



Healthwatch Halton

Maternity Matters report

April 2021

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Introduction:

Healthwatch Halton is the independent voice of the public in health and social care services. We gather feedback from members of the public using health and social care services about their experiences. The feedback that we gather is shared with service providers and commissioners in order to improve health and social care services.

On this occasion we have focused on maternity services and the experiences of women from Halton who have given birth in the past 12 -18 months.

The project looked at the information and support that women were given before, during and after the births of their babies.

Halton differs from many other areas in the provision of Maternity Services in that Halton has a standalone Community Midwifery Service provided by Bridgewater Community Healthcare NHS Foundation Trust.

Hospital options available for birth included Warrington Hospital, Whiston Hospital, Liverpool Women's Hospital and Countess of Chester.

What we did

With the support of NHS Halton CCG we designed an online survey covering all stages of pregnancy. The survey launched on 3 December 2020 and ran until 5 February 2021. The survey was promoted widely across our social media channels and a wide range of other local networks. Support in promoting the survey was given by all our local NHS Trusts and a number of local third sector organisations and groups.

A total of 132 responses were received. In addition, we spoke directly with 10 mums who had offered to give more details on their maternity experiences. We were very much overwhelmed by the number of women who offered to tell their us more about their experiences and just wish we could have been able to include stories from all 64.

Of the 10 maternity experiences, 4 cover Whiston Hospital and a further 2 each for Warrington Hospital, The Countess of Chester Hospital and The Liverpool Women's Hospital.



Maternity Matters summary



132 women took part in the survey



52% were first-time mums



84 births were since the start of the pandemic



89% of women had downloaded maternity related apps



Almost 1 in 3 women felt appointments weren't always at convenient times



46% of women had seen 4 or more midwives during their pregnancy



78% felt health professionals were supportive



70% of partners couldn't attend antenatal appointments due to Covid restrictions



27% didn't feel listened to when raising a concern during labour and birth

Report Recommendations

Continuity of Carer - Ensure that women have access to a consistent service at times that suit them

While we realise it may not always be possible to have the same midwife before and after the birth, or for the duration of labour, many women felt seeing three or more midwives didn't work as well.

Some expectant mums told us they had to keep telling the same story to different people, which could be distressing for some.

Almost 1 in 3 felt they didn't always have appointments at times that were convenient for them. Feedback highlighted that many would find having midwife appointments outside of normal 9-5 office hours beneficial to women and their birth partners, to fit in with work commitments.

With 90% of women saying it was important to them to see the same midwife during pregnancy, we recommend, that wherever possible, there is a named midwife and that the same community midwife is in place before and after the birth, if that suits the woman.

We also recommend that services consider more flexible appointment times, possibly with extended hours so that patients and partners can attend without impacting their work schedule.

Online Support Apps - Our survey highlighted a high use of online apps and information during pregnancy with 95% of expectant mums saying they used the internet to find pregnancy related information and 89% downloading and using pregnancy related apps.

Given the very high rate of use of such services, we believe it would be useful to carry our further engagement with women to ensure that health professionals can guide women to 'approved' apps or trusted sources of online information and advice.

Find the time - Many women commented that they felt staff were sometimes so busy they were unable to ask questions or get the support they needed. This was a recurring theme covering midwife appointments through to hospital births and postnatal care.

We recommend that services provide clear and easy access to information and support for patients at all times. Patients should not feel they are unable to ask questions due to time constraints or staff shortages.

Manage expectations - Ensure all communication is open and transparent, particularly when discussing birth plans and options

Birth Plans - It was apparent from the responses to the surveys, that many women felt that birth plans were 'pointless' and their notes were often not looked at by medical professionals.

There were also concerns around important information and choices being put in notes which were not always read by medical staff.

For those choosing a home birth, they should be made aware that this is only possible if there are midwives available to attend. Processes should be put in place for all medical staff to have easy access and time to read patients notes, which can have specific wishes or concerns highlighted so that they are not missed.

Group B Streptococcus information

We are concerned to note that over 40% of women didn't receive or couldn't remember receiving this information. We recommend that this patient information leaflet is provided to all women during their pregnancy as a matter of routine.

Suggestions...

Further Engagement

Over 60% of participants provided their contact details and stated they would be happy to get involved with further engagement around their maternity experience.

We would like to recommend some areas from the survey that would benefit from further engagement work:

Online Support - As recommended above, we believe it would be useful to carry out further engagement with women to ensure that health professionals can guide women to 'approved' apps or trusted sources of online information and advice.

Many respondents use apps, on-line searches and YouTube for information and advice. This is an uncontrolled source and there should be NHS recommended or supported on-line advice available.

This would also mean that expectant or new parents have easy access to reliable information that can sign post to resources or groups.

Offline support/Digitally excluded - There also needs to be further work carried out to better understand the needs of those who don't have regular access to the internet or prefer to use other sources of information.

After care and information - Even allowing for restrictions in place due to the Covid-19 pandemic, it seems from narrative comments within the survey that many parents felt abandoned after the birth of their baby.

Maternity wards are often very busy, and many mums felt they were leaving hospital without establishing breast feeding, and not sure what would happen next or what to expect next especially around healing and general care.

We suggest that engagement is carried out around how best to provide the information needed on discharge from hospital to patients.

Postnatal care - The 'Better Births'¹ report called for improvements to postnatal care, and patient feedback from our survey shows that there still remains some dissatisfaction with the service. While many respondents highlighted the pandemic as the main reason for a lack of postnatal support, we'd like to see further engagement carried out to review the levels of postnatal support to women in Halton.

'A growing body of evidence shows that better outcomes and experiences, as well as reduced health inequalities, are possible when people have the opportunity to actively shape their care. Personalised care also has a positive impact on health inequalities, taking account of people's different backgrounds and preferences, with people from lower socio-economic groups able to benefit the most from personalised care. Therefore, personalisation, based on a robust and continued assessment of an individual's circumstances and choices and, based on a relationship of trust between the woman and her clinicians, is a prerequisite for the safest care.'

'Better Births - Four Years On' - A review of progress

<https://www.england.nhs.uk/wp-content/uploads/2020/03/better-births-four-years-on-progress-report.pdf>

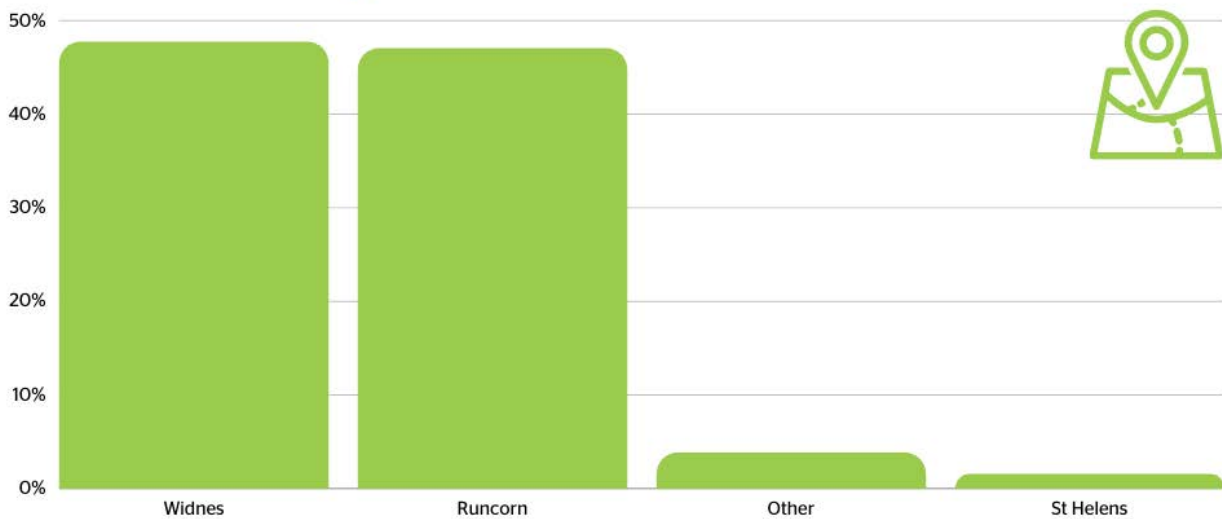
¹ <https://www.england.nhs.uk/wp-content/uploads/2016/02/national-maternity-review-report.pdf>

Feedback and Findings

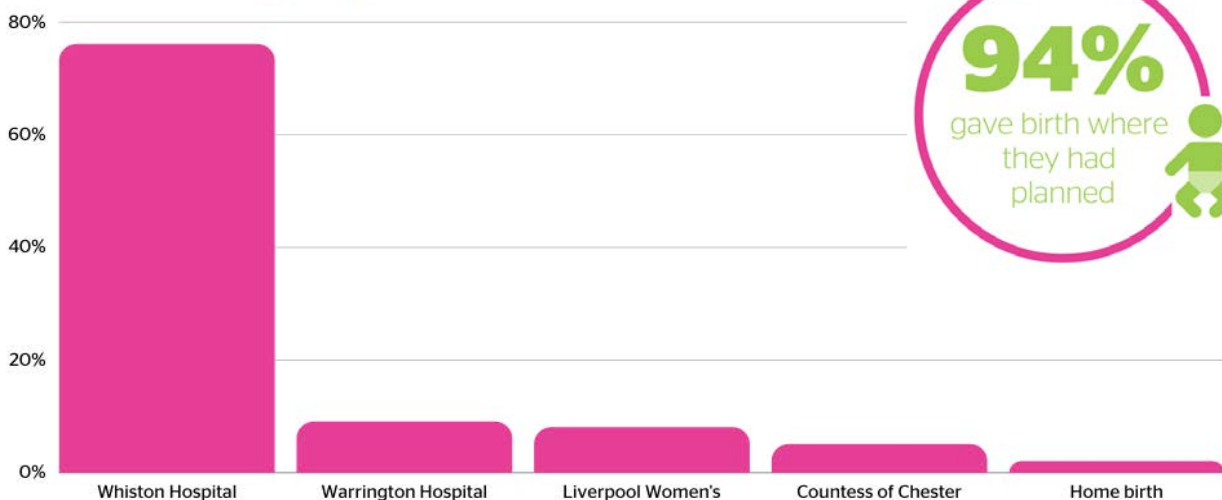
Context



Which area do you live in?



Where did you give birth?



Are you a first time mum?



Yes
52%

No
48%

There were 132 respondents to our survey. 70% of participants were aged 25-34 years old, 17% were in the 35-44 age group with another 12% aged 18-24. One respondent was in the 45+ age group.

48% said they lived in Widnes, 47% in Runcorn, 2% lived in St Helens and 3% in other surrounding areas (Cronton, Helsby, Huyton, Knowsley and Prescot).

98% identified as White British, 1% as Asian or Asian British - Indian, with 1% preferring not to say.

76% of participants told us they gave birth at Whiston Hospital. 9% gave birth at Warrington Hospital, 8% at Liverpool Women's Hospital, 5% at the Countess of Chester and 2% had home births.

94% of respondents gave birth where they had originally planned to. One mother explained her reason for choice saying, *'I birthed here previously and was happy with the care so re-attended'*.

Some women who didn't give birth where they had originally planned told us they had opted for homebirths as their preference. One respondent told us: *'I had a home birth planned but during the last 3 weeks of my pregnancy there were constant issues with staff. There were never any midwives on call. When I went into labour there were no midwives on call, so I had to go to Whiston Hospital'*.

Another woman explained, *'I planned a home birth, my midwife was supportive, but the consultants were very negative. They made me have scans every fortnight and tried to persuade me against it at every turn. At 38 weeks I had a scan and they claimed my baby "would be lucky to be 5lbs", despite 2 weeks before his estimated weight was 6lbs. I was sent to the consultant who told me I would be irresponsible to birth at home and my baby would probably die.'*

Another respondent had planned a home birth saying, *'I wanted a homebirth got refused right at end so went to the NEST at Warrington Hospital'*.

'The plan was to give birth at home but for medical reasons I was unable to.'

One mother, who hadn't intended to give birth at home, told us, *'It was not a planned home birth, a very, very, quick labour assisted by ambulance'*.

Initial bookings

Halton Midwifery Services offer an 'Early Bird' first antenatal appointment for mums to be.

At this initial antenatal appointment, midwives should gain an understanding of a woman's medical history and lifestyle, calculate the baby's due date, discuss birth options, where the woman wants to give birth and feeding options. At this group session the midwife gives information about keeping fit and healthy throughout pregnancy so that the baby is healthy too.

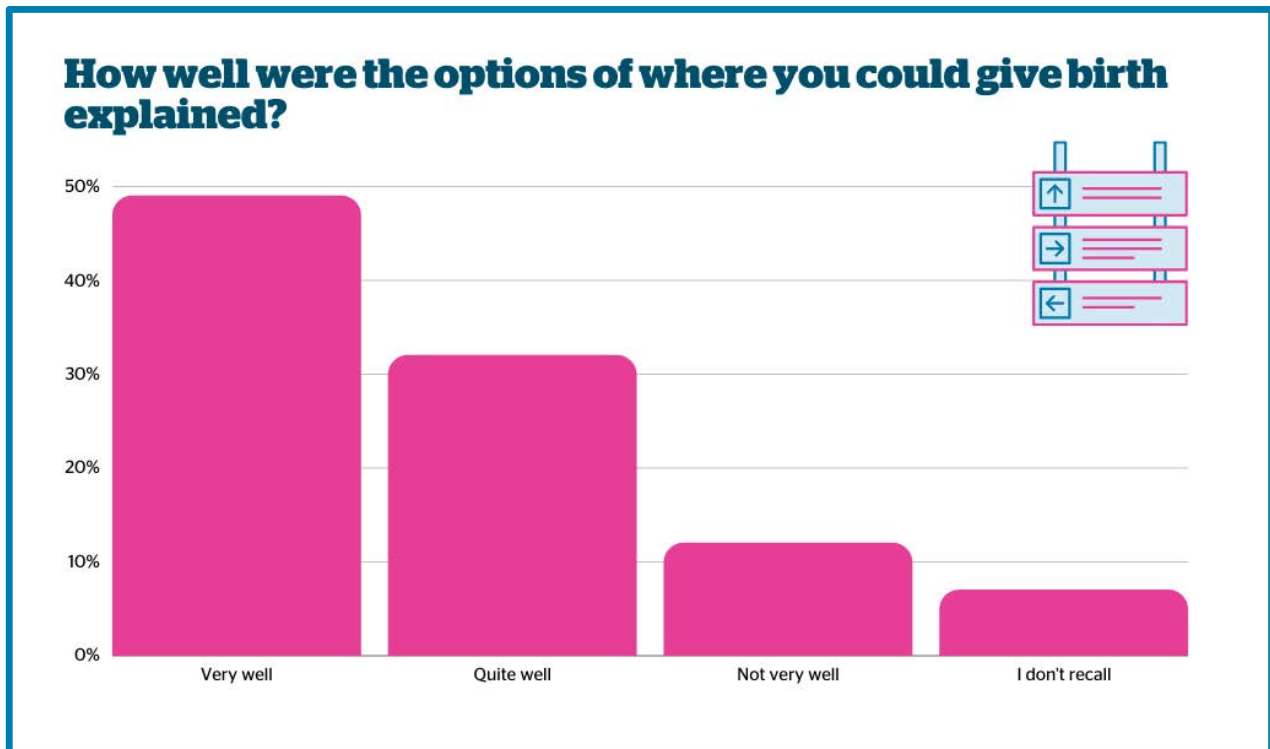
Also discussed are a number of topics such as exercise, feeding, blood tests, benefits available and also where women planned to give birth.

The options were to have the baby at home or at one of the four acute hospitals which are:

- Countess of Chester Hospital
- Liverpool Women's Hospital
- Warrington Hospital
- or Whiston Hospital

All women, whether it is their first or subsequent baby, and regardless of where they live have a range of options for where they can have their baby.

We asked women how well these options were discussed.

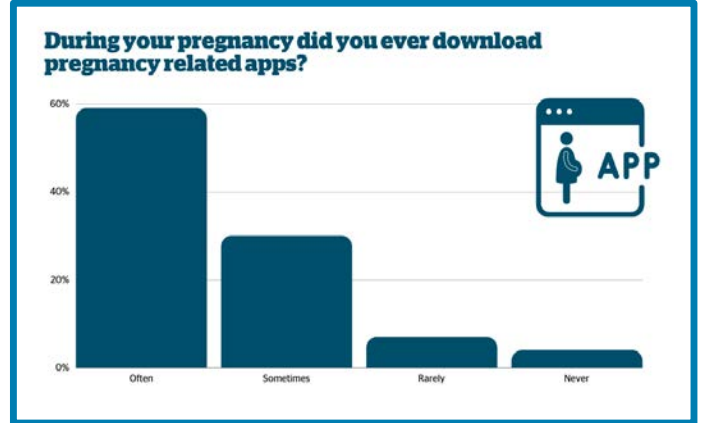
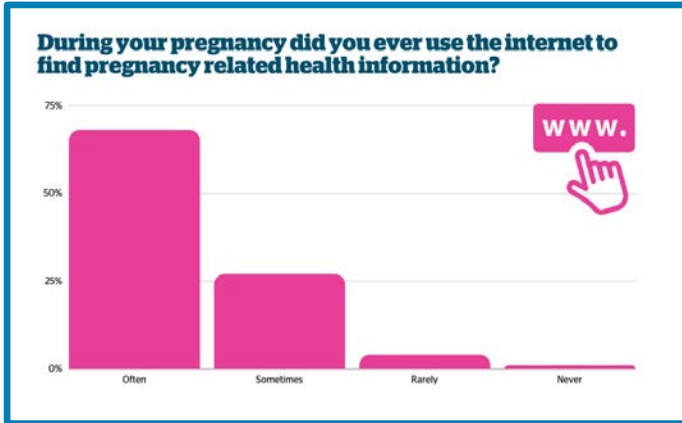


81% of respondents said the options of where they could birth were explained quite well or very well. 12% felt the options were not very well explained with 7% not recalling if they were told about the options.

'I got very limited information, being a first-time mum I was pretty much left to figure things out on my own.'

'More information about what induction actually involves and the alternative options to induction.'

Online and digital information and advice



Participants were asked if they had ever used the internet to find pregnancy related health information, and if they ever downloaded pregnancy related apps.

95% of respondents said they *'often'* or *'sometimes'* used the internet to find pregnancy related information.

89% said they had downloaded and used pregnancy related apps during their pregnancy.

Our survey didn't seek further feedback about which sources of information are used or which apps are most often downloaded.

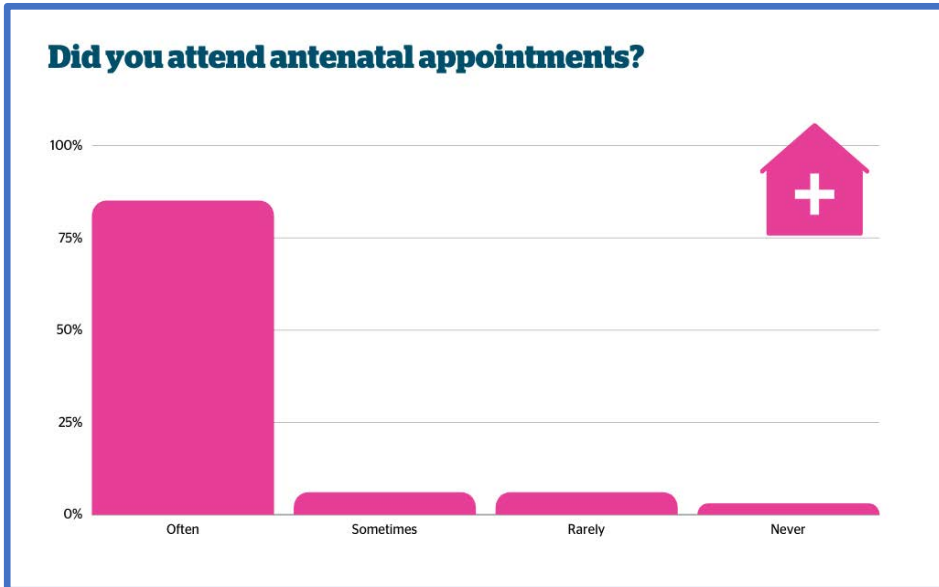
Given the very high rate of use of such services it would be useful to carry our further engagement with women to ensure that health professionals can guide women to *'approved'* or trusted sources of information and advice.



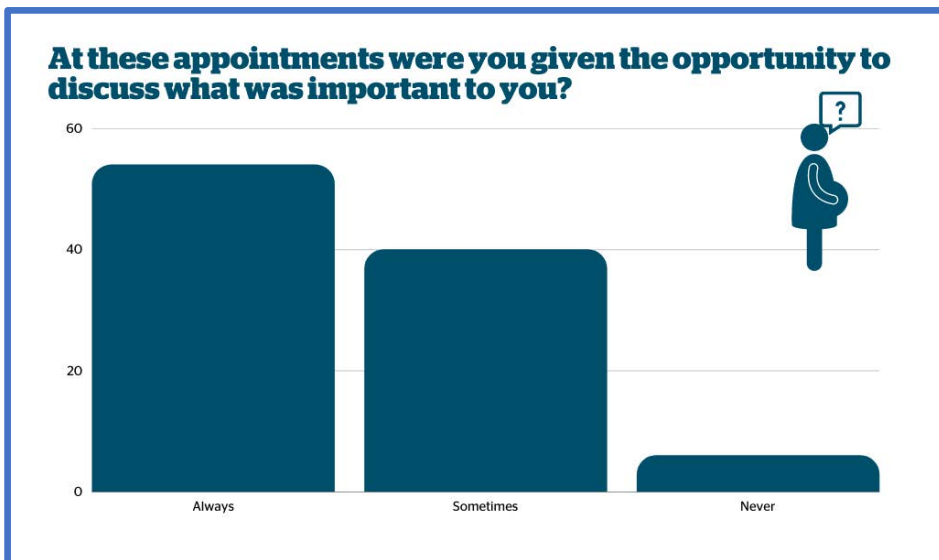
Antenatal appointments

The survey went on to ask women about their experiences of antenatal appointments.

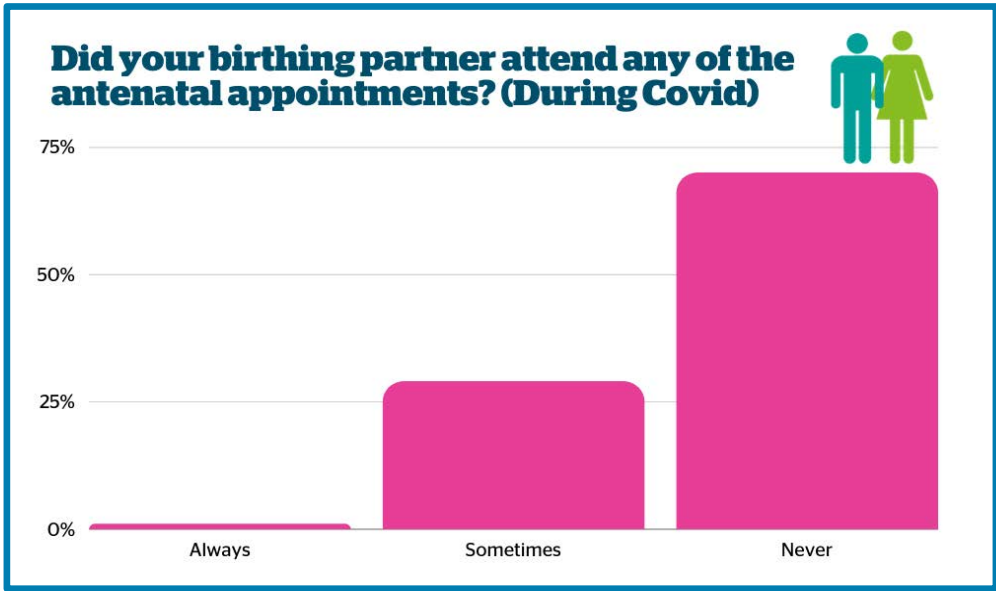
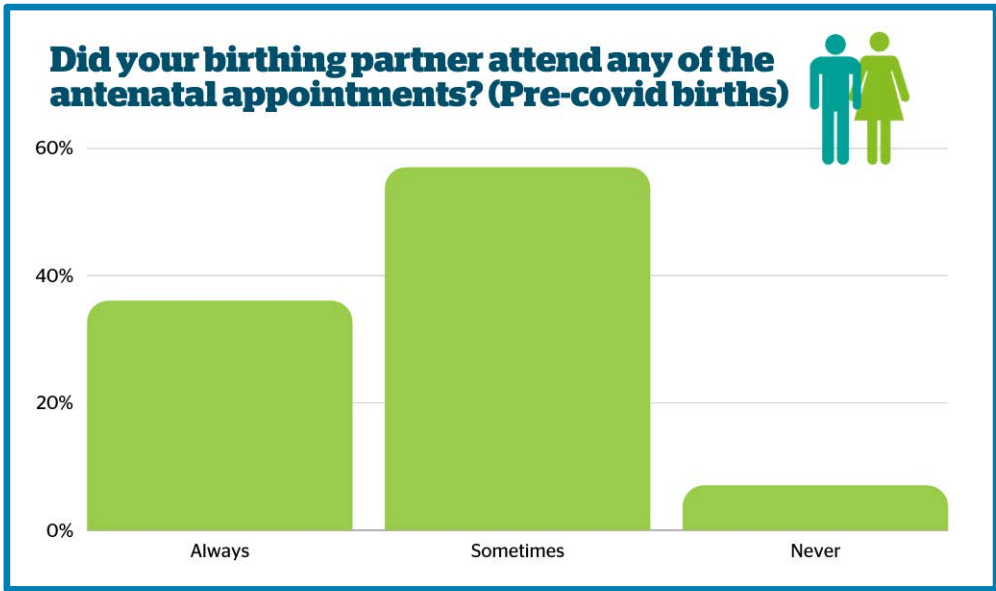
We wanted to understand how many women regularly attended and if they had the chance at these appointments to discuss what was most important to them.



91% of respondents said they attended all or most of their antenatal appointments.



54% of respondents felt they were always given the opportunity to discuss what was important to them with a further 40% saying they sometimes got to discuss what was important to them. 6% told us they never had the opportunity to talk about what was important to them



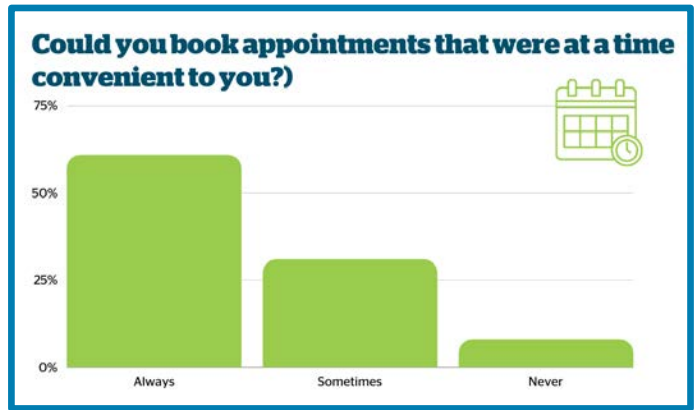
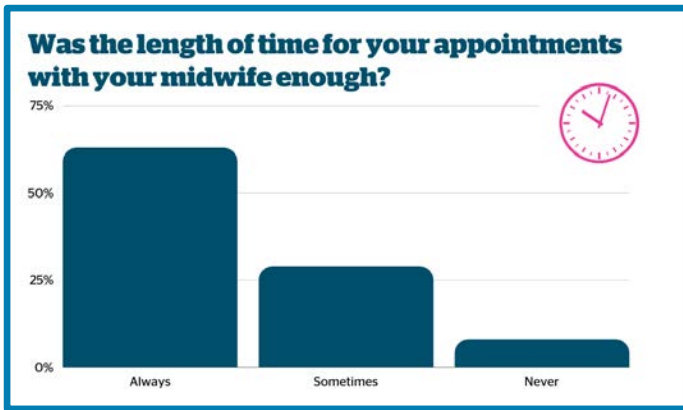
The Covid-19 pandemic has had quite an effect on the ability of birthing partners to attend antenatal appointments.

Our survey asked respondents to say whether their birthing partners attended any antenatal appointments with them.

We broke down responses by date of birth. As noted above, in the pre-covid chart, 93% of birthing partners attended some or all appointments.

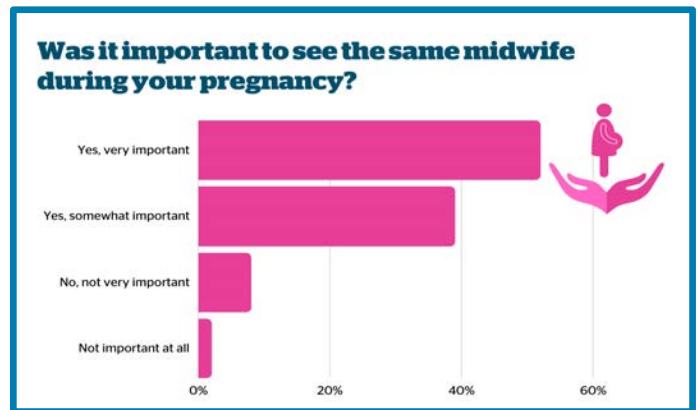
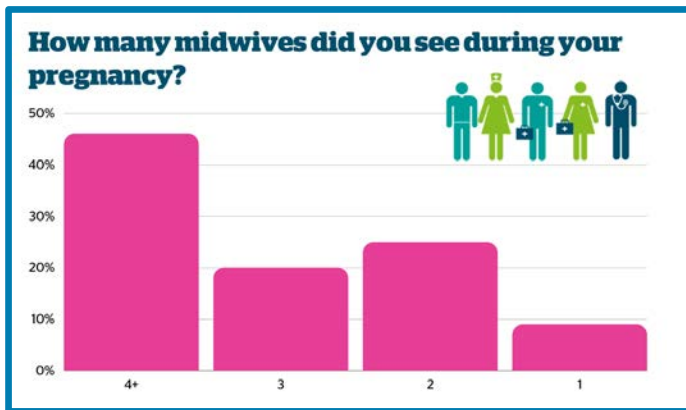
The pandemic and the restrictions put in place had a dramatic effect on the ability of birthing partners to be able to attend antenatal appointments. Just 1% of women, who gave birth during the pandemic, said their partners were able to attend all antenatal appointments. A further 29% said their partners were able to accompany them to some appointments.

When asked about the suitability of appointment timings, the majority of respondents gave a positive rating and felt their appointments were long enough and at a convenient time.



We noted from the survey results that almost 1 in 3 mothers-to-be said they didn't always have appointments at times that were convenient for them, with one respondent stating,

'My main midwife didn't give me chance to have appointment at the best time for myself and said I had to have her and couldn't switch to someone who had better schedule then she went off sick near the end and I was passed from pillar to post causing different baby measurements causing me to have to go to hospital for an extra scan that was completely unnecessary and caused great stress and upset.'



The National Institute for Health and Clinical Excellence (NICE) state that *'pregnant women should be cared for by a named midwife throughout their pregnancy'*. With 91% of women saying this was important to them, the survey results clearly show that respondents value continuity of care and the opportunity to build a relationship with their midwife.

Despite this, 66% of respondents said they saw three or more midwives throughout their pregnancy.

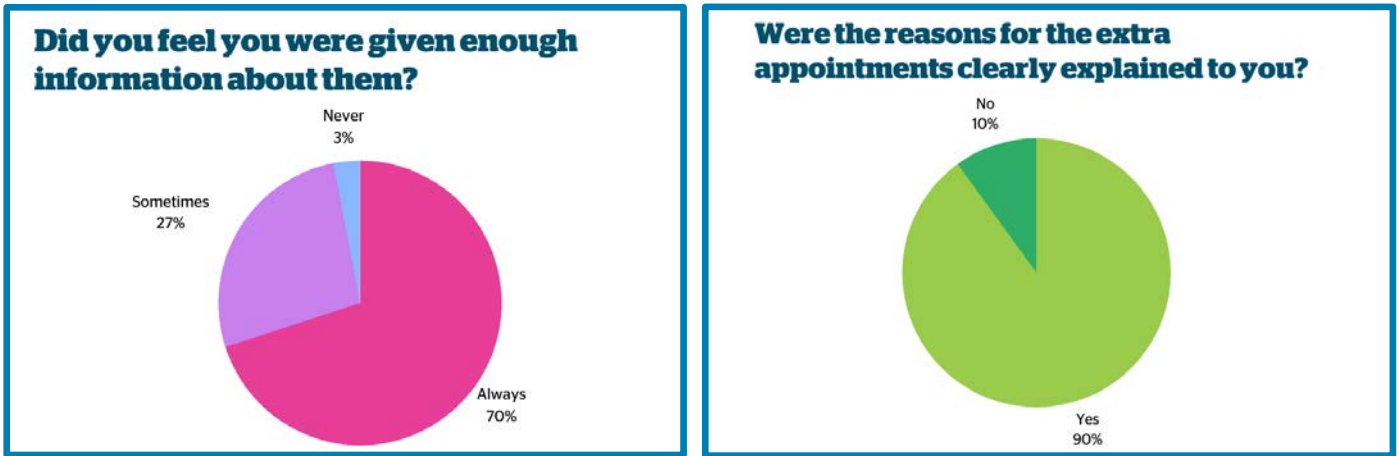
'My last midwife appointment I didn't see my usual midwife so I feel like my last appointment was rushed as she was not my midwife.'

See appendices for the NICE Quality Statements for Antenatal Care

Extra appointments

77% of respondents stated they were given extra appointments.

The survey asked some questions regarding the extra appointments to try and ascertain whether women felt they had enough support and information about the reasons for the extra appointments.



The majority of responses to these two questions were positive, as shown by the graphs above. 70% of respondents felt they were always given enough information about the extra appointments, with one respondent saying, *'I was given a lot of useful information'*.

Another mum said, *'I feel everything was explained to me and always got the advice I wanted. I didn't ask as much this time with being a second time Mum'*.

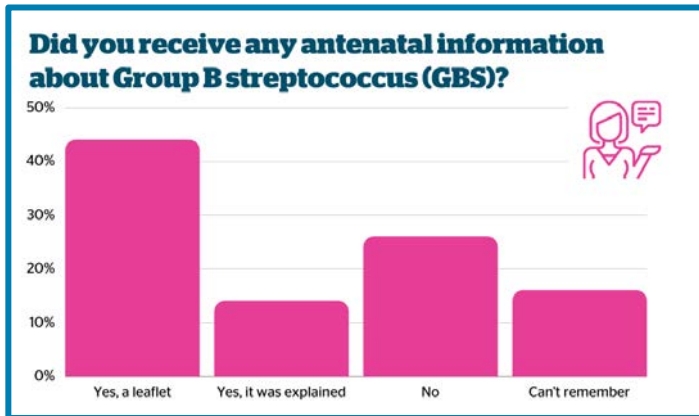
It was also clear that the vast majority of women felt they had the reasons for the extra appointments clearly explained.

However, some of the narrative feedback given highlights areas that respondents didn't always feel properly informed about.

'I was not informed much about labour such as the different ways to induce my labour or what happens when your waters break'.

'Whilst I totally understand that the NHS is over stretched, I felt that some of my midwife appointments were just going through the motions'.

One respondent told us that during the pandemic she felt cut off from help and support saying, *'I managed to find information I needed on the Internet/pay for classes but as a first-time mum it would have been helpful to have been provided with information to prepare. Leaflets/booklets etc., would have been helpful especially since no antenatal classes were running. Most questions I asked I was told just to Google, which isn't very reassuring from a professional'*.



'I would have liked to know about Group B strep as I was told I tested positive late in my pregnancy'

The survey asked whether information on Group B Streptococcus was given.

While 58% said they received information either verbally or via a leaflet, 42% either didn't receive or couldn't remember receiving any information on Group B Strep.

One mum commented, *'I was told that strep b had been missed and I'd had it but had never been told. I was then told I would need to leave the birth pool, when I said that I didn't want to various people tried to inset a cannula while I was in the pool having contractions. Eventually, the anaesthetist was called and managed to get the cannula in and give me antibiotics. How had this been missed?'*

Another mum, when asked what she would have liked to know more about during her pregnancy, told us, *'I would have liked to know about group b strep as I was told I tested positive late in my pregnancy whilst being tested for something else which otherwise would have gone undetected and potentially harmed my baby.'*

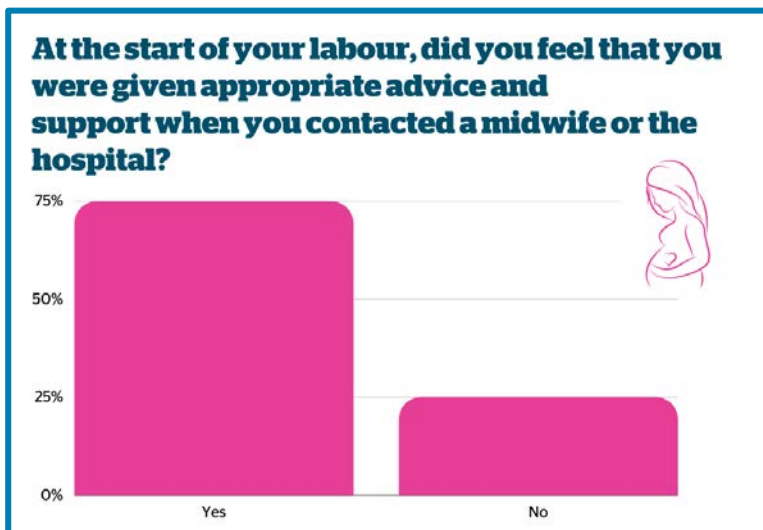
The latest guidance from Group B Strep Support recommends that Health professionals should, *'Provide all pregnant women with a patient information leaflet about group B Strep (GTG 4.1)²*

We are concerned to note that over 40% of women didn't receive or couldn't remember receiving this information. We recommend that this patient information leaflet is provided to all women during their pregnancy as a matter of routine.



² https://gbss.org.uk/wp-content/uploads/2020/02/2018_06_RCOG_Summary_Leaflet.pdf

The birth



I had the most perfect birth and my midwife made that possible'

75% of women who contacted a midwife or the hospital at the start of their labour 63% of women felt that they were given appropriate advice and support at the start of their labour. One said, *'Every phone call to Whiston was a great support to us. Staff at the other end of the phone are always reassuring and kind.'*

Another explained, *'The hospital was amazing and talked me through what was going to happen and gave me all the information I needed as when my waters broke, I went in for them to do a check and was advised to come back later, as I was not in active or proper labour, to be induced.'*

One respondent felt well prepared, stating, *'I had a planned c-section as baby was breech so was provided with lots of information.'*

'Community midwives were awful but Whiston on the other hand were absolutely amazing! Especially Eloise who delivered my daughter!'

Some respondents had mixed experiences with one telling us, *'Yes and No. Waters broke, attended Whiston was seen and put in a room and was left for 4 hours in pain, contracting when called for Midwife to be checked wasn't checked properly, was left again for a further 4 hours without anyone checking on me. During this time had to call midwife again, a different midwife attended me, checked me properly, examined me and said "I should have gone into delivery hours ago" during this time I was alone. No husband allowed until I went into delivery'*

A number of respondents commented that professionals didn't provide them with enough advice or support.

'When we rang the on call midwife we got no reply. We worked our way down the list of midwife numbers with no luck so we rang my personal midwife who was actually in work and she talked us through what we need to do.'

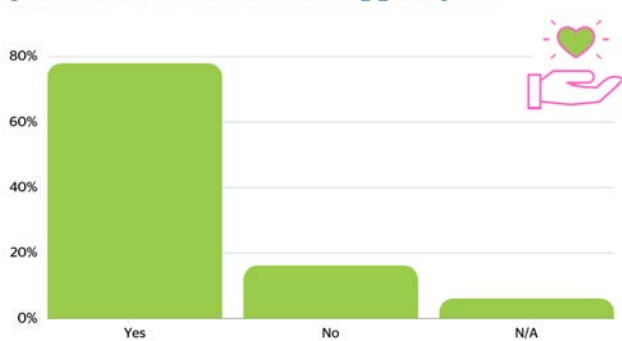
'Midwife on phone was very rude, my assumption is because I am a first-time mum.'

'My actual midwife told me I didn't need a stitch when I have had two cell removal ops I told her this every time I had a visit with her and she said no. I had my baby at 28 weeks and he nearly died.'

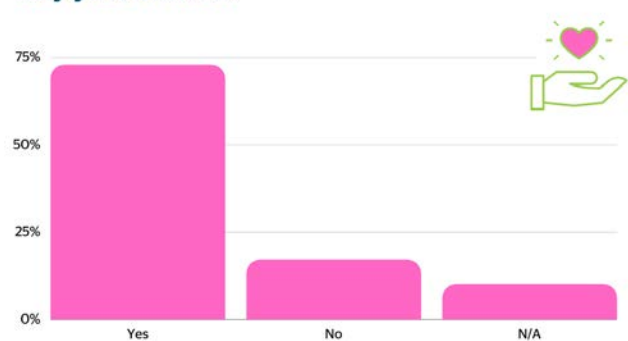
'Following my induction, I knew baby was on way. After having contractions close together and intensity I asked to get checked by midwife as I knew baby was on way, but I had to wait until she had finished giving meds on the ward. This made me feel like I was on my own, especially as my partner wasn't allowed on the ward.'

'Rang hospital 3 times before being advised to come in. Although it was my first baby I had a feeling something was wasn't as it should be. Was made to feel like would just be sent home. Baby had opened her bowels so it was right that I had gone in.'

During the birth of your baby, did you feel that your midwives/doctors were aware of your wishes and tried to support you?



During your labour, did staff help to create a more comfortable atmosphere for you in a way you wanted?



We received a large number of narrative experiences regarding the birth experience.

The majority of respondents told us they felt their wishes were known and supported by health professionals during birth as can be seen in the examples below.

'My midwife Jen was amazing she explained everything in perfect detail and made us all comfortable whilst doing her job in an efficient manner.'

'My labour was very fast, but from the time I got to the hospital and through my labour everyone was amazing and I could not fault them.'

'Staff in theatre were fantastic at keeping me calm and well supported Rebecca at Whiston Hospital was fantastic.'

'Our midwife (Libbi) was fantastic and made sure that the atmosphere in the MLU was perfect for the birth we wanted.'

'Midwife kept lights low and was unobtrusive as possible whilst being continually monitored. This was welcomed after wanting to have a water birth on the Midwifery led unit but being unable to do to induction because of fertility treatment. No one actually asked what we wanted though, we were just lucky to get that I guess.'

'The hospital were amazing during a difficult time. They went above and beyond to support us during the birth and after, knowing my partner wasn't allowed to visit.'

'It was hard going alone until the end but the midwives did the best they could in the situation. The midwives at the Countess were fantastic. They went above and beyond to make me as comfortable as possible and reassured me throughout labour.'

Some respondents highlighted both positive and negative experiences during labour with one saying, *'Yes and No. Again. Once in established Labour. A bath was ran for me for pain relief but the water was cold midwife left room without explaining how to use the birthing pool. Left again for over an hour without being checked.'*

Another respondent had a mixed experience of giving birth during the pandemic saying, *'Delivery suite were fantastic and I can't fault them. When I was induced I was pretty much left on the ward having painful contractions with no support. Husband wasn't allowed to be with me due to the virus so I thought midwives might have been on hand more to support. As a first time mum this was a very distressing time.'*

17% of respondents highlighted less than perfect experiences. Common themes included birth plans not being followed, and feeling 'not listened to'.

One second-time mum said, *'Was told at the pre op 2 days before planned section that would have to self-admit to Whiston, 24 hours notice to arrange childcare. Despite being consultant led and under 2 consultants because of gestational diabetes.'*

She went on to explain, *'I was given incorrect information and advice at the pre-op appointment. I was also given conflicting information upon self-admittance to Whiston the night before. Birth plan never discussed. Hospital policy never explained to me despite weekly appointments. I was given limited information for birthing partner attendance. Overall terrible maternity care for 2nd child.'*

Due to the need to have an early induction, one mum said, *'I was told none of my birth plan wishes could be carried out because I had to have an IV fitted 'just in case'.'*

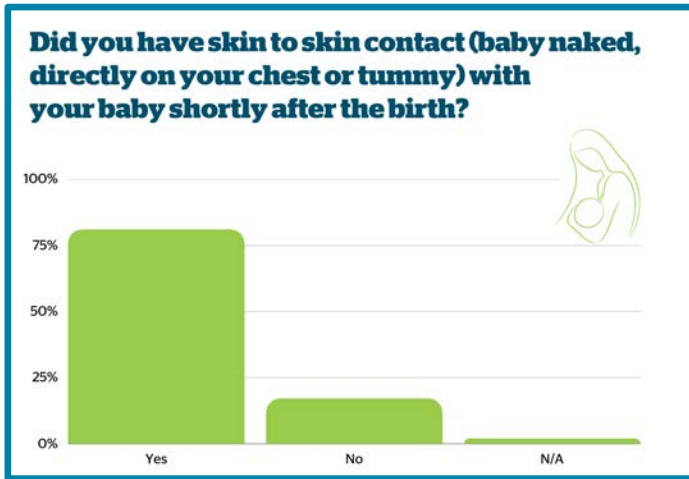
One respondent told us, *'I was made to feel stupid, not listened to.'*

Another respondent highlighted a lack of suitable seating for partners saying, *'The induction suite wasn't ideal as my partner was sat in a seat whilst I was in bed and this would have been an ideal opportunity to rest as my labour then went on for about 36 hours.'*

One mum commented on a lack of support while being induced saying, *'I was induced so left on my own without my husband for 3 days. Midwives too busy to support me.'*

Another women who gave birth during the pandemic felt her labour experience was far from ideal, telling us, *'Due to covid my husband wasn't allowed in after I'd been induced. I was very anxious and needed his support. I had to keep leaving the ward to be with him and ended up mostly labouring in the hospital corridors. Was an awful experience. I understand there were restrictions, but my dignity was bottom of the list of priorities.'*





I had the most perfect birth and my midwife made that possible'

81% of women said they had 'skin to skin' contact with their baby shortly after birth.

One mother told us, *'This was lovely'*. Another respondent said she had skin to skin contact, *'As soon as he was born'*.

Some women told us they didn't have immediate skin to skin contact but did get to hold their babies once weighed or cleaned up, *'I did ask for immediate skin to skin before baby got weighed etc as we would have got if we had a vaginal birth however this request was either ignored or forgotten'*.

Covid restrictions also affected the opportunity for women to have skin to skin contact with their babies, with one woman saying, *'We cut it short so that my husband could have cuddles before he was kicked out'*.

17% of respondents told us they didn't have the opportunity for skin to skin contact.

'I ended up in theatre with a spinal and lost a lot of blood. I was shaking so much for the spinal that I couldn't even hold my baby when she was born. I had to wait until after recovery to hold her properly'.



Covid-19 restrictions have clearly affected the number of partners who were able to be involved in their partners care.

For those respondents who gave birth prior to 1 April 2020, 86% answered 'Yes' to this question. For those who gave birth after 1 April 2020 this figure dropped to just 58%

Prior to the pandemic the vast majority of partners were able to be involved, with one respondent stating, *'I was lucky enough to have my baby prior to the pandemic so we had the option for my birth partner with me all the time.'*

Another respondent praised her midwife for facilitating this, *'This was very much facilitated by our midwife who listened and fully respected our birth plan. We always said our birth plan would be 'preferences' and we were happy to be led by our midwife - but she played such an important role in keeping us on track with our preferences and supporting myself and my husband.'*

A small percentage of respondents didn't get the partner involvement they'd hoped for with one mum telling us, *'My partner did, but not my Mum and this was pre-covid'*, another respondent commented, *'Not as much as U had thought, as it was a section no dad skin in skin or cutting of cord was discussed which had upset us both as at the time it was very much like a whirlwind.'*

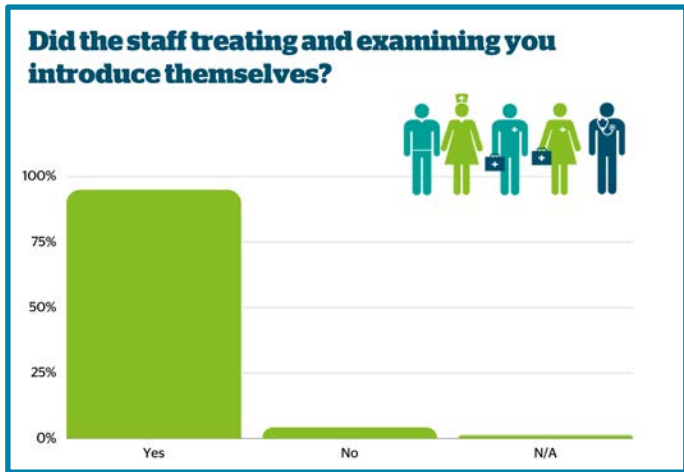
During the pandemic many partners were still able to be involved but with restrictions in place which affected the experience. One first-time mum wondered if her partner had missed out saying, *'Due to covid there was many restrictions i.e. he wasn't allowed to stay after for longer than an hour and as a first time mum I'm not sure if he missed out on other opportunities.'*

Another mum compared her birth experience to previous ones saying, *'Unfortunately, due to covid my partner wasn't allowed the same involvement as he did with our other children.'*

Another person said, *'My husband had to wait in car while I was examined and waited to see if I would be kept in. Then there was the worry about if I would have to stay in alone until I was moved to the delivery suite.'*

These comments echoed those made by many other women.

One respondent wondered why such tight restrictions on partners needed to be in place, *'Due to COVID my partner wasn't allowed till I was so far dilated, however we both live in the same house so don't see why he couldn't be there when the nurses were talking about going round to friend's houses drinking mixing with others, but husbands aren't allowed.'*



‘As I say, Whiston midwives cannot be faulted’.

The vast majority of respondents stated that staff introduced themselves. One respondent told us, *‘Yes, all of the staff introduced themselves and explained their role in my care’.*

Other respondents told us, *‘Staff were nice and kind’* and *‘all were amazing’*

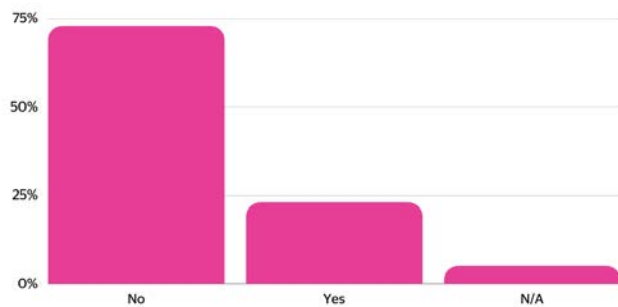
It seems that during the births not everyone remembers to say who they are, with one respondent saying, *‘I was not informed about who was putting the cannula in my hand or what they were doing which caused me to go into a panic attack’.*

Another said, *‘Everything was very frantic. The only people who remained calm and tried to explain what was happening was my midwife and the anaesthetist’.*

Did the staff treating and examining you introduce themselves?

‘I did not have a clue what was going on after birth. No one would talk to me even though I was asking. It turned out I was okay, just having a slight bleed, but I was panicking as nothing was being told to me’.

Were you (and/or your partner or a companion) left alone by midwives or doctors at a time when it worried you?

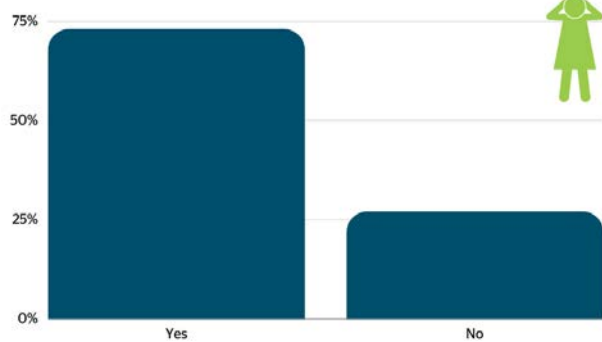


73% of respondents replied that they weren't left alone at times that worried them with comments generally praising staff for finding the right balance.

One person summed up the comments of other saying, *'We felt our midwife found the perfect balance of being left to progress, and being supported at vital times.'*

While most people didn't have an issue more than 1 in 5 were concerned at being left unattended

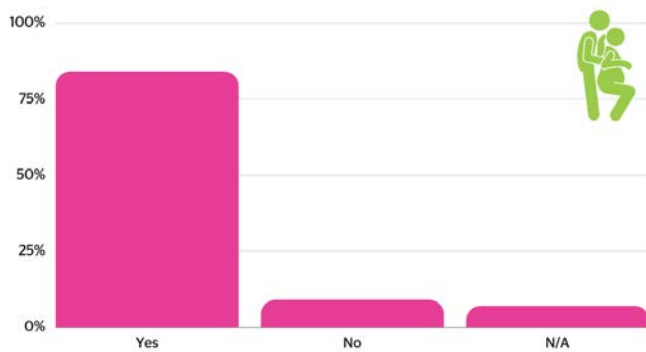
If you raised a concern during labour and birth, did you feel that it was taken seriously?



Of those participants who raised a concern, 73% told us they were treated seriously.

More than 1 in 4 respondents felt their concerns weren't taken seriously, with one mum telling explaining, *'Shortly after giving birth after having a bleed I was left alone. My partner mistakenly pulled out my IV drip and blood squirted everywhere. We pulled the buzzer but it took almost 10 minutes for a doctor to come. I fainted in the bathroom. When a nurse came in, they found it funny.'*

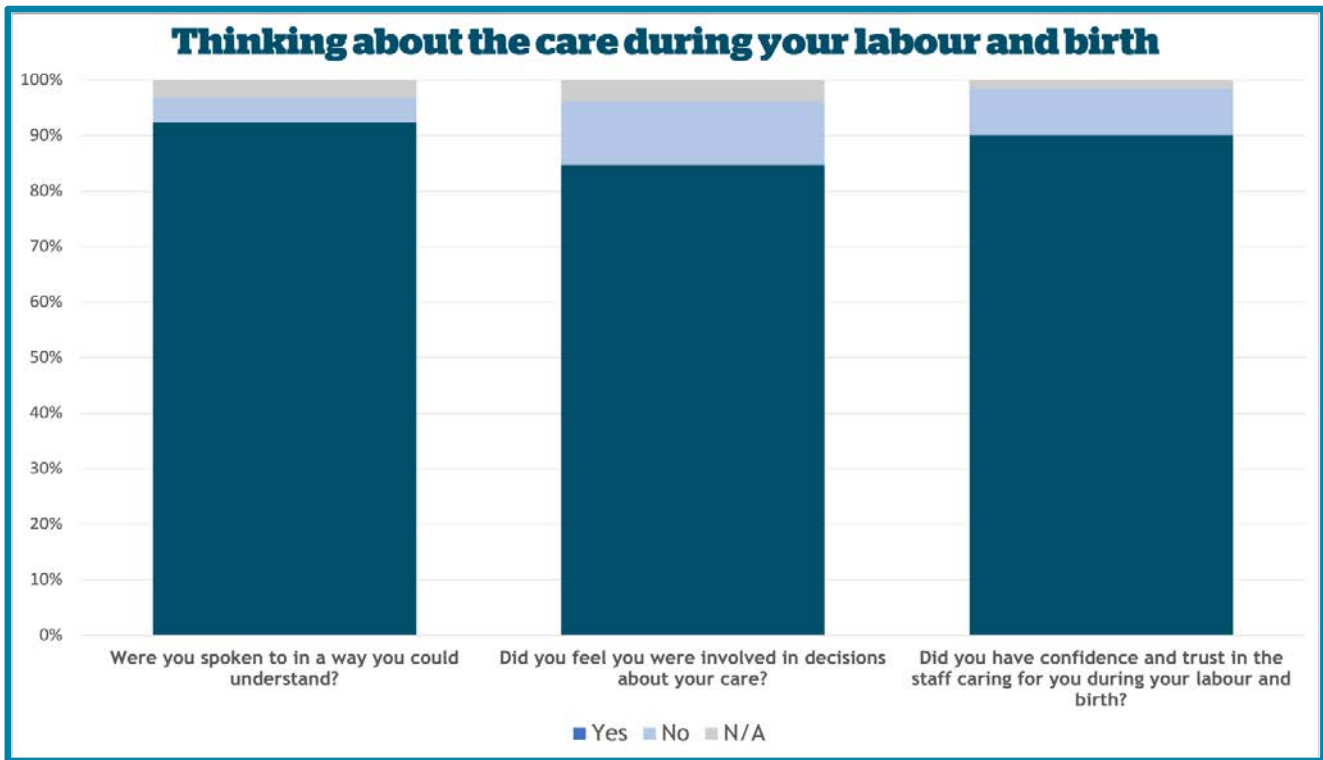
During labour and birth, were you able to get a member of staff to help you when you needed it?



84% of respondents said they were able to get help from a staff member when need.

'The midwives were brilliant they were very attentive.'

A small number of mums had less positive feedback to give with one stating, *'I started contractions during hand over, I felt I was all on my own to deal with it. No nurses directly available and my partner was unable to be with me during this time. I was in pain, emotional, scared of the unknown and had no reassurance for this time.'*



The vast majority of women who responded to these questions gave very positive responses.

92% said they were spoken to in a way they could understand, with one respondent saying, *'And if I didn't understand something I asked them to explain in a different way and they did.'*

Some mums pointed out that this isn't the ideal time to take in information, with one saying, *'No idea, I was fairly out of it and don't really know what happened.'* Another respondent echoed this telling us, *'Following the birth before discharge, we got what felt like a 30 minute download of information after information about what to do and what to look out for, this was after 3 days of labour for me and 24 hours of no sleep for my husband, so to this day we cannot remember what was said, perhaps a simple checklist or leaflet to provide to back it up would be useful.'*

The vast majority of respondents believed they had been kept involved in any decisions about their care. One mum praised staff saying, *'It took 5 attempts all together to get my spinal right and every time I was asked if I wanted to try again and what my other option was'*

Respondents generally had great confidence and trust in staff with many expressing their gratitude. One respondent told us, *'100% yes! I couldn't have asked for better care.'*

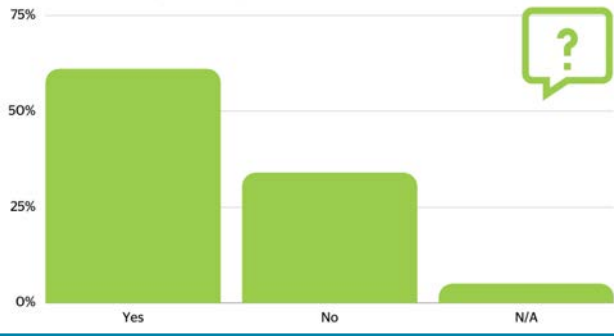
Respondents praised staff at the hospitals for their care during labour and birth

'The midwives that looked after me during my 2 day labour were actually amazing.'

'The staff at Whiston particularly in theatre where I had my c section were excellent.'

'I couldn't fault the quick thinking of the staff.'

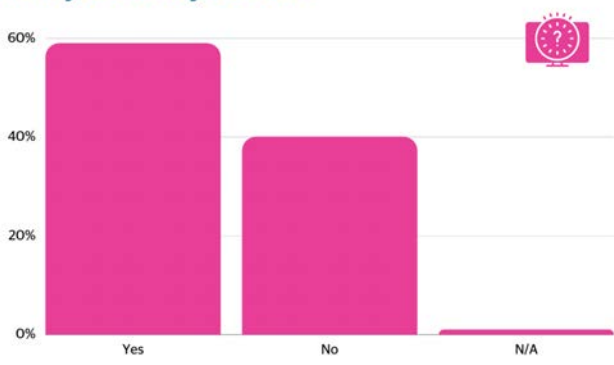
After your baby was born, did you have the opportunity to ask questions about your labour and the birth?



More than 1 in 3 respondents didn't get an opportunity to ask questions about the labour and birth.

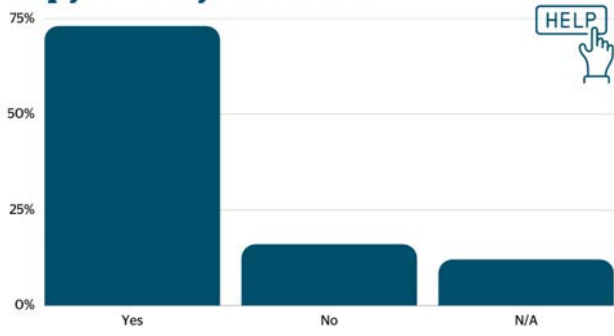
One mum said, *'I think this part is a part that needs improving, making sure both mum and dad understand what has happened. I had an emergency section and felt like I could have had more support and answers.'*

On the day you left hospital, was your discharge delayed for any reason?



Almost 40% of respondents had a delayed discharge, with 45 individual comments received around delayed discharge. Common themes included waiting for paperwork, blood tests and pharmacy. Reasons for delays weren't always clear. One mum felt the hospital staff were just too busy, saying, *'I was told I could leave at 7am but wasn't discharged until 7pm due to them being too busy this was the only point I felt like the care was a bit sub-standard. After 5 days in hospital I think they should have been more accurate with timings to manage expectations.'*

If you needed attention in hospital after the birth, were you able to get a member of staff to help you when you needed it?

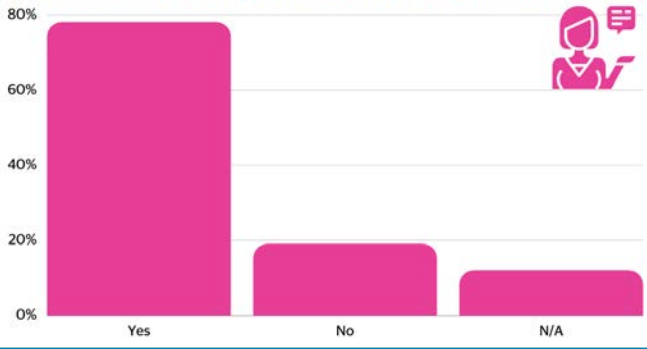


Overall, most respondents were able to get a staff member to help if needed.

Women often mentioned staff being very busy and not always being available straight away, one parent saying, *'night time staff were not very helpful or friendly. Maybe this is because they were overrun but I felt venerable and alone during the night.'*

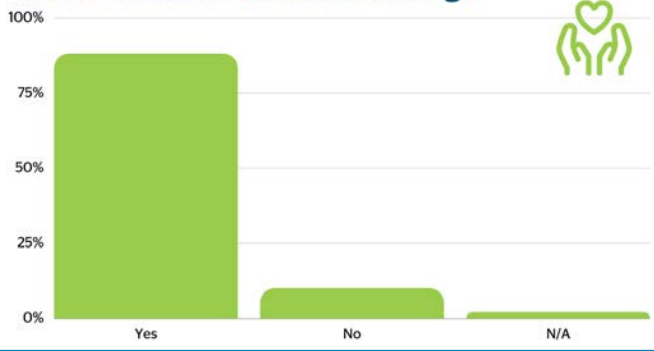
Another mum told us, *'I've put yes, but do feel this was dependent on timing and what was happening in the ward at the time as sometimes help would be quick, other times you would have to wait or ask again.'*

Thinking about the care you received in hospital after the birth of your baby, were you given the information or explanations you needed?



While 78% of respondents said they received all the information or explanations they needed, many highlighted that there were inconsistencies. One mum highlighted that, *'All staff during the day was so helpful and couldn't do enough for me however I didn't get the same treatment during the evening but I was made aware that the numbers of staff would decrease which doesn't make sense as there are same amount of mums and babies if not more at the evening.'*

Thinking about the care you received in hospital after the birth of your baby, were you treated with kindness and understanding?



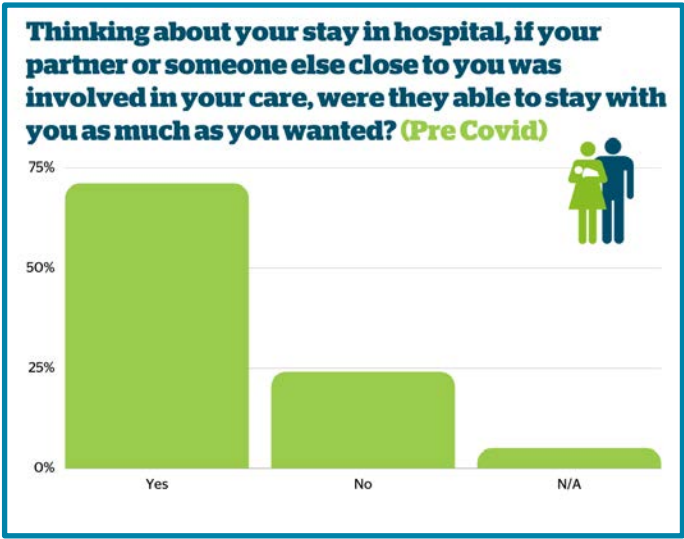
88% of respondents felt they were treated with kindness and understanding.

As with answers to the previous question, many people told us there were inconsistencies. One mum explained, *'Some nurses were absolutely amazing. Some made my experience hard, upsetting and very lonely and scared.'*

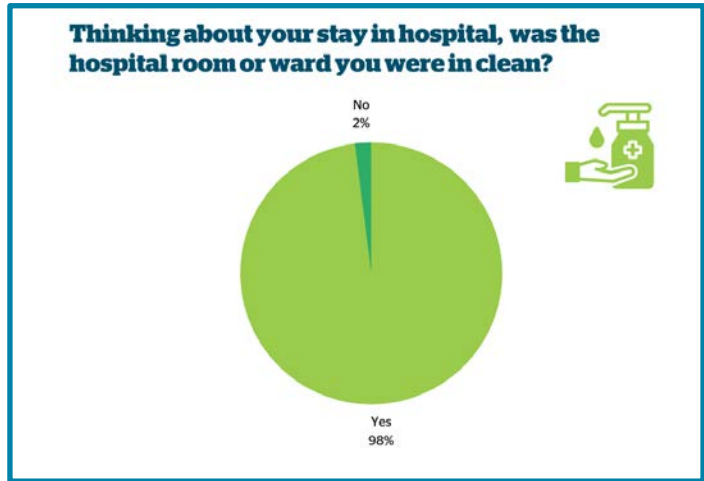
Another respondent felt it depended on how busy staff were, *'Most of the time but staff seemed very busy and rushed of their feet.'*

Another mum, who gave birth just prior to the Covid-19 pandemic, while stating she was treated with

'The only thing that upset me was my baby was moved to special baby care on her second day when I returned from seeing her all my belongings were removed and some else was in the bay I had been in. They literally moved me into a room by myself without asking and just did it. I was also talking to another patient next to me and was told that it was 4pm in the afternoon and was quiet time, we then had all our curtains closed on us and had to remain quiet.'

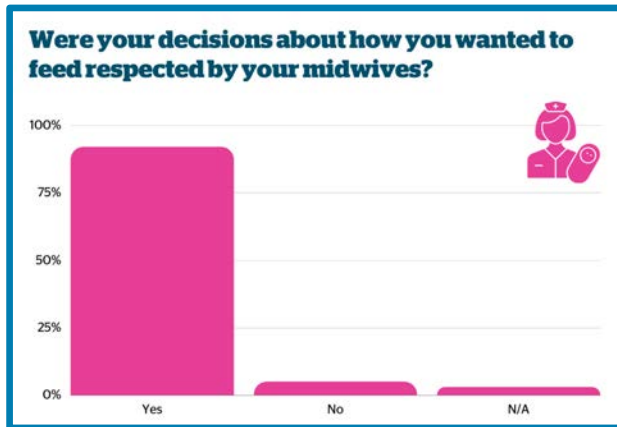
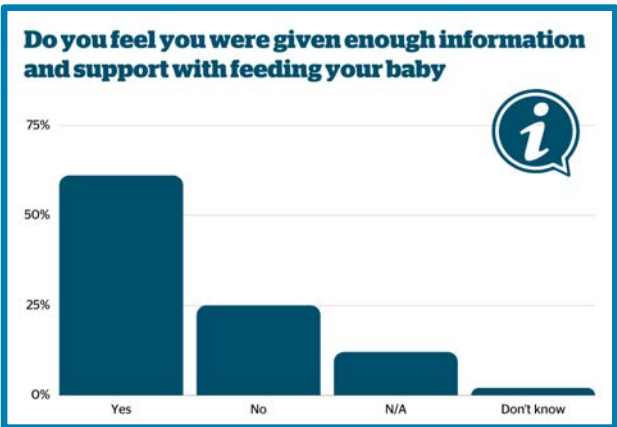
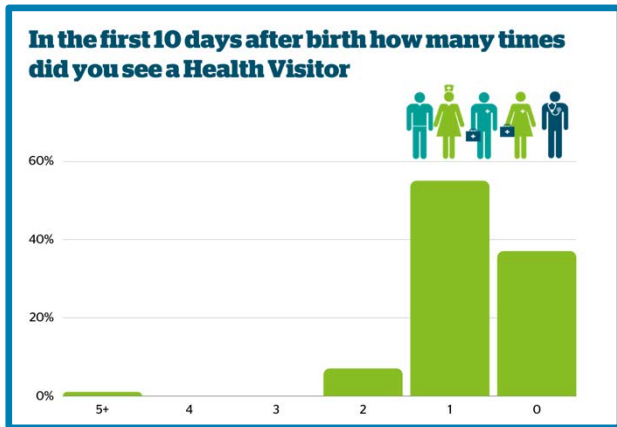
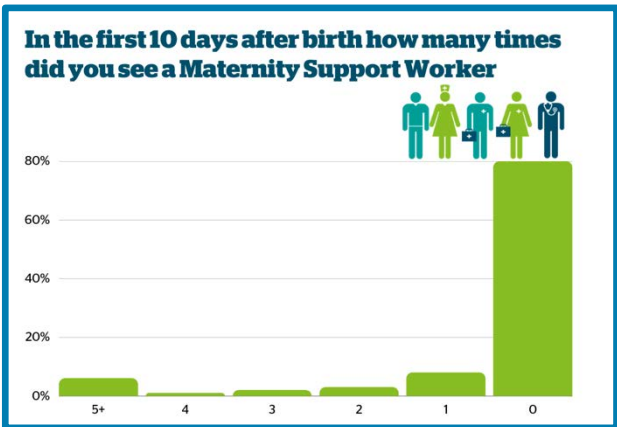
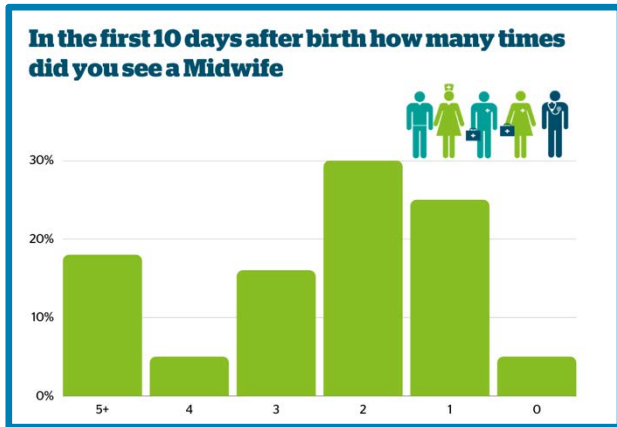
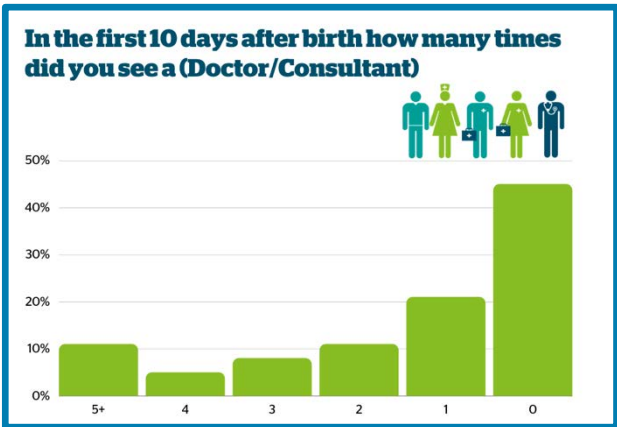


The pandemic made a major difference to how much involvement partners could have in supporting mothers. For birth that took place prior to the pandemic more than 70% had as much involvement in the care as they wanted. Once the covid restrictions were in place only 12% of respondents said their partners were involved as much as they wished.



98% of respondents said the hospital room or wards they stayed in were clean. Just 2% of respondents mentioned concerns over cleanliness. These related to cases of blood on bathroom floors in two of the hospitals, and one patient stating a cleaner had cleaned a bathroom and toilet without wearing PPE and then cleaned the rest of the ward without washing in between.

The First 10 days



The negative effect the pandemic had on women's maternity experiences can be seen in the satisfaction figures with support following the first 10 days of birth.

For those who gave birth prior to the pandemic, 80% of respondents were happy with the levels of support and information they received. This figure dropped to 60% for those women who gave birth during the pandemic.

Prior to Covid-19 positives

Those satisfied with the levels of support in the first 10 days after birth.

'In my time before baby was born I had a good relationship with a few of the midwives who I could go and see although this was above their role.'

'Yes lots. With me still being in hospital for 6 days there was lots of support. Everyone was great.'

'I contacted the breastfeeding support team for Halton and they were extremely helpful. They came out to visit me on several occasions.'

Prior to Covid-19 negatives

Even prior to the pandemic many respondents highlighted a lack of support in the first 10 days,

'In hospital I felt very alone. my babies couldn't eat and I didn't get the right support. I was in agony and I didn't have any support or understanding that I physically couldn't walk.'

'My baby had a tongue tie so latching was difficult and painful. We had to wait weeks for that to be fixed and then no help was given to teach him to latch. I exclusively pumped breast milk for 9 months. I was told I may as well give up and formula feed.'

First 10 days support during Covid - positives

Many respondents praised the Halton Infant Feeding Team in their feedback for the support they've offered.

'Halton infant feeding team were fantastic'

'Infant feeding team were excellent support especially in COVID-19 conditions.'

'I was given lot of help by the breastfeeding team later on, prob after a week.'

'Good support from the infant feeding team.'

'The infant feeding team saved my breastfeeding experience.'

'Feeding team were great at ringing but health visitors never came or call.'

'Received a phone call the day after we got home. Received one to one support from the breastfeeding team to help with latch. Was very much appreciated.'

For those who didn't feel they received enough support in the first 10 days after birth some common themes arose in the comments we received. These included women who felt they didn't have enough visits or had to ring to arrange visits after discharge from hospital, and mothers not being examined or checked in the first 10 days.

Feeding

'No face to face support due to the pandemic, I tried phone/internet support but it didn't work for me, face to face support is essential for breastfeeding mums especially during a pandemic when family can't be around to help either, I was always told "breast is best" and because I wanted to try breastfeeding in hindsight the benefits of other options were not discussed such as combination feeding, had this been discussed more I may have opted for this and coped longer when breastfeeding.'

'Phone appointments with feeding team were not sufficient. Although they were very nice and I understand this wasn't their fault.'

'No support provided with wish to breastfeed. I was told to just give up and bottle feed instead.'

Support

'The support during my birth was great but afterwards there was a lack of support. I rang my doctors to try and book my 6 week check up as I was concerned about my scar and was told I wouldn't be having it despite my concerns.'

'Support was only available if I could get to them which is difficult after a c-section. As I saw so many midwives I kept having to go over everything, made me feel as though notes weren't read ahead of appointments with me.'

'Phone appointments with feeding team were not sufficient. Although they were very nice and I understand this wasn't their fault.'

'Again due to covid everything was done over the phone apart from 5 & 10 day check. I felt personally I would have benefitted from person to person appointments and drop in sessions.'

'Having zero support since his birth has been awful, I even had to diagnose my own PND. I have no idea how much he weighs if he's healthy, what's targets he should be hitting, I know the world is crazy right now, but I feel I was abandoned while pregnant and even more so now.'

'As I say I'm just disappointed in the way I was treated by the community midwives.'

'There was no face to face support of any kind until we saw our midwife at 5 days, I had to go to the midwife on my own rather than her coming to see us and unfortunately I'd had breastfeeding issues which I didn't realise as a first time mum and baby lost 16% of her body weight so we were admitted to hospital the same day. There needs to be significantly more face to face support for first time mums, I understand this is during a pandemic but we still need to support now more than ever.'

'I did think there was enough support, as I wasn't a first time mum I knew what to do anyway but the lack of support for new mums would have been unbearable, I understand covid 19 but I feel like new mothers have been shoved to the back of a very long line when they need support the most.'

'Had to walk to see the midwife at the health centre myself, in the height of the baby blues, then got told off for bringing my other daughter, even though there was nobody else to look after her.'

And finally, on reflection...

Survey participants were given an opportunity to comment on anything that they know now that would have helped during their pregnancy, birth or soon after baby was born, that wasn't explained to them at the time

There were a number of common themes highlighted in the 107 individual comments received, many of which related to issues and themes already mentioned

Some comments related to Covid experiences and restrictions, although similar comments were also received about care prior to lockdown.

Main issues participants wished they'd known more about:

- Antenatal care and classes
- Birth Plans / Personalised Care and Support Plan
- Birthing information, C-section and inductions
- Continuity of Care
- Group B Strep
- Feeding

Birth: C-section, induction

Many first-time mums expressed a wish to have known more about the birth, what may happen and procedures such as inductions and c-sections.

'I wish they would have explained the procedure properly and walked me through. I had twins under general anaesthetic c section. This was because I had previous cauda equina and still have a bulged disc. They didn't explain that I would be going straight onto the operating table, that I would be tilted and strapped on and prepped for surgery before the anaesthetic. I thought I was being prepared in the room before and being pushed through to the operating room just to be anaesthetised. I have autism and it absolutely terrified me having to be strapped onto the operating table and tilted. I was so scared I was going to die I had a full blown panic attack. I went really cold, and I was so badly shaking I had to be held down. I believe I should have got more care before the birth to discuss everything. Especially with the autism, I would have benefitted from more support and more explanation. It took months and months for me to be able to even talk about my experience to anyone without breaking down. It was the worst experience of my life. It gave me the best gift ever, but it still took a lot to start to get through the mental trauma it caused.'

'Told I would be getting an induction right at the end I only really understood the reason for this through my own research. I ended up having a c-section and if I had really understood the induction process I would have asked for a c-section. This didn't seem to be an option though.'

'More information about inducing and how long it takes and how it doesn't often work. I would not have gone to be induced had I been given the full facts.'

'More information on c-section and how long the recovery would be. It wasn't explained very well verbally, they just give you the pack and basically say read it. I also wasn't given the opportunity to go to the meetings about a caesarean either as my midwife forgot to tell me about it. I went in basically blind.'

'My concerns were not listened to. It was all about avoiding a c-section and not the effects labour / assisted labour can have. I had no idea of my recovery. Genuinely felt very upset after my experience.'

'The induction process in more detail, I didn't realise it could take 4 days!!'

'I would have liked to have known about circumstances and info re induction and emergency c-sections and what to expect around recovery. It was a real shock to me and very isolating once I was on the ward and back home.'

'What happens if things don't go to plan as this happened during my delivery and was very stressful.'

'When to stop taking the aspirin I was told to take it as I had to have c-section. And lost 1.5 litre of blood.'

Birth Plans

Many mums wished they'd received better information about birth plans. One commented that birth plans were *'more for mum's to be to think about what they would like to happen during labour, rather than a working document, as no one asks about them or to see them or what you have on them once you arrive in hospital'*.

Another mum said, *'I asked about a birth plan as a friend had told me about it and my midwife told me to just look online as they weren't doing them due to COVID'*.

Another respondent told us, *'Wasn't told important information throughout pregnancy. I had discussed water birth throughout pregnancy and was booked for induction but was not told I couldn't use the pool after induction. So many things went "wrong" because I didn't know, I had to ask for this information'*.

After Care and Post-natal expectations

Participants wished they'd been more informed on what to expect after the birth of their babies.

A first-time mum told us she wished she'd been told about the protocols following birth *'as it had not been discussed and I found following the birth of my baby my lack of understanding and knowledge of what to expect put me and my baby in a very vulnerable position. We didn't know what we were supposed to do. There was lack of direction and support from staff which then resulted in serious errors in our care. On reflection I feel that if I had an idea of what to expect then I would have been able to pick up on the errors and would have been able to prevent the events that followed. The timeline in my pregnancy notes was wrong. I went to appointments having researched the appropriate subject as stated in my notes but the found the midwife didn't discuss what the timeline said'*.

Another first-time mum wished she had known, *'More information about post birth and what to expect mentally and physically'*. Another participant said she didn't know about *'post birth things, like what tablets to be taken post, Vit D for baby'*.

Support with feeding and tongue tie

Many women wished they had been given more detail on breast feeding and difficulties they may face. One mum explained, *'I wish I had been told how difficult it is to breast feed. The health visitor I had was excellent and she gave me more information in one session than I was given throughout the whole pregnancy. Unfortunately, this was right at the end of the pregnancy'*.

There were a number of comments on a lack of information around breast feeding, with one respondent commenting, *'I wasn't really given any info on breastfeeding or on a birth plan'*, while another wished for information on *'What support there was for breastfeeding and a realistic idea of what it entails'*.

Another mum said, *'I got no support, and my baby had a dairy allergy and I got told to stop breastfeeding with no explanation and I didn't know I could cut dairy from my diet and carry on breastfeeding'*.

One respondent wished she had received, *'More information about combination feeding, I wanted to try breastfeeding and in hindsight it felt that as a result nobody fully discussed the advantages of any other options'*.

Some mums whose babies had issues with tongue tie wished they had been given more information about tongue tie at an earlier stage.

Communication

Many women just wished they'd had been given more information in general at an earlier stage. One respondent commented, *'I got very limited information, being a first-time mum I was pretty much left to figure things out on my own.'*

Another replied, *'I can't comment on the information as I received hardly any.'*

A first-time mum told us, *'I managed to find information I needed on the Internet/pay for classes but as a first-time mum it would have been helpful to have been provided with information to prepare. Leaflets/booklets etc would have been helpful especially since no antenatal classes were running. Most questions I asked I was told just to google, which isn't very reassuring from a professional.'*

Covid Restrictions

We received a number of comments from women who had given birth during the pandemic stating they wished they'd been kept more informed and updated. One mum talked about confusion over appointments saying, *'COVID restrictions meant I often got to the appointment only to be told my partner couldn't come or could have come. There was no up to date info available.'*

Another mum, commenting on her birth said she would have like to know, *'That I would have to spend 3 days alone in hospital, as because of Covid my partner couldn't stay.'*

Difficulties in contacting services during the pandemic was highlighted by one mum who told us, *'I didn't know that the midwives/ health visitors team in Halton were going to be so hard to get hold of. I was constantly passed from pillar to post when trying to arrange for my baby to be seen in lockdown, I thought the health visitor teams should be contacting me as part of my post-natal care'*

Maternity stories

Over 60% of respondents to our survey offered to be contacted by Healthwatch Halton to discuss their experiences in more depth. We are extremely grateful to all those who offered this support.

We contacted a number of survey participants ensuring we gathered birth experiences from both before and during the pandemic.

Sophie's story - Whiston Hospital

Sophie lives in Widnes and gave birth to her baby at Whiston Hospital in September 2019.

She chose Whiston Hospital for the place of birth was *'purely geographical reasons as the hospital is nearer to my home'*.

After choosing Whiston, Sophie was provided with the opportunity to undertake a tour of the Maternity unit. She thought this was a good idea as it would enable her to ask questions and allay any concerns, she may have during the tour. Sophie described the tour as *'a bit of a slightly rushed whirlwind tour'* but emphasised that *'staff were lovely approachable and informative as the tour provided me the opportunity for me to discuss my birth plan ask questions and to also view the birthing pool'*, which was her preferred method of birth.

Sophie explained that all her antenatal appointments were held locally in the Widnes Health Care Resource Centre (HCRC) and that she was able to book appointments at a time that was convenient for her. Importantly, her partner could also attend which she found reassuring.

She described midwifery staff as very approachable and said that in total she saw the same three midwives throughout her pregnancy. This made her feel at ease and comfortable, which she felt was important as it gave her a consistency of care when asking questions during her appointments. Sophie told us that the midwives providing her care at the Widnes HCRC were *'thorough, caring and supportive'*.

During her antenatal appointments Sophie was given a leaflet explaining Group B Streptococcus, however she told us that she would have liked to have the GBS test sooner, *'as the results only came back following the birth of my baby and I had tested positive'*.

Sophie explained that when her labour started, she contacted the hospital and was given appropriate advice and support. She was asked to visit the hospital for a check-up as although her waters had broken, she hadn't experienced any contractions. On arrival at the hospital, she was greeted by staff and examined. They informed her that she would be discharged home until her contractions started. Sophie explained that she felt comfortable with being sent home as the timings of contractions were explained to her prior to her being discharged home.

Sophie said, *'I telephoned the hospital a few times for reassurance and hospital team were great on phone'*. She felt comfortable following the instructions given to her by staff at the hospital.

Sophie told us that giving birth at the hospital was *'overall a positive experience'*. She explained that her needs and wishes were met as she was able to make use of the birthing pool during the birth of her baby.

Sophie said, *'It was nice during the labour to be left alone with my partner for a while whilst in the birthing pool to share the moment together'*.

After the birth Sophie was moved to a ward late in the evening where everyone was in bed, so her partner had to leave. Sophie told us, *'the ward was very clean and a lady from the breast-feeding team was absolutely amazing'*.

Once discharged she was visited by the community midwife four times and once by a maternity support worker, who she said was very supportive.

During these visits it was identified that her baby had not maintained birthweight, so Sophie was sent back to Whiston Hospital and admitted onto the observation ward with her baby until her baby maintained her weight.

Sophie's maternity experience had been very positive. She believed that she *'had enough support for herself and baby'*, and she had been *'given enough information and support with feeding baby and her decisions were respected by the midwife'*.

Jenny's story - Whiston Hospital birth

Jenny lives in Widnes and gave birth to her fourth baby at Whiston hospital in July 2020.

She described how her pregnancy, birth and post-natal care were very much affected by the COVID-19 pandemic. She saw one Midwife from the Halton Midwifery Team during her antenatal care.

Jenny told us she did not have as many antenatal appointments with the team as she would have liked. She did not feel she got enough time at her appointments and didn't get to ask the questions she would have liked to. Partners were not allowed at the appointments due to COVID-19 restrictions.

Jenny required additional scans to check on baby's growth and these were done in the Widnes Health Care Resource Centre. She described these as *'perfect and very reassuring'*. The scans were able to show mum that her baby was healthy and well. The need for and results of these scans were explained very well.

Baby was born four weeks early by an emergency Caesarean section. Jenny was put under for the operation so did not have skin to skin with her baby at birth. Jenny's partner was not allowed into the hospital until she was 4-5cm dilated, due to the ongoing pandemic restrictions. This was stressful for both Mum and Dad. The family had confidence and trust in the Hospital Maternity team overall but did not feel they could get help during the birth when they wanted it and did not feel they were involved in decisions about their care. Jenny was discharged with a prescription to manage any pain at home.

When Jenny arrived home from hospital, she did not receive any home visits or checks from the Halton Midwifery Team. As the baby was born four weeks early Jenny received a message about her next antenatal appointment so she informed the midwife she had already given birth. The Halton team were not aware that baby had already been born. At this point she was referred to the Health Visitors. The family had a home visit from the Health Visitor at 10 weeks. The Health Visitor gave Jenny a number to contact if she needed anything but she did not get a reply when she tried texting the number.

Jenny made an appointment at her GP surgery to get her Caesarean scar checked, as she feared it was infected. The Practice Nurse did find that her scar needed treatment and issued Mum with cream. Due to basic checks and home visits being missed Jenny had not had her stomach checked at home.

Mum feels when it came to mental health she received no support at all. She feels she has post-natal depression and has not been offered any help or advice for this. We gave Jenny information on local support group 'Parents in Mind', who specialise in supporting new mums with their mental health.

Jenny told us she had completed an online weaning course led by the Infant Team on introducing solid foods to infants. She felt she would have benefitted more from face to face sessions or groups. Baby has not been weighed at any clinics as they were closed due to the pandemic and Jenny was not aware when they did reopen.

'Having zero support since his birth has been awful, I even had to diagnose my own PND. I have no idea how much he weighs if he's healthy, what's targets he should be hitting, I know the world is crazy right now, but I feel I was abandoned while pregnant and even more so now.'

Laura's story - Whiston Hospital

Laura is a first-time mum who lives in Widnes and gave birth to a healthy little girl in April 2020.

Laura had already decided to have her baby at Whiston Hospital as a result of numerous positive recommendations. Following a pre-natal visit to the hospital and a tour of the maternity department she felt comfortable with the environment and the atmosphere suited what she was hoping for.

Laura saw four different midwives during her pregnancy and commented that the continuity seeing the same midwife was important to establish a rapport and mutual understanding of birth options and wishes. Laura was very complimentary about one of her midwives who was very supportive throughout and encouraging with her birth plan.

Due to health-related issues Laura was classed as high risk during her pregnancy and given weekly scans and various additional appointments, she felt well informed why these were offered and received good care during this time.

On the day of the birth, she rang Whiston Hospital 3 times before being advised to come in. She commented that although she was a first-time mum, she just had a feeling that something just was not quite as it should be. Laura was conscious that due to the COVID pandemic she did not want to just turn up. She felt that following the reactions from maternity staff to these phone-calls she would be simply asked to return home anyway. She told us she was glad she had persevered in her insistence that something was just not right, as it transpired baby had opened her bowels and she was right to go in as early as she suspected.

On arrival at the hospital there was confusion from staff and security on whether Laura's husband would be allowed to remain with her. Her husband was told to wait in the car. This was a really worrying time for her as she did not know if she would have to remain alone until she was moved to the delivery suite.

Laura had wanted to use the birthing pool, purely for pain relief and not as her delivery choice. This was in her birth plan, but on arrival and as part of her health-related issues, maternity staff made it clear this was not an option due to the lack of the correct equipment needed to ensure her safety and theirs. This was also no longer an option anyway once staff were aware of baby opening bowels prior to delivery. Once it was clear that she would be remaining on the assessment ward and not going to the delivery suite her husband was permitted to join her. Laura said this made such a positive difference to her and relieved her fear of giving birth alone.

When Laura needed to have a cannula fitted it was placed in the back of her hand. She said this was an incredibly painful experience. She bled heavily and it left her very bruised, with pins and needle sensations in her arm for several weeks following the birth. During a separate medical examination weeks later, a nurse identified that the cannula injection had in fact hit an artery, which has caused the sensations she was experiencing.

During the labour, she requested gas and air as her main pain relief as she had wanted to remain as mobile as she could during labour. Unfortunately, the gas and air machine Laura has been given was faulty and the noise from it made it difficult to hear any instructions or hear the music Laura had wanted to use to help keep her calm and focused during the birth.

It appeared to Laura that the staff knew there was a faulty machine in the delivery suite as several of them referred to her getting the 'dodgy' machine. She found it frustrating it had not been repaired / replaced if staff were clearly already aware. As she had to be monitored quite closely, she was placed onto a baby monitor and the sensors would not stay in place for her to be mobile, so with a faulty gas and air supply and struggling with monitors she felt that she had quite a difficult time.

During labour the baby became distressed, and an emergency C-section was decided upon. Laura had to have two spinal blocks, as the first hadn't worked properly, and she was taken for surgery. Her husband was allowed to stay during the delivery, and for a while following the birth, as Laura remained on the delivery suite due to prolonged monitoring following two spinal blocks.

Once she left the delivery suite her husband left the hospital, and they didn't see each other again until she was discharged from hospital. Laura found this very hard as a first-time mum.

Laura's discharge from hospital was also delayed as a result of a wait for pharmacy supplies.

Laura said the feeding team were very supportive and supplied a dual breast pump for hire following their first visit. Baby then lost a little amount of weight and then struggled to re-gain weight and it was discovered baby had tongue tie; Laura was also concerned that baby had a milk intolerance, but she felt her concerns were not taken seriously by healthcare professionals.

Baby had a slight fall when she was only a few weeks old and Laura took her to the Urgent Care Centre to be assessed. Staff asked her to take baby to hospital to be checked over and for a potential x-ray. During this hospital assessment the doctors mentioned that baby may be intolerant to cow's milk and baby was diagnosed with Cow Milk Protein Allergy (CMPA), which may have also contributed to the slow weight gain following the birth. Again, Laura was frustrated that her concerns and fears were dismissed and yet she was correct about the outcome and diagnosis.

Laura feels her mental health is good and due to a family tragedy years ago she was possibly monitored more closely than others. She also has her parents living nearby who have remained a constant support and within her bubble during the COVID pandemic.

Laura is happy to report that baby is now doing well and putting on weight. She is very much enjoying being a mum. Laura told us and she found taking part in our Maternity project survey to be a '*cathartic experience*'.

Helen's Story - Whiston Hospital

Helen lives in Runcorn and gave birth at Whiston Hospital in July 2020.

This is Helen's third child and she has given birth to a healthy baby boy. She has experienced living on both sides of the River Mersey during the pregnancies. Her first two children were born whilst she lived in Widnes and the latest child was born whilst she lives in Runcorn.

Helen said she found the number of midwives she saw during this pregnancy very hard to accept. She has seen 4-5 different midwives and felt that the lack of consistency meant she had to explain her *'story'* too many times, and never felt as though she has the opportunity to *'connect'* properly with one midwife.

She felt she was being *'passed from pillar to post'*. However, she did acknowledge that this was during a pandemic and understood that staff were having to self-isolate regularly and possibly ill themselves.

She did comment how markedly different this experience was from her first two pregnancy experiences.

Helen had a scan as normal at 12 weeks and then another scan at 20 weeks. At this point a planned C-section was discussed due to her having a history of giving birth to large babies. She continued to have regular scans and continued far along in the pregnancy before her planned section.

Everything went well throughout the planned section and she commented that the Theatre staff on the day were *'absolutely amazing'* and made her feel very relaxed under the difficult pandemic circumstances. Helen also said she was more concerned how things would go with this baby because of the pandemic and got *'the shakes'* at one point - which was quickly dissipated by the theatre staff and their calming nature.

Helen was sad that the time after the birth with her husband was very brief. The only time they could be together was the walk from the theatre to ward, where they had to part company until her husband collected her from hospital on discharge.

The ward and hospital was *'as clean as it could possibly be'*, and she was very complimentary about the food (she always likes the food in Whiston Hospital). Mum did joke that she had missed her favourite pudding with custard, which she was really looking forward to it!

Helen had a very long wait for pain relief when back on the ward, despite pressing the buzzer four times no one came to her. Helen knew that her pain would start to return and wanted to be pro-active on arranging the next round pain relief. The lack of response meant she was in a lot of discomfort and pain after waiting a few hours. This took a lot longer to subside and she felt it could have been avoided.

Helen noted that the ward was quite full of mainly first-time mums. Helen felt they were struggling with the basic tasks and staff didn't respond quickly to the buzzers. She said that many were waiting a long time for help with feeding and changing nappies.

Helen was discharged after 24 hours and was happy to go home and was discharged with medication.

On speaking to the health visitor, she told she must stop the medication immediately as it was not appropriate for her to take as she was breast feeding, and this could be passed on to baby. This left Helen very concerned and worried about any potential damage to baby.

Helen had two visits from the health visitor and she identified that baby had tongue-tie, but they both managed to work around this, so the cutting process didn't need to happen.

The Halton Infant feeding team were in contact with Helen, but as a third time mum she did not require their help, but she was very grateful for the contact being made, especially under the circumstances.

Helen was very disappointed that her 6-week check was carried out by phone, not by video / Zoom. She didn't feel this was able to gauge a true assessment of how she was truly feeling or looked physically. Helen commented that new mums possibly struggling with depression would not be identified from a phone call - leaving potential for missed post-natal depression.

Helen has not struggled with her mental health but has been well informed of how and where to access support if she needs it. She mentioned *'Parents in Mind'* and other organisations she is familiar with. Helen's parents live very close by and are a good support, she is enjoying time with her new, happy and healthy baby boy.

Jane's Story - Warrington Hospital

Jane is a mum of four living in Widnes and gave birth at Warrington Hospital in May 2020.

She chose to have her baby at Warrington Hospital as she had her first three children there and always found the care to be very good. All of Jane's children were born by Caesarean section meaning she was booked in to have a planned C-section throughout her pregnancy. Jane describes this pregnancy and birth as the best yet, even though it was in the height of the COVID-19 pandemic. *'4th c-section and best experience despite the pandemic going on'*

Jane had a named Midwife from the Halton Midwifery service who she saw for the majority of her antenatal appointments. She found her to be kind and helpful. Jane was offered appointments to suit her, around her other children and commitments. She did see a couple of other Midwives when her named one was unavailable due to leave. Mum had one set of notes for both her community and hospital appointments and found communication between the two services to be good. She always felt she had enough time at appointments and her views were fully taken into account.

Due to previous babies being small, Jane was called in for some additional growth scans. Most of her scans were performed at Warrington Hospital, but one was able to be done at the Widnes Resource Centre which mum found more convenient. She also had a Consultant appointment at Halton Hospital which was also easier to get to and park at. Jane describes all the care she received at additional scans to be very good. Due to the Covid-19 pandemic no partners were allowed at scans or antenatal appointments. Mum found this to be alright for her as she has had 3 babies before and her husband would often be working anyway. Jane did find it worrying to hear stories of many women having their labour and babies alone due to the pandemic.

In April 2020, Jane received a letter to say that her Caesarean Section procedure had been cancelled due to the ongoing pandemic. She found this to be worrying and stressful as she was late on her pregnancy and didn't know when her operation could be rescheduled for. This led to anxiety about going into natural labour, which would not be appropriate with Jane's medical history. The family later received a new appointment and she was booked in for early May. Jane was relieved to find out that her husband would be allowed to go to the hospital with her and also allowed in at visiting times.

Jane arrived at the hospital at 7.30am and waited with her husband to go to theatre. Her partner was allowed to stay with as she waited as she could be called at any time, allowing for other operations and any emergency C-sections taking place that day. Jane gave birth via C-section, as planned, the same day and found it a great relief to have her husband with her. The operation went very well and for the first time in all her births there were no complications at all. Previous births had involved a number of medical complications. She felt listened to and well looked after at all times during her hospital stay. Parents and baby were allowed to stay in the Recovery Area a little longer than usual to allow them more time together in the pandemic climate. Jane tells us she was looked after by a *"helpful Midwife, who was just gorgeous"*. Dad was able to visit between 2pm and 6pm and Jane was discharged the following day.

On returning home the family received 2 visits from the Halton Midwifery Service. One from their named midwife and the second from another member of this team. Mum also received a call from the Health Visitor who offered her a phone appointment due to Lockdown. Jane requested the Health Visitor come to see her at home as she wanted a face to face chat with another adult and for her to see the baby. The Health Visitor was happy to do this and visited Jane at home.

Jane also returned to Warrington Hospital when baby was 10 days old to check on her weight, as this had fallen a little since birth. The Infant Feeding team also got in touch with the family, via a letter and a phone call, to offer support. Jane did not feel she needed any help being an experienced Mother. Jane's mental health was asked about both before and after birth and she felt support would be available if she needed it.

Baby had her health check on time including her needles at around 8 weeks. The GP checked her over and asked lots of questions regarding health and wellbeing. Mum feels she received all the care she needed despite the COVID-19 pandemic.

Jane has only been able to get her baby weighed once since birth, she is now 8 months old. She is disappointed with this. She would have liked to check on her weight more often as she had done with her previous children. She only found out the weighing clinic, at Kingsway Children's Centre, had reopened through word of mouth from another new Mum. She wishes she had been told the clinic had reopened sooner. A two year development check has been delayed by a few months, with no date yet given, for Jane's older daughter so she worries baby's one year check will also be running late.

All Children's Centres and baby groups have been closed during baby's life so far. Jane feels that her baby is missing out on going to playgroups and meeting different people. Although baby is happy and well, Mum does worry that she has spent most of her life so far at home. Online baby groups are available, but these are not suitable as Jane has other children at home with her, and these would not allow any interaction for the baby.

Jane found the care she received from both the Halton Midwifery Service and Warrington Hospital to be great. She found having a local community Midwife team to be good and convenient. The Covid-19 pandemic did affect mum by causing some stress and with community support after giving birth. However, Jane still felt well looked after and being allowed to have her husband at the birth and to visit her in hospital was beneficial to them all.

Gemma's Story - Warrington Hospital

Gemma is a first-time mum living in Runcorn. She gave birth at Warrington Hospital in August 2020.

Gemma attended a new mum 'class' at around 7 weeks, when she was informed that she had a choice of which two hospitals to give birth at (Warrington & Whiston).

She was offered another alternative of Liverpool Women's Hospital, but she was told she would have to source that herself.

Gemma was allocated one midwife, who she saw regularly until she was required to attend the hospital for additional monitoring. At this point she was allocated another midwife, this differed on visits due to staffing. Gemma also commented about the irritation of the Warrington Hospital midwives that her forms from Halton Midwifery Service were different to theirs and this created a lot of additional paperwork for her file.

Gemma was considered a potential high-risk pregnancy and mentioned that this raised her anxiety levels. This was exacerbated when she received a voicemail message from her own GP early in the pregnancy. The message stated that following her last check the midwife had asked if she could start to take aspirin with immediate effect. The message didn't state why or for how long this should be for. When Gemma contacted her GP practice they couldn't answer why aspirin was needed.

Much later in her pregnancy when she discovered that the reason for aspirin was due to low Pap A and it may account for the baby's potential low birth weight and growth rate during her pregnancy, this made her incredibly anxious. This, when added to the appointment restrictions, which meant her husband wasn't able to attend due to covid precautions - was a really frightening time.

Gemma was given lots of additional appointments due to a concern with an amniocentesis result. This was later dismissed, but replaced with extra concerns of low growth and weight. She felt that she was not always informed why these appointments were scheduled and felt more communication from consultants and midwives would have helped with her anxiety. She recounts that due to covid it was a stressful pregnancy. She had to go to all but one scan alone and these appointments included conversations around the possibility of still birth. During all of these discussions she was alone. This was emotionally very difficult.

Gemma told us she relied a lot on pregnancy websites, "*What to expect*" and "*Baby Centre*", to help with her anxiety throughout her pregnancy and said that these were very helpful in filling in the gaps.

Gemma was scheduled to be induced early and told that on her arrival at the hospital her husband could remain with her until she was induced. Following the induction her husband was not allowed to remain with her and he returned to the car. She had to keep leaving the ward to see and update him and to also get the emotional support she needed at that time.

Gemma's husband decided to come into the hospital and remain with her in the hospital corridor outside the labour ward. It was here where she felt she did most of her labour. The only people to check on her were a passing priest and a member of the public. Gemma had indicated to the maternity staff several times that she needed checking as she felt she had reached the 4 cm dilation needed before she was allowed onto the labour ward. She was not checked, she was however asked to put on surgical stockings. Gemma asked for help with these as her legs had been swollen for several weeks and she would struggle doing this herself. She was told the staff were very busy and could not help at that time. Gemma said, "*it was an awful experience; I understand there were restrictions but my dignity was bottom of the list of priorities*". Gemma was left alone all through the induction until she reached active labour.

After finally being admitted Gemma was able to have a bath for pain relief but 2 minutes into her bath she was asked to get out and be checked. At this point it was declared she was 5 cm and need to be taken to the delivery suite.

The actual delivery was a bit of a blur for her following a drop in baby's heartrate. Gemma felt '*very fuzzy*', but remembers a lot of staff in the room to assist with an urgent delivery and her husband remembers this in a lot more detail. Gemma had a forceps delivery and episiotomy. She wished she had received more information regarding how hard and painful the recovery could be. Even though she had in her own words, "*a relatively uncomplicated birth*", she was unprepared for the painful and slow recovery and its many limitations.

Following the birth, she had skin to skin contact with the baby, but reduced the time she would have liked to have as both her and her husband were aware that he was only allocated one hour before he had to leave. However, the staff very kindly allowed him to stay longer, she was extremely grateful for this extra family time. Gemma commented that during her stay the bathroom was very unclean and constantly covered in blood.

Gemma stayed in hospital longer than she would have liked, due to the doctor having too many checks to do, and she had to wait until the following morning. She found this hard, as she was still very anxious and needed to be with her husband. Gemma expressed concern regarding baby's colour but these fears were dismissed and Gemma and her baby were discharged.

On the first Health Visitor home visit, (the day after discharge), the Health Visitor called the hospital and baby was re-admitted for light therapy treatment following a jaundice diagnosis. Gemma was frightened throughout this episode and this added to her worries from throughout her pregnancy.

Gemma also wanted to raise the following comment *"I understand we are in a pandemic but expecting women to go through all the antenatal appointments and labour alone is wrong. We would've happily had covid tests and self-isolated for a time before the due date"*.

Gemma also told us, *'Car parking at Warrington Hospital is a joke. I had SPD and struggled to walk far. Due to staff using the public car parks I was having to walk about a mile for each appointment'*.

Gemma was complimentary about the Health Visitor (especially when baby was re-admitted to hospital), the feeding team and the help she received following her own infection.

She still has concerns regarding baby's weight and growth but is receiving support from medical professionals.

The Health Visitor provided her with details of 'Parents in Mind'³ for any support.

³ Parents in Mind - <https://www.nct.org.uk/about-us/commissioned-services/parents-mind-perinatal-mental-health-peer-support/parents-mind-halton-and-st-helens>

Melissa's story - Liverpool Women's Hospital

Melissa is a first-time mum who lives in Widnes. She gave birth to a healthy little girl in early March 2020.

Melissa chose to have her baby at the Liverpool Women's Hospital. She had previously been to this hospital for fertility treatment and so it felt familiar and comfortable to her. She had also visited a friend at Whiston's Maternity unit who had a hard and negative experience. This association put her off having baby at a more local hospital.

She described her maternity care as being in two sections. The care she received from the Liverpool Women's Hospital where she had all her scans, gave birth and had 5 days of after care and her community maternity care with Halton Midwifery Service.

Melissa was referred for maternity care and given a named midwife from the Halton Midwifery Service. Her midwife explained all her appointments would be with her and would occur on Wednesdays in the middle of the day. Mum asked if this could be changed as she works out of the area and these appointments would be hard to work around. She requested appointments early or late in the day but was told this wouldn't be possible. She was also told she couldn't change to a different Midwife. Melissa took a full day's leave for all her antenatal checks to accommodate this.

According to Melissa, communication between the Liverpool Women's Hospital and Halton Midwifery Service was not good. She told us, *'I had to carry two books around with my antenatal records, as each Trust have their own paperwork'*.

She explained that on several occasions it was said, *'we don't talk to the Women's Hospital'*. Melissa didn't feel fully confident in her community Midwife's care and didn't feel she was given enough information, *'I would have liked to know about Vitamin D and about colostrum harvesting - both which I never knew about until I was in hospital which was too late'*. She described only sometimes being able to discuss what was important to her and her baby. She was never given a community appointment that was at a convenient time for her.

Mum only learnt about the risks of Group B Strep from a poster at a 3D baby scan centre. To check she was clear of the virus she asked for a test on several occasions but was refused. Her Midwife explained the test can show negative but the next day could show up as positive. It was also explained that Group B Strep tests aren't routine.

Towards the end of Melissa's pregnancy her named Halton Midwifery Service Midwife was unfortunately signed off sick and so she saw a number of different members of the community team. A different Midwife from the team did then arrange for Mum to have a Group B Strep test, through a contact at Warrington Hospital. The test was clear.

Melissa explained how a late change in Midwives led to an emergency scan, which she feels would otherwise not have been necessary. Her normal midwife had measured her routinely, at antenatal appointments, but when one of the other Midwives did this it seemed that baby had not grown. Melissa was booked in for an emergency appointment at the Women's Hospital. Baby was found to be well and growing as expected but different styles of measuring by different Midwives had led to the appearance of no growth. At 38 weeks pregnant, Melissa found this experience stressful and upsetting. *'I was passed from pillar to post causing different baby measurements causing me to have to go to hospital for an extra Scan that was completely unnecessary and caused great stress and upset'*.

After 4 hours delivering her baby she experienced problems delivering the placenta and lost 3 litres of blood. She then spent 1 night on the High Dependency Unit and 3 nights on a ward, with her final night in a private room. She found the care in all areas of the hospital to be good.

She described feeling comfortable and confident with the care she received and found staff to be friendly and informative. *'My midwife was amazing she explained everything in perfect detail and made us all comfortable whilst doing her job in an efficient manner'*. Her partner was made to feel welcome and happy with the amount he was able to be on the wards. Melissa did experience a delay with her discharge, being told she could leave at 7am but only being discharged at 7pm. She feels this was poor and communication could have been better to manage expectations.

On returning home, Melissa had her routine visits from a number of different Midwives from the Halton Midwifery Service for her post-natal care before being handed over to the Health Visitor team. The local Infant feeding also visited Melissa and offered support to breastfeed. She found this very helpful and was given a number of strategies to try and a second visit was booked. Unfortunately, the national lockdown was announced before this face to face appointment could happen. *'For the first few days the lady came to my house and was really helpful and then we went into lockdown and it suddenly all stopped, and I really struggled. As a result it took me 4 months to stop using a shield but now 9 months in, our breastfeeding journey is great.'*

The Infant Feeding team continued to support her over the phone and lent a breast pump to support continued feeding. Melissa was loaned the pump for 1 month but actually had it for 6 months due to the pandemic. She said this benefitted her, but she was worried that another mum may have need for this equipment. Melissa had to use breast shields for 4 months and feels this would not have been necessary if she had been able to have more face to face support.

Melissa feels good around her mental health but explained she was asked about it several times by health professionals to check she was ok and was also given information leaflets on the subject.

Mum reported that communication was poor around getting her baby weighed and therefore this was only done once, at six months. Melissa only found out the weighing clinics had reopened through word of mouth from another new Mum. On calling the Children's Centre it was confirmed they had reopened but they only weigh babies under 6 months old. On explaining her situation, she was invited in and got to weigh her child. Melissa found this less than ideal as she had previously been told how important it is to attend regular weigh ins.

Looking back at her experience Mellissa wished, *'Everyone to be on the same page I received lots of conflicting advice the midwife/ health visitor/ feeding consultant all had different opinions there should be more uniformed advice and clarity.'*

Julie's story - Liverpool Women's Hospital

Julie is a first-time mum from Runcorn. She gave birth to a baby boy in Mid-October 2019 at the Liverpool Women's Hospital.

Julie chose the Women's Hospital after being given 3 options by her GP of; Whiston, Warrington or Liverpool Women's Hospitals. She didn't feel the options of where to give birth were explained very well. Mum chose to go to Liverpool Women's as she works in the city and whilst doing her own research had read that this hospital's Maternity Unit had the best report from the CQC of all the local hospitals.

Her pregnancy went well, but she did need some additional scans to monitor her babies growth. All scans were done at the Liverpool Women's Hospital.

Julie found her community midwives at the Halton Midwifery Service to be kind and caring. She saw several different midwives for her appointments and was told this was due to staff changes and holidays. At the end of each appointment, she would be asked to book in for her next check and always found times to suit her as she works flexibly and was given a few choices.

She explained she would have preferred to see just one midwife as she feels this would have given her more consistent care. She found her antenatal appointments to be rushed and felt she had to squash questions in at the end of her checks.

Julie was invited to join an antenatal class by a letter from Halton Midwifery Service, however she felt she was invited to these sessions too late in her pregnancy. The other expectant mums in the group were much earlier in their pregnancy, while Julie was into her third trimester. She found the advice to be aimed at ladies in the second trimester and would have found information such as that on nutrition to be useful to know far earlier. Julie suspects that her late invite was due to the changes in maternity staff. She said she would have liked more information during her antenatal stage. *'I would have liked to have known about circumstances and info re induction and emergency c-sections and what to expect around recovery. It was a real shock to me and very isolating once I was on the ward and back home.'*

Julie would have liked to that more knowledge about what can happen during labour and birth would have been made her better prepared and more able to understand what was happening to her. She would also have liked to receive consistent advice on caring for her baby, for example, *'Swaddling - all the midwives do it but your discouraged to by the likes of Lullaby Trust. Advice on safest way to do this or safer products would be good'*.

Julie felt there was a clear disconnect between her community midwives and the Women's Hospital. Communication was not good, and she carried two sets of notes around with her. She explained that they used different paperwork, for example, two types of growth charts, which did lead to some confusion around baby's growth. On several occasions the Halton Midwifery staff mentioned that they could have checked on things if she had been with one of the local hospitals. They also told her it was hard to call the Women's Hospital, as they often didn't answer.

Julie had a long labour, needing several doses of diamorphine and ending up having a Caesarean section. She found the care she received overall to be really good and helpful. Most of her hospital stay was when she was in labour having chosen to stay just one night after her operation. Julie found it hard to rest on a ward at the hospital so went home where she would have a quite environment and her partner could be help 24/7.

She said she felt, *'sometimes stuck in bed feeling unable to move. I was told I couldn't be helped up because of health and safety. Also pain relief wasn't managed, I hadn't slept for 3 days due to long labour and so neither my partner or I were conscious of my pain relief and was intermittently given paracetamol as I was breastfeeding, which didn't do much for pain.'*

She did however explain that she felt confident in the staff at the hospital and they had explained things to her.

When she returned home after the birth, she was visited by a couple of different midwives from the Halton Midwifery Service. She explained she had met both of the midwives previously at her antenatal appointments. She said these were both lovely visits.

When it came to her mental health, Julie felt she was offered enough support. She was regularly asked how she was feeling in herself by the midwives. After giving birth Julie felt able to talk to her GP. She discussed feeling low

after having her baby and her GP encouraged her to come back if she need support. Julie welcomed this but did not feel she needed any further support in this area.

When the national lockdown hit in March 2020, baby was around 6 months old. Julie found it a very isolating time as the Children's Centre's where she had previously attended groups at, had to close. Julie did not have any contact with the Children's Centre's until she emailed them in September to ask if any groups had reopened. Unfortunately, they were all still closed, with no plans to open in the near future. Julie felt further isolation as she didn't feel it was safe or appropriate to form a '*Grandparent bubble*' as her relatives are in their 70's with pre-existing health conditions.

Julie had support from the infant feeding team, who she describes as '*brilliant*' and '*really, really helpful*'. The team came out to check on mum and her feeding at home. This proved to be really helpful and she would often ring them with questions and for support. They were always very happy to help even when she thought she had called them quite often. During lockdown the Infant Feeding Team offered support over the phone, rather than home visits. Julie was grateful she was able to get face to face support, as her baby was born pre lockdown, as she feels this really aid with feeding support. Some of her friends had babies after March 2020 and feel they have missed out on this vital home visit. *'The infant feeding team were brilliant - a fantastic resource. Really sad for mums who've given birth during covid who don't have access at the same level e.g. face to face'*

Baby was weighed regularly at Windmill Hill Children's Centre. These visits were very useful as Health Visitors were also on hand to answer any questions parents had. These sessions later closed down due to Covid-19. Julie explained that the one year routine check was delayed by one and a half months.

Julie felt she would like a debrief of her birth experience to have a better understanding of why she needed a C-section and what this would mean for future births. She asked her community Midwife and was told to call the main switchboard at The Liverpool Women's Hospital. She wasn't sure if they could help her so had not got in touch and was left with questions and concerns.

We have since contact the Patient Experience team at the Liverpool Women's Hospital for Julie and they have agreed to contact her and debrief her.

Rose's Story - Countess of Chester Hospital

Rose lives in Runcorn and gave birth at the Countess of Chester Hospital in March 2020.

She rated the experience as *'very good'*. She did however tell us, *'I was not given options during my first antenatal visit as to whether she would wish to make use of the birth pool facility' although I was given the opportunity to ask questions at my appointments and any questions asked were explained in a way I could understand at appointments'*.

Rose went into labour two weeks earlier than expected, whilst at home. She contacted the hospital and was told by a staff member to come to the hospital where she would be given an examination.

After arriving at the hospital and being examined, staff explained that she wasn't dilated far enough to be admitted and would therefore be sent home. Rose was advised that she would most probably give birth within the next 24 hours.

Rose was admitted to hospital the following morning when her waters broke. She explained that maternity staff on the labour ward were very supportive as they allowed my partner and mother to be present during labour which she found very reassuring. Rose told us, *'The midwife attending to me and my baby was amazing'*.

She explained that care received following her discharge from hospital, *'could have been better as there was a lack of aftercare once I was discharged home, as the country was in a COVID-19 lock down which was really difficult. I felt that I was just left to get on with it, as I was given no follow up appointments, one lady phoned me, but this was after I had rung around the various agencies and my mother could not help as she was out of the country so I felt alone and did not know what to do.'*

Rose felt she experienced a lack of support from various agencies with regards to breastfeeding. She said, *'Even though I was breastfeeding I did not receive any support from any services, and I assumed the baby was fine and getting enough milk. However, when I visited the baby clinic they said the baby was underweight and had not been putting enough weight on. I was not aware of the issue which knocked me sick! It was only at my appointment at the clinic that the Health visitor advised my baby should be taken off breast milk and put on formula milk, which I did, and my baby started thriving and became more content'*.

Amy's Story - Countess of Chester

Amy lives in Runcorn and gave birth to her second child at the Countess of Chester Hospital in September 2020

Amy told us, *'the anti-natal treatment provided at the hospital was very good'*, but felt it could be enhanced saying, *'If I were a first-time mum I would have wanted to know about the physiology of birth and what could happen when I went into labour'*.

She said she was at home, *'when I started to experience backache which went on for several hours which gradually became more and more uncomfortable, so I decided to call the hospital about midnight'*. During the call she was able to explain to hospital staff how far apart her contractions were and the staff told her to make my way into hospital.

When she arrived at the labour ward she was examined. Amy told us the delivery room was very clean and comfortable. She had the option of a birthing pool which she had requested which helped her feel comfortable and manage the pain during the birth. *'The midwives at Chester were brilliant. They kept the lights very low and let both my husband and I have our music on when we wanted to'*. Amy highlighted that *'during my labour and delivery there was no crossover of midwives changing shifts which was brilliant'*

On returning home following the birth, Amy didn't see anybody until day 5 when the Health Visitor came and the baby had the heel prick and *'that was the first contact I had actually had with someone'*. During the appointment Amy was given some breastfeeding leaflets. She told us, *'I have breastfed previously so did not need much information however, the focus seemed to be on checking how I was feeding rather than offering support'*.

Amy spoke of her experiences of the Infant feeding team which she described as, *'not great, as they did not have the right information with regards to me and my baby. They initially believed I had undergone a caesarean and I had to explain I had not had a caesarean'*.

Amy visited her GP surgery to have the baby weighed by the Community Midwife.

Amy told us she hadn't experienced any problems with post-natal depression following the birth of the baby.

Response received from NHS Halton Clinical Commissioning Group

The following response was received from Leigh Thompson, Chief Commissioner at NHS Halton CCG

Thank you for sharing the Maternity Matters Report that summarises the responses you received from your Halton maternity experience survey. We would like to first of all thank you for taking the time to coordinate this piece of work, as we found it extremely useful and timely, with it coinciding with a project we are currently leading on to improve the local maternity pathway for woman and their families.

The feedback from women reflects some of the conversations we have had recently with all local maternity providers, and we intend to spend some time with them to go through this report and ensure that all the information is taken into consideration as we move forward.

We have taken note of each of the recommendations within the report and have provided a response below:

1. Continuity of Carer - Ensure that women have access to a consistent service at times that suit them

This has also been highlighted as a national requirement from the Better births report, which is one of the main drivers for the work we are doing to redesign the model of care pathway for women and their families to ensure they receive better end to end care. This includes having access to the same midwife from the same midwifery team throughout their journey where possible and at times that suit them. We will also be engaging with women over the next month or so to ensure they have an opportunity to contribute to the redesign of the pathway and will ensure we involve the women who have expressed an interest in further engagement.

2. Online Support Apps

We will ensure this is included in the women and families engagement plan and would be happy to share this with you once it has been finalised. We will also raise this with the midwives when we work through the next stages of the redesign of the local pathway.

3. Find the time

We will raise this with the midwives and all staff that are involved with maternity care when we work through the redesign of the local pathway and ensure that this is taken into consideration.

4. Manage expectations - Ensure all communication is open and transparent, particularly when discussing birth plans and options

Same as above, we appreciate how important open, honest and clear communication is especially on a maternity pathway. We will continue to work with our women and families and with our midwifery teams to ensure we demonstrate the approach we want to take and would be happy to flex and change our local approach to ease the pressure for all involved.

5. Group B Streptococcus information

Same as above and if you and or team have any further suggestions how we can improve our approach please do let us know as your help is always valued.

Again we would like to thank you and the team for your ongoing and valuable support and all of the suggestions that you highlighted with regards to further engagement around online and offline support, after care and information and postnatal care can be included in the women and families engagement plan and we will contact your for the details of the women who wish to be involved, so we can ensure they get the opportunity to share their ideas of what they feel would work better for them. NHS Halton CCG would like to thank you for this work and will ensure you are involved in our development work going forward.

Appendix One : NICE Guidelines - Antenatal Care

List of quality statements⁴

- July 2013: Quality statement 7: Risk assessment – pre-eclampsia has been removed and is replaced by quality statement 2: Antenatal assessment of pre-eclampsia risk in hypertension in pregnancy (NICE quality standard 35).
- Statement 1. Pregnant women are supported to access antenatal care, ideally by 10 weeks 0 days.
- Statement 2. Pregnant women are cared for by a named midwife throughout their pregnancy.
- Statement 3. Pregnant women have a complete record of the minimum set of antenatal test results in their hand-held maternity notes.
- Statement 4. Pregnant women with a body mass index of 30 kg/m² or more at the booking appointment are offered personalised advice from an appropriately trained person on healthy eating and physical activity.
- Statement 5. Pregnant women who smoke are referred to an evidence-based stop smoking service at the booking appointment.
- Statement 6. Pregnant women are offered testing for gestational diabetes if they are identified as at risk of gestational diabetes at the booking appointment.
- Statement 7. Risk assessment – pre-eclampsia.
- Statement 8. Pregnant women at intermediate risk of venous thromboembolism at the booking appointment have specialist advice provided about their care.
- Statement 9. Pregnant women at high risk of venous thromboembolism at the booking appointment are referred to a specialist service.
- Statement 10. Pregnant women are offered fetal anomaly screening in accordance with current UK National Screening Committee programmes.
- Statement 11. Pregnant women with an uncomplicated singleton breech presentation at 36 weeks or later (until labour begins) are offered external cephalic version.
- Statement 12. Nulliparous pregnant women are offered a vaginal examination for membrane sweeping at their 40- and 41-week antenatal appointments, and parous pregnant women are offered this at their 41-week appointment.

⁴ Source: <https://www.nice.org.uk/guidance/qs22/resources/antenatal-care-pdf-2098542418117>

Other links:

Healthwatch England - Mental Health and the journey to parenthood

<https://www.healthwatch.co.uk/report/2019-09-09/mental-health-and-journey-parenthood>

Care Quality Commission – Maternity Services Survey 2019

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

NHS - Better Births Four Years On - A review of progress

<https://www.england.nhs.uk/publication/better-births-four-years-on-a-review-of-progress/>

NHS - Maternity Transformation Programme 2020

<https://www.england.nhs.uk/mat-transformation/>

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