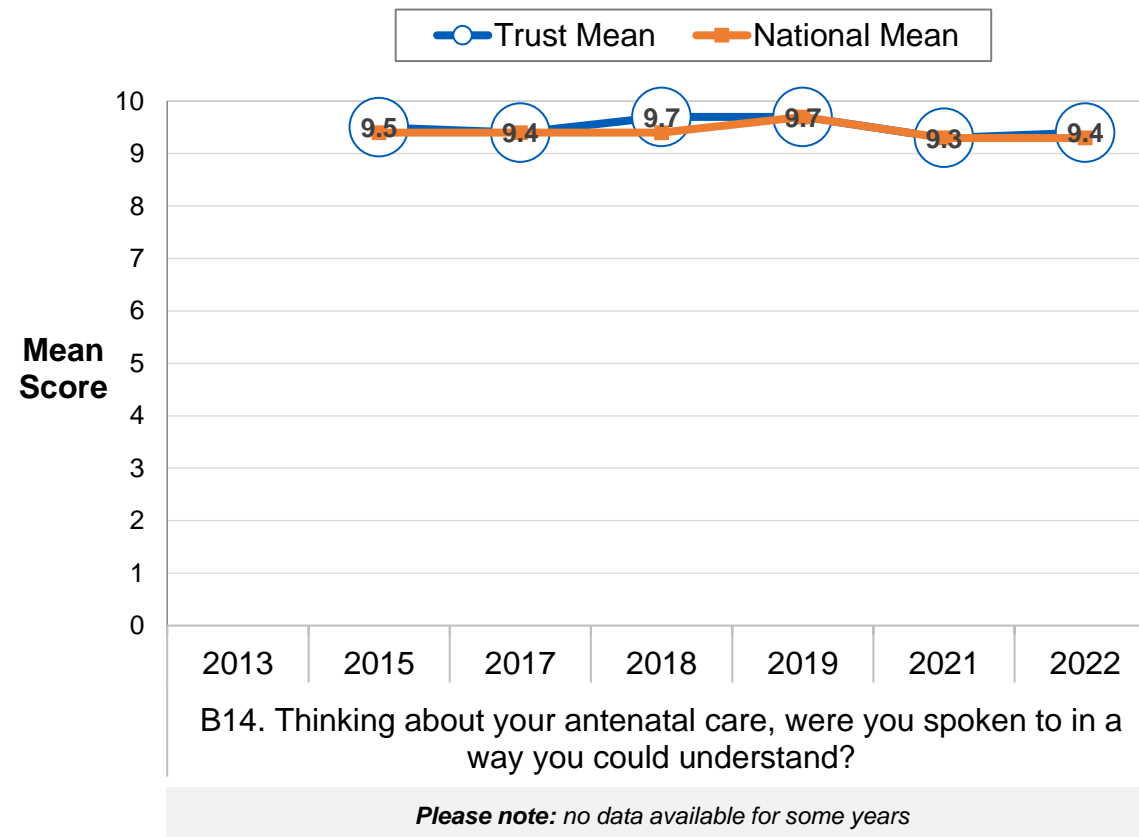
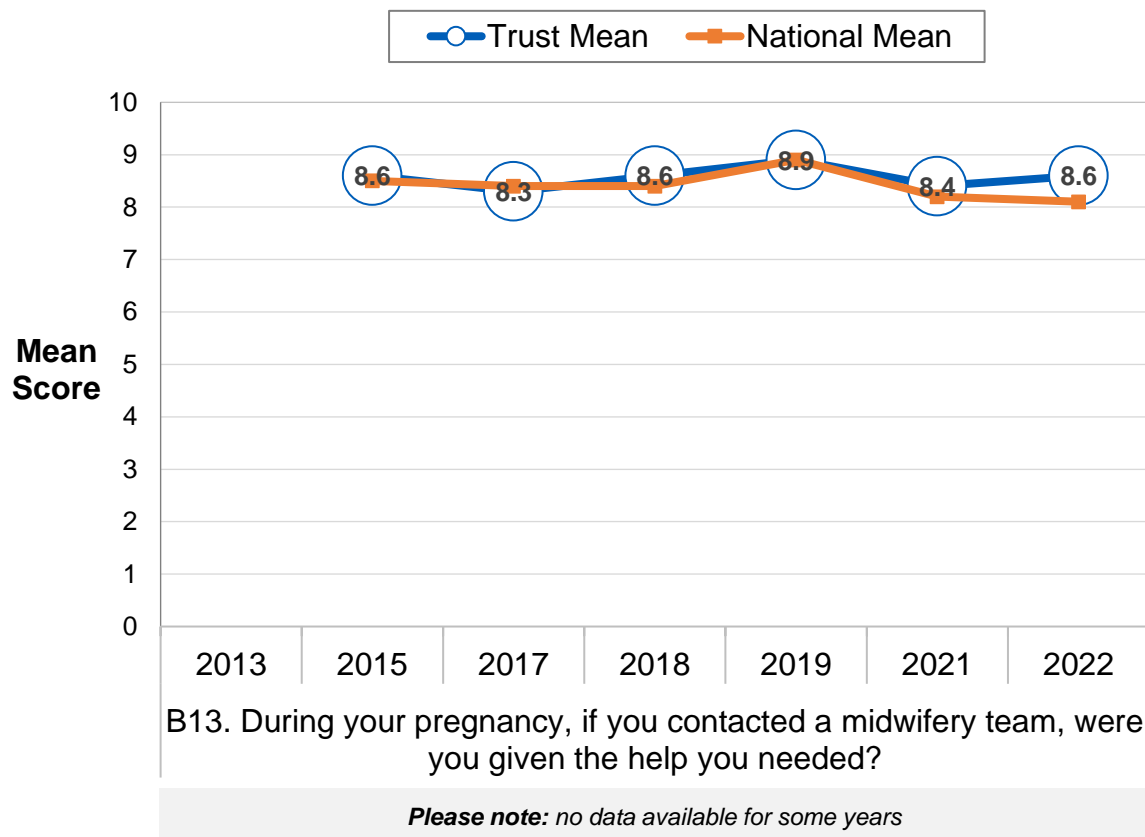
▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

# Trends over time - Antenatal care

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## During your pregnancy



- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

## Trends over time - Antenatal care (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

		Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>During your pregnancy</b>												
B12.	Were you given enough support for your mental health during your pregnancy?								8.4	8.3	95	
B15.	Thinking about your antenatal care, were you involved in decisions about your care?								9.1	8.9	144	
B16.	During your pregnancy did midwives provide relevant information about feeding your baby?								7.0	6.7	139	

▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

**Trends over time**

**Labour and birth**

## Trends over time - Labour and birth (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

		Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Your labour and birth</b>												
C4.	Were you given enough information on induction before you were induced?								7.2	7.5	49	
C6.	Were you involved in the decision to be induced?								8.7	9.0	49	

▼▲ Significant difference between 2022 and 2021

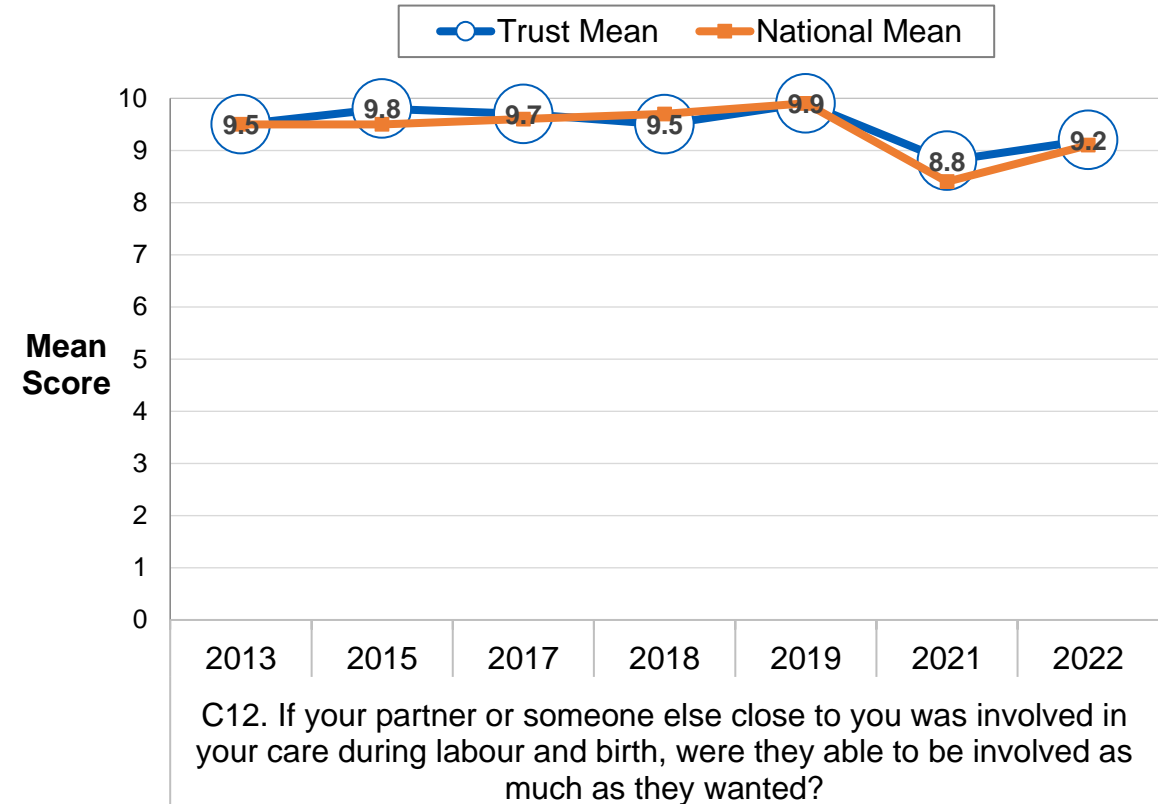
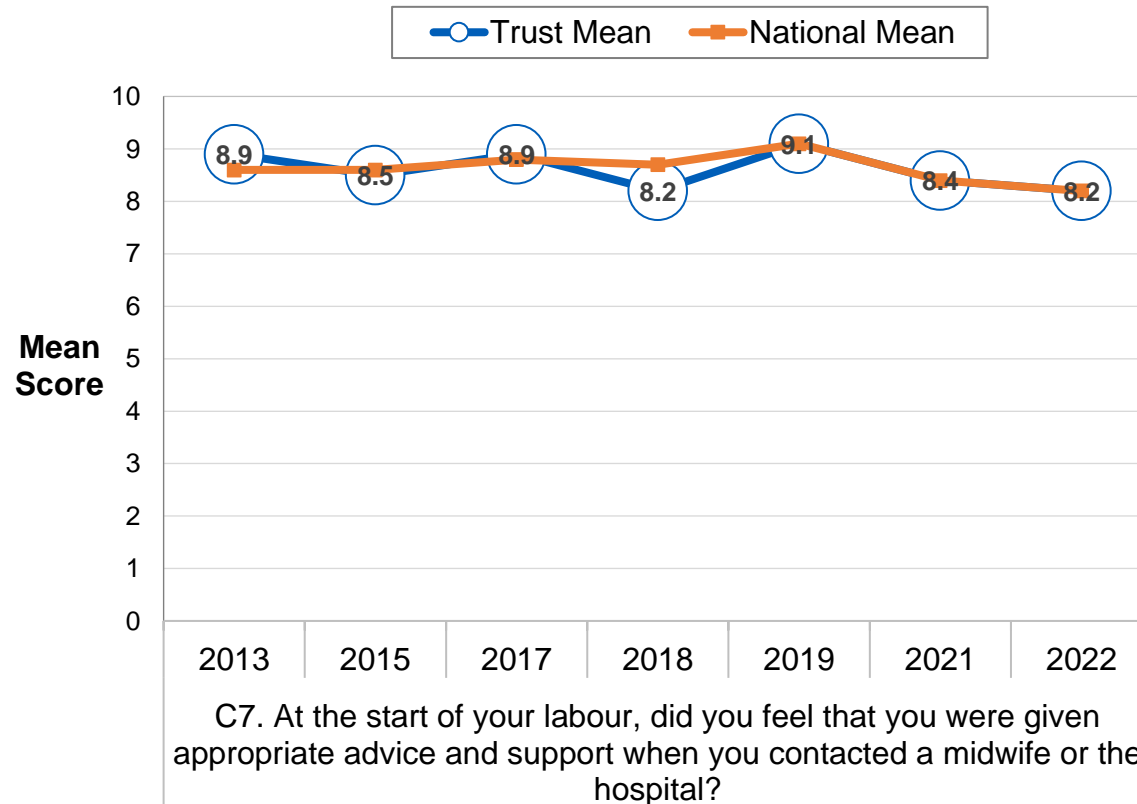
Blank No significant difference between 2022 and 2021



# Trends over time - Labour and birth

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## Your labour and birth

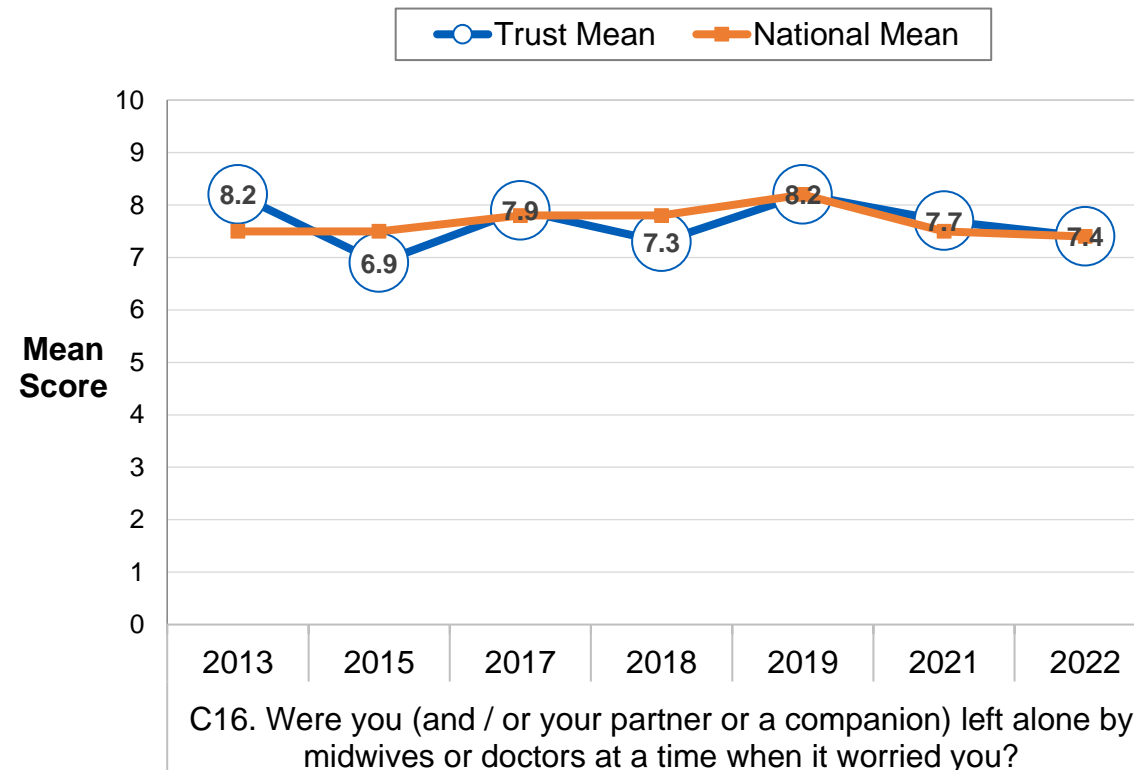
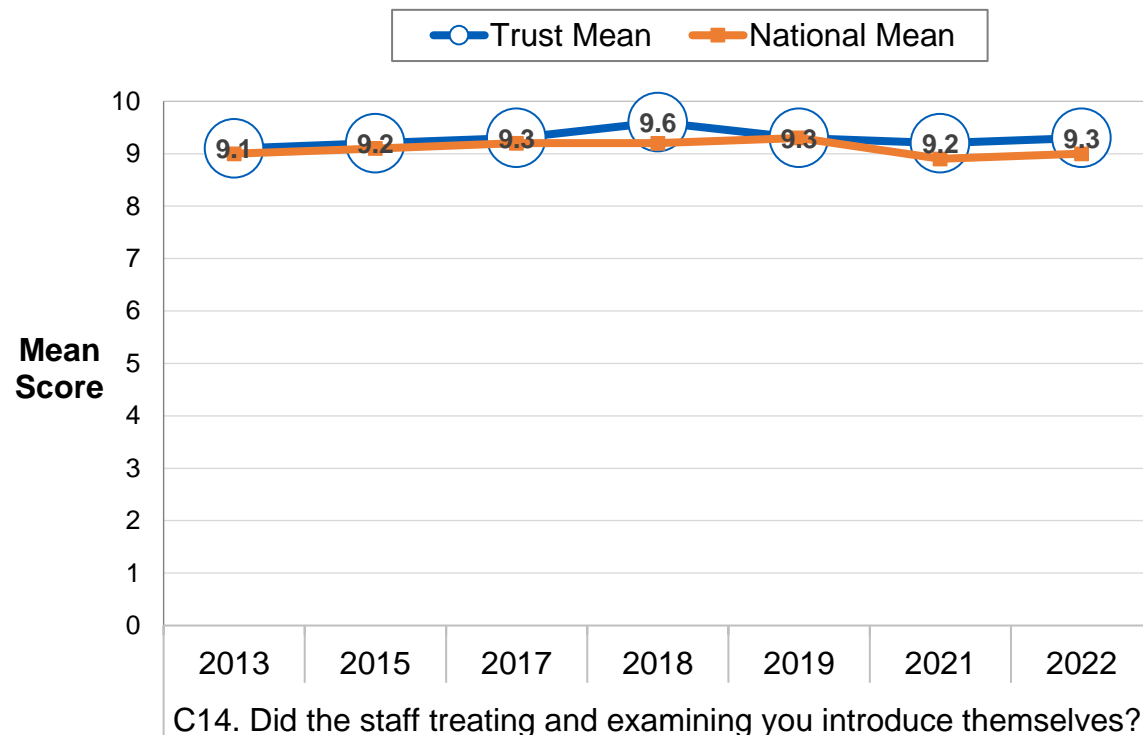


- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

# Trends over time - Labour and birth

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## Staff caring for you

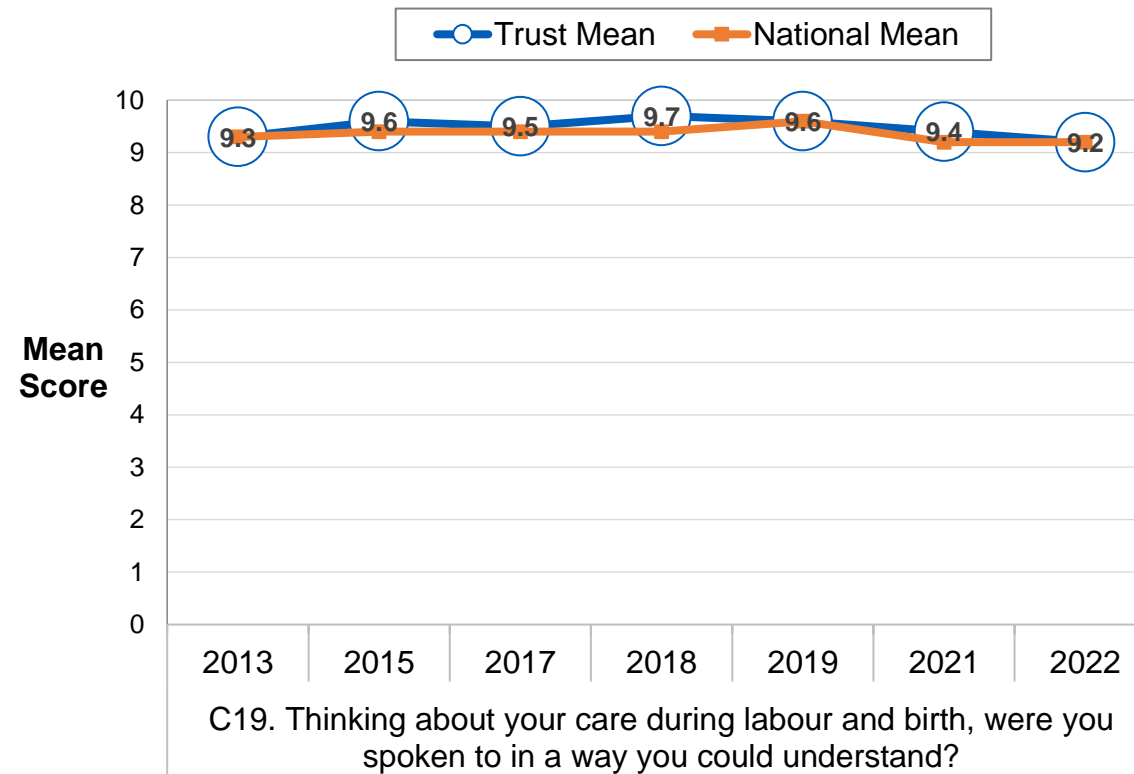
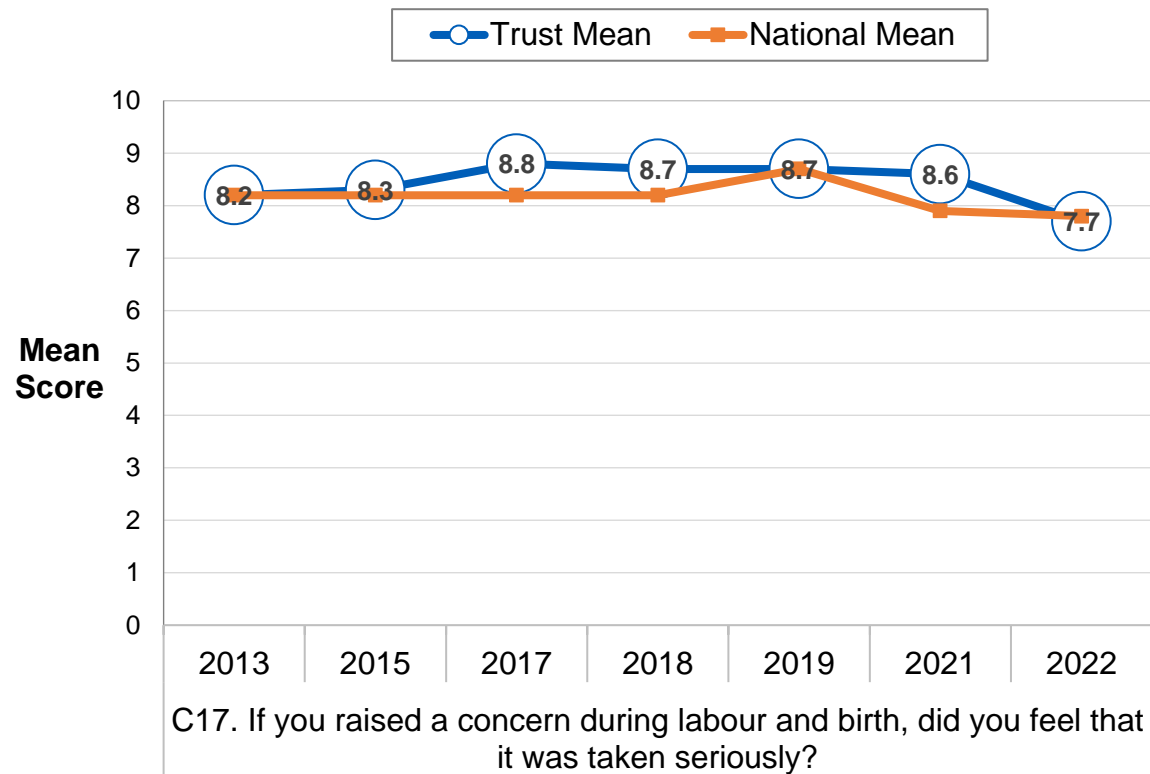


- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

# Trends over time - Labour and birth

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## The birth of your baby



- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

## Trends over time - Labour and birth (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>The birth of your baby</b>											
C18.	During labour and birth, were you able to get a member of staff to help you when you needed it?						8.2	8.6	154		

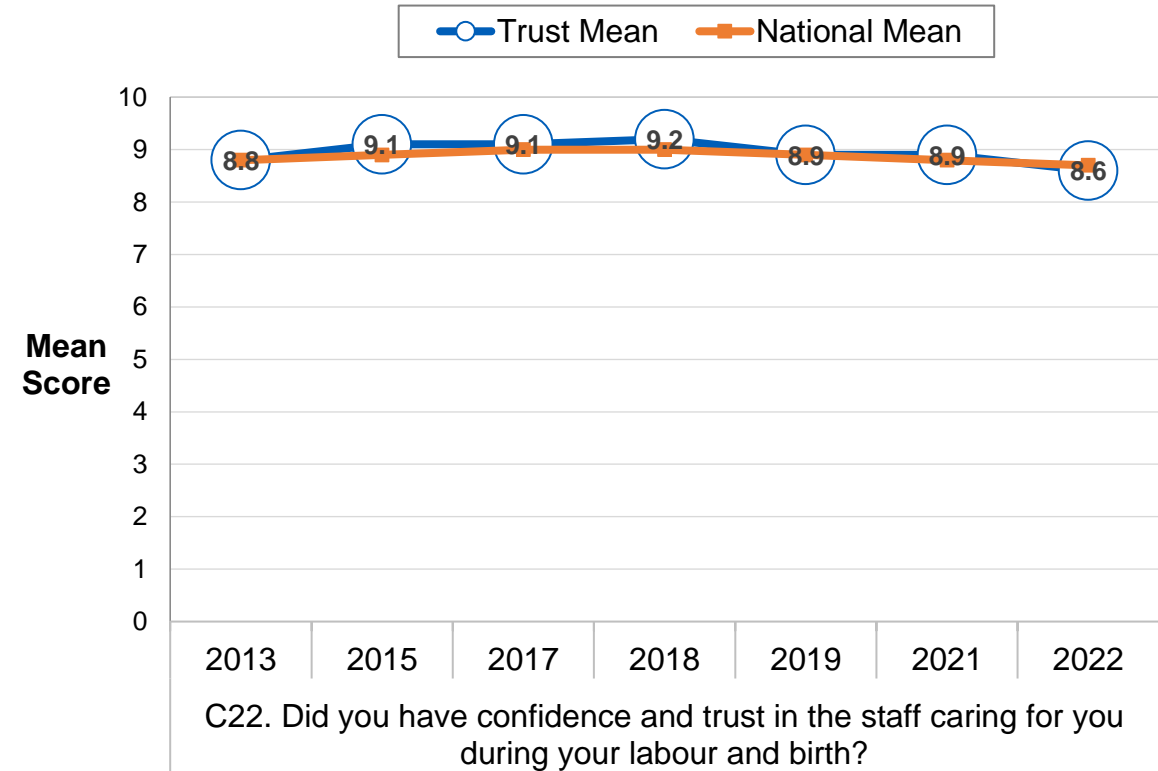
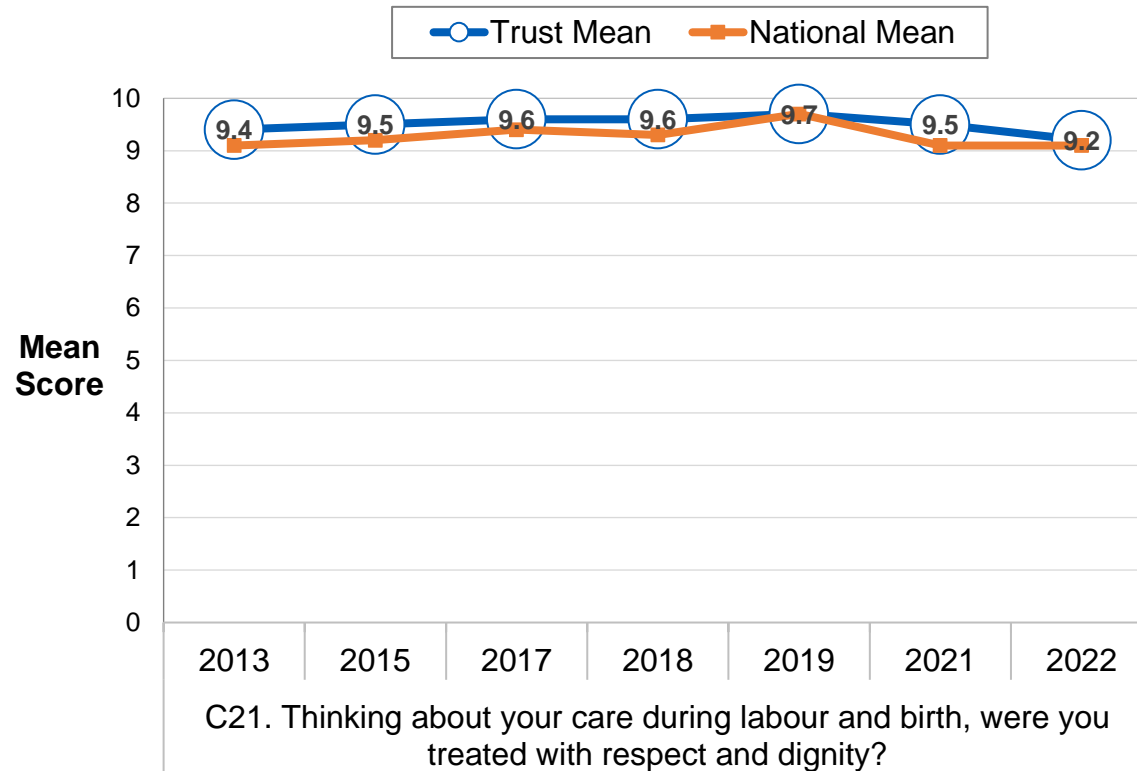
▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

# Trends over time - Labour and birth

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## Staff caring for you



- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

## Trends over time - Labour and birth (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Staff caring for you</b>											
C20.	Thinking about your care during labour and birth, were you involved in decisions about your care?						8.7	8.7	165		
C23.	After your baby was born, did you have the opportunity to ask questions about your labour and the birth?						6.2	6.2	143		

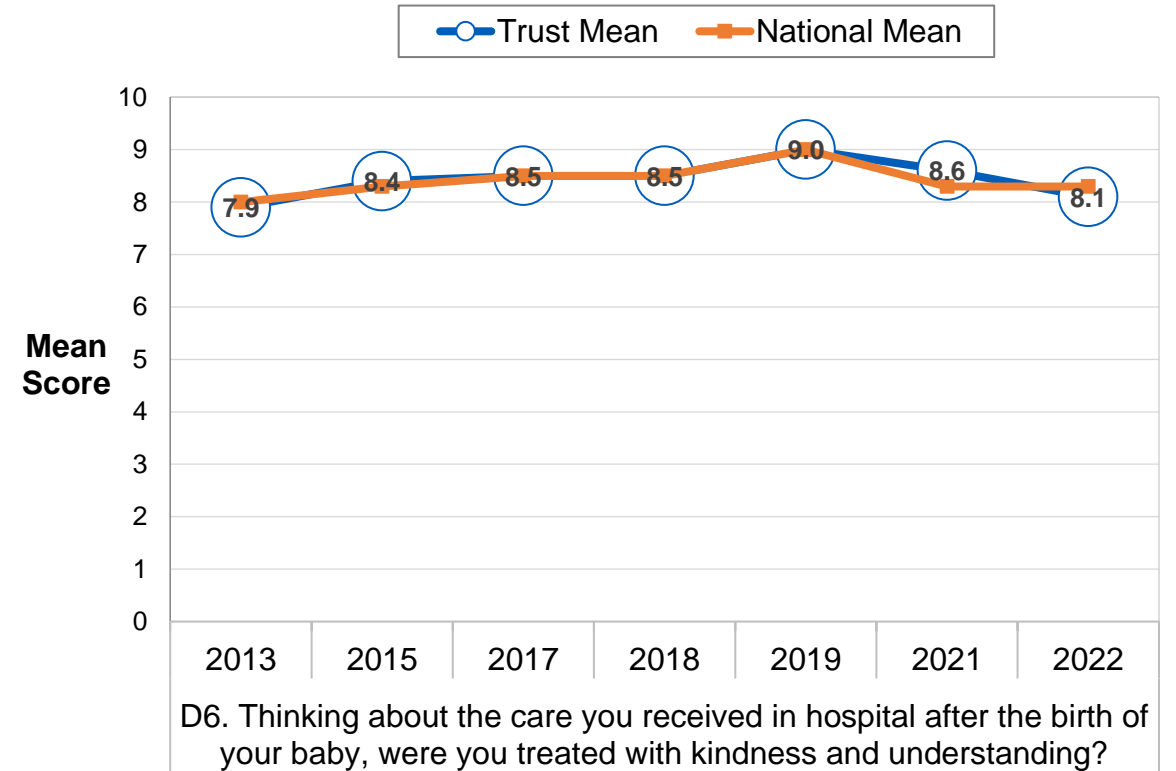
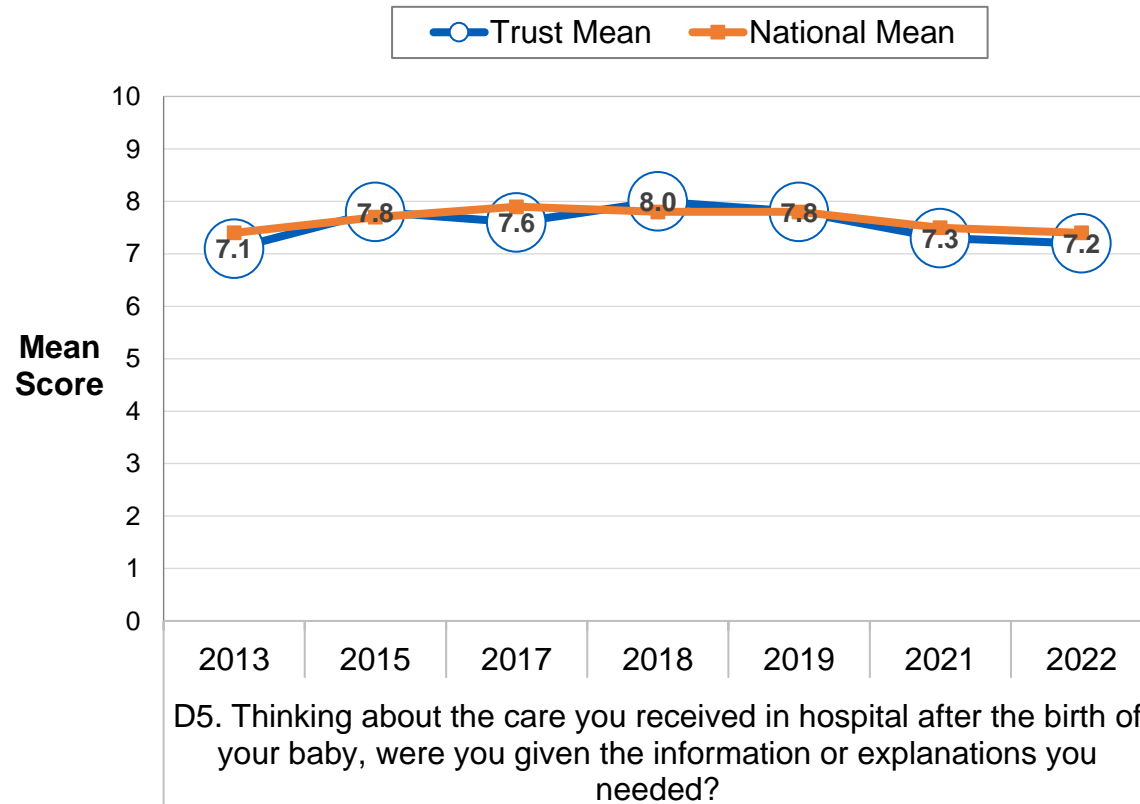
▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

# Trends over time - Labour and birth

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## Care in hospital after birth

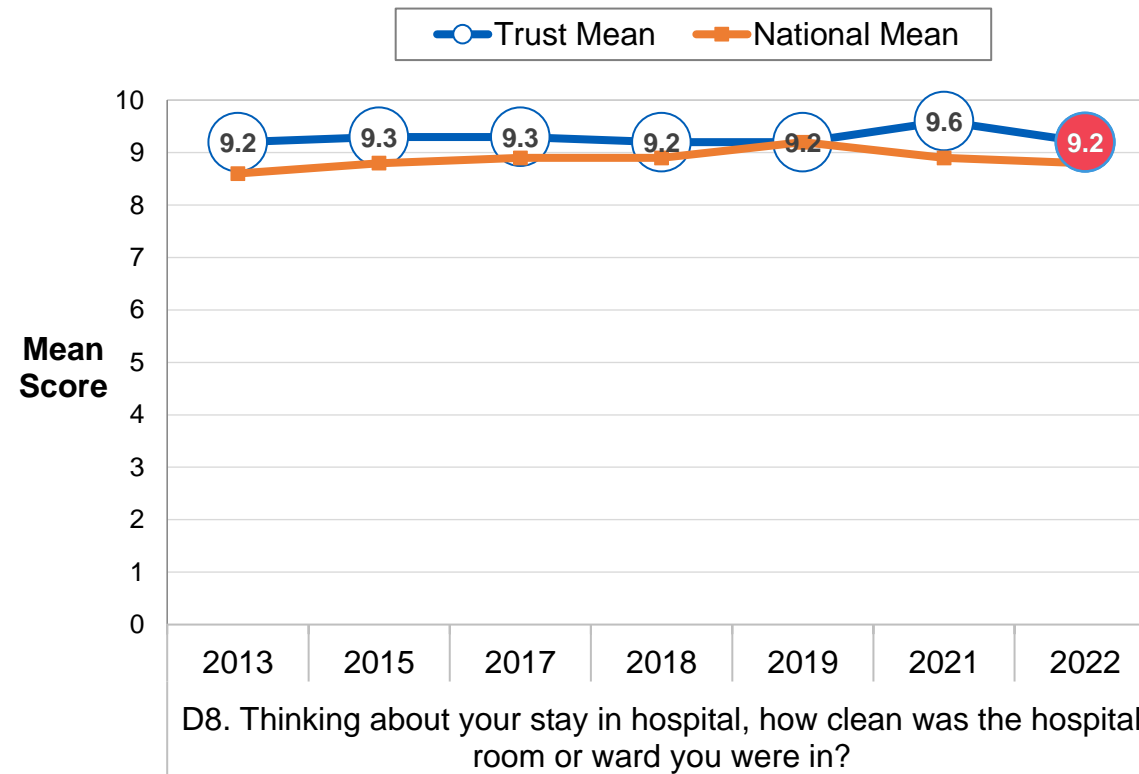
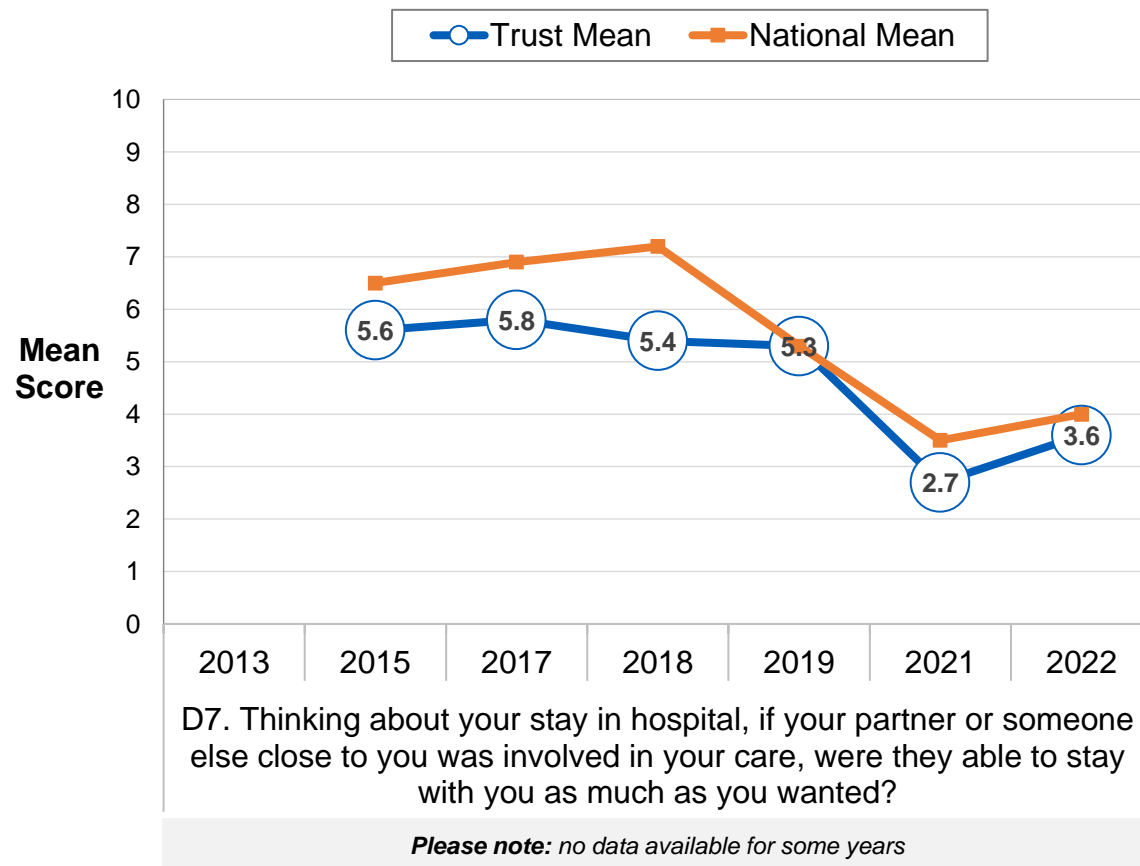


- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021

# Trends over time - Labour and birth

The following charts show how results have changed over time for questions where there are 5 years or more of comparable data.

## Care in hospital after birth



- This shows a significant increase in the trust mean for this question for 2022 compared to 2021
- This shows a significant decrease in the trust mean for this question for 2022 compared to 2021



## Trends over time - Labour and birth (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Care in hospital after birth</b>											
D2.	On the day you left hospital, was your discharge delayed for any reason?							5.6	5.6	162	
D4.	If you needed attention while you were in hospital after the birth, were you able to get a member of staff to help you when you needed it?							6.9	7.4	150	

▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

# Trends over time

## Postnatal care

## Trends over time - Postnatal care

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Feeding your baby</b>											
E2.	Were your decisions about how you wanted to feed your baby respected by midwives?						8.8	9.1	148		
E3.	Did you feel that midwives and other health professionals gave you active support and encouragement about feeding your baby?						7.2	7.3	136		

▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

## Trends over time - Postnatal care (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Care at home after the birth</b>											
F2.	If you contacted a midwifery or health visiting team, were you given the help you needed?							8.1	8.8	127	
F5.	Did you see or speak to a midwife as much as you wanted?							6.3	6.8	139	
F6.	Did the midwife or midwifery team that you saw or spoke to appear to be aware of the medical history of you and your baby?							7.9	7.6	132	

▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

## Trends over time - Postnatal care (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected	2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey
<b>Care at home after the birth</b>											
F7.	Did you feel that the midwife or midwifery team that you saw or spoke to always listened to you?							8.6	8.6	139	
F8.	Did the midwife or midwifery team that you saw or spoke to take your personal circumstances into account when giving you advice?							8.5	8.3	131	
F9.	Did you have confidence and trust in the midwife or midwifery team you saw or spoke to after going home?							8.6	8.5	138	
F11.	Did a midwife or health visitor ask you about your mental health?							9.6	9.6	147	
F12.	Were you given information about any changes you might experience to your mental health after having your baby?							6.9	6.7	146	

▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

## Trends over time - Postnatal care (continued)

There are some questions in this section where data is not comparable prior to 2021. The following table displays changes since 2021, and whether those changes are statistically significant.

							2022 Trust Score	2021 Trust Score	No. of respondents in 2022	Change from 2021 survey	
	Much worse than expected	Worse than expected	Somewhat worse than expected	About the same	Somewhat better than expected	Better than expected	Much better than expected				
<b>Care at home after the birth</b>											
F13.	Were you told who you could contact if you needed advice about any changes you might experience to your mental health after the birth?							8.0	7.9	129	
F14.	Were you given information about your own physical recovery after the birth?							6.4	6.6	145	
F15.	In the six weeks after the birth of your baby did you receive help and advice from a midwife or health visitor about feeding your baby?							6.2	6.5	121	
F16.	If, during evenings, nights or weekends, you needed support or advice about feeding your baby, were you able to get this?							4.8	6.4	56	▼
F17.	In the six weeks after the birth of your baby did you receive help and advice from health professionals about your baby's health and progress?							6.8	7.3	138	

▼▲ Significant difference between 2022 and 2021

Blank No significant difference between 2022 and 2021

# Appendix



# Comparison to other trusts

The questions at which your trust has performed worse compared with most other trusts are listed below. The questions where your trust has performed about the same compared with most other trusts have not been listed.

## Much worse than expected

- Your trust has not performed “much worse than expected” for any questions.

## Worse than expected

- F15. In the six weeks after the birth of your baby did you receive help and advice from a midwife or health visitor about feeding your baby?
- F17. In the six weeks after the birth of your baby did you receive help and advice from health professionals about your baby's health and progress?



# Comparison to other trusts

The questions at which your trust has performed somewhat better or worse compared with most other trusts are listed below. The questions where your trust has performed about the same compared with most other trusts have not been listed.

## Somewhat worse than expected

- C24. During your labour and birth, did your midwives or doctor appear to be aware of your medical history?

## Somewhat better than expected

- Your trust has not performed "somewhat better than expected" for any questions.

# Comparison to other trusts

The questions at which your trust has performed better compared with most other trusts are listed below. The questions where your trust has performed about the same compared with most other trusts have not been listed.

## Better than expected

- B4. Did you get enough information from either a midwife or doctor to help you decide where to have your baby?
- B5. At the start of your care in pregnancy, did you feel that you were given enough information about coronavirus restrictions and any implications for your maternity care?

## Much better than expected

- Your trust has not performed “much better than expected” for any questions.

## Results for Royal Devon and Exeter NHS Foundation Trust

### Where mothers' experience is best

- ✓ During antenatal check-ups, mothers being given enough information from either a midwife or doctor to help decide where to have their baby.
- ✓ At the start of their pregnancy, mothers being given enough information about coronavirus restrictions and any implications for their maternity care.
- ✓ Mothers being offered a choice about where to have their baby during their antenatal care.
- ✓ During pregnancy, mothers receiving the help they needed when they contacted a midwifery team.
- ✓ Mothers being involved in the decision to be induced.

### Where mothers' experience could improve

- Mothers receiving help and advice from health professionals about their baby's health and progress in the six weeks after the birth.
- Mothers being able to get support or advice about feeding their baby during evenings, nights, or weekends, if they needed this.
- Mothers receiving help and advice from a midwife or health visitor about feeding their baby in the six weeks after giving birth.
- Midwives or doctors appearing to be aware of the medical history of the mother during labour and birth.
- Mothers discharge from hospital not being delayed on the day they leave hospital.

These questions are calculated by comparing your trust's results to the average of all trusts who took part in the survey. "Where mothers' experience is best": These are the five results for your trust that are highest compared with the average of all trusts who took part in the survey. "Where mothers' experience could improve": These are the five results for your trust that are lowest compared with the average of all trusts who took part in the survey.

This survey looked at the experiences of individuals in maternity care who gave birth in February 2022 at Royal Devon and Exeter NHS Foundation Trust. Between April 2022 and August 2022 a questionnaire was sent to 300 individuals. Responses were received from 172 individuals at this trust. If you have any questions about the survey and our results, please contact [NHS TRUST TO INSERT CONTACT DETAILS].

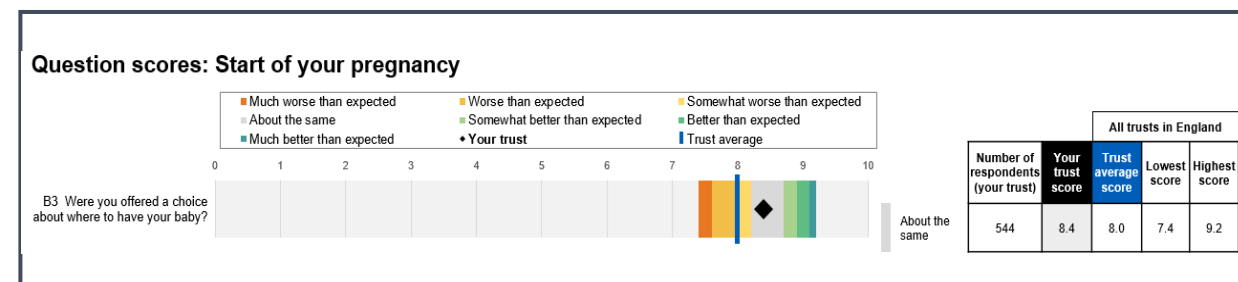
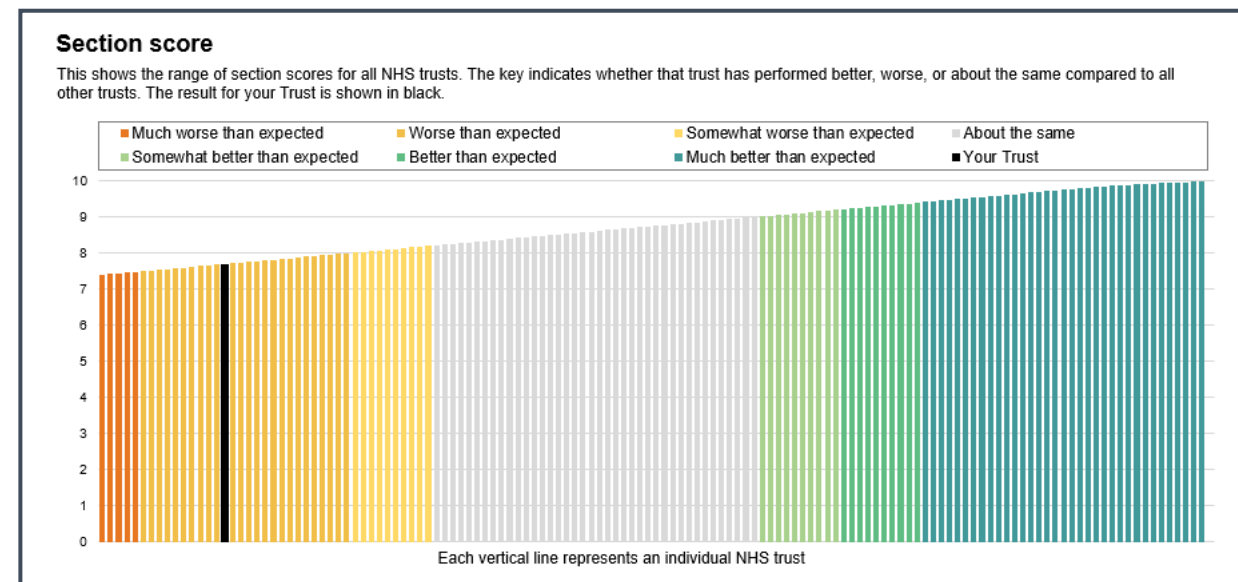


# How to interpret benchmarking in this report

The charts in the 'benchmarking' section show how the score for your trust compares to the range of scores achieved by all trusts taking part in the survey. The black line shows the score for your trust. The graphs are divided into seven sections, comparing the score for your trust to most other trusts in the survey:

- If your trust's score lies in the **dark green section** of the graph, its result is 'Much better than expected'.
- If your trust's score lies in the **mid-green section** of the graph, its result is 'Better than expected'.
- If your trust's score lies in the **light green section** of the graph, its result is 'Somewhat better than expected'.
- If your trust's score lies in the **grey section** of the graph, its result is 'About the same'.
- If your trust's score lies in the **yellow section** of the graph, its result is 'Somewhat worse than expected'.
- If your trust's score lies in the **light orange section** of the graph, its result is 'Worse than expected'.
- If your trust's score lies in the **dark orange section** of the graph, its result is 'Much worse than expected'.

These groupings are based on a rigorous statistical analysis of the data termed the 'expected range' technique.



## How to interpret benchmarking in this report (continued)

The 'much better than expected', 'better than expected', 'somewhat better than expected', 'about the same', 'somewhat worse than expected', 'worse than expected' and 'much worse than expected' categories are based on an analysis technique called the 'expected range'. Expected range determines the range within which a trust's score could fall without differing significantly from the average, taking into account the number of respondents for each trust, to indicate whether the trust has performed significantly above or below what would be expected.

If it is within this expected range, we say that the trust's performance is 'about the same' as other trusts. Where a trust is identified as performing 'better' or 'worse' than the majority of other trusts, the result is unlikely to have occurred by chance.

The question score charts show the trust scores compared to the minimum and maximum scores achieved by any trust. In some cases this minimum or maximum limit will mean that one or more of the bands are not visible – because the range of other bands is broad enough to include the highest or lowest score achieved by a trust this year. This could be because there were few respondents, meaning the confidence intervals around your data are slightly larger, or because there was limited variation between trusts for this question this year.

In some cases, a trust could be categorised as 'about the same' whilst having a lower score than a 'worse than expected' trust, or categorised as 'about the same' whilst having a higher score than a 'better than expected' trust. This occurs as the bandings are calculated through standard error rather than standard deviation. Standard error takes into account the number of responses achieved by a trust, and therefore the banding may differ for a trust with a low numbers of responses.

Please note, the benchmark bandings were updated for the 2021 survey to provide a greater level of granularity in the expected range score. The 2022 survey uses the same approach.

Additional information on the 'expected range' analysis technique can be found in the survey technical report on the [NHS Surveys website](#).

# An example of scoring

Each evaluative question is scored on a scale from 0 to 10. The scores represent the extent to which the mother's experience could be improved. A score of 0 is assigned to all responses that reflect considerable scope for improvement, whereas a score of 10 refers to the most positive patient experience possible. Where a number of options lay between the negative and positive responses, they are placed at equal intervals along the scale. Where options were provided that did not have any bearing on the trust's performance in terms of patient experience, the responses are classified as "not applicable" and a score is not given. Similarly, where respondents stated they could not remember or did not know the answer to a question, a score is not given.

## Calculating an individual respondent's score

The following provides an example for the scoring system applied for each respondent. For question B8 "During your antenatal check-ups, did your midwives or doctor appear to be aware of your medical history?":

- The answer code "Yes, always" would be given a score of 10, as this refers to the most positive patient experience possible.
- The answer code "Yes, Sometimes" would be given a score of 5, as it is placed at an equal interval along the scale.
- The answer code "No" would be given a score of 0, as this response reflects considerable scope for improvement.
- The answer codes "Don't know / can't remember" would not be scored, as they do not have a clear bearing on the trust's performance in terms of the mother's experience.

## Calculating the trust score for each question

The weighting mean score for each trust, for each question, is calculated by dividing the sum of the weighting scores for a question by the weighted sum of all eligible respondents to the question for each trust. Weighting is explained further in the [quality and methodology report](#).

## Calculating the section score

An arithmetic mean of each trust's question scores is taken to provide a score for each section.

# For further information

Please contact the Coordination Centre for  
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