Suirbhé Náisiúnta ar an Eispéireas Máithreachais | National Maternity Experience Survey

National Maternity Experience Survey 2025

Technical Report

National Maternity Experience Survey 2025 – Technical Report

Purpose of the report

This report provides a comprehensive technical description of the model, methodology, methods and procedures implemented during the National Maternity Experience Survey 2025. This report has been designed to provide sufficient detail for repetition, replication and review. This document does not report in detail on the survey results. The reports on the survey findings can be downloaded at www.yourexperience.ie.

Contents

1. Overview

1.1 The National Maternity Experience Survey

The National Maternity Experience 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), the Mental Health Commission, 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 aim of the survey was to learn about people's experiences of maternity services and to use their feedback to identify areas of good experience and areas for improvement. The survey reflects a commitment made in the National Maternity Strategy 2016–2026 to evaluate maternity care services from the perspectives of those who use them. (1)

All 19 maternity hospitals and maternity units in Ireland participated in the National Maternity Experience Survey 2025. A text message invitation to take part in the survey was sent to 7,982 people who gave birth in the maternity services, or at home, in February and March 2025. In total, 3,354 people took part in the survey, resulting in a response rate of 42%. The closing date for the survey was 18 July 2025. The survey findings were published in December 2025 in a national report, as well as in 19 individual maternity hospital and unit reports, and a home birth report, which are available at www.yourexperience.ie.

HIQA, the HSE and the Department of Health have committed to acting on the findings of the National Maternity Experience Survey 2025, 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 findings. These are available at www.yourexperience.ie.

1.2 Management of the National Maternity Experience Survey

Ipsos B&A,* a managed service, was contracted to administer the 2025 National Maternity Experience Survey and to process the responses received. The managed service was responsible for:

- receiving and quality-assuring the lists of sampled persons from participating hospitals

* Ipsos B&A is a market research agency. More information on the company can be found on their website https://www.ipsosbanda.ie/.

- distributing the survey by SMS to all eligible participants
- logging returns, opt-outs and ineligible respondents
- providing information to respondents on a dedicated survey helpline
- data processing and quality-assuring survey responses
- hosting a secure back-end database to allow maternity hospitals to view their survey results on an online reporting platform, prior to the publication of the results
- secure storage and deletion of data.

1.3 Survey design

1.3.1 Survey methodology

To create awareness about the National Maternity Experience Survey and promote participation, promotional materials about the survey were displayed in participating maternity hospitals and units for the duration of the survey period. Materials used in 2025 included posters, leaflets, pull-up banners and an animated video on the survey for use on social media, website, digital screens in hospitals, maternity units and community clinics. Eligible participants also received an information booklet on their discharge from maternity services. All eligible participants were contacted by text message in May and June 2025 to invite them to take part in the survey. The text message contained a link to the online questionnaire.

The administration of reminder text messages was built into the survey design. Two reminder text messages were sent to those who were invited to participate but had not yet completed the survey. Internationally, the second reminder has been shown to significantly increase response rates.[2, 3]

In similar surveys in other countries, participants are generally contacted between two and four months after giving birth.[4] This allows time to capture participants' experiences of postnatal care, facilitates checks for participants and babies who have died in the intervening period, and provides time for participants to reflect on their experiences.

The online survey was available in English, Irish, Polish and Romanian. Participants were also informed that they could call the survey helpline to request a paper version of the survey questionnaire in English or Irish. The survey closed on 18 July 2025.

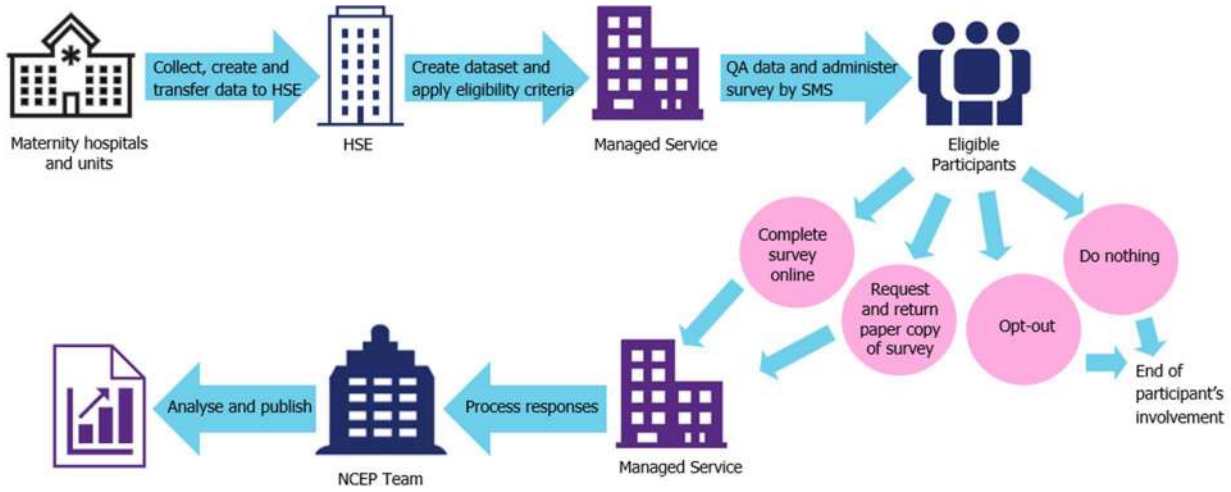
Participation in the survey was voluntary and confidential. Participants could opt out of the survey in one of five ways:

1. While in hospital or under home birth care
2. By calling the Freephone number
3. Via an opt-out link on the online questionnaire
4. By emailing info@yourexperience.ie
5. By not responding to the survey

The managed service processed the responses. The data was subsequently analysed by researchers who reported on the survey findings (see Chapter 3).

Figure 1.1 outlines the model and design of the National Maternity Experience Survey. This model is closely aligned to that of the National Inpatient Experience Survey.

Figure 1.1 The National Maternity Experience Survey process



1.3.2 Sample

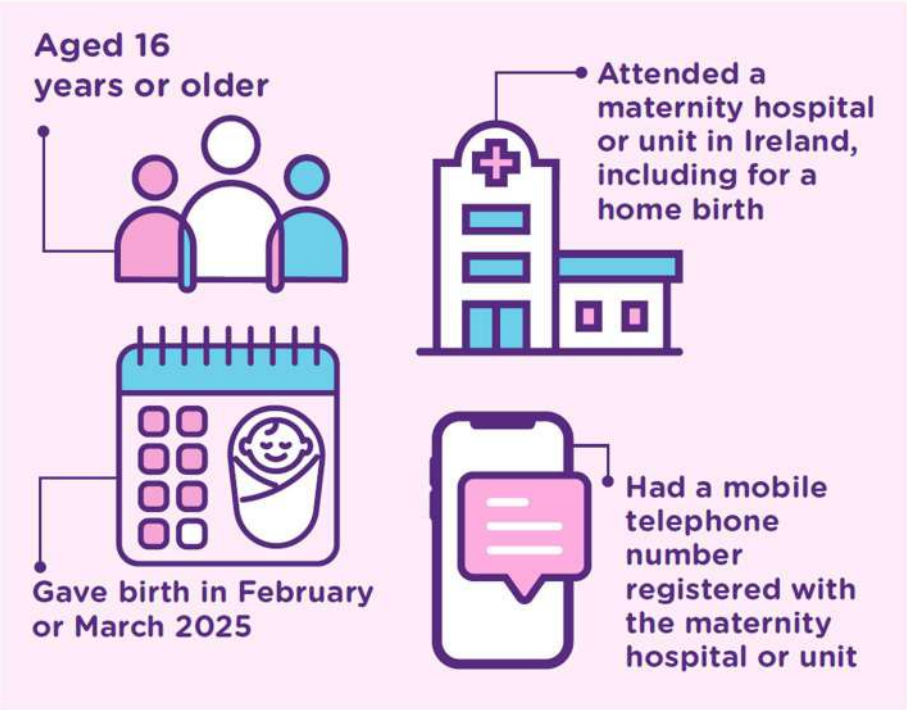
All 19 maternity hospitals and maternity units in Ireland participated in the National Maternity Experience Survey 2025. In Ireland, health and social care services from the Health Service Executive (HSE) are provided by six health regions:[†]

- HSE Dublin and Midlands
- HSE Dublin and North East
- HSE Dublin and South East
- HSE West and North West
- HSE Mid West
- HSE South West

People aged 16 or over who gave birth in February or March 2025 and who had a mobile telephone number registered with the maternity service where they gave birth, were invited to participate in the survey.

The inclusion criteria are summarised in Figure 1.2.

Figure 1.2. Inclusion criteria



[†] Maternity care in Ireland is provided for free to all residents through the Maternity and Infant Care Scheme. Private maternity care is also available and approximately a quarter of maternity care is typically provided privately. Those who receive private maternity care give birth in the same maternity hospitals or units as those who receive free (public) care. The HSE, as part of the data extraction agreement, extracted contact data for all eligible participants who received either public or private care.

1.3.3 The questionnaire

The first National Maternity Experience Survey was conducted in 2020[‡] and the second was conducted in 2025. The first questionnaire was developed by the National University of Ireland, Galway, in collaboration with the National Care Experience Programme and a wide range of stakeholders including people using services, midwives, public health nurses, GPs, obstetricians, policy-makers, data analysts and academics.

For the 2025 survey, the questionnaire was reviewed and updated to:

- reduce the number of questions to meet best-practice standards for online surveys
- incorporate feedback from stakeholders and survey participants in 2020 about the survey questions
- ensure the 2025 survey questions reflected current priorities in policy and practice.

Before the survey was conducted, the survey questions were tested by three different individuals with recent experience of maternity services, to assess whether the questions were clear and appropriate.

The 2025 survey questionnaire contained 64 questions (see Appendix 1), which explored participants' experiences of:

- care during pregnancy
- care during labour and birth
- care in hospital after the birth
- specialised care in the neonatal unit
- infant feeding
- care at home and in the community after the birth.

The survey included questions about participants' experiences of primary and community care services from general practitioners (GPs) and public health nurses, in pregnancy and after birth. In Ireland, community healthcare from GPs and public health nursing is organised by 32 different HSE Local Health Offices that come under the remit of the six health regions, see Appendix 2.

Demographic questions including parity (number of previous births), ethnicity, and long-term conditions were also included; as well as three open-ended questions (questions 59 to 61) which asked participants to provide additional information on their maternity care experiences in their own words.

[‡]The first National Maternity Experience Survey asked people about their experiences of maternity care in October and November 2019, before the impact of the Covid-19 pandemic.

1.3.4 Ethical approval

Ethical approval for the National Maternity Experience Survey was granted from the Royal College of Physicians in Ireland, via approvals for the National Care Experience Programme.

1.3.5 Privacy Impact Assessment

A Data Protection Impact Assessment (DPIA) must be carried out to identify and mitigate risks to the privacy of data subjects prior to the processing of any personal and sensitive data. Given that the administration of the National Maternity Experience Survey required the processing of personally identifiable information (for example, contact details and dates of birth), a DPIA was conducted in 2025. The DPIA is available to download from https://yourexperience.ie/wp-content/uploads/2025/02/NMES_DPIA_2025_Summary_Final.pdf.

1.3.6 Information governance

Information governance is a means of ensuring that all data, including personal information, is handled in line with all relevant legislation, guidance and evidence-based practices. The National Care Experience Programme has a comprehensive information governance framework to ensure that any information collected is handled safely and securely.

The National Care Experience Programme information governance framework comprises policies, procedures and processes covering data protection and confidentiality, data subject access requests, record retention and destruction, security, data breach management, data quality, access control, business continuity and record management. A statement of purpose and statement of information practices detailing the information-handling practices of the National Maternity Experience Survey are available from https://yourexperience.ie/about/information-governance/.

1.3.7 Data retention and destruction

The contact details of eligible participants, collected by the HSE, were used to distribute the questionnaire, and their addresses were used to assign one of the eight categories of deprivation level in the Pobal HP Deprivation Index.[§] Information on date of birth and other relevant variables was collected by the HSE in order to describe the characteristics of the sample. Personal information data (used for the

[§§] The Pobal HP Deprivation Index is Ireland's primary social gradient tool, used for the identification of geographic disadvantage, in order to target resources and services towards communities most in need.

purpose of administering the survey) was electronically destroyed on 18 September 2025 in line with the National Care Experience Programme data retention and destruction schedule. By this stage, the survey responses were fully anonymised, meaning that the responses could not be linked back to the person who completed the survey.

2. Survey fieldwork

2.1 Data extraction

Data extraction refers to the sampling procedures undertaken to identify individuals eligible to participate in the survey. During the survey period, maternity hospitals and units were required to extract personal information for every eligible individual, who gave birth in February and March 2025.

The following information was collected by the maternity service, as part of the data extraction: first name, last name, mobile telephone number, address, Eircode, date of birth, date of birth of the baby, date of discharge, health region, and hospital name details.[**] Each maternity hospital or unit was required to apply the eligibility criteria. Each maternity hospital or unit was also responsible for identifying deceased mothers and babies. This involved contacting the Director of Public Health Nursing for the community healthcare area, to ascertain if any mothers or babies had died. The process of ensuring that deceased women and mothers of deceased babies were omitted from the National Maternity Experience Survey contact dataset was conducted up to:

- **28 March 2025** for all live births from 1 February to 28 February 2025.
- **15 April 2025** for all live births from 1 March to 31 March 2025.

In adherence to agreed protocols, hospitals and units securely shared this information with the managed service, who subsequently sent a text message invitation to eligible participants to participate.

To enable timely and accurate administration of the survey to eligible participants, a detailed process guide was developed, and training was provided to support nominated hospital staff to extract the relevant patient data. The guide included a number of steps:

- Step 1: Identify eligible participants using the eligibility criteria guide.
- Step 2: Compile the NMES contact dataset using the template provided.
- Step 3: Save and title the NMES contact dataset, according to an agreed naming convention.
- Step 4: Data quality assurance checks prior to transferring the datasets to the managed service.

[**] The transfer of participant data between hospitals (data controllers) and the managed service (data processor on behalf of HIQA) was in all instances mandated by data sharing agreements.

- Step 5: Conduct death checks.
- Step 6: Upload the NMES contact dataset.

Personnel responsible for data extraction and quality assurance of data extracts were required to follow data-extraction and quality-assurance procedures during every step of the process to ensure a standardised and consistent approach to the implementation of the survey across all participating maternity hospitals and units, as outlined in Table 2.1 below.

Table 2.1 Schedule for extracting and submitting the NMES contact dataset

Survey month	Extraction date	Task for hospitals	Deadline for upload of contact dataset
February births	Monday 24 March	Extract and quality assure dataset for participants who **give birth** between **1 – 28 February** inclusive. Conduct death checks.	Upload contact dataset by **5pm** on **28 March**
March births	Tuesday 8 April	Extract and quality assure dataset for participants who **give birth** between **1 – 31 March** inclusive. Conduct death checks.	Upload contact dataset by **5pm** on **15 April**

Data transfers to the managed service occurred through a secure transfer mechanism, ensuring the safety of patient information while in transfer. Upon receipt of the data files, patient details were uploaded to a master file.

2.2 Survey administration

The survey went live on 7 May and closed on 18 July 2025. All eligible participants were contacted by text message in May and June 2025 to invite them to take part in the survey. The text message contained a link to the online questionnaire.

2.3 Sampling and operational outcomes

A total of 8,145 participants were eligible to participate in the National Maternity Experience Survey 2025. During sampling, 163 text message invitations could not be delivered to the intended recipient. Six individuals actively opted out of the survey. A total of 6,328 first reminders and 5,435 second reminders were sent out during the survey period.

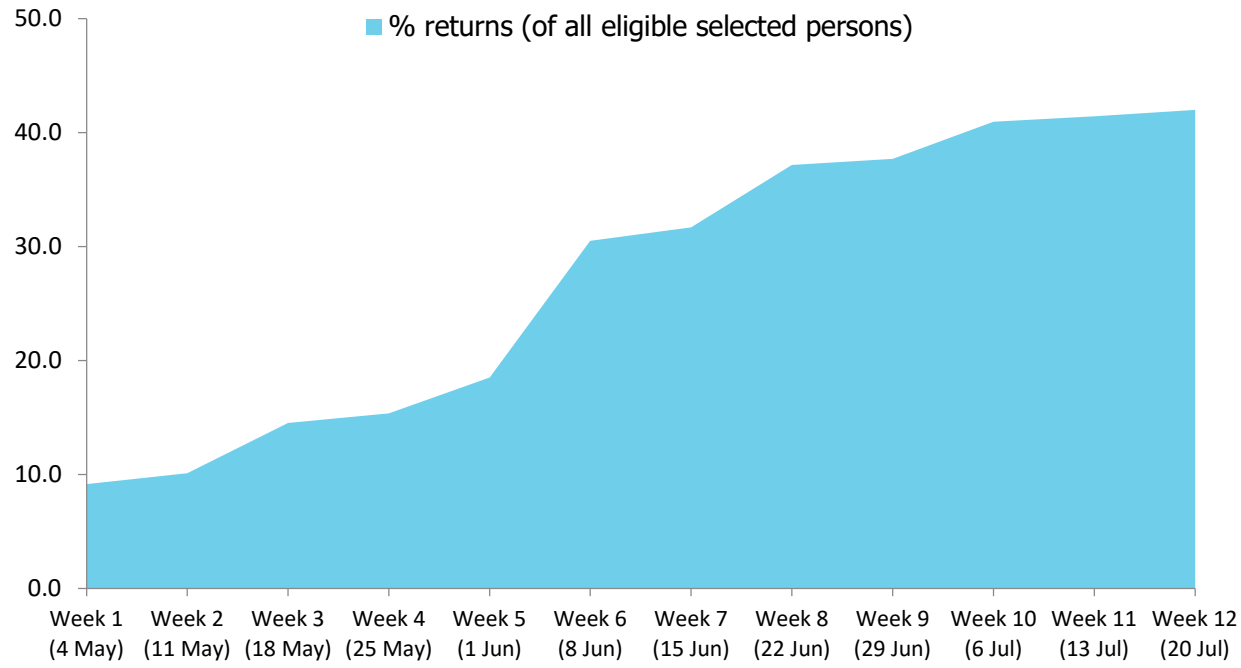
2.4 Response rates

Of the 7,982 individuals who were ultimately eligible to participate, 3,354 completed a valid survey questionnaire prior to the survey closing date of 18 July 2025,

resulting in a national response rate of 42% (Table 2.2). All participants completed the survey online. See Table 2.3.

Response rates were calculated by dividing the number of valid surveys completed by the number of initial invitations sent, minus the number of participants who did not receive the text message. Figure 2.1 shows the cumulative response rates by week during the survey period (7 May to 18 July 2025).

Figure 2.1. Cumulative response rates by week of the survey period



The number of participants is broken down by the hospital where they gave birth in Table 2.2, and by age, length of stay, and level of deprivation in Table 2.3. Participants over the age of 35 years had the highest response rate (47%) of any age group. Participants under the age of 25 years were least likely to respond to the survey, with only 29% of those invited taking part. Participants who stayed in hospital six or more days had a higher response rate (44%) compared with those who had shorter stays. People living in affluent areas were more likely to take part in the survey (45%). Appendix 3 includes a detailed breakdown of operational outcomes and response rates by health region and individual hospital.

Table 2.2. Response rate by health region, maternity hospital/unit

	Eligible sample	Responses received	Response rate
HSE Dublin and Midlands	**1510**	**594**	**40%**
The Coombe Hospital	1004	388	39%
Regional Hospital Mullingar	283	103	38%
Midland Regional Hospital Portlaoise	212	96	46%
HSE Dublin and North East	**1882**	**779**	**42%**
The Rotunda Hospital	1280	512	41%
Our Lady of Lourdes Hospital	418	188	46%
Cavan General Hospital	184	79	43%
HSE Dublin and South East	**1870**	**790**	**43%**
The National Maternity Hospital	1086	440	41%
University Hospital Waterford	241	109	47%
Wexford General Hospital	222	91	42%
St. Luke's General Hospital	210	98	48%
Tipperary University Hospital	98	43	45%
HSE Mid West	**563**	**197**	**36%**
University Maternity Hospital Limerick	563	197	36%
HSE South West	**1111**	**469**	**43%**
Cork University Maternity Hospital	941	399	43%
University Hospital Kerry	162	63	40%
HSE West and North West	**1209**	**525**	**44%**
University Hospital Galway	417	170	42%
Mayo University Hospital	204	87	43%
Letterkenny University Hospital	208	95	46%
Portiuncula University Hospital	205	99	49%
Sligo University Hospital	173	72	43%

Table 2.3. Response and non-response composition 2025

Group	Total discharged	Deceased	Opted out	No response	Completed (paper)	Completed (online)	Response rate
All respondents	**8145**	**1**	**6**	**4785**	**0**	**3354**	**42%**
Age							
Aged 16-24 years	698	0	0	508	0	190	29%
Aged 25-29 years	1380	1	1	914	0	465	35%
Aged 30-34 years	2988	0	0	1726	0	1262	43%
Aged 35-39 years	2421	0	5	1284	0	1132	47%
Aged 40 years or older	658	0	0	353	0	305	47%
Length of stay							
0-1 day	1572	1	0	934	0	638	42%
2-3 days	4946	0	6	2902	0	2038	42%
4-5 days	1261	0	0	742	0	519	42%
6 or more days	366	0	0	207	0	159	44%
Level of deprivation							
Extremely disadvantaged	81	0	0	60	0	21	27%
Very disadvantaged	281	0	0	199	0	82	30%
Disadvantaged	789	1	2	505	0	282	36%
Marginally below average	2377	0	1	1385	0	991	43%
Marginally above average	3130	0	3	1801	0	1326	43%
Affluent	1297	0	0	721	0	576	45%
Very affluent	184	0	0	108	0	76	42%
Insufficient /Unknown	6	0	0	6	0	0	0%

2.5 Survey operations

During the survey period of 7 May to 18 July 2025, nine calls were recorded by helpline operators. The most common reasons for calling the Freephone helpline were general queries about the survey (six calls, 67%) and queries about online completion (two calls, 22%). One call (11%) received during the survey period was from an individual wanting to change their answers.

3. Data processing, analysis and reporting

3.1 Data processing steps

All completed questionnaires were submitted online and entered into an online Qualtrics dashboard. Response data was downloaded by the NCEP team and SPSS was used to assign scores to variables and analyse responses.

Demographic variables were also produced at this stage:

- Age of respondents was calculated using the mother's date of birth and the date of birth of the baby. Age was then collapsed into five age groups (16 to 24, 25 to 29, 30 to 34, 35 to 39, and 40 or above).
- Participants were coded as having a disability if they selected any of the conditions or difficulties that were listed on Question 64, or they were coded as 'no disability' if they selected 'None of the above' for this question.
- The level of deprivation for each participant's home address was calculated using the Pobal HP Deprivation Index.

The questions on overall experience in the neonatal unit (Q38, rated 0 to 10) and on overall experience (Q58, rated 0 to 10) were collapsed into three groups: very good (score of 9-10), good (7-8), and fair to poor (0-6).

3.2 Mapping of survey questions to the stages of care

Survey questions were grouped into 'stages of care' along the maternity journey. Figure 3.1 provides a brief description of the stages of care and specifies the number of questions corresponding to each stage.

Filter questions (that is, questions with the main purpose of routing respondents to the next applicable question) were excluded from this categorisation.

Questions on respondent demographics and the three open-ended questions were also excluded. Appendix 4 shows how individual questions map to the stages of care.

Figure 3.1. Description of stages of care

3.3 Quantitative methodology

This section describes how the stage-of-care scores were calculated and describes the quality assurance of the survey data.

3.3.1 Question scores

To calculate scores for the themes described in Section 3.2, the responses to the questions making up these stages of care were assigned a score using methods equivalent to those used in the UK by the Care Quality Commission (CQC).[6] The scores applied to each of these questions are shown in Appendix 4.

It should be noted that only evaluative questions could be scored, that is, questions that assessed an actual experience of care. Routing or demographic questions were

not scored. Descriptive questions that captured information about the context of the care experience (such as the type of maternity care received, the type of birth, and so on), were also not scored.

Figure 3.2 is an example of how response options were converted into scores for the evaluative questions. More positive answers were assigned higher scores than more negative ones. In total, 42 questions were scored in this way.

In the example below, 'No' was given a score of 0, 'Yes, sometimes' was given a score of 5 and 'Yes, always' was given a score of 10. The last response option, 'Don't know or can't remember' was categorised as 'missing'. It was not scored as it cannot be evaluated in terms of best practice.

Figure 3.2. Example of a scored question in the 2025 survey

Q13. Thinking about the care you received during your pregnancy, did you feel that you were involved in decisions about your care?

1	**10**	Yes, always
2	**5**	Yes, sometimes
3	**0**	No
4	**M**	Don't know or can't remember

Table 3.1 below shows how scores were calculated for a specific question in the survey. In this example, the scores of five respondents are presented. The score for Q13 is calculated by summing the scores in the right-hand column (10+10+5+0+5), before dividing them by the number of people who responded to this question (30/5=6). Thus, the average score for Q13 is 6 out of 10.

Table 3.1. Sum of scores for Q13 based on five respondents

Q13. Thinking about the care you received during your pregnancy, did you feel that you were involved in decisions about your care?	
Respondent	**Score**
1	10
2	10
3	5
4	0
5	5
Sum of scores	**30**
Average score	**6**

3.3.2 Stages of care scores

A stage-of-care score was generated for each respondent with one or more 'scorable' responses on items comprising a stage, by calculating the average of all scored items within that stage. Stage-of-care scores ranged from 0 to 10, with higher scores indicating a more positive experience.

Table 3.2 shows an example of the original and scored data for the infant feeding stage of care. The infant feeding stage-of-care score is calculated as the average of the scored responses for the three items included in this stage. Please see Appendix 4 for the wording and response options for the questions shown in Table 3.2.

Table 3.2 Example of scored responses on infant feeding

Original responses			Scored responses			Infant feeding score
Q41	Q42	Q43	Q41	Q42	Q43	
2	3	2	5	0	5	3.33
1	2	1	10	5	10	8.33
1	2	2	10	5	5	6.67
2	2	2	5	5	5	5.00
1	3	1	10	0	10	6.67
2	3	2	5	0	5	3.33

3.3.3 Comparisons of groups

Statistical tests were carried out to examine if there were significant differences in maternity experiences across the maternity hospitals and units, and across Local Health Offices.

A 'z-test' was used to compare maternity experience data at the 99% confidence level. A z-test is a statistical test used to examine whether two population mean scores are different when the variances are known and the sample size is large. A statistically significant difference means it is very unlikely that results were obtained by chance alone if there was no real difference. Therefore, when a score is significantly 'above' or 'below' the national average, this is highly unlikely to have occurred by chance.

3.3.4 Comparisons between 2020 and 2025

Stage of maternity care and individual question scores for 2020 and 2025 were compared using a 't-test' at the 99% confidence level. A t-test is a statistical test used to compare the average scores of two groups. A statistically significant

difference means it is very unlikely that results were obtained by chance alone if there was no real difference. Therefore, when a score is 'higher than' or 'lower than' a comparison group, this is highly unlikely to have occurred by chance.

3.3.5 Quality assurance of quantitative data

Frequency checks on the survey data confirmed that the rate of 'missingness' on the individual survey questions was in the low range, that is, there was no substantial evidence of 'survey fatigue', whereby rates of missing responses would be higher for questions appearing later in the questionnaire.

For example, missing responses averaged 0.8% for Q8–Q10 compared with 0.6% for the last three closed response questions prior to the demographic section (Q56–Q58). The average rate of missingness for the demographic questions about number of previous births (Q62) and ethnicity (Q63) was 0.4%.

The final demographic question asked participants if they had a long-term condition or disability; 19% of participants did not respond to this question, but this is likely because they did not think the question was relevant for them.

3.4 Qualitative methodologies

This section describes the processing of the qualitative data collected via the survey questionnaire, that is, responses to the three open-ended questions:

- Q59 – What was particularly good about your maternity care?
- Q60 – Was there anything that could be improved?
- Q61 – Were there any other important parts of your maternity care experience that are not covered by the questions in this survey?

Table 3.3 shows the number of responses received for each question by age group.

Table 3.3. Number of responses received for Q59, Q60, and Q61

Age	Q59	Q60	Q61	Total
16 to 24	69	64	22	155
25 to 29	252	236	82	570
30 to 34	790	758	288	1,836
35 to 39	1,057	1,014	406	2,477
40 and above	392	350	173	915
Total	**2,610**	**2,470**	**995**	**6,075**

3.4.1 Anonymisation of qualitative data

All qualitative responses were anonymised. Each individual comment from survey participants was reviewed to remove any personal information about the participant themselves or healthcare staff (including name, age, nationality, ethnicity, date of admission). The overarching principle guiding these procedures was the protection of the anonymity of individuals, including respondents and hospital staff. The redaction guidelines can be found in Appendix 5.

3.4.2 Developing thematic codes for the qualitative data

Content analysis of the participants' comments was used to sort and categorise the meaning within the comments. To organise the comments into manageable chunks of information, all comments were reviewed and coded. The coding framework is shown in Table 3.4. It contained codes for the healthcare professionals that were mentioned in the comment, the stage of care that was described and the specific issue or theme that was the focus of the comment.

Table 3.4. Detailed set of codes used for reporting

Role of healthcare professional
Midwives
Obstetricians and or Consultant Doctors
Maternity Healthcare Assistants
GPs
Anaesthetists
Public Health Nurses
Other hospital staff
Stage of care
Antenatal care
Emergency care
Labour and birth
Postnatal care in hospital
Neonatal care
Postnatal care at home or in the community
Theme
Type of maternity care: Comments about the type or model of care that participants received, wanted, or preferred.
Continuity of carer: Comments about seeing (or not seeing) the same healthcare professional at appointments.
Staffing levels or staff pressure: Comments about the number of staff available within the service, or references to staff shortages, or staff being busy.
Staff responsiveness and attention to needs: Comments about attention from healthcare staff and whether staff were, or were not, responsive to participants' needs, including listening to their concerns.
Appointments and or waiting times: Comments about the management, organisation, or administration of appointments, or about waiting times at appointments.
Pain management: Comments about pain management (or lack of) in pregnancy, in labour and birth, and after birth.
Hospital or ward conditions: Comments in relation to the facilities and conditions of the maternity hospital or ward.
Food and Drink: Comments in relation to access to food and drinks at the maternity service and its quality.

Communication between healthcare professionals: Comments about communication (or lack of communication) between healthcare professionals about the participants' care.

Information sharing and explanations from healthcare staff: Comments about information or explanations provided (or lack of information or explanations) from healthcare professionals about pregnancy care, about procedures during labour and birth, and about postnatal care.

Support for preferences and involvement in decisions: Comments about whether the participants had their own wishes or preferences in relation to care during pregnancy, labour and birth, or postnatal care, and whether these wishes and preferences were listened to or supported by staff.

Interpersonal aspects of care: Comments in relation to the interpersonal (social and personal) interactions that healthcare staff had with participants.

Involvement of partner, birth companion or family: Comments in relation to the role of partners, family members or birth companions; their interactions with healthcare staff; or how they were treated by healthcare staff.

Privacy: Comments in relation to privacy for the participants while receiving maternity care services.

Feeding: Comments in relation to infant feeding, including support or lack of support with feeding.

Physical health: Comments about specific health conditions in pregnancy; other physical challenges in pregnancy, including physical disabilities or long-term conditions; or physical health and recovery after birth.

Mental health: Comments about mental health in pregnancy or after the birth; support needs for mental health; and interactions and experiences with mental health care professionals.

Previous maternity care or birth experiences: Comments about previous pregnancy or birth experiences.

Scans: Comments about scans.

C-sections: Comments about caesarean births, including any additional support required in the aftercare and recovery from a caesarean birth.

Traumatic labour and birth experiences: Comments about difficult or upsetting experiences in labour and birth. Also includes comments about the impact of a difficult or traumatic birth.

Baby health: Comments about conditions, illnesses, or procedures for babies at any stage after birth.

Other: Comments about issues that are not covered by the themes above.

General positive comment: Comment that is positive but does not provide specific information about the reason why, so cannot be coded using the above codes.

General negative comment: Comment that is generally negative but does not provide specific information about the reason why, so cannot be coded using the above codes.

3.5 Quality assurance of qualitative data

The National Maternity Experience Survey team reviewed all comments to check that they had been anonymised in accordance with the agreed redaction protocols. Only then was the data released to the online reporting facility for maternity hospitals and units and community healthcare areas to review (also refer to section 3.7).

The coding of the qualitative data was quality assured. A sample of 209 comments in response to the three open-ended questions (which represented 3% of the total comments) were randomly selected. A member of the survey team reviewed the codes that were applied to these comments. There was 96% agreement on the codes applied. The Data Quality Statement is outlined in Appendix 6.

3.6 Treatment of duplicates

Duplicates in the survey response file could not occur as the system did not permit double entry of a record with the same survey ID.

3.7 Publication of national and maternity hospital or unit results

In December 2025, the National Maternity Experience Survey team published one national report, as well as 19 maternity hospital or unit reports, and one report on experiences with home birth care. A publicly accessible results dashboard was embedded on www.yourexperience.ie, and allows site visitors to further examine the survey results. In addition, maternity hospital and unit staff and other stakeholders had access to a 'real-time' online reporting platform where they could view the survey results for their service, as the data were being processed. Access to this information prior to the publication of reports allowed maternity hospitals and units to be proactive and to identify opportunities for improvement at an early stage.

Taken together, the national, home birth and hospital reports were designed to:

- provide a clear description of the key features of maternity care experience at national and local levels, pointing to areas of good experience and areas for improvement in the system at national, hospital and local community levels
- provide a robust basis for the development of quality improvement plans at hospital and local community levels (together with other data and information sources)
- enable the identification of policy priorities at the national level (together with other data and information sources)
- provide a basis for benchmarking progress over time, following future surveys.

All published reports can be downloaded from: https://yourexperience.ie/maternity/about-the-survey/.

3.8 Survey findings, quality improvement and next steps

The HSE has used the survey results to develop quality improvement plans at national and local levels. These quality improvement plans describe the steps that will be taken to address the findings of the survey and improve maternity care. The quality improvement plans are available from www.yourexperience.ie.

The Department of Health will continue to use the information gathered to inform the development of policy and strategy in relation to maternity care.

Finally, the findings of the survey will inform HIQA's approach to the monitoring and regulation of maternity care services.

4. International comparisons

4.1 Comparisons with international data

Maternity surveys are undertaken in a number of countries using a wide variety of approaches and survey tools. This brief review compares results from the Irish National Maternity Experience Survey with the findings of the maternity survey conducted in England. Information on the English survey is provided in Table 4.1.

A comparison of results across selected questions is provided in Table 4.2. Comparing maternity experience across jurisdictions is challenging due to variations in maternity service provision, differences in survey instruments and methods, as well as cultural differences in how encounters with maternity services are perceived and reported. Comparisons of survey results across jurisdictions should therefore be made with caution. Nevertheless, there are some common aspects in survey approaches across jurisdictions and comparisons of results on similar questions, which can be useful.

Comparisons across national surveys are only made for questions and response options with identical or near identical wording. In Table 4.2, questions are numbered and ordered according to where they appear in the National Maternity Experience Survey. These questions may be numbered and categorised differently in other surveys.

Table 4.1 Overview of maternity experience survey in England

Jurisdiction	Survey information	Differences from National Maternity Experience Survey approach
England	**Maternity Services Survey 2025** Survey results organised by: ▪ care while pregnant (antenatal care) ▪ care during labour and birth postnatal care in hospital ▪ postnatal care at home ▪ triage ▪ midwifery continuity of carer ▪ awareness of medical history ▪ infant feeding ▪ perinatal mental health. The 2025 Maternity survey used both an online and a postal questionnaire for survey data collection. People using maternity services were sent a maximum of four postal letters inviting them to complete the survey. In addition to the	Sampled maternity service users aged 16 or over who delivered their baby or babies at an NHS trust in England during January or February 2025. Each NHS trust selected a census sample of at least 300 maternity service users, by including every consecutive live birth between 1st February and 28th February 2025 (the sample period). Smaller trusts were instructed to sample back into January 2025, if they were unable to reach the required sample (58 of 119 trusts sampled back into January). Option of completing the questionnaire online.

	letters, they were sent up to three text message (SMS) reminders containing a direct link to the online survey.	A paper questionnaire is provided to eligible participants who have not participated earlier. Postal invitations and reminders, text message (SMS) reminders with a direct link to the online survey. QR codes included in the invitation letters and on the multilanguage sheet, allowing respondents to access the online survey via their smartphone or tablet.

Table 4.2 Comparison of question scores, Ireland and England

Stage of maternity care	Item	Ireland 2025	England 2025[††]
	Response rate	42%	39%
	Previous births (≥1)	56%	49%
	Single birth	99%	99%
	Age (30-34 years)	38%	37%
Antenatal care	Q13. Thinking about the care you received during your pregnancy, did you feel that you were involved in decisions about your care? (% yes, always)	63%	82%
Antenatal care	Q14.Thinking about the care you received during your pregnancy, did you feel that you were treated with respect and dignity? (% yes, always)	81%	88%
Antenatal care	Q15. Thinking about the care you received during your pregnancy, did you have confidence and trust in the healthcare professionals treating/caring for you? (% yes, always)	71%	73%
Labour and birth	Q18. Thinking about the birth of your baby, was your labour induced? (% yes)	44%	42%
Labour and birth	Q19. What type of birth did you have? (% vaginal birth (no forceps or ventouse suction cup))	43%	43%
Labour and birth	Q20. Thinking about the care you received during your labour and birth, did you feel that you were involved in decisions about your care? (% yes, always)	67%	77%
Labour and birth	Q23. Were you (and or your partner or a companion) left alone by healthcare professionals at a time when it worried you? (% no, not at all)	78%	76%
Labour and birth	Q26. Did you have confidence and trust in the healthcare professionals caring for you during your labour and birth? (% yes, always)	80%	78%
Labour and birth	Q27. Shortly after your baby was born, did you have the opportunity to ask the midwives or doctors questions about your labour and the birth? (% yes, definitely)	50%	51%
Care in hospital	Q28. If you needed assistance while you were in hospital after the birth, were you able to get a healthcare professional to assist you when you needed it? (% yes always)	56%	57%[‡‡]

[††] The results for the Maternity Survey 2025 conducted in England are available from: https://www.cqc.org.uk/publications/surveys/maternity-survey

[‡‡] England's Maternity Survey item wording: If you needed attention while you were in hospital after the birth, were you able to get a member of staff to help you when you needed it?

Care in hospital	Q29. While you were in hospital after the birth of your baby, do you think your healthcare professionals did everything they could to help manage your pain? (% yes, definitely)	69%	66%[§§]
Infant feeding	Q40. In the first few days after the birth, how was your baby fed? (% breast milk or expressed breast milk only)	36%	50%
Infant feeding	Q41. Were your decisions about how you wanted to feed your baby respected by your healthcare professionals? (% yes, always)	80%	84%
Infant feeding	Q42. Did your healthcare professionals give you adequate support and encouragement with feeding your baby, shortly after your baby was born (either in the hospital or at home if you had a home birth)? (% yes, always)	63%	63%[***]
Care at home or in the community	Q49. Thinking about the care you received at the postnatal check-up, around 6 weeks after the birth, did the GP spend enough time talking to you about your own physical health and recovery? (% yes, definitely)	46%	42%
Care at home or in the community	Q54. Thinking about the care you received at home or in the community after the birth of your baby, did you feel that you were involved in decisions about your health? (% yes, always)	79%	75%

[§§] England's Maternity Survey item wording: Do you think your healthcare professionals did everything they could to help manage your pain in hospital after the birth?

[***] England's Maternity Survey item wording: Did you feel that midwives gave you enough support and advice to feed your baby?

References

1. Department of Health. Creating a Better Future Together: National Maternity Strategy 2016-2026. 2016.
2. Health Information and Quality Authority. International Review on Patient Experience Surveys. 2016.
3. Barron DN, West E, Reeves R, Hawkes D. It takes patience and persistence to get negative feedback about patients' experiences: a secondary analysis of national inpatient survey data. BMC Health Services Research. 2014;14(1):153.
4. National Care Experience Programme. International Review of Maternity Care Experience Surveys. Cork, Ireland: Health Information and Quality Authority; 2019.
5. Authority HIaQ. National Standards for Safer Better Maternity Services. 2016.
6. Care Quality Commission. NHS Patient Survey Programme: Survey Scoring Method 2015.
7. Gale NK, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. BMC Medical Research Methodology. 2013;13(1):117.
8. Health Information and Quality Authority. Guidance on a data quality framework for health and social care. 2018. https://www.hiqa.ie/sites/default/files/2018-10/Guidance-for-a-data-quality-framework.pdf

Appendix 1

The National Maternity Experience Survey questionnaire 2025

MATERNITY CARE SURVEY

Suirbhé Náisiúnta ar an Eispéireas Máithreachais | National Maternity Experience Survey

Why did I get this survey?

You are invited to take part in the National Maternity Experience Survey, a nationwide survey that asks women who have recently given birth in Ireland about the maternity care they received. The aim of the survey is to learn from the experiences of women to improve the safety and quality of Ireland's maternity services.

All women who gave birth in February or March 2025 and are aged 16 years or older are eligible to take part. The survey is being carried out by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE), and the Department of Health.

Participation is voluntary. Your decision about whether to take part in the survey or not will not affect the care you receive now or in the future.

Will my answers be treated confidentially?

The survey is completely confidential. Your maternity hospital or service will only see anonymous responses to the survey questions. For further information about how the anonymised survey data will be used, please visit the Frequently Asked Questions on www.yourexperience.ie.

How do I take part in the survey?

You need to fill in and return this questionnaire to the National Maternity Experience Survey, Milltown House, Milltown, Business Reply, Dublin 6 by **Friday 18 July. Please return this questionnaire in the Freepost envelope provided. No stamp is needed.**

How to complete the survey

- For each question please clearly tick ☑ one box using a black or a blue pen.
- Please read the information in the boxes that accompany some of the questions as these provide important information to help you complete the questionnaire.
- Do not worry if you make a mistake; simply fill in the box ■ and put a tick ☑ in the correct box.
- There is space at the end of the survey for you to share comments in your own words.
- Please do not share your name or address in the comments.

Can I ask someone to help me fill in the survey?

Yes, you can ask someone to help you fill in this questionnaire if you wish. You may also ask someone to fill in this questionnaire on your behalf. However, please make sure that the answers given reflect your experience of care.

How do I opt out?

To opt out of this survey, call the Freephone number on **1800 314 093** or email us at info@yourexperience.ie.

How to contact us:

If you have any questions about the survey, please call our Freephone number on 1800 314 093 (Monday-Friday, 9am-5pm), visit www.yourexperience.ie or email us at info@yourexperience.ie.

Information on further support

Taking part in the survey may cause you to reflect on your care and birth experience. If you want to discuss the details about your care and birth experience you can contact the hospital or service you attended to organise an appointment at their Birth Reflections Clinic. You can also contact the Patient Advocacy Service, which can provide information and support to patients who want to make a formal complaint about their care, please call **0818 293 003** or visit **www.patientadvocacyservice.ie**.

Survey Code:

Improving care experiences together

Health Information and Quality Authority | HSE | An Roinn Sláinte Department of Health

Stage 1 - Care while you were pregnant (Antenatal care)

The following section asks about your experiences of care **during your pregnancy.**

Q1. In your most recent pregnancy, did you give birth to.....

1. ☐ A single baby
2. ☐ Twins
3. ☐ Triplets, quads or more

Q2. Who was the first healthcare professional you saw when you were pregnant?

1. ☐ General Practitioner (GP) or family doctor
2. ☐ Midwife at maternity service
3. ☐ Obstetrician (doctor or consultant doctor) at maternity service
4. ☐ Healthcare professional at private scan clinic
5. ☐ Other

Q3. Were you offered a choice about the type of maternity care you would receive?

1. ☐ Yes
2. ☐ I was not offered any choices
3. ☐ I was not offered any choices due to medical reasons
4. ☐ Don't know or can't remember

Q4. What type of maternity care did you have for your regular check-ups in pregnancy? ***(If you had more than one type of care, please choose the option where you had most of your care in pregnancy)***

PUBLIC (FREE) CARE:

1. ☐ Obstetrician (doctor or consultant doctor) clinic at the hospital
2. ☐ Midwife clinic at the hospital
3. ☐ 'Domino scheme': midwife-led care in community clinic
4. ☐ Community midwife clinic in (or near) your local community
5. ☐ Midwife clinic at midwifery-led unit *(only available at Cavan General and Our Lady of Lourdes Hospital Drogheda)*
6. ☐ Self-employed community midwife care *(as part of the HSE Home Birth Service)*

SEMI-PRIVATE CARE (Dublin maternity hospitals only):

7. ☐ Obstetrician (doctor or consultant doctor) care at semi-private clinic at the hospital

PRIVATE CARE:

8. ☐ Obstetrician (doctor or consultant doctor) care at private clinic at the hospital

OTHER:

9. ☐ I had my pregnancy check-ups in another country → **GO TO Q18.**
10. ☐ I did not have any check-ups in pregnancy → **GO TO Q18.**
11. ☐ I attended my pregnancy check-ups at another service (for example a private midwife service, not provided by the HSE)

Q5. **Did you receive enough information about the types of maternity care available to you?**

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ I did not want or need this information
- 5 ☐ Don't know or can't remember

Q6. **Did you have some of your regular antenatal care appointments and check-ups in pregnancy with your GP? (This is sometimes referred to as 'shared care' or 'combined care')**

- 1 ☐ Yes, I had some of my regular check-ups in pregnancy with my GP
- 2 ☐ No, I chose not to have any regular check-ups in pregnancy with my GP → **GO TO Q8.**
- 3 ☐ No, my GP does not provide regular check-ups in pregnancy → **GO TO Q8.**
- 4 ☐ No, I do not have a GP → **GO TO Q8.**

Q7. **Did you feel that there was good communication about your care in pregnancy between the maternity service (midwives, doctors) and your GP?**

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ Don't know or can't remember
- 5 ☐ I did not have any check-ups with a GP

Q8. **During your pregnancy were you offered any antenatal classes or courses?**

- 1 ☐ Yes, and I did them
- 2 ☐ Yes, but I did not do them
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q9. **Thinking about the care you received *during your pregnancy*, did you receive enough information about physical changes in your body?**

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ I did not want or need this information
- 5 ☐ Don't know or can't remember

Q10. **Thinking about the care you received *during your pregnancy*, did you receive enough information about nutrition during pregnancy?**

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ I did not want or need this information
- 5 ☐ Don't know or can't remember

Q11. **Thinking about the care you received *during your pregnancy*, did you receive enough information about the impact of smoking, alcohol or drug use on you and your baby?**

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ I did not want or need this information
- 5 ☐ Don't know or can't remember

Q12. **Thinking about the care you received *during your pregnancy*, were you given enough support for your mental health?**

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ I did not want or need support
- 5 ☐ Don't know or can't remember

Q13. **Thinking about the care you received *during your pregnancy*, did you feel that you were involved in decisions about your care?**

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q14. **Thinking about the care you received *during your pregnancy*, did you feel that you were treated with respect and dignity?**

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q15. **Thinking about the care you received *during your pregnancy*, did you have confidence and trust in the healthcare professionals caring for you?**

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q16. **Thinking about the care you received *during your pregnancy*, were your questions answered in a way that you could understand?**

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ I did not have any questions
- 5 ☐ Don't know or can't remember

Q17. **Thinking about the care you received *during your pregnancy*, did you have a healthcare professional that you could talk to about your worries and fears?**

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ I did not need to talk to a healthcare professional in pregnancy about worries or fears
- 5 ☐ Don't know or can't remember

Stage 2 - Care during your labour and birth

The following section asks about your experiences of care **around the time of your labour and birth** of your baby. 'Birth' includes babies born vaginally or by caesarean.

Q18. **Thinking about the birth of your baby, was your labour induced?**

- 1 ☐ Yes
- 2 ☐ No
- 3 ☐ Don't know or can't remember

Q19. What type of birth did you have?

- 1 ☐ A vaginal birth (no forceps or ventouse suction cup)
- 2 ☐ An assisted vaginal birth (with forceps or ventouse suction cup)
- 3 ☐ A planned caesarean birth
- 4 ☐ An unplanned caesarean birth

Q20. Thinking about the care you received *during your labour and birth*, did you feel that you were involved in decisions about your care?

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q21. Thinking about the care you received *during your labour and birth*, were your questions answered in a way that you could understand?

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ I did not have any questions
- 5 ☐ Don't know or can't remember

Q22. Before you had any tests, procedures and treatments, were the benefits and risks explained to you in a way you could understand?

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q23. Were you (and or your partner or companion) left alone by healthcare professionals at a time when it worried you? *Please tick all that apply*

- 1 ☐ Yes, during early labour
- 2 ☐ Yes, during the later stages of labour
- 3 ☐ Yes, during the birth
- 4 ☐ Yes, shortly after the birth
- 5 ☐ No

Q24. Do you think your healthcare professionals did everything they could to help manage your pain during labour and birth?

- 1 ☐ Yes, definitely
- 2 ☐ Yes, to some extent
- 3 ☐ No
- 4 ☐ I did not want or need any help
- 5 ☐ Not relevant to my situation
- 6 ☐ Don't know or can't remember

Q25. Was your partner or companion involved in your care during labour and birth as much as you wanted them to be?

- 1 ☐ Yes
- 2 ☐ No
- 3 ☐ They did not want to be involved or they could not be involved
- 4 ☐ I did not want them to be involved
- 5 ☐ I did not have a partner or companion with me

Q26. Did you have confidence and trust in the healthcare professionals caring for you *during your labour and birth*?

- 1 ☐ Yes, always
- 2 ☐ Yes, sometimes
- 3 ☐ No
- 4 ☐ Don't know or can't remember

Q27. **Shortly after your baby was born, did you have the opportunity to ask the midwives or doctors questions about your labour and the birth?**

1. ☐ Yes, definitely
2. ☐ Yes, to some extent
3. ☐ No
4. ☐ I did not have any questions
5. ☐ Don't know or can't remember

Stage 3 - Care in hospital after the birth of your baby

If you had a home birth and did not go to hospital, please GO TO Q36.

The following section asks about your experiences of care **in hospital after the birth of your baby.**

Q28. **If you needed assistance while you were in hospital after the birth, were you able to get a healthcare professional to assist you when you needed it?**

1. ☐ Yes, always
2. ☐ Yes, sometimes
3. ☐ No
4. ☐ I did not need any assistance
5. ☐ Don't know or can't remember

Q29. **While you were in hospital after the birth of your baby, do you think your healthcare professionals did everything they could to help manage your pain?**

1. ☐ Yes, definitely
2. ☐ Yes, to some extent
3. ☐ No
4. ☐ I did not need any help
5. ☐ Don't know or can't remember

Q30. **While you were in hospital after the birth of your baby, did you feel that you were involved in decisions about your care?**

1. ☐ Yes, always
2. ☐ Yes, sometimes
3. ☐ No
4. ☐ Don't know or can't remember

Q31. **While you were in hospital after the birth of your baby, did you feel that your questions were answered in a way that you could understand?**

1. ☐ Yes, always
2. ☐ Yes, sometimes
3. ☐ No
4. ☐ I did not have any questions
5. ☐ Don't know or can't remember

Q32. **While you were in hospital after the birth of your baby, did you have a healthcare professional that you could talk to about your worries and fears?**

1. ☐ Yes, always
2. ☐ Yes, sometimes
3. ☐ No
4. ☐ I did not need to talk to a healthcare professional about any worries or fears
5. ☐ Don't know or can't remember

Q33. **Before you were discharged from hospital, were you given information about your own physical recovery?**

1. ☐ Yes, definitely
2. ☐ Yes, to some extent
3. ☐ No
4. ☐ No, but I did not need this information
5. ☐ Don't know or can't remember

Q34. **Before you were discharged from hospital, were you told who to contact if you were worried about your health or your baby's health after you left hospital?**

1 ☐ Yes
2 ☐ No
3 ☐ Don't know or can't remember

Q35. **Thinking about the care you received in hospital after the birth of your baby, did you feel that you were treated with respect and dignity?**

1 ☐ Yes, always
2 ☐ Yes, sometimes
3 ☐ No
4 ☐ Don't know or can't remember

Stage 4 – Specialised care for your baby

After birth some babies need specialist care (for example, help with breathing) and are admitted to a neonatal unit. The following section asks about your experiences of care if **your baby was admitted to a neonatal unit.**

Q36. **Following the birth, did your baby spend any time in the neonatal unit?**

1 ☐ Yes → **GO TO Q37.**
2 ☐ No → **GO TO Q39.**
3 ☐ Don't know or can't remember → **GO TO Q39.**

Q37. **While your baby was in the neonatal unit, did you receive enough emotional support from healthcare professionals?**

1 ☐ Yes, always
2 ☐ Yes, sometimes
3 ☐ No
4 ☐ I did not want or need any emotional support
5 ☐ Don't know or can't remember

Q38. **Overall, how would you rate your experience of the care your baby received in the neonatal unit?**

I had a very poor experience — I had a very good experience

0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐

Stage 5 – Feeding your baby

The following section asks about your experiences of care in terms of **feeding your baby.**

Q39. **Did your healthcare professionals discuss with you the different options for feeding your baby?** ***Please tick all that apply***

1 ☐ Yes, during pregnancy
2 ☐ Yes, during labour or immediately after birth
3 ☐ Yes, after birth while in hospital
4 ☐ Yes, after birth while at home or in the community
5 ☐ No
6 ☐ I did not want or need discussion of different options
7 ☐ Don't know or can't remember

Stage 6 - Care at home and in the community after the birth of your baby

The following section asks about your experiences of care when you were **visited at home or seen by a healthcare professional in the community after the birth of your baby.**

Q45. ***After the birth of your baby,*** **did you meet with any of the following healthcare professionals?** ***Please tick all that apply***

- ☐ 1 Postnatal community midwife at home
- ☐ 2 Postnatal community midwife at a community clinic (including a Postnatal Hub)
- ☐ 3 Public Health Nurse at home
- ☐ 4 Public Health Nurse at a community clinic
- ☐ 5 GP
- ☐ 6 Obstetrician (doctor or consultant doctor) at hospital clinic
- ☐ 7 Midwives and or paediatricians at hospital baby clinic
- ☐ 8 Other professionals
- ☐ 9 None of the above

Q46. ***After the birth of your baby,*** **if you contacted a healthcare professional were you given the help you needed?**

- ☐ 1 Yes, always
- ☐ 2 Yes, sometimes
- ☐ 3 No
- ☐ 4 I did not need any help
- ☐ 5 Don't know or can't remember

Q47. **Did you feel that your questions were answered by the public health nurse in a way that you could understand?**

- ☐ 1 Yes, always
- ☐ 2 Yes, sometimes
- ☐ 3 No
- ☐ 4 I did not have any questions
- ☐ 5 I did not see a Public Health Nurse → **GO TO Q49.**
- ☐ 6 Don't know or can't remember

Q48. **Did you receive help and advice from the public health nurse about your baby's health and progress?**

- ☐ 1 Yes, definitely
- ☐ 2 Yes, to some extent
- ☐ 3 No
- ☐ 4 I did not need any help
- ☐ 5 Don't know or can't remember

Q49. **Thinking about the care you received at the postnatal check-up, around 6 weeks after the birth, did the GP spend enough time talking to you about your own physical health and recovery?**

- ☐ 1 Yes, definitely
- ☐ 2 Yes, to some extent
- ☐ 3 No
- ☐ 4 I have not had a postnatal check-up with a GP → **GO TO Q51.**
- ☐ 5 Don't know or can't remember

Q50. **Did you feel that your questions were answered by the GP in a way that you could understand?**

1☐ Yes, always
2☐ Yes, sometimes
3☐ No
4☐ I did not have any questions
5☐ Don't know or can't remember

Q51. **Were you given enough support for your mental health *after the birth of your baby*?**

1☐ Yes, definitely
2☐ Yes, to some extent
3☐ No
4☐ I did not want or need support
5☐ Don't know or can't remember

Q52. **Did you receive support for your mental health from any of the following healthcare professionals *during your pregnancy and or after the birth? Please tick all that apply***

1☐ GP
2☐ Public health nurse
3☐ Midwife
4☐ Obstetrician
5☐ Perinatal mental health midwife
6☐ Perinatal mental health nurse
7☐ Psychiatrist
8☐ Psychologist
9☐ Mental health social worker
10☐ Other professionals
11☐ None of the above

Q53. **Thinking about the care you received at home or in the community *after the birth of your baby*, did you have confidence and trust in the healthcare professionals caring for you?**

1☐ Yes, always
2☐ Yes, sometimes
3☐ No
4☐ Don't know or can't remember

Q54. **Thinking about the care you received at home or in the community *after the birth of your baby*, did you feel that you were involved in decisions about your health?**

1☐ Yes, always
2☐ Yes, sometimes
3☐ No
4☐ Don't know or can't remember

Q55. **Thinking about the care you received at home or in the community *after the birth of your baby*, did you feel that you were treated with respect and dignity?**

1☐ Yes, always
2☐ Yes, sometimes
3☐ No
4☐ Don't know or can't remember

Stage 7 – Overall Care

Q56. **Thinking about your overall care, were your decisions about your maternity care respected by healthcare staff?**

1☐ Yes, always
2☐ Yes, sometimes
3☐ No

Q57. **Thinking about your overall care, if you wanted to give feedback or make a complaint, did you know how and where to do so?**

1 ☐ Yes

2 ☐ No

3 ☐ I did not wish to give feedback or make a complaint

Q58. **Overall, how would you rate your experience of the care you and your baby received during pregnancy, labour and birth and after your baby was born?**

I had a very poor experience — I had a very good experience

0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐

Q59. **What was particularly good about your maternity care?**

Q60. **Was there anything that could be improved?**

Q61. **Were there any other important parts of your maternity care experience that are not covered by the questions in this survey?**

Stage 8 – You and your household

The following questions will help us to describe the women taking part in the survey and to find out whether or not the care offered to women is the same regardless of their background or circumstances.

Q62. How many babies have you given birth to before this pregnancy?

1 ☐ None
2 ☐ 1 or 2
3 ☐ 3 or more

Q63. What is your ethnic group?

White:

1 ☐ Irish
2 ☐ Irish Traveller
3 ☐ Roma
4 ☐ Any other White background

Black or Black Irish:

5 ☐ African
6 ☐ Any other Black background

Asian or Asian Irish:

7 ☐ Chinese
8 ☐ Indian/Pakistani/Bangladeshi
9 ☐ Any other Asian background

Other, including mixed group/background:

10 ☐ Arab
11 ☐ Mixed, *please specify*

12 ☐ Other, *please write your ethnic group here:*

Q.64 Do you have any of the following on a long-term basis?
Please tick all that apply

1 ☐ Blindness or a serious vision impairment
2 ☐ Deafness or a serious hearing impairment
3 ☐ A condition that substantially limits one or more basic physical activities
4 ☐ An intellectual disability
5 ☐ Difficulty in learning, remembering or concentrating
6 ☐ Mental health, psychological or emotional condition
7 ☐ Difficulty in dressing, bathing or getting around inside the home
8 ☐ Difficulty in going outside home alone
9 ☐ Difficulty in working or attending school or college
10 ☐ Difficulty in taking part in other activities
11 ☐ Other disability, including chronic illness
12 ☐ None of the above

THANK YOU FOR YOUR HELP WITH THIS VERY IMPORTANT NATIONAL SURVEY

Appendix 2

Description of HSE Local Health Offices by Health Region

Health Region	HSE Local Health Office
HSE Dublin and Midlands	Laois and Offaly Longford/Westmeath Dublin South West Dublin West Dublin South City Kildare/West Wicklow
HSE Dublin and North East	Cavan/ Monaghan Louth Meath Dublin North Dublin North Central Dublin North West
HSE Mid West	Clare Limerick Tipperary North/ East Limerick
HSE Dublin and South East	Carlow and Kilkenny Dublin South East Dun Laoghaire Tipperary South Waterford Wexford Wicklow
HSE South West	Cork North Cork North Lee Cork South Lee Cork West Kerry
HSE West and North West	Donegal Sligo/ Leitrim /West Cavan Mayo Galway Roscommon

Appendix 3

2025 operational outcomes by health region and individual maternity hospitals/units

Health region/Hospital	Total eligible	Deceased	Opted out	No response	Completed (paper)	Completed (online)	Response rate
All respondents	**8145**	**1**	**6**	**4785**	**0**	**3354**	**42%**
HSE Dublin and Midlands	**1510**	**1**	**1**	915	**0**	**594**	40%
Coombe Hospital	1004	1	0	616	0	388	39%
Regional Hospital Mullingar	283	0	0	180	0	103	38%
Midland Regional Hospital Portlaoise	212	0	1	115	0	96	46%
Home Birth	11	0	0	4	0	7	64%
HSE Dublin and North East	**1882**	**0**	**1**	**1102**	**0**	**779**	**42%**
Rotunda Hospital Dublin	1280	0	1	767	0	512	41%
Our Lady of Lourdes Hospital	418	0	0	230	0	188	46%
Cavan and Monaghan Hospitals	184	0	0	105	0	79	43%
HSE Dublin and South East	**1870**	**0**	**1**	**1079**	**0**	**790**	**43%**
National Maternity Hospital	1086	0	1	645	0	440	41%
University Hospital Waterford	241	0	0	132	0	109	47%
Wexford General Hospital	222	0	0	131	0	91	42%
St Lukes General Hospital	210	0	0	112	0	98	48%
Tipperary University Hospital	98	0	0	55	0	43	45%
National Home Birth Services	13	0	0	4	0	9	82%
HSE Mid West	**563**	**0**	**1**	**365**	**0**	**197**	**36%**
University Maternity Hospital Limerick	563	0	1	365	0	197	36%
HSE South West	**1111**	**0**	**1**	**641**	**0**	**469**	**43%**
Cork University Maternity Hospital	941	0	0	542	0	399	43%
University Hospital Kerry	162	0	1	98	0	63	40%
National Home Birth Services	8	0	0	1	0	7	88%

HSE West and North West	**1209**	**0**	**1**	**683**	**0**	**525**	**44%**
Galway University Hospitals	417	0	0	247	0	170	42%
Mayo University Hospital	204	0	0	117	0	87	43%
Letterkenny University Hospital	208	0	0	113	0	95	46%
Portiuncula University Hospital	205	0	1	105	0	99	49%
Sligo University Hospital	173	0	0	101	0	72	43%
National Home Birth Services	2	0	0	0	0	2	100%

Appendix 4

2025 question wording, response options, corresponding scores and mapping to stages of care

Question		Response options with corresponding scores in parentheses
Care while pregnant (Antenatal care)		
Q5	Did you receive enough information about the types of maternity care available to you?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need this information (Missing) Don't know or can't remember (Missing)
Q7	Did you feel that there was good communication about your care in pregnancy between the maternity service (midwives, doctors) and your GP?	Yes, definitely (10) Yes, to some extent (5) No (0) Don't know or can't remember (Missing) I did not have any check-ups with a GP (Missing)
Q9	Thinking about the care you received during your pregnancy, did you receive enough information about physical changes in your body?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need this information (Missing) Don't know or can't remember (Missing)
Q10	Thinking about the care you received during your pregnancy, did you receive enough information about nutrition during pregnancy?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need this information (Missing) Don't know or can't remember (Missing)
Q11	Thinking about the care you received during your pregnancy, did you receive enough information about the impact of smoking, alcohol or drug use on you and your baby?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need this information (Missing) Don't know or can't remember (Missing)
Q12	Thinking about the care you received in pregnancy, were you given enough support for your mental health?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need support (Missing) Don't know or can't remember (Missing)
Q13	Thinking about the care you received during your pregnancy, did you feel that you were involved in decisions about your care?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q14	Thinking about the care you received during your pregnancy, did you feel that you were treated with respect and dignity?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)

Q15	Thinking about the care you received during your pregnancy, did you have confidence and trust in the healthcare professionals caring for you?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q16	Thinking about the care you received during your pregnancy, were your questions answered in a way that you could understand?	Yes, always (10) Yes, sometimes (5) No (0) I did not have any questions (Missing) Don't know or can't remember (Missing)
Q17	Thinking about the care you received during your pregnancy, did you have a healthcare professional that you could talk to about your worries and fears?	Yes, always (10) Yes, sometimes (5) No (0) I did not need to talk to a healthcare professional in pregnancy about worries or fears (Missing) Don't know or can't remember (Missing)
Labour and Birth		
Q20	Thinking about the care you received during your labour and birth, did you feel that you were involved in decisions about your care?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q21	Thinking about the care you received during your labour and birth, were your questions answered in a way that you could understand?	Yes, always (10) Yes, sometimes (5) No (0) I did not have any questions (Missing) Don't know or can't remember (Missing)
Q22	Before you had any tests, procedures and treatments, were the benefits and risks explained to you in a way you could understand?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q24	Do you think your health care professionals did everything they could to help manage your pain during labour and birth?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need any help (Missing) Not relevant to my situation (Missing) Don't know or can't remember (Missing)
Q25	Was your partner or companion involved in your care during labour and birth as much as you wanted them to be?	Yes (10) No (0) They did not want to be involved or they could not be involved (Missing) I did not want them to be involved (Missing) I did not have a partner or companion with me (Missing)
Q26	Did you have confidence and trust in the healthcare professionals caring for you during your labour and birth?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)

Q27	Shortly after your baby was born, did you have the opportunity to ask the midwives or doctors questions about your labour and the birth?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not have any questions (Missing) Don't know or can't remember (Missing)
Care in hospital after the birth		
Q28	If you needed assistance while you were in hospital after the birth, were you able to get a healthcare professional to assist you when you needed it?	Yes, always (10) Yes, sometimes (5) No (0) I did not have any assistance (Missing) Don't know or can't remember (Missing)
Q29	While you were in hospital after the birth of your baby, do you think your healthcare professionals did everything they could to help manage your pain?	Yes, definitely (10) Yes, to some extent (5) No (0) Don't know or can't remember (Missing)
Q30	While you were in hospital after the birth of your baby, did you feel that you were involved in decisions about your care?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q31	While you were in hospital after the birth of your baby, did you feel that your questions were answered in a way that you could understand?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not have any questions (Missing) Don't know or can't remember (Missing)
Q32	While you were in hospital after the birth of your baby, did you have a healthcare professional that you could talk to about your worries and fears?	Yes, always (10) Yes, sometimes (5) No (0) I did not need to talk to a healthcare professional about any worries or fears (Missing) Don't know or can't remember (Missing)
Q33	Before you were discharged from hospital, were you given information about your own physical recovery?	Yes, definitely (10) Yes, to some extent (5) No (0) No, but I did not need this information (Missing) Don't know or can't remember (Missing)
Q34	Before you were discharged from hospital, were you told who to contact if you were worried about your health or your baby's health after you left hospital?	Yes, always (10) No (0) Don't know or can't remember (Missing)
Q35	Thinking about the care you received in hospital, did you feel that you were treated with respect and dignity?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)

Specialised care		
Q37	While your baby was in the neonatal unit, did you receive enough emotional support from healthcare professionals?	Yes, always (10) Yes, sometimes (5) No (0) I did not want or need any emotional support (Missing) Don't know or can't remember (Missing)
Q38	Overall, how would you rate your experience of the care your baby received in the neonatal unit?	Participant selects one number between 0 and 10, where 0 represents a poor experience and 10 represents a very good experience.
Feeding		
Q41	Were your decisions about how you wanted to feed your baby respected by your healthcare professionals?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q42	Did your health care professionals give you adequate support and encouragement with feeding your baby, shortly after your baby was born (either in the hospital or at home if you had a home birth)?	Yes, always (10) Yes, sometimes (5) No (0) I did not want or need support and encouragement (Missing) Don't know or can't remember (Missing)
Q43	In the days and weeks after your baby was born, did your healthcare professionals give you adequate support and encouragement with feeding your baby at home?	Yes, always (10) Yes, sometimes (5) No (0) I did not want or need support and encouragement (Missing) Don't know or can't remember (Missing)
Care at home after the birth		
Q46	After the birth of your baby, if you contacted a healthcare professional were you given the help you needed?	Yes, always (10) Yes, sometimes (5) No (0) I did not need any help (Missing) Don't know or can't remember (Missing)
Q47	Did you feel that your questions were answered by the public health nurse in a way that you could understand?	Yes, always (10) Yes, sometimes (5) No (0) I did not have any questions (Missing) I did not see a public health nurse (Missing) Don't know or can't remember (Missing)
Q48	Did you receive help and advice from the public health nurse about your baby's health and progress?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not need any help (Missing) Don't know or can't remember (Missing)

Q49	Thinking about the care you received at the postnatal check-up, around 6 weeks after the birth, did the GP spend enough time talking to you about your own physical health and recovery?	Yes, definitely (10) Yes, to some extent (5) No (0) I have not had a postnatal check-up with a GP (Missing) Don't know or can't remember (Missing)
Q50	Did you feel that your questions were answered by the GP in a way that you could understand?	Yes, always (10) Yes, sometimes (5) No (0) I did not have any questions (Missing) Don't know or can't remember (Missing) Don't know or can't remember (Missing)
Q51	Were you given enough support for your mental health after the birth of your baby?	Yes, definitely (10) Yes, to some extent (5) No (0) I did not want or need support (Missing) Don't know or can't remember (Missing)
Q53	Thinking about the care you received at home or in the community after the birth of your baby, did you have confidence and trust in the healthcare professionals caring for you?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q54	Thinking about the care you received at home or in the community after the birth of your baby, did you feel that you were involved in decisions about your health?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Q55	Thinking about the care you received at home or in the community after the birth of your baby, did you feel that you were treated with respect and dignity?	Yes, always (10) Yes, sometimes (5) No (0) Don't know or can't remember (Missing)
Overall care		
Q56	Thinking about your overall care, were your decisions about your maternity care respected by healthcare staff?	Yes, always (10) Yes, sometimes (5) No (0)
Q58	Overall, how would you rate your experience of the care you and your baby received during pregnancy, labour and birth and after your baby was born?	Participant selects one number between 0 and 10, where 0 represents a poor experience and 10 represents a very good experience.

Appendix 5

Guidelines for the redaction of qualitative comments

Example	Recommended redaction
Names and titles Dr. Mr. James, Mary Midwife Pat, Midwife O'Brien	 [Dr. Name] [Mr Name] [Name] [Midwife Name]
Gender Male midwife, male care assistant Female midwife	No redaction
Specialist Healthcare professionals Senior midwife, nurses, obstetrician, the doctors, maternity support worker, Anaesthetist, Physio, Dietician	No redaction
Specific grades of healthcare professional Junior doctor, the intern, student midwife	No redaction
Staff working in hospital Porter, "Tea lady", Cleaner	No redaction
Dates and Days & times Monday, Tues, etc. Weekend bank holiday weekend Was waiting between 7 and 9.30 24th Feb Time of birth (my baby was born at 16:02)	 No redaction [Date] [Time]
Departments & Wards Emergency Department Operating Theatre Labour ward Postnatal ward Ward name (e.g. James's Ward) Recovery Isolation AMAU (Acute medical assessment unit)	 No redaction
Religions, Nationality Muslim doctor, Indian midwife, Pakistani etc. Generic use of term like foreign	 [Rel] [Nat] [eth] No redaction
Hospital Names The Coombe, Holles St, etc.	No redaction
Location identifiers The consultant from Donegal Location of where the person themselves lives, e.g. "I live in Skerries"	[Location]

Procedures and Operations Caesarean/C-section Epidural Induction drip	No redaction
Specific therapies Intravenous drip, fasting on IV fluids, etc.	No redaction
Conditions Epilepsy High blood pressure Gestational diabetes	No redaction
Medication Specific drug doses E.g. I was put on oxynorm daily for one week	No redaction
Illegible text	[...] and continue to the next legible part of the comment. Aim to get a balance between capturing the maximum amount of information possible and time spent on deciphering handwriting.
Any bad, racist or derogatory remarks are typed as you see them.	Redact in the normal way (i.e. if nationality mentioned, redact etc.) but type in the precise remarks as you see them.
Correcting spelling mistakes	Correction should be of minor and obvious spelling mistakes e.g. their/there. This is to facilitate understanding and 'readability' of the qualitative data; it should in no way impact on meaning.
Other Wheelchairs and other medical devices Referring to number of children if the woman has > 4 children (has had > 4 births) Telephone number Age, "I am 22"	No redaction [Number] [Telephone number] [Age]

Appendix 6

Data Quality Statement – National Maternity Experience Survey 2025

1. Purpose

The National Maternity Experience Survey is committed to ensuring that the data it processes and publishes adheres to the five dimensions of good quality data.[8] The purpose of this statement is to provide transparency on the collection of National Maternity Experience Survey data and provide data users with information about the quality of National Maternity Experience Survey data. This will allow data users to make an informed decision about whether this data meets their needs.

2. Overview of data collection and remit

Data on patient experience is collected through eligible participants' responses to a survey. The survey asks people who have recently given birth in Ireland about the maternity care they received and includes structured tick-box questions as well as open-ended questions for comments. The findings of the survey are used to inform quality improvements in maternity care services in Ireland.

3. Data source

People who respond to the survey are the data source for the data that is collected on maternity care experience.

4. Overview of quality of data under each of the dimensions of data quality

This section provides an overview of how data quality is ensured, under each of the five dimensions of quality.

Relevance

The relevance of National Maternity Experience Survey data is ensured in the following ways:

- To ensure that data meets the needs of data users, the development of the original 2020 survey tool involved a systematic review of questionnaires to measure experiences of their maternity care, an international review of maternity care experience surveys, focus groups, a Delphi Study, and cognitive interviews with service-user representatives and healthcare professionals. Cognitive interviews were also carried out in 2025 to assess whether the questions were clear and appropriate.
- The input of healthcare professionals and representatives of people using maternity services is sought in the implementation and planning of the survey through their representation on governance groups (NMES Advisory Group and Steering Group). This ensures that the needs of data-users are

embedded into the design of surveys and the delivery of the survey results.

- In line with the Quality Assurance Framework of the National Care Experience Programme, a review of each survey is carried out after its completion. This review includes consulting with stakeholders, such as those who use the survey findings for quality improvement, to gather their feedback on all aspects of the survey, including the relevance of the survey data.
- For the 2025 survey, the questionnaire was reviewed and updated in order to reduce the number of questions to meet best-practice for online surveys, to incorporate feedback from stakeholders and survey participants in 2020 about the survey questions, and to ensure the 2025 survey questions reflected current priorities in policy and practice. Following this review, the number of questions on the 2025 survey questionnaire was reduced from 68 to 64.

Accuracy and reliability

The accuracy and reliability of the data is ensured in the following ways:

- Survey responses, once uploaded onto the online reporting tool are quality-assured against the expected number of responses. The coding, or categorisation, of survey responses is also quality-assured, through spot-check verification.
- The results of all data analyses are quality-assured to ensure that they reflect the responses received from survey participants.

Timeliness and punctuality

Timeliness and punctuality are ensured in the following ways:

- Anonymised survey responses are uploaded to an online reporting platform once received by the data processor. Once five or more responses have been received, these are then disclosed to nominated hospital staff working in quality improvement, who have access to this platform and can view the data as close as possible to its point of collection.
- The findings of the survey are published at www.yourexperience.ie within five months of the closure of the survey.

Coherence and comparability

The coherence and comparability of the data is ensured in the following ways:

- The National Maternity Experience Survey uses one survey tool to measure maternity experience across Ireland's 14 public maternity units and five maternity hospitals.
- The survey includes questions used in maternity surveys conducted in other

countries, facilitating international comparisons. In addition, there are a number of questions in common with the National Inpatient Experience Survey, which allows for comparison of experiences across the acute inpatient and maternity care settings.

- Anonymised survey responses are uploaded to a publicly accessible, online reporting platform at www.yourexperience.ie, where the data can be contrasted and compared:
    - by question
    - by year
    - by maternity hospital/unit, health region and nationally.

Accessibility and clarity

The accessibility and clarity of the data is ensured in the following ways:

- The findings of the survey are presented in a traditional report format with graphs and textual explanations to appeal to different types of learners.
- Staff analysing the data and reporting the survey findings undergo data visualisation training, to ensure that the findings of the survey are reported in an accessible and clear format.
- All outputs, such as the 2025 National Maternity Experience Survey National Report, are quality assured to ensure that they adhere to NALA (National Adult Literacy Agency) Standards and are therefore reported in plain English.
- Survey findings are accessible through various platforms, such as an online reporting tool for nominated hospital staff and a public-facing reporting tool available at www.yourexperience.ie.
- A Data Access Request Policy and form are available for people who wish to access and use the data for research purposes.

5. Limitations of the survey

Comparability

The survey questionnaire was specifically developed to measure the experience of maternity care in Ireland and can only be compared with maternity experience surveys internationally on a question-by-question basis.

Accessibility

The findings of surveys are made publicly available at www.yourexperience.ie. Reports are published at a national and local level on a publicly available online

reporting tool. A service provider that receives less than five responses will not receive access to the data to reduce the risk of identifying participants.

Conclusion

The National Care Experience Programme is committed to high-quality data which is exemplified by meeting the five dimensions of data quality. The Programme Team will continually review these dimensions to provide assurance of the quality of the data for the National Maternity Experience Survey.

Suirbhé Náisiúnta ar an Eispéireas Máithreachais | National Maternity Experience Survey

Improving care experiences together

Health Information and Quality Authority
An Údarás Um Fhaisnéis agus Cáilíocht Sláinte

HSE

mhc mental health commission

An Roinn Sláinte
Department of Health