



National Maternity  
Experience Survey 2020

Midland Regional Hospital  
Mullingar

## 2020 survey results

### Respondents



**151**

Number of respondents



**51%**

Participation rate

### Overall experience

2020



### Stages of care



#### Care while pregnant (antenatal care)

Care provided in the hospital and the community

Ratings of 'care while pregnant (antenatal care)' were about the same as the national average. The highest-scoring question related to receipt of information on giving up smoking while pregnant. The lowest-scoring question related to the receipt of information about changes in mental health.



#### Care during labour and birth

Care provided in the hospital

Ratings for 'care during labour and birth' were about the same as the national average. The highest-scoring question related to the opportunity for women to have skin to skin contact with their baby shortly after birth. The lowest-scoring question related to the involvement of women in decisions about care during labour and birth.



## Care in hospital after the birth

Care provided in the hospital

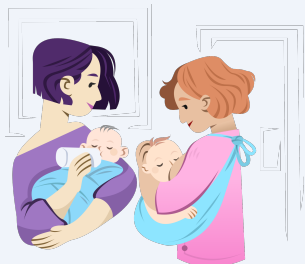
Ratings of 'care in hospital after the birth' were about the same as the national average. The highest-scoring question related to being told who to contact after discharge. The lowest-scoring question related to 'debriefing' and the opportunity for women to ask questions about their labour and birth after the baby was born.



## Specialised care\*

Care provided in the hospital

45% of women said that they had a very good overall experience of the care their baby received in the neonatal unit in Midland Regional Hospital Mullingar, compared with 70% nationally.



## Feeding

Care provided in the hospital and the community

Ratings of 'feeding' were about the same as the national average. The highest-scoring question related to respect for decisions about how women wanted to feed their baby. The joint lowest-scoring questions related to support and encouragement provided to women with feeding their baby in hospital and support and encouragement with feeding their baby at home.



## Care at home after the birth

Care provided in the community

Ratings of 'care at home after the birth' were about the same as the national average. The highest-scoring question related to clear answers from the public health nurse, The lowest-scoring question related to the time spent by the GP or practice nurse/midwife discussing mental health during the 6-week check -up.



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## About the National Maternity Experience Survey

The National Maternity Experience Survey offers women the opportunity to share their experiences of Ireland's maternity services. The survey is part of the National Care Experience Programme, a joint initiative by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. The National Care Experience Programme seeks to improve the quality of health and social care services in Ireland by asking people about their experiences of care and acting on their feedback. The survey reflects a commitment made in the National Maternity Strategy 2016-2026 to evaluate maternity care services from the perspectives of the women who use them.<sup>(1)</sup>

The survey questionnaire contains 68 questions which capture the whole maternity pathway from antenatal care, through labour and birth, to postnatal care in the community. The National Maternity Experience Survey includes questions taken or adapted from a library of questions developed by the National University of Ireland, Galway (NUIG) in collaboration with the National Care Experience Programme. More information on the survey design can be found at [www.yourexperience.ie/maternity/about-the-survey](http://www.yourexperience.ie/maternity/about-the-survey).

The aim of the survey is to learn from the experiences of women to improve the safety and quality of the care that they and their baby receive. HIQA, the HSE and the Department of Health have committed to acting on the findings of the National Maternity Experience Survey to improve the quality of maternity care services in Ireland. Quality improvement plans have been developed by the HSE at national and local levels to address the issues highlighted in the survey.

## About this report

This report focuses on the experiences of women who gave birth in Midland Regional Hospital Mullingar. In Ireland, maternity care is provided by a mix of hospital-based and community-based services. This report includes women's experiences of the care provided both in Midland Regional Hospital Mullingar, and by general practitioners and public health nurses based in the community.

## What were the findings for women who gave birth in Midland Regional Hospital Mullingar?

The majority of women who gave birth in Midland Regional Hospital Mullingar said they had a positive overall experience. 85% said their maternity care was good or very good, which is the same as the national average. The hospital scored close to the national average for each stage of care.

55% of women who gave birth in the Midland Regional Hospital Mullingar said that they were offered a choice of the type of maternity care they would receive. Options included public care, consultant-led private or semi-private care, DOMINO and community midwifery care.

Women's ratings of Q31, Q35, and Q48 scored above the national average. These questions asked about the information that women received on support services after discharge if they were worried about their own or their baby's health, whether they received clear answers from the public health nurse, and also whether the questions they asked after the birth of their baby were answered in a way that they could understand.

However, ratings of Q9, Q28 and Q52 were among the lowest-scoring questions in the survey. These questions asked about the provision of information about mental health changes during pregnancy, an opportunity to ask questions during labour and birth, and also whether the GP or practice nurse spent enough time at the postnatal check-up talking about the woman's own mental health.

The responses to the three free-text questions provided very detailed information on women's experiences while in the Midland Regional Hospital Mullingar and the maternity care they received in the community before and after giving birth. These comments identified the caring and helpful attitudes of healthcare professionals but also highlighted the difficulties that some women experienced in accessing help when they needed it.

## Who took part in the survey?

295 women who gave birth in Midland Regional Hospital Mullingar in October and November 2019 were invited to participate in the survey. 151 women completed the survey, representing a response rate of 51%.<sup>1</sup> Table 1 provides information on the characteristics of the women who gave birth in Midland Regional Hospital Mullingar

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<sup>1</sup> It is important to note that the Covid-19 pandemic may have had an impact on the number of survey responses received. However, the women who were invited to take part gave birth prior to the pandemic and the maternity care they received was thus unlikely to have been affected.

who responded to the survey. Most of these women said that they lived in Westmeath.

**Table 1. Characteristics of respondents who gave birth in the Midland Regional Hospital Mullingar.**

<b>Age category</b>		
	<b>No.</b>	<b>%</b>
Under 25	13	8.6%
25-29	23	15.2%
30-34	50	33.1%
35-39	56	37.1%
40 or older	9	6.0%
<b>Previous births</b>		
None	53	37.9%
One or two	75	53.6%
Three or more	12	8.6%
<b>Ethnic group</b>		
White Irish	116	78.4%
Irish Traveller	1	0.7%
Roma	1	0.7%
Any other White background	21	14.2%
African	2	1.4%
Any other Black background	2	1.4%
Indian/Pakistani/Bangladeshi	1	0.7%
Any other Asian background	1	0.7%
Mixed	1	0.7%
Other	2	1.4%
<b>County of residence</b>		
Kildare	3	2.0%
Leitrim	6	4.0%
Longford	32	21.3%
Meath	19	12.7%
Offaly	25	16.7%
Roscommon	6	4.0%
Westmeath	59	39.3%

## Interpreting the results presented in this report

In this report, scores out of 10 are given for relevant questions belonging to a stage of maternity care or to a stage as whole. A score of 0 indicates a very negative experience and a score of 10 indicates a very positive experience. Some questions simply provide descriptive information and these questions are not given a score out of 10.

Statistical tests were carried out to examine if there were significant differences between the scores for specific groups, for example, for people who gave birth in Midland Regional Hospital Mullingar, and the national average. Throughout this report, when the hospital scored significantly above the national average, this is described as 'higher'. When the hospital scored significantly below the national average, it is described as 'lower'. When there is no statistically significant difference between the hospital's score and the national average, it is described as 'about the same'. For more information on the analyses please consult Appendix 3 of the 2020 national report, available from [www.yourexperience.ie](http://www.yourexperience.ie).

There were three free-text questions in the survey which asked women about the positive aspects of their experiences and where improvements were required. Quotations from women are presented in a dedicated chapter. These quotations have been redacted to remove any information that could identify an individual.



# Experiences of maternity care for women who gave birth in Midland Regional Hospital Mullingar

## Areas that scored above and below the national average

Using a methodology set out in appendix 1 this section lists the questions where women who gave birth in the Midland Regional Hospital Mullingar rated their experiences significantly above or below the national average. It is important to note that even for questions that scored significantly above the national average, there is still room for improvement. The list includes the relevant stage of care and question number for each area.

### Areas that scored above the national average

#### Care after birth

##### Clear answers after birth | Q31.

117 (78.5%) out of the 149 women who answered this question, said that their questions were answered in a way that they could understand after the birth of their baby.

#### Care after birth

##### Information on support services after discharge | Q35.

134 (95%) out of the 141 women who answered this question, said that they were told who to contact if they were worried about their health or their baby's health after they left hospital.

#### Care at home

##### Clear answers from the public health nurse | Q48.

Of the 148 women who answered this question, 135 (91.2%) felt that their questions were always answered by the public health nurse in a way that they could understand.

### Areas that scored below the national average

In the Midland Regional Hospital Mullingar, the scores for all questions were above or the same as the national average. While no specific areas for improvement were identified using the methodology outlined in Appendix 1, there was still room for improvement on a number of questions. Participants' comments also identified areas where improvement was possible.

## Care while pregnant (antenatal care)

The first seven questions for this stage asked women to provide information about the first healthcare professional they contacted when they knew they were pregnant, the types of maternity care they were offered, and whether they attended antenatal classes or courses. The results for these questions are presented in Tables 2 and 3. A description of the types of maternity care is provided in Appendix 2.

The remaining 10 questions asked about the information and support women received during their antenatal care. These questions were scored out of 10, with the scores for the stage as a whole compared against the national average in Figure 2, and compared by participants' county of residence in Figure 3. The scores for the individual questions are compared against the national average in Figure 4.

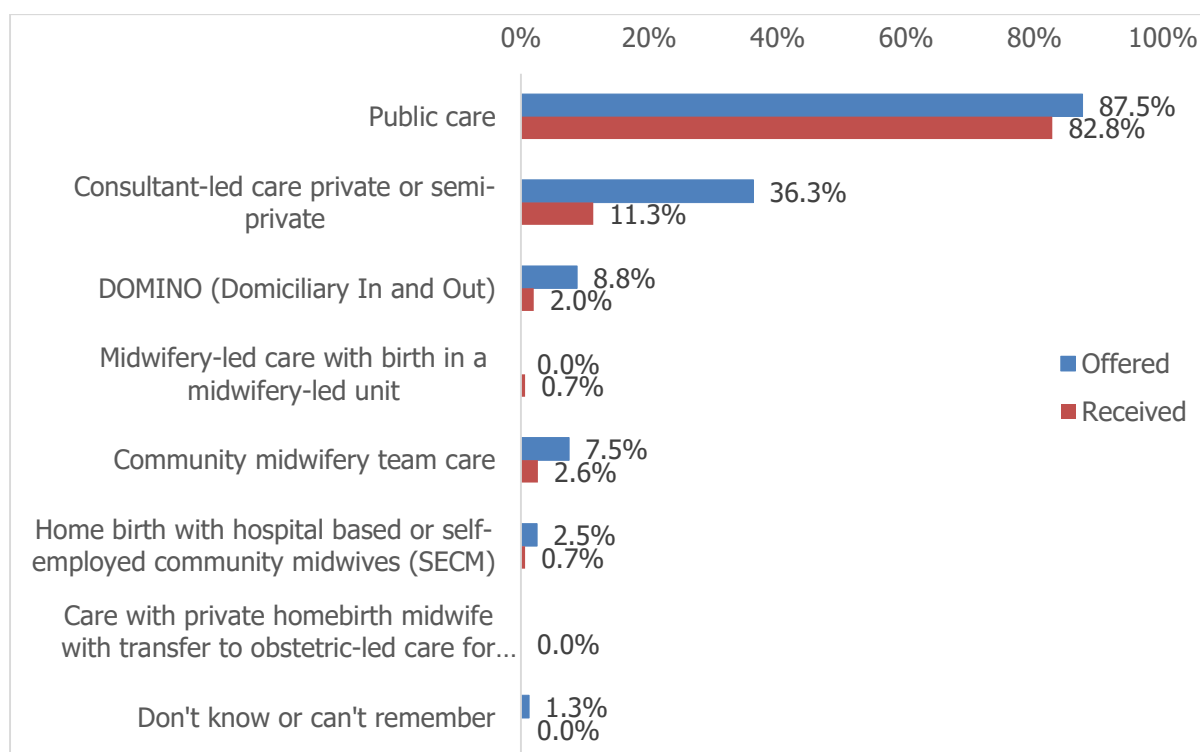
It is important to note that the questions for this stage of care relate both to care provided in the community and care provided in the Midland Regional Hospital Mullingar.

**Table 2. Number of births and first healthcare professional contacted.**

<b>Q1. In your most recent pregnancy, did you give birth to...</b>		
	<b>No.</b>	<b>%</b>
A single baby	149	98.7%
Twins	2	1.3%
Triplets, quads or more	0	0.0%
<b>Q2. Who was the first healthcare professional you saw when you thought you were pregnant?</b>		
GP / family doctor	140	92.7%
Midwife	1	0.7%
Other	10	6.6%

80 women (53%) who gave birth in the Midland Regional Hospital Mullingar said that they were offered a choice of maternity care, while 47 women (31.3%) said they were not offered any choices. Figure 1 shows the choices of maternity care that were offered to women and the type of care that they actually received.

**Figure 1. Types of maternity care offered and received in Midland Regional Hospital Mullingar.**



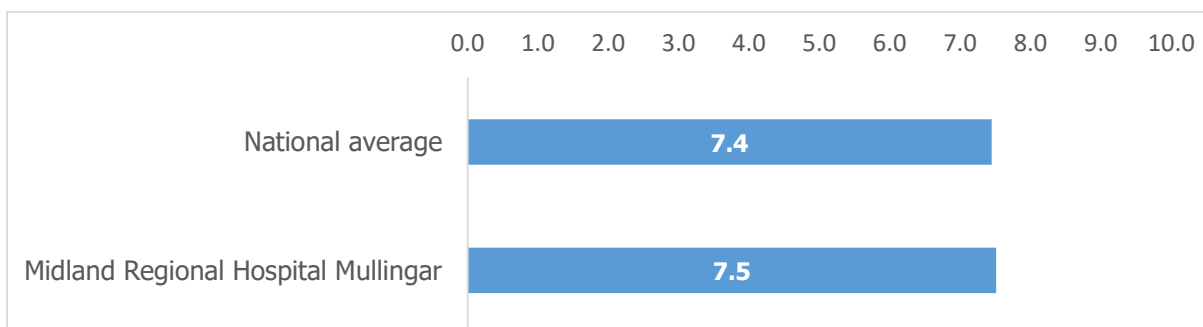
**Table 3. Results for questions on antenatal classes or courses attended by women who gave birth in the Midland Regional Hospital Mullingar.**

<b>Q6. During your pregnancy were you offered any antenatal classes or courses?</b>		
	<b>No.</b>	<b>%</b>
Yes, and I did them	46	30.5%
Yes, but I did not do them	84	55.6%
No	18	11.9%
Don't know or can't remember	3	2.0%
<b>Q7. Are there any particular reasons you did not go to antenatal classes or courses?</b>		
It was not my first baby	70	83.3%
It was my first baby but I didn't want to go to classes	5	6.0%
There were no available spaces/they were booked out	0	0.0%
I couldn't find classes that were right for me	1	1.2%
There were no classes near me	2	2.4%
I had other commitments	2	2.4%
Other	8	9.5%

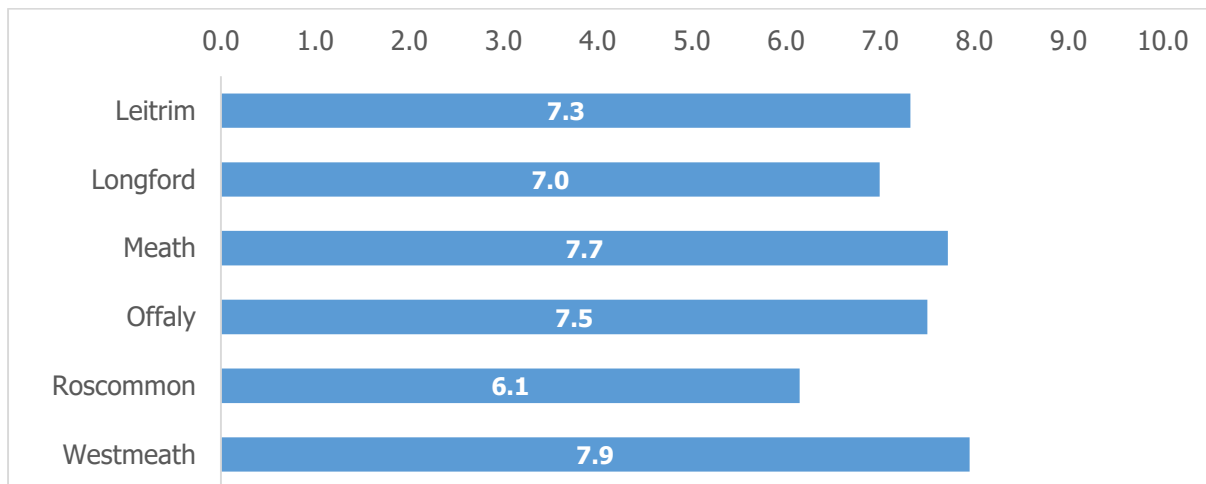
10 questions explored whether women received sufficient information on their health and care, were involved in decisions about their antenatal care and had confidence and trust in their healthcare professionals. These questions were scored out of 10, with the scores for the stage as a whole compared against the national average in Figure 2. Scores for this stage of care are compared by the county of residence of women who gave birth in Midland Regional Hospital Mullingar in Figure 3. Scores for the individual questions are compared against the national average in Figure 4. Women who gave birth in Midland Regional Hospital Mullingar rated their antenatal care as about the same as the national average.

The highest-scoring question for this stage related to receipt of information on giving up smoking, with 81.9% saying they definitely received enough information about giving up smoking while they were pregnant. The lowest-scoring question related to information about mental health. 27.0% said they did not receive enough information about changes in their mental health while they were pregnant.

**Figure 2. Comparison of 'care while pregnant (antenatal care)' scores for the Midland Regional Hospital Mullingar against the national average.**

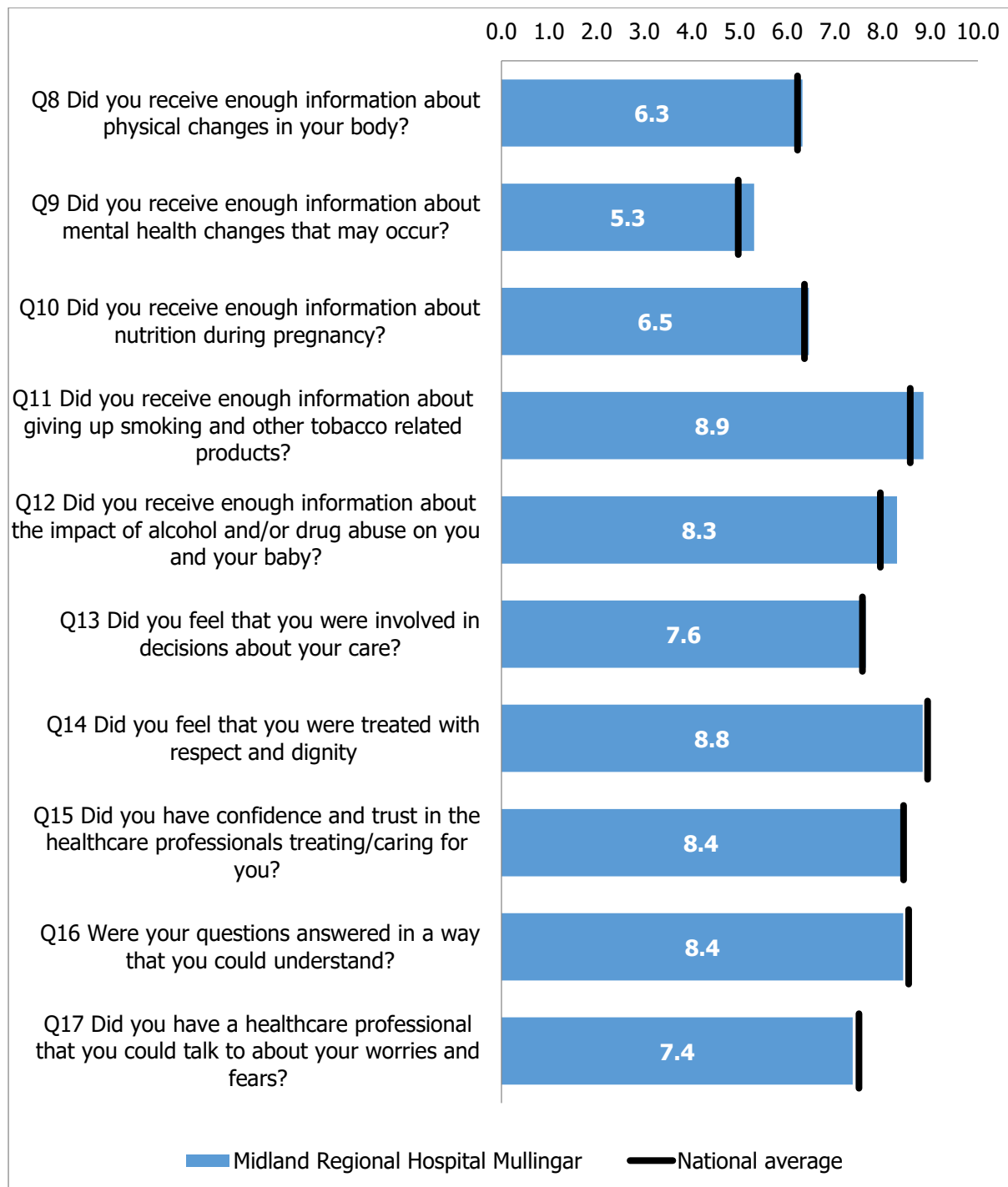


**Figure 3. Comparison of 'care while pregnant (antenatal care)' scores for the Midland Regional Hospital Mullingar by respondents' county of residence<sup>2</sup>**



<sup>2</sup> Results for counties are only shown if five or more women from that county responded.

**Figure 4. Comparison of individual question scores for 'Care while pregnant (antenatal care)' against the national average.**



## Care during labour and birth

This stage of the survey included three questions where women were asked to describe the birth of their baby and whether they were left alone at any point, with the results for the Midland Regional Hospital Mullingar shown in Table 4. There were also seven other questions about this stage of care that received scores out of 10. The scores for the stage as a whole are compared against the national average in Figure 5, and for the individual questions in Figure 6.

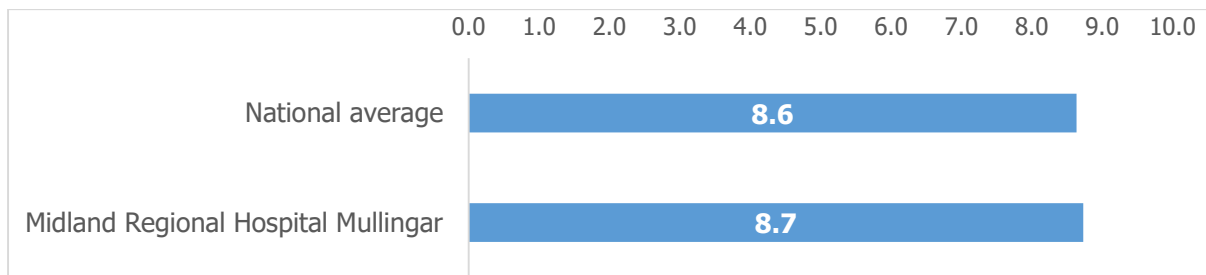
Women who gave birth in the Midland Regional Hospital Mullingar rated their care during labour and birth as about the same as the national average.

The highest-scoring question for this stage related to skin-to-skin contact, with 96.2% saying that they had skin-to-skin contact after birth. The lowest-scoring question related to involvement in decisions during labour and birth with 15 women (9.9%) reporting that they were not involved in decisions about their care during labour and birth.

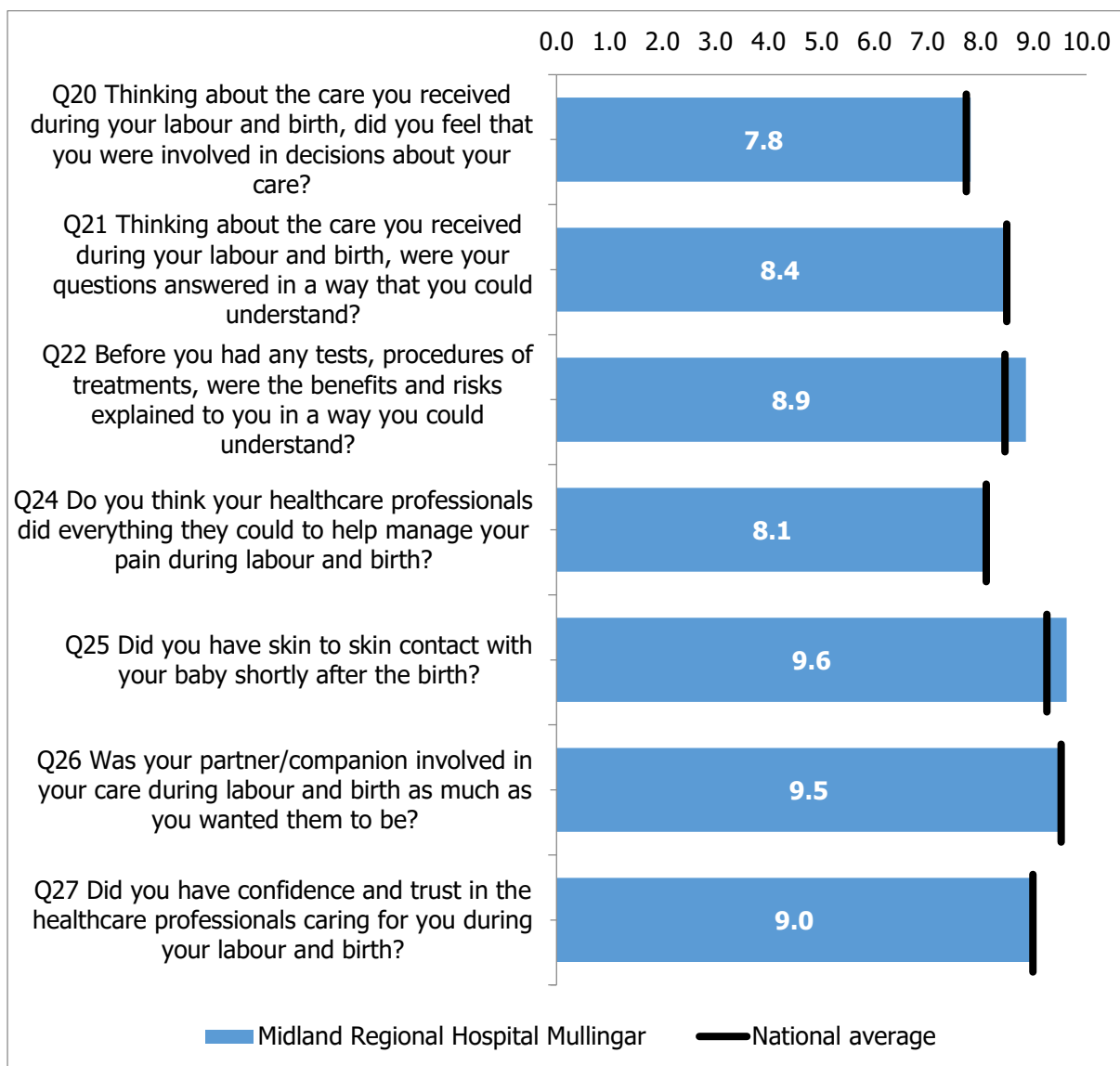
**Table 4. Results for questions on induction of labour, type of birth and being left alone.**

<b>Q18. Thinking about the birth of your baby, was your labour induced?</b>		
	<b>No.</b>	<b>%</b>
Yes	49	32.7%
No	100	66.7%
Don't know or can't remember	1	0.7%
<b>Q19. What type of birth did you have?</b>		
A vaginal birth (no forceps or ventouse suction cup)	74	49.0%
An assisted vaginal birth (e.g. with forceps or ventouse suction cup)	17	11.3%
A planned caesarean birth	32	21.2%
An unplanned caesarean birth	28	18.5%
<b>Q23. Were you (and/or your partner or companion) left alone by healthcare professionals at a time when it worried you?</b>		
Yes, during early labour	20	13.2%
Yes, during the later stages of labour	8	5.3%
Yes, during the birth	2	1.3%
Yes, shortly after the birth	9	6.0%
No, not at all	120	79.5%

**Figure 5. Comparison of 'Care during labour and birth' scores for the Midland Regional Hospital Mullingar against the national average.**



**Figure 6. Comparison of individual question scores for 'Care during labour and birth' in the Midland Regional Hospital Mullingar against the national average.**





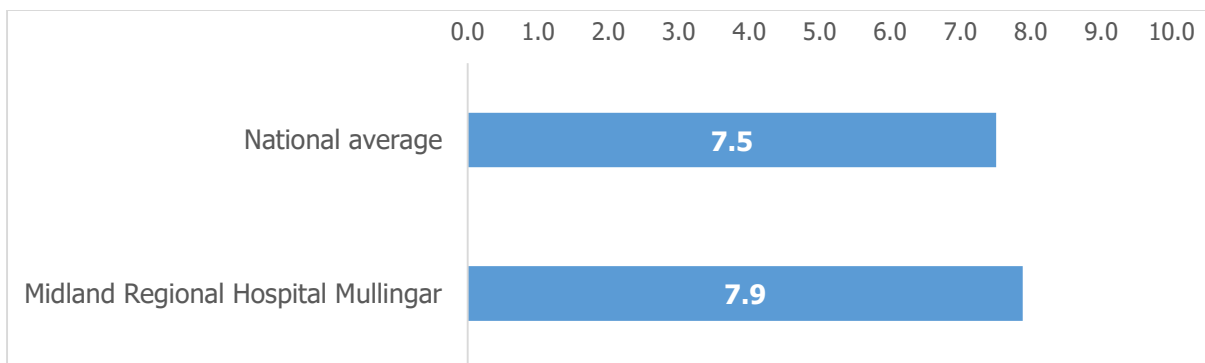
## Care in hospital after the birth

The questions for this stage related to the care women who gave birth in the Midland Regional Hospital Mullingar received after the birth of their baby. All of the questions for this stage were given a score out of 10. The scores for the stage as a whole are compared against the national average in Figure 7, and for the individual questions in Figure 8.

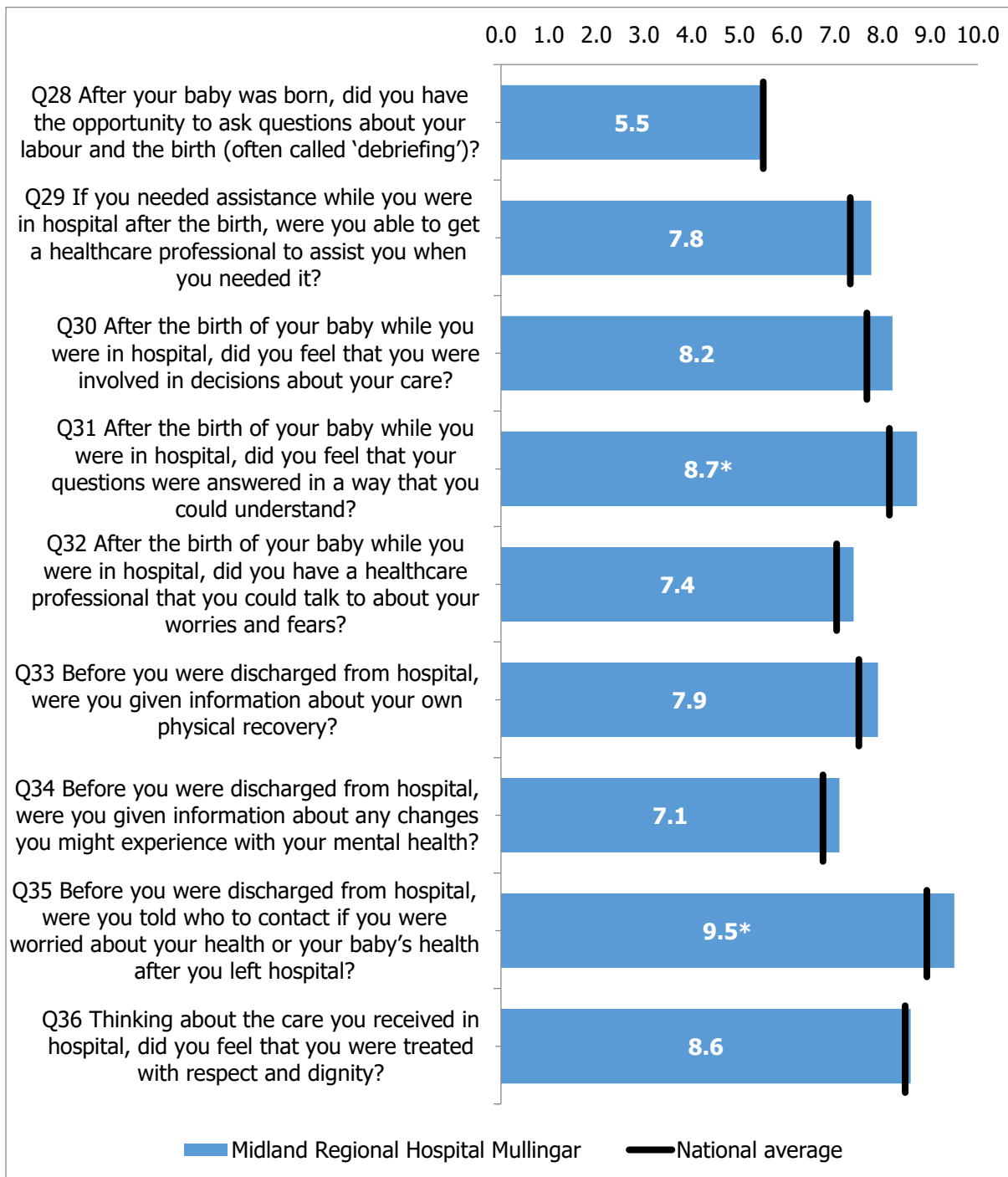
Women who gave birth in the Midland Regional Hospital Mullingar rated their care in hospital after the birth as about the same as the national average.

The highest-scoring question for this stage related to being told who to contact after discharge, with 95% saying they were told who to contact if they were worried about their own health or their baby's health. The lowest-scoring question related to 'debriefing' with 39 women (30%) saying that they did not have the opportunity to ask questions about their labour and birth after the baby was born.

**Figure 7. Comparison of 'Care in hospital after the birth' scores for the Midland Regional Hospital Mullingar against the national average.**



**Figure 8. Comparison of individual question scores for 'Care in hospital after the birth' in the Midland Regional Hospital Mullingar against the national average.**



\* indicates a statistically significant difference from the national average

## Specialised care

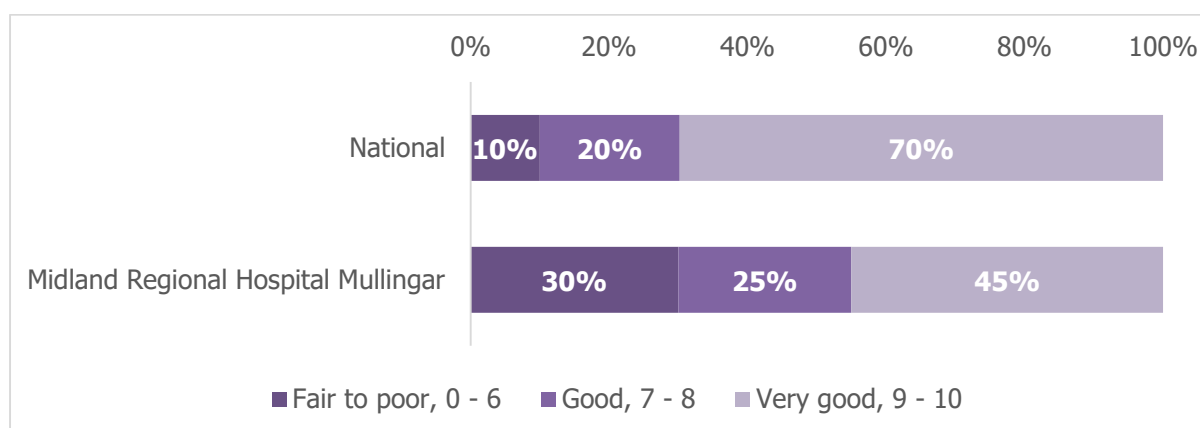
The questions for this stage explore the experiences of women whose babies required specialist care in a neonatal unit after birth. Women whose baby was not admitted to a neonatal unit did not answer Q38 or Q39. The results for Q37 and Q38 are shown in Table 5. Q39 asked women to rate their experience of the care their baby received in the neonatal unit from 0 to 10 and the results for the Midland Regional Hospital Mullingar are compared against the national average in Figure 9.

45% of women said that they had a very good overall experience of the care their baby received in the neonatal unit, compared with 70% nationally.

**Table 5. Admission to the neonatal unit and emotional support.**

<b>Q37. Following the birth, did your baby spend any time in the neonatal unit?</b>		
	<b>No.</b>	<b>%</b>
Yes	20	13.5%
No	126	85.1%
Don't know or can't remember	2	1.4%
<b>Q38. While your baby was in the neonatal unit, did you receive enough emotional support from healthcare professionals?</b>		
Yes, always	7	35.0%
Yes, sometimes	2	10.0%
No	8	40.0%
I did not want or need any emotional support	1	5.0%
Don't know or can't remember	2	10.0%

**Figure 9. Comparison of overall ratings of experiences in the neonatal unit at the Midland Regional Hospital Mullingar against the national average.**



## Feeding

This stage included two questions asking women when their healthcare professionals discussed the different options for feeding their baby, and how they fed their baby in the first few days after birth. The results for these questions are shown in Table 6.

The other questions for this stage explored whether women felt supported and respected by healthcare professionals in feeding their baby, both in the hospital and after they had returned home. These questions were scored out of 10, with the scores for the stage as a whole compared against the national average in Figure 10 and individual questions compared against the national average in Figure 11.

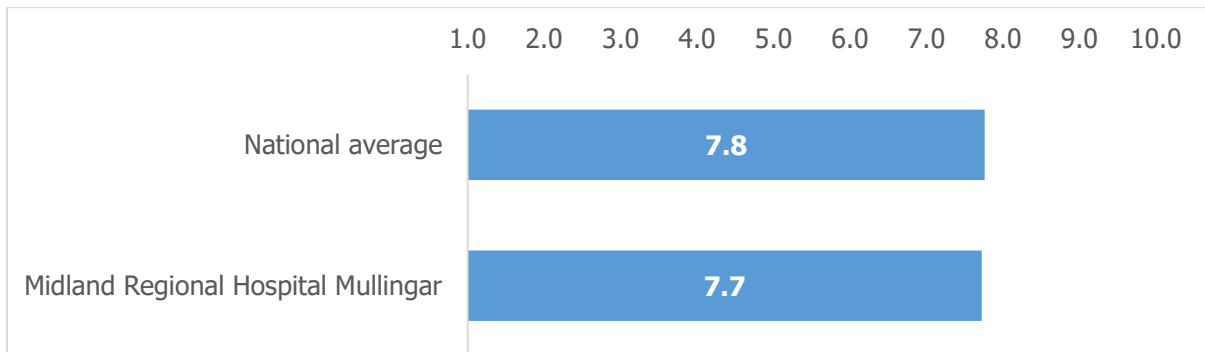
Women who gave birth in the Midland Regional Hospital Mullingar rated the 'Feeding' questions as about the same as the national average.

Most women (66.9%) said that their decision about how they wanted to feed their baby were always respected by their healthcare professionals. The joint-lowest scoring questions related to support and encouragement with feeding. 20 women (14.2%) said they did not get adequate support and encouragement with feeding their baby, while they were in hospital, while 18 women (14.0%) said that they did not receive adequate support and encouragement with feeding their baby at home.

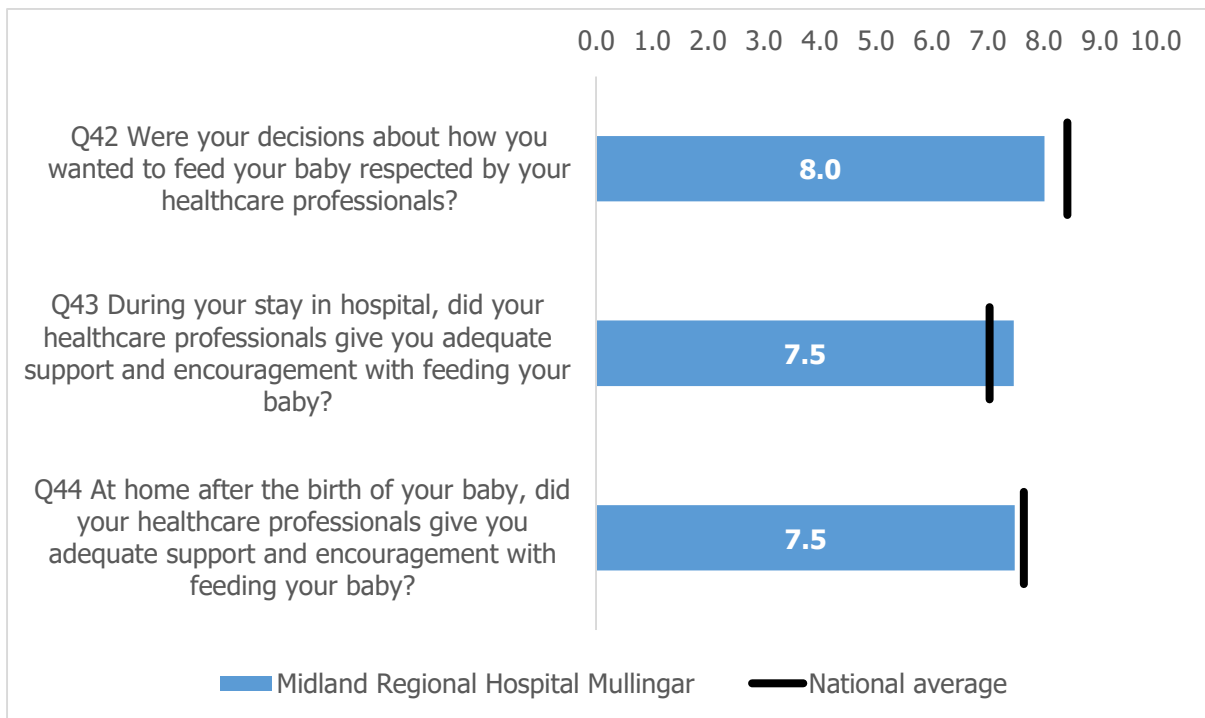
**Table 6. Results for questions on discussion of feeding options and the methods of feeding used.**

<b>Q40. Did your healthcare professionals discuss with you the different options for Feeding?</b>		
	<b>No.</b>	<b>%</b>
Yes, during pregnancy	125	82.8%
Yes, during labour or immediately after birth	38	25.2%
Yes, after birth while in hospital	53	35.1%
Yes, after birth while at home	27	17.9%
No	7	4.6%
I did not want or need discussion of different options	6	4.0%
Don't know or can't remember	0	0.0%
<b>Q41. In the first few days after the birth, how was your baby fed?</b>		
Breast milk (or expressed breast milk) only	49	32.5%
Both breast and formula (bottle) milk	38	25.2%
Formula (bottle) milk only	64	42.4%
Don't know or can't remember	0	0.0%

**Figure 10. Comparison of scores for 'Feeding' in the Midland Regional Hospital Mullingar against the national average.**



**Figure 11. Comparison of individual question scores for 'Feeding' in the Midland Regional Hospital Mullingar against the national average.**



## Care at home after the birth

The questions for this stage of maternity care explored women's experiences of postnatal care in the community provided by public health nurses and general practitioners.<sup>3</sup> Two questions asked whether women and their babies had been visited at home by a public health nurse and received check-ups with their general practitioner. These appointments are a routine part of postnatal care in Ireland. Another question asked whether women had used local support groups such as mother and baby groups or feeding support groups. The results for these questions for women who gave birth in the Midland Regional Hospital Mullingar are summarised in Table 7.

The remaining questions for this stage explored women's experiences of the information and support they received at home after the birth of their baby. These questions were scored out of 10, with the scores for the stage as a whole broken down by the county of residence of women who gave birth in the Midland Regional Hospital Mullingar, and compared against the national average in Figure 12. Scores for the individual questions are compared against the national average in Figure 13.

Women who gave birth in the Midland Regional Hospital Mullingar rated their care at home after the birth as about the same as the national average.

The highest-scoring question for this stage related to respondent questions being answered, with 91.2% saying that their questions were always answered by the public health nurse in a way they could understand. The lowest scoring question related to the time spent by the GP or practice nurse/midwife discussing mental health at their 6-week check-up, with 32.1% saying that there was not enough time spent discussing their mental health at this check-up.

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<sup>3</sup> While the questions for this stage of care do not directly relate to care provided by the Midland Regional Hospital Mullingar, it is important to represent all stages of a woman's maternity care journey in this report.

**Table 7. Results for questions on postnatal check-ups and engagement with support groups.**

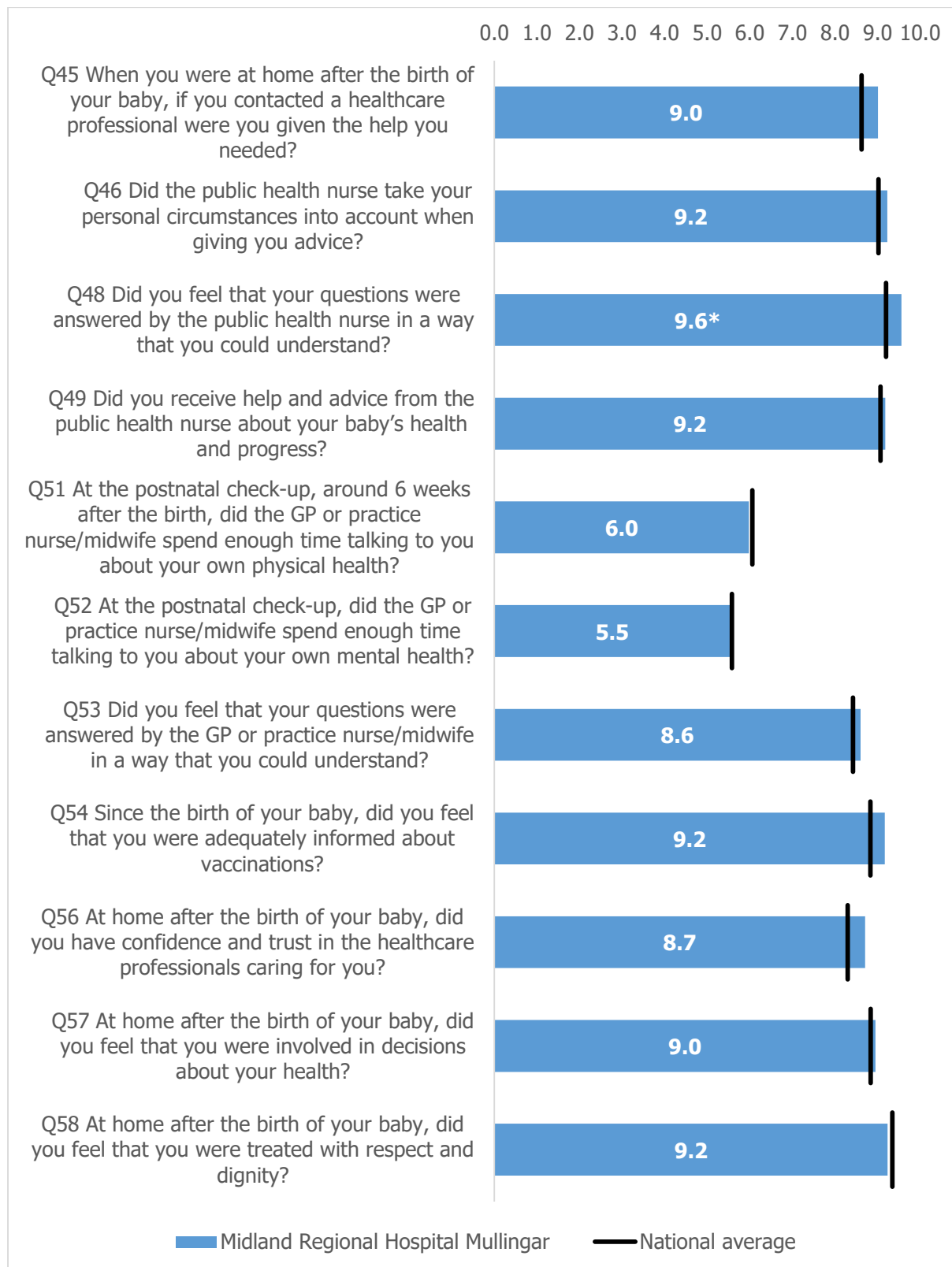
<b>Q46. Since your baby's birth, have you been visited at home by a public health nurse?</b>		
	<b>No.</b>	<b>%</b>
Yes	149	99.3%
No	1	0.7%
Not relevant to my situation	0	0.0%
Don't know or can't remember	0	0.0%
<b>Q50. Did your baby receive a 2-week check-up with your general practitioner (GP)?</b>		
Yes	144	95.4%
No, I did not know about the check-up	2	1.3%
No, I knew about the check-up but did not attend	3	2.0%
I attended another healthcare professional for the 2-week check-up	1	0.7%
Not relevant to my situation	0	0.0%
Don't know or can't remember	1	0.7%
<b>Q55. Did you use local support groups e.g. mother and baby groups, feeding support groups, etc.</b>		
Yes	33	21.9%
No	117	77.5%
Don't know or can't remember	1	0.7%

**Figure 12. 'Care at home after the birth' scores for women who gave birth in the Midland Regional Hospital Mullingar compared by county of residence.<sup>4</sup>**



<sup>4</sup> Results for counties are only shown if five or more women from that county responded.

**Figure 13. Comparison of individual question scores for 'Care at home after the birth' against the national average.**



\* indicates a statistically significant difference from the national average



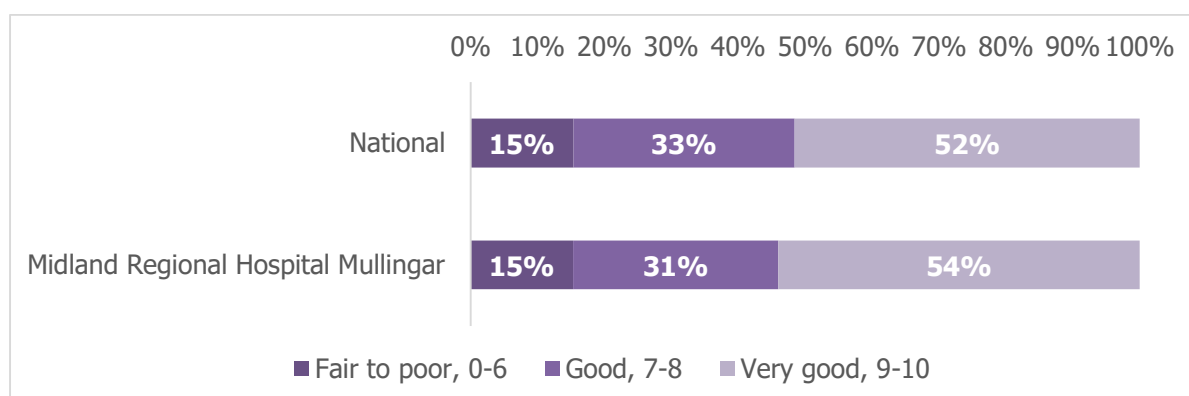
## Overall experience

Two questions examined women’s overall experience of maternity care. The first question asked if they knew how to give feedback or make a complaint. 50 women (33.1%) answered ‘yes’, while 63 (41.7%) answered ‘no’. 38 (25.2%) said they did not wish to give feedback or make a complaint.

Women were also asked to rate their overall maternity experience on a scale from 0 to 10, with 10 being the most positive experience, and 0 the most negative experience. 85% of women who gave birth at the Midland Regional Hospital Mullingar rated their overall experience as good or very good, the same as the national figure.

Figure 14 shows the average overall experience ratings for the Midland Regional Hospital Mullingar compared with the national average.

**Figure 14. Comparison of overall maternity experiences scores for the Midland Regional Hospital Mullingar against the national average.**



## Focus on: Involvement in decisions, confidence in staff, and respect and dignity

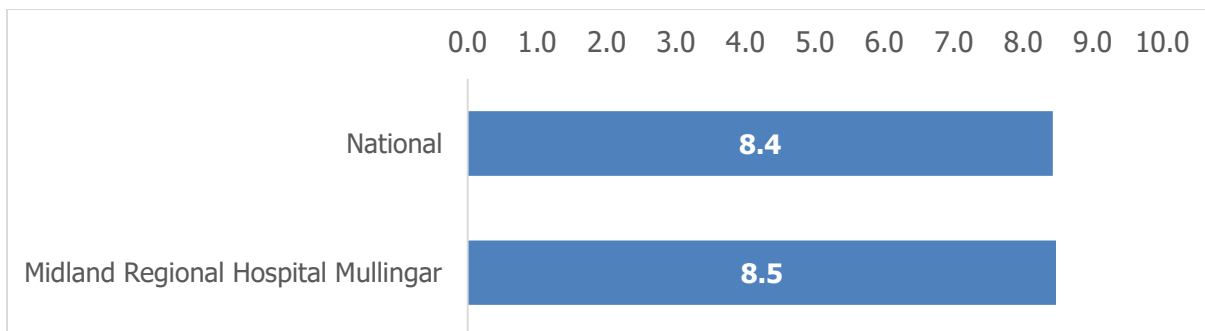
The National Maternity Strategy 2016–2026 emphasises the importance of women being empowered to make decisions about their maternity care, having confidence and trust in healthcare professionals, and being treated with respect and dignity. This section explores the relationship between these elements and women’s overall ratings of the care they received.

11 questions on the survey explore involvement in decisions, confidence and trust, and respect and dignity. The average scores for these questions as a whole for women who gave birth in the Midland Regional Hospital Mullingar are compared with

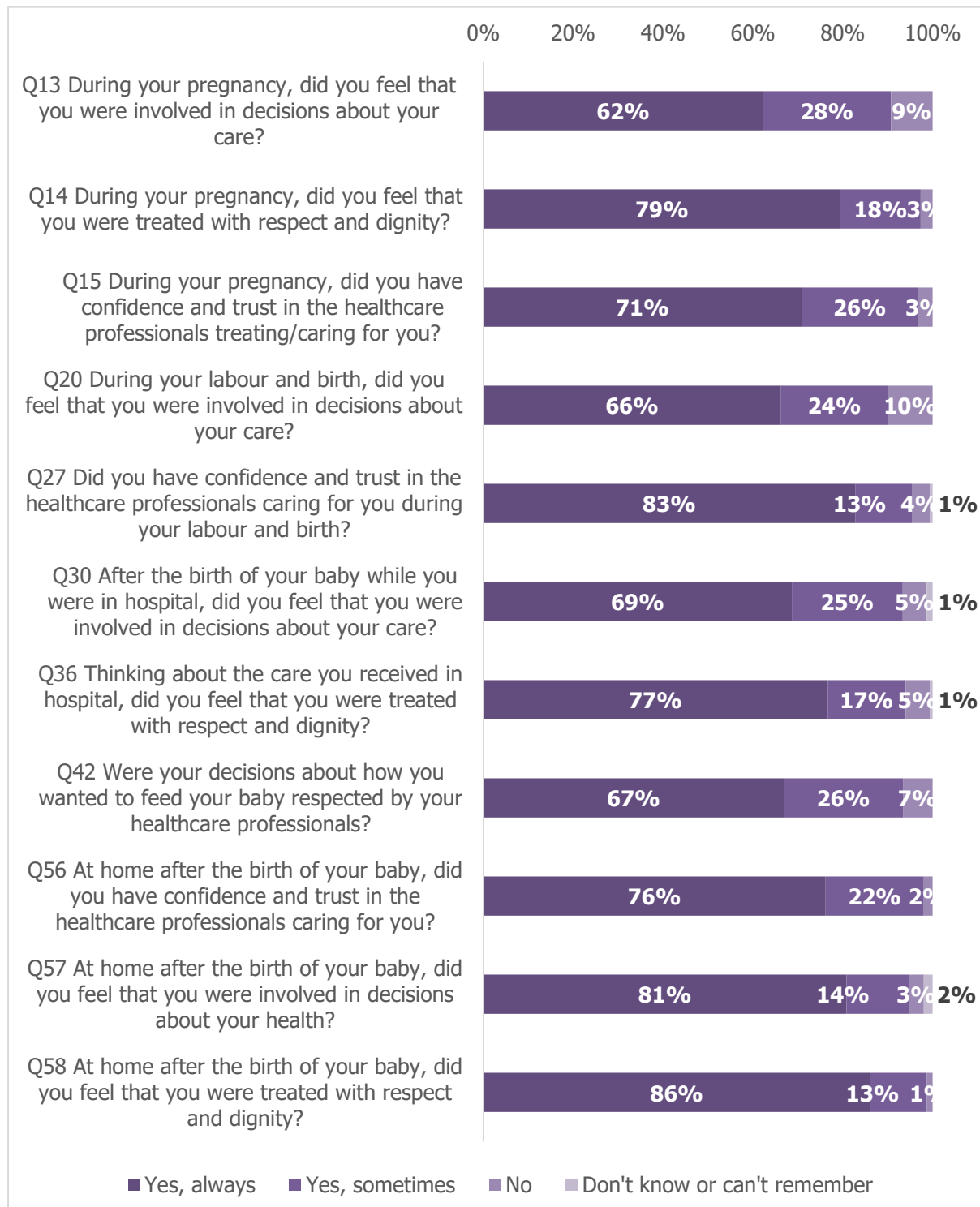
the national average in Figure 15. The responses for the relevant questions are presented in Figure 16.

Women who gave birth in the Midland Regional Hospital Mullingar rated the questions for these questions about the same as the national average. The highest-scoring question for this stage related to being treated with respect and dignity at home after the birth, with 86.1% saying that they were always treated with respect and dignity at home. The lowest scoring question related to involvement in decisions, with 62.3% saying they were always involved in decisions about their care during pregnancy, and the remaining women saying that they were only sometimes involved or not involved in decisions.

**Figure 15. Comparison of relevant questions for women who gave birth in the Midland Regional Hospital Mullingar with the national average**



**Figure 16. Scores for questions about involvement in decisions, confidence and trust and respect and dignity for women who gave birth in the Midland Regional Hospital Mullingar.**



## In their own words: analysis of women's comments

Three survey questions (questions 61-63) asked women to provide additional information, in their own words, on their maternity experiences. These free-text questions allowed women to give a more in-depth description of specific aspects of their maternity care. In total, 256 comments were received from women who gave birth in the Midland Regional Hospital Mullingar.

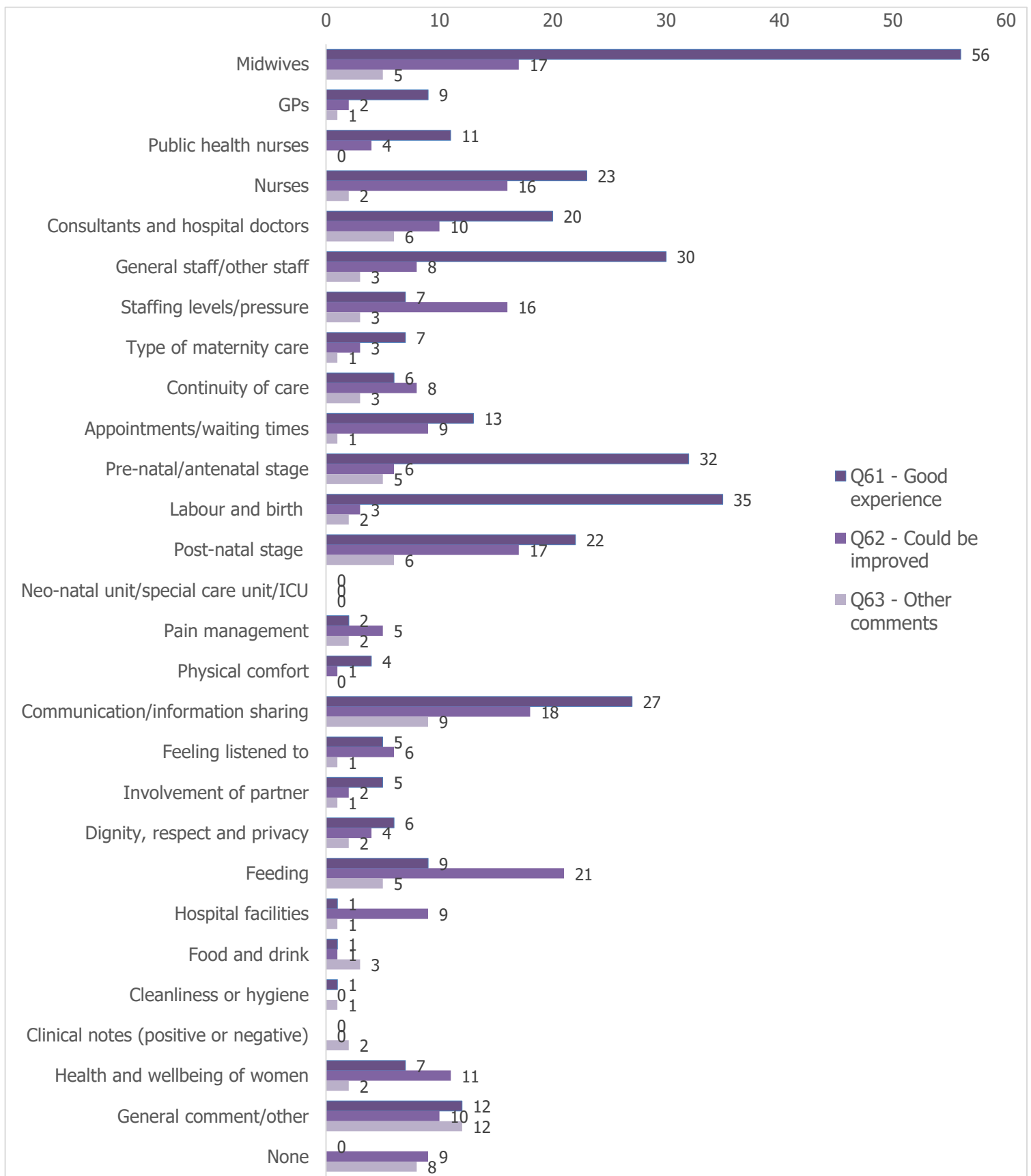
Figure 17 shows the breakdown of comments by theme for each of the three open-ended questions. Q61 asked women what was particularly good about their maternity care, Q62 asked women what could be improved, and Q63 asked women if there were any other aspects of their maternity experience that they would like to describe.

For Q61, most of the comments related to the 'midwives', 'labour and birth' and 'prenatal/antenatal care' themes. For Q62, most comments related to the 'communication/information sharing', 'midwives' and 'feeding' themes. Finally, most responses to Q63 related to the 'general comments', 'communication/information sharing', 'consultants and hospital doctors' and 'postnatal care' themes.

It is notable that midwives feature strongly in the responses for each of the three questions. There are many more positive comments than suggestions for improvement relating to midwives, which likely reflects the nature and importance of the interactions that women have with midwives during labour and birth.

Examples of the comments received in response to each free-text question are provided in Figure 18.

**Figure 17. Number of participant comments by theme.**



## Figure 18. Sample comments.

### Q61. Positive comments

"Very informative midwife, very understanding. Tried to involve my partner as much as possible. I really appreciated the main nurse during my delivery, checking on me in the post natal ward after."

"I was treated with respect during any hospital visits. I felt I was a person and not just a number. I felt comfortable to ask any questions or raise any concerns once my daughter was born."

"The midwives in Mullingar Hospital were excellent. They were so knowledgeable and clued into cues from me and baby. Very down to earth had great way of calming and explaining situations."

### Q62. Suggestions for improvement

"More communications between nurses/patients in the antenatal ward. Was hard to know what was going on at times. I know they were very busy. A run down of what would happen that day would help."

"I found some nurses were conflicted on their advice when I was breastfeeding. Each of them differed in their opinion and in their patience providing assistance so I ended up switching to formula as it was easier and what I had known despite hoping to breastfeed."

"Aftercare when at home for mother. I felt at the 6 week check up, my health was an after thought as we were about to leave. Would be beneficial to have a thorough check up for the mother at that appointment."

### Q63. Other comments

"While the antenatal classes were very informative about the birth (natural more so than cesarean albeit) and the stay in hospital, I would have benefited from some "baby care" classes as a first time mum."

"Questions about complications ie care received if you suffered a complications /ended up needing specialist care? Experience if needed to be separated from baby. How many needed medications on discharge antibiotics/painkillers advice on medications."

"Some midwives on duty during hospital stay did not have time to assist with bottle feeds during the night even though as i was breast feeding i did not want to give bottle."

## Conclusion

### What were women's experiences of maternity care in the Midland Regional Hospital Mullingar in October 2019?

Most of the participants who gave birth in the Midland Regional Hospital Mullingar has a positive experience of maternity care, with 85% saying they had a good or very good overall experience. This is the same as the national average.

Across each stage of care from antenatal care through to postnatal care at home, women who gave birth in the Midland Regional Hospital Mullingar rated their care as similar to the national average. 55% of women who gave birth in the Midland Regional Hospital Mullingar said that they were offered a choice of the type of maternity care they would receive.

The highest-scoring questions within the survey related to the provision of information on who to contact if women were worried about their health or their baby's health after they left hospital. Women who attended the hospital also said that their questions after the birth of their baby were answered in a way that they could understand, in addition to those answered by the public health nurse; these questions were rated above the national average.

The lowest-scoring questions related to the provision of information about mental health changes during pregnancy, an opportunity to ask questions during labour and birth and also the information provided at their postnatal check-up on their own mental health.

The responses to the three free-text questions provided very detailed information on women's experiences while in the Midland Regional Hospital Mullingar and the maternity care they received in the community before and after giving birth. These comments identified the caring and helpful attitudes of healthcare professionals but also highlighted the difficulties that some women experienced in accessing help when they needed it.

The findings of the National Maternity Experience Survey will be used by the Midland Regional Hospital Mullingar and community maternity care providers in the area to improve the maternity experiences of women who give birth in the hospital.

## Appendix 1: Areas that scored above or below the national average

### Improvement map

It is important for maternity care providers to know if they scored above or below the national average for each question, and this is shown in the improvement map in Figure 19. The improvement map also shows which questions are related to patients' overall experience in hospital. Some questions had a stronger relationship with overall experience than others.

For example, Question 36, which asked women if they were treated with respect and dignity while in hospital had a strong relationship with overall experience. This means that women who said they were treated with respect and dignity were very likely to give a positive rating of their overall experience. Women who felt they were not treated with respect and dignity tended to give more negative ratings of their overall experience.

Other questions had a weaker relationship with overall experience – this means that patients' experiences in these areas had little bearing on how they rated their overall experience. An example is Question 11, which asked women if they received enough information about giving up smoking and other tobacco related products during their pregnancy. The relationship between information on smoking and women's ratings of their overall experience was weak. This means that even if women received information on smoking and other tobacco related products they may have given negative ratings of their overall experience, or if they did not receive information, women may still have given positive ratings of their overall experience.

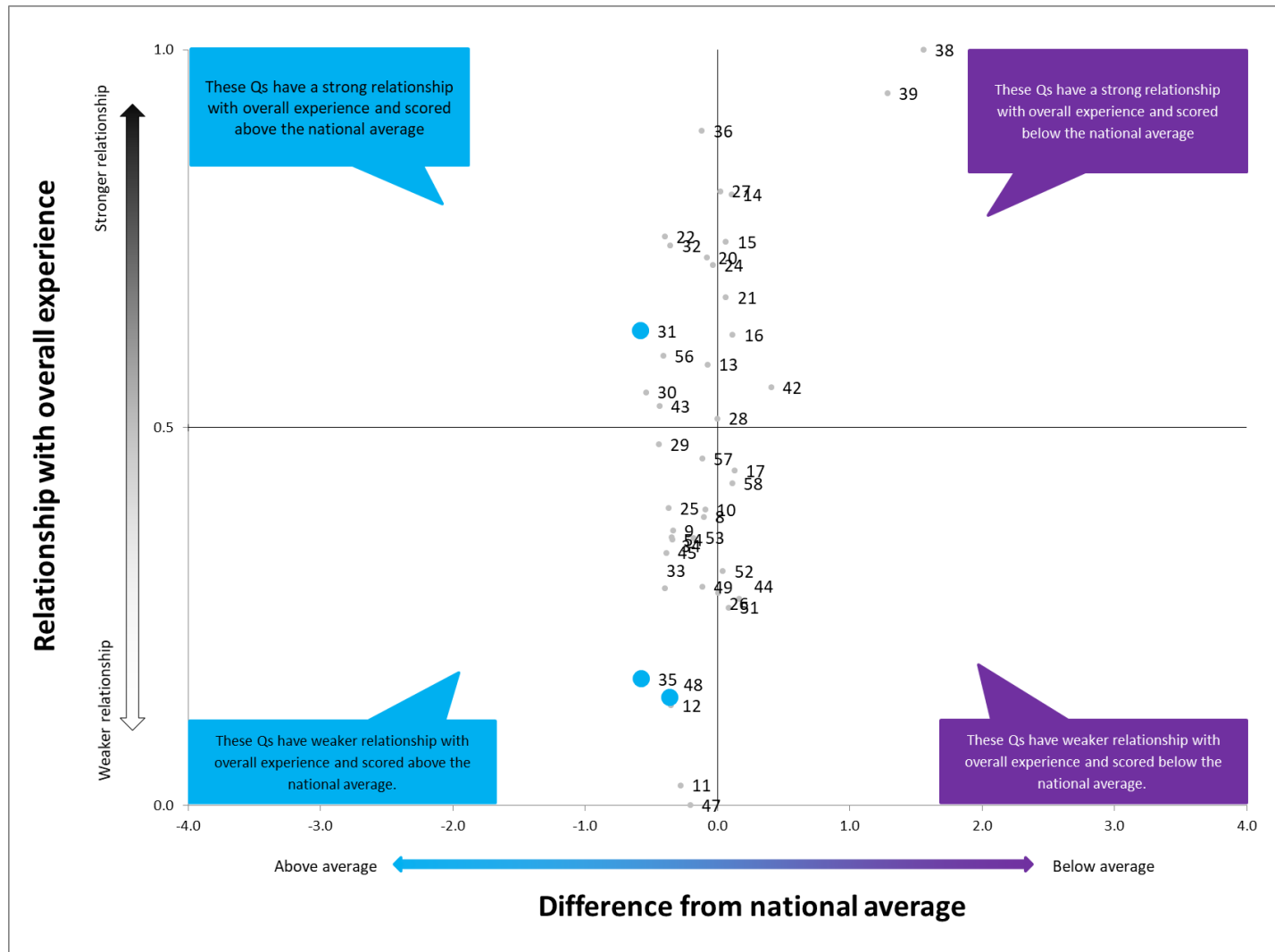
It is useful for maternity care providers to know which questions strongly relate to their patients' overall experience as these are the areas on which they should focus their improvement efforts.

In Figure 19, each dot shows a specific survey question related to the Midland Regional Hospital Mullingar. Questions at the top of the graph are strongly related to overall experience, while those at the bottom have a weaker relationship. Questions to the right of the graph scored below the national average, while those on the left scored above it.

The improvement map for each hospital is unique and gives specific information on where a hospital is doing well, and areas where improvements are needed. An interactive version of the improvement map is also available at [www.yourexperience.ie/](http://www.yourexperience.ie/), along with instructions on how to interpret it.



**Figure 19. Improvement map for responses of women who gave birth in the Midland Regional Hospital Mullingar**



## Appendix 2: Description of models of maternity care

There are multiple types of maternity care, often described as 'models' of maternity care, available across Ireland. Each model of maternity care involves a varied mix of maternity services and healthcare professionals. These models of care, and where they are provided, are described in detail below.

### **Public care**

Also known as combined care or shared care. Regular antenatal check-ups with midwives and/or obstetricians in the hospital and, in most cases, with a general practitioner (GP). Labour and birth in the hospital. Postnatal care in a public ward in the hospital with subsequent postnatal check-ups in a community setting.

### **Consultant-led care private or semi-private**

Antenatal check-ups with a private obstetrician (chosen by the women) with the option of sharing these with your GP as part of combined/shared care. Labour and birth in the hospital with care provided by your obstetrician/an obstetrician's team and hospital midwives. Postnatal care in a private or semi-private ward in the hospital with subsequent postnatal check-ups in a community setting.

### **DOMINO (Domiciliary In and Out)**

Antenatal check-ups with one midwife or a small team of midwives in the hospital or in a community setting, with the option of sharing these antenatal checks-ups with a GP as part of combined/shared care. Labour and birth in the hospital. Transfer home within 12-24 hours after birth. Postnatal care in a public ward in the hospital with subsequent postnatal check-ups in a community setting.

### **Midwifery-led care with birth in a midwifery-led unit (Cavan General and Our Lady of Lourdes Hospital Drogheda only)**

Antenatal check-ups with a midwife or a small team of midwives in a midwifery-led unit or in a community setting. Labour and birth in a midwifery-led unit. Postnatal care in a midwifery-led unit with subsequent postnatal check-ups in a community setting.

### **Community midwifery team care**

Antenatal check-ups with a midwife or a small team of midwives in the hospital or in a community setting, with the option of sharing these antenatal check-ups with a GP as part of combined/shared care. Labour and birth in the hospital. Postnatal care in a public ward in the hospital with subsequent postnatal check-ups in a community setting.

### **Home birth with hospital based or self-employed community midwives (SECM)**

Antenatal check-ups at home or in a community setting with either a hospital-based or self-employed community midwife (chosen by the women). Labour and birth at home with care provided by a midwife. Postnatal care in a community setting.

## References

1. Department of Health. Creating a better future together: national maternity strategy 2016-2026. 2016.



National  
Maternity  
Experience  
Survey

