



**“Building up a relationship
with your midwife is crucial”**

**Maternity Experiences in Nottingham and Nottinghamshire
November 2022**

Executive summary

This study investigated people's experiences of local maternity services in Nottingham and Nottinghamshire. This included maternity experiences related to care by both Nottingham University Hospitals NHS Trust (NUH) and Sherwood Forest Hospitals NHS Foundation Trust (SFH). 28 responses were received, providing us with insight into what is working well for maternity service users in Nottingham and Nottinghamshire and what could be improved.

The findings of the survey highlight multiple examples of outstanding maternity care, with women noting the challenges that Covid caused for maternity services. However, local families also told us about a range of issues in their maternity care and the effects this had on them.

The main themes that came forward from the survey are:

- More staff are needed, particularly for postnatal care in hospital.
For both Trusts, women told us that they needed more support while on the postnatal wards, although this issue was more frequently raised by women who gave birth under care of NUH. Staffing shortages had a knock-on effect on the other areas people told us about that needed improvement.
- Continuity of care
Women told us what a positive difference continuity of care made to their maternity experience. However, multiple women who received care by SFH told us that they received continuity of care in previous pregnancies but not in their most recent pregnancy.
- Lack of feeding support
Women told us that they need more support with feeding their babies, particularly more breastfeeding support.
- Involving partners
Some maternity experiences happened during times of Covid restrictions in maternity care. Women told us about the challenges of not always having their partner with them, both in terms of support for mother and baby, as well as the partner feeling left out.
- Home birth service
Women could not always give birth at their intended place of birth due to the home birth services not being available.
- Communication
Some women experienced good communication and told us about the positive impact that midwives made by listening to women and supporting them in their birth preferences. However, we also heard from families who felt their concerns were dismissed.

- Access to the right medication, particularly pain medication
Women told us they did not always feel listened to when requesting medication and did not receive pain medication in a timely manner.

Healthwatch Nottingham and Nottinghamshire presents the following recommendations to Nottingham University Hospitals NHS Trust and Sherwood Forest Hospitals NHS Foundation Trust:

- Increase staffing, particularly for postnatal wards and the home birth services.
- Improve the support for parent with feeding their baby, in particular breastfeeding support.
- Assign women and birthing people a named midwife and enable them to see the same midwife throughout their maternity care as much as possible.
- Involve and support non-pregnant partners, so that they are supported and feel included, and are better supported to help their partners and babies.
- Promote good communication between maternity staff and pregnant women/people around their concerns and preferences throughout their maternity experience.
- Improve access to the right medication, in particular pain medication.
- Co-produce service improvements in maternity care with the people who make use of these services.

Introduction

In December 2021 and January 2022, Healthwatch Nottingham and Nottinghamshire carried out an online survey on local maternity experiences on behalf of the Nottingham and Nottinghamshire Maternity Voices Partnership.

The Nottingham and Nottinghamshire Maternity Voices Partnership (MVP) is an independent working group that aims to review and improve local maternity services by focusing on the experiences of women and their families. The MVP is multidisciplinary in nature and brings together maternity professionals, such as midwives and doctors, local women and their families, as well as local organisations that support parents and pregnant women/people. The MVP works in partnership with maternity services from both Nottingham University Hospitals NHS Trust (NUH) and Sherwood Forest Hospitals NHS Foundation Trust (SFH).

The survey was a general survey on maternity experiences, which asked people to tell us about their experience and what they thought could make experiences better in the future. Whereas some people's maternity experiences were affected due to changes to maternity services due to Covid, some people gave us feedback on maternity experiences that predated the Covid pandemic.

Who we heard from

We received 28 responses. There were 14 experiences that related to NUH maternity services. There were also 14 experiences of SFH maternity services. One person shared an experience about the maternity experience of their partner.

We mainly heard about experiences that happened over 1 year ago (n=18). More recent maternity experiences were shared in a smaller number (n=10).

Most responses came from people who identified as White (82%), while a small part of the responses came from people who identified as Asian (14%).¹ Those who shared their nationality were all British. All indicated that their main preferred language was English.

Three people indicated that they live with a long-term health condition and one person told us they live with a mental health illness. For more information about who we heard from in this survey, please see the appendix.

¹ These percentages do not add up to 100% because one person did not share their ethnicity via the survey.

What we learned

The following sections provide an overview of the findings of the survey. Findings will be discussed per Trust. Considering the rapid changes that are happening in maternity care in England, the Trust's findings are subdivided depending on how recent the maternity experiences were, either more than a year ago or maternity experiences in the last year.

1. Feedback and recommendations for Nottingham University Hospitals NHS Trust

1.1. Feedback relating to experiences of more than one year ago

Nine people shared their experiences of maternity services that took place more than one year ago.

Feedback showed that care on the hospitals' postnatal wards was experienced as particularly challenging:

"My experience post birth on the ward was awful. There was a distinct lack of communication, negativity and nastiness. I thought I was going mad but my partner and others who witnessed my treatment by staff reassured me that it was not me. My notes were not properly completed and plans which apparently were in place were not shared. Also, there was inaction over the number of visitors on the ward who disturbed my rest and recovery. I was aghast when at one point there were about 12 visitors to one lady, with the men using the loo allocated just to Mums, I was told to go and sit elsewhere with my baby rather than staff taking action. It was also horrible sharing a ward with smokers and having to enter and leave the hospital through a smog of smoke/vapes."

"Postnatal care could be improved. Really lucky my partner was able to stay overnight as don't think the ward staff would have been able to help me with feeding and changing baby overnight (I ended up with an emergency section)."

"Post-delivery - lacked individualisation of care and felt at times staff inexperience was an issue."

"Postnatal care and wards needs more midwifery staff. The support staff need greater recognition as some have even more life experience and common sense than the midwifery staff. Maternity services are poorly resourced and it's no surprise that the trust is finding themselves in a mess. This is poor planning, funding and poor leadership."

"The care on the wards after my c section was not great. I had previously given birth in 2017 when level of postnatal care was significantly better. I felt sorry for the staff they seemed very stretched but it means I was left with a catheter in for too long and also had to constantly buzz for people to help me with my baby and feeding and it often took a while before they came."

One woman described how her baby was born early and very small. She described a lack of feeding support and found herself *"pushing and pushing to get my baby fed"*.

"[...] Baby did not feed right away and we struggled to get a good latch with breastfeeding. I struggled and needed help, instead I was pushed to formula feed my baby. Both, my husband and I were happy to combine bottle feeding and breastfeeding and were open to formula too, so this part wasn't an issue. However my baby struggled with formula too and wasn't drinking enough. She was put on a feeding plan and I was told I wasn't allowed to feed my baby when she woke and was clearly hungry!! I had to wait for the 4 hour mark and had to cry and shout for anyone to even hear me! In the end, a lovely paediatrician advised I could feed my baby every 3 hours and sooner if I felt she needed it. This took more than 5 days to happen and even then, nurses did not support me! I wasn't given the formula unless the 4 hours, sometimes 3 hours were met. My baby lost 10% of her birth weight [...] so we couldn't go home! In the end she had to have a feeding tube, this made her sick for the first few times! My tiny baby and I spent a total of 9 days in hospital and we only managed to leave on that 9th day because I spent the remaining 3-4 days pushing and pushing to get my baby fed. It was the worst experience of my life! Even worse because of the pandemic and only being able to have my husband there for a total of 1.5 hours a day! Combine that with hormones, milk supply going and never getting the chance to actually try and breastfeed! This has left such a sour taste for us and I would never recommend the staff on maternity wards!"

Experiences of at other stages of maternity care, were generally described more positively.

"The staff on the labour suite however were fantastic and a completely different experience!"

"I had my second child during the beginning of lockdown 2020. It was a very daunting time, I felt nervous, anxious and panicked. The midwives at City Hospital were incredible, so reassuring and comforting. They helped me feel more at ease, and reassured. My partner couldn't join me until I was ready for Labour suite, so before he could be there with me the midwives took excellent care of me, I felt so great full during those uncertain times!!"

"I felt my community midwife and intrapartum care was good, happy with it."

"Antenatal care - felt measures to reduce COVID risk appropriate. Positive experience throughout Delivery - planned elective section. Felt able to request without being deterred from choice. Excellent experience."

"Was under consultant care due to previous birth problems and undiagnosed conditions. I was very well looked after by my consultant but had cancelled tests for gestational diabetes which led to this condition being diagnosed very late."

One woman described staff as "caring" but did note a lack of confidence and ability of maternity staff to give one to one care.

"Overall caring staff, lots of pressure on midwifery staff. Lack of midwifery staff confidence and ability to give one to one care. Leaving women feeling unsupported during their labour. Lacking staff's ability to empower women."

Another woman described an undiagnosed complication during birth, as well as an administrative error.

"My baby was born undiagnosed breech, they didn't know until she was coming out it was too late for an emergency section. Also I had the wrong tag on while I was in hospital I didn't realise till I got home they never checked me."

One woman told us how being listened to made her second maternity experience better than her first. In particular, she mentions access to pain relief.

"It was a brilliant experience second time around compared to my first! But only because I was listened to! If a woman tells you she's in pain and she needs more than paracetamol, don't withhold this?! Let her have what she needs for HER body. Some midwives are way to doses up on "natural is best" it's rubbish! The amazing midwives are those that listen to you and give you what you need!"

However, feedback shows that others struggled to gain access to the right medication.

"Difficult to access anti sickness medication despite being prescribed and ended up needing to keep bowls of vomit to prove I needed it. Main problem was accessing analgesia, heard more than one women crying in the bay all night because of pain. I asked multiple times for some oromorph on my discharge summary but was told it wasn't possible. I left around 30 hours after birth as was essentially told by several people I would be leaving on day one. I explained to the discharging midwife I'd probably have to take some codeine despite breastfeeding, she just shrugged.[...]"

"[...] Also issues in terms of reluctance to prescribe anything other than paracetamol (ibuprofen contraindicated) for discharge with some misinformation provided."

1.2. Recommendations relating to experiences of more than one year ago

Women gave multiple recommendations to improve future maternity experiences. These were around the following themes:

- More maternity staff and empowering them to support women.

"Better support on ward with breastfeeding and caring for babies if women have spinals/ catheters in etc."

"More staff on the units- the midwives were very busy on delivery suite! It seemed to be rushed and pressured. We had to wait quite some time to have some support with feeding, and the NIPT checks."

"More staff! Where they are not allowing partners in to help with mums etc. due to Covid restrictions they [really] need the help."

"Empower your staff, so they can empower the women they look after!"

- Improve communication

"[...]improve communication and endeavour to help rather than lecture or be judgmental."

“Allowing options and following the woman’s lead not being told to listen to the professional. Most know what they are doing but you know your pain, your worries & your needs.”

- Improve access to pain relief

“Please, please can you look into giving oromorph/ dihydrocodeine on discharge to women who require it after LSCS or complex vaginal birth. I really feel this would help facilitate quicker discharge and certainly make the postnatal experience better.”

1.3. Feedback relating to experiences in the last year

Five women shared their experiences of maternity care in the last year. All women shared some positive feedback, particularly about the care they received from midwives. The kindness of midwives was mentioned multiple times:

“We had a really positive experience in labour suite at QMC [Queen’s Medical Centre] the midwives were very friendly and attentive and on the ball when I encountered problems during labour.”

“Couldn’t have asked for a better experience. Everyone was kind, compassionate, thorough.”

Two women told us that midwives made a positive difference by supporting them in decisions about their care during labour and birth:

“As I went into labour in the middle of the night, I ended up at the Sanctuary suite at the City [rather than planned home birth] and I can’t fault the care that me, my partner and our baby received there. The midwives in the unit read and supported my birth plan, and when things didn’t quite go to plan with some heavy bleeding they allowed my partner and I to make our own decisions which helped us remain feeling in control - I never worried at all as I felt in safe and capable hands.”

“Absolutely brilliant, the 2 midwives that helped me during my labour were informative and friendly. They did exactly what I asked, I am type 1 diabetic and they allowed me to have a water birth, unfortunately my baby kept moving so they couldn’t keep track of her heartbeat so I had to get out of the pool to actually give birth. Her shoulders were stuck so I did as I was told and she came out all healthy.”

One woman benefitted from having continuity of care during almost all her antenatal appointments:

“I had continuity of the same midwife for 99% of my antenatal appointments and found her to be thorough, knowledgeable, kind and that she listened to me. All my scans were carried out quickly and with kind, reassuring staff. I had a BBA [= born before arrival] but all midwives in the postnatal period have been friendly, professional and thorough even through these hard, understaffed times.”

However, another women had a very different experience when it came to continuity of care and mentioned that:

“[...] it was difficult as I ended up seeing a different midwife for every antenatal appointment and had to travel to 3 different locations for these.”

Experiences of postnatal care differed. Some women had very positive experiences, but one woman described the care on the ward as “disappointing”.

“My baby and I ended up staying on the postnatal ward for 10 days due to Group B Strep. Again I can't fault the care there - some midwives were "friendlier" than others but overall the care was exceptional and a select few were super supportive particularly in terms of my mental health e.g. listening when I did get upset and making helpful suggestions such as going for a walk while they watched my baby.[...] I wasn't able to meet other mums as we all had our own rooms but the privacy was nice and gave me real quality time with my baby boy.”

“Unfortunately my experience on the ward afterwards was very disappointing. I didn't get any help with looking after baby or myself. I had to frequently ask for pain relief as I was forgotten about. Very bad experience when it came to being discharged.”

One woman described the challenge of restricted visiting due to Covid restrictions:

“The hardest part was the sense of isolation- my husband could only visit for 1.5 hours each day and I couldn't see my daughter for 10 days.”

1.4. Recommendations relating to experiences in the last year

Women shared multiple recommendations for improving maternity experiences in the future. These related to the following themes:

- Staffing for the postnatal wards and for providing a reliable home birth service:

“More staff or less patients on a ward to ensure workloads can be kept on top of. More personal care and patients being kept better informed.”

“Guaranteed home birth staffing”

- Visiting restrictions:

“Slightly longer visiting hours for partners and it would be incredible if siblings could visit on the ward.”

- Improve communication around amenities in the hospital:

“For those mums staying longer due to complications- it would be nice to have more of a tour (I was shown the TV room and found the bathroom myself).”

2. Feedback and recommendations for Sherwood Forest Hospitals NHS Foundation Trust

2.1. Feedback relating to experiences of more than one year ago

Nine people shared feedback on maternity experiences that happened more than a year ago.

Two women did not share much detail with us about their experiences, although their feedback showed their experiences had been very different.

"2 years on and still not discharged... after care, was shocking."

"Amazing experience. Despite Covid. Literally faultless!!"

Women highly value seeing the same midwife or midwife team through their maternity care. People's experience of continuity of care differed greatly.

"I received exceptional care throughout my pregnancy, birth and postnatal period. I saw the same midwife for all of my antenatal appointments, she attended my homebirth and visited me for all postnatal visits except for one which was attended by the second midwife who attended my homebirth. I feel incredibly lucky to have been looked after by the Ashfield community midwifery team and I feel incredibly privileged to have been cared for by the same midwife for all three pregnancies and have had her by my side for each of my births."

Continuity of care was also appreciated around gestational diabetes care.

"I had gestational diabetes and my diabetic care from [midwife] and her team were amazing. She was my "go to" my shoulder to cry on and laugh with. Any problems she sorted. She listened to my wishes regarding induction."

One woman told us that she was already far into her pregnancy when she started to receive continuity of care by the same midwife. Her last experience was different from her pregnancy in 2017 when she did see the same midwife throughout pregnancy

"I believe that building up a relationship with your midwife is crucial but found the new set up to be a bit of a fail! [...] I was lucky that I was allocated [midwife] at 34 weeks as she really did go above and beyond to make sure everything went as smoothly as possible. If not, I really don't think I would have my dream home birth and really would have been felt down by this whole new system."

However, one partner shared that his wife only saw her community midwife twice due to staff illness.

"Midwives uncaring, dismissive of my concerns about my wife and unborn baby. She only saw her community midwife in Warsaw twice as always off sick."

Three women shared that feeling listened to and their birth preferences taken into account had a positive impact on their birth experiences.

"Two days before my due date we went back into the second lockdown and I was so worried that I wouldn't get the home birth that I had been dreaming of. When I went into labour [she] did everything to ensure my birth plan went as smoothly as possible and that I could stay at home where I had prepared to labour. My home birth couldn't have been anymore perfect and that was all thanks to [her] and [another midwife] who came out as a second midwife."

"My labour and delivery were fantastic. I was listened too and helped when needed. I did hypnobirthing and felt my wishes and wants were valued. After a traumatic placenta birth previously this was exceptionally well looked after (not wanting what happened previously to happen again) and I was monitored for

bleeding. Everyone who did their checks on myself and baby were friendly and smiley.”

“Even though it was mid pandemic I felt in good hands and extremely well looked after. I went home the following afternoon thanks to [midwife]. I often sit and want to re live it all again (pain and all!) as I felt liberated, cared for and listened too.”

Another woman described her hospital birth experience as “positive”, but did mention she was initially told to stay at home when she called to go into hospital during labour.

“I found the hospital experience positive but there was a point when I was not sure if my waters were leaking and I was told several times to stay home and it's probably not my waters. When I was in labour I called twice to go in as told to stay home and when I got there I was 8cm. I was monitored due to the stagnated growth. The labour went well and I delivered a baby safely. I had a retained placenta and had it removed in an emergency situation. The doctor took charge of the room and did a wonderful job of saving my life as I was bleeding so much. I can't praise them enough! One midwife even held my daughter as my husband nearly fainted.”

One partner described how his experiences with maternity staff differed and that overall he “never felt my wife or unborn was cared for well [...]”.

“Hospital staff some were ok and really helpful which I appreciate. [Midwife] on birth centre appeared to keep rolling her eyes when I asked if this was normal. Ultimately I never felt my wife or unborn was cared for well. [...]”

A long waiting time to be discharged was mentioned by one mother as an area for improvement.

“[...] I do think the discharge process needs to improve especially during CovidI was sat in a hospital by myself with baby when I could have been at home with my family for a number of hours.”

Care by health visitors was mentioned by one woman, who required additional support due to baby's weight gain.

“I had great care in the coming days and was told how amazing I was doing which is what I needed! My health visitors were kind and so lovely. My daughter began to not gain weight and we had to go to a weight clinic. The staff who dealt with [her] were amazing and always so helpful! [Another health visitor] took over being our health visitor as she saw a lot of her through her weight loss. She was exceptional and always ensured I left feeling confident and not worried. [Another health visitor] was also amazing. They were there if I needed them which is the service you want with a new baby!”

2.2. Recommendations relating to experiences of more than one year ago

Two mothers felt there was nothing that could have made their maternity experiences better.

“I had no problems whatsoever during this birth. I genuinely cannot think of anything that could make it better!”

“Nothing I felt so looked after.”

Other women shared their suggestions for what could have made their experiences better. Continuity of care and the impact of Covid restrictions were mentioned by multiple women

- Continuity of care

“Staff that truly care! If a staff [member] is off repeatedly with different reasons each time consider allocating a new named midwife.”

“To have my community midwife to deliver baby.”

- Impact of Covid restrictions

“Children to be able to go to appts with you, as I am also pregnant now and have a 15 months old so hard getting childcare for scans etc. It has also stopped me on many occasions not check babies movements when I've been worried as no one to have my daughter.”

“Unfortunately my partner was unable to attend the 12 week scan due to Covid restrictions, I wish this wasn't the case. There are not any other aspects of my experience that could be improved.”

Other areas that were mentioned for improvement were the following.

- More midwives
- Faster discharge from maternity ward
- Follow ups with parents is needed especially if it's your first baby
- Better information around breastfeeding

“Given honest opinions of what it feels like to have a baby and breast feed. Told to feed the baby every 2 hours as this info was not passed on and I saw in my notes that it was recorded I'd missed a feed.”

2.3. Feedback related to experiences in the last year

Five people told us about their maternity experiences in the last year. Two women spoke very positively about their experiences.

“It was fantastic”

“The maternity staff were fantastic and despite being understaffed due to Coronavirus (January 2021) I could not fault anything.”

Two other women had experienced maternity care by Sherwood Forest Hospitals in previous pregnancies and told us about how their most recent experiences differed. One of them shared how she felt *“left to her own devices”* and the other woman did not receive continuity of care during her pregnancy like she did in previous pregnancies.

“My experience this time wasn't pleasant at all, I was induced and after my waters broke my contractions ramped up pretty fast, I coped for as long as I could but

eventually asked for some pain relief, I think we buzzed 5 times and I still didn't get any pain relief, up until the point I felt I needed to push, I was told I didn't need too, then was examined and the midwife seemed to panic and pulled the buzzer and finally gave me some gas and air whilst they were rushing me down to delivery, my son was born a few minutes later but was the most intense painful birth of my [...] children, probably due to lack of pain relief, after the birth there was not the aftercare like I had received with my other son 3 years previous, maybe due to staff shortage? But it wasn't the nice experience I was expecting as I had previously had, I was left to my own devices, no help with breastfeeding like I had had before, no music playing in the background (this was my second December baby and my first there was Christmas songs on in the background which created lovely memories of those songs) and the lighting was low and the atmosphere calm. This time the room was bright and unappealing."

"[...] With my previous [...] pregnancies I had the same midwife through my care in the community and was able to build a relationship and trust in that midwife however with this pregnancy I saw a different midwife at each [appointment] and a different consultant at each hospital [appointment] so there was no continuity. I was already nervous about giving birth during a pandemic and not having a familiar member of the maternity team made it even more nerve wracking. However each member of staff I did see was very caring and looked after myself and my baby very well."

In the postnatal period, the mother did receive continuity of care from the same midwife and this had a positive impact on her care.

"After birth myself and my baby were well looked after and monitored. When we were discharged back into the community I received a lot of support with breastfeeding and my mental health and my baby's jaundice, after birth the midwife was the same one each time which I believe helped greatly as she was able to pick up when things were different from the previous visit and I needed support and also was able to assess how much my daughter jaundice was improving."

Women told us about the importance of involving partners in their maternity experiences.

"I wasn't allowed day partner with me to my appointment which I think made this time even more worrying and this is when having a familiar member of the team would have helped. My partner felt excluded especially when I spent a lot of time in hospital bleeding he was worried something was wrong and he wouldn't be able to support me. However when I was finally induced he was allowed to be by my side for the entire of my birth journey."

"The midwife looking after me was incredible from start to finish, she made my partner feel welcome and at ease during the whole labour as well as myself."

Women also told us about the importance of feeling listened to by their midwives and supported in their birth preferences.

“My birth was extremely quick and the midwife who cares for us listened to me and made me feel like I was in control. The care I received was amazing.”

“I really didn't want to have a c-section unless absolutely necessary and she fought for me to have a natural labour which I did.”

One woman was unable to have her planned home birth due to being unable to reach the labour suite via phone.

“No one answered phone to labour suite couldn't have my home birth so turned up at hospital as I rang 37 times no one answered got there 24 mins later 3 contractions and baby was born.”

One woman also told us about her experience of readmission to hospital.

“We were then admitted again a few days after my son was born as he was jaundice and the care I received on ward 25 was amazing.”

2.4. Recommendations related to experiences in the last year

One woman did not see anything that needed improvement.

“I didn't find any fault with my treatment so cannot see anything that needs improvement.”

The four other women shared their suggestions for what could have made their experiences better. These suggestions were around two themes.

- Better communication

“Just being listened too.”

“More staff better communication.”

“Encourage all midwives to continue being an advocate for their ladies and partners.”

- Continuity of care

Conclusions

This report presents the findings of the survey on maternity experiences in Nottingham and Nottinghamshire. In total, we received responses from 28 people, who shared their experiences with us and gave suggestions for what could have made their maternity experiences better.

The experiences people told us about varied greatly. With many highly positive experiences, yet also experiences that were very challenging. The main themes that came forward from the survey as areas of improvement are:

- Staffing shortages
- Midwifery continuity of care
- Lack of feeding support, in particular, breastfeeding support
- Need to involve and support non-pregnant partners
- Need for better availability of home birth services
- Communication between midwives and service users
- Access to the right medication, particularly pain medication

Recommendations

This survey was promoted online via the Facebook and Twitter page of the MVP due to Covid restrictions at that time, and only collected responses via an online link to the survey. In order to allow more families to give their feedback, future MVP surveys may consider offline data gathering as well, in either community or hospital settings where families attend for their maternity care, subject to risk assessment. In addition, engagement activities should consider prioritisation of more vulnerable groups, that is, those groups who are most likely to experience health inequalities in their maternity care.

Based on the responses to the survey, Healthwatch Nottingham and Nottinghamshire presents the following recommendations to Nottingham University Hospitals NHS Trust and Sherwood Forest Hospitals NHS Foundation Trust:

- Increase staffing, particularly for postnatal wards and the home birth services.
- Improve the support for parent with feeding their baby, in particular breastfeeding support.
- Assign women and birthing people a named midwife and enable them to see the same midwife throughout their maternity care as much as possible.
- Involve and support non-pregnant partners, so that they are supported and feel included, and are better supported to help their partners and babies.
- Promote good communication between maternity staff and pregnant women/people around their concerns and preferences throughout their maternity experience.
- Improve access to the right medication, in particular pain medication.

We recommend that the Trusts work together with service users when making changes to the existing services or designing improvements for future services. In particular, co-production with more vulnerable groups will help ensure that changes

to maternity services will benefit the groups who are most at risk of health inequalities.

About us

Healthwatch Nottingham & Nottinghamshire is the local independent patient and public champion. We hold local health and care leaders to account for providing excellent care by making sure they communicate and engage with local people, clearly and meaningfully and that they are transparent in their decision making.

We gather and represent the views of those who use health and social care services, particularly those whose voice is not often listened to. We use this information to make recommendations to those who have the power to make change happen.

Healthwatch Nottingham and Nottinghamshire

Unit 1, Byron Business Centre, Duke Street, Hucknall, NH15 7HP

www.hwnn.co.uk

t: 0115 956 5313

e: info@hwnn.co.uk



[@ HWNN](https://twitter.com/HWNN)



[Facebook.com/HealthwatchNN](https://www.facebook.com/HealthwatchNN)

We are a company registered in England and Wales.

Company Registration Number: 8407721

Registered Charity Number:

1159968

Appendix – Who answered the survey about maternity experiences in Nottingham and Nottinghamshire?

District	No.	Percentage
Ashfield	8	29%
Gedling	6	21%
Mansfield	6	21%
Rushcliffe	3	11%
Broxtowe	2	7%
Newark & Sherwood	1	4%
Nottingham City	1	4%
Outside of Nottinghamshire	1	4%
Total	28	100%

Ethnic group	No.	Percentage
White	23	82%
Asian	4	14%
not answered	1	4%
Total	28	100%

Baby's ethnicity	No.	Percentage
White	23	82%
Asian	2	7%
Asian	2	7%
Mixed/Multiple ethnic	1	4%
Not answered	1	4%
Other	1	4%
Total	28	100%

Age of respondent	No.	Percentage
25–34	18	64%
35–44	8	29%
Not answered	2	7%
Total	28	100%

Gender	No.	Percentage
Female	25	89%
Male	1	4%
Not answered	2	7%
Total	28	100%

Is your gender identity the same gender you were assigned at birth?	No.	Percentage
Yes	27	96%
Not answered	1	4%
Total	28	100%

If aged 16+, are you sexually attracted to...	No.	Percentage
Females	3	11%
Males	23	82%
Not answered	2	7%
Total	28	100%

Are you a carer?	No.	Percentage
Yes	2	7%
No	26	93%
Total	28	100%

Are you cared for by anyone?	No.	Percentage
No	28	100%
Total	28	100%

Employment status	No.	Percentage
Full time	8	29%
Not employed	4	14%
Part time	16	57%
Total	28	100%

Which of these statements best describes you?	No.	Percentage
Atheist	6	21%
Christian (all denominations)	4	14%
Hindu	1	4%
Muslim	1	4%
No religion	16	57%
Total	28	100%

What is your main preferred language?	No.	Percentage
English	26	93%
Not answered	2	7%
Total	28	100%

How would you describe your nationality?	No.	Percentage
British or White British	20	71%
Not answered	8	29%
Total	28	100%

Do you live with any of the following	No.	Percentage
A long term health condition	3	11%

Mental health illness	1	4%
None of the options selected	24	86%
Total	28	100%