

# East Sussex Maternity Services

Research into the experience of mothers giving birth across East Sussex in 2016

Survey undertaken by Eastbourne Borough Council in partnership with and under the rules of the Office for National Statistics

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#### **IMPORTANT NOTE - Structure of this Document:**

This version of the Maternity Survey document includes the full text of the overarching report presenting the specific data arising from each of the questions asked covering the headline statistical information followed by the specific data arising from questions relating to before, during and after the birth, plus reference to additional feedback received.

The remaining elements contained in appendices to the full report are available online at the following link:

www.lewes-eastbourne.gov.uk/eastbourne-borough-council-news/review-of-east-sussex-maternity-services/

#### These include:

- The base information in respect of the survey covering ONS statistics,
- The questionnaire and correspondence used
- A map of the County showing the CCG areas, hospital locations and response levels from each of the CCG areas
- Full details of the raw data received from across the County and also the same data proportioned to responses from each of the CCG areas. These also contain the additional feedback comments received from respondents, again, specific to each CCG area

# **Background and Introduction**

In 2014, the three principal East Sussex Clinical Commissioning Groups issued a consultation document entitled 'Better Beginnings' which, among other things, proposed options for the future of maternity services across East Sussex.

All the options presented would result in either the Eastbourne District General Hospital ("EDGH") or Hastings Conquest Hospital ("Conquest") losing full consultant led maternity services. This was despite the rulings in 2008 by the Secretary of State and the Independent Review Panel that EDGH should maintain full consultant led maternity services.

On behalf of the local community, Eastbourne Borough Council ("EBC") submitted a highly detailed and evidence based response arguing the case that both hospital sites should retain these services and expressing strong concerns about patient safety.

This response was co-signed by the Leaders of both political groups on the Council, the MP, the Council's Hospitals Champion, the President of Eastbourne Chamber of Commerce, the Chair of the Eastbourne Hospitality Association, the Chair of the 1066 Country Federation of Small Businesses, the Editor-in-Chief of the Eastbourne Herald, and the Chair of Churches Together.

Subsequently, one of the options offered for consultation that resulted in the loss of consultant led maternity services at the EDGH was chosen and implemented as the permanent configuration. This confirmed the "temporary" centralisation of consultancy led maternity services and in-patient paediatric services at Hastings which had been implemented in May 2013.

EDGH and Conquest are the two acute hospitals managed by East Sussex Healthcare NHS Trust ("ESHT") to serve the estimated population of 525,000 in East Sussex. ESHT aspires "to provide safe, compassionate and high quality care to improve the health and well-being of the people of East Sussex."

In conducting this survey, it is therefore necessary to look at the whole of East Sussex and to make relevant comparisons between the three principal CCG's of the levels of service provision within it.

In this context it is useful to note that over the last 7 years ESHT has reduced the number of babies it has delivered by about 1,000 whilst the number of births in East Sussex have remained about the same but with over 2,000 babies (40%) delivered outside ESHT. Within these totals, through the period of reconfiguration, the number of births per annum at EDGH has reduced dramatically (from over 2,000 to less than 300.)

Since the decision made in 2014, local concerns have remained strong. As a result, with the service arrangements having now been in place for some time

and having regard to ongoing concerns, it is prudent to undertake direct consultation with those that have experienced the changed service. This is so as to be able to analyse the impact of the changes on service quality and, above all, patient safety.

Eastbourne Borough Council has taken on this responsibility as a natural followup to previous input, and as the leader of the Eastbourne community, being the area most affected by changes. In undertaking this work, it is the sincere hope that relevant agencies take on board its findings in a positive way, especially where the feedback received can help guide future service provision and address any current issues that may be putting patient safety at undue risk.

# Methodology

In order to ensure that this survey would carry due independent legitimacy EBC approached the Office for National Statistics ("ONS") to propose conducting it under their auspices. This was a very thorough process as the governance requirements are rigorous. The ONS were satisfied as to the reasons for the survey and the governance being proposed and agreed to provide the support necessary to enable EBC to carry out the survey.

The innovative approach has been to use the latest information available for the registration of births in East Sussex. The ONS has privileged access to these records and released the following summary information in July 2017 for the calendar year 2016. This is apparently the first time that a local government authority has used such registration records.

Extract from ONS "Live births and stillbirths by area of usual residence of mother, 2016":

	Live Births	Stillbirths
East Sussex	5,219	19
<ul><li>Eastbourne</li><li>Hastings</li><li>Lewes</li><li>Rother</li><li>Wealden</li></ul>	1,048 1,115 898 751 1,407	8 6 3 1 1
England, Wales and elsewhere	696,271	3,112

The ONS agreed to identify all mothers registering a live birth in East Sussex in 2016 and to distribute EBC's questionnaire to them. The ONS distributed the questionnaires to remove the need for EBC to receive contact details for the women identified and protect their confidentiality. The ONS eliminated a small

number (largely those duplicated through multiple births) and the first mailing was made to 5,131 mothers registering a usual address in East Sussex.

A second mailing to 3,944 mothers who had not replied was made some 4 weeks later.

The questionnaire was reviewed and approved by the ONS and each questionnaire contains a unique reference number ("URN") which protects the anonymity of the respondent but allows the reply to be attributed to a specific postcode district.

EBC produced all the paperwork, having allocated URN's to postcode districts, for the ONS to mail out. Mailings included a pre-addressed Freepost envelope within which the completed questionnaires were returned to EBC and held securely under the supervision of the Monitoring Officer. The ONS had no involvement in that stage and subsequent stages of the project. The data from the questionnaires was then transcribed onto a bespoke computer application from which it can be interrogated in a variety of ways to present the survey outcomes set out in this report. Indeed further interrogation of the information would be possible by relevant parties.

Since data received from each respondent is stored by postcode district, it is possible to analyse the data by CCG areas, whose boundaries are not coterminous with local authority boundaries used by the ONS, hence the very small number of East Sussex residents in the BH and HMS CCG's with responses.

Although stillbirths were not covered by this survey it should be recognised that the 2016 statistics above (8/1048) show Eastbourne as an outlier with a significantly higher incidence than within East Sussex or nationally. The trend since 2013 has been upward. 15 of the 19 stillbirths for 2016 in East Sussex were registered at the Conquest. This deserves investigation by relevant agencies.

# **Headline Information**

- There have been 1,652 replies and an additional 355 (approximately 7%) were returned undelivered presumably because the mother has since moved.
- This represents a response rate of approximately 35% if we eliminate those returned undelivered.
- 1,550 replies received before the cut-off date have been analysed as part of the survey

- The vast majority of responses were very complete with few questions skipped and a huge 69% (1069) provided additional comments which provide a rich seam of feedback.
- We have analysed the dates of birth provided by respondents and found no strong variances amongst the days of the week (although weekend births are slightly lower) or through the months of the year, which now range from 10 to 21 months ago.
- The gender of children born to our respondents were 51% male/ 49% female and the 32 multiple births reported (over 2%) is a rather higher percentage than the 1.5% in East Sussex overall for 2016.
- Our respondents reported that the birth was their first/second/third/other in proportions 44%/38%/13%/5%.
- Based on postcode districts the replies have been analysed between the 3 major CCG areas and 2 smaller ones (A map showing the CCG areas with hospitals/birthing centres is attached to the full document as an appendix). This will allow the CCG's to review information directly relevant to them and allows the reader to make comparisons between them.
- The response rate has been excellent from all CCG areas within East Sussex with similarly high response rates from the EHS CCG and HWLH areas, and slightly lower for the others, particularly HR.
- Before reporting separately on specific questions within the pre-natal, birth and post-natal sections, it is instructive to group together the overall satisfaction levels for these three distinct phases with the number of responses:

	Excellent	Good	Poor	Very Poor	No. of Responses
Pre-natal	40%	54%	5%	1%	1,530
Birth	62%	32%	4%	2%	1,509
Post-natal	36%	47%	12%	5%	1,485

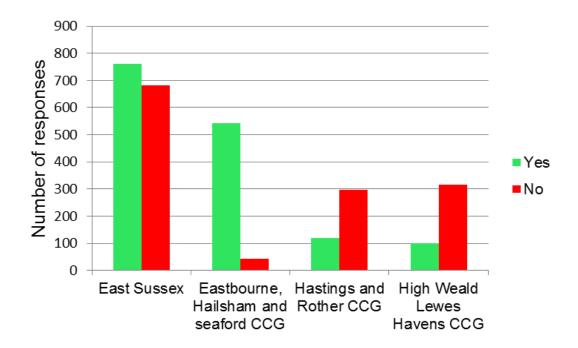
- Without making any judgement on these absolute satisfaction levels it is very clear that there is considerably more dis-satisfaction with postnatal care. This is strongly supported by the large number of additional comments which generally appear to provide more adverse feedback than these percentages suggest.
- Similarly it is instructive to group together the two questions asked about mothers' wishes to give birth at a location with doctors on site. The first asked "Did you wish (before the birth)...", the second "Would you wish (if having another child).. to give birth at a location with doctors on site"

	Yes	No	No. of Responses
Before the birth	73%	27%	1,527
For another birth	78%	22%	1,522

- This is a very strong response and it is of note that the wish to give birth
  with doctors on-site actually increases after the birth experience. This
  percentage is close to that contained in the national survey conducted by
  the Women's Institute in conjunction with the National Childbirth Trust
  which reported that 82% of women wished to give birth with doctors onsite, including both alongside Midwife Led Units and Consultant Led Units
  ("support overdue WI/NCT May 2013").
- Finally we come to the only question that specifically refers to EDGH:

"If you were to have another child, would you choose to give birth at Eastbourne District General Hospital if a full obstetric service were available."

A total of 1445 responses were received to this question



- The large number (542) of respondents from Eastbourne, Hailsham and Seaford CCG area who answered yes to this question is overwhelming. It is notable that a high number (220) of respondents from other CCG areas who expressed the same preference.
- The wishes of mothers served by the Eastbourne, Hailsham and Seaford CCG appear to be abundantly clear but there is also considerable potential for demand from the other 2 CCG's.
- 93% of them would choose to give birth at Eastbourne DGH if a full obstetric service were available.
- A simple extrapolation of the 762 on the total annual births for East Sussex (5,219) gives a potential demand of 2752 births annually at EDGH. Weighting it for the response rate by CCG gives a total demand of over 2,500.

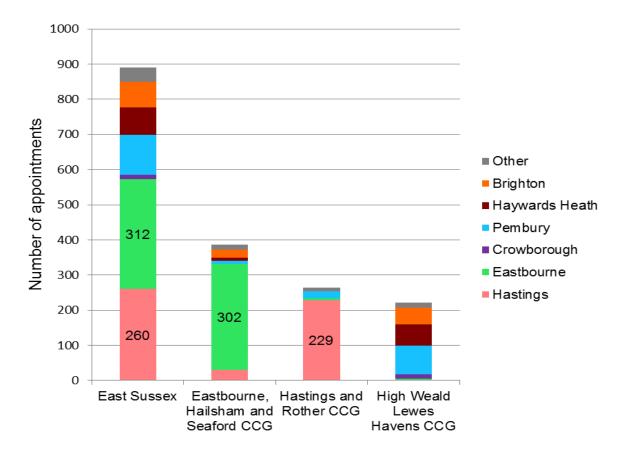
# **During Pregnancy**

#### Question:

"Did you have an appointment with a consultant before birth? If yes, where was it?"

• 954 out of 1537 respondents answered yes to this question (62%), 890 of these went on to indicate where:

#### Response:



## **Comments:**

- This is very significant with a higher number of such appointments in Eastbourne compared to Hastings where consultants are based. It further demonstrates the strong demand for services in Eastbourne.
- Of the 312 mothers having an appointment with a consultant before birth in Eastbourne only 47 (15%) then went on to give birth in Eastbourne.

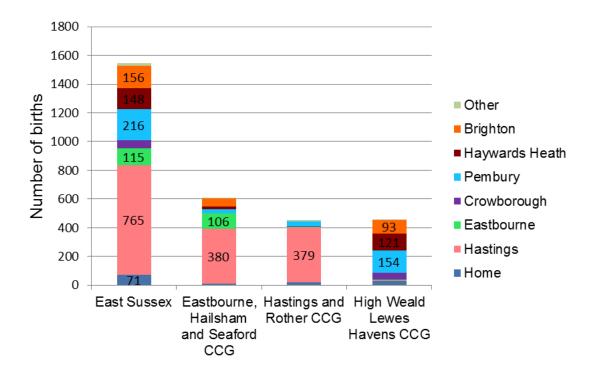
# **During birth**

#### Question:

"Where was the child born?"

1545 respondents answered this question.

#### Response:



#### Comments:

- Almost all of our respondents answered this question. The great change from the previous graph is the dramatic shift of location from Eastbourne to Hastings.
- The small number of respondents giving birth at Eastbourne (just 115) is remarkably low and is consistent with the trend as shown in Appendix A.
- These numbers include both those respondents who did and those who
  did not see a consultant during pregnancy, and therefore would be
  expected to be lower risk and more likely to give birth at Eastbourne with
  no consultant presence on delivery.

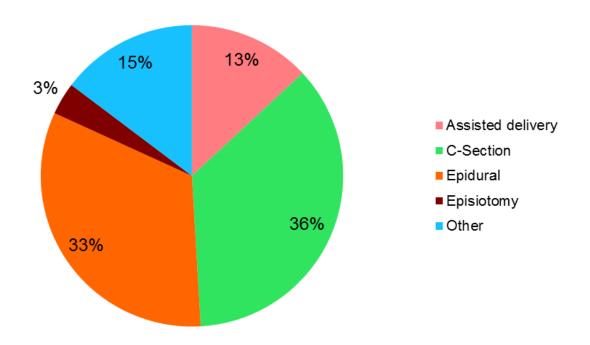
- For HWLH there is a large discrepancy between the very low 2% of actual births through ESHT in total (only 6 at the Conquest and 2 at the EDGH) and the 24% (100 respondents) who "would wish to give birth at EDGH if a full obstetric service was available (see page 9).
- It should be noted that "other" locations for birth includes 2 respondents who gave birth in a vehicle (and a 3<sup>rd</sup> in the questionnaires not analysed.)

#### Question:

"Did you require a doctor's intervention during labour?"

Of the 1523 respondents who answered this question, 51% said "yes" and 49% "no". Of those that answered "yes" the various interventions are described by the following pie-chart:

## Response:



**NOTE:** There is a full analysis of responses included in the "assisted delivery" and "other" categories in the above chart on pages 37 to 41.

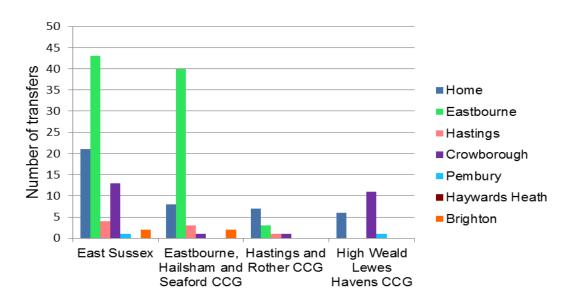
#### Question:

"If you were transferred during labour from where to where?"

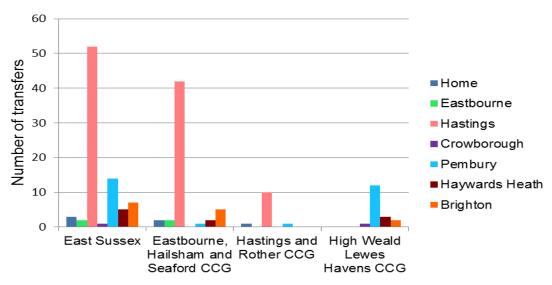
• 90 respondents reported that they were transferred during labour.

## Response:

#### Transfers during labour from:



## Transfers during labour to:



#### Comments:

- Compared to the other CCG's, EHS has a very significantly greater number of transfers during labour. By far the largest number of such transfers was from Eastbourne (43) and adding to the number of respondents who gave birth at EDGH (115) it means that of those mothers who started labour at EDGH, 27% were transferred during labour.
- The comparable percentage for home births is 23% and for Crowborough, 18%.

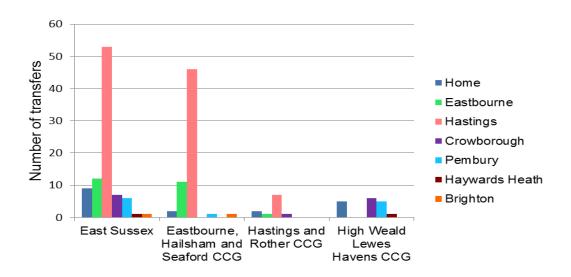
# After the birth

#### **Question:**

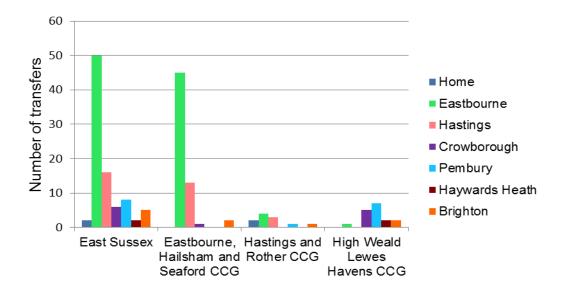
"If you were transferred after the birth to another location please indicate from where to where : "

## Response:

#### Transfers after the birth from:



#### Transfers after the birth to:



#### Comments:

- These movements after the birth are remarkably similar to the movements during labour in that the largest movement by far is from Hastings to Eastbourne. However there are also movements to a more acute setting following birth with total transfers between Hastings and Eastbourne and the reverse adding up to 60 transfers out of the total of 89.
- In this respect it can clearly be seen that mothers served by EHS are very significantly more likely to be transferred after birth than mothers served by the other CCGs.

# Additional feedback received

#### Question:

"Are there any comments you would like to make about the maternity services offered to you?"

• Comments have been received from 1,069 respondents out of the 1,550 analysed (69%) Many of the comments are both positive and negative and so are difficult to categorize.

## Response:

All of the free flow feedback comments received as part of this survey have been set out in full and organised into the CCG areas from where they originated in appendices to the full report.

In the spirit of making the fullest possible customer feedback information available to interested parties, we would invite and encourage the CCG's and others to analyse these comments as much valuable first-hand user experience is contained here.