Healthwatch Together

Blackburn with Darwen, Blackpool, Cumberland, Lancashire and Westmorland and Furness working in partnership

Maternity and Neonatal Matters

Summary report of Healthwatch Together maternity and neonatal engagement roadshow

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Glossary

LMNS – Local Maternity and Neonatal System

ICB – Integrated Care Board

HWT – Healthwatch Together

BTH – Blackpool Teaching Hospitals NHS Foundation Trust

ELHT – East Lancashire Hospitals NHS Trust

LTHTR – Lancashire Teaching Hospitals NHS Foundation Trust

UHMBT – University Hospitals of Morecambe Bay NHS Foundation Trust

PCN – Primary Care Network

Introduction

In 2016, The National Maternity Review, 'Better Births' was published establishing a clear vision for maternity and neonatal services across England to become safer, more personalised, kinder, professional and family friendly. The review states that every woman should have access to information to enable her to make decisions about her care and support for individualised needs and circumstances.

Healthwatch Together delivered a robust engagement project to investigate the experiences of women and families who access maternity and neonatal services within Lancashire and South Cumbria, and whether people feel they have choice and personalisation in their care.

This report details a summary of the findings of experiences received about maternity and neonatal services across Lancashire and South Cumbria during our engagement roadshow.

This report details the overarching themes and experiences, as well as recommendations which apply across Lancashire and South Cumbria, as well hospital trust specific recommendations.

The findings of this engagement project have been shared with the Lancashire and South Cumbria Local Maternity and Neonatal System (LMNS), part of the Lancashire and South Cumbria Integrated Care Board (ICB), whose role is to ensure that national guidance for maternity and neonatal care are implemented across services delivered in Lancashire and South Cumbria. This influences improvements in the safety, quality, and experience of maternity and neonatal care. Our findings will inform future LMNS workplans and formulate targeted interventions to improve service delivery.

About Healthwatch Together

About Healthwatch Together

Healthwatch was established under the Health and Social Care Act 2012 as an independent consumer champion to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf.

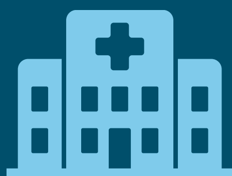
There are over 150 local Healthwatch across England. The role of a local Healthwatch is to:

- **Listen to people, especially those who are most vulnerable, to understand their experiences and what matters most to them**
- **Influence those who have the power to change services so that they better meet people's needs now and into the future**
- **Empower and inform people to get the most from their health and social care services and encourage other organisations to do the same.**

Healthwatch Together (HWT) is the collaboration of five Healthwatch across the Lancashire and South Cumbria Integrated Care System (ICS). HWT works in partnership to effectively operate over the whole footprint and consists of Healthwatch Blackburn with Darwen, Healthwatch Blackpool, Healthwatch Cumberland, Healthwatch Lancashire, and Healthwatch Westmorland and Furness. Each Healthwatch organisation works in their own local authority area and is their own unique entity, providing a local approach to community engagement.

Methodology

During March 2024, Healthwatch Together conducted an engagement roadshow to hear from women and families about their experiences of using maternity and neonatal services across Lancashire and South Cumbria. Experiences have been collated and analysed for the following hospital trusts across Lancashire and South Cumbria:



Blackpool Teaching Hospitals NHS Foundation Trust (BTH)

East Lancashire Hospitals NHS Trust (ELHT)

Lancashire Teaching Hospital NHS Foundation Trust (LTHTR)

University Hospitals of Morecambe Bay NHS Foundation Trust (UHMBT)

An online survey was set up and advertised on all Healthwatch Together partners' social media channels and websites. Questions were formulated to understand what matters most to individuals when accessing maternity and neonatal services, whether they felt they had choice in the care they received and whether they received a personalised care plan and/or 6-8 week postnatal check.

As well as the online survey, Healthwatch Together attended a range of community groups and family hubs to collect feedback and experiences. Case studies were also collected from those who wanted to tell their story in more detail.

An engagement target was set for Healthwatch Together to achieve during the engagement roadshow. These figures were based on the number of births delivered at each Hospital Trust in 2023 to ensure data collected was representative. Each Healthwatch achieved or exceeded their engagement target.

202 people shared their experiences.

26 community groups attended.

Hospital Trust	Number of respondents
Blackpool Teaching Hospitals	38
East Lancashire Hospitals	82
Lancashire Teaching Hospitals	62
University Hospitals of Morecambe Bay	20

Findings

Please note: Some of the responses and quotes within these findings refer to 'Badger Notes'. Badger Notes is an electronic system/app used for maternity and neonatal records which is updated with information from midwives and other health professionals involved in a patients care.

Women and families were asked what matters the most to them before, during and after their pregnancy. The most common response received was having a healthy baby and mother.

Information about pregnancy and plannings

Respondents were asked if they had received any support or information before being pregnant about pregnancy and planning. Overall, most respondents stated that they did not receive any support or information.

Responses were varied and showed an inconsistent approach to information about pregnancy and planning across Lancashire and South Cumbria. Blackpool and East Lancashire had the highest proportion of individuals not receiving any information about pregnancy and planning, followed by Westmorland and Furness and Central Lancashire. A common theme among respondents was that the information they did have, they found themselves. Comments received from respondents suggested that they would have liked more information in this area.

"I feel like I was given some information, however a lot of it I had to find out myself."

BTH

Was information given during pregnancy easy to understand?

Most respondents shared that the information they received during their pregnancy was easy to understand. Reasons for not finding information easy to understand was due to the inaccessibility of the Badger Notes app, having to "push for" or "chase" information and having to find information by themselves. Negative responses to this question were found from each hospital trust.

"I had a complex pregnancy and had lots of appointments, everything was explained fully, and I was looked after."

UHMBT

"I don't rate Badger Notes at all. Instead of taking to you, they say 'read this, do that'. If you've got questions, you can't ask, and they tell you everything is on BadgerNet but it's not."

UHMBT

Point of contact

The majority of respondents across Lancashire and South Cumbria were given a point of contact, should individuals have any enquiries or concerns. This is an area to celebrate, however, feedback indicated that individuals would have preferred to speak to the same person each time, as the number given was often an office number rather than a dedicated midwife. Some respondents shared that although they had a point of contact, they did not have contact with professionals very often due to either their call not being answered or a hesitancy to call due to not knowing who they would be speaking to.

"Details received but didn't have a rapport due to constant change of midwife so didn't feel comfortable speaking to them directly."

BTH

"I don't even know who my midwife is this pregnancy, the last time I was pregnant I had a designated mobile number for her."

ELHT

Informed decisions

The majority of respondents felt informed in their care and any decisions which were made, and shared that they were actively involved in decision-making, they felt listened to and that their midwives listened to their opinions.

For those who did not feel informed in their care, this was during various stages of pregnancy, however, the most common stage of pregnancy where respondents did not feel informed was during the end of pregnancy/labour. Respondents shared that they would have liked more information when their plans for labour had to change. Patients not feeling informed was most prevalent for BTH.

"I feel like I need more advice about what I should do, they have told me that I will probably need a C section as my baby has only got one kidney, but I feel like I need more information/guidance to make the right choice."

ELHT

"I would say 85% of the time I felt clinicians were listening to me. However, towards the end of my pregnancy I did frequently say it felt like the baby was stuck...she was in fact stuck."

BTH

Choice of birth location

Findings varied between hospital trusts regarding whether people were offered a choice of where they preferred to give birth (and whether it was explained if the preferred place could not be offered).

For ELHT and LTHTR, most individuals were asked where they would prefer to give birth and if this was not possible, it was explained to individuals why this was the case. For BTH, most people were asked (71%) but this was a lower proportion compared to ELHT and LTHTR.

However, 42% of respondents who accessed UHMBT shared that they were not offered a choice about their preferred place of birth. This shows large inconsistencies between hospital trusts across Lancashire and South Cumbria about whether patients are offered a choice about where they would prefer to give birth.

"Weren't offered a choice on location however our preferred location was south lakes birthing centre."

UHMBT

Additional health needs

Across Lancashire and South Cumbria, the majority of respondents did not have additional health needs. However, the proportion of respondents having additional health needs was much higher for respondents of UHMBT at 52%.

The most common additional health needs were mental health, gestational diabetes, pre-eclampsia and high blood pressure.

For those who did have additional health needs during pregnancy, experiences were mixed regarding whether these needs were discussed with them. For ELHT, most women had their needs discussed. However, for BTH and LTHTR only around half of respondents with additional health needs had their needs discussed, and 60% of UHMBT had their needs discussed. This shows inconsistencies across Lancashire and South Cumbria regarding discussion and offering support for additional health needs during pregnancy.

"Yes, I had high blood pressure and was given a monitor to take home and record the readings."

BTH

Personalised care plan

Respondents were asked if they had a personalised care plan, whether this was available to them and the team caring for them and whether it was updated throughout their pregnancy.

Inconsistencies were apparent across Lancashire and South Cumbria between hospital trusts regarding whether individuals had received a personalised care plan. Finding can be found in the table below.

Hospital Trust	Percentage of respondents with a personalised care plan
Blackpool Teaching Hospitals	66%
East Lancashire Hospitals	64%
Lancashire Teaching Hospitals	49% (a further 27% were currently pregnant and had not yet received a personalised care plan)
University Hospitals of Morecambe Bay	82%

"Yes, don't remember it being called a care plan but there were things out in place and discussed that would need to be put in place"

LTHTR

Two respondents did not want a personalised care plan.

For those who had received a personalised care plan, most respondents shared that this was available to them and updated when necessary. However, comments were received about the personalised care plan not being updated when needed (5), respondents writing their own plan and staff not looking at it (2), or the plan not being followed by staff (1).

"If there was a plan, we didn't know about it. We knew that there would be a plan for the birth in place, but I wasn't sure about the details."

UHMBT

How would you describe the support that you received?

Hospital Trust	Positive	Negative	Mixed
Blackpool Teaching Hospitals	45%	29%	26%
East Lancashire Hospitals	66%	6%	27%
Lancashire Teaching Hospitals	63%	5%	32%
University Hospitals of Morecambe Bay	46%	22%	32%

Positive experiences were shared by respondents which were consistent across Lancashire and South Cumbria. The most common reason for a positive experience was due to the midwives who were heavily praised for their offer of support, information, care and compassion.

"Incredible. Every single midwife from the ward to the delivery suite were wonderful."

BTH

Other positive experiences were described as very supportive and feeling informed and involved in their care. Praise was also received for the breastfeeding support available.

"I had a stay on NICU and the support was incredible, there was always someone there for support and to talk with"

LTHTR

Despite the majority of experiences received being positive, negative experiences were shared by some respondents across all hospital trusts across Lancashire and South Cumbria. The main factor which caused respondents to have a negative experience was due to a lack of care and/or support as well as a lack of communication and/or information. This led to respondents feeling unheard, dismissed and having to "push" for information. Staff attitude was also a reason for having a negative experience.

Another reason for a negative experience included staff attitude, with respondents sharing that they were sometimes "rude", leaving respondents feeling "dismissed", unheard and stressed.

Mixed experiences were also received from some respondents. Experiences which were mixed were often described as positive due to helpful staff and support offered, however, this was not always at every stage of pregnancy. The poorest care offered appeared to be once individuals had given birth, which often left individuals overwhelmed and not sure where to go for support.

"There was a lot of care provided leading up to birth but afterwards it has been almost non-existent."

UHMBT

Other reasons which led to a mixed experience included individuals sensing staff shortages and pressures, which often led to feeling like a "burden" or not getting the level of support and care they needed from staff.

6-8 week postnatal check

Respondents were asked, if applicable, whether they had received a 6-8 week postnatal check from their GP, as well as whether the GP offered support to the mother, partner and baby. The proportion of respondents who received a 6-8 week postnatal check can be seen in the table below.

Hospital Trust	Respondents received a 6-8 week postnatal check (%)
Blackpool Teaching Hospitals	73%
East Lancashire Hospitals	81%
Lancashire Teaching Hospitals	67% (5% currently pregnant)
University Hospitals of Morecambe Bay	76%

The majority of respondents had received a 6-8 week postnatal check with their GP.

Although a high proportion of respondents had received a 6-8 week post-natal check, there was still a proportion of respondents who did not. Of those who did receive a check, 9 respondents shared that their baby was checked but neither parents were checked. A further 6 respondents shared that the mother and baby were checked but the partner was not involved in the postnatal check. Two respondents shared that their GP told them they did not need a postnatal check.

Twenty-one people had a negative experience of their 6-8 week postnatal check due to the appointment not feeling personal and more of a tick-box exercise. Respondents felt that the appointment experience was inadequate and that it was not personalised for their needs at the time.

"He just checked my baby, I was struggling with an infection they wouldn't see me at this appointment. I had to ring and they gave me medication from a telephone appointment, nobody actually saw me"

ELHT

"They only checked the baby & it was very minimal. They listened to her heart, tested her reflexes & looked in her eyes. I asked her to weigh the baby & was told they didn't do that at this appointment as they didn't have any scales...My partner was offered zero support during the whole pregnancy & afterwards despite many dads also developing postnatal depression & struggling when new babies are born......I haven't even been checked since day 5 when my dressing was removed from the c-section wound."

BTH

Other comments

Respondents were asked if there was anything else they would like to share about their experience. Most respondents told us more about their experience, including the positive and negative experiences detailed throughout this report.

Respondents did give suggestions for improvements or what they would have like to see differently. Individuals shared that they would have liked to be assigned to one dedicated midwife, rather than speaking to multiple professionals.

"Consistency in seeing the same midwife or few midwifes and being able to build up trust."

ELHT

Feedback was also received about the Badger Notes app being inaccessible, difficult to use and/or not always being updated with important information.

"Badger notes were never updated. My diabetes results were not updated or published"

LTHTR

Poor aftercare received after birth was also mentioned, which left new parents feeling stressed, not supported and unsure where to go for support and information.

"I felt that as soon as I had the baby we needed to go home. The birth was not straightforward and I experienced a lot of pain during labour. I needed a lot of time to recover which did not happen...We were told we needed to go home sooner rather than later, even though I was still in recovery from a traumatic birth"

LTHTR

"After I had an epidural, I birthed very quickly. My husband left as he had been awake over 24 hours. I was left hours on the labour suite, unable to move my legs, with a newborn. It was incredibly scary."

BTH

Conclusion

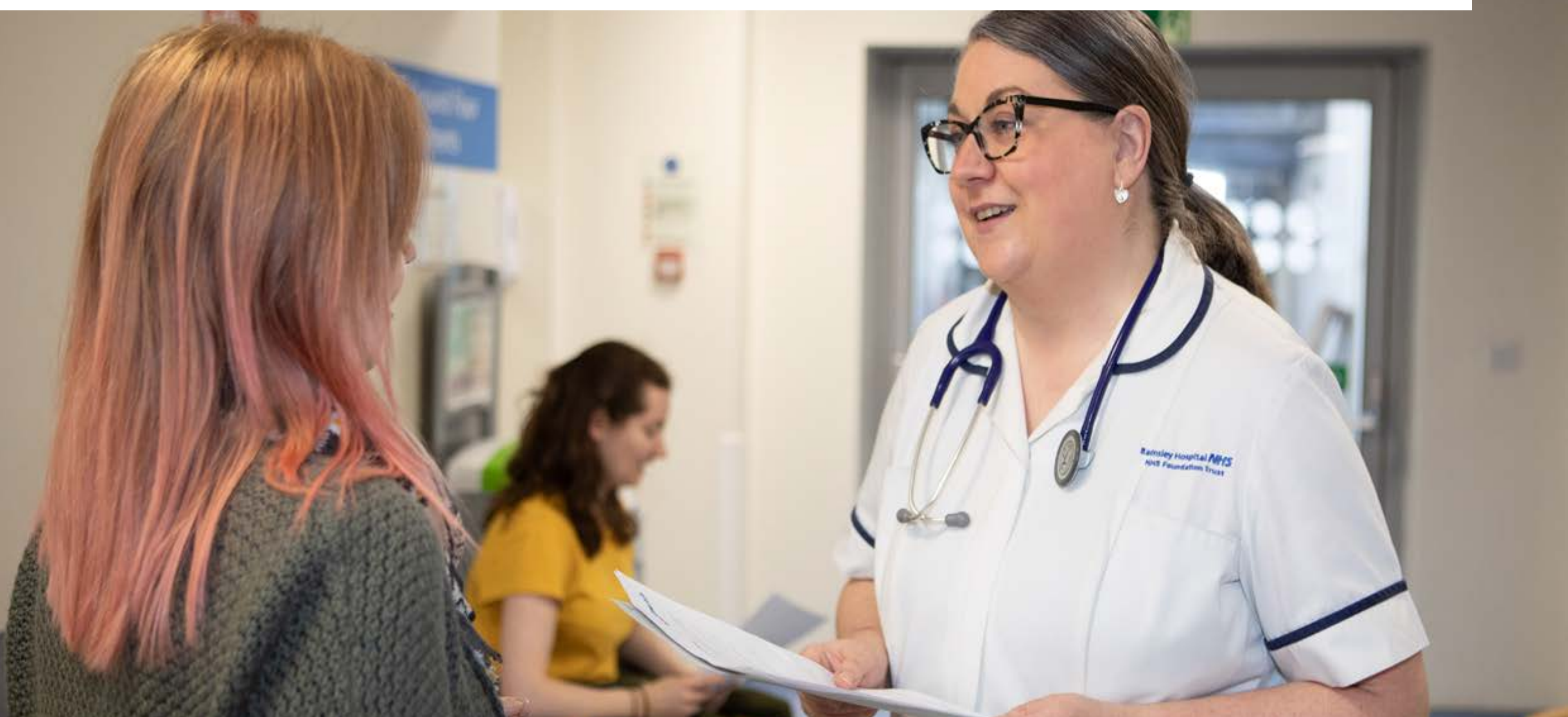
The aim of the Healthwatch Together engagement roadshow was to investigate the experiences of women and families who access maternity and neonatal services across Lancashire and South Cumbria to understand whether people feel they have choice and personalisation in their care.

Overall, there were examples of great working practice within maternity and neonatal services across Lancashire and South Cumbria. The majority of respondents felt informed in their care and praised the midwives for their support, information, care and compassion. Other areas of care which were described as positive included breastfeeding support, care received within NICU, having a point of contact should an individual have any concerns or enquiries and information being easy to understand.

Most experiences received were positive which should be celebrated, however, reported negative experiences have indicated inconsistencies of care and approach between hospital trusts across Lancashire and South Cumbria. Areas for improvement include ensuring that all parents receive a 6-8 week postnatal check from their GP if they want one, ensuring all parents have a personalised care plan and birth plan and where possible, aim for each individual to have one dedicated midwife (where this is not possible ensure that communication is clear).

Issues were also raised about the Badger Notes app being inaccessible to some individuals and it not always being updated when necessary. Staff attitude was also raised which left some individuals feeling dismissed, not heard and/or having to push for information.

Recommendations have been formulated in response to these findings for the attention of the LMNS and each hospital trust included in this report, to celebrate areas of good working practice and areas for improvement.



Recommendations

Each individual Healthwatch has formulated recommendations in response to the findings of their engagement roadshow.

There have been examples of great working practice across Lancashire and South Cumbria which should be celebrated including caring and compassionate staff, patients being given a choice of preferred place of birth, feeling informed in their care and information being easy to understand.

Although recommendations varied between hospital trusts, three recommendations applied to all trusts across Lancashire and South Cumbria.

1. **Work with PCN's to promote the importance of 6-8 week postnatal checks for all babies and parents, including fathers and partners.**

2. **Ensure all individuals have a personalised care plan, coproduced with a midwife or obstetrician, to enable patients to feel empowered and in control of their care and pregnancy journey.**

3. **Aim for all individuals to have one midwife throughout their pregnancy journey for consistency of care and to build rapport and trust. When this is not possible, ensure that the reasons for this are communicated to the patient.**

Recommendations have also been formulated for individual hospital trusts.

Blackpool Teaching Hospitals NHS Foundation Trust

1. Ensure adequate information is always provided during pregnancy in a way that is easy to understand, establishing any accessibility requirements at the earliest possible opportunity.

2. Ensure women/partners are informed and involved in decision-making, giving them a choice where they prefer to give birth. If the preferred location is not a safe option given personal circumstances, staff should communicate and educate women why this cannot take place and the reasons for this.

3. Ensure women feel heard and decisions are made with them, rather than to them. Encourage women to feel supported and listened to, with open communication being important.

4. Ensure staff demeanour is welcoming and friendly, allowing women to feel at ease.

5. Ensure a trauma informed approach is maintained by healthcare staff at all times, specifically being mindful of those women who have endured a loss. Avoid patients having to recall their previous experiences on more than one occasion.

6. Encourage community-based care where possible after giving birth, to ensure women who are recovering do not need to make unnecessary trips to the hospital.

East Lancashire Hospitals NHS Trust

1. Midwife appointments should be longer than the current 20 minutes to allow enough time for discussions and to cover all necessary topics.

2. Midwives should educate women on the long list of contact numbers provided, so that they understand which number to call for specific issues or concerns.

3. Now that ELHT have taken over the 0-19 service from April 2024, we would recommend that the Trust uses the feedback from mothers around the postnatal aftercare to shape a more person centred provision.

4. Primary care to provide a more consistent approach in Blackburn with Darwen and East Lancashire to offering a 6-8 week check for both mother and baby and training provided to staff to ensure person centred conversations about the wellbeing of mothers are effective.

5. Badger notes app should be updated to give more detail on the types of appointments booked; notifications should be sent out when an appointment is cancelled and greater space should be provided for notes from midwives for patients.

Lancashire Teaching Hospitals NHS Foundation Trust

1. Ensure all patients are provided a point of contact who they can contact when they have concerns or enquiries.

2. Improve support available to new parents after birth through signposting to support services and information. Produce a support and signposting document on support available after birth, what to expect and who to contact if you have any concerns.

3. Ensure all communication and information is accessible to each patient, and where the patient does not wish the use the Badger Notes app, provide suitable alternatives such as email, text, phone call or email.

4. Work with PCN's to promote the importance of 6-8 week postnatal checks for all babies and parents, including fathers and partners. This could be done through an online campaign, posters within GP practices and email marketing.

5. Discuss any additional health needs with patients, including how this may be affected during pregnancy and next steps to ensure patients are fully informed in their care.

6. Ensure all patients and partners have a birth plan, informing them of available options.

7. Investigate the issues with the Badger notes app to understand what improvements need to be made to make information more accessible and ensure staff are updating patient records when required.

University Hospitals of Morecambe Bay NHS Foundation Trust

1. Increase the support and information available regarding pregnancy and planning.

2. Improve support available to new parents after birth through signposting to support services and information. Produce a support and signposting document on support available after birth, what to expect and who to contact if you have any concerns.

3. If complications arise in pregnancy or during the birth, ensure that the parents have the right information to be equipped to deal with the situation.

4. Ensure all patients are provided a point of contact who they can contact when they have concerns or enquiries.

5. Work with PCN's to improve the 6–8 week postnatal checks for all babies and parents, including fathers and partners. This could be coproducing with people with lived experience, a checklist of topics to cover to ensure that the parents get what they need from the appointment.

6. Investigate the issues with the Badger notes app to understand what improvements need to be made to make information more accessible and ensure staff are updating patient records when required.

Healthwatch Together

Blackburn with Darwen, Blackpool, Cumberland, Lancashire and Westmorland and Furness working in partnership

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Your voice matters