Delivering Better Births in Oxfordshire

Views on Personalised Care Plans for Oxfordshire

“...more support, more information, more compassion and more care”

“I think the care I received from Oxford and the JR was excellent and feel very lucky to have access to such fantastic healthcare.”

Summary Report
June 2019
What we did

Working with Healthwatch Bucks, Healthwatch Reading, Healthwatch Wokingham Borough, and Healthwatch West Berkshire to speak to women who had been pregnant or had a baby between Jan 2015 and Dec 2018. We asked about:

- their experiences of making choices about maternity care
- what the personalised care plan should include
- what the plan should look like

In total we received **427 responses** through the survey from women who gave birth in Oxfordshire, being 30per cent of the total responses. Six groups were visited to hear views from those who were unlikely to have responded to the survey. A summary report of the findings across the five Healthwatch areas is available [here](#).

In Oxfordshire the responders gave birth in the following places:

- Cotswold Birth Centre - seven responses
- Horton General Hospital - 15 responses
- John Radcliffe Women’s Centre Delivery Unit - 331 responses
- Oxford Spires Midwifery-led unit - 47 responses
- Wallingford Hospital Maternity Unit - 20 responses
- Wantage Hospital Maternity Unit - two responses

Is there something else the NHS could have done to improve your care and support before, during and after the birth?

Key to the survey was to identify what improvements could be considered by providers to improve the care and support before, during and after the birth in Oxfordshire.

The following section reports what people said in response to Q12 (above). The responses have been grouped by birthing setting and themed. The themes are supported by selected *quotes* (*in italic*) from people who responded.

**General Birth Themes (427 responses)**

- Birth plans not being read or followed by Health Care Professionals;
- Lack of explanation around what happens if birth plan cannot be followed;
- Lack of midwife continuity ante and post-natally;
- Lack of breastfeeding advice/support;
- Lack of support after giving birth both immediately and during following weeks;
- Post-birth pain relief inadequate;
- Communications issues between different trusts/sites/departments;
- Conflicting advice from multiple HCPs;
- Mental health support inconsistent;
- MAU (medical care assessment unit) care midwives can be dismissive;
• Tongue tie (when the string of tissue under a baby’s tongue, which attaches her tongue to the floor of her mouth, is too short) being missed

“A care plan is all very well but it needs to be followed in a birthplace where there resources for care and support are adequate. It is no good if it is just going to be a gimmick which is abandoned because of staff being too busy, for instance. Numerous women I know from Banburyshire who have given birth at the JR in the past couple of years have had bad experiences, describing a unit which is overstretched and understaffed, meaning that their most basic care choices, i.e. provision of pain relief, were neglected because of high demand and short staffing.”

“I think the care I received from Oxford and the JR was excellent and feel very lucky to have access to such fantastic healthcare.”

“There was little choice due to Oxfordshire’s policies and lack of staff. This needs to be resolved before offering care plans - there is no point having a care plan if it can’t be realistically offered due to staff shortages”

“I wanted to be listened to more. I don’t think I am alone in my experiences of feeling like it was a battle to get the midwives to listen to me: 1. To convince them I was in labour; 2. That a needed pain relief; 3. That the baby was descending out of me!”

“Yes, more support, more information, more compassion and more care”

“Very professional care received at the JR Hospital maternity ward, I had a C-section. All operation team and midwives involved afterwards did a very good job”

John Radcliffe Women’s Centre Delivery Unit (331 responses)
• Consistency and communications especially when using additional services for example the Silver Star service;
• Not seen often enough antenatally;
• Confusing and contradictory advice, given lots of leaflets - produce one leaflet!
• Not providing appropriate pain relief in time - listen to mothers;
• Continuity - mothers would like to see the same midwife more often;
• Poor post care especially Level 5 - no-one answering bells (patient’s father removed cannula). People left in pain - invest more in after care;
• Not having enough info re birth alternatives, delivery suite and hospital ward;
• Lack of support around breastfeeding difficulties;
• Choices are respected more during pregnancy but not labour;
• Post C-section care the staff very stretched not enough of them, partners have to leave - allow partners to stay and support. Have cots that attach to bedside for C-section mothers;
• Insufficient support for very anxious mothers - offer more support post labour for traumatic births;
• 28 people had very positive experiences.

“This hospital needs more recognition for the excellent care it provides”

“Staffing at JR terrible, especially on Level 5 after delivery. As a first time mum, I was just left to it. No support with breastfeeding”.

Oxford Spires Midwifery-led Unit (47 responses)
• Lack of continuity of midwife;
• Birth plans - not referred to enough;
• Not being listened to by midwives;
• Missing out on meals;

Wallingford Hospital Maternity Unit (20 responses)
• Seven people said their care was very good
• Two people said they would like staff to have more knowledge of hypnobirthing;
• Two people said their babies’ tongue tie wasn’t spotted quickly enough;

Horton General Hospital (15 responses)
• Keep it as an obstetric unit;
• C-section mothers cannot drive so follow up appointments really tricky if you are in Banbury.

“I feel that living in Banbury my choices have become rather limited and have created a great deal of stress due to the closure of the Horton specialist service. However, I really appreciate OUH acknowledging the better birth recommendations.”

“I would have really appreciated the opportunity to talk through a plan for the birth, aftercare and early days of motherhood. I would especially appreciate this now (I am currently pregnant) that the Horton cannot offer C-sections and will need to travel to the JR (I live in Banbury)”. 
Recommendations
The main report (found here) makes recommendations and are supported by Healthwatch Oxfordshire.

Regarding Oxfordshire maternity services, Healthwatch Oxfordshire asks that:

1. Oxford University Hospitals NHS Foundation Trust (OUHT) reviews the detailed feedback given a part of the survey so that it can be used to improve the service - the very positive experiences reported are just as important as poor experiences in helping to identify what a good service could look like. This information, together with this summary report, has been passed to the Trust by Healthwatch Oxfordshire.

2. OUHT conducts a month-long survey of all patients giving birth at their centres. Information gathered from this survey will confirm whether the responses gathered in this research are reflective of current patient experiences and add to the information already gathered to inform service improvements.

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