

Wolverhampton Maternity Services project report

January 2020

Introduction

Healthwatch Wolverhampton act as the voice of the public in the delivery of health and social care services. We collect feedback from members of the public about their experiences of using health and social care services and use that feedback to work with service providers and commissioners to look for ways to improve services.

One of the ways that we collect feedback is to carry out projects that look at specific services or conditions. On this occasion we have looked at the support that new mothers receive after the birth of their baby both in hospital and in the community.

This project was identified by Healthwatch Wolverhampton based on feedback that had been received from some new mothers about the support that they had received from midwives and health visitors as well as the findings from the Care Quality Commission 2018 Maternity Service survey¹. Although, The Royal Wolverhampton Trust scored 'about the same as other Trusts' across the service feedback, the scores for care after the birth were lower than those for the care received before and during the birth.

What we did

This project made use of a survey that was available online through a weblink. The survey questions were mainly multiple-choice questions with one open text question for respondents to provide additional comments on their experiences and how they felt that postnatal maternity services could be improved. The survey was published on the Healthwatch website, shared on social media, and emailed to contacts within the community to share.

In order to provide more in depth understanding to the feedback in the project, there were also three focus groups undertaken as part of this project. Focus groups were held with a mother's support group held at St. Luke's School, Noah's Ark Stay and Play Group, Breastfeeding Support Group and a mom and toddlers' group at St. Andrews Church.

The focus groups did not complete all of the questions that were planned for the project and therefore, the feedback from the focus groups is shared alongside the responses to the surveys.

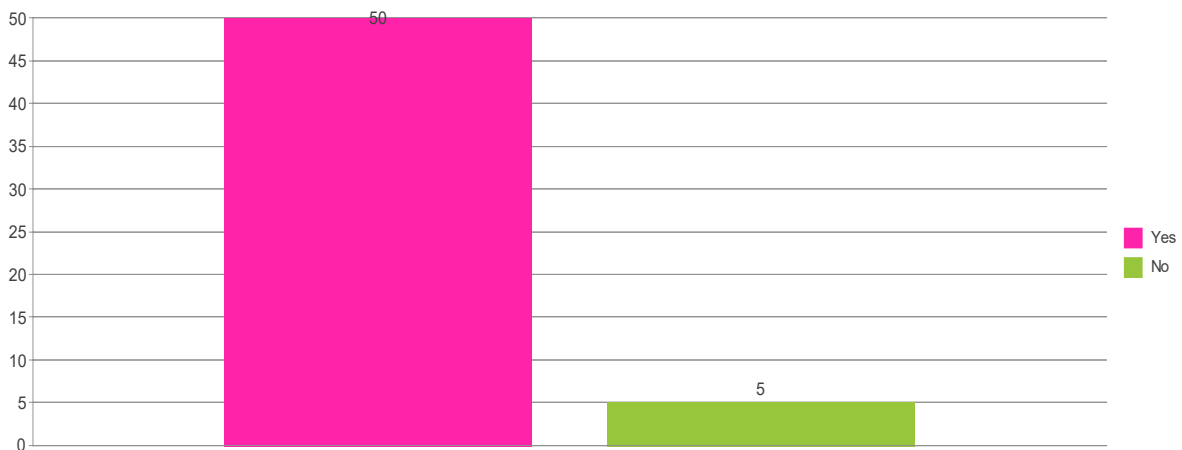
Who took part?

There were **13 participants in the focus groups**. We did not ask for demographic information from the participants in the focus groups.

There were **55 initial respondents to the survey**. However, when respondents were asked if they had had a baby in the previous 12 months, five of the respondents said that they had not. The project was targeted at those who had had a baby in the last 12 months and therefore, those who had not were excluded from taking further part in the survey.

¹ <https://www.cqc.org.uk/publications/surveys/maternity-services-survey-2019>

Have you had a baby in the last twelve months?



Those that were able to proceed with the survey were asked some basic questions about themselves.

50 respondents answered the question about the age band that they were in. **26 respondents** were aged between 25 and 34 years of age; 18 were aged between 35 and 44 years old and six were aged 18-24 years.

47 of the 49 respondents who answered the question said that their sexual orientation was heterosexual. Two respondents answered that they preferred not to say what their sexual orientation was.

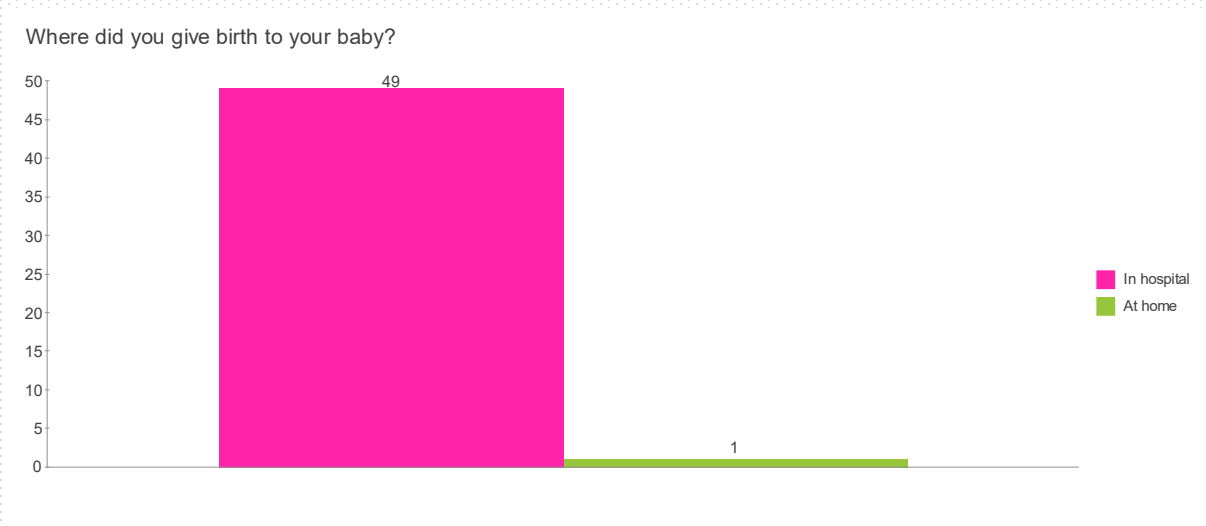
50 respondents answered the question about their marital status with 34 answering that they were married; none were co-habiting; six were single and one was in a civil partnership.

There **50 responses** to the question about their ethnic background and 26 of the respondents identified as White British. Seven of the respondents said that they were from an Asian-Indian background; five of the respondents said that they identified as Black British and four that they identified as Asian British.

Respondents were asked if they considered themselves to have a disability. 50 of the respondents answered the question and three of them said that they did consider themselves to have a disability.

Findings

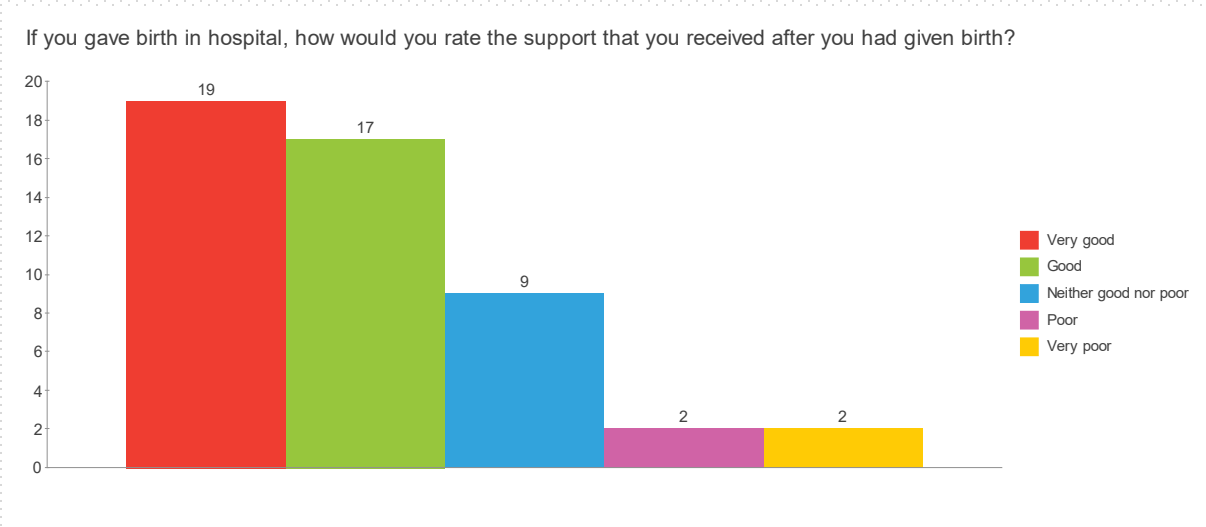
Respondents were asked where they had given birth to their baby and all of the respondents except one said that they had given birth in hospital. Therefore, it has not been possible to carry out a comparison between the experiences of those that gave birth in hospital and those who gave birth at home.



Support after the birth

Those that gave birth in hospital were asked how they would rate the support that they received there after they had given birth. **36 of the 49 respondents** to the question rated the support they had received as either very good or good. Four respondents rated it either as poor or very poor.

The respondent who had given birth at home rated the support that they had received after the birth as very good.

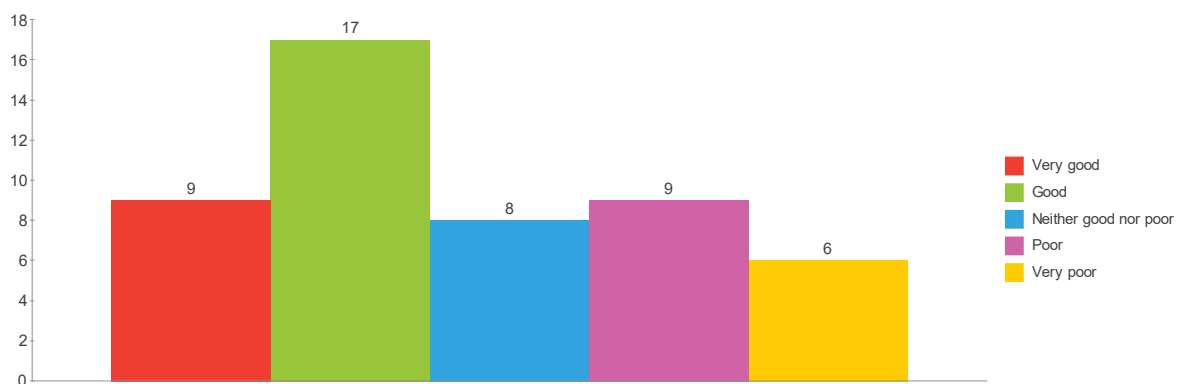


Communication by health professionals in the hospital with their partner and family members was rated as very good or good by **26 of the 49 respondents** who answered the question. **15 of the respondents** said that the communication by health professionals with

their partner and family members had been poor or very poor. The respondent who had given birth at home rated the communication by health professionals with their partner and family members as very good.

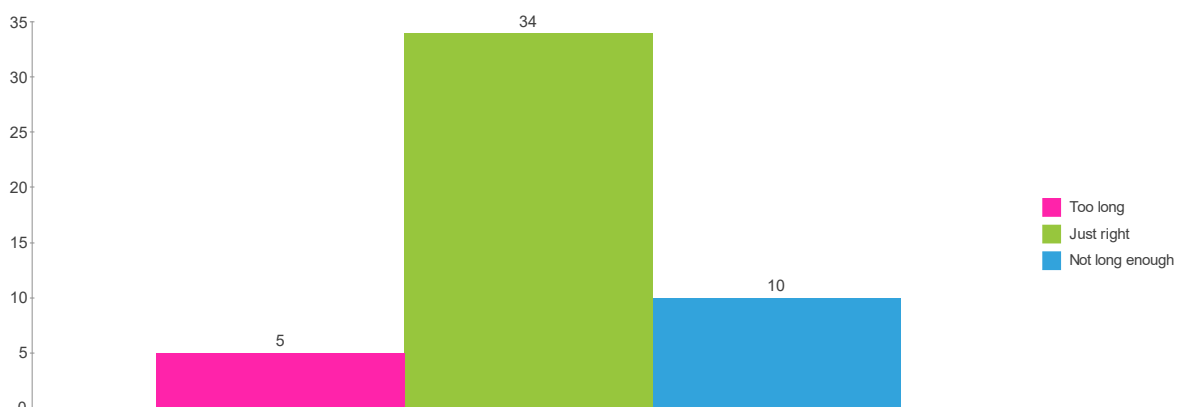
There were some comments made by the participants in the focus groups and respondents to the survey about the support that was offered to their partners following the birth of their baby. One respondent to the survey said that there was *'non-existent communication with my partner, he was told to leave after the birth'*. Another suggested an improvement to the service would be *'involving partners more'* as their *'partner felt that he didn't know how to support me or my child.'* This was echoed by some of the participants in the focus groups with one saying there was *'no support for the Dads, they are not included'* and another saying that *'partners need to know how to support.'*

How would you rate the communication by health professionals with your partner and family members after the birth of your baby?



When respondents were asked how they felt about the amount of time they were in hospital before they were discharged **34 of the 49 respondents** said that they felt it was just right. 10 of the respondents said that it was not long enough and five said that it was too long.

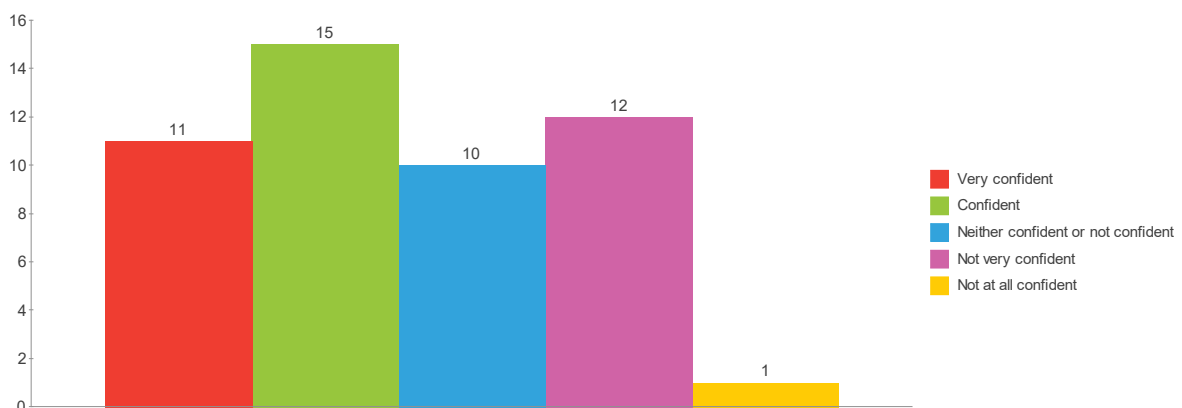
How do you feel about the amount of time your were in hospital before you were discharged?



26 of the respondents to the question said that they had felt either very confident or confident about returning home with their baby. 13 of the respondents said that they were not very confident or not at all confident about returning home with their baby. There were

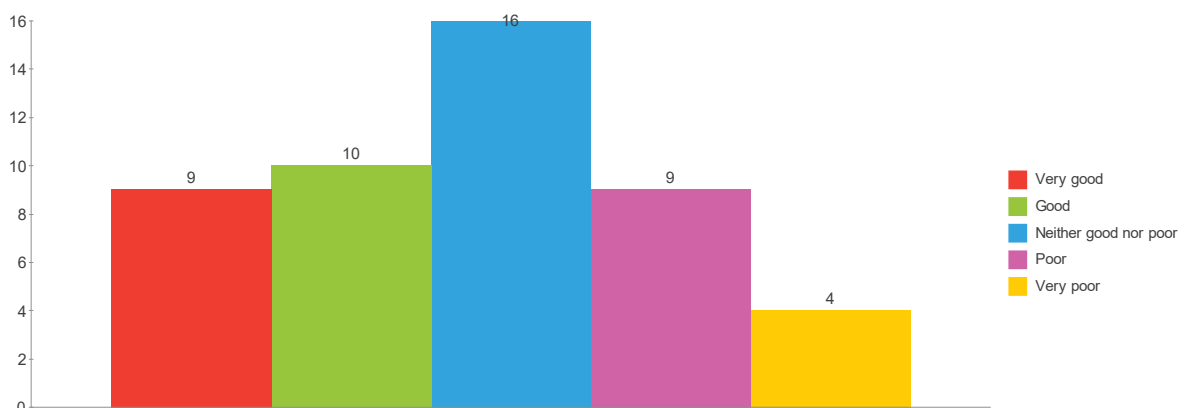
some comments made by the participants in the focus groups and respondents to the survey about how confident they felt when they returned home with their baby. For some it was felt that there was a lack of information, support and guidance around day to day care of their babies. One focus group participant commented that they had *'had our first child and expected more support when we got home'* whilst another said *'I wasn't taught how to bath my baby. They put classes on, but they didn't happen whilst I was there. I didn't know about sleep safety or cot death.'* One participant commented that they *'had a c section and was out a night later. I didn't know how to bath the baby. We were just sent home. We needed more involvement.'* Respondents to the survey also spoke about wanting more information on looking after their baby with a particular focus on how to bath their baby.

How confident did you feel about returning home with your baby?



Feeding support

How would you rate the support you received with feeding your baby?



The respondents who gave birth in hospital were asked how they rated the support that they received with feeding their baby when they were still in hospital. **48 respondents** answered the question; of those 19 said that the support that they had received with feeding had been either very good or good. **13 of the respondents** to the question said that the support with

feeding had been poor or very poor. The respondent who had given birth at home rated the support they had received with feeding their baby as good.

There were a number of comments from those taking part in the focus groups about the support that they had received around feeding their baby. There were a mixture of experiences in relation to feeding support with some saying that they had been supported on the ward and others saying that they had not had support until they had returned home or had not had any support at all.

One respondent from the survey told how they had not received the support they felt that they needed when they were on the ward. The respondent said they had *'asked multiple times to see a breastfeeding support worker from the infant feeding team and this didn't happen. I also said repeatedly that I wasn't confident or sure [that] my baby was feeding properly, this wasn't reflected in my notes where it said that everything was going well. We were consequently readmitted to [the] transitional care unit as our baby lost too much weight. Staff on this unit were much more helpful and supportive in relation to getting feeding right.'*

Another respondent said that *'nobody offered me support to breastfeed correctly. This led to weeks of difficulties and pain. I didn't know who I could turn to for support.'*

One of the focus group participants said that they *'didn't have breastfeeding support until after discharge when I was given a video to watch.'*

However, others were more positive about the support that they had received around feeding their baby with one saying that they had been *'reassured that there was nothing to worry about and had breastfeeding support'* and another said that they had received *'good support and breastfeeding support.'*

Having access to support groups was reported as a positive by one participant in the focus groups with them saying they were *'going to breastfeeding and nourishment group and there is no judgement.'*

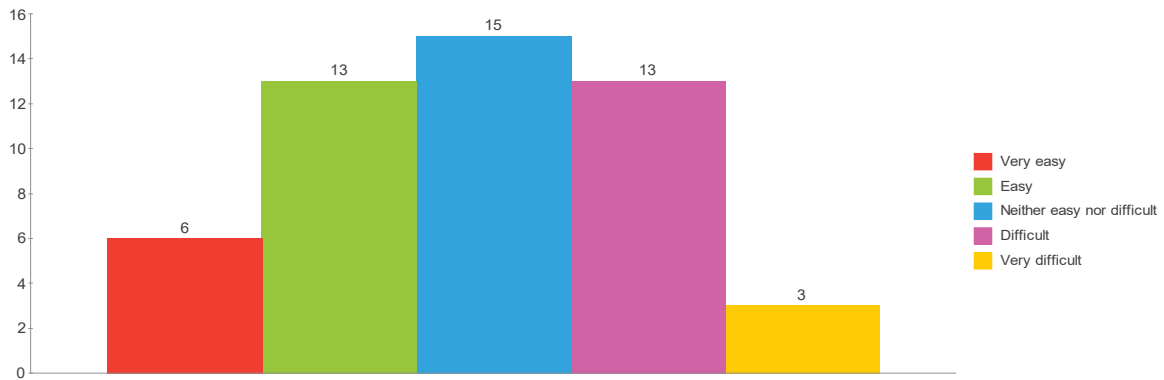
Most of the comments were around breastfeeding and being supported to breastfeed, however, one participant in the focus groups commented on how they *felt 'pressured to breastfeed even though I didn't want to. I felt that I didn't have a choice and midwives and health visitors were telling me I had to breastfeed.'*

Support at home after the birth

These questions were asked of all respondents whether they had given birth in hospital or at home.

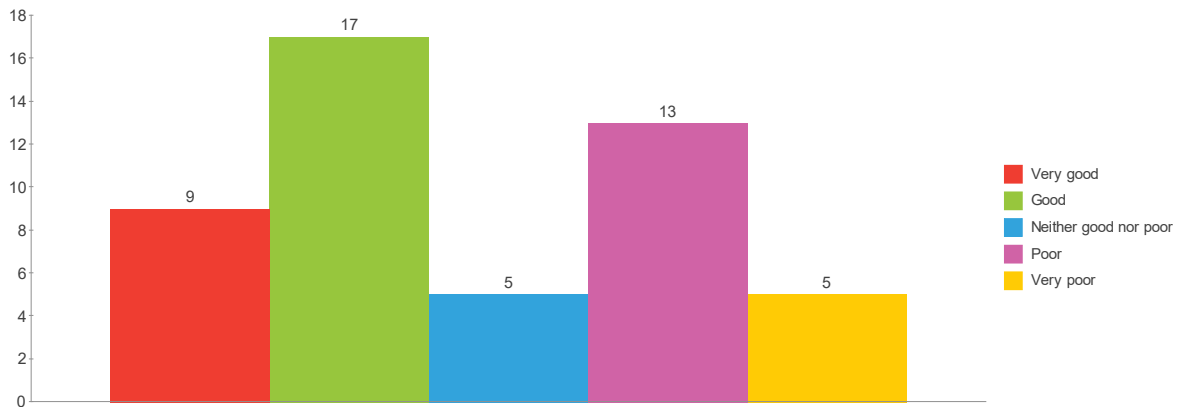
Respondents were asked how easy they found it to contact their midwife after they had given birth to their baby and were at home. **19 of the 50 respondents** said that they found it either very easy or easy to contact their midwife in the community. 16 respondents said that they had found it difficult or very difficult to contact their midwife.

How easy was it to contact your midwife after the birth of your baby?



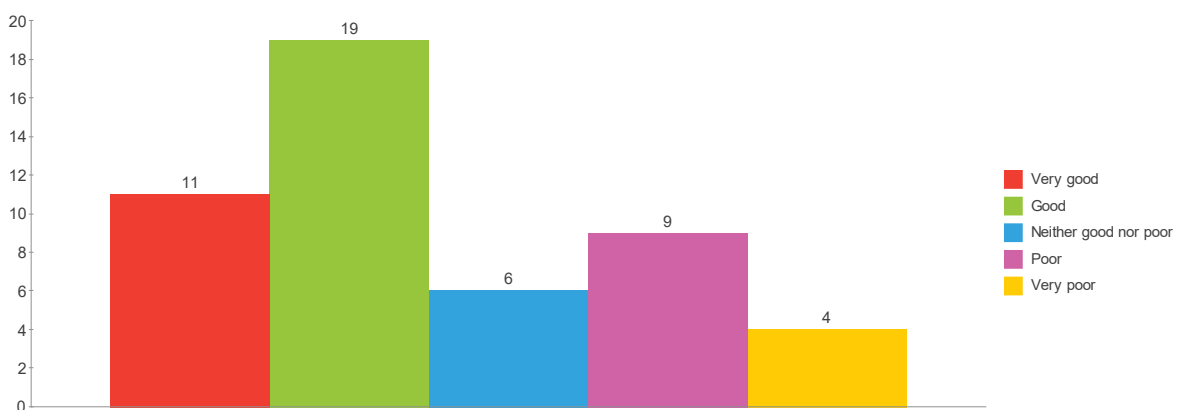
26 respondents rated the ongoing support that they received from their midwife in the community as very good or good. **18 respondents** rated it as poor or very poor.

How would you rate the ongoing support received from your midwife in the community after the birth of your baby?

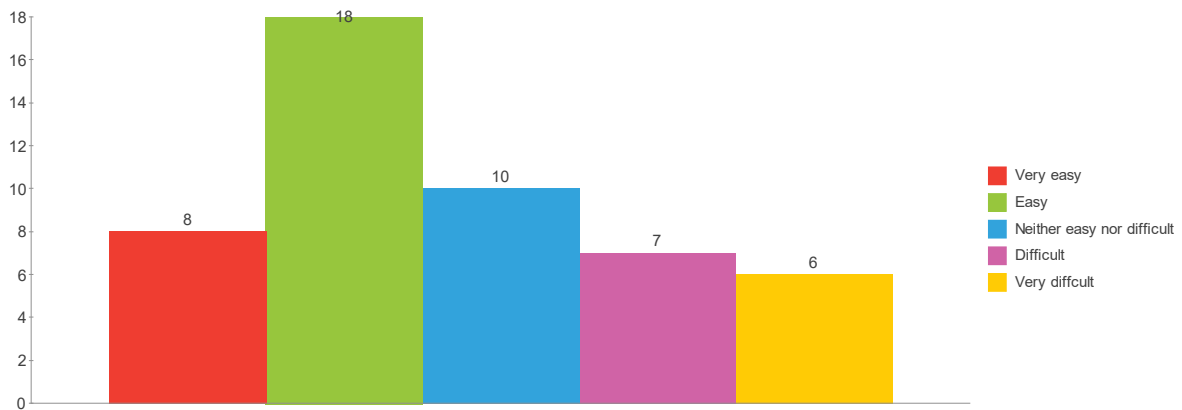


When asked how they rated the support from their health visitor 30 of the 49 respondents who answered the question said that they rated the support as very good or good. 13 rated the support from their health visitor as poor or very poor.

How would you rate the support you have received from your health visitor?



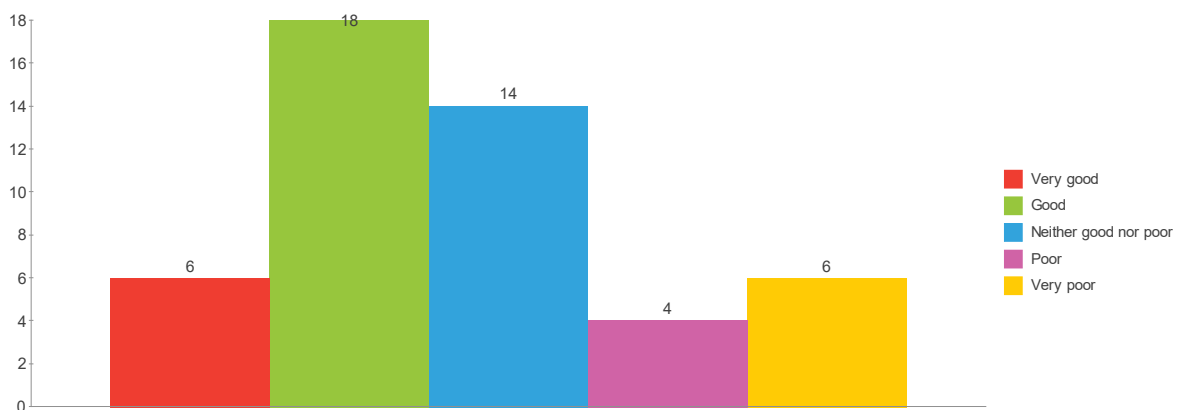
How easy it to contact your health visitor?



Respondents were asked how easy it was to contact their health visitor. 26 of the 49 respondents who answered the question said that it was very easy or easy to contact their health visitor. 13 said that it was either difficult or very difficult.

Finally, respondents were asked how they rated the handover between their midwife and their health visitor. 24 respondents said that they rated the handover between their midwife and their health visitor as either very good or good. 10 of the respondents rated the handover as poor or very poor.

How would you rate the handover from your midwife to your health visitor?



There was mixed feedback from respondents to the survey and participants in the focus groups about the support they received in the community from midwives and health visitors. Survey respondents had been asked what improvements they thought could be made to services. One commented that they would have liked *'a lot more communication and visits from the health visitor'* whilst another said that they *'don't know who my health visitor is'*. The issues with communication were also raised in relation to midwives with one respondent saying that their *'midwife never answers the phone'* and that they *'didn't see her for a while.'*

Focus group participants also spoke about midwives and health visitors. One said that they were *'seen quickly when I was home. The midwife took their time to explain community*

support groups’ whilst another said that their *‘health visitors were brilliant.’* However, some focus group participants also echoed the feedback from survey respondents with one saying that their *‘health visitor only came out twice’* whilst another said that they *‘had two health visitor visits and no midwife visits’*.

Conclusion

The feedback on postnatal support in the hospital and at home in the community was generally positive. However, there were some areas identified where there could be improvements made.

When considering the support that was received in the hospital respondents to the survey were generally positive about the support and it was also generally felt that the hospital communicated well with the partners and families of women who had given birth. However, additional comments made by survey respondents and those taking part in the focus groups suggest that there is room for improvement in the support received around feeding in general as well as support for new fathers.

The amount of time spent in hospital before returning home was seen as being about right for most of the respondents to the survey and they were generally confident about returning home. But there was some feedback that more information and advice on baby care in general would have been welcome for some, particularly those who were first time parents.

On their return home, again, the feedback about midwives and health visitors was generally positive. However, there was some feedback about visits from midwives or health visitors being limited. It may be the case that there is a need for more information for new parents on what the service offer is once they are back in the community with their new baby.

Recommendations

Based on the feedback that was received from the participants in this project the following recommendations are made:

Support for and communication with partners

There were comments made about new fathers lacking the support and advice that they need in order to support their partners and new babies. Therefore, it is recommended that consideration is given to how new fathers can be better supported in order to provide support to their families.

Information on baby care

Whilst participants generally felt confident in returning home with their babies, there were some comments about a lack of information and advice on how they should look after their babies. This was particularly in relation to bathing their babies but also in relation to feeding

too. It was commented that for first time parents more support would be particularly welcomed.

It is recommended that consideration is given as to how first-time parents can be provided with more or better information and guidance on basic care for their babies in order to increase their confidence on returning home.

Feeding support

There was mixed feedback about the support that they had received around feeding their babies. For some, the support that they received in hospital was not as effective as that they later received in the community. There was also a limited amount of feedback around not feeling listened to about their preferences around feeding.

Therefore, it is recommended that consideration is given how feeding advice can be personalised according to the preferences expressed by the mother. Consideration should also be given to how feeding support and advice in hospital can be most effective.

Home visits

Whilst most of the feedback about midwives in the community and health visitors was positive, there were some comments about the amount of contact with them being limited. It is recognised that multiple home visits may not provide value, but there appears to be some expectation that there would be more visits.

Therefore, it is recommended that consideration is given on how to provide information in advance around what contact new parents might expect from their community midwife and health visitor following the birth of their baby, along with explanation of the roles of each and how they can be contacted.

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