



Healthwatch West Berkshire Maternity Report

(with initial Covid-19 feedback Addendum) September 2020



Contents

Executive Summary	3
Recommendations	. 4
Introduction	. 6
Reasons behind the survey	. 6
Survey Results & Analysis	8
Conclusion	19
Responses from commissioners and providers of maternity care	21
Addendum	26
Additional Feedback given during Covid-19 (March - August 2020)	28





EXECUTIVE SUMMARY

The subject of maternity services around the country has been highlighted recently and often with some very serious issues. However, in West Berkshire the levels of care are generally very good, though the maternity experience report highlights some issues that may warrant further investigation and potential changes, or additions to service provision to improve standards for all women in West Berkshire using maternity services

Following on from a BOB (Bucks, Oxon, Berks West Integrated Care System) wide survey undertaken by five local Healthwatch in 2018, this report sought to fill in some gaps in knowledge and get a 'temperature' check of how women felt they were being treated during their maternity experience. It immediately showed up the high proportion of women in West Berkshire not using Royal Berkshire Hospital for maternity services, as is the case for most of the women in the rest of the Berkshire West Clinical Commissioning Group area. This immediately garners the question of whether there is too much focus only on Royal Berkshire Hospital services by the current Berkshire West health 'system', at the expense of ensuring consistent, truly 'connected care' from all four maternity providers to the women of West Berkshire. The other hospitals utilised are: Hampshire Hospitals (HHFT) Basingstoke Hospital, Great Western Hospital (GWH) in Swindon and John Radcliffe (JR) in Oxford the other three hospitals.

The other startling finding of the report is that 25% of women were dissatisfied with their maternity care, and 9% described the overall experience in their eyes as 'traumatic'. This seems a high proportion who are unhappy, about which we should all be concerned and warrants further investigation.

We have made 14 recommendations based on the survey and would also like to see more emphasis on providing parity of care for all the women of West Berkshire, wherever they are accessing maternity services. Also, urgent work is necessary to ensure those using services outside the direct control of the Berkshire West CCG (Clinical Commissioning Group) are supported closer to home and in an integrated 'joined-up' way. Women of West Berkshire using services other than RBH should not have to accept different standards of care because the trust they choose is not in the Berkshire West Integrated Care Partnership or the BOB ICS model.

(Since the first iteration of this report, we have received further maternity related feedback around Covid experiences which has been added into an addendum. This feedback was taken during the Covid outbreak, following the formation of the 'West Berkshire Maternity Forum' to look at additional key factors of concern for new mums, Mental Health and the importance of Health Visitors were highlighted. Our providers have not had the chance to respond to this information, which is why it is in the addendum and not the main body of the document or referenced in any recommendations)

Our thanks to all the woman & families of West Berkshire for taking the time to complete the survey. We would also like to thank the Healthwatch board for co-authoring the report. Thanks also to the West Berkshire Health & Wellbeing Board, Berkshire West Clinical Commissioning Group, Royal Berkshire Hospital Foundation Trust, Hampshire Hospital Foundation Trust, Great Western Hospital Swindon, John Radcliffe Hospital Oxford, Health Visiting Service, Reading Maternity Voices & members of the West Berkshire Maternity Forum.



Recommendations

Based on the responses given in this maternity survey the following recommendations are set out below:

- 1. All future reports and data on maternity services presented to the West Berkshire Health and Wellbeing Board should include data on West Berkshire births at the Great Western Hospital and Basingstoke and North Hampshire Hospital in addition to Royal Berkshire Hospital
- 2. Any tracking data sets and data dashboards developed and used to evaluate quality of maternity services by West Berkshire Health and Wellbeing Board should include data on West Berkshire births at the Great Western Hospital and Basingstoke and North Hampshire Hospital, in addition to Royal Berkshire Hospital
- 3. Data on all maternity services including during pregnancy, during birth and 10 days following birth should be presented to the West Berkshire Health and Wellbeing Board on an annual basis including national & comparative area benchmarking.
- 4. A West Berkshire Maternity Forum should be set up to include women in West Berkshire who have received antenatal and postnatal services, or have delivered their babies locally; service providers (including Basingstoke and Great Western Hospital as well as Royal Berkshire Hospital), Healthwatch West Berkshire and Public Health. This Forum will be able to explore the issues in this report in order to improve maternity services locally.
- 5. Any further maternity surveys exploring antenatal care should include services provided by GP practices, West Berkshire Community Hospital, Royal Berkshire Hospital, Great Western Hospital and Basingstoke and North Hampshire Hospital
- 6. Further consideration should be given to consider the possibility of increasing home births and births in midwife led units if these are choices of pregnant women in West Berkshire (patient measures of a birth plan against actual delivery should be monitored)
- 7. Discussions should take place with all providers of maternity services, including during pregnancy, during birth and in the 10 days following birth, on how to improve the information and advice given to mothers at all stages of pregnancy. Alternative ways of giving information should be explored including websites, webinars, social media Facebook, Twitter, blogs, texts, apps etc.



- 8. Service providers who are out of area should be invited to discuss how best to meet the maternity needs of women in West Berkshire and be enabled to offer services within the area as some have requested to do so.
- 9. Request that the maternity needs of West Berkshire families are addressed by the relevant local Maternity Voice Partnership (MVP)groups.
- 10. More education and training should be in place for maternity service providers on the provision of emotional support for women at all stages of maternity care.
- 11. Further exploration is needed on how to meet the physical care needs during pregnancy, birth and in the 10 days following birth. Quality standards should be adhered to at all stages.
- 12. Birth plans should be used and choices of women at all stage in their pregnancy should be discussed and supported by health care professionals.
- 13. Postnatal care in particular should be scrutinised and improved in whatever way possible, including setting up of postnatal classes to help women learn from each other and the involvement of voluntary and community groups, supported by health professionals. All discussions to include Health Visitors, Midwives and Family Hubs.
- 14. Build in structured discussion time between mothers and health care professionals during pregnancy, during and immediately following birth and in the first 10 days following birth.



Introduction

There has been a focus recently on maternity care in England and a Care Quality Commission (CQC) Maternity Services Survey carried out in 2019 showed an overall improvement from 2018 in maternity experiences across the country, especially in interaction and communication with staff during labour and birth. Upward trends were indicated in other areas including feeding choices and partner involvement. However, results also showed poorer experiences of care for many women postnatally. A significant proportion of women felt they did not have access to the support needed outside the labour ward or birthing centre, plus the quality of information provided about mental health could be improved (Maternity Services Survey CQC, 2019 https://www.cqc.org.uk/publications/surveys/maternity-services-survey-2019)

As outlined in the NHS Long Term plan published in January 2019, maternity services remain a key area of focus for the NHS. The maternity and neonatal section builds on the measures being implemented following the National Maternity Review and among a range of other commitments is continuity of care during pregnancy, and overall improvement during and after birth. In addition mental health services and other support for pregnant women and new mothers will be improved (the NHS Long Term Plan explained, Kings Fund, January 2010 https://www.kingsfund.org.uk/publications/nhs-long-term-plan-explained)

In 2018 Buckinghamshire, Oxfordshire and Berkshire West STP carried out a survey, working with Healthwatch Buckinghamshire, Healthwatch Oxfordshire, Healthwatch Reading, Healthwatch Wokingham Borough, and Healthwatch West Berkshire to speak to women who had been pregnant or had a baby between Jan 2015 and Dec 2018. The survey asked about:

- their experiences of making choices about maternity care
- what a personalised care plan should include and
- what the plan should look like.

In all there were 1400 responses from the survey. In addition, six groups were visited to hear views from those who were unlikely to have responded to the survey.

Questions included 'did you make choices about your care and the birth of your baby?' (87% yes, 10% no); 'If you made choices how well were, they supported by midwives and doctors?' (64% well or very well and 13% hardly or not at all); If you did not make any choices please tell us why (answers could include I didn't know I could make choices, I wasn't given a chance to make choices, I didn't have enough information to make informed choices, I was recommended not to make a birth plan and I did not want to make choices. (330 people responded to this question). These findings were further analysed by age and ethnicity.

An important further question was 'Is there something else the NHS could have done to improve your care and support before, during and after he birth?'

The top 8 responses to this question in order of most cited were: communication between staff and patients, quality of care, choices, breastfeeding support, continuity of care, post-natal support, staff attitudes and information providing.



The responses in this BOB STP survey prompted Healthwatch West Berkshire to carry out its own online maternity survey in 2019/20 to follow up some of the issues including not having enough choice, feeling that choices made were not supported by health professionals and looking at what women felt could be improved by the NHS in maternity care.

The West Berkshire District Needs Assessment (DNA) highlights the importance of maternal mental health, linking to the First 1001 days Movement. A number of recommendations are made in the DNA which also link closely to the findings of this report on emotional wellbeing of mothers before, during and after the birth. These include:

- the need to scale up provision for mild to moderate mental health issues in perinatal women and improved mental health training of Midwives, Health Visitors and GPs
- the provision of a range of services to prevent perinatal mental disorders where possible and to identify and treat them when they occur to minimise the negative impact on the family, including universal services such as Health Visitors, Midwives, GPs, plus parenting courses and support services that are universal and targeted.
- Carrying out a needs assessment to develop a clearer picture of local perinatal mental health need.
- Develop or commission more projects to meet identified gaps based on above needs analysis. Develop a Maternal Mental Health Pathway and Strategy, linking in with the strategy on the emotional wellbeing of children and young people.

This survey can form the basis of the maternity needs assessment recommended in the WBDNA as it brings together responses from almost 200 local women on their maternity experiences in West Berkshire and begins to give a clearer picture of the services provided

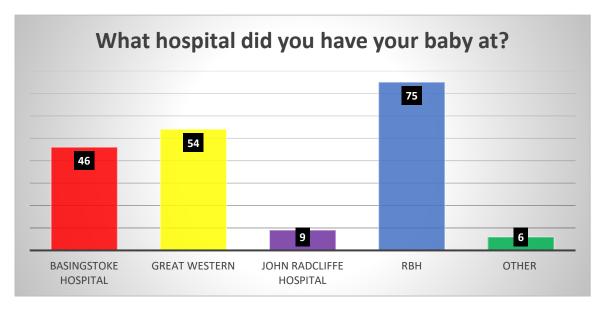
In addition to exploring these issues we have been able to demonstrate where women in West Berkshire are delivering their babies and if there are differences in care between hospitals used by West Berkshire residents. This will enable further surveys to be undertaken in the future.

We had 190 responses to the survey - all on-line. This section of the report explains what people said in response to each question. And highlights where quality issues may need to be addressed.



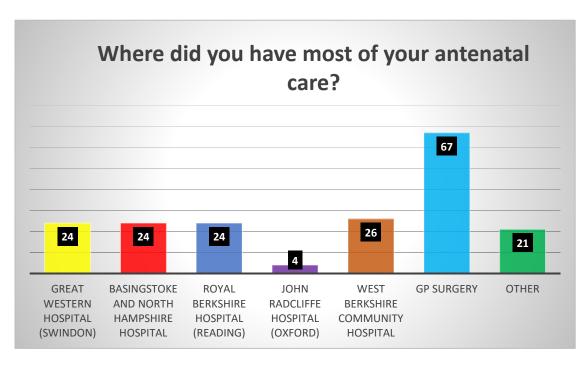
SURVEY RESULTS & ANALYSIS





Approximately 4 out of 10 (40%) respondents reported their delivery at the Royal Berkshire Hospital (RBH), 3 out of 10 (28%) Great Western Hospital, Swindon and 2 out of 10 (24%) Basingstoke and North Hampshire Hospital. 9 women went to the John Radcliffe, 5 had home deliveries and 1 attended Wantage Hospital. The important point is that only 40% went to the RBH, so in any further analysis of the quality of maternity services for the women of West Berkshire, it will be necessary to look at the other 2 main hospitals - Great Western and Basingstoke.

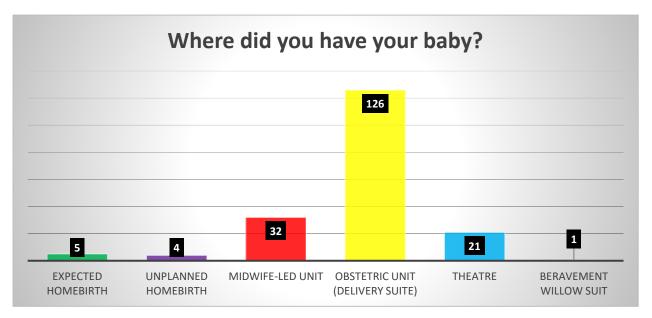
Question 2 - Where did you have most of your antenatal care?





The highest number of women reported that they received their antenatal care at the GP Surgery (35%). There was a fairly even split of 13-14% at each of the 3 main hospitals and West Berkshire Community Hospital. 4 attended the John Radcliffe. 6 women reported a mix of GP practice and hospital whilst another 6 cited home. There were 2 reports of being seen by local midwives at Children's centres.

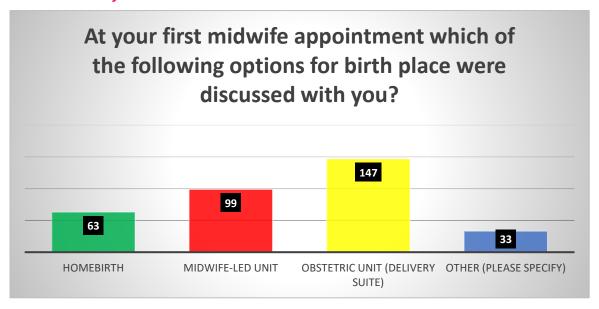
Question 3 - where did you have your baby?



The majority of women had their babies in the obstetric unit (delivery suite), 67%, close to 7 out of 10. 17% of births were in Midwife-led units, whilst a further 5% occurred at home. The answers given in the 'other' category were either theatre, planned c-section or emergency c-section - a total of 20. One delivery was in the Bereavement Suite.

The next question refers to options discussed for birthplace.

Question 4 - At your first midwife appointment which of the following options for birthplace were discussed with you?





Respondents were able to tick more than one answer to this question, so the total number of choices was 342. 77% discussed the obstetric unit, 52% midwife-led unit, 33% home birth and of those who answered in the 'other' category 17 women did not discuss any options for where they would have their baby. The remaining other answers included not having a choice due to previous complications and not remembering their discussions.

The next three questions explore what pregnant women thought about the information and advice they received, and the emotional support and physical care received before pregnancy, during birth and during the 10-day period after birth. The questions that relate to 'during birth' have been analysed by hospital, whereas during and after birth have been looked at overall. All percentages have been rounded up or down to the nearest whole number to make most sense of the data collected.

Question 5 - do you think you received the information and advice needed during your maternity experience?

During the birth could be analysed by hospital:

During birth	Got all the information and advice needed	Got some of the information and advice needed	Got a little of the advice and information needed	Did not get the information and advice needed	Response count
Royal Berkshire	60%	20%	8%	12%	74
Hospital	44	15	6	9	
Great Western	66%	22%	9%	2%	54
Hospital	36	12	5	1	
Basingstoke Hospital	48% 2	37% 17	13% 6	2% 1	46

RBH gave all the information and advice needed to 6 out of 10 mothers and a further 2 out of 10 got get some information and advice, however the remaining 2 out of 10 got little or no information or advice.

Great Western did better in that a total of 88% of their mother got some or all the information and advice required. Only 11% got little or no advice.

Basingstoke gave just less than half of the mothers all the information and advice they required and over a third received some. They gave little or no information or advice to 15% of mothers giving birth.



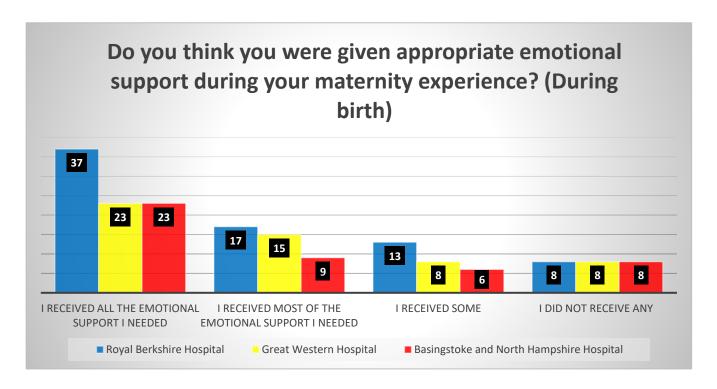
Since the original data set has been broken down by where the birth occurred the remaining 2 parts of question 5 cannot be analysed in the same way by hospital.

	Got all the information and advice needed	Got some of the information and advice needed	Got a little of the advice and information needed	Did not get the information and advice needed	Response count
During pregnancy	49%	38%	7%	5%	190
During 10 days after birth	46%	33%	14%	7%	190

It is disappointing that only around half of the women surveyed believed that they received all the information and advice they needed both during their pregnancy and in the 10 days following the birth. Around a third got some information and further investigation would be needed to know if they felt it was enough. The most worrying figures relate to those women who said they received little or no information or advice during their pregnancy: 12% and in the 10 days post-partum: 21%. These figures highlight the need for more information and advice in both the antenatal and postnatal periods.

Question 6 do you think you were given appropriate emotional support during your maternity experience?

During the birth is analysed by hospital:





During Birth	Got all the emotional support needed	Got most of the emotional support needed	Got some of the emotional support needed	Did not get the emotional support needed	Response count
Royal Berkshire	49%	23%	17%	11%	75
Hospital	37	17	13	8	
Great Western	43%	28%	15%	15%	54
Hospital	23	15	8	8	
Basingstoke Hospital	50% 23	20% 9	13% 6	17% 8	46

All three hospitals provided around 70% of respondents with all or most of the emotional support they required. Unfortunately, this indicates that the emotional support received by 3 out of 10 women was lacking. At Great Western Hospital 15% stated they did not get the emotional support needed and 17% at Basingstoke Hospital. There needs to be further discussion about this important area of care with all three hospitals going forward.

Similarly, the original data set does not allow analysis of how happy the women were with their emotional support depending on where their care took place antenatally and postnatally.

	Got all	Got most of	Got some of	Did not get	Response
	the	the	the	the	count
	emotional	emotional	emotional	emotional	
	support	support	support	support	
	needed	needed	needed	needed	
During pregnancy	47%	24%	16%	14%	190
During 10 days after	39%	20%	23%	18%	190
birth					

The responses to this question indicate further work will need to be done to ensure that all mothers are adequately emotionally supported both during their pregnancy and after they have given birth.

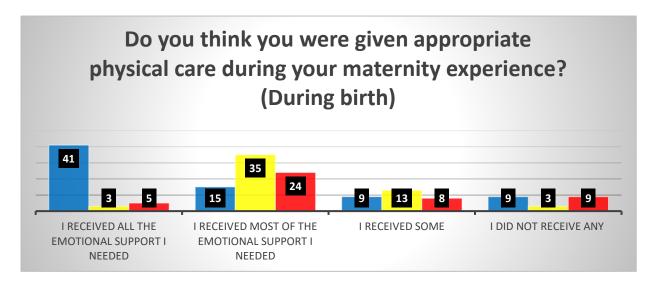
During pregnancy close to half felt that all their emotional needs were met with a further quarter getting some emotional support. However, 30% or 3 in 10 women believed they got little or no emotional support.

The figures for the 10 days following birth showed only 4 in 10 getting all the emotional support they needed with another 2 in 10 getting at least some. This left 4 in 10 women feeling that they got little or none of their emotional support needs met. Given the dangers of postpartum depression, this is a concerning figure and one that needs to be addressed.



Question 7 - do you think you were given the appropriate physical care during your maternity experience?

During the birth is analysed by hospital:



During birth	Got all the physical care needed	Got most of the physical care needed	Got some of the physical care needed	Did not get the physical care needed	Response count
Royal Berkshire	55%	20%	12%	12%	75
Hospital	41	15	9	9	
Great Western	5%	66%	24%	5%	54
Hospital	3	35	13	3	
Basingstoke Hospital	11% 5	52% 24	17% 8	19% 9	46

Three quarters of the mothers got all or most of the physical care they needed during the birth with 55% or over half getting all those needs met. However, for Great Western Hospital only just over 70% got all or most of their physical needs met with only 5%, or 1 in twenty being completely satisfied. In Basingstoke Hospital only 63% of mothers got all or most of their physical needs met with only 1 in 10 being completely satisfied. This indicates an area for improvement.

	Got all the physical care needed	Got most of the physical care needed	Got some of the physical care needed	Did not get the physical care needed	Response count
During pregnancy	61%	23%	11%	5%	190
During 10 days after birth	46%	23%	23%	8%	190



During pregnancy 84% of women reported receiving all or most of the physical care they needed, with a further 11% receiving at least some of the physical care needed. This left 5% of women feeling that their physical care needs were not met (n=9) at this crucial time.

During the 10 days following birth 69% or 7 out of 10 women felt that they got all or most of their physical care needs met. A further 23% got some of their physical care needs met, whilst 8% (n=18) did not receive the physical care they needed. The postpartum period is an important time for newly delivered women, especially if the birth was traumatic and labour long and arduous. It will be important to ensure that the new mothers in West Berkshire do have their physical care needs fully met postnatally.

Question 8 - How important is mental health to you, compared to physical health?

Of the 190 responses 39 women said that mental health care is more or slightly more important to them than physical care. This is 20% or 1 in 5. 67% believed that both mental health care and physical care are equally important. 13% said that physical care is more or slightly more important to them. Thus 87% or almost 9 out of 10 stated that mental health care is important to them to some degree.

Question 9 - Did your midwife and GP support the choices you made?

This question refers to the whole maternity experience. 76% believed their choices were supported, whilst 19% felt that only some of their choices were supported and a further 5% stated their choices were not supported. Although this area requires further exploration it is evident that close to a quarter of women did not have all their choices supported.

Question 10 - What do you think was good about the maternity care you received during the entirety of your experience from first appointment to discharge?

Women were asked to tick all answers that applied to their maternity care - a total of 792 answers were recorded. 10 women did not answer this question.

Choices	Response percent	Response count
I was treated with dignity and	75 %	134
respect		
Information given to me was	64%	116
clear		
I was free to make the decisions I	58%	105
wanted		
The choices and options available	57%	103
were well explained		
The support that the midwife and	67%	121
doctor provided		
Antenatal care	67%	121
Postnatal care	51%	92



Overall, 75% of those who answered felt they were treated with dignity and respect which leaves 25% of respondents not feeling strongly enough to agree with that statement. Two thirds reported that the information they received was clear thus a further third may not have felt clear enough about all the information given. Approximately 6 out of 10 women felt free to make their own decisions and believed that options and choices were well explained. Two thirds were satisfied with both the support from midwives and doctors and their antenatal care. The third of respondents who did not tick these boxes may have been dissatisfied with the support they received or not felt strongly enough to agree. These answers require further exploration with both women experiencing maternity care and all care providers.

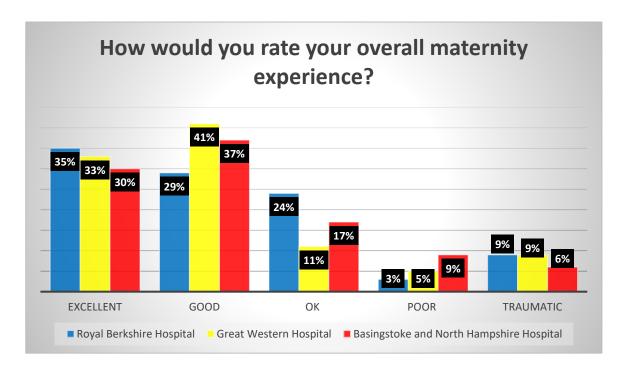
Choices	Response percent	Response count
I was not treated with dignity and	19%	23
respect		
Information given to me was not	30%	37
very clear		
I was not free to make the	30%	37
decisions I wanted		
The choices and options available	33%	40
were not very well explained		
The support that the midwife and	24%	29
doctor provided		
Antenatal care	28%	34
Postnatal care	45%	56

Question 11 - What do you think was not good about the maternity care you received during the entirety of your experience from first appointment to discharge.

Again, women were asked to tick all answers that applied to their maternity care - a total of 256 answers were recorded. However, 67 women did not answer this question. It is possible that those women who did not record any answers simply did not agree with any of the negative statements.

It is interesting to note that almost 1 in 5 who responded to this question felt they had not been treated with respect and dignity. 3 out of 10 were not clear about the information they received and 3 out of 10 did not feel free to make their own decisions. One third felt choices and options were not well explained and a quarter were dissatisfied with the support they received from their doctor and midwife. Whilst 28% were not entirely happy with their antenatal experience this figure jumps to 45% for postnatal care. The answers to these questions highlight areas that need further investigation to ensure that the needs of women in West Berkshire who are having babies are fully met and satisfaction across all of maternity care is high.





Question 12 - How would you rate your overall maternity experience?

This question has been broken down by hospital attended for the birth.

Royal Berkshire Hospital:

64% rated their overall maternity experience as excellent (26/75 - 35%) or good (22/75- 29%). A further 24% (18/75) rated it ok, whilst 3% (2/75) rated it poor and another 9% (7/75) traumatic.

Great Western Hospital:

74% rated their overall maternity experience as excellent (18/54 - 33%) or good (22/54 - 41%). A further 11% (6/54) rated it ok, whilst 5% rated it poor (3/54) and another 9% (5/54) traumatic.

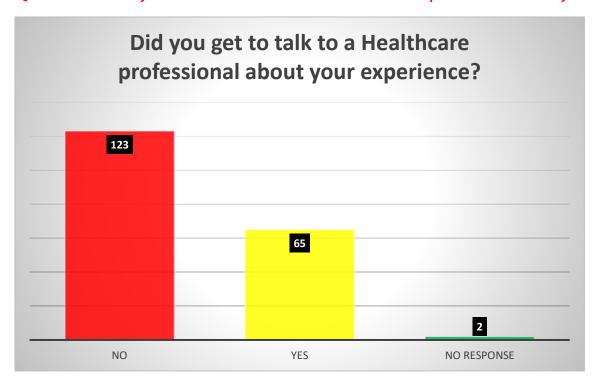
Basingstoke hospital:

67% rated their overall maternity experience as excellent (14/46 - 30%) or good (17/46 -37%). A further 17% (8/46) rated it ok, whilst 9% rated it poor (4/46) and another 6% traumatic (3/46)

Further analysis is required here to understand why women might describe their birth experience as traumatic, since a traumatic birth may be due to pain, the length of labour, the need for a c-section etc and none of these can really be attributed to the hospital where they had the baby.

However, there is cause for concern that only around two thirds of women delivering at the Royal Berkshire Hospital rated their experience as excellent or good, with Basingstoke not much better. At Great Western Hospital almost three quarters of women rated their experience as excellent or good.





Question 13 - Did you have a chance to talk to a healthcare professional about your experience?

65% of respondents said no and only 34% said yes. There were also 36 comments.

Themes of the comments included the following:

3 women could not remember talking to a healthcare professional following their birth.

6 examples were given where women had requested to speak with healthcare professionals after a traumatic birth, but this had not happened.

There were 11 examples of women having follow-up discussions sometime after their birth with a variety of health professionals including midwives, GPs, a talking therapist, a surgeon and health visitors and most of these were positive comments.

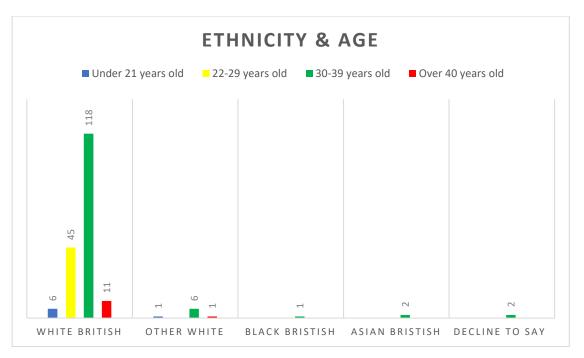
A total of 5 women were offered a Birth Matters or Birth Reflections appointment and the 2 who did take this up felt it was very useful. The other 3 declined.

Unfortunately, 4 women reported that they were not followed up postnatally, despite efforts to contact services.

In all there appears to be a lack of support and follow-up after birth. Both immediately and in the ensuing postnatal period. Those women who were able to discuss their birth seemed to appreciate the opportunity to share their feelings.

The following table shows the age and ethnicity breakdown of respondents. No further analysis has been possible based on ethnicity due to small numbers. It may be possible to do some further analysis based on age at a future time.







Conclusion

It is important to note that out of 190 women giving birth in West Berkshire during the period covered by this survey that just under 40% attended the Royal Berkshire Hospital. When data is reported back to the West Berkshire Health and Wellbeing Board on maternity services, it will be important in future to include data from the other 2 main hospitals i.e. Great Western Hospital, Swindon and Basingstoke and North Hampshire Hospital to ensure the full picture is relayed to commissioners.

Antenatal care is spread across a number of providers including GP practices, West Berkshire Community Hospital and the three main hospitals providing maternity services. Any future surveys regarding antenatal care should ensure that all these services are included.

Almost 7 out of 10 births occur in the obstetric unit (delivery suite) and less than 5% happen at home. It would be of interest to explore if more women could deliver at home, given that one third discussed this option. Over half discussed attending a midwife led unit however only 17% actually used this service. Again, reasons for this choice have not been surveyed although home births and midwifery led units for uncomplicated births may well be more economical and provide a more relaxed and satisfying experience for mothers. 10% of the births were caesarean sections which is relatively low compared to the UK rate in general (26%).

The area of information and advice showed some concerning data. For example, in the period during pregnancy 12% of women (n=23) said they received little or no information and advice. This number rose to 21% (n=40) who received little or no information or advice in the 10 days immediately following birth. These figures should prompt further investigation and action for the providers of antenatal and postnatal services for women in West Berkshire.

20% or 2 out of every 10 women giving birth in the Royal Berkshire Hospital said they got little or no information or advice during their birth. For Basingstoke Hospital this number was 15% and 11% for Great Western Hospital.

The emotional support that women received at different stages of their maternity experience again demonstrated that improvements are needed across the board. During the pregnancy 30% said they only received some or none of the emotional support they needed. This figure rose to 40% in the ten days following birth. Within the hospitals the answers showed a similar pattern with 28% in the Royal Berkshire Hospital, 30% in Great Western Hospital and 30% in Basingstoke Hospital reporting that their emotional health needs were not entirely met. 87% of women responding to the survey believed that emotional health was an important issue for them during their maternity experience.

The physical care received by women throughout their maternity experience also was less than perfect. In the antenatal stage 16% of women said they did not receive all the physical care needed and that doubled in the postpartum period to 31% or one in three. During birth it was surprising to note that even within the hospitals physical care was not as good as one would expect and hope for. The Royal Berkshire Hospital showed 24% of respondents feeling their physical needs were not completely met, this was 29% in Great Western Hospital and more than one in three (36%) in Basingstoke Hospital.

Regarding making choices and having those choices supported the data does show that 75% of women had all their choices supported. A further 19% or one in five had at least some of their choices supported and only 5 % felt that their choices were not supported.

Women were asked to identify specific statements that they felt positive about during their maternity experience. These answers showed that although some women were positive about



certain aspects of their care, those who did not tick specific statements could have been said to have been less than positive or may even have felt negatively. For example, 75% said they felt treated with respect and dignity, that leaves a quarter who did not feel that way. Similarly, 64% said the information given to them was clear which could indicate that 36% or around one third were not clear on all the information given. Around 57% of respondents believed that they were free to make the decisions they wanted and the choices and options available were well explained thus over four out of 10 women did not support these statements. 67% of women felt positively about the support of midwives and doctors and their antenatal care, however only half positively rated their postnatal care. These areas will provide fertile ground for further exploration and improvement in the future.

Although the reverse question was asked requiring women to say what they felt was not good about their care, this was difficult to analyse given that 67 mothers skipped the question. Of those who did respond almost 1 in 5 felt they had not been treated with respect and dignity. 3 out of 10 were not clear about the information they received and 3 out of 10 did not feel free to make their own decisions. One third felt choices and options were not well explained and a quarter were dissatisfied with the support they received from their doctor and midwife. Whilst 28% were not entirely happy with their antenatal experience this figure jumps to 45% for postnatal care. This question highlights areas that will need to be improved for future pregnant women in West Berkshire although the lack of responses makes analysis more difficult.

Respondents were asked to rate their overall maternity experience and we have chosen to analyse this data by hospital. The hospital that rated the highest i.e. Where women felt that their birth experience was excellent or good was Great Western Hospital with a figure of 74%. Next is Basingstoke Hospital with 67% and then Royal Berkshire Hospital with 64%. Looking at the least positive end of experience where women felt that their birth had been poor or traumatic there was little difference Royal Berkshire 12%, Great Western 14% and Basingstoke 15%. It is worth remembering then that in two of the three hospitals that is Basingstoke and Royal Berkshire one third of women felt their experience was only ok, poor or traumatic and in Great Western this figure was only one quarter.

Further analysis could be considered looking at their experience across the whole i.e. including during pregnancy and in the 10 days after pregnancy. This showed similar breakdown with 67% rating their complete overall experience excellent or good and 15% as poor or traumatic.

Finally, women were asked about having a chance to talk to a health care professional about their birth experience. Detailed comments are set out in the main body of the data but as an overall yes or no, 57% almost six out of ten women said they did not get this chance and 24% said yes, they did. Of the remaining 36 women who made comments, a further 12 stated they did not have a satisfactory discussion with a health care professional which takes that percentage to 64%.



Responses from commissioners and providers of maternity care



Andrew Sharp, Chief Officer

Healthwatch West Berkshire

Broadway House

4-8 The Broadway

Northbrook Street

Newbury

West Berkshire

RG14 1BA

Dear Andrew,

Thank you for sharing the findings from the recent maternity survey detailed in your Healthwatch West Berkshire Maternity Report March 2020 with GWH.

We plan to share the learning with our staff and continue to strive to improve our maternity service

taking on board the valuable feedback from women who have recently given birth at GWH.

We very much support the recommendations outlined in your report.

Yours sincerely

Christina Rattigan

Head of Midwifery

Great Western Hospitals NHS Foundation Trust

CC: Kevin MacNamara, Chief Executive

CC: Amanda Fox, Divisional Director Women's Children's and Outpatients





Dear Andrew,

Thank you for sharing the draft West Berkshire Healthwatch report on the survey you conducted on women's experiences of maternity services. As you have stated, women living in West Berkshire have a choice of care provider for maternity care and we are only able to comment on the care provided by RBFT. In your survey there were 75 women who delivered at the Royal Berkshire hospital at some time in the past three years. This is a relatively small number of women; however, we are always appreciative of feedback so that we can share and celebrate positive feedback and learn and improve when needs are not being met.

Some of the questions in your survey are very broad and it would be helpful to have qualitative commentary to understand better the experiences of women being cared for by RBFT. For example, question 6 regarding emotional support and question 12 around overall experiences. have detailed below some of the work we have done on emotional support over the past 12 months for your information:

Emotional support of women and families is of great importance to the maternity unit at the Royal Berkshire Hospital and this is demonstrated in the services developed:

- April 2019 we opened our Birth Reflections service which women can access from 6 weeks after birth. The service aims to support women to discuss and understand the events of the birth, answer any questions, discuss on-going emotional, psychological and physical concerns, as well as choices and recommendations for any future birth.
- September 2019 we launched our Joint Mental Health clinic which provides a model of joined up obstetric and psychological care planning for women booked to have their babies at the Royal Berkshire Foundation Trust (RBFT), with partnership working from expert clinicians in perinatal mental health from both the RBFT and the Berkshire Healthcare Trust.
- RBFT has developed and released an IBook called Me and My Baby that women are informed of during the antenatal and postnatal period. The IBook contains videos and information about emotional wellbeing and signposts to additional services that are available
- RBFT are now recommending and using the Mum and Baby app which contains extensive information about emotional wellbeing. Recent data regarding the use of the Mum and Baby app shows that a high number of women under the care of RBFT are using the app with Personalised Care Planning and Health and Wellbeing in pregnancy the most frequently visited and downloaded resources
- More recently RBFT have been holding weekly live chats with women via social media in collaboration with Reading Maternity Voices Partnership. This is very popular with women and has



proved to be another forum for emotional support as well as practical advice and information sharing

- Our Fetal Medicine service has been re-organised to ensure women are better supported if a fetal abnormality is diagnosed
- We are also about to pilot a way to provide support to women who's babies are admitted to NICU, this support will follow them into the community setting
- Berkshire Perinatal Mental Health Team have been providing training on our in-house mandatory training for the last 18 months to help the MDT understand the more common perinatal mental health issues and how to refer appropriately.

On page 13 of your report it states there is cause for concern that less than two thirds of women delivering at RBH rated their experience as excellent or good. More understanding is needed as this does not compare with other feedback, we get e.g. from Friends and family test and does not triangulate with the significant improvements seen in both the CQC maternity survey and also the recent CQC rating.

We have made many changes to our maternity service in the past three years with much of these service improvements being co-produced with Maternity Voices Partnership. These improvements cover all women using our services.

With regards to the recommendations I would suggest that any future surveys are for feedback from women who have used services in the past 12 months and are specific to the care provider and include narrative to provide clarity and depth to the responses. You state that data on maternity services should be presented annually to the health and wellbeing board. Which data are you suggesting?

Thank you for undertaking the survey and for giving us the opportunity to comment on the report.

Kind regards

Gill

Royal Berkshire

NHS Foundation Trust

London Road

Reading, Berkshire

RG1 5AN

Gill Valentine

Director of Midwifery





Dear Andrew

Thank you for sharing your Healthwatch West Berkshire Draft maternity report with myself and giving me the opportunity to respond, apologies for the delay.

Currently 330 women that reside in Newbury choose to book to birth at HHFT; of these women 131 are registered at Falkland and Burdwood surgeries and receive 100% antenatal, postnatal & intrapartum care from HHFT midwives. The remaining 199 women are registered at other GP surgeries in West Berkshire and receive antenatal and postnatal care from RBH midwives, therefore it is uncertain from the report if the women booked have received or not received information from HHFT or RBH midwives.

Looking forward, we have been exploring our options to provide 100% care to all women that book to birth at HHFT, this will include antenatal, postnatal & intrapartum care. Our intention is to work alongside the multi professional team and to work from a hub within the Newbury area.

We have recently visited the Family Hub in Thatcham and are keen to develop relationships with the RBH midwives who currently offer Antenatal Education as well as the Health Visiting team and to build liaisons to ensure that all women are receiving as much up to date and relevant information about our service as possible.

Prior to the Covid outbreak, we had arranged a matron to matron meeting to discuss how we could support the midwives and women that are operating and receiving care across these borders to assure that women were being provided gold standard care despite their geographical location of residence. We will continue to build these relationships when we are able at our earliest opportunity.

Please let me know if you would like any further information.

Regards

Fay Corder

Associate Director of Midwifery





Dear Andrew,

Thank you for sharing this draft West Berkshire Healthwatch report, following a survey conducted on women's experiences of maternity services at Royal Berkshire Hospital, Great Western Hospital and Hampshire Hospitals. It is always helpful to receive feedback from women and their partners on the care they received, so that we can learn what is working well and where things can be improved. It is also important to ensure that we triangulate all forms of feedback that we receive as a commissioner, to get a balanced view that is representative of our population and of the mothers receiving midwifery care in Berkshire West. We have subsequently taken your report to our Berkshire West Integrated Care Partnership (ICP) Maternity Steering Group to review and to use; alongside other MVP feedback in reviewing the quality of the midwifery services we commission and in our continual drive to improve services.

It is positive to see that you have received responses from all 3 maternity units included in this survey and that all have advised that they will share the learning and consider and/or support the recommendations you have made.

Your report highlights the fact that women in West Berkshire have the opportunity of making choices on where to receive midwifery care and where to deliver their baby that spans across 3 separate provider Trusts delivering maternity services and you are subsequently right in ensuring that information is reviewed from all 3 trusts by the West Berkshire Health & Wellbeing Board when midwifery care is being considered for your West Berkshire population.

Debbie Simmons Nurse Director Berkshire West CCG





ADDENDUM

Covid 19, new mums and Health Visitors

Since the draft report was first presented to the Health and Well Being Board in March the UK has battled with its worst pandemic in over 100 years. During this time however, women in West Berkshire have continued to give birth and bring up new-born babies in an utterly alien environment to that which anyone else has ever experienced.

In this time, we have helped create a new virtual 'West Berkshire Maternity Forum' which has now met a number of times. It followed contact from a local Facebook group of new mums getting in touch and also working with Reading Maternity Voices. The Facebook group has over 500 members and has acted as an information and support portal during the lock down period.

In the first couple of these online meetings it became clear that lock down had proved very tough for many new mums who had hoped to gain help from family, friends and health professionals in the first months after giving birth. However, this was largely not the case from March to July of this year, due to the pandemic, in the way they may have expected to have help and resource available to them prior to the outbreak.

Of particular note, was the communication 'gap', with many feeling they did not know what to do around important issues: including getting in touch with their midwife and what to do if they were not available; baby weighing and how important this was or even how to do it safely. There were inconsistencies from the four local hospital Trusts around partners visiting or accompanying pregnant women. It is important this feedback does not get lost. We hope to be able to assist the providers and commissioners to listen, respond and perhaps potentially amend or add to services following the feedback.

It has emerged from talking to new mums within the West Berkshire Maternity Forum that Health Visitors (HV) play a vital role, in supporting them postnatally. The HV service has been greatly affected by being unable to operate normally with limited mitigation being open to the service during the pandemic. This has inevitably had a huge impact on new mums.



Over the last few years, the Health Visiting Service has of necessity become resource driven and more targeted. But the expectations of new parents remain the same. That is, that they will have a member of the Health Visiting team there to support them throughout the early years of their child's life.

- The very nature of the Health Visiting Service has been that it is universal. Its strength lies in this universal access and the fact that it is a preventative service. Sadly, this appears to be no longer the case. The recent Covid crisis has highlighted this.
- It is recognised that the Health Visiting Service along with all health services has been under immense pressures during these extraordinary times.
- There is a general recognition that individuals have been severely affected mentally, as well as physically during these times. New parents have been highlighted as being particularly vulnerable in this respect.

If we are to be guided by the first 1001 days movement and respond to the needs expressed within the Maternity report, the following issues are of vital importance:

- Commissioning a Health Visiting Service that is universal and accessible by the population it serves in normal times and in particular maintaining this service in any future pandemic or second wave.
- Ensuring clear information about what the Health Visiting Service provides and how to access help is available to all mothers. This should include information about appropriate voluntary and community services
- Providing face to face contact at clinics, which are held regularly, weekly if possible, and at an accessible location to support mothers in the post-partum period
- Ensuring that there is a reliable, well-staffed, well publicised helpline. This is particularly important when face to face contact is not possible. New ways of maintaining contact such as consultations via zoom should be considered
- Highlighting the importance of identifying and supporting those with postnatal depression

The BAMER Community

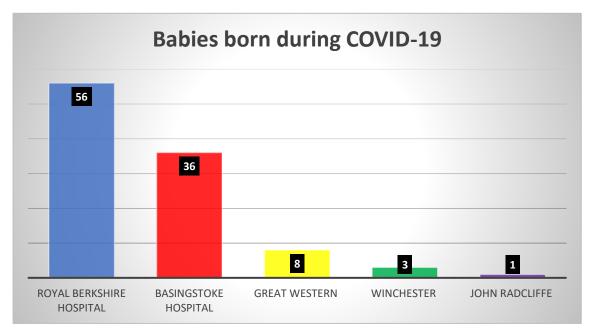
The BAMER community has been greatly affected by Covid 19 and we believe that both during and post-Covid pandemic, further focus needs to be given to the BAMER community and maternity services. This report does not have the scope to do that, but from our anecdotal feedback suggests work is undertaken to help ensure health inequalities are reduced in relation to maternity services. We hope that some engagement work is undertaken to look at ease of access, communication issues, isolation, mental health, and levels of understanding of how services operate in Berkshire West for mothers from these communities both during anti and post-natal periods.

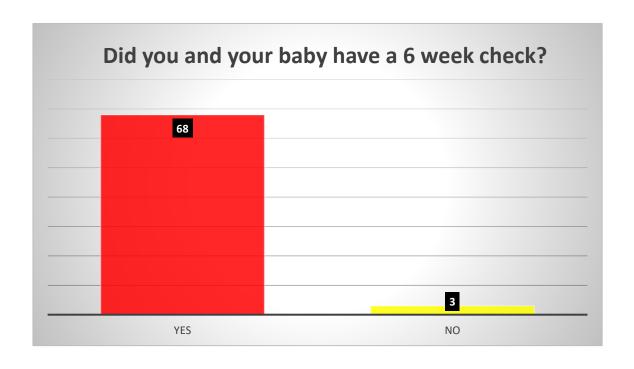




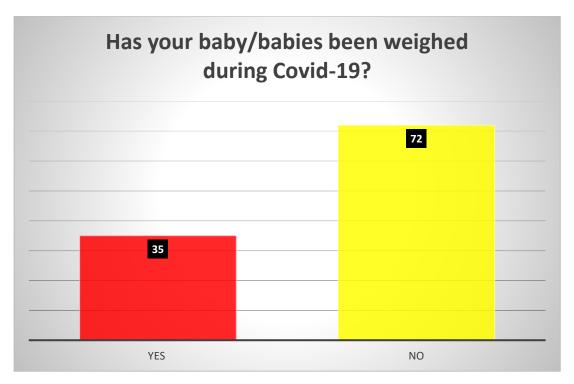
Additional Information found during COVID-19

Data collected from local Facebook page for West Berkshire Mums - March 2020 - August 2020









Comments from the Facebook group around 6-week checks, baby being weighed & Health Visitors:

- X had his check up at 8 weeks when he had his first set of jabs but only because I insisted,
 I got the impression that it was an inconvenience and certainly wasn't the norm!
- 6-week check was done at 7.5 weeks
- I was told at both hospital and by GP that baby length is no longer collected as important information. If you want it, you have to do it yourself
- I put "yes" as we had most, but not length or head measurements. It all worked out fine but the communication by the practice wasn't great
- So, we had our 6 week check the week before lockdown started. We saw a GP that was standing in at the practice at the time. I didn't feel very confident with him, he seemed to be googling what it was he needed to be doing. He didn't weigh X at all he checked her hips and her head circumference. He then called another doctor in to get what he had done signed off and asked her about something that I questioned. I thought they were meant to do a check on us too but the only thing I got asked was about contraception!! Considering my stitches had been swollen and was on the system nothing was asked
- No measurements taken, we went at 6 weeks, it was the week just before lockdown, so doctor was trying to do everything as quickly as possible and get us out the door
- We had our 6-week check done at the same time as her jabs but no measurements. Don't even get me started on trying to get her weighed that's been an absolute nightmare back and forth with both doctors and Health Visitors"
- I saw my HV 5 days after giving birth but haven't seen her since. I also called her once for advice and she was very helpful, but I haven't been able to get hold of her since
- My HV is really approachable, supportive, and non-judgemental (I wasn't judged for combi feeding).
- Our lovely health visitor did all she could. Baby born mid Feb so had antenatal chat at home and then post-natal over phone.
- Some appointments seemed rushed and a lot of information to go through when you are exhausted. Once you have your set appointments you don't hear from anyone