



Cornwall & the Isles of Scilly 2018-2020

Maternity journey feedback



KERNOW

Maternity Voices

Working in partnership to improve maternity services

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About us



Maternity Voices Partnerships (MVPs) are independently-led NHS working groups: a committee of women, birthing people & their families, community groups, supporting organisations, local commissioners and providers working together to review and contribute to the development of local maternity care.

Kernow MVP was created to support the implementation of Better Births across Cornwall and the Isles of Scilly. We listen to and engage with those who have recently used our local maternity services and feed this back to those that commission & provide them.

Kernow maternity voices history

Kernow MVP was launched in April 2018 with Georgie Watson as Chair. Over the last three years KMVP have worked in partnership with the local maternity and neonatal system on many exciting projects. The role of MVP's has continued to develop over time and they are now an integral part of a safe and well run maternity system. Having a vital role in patient safety initiatives, designing services and championing service user voice and lay involvement at all levels.

This report is the culmination of a long running survey and the information within it is crucial to identifying the main themes of feedback which will be used to inform our priorities going forward into the next 12 months.

I would like to say thank you to all 760 people who took the time to respond to this survey and shared your personal stories with us. Without you we could not do what we do.

Nicki Burnett
She/her
Kernow MVP Chair



Our vision is simple

Inclusive, safe, personal and kind maternity care for all in Cornwall and the Isles of Scilly. Designed, implemented and evaluated in partnership with the communities that receive the care. We believe those that use the service should have their voices at the centre and be able to have an equal say in how those services are designed, provided and improved.



Our purpose

We are here to support that dream. To support lay people from all corners of our community to have a say and be heard. To champion the voices of service users, to be a critical friend at a strategic level and ask the questions needed to ensure transparency. To engage with the community and facilitate open and inclusive conversations about maternity care in Cornwall then report what we hear back into the system to support change and improvement and celebrate success.



Our approach

People's views come first – especially those who have been marginalised by institutions and the system.

We champion what matters to you and work with others to find solutions. We are independent and committed to anti racism, LGBTQ+ inclusion, accessibility and representation.



How we find out what matters to you

People are at the heart of everything we do. We gather your views and identify what matters most to people by:

- Visiting services to see how they work
- Running surveys and focus groups
- Going out in the community and working with other organisations



Find out more about us and the work we do

Website: www.healthwatchcornwall.org.uk/kernowmaternityvoices

Twitter: @KernowMVP

Facebook: @KernowMVP

About the survey

Local context

Cornwall and the Isles of Scilly covers a large rural area of approximately 3,580 square kilometres with a population of around 567,000. There are an average of 4,500 births in the area each year and the birthing population have the choice of one obstetric unit, one alongside midwifery unit and three freestanding midwifery units as well as home birth. A significant proportion of the population that live in the north and east of the county choose to birth across the border in Devon due to proximity of the units.



Survey design

This survey was co-designed with our committee and it's purpose was to evaluate the whole maternity journey from the point of view of the person using the service. It was hosted on the Survey Monkey platform and promoted on social media.

It covers antenatal care, birth and postnatal care and is inclusive of the whole of Cornwall and the Isles of Scilly.

This survey was open to anyone who was pregnant and gave birth in Cornwall and IOS during 2018, 2019 and 2020.

The responses were collated and analysed by our Chair. Thematic analysis was used to identify the most popular themes within the qualitative feedback and they are presented alongside the data from questions asking respondents to rate their care and direct quotes and service user stories.

Who gave feedback?



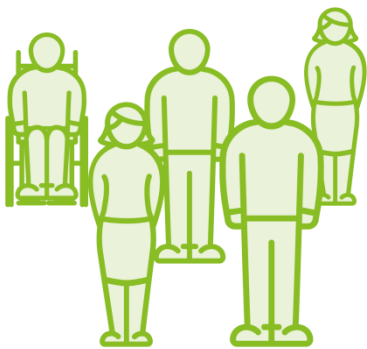
760 respondents

We had 760 individual responses to the survey, of those respondents:

202 birthed in 2018

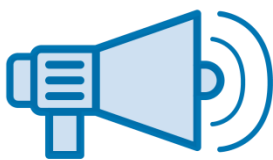
316 birthed in 2019

242 birthed in 2020



49% of people said this was their first baby

69% of people were between 26-35 years of age



2% of people said they were LGBTQ+

This included lesbian, bisexual, pansexual and non-binary.



We had responses from

46 of 50 postcodes

Including the Isles of Scilly. The top 5 postcodes for responses with over 35% representation were:

- TR1
- TR13
- TR14
- TR15
- PL25

During pregnancy



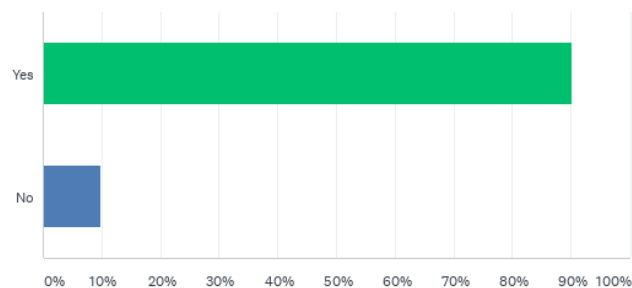
We asked about antenatal care during pregnancy and how many midwives were seen by a family

Overall 90% of respondents said they had a named midwife who coordinated their care during their pregnancy.

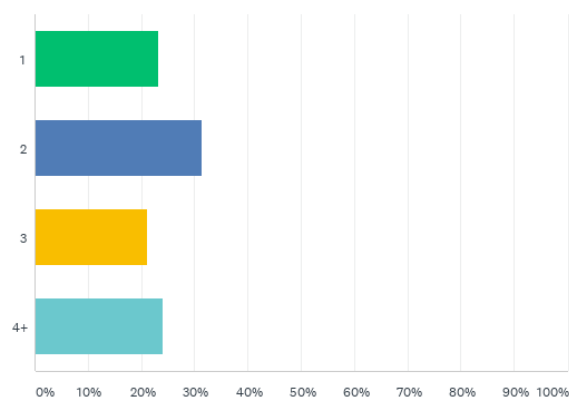
In 2018 66% saw one or two midwives during their pregnancy, in 2019 it was 51% and 2020 50%.

In 2020 28% of people saw four or more midwives during their pregnancy compared to 18% in 2018.

Q3 Did you have a named midwife, who was responsible for coordinating your care during pregnancy?



Q4 How many midwives did you see during your pregnancy?





Bump 2 baby antenatal classes

Bump to baby is the antenatal education programme provided jointly by the NHS and Council in Cornwall

We asked respondents if they attended a Bump 2 baby class during their pregnancy.

In 2018 30% said yes, in 2019 23% said yes and 2020 15% said yes. It is important to note that in March 2020 Bump 2 baby classes stopped due to Covid and this would explain the sudden drop in numbers.

We asked those that did not attend for the reasons why. Over 33% said they were not told about the classes and did not know they could attend. 15% said the class was held at an inconvenient time

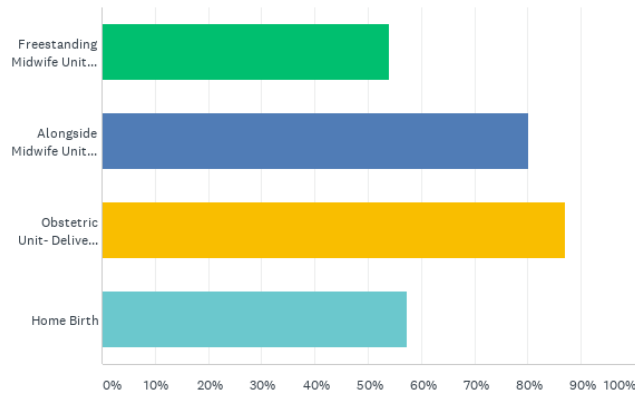
and 19% said they did not think the class would be useful for them.

For those that did attend we asked them to rate how useful the class was out of ten, the average rating was

6.3 out of 10

The feedback about the classes was very mixed, the experience, knowledge and skill of the facilitators had a big impact on how well received the class was. There were some concerns raised about the quality and balance of the infant feeding information and some parents who had chosen to artificially feed their baby felt judged and not included. Comments suggested that many felt the information shared about birth choices was very basic.

Q8 Did your midwife discuss all the place of birth options with you, including benefits and risks of each choice? Please tick all that apply



Choosing place of birth

We asked which options for place of birth were fully discussed by their midwife during pregnancy

Over 87% said their midwife talked to them about birthing in an obstetric unit compared to 54% for a freestanding midwifery unit. Home birth was discussed with 57% of respondents over all.

When we break down by year we can see some changes over time.

In 2018 Freestanding midwifery units were discussed by 50% and home birth by 48% while obstetric unit was discussed by 86%. In 2020 freestanding midwifery

units had increased to 57%, home birth to 63% and obstetric unit was relatively static at 87%.

Having accessible and understandable information available in a variety of formats is key to being able to make informed decisions.

Respondents wanted to be able to have time to discuss these options with their care provider and ways of accessing this information easily between appointments.



Giving birth





Service user story – 2020

I had a planned c-section and the care received was very good. During the actual operation I was well informed what was going on and well cared for throughout. Anaesthetist was particularly reassuring and thoroughly answered any questions.

I was encouraged to only have one arm through my gown for the procedure so I was able to have immediate skin to skin (once we knew baby was ok) which was so important to me. Also had delayed cord clamping which I was really pleased about.

Felt like was given lots of chance to bond/feed/get to know our son in recovery. The only part of the process that

I found a little difficult was the 5 hour wait before my operation (we knew we were 3rd on the list so a wait was likely). We were only spoken to by 1 or 2 people during this time and I probably needed a little more contact/reassurance to stop me worrying!



Share your story with us

Email: kernowmaternityvoices@gmail.com

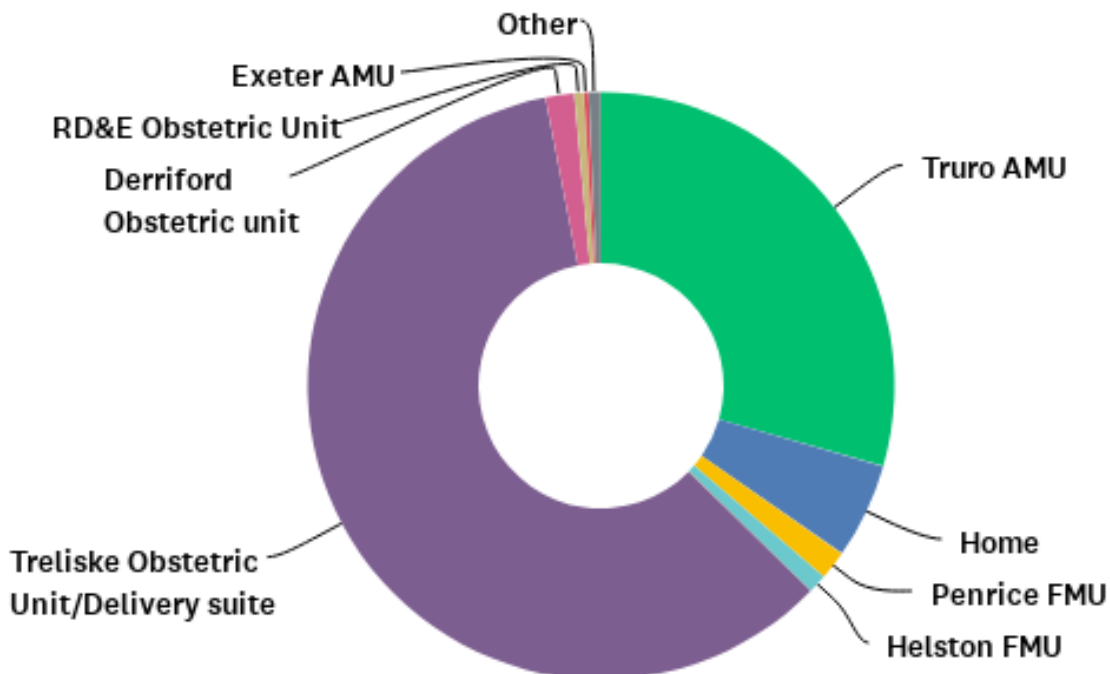
Twitter: @KernowMVP

Facebook: @KernowMVP

We had respondents that had given birth in all four types of setting in Cornwall. Home, freestanding midwifery unit, alongside midwifery unit and obstetric led unit. We also had some respondents that had given birth across the border in Devon.

- **Treliske Obstetric unit- 60%**
- **Truro Alongside Midwifery Unit – 30%**
- **Penrice Freestanding Midwifery Unit – 1.5%**
- **Helston Freestanding Midwifery Unit – 1%**
- **Derriford Obstetric unit – 1.5%**
- **RD&E Obstetric unit – 0.5%**
- **Exeter Alongside Midwifery Unit- 0.2%**
- **Home – 5%**

Q10 Where did you give birth?

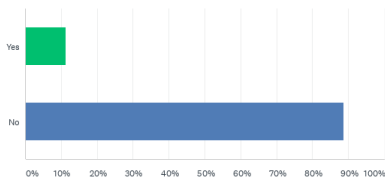


We can drill down into this data to discover differences and changes over time

- **The percentage of respondents that had a home birth in 2018 was 2% and in 2020 it was 5%**
- **Truro AMU was the place of birth for 32% of respondents in 2018, in 2020 this was 24%**
- **In 2018 58% of respondents birthed at Treliske obstetric unit, this was 65% in 2020**



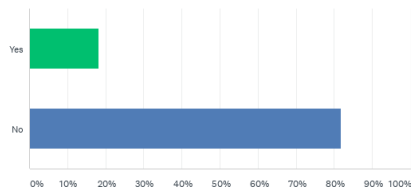
Q9 Did you receive care from your named midwife during labour?



Continuity of carer

We know that continuity of carer is a priority so we asked people whether their named midwife provided care for them during labour. Overall 11.3% said Yes.

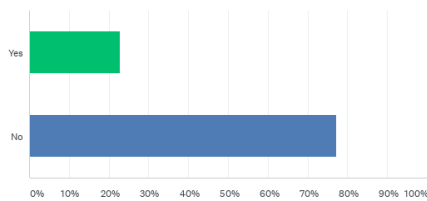
Q9 Did you receive care from your named midwife during labour?



When we break this down we can see a significant change over time.

In 2018 only 6% of people answered yes where as in 2020 this had increased to 18%.

Q9 Did you receive care from your named midwife during labour?



When we break it down further to people who gave birth in 2020 in a community setting this rate increases again to 23%.

This compares to people giving birth in 2020 in Treliske obstetric unit where 15% answered yes to receiving care from their named midwife in labour.



Preparing for parenthood resources

Here are some ways for you to access information to support your decision making during pregnancy, birth and parenthood.

Solihull approach- www.inourplace.co.uk **Access- TAMAR Maternity Natters- Fortnightly sessions online with your community midwives.** www.ticketsource.co.uk **Search Maternity Natters**



Service user story – 2020

Following my first birth 2 years ago I didn't think I would ever have another child. I suffered a lot of trauma from the way I was cared for and although the birth was straight forward I felt totally out of control.

When I became pregnant again I was really scared, it took me a while to admit how scared I was to my midwife but she was really supportive. She listened and we talked through things that may make it easier for me this time. She understood how important it was for me to be in control and be allowed to make my own decisions.

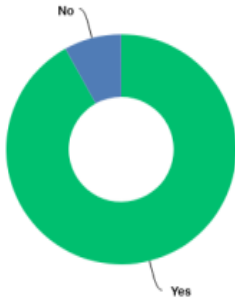
This worked well during pregnancy and she communicated what she wanted to do really clearly and ensured she got my consent before continuing, having her for all my care made such a difference. I was feeling much more positive and felt like I could definitely manage the birth. We wrote a birth plan together and I was planning to go to the birth centre at the

hospital where she could hopefully care for me.

Unfortunately it all went wrong when I went overdue, all my choices were taken away and I was booked for an induction. I still don't really understand why, nobody explained what would happen until I arrived at hospital when a nice midwife told me what they would be doing. I thought my baby was in real danger but then I sat on the ward for 3 days completely terrified with no support.

All the old feelings came back and I couldn't communicate how scared I was. I didn't see my community midwife again but I wish she had been there. I didn't know there were other options, I had the drip and was told I had to have an epidural because I wouldn't cope. I didn't want it. They had to use metal things to get baby out and now I am damaged. Why did nobody tell me this could happen?

Q11 Were you involved in decisions about your care during labour?



Dignity, respect and decision making

We asked two questions about whether people were treated with dignity and respect during their birth and whether they were involved in decisions about their care.

Overall 95% said they were treated with dignity and respect and 91% said they were involved in decisions about their care.

Q11 Were you involved in decisions about your care during labour?



When we break this down by place of birth we can see a difference.

- For Treliske obstetric unit 88% felt involved decisions about their care and 93% felt treated with dignity and respect.
- For community births these rates change to 97% felt involved and over 99% were treated with dignity and respect.

We asked people to rate their birth experience out of 10.

The average rating was **8.3 out of 10**

People who birthed in a community setting rated their birth on average as

9.2 out of 10

People who birthed on Treliske obstetric unit rated their birth on average as

7.9 out of 10

13.5% of people overall rated their birth experience as 5 or under

52% of people overall rated their birth experience as 10.

Themes and comments

We asked for comments and received 441 individual responses about their birth experience:



- Staff attitude and communication appeared in over 40% of the comments



- Induction, consent and birth options were mentioned in 24% of comments



- Theatre was a factor in 12% of comments

Other themes that occurred regularly in the comments included:

- Day assessment unit
- Delay
- Pain relief

Comments

People told us that communication and staff attitude were things that had the greatest impact on how they felt about their care, when done well these things resulted in a positive experience. Understanding what was happening and being supported to make informed decisions and give consent for treatment was important to them. Some people told us they were not aware of their options or felt forced into one choice without understanding the alternatives.

When people felt supported and listened to they felt positive about their birth experience even if it didn't go to plan, they reflected that even if they did not originally plan a caesarean or induction they felt safe, cared for and respected and this led to a positive experience.



Ended in emergency c section but every member of the team were absolutely amazing. So supportive, friendly, kept calm, reassuring. 🗨️



My baby was born 8 weeks early, the midwives and doctors kept me completely calm and explained everything. They was absolutely amazing. 🗨️

Comments

- A much better experience than my first labour. Having care from my community midwife improved my experience. I benefitted from the new outpatient induction option, and found this much preferable to inpatient induction. 🗨️
- I didn't feel what was happening was communicated to me throughout the whole labour. I felt alone and did feel concerned for my welfare and that of my baby. 🗨️
- I was told on the triage line that I shouldn't go to Treliske as I would be wasting their time, I got to Treliske and I was 9.5 cm dilated and they really reassured me and made me feel safe. 🗨️
-
- I was very worried about giving birth during corona and being in labour on my own without my partner but I couldn't fault the care that I received at Treliske and the midwife looked after us so well. 🗨️
- Midwife was often abrupt and rude, my decision to not have internal examinations was frowned upon and I was bullied into having them or be refused access to the birth centre, I was told I was not ready to birth my baby when I naturally began to push and was told to stop and have an internal before being 'allowed' on the delivery suite. My midwife on delivery suite was great and followed my hypnobirthing birth plan where possible and explained everything. 🗨️

Service user story – 2018

I felt bullied and humiliated during my labour. They tried to convince me to do things I didn't want, no one cared about my birthplan. I was given an syntosinon injection without asking when it was in my birthplan that I didn't want it. I was asked numerous times why I was screaming so much. I felt scared and out of control. I felt like I was fighting for my rights and no one listened. I refused forceps and was told that the doctor was going to use them and if I didn't want him to then I

would have to race him to get baby out first. I still feel traumatised by the birth and I still now 20 months later sometimes stay awake at night running through what I remember happening.



Service user story- 2020

I'm happy myself and my baby are well. Due to the Covid restrictions my partner couldn't come in when I went in to be checked for reduced movement and bleeding. I was anxious and worried about Covid. I was induced there and then and my partner couldn't come in which wasn't nice. (Understand why he couldn't but still upset as it's something you want to share and need support with).

I felt like the antenatal ward staff didn't seem to care too much as I was shown to my bed and then left to my own devices, nobody came to check on me or the other lady in the opposite bed and she even asked me to get a midwife for her as she needed the loo and was on the monitor but had no way of calling a midwife (we hadn't been shown that there were bells- I didn't even have a pillow on my bed). The only time I saw a midwife was when I went to find one myself and at the changeover shift a midwife came to write her name up on the board and introduce herself. I didn't feel like the induction process had been that well described to me as I wasn't aware that I couldn't use the birth centre until the shift change over (I already had the pessary in at this time) I also didn't realise the risks of induction. I was just given a leaflet to read.

I think that birthing people should be given more time to think about it as I literally went in thinking I would be checked over and then was induced. I didn't have my hospital bag with me or be able to discuss with my partner. I did feel pressured into saying yes. My actual birth was better though the staff were much more attentive and caring upstairs on delivery suite.

Service user story – 2019

Planned caesarean for breech baby, all staff were very kind, professional & caring. I was very upset I needed a c-section but they ensured I knew exactly what to expect & the experience of meeting our baby was very positive.



Service user story- 2019

Following a traumatic first birth, I had high levels of anxiety around the birth. I really felt that the Birth Centre would be the wrong place for me- I was terrified of being out of control, with little pain relief and ending up in theatre again. On arrival at the Birth Centre all of this anxiety disappeared- what a beautifully calm and reassuring space. I felt safe. Becky the midwife was absolutely incredible the whole way through, she made me believe in myself, she calmed and reassured me and never left our side. Tabitha was born after 2.5 hours and I feel so very blessed to have had such a positive, calm and happy experience. I haemorrhaged shortly after her birth and was transferred to the delivery suite for monitoring and stitching where, yet again, we received care that is second to none. Nothing was too much trouble and I felt safe, cared for and treated with respect and dignity. Two very different births but the same high levels of care and compassion both in 2017 and 2019. We will be forever grateful.



Postnatal care



Sometimes families are discharged straight home after birth and receive all their postnatal care in the community and sometimes they are admitted to a postnatal ward for follow up care. RCHT have a general short stay postnatal ward, a transitional care ward and a neonatal unit. 61% of people who completed this survey stayed at least one night on a postnatal ward. We asked them to rate their stay on the ward and the average rating was

6.8 out of 10.

Service user story- 2020

Felt like I was completely forgotten about because my baby was on neonatal. Had a blood test and was told I would receive the results later that day, this would decide if I was allowed to go home. This was on the Monday I was given the results of the blood test late Tuesday evening and only because I asked, they hadn't been checked previously, this delayed me being able to go home to my 4 year old daughter at home, because the results showed I needed iron tablets, they I wasn't able to be provided with until the Wednesday morning. I was asked all of three times if I would like pain relief from the Monday morning until the Wednesday morning. I had a cannula in my hand that was put in during labour, I asked for it to be removed on the Monday evening when on the ward, they told me it needed to stay in in case I needed medication through it,



I managed to accidentally knock it out the next day, I didn't tell any member of staff and not one of them noticed.

I was also put on a side ward with three other mums enjoying their new babies while my baby was poorly in neonatal, which I found very insensitive. Apart from a few members, I also felt the staff were rude. I began to put in a complaint but decided I already had enough on my plate. Luckily I don't want anymore children so will not have to stay on this ward again.



Volunteer with us

Are you feeling inspired? We are always on the lookout for new volunteers. If you are interested, please get in touch.

Website:

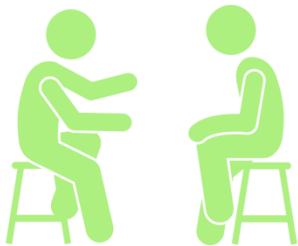
www.healthwatchcornwall.org.uk/kernowmaternityvoices

Facebook: @KernowMVP

Email: kernowmaternityvoices@gmail.co.uk

Postnatal Themes

There were 302 individual comments about the postnatal wards



Communication, consistency and consent

Over 30% of comments mention communication, consistency of advice and consent. People told us observations were done on them and baby without explanation and they were not clear what treatment they or their baby needed.



Infant feeding

Infant feeding support and advice was included in over 30% of comments. This was often linked to the theme about communication and consistent advice. People told us that they wanted more support if they chose to formula feed their baby including how to make up feeds and how much milk baby should be having. People who accessed the infant feeding team felt very positive about their feeding journey.



Ward environment and food

24% of comments mention the ward environment including heat, space, cleanliness and noise as well as the availability and quality of food.

Pain relief (7%), discharge process (10%), staffing (18%) and neonatal (7%) were also themes that were identified.

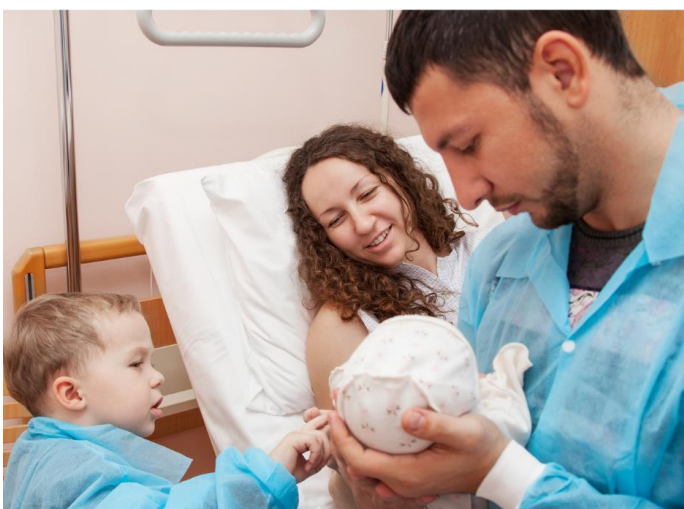
Postnatal ward comments

Had little support for breastfeeding, really disappointing. Although the two staff members were brilliant at everything else, they were so busy they did not have time to provide the care or feeding support. I discharged myself early because of this. I went to stay at Penrice for 24 hours which was amazing- one to one care from staff that were so supportive and knowledgeable in breastfeeding. Complete worlds apart!



I had a lot of anxiety due to the pandemic and not being able to have my partner there but they all took great care of me and helped keep me calm.

Lovely staff and very helpful although they were rushed off their feet and we stayed in longer than needed due to how busy they were as they were not able to give adequate time to assess our circumstances and come up with a way forward. My baby wouldn't latch and so we were finger feeding and because of this we had to stay in for 3 days.



Kept getting told I was going to be discharged, but then no one would come back. No pain relief given on day 3 even after asking.



People rated their postnatal care in the community on average as

7.5 out of 10.

There were 326 individual comments around community postnatal care. There were concerns raised about families having to travel to appointments especially within 24 hours of leaving hospital, having very limited face to face contact and not having a 6 week check. Many families felt they wanted more contact with the health visitor and during 2020 they really missed being able to access drop in clinics as their babies grew.

Postnatal community comments

- My midwife that I had for most of my antenatal and postnatal care at home was amazing. She went above and beyond and put me at ease with every concern I had. She answered every question I had. The best midwife I could of possible got for my experience. ”



- The after care for my little one was great but for me I don't feel like there was any especially after having a c-section the only reason I have a postnatal check was because I asked if it the doctor said that they didn't do them. No one was going to check my scar again it only happened because I asked them to check it. ”

- Couldn't fault it. During my previous pregnancy I saw three different community midwives so having just one was great. ”



- I never heard anything. I went in for my appointments and that was it. I have an episiotomy and also had to self inject for two weeks, I had no support with any of this. ”

- Midwives were all lovely just not enough visits available, felt a bit left on my own! ”

Postnatal community comments

I have been asked to go into hospital as they are too busy for home visits. I was also assigned a maternity support worker because my midwife was too busy. She was lovely but a) I had a traumatic Labour and b) I am a first time mum. I think I should have been given someone qualified. I am now peeing blood clots, presumably from the intermittent catheterisation.



Amazing the health visitors were great and so supportive even though they are so busy and understaffed!

Midwives was fantastic. I only saw one HV due to lockdown. There was then nowhere to weigh my baby and care over the phone was "interesting". The care/check ups I received from the GP were very average/non existent. Postnatal care for the mother certainly isn't a priority for them which is a shame. Even the first check of my baby was questionable.



The midwives were more than happy to come out to my house to see me and my new baby when I was feeling too poorly to get to them. They gave me lots of good advice and were just really lovely and supportive.

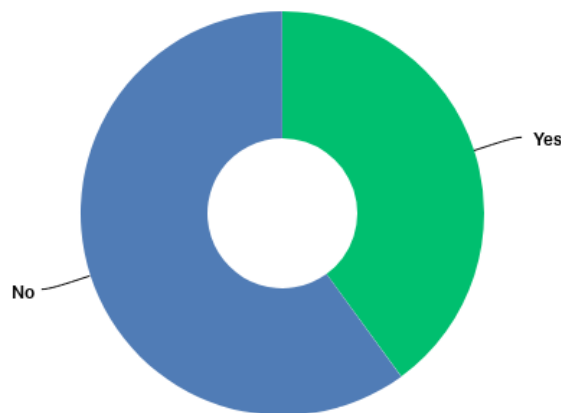
Specialist support



We asked if people had accessed any specialist support in the postnatal period such as the infant feeding team, physiotherapy or perinatal mental health support.

40% said yes and there were 266 comments giving more details about this care. The majority of people who accessed Infant feeding or physio support gave very positive feedback. The other main themes were about support being difficult to access due to capacity, not meeting criteria especially for mental health support, Covid restrictions impacting face-to-face support and staff awareness of what is available.

Q19 Did you need to access specialist care in the postnatal period? i.e infant feeding team, specialist physio, perinatal mental health support etc



We saw the infant feeding team who were amazing, put us totally at ease with feeding and it was really positive experience in terms to her supporting mixed feeding and ensuring the baby was latching well and gaining weight. We were able to text her at any time and it felt very personal. 🗨️

I was referred to the women's physio postnatally which was an excellent service and made a huge difference. It is just not easy to get an appointment, everyone should be able to see them. 🗨️

Mental health support was superb. They have changed my life forever and I am eternally grateful for how they have helped me. I went from a depressed anxious wreck to a happy and confident mother. Truly amazing support. 🗨️

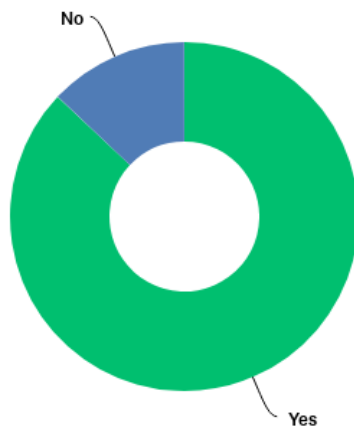
We asked if people felt supported in their infant feeding choices

87% said yes.

We asked people to rate the infant feeding support they received they rated it an average of

7.5 out of 10.

Q20 Did you feel supported in your infant feeding choices?



I asked to be referred because my daughter had tongue tie but the midwife didn't agree with me, and the health visitor wouldn't even check. This then meant I had to stop breastfeeding as it was agony. Now my daughter is 9 months old, she has a very clear (and textbook) tongue tie, which was referred to a consultant and will now be cut under General Anaesthetic as it is impacting her feeding and growth.

Had I carried on breastfeeding I should have been referred to the feeding team. It wasn't even mentioned to me and had to go to bottle feeding as I couldn't get my baby to latch on at all. The whole time I was in hospital I would try but couldn't get him on and nobody helped me.

I had video calls with the breast feeding specialists. I found this very helpful.

Infant feeding team were truly amazing and I couldn't have breast fed my daughter without them. I have nothing but praise for them!

Contact us



Kernow maternity voices partnership

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This report would not have been possible without the support of Healthwatch Cornwall