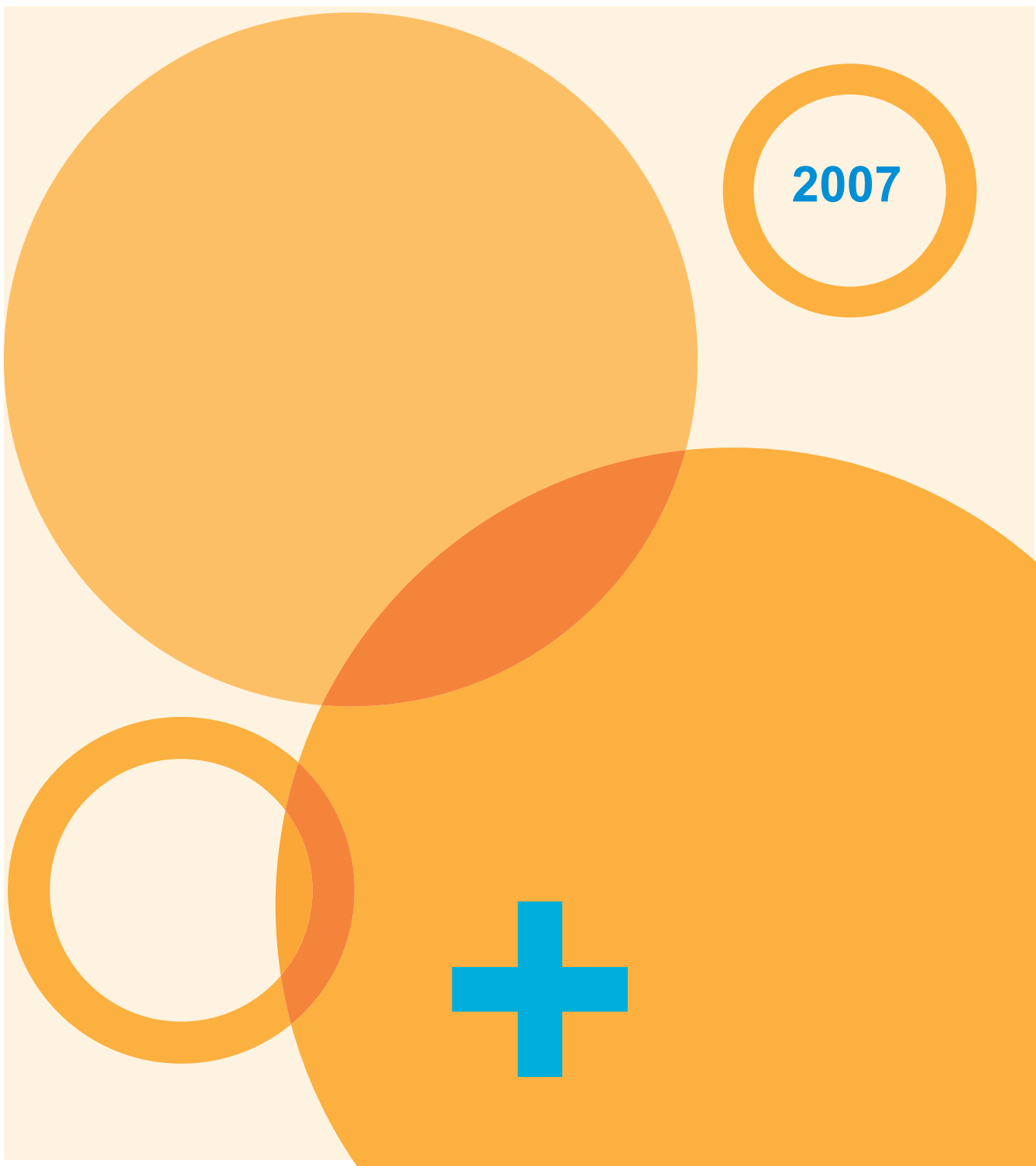


Listening to women

University Hospital of South Manchester NHS Foundation Trust
National Maternity Survey





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background

The National Patient Survey (NPS) programme was introduced in 2001 by the Department of Health. The first survey, of acute inpatients in all relevant Trusts in England, was undertaken in early 2002.

The Department has set out a rolling programme of patient surveys, and acute and non-acute Trusts are involved in the programme.

Other national surveys for National Service Framework programmes are also beginning to be rolled out to cover Cancer, Older People, Diabetes, and Coronary Heart Disease. A programme of national staff surveys also began in Autumn 2003.

The content of the National Patient Surveys is determined nationally, as is the content of the covering letters that are sent to patients. A national MREC approval letter covers the ethical issues. Send-out is normally undertaken on the Trust's behalf by their approved contractor under the honorary contract national arrangements.

Responsibility for the NPS passed from the Department of Health to the Healthcare Commission in early 2003.

All national data is collated by the Survey Co-ordination Centre, which is responsible for publishing national comparative data. The comparative data displayed in this report is from all the Trusts surveyed by Quality Health.



introduction

The National Maternity Survey was undertaken for University Hospital of South Manchester NHS Foundation Trust between May and July 2007.

All women aged 16 and over who had given birth during February were surveyed. Where Trust samples did not reach a minimum of 200, women who had given birth in January were included. Samples were checked on three separate occasions to ensure no women whose babies had died were surveyed.

RESPONSE RATE

115 completed surveys were returned from the sample of 200. 1 woman was excluded from the sample because she was ineligible to take part.

The response rate for University Hospital of South Manchester NHS Foundation Trust was 58% (115 usable responses from a final sample of 199).

REPORT CONTENTS

This Report contains sections that describe the results from the survey, and sets out the full results in the same format as they appear in the questionnaire. It provides comparisons of the Trust results against those of other Trusts undertaking the Survey (headed Trust and All). In these comparisons, after each result there is an indicator showing whether the Trust's performance is more positive than (↗) or not so positive as (↘) the national mean score (by 5% or more), or if scores are about average (→).

This Report also shows the results from questions in the survey which are covered by the National Service Framework standards, and pulls together all the Report's conclusions and action points into an Executive Summary.

The questionnaire provided space for respondents to write their own comments about any aspect of their care. The comments received are set out in a separate supplement to this Report. These comments have been anonymised as far as it is possible to do so by the removal of names or other identifying features where these have been included.



NSF standards & NICE guidelines

The National Service Framework for Children, Young People and Maternity Services establishes clear standards for promoting the health and well-being of children, young people and mothers; and for providing high quality services which meet their needs.

There are 11 standards in the NSF, the last of which covers maternity services and looks at the requirements of women and their babies during pregnancy, the birth and after the birth. This is Standard 11: 'Women have easy access to supportive, high quality maternity services, designed around their individual needs and those of their babies'.

Standards 1 to 5 also address some issues which are of relevance to maternity services and care, for example, low uptake of antenatal and postnatal support by younger women (Standard 4); involvement of fathers (Standards 1 and 3); and child health promotion (Standard 1).

The NSF includes a number of markers of good practice many of which relate to questions in the Maternity Survey. This report sets out these markers at the end of each section, indicates how the Trust is performing in relation to other Trusts on relevant questions, and provides action points.

There are also a number of NICE (National Institute for Clinical Excellence) Guidelines in relation to antenatal care. These are also included where they relate to questions in the survey.



executive summary

This section pulls together the conclusions and action points from each section of the Report to give an overview of the Trust's results and areas for consideration for action planning.

Early Pregnancy

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to care at the start of pregnancy are generally less positive.

ACTION:

- Increase the number of women who are given a choice of where to have their baby including the choice of a home birth.
- Ensure that information is given about the choices available to women on where to have their baby.
- Ensure that all women who need one are given a copy of The Pregnancy Book.

Antenatal Check-ups

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to antenatal check-ups are about the same or less positive.

ACTION:

- Ensure that women are given as much choice as is possible about where they have their antenatal check-ups and who will do them.
- Increase continuity of care from midwives so that women see the same midwife as often as possible.
- Look at ways of increasing the continuity of care from hospital doctors so that women see the same doctor as often as possible.



Tests and Scans

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to tests and scans are mixed.

ACTION:

- Ensure that all women have a choice about whether they have a screening test for Down's syndrome.
- Ensure that all women are given clear explanations about the reasons for testing for Down's syndrome.
- Ensure that women get clear explanations about the reasons for dating scans and mid-trimester scans and feel they have a choice about having these scans.

During Pregnancy

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to care during pregnancy are about the same or less positive.

ACTION:

- Ensure that all women are given a contact number in case they are worried during their pregnancy.
- Review the provision of NHS antenatal classes given the high proportion of women not attending NHS classes and in particular, those not attending any classes at all.
- Examine alternative times and places for classes given the number of women saying they were not convenient.
- Ensure that there are enough classes to meet women's needs.
- Review the content of classes to ensure they cover all the topics women want covered.
- Ensure that both verbal and written information is easily understood by women, and that all the information and explanations required are given.
- Ensure that all women are treated with respect and dignity, kindness and understanding during their pregnancy.
- Ensure that women are involved as much as possible in decisions about their care.

During Labour

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to labour are mixed.



ACTION:

- Ensure that women are given a choice as far as is possible about whether they are induced.
- Examine ways of increasing the number of women able to move around and choose the position that makes them most comfortable during labour.
- Review cleaning contracts to ensure cleanliness both in the labour / delivery room and toilets and bathrooms.
- Ensure that women are given pain relief in a timely manner to meet their needs.

The Baby's Birth

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to the birth of the baby are mixed.

ACTION:

- Consider whether the Trust's level of caesarean sections can be brought down.
- Examine the reasons for the numbers of women suffering tears, particularly serious tears.
- Ensure that stitching is done as quickly as possible following the birth of the baby.

The Staff

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to the staff are generally about the same or more positive

ACTION:

- Ensure that women are cared for by the same midwives as far as is possible during labour and the birth of their baby and if possible by midwives they have met previously.
- Ensure that husbands and partners are able to be present for the whole of labour and the birth of the baby if requested.
- Examine reasons why some women feel they are left alone at times which they find worrying.
- Ensure that both verbal and written information is easily understood by women, and that all the information and explanations required are given.
- Ensure that all women are treated with respect and dignity, kindness and understanding during labour and the birth of their baby.
- Examine ways of increasing the number of women who feel involved in decisions about their care during labour and the birth of their baby.



Post-natal Hospital Care

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to hospital care after the birth are mixed.

ACTION:

- Examine reasons why some women think their stay in hospital was too long.
- Ensure that women are given all the information they require about their own recovery after the birth of their baby.
- Review the quality of food offered in the light of low scores.
- Review the cleaning contract in the light of low scores for cleanliness.
- Ensure that both verbal and written information is easily understood by women, and that all the information and explanations required are given.
- Ensure that all women are treated with respect and dignity, kindness and understanding during their postnatal stay in hospital.

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Feeding Baby

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to feeding baby are mixed.

ACTION:

- Ensure that women have infant feeding discussed with them during their pregnancy by midwives.
- Ensure that women are given full support and encouragement, practical help and consistent advice about feeding their baby, particularly in relation to breast feeding.

Care at Home After Birth

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to care at home after the birth are generally about the same.

ACTION:

- Review the provision of information about looking after baby in the light of the number of women who say they either did not get information or that they only got it to some extent.
- Ensure that all women have postnatal check-ups for their own health.
- Ensure that all women are given information or advice about contraception.



Overall Care

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to overall care during pregnancy, labour, birth and after the birth are about the same or more positive.

ACTION:

- Investigate why ratings for care after the birth of the baby are less positive than those for care during pregnancy and the birth of the baby.



characteristics

The characteristics of the women who responded to the survey from University Hospital of South Manchester NHS Foundation Trust were as follows:

1. PREVIOUS PREGNANCIES

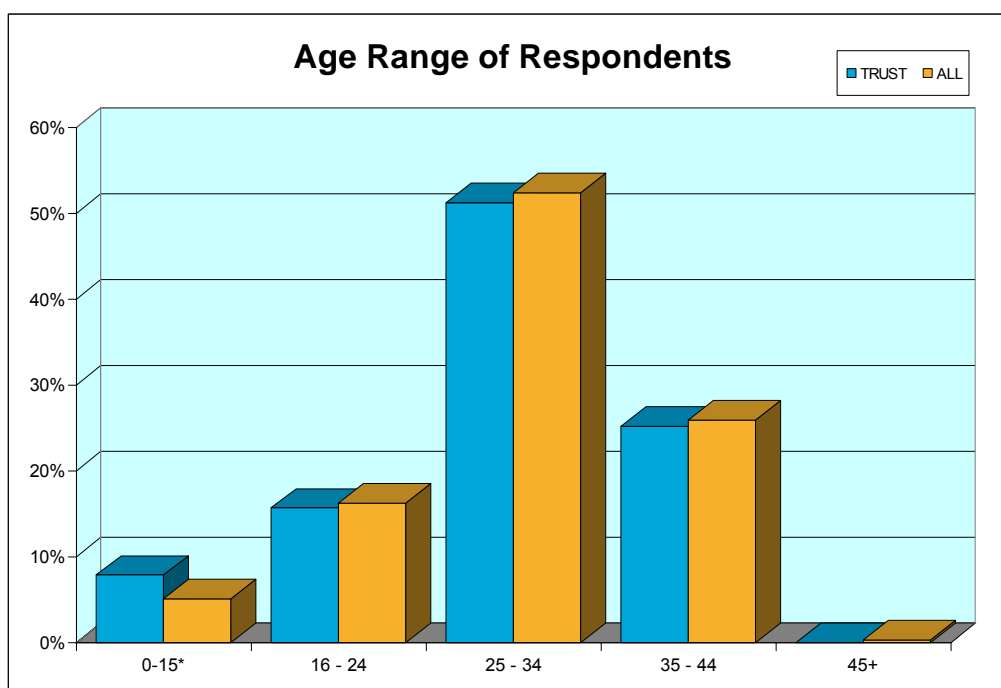
Women were asked if they had had a previous pregnancy; 57% said that they had. 91% said they had one or two babies before the birth that was the subject of this survey; 5% had had three or more.

2. THIS PREGNANCY

Women were also asked if they had had a single baby in this most recent pregnancy, or a multiple birth; all said they had had a single baby.

3. AGE RANGE

16% of respondents were aged between 16 and 24; 25% aged 35 or over.



* Women aged under 16 having babies were excluded from the samples supplied by Trusts, however, a number of respondents stated that their age was under 16.

22% of the women responding said they had left full time education aged 16 or under, this compared to 28% nationally; 21% were 17 or 18 and 55% were 19 or over. 2% were still in full time education.



4. OTHER FAMILY MEMBERS

87% of the women were living with a husband or partner; and 87% had their baby / children living with them.

5. ETHNIC GROUP

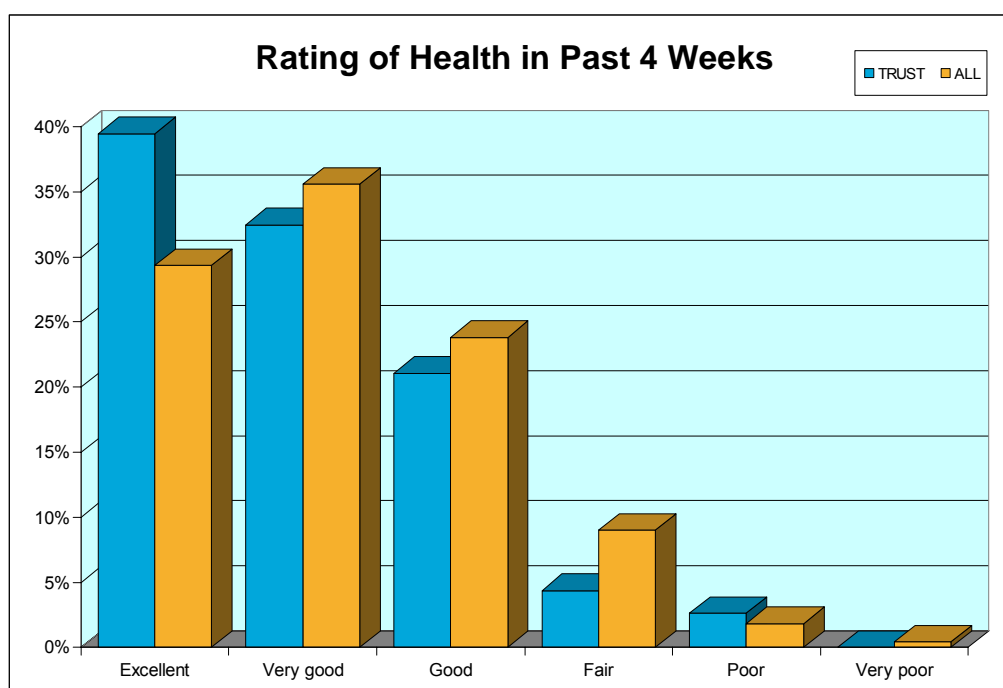
77% of the women were White British; 10% were Irish or from another White background; 6% were from Asian backgrounds (Indian, Pakistani, Bangladeshi or other), and 3% were from Black backgrounds (Caribbean or African).

Women were asked what language they spoke most often at home. 93% said they spoke English; 4% spoke another European language; and 3% spoke an Asian language (e.g. Hindi, Gujarati, Punjabi, Urdu, Sylheti, Bengali, Chinese, Thai).

6. GENERAL HEALTH

3% of women said they had a long-standing physical or mental health problem or disability. Of these women, none said this problem or disability affected their day to day activities.

The chart below shows how women rated their health over the past 4 weeks.





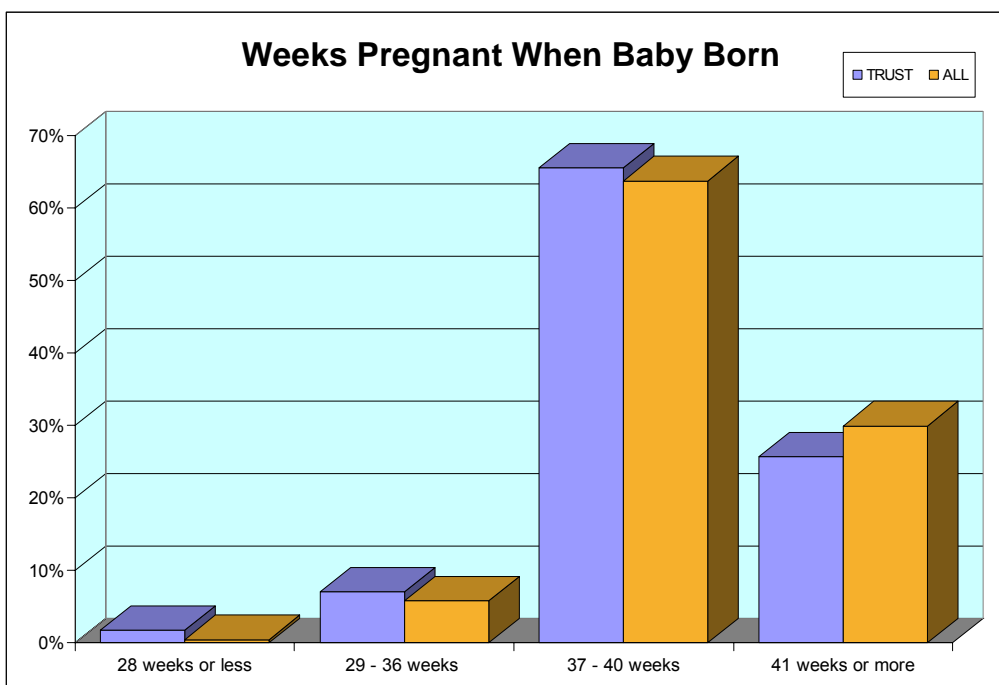
about the baby

1. TIME BABY WAS BORN

Women were asked at what time of day their baby was born; 68% said the baby was born in the day time (between 6 am and 6 pm), 32% said it was born at night time (between 6 pm and 6 am).

2. LENGTH OF PREGNANCY

As the chart shows, 65% of women said their pregnancy lasted between 37 and 40 weeks. 10 babies were born prematurely (under 36 weeks); 26% were overdue and born after 40 weeks.



3. THE BABY'S WEIGHT

Babies are considered to have a low birth weight if they weigh less than 2,500 grams. Women were given the option of expressing their baby's weight in either grams or pounds and ounces.

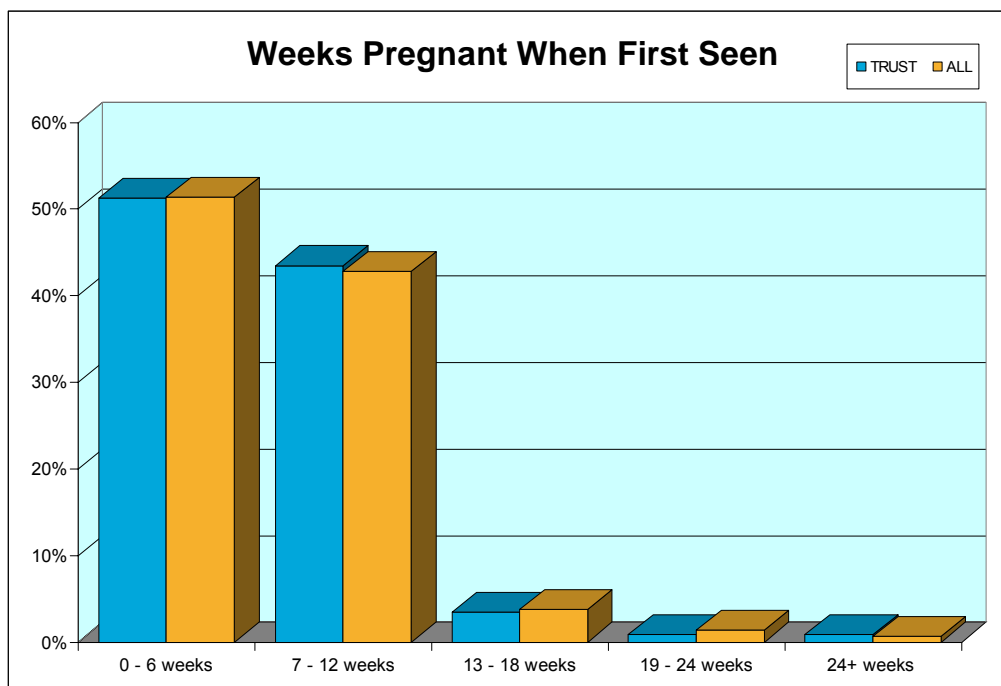
92% of the babies weighed 2,500 grams / 5lb 8oz or more at birth; 8% weighed 2,499 grams / 5lb 7oz or less.



early pregnancy

1. HEALTH PROFESSIONAL FIRST SEEN

96% of women saw their GP / family doctor first about their pregnancy care; 2% saw a midwife. The chart shows how many weeks pregnant women were when they first saw this person.



93% of women said they were able to see this health professional as soon as they wanted to; 7% said they were not able to.

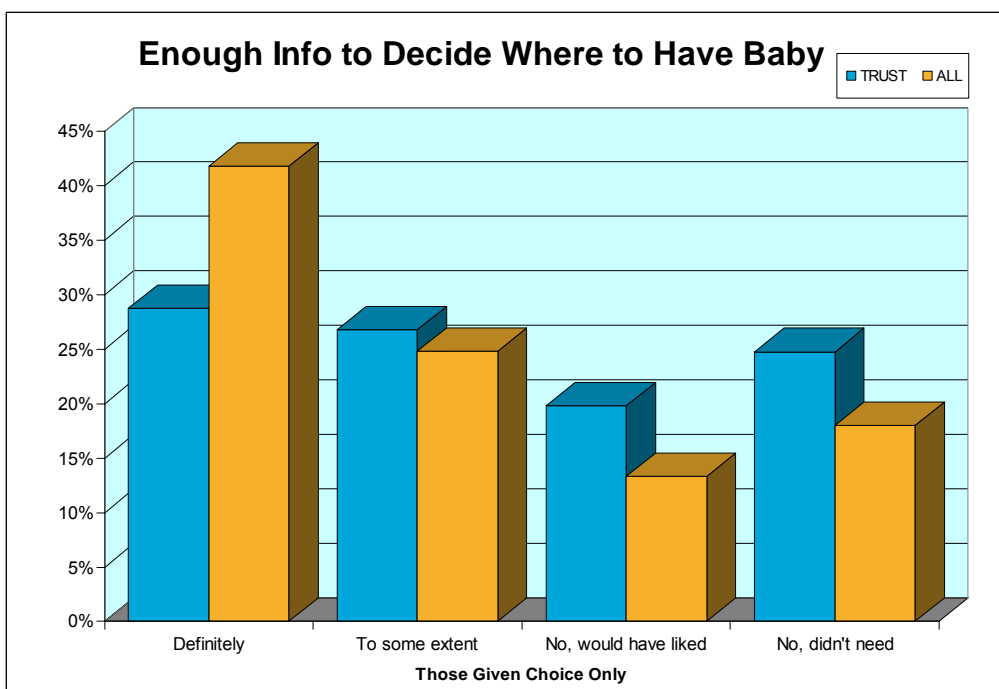
2. BOOKING APPOINTMENTS

Women were asked how many weeks pregnant they were when they had their booking appointment (the appointment where they were given their pregnancy notes). 62% said they were between 8 and 12 weeks pregnant; 23% were between 13 and 18 weeks.

3. CHOICE ABOUT WHERE TO HAVE BABY

75% of women said they were given a choice about where they could have their baby at the start of their pregnancy; 5% said they could not have a choice for medical reasons. 32% of women said they were given a choice of having their baby at home.

The chart shows the proportion of women who had a choice about where to have their baby who felt that they got enough information from a midwife or doctor to help them make a decision on this issue. 29% said they definitely got enough information; 20% said they did not get enough but would have liked some.



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4. GIVEN THE PREGNANCY BOOK

47% of women said that they were given a copy of The Pregnancy Book; 15% said they already had one. 33% were not given one.



NSF Good Practice & NICE Guidelines

- The option for women to access a midwife as the first point of contact is widely publicised (NSF).
- Each pregnant woman has two visits early in pregnancy with a midwife who can advise her on her options for care on the basis of an in-depth knowledge of local services (NSF).
- The range of antenatal, birth and post birth care services available locally constitutes real choice for women, including home births (NSF).
- Each woman receives an initial assessment of her needs and agrees a care plan with the midwife which takes into account the type of birth, expected length of stay in hospital [if appropriate] and the timing of her transfer home (NSF).
- Pregnant women should be offered evidence-based information and support to enable them to make informed decisions regarding their care (NICE).
- All first time pregnant women should be offered 'The Pregnancy Book' by their carer (NICE).
- Maternity services should have a system in place whereby women carry their own case notes (NICE).

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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Saw a midwife first about pregnancy care	2%	20%	↙
~ Was able to see health professional as soon as wanted about pregnancy care	93%	90%	-
~ Had a choice about where could have the baby	75%	70%	↗
~ Was given a choice of having baby at home	32%	45%	↙
~ Definitely got enough information to help decide where to have baby	29%	42%	↙
~ Not given a copy of The Pregnancy Book	33%	21%	↙

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to care at the start of pregnancy are generally less positive.

ACTION:

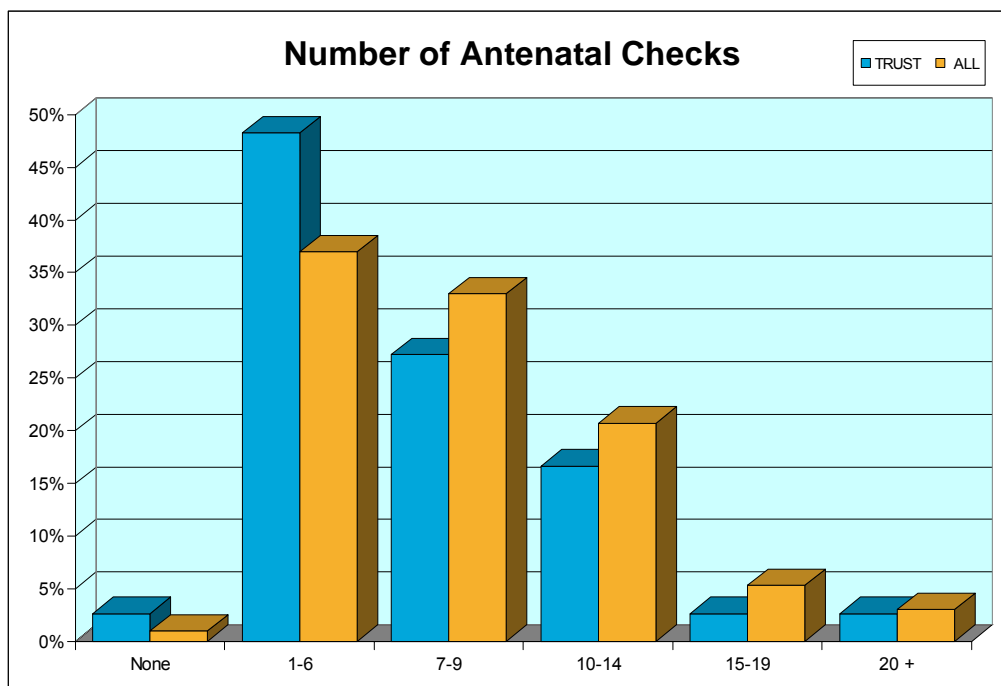
- Increase the number of women who are given a choice of where to have their baby including the choice of a home birth.
- Ensure that information is given about the choices available to women on where to have their baby.
- Ensure that all women who need one are given a copy of The Pregnancy Book.



antenatal check-ups

1. NUMBER OF CHECK UPS

Women were asked how many antenatal check-ups they had during their pregnancy. The chart shows the number women said they had. 3 women said they did not have any check-ups.



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2. CHOICE OF WHERE CHECK-UPS TOOK PLACE

21% of women said they were given a choice about where their antenatal check-ups took place; 73% said they were not given a choice.

3. WHICH HEALTH PROFESSIONALS WERE SEEN

Women were asked which health professionals they saw for their check-ups. 100% saw midwives; 32% saw GPs; 60% saw hospital doctors; and 5% saw someone else.

84% of women said they were not given a choice about who would carry out their check-ups.

4. SEEING THE SAME MIDWIFE

1% of the women who saw a midwife more than once said they saw the same midwife every time they had an antenatal check-up, a further 25% said they saw the same one most of the time. 1 woman said she never saw a midwife.



5. SEEING THE SAME DOCTOR

8% of women who saw a hospital doctor more than once said they saw the same doctor every time they had an antenatal check-up, a further 18% said they saw the same one most of the time. 34% said they never saw a doctor.

NSF Good Practice & NICE Guidelines

- All women are offered the support of a named midwife throughout pregnancy (NSF).
- Antenatal care should be provided by a small group of carers with whom the woman feels comfortable. There should be continuity of care throughout the antenatal period (NICE).
- Antenatal care should be readily and easily accessible to all women and should be sensitive to the needs of individual women and the local community (NICE).
- Early in pregnancy all women should receive appropriate written information about the likely number, timing and content of antenatal appointments (NICE).

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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Given a choice about where to have antenatal check-ups	21%	22%	-
~ Given a choice about who would carry out antenatal check-ups	11%	13%	-
~ Saw the same midwife every time or most of the time for antenatal check-ups	26%	57%	↙
~ Saw the same hospital doctor every time or most of the time for antenatal check-ups	26%	38%	↙

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to antenatal check-ups are about the same or less positive.

ACTION:

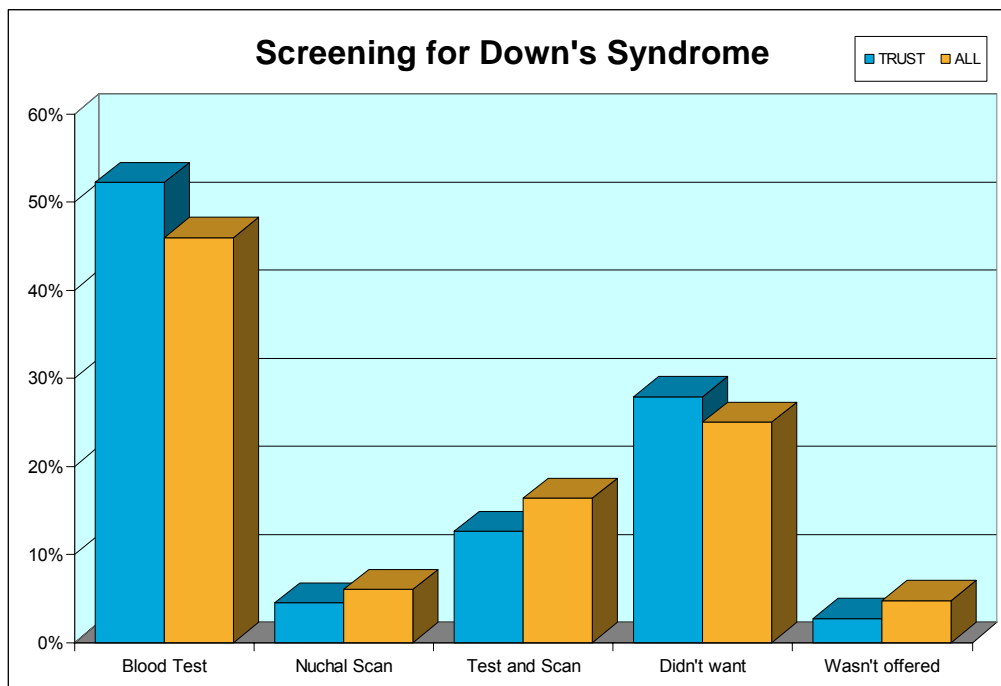
- Ensure that women are given as much choice as is possible about where they have their antenatal check-ups and who will do them.
- Increase continuity of care from midwives so that women see the same midwife as often as possible.
- Look at ways of increasing the continuity of care from hospital doctors so that women see the same doctor as often as possible.



tests and scans

1. TESTING FOR DOWN'S SYNDROME

Women were asked if they had had a blood test or nuchal scan to check whether their baby might have Down's syndrome. The chart shows the proportion of women who had had such tests.



28% of women said they did not have a test and did not want to be screened for Down's syndrome; 3% said they were not offered a test.

90% of women said they had a choice about whether to have a screening test; 9% said they did not have a choice.

87% said the reasons for having such a test were explained clearly to them; 11% said they were not explained clearly.

2. DATING SCANS

Women were asked if they had had a dating scan between 8 to 14 weeks of pregnancy. 88% said that they did have such a scan.

84% said the reason for having the scan was explained clearly to them; 16% said it was not explained clearly.

63% of women felt they had a choice about having this scan; 37% said they did not have a choice.



3. 20 WEEK SCANS

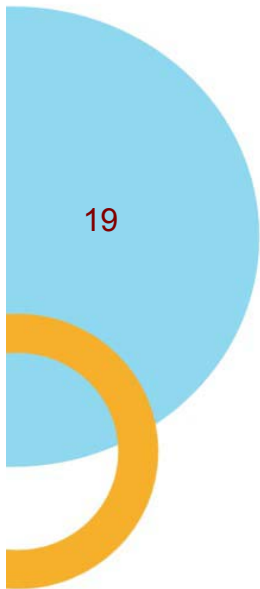
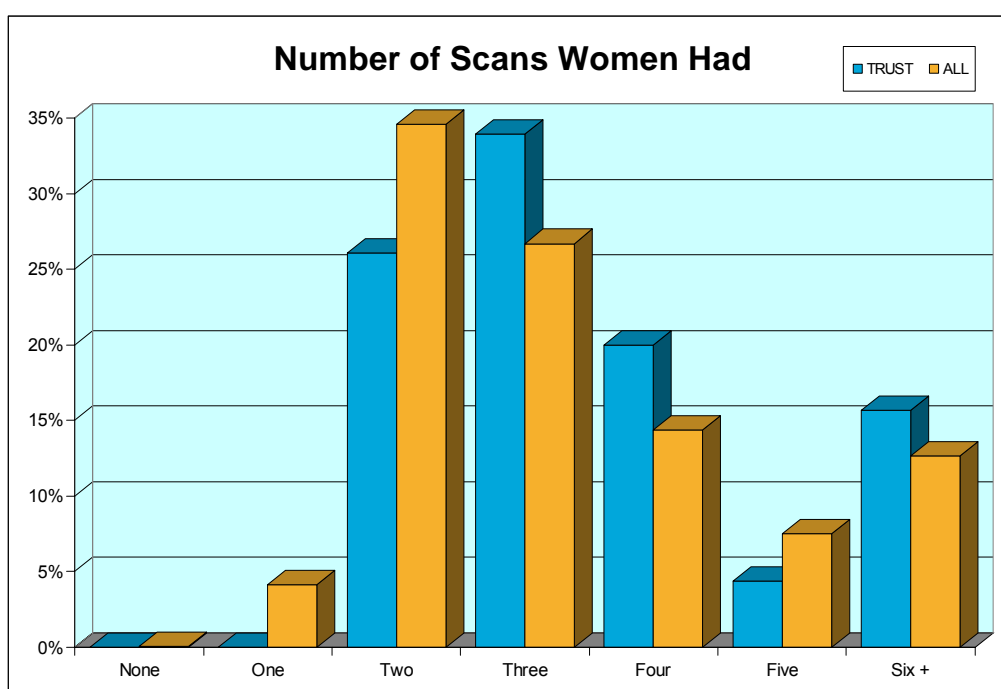
Women were asked if they had had a mid-trimester or anomaly scan at 20 weeks of pregnancy. 97% of the women said that they did have such a scan.

92% said the reason for having this scan was explained clearly to them; 8% said it was not explained clearly.

67% of women felt they had a choice about having this scan; 33% said they did not have a choice.

4. OVERALL NUMBER OF SCANS

The chart shows the number of scans that women said they had had during their pregnancy.



NSF Good Practice & NICE Guidelines

- A comprehensive high quality antenatal screening and diagnostic service ... is offered to all women (NSF).
- Antenatal tests and screening are offered to women as options (with the purpose and consequence of each test explained) rather than as a routine part of the process of being pregnant (NSF).
- Where women request or decline services or treatment, their decision is respected (NSF).
- Pregnant women should be offered screening for Down's Syndrome (NICE).



COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Not offered a screening test for Down's Syndrome	3%	5%	-
~ Had a choice about whether to have a screening test for Down's Syndrome	90%	85%	↗
~ Reasons for having test for Down's Syndrome clearly explained	87%	85%	-
~ Reason for having dating scan clearly explained	84%	89%	-
~ Had a choice about whether to have a dating scan	63%	72%	↘
~ Reason for having mid-trimester scan clearly explained	92%	92%	-

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to tests and scans are mixed.

ACTION:

- Ensure that all women have a choice about whether they have a screening test for Down's syndrome.
- Ensure that all women are given clear explanations about the reasons for testing for Down's syndrome.
- Ensure that women get clear explanations about the reasons for dating scans and mid-trimester scans and feel they have a choice about having these scans.



during pregnancy

1. STAYING IN HOSPITAL

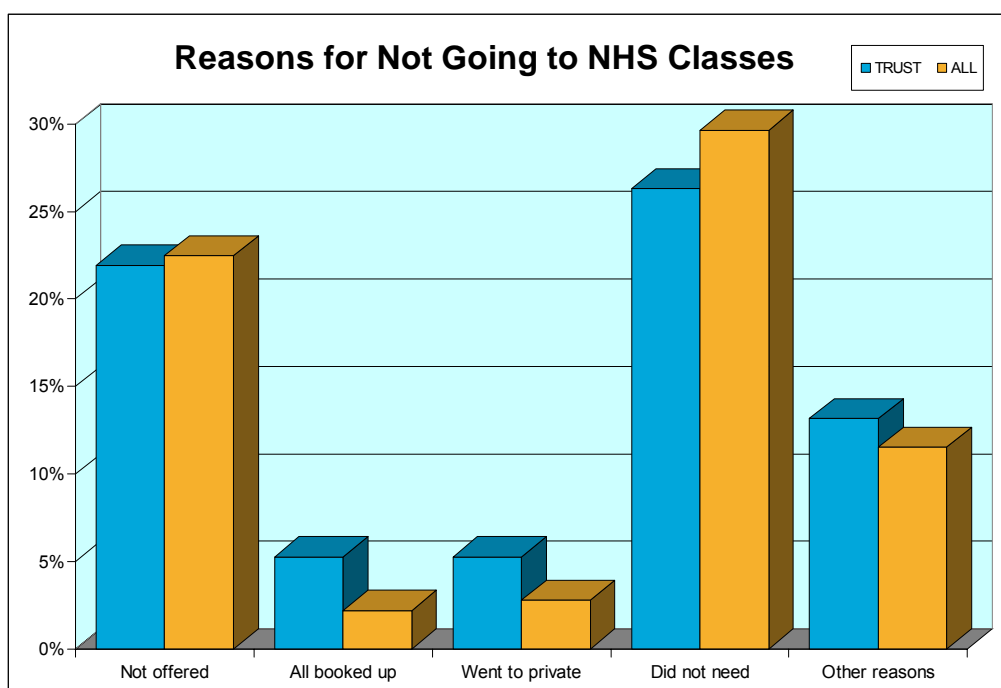
25% of women said that they had stayed in hospital overnight because of a problem related to their pregnancy.

2. CONTACT NUMBERS

Women were asked whether they had the name and number of a midwife that they could contact if they were worried during their pregnancy. 79% said that they did have a contact number; 21 women (18%) did not have one.

3. ATTENDING ANTENATAL CLASSES

28% of women attended antenatal classes provided by the NHS. The chart shows the reasons women did *not* attend NHS antenatal classes.



4. ABOUT ANTENATAL CLASSES

88% of women who attended NHS antenatal classes said they were at a convenient time of day; 97% said they were at a convenient place. 100% said their partner or someone else was allowed to attend.

72% of women thought there were enough classes; 81% said the classes covered the topics they wanted to be covered.

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5. OVERALL ANTENATAL CARE

78% of women said they were always spoken to in a way that they could understand. 79% were always treated with respect and dignity. 71% were always treated with kindness and understanding.

54% were always given the information or explanations they needed; 7% said they were not. 60% were always involved enough in decisions about their care; 10% were not.

NSF Good Practice & NICE Guidelines

- All women are able to contact a midwife day or night at any stage in pregnancy if they have concerns (NSF).
- Every women who is experiencing problems in early pregnancy has access to an Early Pregnancy Unit (NSF).
- Pregnant women should be offered opportunities to attend antenatal classes (NICE).

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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Had the name and telephone number of a midwife to contact if worried	79%	91%	↙
~ Attended antenatal classes provided by the NHS	28%	31%	-
~ Not offered any antenatal classes	22%	22%	-
~ NHS classes at a convenient time	88%	86%	-
~ NHS classes at a convenient place	97%	94%	-
~ Partner / someone else allowed to attend NHS classes	100%	94%	↗
~ There were enough NHS classes	72%	69%	-
~ NHS classes covered topics wanted	81%	78%	-
~ Always spoken to in a way that could be understood	78%	79%	-
~ Always treated with respect and dignity	79%	81%	-
~ Always treated with kindness and understanding	71%	76%	↙
~ Always given the information or explanations needed	54%	66%	↙
~ Always involved enough in decisions about care	60%	67%	↙



CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to care during pregnancy are about the same or less positive.

ACTION:

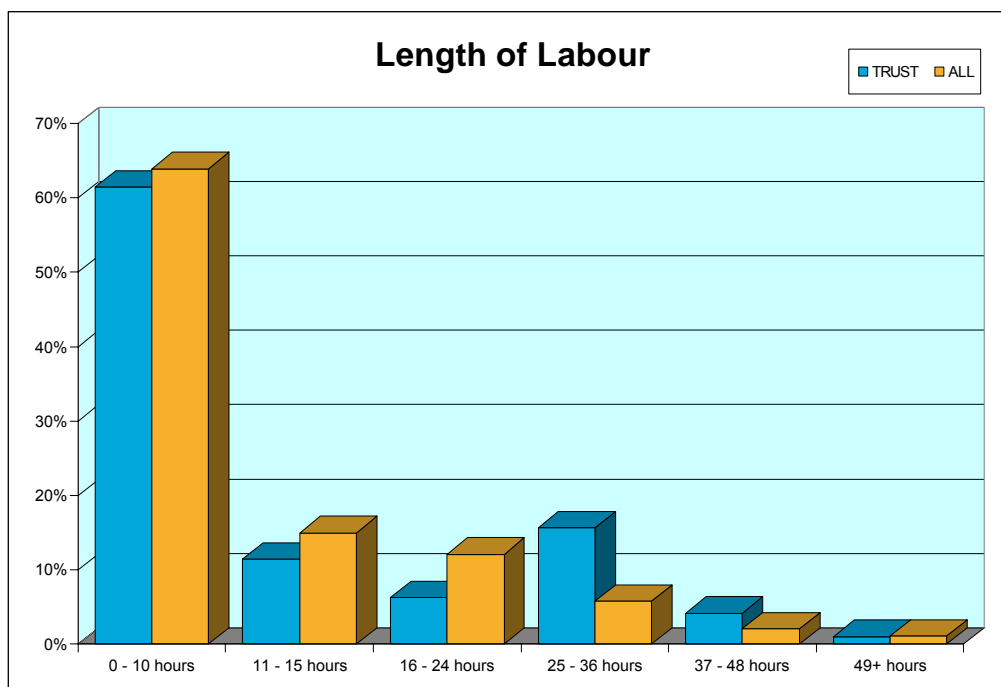
- Ensure that all women are given a contact number in case they are worried during their pregnancy.
- Review the provision of NHS antenatal classes given the high proportion of women not attending NHS classes and in particular, those not attending any classes at all.
- Examine alternative times and places for classes given the number of women saying they were not convenient.
- Ensure that there are enough classes to meet women's needs.
- Review the content of classes to ensure they cover all the topics women want covered.
- Ensure that both verbal and written information is easily understood by women, and that all the information and explanations required are given.
- Ensure that all women are treated with respect and dignity, kindness and understanding during their pregnancy.
- Ensure that women are involved as much as possible in decisions about their care.



during labour

1. HOW LONG LABOUR LASTED

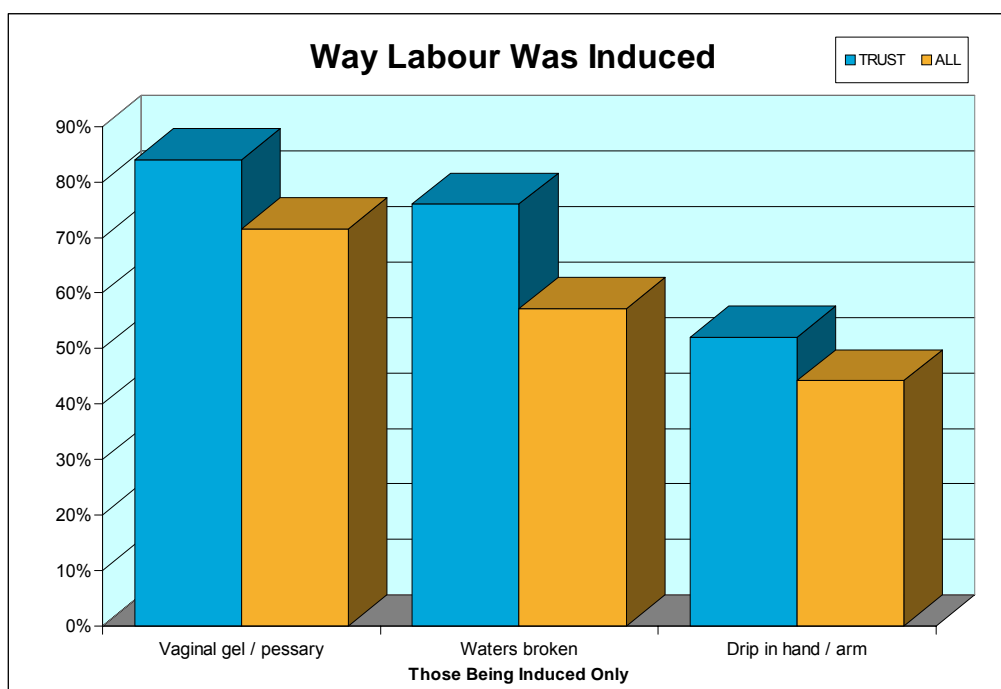
The chart shows how long labour lasted for respondents to the survey. 61% said it lasted between 0 and 10 hours.



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2. HOW LABOUR STARTED

73% of the women said their labour started naturally; 27% said it was induced. The chart shows the way in which labour was induced for those women being induced.





Of those women being induced, 52% felt they had a choice about whether they were induced; 48% said they did not have a choice.

3. MOVING AROUND AND CHOOSING POSITION

65% of women said that they were able to move around and choose the position that made them most comfortable for most of the time during their labour. 12% were not able to move around or choose position.

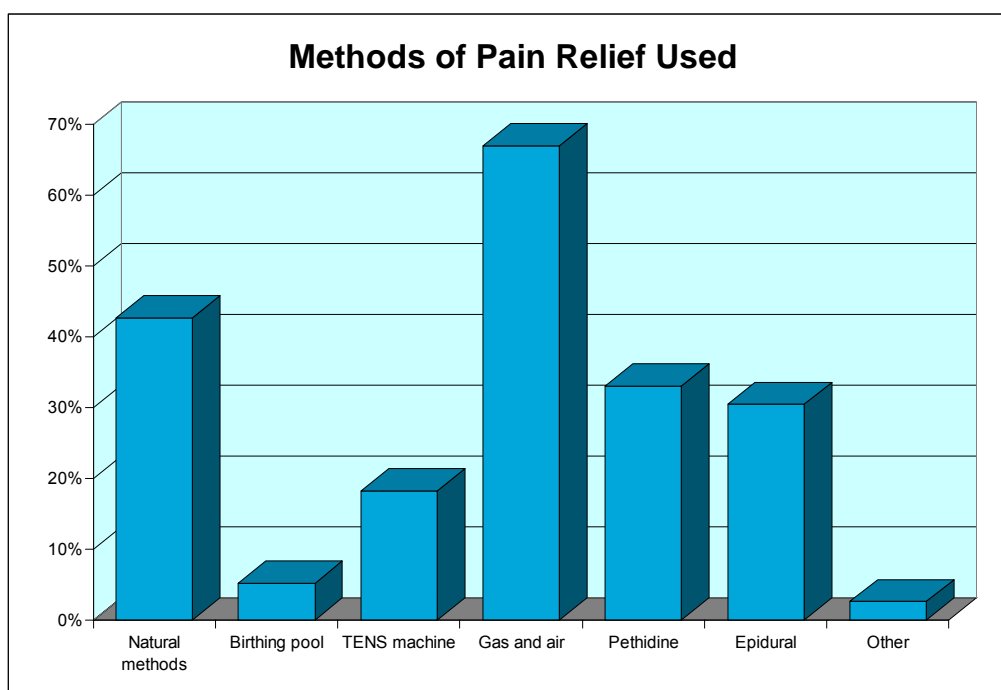
4. CLEANLINESS IN HOSPITAL

Women were asked how clean the labour or delivery room were that they were in; of those that were in one, 63% said it was very clean and a further 32% said fairly clean. 4% said it was not very clean or not at all clean.

Women were then asked how clean the toilets and bathrooms were; of those that used them, 55% said they were very clean and a further 37% said fairly clean. 8% said they were not very clean or not at all clean.

5. PAIN RELIEF

The forms of pain relief used by women are shown in the chart. 5% did not use pain relief.



Of those women who wanted pain relief 55% said they definitely got the pain relief they wanted; 12% said they did not. 11% said it was not possible to have pain relief (e.g. because there was not enough time).



NSF Good Practice & NICE Guidelines

- Can have furniture easily re-arranged to allow for mobility and different birth positions (NSF).
- Women have a choice of methods of pain relief during labour, including non-pharmacological options (NSF).
- Women with uncomplicated pregnancies should be offered induction of labour beyond 41 weeks. From 42 weeks, women who decline induction of labour should be offered increased antenatal monitoring (NICE).

COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Felt there was a choice about whether labour was induced	52%	54%	■
~ Able to move around and choose position that was most comfortable most of the time	65%	61%	■
~ Labour and delivery room were very clean	63%	65%	■
~ Toilets and bathrooms were very clean	55%	50%	↗
~ Definitely got the pain relief wanted	55%	60%	↘

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CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to labour are mixed.

ACTION:

- Ensure that women are given a choice as far as is possible about whether they are induced.
- Examine ways of increasing the number of women able to move around and choose the position that makes them most comfortable during labour.
- Review cleaning contracts to ensure cleanliness both in the labour / delivery room and toilets and bathrooms.
- Ensure that women are given pain relief in a timely manner to meet their needs.



the baby's birth

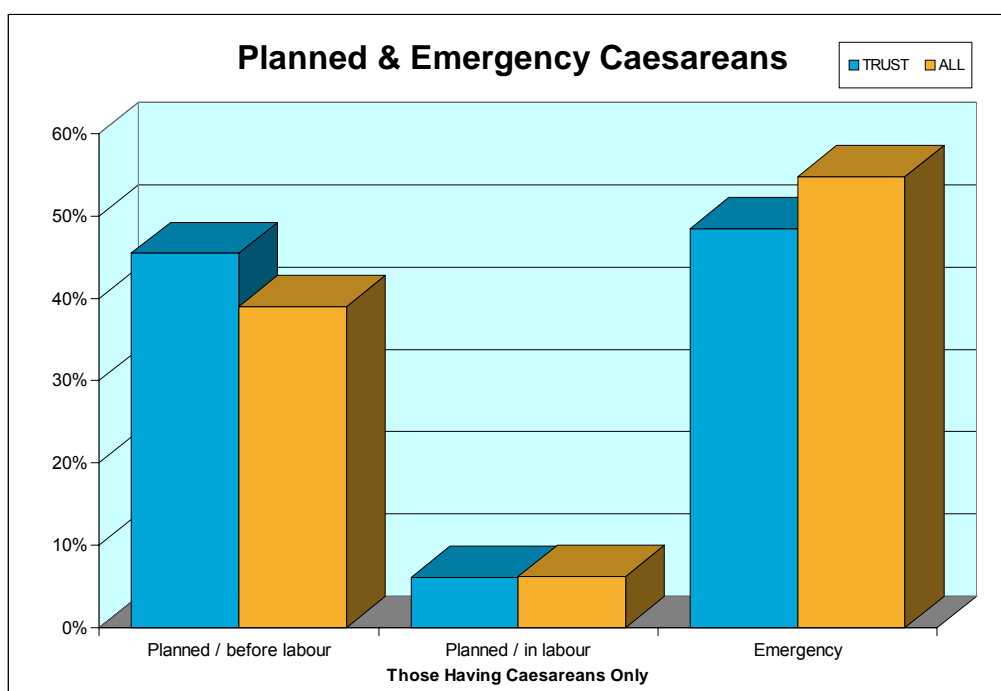
1. WHERE THE BABY WAS BORN

96% of women said their baby was born in hospital; 1% said the baby was born in a birth centre or maternity unit separate from hospital. 4% of women had a home birth.

Women were asked if they were transferred just before the baby's birth or during labour for medical reasons or concerns. 90% said they were not transferred. 5% of the women said they were transferred from one part of the hospital to another, and 4% said they were transferred from home to hospital.

2. KIND OF DELIVERY

64% of women said they had a normal delivery; 29% had a caesarean. The chart shows the proportion of women who had planned caesareans and those who had emergency caesareans.



3. WHERE WOMEN GAVE BIRTH

91% of women gave birth on a bed, 5 women (6%) on the floor, and 1 woman (1%) in a birthing pool.

25% of women said they gave birth sitting, or sitting supported by pillows; 34% said they were lying; and 21% said they were lying with their legs supported in stirrups.



4. EPISIOTOMIES AND TEARS

28% of women were given an episiotomy while their baby was being born. 50% of women said they had a tear while their baby was being born. Of those women who had tears, 4 (10%) said this was a serious (third or fourth degree) tear.

Of those women who had stitches for either an episiotomy or a tear 52% had these done within 20 minutes; 15% waited more than 1 hour.

NSF Good Practice & NICE Guidelines

- Promote the normalcy of childbirth i.e. they replicate a home-like ambience (NSF).
- In all out-of-hospital labours / births, the midwife is responsible for transfer [if this is required] and continues to care for the woman on transfer where possible (NSF).
- All staff have up to date skills and knowledge to support women who choose labour without pharmacological intervention, including the use of birthing pools, and in the position of their choice (NSF).
- Clinical interventions, including elective caesarean section, are only performed if there is clinical evidence of expected benefits of these to the mother and / or baby (NSF).
- When considering a caesarean section there should be discussion on the benefits and risks of CS compared with vaginal birth specific to the woman and her pregnancy. Maternal request is not on its own an indication for CS (NICE).

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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Delivery was by caesarean section	29%	24%	↙
~ While baby was being born had a tear	50%	52%	▪
~ Had a serious tear (third or fourth degree)	10%	16%	↗
~ Was stitched within 20 minutes of baby being born	52%	56%	▪

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to the birth of the baby are mixed.

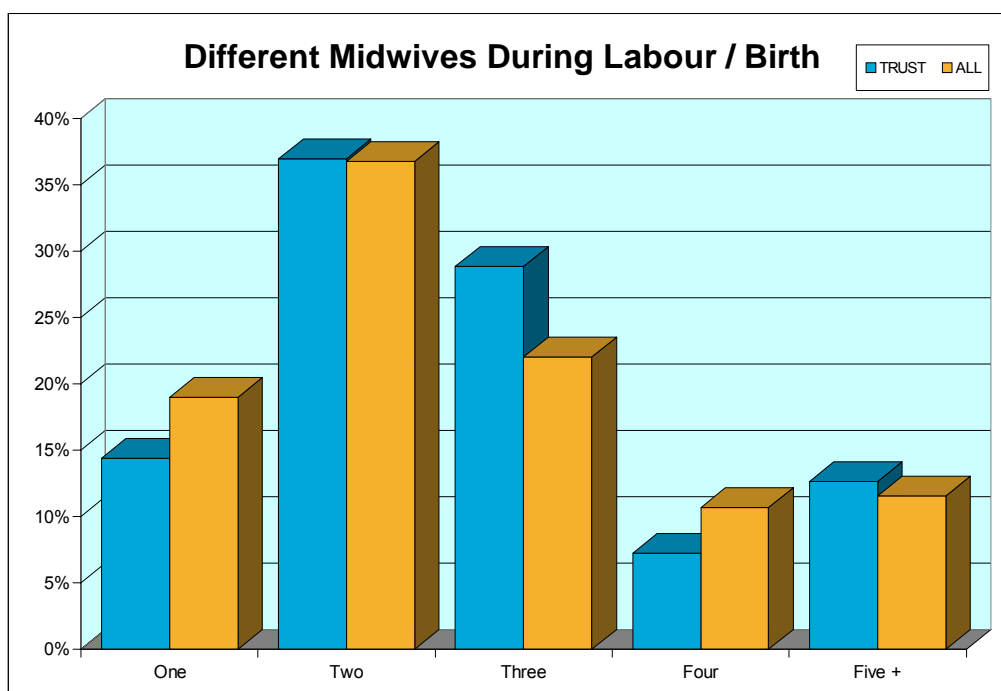
ACTION:

- Consider whether the Trust's level of caesarean sections can be brought down.
- Examine the reasons for the numbers of women suffering tears, particularly serious tears.
- Ensure that stitching is done as quickly as possible following the birth of the baby.



1. DIFFERENT MIDWIVES

The number of midwives seen by women during their labour and the birth of their baby is shown in the chart.



Women were asked if they had met any of the staff who looked after them during their labour and the birth of their baby before they went into labour; 21% said that they had met them, 77% had not met any of them.

2. TRUST AND CONFIDENCE

77% of women definitely had trust and confidence in the staff caring for them during their labour and birth; 3% did not have trust and confidence.

3. HUSBANDS, PARTNERS AND COMPANIONS

Women were asked if they had their husband, partner or a companion with them during their labour and the birth of their baby. 80% said they had someone with them during both the labour and the birth; 4% said they did not have anyone with them.

Of those women who had someone with them, 93% said they were there as much as they wanted them to be.

4 women said staff did not allow their companion to be there when they wanted and 1 said they could not be there for medical reasons.



4. BEING LEFT ALONE

Women were asked if they felt they and their husbands or partners were left alone by midwives or doctors at a time when it worried them. 13% said they felt left alone during labour, 2% felt left alone shortly after the birth, and 3% felt left alone both during labour and shortly after the birth. 83% said they did not feel left alone.

5. OVERALL CARE DURING LABOUR AND BIRTH

82% of women said they were always spoken to in a way that they could understand. 87% were always treated with respect and dignity. 82% were always treated with kindness and understanding.

72% were always given the information or explanations they needed; 5% were not. 74% felt they were always involved enough in decisions about their care; 5% did not feel involved.

NSF Good Practice

- Every woman is able to choose the most appropriate place and professional to attend her during childbirth.
- Maternity services develop the capacity for every woman to have a designated midwife to provide care for them when in established labour for 100% of the time.
- Birth environments are welcoming to fathers and other birthing partners.
- Maternity services staff [should] have the core competencies set out under NSF Standard 3 which are relevant to maternity services.

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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Had one midwife during labour and the birth of the baby	14%	19%	↙
~ Had met some of the staff before going into labour who were present during labour or the birth	21%	22%	-
~ Definitely had confidence and trust in staff	77%	70%	↗
~ Husband or partner present during labour and birth as much as wanted	93%	94%	-
~ Not left alone by midwives or doctors at a time when it was worrying	83%	75%	↗
~ Always spoken to in a way that could be understood	82%	82%	-
~ Always treated with respect and dignity	87%	80%	↗
~ Always treated with kindness and understanding	82%	78%	-
~ Always given the information or explanations needed	72%	73%	-
~ Always involved in decisions about care	74%	70%	-

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CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to the staff are generally about the same or more positive

ACTION:

- Ensure that women are cared for by the same midwives as far as is possible during labour and the birth of their baby and if possible by midwives they have met previously.
- Ensure that husbands and partners are able to be present for the whole of labour and the birth of the baby if requested.
- Examine reasons why some women feel they are left alone at times which they find worrying.
- Ensure that both verbal and written information is easily understood by women, and that all the information and explanations required are given.
- Ensure that all women are treated with respect and dignity, kindness and understanding during labour and the birth of their baby.
- Examine ways of increasing the number of women who feel involved in decisions about their care during labour and the birth of their baby.



babies born at home

Very small numbers of babies were born at home; overall, only 4% of births were at home. The responses on the questions about home births therefore are only indicative and the absolute numbers of respondents should be looked at when making any judgements about these issues.

1. PLANNED AND ACTUAL HOME BIRTHS

10% of women in University Hospital of South Manchester NHS Foundation Trust said they had planned to have their baby at home before their baby was born; 90% did not plan to do so. 4 women (4%) actually had a home birth.

The responses of these 4 women can be found in the full survey results at the end of this report.



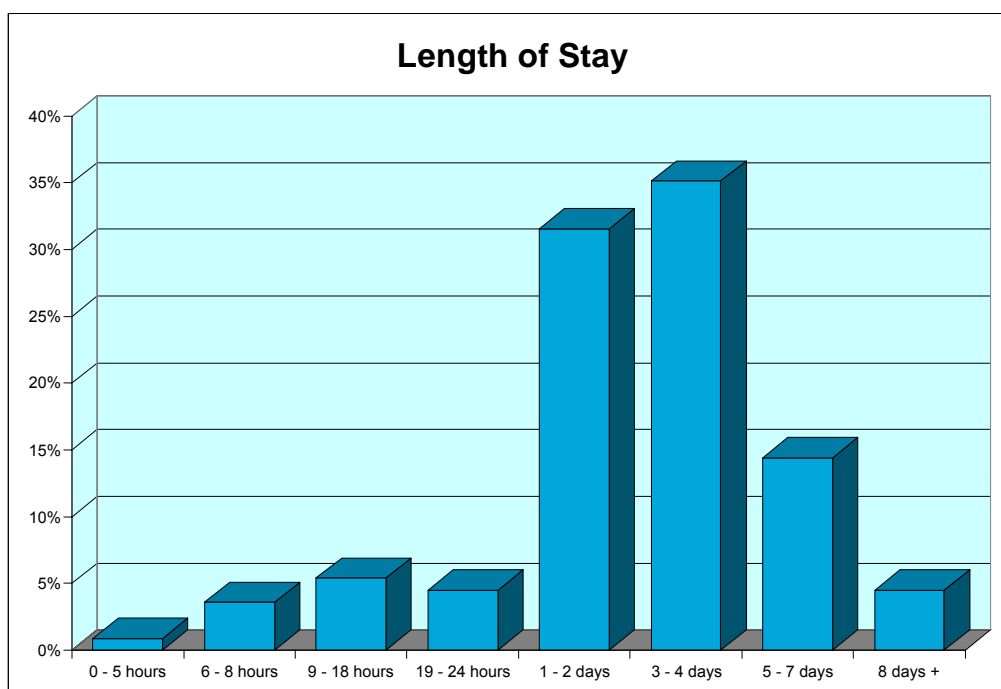
32



post-natal hospital care

1. LENGTH OF STAY

The chart shows the length of stay that women had in hospital after the birth of their baby.



* The figures in this chart are recalculated after combining the responses in both hours and days from the questionnaire

23% of women said that this length of stay was too long; 4% thought it was too short, and 71% said it was about right.

2. INFORMATION ABOUT RECOVERY

Of those women who needed it, 56% thought they definitely were given enough information about their own recovery after the birth of their baby; 9% said they were not given enough information and they would have liked some.

3. BABY CHECK BEFORE DISCHARGE

96% of the women said their baby had a newborn examination before they were discharged home; 2% said they did not have an examination.

Of those women who said their baby did have an examination, 15% said this was done by a midwife and 75% said it was done by a doctor.

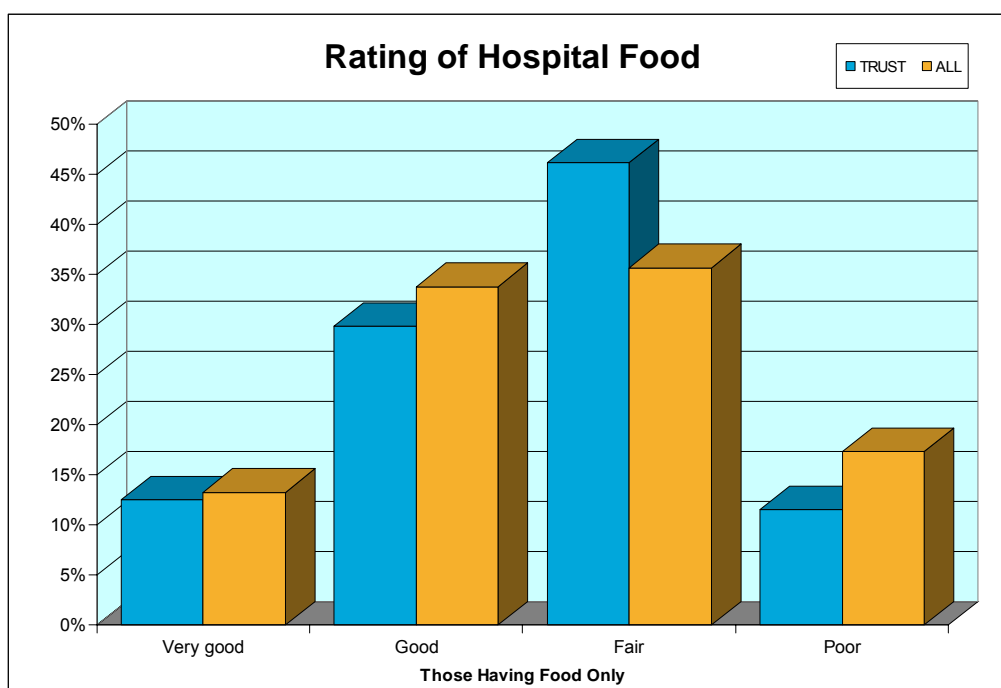


4. FOOD IN HOSPITAL

Women were asked if they were offered a choice of food during their postnatal stay in hospital. 81% said they always were; 4% said they were not offered a choice.

Of those women who had food in hospital 14% said they were given too little; 85% were given the right amount.

The chart shows how women who had food in hospital rated it.



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5. CLEANLINESS IN HOSPITAL

Women were asked how clean the hospital room or ward was that they were in for their postnatal stay; of those that were in one, 35% said it was very clean and a further 53% said fairly clean. 4% said it was not at all clean.

Women were then asked how clean the toilets and bathrooms were; of those that used them, 23% said they were very clean and a further 53% said fairly clean. 9% said they were not at all clean.

6. OVERALL POSTNATAL CARE

69% of women said they were always spoken to in a way that they could understand; 3% said that they were not. 70% were always treated with respect and dignity; 5% were not. 65% were always treated with kindness and understanding; 5% were not. 58% were always given the information or explanations they needed; 8% said they were not.



NSF Good Practice

- All newborn infants have a clinical examination to detect pre-clinical abnormalities within the first week of life for full term babies, or prior to discharge home from neonatal care.
- Professionals are skilled in sharing concerns and choices with parents as part of the emerging diagnosis.

COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Length of stay in hospital was about right	71%	70%	-
~ Woman definitely given enough information about her own recovery after the baby's birth	56%	45%	↗
~ Baby had a newborn examination before discharge	96%	93%	-
~ Always offered a choice of food during postnatal stay	81%	71%	↗
~ Given the right amount of food during stay	85%	78%	↗
~ Rating of food very good	13%	13%	-
~ Hospital room or ward was very clean	35%	45%	↘
~ Toilets and bathrooms were very clean	23%	35%	↘
~ Always spoken to in a way that could be understood	69%	72%	-
~ Always treated with respect and dignity	70%	66%	-
~ Always treated with kindness and understanding	65%	63%	-
~ Always given the information or explanations needed	58%	58%	-



CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to hospital care after the birth are mixed.

ACTION:

- Examine reasons why some women think their stay in hospital was too long.
- Ensure that women are given all the information they require about their own recovery after the birth of their baby.
- Review the quality of food offered in the light of low scores.
- Review the cleaning contract in the light of low scores for cleanliness.
- Ensure that both verbal and written information is easily understood by women, and that all the information and explanations required are given.
- Ensure that all women are treated with respect and dignity, kindness and understanding during their postnatal stay in hospital.



feeding baby

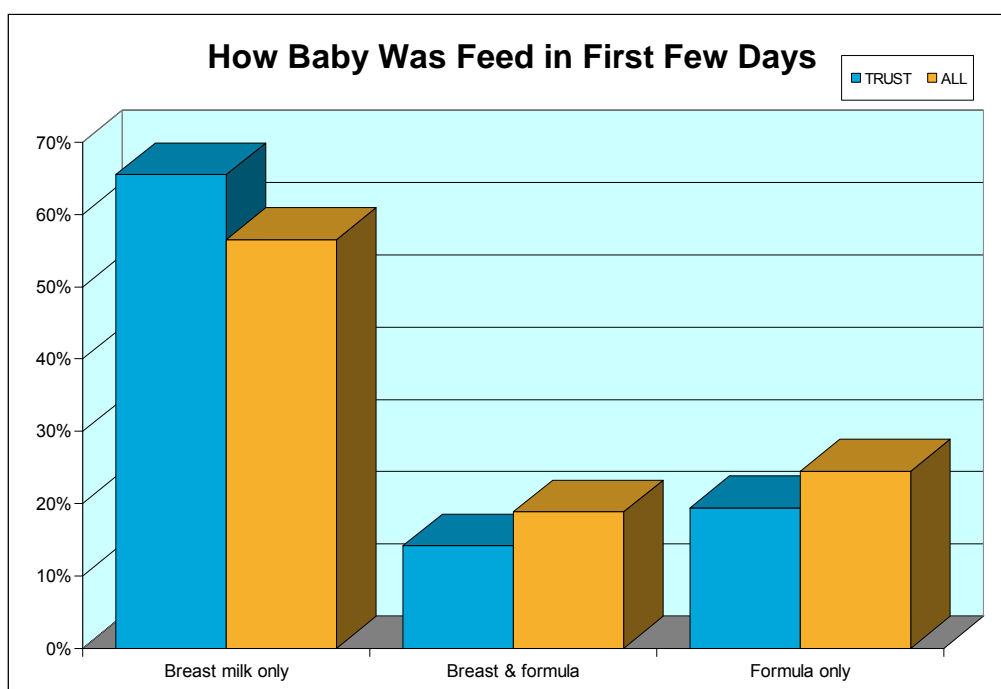
1. DISCUSSIONS ABOUT FEEDING

59% of women said that a midwife discussed infant feeding with them during their pregnancy; 37% said that they did not.

2. HOW BABY WAS FED

84% of women said that they put their baby to the breast at least once; 16% did not.

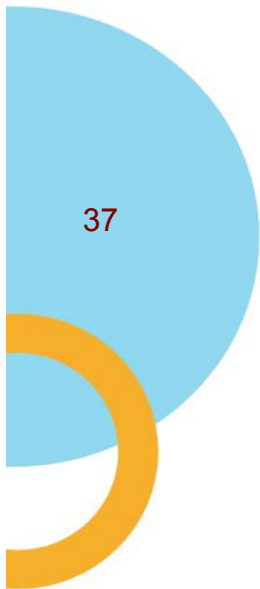
The chart shows how babies were fed in the first few days after their birth.

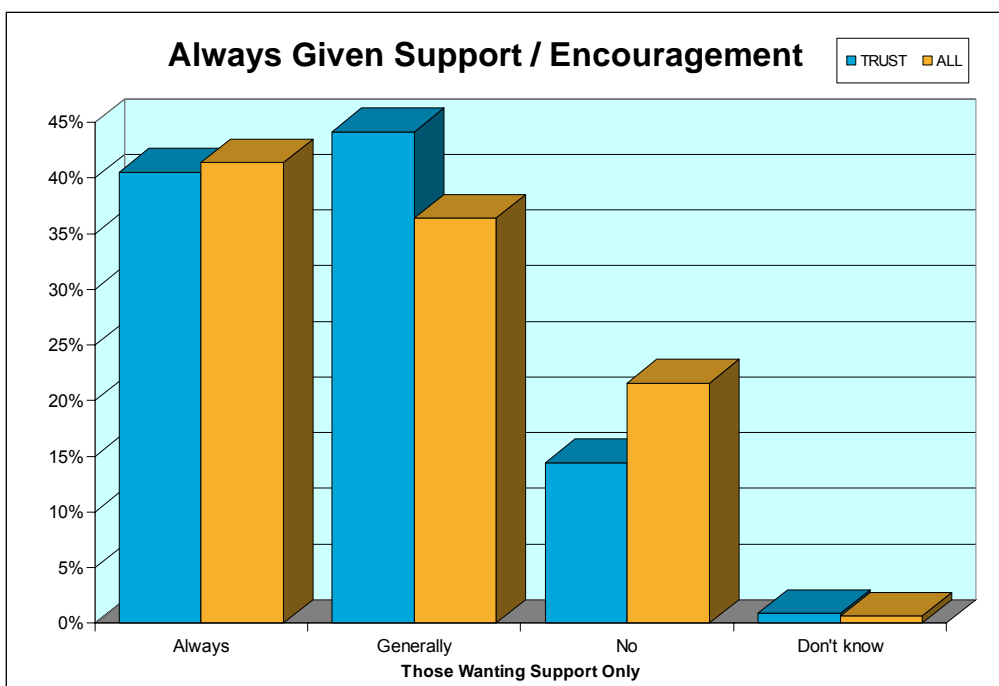


3. CARE FROM MIDWIVES ABOUT FEEDING

35% of women who wanted it said they always got consistent advice about feeding their baby from midwives and other carers; 19% said they did not. 43% always got practical help with feeding; 11% did not.

The chart shows the proportion of women who felt they always got active support and encouragement with feeding their baby.





NSF Good Practice

- Information on breast feeding is timely, consistent and reflects best practice standards.
- Support for breast feeding is a routine part of antenatal care, birth and post-natal care, with particular support for mothers who have had a multiple birth or have a premature or sick baby.

COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ During pregnancy, infant feeding discussed by midwife	59%	75%	↘
~ Baby put to breast at least once	84%	80%	-
~ Baby fed breast milk only in first few days	65%	57%	↗
~ Given consistent advice by midwives and other carers	35%	39%	-



CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to feeding baby are mixed.

ACTION:

- Ensure that women have infant feeding discussed with them during their pregnancy by midwives.
- Ensure that women are given full support and encouragement, practical help and consistent advice about feeding their baby, particularly in relation to breast feeding.
- Look at ways of increasing the number of women breast feeding their babies.



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babies in special care

Very small numbers of babies were in a neonatal unit; overall, 11% of babies were in a neonatal unit at some point. The percentages provided below are therefore only indicative and the absolute numbers of respondents should be looked at when making any judgements about these issues.

1. BABIES IN A NEONATAL UNIT

8 women (8%) said their baby was in a neonatal unit (NNU, NICU, SCBU).

1 of these babies was in the unit for 1 day or less, 3 were in for 2-7 days, 2 were in for 8-14 days, 2 were in for 31 days or more.

2. INFORMATION ABOUT WHY BABY WAS IN THE UNIT

75% of the women who needed it said they or their partner were definitely given enough information about why their baby was admitted for neonatal care.

None of the women said their baby was still in the neonatal unit at the time they responded to the survey.



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care at home after birth

1. CONTACT NUMBER

Women were asked if they had the name and telephone number of a midwife or health visitor that they could contact if they were worried when they were at home after the birth of their baby. 96% said that they did have a contact number; 4% did not.

2. VISITS FROM MIDWIVES

All of the women said they had been visited at home by a midwife since the birth of their baby.

3. NUMBER OF VISITS

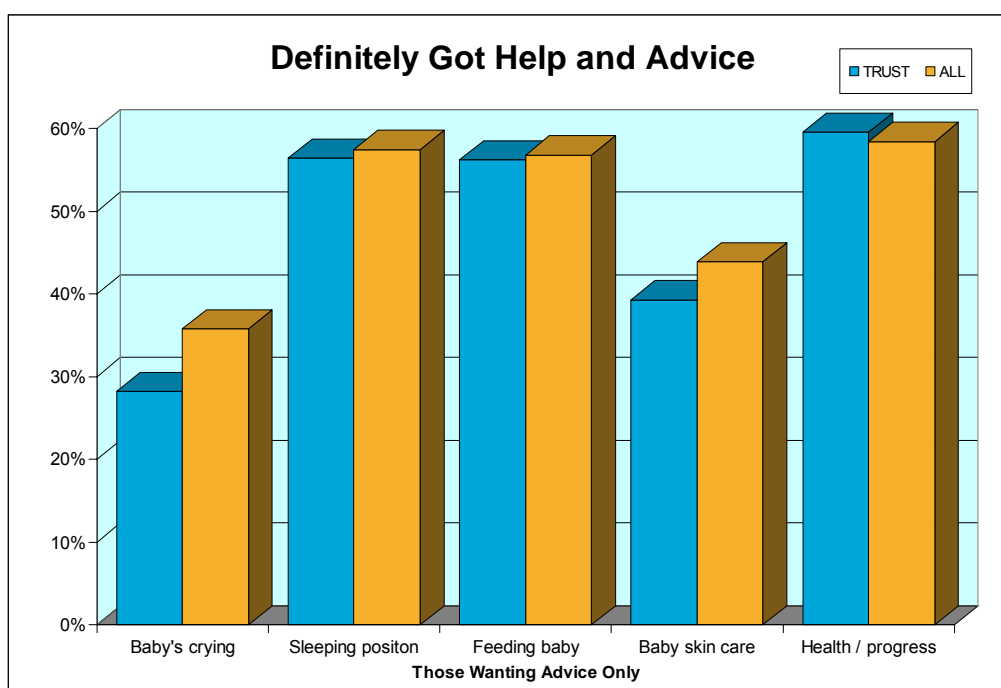
46% of women said they had been visited up to 4 times; 49% said they had been visited between 5 and 9 times; 4% were visited 10 or more times.

60% of women said their baby was between 10 and 15 days old when they had their last visit from the midwife; 29% said baby was 16 days old or more.

12% would have liked to have seen a midwife more often; 85% saw a midwife as much as they wanted.

4. HELP AND ADVICE

Women were asked if, in the six weeks after the birth of their baby, they had received help and advice if they needed it from health professionals about a number of issues. The chart shows the proportion of women who said they definitely received help and advice.





5. POSTNATAL CHECK-UPS

88% of women said they had had a postnatal check-up of their own health around 4-6 weeks after the birth of their baby; 12% said they had not had a check-up.

6. CONTRACEPTION

Women were asked if they were given information or offered advice from a health professional about contraception; 89% said that they were.

NSF Good Practice

- All women leaving hospital or in the community, receive support from a community-based co-ordinating health professional.
- Local policies ensure that women are discharged from the maternity service according to their individual needs and those of their babies.
- All women receive a structured needs assessment in the post natal period, using a recognised assessment tool which enables health professionals to systematically identify, record and promote the health and well-being of the mother and her baby.
- Arrangements are in place for support in the community for teenage parents, including the provision of contraceptive advice and treatment.

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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Had contact number for a midwife or health visitor if worried when at home after the baby's birth	96%	94%	-
~ Have been visited at home by a midwife since the baby's birth	100%	99%	-
~ Saw the midwife as much as wanted	85%	75%	↗
~ Received help and advice from health professionals about baby's crying	28%	36%	↘
~ Received help and advice from health professionals about baby's sleeping position	56%	57%	-
~ Received help and advice from health professionals about feeding baby	56%	57%	-
~ Received help and advice from health professionals about baby's skin care	39%	44%	↘
~ Received help and advice from health professionals about baby's health and progress	60%	58%	-
~ Woman had postnatal check up for own health	88%	88%	-
~ Given information or advice about contraception	89%	90%	-



CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to care at home after the birth are generally about the same.

ACTION:

- Review the provision of information about looking after baby in the light of the number of women who say they either did not get information or that they only got it to some extent.
- Ensure that all women have postnatal check-ups for their own health.
- Ensure that all women are given information or advice about contraception.



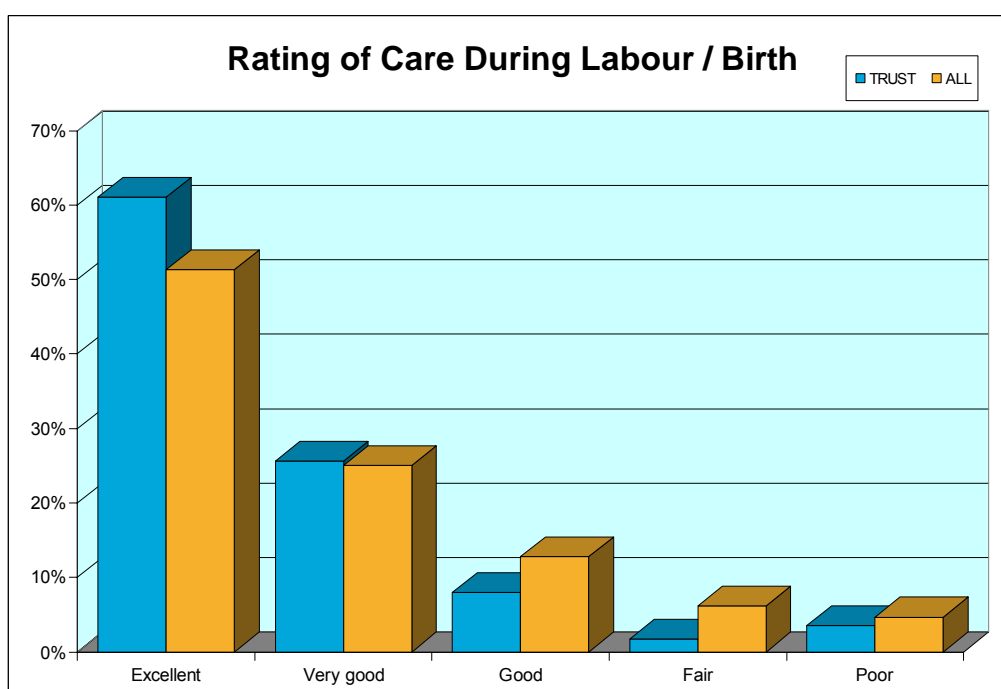
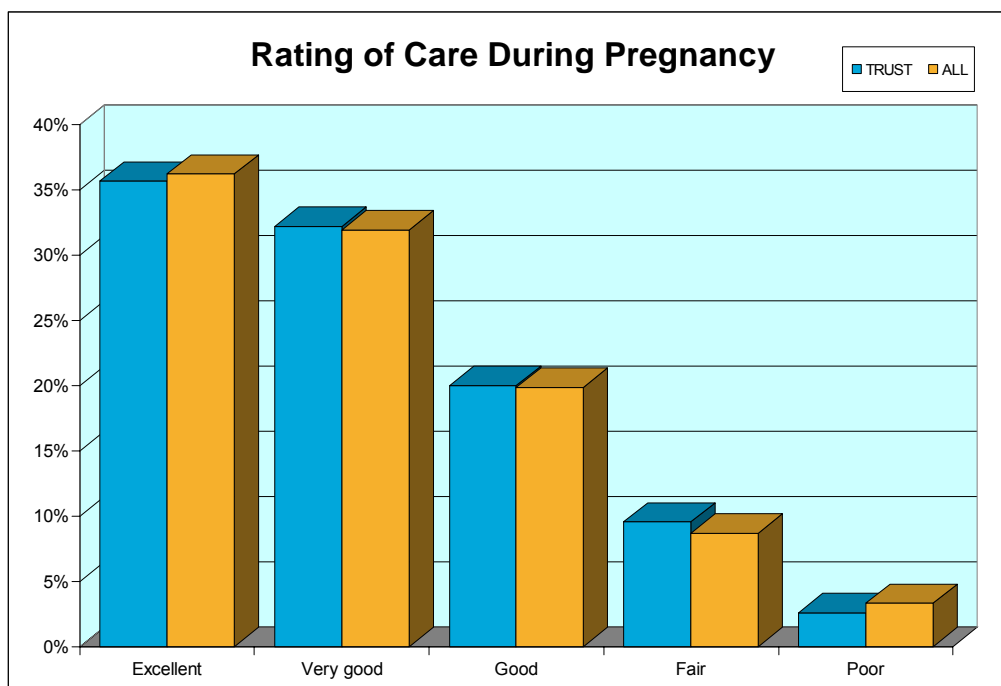
43



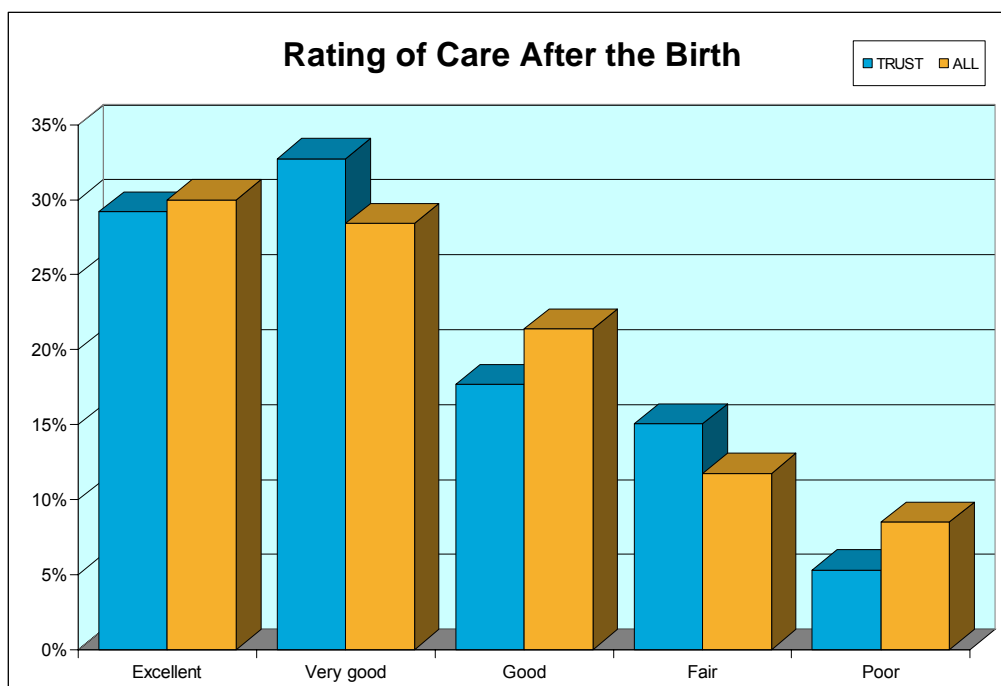
overall

1. OVERALL CARE RATINGS

Women were asked to rate the care they had received during their pregnancy, labour and birth, and after the birth of their baby. The charts below show how women rated care on these areas.



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COMPARISONS WITH OTHER TRUSTS IN 2007

	Trust	All	Com
~ Rating for care during pregnancy excellent / very good	68%	68%	■
~ Rating for care during labour and birth excellent / very good	87%	76%	➔
~ Rating for care after the birth excellent / very good	62%	58%	■

CONCLUSION:

Trust scores in comparison to other Trusts on issues relating to overall care during pregnancy, labour, birth and after the birth are about the same or more positive.

ACTION:

- Investigate why ratings for care after the birth of the baby are less positive than those for care during pregnancy and the birth of the baby.



national findings

◆ Overall Findings:

The key overall national findings, taken from data in the Trusts that Quality Health surveyed, are as follows:

- Women are in some senses being given real choices on their maternity care, but on some issues choice is there for only a minority. Examples are:
 - ~ 7 in 10 women are being offered a choice of where to have their baby.
 - ~ More than 8 in 10 women said they were given a choice about whether to have a test for Down's syndrome.
 - ~ But less than half (45%) say they were offered a choice of having their baby at home.
 - ~ Relatively few women are being given choices about who would carry out their antenatal care.
- Availability of the Pregnancy book is patchy, with only 61% saying they were given one (12% already had one). More than 1 in 5 women said they were not given one.
- It is clear that the vast majority of women are receiving the care that is supposed to happen at clear markers during their pregnancy. For example:
 - ~ Almost 9 in 10 women had a dating scan.
 - ~ The 20 week scan was almost universal (97% of women said they had one).
 - ~ Almost all women had the name and telephone number of a midwife they could call if they were worried.
 - ~ The prevalence of antenatal classes is by no means universal:
 - Overall, almost 1 in 4 women said they were not offered any NHS antenatal classes.
 - Take up of antenatal classes was low amongst certain social groups.
- Presence of partners and husbands was almost universal at various stages:
 - ~ More than 9 in 10 women said that their partner was allowed to attend their antenatal class.
 - ~ During the intrapartum stage, 9 in 10 women said that they had their husband / partner with them at some point.

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- Environmental scores were not very positive, although they did differ widely from Trust to Trust:
 - ~ Cleaning ratings were lowest for bathrooms and toilets, with only 1 in 3 women saying they were very clean at the postpartum stage.
 - ~ Although most women said they were offered a choice of food, 1 in 5 said they were given too little in terms of volume, and less than half said the food was excellent or very good.
- Caesarean rates varied widely from Trust to Trust, in a range of 15% to 32%. The WHO guideline is 12-15%. A 1% rise in the C section rate costs the NHS £5 million p.a., according to the Audit Commission.
- On the overall ratings of care, (on information, being treated with kindness and understanding, respect and dignity, given information etc.), women are consistently less positive about postpartum care as distinct from antenatal and intrapartum care. At the postpartum stage, 1 in 3 women overall had some criticisms of care.
- In most cases, newborn examinations or baby checks were almost universal. There were some Trusts with much lower rates, however.
- The incidence of breast feeding varied widely. In Trusts with high concentrations of white women who left education at 16 or earlier, a majority of women were using formula milk in the first few days as distinct from breast feeding. The lowest incidence of breast feeding is amongst young, white, less well educated women and the highest rates are amongst Asian and black women and amongst older white women.
- In terms of check ups on their own and baby's health:
 - ~ Almost all women said they had a check up of their own health.
 - ~ Significant minorities of women said they were not given advice about the baby's crying, sleeping position, skin care and feeding etc.
- Almost all women were given advice about contraception.



◆ Demographic Variables:

There are a range of variables that can influence the survey results (e.g. ethnicity, age) and some of the findings from these are set out below.

Firstly, ethnicity is a powerful variable: ethnic minority women are more likely to:

- Have their first contact with professionals late e.g. 7% of black women see a professional at 19 weeks or later, only 1% of white women do.
- Black and Asian women less likely to say they were given a choice about having baby at home.
- Black and Asian women more likely to be hospitalised during pregnancy.
- Black and Asian women less likely to be offered antenatal classes: 41% of black and 32% of Asian women say they are not offered classes (white women 21%).
- Asian women more critical of the cleanliness of the unit.
- Asian women far less likely to get the pain relief they wanted: 47% of Asian women said they got the pain relief they wanted, 62% of white women.
- Asian women less likely to have trust and confidence in the staff: 55% of Asian women do, 71% of white women.
- BUT the incidence of breast feeding amongst Asian and black women was very high: 93% in each group breast fed, compared to 78% of white women.
- Black and Asian women wanted to have greater contact with midwives after the birth than did white women.
- Overall ratings of care less positive from Asian women on all items: e.g. 29% of Asian women say their care after the birth was fair or poor, compared to 20% of white women.
- Ethnicity differences reflect those in other NHS surveys in all areas, e.g. MH, acute, primary care.

Age of the mother is also a strong variable, reflecting data from other NHS surveys:

- Younger women aged 16-24 are far less likely to say they were spoken to in a way they understood, less likely to say they were treated with respect and dignity.
- This is reflected in overall ratings of care: 67% of 16-24s always spoken to in a way they could understand, 86% of 35-44s.
- Overall ratings of care on understanding communication, being treated with respect and dignity, and being treated with kindness, are significantly lower amongst the 16-24s.
- Age also affects women in obvious ways which are unsurprising: e.g. older women more likely to have a caesarean: C section rates rise from 17% in 16-24s to 30% in 35-44s.



- Younger women are also far less likely to breast feed: 42% of the 16-24s used only formula milk, compared to 16% of the 35-44s.
- Younger women also wanted more support from midwives after the birth than did older women.

Being a single mother also impacts on results:

- Single mothers were much more likely to see a professional for the first time late in the pregnancy.
- Single mothers also felt less choice was given to them on whether to have screening tests.
- Single mothers were less happy about communication at all stages of the pregnancy and birth.
- Single mothers were more likely to be hospitalised during the pregnancy.
- Single mothers were less likely to attend antenatal classes: 24% of them attended NHS classes, compared to 33% of mothers with partners.
- Single mothers had less trust and confidence in the staff.
- Single mothers were also less likely to breast feed: 39% of them used breast milk in the first few days, compared to 59% of mothers with partners.

Whether a woman had a caesarean section had relatively little impact on the results, except in areas where it might be expected, for example:

- Women who had a caesarean were more likely to have been hospitalised during the pregnancy.
- Women who had a caesarean were also less positive about communication with them than were other women.

Being a first time mother also had limited impact on the results, again, except in expected areas:

- First time mothers were more likely to attend NHS antenatal classes.
- They were more likely to have a lengthy labour and less likely to have a “normal” birth.
- They were more likely to want information about recovery after the birth: more than 1 in 5 first time mothers wanted more such information.
- They were slightly less positive about communication.



key scores in 2007

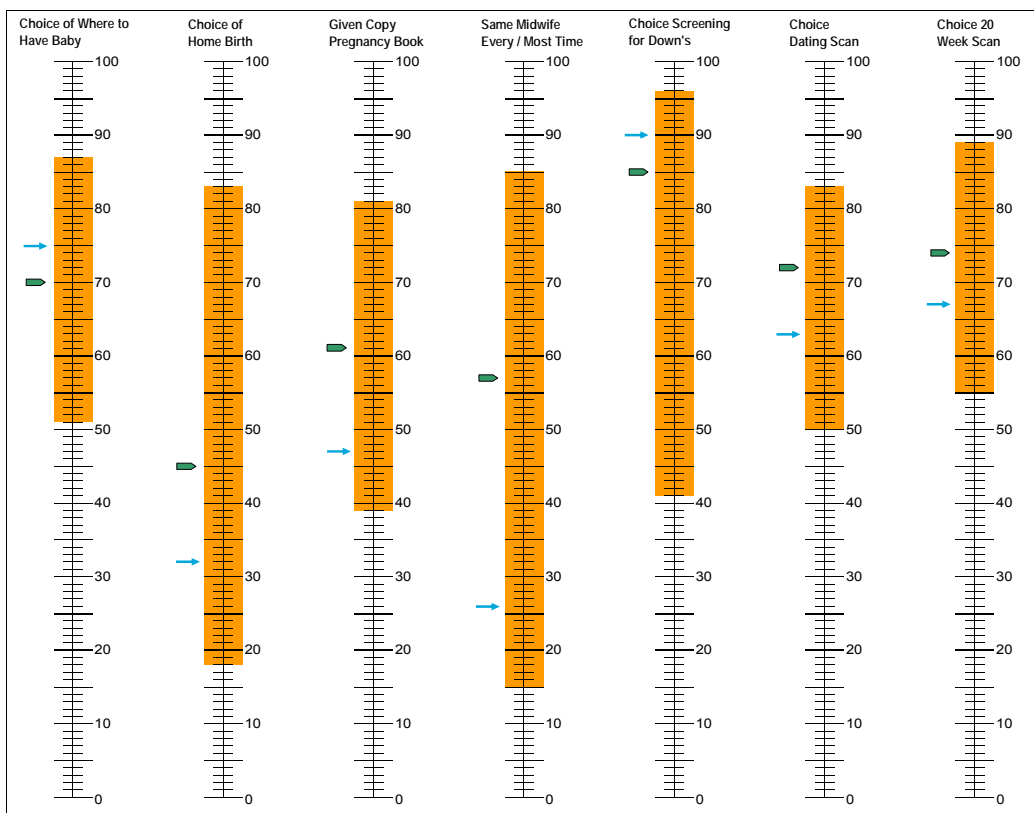
Set out below are a series of charts which show the range of responses on some key questions in the survey.

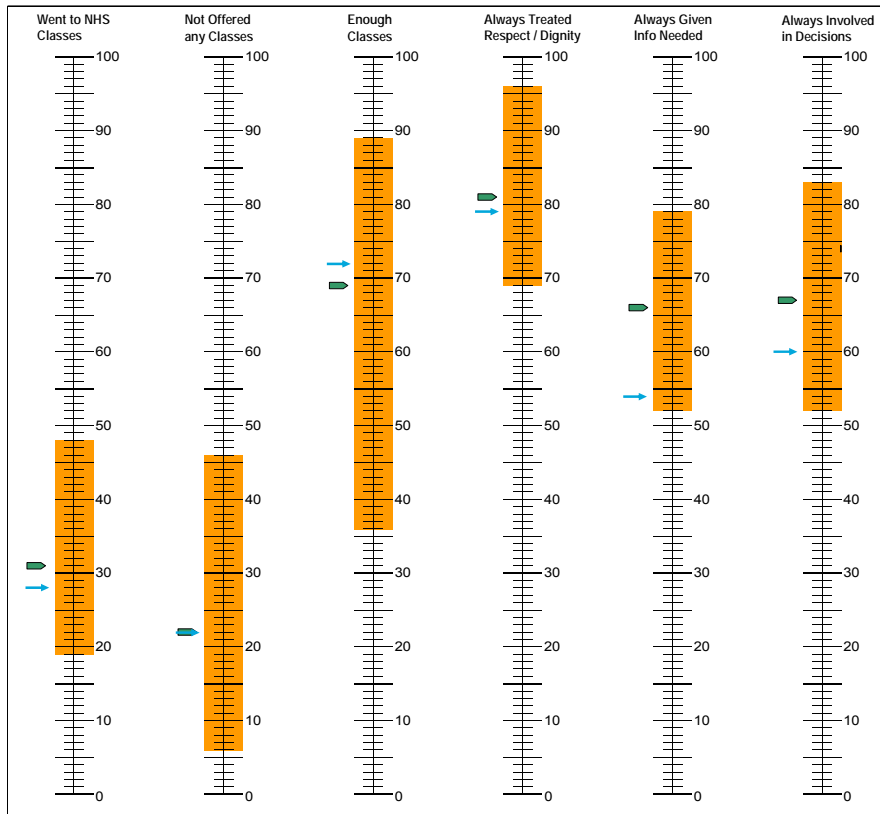
The charts show three things:

- The **range of scores** achieved by all Trusts surveyed by Quality Health on a particular group of questions. The extent of this range is shown in orange.
- The **national mean score** achieved by all Trusts for each of the questions. This is shown as a green indicator pointing toward each scale.
- **Your Trust's score** on each key question. This is shown as a blue arrow pointing toward the scale.

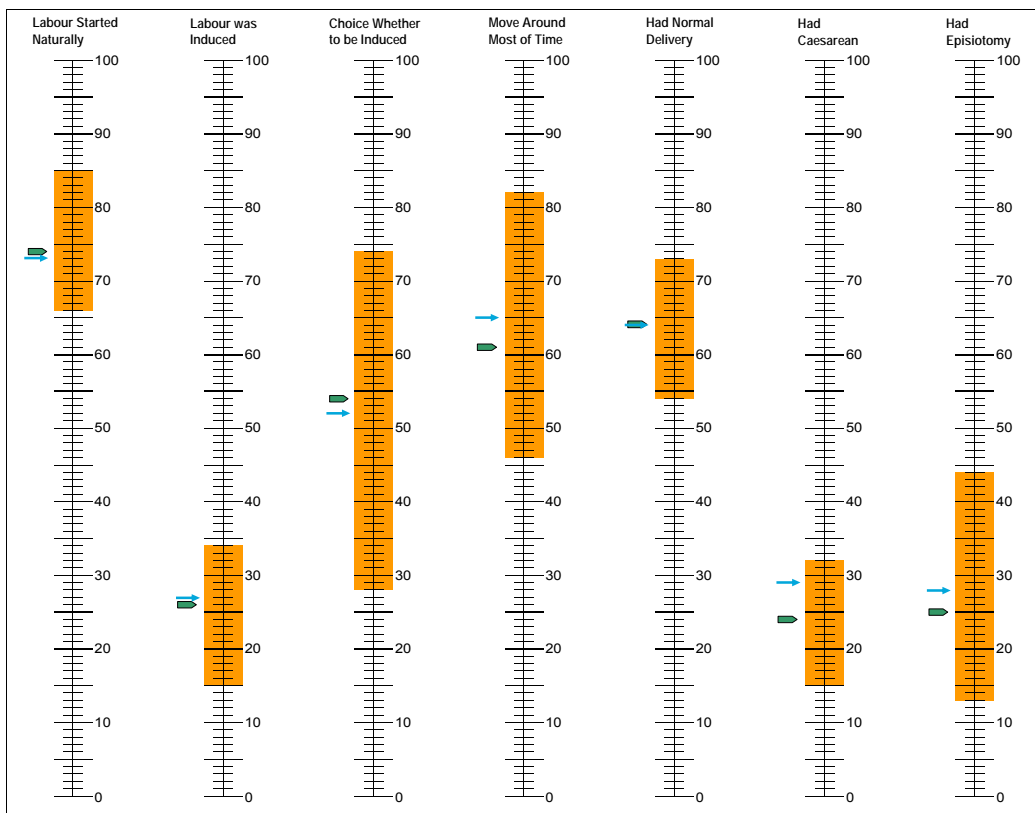
The national mean score and your Trust's score is shown without any weighting to the data.

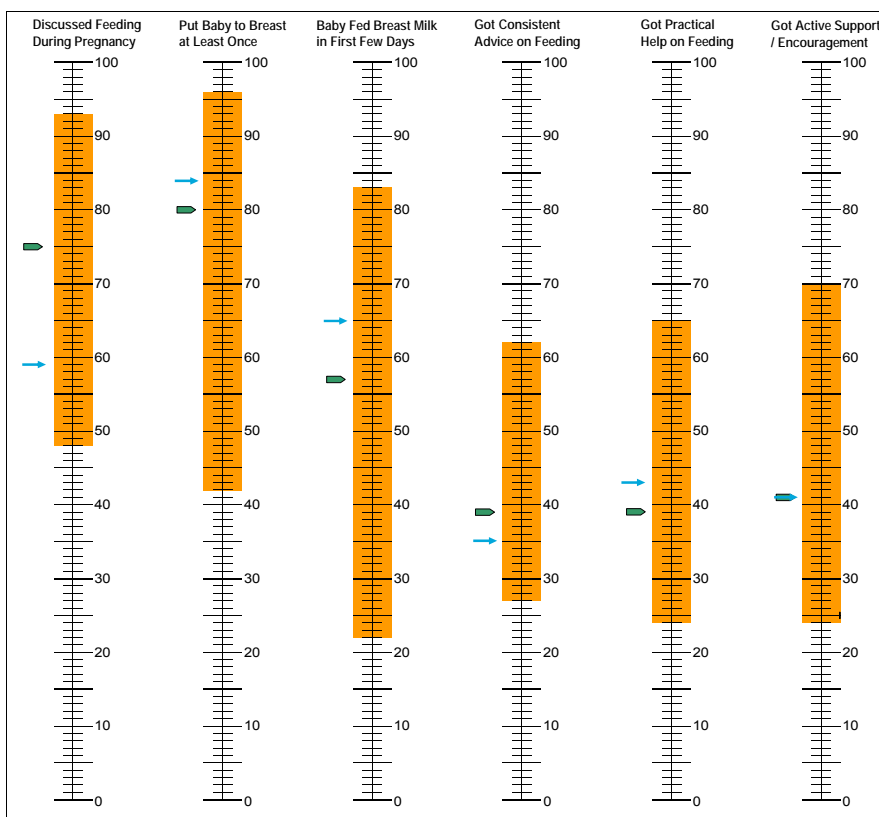
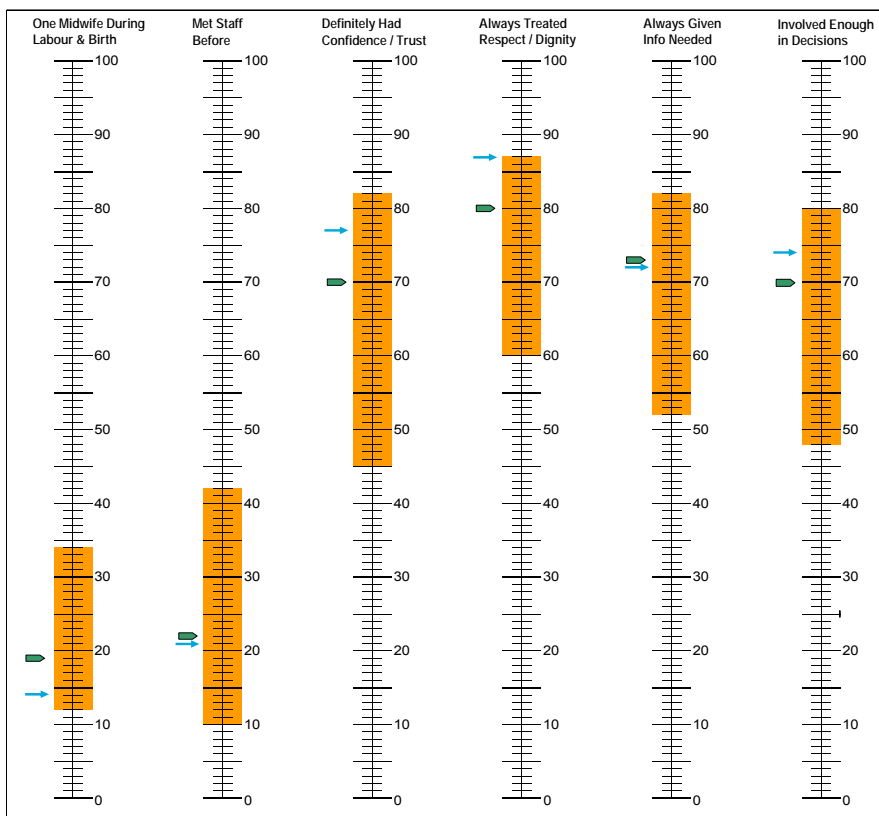
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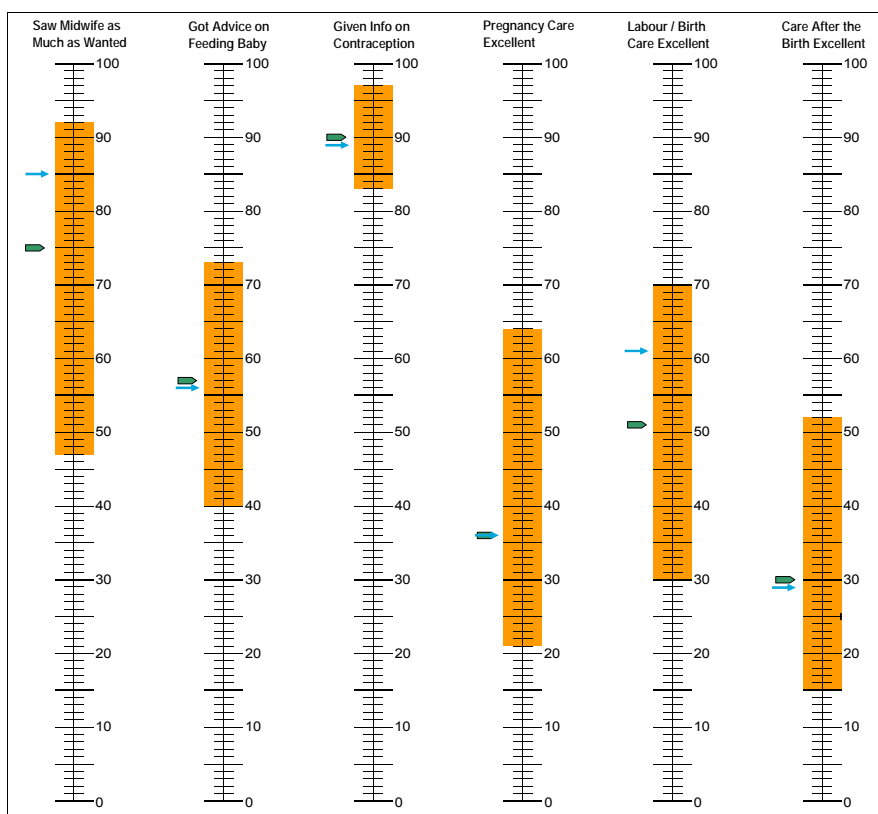




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CONCLUSIONS

The conclusions that we can reach from these key scores are as follows:

- The range of performance between Trusts on some questions is extremely wide, for example scores on whether women were given the choice of a home birth range from 18% to 83%; scores on baby being fed breast milk only in the first few days range from 22% to 83%. It is clear from this that there is a huge variation in policy and practice between Trusts.
- It is clear that the range of scores from Trust to Trust is smaller on some issues than others. For example, the range on contraceptive advice is very small (9 point spread). On other issues the range is extraordinarily wide.
- There is strong evidence from international studies quoted in the NICE Guidelines (Clinical Guidelines on C Section, April 2004, page 2, ISBN 1 904752 02 0) that it is in hospitals with strong multidisciplinary teams, positive attitudinal scores, strong leadership, and a commitment to evidence based programmes, that care is at its best.



survey results

This section of the report sets out the full results¹ from the National Maternity Survey ordered in exactly the same way as in the survey questionnaire sent to women.

◆ HOW TO READ THE COLUMNS OF FIGURES

The results are shown firstly in absolute numbers then as percentages. The first set of columns show the results for the Trust and the second set of columns show the results from all the Trusts surveyed by Quality Health in 2007.

The purpose of presenting the figures in this way is to give direct, at-a-glance, comparisons between the Trust's performance and other Trusts in the Quality Health database for this survey.

◆ CONVENTIONS

The percentages are calculated after excluding those women who did not answer that particular question. All percentages are rounded to the nearest whole number. When added together, the percentages for all answers to a particular question may not total 100% because of this rounding.

The 'Missing' figures show the number of women who did not reply to a particular question. In some cases, the 'Missing' figure is quite high because it includes women who did not answer that question or group of questions because it was not applicable to their circumstances (e.g. question B24).

On some questions there are also some figures which are italicised. The percentages on these questions have been recalculated to exclude responses where the question was not applicable to the woman's circumstances. For example, questions such as B7, where both those not answering (Missing) and those saying they were not given a choice about where to have their baby are excluded from the percentage calculations.

◆ CHANGES MADE TO THE DATA

There are a number of questions which are 'routed' (i.e. where women are directed to a subsequent question depending on their answer to the lead question). Sometimes there are conflicts in the answers that women give to these questions and the data is corrected to account for this. For example, if answer 1 in question B9 is ticked and the woman goes on to answer question B10 etc., then any data between question B10 and question B15 (where the woman was directed) will be deleted as these questions should not have been answered.

There were also a number of questions where women were asked to write in specific information e.g. how many weeks pregnant they were when the baby was born. All of these questions have been scaled to provide statistical information for the Trust on these issues.

¹ Question A1 is not shown in these results as it only asked for the date that the respondent filled in the questionnaire. A3 asked for the baby's date of birth and this has not been included.

DATES AND YOUR BABY

	Total	TRUST	Total	All
A2. Did you give birth to a single baby, twins or more in your most recent pregnancy?				
A single baby	115	100%	6413	99%
Twins	0	0%	92	1%
Triplets, quads or more	0	0%	1	0%
Missing	0		22	
A3. When was this baby born?				
Day time [6.00am-6.00pm]	78	68%	3410	53%
Night time [6.01pm-5.59am]	36	32%	3001	47%
Missing	1		117	
A4. Roughly how many weeks pregnant were you when your baby was born?				
0 - 23 weeks	0	0%	7	0%
24 - 28 weeks (extremely premature)	2	2%	23	0%
29 - 36 weeks (premature)	8	7%	377	6%
37 - 40 weeks	74	65%	4118	64%
41+ (overdue)	29	26%	1935	30%
Missing	2		68	
A5. How much did your baby weigh at birth?				
0 - 1828 grams	2	11%	42	4%
1829 - 2499 grams	1	6%	63	6%
2500+ grams	15	83%	1026	91%
Missing	97		5397	
OR				
0 - 4lb	3	3%	76	1%
4lb 1oz - 5lb 7oz	4	4%	245	4%
5lb 8oz +	95	93%	5454	94%
Missing	13		753	

ANTENATAL CARE

	Total	TRUST	Total	All
B1. Which health professional did you go to first about your pregnancy care?				
GP/family doctor	110	96%	4985	77%
Midwife	2	2%	1302	20%
Other	2	2%	173	3%
Missing	1		68	
B2. Roughly how many weeks pregnant were you when you first saw this health professional about your pregnancy care?				
0 - 6 weeks	59	51%	3297	51%
7 - 12 weeks	50	43%	2747	43%
13 - 18 weeks	4	3%	243	4%
19 - 24 weeks	1	1%	88	1%
25+ weeks	1	1%	46	1%
Missing	0		107	
B3. Were you able to see this person as soon as you wanted?				
Yes	107	93%	5835	90%
No	8	7%	625	10%
Missing	0		68	
B4. Roughly how many weeks pregnant were you when you had your 'booking' appointment (the appointment where you were given your pregnancy notes)?				
0 - 7 weeks	7	6%	739	12%
8 - 12 weeks	69	62%	4167	68%
13 - 18 weeks	26	23%	987	16%
19 - 24 weeks	8	7%	189	3%
25+ weeks	1	1%	69	1%
Missing	4		377	
B5. At the start of your pregnancy did you have a choice about where you could have your baby?				
Yes	86	75%	4528	70%
No	16	14%	1076	17%
No but this was not possible for medical reasons	6	5%	543	8%
Don't Know / Can't remember	7	6%	349	5%
Missing	0		32	
B6. Were you given a choice of having your baby at home?				
Yes	37	32%	2929	45%
No	58	51%	2108	33%
No but this was not possible for medical reasons	13	11%	936	14%
Don't Know / Can't remember	6	5%	485	8%
Missing	1		70	

ANTENATAL CARE

	Total	TRUST	Total	All
B7. Did you get enough information from a midwife or doctor to help you decide where to have your baby?				
<i>Yes definitely</i>	29	29%	2339	42%
<i>Yes to some extent</i>	27	27%	1386	25%
<i>No but I would have liked some information</i>	20	20%	746	13%
<i>No but I did not need this information</i>	25	25%	1005	18%
<i>I wasn't given a choice about where to have my baby</i>	9	8%	373	6%
<i>For medical reasons there was no choice about where to have my baby</i>	4	4%	499	8%
<i>Don't Know / Can't remember</i>	0	0%	120	2%
Missing	1		60	
B8. Were you given a copy of The Pregnancy Book?				
Yes	54	47%	3936	61%
No	38	33%	1324	21%
No I already had one	17	15%	792	12%
Don't Know / Can't remember	5	4%	399	6%
Missing	1		77	
B9. Roughly how many antenatal check-ups did you have in total? (not including appointments for blood tests or visits to the hospital for a scan)				
None	3	3%	63	1%
1-6	55	48%	2361	37%
7-9	31	27%	2106	33%
10-14	19	17%	1322	21%
15-19	3	3%	340	5%
20 or more	3	3%	193	3%
Missing	1		143	
B10. During your pregnancy were you given a choice about where your antenatal check-ups would take place?				
Yes	23	21%	1375	22%
No	81	73%	4737	74%
Don't Know / Can't remember	7	6%	283	4%
Missing	4		133	
B11. Did you see any of the following health professional(s) for your antenatal check-ups?				
a. Midwife				
Yes	107	100%	6250	99%
No	0	0%	46	1%
Missing	8		232	
b. GP (family doctor)				
Yes	24	32%	2076	48%
No	51	68%	2273	52%
Missing	40		2179	

ANTENATAL CARE		Total	TRUST	Total	All
c. Hospital doctor					
Yes		53	60%	2898	61%
No		35	40%	1816	39%
Missing		27		1814	
d. Other					
Yes		3	5%	339	11%
No		53	95%	2695	89%
Missing		59		3494	
B12. Were you given a choice about who would carry out your antenatal check-ups?					
Yes		12	11%	846	13%
No		93	84%	5141	80%
Don't know / Can't remember		6	5%	411	6%
Missing		4		130	
B13. If you saw a midwife for your antenatal check-ups, did you see the same one every time?					
Yes every time		1	1%	1279	20%
Yes most of the time		27	25%	2309	37%
No		78	74%	2668	42%
I only saw a midwife once		3	3%	69	1%
I did not see a midwife		1	1%	37	1%
Don't Know / Can't remember		0	0%	22	0%
Missing		5		144	
B14. If you saw a hospital doctor for your antenatal check-ups, did you see the same one every time?					
Yes every time		4	8%	492	17%
Yes most of the time		9	18%	587	21%
No		36	72%	1702	60%
I only saw a hospital doctor once		10	11%	686	13%
I did not see a hospital doctor		31	34%	1600	31%
Don't Know / Can't remember		1	1%	62	1%
Missing		24		1399	
B15. Did you have any screening tests (a blood test or nuchal scan) to check whether your baby might have Down's syndrome?					
Yes a blood test only		58	52%	2955	46%
Yes a nuchal scan only		5	5%	389	6%
Yes a nuchal scan and a blood test		14	13%	1054	16%
No I didn't want a screening test for Down's syndrome		31	28%	1607	25%
No I wasn't offered any screening test for Down's syndrome		3	3%	306	5%
Don't Know / Can't remember		0	0%	114	2%
Missing		4		103	

ANTENATAL CARE

	Total	TRUST	Total	All
B16. Do you feel you had a choice about whether to have a screening test for Down's syndrome?				
Yes	104	90%	5480	85%
No	10	9%	709	11%
Don't Know / Can't remember	1	1%	253	4%
Missing	0		86	
B17. Were the reasons for having a screening test for Down's syndrome clearly explained to you?				
Yes	98	87%	5374	85%
No	12	11%	671	11%
Don't Know / Can't remember	3	3%	295	5%
Missing	2		188	
B18a. Did you have a 'dating scan'? This takes place between 8-14 weeks of pregnancy.				
Yes	99	88%	5635	87%
No	14	12%	824	13%
Missing	2		69	
B18b. Was the reason for this scan clearly explained to you?				
Yes	87	84%	5230	89%
No	16	16%	659	11%
Missing	12		639	
B18c. Do you feel you had a choice about having this scan?				
Yes	62	63%	4077	72%
No	37	37%	1623	28%
Missing	16		828	
B19a. Did you have a scan at around 20 weeks of pregnancy? This may have been called a '20 week' scan, or an 'anomaly' scan or a 'mid-trimester' scan.				
Yes	112	97%	6242	97%
No	3	3%	226	3%
Missing	0		60	
B19b. Was the reason for this scan clearly explained to you?				
Yes	101	92%	5762	92%
No	9	8%	515	8%
Missing	5		251	
B19c. Do you feel you had a choice about having this scan?				
Yes	70	67%	4433	74%
No	34	33%	1563	26%
Missing	11		532	

ANTENATAL CARE

	Total	TRUST	Total	All
B20. Roughly how many ultrasound scans did you have in total during this pregnancy?				
None	0	0%	3	0%
One	0	0%	267	4%
Two	30	26%	2231	35%
Three	39	34%	1721	27%
Four	23	20%	926	14%
Five	5	4%	483	7%
Six or More	18	16%	816	13%
Missing	0		81	
B21. While you were pregnant, but before you went into labour, did you stay in hospital overnight because of a problem related to your pregnancy? (If your labour was induced and you had to stay overnight immediately before induction, please do not include that stay here)				
Yes	29	25%	1232	19%
No	85	75%	5224	81%
Missing	1		72	
B22. During your pregnancy did you have the name and telephone number of a midwife you could contact if you were worried?				
Yes	90	79%	5912	91%
No	21	18%	520	8%
Don't Know / Can't remember	3	3%	75	1%
Missing	1		21	
B23. During your pregnancy, did you attend any antenatal classes provided by the NHS?				
Yes	32	28%	2010	31%
No I was not offered any classes	25	22%	1436	22%
No they were all booked up	6	5%	140	2%
No I attended private antenatal classes (e.g. NCT)	6	5%	177	3%
No I did not need to attend the classes	30	26%	1896	30%
No I did not attend for some other reasons	15	13%	736	12%
Missing	1		133	
B24. If you did attend any antenatal classes provided by the NHS:				
a. Were the classes at a convenient time of day?				
Yes	28	88%	1711	86%
No	4	13%	285	14%
Missing	83		4532	
b. Were the classes at a convenient place?				
Yes	30	97%	1847	94%
No	1	3%	122	6%
Missing	84		4559	

ANTENATAL CARE

	Total	TRUST	Total	All
c. Was your partner or someone of your choice allowed to attend?				
Yes	32	100%	1847	94%
No	0	0%	123	6%
Missing	83		4558	
d. Were there enough classes?				
Yes	23	72%	1364	69%
No	9	28%	606	31%
Missing	83		4558	
e. Did the classes cover the topics you wanted?				
Yes	26	81%	1526	78%
No	6	19%	428	22%
Missing	83		4574	
B25. Overall, thinking about your antenatal care, were you:				
a. Spoken to in a way you could understand?				
Yes always	87	78%	4995	79%
Yes sometimes	24	21%	1199	19%
No	0	0%	87	1%
Don't Know / Can't remember	1	1%	33	1%
Missing	3		214	
b. Treated with respect and dignity?				
Yes always	89	79%	5049	81%
Yes sometimes	21	19%	1035	17%
No	2	2%	149	2%
Don't Know / Can't remember	1	1%	28	0%
Missing	2		267	
c. Treated with kindness and understanding?				
Yes always	80	71%	4780	76%
Yes sometimes	29	26%	1289	21%
No	3	3%	175	3%
Don't Know / Can't remember	1	1%	27	0%
Missing	2		257	
d. Given the information or explanations you needed?				
Yes always	61	54%	4126	66%
Yes sometimes	42	38%	1761	28%
No	8	7%	349	6%
Don't Know / Can't remember	1	1%	26	0%
Missing	3		266	

ANTENATAL CARE

	Total	TRUST	Total	All
e. Involved enough in decisions about your care?				
Yes always	68	60%	4171	67%
Yes sometimes	33	29%	1561	25%
No	11	10%	479	8%
Don't Know / Can't remember	1	1%	55	1%
Missing	2		262	

YOUR LABOUR AND THE BIRTH OF YOUR BABY

	Total	TRUST	Total	All
C1. Roughly how long did your labour last?				
0 - 10 hours	59	61%	3524	64%
11 - 15 hours	11	11%	827	15%
16 - 24 hours	6	6%	669	12%
25 - 36 hours	15	16%	319	6%
37 - 48 hours	4	4%	114	2%
49+ hours	1	1%	62	1%
Missing	19		1013	
C2. How did your labour start?				
It started naturally	66	73%	4168	74%
It was induced (started off)	25	27%	1436	26%
Missing	24		924	
C3. If your labour was induced, were any of the following used?				
a. I was given a vaginal gel or pessary to induce (start my labour)	21	84%	1027	72%
Missing	4		409	
b. My waters were broken by a doctor or a midwife (amniotomy)	19	76%	821	57%
Missing	6		615	
c. I was given a drip (in my hand or arm) to induce (start) my labour	13	52%	635	44%
Missing	12		801	
C4. Do you feel you had a choice about whether your labour would be induced (started off)?				
Yes	15	52%	807	54%
No	14	48%	624	42%
Not sure / Can't remember	0	0%	62	4%
Missing	86		5035	
C5. During your labour were you able to move around and choose the position that made you most comfortable?				
Yes most of the time	59	65%	3419	61%
Yes some of the time	21	23%	1339	24%
No not at all	11	12%	855	15%
Missing	24		915	
C6. For your labour and birth in the hospital, how clean were:				
a. The labour or delivery room you were in?				
Very clean	59	63%	3581	65%
Fairly clean	30	32%	1715	31%
Not very clean	3	3%	132	2%
Not at all clean	1	1%	42	1%
I did not use these	3	3%	78	1%
Missing	19		980	

YOUR LABOUR AND THE BIRTH OF YOUR BABY

	Total	TRUST	Total	All
b. The toilets or bathrooms you used at this time?				
Very clean	50	55%	2652	50%
Fairly clean	34	37%	2121	40%
Not very clean	4	4%	444	8%
Not at all clean	3	3%	133	2%
I did not use these	3	3%	168	3%
Missing	21		1010	
C7. During your labour and birth, did you use any of the following to help relieve the pain?				
a. Natural methods (e.g. breathing massage)	49	43%	2701	41%
Missing	66		3827	
b. Water or a birthing pool	6	5%	569	9%
Missing	109		5959	
c. TENS Machine (with pads on your back)	21	18%	1133	17%
Missing	94		5395	
d. Gas and air (breathing through a mask)	77	67%	4629	71%
Missing	38		1899	
e. Injection of pethidine or a similar painkiller	38	33%	2007	31%
Missing	77		4521	
f. Epidural or similar (injection in your back given by an anaesthetist)	35	30%	1698	26%
Missing	80		4830	
g. Other	3	3%	89	1%
Missing	112		6439	
h. I did not use any pain relief	6	5%	320	5%
Missing	109		6208	
C8. During your labour and birth, did you feel you got the pain relief you wanted?				
Yes definitely	51	55%	3271	60%
Yes to some extent	21	23%	1326	24%
No	11	12%	373	7%
No but it was not possible to have any pain relief (e.g. there was not time)	10	11%	434	8%
I did not want any pain relief	3	3%	215	4%
Don't know / Can't remember	0	0%	29	1%
Missing	19		880	

YOUR LABOUR AND THE BIRTH OF YOUR BABY

	Total	TRUST	Total	All
C9. Where was your baby born?				
In hospital	107	96%	5595	92%
In a birth centre/maternity unit separate from hospital	1	1%	264	4%
At home	4	4%	215	4%
Other	0	0%	6	0%
Missing	3		448	
C10. Were you transferred just before your birth or during your labour for medical reasons or concerns?				
No I was not transferred	101	90%	5536	87%
Yes from one part of the hospital to another	6	5%	557	9%
Yes from a separate birth centre/maternity unit to hospital	1	1%	59	1%
Yes from home to hospital	4	4%	190	3%
Yes from one hospital to another	0	0%	38	1%
Missing	3		148	
C11. Thinking about the birth of your baby, what kind of delivery did you have?				
Normal (vaginal) birth	73	64%	4120	64%
Delivery using forceps	7	6%	306	5%
Delivery using a vacuum cap (ventouse) on the baby's head	1	1%	478	7%
A caesarean (through a cut in the abdomen into the womb)	33	29%	1516	24%
Missing	1		108	
C12. If your baby was born by caesarean was this...				
Planned and carried out before you went into labour	15	45%	592	39%
Planned but carried out after you had gone into labour	2	6%	95	6%
The result of an unforeseen problem before or during your labour	16	48%	831	55%
Missing	82		5010	
C13. Where did you give birth?				
On a bed	73	91%	4433	90%
On the floor	5	6%	256	5%
In water or in a birthing pool	1	1%	159	3%
Other	1	1%	93	2%
Missing	35		1587	
C14. What position were you in when your baby was born?				
Sitting/sitting supported by pillows	20	25%	1166	24%
On my side	3	4%	252	5%
Standing squatting or kneeling	13	16%	630	13%
Lying	27	34%	1465	30%
Lying with my legs supported in stirrups	17	21%	1307	27%
Other	0	0%	75	2%
Missing	35		1633	

YOUR LABOUR AND THE BIRTH OF YOUR BABY	Total	TRUST	Total	All
C15. While your baby was being born were you given an episiotomy (cut)?				
Yes	22	28%	1215	25%
No	58	73%	3688	75%
Missing	35		1625	
C16. While your baby was being born did you have a tear?				
Yes	40	50%	2540	52%
No	40	50%	2305	48%
Missing	35		1683	
C17. Was this a serious tear which involved your back passage (third or fourth degree tear)?				
Yes	4	10%	402	16%
No	36	90%	2111	84%
Missing	75		4015	
C18. If you had an episiotomy (cut) or tear requiring stitches, how long after your baby was born were the stitches done?				
Within 20 minutes	25	52%	1473	56%
20 minutes to 1 hour	16	33%	790	30%
More than 1 hour	7	15%	294	11%
Don't know / Can't remember	0	0%	84	3%
I did not have stitches	9	13%	646	15%
I did not have an episiotomy (cut) or a tear	13	19%	911	22%
Missing	45		2330	
C19. Altogether, how many different midwives looked after you during your labour and the birth of your baby?				
One	16	14%	1217	19%
Two	41	37%	2360	37%
Three	32	29%	1413	22%
Four	8	7%	684	11%
Five or more	14	13%	742	12%
Missing	4		112	
C20. Had you met any of the staff who looked after you during your labour and birth before you went into labour?				
Yes	24	21%	1416	22%
No	87	77%	4924	76%
Don't know / Can't remember	2	2%	118	2%
Missing	2		70	
C21. Did you have confidence and trust in the staff caring for you during your labour and birth?				
Yes definitely	86	77%	4487	70%
Yes to some extent	22	20%	1671	26%
No	3	3%	259	4%
Don't know / Can't remember	1	1%	32	0%
Missing	3		79	

YOUR LABOUR AND THE BIRTH OF YOUR BABY		Total	TRUST	Total	All
C22.	Did you have your husband, partner or companion with you during labour and at the birth of your baby?				
	Yes during labour only	6	5%	340	5%
	Yes during labour and birth	91	80%	5401	83%
	Yes during birth only	13	11%	540	8%
	No	4	4%	195	3%
	Missing	1		52	
C23.	Was your husband, partner or companion with you for as much as you wanted?				
	Yes	102	93%	5884	94%
	No	8	7%	406	6%
	Missing	5		238	
C24.	If your husband, partner or companion was not with you for as much as you wanted during labour and/or at the birth of your baby, what was the main reason for this?				
	The staff did not allow them to be there when I wanted	4	50%	188	48%
	They did not feel able to be there when I wanted them	0	0%	20	5%
	It was difficult because of the layout/size of the room	0	0%	5	1%
	It was not possible for medical reasons (e.g. I had a caesarean under general anaesthetic)	1	13%	81	21%
	Other	3	38%	100	25%
	Missing	107		6134	
C25.	Were you (and/or your husband, partner or companion) left alone by midwives or doctors at a time when it worried you?				
	Yes during labour	14	13%	913	14%
	Yes shortly after the birth	2	2%	398	6%
	Yes during labour and shortly after the birth	3	3%	311	5%
	No not at all	92	83%	4767	75%
	Missing	4		139	
C26.	Overall, thinking about your care during labour and birth, were you:				
a.	Spoken to in a way you could understand?				
	Yes always	92	82%	5246	82%
	Yes sometimes	19	17%	1050	16%
	No	0	0%	111	2%
	Don't know / Can't remember	1	1%	27	0%
	Missing	3		94	
b.	Treated with respect and dignity?				
	Yes always	95	87%	5108	80%
	Yes sometimes	11	10%	1005	16%
	No	3	3%	249	4%
	Don't know / Can't remember	0	0%	30	0%
	Missing	6		136	

YOUR LABOUR AND THE BIRTH OF YOUR BABY

	Total	TRUST	Total	All
c. Treated with kindness and understanding?				
Yes always	91	82%	4983	78%
Yes sometimes	17	15%	1117	17%
No	2	2%	256	4%
Don't know / Can't remember	1	1%	27	0%
Missing	4		145	
d. Given the information or explanations you needed?				
Yes always	80	72%	4638	73%
Yes sometimes	24	22%	1312	21%
No	6	5%	403	6%
Don't know / Can't remember	1	1%	44	1%
Missing	4		131	
e. Involved enough in decisions about your care?				
Yes always	83	74%	4459	70%
Yes sometimes	21	19%	1315	21%
No	6	5%	554	9%
Don't know / Can't remember	2	2%	62	1%
Missing	3		138	

BABIES BORN AT HOME

	Total	TRUST	Total	All
D1. Before your baby was born, did you plan to have your baby at home?				
Yes	6	10%	370	10%
No	53	90%	3358	90%
Missing	56		2800	
D2. Were you given enough information about the following things:				
a. The sorts of pain relief that would be available				
Yes definitely	3	100%	167	81%
Yes to some extent	0	0%	22	11%
No	0	0%	16	8%
Don't know / Can't remember	0	0%	2	1%
Missing	112		6321	
b. The monitoring of the baby that would be available				
Yes definitely	1	50%	155	76%
Yes to some extent	1	50%	20	10%
No	0	0%	27	13%
Don't know / Can't remember	0	0%	2	1%
Missing	113		6324	
c. The distance and location of the nearest hospital				
Yes definitely	1	50%	174	85%
Yes to some extent	1	50%	12	6%
No	0	0%	17	8%
Don't know / Can't remember	0	0%	1	0%
Missing	113		6324	
d. The sorts of emergency back-up that would be available (e.g. ambulance facilities if you needed them)				
Yes definitely	1	50%	165	80%
Yes to some extent	0	0%	18	9%
No	1	50%	22	11%
Don't know / Can't remember	0	0%	0	0%
Missing	113		6323	
D3. After the birth, did you or your baby go to hospital?				
No my baby and I both stayed at home	4	100%	188	88%
Yes my baby and I both went to hospital	0	0%	25	12%
I went to hospital but my baby stayed at home	0	0%	0	0%
My baby went to hospital but I stayed at home	0	0%	0	0%
Missing	111		6315	

CARE IN HOSPITAL AFTER THE BIRTH

	Total	TRUST	Total	All
E1. How long did you stay in hospital after your baby was born?				
0 - 5 hours	1	4%	190	9%
6 - 8 hours	4	17%	332	15%
9 - 18 hours	6	25%	824	38%
19 - 24 hours	5	21%	445	20%
25+ hours	8	33%	386	18%
Missing	91		4351	
OR				
1 - 2 days	27	31%	1988	49%
3 - 4 days	39	45%	1448	36%
5 - 7 days	16	18%	474	12%
8 days or more	5	6%	158	4%
Missing	28		2460	
E2. Looking back, do you feel that the length of your stay in hospital was:				
Too long	25	23%	904	15%
Too short	4	4%	735	12%
About right	78	71%	4332	70%
Not sure / Don't know	3	3%	218	4%
Missing	5		339	
E3. Were you given enough information about your own recovery after the birth?				
Yes definitely	61	56%	2746	45%
Yes to some extent	38	35%	2338	38%
No but I would have liked some information	10	9%	973	16%
No but I did not need this information	1	1%	126	2%
Don't know / Can't remember	0	0%	50	1%
Missing	5		295	
E4. Did your baby have a newborn examination or 'baby check' before you were discharged home?				
Yes	106	96%	5820	93%
No	2	2%	337	5%
Don't know / Can't remember	2	2%	75	1%
Missing	5		296	
E5. Who carried out this examination or 'baby check'?				
Midwife	15	15%	825	15%
Doctor	77	75%	4388	77%
Other	6	6%	250	4%
Don't know / Can't remember	4	4%	204	4%
Missing	13		861	

CARE IN HOSPITAL AFTER THE BIRTH

	Total	TRUST	Total	All
E6. During your postnatal stay were you offered a choice of food?				
Yes always	88	81%	4388	71%
Yes sometimes	16	15%	1134	18%
No	4	4%	688	11%
Missing	7		318	
E7. How much food were you given?				
Too much	1	1%	38	1%
The right amount	88	85%	4441	78%
Too little	14	14%	1243	22%
I did not have any hospital food	7	6%	487	8%
Missing	5		319	
E8. Overall how would you rate the hospital food during your postnatal stay?				
Very good	13	13%	768	13%
Good	31	30%	1954	34%
Fair	48	46%	2062	36%
Poor	12	12%	1002	17%
I did not have any hospital food	6	5%	404	7%
Missing	5		338	
E9. For your postnatal stay in the hospital, how clean were:				
a. The hospital room or ward you were in?				
Very clean	38	35%	2802	45%
Fairly clean	58	53%	2841	46%
Not very clean	10	9%	412	7%
Not at all clean	4	4%	105	2%
I did not use these	1	1%	51	1%
Missing	4		317	
b. The toilets and bathrooms that you used?				
Very clean	25	23%	2128	35%
Fairly clean	58	53%	2821	46%
Not very clean	17	15%	876	14%
Not at all clean	10	9%	315	5%
I did not use these	1	1%	41	1%
Missing	4		347	
E10. Overall, thinking about the postnatal care you recieved in hospital after the birth of your baby, were you:				
a. Spoken to in a way you could understand?				
Yes always	75	69%	4486	72%
Yes sometimes	31	28%	1496	24%
No	3	3%	206	3%
Don't know / Can't remember	0	0%	12	0%
Missing	6		328	

CARE IN HOSPITAL AFTER THE BIRTH

	Total	TRUST	Total	All
b. Treated with respect and dignity?				
Yes always	77	70%	4084	66%
Yes sometimes	27	25%	1627	26%
No	6	5%	456	7%
Don't know / Can't remember	0	0%	16	0%
Missing	5		345	
c. Treated with kindness and understanding?				
Yes always	71	65%	3909	63%
Yes sometimes	33	30%	1731	28%
No	6	5%	518	8%
Don't know / Can't remember	0	0%	19	0%
Missing	5		351	
d. Given the information or explanations you needed?				
Yes always	63	58%	3608	58%
Yes sometimes	37	34%	1858	30%
No	9	8%	695	11%
Don't know / Can't remember	0	0%	20	0%
Missing	6		347	

FEEDING YOUR BABY

	Total	TRUST	Total	All
F1. During your pregnancy did your midwife discuss infant feeding with you?				
Yes	67	59%	4845	75%
No	42	37%	1409	22%
Don't know / Can't remember	4	4%	224	3%
Missing	2		50	
F2. Did you ever put your baby to the breast (even if it was only once)?				
Yes	95	84%	5160	80%
No	18	16%	1313	20%
Missing	2		55	
F3. In the first few days after the birth how was your baby fed?				
Breast milk (or expressed breast milk) only	74	65%	3654	57%
Both breast and formula (bottle) milk	16	14%	1219	19%
Formula (bottle) milk only	22	19%	1586	25%
Not sure	1	1%	4	0%
Missing	2		65	
F4. Thinking about feeding your baby (breast or bottle) did you feel that midwives and other carers gave you:				
a. Consistent advice?				
Yes always	39	35%	2349	39%
Yes generally	50	45%	2270	37%
No	21	19%	1453	24%
Don't know	1	1%	26	0%
Didn't want or need this	2	2%	320	5%
Missing	2		110	
b. Practical help?				
Yes always	46	43%	2342	39%
Yes generally	49	45%	2292	38%
No	12	11%	1321	22%
Don't know	1	1%	24	0%
Didn't want or need this	5	4%	422	7%
Missing	2		127	
c. Active support and encouragement?				
Yes always	45	41%	2505	41%
Yes generally	49	44%	2203	36%
No	16	14%	1306	22%
Don't know	1	1%	40	1%
Didn't want or need this	3	3%	332	5%
Missing	1		142	

BABIES NEEDING SPECIAL CARE

	Total	TRUST	Total	All
G1. Was your baby cared for in a neonatal unit (NNU, NICU, SCBU) at all?				
Yes	8	8%	590	11%
No	89	92%	5010	89%
Missing	18		928	
G2. How long was your baby in neonatal care in total?				
1 day or less	1	13%	141	24%
2-7 days	3	38%	239	41%
8-14 days	2	25%	95	16%
15-30 days	0	0%	62	11%
31 days or more	2	25%	49	8%
Missing	107		5942	
G3. Were you and/or your partner given enough information about why your baby was admitted for neonatal care?				
Yes definitely	6	75%	409	70%
Yes to some extent	2	25%	132	22%
No but I would have liked some information	0	0%	40	7%
No but I did not need this information	0	0%	4	1%
Don't know / Can't remember	0	0%	7	1%
Missing	107		5936	
G4. Is your baby still in a neonatal unit now?				
Yes	0	0%	9	2%
No	8	100%	565	98%
Missing	107		5954	

CARE AT HOME AFTER THE BIRTH

	Total	TRUST	Total	All
H1. When you were at home after the birth of your baby did you have the name and telephone number of a midwife or health visitor you could contact if you were worried?				
Yes	108	96%	6110	94%
No	4	4%	313	5%
Don't know / Can't remember	1	1%	52	1%
Missing	2		53	
H2. Since your baby's birth have you been visited at home by a midwife?				
Yes	114	100%	6396	99%
No I visited the midwife or saw a midwife in a clinic	0	0%	24	0%
No I was not offered a visit	0	0%	17	0%
No I was visiting or staying near my baby in a neonatal unit	0	0%	33	1%
No I moved home	0	0%	2	0%
No I did not want a midwife to visit	0	0%	0	0%
No for another reason	0	0%	12	0%
Missing	1		44	
H3. How many times in total did you see a midwife after you went home?				
0 - 4 times	52	46%	4127	65%
5 - 9 times	55	49%	1934	31%
10 times +	5	4%	268	4%
Missing	3		199	
H4. How old was your baby when you had the last visit or contact with the midwife?				
0 - 5 days	2	2%	205	3%
6 - 9 days	10	9%	755	12%
10 - 15 days	64	60%	3624	60%
16 days +	31	29%	1484	24%
Missing	8		460	
H5. Would you have liked to have seen a midwife:				
More often	13	12%	1421	22%
Less often	4	4%	188	3%
I saw a midwife as much as I wanted	95	85%	4838	75%
Missing	3		81	
H6. In the six weeks after the birth of your baby did you receive help and advice from health professionals about each of the things listed below?				
a. Your baby's crying				
Yes definitely	22	28%	1626	36%
Yes to some extent	25	32%	1460	32%
No	31	40%	1460	32%
Did not need any	36	32%	1871	29%
Missing	1		111	

CARE AT HOME AFTER THE BIRTH

	Total	TRUST	Total	All
b. Your baby's sleeping position				
Yes definitely	48	56%	2785	57%
Yes to some extent	23	27%	1204	25%
No	14	16%	857	18%
Did not need any	29	25%	1566	24%
Missing	1		116	
c. Feeding your baby				
Yes definitely	54	56%	3124	57%
Yes to some extent	33	34%	1789	33%
No	9	9%	586	11%
Did not need any	18	16%	914	14%
Missing	1		115	
d. Your baby's skin care (e.g. nappy rash)				
Yes definitely	33	39%	2193	44%
Yes to some extent	20	24%	1464	29%
No	31	37%	1339	27%
Did not need any	30	26%	1426	22%
Missing	1		105	
e. Your baby's health and progress				
Yes definitely	59	60%	3422	58%
Yes to some extent	31	31%	1947	33%
No	9	9%	487	8%
Did not need any	15	13%	583	9%
Missing	1		89	
H7. Did you have a postnatal check-up of your own health? (Around 4-6 weeks after the birth)				
Yes	100	88%	5681	88%
No	14	12%	797	12%
Missing	1		50	
H8. Were you given information or offered advice from a health professional about contraception?				
Yes	101	89%	5836	90%
No	11	10%	556	9%
Don't know / Can't remember	2	2%	83	1%
Missing	1		53	
H9. Overall, how would you rate the care received during:				
Your pregnancy?				
Excellent	41	36%	2343	36%
Very good	37	32%	2066	32%
Good	23	20%	1287	20%
Fair	11	10%	563	9%
Poor	3	3%	215	3%
Missing	0		54	

CARE AT HOME AFTER THE BIRTH

	Total	TRUST	Total	All
b. Your labour and birth?				
Excellent	69	61%	3299	51%
Very good	29	26%	1612	25%
Good	9	8%	819	13%
Fair	2	2%	396	6%
Poor	4	4%	301	5%
Missing	2		101	
c. Your care after the birth?				
Excellent	33	29%	1930	30%
Very good	37	33%	1827	28%
Good	20	18%	1375	21%
Fair	17	15%	756	12%
Poor	6	5%	546	8%
Missing	2		94	

YOU AND YOUR HOUSEHOLD

	Total	TRUST	Total	All
J1. Have you had a previous pregnancy?				
Yes	65	57%	3742	58%
No	49	43%	2729	42%
Missing	1		57	
J2. How many babies have you given birth to before this pregnancy?				
None	3	5%	329	9%
1-2	60	91%	3066	82%
3 or more	3	5%	365	10%
Missing	49		2768	
J3. Age:				
0 - 15	9	8%	330	5%
16 - 24	18	16%	1046	16%
25 - 34	59	51%	3388	52%
35 - 44	29	25%	1674	26%
45+	0	0%	20	0%
Missing	0		70	
J4. How old were you when you left full-time education?				
16 years or less	25	22%	1823	28%
17 or 18 years	24	21%	1957	30%
19 years or over	63	55%	2598	40%
Still in full-time education	2	2%	82	1%
Missing	1		68	
J5. Which of the following people live with you?				
a. Your baby/children	100	87%	5782	89%
Missing	15		746	
b. Husband or partner	100	87%	5679	87%
Missing	15		849	
c. Other family members	11	10%	565	9%
Missing	104		5963	
d. Other people in your household	0	0%	95	1%
Missing	115		6433	
J6. What language do you speak most often at home?				
English	107	93%	5795	92%
Other European language	5	4%	172	3%
Asian language	3	3%	235	4%
African language	0	0%	68	1%
Other including British Sign Language	0	0%	61	1%
Missing	0		197	

YOU AND YOUR HOUSEHOLD**Total TRUST Total All****J7. To which of these ethnic groups would you say you belong?****WHITE**

British	89	77%	5161	81%
Irish	2	2%	47	1%
Any other White background	9	8%	368	6%

MIXED

White and Black Caribbean	2	2%	32	1%
White and Black African	1	1%	17	0%
White and Asian	0	0%	19	0%
Any other mixed background	1	1%	13	0%

ASIAN OR ASIAN BRITISH

Indian	3	3%	180	3%
Pakistani	3	3%	134	2%
Bangladeshi	0	0%	43	1%
Any other Asian background	1	1%	70	1%

BLACK OR BLACK BRITISH

Caribbean	0	0%	51	1%
African	3	3%	183	3%
Any other Black background	0	0%	5	0%

CHINESE OR OTHER ETHNIC GROUP

Chinese	1	1%	37	1%
Any other ethnic group	0	0%	32	1%
Missing	0		136	

J8. Do you have a long-standing physical or mental health problem or disability?

Yes	3	3%	276	4%
No	112	97%	6177	95%
Don't know / Not sure	0	0%	24	0%
Missing	0		51	

J9. Does this problem or disability affect your day-to-day activities?

Yes definitely	0	0%	57	20%
Yes to some extent	0	0%	133	48%
No	3	100%	90	32%
Missing	112		6248	

YOU AND YOUR HOUSEHOLD

	Total	TRUST	Total	All
J10. Overall, how would you rate your health over the past 4 weeks?				
Excellent	45	39%	1894	29%
Very good	37	32%	2298	36%
Good	24	21%	1537	24%
Fair	5	4%	582	9%
Poor	3	3%	118	2%
Very poor	0	0%	28	0%
Missing	1		71	