



National Maternity
Experience Survey 2020

National Home Birth
Services

2020 survey results

Respondents



18

Number of respondents



69%

Participation rate

Overall experience

2020

Very Good
83%

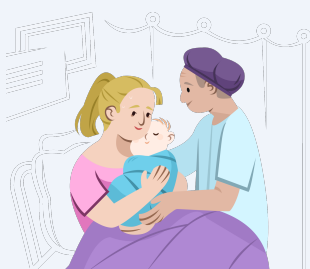
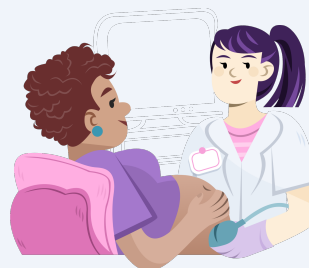
Good
17%

Fair to Poor
0%

Stages of care*



Care while pregnant
(antenatal care)



Care during labour and
birth



Care at home after the
birth



*See page 3 of this report for more information on statistical comparisons.

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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.⁽¹⁾

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.

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 experience of women who had a home birth and received their antenatal check-ups at home or in a community setting with a midwife. This report includes the experiences of giving birth at home supported by a midwife, and receiving postnatal care in the community from a midwife, public health nurse or general practitioner.

It is important to note that because the number of women who had a home birth is small, it is not possible to make statistical comparisons with the national average for survey questions.

What were the main findings for women who had a home birth?

All women who had a home birth said they had a positive overall experience. 100% said their maternity care was 'good' or 'very good', compared with 85% nationally.

Women who had a home birth gave positive ratings across many questions on the survey across each stage of care, with particularly positive ratings given for questions on labour and birth. The exception was the 'care at home after the birth' stage, where lower ratings were given for a number of questions.

The responses to the three free-text questions provided very detailed information on women's experiences of having a home birth and the maternity care they received before and after giving birth. These comments identified the caring and helpful attitudes of midwives, but also highlighted the difficulties that some women experienced in accessing help and information when they needed it.

Who took part in the survey?

A total of 26 women who had a home birth in October and November 2019 were invited to participate in the survey. 18 women completed the survey, representing a response rate of 69%.¹ Table 1 provides information on the characteristics of the women who had a home birth and responded to the survey.

Table 1. Characteristics of respondents who had a home birth.

Age category		
	No.	%
Under 25	0	0.0%
25-29	0	0.0%
30-34	5	27.8%
35-39	11	61.1%
40 or older	2	11.1%
Q65. How many babies have you given birth to before this pregnancy?		
None	3	16.7%
One or two	13	72.2%
Three or more	2	11.1%
Q66. What is your ethnic group		
White Irish	11	61.1%
Any other white background	6	33.3%
Mixed	1	5.6%

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.

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.

¹ 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.

Experiences of maternity care for women who had a home birth

Care while pregnant (antenatal care)

The first seven questions for this stage asked women to provide information about the first health care 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 and Figure 1. 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 for the individual questions in Figure 3.

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

Q1. In your most recent pregnancy, did you give birth to...		
	No.	%
A single baby	18	100.0%
Twins	0	0.0%
Triplets, quads or more	0	0.0%
Q2. Who was the first health care professional you saw when you thought you were pregnant?		
GP / family doctor	12	66.7%
Midwife	5	27.8%
Other	1	5.6%

Six women (33.3%) who had a home birth said that they were offered a choice of maternity care, while 10 (55.6%) said they were not offered any choices. None of the women said they had no choices due to a medical condition, while two (11.1%) answered 'don't know or can't remember'.

Figure 1. Types of maternity care offered for women who had a home birth

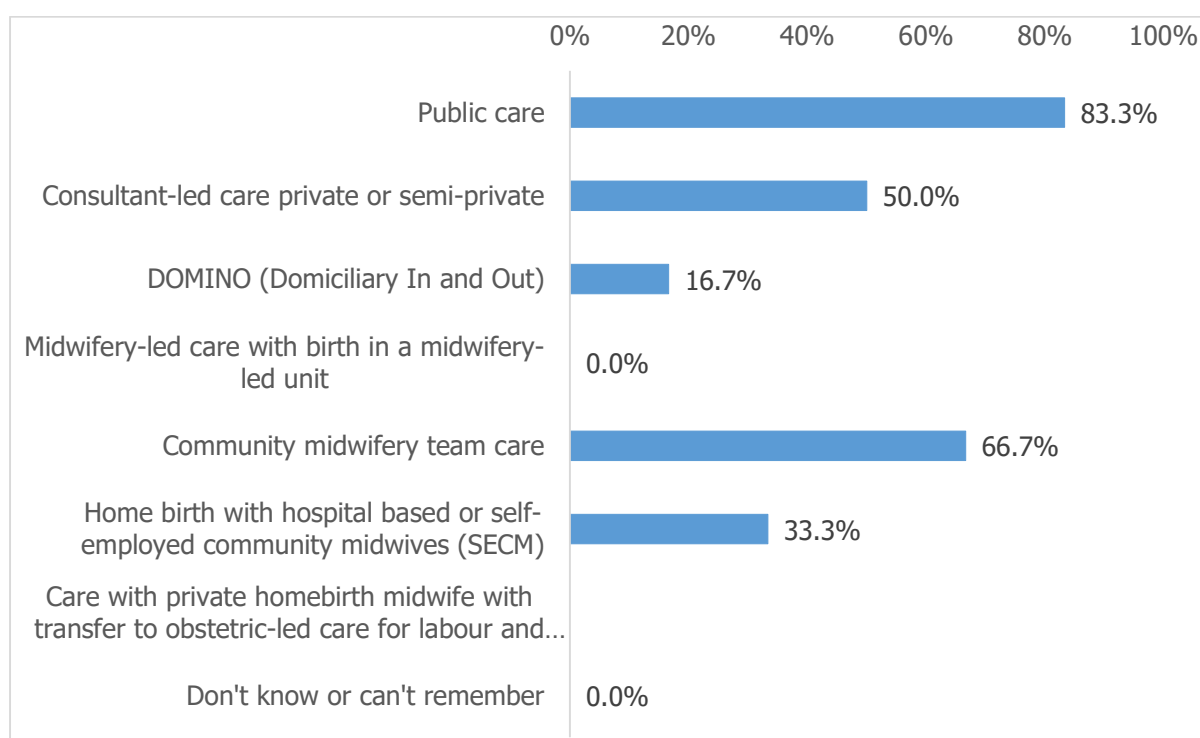


Table 3. Results for questions on antenatal classes or courses attended by women who had a home birth.

Q6. During your pregnancy were you offered any antenatal classes or courses?		
	No.	%
Yes, and I did them	3	16.7%
Yes, but I did not do them	11	61.1%
No	4	22.2%
Don't know or can't remember	0	0.0%
Q7. Are there any particular reasons you did not go to antenatal classes or courses?		
It was not my first baby	8	72.7%
It was my first baby but I didn't want to go to classes	1	9.1%
There were no available spaces/they were booked out	0	0.0%
I couldn't find classes that were right for me	2	18.2%
There were no classes near me	1	9.1%
I had other commitments	2	18.2%
Other	3	27.3%

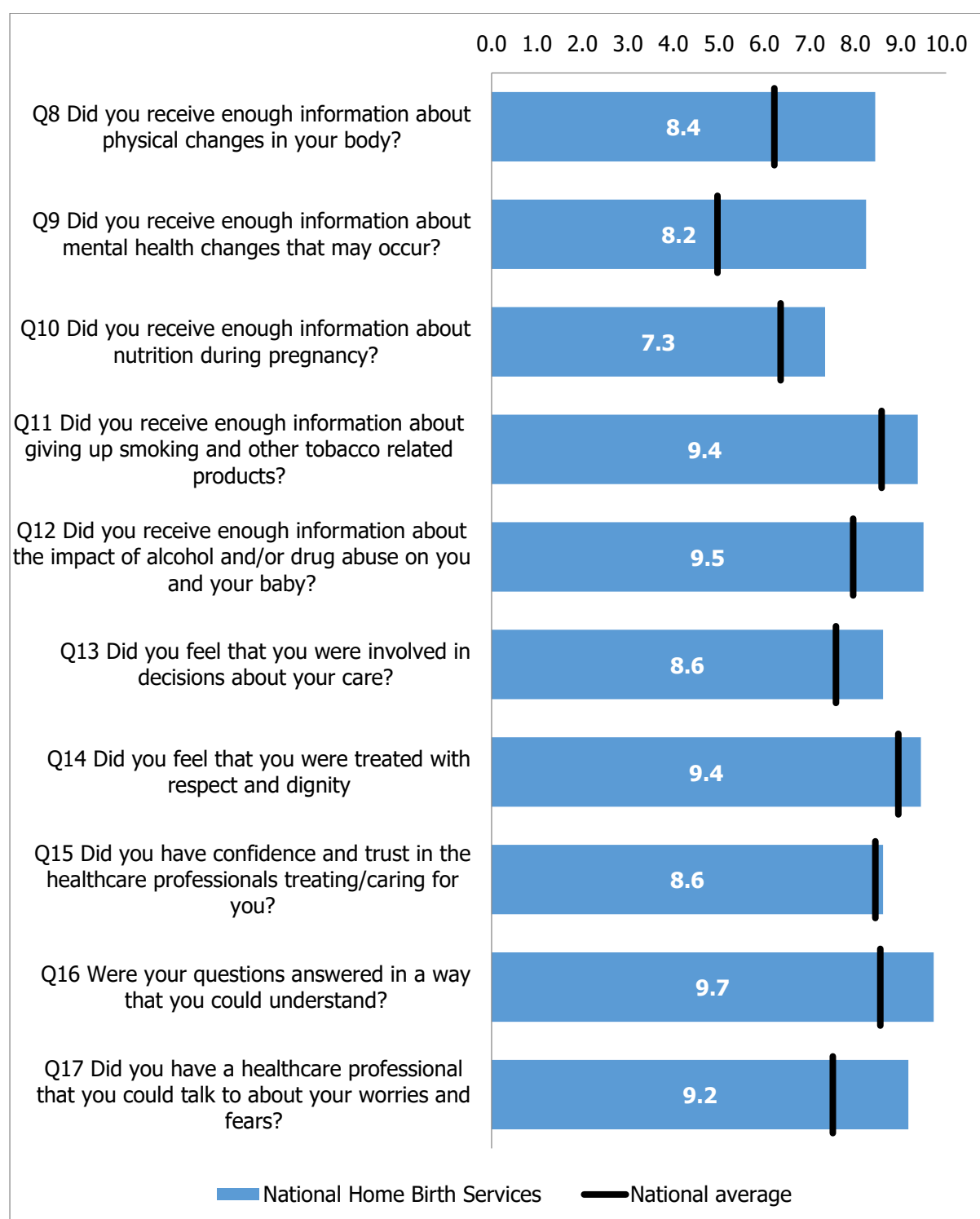
10 questions explored whether women received sufficient information on their health and care, were involved in decisions about their antenatal care and had confidence and trust in their health care professionals. These questions were scored out of 10, with the scores for the stage as a whole compared against the national average in Figure 2, and for the individual questions in Figure 3.²

Figure 2. Comparison of 'Care while pregnant (antenatal care)' scores for women who had a home birth against the national average.



² Due to the small number of home births, it is not possible to make statistical comparisons against the national average. This is the case for all comparisons in this report.

Figure 3. Comparison of '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 women who had a home birth 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 4, and for the individual questions in Figure 5.

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

Q18. Thinking about the birth of your baby, was your labour induced?		
	No.	%
Yes	0	0.0%
No	18	100.0%
Don't know or can't remember	0	0.0%
Q19. What type of birth did you have?		
A vaginal birth (no forceps or ventouse suction cup)	18	100.0%
An assisted vaginal birth (e.g. with forceps or ventouse suction cup)	0	0.0%
A planned caesarean birth	0	0.0%
An unplanned caesarean birth	0	0.0%
Q23. Were you (and/or your partner or companion) left alone by healthcare professionals at a time when it worried you?		
Yes, during early labour	0	0.0%
Yes, during the later stages of labour	0	0.0%
Yes, during the birth	0	0.0%
Yes, shortly after the birth	0	0.0%
No, not at all	18	100.0%

Figure 4. Comparison of 'Care during labour and birth' scores for women who had a home birth against the national average.

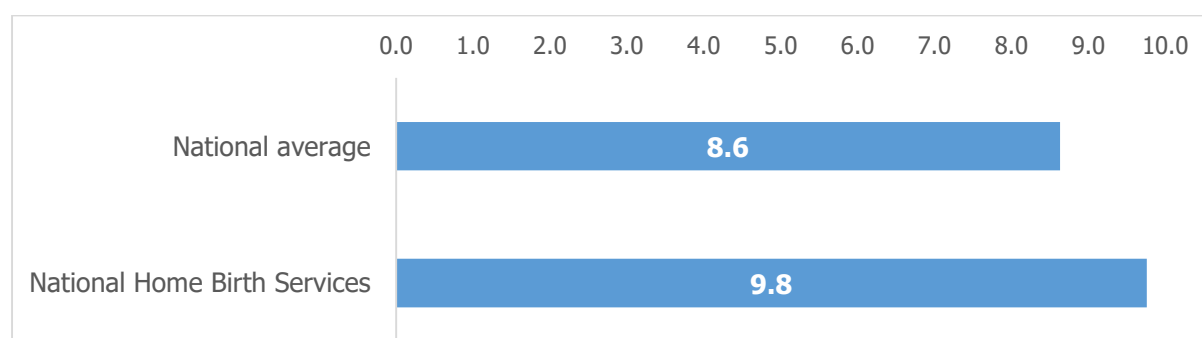
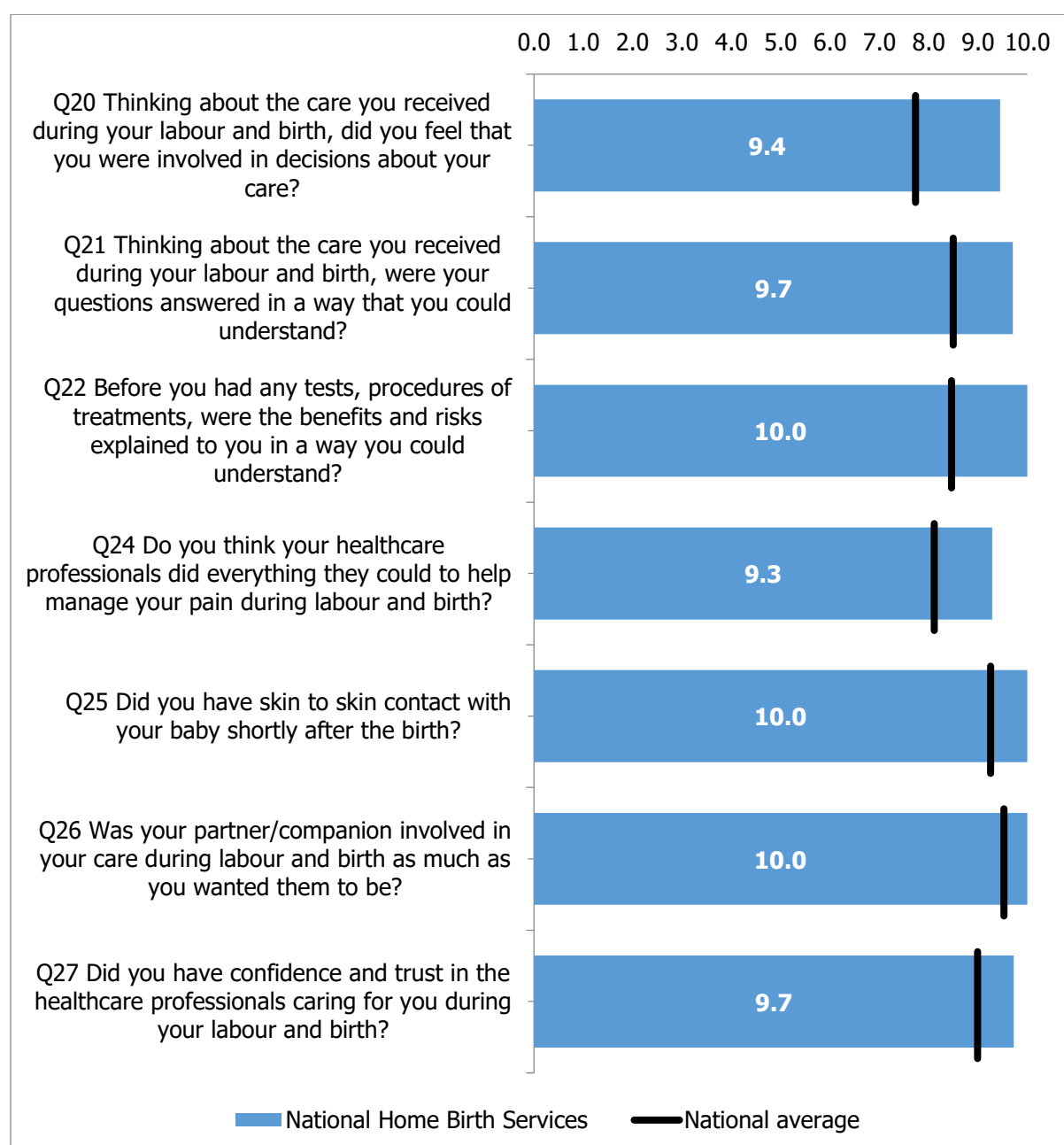


Figure 5. Comparison of individual question scores for 'Care during labour and birth' for women who had a home birth against the national average.



Feeding

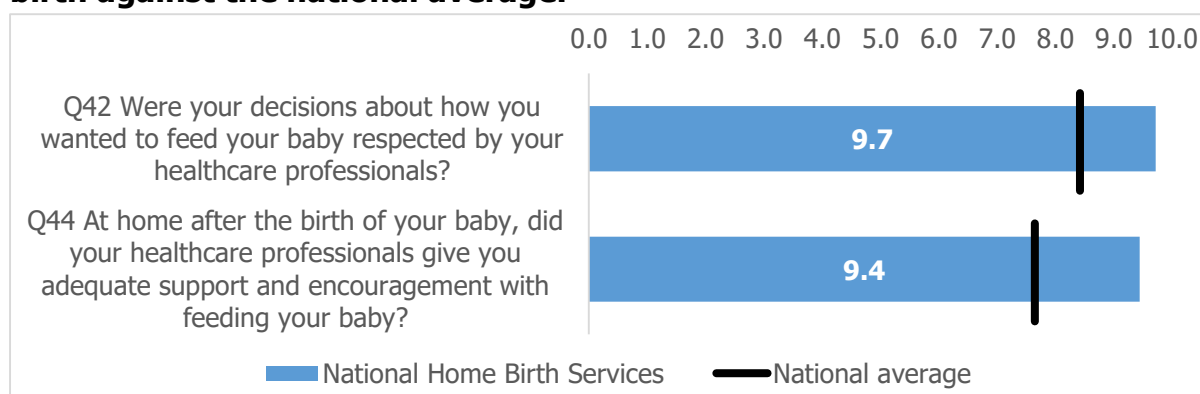
This stage included two questions asking women when their health care professionals discussed the different options for feeding their baby, and how they fed their baby in the first few days after birth. The results for these questions are shown in Table 5.

The other questions for this stage explored whether women felt supported and respected by healthcare professionals in feeding their baby. The results for these questions are shown in Figure 6.

Table 5. Results for questions of discussion of feeding options and the methods of feeding used.

Q40. Did your healthcare professionals discuss with you the different options for Feeding?		
	No.	%
Yes, during pregnancy	13	72.2%
Yes, during labour or immediately after birth	4	22.2%
Yes, after birth while in hospitals	0	0.0%
Yes, after birth while at home	5	27.8%
No	1	5.6%
I did not want or need discussion of different options	5	27.8%
Don't know or can't remember	0	0.0%
Q41. In the first few days after the birth, how was your baby fed?		
Breast milk (or expressed breast milk) only	17	94.4%
Both breast and formula (bottle) milk	1	5.6%
Formula (bottle) milk only	0	0.0%
Don't know or can't remember	0	0.0%

Figure 6. Comparison of scores for 'Feeding' for women who had a home birth against the national average.



Care at home after the birth

The questions for this stage of maternity care explore women's experiences of postnatal care in the community provided by their home birth midwife, public health nurses and general practitioners. 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 are summarised in Table 6.

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 compared against the national average in Figure 7, and for the individual questions in Figure 8.

Table 6. Results for questions on postnatal check-ups and engagement with support groups.

Q46. Since your baby's birth, have you been visited at home by a public health nurse?		
	No.	%
Yes	17	94.4%
No	1	5.6%
Not relevant to my situation	0	0.0%
Don't know or can't remember	0	0.0%
Q50. Did your baby receive a 2-week check-up with your general practitioner (GP)?		
Yes	12	66.7%
No, I did not know about the check-up	0	0.0%
No, I knew about the check-up but did not attend	2	11.1%
I attended another health care professional for the 2-week check-up	3	16.7%
Not relevant to my situation	1	5.6%
Don't know or can't remember	0	0.0%
Q55. Did you use local support groups e.g. mother and baby groups, feeding support groups, etc.		
Yes	10	55.6%
No	8	44.4%
Don't know or can't remember	0	0.0%

Figure 7. Comparison of 'Care at home after the birth' scores for women who had a home birth against the national average.

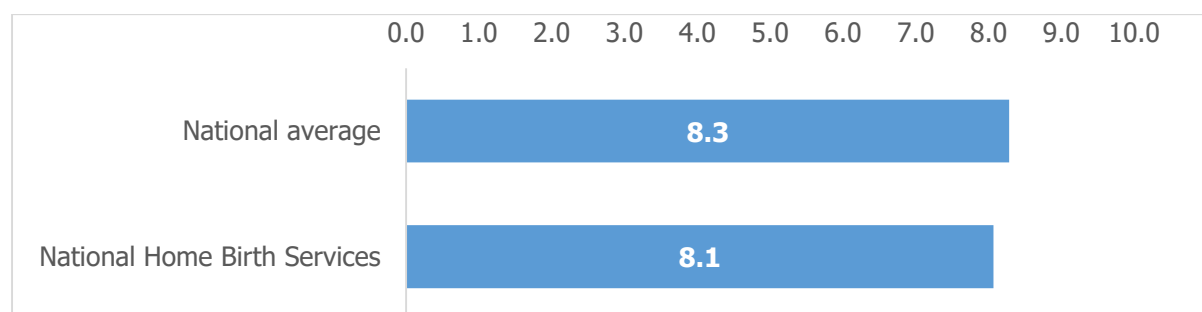
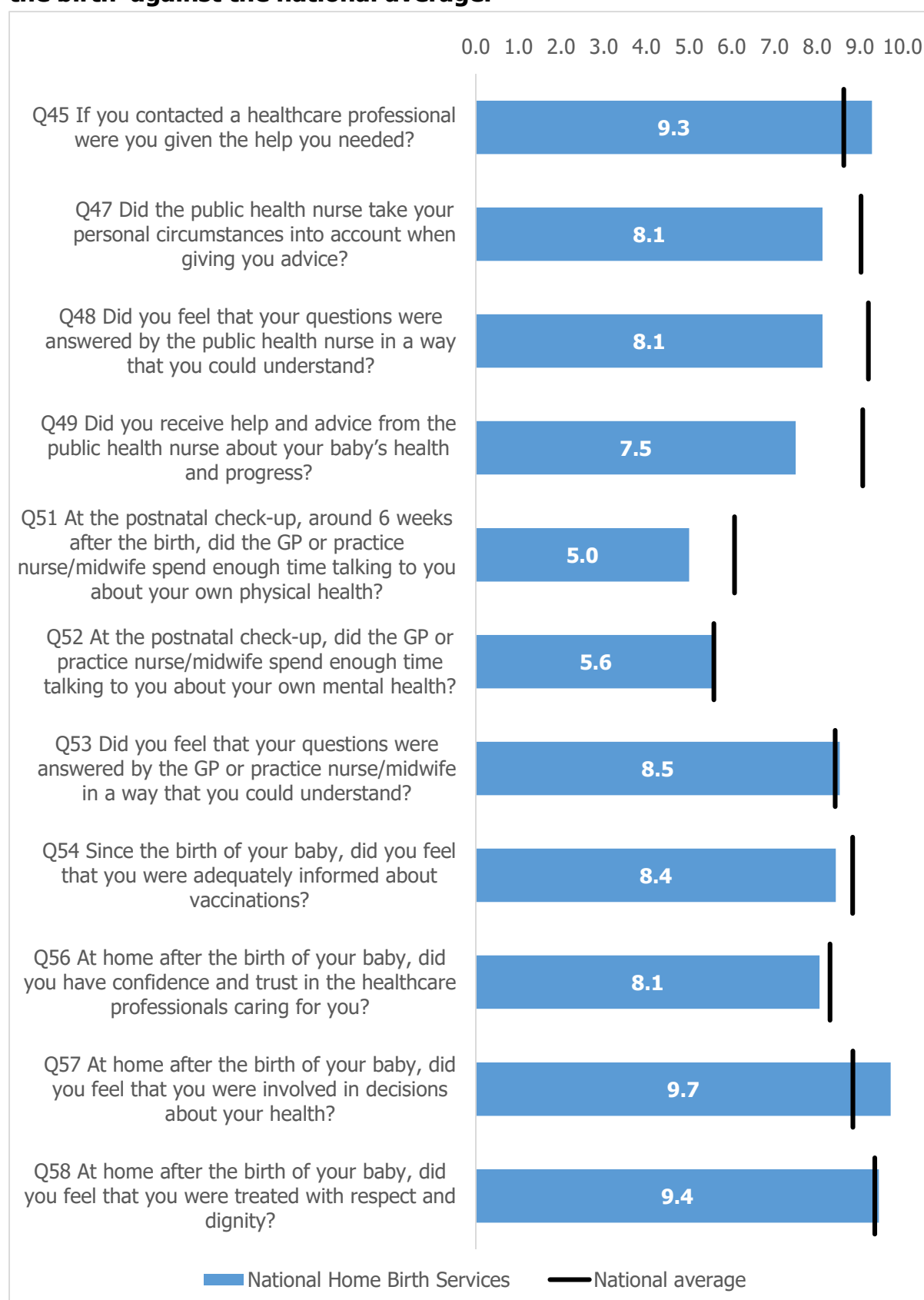


Figure 8. Comparison of individual question scores for 'Care at home after the birth' against the national average.

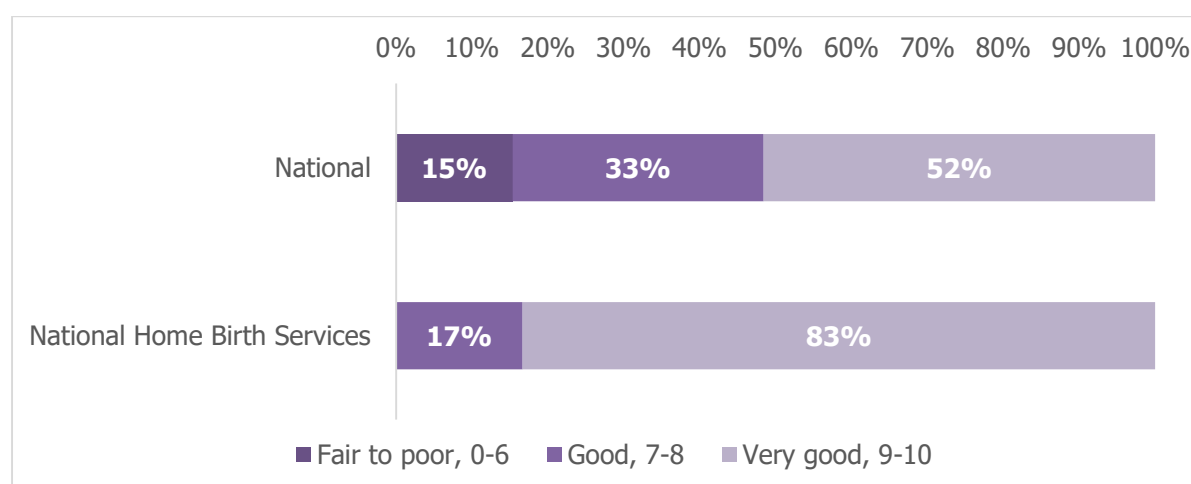


Overall experience

Women were 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. 83% of women who had a home birth rated their overall experience as very good, compared with 52% nationally.

Figure 9 shows the average overall experience ratings for women who had a home birth compared with the national average.

Figure 9. Comparison of overall maternity experiences scores for women who had a home birth 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.

Eleven questions on the survey explore involvement in decisions, confidence and trust, and respect and dignity. The average score out of 10 for these questions for women who had a home birth are compared against the national average in Figure 10. The results for each of these questions for women who had a home birth are presented in Figure 11.

Figure 10. Comparison of relevant questions for women who had a home birth with the national average.

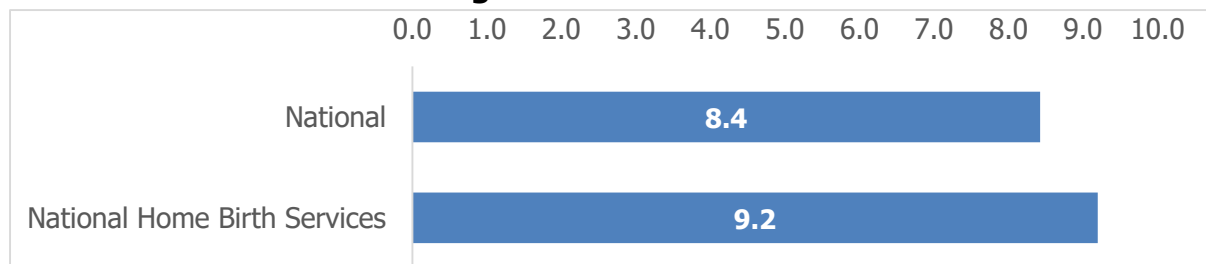
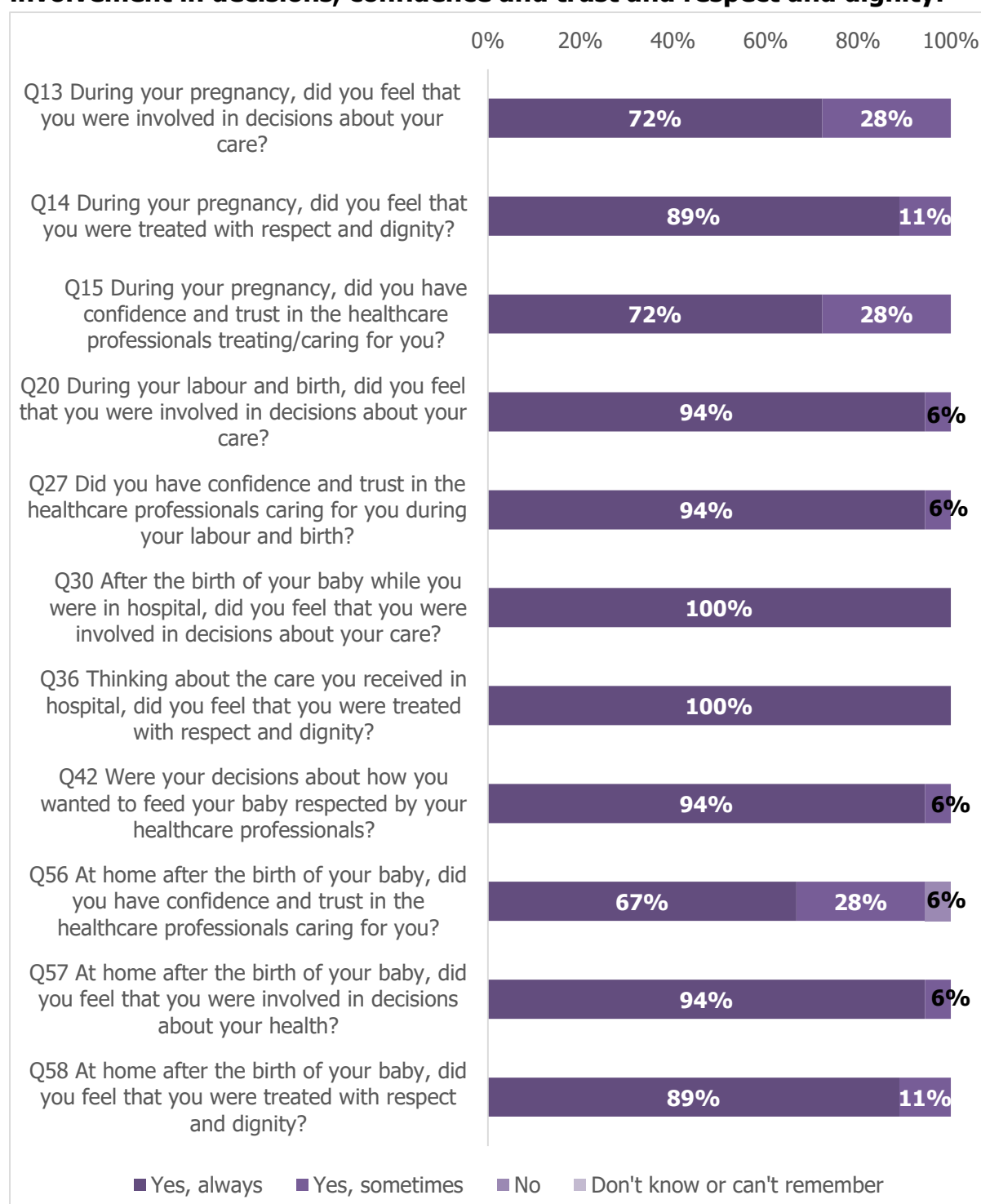


Figure 11. Responses by women who had a home birth to questions about involvement in decisions, confidence and trust and respect and dignity.



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 care experiences. These free-text questions allowed women to give a more in-depth description of specific aspects of their maternity care. In total, 47 comments were received from women who had a home birth.

Figure 12 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 care experience that they would like to describe.

Figure 12. Participant comments by theme.

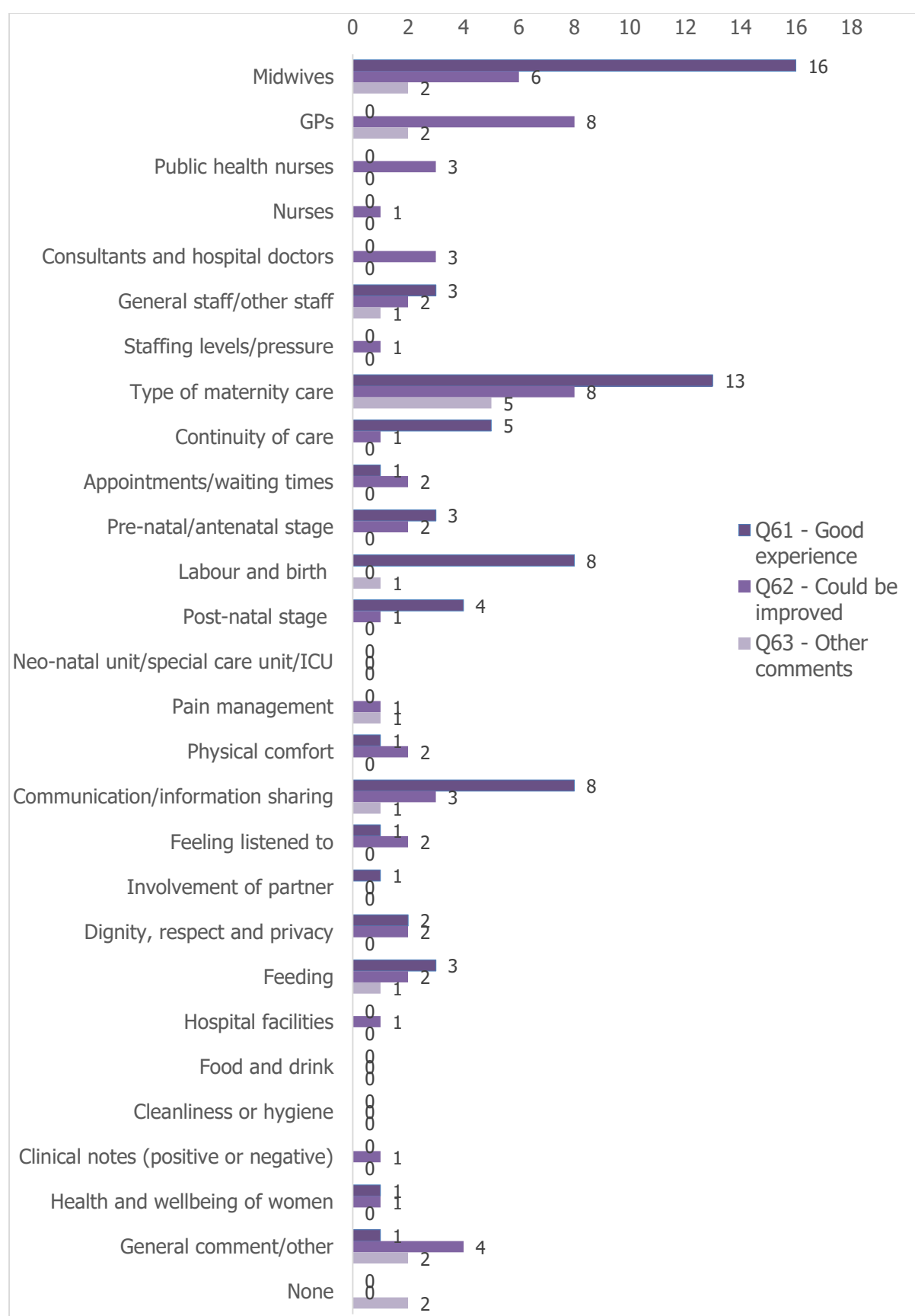


Figure 13. Sample comments.

Positive comments

"The midwife assigned to us for our home birth was outstanding. Very passionate and shared so much useful knowledge before/after the birth. The two week period of aftercare was particularly excellent-great advice on how best to aid my recovery and on caring for my newborn. It made a world of difference."

"My third child was my first home birth. It was by far the best overall care and birth that I have had. My midwife went above and beyond what I ever expected. When she came over, she got to know myself and my family. She felt like a sister or mother by the end of it, while still maintaining a professional relationship. She explained all complications that could arise with a home birth and we discussed in detail anything that could go wrong or stop a home birth. I trusted her extensively with my care. The birth itself was a great experience. I was monitored all the way through when I needed to be but my husband and I were left to experience the birth ourselves and help was there when we needed it. When active labour started I was monitored more frequently and the midwife was of great help. The aftercare was beyond what I could imagine. My midwife spent hours with me working on breast feeding. She showed me so many different techniques. This was the first time that I was successful with breastfeeding because I had this extended care."

"I had such a great experience and I will never forget it. My midwife was wonderful. She always respect my choices and our wishes... she was always down to earth and always encouraging. I felt safe, respected and I would do it all over again if I had the chance. Having someone coming to my home made everything easier, and knowing my midwife was only a phone call away if I needed was extremely important."

Suggestions for improvement

"It would make it easier if my midwife could access my notes and blood tests etc. directly from the hospital. I could sign a waiver to cover for etc. That my notes in hospital were up to date, as after many scans, on my last visit I was suddenly told they could not see any results from my previous scans and that there was no notes with regard to a sign off for my home birth (which I had a copy of at home). That there is a greater sharing of knowledge around the workings of a home birth with GPs (this is hard of course I understand and so very dependent on the GP)

for many women as GP is the first point of contact for first pregnancy it would be great if they mentioned the possibility of a home birth to mothers."

"I had to bring my 2 day old baby into the hospital to get checked, and I had no 2 week or 6 week care. I had to wait until I registered him and got a GP card before he was looked at again."

"It was made clear very early on that my consultant at the hospital was not exactly thrilled with my choice to have a home birth. I complied with everything they asked of me. They kept telling me that my baby was "too big" and would need to be delivered in the hospital. My midwife kept a very close eye on this because my last child was a large baby. It almost seemed as if it were a scare tactic by the consultant. This baby turned out to be the smallest of my children at birth and my midwife was correct in her estimation of the baby's weight before she was born."

Other comments

"I feel extremely privileged to have had the continuous care from my midwife after my birth, and wish that other woman knew that there is other ways to give birth that can allow you to stay in your own bed with your own family, would relieve pressure on the brilliant in hospital services that are needed for high risk births. If there was an in between version in this county.. in birthing homes that would be fab!"

"I think that not many mothers-to-be realise that HSE homebirth is an option. The experience for me was absolutely fabulous, particularly the aftercare. I would love to see midwife led units attached to Maternity hospitals and help Mums realise we can birth without lots of interventions (when low risk etc.)"

"My GP gave me incorrect advice in relation to breastfeeding. He told me to use formula as the baby had not gained birth weight but did not ask me any questions (like how often do I feed) or refer me to a lactation consultant. I had no concerns or did not supplement with formula and baby was fine. His advice could have led to nipple confusion, difficulties with supply etc."

Conclusion

What were the experiences of women who had a home birth in October and November 2019?

All participants who had a home birth had a positive experience of maternity care, with 100% saying that they had a good or very good overall experience. While this is higher than the national average of 85%, it is not possible to make statistical comparisons due to the small number of women who had a home birth.

Across most stages of care women who had a home birth rated their care as higher than or similar to the national average, although statistical comparisons were not made. The exception was the 'care at home after the birth' stage, where lower ratings were given for a number of questions.

The responses to the three free-text questions provided very detailed information on women's experiences of having a home birth and the maternity care they received before and after giving birth. These comments identified the caring and helpful attitudes of midwives, but also highlighted the difficulties that some women experienced in accessing help and information when they needed it.

The findings of the National Maternity Experience Survey will be used by the National Home Birth Services and community maternity care providers in the area to improve the maternity experiences of women who give birth at home.

Appendix 1: 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 health care 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 woman) 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 woman). 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

