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Maternity Care Survey 2018

National Results



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1. Executive Summary

Just over 2,000 women who gave birth in Scotland in February or March 2018 responded to the 2018 Maternity Care Survey. The key results from the survey are:

Antenatal Care

- Nine in ten women **rated their antenatal care positively**, this is consistent with results from previous surveys.
- Just over three-quarters of women were **not** given a **choice about where** their antenatal check-ups would take place. Over three-fifths of women **saw the same midwife** for all or most of their antenatal check-ups.
- Almost all women (97 per cent) were told who to contact if they needed further **advice or support** during their pregnancy, and four in five women who contacted a midwife / midwifery team were **given the help they needed**.
- Women were positive about their experience of **person-centred behaviours**. They were most positive about understanding information and explanations they were given (96 per cent).

Labour and Birth

- Just over nine in ten women **rated the care they received during their labour and birth** positively. This is consistent with results from 2015 but a small decrease from 2013.
- Women were positive about their experiences of **person-centred behaviours** during labour and birth. They were most positive about being given the opportunity to involve the people that mattered to them (95 per cent).
- A quarter of women were **cared for by the same midwife / midwife team** as during their antenatal care, however 56 per cent of women reported that they did not mind that they were cared for by a different midwife / midwife team.
- Just over four in five women felt that any **concerns they raised** were taken seriously and three in four women always **received assistance within a reasonable time** when they called / asked for it.

Postnatal Care in Hospital / Midwife-led Unit

- Just over four in five women **rated their postnatal hospital care** positively. This is a slight decrease from 2015 but is in line with 2013 results.
- Almost all women (99 per cent) gave birth in a hospital or midwife-led unit and three in five of them were able to have their **partner or someone close stay with them** as much as they wanted.
- Women were generally positive about their experience of **person-centred behaviours**. They were most positive about being involved in their baby's care as much as possible (95 per cent) and least positive about staff spending enough time with them (74 per cent).

Neonatal Care

- The vast majority of women whose baby had been admitted to a neonatal unit (95 per cent) **rated the care their baby had received** positively.
- Most women felt they were able to **stay with their baby as much as they wanted** and that they always **received assistance within a reasonable time** in the neonatal unit (85 and 86 per cent respectively).
- Two in five women were offered **emotional support or counselling** after their baby was admitted to a neonatal unit.
- Women were positive about their experience of **person-centred behaviours**. They were most positive about being treated with kindness and understanding (94 per cent).

Feeding

- In the first few days, just over half of women fed their baby breast milk only and around one-fifth used breast and formula milk. Almost one in five women always experienced **difficulties feeding** their baby in the first few days.
- Around four in five women felt their **decisions** about how to feed their baby were always **respected by staff**.
- Three in five women reported they always received **active support and encouragement** from health professionals about feeding their baby.
- Just over half of women felt they always got **consistent advice** from health professionals about feeding their baby.

Postnatal Care at Home and in the Community

- Nine in ten women **rated the postnatal care they received at home and in the community** positively which is in line with results from previous surveys.
- Three in ten women were given a **choice about where** their postnatal care took place.
- Women were very positive about their experience of **person-centred behaviours**. They were most positive about understanding information and explanations they were given (97 per cent) and being treated with kindness and understanding (96 per cent).
- Just under half of women saw the **same midwife** for both their antenatal and postnatal care, and just over a quarter did not but would have liked this.
- Two in three women felt they definitely had enough **advice and support** to care for their baby after the birth. Just over three in four women were always **given the help they needed** when they contacted a midwife or midwifery team, a decrease from previous surveys.

2. Introduction and Background

The Maternity Care Survey is a postal survey which was sent to a random sample of women who had a baby in February or March 2018. This is the third iteration of the survey, following on from the first run in 2013 and the second run in 2015. The survey asked about women's experiences of maternity services, from antenatal care through to postnatal care at home.

The focus of this report is on the national results of the survey. Comparisons have been made with the previous iterations of this survey where this is possible.

Results at NHS Board and Hospital level are available via an online dashboard and excel files at www.gov.scot/MaternitySurvey. Infographics looking at some aspects of care across the maternity journey are also available at this link.

Scottish Care Experience Survey Programme

The Maternity Care Survey is one of a suite of national surveys which are part of the Scottish Care Experience Survey Programme. The surveys aim to provide local and national information on the quality of health and care services from the perspective of those using them. They allow local health and care providers to compare with other areas of Scotland and to track progress in improving the experiences of people using their services.

Information about the other national care experience surveys is available at www.gov.scot/Topics/Statistics/Browse/Health/careexperience.

The survey programme supports the three quality ambitions of the *2020 Vision*¹ – Safe, Effective, Person-centred – by providing a basis for the measurement of quality as experienced by service users across Scotland. In particular the surveys support the person-centred quality ambition which is focused on ensuring that care is responsive to people's individual preferences, needs and values. More information about the context for this survey is provided in Chapter 3 of this report.

Aims of the Survey

The survey's specific objectives were:

For local improvement

- provide hospitals with information about women's experiences of their service, relative to other hospitals in Scotland and to previous results;
- provide NHS Boards with information about women's experiences in their respective areas and about variation within and between local areas.

¹ www.gov.scot/Topics/Health/Policy/2020-Vision

National results

- inform progress towards implementation of recommendations from *The Best Start: Maternity and Neonatal Care Plan*²;
- identify variation within and between local areas, including if and how the level of positive and negative experiences have changed over time;
- highlight areas of best practice and areas for improvement.

Survey Methods

The survey was designed to provide results for individual Hospitals, as well as providing information for use by NHS Boards.

Women eligible to be sampled for the survey were those who gave birth in Scotland in February or March 2018 and were aged 17 or over at that date. In total, 5,064 surveys were sent to eligible respondents and 2,049 were returned completed, giving an overall response rate of 40 per cent.

Throughout this report, with the exception of the data in Chapter 4, analysis is presented as weighted average percentages. Weighting the results in this way provides results which are more representative of the sample population. A review of the weighting methodology was undertaken in advance of the 2018 survey, leading to some changes in the weights applied.

Results from previous surveys have been backdated where appropriate to ensure comparability over time. All changes over time that are discussed in the report are statistically significant at the five per cent level.

More information about the survey design, response rates and methodology can be found in the Technical Report available at: www.gov.scot/ISBN/9781787816381.

² www.gov.scot/publications/best-start-five-year-forward-plan-maternity-neonatal-care-scotland/

3. Context

There have been wide reaching programmes of reform to health services in recent years, which are consistent with the wider principles of Public Service Reform³. This chapter provides an overview of the key developments.

This survey supports and informs all of these developments, by describing their impact from a user perspective. It is worth noting, however, that this survey relates to care experiences in 2018, during which time period some of these programmes were at the early stages of implementation.

The 2020 Vision

In 2011, the Scottish Government set out a *2020 Vision*⁴ for achieving sustainable quality in the delivery of healthcare services across Scotland, in the face of the significant challenges of Scotland's public health record, our changing population and the economic environment. All healthcare policy in Scotland drives the delivery of this Vision, which states:

By 2020 everyone is able to live longer, healthier lives at home or in a homely setting, and that we will have a healthcare system where:

- ❖ We have integrated health and social care;
- ❖ There is a focus on prevention, forward planning and supported self-management;
- ❖ Where hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm;
- ❖ Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions;
- ❖ There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of re-admission.

The Vision will be delivered according to three **Quality Ambitions**⁵:

- **Safe:** There will be no avoidable injury or harm to people from healthcare, and an appropriate, clean and safe environment will be provided for the delivery of healthcare services at all times.

³ The approach to reform is guided by a commitment that public services will exhibit three key characteristics: that people can expect their services to be **person-centred**, **assets based** and **values driven**. For more information see

www.gov.scot/Topics/Government/PublicServiceReform/Christie

⁴ www.gov.scot/Topics/Health/Policy/2020-Vision

⁵ www.gov.scot/Resource/Doc/311667/0098354.pdf

- **Person-centred:** Mutually beneficial partnerships between patients, their families and those delivering healthcare services which respect individual needs and values and which demonstrates compassion, continuity, clear communication and shared decision-making.
- **Effective:** The most appropriate treatments, interventions, support and services will be provided at the right time to everyone who will benefit, and wasteful or harmful variation will be eradicated.

A *National Clinical Strategy for Scotland*⁶, published by the Scottish Government in February 2016, reinforced the importance of these ambitions and called for a new clinical paradigm that incorporated person-centred approaches to care.

Scotland's **Chief Medical Officer** has also articulated her vision for delivering care in this context through her Annual Reports '*Realistic Medicine*'⁷, '*Realising Realistic Medicine*'⁸ and '*Practising Realistic Medicine*'⁹. She said:

“ You should expect the doctor (or other health professional) to explore and understand what matters to you personally and what your goals are, to explain to you the possible treatments or interventions available with a realistic explanation of their potential benefits and risks for you as an individual, and to discuss the option and implications of doing nothing. You should expect to be given enough information and time to make up your mind. You should consider carefully the value to you of anything that is being proposed whether it be a treatment, consultation or diagnostic investigation and be prepared to offer challenge if you feel it appropriate. ”

Recent Changes to Maternity and Neonatal Care Policy

A strategic review of Maternity and Neonatal services in Scotland was carried out in early 2015, to place the current and future needs of women and families and person-centred, relationship-based care at the heart of redesigned services. The Review was carried out in consultation with service users, the workforce and NHS Boards and considered current evidence and best practice when making its recommendations.

Following the review, the Scottish Government published its findings and recommendations in **The Best Start: A five year forward plan for Maternity and Neonatal Care in Scotland**¹⁰ in January 2017. NHS Boards across Scotland are now making significant progress in implementing recommendations set out in this report. Key changes include the aspiration that all pregnant women receive continuity of carer from a primary midwife, supported by a small team of midwives across their maternity journey and a new model for neonatal care that is family-centred, including the fundamental principle of keeping mother and baby together.

⁶ www.gov.scot/publications/national-clinical-strategy-scotland/

⁷ www.gov.scot/Resource/0049/00492520.pdf

⁸ www.gov.scot/Publications/2017/02/3336

⁹ www.gov.scot/publications/practising-realistic-medicine/

¹⁰ www.gov.scot/publications/best-start-five-year-forward-plan-maternity-neonatal-care-scotland/

While some aspects of care quality will be regularly monitored through a range of methods, many important aspects of quality can only be assessed by asking those who have recently used the services to describe their experiences. The results of the Maternity Care Survey will therefore be a valuable source of evidence, helping to monitor the implementation and impact of a number of the recommendations set out in the Best Start report.

CQC Maternity Services Survey in England

The Care Quality Commission (CQC) manages the Maternity Services Survey¹¹ which looks at women's experiences of maternity care services in England. Whilst there are differences in how maternity services are managed in Scotland and England, the broader policy aspirations around quality of care remain the same.

The most recent survey in England was also run in 2018, with results published in January 2019. Both surveys use similar methodologies, however the review of the Scottish questionnaire undertaken ahead of the 2018 survey means that there are fewer comparable questions between the surveys than in previous years.

The key findings for the 2018 Maternity Services Survey in England are:

- Overall, women reported positive experiences for many areas of their care, particularly in relation to a number of person-centred behaviours such as being listened to; understanding information and explanations; being treated with respect and dignity; and involving people that matter.
- Some questions had shown a decline compared to the previous survey in 2017, in particular questions around seeing a midwife at home after giving birth and being given enough information about their physical recovery and emotional changes they might experience.

Comparing the survey findings at a high level, women in both England and Scotland have reported overall positive experiences of maternity care services across different stages of care, particularly in relation to person-centred behaviours. However, further analysis would be required to compare the results in detail, including consideration of maternity-related demographic differences between the surveys, such as method of delivery and number of previous babies given birth to.

¹¹ www.cqc.org.uk/publications/surveys/maternity-services-survey-2018

4. Demographic & Health Information from Survey Respondents

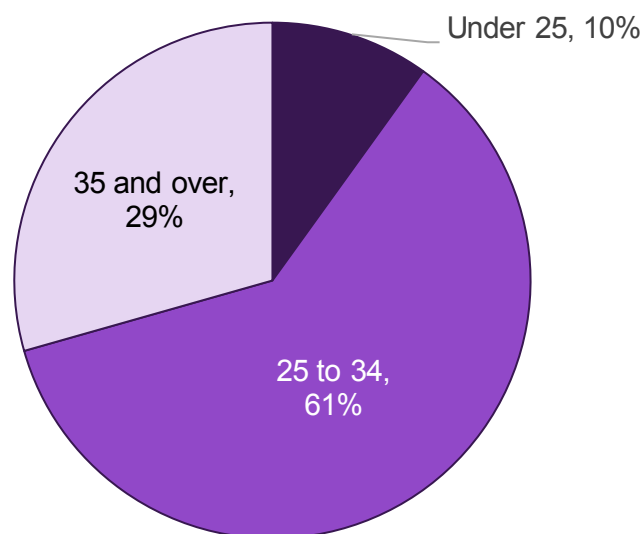
As the survey is a voluntary sample survey, it is important to consider the results in the context of the demographics of respondents. This chapter provides a summary of demographic information for survey respondents, either self-reported through the survey or linked to from other data sources¹². Analysis in this chapter is based on unweighted data unless otherwise noted.

Further analysis examining the relationship between the survey results and different groups of respondents will be carried out and reported **separately**.

Age

The majority of respondents were between 25 and 34 (61 per cent). Only ten per cent of respondents were under 25, with the remainder being 35 and over (Figure 4.1). This is consistent with the age breakdowns from the 2015 survey, however provisional national data on maternal age in 2018¹³ suggests that mothers aged under 25 are under-represented in the survey as they make up almost one in five maternities in a year (18 per cent). Conversely, mothers aged 35 and over are over-represented by a similar factor.

Figure 4.1: Age group



Ethnicity

The vast majority of women responding to the survey described their ethnic group as white (95 per cent). Three per cent of respondents described their ethnic group as Asian, Asian Scottish or Asian British and the remaining respondents were spread across the other ethnic groups.

¹² Survey respondents were advised that their responses would be linked to additional demographic information via the survey's Privacy Notice, available at www.gov.scot/MaternitySurveyPrivacyNotice

¹³ www.isdscotland.org/Health-Topics/Maternity-and-Births/Births/

Maternity Information

Almost all women responding to the survey had given birth to a single baby (99 per cent), with one per cent of respondents giving birth to twins and no respondents having triplets, quads or more.

Over half of respondents were between 37 and 40 weeks when their baby was born (55 per cent). Only six per cent of respondents were less than 37 weeks and the remaining 39 per cent were more than 40 weeks when they gave birth (Figure 4.2).

For half of the women responding (51 per cent), this experience was the first time they had given birth. Just under half of respondents (46 per cent) had given birth to one or two babies before and three per cent of women had previously given birth to three or more babies (Figure 4.3).

Figure 4.2: No. of weeks pregnant when baby was born

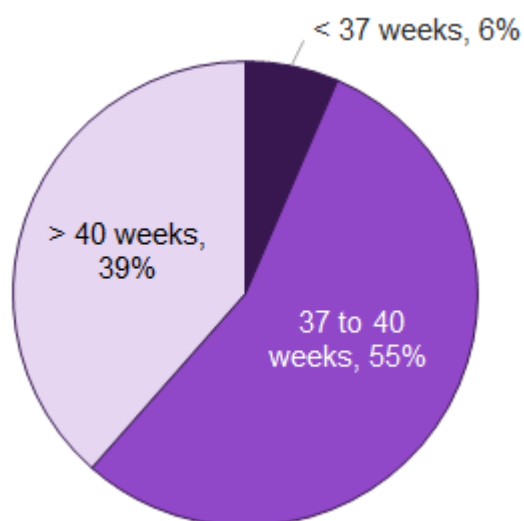
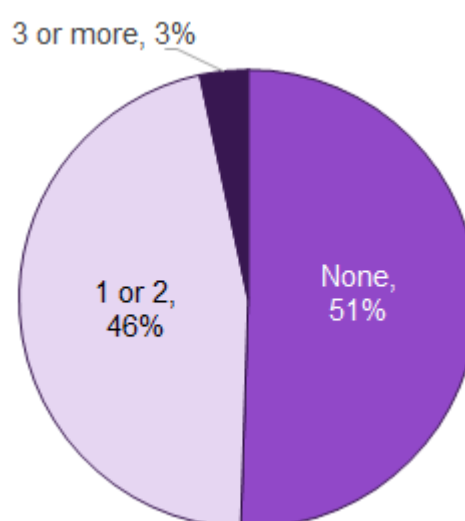


Figure 4.3: No. of babies given birth to previously



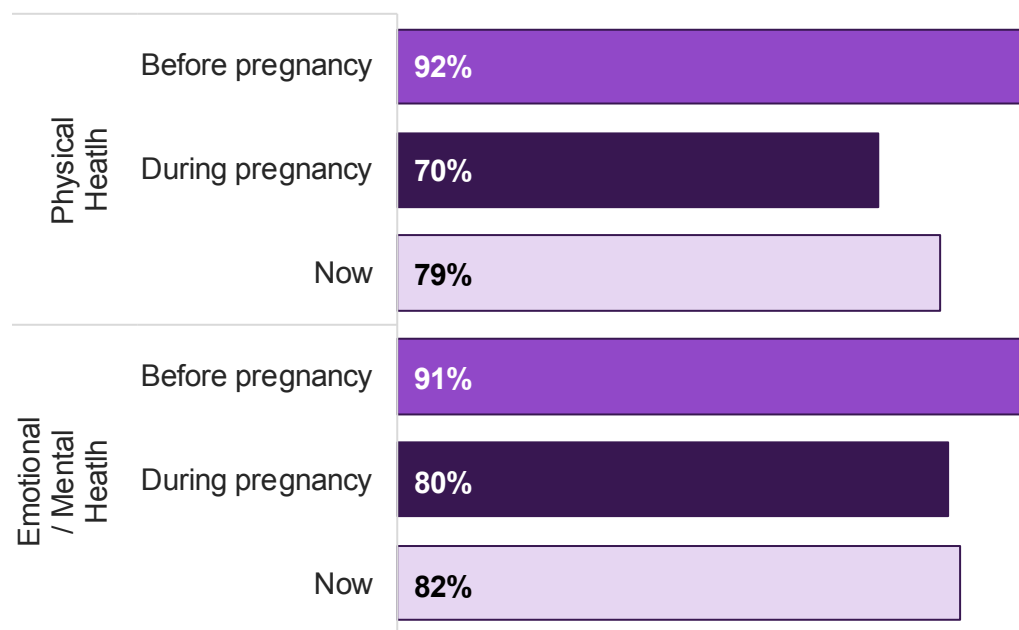
Health Information

Respondents were asked to rate both their physical and emotional / mental health before pregnancy, during pregnancy and now (2 to 7 months since giving birth).

As shown in Figure 4.4, 92 per cent of women rated their physical health as 'Excellent' or 'Good' **before** pregnancy. This decreased to 70 per cent when asked about their physical health **during** pregnancy, with ten per cent of women reporting their physical health as 'Poor' or 'Very poor'. Thinking about their physical health **now**, 79 per cent of women responded 'Excellent' or 'Good' and only three per cent selected 'Poor' or 'Very poor'.

A similar pattern was seen in responses about emotional / mental health, however the decrease during pregnancy was smaller, only dropping to 80 per cent from 91 per cent before pregnancy. There was also a smaller increase in those responding 'Poor' or 'Very poor', to five per cent during pregnancy. Thinking about their emotional / mental health **now**, 82 per cent of women responded 'Excellent' or 'Good' and only three per cent selected 'Poor' or 'Very poor'.

Figure 4.4: Proportion of women rating their health positively

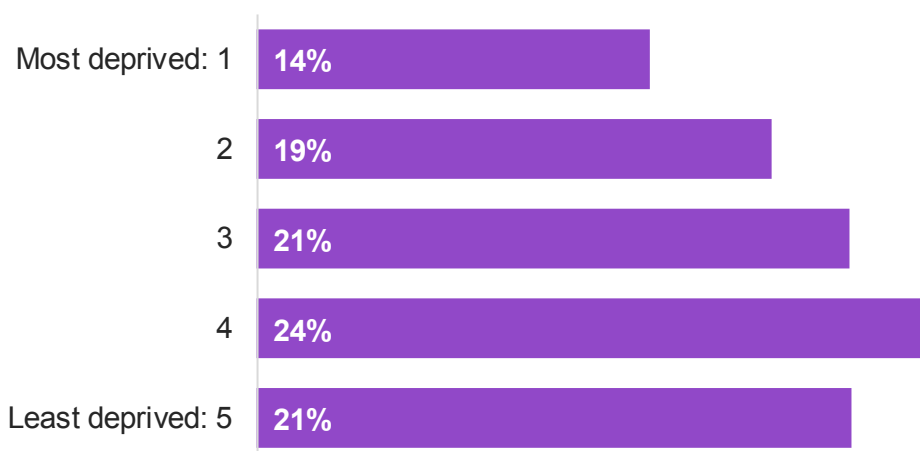


Just under one-fifth of respondents said that they had one or more long-term health conditions (17 per cent). The most commonly reported conditions were a mental health condition (reported by seven per cent of women) and chronic pain lasting at least three months (reported by four per cent of respondents).

Deprivation and Rurality

Analysis of the Scottish Index of Multiple Deprivation (SIMD)¹⁴ and Urban/Rural Indicator¹⁵ was based on the datazone of respondents home address. Respondents were fairly evenly distributed across SIMD quintiles, apart from the most deprived quintile which had a lower proportion of respondents (Figure 4.5).

Figure 4.5: SIMD quintile

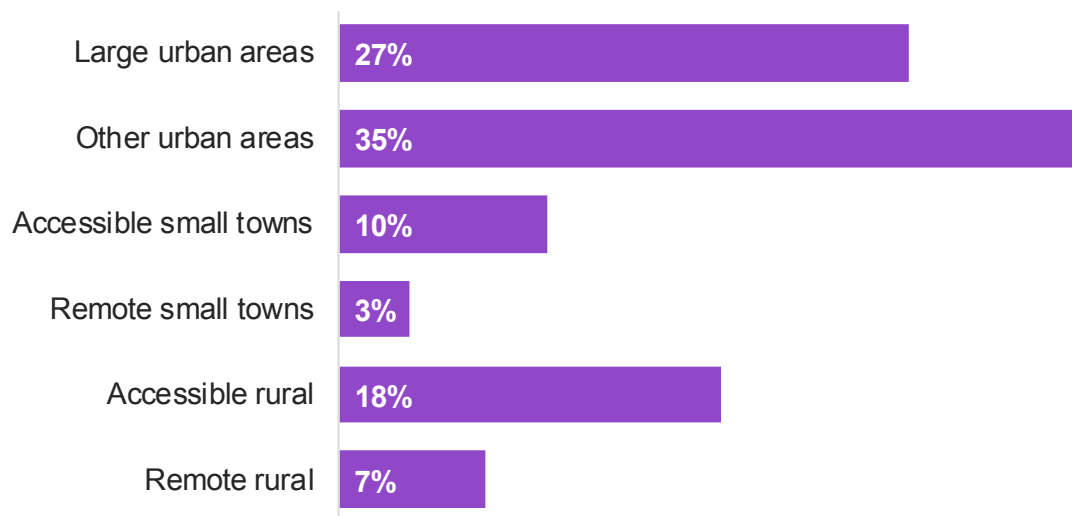


¹⁴ www.gov.scot/Topics/Statistics/SIMD

¹⁵ www.gov.scot/Topics/Statistics/About/Methodology/UrbanRuralClassification

The distribution of respondents by rurality (Figure 4.6) is broadly in line with that for the population as a whole.

Figure 4.6: Urban-rural category



5. Antenatal Care

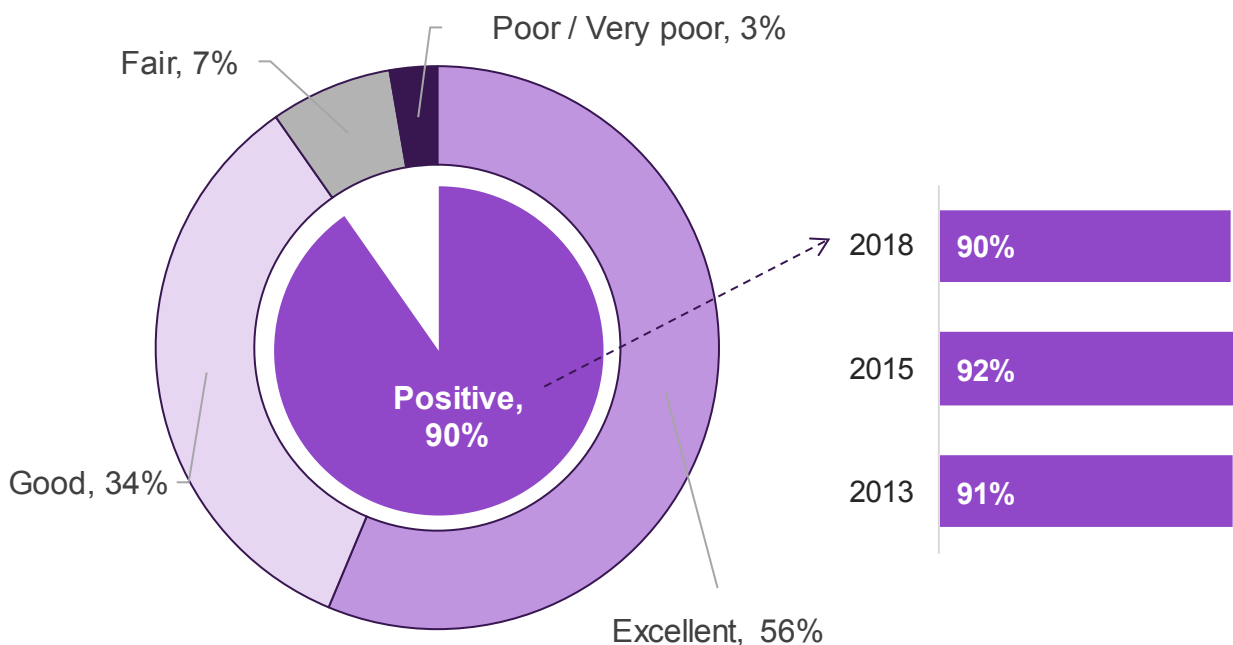
Summary

- Nine in ten women **rated their antenatal care positively**, this is consistent with results from previous surveys.
- Just over three-quarters of women were **not** given a **choice about where** their antenatal check-ups would take place. Over three-fifths of women **saw the same midwife** for all or most of their antenatal check-ups.
- Almost all women (97 per cent) were told who to contact if they needed further **advice or support** during their pregnancy, and four in five women who contacted a midwife / midwifery team were **given the help they needed**.
- Women were positive about their experience of **person-centred behaviours**. They were most positive about understanding information and explanations they were given (96 per cent).

Overall Experience

Nine in ten women (90 per cent) rated their antenatal care, that is care received while they were pregnant, as either 'Excellent' or 'Good' (Figure 5.1). This is consistent with results from previous surveys.

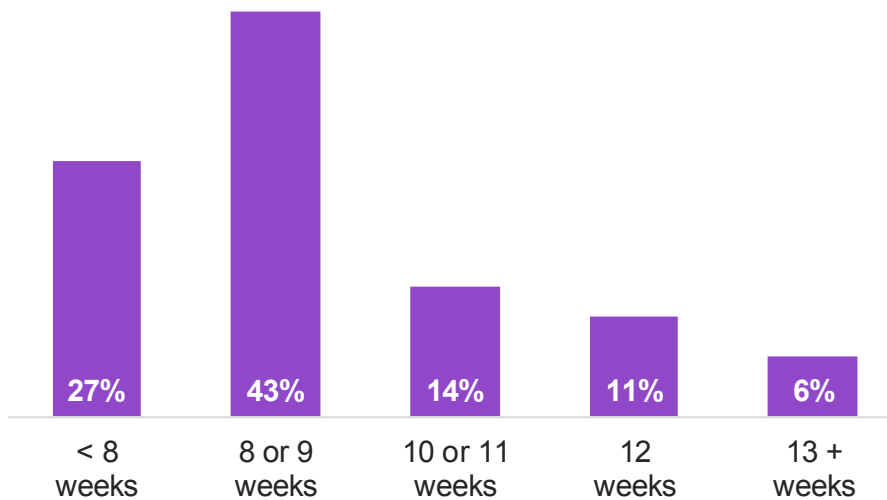
Figure 5.1: Overall experience of antenatal care in 2018 and over time



Antenatal Check-ups

The survey asked women, roughly how many weeks pregnant they were when they had their booking appointment. That is, the appointment where they were given their notes and / or were seen by a midwife. As shown in Figure 5.2, over four-fifths of women (83 per cent) had their booking appointment before they were twelve weeks pregnant.

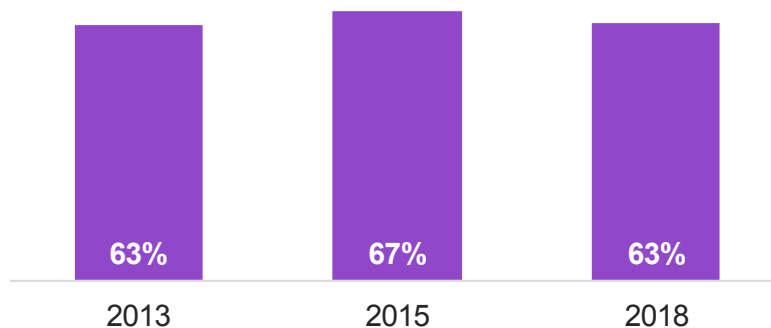
Figure 5.2: Number of weeks pregnant at booking appointment



Thinking about their antenatal check-ups in general:

- Just over three-quarters of women (77 per cent) were **not** given a **choice about where** their antenatal check-ups would take place.
- Over three-fifths of women (63 per cent) reported that they **saw the same midwife** for all or most of their antenatal check-ups. As shown in Figure 5.3, this is a decrease from 67 per cent in the 2015 survey but is consistent with the results from the 2013 survey.

Figure 5.3: Percentage of women seeing the same midwife for all or most of their antenatal check-ups over time



- Eighty-six per cent of women responded that they were always **given enough time** to ask questions or discuss their pregnancy. This is an increase from 82 per cent in both 2013 and 2015.

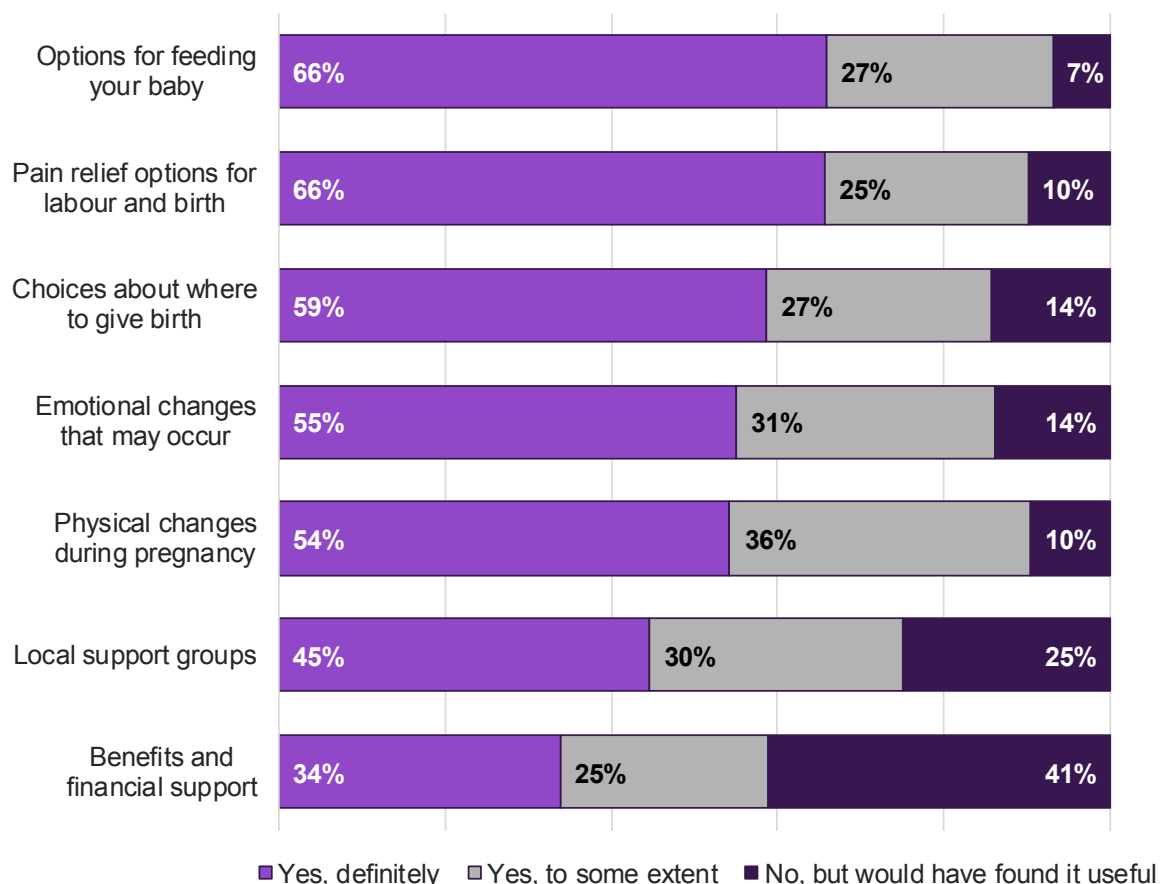
Information and Advice

Almost all women (97 per cent) were told who to contact if they needed further advice or support during their pregnancy. Of the women who had contacted a midwife or midwifery team, four in five (80 per cent) were given the help they needed which is consistent with previous surveys.

The survey asked whether respondents were given enough information by health professionals on a range of areas. As shown in Figure 5.4, women were most positive about information on options for feeding their baby and pain relief options for labour and birth, with two in three women (66 per cent) reporting that they were definitely given enough information on these areas.

Women were least positive about information on benefits and financial support, with 41 per cent responding that they did not get enough information but would have found this useful. However, it should be noted that this statement had a much higher proportion of women responding that they did not need this information and therefore being excluded from the analysis compared to the other statements.

Figure 5.4: Were you given enough information by health professionals on..? ¹⁶



¹⁶ A higher proportion of women were excluded from the analysis for 'Benefits and financial support' compared to other areas as they responded that they did not need this information.

Most of these statements are new or have been substantially changed from previous surveys and so no comparisons to previous surveys are available. However, the statement on choices about where to give birth has a comparable question in previous surveys which show consistent results to those in Figure 5.4.

Over nine in ten women (93 per cent) were given the **Ready, Steady, Baby** book or a link to the website and found it useful. Five per cent of women did not find it useful and two per cent of women were not given the book or a link but would have liked it.

Person-centred Care

The survey asked women what choices they had been offered about where to give birth. Table 1 sets out the proportion of women being offered each choice. The most common choice reported was giving birth in hospital, which was offered to almost two-thirds of women (64 per cent). Sixteen per cent of women were not offered any choices about where to give birth.

Table 1: Choices about where to give birth¹⁷

	%
At hospital	64
At a midwife-led unit	26
At home	28
Not offered any choices	16
No choices due to medical reasons	16
Choices are limited in area	4

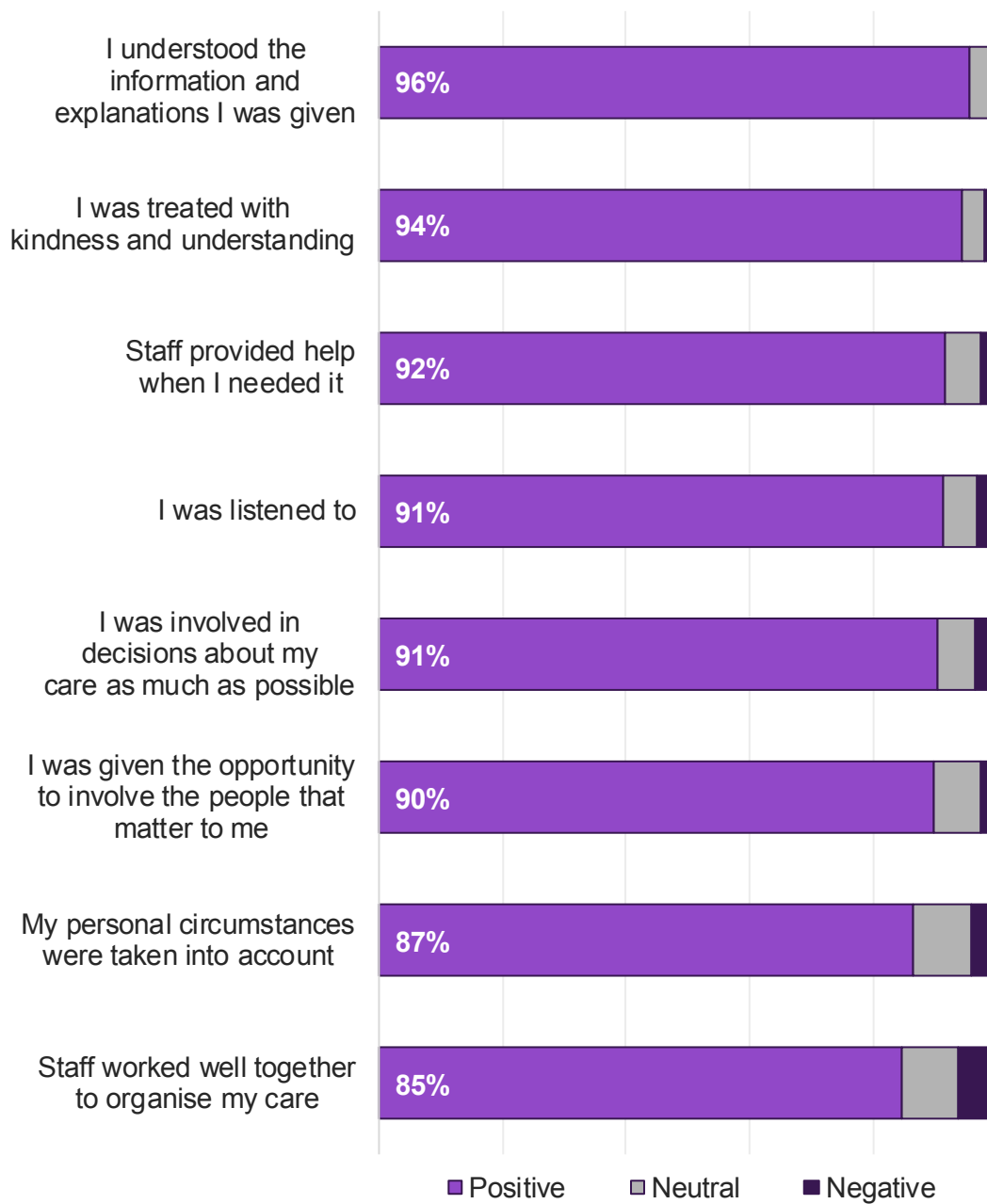
When asked whether they agreed or disagreed with eight statements relating to person-centred behaviours they experienced during their antenatal care, women responded positively. As shown in Figure 5.5, six out of the eight statements were rated positively by at least nine in ten women.

The **most positively rated** statements were 'I understood the information and explanations I was given' and 'I was treated with kindness and understanding', which were rated positively by 96 and 94 per cent of women respectively.

The statements with the **lowest positive responses** were 'My personal circumstances were taken into account' and 'Staff worked well together to organise my care', however both these statements were still rated positively by 87 and 85 per cent of women respectively.

¹⁷ Women were asked to tick all that applied and so results **cannot** be summed.

Figure 5.5: Responses to person-centred statements – Antenatal care



6. Labour and Birth

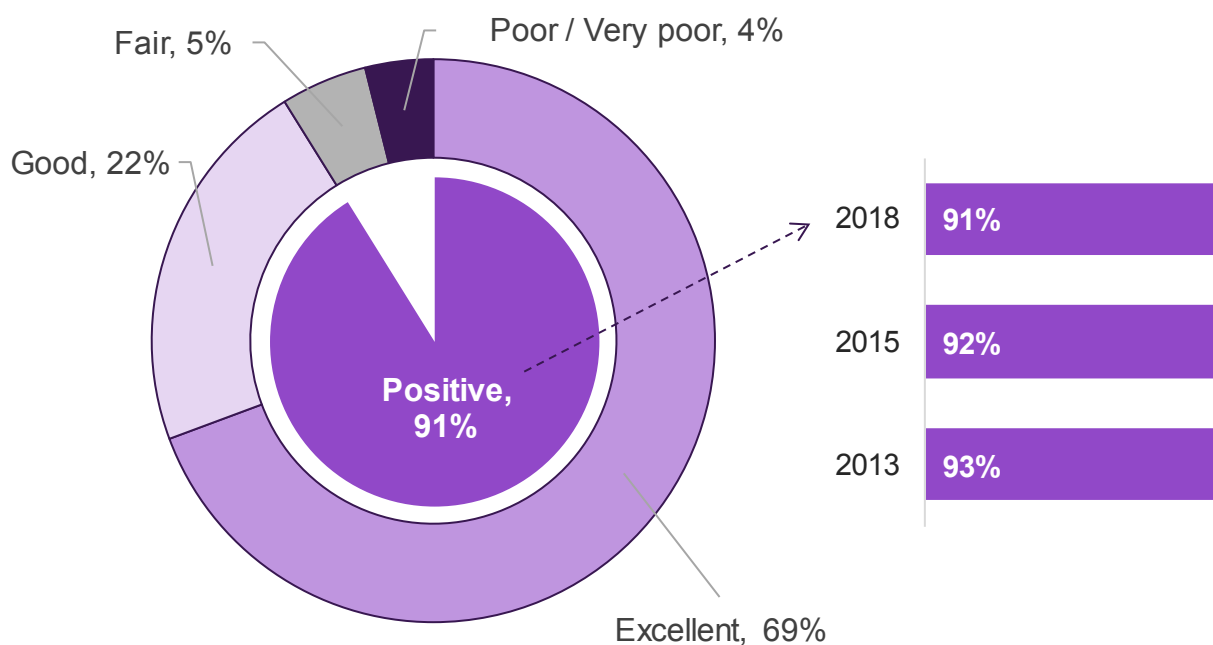
Summary

- Just over nine in ten women **rated the care they received during their labour and birth** positively. This is consistent with results from 2015 but a small decrease from 2013.
- Women were positive about their experiences of **person-centred behaviours** during labour and birth. They were most positive about being given the opportunity to involve the people that mattered to them (95 per cent).
- A quarter of women were **cared for by the same midwife / midwife team** as during their antenatal care, however 56 per cent of women reported that they did not mind that they were cared for by a different midwife / midwife team.
- Just over four in five women felt that any **concerns they raised** were taken seriously and three in four women always **received assistance within a reasonable time** when they called / asked for it.

Overall Experience

Just over nine in ten women (91 per cent) rated the care they received during their labour and birth as either 'Excellent' or 'Good' (Figure 6.1). This is consistent with the results from the 2015 survey, but shows a small decrease from 93 per cent in 2013.

Figure 6.1: Overall experience of care during labour and birth in 2018 and over time



Labour

At the very start of labour, 87 per cent of women felt they were given appropriate **advice and support** when they contacted a midwife or the hospital. This is consistent with results from 2015 and shows an increase from 85 per cent in 2013.

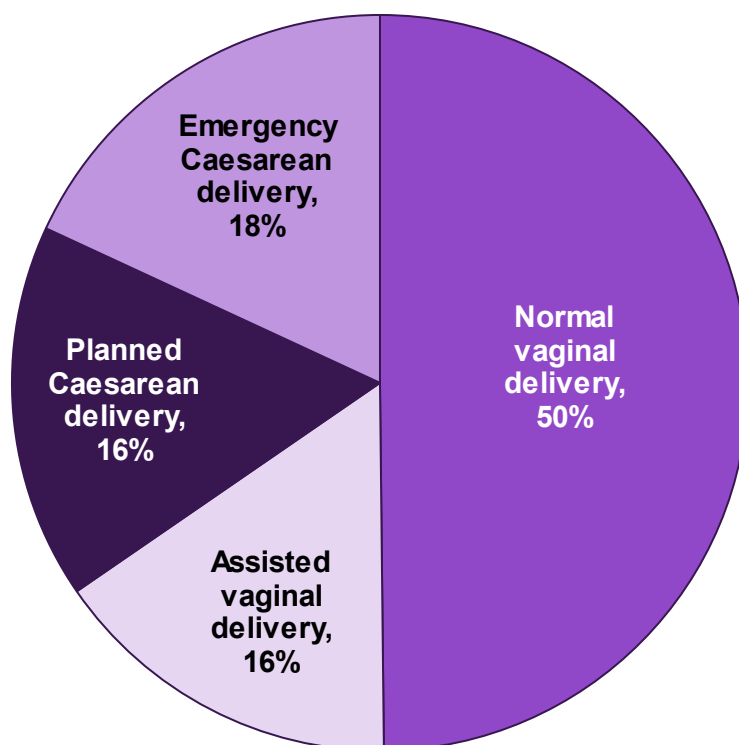
Almost three-quarters of women (74 per cent) were able to move around and **choose the position** that made them most comfortable most of the time during labour. This is consistent with responses in previous surveys.

Eighty-seven per cent of women felt they had enough **help to cope with their pain** during labour which is consistent with results from previous surveys. Looking at this result in more detail, 59 per cent felt they had enough help 'always' and 28 per cent felt they had enough help 'most of the time'.

Birth

The survey asked women what **type of birth** they had. As shown in Figure 6.2, half of women (50 per cent) experienced a normal vaginal delivery. The remaining half of women were fairly evenly distributed between experiencing an assisted vaginal delivery, a planned Caesarean delivery or an emergency Caesarean delivery. These figures are broadly in line with the provisional national maternity figures for method of delivery in 2018 published by Information Services Division (ISD)¹⁸.

Figure 6.2: Type of birth



¹⁸ www.isdscotland.org/Health-Topics/Maternity-and-Births/Births/

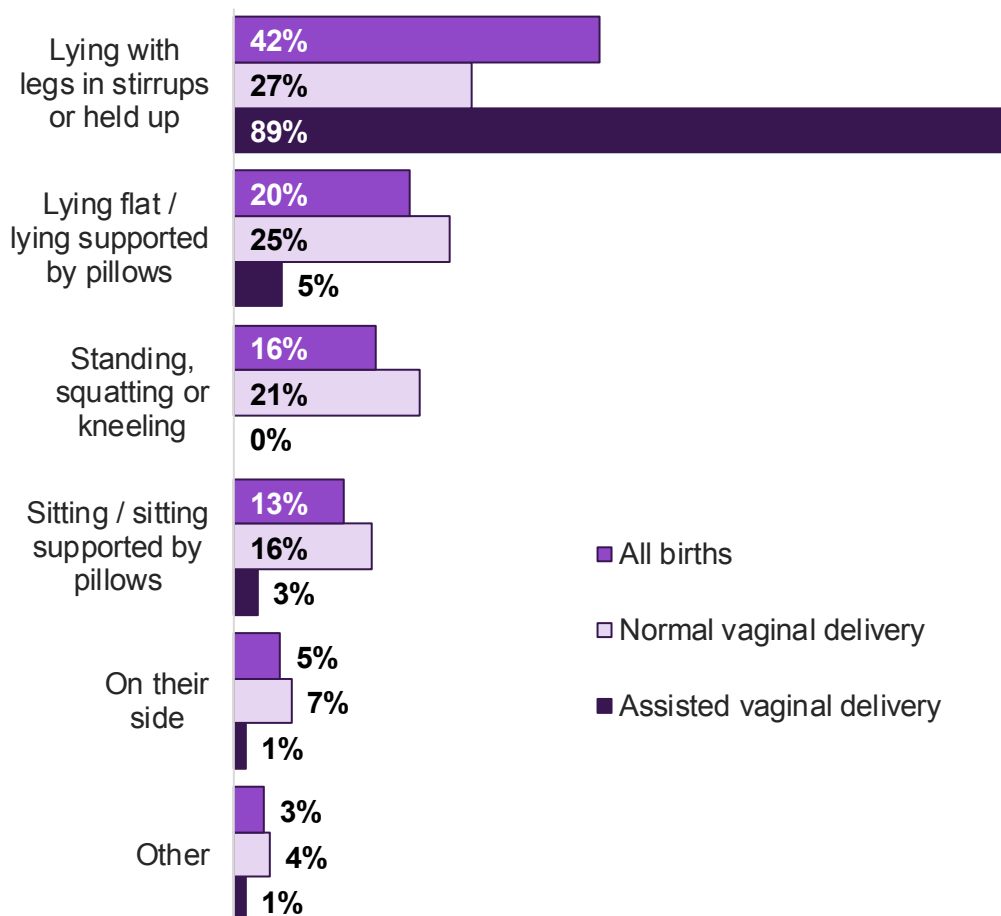
Those who had a vaginal delivery were asked:

- **where they gave birth** – most women (86 per cent) gave birth on a bed; seven per cent gave birth in a water or birthing pool; and three per cent gave birth on a mat on the floor. The remaining four per cent selected ‘Other’.
- **their position for the birth** – as shown in Figure 6.3, over two in five women (42 per cent) were lying with their legs in stirrups or held up and one in five women (20 per cent) were lying flat or lying supported by pillows.

Almost nine in ten women (89 per cent) who had an assisted vaginal delivery gave birth whilst lying with their legs in stirrups or held up. Women who had a normal vaginal delivery were more evenly distributed, with 27 per cent lying with legs in stirrups or held up; 25 per cent lying flat / lying supported by pillows; and 21 per cent standing, squatting or kneeling.

The overall pattern is different to that seen in previous years, but this may be linked to a change of wording in the response option relating to stirrups, which was expanded in 2018 to include legs being held up. The increase in women selecting this response, and corresponding decrease in women selecting ‘Sitting / sitting supported by pillows’ or ‘Lying flat / lying supported by pillows’, could reflect the broadening of this response description.

Figure 6.3: Position for the birth by type of birth

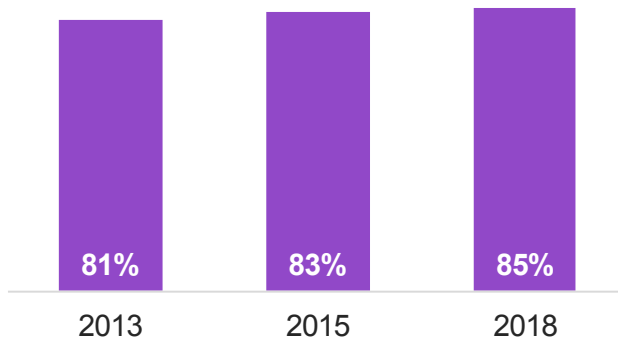


Most women (94 per cent) had **skin-to-skin contact** with their baby, that is their baby naked directly on their chest or tummy, shortly after the birth.

Person-centred Care

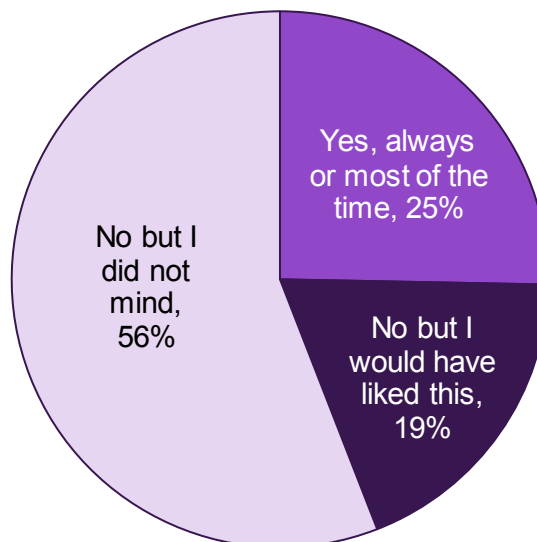
When asked whether the staff caring for them **introduced themselves**, 85 per cent of women responded that **all** the staff did. This is consistent with the results from 2015 and is an increase from 81 per cent in 2013 (Figure 6.4).

Figure 6.4: Proportion of women reporting all staff introduced themselves



A quarter of women (25 per cent) were cared for by the **same midwife / midwife team** as during their antenatal care (Figure 6.5). Of those who were not, one in five women (19 per cent) would have liked to have been cared for by the same midwife / midwife team but 56 per cent of women did not mind.

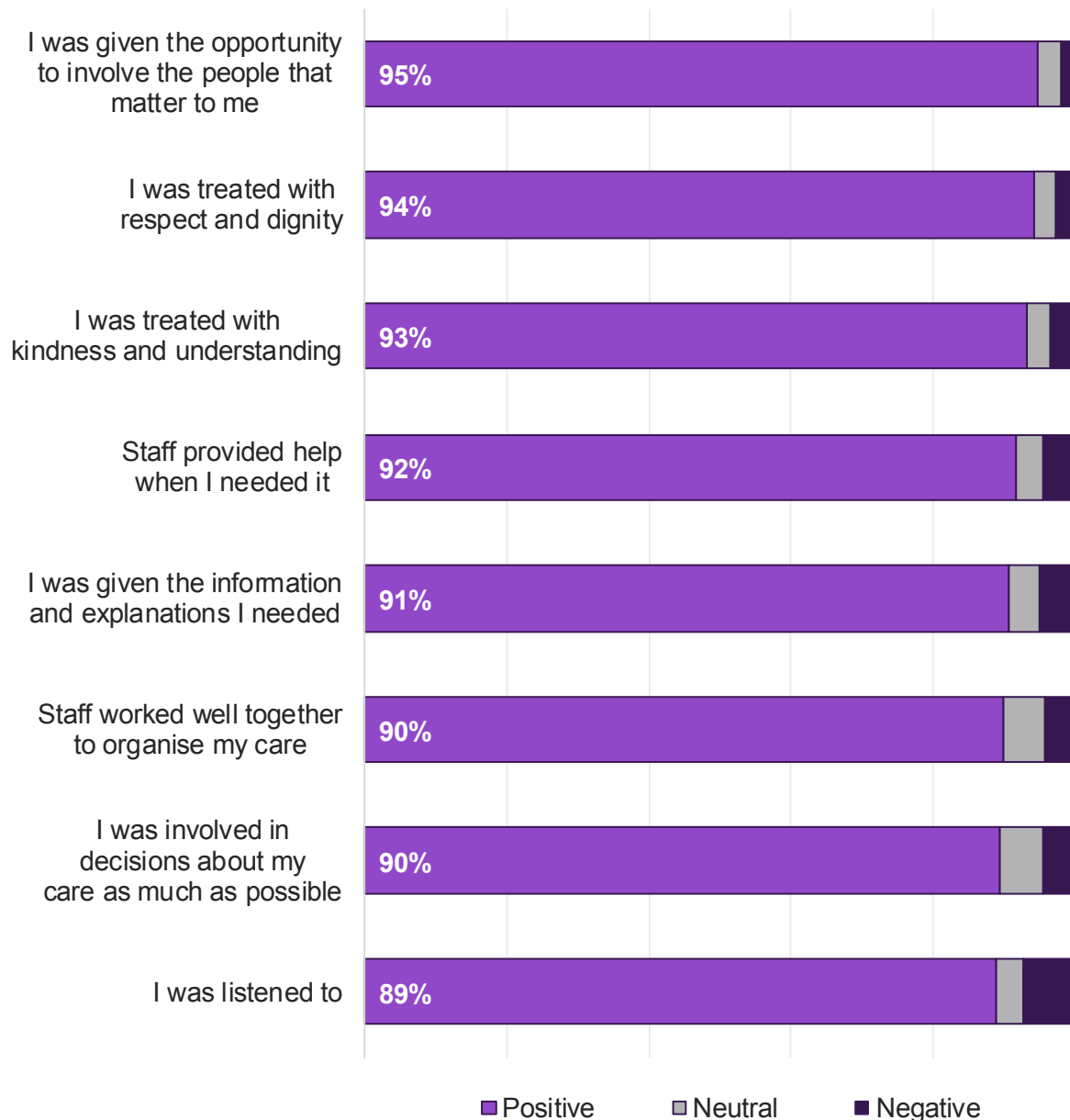
Figure 6.5: Cared for by the same midwife / midwife team as for antenatal care



The survey asked women whether they agreed or disagreed with eight statements relating to **experiences of person-centred behaviours** during labour and birth. As shown in Figure 6.6, women were very positive about these behaviours, with the **lowest positive response** at 89 per cent for being listened to.

Women were **most positive** about being given the opportunity to involve the people that mattered to them and being treated with respect and dignity (95 and 94 per cent respectively).

Figure 6.6: Responses to person-centred statements – Labour and birth

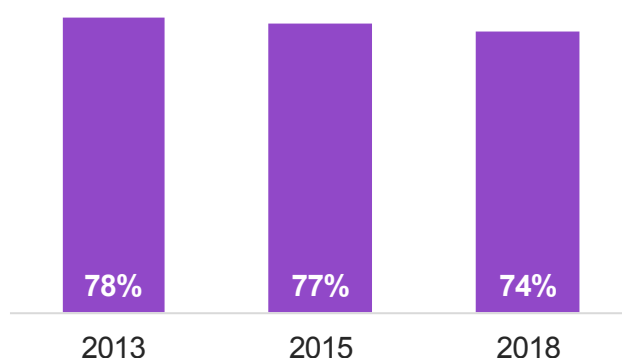


Concerns During Labour & Birth

The survey asked women if they had raised a concern during labour and birth, did they feel it had been taken seriously. Around three in five women (59 per cent) reported that they had **raised a concern**. Of these women, around four in five (81 per cent) felt that their concern was taken seriously which is consistent with results from previous surveys.

When they **called / asked for assistance**, around three in four women (74 per cent) **always** received it within a reasonable time. This is consistent with results from 2015 but is a decrease from 78 per cent in 2013 (Figure 6.7).

Figure 6.7: Proportion of women always receiving assistance during labour and birth within a reasonable time



The survey asked women whether they, and / or their partner or companion, were **left alone** by midwives or doctors at a time **when it worried them**. Around four in five women (81 per cent) reported that they had **never** been left alone at a time when it worried them.

Table 2 sets out the proportion of women selecting each stage. Almost one in ten women (9 per cent) were worried due to being left alone during early labour, but only one per cent of women were worried due to being left alone during the birth.

Table 2: Left alone at a time when it worried them¹⁹

	%
During early labour	9
During later stages of labour	6
During the birth	1
Shortly after the birth	6
Not at all	81

¹⁹ Women were asked to tick all that applied and so results **cannot** be summed.

7. Postnatal Care in Hospital / Midwife-led Unit

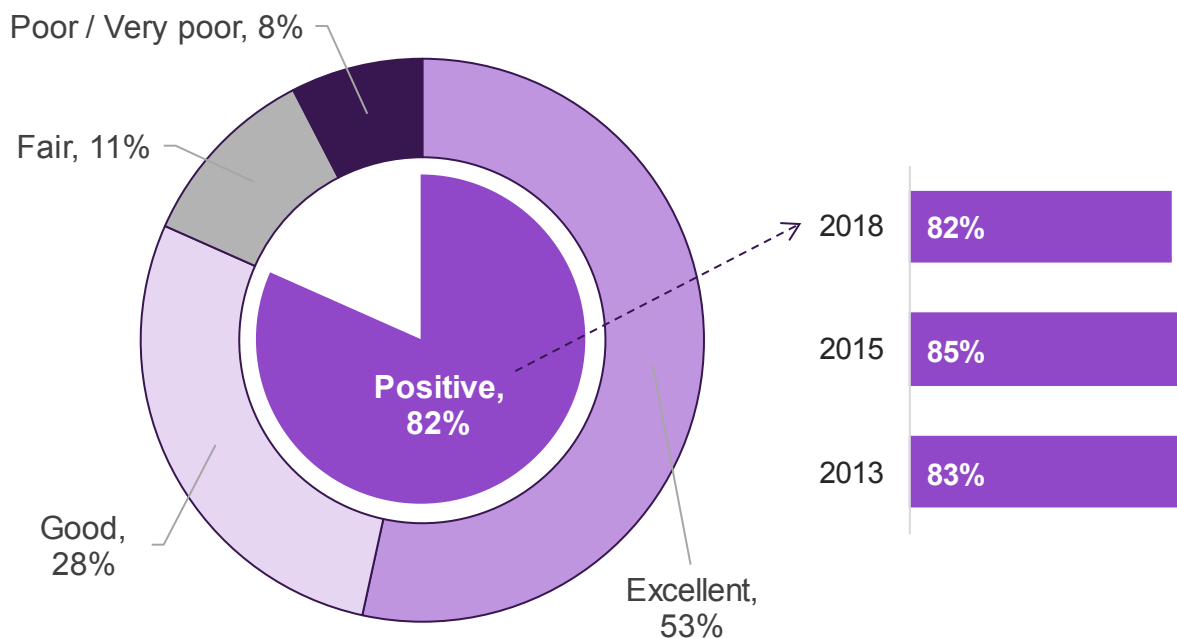
Summary

- Just over four in five women **rated their postnatal hospital care** positively. This is a slight decrease from 2015 but is in line with 2013 results.
- Almost all women (99 per cent) gave birth in a hospital or midwife-led unit and three in five of them were able to have their **partner or someone close stay with them** as much as they wanted.
- Women were generally positive about their experience of **person-centred behaviours**. They were most positive about being involved in their baby's care as much as possible (95 per cent) and least positive about staff spending enough time with them (74 per cent).

Overall Experience

Just over four in five women (82 per cent) rated the postnatal care, that is care after they gave birth, they received whilst in hospital as either 'Excellent' or 'Good' (Figure 7.1). This is decrease from 85 per cent in 2015 but is in line with results from the 2013 survey.

Figure 7.1: Overall experience of postnatal hospital / midwife-led unit care in 2018 and over time

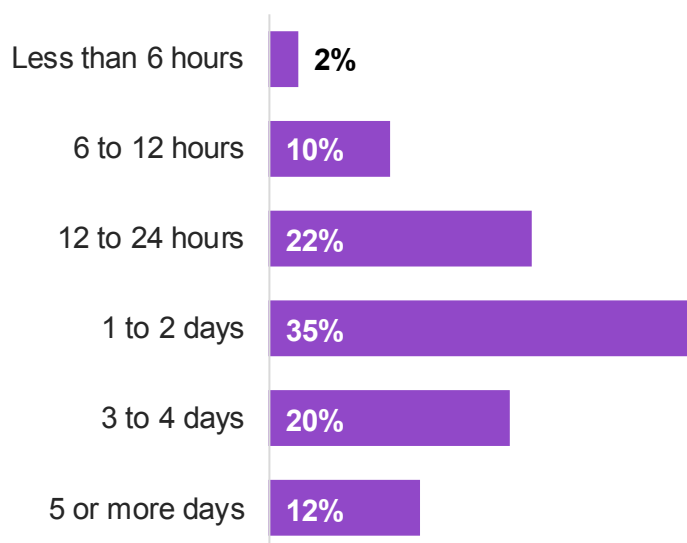


Experience in Hospital or a Midwife-led Unit

Almost all respondents (99 per cent) **gave birth in a hospital or a midwife-led unit**. Those who gave birth in a hospital / midwife-led unit were asked questions about their experiences of postnatal care there following giving birth.

The survey asked women **how long they had stayed in hospital or a midwife-led unit** following the birth of their baby. As shown in Figure 7.2, a stay of 1 to 2 days was most common, with 35 per cent of women reporting a stay of this length.

Figure 7.2: Length of stay in hospital / midwife-led unit following birth



Around three in five women (59 per cent) responded that their partner or someone else close to them was **able to stay with them** as much as they wanted. As shown in Table 3, the most common reason a partner or someone close wasn't able to stay as much as they wanted was that they were restricted to visiting hours – this was the case for three in ten women (30 per cent).

Table 3: Partner or someone close able to stay as much as wanted²⁰

	%
Yes	59
No – restricted to visiting hours	30
No – no accommodation available	12
No – another reason	3

The vast majority of women (94 per cent) knew who to contact if they needed any **further advice or support** once they left the hospital / midwife-led unit.

²⁰ Women were asked to tick all that applied and so results **cannot** be summed.

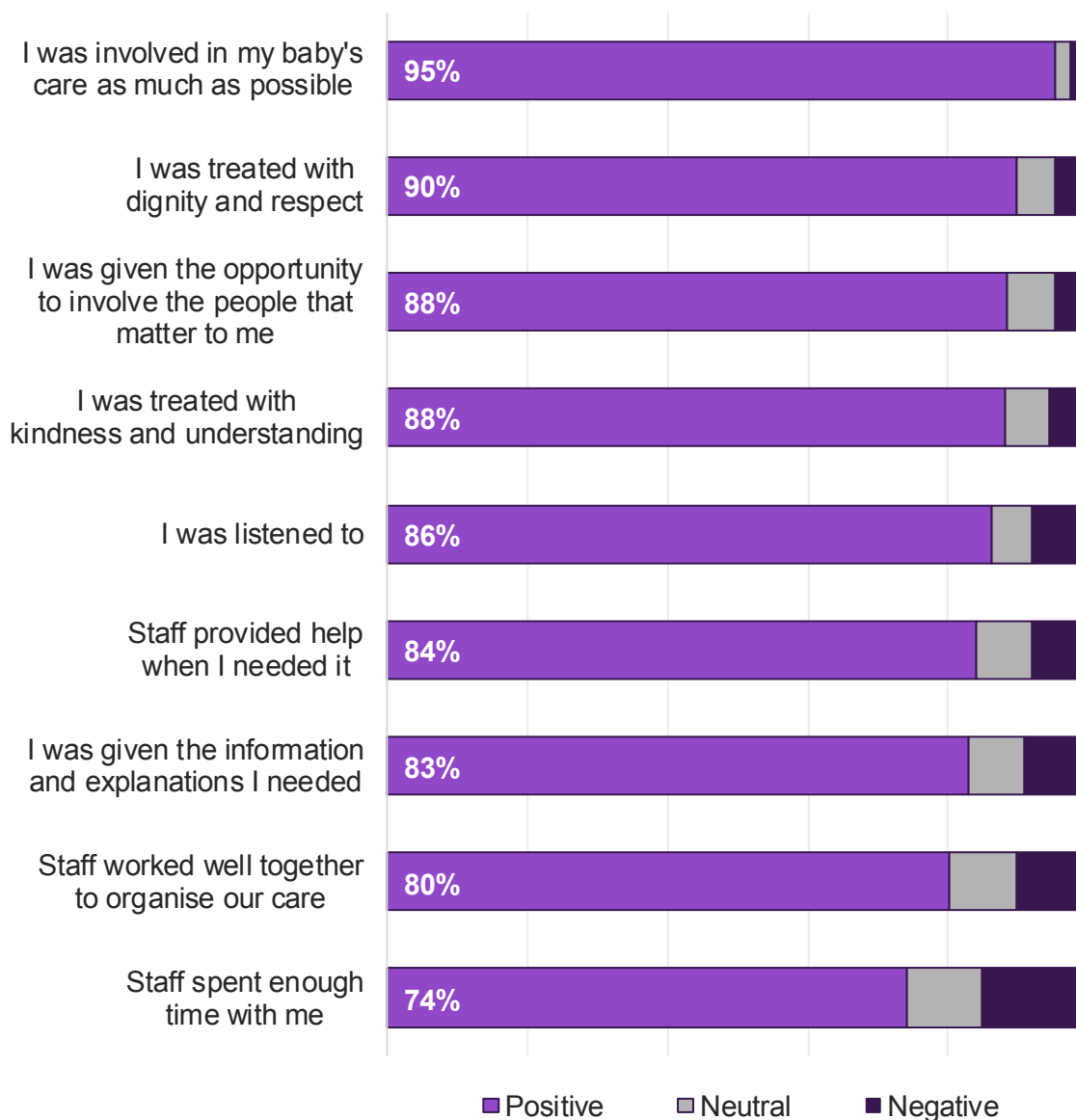
Person-centred Care

The survey asked women whether they agreed or disagreed with nine statements relating to **experiences of person-centred behaviours** during their postnatal care in hospital / midwife-led unit. As shown in Figure 7.3, women were generally positive about these behaviours, with eight out of the nine statements being rated positively by at least four in five women.

Women were **most positive** about being involved in their baby's care as much as possible and being treated with dignity and respect (95 and 90 per cent respectively).

Women were **least positive** about staff spending enough time with them, with 74 per cent of women rating this positively and 15 per cent rating this negatively.

Figure 7.3: Responses to person-centred statements – Postnatal Hospital / Midwife-led Unit Care



8. Neonatal Care

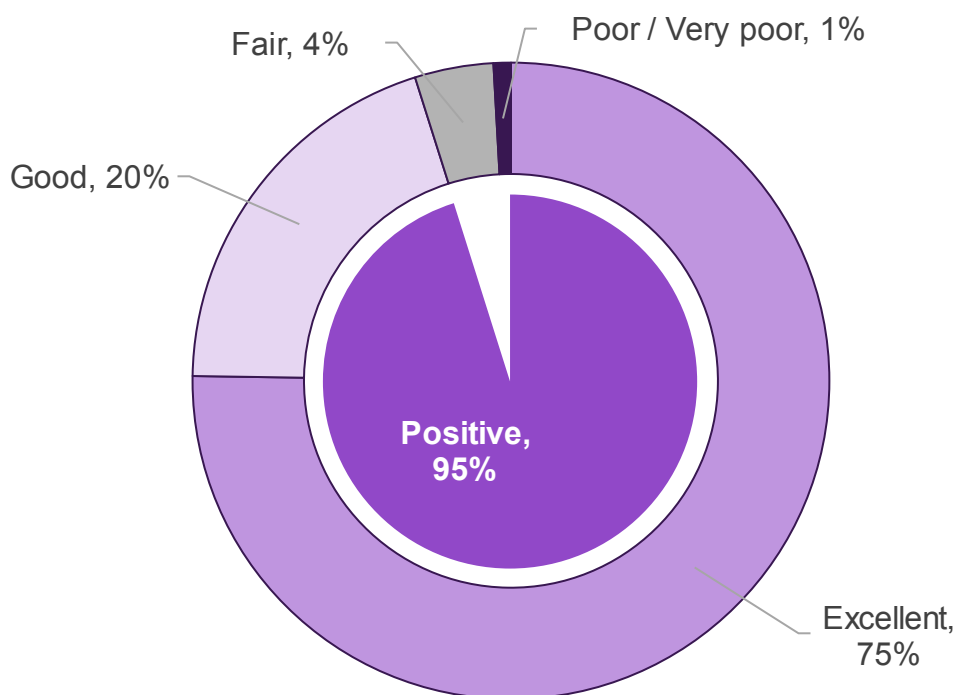
Summary

- The vast majority of women whose baby had been admitted to a neonatal unit (95 per cent) **rated the care their baby had received** positively.
- Most women felt they were able to **stay with their baby as much as they wanted** and that they always **received assistance within a reasonable time** in the neonatal unit (85 and 86 per cent respectively).
- Two in five women were offered **emotional support or counselling** after their baby was admitted to a neonatal unit.
- Women were positive about their experience of **person-centred behaviours**. They were most positive about being treated with kindness and understanding (94 per cent).

Overall Experience

The vast majority of women (95 per cent) whose baby had been **admitted to a neonatal unit** rated the care their baby had received as 'Excellent' or 'Good', with three quarters of women (75 per cent) rating the care as 'Excellent' (Figure 8.1).

Figure 8.1: Overall experience of neonatal care in 2018



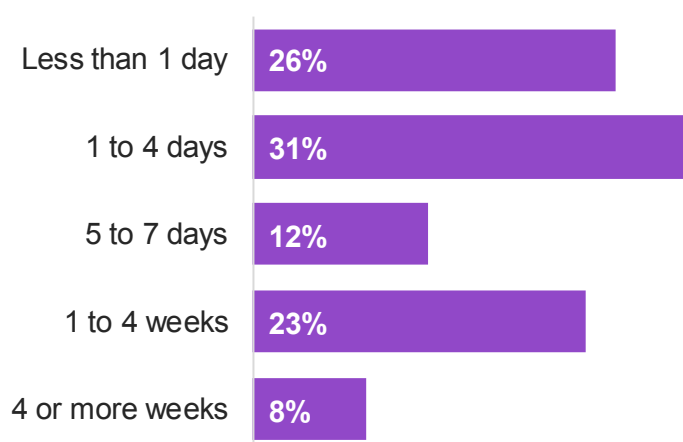
Experience of Neonatal Care

Fourteen per cent of women reported that their baby was **admitted to a neonatal unit**. Of these women:

- 60 per cent were admitted immediately following birth;
- 30 per cent were admitted during their postnatal hospital stay; and
- 10 per cent were admitted following their initial discharge.

Just over two in three women (69 per cent) reported that their baby **stayed in the neonatal unit** for a week or less (Figure 8.2).

Figure 8.2: Length of stay in neonatal unit



Most women (85 per cent) felt that they were **able to stay with their baby in the neonatal unit** as much as they wanted (Table 4). No respondents were restricted to visiting hours, however a small number of women reported they weren't able to stay as much as they wanted as there was no accommodation available (5 per cent) or for medical reasons (6 per cent).

Table 4: Able to stay with their baby in the neonatal unit as much as wanted²¹

	%
Yes	85
No – restricted to visiting hours	0
No – no accommodation available	5
No – for medical reasons	6
No – another reason	3

Just over three-quarters of women (77 per cent) were able to have as much **skin-to-skin contact** with their baby as they wanted in the neonatal unit.

²¹ Women were asked to tick all that applied and so results **cannot** be summed.

The survey asked women whether they **received assistance within a reasonable time** if they called or asked for it whilst their baby was in neonatal care. Most women (86 per cent) felt they always received it within a reasonable time and only one per cent reported that they never received assistance within a reasonable time.

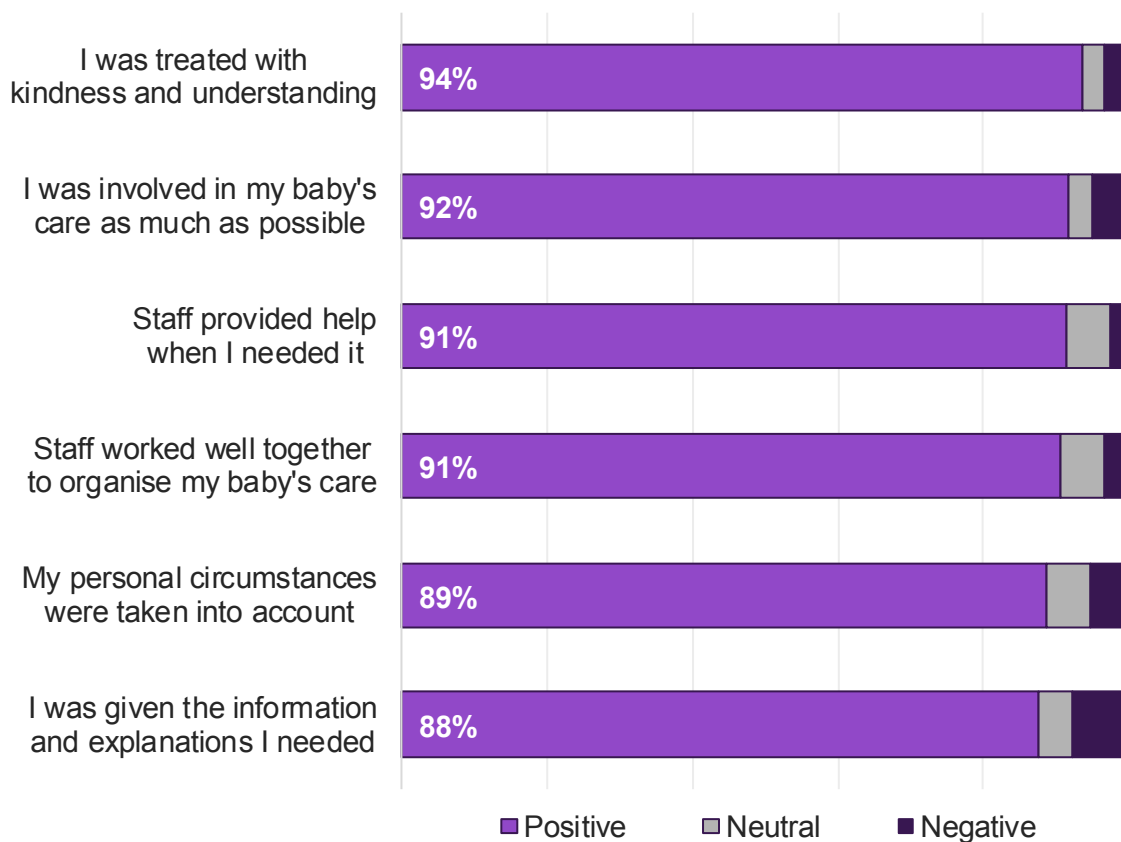
Two in five women (40 per cent) were **offered emotional support or counselling** after their baby was admitted to a neonatal unit. Women whose baby stayed in a neonatal unit for more than a week were more likely to be offered this (52 per cent) than those whose baby stayed in a neonatal unit for a week or less (33 per cent).

Person-centred Care

The survey asked women whether they agreed or disagreed with six statements relating to **experiences of person-centred behaviours** while their baby was in a neonatal unit. As shown in Figure 8.3, women were positive about these behaviours.

Women were **most positive** about being treated with kindness and understanding and being involved in their baby's care as much as possible (94 and 92 per cent respectively). Women were **least positive** about being given the information and explanations they needed, with 88 per cent of women rating this positively and eight per cent rating it negatively.

Figure 8.3: Responses to person-centred statements – Neonatal Care



9. Feeding

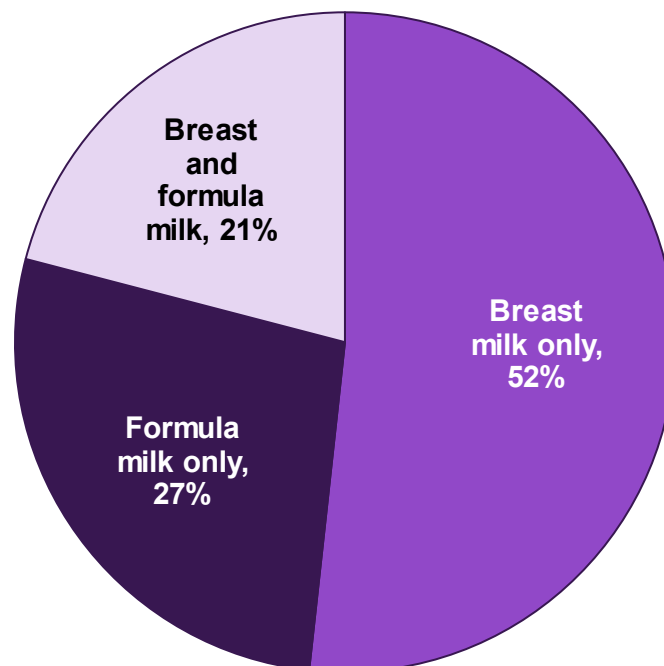
Summary

- In the first few days, just over half of women fed their baby breast milk only and around one-fifth used breast and formula milk. Almost one in five women always experienced **difficulties feeding** their baby in the first few days.
- Around four in five women felt their **decisions** about how to feed their baby were always **respected by staff**.
- Three in five women reported they always received **active support and encouragement** from health professionals about feeding their baby.
- Just over half of women felt they always got **consistent advice** from health professionals about feeding their baby.

Method of Feeding

As shown in Figure 9.1, just over half of women (52 per cent) fed their baby only breast milk in the first few days, and around one in five women (21 per cent) used a mix of breast and formula milk.

Figure 9.1: Method of feeding in first few days

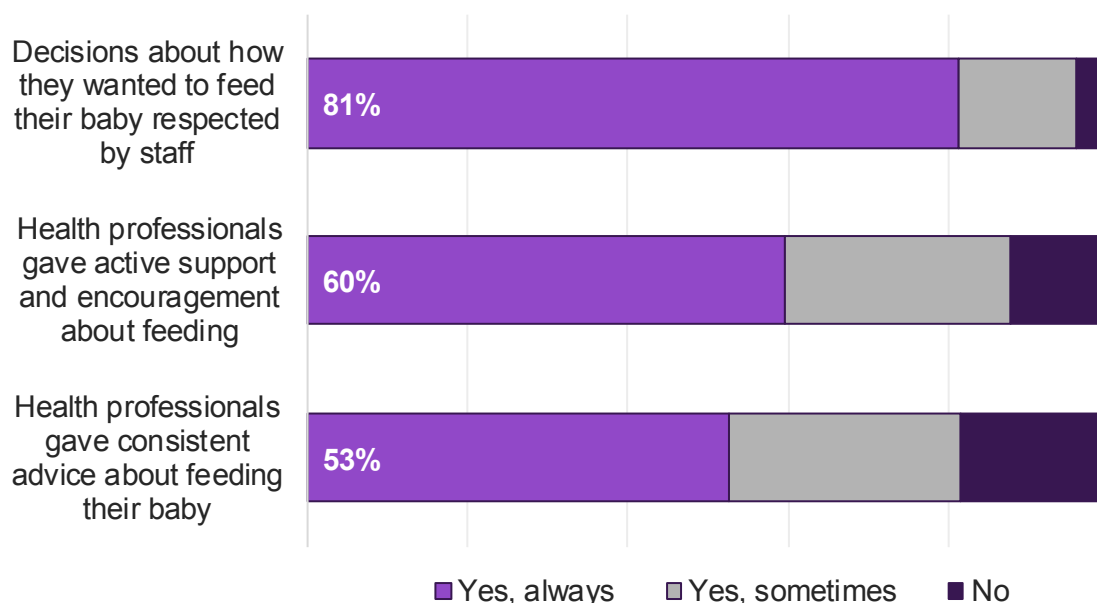


When asked whether they had **experienced any difficulties or challenges feeding** their baby in this way, just under one in five women (18 per cent) had responded 'yes, always'. Just under two in five (38 per cent) said they experienced difficulties sometimes and the remaining women (45 per cent) had no difficulties.

Feeding Advice and Support

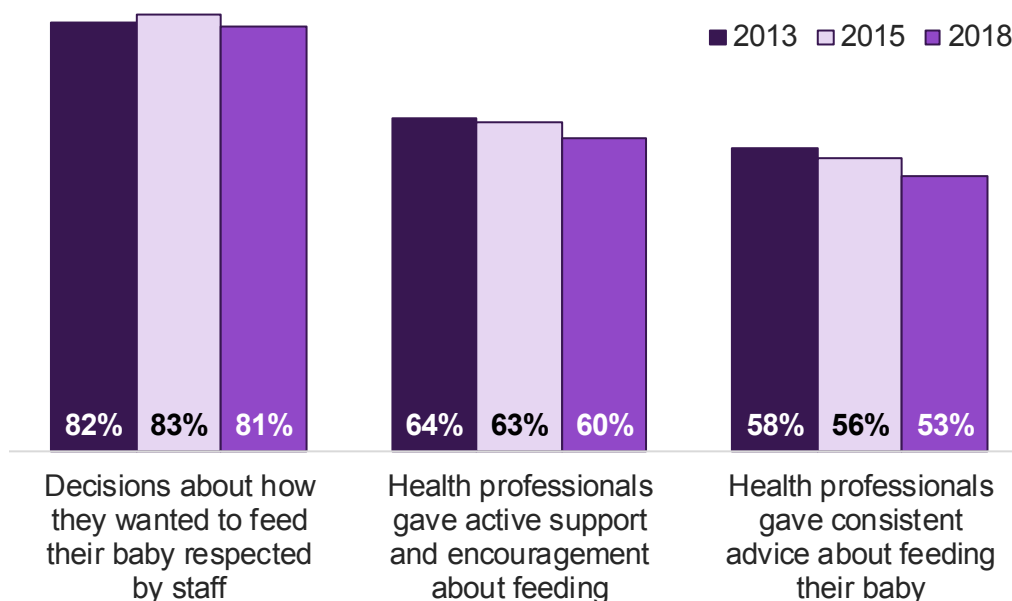
The survey asked women three questions relating to advice and support from staff in relation to feeding their baby. As shown in Figure 9.2, women were most positive about their decisions on how to feed their baby being respected by staff, with around four in five women (81 per cent) responding that they felt their decisions were always respected. This is in line with results from previous surveys.

Figure 9.2: Advice and support on feeding from staff, 2018



Women were less positive about midwives and health professionals giving them **active support and encouragement** and **consistent advice** about feeding (60 and 53 per cent respectively). These were both lower than in previous survey results, as shown in Figure 9.3.

Figure 9.3: Advice and support on feeding from staff, over time



10. Postnatal Care at Home and in the Community

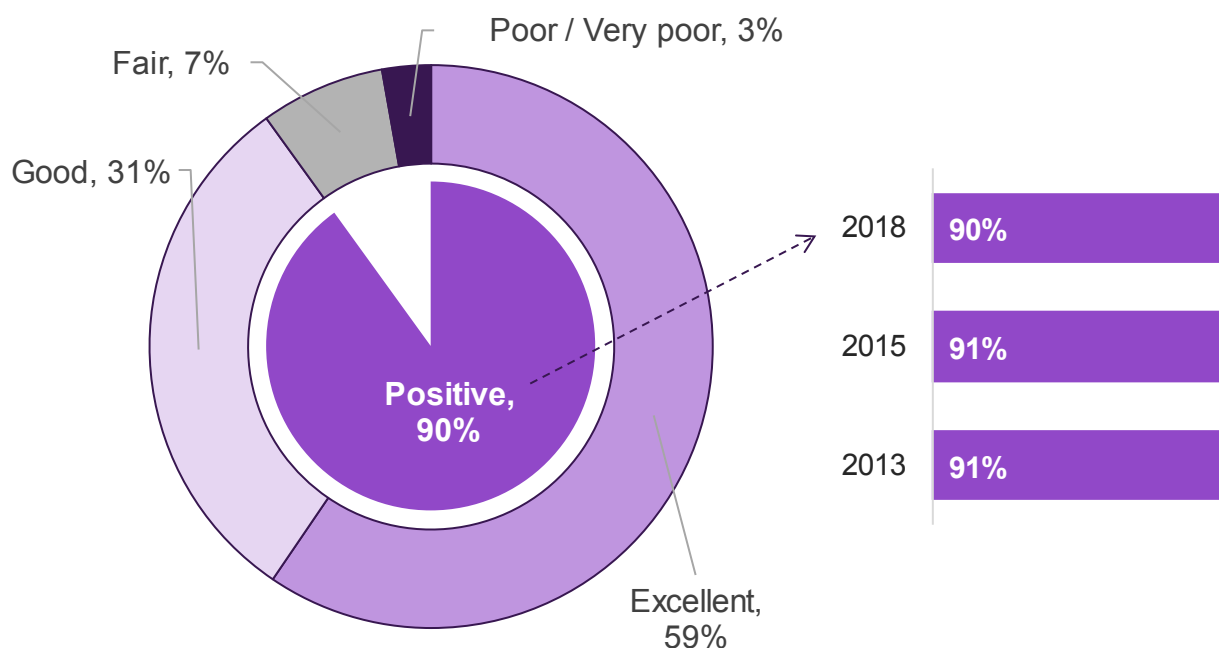
Summary

- Nine in ten women **rated the postnatal care they received at home and in the community** positively which is in line with results from previous surveys.
- Three in ten women were given a **choice about where** their postnatal care took place.
- Women were very positive about their experience of **person-centred behaviours**. They were most positive about understanding information and explanations they were given (97 per cent) and being treated with kindness and understanding (96 per cent).
- Just under half of women saw the **same midwife** for both their antenatal and postnatal care, and just over a quarter did not but would have liked this.
- Two in three women felt they definitely had enough **advice and support** to care for their baby after the birth. Just over three in four women were always **given the help they needed** when they contacted a midwife or midwifery team, a decrease from previous surveys.

Overall Experience

Nine in ten women (90 per cent) rated the postnatal care they received at home and in the community as either 'Excellent' or 'Good' (Figure 10.1). This is in line with results from previous surveys.

Figure 10.1: Overall experience of postnatal care at home and in the community in 2018 and over time



Person-centred Care

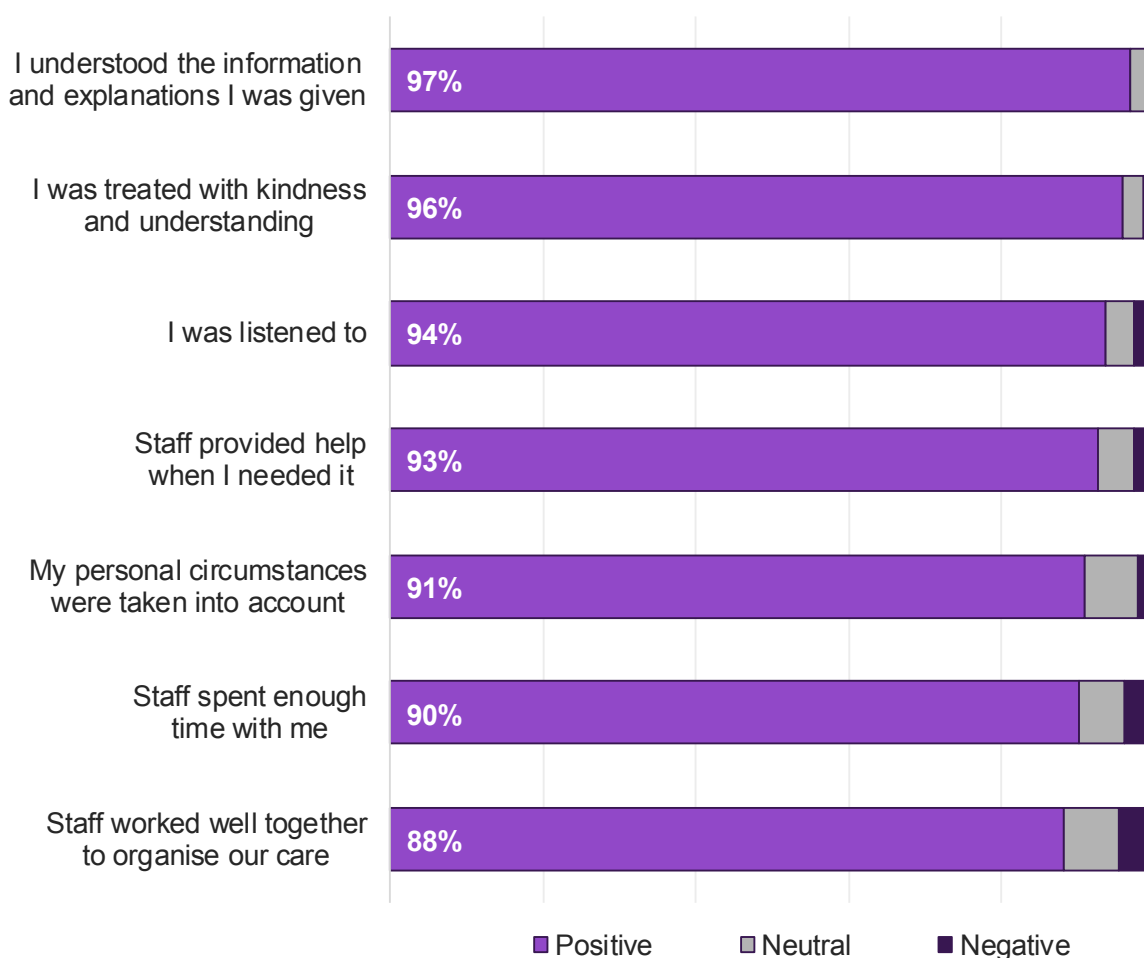
Three in ten women (30 per cent) reported that they were given a **choice about where** their postnatal care would take place.

The survey asked women whether they agreed or disagreed with seven statements relating to **experiences of person-centred behaviours** during their postnatal care at home and in the community. As shown in Figure 10.2, women were very positive about these behaviours, with all but one statement being rated positively by at least nine in ten women.

Women were **most positive** about understanding information and explanations and being treated with kindness and understanding (97 and 96 per cent respectively).

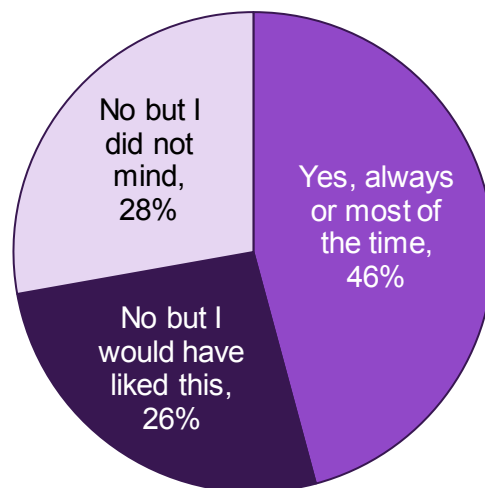
Women were **least positive** about staff working well together to organise their care, however this was still rated positively by 88 per cent of women.

Figure 10.2: Responses to person-centred statements – Postnatal Care at Home and in the Community



Just under half of women (46 per cent) saw the **same midwife for both their antenatal and postnatal care** always or most of the time. Around a quarter (26 per cent) did not see the same midwife but would have liked to and the remainder (28 per cent) did not mind that they saw a different midwife (Figure 10.3).

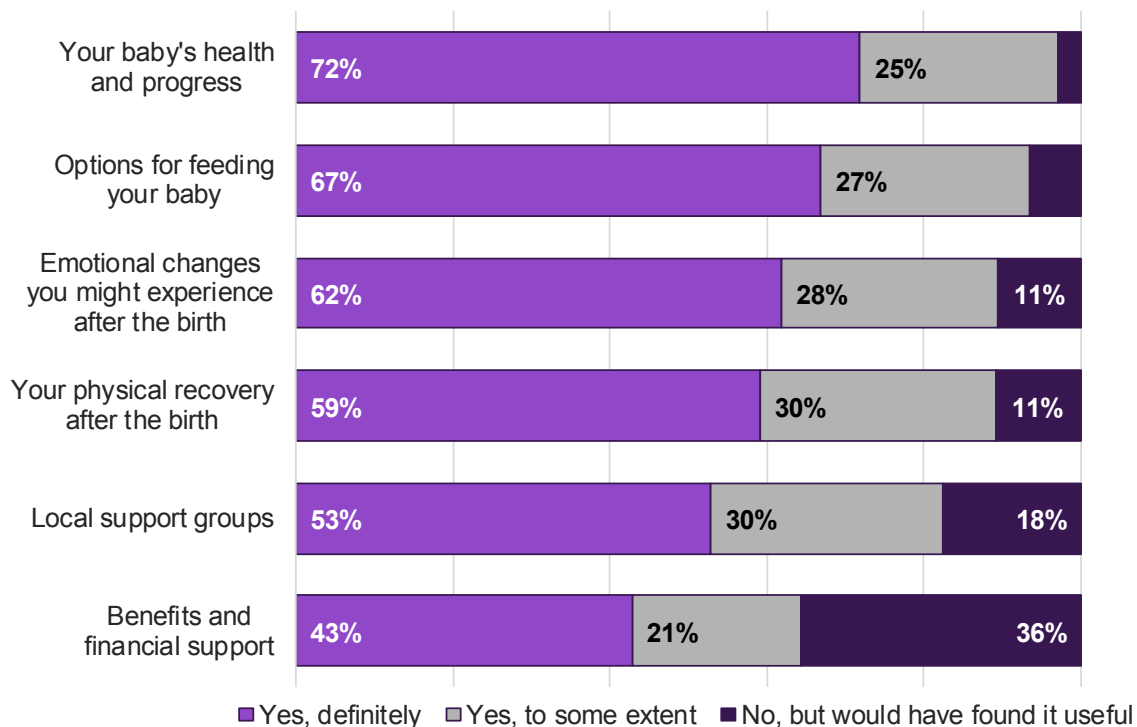
Figure 10.3: Did you see the same midwife for antenatal and postnatal care?



Advice and Support

The survey asked whether respondents were given **enough information and support by health professionals** on a number of areas. As shown in Figure 10.4, women were **most positive** about information and support on their baby’s health and progress and options for feeding their baby (72 and 67 per cent respectively).

Figure 10.4: Were you given enough information and support by health professionals on...? ²²

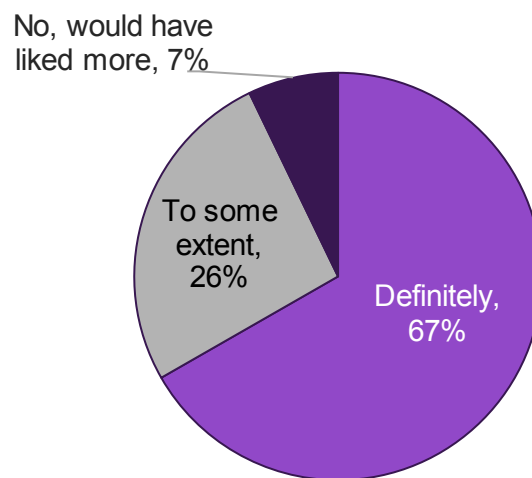


²² A higher proportion of women were excluded from the analysis for 'Benefits and financial support' compared to other areas as they responded that they did not need this information.

Women were **least positive** when asked about benefits and financial support, with 36 per cent responding that they did not get enough information or support but would have found this useful. However, it should be noted that this statement had a much higher proportion of women responding that they did not need this information and therefore being excluded from the analysis compared to the other statements.

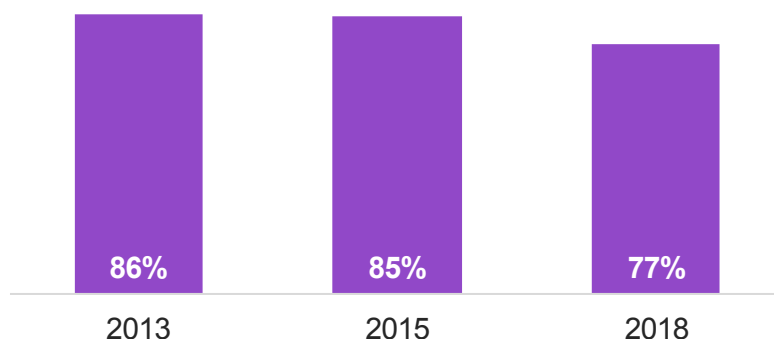
When asked whether they felt they had enough **advice and support to care for their baby after the birth**, two in three women (67 per cent) responded 'definitely'. Around a quarter (26 per cent) felt they had enough advice and support to some extent and seven per cent responded that they did not have enough and would have liked more. (Figure 10.5)

Figure 10.5: Enough advice and support to care for their baby after the birth



Just over three in four women (77 per cent) were always **given the help they needed when they contacted a midwife or midwifery team**. This is a decrease from 85 per cent in 2015 and 86 per cent in 2013 (Figure 10.6). Only four per cent of women reported that they were not given the help they needed.

Figure 10.6: Percentage of women that were always given the help they needed when contacting a midwife or midwifery team



Over nine in ten women (92 per cent) were told by a health professional that they needed to **arrange a postnatal check-up** of their own health. Three in four women (75 per cent) were told who to contact if they needed **advice about emotional changes** they might experience after the birth.

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The data collected for this statistical publication are available in more detail through www.gov.scot/MaternitySurvey.

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