

April  
2016

Special  
measures,  
to special  
moments

*An overview of maternity services provided by East Sussex  
Healthcare NHS Trust, from the parents and families perspective*

"It takes a minute to feedback, but the difference could last a lifetime"

---

# Contents

- Executive summary ..... 4**
- Acknowledgements ..... 6**
- Background ..... 7**
- Methodology ..... 8**
  - How did we collect information on experiences? ..... 8
  - Call for evidence ..... 8
  - Learning ..... 9
- Summary of experiences ..... 10**
- Involving women and parents ..... 12**
- Enter and view activity ..... 12**
- Enter and view - headline findings ..... 14**
- What worked well ..... 18**
- What did not work well ..... 19**
- Gold standard requirements ..... 22**
- Enter and view observations ..... 24**
  - Cleanliness ..... 24
  - Equipment and environment ..... 24
  - Privacy ..... 25
  - Interaction with nursing staff, patients and partners ..... 25
  - Pain relief and medication ..... 26
  - Meal times ..... 26
  - Visiting and security ..... 27
  - Highlights from the Authorised Representatives ..... 27
- Complaints review ..... 28**

---

Recommendations for East Sussex Healthcare NHS Trust .....	29
Recommendations for Healthwatch East Sussex .....	30
Recommendations for the working group .....	30
Director’s comment.....	31
Partner’s comment .....	31
‘About me’ monitoring forms.....	32
Appendix 1- call for evidence .....	33
Appendix 2 - East Sussex Maternity Services - Your Experience Matters .....	34
Appendix 3 - Fact sheet: What is enter and view? Given to patients as part of enter and view activity .....	36
Appendix 4 - Staff Bulletin for East Sussex Healthcare NHS Trust staff .....	38
Appendix 5 - Observation sheet and face to face interviews prompt sheet .....	39
Contact us .....	43

# Executive summary

This maternity overview report is the second in a series of three reports Healthwatch East Sussex (HWES) will publish, as part of a programme of support agreed with East Sussex Healthcare NHS Trust (ESHT). The aim of this programme of support is to strengthen the role that patient and public involvement contributes to the quality improvements the Trust is required to make.

As quoted in the recent national maternity review:

“...the birth of a child should be a wonderful, life-changing time for a mother and her whole family. It is a time for new beginnings, of fresh hopes and new dreams, of change and opportunity. It is a time when the experiences we have can shape our lives and those of our babies and families forever. These moments are so precious, and so important. It is the privilege of the NHS and healthcare professionals to care for women, babies and their families at these formative times”.

Reference: *Better Births: Improving outcomes of maternity services in England - A Five Year Forward View for maternity care.*

[www.england.nhs.uk/wp-content/uploads/2016/02/national-maternity-review-report.pdf](http://www.england.nhs.uk/wp-content/uploads/2016/02/national-maternity-review-report.pdf)



## BETTER BIRTHS

Improving outcomes of maternity services in England

A Five Year Forward View for maternity care



This report is an overview of findings gathered using the following methods:

- **Call for evidence** inviting women, their partners and families to share their experiences of using maternity services.
- **Enter and view activity** this involved trained volunteers visiting maternity services, speaking directly with 50 patients and / or their partners about their experiences; and noting their observations of the service over a three day period.
- **The work of a group** to design an action and learning plan following the review of the 197 completed responses and 16 case studies received.

Of the 50 parents and partners Healthwatch East Sussex authorised representatives spoke with, most said the service was good or excellent, whilst noting the high activity levels at the Conquest hospital.

“Staff care really good - been brilliant with us”  
A patient perspective

Women and partners particularly commented, that the time and support available at the midwife-led unit at Eastbourne, “is excellent”.

The report also identifies areas for improvement which Healthwatch East Sussex would recommend, these include:

- Ensuring that there is a clear protocol in place for the safety of babies and mothers as they travel between the maternity units. This protocol should be available and communicated to parents so that they can understand where accountability and responsibility lies during this travel time.
- The development of clearer guidelines for fathers, to include how to support their partner during hospital appointments and her stay in hospital; following a caesarean section; and the details of visiting arrangements which should be appropriate for each site, including out of hours arrangements.
- Building into birth/support plans information about the home circumstances of women, including any older children to increase greater awareness and understanding of maternity staff.
- Review of access arrangements to units at night and how these are communicated to parents.
- Ensuring there is a dedicated member of staff available on each shift to support women with breast feeding and that women know who that member of staff is.
- Exploring the possibility of introducing a ‘parking tariff ceiling’ for fathers who are supporting their partners, especially during protracted labour.
- Reviewing the system for labour induction to ensure it works well for women.
- Ensuring that information boards giving staff details are kept updated, and that all information displayed is consistent and current.
- Ensuring that all other information given on notice boards is consistent, current and relevant; and
- ESHT responding to any further recommendations proposed by the working group.

Healthwatch East Sussex would also like to secure a commitment from the Trust, to continue to work with us on gathering and responding to feedback on maternity services, as part of the Trust’s Improvement Plan.

# Acknowledgements

Healthwatch East Sussex would like to thank everyone who participated in this review including:

- Those who shared their experiences online and the new parents we met on the wards for their contributions during the visits.
- The authorised lay representatives who gave their time, commitment and energy visiting maternity units and engaging with parents; and
- East Sussex Healthcare NHS Trust staff and management team for their support in making this work happen.

All those involved brought a range of perspectives to this review which has been invaluable in completing the work and producing these recommendations.

# Background

In September 2015 the Trust was placed in special measures following two Care Quality Commission (CQC) inspection reports with overall ratings of inadequate.

[www.cqc.org.uk/location/RXC01/inspection-summary#maternity](http://www.cqc.org.uk/location/RXC01/inspection-summary#maternity)

Maternity services in East Sussex are obviously very important to the local population, with different communities having very strong opinions about the service they use.

The Healthwatch East Sussex review looked at services provided at the District General Hospital in Eastbourne, and Conquest Hospital in Hastings.

The service at the Conquest Hospital includes:

- Consultant-led unit with a day assessment unit.
- Ante-natal and post-natal inpatient wards.
- Labour ward; and
- Special care baby unit.

At the Eastbourne District General Hospital there is a midwife-led unit.

There is a second midwife led unit at Crowborough War Memorial Hospital. This was not included in the review, as the service is in the process of transferring to another provider.

It is important to note that in June 2014, the three East Sussex Clinical Commissioning Groups (CCGs), agreed the future configuration of local NHS maternity, in-patient paediatric and emergency gynaecology services. This followed the conclusion of the Better Beginnings consultation.

This report from Healthwatch East Sussex, has examined experiences gathered from patients, of the quality provided by the current service delivery, and not the service structure.

[www.hastingsandrotherccg.nhs.uk/news/ccgs-agree-outcome-of-better-beginnings-consultation/#.VwlpTvkrKUK](http://www.hastingsandrotherccg.nhs.uk/news/ccgs-agree-outcome-of-better-beginnings-consultation/#.VwlpTvkrKUK)

# Methodology

This report considers the experiences of parents and their families using maternity services provided by East Sussex Healthcare NHS Trust (ESHT), since March 2015. It has generated a range of insightful and important conclusions.

The aim of this work is to translate patient feedback on maternity services into service improvement. Our approach was to create an environment of continuous learning within ESHT. This was done by involving the women, parents and families using maternity services, as partners in the improvement programme.

We also aimed to link to the messages women gave the National Maternity Review - 'Better Births' review team:

*"Women have made it abundantly clear to us that they want to be in control of their care, in partnership with their healthcare professionals"*  
National Maternity Review

## How did we collect information on experiences?

The insight generated in this report was gathered using the following methods:

- Publishing a call for evidence during 25<sup>th</sup> January - 22<sup>nd</sup> February 2016.
- Involving women in the planning and shaping of this review.
- Engaging with women and their families using enter and view activity; and
- Establishing a working group, to evaluate the feedback received, to develop an action/learning plan.

## Call for evidence

From 25<sup>th</sup> January - 22<sup>nd</sup> February 2016, women and families were invited to share their experiences of using maternity services at Eastbourne District General Hospital (EDGH) and at the Conquest Hospital in Hastings, since March 2015. (See Appendix 1).

Healthwatch East Sussex wanted to understand what worked well for women and what did not work so well. This included the experiences of partners, wider family members, and where appropriate, members of staff.

An online survey was designed to capture feedback from the public and a social media campaign was designed to promote the activity.

[www.healthwatcheastsussex.co.uk/maternity/](http://www.healthwatcheastsussex.co.uk/maternity/)

The local media also promoted awareness of the call for evidence through articles in local newspapers.

A total of 197 online responses were received, a further 16 women made contact

---



---

wishing to tell their particular story (referred to as case studies), and 76 women expressed an interest in being involved in some way with the activity. (A copy of the online survey can be viewed in Appendix 2).

This feedback is therefore entirely the experiences of women, their partners and families who proactively completed the online survey. This has both advantages and disadvantages for the reporting process. The obvious advantage was the high number of respondents.

The disadvantages include where individuals did not offer any contact details, meaning Healthwatch East Sussex was not able to pursue a specific issue further, or probe for more information about an intriguing or concerning comment.

## Learning

To further understand and evaluate the experiences shared, and at the request of the Trust, a working group will be formed to go through each of the responses (operating within strict confidentiality and data protection protocols).

The working group will include the Head of Midwifery and Gynaecology from the Trust, the Healthwatch East Sussex project lead, lay authorised representatives, service users; and a representative from the relevant Clinical Commissioning Groups.

The objective of this group is to produce an action plan, setting out how the Trust will take the learning forward from the feedback and report on the themes and trends that emerge.

This action plan will be put in place and presented to the Health Overview Scrutiny Committee (HOSC) with this report. This is for when it meets at the end of June 2016, to review the progress of the Trust's overarching Improvement Plan. A summary of the experiences gathered has already been shared with Trust.

This information also contributed to developing the key lines of enquiry that Healthwatch East Sussex authorised representatives followed when they visited both services, as part of **enter and view activity**. (For a description of enter and view activity, see Appendix 3).

# Summary of experiences

Many descriptions of experiences using services across sites included "excellent", "outstanding" and "faultless".

Other themes emerging included:

- **Travel to and from both sites** - was mentioned frequently; some women did say; "*once they got to Hastings, the experience was good and that they would choose the Hastings unit again*". Overall the travel experiences shared were largely negative.
  - **Breast feeding** - more support was required with breast feeding; especially for first time mums, who at times, felt very vulnerable when the unit was extremely busy (Conquest Hospital). Some were told they would receive this support, but it didn't always happen.
  - **Interactions with staff** - respondents described a variety of interactions with staff, some with a degree hostility i.e. using words such as "*staff attitude*", with mostly negative comments. However, this was not consistent across the service, for example, arrival on the unit and post-natal care were not as positively described, as the midwives in the delivery suite. Most women described their experiences and interactions with midwifery staff in the delivery suite as 'excellent'. Care post-delivery received the most negative comments. Some adverse feedback was also received about interactions involving consultants and doctors.
  - **Staffing levels** - this appeared very frequently in responses and was described as being a fundamental contributor to a good or not so good experience. Many contributors also commented on how the unit (Conquest Hospital) appeared to be understaffed and the members of staff that were on duty, were over worked, but trying their best to deliver a good service.
  - **Communication, feeling involved and listened to** - a number of examples were given by women who felt they were not listened to, especially when they tried to communicate what they were experiencing during their labour. Respondents also described examples of poor communication between ward staff and doctors, between doctors and doctors, (inconsistent in information provided to women at various appointments) and with patients. Respondents also linked poor communication to staffing levels resulting in an overall negative experience.
  - **Cleanliness and hygiene** - this was perceived by women as being possibly linked to how busy the unit was, and included references to sheets not being changed regularly. The majority of negative comments on the ward facilities were about showers and toilets.
  - **Involvement of husbands and partners** - a total of eight fathers completed the survey, sharing views about supporting their wife/partner. Some women commented about the facilities for partners and how that could be improved in ways which would reduce stress and anxiety for them.
  - **Emergency caesarean section** - a number of women said their labour resulted in an emergency c section having to be performed. Some linked this
-

to possible shortages of staff to monitor progress where labour was progressing slowly. Some women also described observing “more coming in (women in labour) than staff and doctors available”.

- **Pain relief (and medication)** - inconsistencies in offers of post-natal pain relief, when women asked, some said their requests were not responded to or forgotten. Other comments received included waiting long times for medication to take home, on an occasion resulting in an additional overnight stay. Other examples of experience included that if your baby was in special care and you were with your baby, then your medication was sometimes missed.

These findings also link to the National Maternity Review - Better Births report:

“...women’s experience of maternity care is generally positive, but there are reservations over the availability of choice and the provision of care following birth. Maternity staff report higher levels of perceived stress and a less supportive work environment than other NHS staff”.

National Maternity Review

## Involving women and parents

Of the 76 women who expressed an interest to be involved in this review, one woman attended the planning session, and one service user accompanied authorised representatives on the visit to the Eastbourne District General Hospital midwifery-led unit.

The remainder received copies of the draft questions for comment prior to signing off at the planning meeting. Several helpful suggestions were received, and Healthwatch East Sussex will continue to engage with the group throughout this review.

## Enter and view activity

To enable Healthwatch East Sussex to gather the information it needs about services, there are times when it is appropriate for trained Healthwatch volunteers (authorised representatives), to see and hear for themselves, how those services are provided.

The key benefits of enter and view, are to encourage, support, recommend and influence service improvement by:

- Capturing and reflecting the views of service users who often go unheard.
- Offering service users an independent, trusted party (lay person), with whom they feel comfortable sharing experience.
- Engaging with carers and relatives.
- Identifying and sharing 'best practice' e.g. activity which works well.
- Keeping 'quality of life' matters firmly on the agenda.
- Encouraging providers to engage with local Healthwatch as a 'critical friend', outside of formal inspection.
- Gathering evidence at the point of service delivery, to inform a wider understanding of how services are delivered to local people.
- Validating existing evidence and insight.
- Supporting the local Healthwatch remit, to ensure that the views and feedback from service users and carers play an integral part in local commissioning; and
- Increasing awareness with the public about Healthwatch East Sussex.

These visits provide a snap shot of views and experiences from women and families using ESHT maternity services over a three day period.

The Enter and View visits took place from **Thursday 17<sup>th</sup> March - Saturday 19<sup>th</sup> March 2016** between 10.00 and 18.00 hours.

---

Seven authorised representatives participated along with two degree students, both enrolled in health and care courses, from the University of Sussex (as observers) and one service user.

The project lead from Healthwatch East Sussex was available across both sites, to talk to staff about the role of local Healthwatch if required. One staff member spoken to was not aware of local Healthwatch; others had limited knowledge and awareness of the visits, but were positive about the value of patient feedback as a mechanism to improve their services.

A staff bulletin was drafted for hospital staff to raise awareness of the role of local Healthwatch and the current activity taking place on sites. (See Appendix 4).

Prior to the visits the EHST Head of Midwifery and Gynaecology attended the planning meeting with the volunteers to describe the facilities and services provided. These are:

At the Conquest Hospital

- 14 Ante-natal beds.
- 23 post- natal beds.
- 10 delivery rooms, including a birthing pool; and
- 4 bed Day Assessment Unit.

At the Eastbourne District General Hospital, midwifery-led unit

- 2 birthing rooms.
- 4 Post-natal beds.
- 2 antenatal/postnatal examination rooms; and
- 3 bed Day Assessment Unit.

The EHST Head of Midwifery and Gynaecology also suggested that authorised representatives visit the ante-natal clinics and the ultrasound scanning departments, to complete their understanding of the range of services available.

The Healthwatch East Sussex project lead for this review, also visited the maternity unit at the Conquest hospital, to observe and learn about the changes that had been implemented since the CQC inspections, including:

- A new matron appointed for Frank Shaw ward, and who started with the Trust in March 2016.
- A dedicated milk kitchen on Frank Shaw ward, which improves safety when milk is being prepared.
- A service manager appointed for gynaecology, and who has been in post since September 2015.
- Specialist bereavement midwives have been appointed and in post since November 2015.

- A specialist perinatal mental health midwife has been appointed and will be in post from April 2016.
- A specialist infant feeding midwife has organised the tongue tie clinics
- There are new sluice facilities (soiled utility room), on the labour ward.
- The new office and midwives station has been completed.
- The Room 6 'Waters suite' is open.
- Enhanced Recovery After Surgery (ERAS), for elective lower segment caesarean section (LSCS) has also started to improve the experience and outcome for elective caesarean sections; and
- The refurbishment of shower rooms on Frank Shaw ward and the bathroom on Murray ward is scheduled for April 2016.

## Enter and view - headline findings

A total of 50 survey interviews were completed. (A copy of the survey used can be viewed at Appendix 5).

Findings and percentages are based on those who completed the questions.

Participants who completed the survey questions in ante-natal clinics did not complete all of the questions relating to post-natal care.

Most entries when logged showed that the mother completed the survey.

When the father, partner or supporter(s) were present, the experiences given were recorded as those of a family unit, and the experience of giving birth treated as a shared one.

### Locations completed

Ward / department	Conquest Hospital	Eastbourne DGH
Ante Natal Clinic	7	2
Scanning Department	2	0
Post Natal Ward	20	13
Day Ward	5	1
<b>Total</b>	<b>34</b>	<b>16</b>

- When asked if this was the first pregnancy for parents it was split evenly. 48% stating that it was their first birth, and 52% stating that they had had children previously.
-

- 68% of parents interviewed said they were currently at the hospital they had planned to give birth in. The reasons why some parent's original plans did not work out, was due to complications arising from birth, e.g. requiring an emergency caesarean section, to ensure the safety of the baby, or the mother required pain relief which is only available at the Conquest Hospital, (i.e. epidural anaesthesia to block pain).
- 90% of those asked said that their experience of arriving at the unit they were interviewed in was very good or good; and
- 28% of those who answered questions about a transfer between hospitals during their stay said that they felt this was done in an unplanned way.

**“Transferred 22:00 - 02:00 to Conquest.  
Midwives unfamiliar with room, machine had to be dragged in”  
A patient perspective**

In many cases, whilst transfer was felt to be appropriate for the safety of mother and baby prior to delivery, there were several examples of mothers being transferred very soon after birth, and having to use their own transport when travelling to another site for on-going post-natal care i.e. Eastbourne Maternity Unit (EMU).

Although some parents felt this was appropriate, it does raise the question of who holds responsibility during these journeys should complications arise, are they still regarded as in-patients during the transfer?

One respondent did give positive feedback about receiving lots of support and information before and during the journey, from a midwife and paramedic.

In some instances, where transfers were made, mothers were separated from their husband or partner. In one example, the couple were not reunited for over an hour as the partner was not able to contact anyone at the new ward to gain access. This followed a blue light transfer from Eastbourne District General Hospital to the Conquest Hospital at 23.00 hours, where the mother travelled in the ambulance and the father by car.

**“Separated from husband so he had to bring car,  
- took him 1 ½ hours to get in and find ward”  
A patient perspective**

## Highlights from the Authorised Representatives

There is a statistics board displayed in the Eastbourne maternity unit offering the following information to patients and visitors about transfers to the Conquest hospital.

### From April 2014 - March 2015

- First time mums - 56% birth at Eastbourne Maternity Unit (EMU), and 44% were transferred to Conquest hospital.
- Second/third babies - 91.3% birth at the EMU, and 8.7% at the Conquest Hospital.

One couple talked about transferring to the Conquest Hospital, to access specific equipment to monitor foetal heart rate with contractions. Whilst this equipment is available at the Eastbourne District General Hospital, it is not positioned in the labour ward, and is difficult to move.

The couple were pleased to return to the Eastbourne District General Hospital.

### Did you receive the support from staff you were expecting?

	Nursing staff	Doctors	Consultants
Yes	90%	90%	88%
No	10%	10%	9%
Don't know	--	--	3%

- Where answered, 81% of mothers said they received the pain relief they expected. Where this was not the case long waiting times were cited. There was some variance in the delivery of relief, due to staffing levels and / or capacity.
- 44% of mothers said they did not achieve their birth plan. A further 10% said they almost achieved it. Reasons given for not achieving the plan were a lack of monitoring equipment being available at certain times of the day. This included heart rate monitors not being accessible to those on the birthing unit overnight and complications with childbirth necessitating a change.
- Where birth plans needed to be changed, 75% of mothers who answered felt they were involved in the changes, with 9% feeling a little involved.
- When returning to the ward after the birth, 82% of mothers felt they received the care, support and information they were expecting, to give them a positive start.
- Before going home, 58% of parents said they were given all the information they needed, to be able to return home with their baby; and
- 39% did not know if they had enough information.



**“My Community Midwife is excellent. She is friendly and fun. Happy attitude”**  
A patient perspective

### Highlights from the Authorised Representatives

Authorised representatives highlighted the following comments they received:

- “Staff care is really good - been brilliant with us” .
- “Can’t fault it - everything done well” .
- “All staff really helpful” .
- “Felt relaxed and looked after” .
- “Warm welcome- pleasantly surprised - can’t fault them” .
- “The time and support available to us (when transferred back to Eastbourne)” .
- ‘Particular praise from two mums for a student midwife’ .

These comments are also supported by the many ‘thank you’ cards seen at both sites. One card read:

**“Thank you for all your help, support and advice from a couple of emotional and sleep deprived new parents”**  
A patient perspective

## What worked well

Many positive comments were received, these included:

- Staff being caring, responsive and professional, despite recognition of capacity issues by parents.
- Several mentions for student midwives, who were shown to be knowledgeable and confident, giving mother's confidence. One was described as, "amazing".
- Support for breast feeding.
- Aftercare following a caesarean section.
- Epidural pain relief and alternative gas and air when the former not available.
- Privacy, dignity and respect and cleanliness in the scanning department, and
- Quiet rooms in EDGH which gave an air of calmness.

**"The Nurses and Midwives are Excellent - explanations are very good, not just left in waiting room which has happened"**

A patient perspective

### Highlights from the Authorised Representatives

There were several positive comments about how midwives and other staff had involved women in discussion about decisions, when changes to a birth plan became necessary. One woman commented: "*It was a joint decision*".

## What did not work well

### Concerns and negative comments were also received, including:

- Clarity of information when the mother or baby is in specialist care i.e. regular updates to parents if the baby requires support in a separate unit.
- In one instance inaccurate information was given to a father who then missed the birth.
- Demand and capacity levels on wards in busy periods, especially at the Conquest Hospital.
- Having to move between hospital sites soon after giving birth.
- Some respondents reported the birth plan was not read, leading to confusion over mother's / parent's wishes.
- Long waits, in some cases for community midwives, consultants and pain relief. One mother cited a five hour wait for a clinic appointment at the Conquest Hospital. Some long waits for discharge also reported.
- Delays led several parents to worry about childcare arrangements outside of the hospital, leading to increased anxiety. One father reported losing pre-booked paternity leave as a result.
- Some partners reported being unable to stay, and there appeared to be different protocols for this on the two sites. Some mothers reported poor attitudes shown towards family support members after birth.
- Some mothers reported needing help with breastfeeding, where they were having their first child.

**"Left not knowing how to care for [my] baby. Baby's blood sugars went down and paediatrician told me off because I didn't feed [the baby] enough"**

**A patient perspective**

- Car parking charges, particularly during protracted labour.
- Lack of food for fathers and family support members.
- Some respondents noted domestic areas that may need attention e.g. changing beds.
- There is some conflicting information about attendance at appointments. Some notices in clinics indicated a triage approach as the method of being seen, while other notices say an appointment system is in place.

**"Can't have any visitors. Not seen anyone since Tuesday - it's now Friday!"**

**A patient perspective**

---

## Highlights from the Authorised Representatives

- Mothers with older children at home. Some felt that home circumstances needed more consideration by the staff. One mother had a complicated, but well managed delivery, was due for discharge that morning, but was held back several hours because the staff were busy. Mother expressed concern about her older child, who has autism, becoming disturbed as a result of this delay.
- One woman said she thought the service should be 'holistic', by which she meant that there should be a single service of community midwives. The Eastbourne District General Hospital and the Conquest Hospital working together. It didn't feel like a single service to her and her partner, when they had to drive back in their own car from the Conquest hospital to the EDGH after giving birth. There is a dropping out of the service rather than a single service all the way through.
- One mother would have liked someone to make contact with her when she arrived on the ward - she eventually went and introduced herself.
- It was very clear from observations, the Frank Shaw post-natal ward at the Conquest Hospital is very busy at times, and the staff are stretched.

**"Response to call bell is slow during the day - better in the evening"**

A patient perspective

**"Staff didn't have enough time to help me with breast-feeding - gave help but it was rushed"**

A patient perspective

(This mother then transferred to Eastbourne, where she said the staff had far more time to help her and her baby began to feed well)

## Other concerns identified from talking with women and partners

- There were delays at both units for labour inductions.
  - At the Eastbourne District General Hospital, a couple were told to arrive at 07.30 hrs but not seen until 09.30 hrs.
  - At the Conquest Hospital, mothers needing induction were brought in despite the unit being unusually busy. There was therefore a queue for induction. Three mothers waited without information about how long, one had been waiting for two days, but was glad to be able to rest.
  - One father regretted that they had not waited at home, as he had missed a day's paternity leave and imposed on other childcare.
-

- Mothers seemed torn between going home and waiting, but by going home, they knew they missed their place in the queue. One mother said that if she had waited at home until labour began, she could have resumed her previous plan for delivery at the Eastbourne District General Hospital.
- All understood the reason why the unit was so busy, that this has happened more frequently in the last year, due to; what they understood to be, a strengthening in the protocols for labour induction; and
- Midwives are apparently stressed by these extra busy times; however the unit never the less seemed calm and patients understanding, though feeling frustrated.

# Gold standard requirements

Healthwatch East Sussex asked women to describe what their requirements would be for a 'Gold Standard' service. Examples included:

- More staff, midwives especially.
- Allow for one to one care, so the team(s) get to know you.
- More capacity for staff, and more time to answer questions.
- Holistic system approach - more working together between the Conquest hospital and Eastbourne District General Hospital. Starting with communication and continuity of care.
- Better car parking and food arrangements when needed i.e. labour, with potential for 'special deals', if labour is extended.
- Caring teams that respond to the needs of the mother and parent/family support.
- Own rooms; and
- Clean and hygienic environment.

Overall most people who were positive about their experiences, acknowledged the work that the nursing, midwifery and support staff put into their care.

Despite the appearances of services operating at, or exceeding capacity; people felt that they received good care and treatment.

All the women (and partners) at Eastbourne felt that they had received a really good service - one said that it had been "perfect" and that "they had had the gold standard".

Authorised Representative perspective

This 'Gold Standard' list will be used to inform the action plan being designed by the working group (see page 8) as well as link to the National Maternity Review - Better Births vision:

"Every woman, every pregnancy, every baby and every family is different. Therefore, quality services (by which we mean safe, clinically effective and providing a good experience) must be personalised.

Our vision for maternity services across England is for them to become safer, more personalised, kinder, professional and more family friendly; where every woman has access to information to enable her to make decisions about her care; and where she and her baby can access support that is centred around their individual needs and circumstances.

**And for all staff to be supported to deliver care which is women centred, working in high performing teams, in organisations which are well led and in cultures which promote innovation, continuous learning, and break down organisational and professional boundaries"**

National Maternity Review

# Enter and view observations

Thoughts and conclusions from the Authorised Representatives, that reflect their experiences during the visits to both services, have been included throughout this report.

Their observations and conclusions will enable East Sussex Healthcare NHS Trust, and wider audiences, to gain a sense of “what the service felt like”, and they provide additional value to the report, as these are independent lay perspectives.

A summary of the observations from the Conquest Hospital and the Eastbourne District General Hospital is provided below.

## Cleanliness

### Eastbourne District General Hospital

- Delivery rooms and rest rooms were observed to be clean and refurbished.

### Conquest Hospital

- Wards were observed to be clean and cleaners clearly visible at various times during the three days of observation.
- Cleaning schedules of each room seen, with midwives to sign to indicate that they had witnessed cleaning.
- Mostly observed as very clean overall - one report of blood left on bathroom floor all morning from patient; and
- No observations of patients asking for areas to be cleaned recorded.

## Equipment and environment

### Eastbourne District General Hospital

- No broken fixtures or fittings observed.

### Conquest Hospital

- Some broken items identified in corridor had been acknowledged, as they were clearly labelled for removal.
- Broken chair seen by reception desk at labour ward.
- Two pieces of broken equipment seen in the Frank Shaw ward, again clearly labelled; and
- Workmen seen unblocking toilet - hoses left trailing across the corridor, not clear if labelled for safety.



## Privacy

### Eastbourne District General Hospital

- Single rooms are available, and in other areas observed and parents privacy were maintained; and
- Generally quiet during visits. Observers were told that this was appreciated and that mothers were glad to be back at the Eastbourne District General Hospital, despite emergency move to the Conquest hospital for delivery.

### Highlight for an Authorised Representative

- The calm and peaceful environment of the Eastbourne District General Hospital was very much valued by the women spoken with - the opportunity to transfer to from the Conquest after birth was also valued.

### Conquest Hospital

- Matron asked representatives to ensure that curtains were pulled after they had finished talking to patient, to ensure dignity.
- Curtains used generally to maintain privacy, although given the close proximity of patients, there is the potential for some eavesdropping on conversations and noise from crying babies, maybe causing disruption.
- Generally privacy was positively used to encourage discreet support, e.g. breastfeeding support, midwife help; and
- In some cases, Healthwatch East Sussex authorised representatives were told that staff would take distressed babies for a short time, to give mothers the opportunity to recuperate.

## Interaction with nursing staff, patients and partners

### Eastbourne District General Hospital

- Overall observations identified positive interactions with patients and visitors, with staff welcoming patients coming in for clinics.
- In one instance, the main door was opened remotely with no one to greet the authorised representatives, who had to make their own way to the office. The midwife did not know about the visit, although they were friendly and welcoming; and
- In another instance, the authorised representatives were met at the door by the midwife who introduced herself and showed them around, offering refreshments.

**“The midwives suggested I look at their comment book, which I did. It’s full of wonderful praise for the Eastbourne District General Hospital midwives”**

**An Authorised Representative perspective**

### Conquest Hospital

- There were observations of positive interactions between staff and patients.
- Despite sometimes appearing to be rushed or busy, staff were responsive and friendly.
- Observed one patient being advised by a member of staff that their birthing plan may not happen, in advance of anything happening; and
- Patients said to be very satisfied by their contact with midwives, who appeared to be building up confidence and trust.

**“Midwives were highly praised, and a known midwife staying with the mother throughout the labour was much appreciated”**  
An Authorised Representative perspective

### Pain relief and medication

#### Eastbourne District General Hospital

- No examples observed at the time.

#### Conquest Hospital

- Patients reported they could get pain relief, from paracetamol to stronger medication, on the induction ward; and
- Requests were generally responded to quickly.

### Meal times

#### Eastbourne District General Hospital

- The provision for main meals was not observed.
- One representative observed snacks / fruit / cereals available for patients and their partners; and
- One representative expressed the view that fathers were left out.

#### Conquest Hospital

- Some patients commented that food can be ordered in advance and delivered by a healthcare assistant. However they were unsure about the timescales involved.
- One patient had missed supper, but had managed to get a sandwich later. (It was not clear if this had been provided by the Trust or by partner or relatives).
- Menus were observed being brought to the beds.
- Meals and some food were brought to bedside; and
- Water jugs were replenished regularly.

## Visiting and security

### Eastbourne District General Hospital

- Mixed observations. Some representatives reported good secure entry processes being followed, including the checking of visitor ID and passes, with only one representative not being asked for identification; and
- No notices were observed regarding visiting protocols.

### Conquest Hospital

- Although good secure entry protocols were observed, an 'extra person' was sometimes observed 'slipping in' alongside others.
- Visiting times recorded as: Partners 07:00-22:00, Children 09:00 - 18:00, Others 14:00-20:00 hours.
- There is a protocol of a maximum of two visitors per bed.
- There is a system in place with a bell to ring for access and exit to and from wards, or a swipe pass can be used. One observer noted that the door was opened to whoever rang the bell.
- Observers noted a calm atmosphere on the wards and patients recorded that they felt secure.

## Highlights from the Authorised Representatives

- There are boards displaying information, about which members of staff are on duty. At the time of the visits, the boards in the Eastbourne unit were up to date, from observations at the Conquest Hospital, not all the boxes were complete and information was patchy.
- First impressions was very positive, a very relaxed atmosphere and made very welcome by the midwife and matron" (Eastbourne Maternity Unit).
- Both the maternity unit and the day unit had a very caring atmosphere.
- One member of staff seemed to be ensuring that a woman got best care, the first appointment to see a consultant and for a scan, and checking food was being provided.
- A patient in the Eastbourne District General Hospital described the service as rather "exclusive", particularly when compared with the Conquest hospital. This was mainly because of the contrast between the very busy wards in the Conquest and the single occupancy rooms in the Eastbourne District General Hospital.

**"In summing up, there was nothing but praise for the midwives and general level of service (across both hospital sites). Exceptional busy times would be less problematic if there was more capacity"**  
An Authorised Representative perspective

# Complaints review

Healthwatch East Sussex examined the Trust’s complaints data on maternity services over a two year period.

Healthwatch East Sussex is grateful that East Sussex Healthcare NHS Trust provided this information, allowing us to consider it alongside our own findings.

Complaint subject	March 14 - March 15	March 15 - March 16
Attitude	5	2
Communication	10	9
Environment	1	2
Patient Pathway	0	4
Provision of Services	7	3
Standards of Care	15	12
Totals	38	32

“It is pleasing to see that the number of maternity complaints has dropped by approximately 15% in the last 12 months, but that there are noticeable drops against complaint subjects such as attitude and provision of service which demonstrate the team’s commitment to improving the patient experience”  
Complaints Manager Darren Langridge-Kemp

# Recommendations for East Sussex Healthcare NHS Trust

Following our work, Healthwatch East Sussex would make the following recommendations to East Sussex Healthcare NHS Trust:

- Ensure there is a clear protocol in place, for the safety of the child and mothers during travel arrangements between the maternity units. This should be available and communicated to parents, so they can understand where accountability and responsibility lies whilst travelling.
- Provide clear guidelines for fathers and partners, developing an information leaflet to include information on supporting the mother: during hospital appointments, hospital stays, following a caesarean section; and visiting arrangements relevant to each site including out of hours arrangements.
- Build into birth and support plans, information about home circumstances, including any older children to increase the awareness of staff of other pressures on mothers/parents.
- Review access arrangements to wards at night, and how this information is communicated to parents.
- Have a dedicated member of staff available on each shift to support women with breast feeding, and ensure that women know who the member of staff is.
- Explore the possibilities of introducing a parking ceiling tariff for fathers and partners who are supporting the mother, particularly during protracted labour.
- Review the system in place for labour induction, with the objective of minimising long delays.
- Ensure information boards are kept updated and that all information displayed is consistent and current; and
- Agree the mechanism by which East Sussex Healthcare NHS Trust will respond to the action and learning plan developed by the working group.

# Recommendations for Healthwatch East Sussex

Following our work, Healthwatch East Sussex will also commit to:

- Continue to work with East Sussex Healthcare NHS Trust in gathering maternity feedback, and involve parents as partners going forward with the Trust's overarching improvement action plan.
- Continue to support East Sussex Healthcare NHS Trust with its patient engagement activities where appropriate; and
- Strengthen partnership working with the local Maternity Services Liaison Committee (MSLC), to ensure that improvements made as a result of the findings in this report are embedded.

## Recommendations for the working group

To read the accounts of the experiences of maternity services written by patients, parents and families, and develop an action and learning plan around the nine key themes emerging from the evidence gathered.

- Breast feeding support.
- Visiting hours.
- The ward environment including cleanliness and hygiene.
- Involvement of partners.
- Issues related to discharge.
- Issues related to travel and transfer between units.
- Issues relating to pain relief and medication.
- Patients' perception of service organisation; and
- Achievement of a holistic service for women and their families.

## Director's comment

It was really important for Healthwatch East Sussex (HWES) to gather the views of women and their families who use local maternity services as part of an ongoing support package for the East Sussex Healthcare NHS Trust which is in special measures.

Our evidence base demonstrates how important maternity services are to local people and the need for those services to be of a consistent high quality. By gathering patient experiences and feedback, we can make recommendations and suggestions to the Trust which lead to the achievement of consistently high quality services for local women and their families. Whilst there is still more work required, this report highlights that positive steps towards noticeable improvements of services have been taken and that the relationship with HWES and the Trust is a solid foundation upon which we will continue to work collaboratively on that improvement agenda.

**Julie Fitzgerald - Director, Healthwatch East Sussex**

## Partner's comment

On behalf of the Trust East Sussex Healthcare NHS Trust, I would like to acknowledge the time and effort that that this report has taken in being presented to the Trust, we would also like to thank all those who participated in the development of 'special measures to special moments'.

This report acknowledges that there has been some improvement in our services but also identifies to us that we still have further work to do. The experience of care our patients receive is a very important part of their journey and as a trust we want to make sure we get this right. A critical part of this will be for East Sussex Healthcare NHS Trust to continue to work with Healthwatch on gathering and responding to feedback on maternity services, as part of the our Improvement Plan.

**Alice Webster, Director of Nursing - East Sussex Healthcare NHS Trust**

**With special thanks to the service users who provided such valuable insights.**

## 'About me' monitoring forms

A total of 34 'About me' forms were completed during the visits.

The forms were completed by 33 females and 1 male. The age range included:

- 18 - 24 years - 6
- 25 - 34 year - 18
- 35 - 44 years - 10

A total of 3 women said they single:

- 19 were married
- 2 in a civil partnership
- 9 co-habiting
- 1 left blank

A total of 34 respondents described themselves as:

● White British	28
● White Irish	0
● Black African	0
● Caribbean	0
● Any other Black background	0
● Gypsy/Traveller	0
● Mixed White & Asian	0
● Mixed White & Black African	2
● Mixed White & Black Caribbean	0
● Any other Mixed Background	1
● Chinese	0
● Bangladeshi	0
● Indian	0
● Pakistani	0
● Any other Asian background	1
● Any other ethnic group	2
● Unknown	0
● Prefer not to say	0
● Blank	0

A total of 4 respondents described themselves as having a disability.

---



# Appendix 1- call for evidence

Launching today (22<sup>nd</sup> January 2016), Healthwatch East Sussex would like to hear from women and their families, who have used maternity services provided by East Sussex Healthcare NHS Trust since March 2015 (services provided at the Conquest Hospital in Hastings, and the Eastbourne District General Hospital).

On this occasion we will not be collecting information on Crowborough birthing centre, as this is in the process of being transferred to the management of a new provider.

Comments will be treated anonymously if preferred, and will directly contribute to the review.

The call for evidence closes on 22 February 2016.

### How to get involved

You can share your experiences with Elizabeth Mackie by phone, 07794 097 719 (she can call back), by email [elizabeth.mackie@healthwatcheastsussex.co.uk](mailto:elizabeth.mackie@healthwatcheastsussex.co.uk), or online [www.healthwatcheastsussex.co.uk/maternity](http://www.healthwatcheastsussex.co.uk/maternity)

We want to understand what worked well for you, and what didn't work well.

The information you provide will help us to:

- gather user perspectives; and
- design the questions our volunteers ask when they visit the local maternity services.

There will also be some opportunities to join our volunteers during these visits.

### How will my information make a difference?

A key task for East Sussex Healthcare NHS Trust is to demonstrate how it has improved maternity services, against the concerns raised in the Care Quality Commission report. This is being managed through their Quality Improvement Plan. The information you provide to Healthwatch East Sussex will be collated with the information our volunteers gather, and will be turned into a user experience report.

Healthwatch East Sussex will share this report with the organisations involved with scrutinising the Trust's Quality Improvement Plan. Where appropriate, Healthwatch East Sussex will also submit recommendations for the improvement of services for women and their families.

**Julie Fitzgerald**, Director for Healthwatch East Sussex, said, "this is a fantastic opportunity for not only Healthwatch East Sussex, but for the Trust to encourage women and their families to feedback their views and experiences. The Trust senior managers are being very supportive of the work Healthwatch East Sussex has planned, and we welcome their commitment to increasing greater patient engagement."

*"It takes a minute to feedback, but the difference can last a lifetime".*

### Background

The Care Quality Commission (CQC) rated maternity services provided by East Sussex Healthcare NHS Trust as inadequate, in its report published in September 2015. It should also be noted that it received a rating of good, for maternity services being caring.

	Safe	Effective	Caring	Responsive	Well-led	Overall
Maternity and gynaecology	Inadequate	Requires improvement	Good	Requires improvement	Inadequate	Inadequate

## Appendix 2 - East Sussex Maternity Services - Your Experience Matters

Healthwatch East Sussex would like to hear from women and their families, who have used maternity services provided by East Sussex Healthcare NHS Trust since March 2015 (services provided at the Conquest Hospital in Hastings, and the Eastbourne District General Hospital).

We want to understand what worked well for you, and what didn't work well.

The information you provide will help us to:

- gather user perspectives about maternity services; and
- design the questions our volunteers will ask when they visit the local maternity services

### How will my information make a difference?

A key task for East Sussex Healthcare NHS Trust is to demonstrate how it has improved maternity services, against the concerns raised in the Care Quality Commission report. This is being managed through its Quality Improvement Plan.

The information you provide to Healthwatch East Sussex will be collated with the information our volunteers gather, and will be turned into a user experience report.

There will also be some opportunities to join our volunteers during these visits if you would like to do so.

This call for evidence closes on 22 February 2016.

Q1 Please tell us which Hospital delivered you Maternity Service

- Eastbourne District General Hospital
- The Conquest Hospital, Hastings
- Other

If you answered "Other" please tell us here where you received your maternity service.

Q2 Are you:

- Mother
- Father
- Partner
- Family / Support
- Other

If you answered "Other" please tell us here what your role is?

Q3 Please give us a brief outline of your maternity experience, as supported by the hospital.

Q4 For you, what worked well?

Q5 For you, what maybe didn't work so well?

Q6 Do you have any suggestions for areas of the maternity service for review? If so please tell us here.

Q7 Would you be interested in taking part in some follow up activity with Healthwatch East Sussex?

Yes

No

Q8 Please give us your details here and a member of the team will contact you.

Name:

Address:

Postcode:

Daytime Contact Number:

Email:

Thank you for completing our survey.

## Appendix 3 - Fact sheet: What is enter and view? Given to patients as part of enter and view activity

### What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

### Enter & View

In order to enable Healthwatch East Sussex to gather the information it needs about services, there are times when it is appropriate for trained Healthwatch volunteers to see and hear for themselves how those services are provided. That is why the Government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch representatives to enter premises that service providers own or control to observe the nature and quality of those services.

Healthwatch enter and view visits are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch East Sussex to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch enter and view authorised representatives are not required to have any prior in-depth knowledge about a service before they Enter and View it. Their role is simply to observe the service, talk to service users and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report.

The Enter and View report is aimed at outlining what they saw and making any suitable suggestions for improvement to the service concerned. The reports may also make recommendations for commissioners, regulators or for Healthwatch to explore particular issues in more detail.

Unless stated otherwise, the visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch enter and view visit are referred to the service provider and appropriate regulatory agencies for their rectification.

---

Legislation allows 'Enter and View' activity to be undertaken with regard to the following organisations or persons:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities
- a person providing primary medical services (e.g. GPs)
- a person providing primary dental services (i.e. dentists)
- a person providing primary ophthalmic services (i.e. opticians)
- a person providing pharmaceutical services (e.g. community pharmacists)
- a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or care services (e.g. adult social care homes and day-care centres).

### Key Benefits of Enter & View

To encourage, support, recommend and influence service improvement by:

- Capturing and reflecting the views of service users who often go unheard, e.g.
- care home residents
- Offering service users an independent, trusted party (lay person) with whom they
- feel comfortable sharing experiences
- Engaging carers and relatives
- Identifying and sharing 'best practice', e.g. activities that work well
- Keeping 'quality of life' matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a 'critical friend', outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and carers play an integral part in local commissioning
- Spreading-the-word about local Healthwatch

## Appendix 4 - Staff Bulletin for East Sussex Healthcare NHS Trust staff



### Have you heard of Healthwatch East Sussex?

Healthwatch East Sussex is your local champion for patients and the public who use health and social care services. Their responsibilities are to:

- Gather views and understand the experiences of patients and the public.
- Make peoples' views known.
- Promote and support the involvement of people in the commissioning and provision of local care services and how they are scrutinized.
- Recommend investigation or special review of services via Healthwatch England or directly to the Care Quality Commission (CQC).
- Provide advice and information about services and support for making informed choices; and
- Make the views and experiences of people known to Healthwatch England and provide a steer to help it carry out its role as national champion.

Healthwatch East Sussex regularly shares with the Trust, feedback they have received about our services. The feedback is both good, and sometimes not so good, but it allows us to understand where we need to improve and how patients feel about the services we deliver.

We know that many of our patients are uncomfortable about giving feedback direct to the Trust, but we still want to hear their thoughts. So we would encourage you to talk to patients about Healthwatch East Sussex, and let them know they can give feedback if they wish.

Staff can give feedback in the same way. The information the Trust receives is always anonymised so we don't know who it came from.

Across the Trust, you'll notice there are now Healthwatch East Sussex feedback pods and leaflets. If your service doesn't have one, just contact Healthwatch East Sussex who will arrange delivery.

**Telephone:** 0333 101 4007 (local rate cost, they can call back if required).

**Email:** [enquiries@healthwatcheastsex.co.uk](mailto:enquiries@healthwatcheastsex.co.uk)

**Website:** [www.healthwatcheastsex.co.uk](http://www.healthwatcheastsex.co.uk)

**Address:** Freepost RTTP-BYBX-KCEY, Greencoat House. 32 St Leonards Road, 85b Ashford Road, Eastbourne, BN21 3UT

Healthwatch East Sussex will be holding regular sessions in the hospitals foyers so do stop by and say hello.

# Appendix 5 - Observation sheet and face to face interviews prompt sheet

## Observation Recording Sheet

East Sussex Healthcare NHS Trust Maternity Services enter and view visits

Key lines of enquiry (questions and prompts)

The purpose of these visits is to engage with patients/families using maternity services delivered East Sussex Healthcare NHS Trust (ESHT) at Eastbourne District General Hospital and the Conquest hospital in Hastings.

The evidence gathered from these visits will be collated with the user experiences parents shared via the online survey and through case studies.

A report will be presented to the Trust (and other stakeholders) to inform the Quality Improvement Plan following concerns raised in the Care Quality Commission (CQC) report.

This is a focussed activity over three days (including a weekend) undertaken by our authorised representatives and women who have used local maternity services since March 2015.

Evidence will be gathered by talking to patients/parents about their experiences using a question/prompt sheet and by observing specific areas of care and interactions with midwifery staff and patients/parents.

### Recording you observations

Use the following boxes to record a summary of you observations in each of the areas shown at the top of each box.

Please liaise with staff to spend time in each of the areas (excluding delivery suites).

Please indicate which hospital this observation is for:	
Eastbourne District General <input type="checkbox"/>	Conquest Hospital <input type="checkbox"/>
Date:	
Time Observation Commenced:	
Time Observation Ceased:	

Observations:

<b>Cleanliness</b>
Did you observe any routine cleaning? Are there any cleaning schedules visible?

<b>If so are they up to date.</b>
<b>Did you hear patients asking for items or areas to be cleaned specifically? i.e. showers or toilets.</b>

<b>Equipment/Environment</b>
<b>Did you observe any broken fixtures/equipment</b>

<b>Privacy</b>
<b>Did you observe staff using curtains to protect patient's privacy?</b>
<b>If the unit is busy how does staff maintain patient privacy?</b>

<b>Interaction with nursing staff and patients/partners</b>
<b>Is it warm friendly, are staff responding to requests for assistance?</b>

<b>Pain relief/Medication</b>
<b>Did you observe staff responding to requests from women for pain relief?</b>

<b>Meal times</b>
<b>Can women access the meal trolley?</b>
<b>Do staff ensure everyone has been catered for?</b>

<b>Visiting and Security</b>
<b>Did you observe the secure entry process being adhered to?</b>
<b>What is the visiting protocol and was that adhered to?</b>



**Face to Face interview recording sheets (semi-structured survey)**  
**East Sussex Healthcare NHS Trust**  
**Your Maternity Service Experience**

We would like you tell us about your experience of your local East Sussex Healthcare NHS Trust Maternity Service, by completing the following questionnaire.

The answers you give will help Healthwatch East Sussex inform those who deliver these services where they are doing well and where things may need to change.

The answers you give are completely anonymous and will not be used to identify you in any way.

Thank you for taking the time to share your experiences.

Q1 Please tell us which maternity service you are telling us about today (please tick one):

	The Conquest	Eastbourne District General Hospital
Ante Natal Clinic	<input type="checkbox"/>	<input type="checkbox"/>
Scanning Dept.	<input type="checkbox"/>	<input type="checkbox"/>
Post Natal Ward	<input type="checkbox"/>	<input type="checkbox"/>
Day Ward	<input type="checkbox"/>	<input type="checkbox"/>

Q2 Please tell us who you are:

Mother	Father	Family Member	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered "Other" please tell us in the box below:

Q3 Is this your first baby? (where applicable)

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Q4 Is this the hospital you were expecting to give birth at?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If you answered "No" please tell us briefly what happened:

Q5 What was your experience arriving at the unit?

Very Good	Good	OK	Poor	Very Poor
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you said "Poor" or " Very Poor" why was this?

Q6 Were you transferred, to or from, maternity units during your stay in an unplanned way?

Yes No Don't know

If you answered "Yes", was this a positive experience?

Q7 Did you receive the support from staff you were expecting?

	Yes	No	Don't Know
Nursing Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consultants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q8 Did you receive the pain relief you requested?

Yes No Don't Know

If you answered "No", approximately how long did it take for you to receive relief?

Q9 Did you achieve the birth plan you wanted?

Yes Almost No

Q10 If your plan needed to change, did you feel involved and consulted about the changes?

Yes A little No

Q11 Following your delivery and return to the ward, did you receive the care, support and information you were expecting?

Yes No Don't know

If you answered "No", please briefly tell us why here:

Q12 Did you receive all the information for you and your baby before you went home?

Yes No Don't Know

Q13 Thinking of your overall experience please briefly tell us what worked well

Q14 Thinking of your overall experience please briefly tell us what didn't work so well

Q15 What one statement do you think best describes a "Gold Standard" Maternity Service?

Thank you for completing this questionnaire.

---

## Contact us

**Address:**

(Freepost) RTTT-BYBX-KCEY  
Healthwatch East Sussex  
Greencoat House  
32 St Leonards Road  
Eastbourne  
East Sussex  
BN21 3UT

**Phone:** 0333 101 4007

**Email:** [enquiries@healthwatcheastsex.co.uk](mailto:enquiries@healthwatcheastsex.co.uk)

**Website:** [www.healthwatcheastsex.co.uk](http://www.healthwatcheastsex.co.uk)

This report relates to findings observed on the specific dates set out in the report. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

We will be making this report publicly available by 30 June 2016 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

© Copyright (Healthwatch East Sussex 2016)