Your spotlight
on local services
Healthwatch Suffolk would like to acknowledge and extend its gratitude to every person who responded to our survey and to every person who participated in our telephone interviews.

Healthwatch Suffolk can only instigate change and improve patient experience if local people in Suffolk continue to take the time to share their views with us.

Healthwatch Suffolk would like to acknowledge and extend thanks to staff at Ipswich Hospital for partnership working throughout this project and inviting members of the research team to meet and engage with new mums and birthing partners on the wards at Ipswich Hospital.

These engagement opportunities enabled Healthwatch Suffolk to raise awareness of this project and to increase the response rate. Without Ipswich Hospital’s collaboration it is unlikely that so many people would have shared their experience of giving birth at or being present at a birth at Ipswich Hospital.

Finally Healthwatch Suffolk would like to extend thanks to all other organisations who invited members of the research team at baby groups, children centres or who helped us to raise awareness of this project.

If anybody has any queries relating to the content in this report please contact a member of the research team at Healthwatch Suffolk via info@healthwatchsuffolk.co.uk.
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At Healthwatch Suffolk we help local people get the best out of their health and social care services in Suffolk. We use local patient experience of using a health or social care service to influence and improve the delivery and design of the service. Healthwatch Suffolk's vision is to ‘champion the views of local people to achieve excellent health and social care services in Suffolk’.

Healthwatch Suffolk aims to work in partnership with a wide range of stakeholders and to promote and support the involvement of local people. As defined by our vision and mission, this piece of engagement work met Healthwatch Suffolk’s criteria to work in partnership with local hospitals to;

1. Explore patient experience (birthing partners and new mums) of the maternity pathway at Ipswich Hospital, and

2. Explore how women and their partners experience could be improved for patients using the maternity services in the future.

The Head of Midwifery at Ipswich Hospital approached Healthwatch Suffolk about leading on an engagement project to gather birthing partner’s views about the maternity pathway at Ipswich Hospital. As the representative for the patient voice in Suffolk, Healthwatch Suffolk expanded the project in order that new mum’s views of the maternity pathway were also collected. The Research Team engaged new mums and their birthing partners when raising awareness of the project. This led to the decision to include new mums’ experiences as they were considered to be valid and important voices when exploring use of the maternity pathway in Suffolk.

It should be noted that there is a lack of engagement research locally and nationally (in the whole of the UK) for birthing partners to share their experiences of the maternity pathway. To the Research Team’s knowledge this is the first time that engagement work has been conducted with birthing partners within the Healthwatch network and in Suffolk.

Father/Partner involvement - Why is it important?

This section will provide some evidence from the literature about the benefits of father/partner involvement during the antenatal, birth and postnatal experience. It should be noted that it is not within the scope of this project to provide an extensive review and therefore Healthwatch Suffolk does not claim that this review to be all-inclusive or systematic.

The positive effects of father involvement during pregnancy, birth and after the birth have been well documented. It is not a new finding that fathers who are actively involved during pregnancy and birth may experience greater closeness with their baby and partner (May, 1981). More recently authors have found that father involvement during pregnancy can positively impact a pregnant woman’s health behaviours (Teitler, 2001) such as increased smoking cessation and increased rates and duration of breastfeeding (Wolfberg et al., 2004; Bailey, 2007; Fatherhood Institute, 2015).

Involvement of fathers/partners in the birth
has the potential to have psychological health benefits for mums. Bailey (2007) found that when fathers are involved in the birth, maternal mental health rates are likely to be higher. Involvement of fathers/partners during pregnancy and birth has been found to have psychological benefits for fathers themselves too. Diemer (1997) reviewed the literature and found that fathers/partners who have been well-prepared to actively and appropriately assist with the birth of their child tended to be more active participants during the birth, which improved their own experience of the birth and their partners' birth-experiences. Positive involvement of fathers can reduce levels of fear and anxiety that fathers/partners may feel about the impending labour and increase trust and respect between themselves and their partner (Bailey, 2007).

Father/partner involvement can positively impact the relationship between mum and their partner. More specifically it has been found that involvement of fathers/partners during pregnancy and birth lead to higher levels of satisfaction in the relationship/marriage (Chih-Yuan & Williams, 2007). By involving fathers/partners at the birth, it can begin the important process of developing a fathers/partners parental confidence and make them feel valued as a co-parent (Bailey, 2007). It is also important to ensure that health messages are tailored so that fathers/partners understand them too. Fathers/birthing partners who understand that a pregnant woman has the potential to develop a complication at any point during her pregnancy, may be better able to support their partner’s use of appropriate health services, in order to reduce these risks (Fatherhood Institute, 2015).

In addition to positive effects of father/partner involvement it is essential to highlight that there can be negative consequences when the father/partner is not involved. If fathers/partners are not engaged with and are not appropriately educated on the benefits of certain health behaviours during pregnancy, they can often undermine these health messages, albeit without intent (Fatherhood Institute, 2015).

The Fatherhood Institute (2015) state that the way maternity care is commonly organised in the UK tends to generate feelings of exclusion for partners. More specifically the authors state that despite the fact that the number of fathers/partners who attend antenatal appointments during their partner’s pregnancy and who attend the birth of their baby have increased over the past few years, fathers/partners still often feel ignored by health professionals (Fatherhood Institute, 2015).

Recent research suggested that there are often better health outcomes for both mum and baby if health professionals engage with both mums and partners/fathers before the birth (Fatherhood Institute, 2015). In conclusion it is clear that there are a wide range of psychological and physical benefits for mum, partner and baby when the partner/father is actively involved in the maternity process. More so it is apparent that there can be negative consequences for mum, partner and baby if the partner/father is not appropriately and effectively involved in the maternity process. There are a number of national guidelines and policies that encourage the involvement of fathers/partners in the maternity process. These can be found here:

- Reaching out: Involving Fathers in Maternity Care - The Royal College of Midwives - can be accessed at: https://www.rcm.org.uk/sites/default/files/Father's%20Guides%20A4_3_0.pdf

Ipswich Hospital

At the time the research was conducted, Ipswich Hospital has three maternity wards over three floors:

1. The Brook Birth Centre
2. The Orwell Antenatal and Postnatal Ward
3. The Deben Delivery Suite

The Brook Birth Centre is a midwifery led ward. There are 10 beds for the care of mums after they have given birth, two assessment beds and three birthing rooms for natural childbirth in a quiet environment.

There are no consultant rounds on this ward. Birthing partners are able to stay with mum at any time during the birth. Other visitors are welcome 3pm-7pm. Maximum of three visitors at a time. The Orwell consultant led antenatal and postnatal
ward has 24 beds and is on the third floor of the maternity block. The on-call consultant makes a ward round every morning at around 10am. Birthing partners are able to stay with mum at any time during the birth. Other visitors are welcome 3pm-7pm. Maximum of three visitors at a time.

The Deben consultant-led delivery suite is based on the 4th floor with six delivery rooms, three assessment rooms and a 4-bedded antenatal room. There is one en-suite quiet room. Generally, there are no visiting times on the ward, and maternity staff allow for visiting dependant on the woman's condition. Guidelines for active labour are that a maximum of two birthing partners are allowed.

A named consultant obstetrician is available 24 hours a day. Regular ward rounds take place throughout the day and involve the consultant, registrar, SHO, anaesthetist, senior midwife and midwife involved in the patient's care.
The aim of this project was to explore birthing partners’ experiences of the maternity pathway at Ipswich Hospital. There is a dearth of evidence that involves asking birthing partners for their experience both locally and nationally. The project was expanded to include new mums’ experiences as they were considered to be valid and important voices when exploring use of the maternity pathway in Suffolk.

This project adopted a mixed methodology approach, a quantitative survey with one open ended (qualitative) question, administered and distributed in the public domain. Surveys were hosted online via survey monkey and hard copies of surveys were distributed by hand and were available upon request.

Anybody who had given birth at Ipswich Hospital or been present at a birth at Ipswich Hospital as a birthing partner since 2013 was encouraged to complete the survey. The survey was advertised on Healthwatch Suffolk’s website and social media accounts (Twitter and Facebook). Partner organisations and members of Healthwatch Suffolk’s network raised awareness of this project by forwarding the URL link to the survey monkey questionnaire.

This project also received local press coverage in the East Anglian Daily Times and on the breakfast show of BBC Radio Suffolk. Respondents were invited to share their contact details if they were happy to participate in a follow-up telephone interview.

A member of the Research Team and members of Healthwatch Suffolk’s Community Development Team attended various events and locations (children’s centres, baby groups and hospital wards) across Suffolk in order to raise awareness of this project and increase the response rate. Data collection opened in October 2015 and closed on 31st January 2016.

All responses were analysed in an anonymous and confidential format. According to the Raosoft calculator Healthwatch Suffolk can claim that responses are representative of the population of Suffolk. However due to the split between respondent status (mums vs. birthing partners) Healthwatch Suffolk would encourage this statement to be interpreted with caution.

**The survey**

**Initial Contact**

This section consisted of the following three questions: (Both versions of the question are included if the wording differed on the version of the survey that the birthing partner received).

1. Were you offered a choice of birth plans? / Was your partner offered a choice of birth plans?
2. Did you get enough information from a midwife or doctor to help you decide where to have your baby?
3. Did you feel that the maternity staff involved you in the process?

**Antenatal Care**

This section consisted of the following fourteen questions:

4. During your antenatal check ups, were you given enough time to ask questions or discuss the pregnancy? / During your partner’s antenatal check-ups, were you given enough time to ask questions or discuss the pregnancy?
5. If you contacted a midwife, were you given the help you needed?
6. When you contacted a midwife, did you get a response as soon as you needed it?
7. Were you spoken to in a way you could understand?
8. Were you treated with kindness and understanding?
9. Did a midwife encourage you to make a birth plan? / Did a midwife encourage you and your partner to make a birth plan?
10. Were you given enough information about the sorts of emergency back-up that would be available if their chosen birth plan could not be followed?
11. Did a midwife give you enough information about different kinds of pain control you could have during labour, listing the effects they may have on you and your baby? / Did a midwife give you enough information about different kinds of pain control your partner could have during labour, listing the effects they may have on your partner and baby?
12. Did the midwife give you information on additional antenatal classes?
13. Did you feel antenatal classes equipped you for labour?
14. Did the classes cover the topics you wanted?
15. Did you have an opportunity to meet other pregnant women? / Did you have an opportunity to meet other fathers/birthing partners?
16. Were you given information on who to contact if you were concerned about your partner or baby?
17. Overall how would you rate the care received during your pregnancy? / Overall how would you rate the care received during your partner's pregnancy?

The birth

This section included the following eight questions;

18. When you arrived at the hospital, how long was it before you were assessed by a midwife or consultant? / When you arrived at the hospital with your partner, how long was it before she was assessed by a midwife or consultant?
19. During your labour and delivery, were you made welcome by the staff? / During your partner’s labour and delivery, were you made welcome by the staff?
20. Was there a member of staff available to help you at all times during your stay?
21. If there were any complications during the birth, was everything explained in a timely manner?
22. Did you have contact with your baby shortly after the birth?
23. During the birth, were you treated with dignity and respect?
24. If you had to stay in hospital overnight, was your given the option to stay with you? / If your partner had to stay in hospital overnight, were you given the option to stay with her?
25. Overall, how would you rate the care received during your labour and birth?

Section 4: The Neonatal Unit

This section included the following five questions;

26. Did your child go to the neonatal unit?
27. Did the midwife or consultant explain to you in an understandable and timely manner why your baby was being moved to the neonatal unit?
28. Once your baby was in the neonatal unit, how long did it take for a midwife or consultant to update you on the condition of your baby?
29. When your baby was in the neonatal unit, did you receive regular updates on the health of your baby?
30. Overall, how would you rate the care received while your baby was in the neonatal unit?

Section 5: Care at home

This section included the following five questions;

31. Were you given enough information about any emotional changes that your partner might experience after the birth?
32. Were you given enough information about your own emotional needs after the birth? For example, postnatal depression / Were you given enough information about your own emotional needs after the birth? For example, postnatal depression amongst fathers/partners.
33. Were you given advice on what to expect in the first few weeks after the birth, including parental advice and contact information if you had any concerns?
34. In the six weeks after the birth of your baby did you receive help and advice from health professionals about your baby’s health and progress?
35. Overall, how would you rate the care received once you returned home? Please remember that this relates to your personal care.
36. How do you think your experience of using the maternity pathway could have been improved in any way?
Demographics of respondents

In total Healthwatch Suffolk received 372 responses to our survey. Respondents who stated that they had given birth at or been present at a birth at a hospital that was not in Suffolk (n=6) had their responses removed before the commencement of the analysis. Additionally, incomplete responses (n=14) were not included in the analysis. In total 352 responses were included for analysis.

Just under half of all respondents, (42%, n=148) referred to experiences of the maternity pathway at Ipswich Hospital.

20% (n=70) of all survey respondents stated that they had given birth at Ipswich Hospital. These respondents will be referred to as ‘new mums’. 22% percent (n=78) of all survey respondents stated that they had been present at a birth at Ipswich Hospital. These respondents will be referred to as ‘birthing partners’.

Date of the birthing experience

Twelve percent (n=8) of mums stated that they had given birth at Ipswich Hospital in 2016, the majority of mums, 64% (n=45), stated that they had given birth in 2015. Just under one fifth of mums (17%, n=12) stated that they had given birth in 2014 and the remaining mums (7%, n=5), stated that they had given birth in 2013.

Birthing partners selected the year that they attended a birth at Ipswich Hospital. One percent (n=1) of birthing partners stated that they had been present at a birth at Ipswich Hospital in 2016, the majority of birthing partners, 85% (n=62), stated that they had been present at a birth at Ipswich Hospital in 2015. Ten percent (n=7) of birthing partners stated that they had been present at a birth at Ipswich Hospital in in 2014, 3% (n=2) stated that they had been present at a birth at Ipswich Hospital in 2013, and the remaining birthing partners (1%, n=1) stated that they had been present at a birth at Ipswich Hospital before 2013.

Gender

73 birthing partners and 68 mums responded to this question. 5 birthing partners and 2 mums skipped it. 89% of birthing partners (n=65) stated that they were male. 11% of birthing partners (n=8) stated that they were female. 100% of mums stated that they were female.
Age

All birthing partners and mums that responded to this question (n=71) and (n=68) respectively, stated that they were aged between 19 and 50 years of age. 14% of birthing partners (n=10) and 10% of mums (n=7) stated that they were aged between 19-25. 51% of birthing partners (n=36) and 78% of mums (n=53) stated that they were aged between 26-35. The remaining 35% of birthing partners (n=25) and 12% of mums (n=8) stated that they were aged between 36-50.
Ethnicity

70 birthing partners and 68 mums provided their ethnicity. 8 birthing partners and 2 mums skipped this question. The majority of birthing partners and mums (89%, n=62) and (87%, n=59) respectively, stated that their ethnicity was ‘White British’. The remaining birthing partners stated that they were, ‘White Irish’ (1%, n=1), ‘White Other’ (3%, n=2), ‘Black African’ (1%, n=1), ‘White & Black Caribbean’ (3%, n=2), ‘Indian’ (1%, n=1) and ‘Other Asian’ (1%, n=1). *Note* The total percentage is 99% due to exact percentages (1.43%) being rounded down to 1%.

1% of mums (n=1) stated that they were ‘Black British’, 3% of mums (n=2) of mums stated that they were ‘White other’, 6% of mums (n=4) stated that they were ‘White and Black Caribbean’, 1% of mums (n=1) stated that they were ‘other mixed’ and 1% of mums (n=1) stated that they preferred not to say. *Note* The total percentage is 99% due to exact percentages (1.43%) being rounded down to 1%.

Sexual Orientation

70 birthing partners and 67 mums provided their sexual orientation. 8 birthing partners and 3 mums skipped this question. All birthing partners selected either ‘heterosexual’, (96%, n=67), ‘Lesbian woman’, (1%, n=1) or ‘Bisexual’, (3%, n=2). 97% of mums (n=65) stated that they were heterosexual and 3% (n=3) of mums stated that they were a ‘lesbian woman’.

Faith

15 birthing partners and 24 mums provided a response to this question. 1 birthing partner stated ‘yes’ but did not provide any more detail. 2 birthing partners and 2 mums stated ‘catholic’, 7 birthing partners and 10 mums stated ‘Christian’, 1 birthing partner and 1 mum stated ‘Muslim’, 1 birthing partner stated ‘good and evil’ and 2 birthing partners and 11 mums stated ‘none’.

Disability

69 birthing partners and 68 mums provided their disability status. 9 birthing partners and 2 mums skipped this question. 97% of birthing partners (n=67) and 93% (n=63) stated that they did not have a disability, 1% (n=1) of birthing partners stated that they had a physical disability and 1% of birthing partners (n=1) stated that they had a mental health problem. 4% (n=3) of mums stated that they had a mental health problem, 3% (n=2) of mums stated that they had a learning difficulty such as dyslexia.
Your spotlight on local services
Section 1
Initial Contact: Choice or birth plans
Initial Contact - Choice of birth plans: 'Were you offered a choice of birth plans?'

Mums were asked to state whether they were offered a choice of birth plans. 68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it.

60% (n=41) of mums who gave birth at Ipswich Hospital stated that they were given a choice of birth plans, 31% (n=21) said no, 9% (n=6) said other. Alternative explanations were provided by six respondents; four respondents stated that they were consultant led which restricted their birthing options, one respondent stated that they opted for an elective caesarean section therefore this question was not applicable and the final respondent stated that their baby arrived prematurely by 6 weeks, therefore they did not get the chance to discuss birth plans with their midwife.

Birthing partners who were present at a birth at Ipswich Hospital were asked to state whether they were offered a choice of birth plans. 77 birthing partners responded to this, 1 skipped it. 70% (n=54) said yes, 27% (n=21) said no, 3% (n=2) said other: 'I don’t know' and 'requested no students - not given choice'

Information about birth plans: 'Did you get enough information from a midwife or doctor to help you decide where to have your baby?'

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 68% (n=47) of mums who gave birth at Ipswich Hospital stated that they had been given enough information from a midwife or doctor to help them decide where to have their baby, 32% (n=22) said no.

Birthing partners present at a birth at Ipswich Hospital were asked to state whether they and their partner received enough information from a midwife or doctor to help them decide where to have their baby. 75 partners answered this question and 3 skipped it. 65% (n=49) said yes, 35% (n=26) said no.
Initial Contact - Involvement in writing a birth plan: ‘Did you feel that the maternity staff involved you in the process?’

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 74% (n=51) of mums who gave birth at Ipswich Hospital stated that they felt that the maternity staff involved them, 26% (n=18) said no.

Birthing partners present at a birth at Ipswich Hospital were asked to state whether they and their partner got enough information from a midwife or doctor to help them decide where to have their baby. 76 partners answered this question and 3 skipped it, 81% (n=61) said yes, 19% (n=14) said no.

When I mentioned a birth plan, the midwife replied ‘why would you want a birth plan?’ and we were discouraged from making one. We wanted a home birth but were also discouraged about that and were given no choices but a hospital birth. The birth itself was a fantastic, faultless experience. - Birthing partner

Visit www.healthwatchsuffolk.co.uk to rate and review your care within NHS and social care services in Suffolk. Just one review can make a difference.
Your spotlight on local services
Section 2
ANTENATAL CARE
Antenatal Care - Time to ask questions during antenatal appointments: "During your antenatal check-ups, were you given enough time to ask questions or discuss the pregnancy?"

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 97% (n=67) of mums who gave birth at Ipswich Hospital stated that they were given enough time during antenatal appointments to ask questions, 3% (n=2) said no.

Birthing partners present at a birth at Ipswich Hospital were asked if they were given enough time during antenatal appointments to ask questions. 75 partners answered this question and 3 skipped it. 85% (n=62) said yes, 15% (n=11) said no.

Antenatal Care - Help from the midwife
'If you contacted a midwife, were you given the help you needed?'

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 81% (n=56) of mums who gave birth at Ipswich Hospital stated 'yes' they were given the help that they needed when they contacted a midwife, 3% (n=2) said no, 16% (n=11) stated that this question was non-applicable.

75 birthing partners who were present at a birth at Ipswich Hospital completed this question, 3 skipped it. 60% (n=45) stated 'yes', 5% (n=4) stated no, 35% (n=26) stated that this question was not applicable.

Antenatal Care - Response from the midwife
'When you contacted a midwife, did you get a response as soon as you needed it?'

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 68% (n=46) of mums who gave birth at Ipswich Hospital stated 'yes' they got a response as soon as they needed it when they contacted a midwife, 18% (n=12) said no, 14% (n=10) stated that this question was not applicable.

67 birthing partners who were present at a birth at Ipswich Hospital completed this question, 11 skipped it. 61% (n=41) stated 'yes', 12% (n=8) stated no, 27% (n=18) stated that this question was not applicable.

Antenatal Care - Language used
'Were you spoken to in a way you could understand?'

63 mums who gave birth at Ipswich Hospital completed this question, 7 skipped it. 82% (n=52) of mums who gave birth at Ipswich Hospital stated 'yes, always' they were spoken to in a way they could understand during their antenatal care, 18%
(n=11) said ‘yes but not always’, none said no. 70 birthing partners who were present at a birth at Ipswich Hospital completed this question, 8 skipped it. 80% (n=56) stated ‘yes, always’. 14% (n=10) stated ‘yes, but not always’ and 6% (n=4) said ‘no’.

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 85% (n=59) of mums who gave birth at Ipswich Hospital stated ‘yes, always’ they were treated with kindness and understanding during their antenatal care. 15% (n=10) said ‘yes but not always’, none said no.

74 birthing partners who were present at a birth at Ipswich Hospital completed this question, 4 skipped it. 87% (n=64) stated ‘yes, always’, 9% (n=7) stated ‘yes, but not always’, 4% (n=3) said ‘no’.

67 mums who gave birth at Ipswich Hospital completed this question, 3 skipped it. 48% (n=32) of mums who gave birth at Ipswich Hospital stated ‘yes’ they were given enough information about the sorts of emergency back-up that would be available if their chosen birth plan could not be followed, 52% (n=35) said no.

69 birthing partners who were present at a birth at Ipswich Hospital completed this question, 9 skipped it. 45% (n=31) stated ‘yes’, 55% (n=38) stated ‘no’.

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 56% (n=38) of mums who gave birth at Ipswich Hospital stated ‘yes’ their midwife encouraged them to make a birth plan during their antenatal care, 44% (n=30) said no.

73 birthing partners who were present at a birth at Ipswich Hospital completed this question, 5 skipped it. 60% (n=44) stated ‘yes’, 40% (n=29) stated ‘no’.

69 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 56% (n=38) of mums who gave birth at Ipswich Hospital stated ‘yes’ their midwife encouraged them to make a birth plan during their antenatal care, 44% (n=30) said no.

73 birthing partners who were present at a birth at Ipswich Hospital completed this question, 5 skipped it. 60% (n=44) stated ‘yes’, 40% (n=29) stated ‘no’.
Antenatal Care - Pain control: ‘Did a midwife give you enough information about different kinds of pain control your partner could have during labour, listing the effects they may have on you and your baby?’

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 68% (n=47) of mums who gave birth at Ipswich Hospital stated ‘yes’ they were given enough information about different kinds of pain control they could having during labour, listing potential side effects on them and their baby, 32% (n=22) said no.

74 birthing partners who were present at a birth at Ipswich Hospital completed this question, 4 skipped it. 73% (n=54) stated ‘yes’, 27% (n=20) stated ‘no’.

Antenatal Care - Information about antenatal classes: ‘Did the midwife give you information on or refer you to additional antenatal classes e.g. parent craft?’

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. 74% (n=51) of mums who gave birth at Ipswich Hospital stated ‘yes’ they were given information on additional antenatal classes, 26% (n=18) said no.

72 birthing partners who were present at a birth at Ipswich Hospital completed this question, 6 skipped it. 66% (n=47) stated ‘yes’, 34% (n=25) stated ‘no’.

Antenatal Care: - Usefulness of antenatal classes: ‘Did you feel antenatal classes equipped you for labour?’

56 mums who gave birth at Ipswich Hospital completed this question, 14 skipped it. 54% (n=30) of mums who gave birth at Ipswich Hospital stated ‘yes’ their antenatal classes equipped them for labour, 46% (n=26) said no.

59 birthing partners who were present at a birth at Ipswich Hospital completed this question, 19 skipped it. 63% (n=37) stated ‘yes’, 37% (n=22) stated ‘no’.

Antenatal Care - Topics within antenatal classes: ‘Did the classes cover the topics you wanted?’

56 mums who gave birth at Ipswich Hospital completed this question, 14 skipped it. 39% (n=22) of mums who gave birth at Ipswich Hospital stated ‘yes, always’, 36% (n=20) said ‘yes, but not always’ and 25% (n=14) said ‘no’ antenatal classes did not cover the topics they wanted.

58 birthing partners who were present at a birth at Ipswich Hospital completed this question, 20 skipped it. 52% (n=30) stated ‘yes, always’, 31% (n=18) said ‘yes, but not always’, 17% (n=10) stated ‘no’.
Antenatal Care - Opportunity to meet other mums/fathers: ‘Did you have an opportunity to meet other pregnant women?’

60 mums who gave birth at Ipswich Hospital completed this question, 10 skipped it. 68% (n=41) of mums who gave birth at Ipswich Hospital stated ‘yes’ and 32% (n=19) said ‘no’ they did not have an opportunity to meet other pregnant women.

62 birthing partners who were present at a birth at Ipswich Hospital completed this question, 16 skipped it. 70% (n=43) stated ‘yes’, 30% (n=19) stated ‘no’.

Antenatal Care: - Provision of contact information: ‘Were you given information on who to contact if you were concerned about your partner or baby?’

67 mums who gave birth at Ipswich Hospital completed this question, 3 skipped it. 88% (n=59) of mums who gave birth at Ipswich Hospital stated ‘yes’, 12% (n=8) said ‘no’ they were not given information on who to contact if they were concerned about themselves, their partner or their baby.

73 birthing partners who were present at a birth at Ipswich Hospital completed this question, 5 skipped it. 82% (n=60) stated ‘yes’, 18% (n=13) stated ‘no’.

Overall how would you rate the care received during your partner’s pregnancy?

- Mums’ Average rating of care during pregnancy: 8.28
- Birthing partner – Average rating of care during pregnancy: 8.11
Antenatal Care - Rating of care during pregnancy: ‘Overall how would you rate the care received during your partner’s pregnancy?’

69 mums who gave birth at Ipswich Hospital completed this question, 1 skipped it. The minimum rating was 3 (3%, n=2) and the maximum rating was 10 (30%, n=21). The average rating was 8.28.

76 birthing partners who were present at a birth at Ipswich Hospital completed this question, 2 skipped it. The minimum rating was 2 (1%, n=1), the maximum rating was 10 (24%, n=18). The average rating of care was 8.11. There was a lot of variance in the rating of care received during pregnancy.

We attended one day antenatal class, which included breathing techniques. Practised these up until my birth. When I was using them, the midwife told me to do the opposite which confused me. - Mother
Section 3

BIRTH
Birth - Waiting time on arrival: ‘When you arrived at the hospital with your partner, how long was it before she was assessed by a midwife or consultant?’

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 75 birthing partners who were present at a birth at Ipswich Hospital completed this question, 3 skipped it. The majority of mums (62%) and the majority of birthing partners (69%) stated that they/their partner was assessed by a midwife or consultant within 15 minutes of arriving at the hospital.

Birth - Welcome by the staff: ‘During your partner’s labour and delivery, were you made welcome by the staff?’

67 mums who gave birth at Ipswich Hospital completed this question, 3 skipped it. 98% (n=66) of mums who gave birth at Ipswich Hospital stated ‘yes’, 2% (n=1) said ‘no’ they were not made welcome by the staff during their labour and delivery.

75 birthing partners who were present at a birth at Ipswich Hospital completed this question, 3 skipped it. 93% (n=70) of birthing partners stated ‘yes’, 7% (n=5) said ‘no’ they were not made welcome by the staff during their labour and delivery.

Birth - Staffing: ‘Was there a member of staff available to help you at all times during your stay?’

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 87% (n=59) of mums who gave birth at Ipswich Hospital stated ‘yes’, 13% (n=9) said ‘no’ there was not a member of staff available to help them at all times during their stay.

75 birthing partners who were present at a birth at Ipswich Hospital completed this question, 3 skipped it. 84% (n=63) of birthing stated ‘yes’, 16% (n=12) said ‘no’ there was not a member of staff to help them at all times during their stay.

Birth - Complications: ‘If there were any complications during the birth, was everything explained in a timely manner?’

67 mums who gave birth at Ipswich Hospital completed this question, 3 skipped it. 54% (n=36) of mums who gave birth at Ipswich Hospital stated ‘yes’, 18% (n=12) said ‘no’, complications were not explained in a timely manner and 28% (n=19) said ‘n/a’.

75 birthing partners who were present at a birth at Ipswich Hospital completed this question, 3 skipped it. 60% (n=45) of birthing partners stated ‘yes’, 15% (n=11) said ‘no’, complications were not explained in a timely manner and 25% (n=19) said ‘n/a’.

Birth - Contact with baby: ‘Did you have contact with your baby shortly after the birth?’

67 mums who gave birth at Ipswich Hospital completed this question, 3 skipped it. 94% (n=63) of mums who gave birth at Ipswich Hospital stated ‘yes’, 6% (n=4) said ‘no’ they did not have contact
with their baby shortly after birth.

68 birthing partners who were present at a birth at Ipswich Hospital completed this question. 10 skipped it. 91% (n=62) of birthing partners stated ‘yes’, 9% (n=6) said ‘no’ there was not a member of staff to help them at all times during their stay.

**Birth - Treatment: ‘During the birth, were you treated with dignity and respect?’**

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 93% (n=63) of mums who gave birth at Ipswich Hospital stated ‘yes’, 7% (n=5) said ‘no’ they were not treated with dignity and respect during the birth.

75 birthing partners who were present at a birth at Ipswich Hospital completed this question, 3 skipped it. 96% (n=72) of birthing partners stated ‘yes’, 4% (n=3) said ‘no’ they were not treated with dignity and respect during the birth.

**Birth - Overnight stay: ‘If your partner had to stay in hospital overnight, were you given the option to stay with her?’**

65 mums who gave birth at Ipswich Hospital completed this question, 5 skipped it. 12% (n=8) of mums who gave birth at Ipswich Hospital stated ‘yes’ their partner was given the option to stay overnight with them, 52% (n=34) said ‘no, but I wanted to’, 25% said ‘no but I did not want them to’ and 11% (n=7) said other. Three respondents stated that they had to pay £100 to stay overnight.

70 birthing partners who were present at a birth at Ipswich Hospital completed this question, 8 skipped it. 23% (n=16) of birthing partners stated ‘yes’, 44% (n=31) said ‘no, but I wanted to’, 33% (n=23) said ‘no, but I didn’t want to’.
Birth - Rating of care during labour and birth: ‘Overall, how would you rate the care received during your labour and birth? Please remember that this relates to your personal care, not that of your partner’s. 1 = Extremely Dissatisfied 10 = Extremely Satisfied’

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it.

The minimum rating was 2 (n=1) and the maximum rating was 10 (n=19). The median rating was 9 and the average rating was 8.21.

77 birthing partners who were present at a birth at Ipswich Hospital completed this question, 1 skipped it. The minimum rating was 2 (n=1) and the maximum rating was 10 (n=22). The median rating was 9, and the average rating was 8.19.

I would have liked my mother to be offered to stay at the hospital with me the night of given birth for many reasons, one being that the baby went straight to intensive care, two being that it was my first time staying in hospital ever, three being all the emotions I had just gone through from the shock of an early labour, great amount of blood loss and just my general health. - Mother
Section 4

THE NEONATAL UNIT
Did your child go to the neonatal unit?

68 mums who gave birth at Ipswich Hospital completed this question, 2 skipped it. 16% (n=11) of mums who gave birth at Ipswich Hospital stated ‘yes’, their child went to the neonatal unit, 84% (n=57) said ‘no’ their child did not go the neonatal unit.

76 birthing partners who were present at a birth at Ipswich Hospital completed this question, 2 skipped it. 21% (n=16) said yes, 79% (n=60) said ‘no’ their child did not go the neonatal unit.

Did the midwife or consultant explain to you in an understandable and timely manner why your baby was being moved to the neonatal unit?

Every mum (n=11) who stated that their baby went to the neonatal unit at Ipswich Hospital, answered this question, 59 skipped it. 82% (n=9) said yes, the midwife or consultant explained to them in an understandable and timely manner, why their baby was being moved to the neonatal unit. None said no, whilst 18% (n=2) said there wasn’t time to explain.

11 of the 16 birthing partners who stated that their baby went to the neonatal unit answered this question. 72% (n=8) said yes, the midwife or consultant explained to them in an understandable and timely manner why their baby was being moved to the neonatal unit. 9% (n=1) said no, whilst 18% (n=2) said there wasn’t time to explain.

We received all the care we needed. We’re quite relaxed about issues, therefore went with the flow. Any questions we had were answered. Our midwife, was excellent and made me feel involved from the start. – Birthing partner
Once your baby was in the neonatal unit, how long did it take for a midwife or consultant to update you on the condition of your baby?

- 0-15 minutes: 42% (n=5)
- 15-30 minutes: 25% (n=3)
- 30-45 minutes: 8% (n=1)
- 45-60 minutes: 0% (n=0)
- Over 60 minutes: 25% (n=3)

11 mums stated that their baby went to the neonatal unit at Ipswich Hospital. Of these 11 respondents, they all provided an answer to this question with responses as indicated below.

- 0-15 minutes - 45% (n=5)
- 15-30 minutes - 18% (n=2)
- 30-45 minutes - 9% (n=1)
- 45-60 minutes - 9% (n=1)
- Over 60 minutes - 18% (n=2)

12 birthing partners answered this question.

- 0-15 minutes - 45% (n=5)
- 15-30 minutes - 18% (n=2)
- 30-45 minutes - 9% (n=1)
- 45-60 minutes - 9% (n=1)
- Over 60 minutes - 18% (n=3)

Just under half of mums and birthing partners stated that they were given an update of their baby’s condition within 0-15 minutes. 18% (n=2) and 25% (n=3) stated that it took over 1 hour to get an update from the neonatal unit.

When your baby was in the neonatal unit, did you receive regular updates on the health of your baby?

Every mum (n=11) who stated that their baby went to the neonatal unit at Ipswich Hospital answered this question, 59 skipped it. 55% (n=6) said ‘yes, often’, 18% (n=2) said ‘yes, but would have liked more’, 27% (n=3) said ‘no’, they did not receive regular updates on the health of their baby when their baby was in the neonatal unit at Ipswich Hospital.

12 birthing partners answered this question.

- 75% (n=9) said ‘yes, often’, 17% (n=2) said ‘yes but I would have liked more’, 8% (n=1) said ‘no’.

Birthing partners

Mums

Once your baby was in the neonatal unit, how long did it take for a midwife or consultant to update you on the condition of your baby?
Rating of care received

‘Overall, how would you rate the care received while your baby was in the neonatal unit?’ Every mum (n=11) who stated that their baby went to the neonatal unit at Ipswich Hospital answered this question, 59 skipped it. The minimum rating of care was 3 (9%, n=1), the maximum rating of care was 10 (36%, n=4). The median rating of care was 9, and the mean rating of care received whilst in the neonatal ward was 7.82.

12 birthing partners answered this question, 59 skipped it. The minimum rating of care was 6, (n=1) the maximum rating of care was 10 (n=5, 42%). The median rating of care was 9, and the mean rating of care received whilst in the neonatal ward was 8.92.
Section 5
Care at home
Were you given enough information about any emotional changes that your partner might experience after the birth?

65 mums completed this question, 5 skipped it. 51% (n=33) said ‘yes’ they were given enough information about any emotional changes that their partner might experience after the birth, 49% (n=32) said ‘no’, they were not given enough information about any emotional changes that their partner might experience after the birth.

75 birthing partners answered this question, 3 skipped it. 47% (n=35) said ‘yes, often’, 53% (n=40) said ‘no’ they were not given enough information about any emotional changes that their partner might experience after the birth.

A slightly higher percentage of birthing partners stated that they were not given enough information about their own emotional needs after the birth.

Were you given enough information about your own emotional needs after the birth? For example, postnatal depression among partners/fathers?

64 mums completed this question, 6 skipped it. 36% (n=23) said ‘yes’ they were given enough information about their own emotional needs after the birth such as postnatal depression, 64% (n=41) said ‘no’, they were not given enough information about their own emotional needs after the birth such as postnatal depression.

75 birthing partners answered this question, 3 skipped it. 32% (n=24) said yes, often, 68% (n=51) said ‘no’ they were not given enough information about their own emotional needs after the birth e.g. postnatal depression amongst partners/fathers.

A slightly higher percentage of birthing partners stated that they were not given enough information about their own emotional needs after the birth.

Were you given advice on what to expect in the first few weeks after the birth, including parental advice and contact information if you had any concerns?

64 mums completed this question, 6 skipped it. 77% (n=49) said ‘yes’ they were given advice on what to expect in the first few weeks after the birth, including parental advice and contact information if they had any concerns, 23% (n=15) said ‘no’, they were not.

73 birthing partners completed this question, 5 skipped it. 64% (n=47) said ‘yes’ advice on what to expect in the first few weeks after the birth, including parental advice and contact information if they had any concerns, 36% (n=26) said ‘no’, they were not given enough advice on what to expect in the first few weeks after the birth.

A higher percentage of birthing partners stated that they were not given enough advice on what to expect in the first few weeks after the birth.
In the six weeks after the birth of your baby did you receive help and advice from health professionals about your baby’s health and progress?

63 mums completed this question, 7 skipped it. 95% (n=60) said ‘yes’ they received help and advice from health professionals about their baby’s health and progress in the six weeks after their birth. 5% (n=3) said ‘no’, they did not receive help and advice from health professionals about their baby’s health and progress.

72 birthing partners completed this question, 6 skipped it. 92% (n=66) said ‘yes’ advice on what to expect in the first few weeks after the birth, including parental advice and contact information if they had any concerns, 8% (n=6) said ‘no’, they did not receive help and advice from health professionals about their baby’s health and progress.

A higher percentage of birthing partners stated they did not receive help and advice from health professionals about their baby’s health and progress.

Overall, how would you rate the care received once you returned home? Please remember that this relates to your personal care.

62 mums completed this question, 8 skipped it. This question was rated on a scale of 1 (Extremely Dissatisfied) to 10 (Extremely Satisfied). The minimum rating of care was 3 (5%, n=3), the maximum rating of care was 10 (16%, n=10). The median rating of care at home was 7.5, and the mean was 7.35.

71 birthing partners completed this question, 7 skipped it. Overall the average rating was 7.5, ranging from 2 (3%, n=2) to 10 (25%, n=18). The median rating of care was 8, and the mean rating of care was 7.48.
Telephone interviews

Due to resources the Research Team could not contact all respondents who provided their contact details.

Respondents were invited to attend a follow-up interview via a process of random selection. Unfortunately, only three birthing partners responded to our invitation and took part in an interview.

One respondent stated that they would have liked more information about breastfeeding. Two respondents stated that they would have liked more support and information whilst they were at home after the birth.

All three respondents stated that they would have liked more information about their own emotional health after the birth of their child. Only one respondent stated that they were given the chance to meet other prospective fathers, through antenatal classes run by Ipswich Hospital. All three respondents stated that they felt they would have benefited from receiving written information during their partner’s antenatal appointments about emotional changes after the birth of their bay.

More information post-natally (e.g. give information about male post-natal depression) - Birthing partner

The care throughout childbirth and pregnancy was faultless. The only criticism was that we were given a leaflet on leaving saying that we could contact the maternity ward up to the baby being 28 days old. However, when we did this when the baby was very poorly and ended up in PAU, the maternity staff were not at all interested and told us to call the GP even though it was a Saturday. - Birthing partner
Your spotlight on local services
The majority of mums and birthing partners responded rated the care that they received during the birth as 8 or above. There were a small number of respondents who rated care that they received as <5. Unfortunately, the majority of these respondents did not share their contact details. All respondents who provided their contact details were contacted, however respondents did not respond to the invitation to take part in a follow up interview. Therefore, the Research Team was unable to explore why the rating was below 5.

It is reassuring to read that an overwhelmingly high proportion of mums (95%, n=60) and birthing partners (92%, n=66) stated that they received help and advice from health professionals and their baby’s health and progress in the six weeks following the birth of their baby. The average rating of care received once each respondent turned home was 7.35 for mums and 7.48 for birthing partners.

Recommendation 1 - Antenatal appointments: More patient involvement with birth plan development

Based on the findings on this report Healthwatch Suffolk highlights a potential need for Ipswich Hospital to review the structure of antenatal appointments.

Findings from this report suggest that pregnant women and birthing partners would value more opportunities for discussions about the development of a birth plan and more opportunities for pregnant women and birthing partners to ask questions about the pregnancy and birth of their baby.

More specifically, Healthwatch Suffolk highlights the need for midwives at Ipswich Hospital to ensure that every pregnant woman and their chosen birthing partner feels involved in the process of preparing a birth plan.

32% (n=22) of mums and 35% (n=26) of birthing partners stated that they did not get enough information from a midwife or doctor to help them decide where to have their baby and 26% (n=18) of mums and 19% (n=14) of birthing partners stated that they did not feel that the maternity staff involved them in the process of writing their birth plan.

Some respondents stated that they were not given information about other methods of giving birth e.g. home births. Additionally, some respondents specifically stated that more involvement in developing a birth plan for the birth of their baby would have improved their experience of using the maternity pathway at Ipswich Hospital.

Further evidence for the need to review the patient’s involvement in their birth plan was provided by the finding that 44% (n=30) of mums and 40% (n=29) of birthing partners were not encouraged by their midwife to make a birth plan.

This finding contradicts the message that Ipswich Hospital portrays on its website, which reads as follows: ‘We will help you to make informed decisions about your care so that you and your family feel confident about your pregnancy, birth and parenting your new baby. Wherever you choose to have your baby we want you to have the best birth experience.’

Unfortunately, the majority of respondents did not provide contact details therefore the Research Team were unable to explore the perceived reasons for the lack of encouragement to make a birth plan. Those who did share contact details did not follow up the invitation to take part in an interview.

All midwives should openly discuss the pregnant
women's options for where to give birth. Indeed, the pregnant woman and their birthing partner should both be involved in the development of the birth plan.

Recommendation 2 - Antenatal appointments: Effective communication and methods of contact between patient, partner and midwife.

26% (n=18) of mums and 15% (n=11) of birthing partners stated that they were not given enough time to ask questions or discuss the pregnancy during antenatal appointments. Given the importance of birthing partner/father involvement during the birth it is vital that pregnant women and birthing partners are given adequate time during antenatal appointments and effective methods outside antenatal appointments to ask questions about the impending birth of their baby.

It is reassuring to read that 88% (n=59) of mums and 82% (n=60) of birthing partners stated that they were given information on who to contact if they were concerned about their partner or baby. However, 12% (n=8) of mums and 18% (n=13) of birthing partners stated that they were not given this information.

In addition to issues around lack of provision of contact details, 3% (n=2) of mums and 5% (n=4) of birthing partners stated that they were not given the help that they needed when they did contact a midwife. 18% (n=12) of mums and 12% (n=8) stated no they did not get a response from a midwife as soon as they needed it.

Considering some respondents stated that they attempted to contact midwives with concerns about the health of their baby, it is worrying that such a high number of respondents stated that they did not feel that they received help from a midwife in a timely manner. Due to potential health implications that delayed midwife response can cause, Healthwatch Suffolk recommends that the method of communication used between patient, partner and midwives may require clarification.

For example, it may be of benefit to future patients for the midwife to explain how to get in contact with the appropriate teams in certain circumstances and what steps to take should they struggle to get a response. Midwives should clarify the expected response time for contacting midwives during pregnancy so that patients and partners are clear of the alternatives to contact. If midwives already do this for every patient the findings may highlight the need for these messages to be tailored so that each patient understands the information that they are being given.

Recommendation 3 - Appropriate use of language during midwife patient and partner interactions.

18% (n=11) of mums and 4% (n=10) of birthing partners stated they midwives sometimes spoke to them in a way that they could understand but not all the time. 6% (n=4) of birthing partners said that they were not spoken to in a way that they could understand.

Efforts should be made to ensure that verbal communication between health professionals (midwives, doctors and consultants) and patients is patient-friendly and the health professional should ask every patient to confirm that they have understood what they have said.

Recommendation 4 - Consistent high level of care provision between patient, birthing partner and midwife.

Overall the majority of respondents stated that they were treated with kindness and understanding during the birth of their baby, however 15% (n=10) of mums and 9% (n=7) of birthing partners said that they were not always treated with kindness and respect and 4% (n=3) of birthing partners stated that they were not treated with kindness and understanding at all.

This finding raises the question of what factors caused the inconsistencies in experience captured by the ‘yes, but not always’. It is a possibility that this response may have been explained by staff change over or a change in the message that was being delivered/situation that the message was being communicated in.

Reassuringly 93% (n=63) of mums and 96% (n=72) of birthing partners stated that they were treated with dignity and respect during the birth of their baby. Such a high percentage reflects the high standard of care provided by the maternity staff at Ipswich Hospital. However, 7% (n=5) of mums and 4% (n=3) of birthing partners stated they were not treated with dignity and respect.
Although these percentages are considered to be of statistically low value, it is important to remember that each statistic represents an individual and an individual’s negative experience of birth can have long-lasting profound effects on the mother, baby and partner.

Healthwatch Suffolk recommends that midwives at Ipswich Hospital continue to treat all patients with kindness and understanding at all times during the maternity pathway, with an additional awareness on delivering the same level of kindness and understanding when interacting with birthing partners too.

**Recommendation 5 - Appropriate and adequate provision of information.**

52% (n=35) of mums and 55% (n=38) stated ‘no’ they were not given enough information about the sorts of emergency back-up that would be available if their chosen birth plan could not be followed. This finding highlights a need for more information to be provided to maternity patients involving the potential emergency back-up situations that may be required.

32% (n=22) of mums and 27% (n=20) of birthing partners stated that the midwife did not give them enough information about different kinds of pain control they/their partner could have during labour, listing the effects they may have on themselves/their partner and their baby. It is a surprise that almost a third of mums and birthing partners were not given information about the different kinds of pain control options were available to them.

27% (n=18) of mums and 34% (n=25) of birthing partners stated ‘no’ their midwife did not refer them to antenatal classes. Some respondents were not first time parents and a number of respondents stated that they chose not to go to antenatal classes because they had already been when they were pregnant with their first child. It is assumed that this may have affected the number of respondents who were offered antenatal classes by the midwife, but the exact reasons for the entire sample that stated ‘no’ is unknown.

There should be a fine balance between midwives providing enough information and allowing enough time for prospective mums and partners to be able to ask questions during antenatal appointments.

**Recommendation 6: Antenatal classes; Appropriateness of content.**

Responses to Healthwatch Suffolk’s survey found that 46% (n=26) of mums and 37% (n=22) of birthing partners stated ‘no’ they did not feel that antenatal classes equipped them for labour. 36% (n=20) of mums and 31% (n=18) of birthing partners said that antenatal classes run by Ipswich Hospital did not always cover the topics that they wanted. Further exploration is needed to identify which topics patients would like to be included within the antenatal class structure and content.

Given that most patients are only provided with one free session of antenatal classes it is an important opportunity to answer questions and provide relevant information about the birth of their baby, particularly for birthing partners who may not be present at every routine antenatal appointment during the pregnancy. It has been repeatedly found that even where fathers were minimally prepared for the birth of their baby, fathers and mums show high levels of satisfaction with their experience (Chan & Paterson-Brown, 2002).

As a result, antenatal classes run by the hospital should reflect the needs of the patients and partners attending. Importantly, antenatal classes should include education and support about breastfeeding tailored for expectant fathers/parents as tailored education has been shown to improve breastfeeding rates (Maycock et al, 2013).

**Recommendation 7 - Social interaction for birthing partners/new parents.**

Just under 1/3 of mums (32%, n=19) and 1/3 of birthing partners (30%, n=19) stated that they were not given the opportunity to meet other pregnant women/fathers/partners. Adequate social support is an important factor for maintaining good psychological health after the birth of a baby therefore Healthwatch Suffolk would encourage Ipswich Hospital to work with relevant third sector organisations to scope the potential development of a social club or an interactive platform, where expectant fathers/parents can network and connect.
Recommendation 8 - Overnight stays: More flexibility and clarity needed

Responses to this survey provide substantial evidence for the need for more flexibility regarding overnight stays at hospital for birthing partners. Over half of mums (52%, n=34) said they wanted their partner to stay overnight with them but they were not given the option for them to stay. Almost half of birthing partners (44%, n=31) stated that they would have liked to stay overnight but were not given the option to.

A study in 2012 found that allowing a partner to stay overnight had the potential to reduce the workload of midwives, as the father helped his partner with the baby care (RCOM, 2012). It is also stated within the literature this flexibility around birthing partners staying overnight would encourage and allow new fathers/parents to bond with their infant and to be a “visible parent” (RCOM, 2012).

A scheme called ‘Partners Staying Overnight’ was introduced at The Royal United Hospital in Bath, which provides a very good example of how a maternity unit can involve fathers and birthing partners in the period just after the birth of their baby. The published paper states that initially there were valid concerns from staff, such as that having the fathers and birthing partners on the ward for 12 hours a day might put additional stress on maternity ward staff. However, it was found that having fathers/birthing partners around eased the workload on midwives because mums had their partners to help them (RCOM, 2012).

Considering the evidence from the literature and the high percentage of mums and birthing partners who felt they were not given the option to stay overnight at Ipswich Hospital, Healthwatch Suffolk highlights the following need.

Heads of Ipswich Hospital maternity wards and the relevant authoritative figures at the hospital are advised to introduce more flexibility around overnight stays for birthing partners, once a new mum has just given birth. Responses to this survey suggest flexibility is required when mums give birth during the night, or outside of visiting hours.

An extension of this policy may also be beneficial for mums and birthing partners who are being induced in the early hours of the evening, which may prevent the possibility of their partner from being made to leave and potentially missing the birth of their baby, or being unable to provide valuable support to their partner during the lead up to and during the actual birth.

Recommendation 9 - Neonatal unit: Review of process followed to update parents on the health of their baby.

Overall the respondents painted a positive picture of using the neonatal unit at Ipswich Hospital. The majority of mums 82% (n=9) and birthing partners 72% (n=8) stated that the midwife or consultant explained to them why their baby was being moved to the neonatal unit in an understandable and timely manner. The rest of the mums who completed this question (18%, n=2) and the rest of the birthing partners who completed this (18%, n=2) stated and acknowledged that there was not enough time to explain.

One birthing partner stated that the midwife or consultant did not explain to them in an understandable and timely manner why their baby was being moved to the neonatal unit. In regards to the length of time that mums and birthing partners had to wait for an update on the health of their baby in the neonatal unit, the majority of respondents stated that they did not have to wait longer than 15 minutes.

More specifically, just under half of all respondents stated that they were given an update of their baby’s condition within 0-15 minutes. Worryingly 18% (n=2) of mums and 25% (n=3) of birthing partners stated that it took over 1 hour to get an update from the neonatal unit.

Despite 75% (n=9) of mums and 55% (n=6) of birthing partners stating that they received regular updates, 17% (n=2) of mums and 18% (n=2) of partners said they would have liked more. Worryingly 27% (n=3) of mums and 8% (n=1) of birthing partners said ‘no’ they did not receive regular updates on the health of their baby when their baby was in the neonatal unit at Ipswich Hospital.

Despite this being a very low number, the psychological impact of not receiving updates on your baby’s health in the neonatal unit for a new parent following a potentially traumatic birth must not be underestimated.

In light of these findings Healthwatch Suffolk recommends that Ipswich Hospital reviews the process of informing new mums and birthing
partners about the health status of their baby whilst they are on the neonatal unit.

Most respondents stated that they had to approach a member of staff and pro-actively asked for health status of their baby. All respondents stated the midwife told them that their baby was well.

New parents who have just been through the birth of their baby and who are dealing with worry of the removal of their baby into the neonatal unit may not be in a physically or psychologically fit state to ‘chase’ updates about their baby.

Healthwatch Suffolk would encourage staff at Ipswich Hospital to endeavour to inform parents of the status of their baby as soon as possible and as often as possible. This is likely to positively impact the whole birth experience and the recovery period for both parents through reduced anxiety levels.

**Recommendation 10 - Information about potential emotional changes post birth.**

The responses paint a clear picture about the need for more information about potential emotional changes in both new mums and birthing partner, post birth.

Almost half of mums (49%, n=32) and over half of birthing partners (53%, n=40) said that they were not given enough information about potential emotional changes that their partner might experience after the birth. 64% (n=41) of mums and 68% (n=51) of birthing partners stated that they were not given enough information about potential emotional changes that they might experience themselves after the birth of their baby.

National guidance published by the Royal College of Midwives (2012) highlights the importance of raising awareness of, and being alert to, the risks that are recognised to pre-dispose fathers to postnatal depression and post-traumatic stress. Guidance suggests that there is a national need to develop clear postnatal referral pathways for both parents if post-traumatic stress or postnatal depression is suspected or identified (RCOM, 2012).

Additionally, there may be a need to provide more information about potential expected emotional changes, particularly in the first few weeks after the birth of the baby. Nearly a quarter of mums (23%, n=15) and over 1/3 (36%, n=26) of birthing partners felt that they were not given advice on what to expect in the first few weeks after the birth.

Healthwatch Suffolk recommends that Ipswich Hospital scopes the feasibility of providing new parent(s) with an information booklet, with information about potential emotional changes in themselves and their partner. This should be re-touched upon after the birth with a follow-up once baby, mum and partner are back home.

**Conclusion**

This piece of work listened to mums and birthing partners who had used the maternity pathway at Ipswich Hospital. Healthwatch Suffolk and Ipswich Hospital acknowledged the importance of engaging with and listening to birthing partners, as they are often a voice that is seldom heard.

The evidence suggests that expectant fathers and birthing partners can be influential advocates for breastfeeding, by playing a critical role in encouraging a mother to breastfeed the newborn infant (Wolfberg et al. 2004). Considering the health benefits that breastfeeding provides for both baby and mum, it is vital that fathers and birthing partners are supported and involved throughout the maternity process. Particularly due to the fact that breast fed babies are less likely to develop obesity later in their lives vs. babies who have been formula fed (Armstrong et al, 2002).

Expectant fathers and birthing partners need to be included in all aspects of maternity care and be offered opportunities to discuss their feelings and any fears they may have (RCOM, 2012).

Healthwatch Suffolk highlights some relevant evidence from the literature in light of taking recommendations forward with Ipswich Hospital, with the aim of improving birthing partners’ experiences of using the maternity pathway.

"Maternity services should want to take every opportunity to provide relevant up-to-date information, guidance and support to enable fathers to be actively involved in the maternity care of their partner and infant. This will promote a positive pregnancy, birth and parenting experience for both the mother and father (RCOM, 2012)." It is known that when maternity
professionals make fathers/partners feel welcome and involved during the pregnancy birth and after the birth, there are family wide benefits for mum, partner and baby (RCOM, 2012).

In conclusion, Healthwatch Suffolk would like to recognise the overwhelmingly positive experience stated by respondents. Provision of care and treatment at all stages on the maternity pathway was rated positively and the majority of respondents stated high levels of satisfaction with their experiences at Ipswich Hospital.

Healthwatch Suffolk acknowledges the complex nature of providing a health and social care service to a vast number of patients. We acknowledge the important work and the level of care that all Ipswich Hospital maternity ward staff provide on a regular basis. However, at times the variety of experience of giving birth and being at a birth at Ipswich Hospital does highlight some areas where improvements have the potential to greatly improve patient experience.

Healthwatch Suffolk looks forward to working with Ipswich Hospital in the future to take these recommendations forward.
Your spotlight on local services
References


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If you require this report in an alternative format please contact us at the address above. We will be happy to help.

This report is publicly available on our website and has been distributed to the Ipswich Hospital NHS Trust for its response to the recommendations as well as other key health bodies and regulators.

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