

Patient Perspectives

Experiences of maternity care in NSW public hospitals

January to December 2015

BUREAU OF HEALTH INFORMATION

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Table of contents

Foreword	2
Key findings	4
Summary	5
Results at a glance	7
Setting the scene	10
SECTION 1: Aspects of care	18
Overall experience of care	19
Access and timeliness	21
Communication and information	23
Respect and dignity	25
Engagement and participation	27
Comprehensive and whole-person care	29
Coordination and continuity	31
Assistance and responsiveness	33
Cleanliness and hygiene	35
Confidence and trust	37
Patient-reported outcomes	39
SECTION 2: Stages of maternity care	42
Four stages of care – maternity specific questions	43
Antenatal visits: Access and continuity	45
Antenatal visits: Screening and prevention	47
Experiences of labour and birth	49
Postnatal hospital care	51
Follow-up care after leaving the hospital	53
SECTION 3: Comparative analyses	56
Local health district overview	57
Comparisons by patient characteristics	61
Comparisons by parity: First or subsequent births	63
Comparisons by type of birth: Vaginal or caesarean section	65
Comparisons outside NSW	67
Appendices	70
References	91
Acknowledgements	92

Foreword

Childbirth sets in motion a series of firsts and new life experiences. For the newborn, it marks the first breath, touch and impression of the world. For mothers, their partners and families – regardless of whether they are meeting their first, second or subsequent baby – it marks a moment of profound change. Birth is a defining life experience that comes with many expectations, hopes, worries and fears – one that brings joy but also comes with its share of challenges.

For many women, pregnancy and childbirth represent their first meaningful and sustained interaction with the hospital system. Their experiences can significantly influence future expectations about, confidence in, and willingness to approach healthcare providers and the broader healthcare system. Services delivered during pregnancy and birth inform and engage women, support families and aim to set babies on a life course that is long and healthy. From a public health perspective, maternity care represents a great opportunity to develop knowledge, skills and capabilities of parents, preparing them to respond to their child's healthcare needs, as well as their own.

This edition of *Patient Perspectives* looks at elements of care provided to women during various stages of their maternity journey – from antenatal care, care during labour and birth, postnatal care in hospital and follow-up care at home. The report draws on data collected through a survey of women whose babies were born in a public hospital in NSW. Using a questionnaire developed in collaboration with the Kolling Institute in Sydney, the survey helps assess whether the right care was provided, if it was provided in the right way, and whether it met the expectations and needs of women and their growing families. Maternity patients are, in some ways, a unique group – young and generally in good health. The tailored questionnaire allowed us to assess the extent to which some key elements of evidence based care were provided to women and whether their expectations were met.

At the same time, to a great extent, maternity patients are no different from other patient groups. There are some fundamental aspects of care that indelibly shape patients' experiences – issues such as whether they were informed about their care, engaged in decision-making, and treated with respect.

Patient surveys provide a unique perspective on the healthcare system that can only come from asking people about their personal experience. They are an important way to gauge the extent to which maternity-specific and more generic aspects of care were received by patients across hospitals and geographical regions – revealing opportunities to improve care for women and their families.

Dr Jean-Frédéric Lévesque

Chief Executive, Bureau of Health Information

10 key findings

- 1 A statewide survey of 4,739 women who gave birth in a NSW public hospital in 2015 shows that most had good experiences of maternity care – 79% said they would speak highly about the hospital where they had their baby. Women responded more positively about their experiences during labour and birth; and less positively about postnatal hospital care – a finding consistent with surveys in other jurisdictions.
- 2 Access to important elements of care, within recommended timeframes, differed. For example, 40% of women said they had their first antenatal appointment before the 14th week of pregnancy. Administrative records for the same indicator show that among public hospital births, 57% of women received antenatal care before 14 weeks. More positively, 95% of women said they saw a midwife or nurse in the two weeks after they left hospital. Most (80%) said their length of stay in hospital was 'about right' however 13% said it was 'too short'.
- 3 Most women received key information and advice about safe sleeping for their baby. However, almost three in 10 women said they were not given advice during antenatal visits about healthy weight gain; and around one in 10 were not told about the risks of alcohol consumption; or exposure to tobacco smoke.
- 4 In line with current best practice, almost all women had skin to skin contact with their baby shortly after birth. A high proportion of women about nine in 10 said they were given enough privacy during labour and birth; and received breastfeeding support.
- 5 Most women said they were engaged in decisions about their care about seven in 10 said that during labour and birth they were 'definitely' involved in decisions (as much as they wanted to be); and a similar proportion said they were 'definitely' engaged in decisions about their discharge home.
- 6 In terms of patient-reported outcomes, 22% of women said they experienced a complication while in hospital or shortly after they were discharged most commonly reported were infection (8%) and excessive bleeding (7%). A higher proportion of women who had a caesarean section said they experienced a complication than women who had a vaginal birth (28% and 20%).
- 7 Across local health districts (LHDs), responses from women who gave birth in Southern NSW were significantly more positive than NSW results; and those from women in South Western Sydney were less positive. At a hospital level, responses were more positive for Ryde and Wyong and less positive for Fairfield.
- 8 The question for which there was greatest variation across hospitals was related to time spent waiting to be seen at antenatal appointments. Other questions with marked variation addressed overall experience of postnatal care in hospital, and cleanliness of toilets and bathrooms.
- 9 Women who gave birth to their first baby, and women who had a caesarean section responded to many survey questions less positively.
- 10 There are a limited number of maternity surveys available for benchmarking. Three surveys (Queensland, England and Scotland) altogether contained 26 comparable questions and of these, NSW had the most positive result for six questions and the least positive for four questions.

Summary

This edition of *Patient Perspectives* describes the experiences of 4,739 women who gave birth in a NSW public hospital during 2015. It is based on 58 questions from the 2015 Maternity Care Survey which was sent to 13,311 women approximately three months after the birth of their baby. The response rate was 36%.

The report comprises three main sections:

- Section 1 focuses on women's overall experiences and generic aspects of care
- Section 2 focuses on maternity-specific care and addresses different stages of maternity care: antenatal care, labour and birth, postnatal hospital care, and follow-up care after leaving the hospital
- Section 3 focuses on differences across geography and patient characteristics (for example, first or subsequent birth, type of birth).

Section 1: Aspects of care

Most women had positive experiences of maternity care – 79% said they would 'speak highly' about the hospital where they gave birth.

On accessibility and timeliness, punctuality was mixed and only about half of women said they waited less than 30 minutes at antenatal check-ups. The majority of women (80%) said their length of stay in hospital was 'about right', although 13% said it was 'too short'.

Explanations and information were generally clear. Most women said health professionals 'always' explained things in a way they could understand during antenatal care (84%) and during labour and birth (85%), although fewer did so following the birth (74%).

Most women said they were 'always' treated with respect during labour and birth (88%); and said health professionals were 'always' polite and courteous during antenatal care (89%). When asked about engagement and participation, 71% of women said they were 'definitely' involved in decisions about labour and birth and 65% said they were 'definitely' involved in decisions, as much as they wanted to be, about their discharge from hospital.

For questions about coordination and continuity, almost two in 10 women (19%) said they were given conflicting information during labour and birth. In terms of assistance, during labour and birth 80% of women said they were 'always' able to get help when needed.

On cleanliness, most women said their ward or room was either 'very clean' (67%) or 'fairly clean' (29%) and 67% said they 'always' saw health professionals clean their hands before touching them or their baby.

More than eight in 10 women (84%) said they 'always' had confidence and trust in midwives and doctors during labour and birth. For patient-reported outcomes, 22% of women said they experienced a complication during or shortly after their hospital stay – this differed between women who had a vaginal birth (20%) and those who had a caesarean section (28%).

Section 2: Stages of maternity care

Antenatal care

The majority of women rated the antenatal care they received as either 'very good' (62%) or 'good' (31%). On specific elements of care, results were mixed:

- Less than half of women (40%) said they had their first antenatal appointment before the 14th week of pregnancy, although administrative data for public hospital births show this proportion to be 57%
- 91% were asked about how they were feeling emotionally during pregnancy – but only 60% said health professionals 'completely' discussed their worries or fears with them
- A small but significant proportion of women said they were not given advice about healthy weight gain (29%); the risks of alcohol consumption (13%) and exposure to tobacco smoke (13%)
- Almost all women (95%) were given or shown information about safe sleeping for their baby at some point during maternity care.

Labour and birth

Women were particularly positive about their overall experience of care during labour and birth, with 74% rating it 'very good' and 21% 'good'.

Two key elements of care were provided to most women for whom it was appropriate: 89% said they 'always' had enough privacy; and 96% said they had skin to skin contact with their baby shortly after birth. However, fewer (52%) were offered the option of being in a bath during labour. Other areas for improvement included:

- Among women with unrestricted mobility,
 69% said they were able to choose the most comfortable position during labour
- 68% of women 'definitely' had enough say about pain relief.

Postnatal hospital care

Responses about postnatal hospital care were generally less positive than those about other stages. However, most women did rate it as either 'very good' (56%) or 'good' (32%). A high proportion said they were told who to contact if they were worried about their own or their baby's health after they went home (93%); and midwives worked with them to show a good position for breastfeeding (90%).

Results were less positive regarding consistency of advice and information – 32% of women said they received conflicting advice about feeding their baby and the same proportion said they received conflicting advice about caring for themselves or their baby. Two in 10 women (20%) said their decisions about how to feed their baby were not always respected.

Follow-up care after leaving the hospital

Almost all women had a follow-up visit from a midwife or nurse in the first two weeks after they went home from hospital (95%); and were asked how they were feeling emotionally after the birth (98%). Most said the midwife or nurse who visited 'always' listened to them (90%); and they 'definitely' had enough time to ask questions (90%).

Section 3: Comparative analyses

Geography and organisations

Across local health districts (LHDs), responses from women in Southern NSW were more positive than the NSW result for 24 of the 58 survey questions, while those from South Western Sydney were less positive than NSW overall for 20 questions. At a hospital level, responses from women who gave birth in Ryde and Wyong hospitals were more positive than the NSW result for 43 and 39 questions respectively. Responses from women who gave birth in Fairfield hospital were less positive for 20 questions.

Hospital-level results varied most widely in the proportion of women who waited less than 30 minutes to be seen at antenatal check-ups (16% to 100%); and who said toilets and bathrooms were 'very clean' (36% to 96%).

Patient characteristics

First-time mothers gave less positive responses than women who had given birth before to 13 questions – including those about overall experience, communication, engagement and participation, and coordination and continuity of care. Comparisons by type of birth show that women who had a caesarean section responded less positively to 22 questions – including those about care during labour and birth, involvement in decisions during labour and birth, and about assistance and complications.

International and national context

Maternity surveys in Queensland, England and Scotland included 26 questions suitable for benchmarking. Among questions with two or more comparators, NSW had the most positive result for six – including those about overall experience, access and timeliness, coordination and continuity, and communication. NSW had the least positive result for four questions – about physical environment, engagement and participation.

Results at a glance

An overview of the survey results at a NSW level is shown by the proportion of responses that were the most positive option or 'top category', organised into generic aspects of care and maternity specific questions (Figure i).

Figure i Percentage of women who selected the most positive response category, by aspect of care, NSW, 2015

		0	10	20	30	40	50	60	70	80	90	1
Aspect of care	Question	Res	pons	es								
	Overall, antenatal care was 'very good'											
Dverall	Overall, hospital care during labour and birth was 'very good')		
experience	Overall, hospital care after baby was born was 'very good'											
	Would 'speak highly' of maternity experience at the hospital to friends and family									•		
	Time spent travelling one way for antenatal care check-ups was 'under 30 mins'											
Access and	Time spent between arriving at antenatal check-ups and leaving was 'under 30 mins'			•								
imeliness	Time waited to be seen at antenatal check-ups was 'under 30 mins'						•					
	Length of stay in hospital was 'about right'									•		
	Health professionals providing antenatal care 'always' explained things in an understandable way)	
Communication and information	Midwives or doctors 'always' explained things in an understandable way during labour and birth									•		
	Health professionals 'always' explained things in an understandable way after birth of baby								•			
	Health professionals providing antenatal care were 'always' polite and courteous										•	
Respect and labour dignity 'Alway	Midwives or doctors 'always' introduced themselves during labour and birth 'Always' treated with respect and dignity during labour									•		
	and birth										•	
	'Always' given enough privacy in birth room or theatre										•	
	'Definitely' involved in decisions during labour and birth											
Engagement and participation	Birthing companion 'definitely' involved as much as they wanted to be during labour and birth											
	'Definitely' involved in decisions about discharge from hospital											
Comprehensive and whole-	Midwives or doctors were 'always' kind and caring during labour and birth											
person care	Health professionals were 'always' kind and caring after birth of baby											
	Did not receive conflicting information from midwives or doctors during labour and birth Did not receive conflicting information from health professionals									•		
Coordination and continuity	after birth of baby 'Completely' given enough information about caring for myself								•			
	and baby before leaving hospital Told who to contact if worried about my or baby's health							•			•	
	After discharge Health professionals 'completely' discussed worries or fears)
	during antenatal check-ups Midwives or doctors 'definitely' did everything to help manage							•		•		
Assistance and	pain during labour and birth 'Always' able to get assistance from midwives or doctors when											
esponsiveness	needed during labour and birth Midwife or doctor 'completely' discussed worries or fears									•		
	during labour and birth 'Always' able to get assistance or advice from health											
	professionals when needed after birth of baby								•			

Aspect of care	Question	Responses
	Wards or rooms used after birth of baby were 'very clean'	
Cleanliness and hygiene	Toilets and bathrooms used after birth of baby were 'very clean'	•
	'Always' saw health professionals clean their hands	
Confidence and trust	'Always' had confidence and trust in health professionals providing antenatal care 'Always' had confidence and trust in midwives or doctors	•
Patient-reported outcomes	during labour and birth Did not experience any complication or problem related to hospital care	
Antenatal visit	'Less than 14 weeks' pregnant at first antenatal care appointment Provided with a personal antenatal card (e.g. a Yellow Card)	•
	Health professionals updated personal antenatal card at every check-up	
	Health professionals advised about risks of consuming alcohol while pregnant Health professionals advised about risks of exposure to	
Screening and	tobacco smoke while pregnant Told about programs to stop smoking during antenatal check-ups	
prevention	Health professionals discussed importance of healthy weight gain during antenatal check-ups Health professionals asked how I was feeling emotionally during pregnancy	•
	Shown or given information about safe sleeping for baby	
	Able to move around and choose most comfortable position 'most of the time' during labour	
	Offered option of being in a bath during labour	•
Labour and birth	'Definitely' had enough say about pain relief during labour and birth	•
	Had skin to skin contact with baby shortly after the birth	
	'Completely' given enough information about how to care for myself after birth of baby 'Completely' given enough information about how to care	•
	for baby	
Postnatal	'Always' had access to hospital food when needed	
hospital care	Health professionals 'always' respected decisions about feeding baby Did not receive conflicting advice from health professionals about feeding baby	•
	Midwives helped establish breastfeeding	
Follow-up	Had follow up appointment with midwife or nurse within two weeks of leaving hospital Midwife or nurse asked how I was feeling emotionally during follow-up appointment	
care at home	Midwife or nurse 'always' listened to me during follow-up appointment 'Definitely' had enough time with midwife or nurse to ask guestions or discuss concerns during follow-up appointment	

0 10 20 30 40 50 60 70 80 90 100

Note: Responses regarding smoking cessation programs exclude women who said they did not smoke.

% of women

Setting the scene

About this report

Introduction

Maternity care encompasses a range of services. It aims to prevent avoidable health problems for women and their babies, enable and support safe births that meet womens' expectations, and ensure a transition to home that supports the physical and emotional needs of the baby, mother and family.

Assessing maternity care is complex. A recent review identified 388 indicators that have been used to measure different elements of performance in maternity care.¹ Many indicators are based on administrative data – providing information about birth weight, length of hospital stay, and tests and treatments. However, these indicators tell only part of the story. Maternity patient surveys provide a complementary source of information that describes the care delivered to women and their babies; the way in which care was delivered, observations about the environment where care was received and patientreported outcomes. Patients' experiences are important to measure for two main reasons. First, patients are expert informants who can reflect upon quality of care. They are often the only constant presence across different treatments and providers; and are able to observe integration of care. Second, patient experiences are linked to important intermediate outcomes such as adherence to treatment and heeding post-discharge advice. These in turn influence outcomes and patients' recovery.

Survey data are particularly valuable in the assessment of three key performance dimensions:

Accessibility: whether patients' needs were met; and how easy it was for them to obtain healthcare.

Appropriateness: whether evidence-based services were provided to patients in a technically proficient and safe way; and whether services were responsive to their needs and expectations.

Effectiveness: whether healthcare services improved patients' health without causing undue harm.

Key policy and context documents

Towards Normal Birth in NSW² provides direction to NSW maternity services regarding actions to increase the vaginal birth rate in NSW and decrease the caesarean section rate; to develop, implement and evaluate strategies to support women, including postnatal care at home, and to ensure that midwives and doctors have the knowledge and skills necessary to implement this policy.

*Breastfeeding in NSW: Promotion, Protection and Support Policy*³ provides a framework for action to increase the promotion, protection and support of breastfeeding; and clarifies roles and responsibilities to assist in a coordinated effort and a consistent approach across the system.

*Maternal and Child Health Primary Health Care Policy*⁴ is part of the NSW Health/Families NSW Supporting Families Early package. The package contains policies and guidelines for the identification of vulnerable families from primary healthcare services. This is through the comprehensive primary care assessment model, SAFE START, and the provision of maternal and child primary healthcare services including Universal Health Home Visiting.

National Antenatal Care Guidelines⁵ support the provision of high-quality, evidence-based antenatal care to healthy pregnant women. The recommendations cover routine physical examinations, screening tests and social and lifestyle advice for women with an uncomplicated pregnancy.

Data and methods

NSW is a mixed system, where women often see different healthcare providers across the public and private sectors. In NSW 94,989 women gave birth in 2015. Of these, 77% gave birth in a public hospital. This report describes their experiences of care.

The Maternity Care Survey collected information about the experiences of women who gave birth in a NSW public hospital during 2015. Surveys were mailed to a random sample of 13,311 women aged 18+ years, who gave birth in one of 61 hospitals. Questionnaires were mailed approximately three months after discharge. In total, 4,739 completed questionnaires were returned (response rate 36%). Just over half (54%) were completed on paper and 46% were completed using an online option. Response rates ranged across LHDs from 30% to 50% (Appendix 1).

Survey questionnaire

Drawing on international and national maternity surveys,^{2,3} the Bureau of Health Information (BHI) questionnaire was developed in collaboration with the Kolling Institute in Sydney. The questionnaire covered patient experiences over four phases of the maternity journey: antenatal care, labour and birth, postnatal hospital care and follow-up care after leaving the hospital. A telephone translation service was available, if required.

Sample

The sampling frame included women aged 18+ years, who gave birth in a NSW public principal referral, major or district hospital (peer groups A, B and C). Each hospital was sampled separately and sample size targets took account of the expected response rate. Women who experienced a stillbirth were excluded from the sampling frame.

Analysis

Survey responses were analysed using the SURVEYFREQ procedure in SAS v9.4 to describe the proportion of patients who responded to each response category. Results were weighted so that responses from each hospital reflect the proportion of NSW women who gave birth in that hospital. Differences between groups were assessed by comparing 95% confidence intervals. Statistically significant differences are reported where the 95% confidence intervals of two results do not overlap.

International and national context

Data from maternity surveys conducted in Queensland, England and Scotland were used to contextualise the NSW results. Differences across the comparator surveys are described in Appendix 4.

Reporting

Comparisons between LHDs, hospitals and patient subgroups are made on the basis of 'top category' results (the percentage of respondents who selected the most positive response category) indicated by inverted commas – e.g. 'always', or 'definitely'.

Results based on fewer than 30 respondents are not reported on a nominal basis. However, all responses are included in aggregated results. This means that while responses from women who gave birth in Far West LHD, and in Broken Hill, Forbes, Narrabri, Parkes and Tumut hospitals are included in aggregated results, individual facility results are not reported publicly.

The full wording and response categories for the questions used for the analysis are shown in Appendix 5. Generally, for any questions that asked about specific aspects of care, responses of 'Don't know/can't remember' and 'Not applicable' were excluded from the analysis. Colour coding is used to denote statistically significant differences in figures and graphs. Green indicates results were significantly more positive than NSW overall. Red indicates results were significantly less positive than NSW.

Unless otherwise specified, differences between groups are discussed only when a statistically significant difference was detected.

Full details about the questionnaire, sampling, analysis and reporting can be found in the *Technical Supplement: Maternity Care Patient Survey 2015* available at **bhi.nsw.gov.au**

The cohort

This report is based on the responses of 4,739 women who gave birth in a NSW public hospital during 2015. Socio-demographic characteristics of respondents varied across LHDs (see Appendix 6).

Antenatal care provided as

public patient in same public

There was also variation across LHDs in the proportion of women who received antenatal care in the hospital where their baby was born. For example, among women who gave birth in a public hospital in Western NSW, only 30% received antenatal care in the same hospital, while 67% received antenatal care from their general practitioner (GP) or another private provider. In contrast, 80% of women who gave birth in a public hospital in Northern Sydney received antenatal care in the hospital where their baby was born (Figure ii).

At a hospital level, reporting of results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth. Results for NSW and each LHD include all respondents, regardless of where they received antenatal care.

Further information on variation across LHDs in terms of antenatal care providers, and in the survey responses according to provider, is shown in Appendix 2.

Figure ii Source of antenatal care among women who gave birth in NSW public hospitals, by LHD, 2015¹

Northern Sydney Mid North Coast Western Sydney Central Coast South Western Sydney South Eastern Sydney South Eastern Sydney Southern NSW Hunter New England Illawarra Shoalhaven Murrumbidgee Northern NSW Antenatal care provided as public patient in different hospital where women gave birth

Antenatal care provided as private patient or from GP

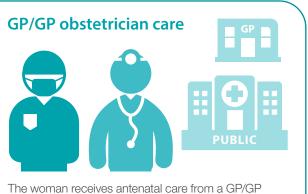
hospital where women gave birth 13% 7% 77% 21% 21% 22% 24% 7% 21% 30% 7% 34% 39% 59% 38% 38% 45% 49% 9% 48% 67% 0 10 20 30 40 50 60 70 80 90 100 % of women

Source: NSW Patient Survey Program, Maternity Care Survey, January-December 2015. Note: Results are rounded and may not sum to 100%.

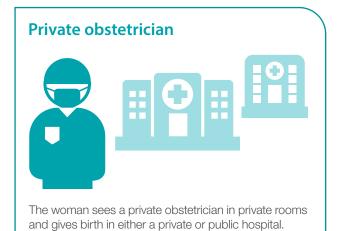
Models of maternity care in NSW



The woman attends the antenatal clinic in a public hospital for all aspects of her antenatal care, labour, birth and postnatal care from doctors, midwives and other specialist staff as required.



The woman receives antenatal care from a GP/GP obstetrician throughout her pregnancy and gives birth and receives postnatal care in a public hospital.







The women sees a GP for some of her care and attends the antenatal clinic for care with midwives and/or medical officers, specialist obstetricians and allied health practitioners when necessary. Labour, birth and initial postnatal care usually occurs in hospital.



Navigating the report

The report is based on patient responses to 58 survey questions.

The structure of the report is based on two types of survey questions. The first, generic type of questions ask about aspects of care – key elements of care that are important to all patients and are featured across the NSW patient survey program (Figure iii). The second, more tailored type of questions are maternity-specific and focus on different stages of the maternity journey. Results are presented in three sections:

- Section 1 focuses on women's overall experiences and generic aspects of care
- Section 2 focuses on maternity-specific care and addresses different stages of maternity care: antenatal care, labour and birth, postnatal hospital care and follow-up care after leaving the hospital
- Section 3 focuses on differences across geography and patient characteristics (for example, first or subsequent birth, type of birth).

Aspect of care*	Question themes
Overall experience	Overall ratings and reflections about the way that patients would describe their hospital stay to friends and family.
Access and timeliness	How long patients wait for various stages of care and whether they consider these times to be acceptable.
Communication and information	Whether patients receive important information; and whether enough information was provided to them, their families or carers.
Respect and dignity	Whether patients' values and beliefs are honoured and patient privacy is protected.
Engagement and participation	Whether the patient and where appropriate, their family or carer, are involved in decisions about their treatment and care.
Comprehensive and whole-person care	Whether healthcare professionals consider all needs of a person, including their specific circumstances and needs beyond the medical treatment of their condition.
Coordination and continuity	Whether care is well organised and integrated; whether care is provided without undue disruption.
Assistance and responsiveness	Whether staff respond to patients' emotional and physical needs and provide assistance when needed.
Cleanliness and hygiene	Cleanliness of wards and bathrooms; and how well staff comply with hygiene guidelines.
Confidence and trust	Whether patients feel assured that the staff treating them are capable and dependable and can be relied upon.
Patient-reported outcomes	Whether in the weeks following discharge, patients were readmitted, had to visit an emergency department or experienced a complication; the extent to which patients were helped by the care they received.

Figure iii Aspects of care and question themes

* Data in Healthcare Observer uses slightly different headings. For example, while other BHI surveys cover physical environment and comfort – this aspect of care was not included in the Maternity Survey.

How to interpret the graphs

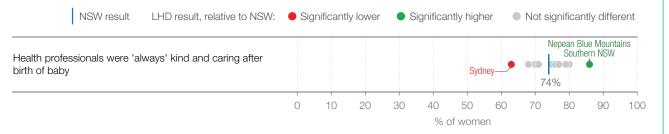
Example 1: A 'string of pearls' graph is used to show the distribution of LHD results and highlight differences from the NSW result overall.

Results are ordered according to the percentage of women who gave the response 'shown in inverted commas' (usually the most positive response option – or top category). Each circle shows an LHD result and highlights whether it differs significantly from the NSW result (a blue line).

What is this graph telling me?

The question featured in the graph shows that 74% of women in NSW said health professionals were 'always' kind and caring after the birth of their baby. Across LHDs, the proportion who said 'always' ranged from 63% to 86%. There was one LHD with results significantly lower than NSW (coloured red) and two LHDs with results significantly higher than NSW (coloured green).

Example Comprehensive and whole person care, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

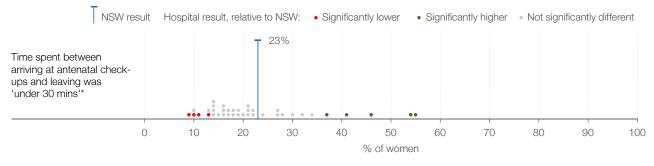


Example 2: Dot plots show the distribution of hospital results and highlight differences from the NSW result. Each dot represents a hospital result – the percentage of its patients who gave the response 'shown in inverted commas' (usually this is the most positive response option – or top category) and highlights whether it is significantly different from the NSW result.

What is this graph telling me?

Women were asked about the time between arriving and leaving antenatal check-ups – 23% responded 'under 30 minutes'. This percentage ranged across hospitals from 9% to 55%. Four hospitals had results significantly lower than NSW (coloured red); and five hospitals had results significantly higher than NSW (coloured green).

Example Access and timeliness, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

SECTION 1 Aspects of care

Overall experience of care

Almost all women rated their overall experience of labour and birth positively

One important way to assess performance is to ask patients about their overall experience of care. This can be used to compare hospitals and explore differences across types of care. In 2015, the majority of women who received maternity care in NSW public hospitals rated their experience positively. Eight in 10 (79%) said they would 'speak highly' about the hospital where they gave birth. Women were particularly positive about their overall experience of care during labour and birth – almost all said it was either 'very good' (74%) or 'good' (21%) (Figure 1.1).

Figure 1.1 Overall experience of care, all response categories, NSW, 2015

Question	Responses
Overall, how would you rate the antenatal care you received during	■ Very good ■ Good ■ Neither good nor poor ■ Poor ■ Very poor
your pregnancy?	62% 31%
Overall, how would you rate the care you received in the hospital	■Very good ■Good ■Neither good nor poor ■Poor ■Very poor
during your labour and birth?	74% 21%
Overall, how would you rate the care you received in the hospital after	■ Very good ■ Good ■ Neither good nor poor ■ Poor ■ Very poor
your baby was born?	56% 32% 7%
If friends and family asked about your maternity experience at the	Would speak highly Neither highly/critical Would be critical
hospital where you gave birth, how would you respond?	79% 16% <mark>6%</mark>

Figure 1.2 Overall experience of care, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW:	🔴 Sig	Inificant	ly lowei	· • 5	Significa	ntly higł	ner	Not	signific	cantly diff	erent
Overall, antenatal care was 'very good'			Sou	th Westerr	n Sydney-		• • •	())		– Northern S – Western N – Southern I	
Overall, hospital care during labour and birth was 'very good'			Sou	th Westerr	n Sydney-			•		-Northern S	
Overall, hospital care after baby was born was 'very good'			Sou	th Westerr	ר Sydney	•••••	ece		'4% •	– Northern S – Northern I – Southern	Sydney NSW
Would 'speak highly' of maternity experience at the hospital to friends and family			Sou	th Westerr	ו Sydney -				•••• 79%	Southern	
	0	10	20	30	40	50	60	70	80) 90	10(
					% (of wome	en				

Across LHDs, responses from women who gave birth in a Northern Sydney or Southern NSW hospital were significantly more positive than the NSW result overall for all four questions. Responses from women who gave birth in South Western Sydney hospitals were less positive than the NSW result for all four questions (Figure 1.2). At a hospital level, there was wide variation in the percentage of women who said their experience of hospital care after the birth of their baby was 'very good' (31% to 99%) (Figure 1.3).

Figure 1.3 Overall experience of care, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, relative to	NSW: • Signi	ficantly lowe	r • Significa	antly higher	 Not signification 	antly different
Overall, antenatal care was 'very good'*					62%		
Overall, hospital care during labour and birth was 'very good'						74%	
Overall, hospital care after baby was born was 'very good'		•	• • • • • •	- 56%			••
Would 'speak highly' of maternity experience at the hospital to friends and family				•	•• •••	79%	
C) 10 20	30 4	40 50 % of w		70	80	90 100

* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Access and timeliness

Almost half of all women said they waited longer than 30 minutes to be seen at antenatal check-ups

The accessibility of maternity care has important implications for the health of mothers and babies and for broader aspects of their wellbeing. National guidelines state that women should have access to antenatal care close to their home.⁵ Most women received antenatal care locally and 81% said they had travel times of less than 30 minutes. Women's responses about timeliness at the antenatal clinic were less positive however, and only around half (54%) said they usually waited less than 30 minutes to be seen at their antenatal check-ups (Figure 1.4).

Figure 1.4 Access and timeliness, all response categories, NSW, 2015

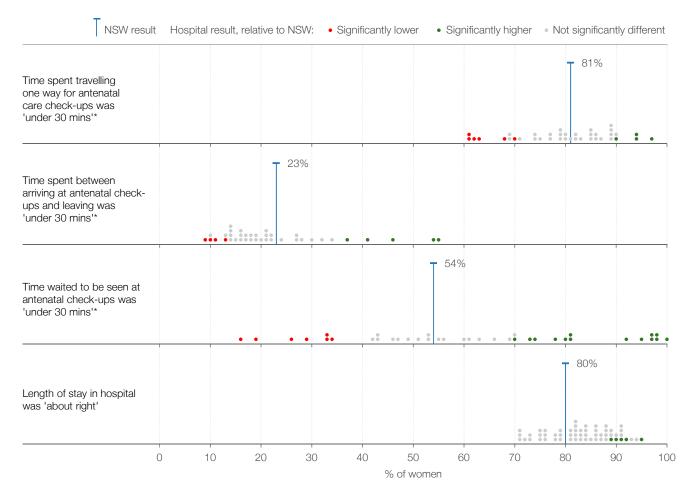
Question	Responses			
How long did you usually have to travel (one way) for antenatal care	Under 30 mins2 to under 3 hrs	■ 30 to 59 mins ■ 3 hrs or more	1 to under 2 hrs	
check-ups during your pregnancy?		16%		
How long did you usually spend at your antenatal check-ups between	Under 30 mins2 to under 3 hrs	■ 30 to 59 mins ■ 3 hrs or more	1 to under 2 hrs	
the time you arrived and when you left?	23%	39%	26% 8%	
How much of this time did you usually spend waiting to be seen? [at	Under 30 mins2 to under 3 hrs	■ 30 to 59 mins ■ 3 hrs or more	1 to under 2 hrs	
antenatal check-ups]	54%	26% 14% <mark>5%</mark>		
Looking back, do you feel that the length of your stay in	About right	Too long	■Too short	
hospital was?		<mark>8%</mark> 13%		

Figure 1.5 Access and timeliness, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW	/: 🔸 S	ignificar	ntly lowe	r 🌒	Significa	antly high	ner	Not s	significa	intly diffe	erent
Time spent travelling one way for antenatal care check-ups was 'under 30 mins'						Wester Murrum Norther Souther	n NŠW —		• (0) 81%	())	
Time spent between arriving at antenatal check-ups and leaving was 'under 30 mins'			230	%	-Murrumbi	,	ern NSW				
Time waited to be seen at antenatal check-ups was 'under 30 mins'		South	I Blue Mou Western S Western S	Sydney —	Hunter	Vew Englar		n NSW	— South	orthern Sy Eastern Sy -Southern –Central (dneý NSW
Length of stay in hospital was 'about right'								(Sydn estern NS Southern	Ŵ
	0	10	20	30	40	50	60	70	80	90	100
					%	of wom	en				

Across LHDs, responses from women who gave birth in a Southern NSW hospital were significantly more positive than the NSW result overall for three out of four access and timeliness questions – although these women were significantly less positive regarding travel times (Figure 1.5). At an LHD and hospital level there was wide variation in the percentage of women who said they waited less than 30 minutes to be seen at the antenatal clinic (LHD range 35% to 79%; hospital range 16% to 100%) (Figures 1.5 and 1.6).

Figure 1.6 Access and timeliness, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Communication and information

Most women said that health professionals explained things in an understandable way

High quality care ensures that appropriate information is given to women, in a format suitable for their needs. While a wealth of information is available about pregnancy and childbirth in a variety of formats, it can be challenging for women to access and fully understand what is relevant and important for them. The majority of women in NSW said health professionals 'always' explained things in a way they could understand during antenatal care (84%), labour and birth (85%) and postnatal hospital care (74%) (Figure 1.7).

Figure 1.7 Communication and information, all response categories, NSW, 2015

Question	Responses					
Did the health professionals providing your antenatal care explain	■Yes, always	Yes, sometimes	No			
things in a way you could understand?		15%				
During your labour and birth, did the midwives or doctors explain	■Yes, always	Yes, sometimes	No			
things in a way you could understand?		85%				
After the birth of your baby, did the health professionals explain things	■Yes, always	Yes, sometimes	No			
in a way you could understand?	74	74%				

Figure 1.8 Communication and information, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result	LHD result, relative to NSW:	Sig	Inificant	ly lower	٠	Significa	ntly higl	ner	Not sig	gnificar	ntly diffe	rent
Health professionals providing	5								Southern	NSW	orthern Sy	dney
explained things in an unders	tandable way						South W	/estern Syd	dney	84	%	
Midwives or doctors 'always' understandable way during la) ((()) 5%	
Health professionals 'always' understandable way after birt						South W	'estern Sy	dney _	9 •	•	Southern N orthern Sv	
		0	10	20	30	40 % (50 of wome	60 en	70	80	90	100

Across LHDs, responses from women who gave birth in a Northern Sydney or Southern NSW hospital were significantly more positive than the NSW result overall for two questions regarding communication and information. Women who gave birth in a South Western Sydney hospital were less positive than the NSW result for two questions (Figure 1.8). At a hospital level, the widest variation was seen in the question about whether after the birth, health professionals 'always' explained things in an understandable way (57% to 100%) (Figure 1.9).

Figure 1.9 Communication and information, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

Hospital result, relative to NSW	Significantly lower	 Significantly h 	igher • Not significantly different
			- 84%
			- 85%
			- 74%
) 10 20 3			70 80 90 100
-			

* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Respect and dignity

Most women said health professionals providing antenatal care were always polite and courteous

Treating patients with respect – that is, with due regard for their feelings, values and rights – and in ways that protect their dignity, are essential elements of performance. Healthcare should be provided in a courteous way, with consideration for a patient's culture, religious beliefs, sexual orientation, issues arising from a disability and right to privacy.⁶

Across NSW, around nine in 10 women said they were 'always' treated with respect and dignity during labour and birth (88%); and they were always given enough privacy in the birth room or theatre (89%) (Figure 1.10).

Figure 1.10 Respect and dignity, all response categories, NSW, 2015

Question	Responses						
Were the health professionals providing your antenatal care polite and	■Yes, always	■ Yes, sometimes	No				
courteous?		89%					
Did the midwives or doctors who you did not already know, introduce	■Yes, always	Yes, sometimes	No				
themselves to you during your labour and birth?		14%					
Did you feel you were treated with respect and dignity during your	■Yes, always	■Yes, sometimes	No				
labour and birth?		88%					
	■Yes, always	■Yes, sometimes	No				
Were you given enough privacy in the birth room or theatre?		9%					

Figure 1.11 Respect and dignity, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

					% (of wome	en				
	0	10	20	30	40	50	60	70	80	90	100
'Always' given enough privacy in birth room or theatre										(((())) 89%	
'Always' treated with respect and dignity during labour and birth						Sc	outh Weste	ern Sydney		() 88%	
Midwives or doctors 'always' introduced themselves during labour and birth									••	**** 3%	
Health professionals providing antenatal care were 'always' polite and courteous						So	outh Weste	ern Sydney		Northern Sy 89%	dney
NSW result LHD result, relative to NSW:	Się	gnificant	ly lower	• 5	Significa	ntly high	ner	Not si	gnific	antly differ	

Across LHDs, responses from women who gave birth in a Northern Sydney hospital were more positive than the NSW result overall for one out of four questions. Responses from women in South Western Sydney were less positive than the NSW result for two questions (Figure 1.11). At a hospital level, the widest variation was seen in the question about whether midwives or doctors 'always' introduced themselves during labour and birth (62% to 98%) (Figure 1.12).

Figure 1.12 Respect and dignity, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, r	elative to NSW	: • Significar	ntly lower	 Significantly higher 	• No	ot significantly different
Health professionals providing antenatal care were 'always' polite and courteous						•	89%
Midwives or doctors 'always' introduced themselves during labour and birth					•	• •	- ^{83%}
'Always' treated with respect and dignity during labour and birth						•	- 88%
'Always' given enough privacy in birth room or theatre							89%
(0 10	20 3	i 40	50	60 70	8	0 90 100
				% of wome	n		

Engagement and participation

Seven in 10 women said they were definitely involved in decisions during labour and birth

Most women want to be involved in decisions about their care. Patient engagement involves shared decision-making processes that are informed by clear communication flow. Engaging patients in their own care makes a positive contribution to quality of care, outcomes and attitudes towards the healthcare system.⁷ Across NSW, around seven in 10 women (71%) said they were 'definitely' involved, as much as they wanted to be, in decisions about labour and birth. A lower proportion (65%) said they were 'definitely' involved in decisions about discharge from hospital (Figure 1.13).

Figure 1.13 Engagement and participation, all response categories, NSW, 2015

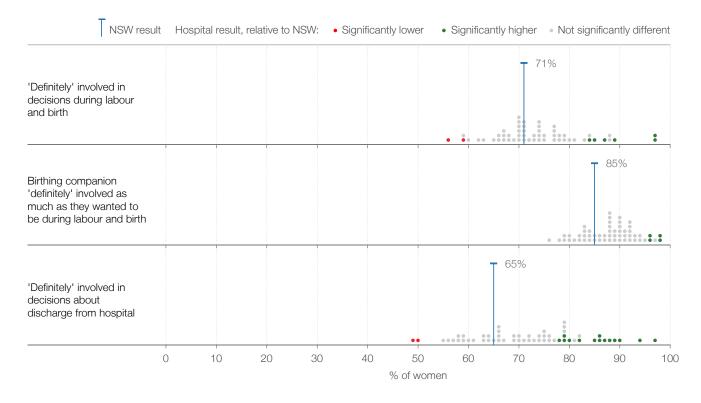
Question	Responses		
Were you involved, as much as you wanted to be, in decisions during	■ Yes, definitely	■Yes, to some	No
your labour and birth?	71%	25%	
During your labour and birth, was your birthing companion (e.g. your	Yes, definitelyNo	■ Yes, to some ■ Don't know/c	e extent can't remember
partner, the baby's father, doula or family member) involved as much as they wanted to be?		12%	
	■Yes, definitely ■Yes, t	o some extent No, I di	d not feel involved
Did you feel involved in decisions about your discharge from hospital?	65%		26% 9%

Figure 1.14 Engagement and participation, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW	: 🔸 Sigr	nificant	ly lowe	r 🔴 S	Significa	ntly highe	er	Not s	ignificar	ntly diffe	rent
'Definitely' involved in decisions during labour and birth)(71%			
Birthing companion 'definitely' involved as much as they wanted to be during labour and birth								Norther	n Sydney	Northern I	VSW
'Definitely' involved in decisions about discharge from hospital				South V	Vestern Sy	dney	• • •	9000 5%	٩	r New En -Western Southern Northern	NSW NSW
	0	10	20	30	40	50	60	70	80	90	100
					% (of womer	٦				

Across LHDs, responses from women who gave birth in a Northern NSW hospital were significantly more positive than the NSW result overall for two questions. Responses from women in South Western Sydney were less positive than the NSW result for one question (Figure 1.14). At a hospital level, the widest variation was seen for the question about whether women said they were 'definitely' involved in decisions about discharge from hospital (49% to 97%) (Figure 1.15).

Figure 1.15 Engagement and participation, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



Comprehensive and whole-person care

Most women said health professionals were always kind and caring

Whole-person care is a multilayered concept that incorporates technical proficiency and clinically appropriate services as well as broader considerations regarding sensitivity and responsiveness to patients' social, emotional and physical needs and expectations.⁸ Across NSW, around seven in 10 women (74%) said health professionals taking care of them after the birth of their baby were 'always' kind and caring (Figure 1.16).

No LHD had patient responses more positive or less positive than the NSW result overall for multiple questions (Figure 1.17).

Figure 1.16 Comprehensive and whole-person care, all response categories, NSW public hospitals, 2015

Question	Responses						
Were the midwives or doctors kind and caring towards you? [during	Yes, always	■ Yes, sometimes	No				
labour and birth]		14%					
After the birth of your baby, were the health professionals taking care	Yes, always	Yes, sometimes	No				
of you kind and caring?	749	23%					

Figure 1.17 Comprehensive and whole-person care, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW:	🛑 Si	gnificant	tly lower	• • 5	Significa	ntly higł	her	Not s	significa	ntly diffe	rent
Midwives or doctors were 'always' kind and caring during labour and birth						South	Western	Sydney —	•••	5 %	
Health professionals were 'always' kind and caring after birth of baby						Syd	ney	•••	Nepean Bl South	ue Mounta ern NSW	ains
	0	10	20	30	40	50	60	70	80	90	100
					% (of wome	en				

At a hospital level, the widest variation was seen in the question about whether after the birth, health professionals were 'always' kind and caring (59% to 97%) (Figure 1.18). Detailed results for maternity specific questions (see pages 45-54) also reflect on elements of comprehensive care.

Figure 1.18 Comprehensive and whole-person care, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	t Hospital result, relative to NSW:	Significantly lower	Significantly higher	 Not significantly different
Midwives or doctors were 'always' kind and caring during labour and birth				- 85%
Health professionals were 'always' kind and caring after birth of baby				74%
	0 10 20 30) 40 50	60 70	80 90 100
		% of women		

Coordination and continuity

Almost all patients were told who to contact if they were worried after they left hospital

Maternity care often involves a range of different health professionals. Coordination and continuity of care between providers minimises disruption and inconvenience to patients but more importantly can significantly enhance information flow, experiences of care and outcomes. Across NSW, eight in 10 women (81%) did not receive conflicting information from midwives or doctors during labour and birth. Most women said they were given enough information about caring for themselves and their baby at home (62% completely, 29% to some extent) (Figure 1.19).

Figure 1.19 Coordination and continuity, all response categories, NSW public hospitals, 2015

Question	Responses	
Did midwives or doctors ever give you conflicting information during	No	■ Yes
your labour and birth?	81%	19%
After the birth of your baby, did you ever receive conflicting information	No	■ Yes
from health professionals about how to care for yourself or your baby	68%	32%
Before leaving hospital, were you given enough information about	■ Yes, completely	Yes, to some extent No
caring for yourself and your baby at home?	62%	29% 9%
Did hospital staff tell you who to contact if you were worried about your	∎Yes	No
health or your baby's health after you left hospital?	930	% <mark>7%</mark>

Figure 1.20 Coordination and continuity, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW:	● Się	gnificant	ly lower	•	Significa	ntly higł	ner	Not s	ignificar	itly differ	rent
Did not receive conflicting information from midwives or doctors during labour and birth					Col	ith Mooto		•	Sydney V	`	ISW
							rn Sydne		81%		
Did not receive conflicting information from health professionals after birth of baby					Sy	dney			• We	estern Syc	lney
				9 				68%	S0	uthern NS	SW
'Completely' given enough information about caring for myself and baby before leaving hospital									/ 00		
							62%	D	C	Southern N	
Told who to contact if worried about my or baby's health											
after discharge							South	Western	Sydney 🗸	939	%
	0	10	20	30	40	50	60	70	80	90	10
					%	of wome	en				

Across LHDs, responses from women who gave birth in a Southern NSW hospital were more positive than the NSW result overall for two questions. Responses from women in a South Western Sydney hospital were less positive than the NSW result for two questions (Figure 1.20). At a hospital level, the widest variation was seen in the question about whether women received conflicting information about caring for themselves and their baby at home (49% to 91%) (Figure 1.21).

Figure 1.21 Coordination and continuity, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, relative to NSW:	Significantly lower Significantly higher Not significantly different
Did not receive conflicting information from midwives or doctors during labour and birth		• • 81%
Did not receive conflicting information from health professionals after birth of baby		- 68% • • • • • • •
'Completely' given enough information about caring for myself and baby before leaving hospital		- 62%
Told who to contact if worried about my or baby's health after discharge		- 93%
C	0 10 20 30	
		% of women

Assistance and responsiveness

Three-quarters of women said health professionals did everything reasonable to help manage pain

Recognising and responding to the needs of pregnant women is key to a positive experience of care. Across NSW, while most women (76%) said that doctors and midwives definitely did everything they could to help manage pain during labour and birth, a smaller proportion said that professionals 'completely' discussed with them their worries or fears during antenatal care (60%) and during labour and birth (60%) (Figure 1.22).

Figure 1.22 Assistance and responsiveness, all response categories, NSW, 2015

Question	Responses			
Did the health professionals discuss your worries or fears with you? [at	■ Yes, completely	■ Yes, to some extent	No	
antenatal check-ups]	60%	3	5%	
Do you think the midwives or doctors did everything reasonable to help	■ Yes, definitely	■ Yes, to some extent	No	
you manage your pain during your labour and birth?	76	19%		
Nere you able to get assistance from midwives or doctors when you	■Yes, always	Yes, sometimes	No	
needed it? [during labour and birth]	8	18%		
Did a midwife or doctor discuss your worries or fears with you? [during	■Yes, completely	■Yes, to some extent	No	
abour and birth]	60%	32	.% 89	
After the birth of your baby, were you able to get assistance or advice	■Yes, always	Yes, sometimes	No	
from health professionals when you needed it?	66%		30%	

Figure 1.23 Assistance and responsiveness, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW:	Significantly lower Significantly higher Not significantly different
Health professionals 'completely' discussed worries or fears during antenatal check-ups	60 %
Midwives or doctors 'definitely' did everything to help manage pain during labour and birth	South Western Sydney
'Always' able to get assistance from midwives or doctors when needed during labour and birth	South Western Sydney –
Midwife or doctor 'completely' discussed worries or fears during labour and birth	6 0%
'Always' able to get assistance or advice from health professionals when needed after birth of baby	Northern Sydney 66%
	0 10 20 30 40 50 60 70 80 90 100 % of women

No LHD had multiple questions for which their results were more positive than NSW overall. Responses from women who gave birth in a South Western Sydney hospital were significantly less positive than the NSW result for two questions (Figure 1.23).

-

At a hospital level, the widest variation was seen in the question regarding whether health professionals 'completely' discussed worries or fears during antenatal care (42% to 97%) (Figure 1.24).

Figure 1.24 Assistance and responsiveness, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, relative to NSW:	Significantly lower Significantly higher Not significantly different
Health professionals 'completely' discussed worries or fears during antenatal check-ups*		- 60%
Midwives or doctors 'definitely' did everything to help manage pain during labour and birth		T 76%
'Always' able to get assistance from midwives or doctors when needed during labour and birth		- 80%
Midwife or doctor 'completely' discussed worries or fears during labour and birth		- 60%
'Always' able to get assistance or advice from health professionals when needed after birth of baby		- 66%
C) 10 20 30	40 50 60 70 80 90 10 % of women

* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Cleanliness and hygiene

There was wide variation across hospitals in ratings of cleanliness and hygiene

Cleanliness and hygiene are important factors in the overall experience of patients – particularly for new mothers who may have heightened concerns about the health and safety of their baby. Most women in NSW said their ward or room was either 'very clean' (67%) or 'fairly clean' (29%); and that toilets and bathrooms were either 'very clean' (64%) or 'fairly clean' (31%) (Figure 1.25).

Figure 1.25 Cleanliness and hygiene, all response categories, NSW public hospitals, 2015

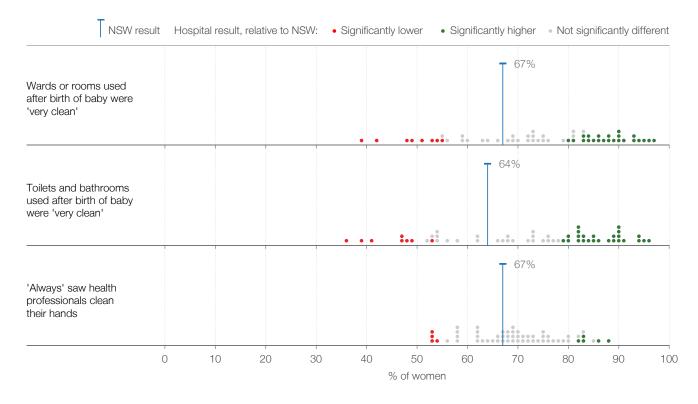
Question	Responses				
How clean were the wards or rooms you stayed in after the birth of	Very clean	Fairly clean	Not very clean	Not at all clean	
your baby?		67%		29%	
How clean were the toilets and bathrooms you used after the birth of	Very clean	Fairly clean	Not very clean	Not at all clean	
your baby?		64%		31%	
Did you see the health professionals wash their hands, or use hand gel	■Yes, alv ■No, I dio	vays d not see this	■ Yes, so ■ Can't re		
to clean their hands, before touching you or your baby?		67%	<mark>17% 5%</mark> 11%		

Figure 1.26 Cleanliness and hygiene, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW:	I Si	gnificant	tly lower	• • 9	Significa	ntly high	ner	Not s	significa	ntly diffe	erent
Wards or rooms used after birth of baby were 'very clean'					urrumbidg Sydn	iey	•	Mid North		lorthern S outhern N Northern	ísw Nsw
Toilets and bathrooms used after birth of baby were 'very clean'			;		stern Sydn urrumbidg			67% rra Shoal	haven	rra Shoalh Iorthern Sy Iid North (Northern Southern	ydney Coast NSW
'Always' saw health professionals clean their hands								6 7%		Southern	
	0	10	20	30	40 % 0	50 of wome	60 en	70	80	90	100

Across LHDs, responses from women who gave birth in a Southern NSW hospital were more positive than the NSW result overall for all three cleanliness questions. Responses from women who gave birth in a Murrumbidgee hospital were less positive than the NSW result for two questions (Figure 1.26). Results varied considerably across hospitals. The widest variation was seen in responses to the question about whether toilets and bathrooms were 'very clean' after the birth (36% to 96%) (Figure 1.27).

Figure 1.27 Cleanliness and hygiene, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



Confidence and trust

Eight in 10 women always had confidence and trust in health professionals

Confidence and trust are fundamentally important in healthcare relationships and are associated with greater use of preventive health services and enhanced adherence to treatment.⁹ In NSW, more than eight in 10 women (81%) said they 'always' had confidence and trust in the health professionals providing antenatal care; and a similar proportion (84%) 'always' had confidence and trust in the midwives or doctors taking care of them during labour and birth (Figure 1.28).

Figure 1.28 Confidence and trust, all response categories, NSW public hospitals, 2015

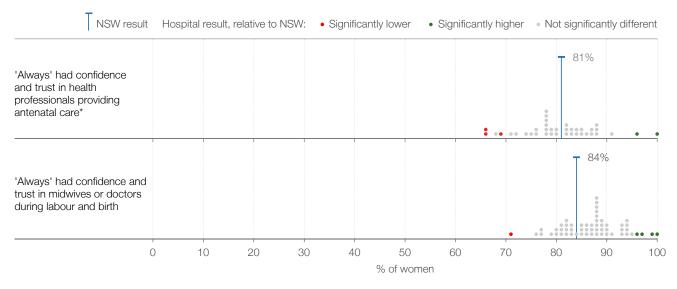
Question	Responses		
Did you have confidence and trust in the health professionals providing	■Yes, always	Yes, sometimes	No
your antenatal care?	3	31%	17%
Did you have confidence and trust in the midwives or doctors taking	■Yes, always	Yes, sometimes	No
care of you during your labour and birth?		84%	13%

Figure 1.29 Confidence and trust, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result	LHD result, relative to NSW:	🛑 Sig	gnificant	ly lower	• S	Significa	ntly high	ner	Not si	ignificar	ntly diffe	rent
	d trust in health professionals								۶	W • • • •	/estern Sy	rdney
providing antenatal care						Sc	outh Weste	ern Sydne	y	81%	Western	NSW
'Always' had confidence and during labour and birth	d trust in midwives or doctors									• •) 84	())) 1%	
		0	10	20	30	40	50	60	70	80	90	100
						%	of worr	nen				

No LHD had patient responses more positive or less positive than the NSW result overall for multiple questions (Figure 1.29). At a hospital level, variation was greatest for the question about whether women 'always' had confidence and trust in the health professionals providing their antenatal care (66% to 100%) (Figure 1.30).

Figure 1.30 Confidence and trust, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Patient-reported outcomes

Two in 10 women said they experienced a complication during or shortly after their hospital stay

Childbirth carries with it risks of complications, both to mother and baby. An important element of maternity care is the identification and management of these risks.² Across NSW, 22% of women said they experienced a complication or problem during, or shortly after, their hospital stay (Figures 1.31 and 1.32). Among those who reported a complication, 13% of mothers said the complication was 'very serious'.

The proportion who said they experienced a complication was smaller among women who had a vaginal birth than among women who had a caesarean section (20% and 28%).

In NSW, the most commonly noted complication was infection (8%). Women who had a caesarean section reported a higher incidence of infection than those who had a vaginal birth (13% and 6%) (Figure 1.31).

Across LHDs, the percentage of women who said they experienced a complication ranged from 18% to 30% (Figure 1.33). At a hospital level, results ranged from 9% to 32% (Figure 1.34).

Complementary data from hospital records

According to hospital records, 3.5% of vaginal births in 2014 resulted in obstetric trauma – defined as a third or fourth degree perineal laceration or tear.

Haemorrhage was recorded as a complication for 1.5% of vaginal births and 1.4% of caesarean sections.

Source: Perinatal Data Collection, 2015

Figure 1.31 Percentage of women who said they experienced a complication, by type of birth, NSW, 2015

Type of complication	NSW	Vaginal births	Caesarean sections
Any complication	22%	20%	28%
Infection	8%	6%	13%
Excessive bleeding/haemorrhage	7%	7%	5%
Complications from an operation or surgical procedure	3%	2%	7%
Negative reaction to medication	1%	1%	3%
Blood clot in the leg or deep vein thrombosis (DVT)	1%	1%	1%
Fall	0%	0%	0%
Complications from tests, x-rays or scans	0%	0%	1%
Other complication	7%	7%	7%

Figure 1.32 Patient-reported outcomes, all response categories, NSW public hospitals, 2015

Question	Responses				
Experienced complication or problem during or shortly after		■ Yes	No		
hospital stay	22%		78%		

Figure 1.33 Patient-reported outcomes, percentage of women who said they experienced a complication, LHD results relative to NSW, 2015

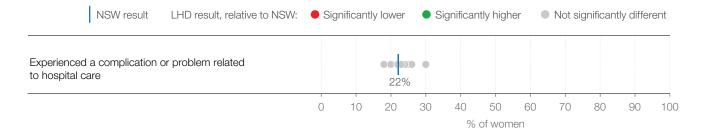
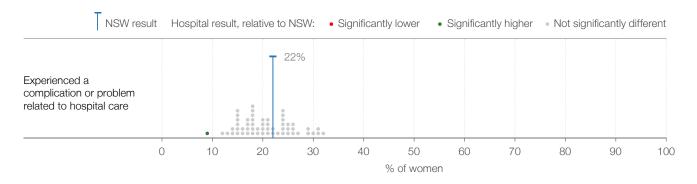


Figure 1.34 Patient-reported outcomes, percentage of women who said they experienced a complication, public hospital results relative to NSW, 2015



SECTION 2 Stages of maternity care

Four stages of care – maternity specific questions





Antenatal care supports the health of mothers and their babies. It generally consists of a series of regular appointments that provide information and advice and regular health checks for pregnant women and their developing babies.

In NSW, current policy recommends that women have their first antenatal appointment before the 14th week of pregnancy; and that there are five or more appointments over the course of the pregnancy.²

Overall, most women rated the antenatal care they received as either 'very good' (62%) or 'good' (31%). Four in 10 women had their first antenatal appointment before the 14th week of their pregnancy – although almost all (97%) received the recommended antenatal record card.

Most women (91%) said they were asked about how they were feeling emotionally although fewer said health professionals 'completely' discussed with them their worries or fears (60%).

More than nine in 10 women (95%) said they were provided information about safe sleeping for their baby. A sizeable proportion of women said they were not given advice about healthy weight gain (29%); the risks of alcohol consumption (13%); or exposure to tobacco smoke (13%).

2. Labour and birth

A defining life experience, **labour and birth** can have lasting physical and psychological effects.

Almost all women rated the care they received during labour and birth as either 'very good' (74%) or 'good' (21%).

For almost all of the questions about labour and birth, a large majority of women selected the most positive response category.

There were exceptions to this however. Only six in 10 women (60%) had the opportunity to 'completely' discuss their worries or fears with a midwife or doctor; and about seven in 10 (68%) 'definitely' had enough say about pain relief. Among women for whom it was clinically appropriate, only 52% had the option of being in a bath during labour; and 69% were able to move around and choose a comfortable position during labour.



3. Postnatal hospital care

Postnatal care begins immediately after birth. It supports new mothers in their recuperation; and provides information and support about caring for themselves and their babies.

Overall, most women rated the postnatal care they received in the hospital as either 'very good' (56%) or 'good' (32%). Ratings of experiences of postnatal care were less positive than those for antenatal care or for labour and birth.

There are some elements of care where there is a range of different options for women to choose from. However, options can lead to unclear messages and uncertainty. About one-third of women said they received conflicting advice about feeding their baby (32%) or about caring for themselves or their baby (32%).



4. Follow-up care at home

NSW Health policy states that all women should receive midwifery support at home for at least two weeks after their baby is born.² **Follow-up care** provides essential services to new mothers and their families. It:

- Establishes a relationship for ongoing care
- Provides positive support, that affirms and normalises early parenting experiences while recognising deviations from the norm
- Responds to issues or concerns that parents may have regarding the health and development of their baby
- Gauges the baby's growth and general progress, and provides information and resources as required
- Assesses and responds to issues regarding feeding for both mother and baby.

Women responded very positively to the questions about follow-up care at home. With very few exceptions, most women had a follow-up visit in the first two weeks after they arrived home (95%); were asked how they were feeling emotionally (98%); said the midwife or nurse 'always' listened to them (90%); and they had enough time to ask questions (90%).

Antenatal visits: Access and continuity

Fewer than half of women said their first antenatal appointment was before their 14th week of pregnancy

In NSW, current policy recommends that women have their first antenatal appointment before the 14th week of pregnancy. According to the survey, 40% of women said their first appointment occurred before this recommended time (Figure 2.1). Across LHDs, responses from women who gave birth in a Central Coast hospital were less positive than the NSW result overall for two questions. No LHD had multiple questions for which their results were more positive than NSW overall (Figure 2.2).

At a hospital level, there was wide variation in the percentage of women whose first antenatal appointment occurred before the 14th week of their pregnancy (18% to 89%) (Figure 2.3).

Figure 2.1 Antenatal visit access and continuity, all response categories, NSW, 2015

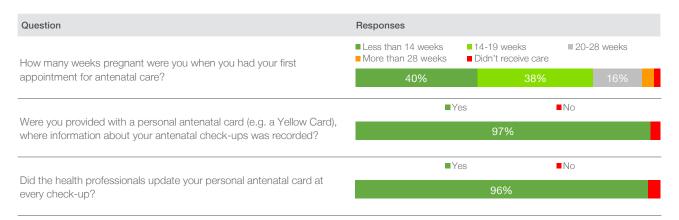
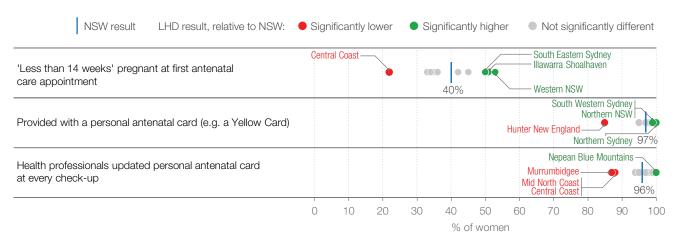


Figure 2.2 Antenatal visit access and continuity, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

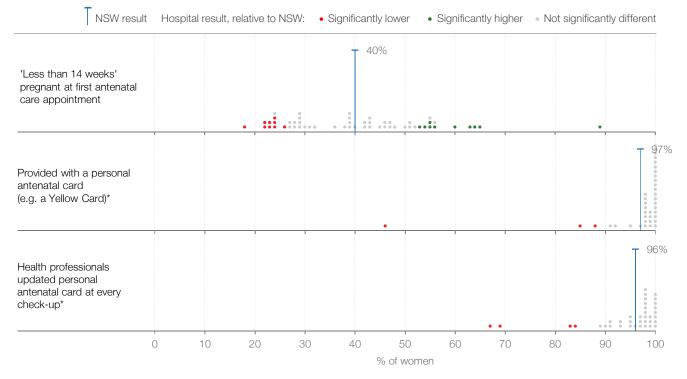


Data from administrative records

According to administrative records used in the Perinatal Data Collection, 64% of women who gave birth in 2015 had their first antenatal appointment before the 14th week of their pregnancy. This proportion differed between women who gave birth in a public (57%) or private (87%) hospital.

Focusing on women who gave birth in a public hospital, there is a clear discrepancy between results based on survey data and those based on administrative data regarding the timing of the first antenatal appointment (40% vs 57% before 14 weeks). This discrepancy was seen across different providers of care (e.g. public hospital midwives, public hospital obstetricians, GPs, private midwives) and across different models of care (e.g. public hospital care, GP/hospital shared care, midwifery group practice). The survey data may reflect an element of recall bias — with surveys sent out three months after the birth, questions regarding the timing of first antenatal appointments ask women about events that occurred approximately 12 months previously.

Figure 2.3 Antenatal visit access and continuity, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



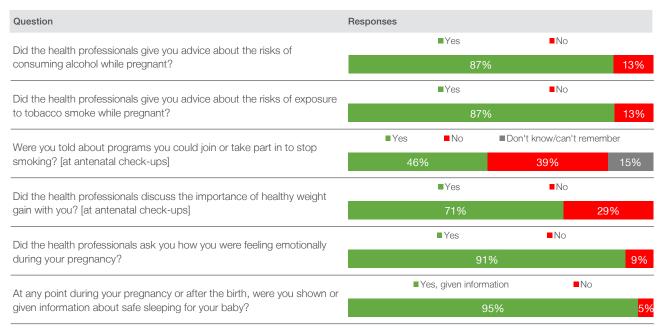
* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Antenatal visits: Screening and prevention

Women were not always given advice about healthy lifestyles

Over the course of their pregnancy, more than nine in 10 women were shown or given information about safe sleeping for their baby (95%) and were asked about how they were feeling emotionally (91%). However, a sizeable proportion of women said they were not given advice about the risks of consuming alcohol (13%), exposure to tobacco smoke (13%) and healthy weight gain (29%) as part of their antenatal care.

Figure 2.4 Screening and prevention, all response categories, NSW public hospitals, 2015



Note: Responses regarding smoking cessation programs exclude women who said they did not smoke.

Figure 2.5 Screening and prevention, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

	NSW result	LHD result, relative to NS	W: 🔸 Sig	nificantly	lower	 Sigr 	nificantly	v higher		Not sigr	nificant	ly diffe	rent
Health profe alcohol while		d about risks of consuming									••	90)) 37%	
	essionals advise noke while pregn	d about risks of exposure to ant									•••	0 00 37%	
Told about antenatal ch		p smoking during				•	46	••					- - - - - - - - - - - - - - - - - - -
	essionals discus during antenata	sed importance of healthy I check-ups				North	ern Sydne	ey	• •	••• 71%	Western West	NSW P ern Sydr	iey
Health profe during pregi		how I was feeling emotionall	у						- - - - - - - - - - - - - - - - - - -		ern Sydn thern NS		
Shown or gi	iven information a	about safe sleeping for baby										•))5%
			0	10	20	30	40	50	60	70	80	90	100
							% of	womer	l				

Among women who were smokers, 46% said they were told about programs to help them stop smoking (the extent to which they were offered other types of smoking cessation advice was not measured) (Figure 2.4).

No LHD had results more positive or less positive than NSW overall for multiple questions about screening and prevention (Figure 2.5). At a hospital level, there was wide variation in the percentage of women who said they discussed healthy weight gain during antenatal checkups (50% to 92%) (Figure 2.6).

Figure 2.6 Screening and prevention, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, relative to NSW:	Significantly lower	Significantly high	jher • No	t significantly different
Health professionals advised about risks of consuming alcohol while pregnant*				• • •	- 87%
Health professionals advised about risks of exposure to tobacco smoke while pregnant*					- 87%
Health professionals discussed importance of healthy weight gain during antenatal check-ups*			• • • • • • • • • • • • • • •	71%	
Health professionals asked how I was feeling emotionally during pregnancy*				•	91%
Shown or given information about safe sleeping for baby					95%
() 10 20 30	40 50 % of w		0 80	0 90 100

Notes: Responses regarding smoking cessation programs exclude women who said they did not smoke.

Results for the question regarding whether women were told about programs to stop smoking are not shown in Figure 2.6 due to the small sample size of women smokers at a hospital level.

* Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Experiences of labour and birth

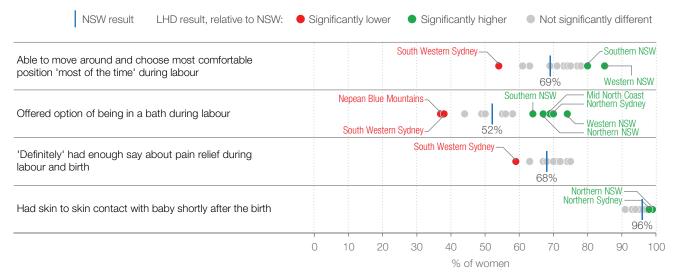
Most women were able to move around and choose the most comfortable position

A watershed experience, labour and birth can have lasting physical and psychological effects – both positive and negative – on women and their babies. Among women for whom being in a bath during labour constituted appropriate care, about half (52%) were offered that option. Almost all women had enough say about pain relief during labour and birth (68% 'definitely', 23% 'to some extent') (Figure 2.7).

Figure 2.7 Experiences of labour and birth, all response categories, NSW public hospitals, 2015

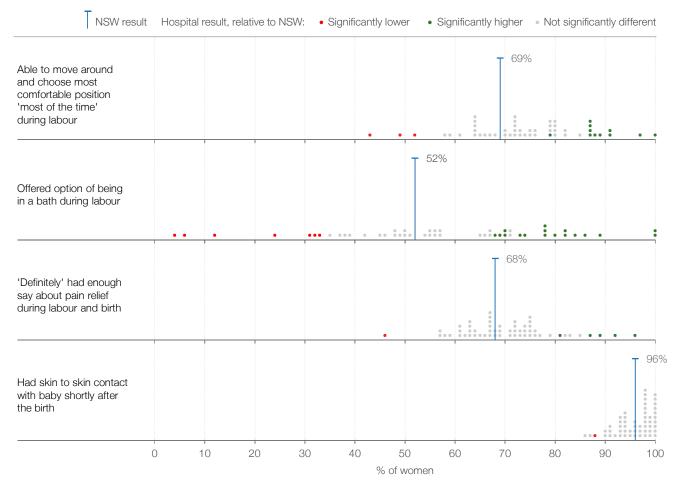
Question	Responses	
	■ Yes, most of the time	Ves, sometimes
During your labour, were you able to move around and choose the position that made you most comfortable?	69%	20% 11%
	■ Yes	No
Were you offered the option of being in a bath during labour?	52%	48%
	■Yes, definitely ■Ye	es, to some extent No
Did you have enough say about your pain relief during your labour and birth?	68%	23% 8%
Did you have skin to skin contact with your baby (that means that your	■Yes	No
baby was naked, and placed directly on your chest or tummy) shortly after the birth?	96	%

Figure 2.8 Experiences of labour and birth, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015



Across LHDs, responses from women who gave birth in Southern NSW, Northern Sydney, Western NSW and Northern NSW hospitals were more positive than the NSW result overall for two questions. Responses from women who gave birth in a South Western Sydney hospital were less positive than NSW for three questions (Figure 2.8). At a hospital level, there was wide variation in the percentage of women who were offered the option of being in a bath during labour (4% to 100%) (Figure 2.9).

Figure 2.9 Experiences of labour and birth, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015



Postnatal hospital care

Three in 10 women received conflicting advice about feeding their baby

Postnatal care supports new mothers in their recuperation; providing information and support about caring for themselves and their babies.

Nine in 10 women (90%) said midwives worked with them to establish a good position for breastfeeding.

Fewer said they were 'completely' given enough information about how to care for themselves (51%) and their baby (52%). Almost a third (32%) were given conflicting advice about feeding their baby (Figure 2.10).

Figure 2.10 Postnatal hospital care, all response categories, NSW public hospitals, 2015

Question	Responses			
After the birth, did the health professionals give you enough information	■Yes, completely	Yes, to s	some extent	No
about how to care for yourself?	51%		34%	16%
After the birth, did the health professionals give you enough information	■Yes, completely	■Yes, to	some extent	No
about how to care for your baby?	52%		31%	17%
	■Yes, always	■Yes, sor	netimes	No
Did the hospital provide access to food when you needed it?	56%		32%	12%
Were your decisions about how you wanted to feed your baby	■Yes, always	■Yes, sor	netimes	No
respected by the health professionals?	80	0%		16%
Did you ever receive conflicting advice about feeding your baby from the	No		Yes	
health professionals?	68%			32%
Did midwives in the hospital work with you to show you a good position	■Yes		No	
for breastfeeding your baby?		90%		10%

Figure 2.11 Postnatal hospital care, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW:	N: Significantly lower Significantly higher Not significantly different
'Completely' given enough information about how to care for myself after birth of baby	• • • • • • • • • • • • • • • • • • •
	51%
'Completely' given enough information about how to care for baby	• • • • • 52%
'Always' had access to hospital food when needed	Southern NSW Northern NSW 56% Northern Sydney
Health professionals 'always' respected decisions about feeding baby	Northern Sydney
Did not receive conflicting advice from health professionals about feeding baby	68%
Midwives helped establish breastfeeding	Southern NSW
	0 10 20 30 40 50 60 70 80 90 100
	% of women

Across LHDs, responses from women who gave birth in a Southern NSW hospital were more positive than the NSW result overall for three questions. No LHD had results that were less positive than NSW (Figure 2.11). At a hospital level, variation was widest for the question regarding being 'completely' given enough information about how to care for the baby (32% to 89%) (Figure 2.12).

Figure 2.12 Postnatal hospital care, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, relative to NSW:	Significantly lower Significantly higher Not significantly different
'Completely' given enough information about how to care for myself after birth of baby		- 51%
'Completely' given enough information about how to care for baby		52%
'Always' had access to hospital food when needed		- 56%
Health professionals 'always' respected decisions about feeding baby		- 80%
Did not receive conflicting advice from health professionals about feeding baby		- 68%
Midwives helped establish breastfeeding		- 90%
(0 10 20 30	40 50 60 70 80 90 100 % of women

Follow-up care after leaving the hospital

Almost all women had a follow-up appointment in the first two weeks after arriving home

NSW Health policy states that all women should receive midwifery support at home for at least two weeks after their baby is born. In NSW 95% of women had follow-up care in the two weeks after arriving home (Figure 2.13). Follow-up care was provided by different health professionals in different settings (76% by a midwife at home; 24% by a nurse at home; 9% by a midwife/nurse at a clinic) [data not shown].

Figure 2.13 Follow-up care after leaving hospital, all response categories, NSW public hospitals, 2015



Figure 2.14 Follow-up care after leaving hospital, percentage of women who selected the most positive response category, LHD results relative to NSW, 2015

NSW result LHD result, relative to NSW: • Significantly lower • Significantly higher Not significantly different Northern Sydney Had follow-up appointment with midwife or nurse within two weeks of arriving home 95% Midwife or nurse asked how I was feeling emotionally •)•) during follow-up appointment 98% Midwife or nurse 'always' listened to me during follow-up appointment 90% Southern NSW 'Definitely' had enough time with midwife or nurse to ask questions or discuss concerns during follow-up appointment 90% 20 0 10 30 40 50 60 70 80 90 100 % of women

No LHD had results that were either more positive or less positive than the NSW result for multiple questions (Figure 2.14). At a hospital level, variation was widest for the question about whether midwives or nurses 'always' listened during the follow-up appointment (67% to 100%) (Figure 2.15).

Figure 2.15 Follow-up care after leaving hospital, percentage of women who selected the most positive response category, public hospital results relative to NSW, 2015

NSW result	Hospital result, relative to NSW:	 Significantly lower 	Significantly higher	 Not significantly different
Had follow-up appointment with midwife or nurse within two weeks of arriving home				- 95%
Midwife or nurse asked how I was feeling emotionally during follow-up appointment				-
Midwife or nurse 'always' listened to me during follow-up appointment			•	90%
'Definitely' had enough time with midwife or nurse to ask questions or discuss concerns during follow-up appointment			••	90%
	0 10 20 30		60 70	80 90 100
		% of worr	nen	

SECTION 3 Comparative analyses

Local health district overview

Figure 3.1 Aspects of maternity care, summary of LHD results relative to NSW (based on percentage of women who selected the most positive response category)

Overall experience	 Overall, antenatal care was 'very good' Overall, hospital care during labour and birth was 'very good' Overall, hospital care after baby was born was 'very good' Overall, hospital care after baby was born was 'very good' Would 'speak highly' of maternity experience at the hospital to friends and family
Access and timeliness	 Time spent travelling one way for antenatal care check-ups was 'under 30 mins' Time spent between arriving at antenatal check-ups and leaving was 'under 30 mins' Time waited to be seen at antenatal check-ups was 'under 30 mins' Length of stay in hospital was 'about right'
Communication and information	 Health professionals providing antenatal care 'always' explained things in an understandable way Midwives or doctors 'always' explained things in an understandable way during labour and birth Health professionals 'always' explained things in an understandable way after birth of baby
Respect and dignity	 Health professionals providing antenatal care were 'always' polite and courteous Midwives or doctors 'always' introduced themselves during labour and birth 'Always' treated with respect and dignity during labour and birth 'Always' given enough privacy in birth room or theatre
Engagement and participation	 'Definitely' involved in decisions during labour and birth Birthing companion 'definitely' involved as much as they wanted to be during labour and birth 'Definitely' involved in decisions about discharge from hospital
Comprehensive and whole-person care	 Midwives or doctors were 'always' kind and caring during labour and birth Health professionals were 'always' kind and caring after birth of baby
Coordination and continuity	 Did not receive conflicting information from midwives or doctors during labour and birth Did not receive conflicting information from health professionals after birth of baby Completely' given enough information about caring for myself and baby before leaving hospital Told who to contact if worried about my or baby's health after discharge
Assistance and responsiveness	 Health professionals 'completely' discussed worries or fears during antenatal check-ups Midwives or doctors 'definitely' did everything to help manage pain during labour and birth 'Always' able to get assistance from midwives or doctors when needed during labour and birth Midwife or doctor 'completely' discussed worries or fears during labour and birth Midwife or doctor 'completely' discussed worries or fears during labour and birth 'Always' able to get assistance from midwives or fears during labour and birth 'Always' able to get assistance or advice from health professionals when needed after birth of baby
Cleanliness and hygiene	 Wards or rooms used after birth of baby were 'very clean' Toilets and bathrooms used after birth of baby were 'very clean' 'Always' saw health professionals clean their hands
Confidence and trust	 'Always' had confidence and trust in health professionals providing antenatal care 'Always' had confidence and trust in midwives or doctors during labour and birth



Local health district overview continued

Figure 3.2 Stages of maternity care, summary of LHD results relative to NSW (based on percentage of women who selected the most positive response category)

Antenatal visit	 'Less than 14 weeks' pregnant at first antenatal care appointment Provided with a personal antenatal card (e.g. a Yellow Card) Health professionals updated personal antenatal card at every check-up
Screening and prevention	 Health professionals advised about risks of consuming alcohol while pregnant Health professionals advised about risks of exposure to tobacco smoke while pregnant Told about programs to stop smoking during antenatal check-ups Health professionals discussed importance of healthy weight gain during antenatal check-ups Health professionals asked how I was feeling emotionally during pregnancy Shown or given information about safe sleeping for baby
Labour and birth	 Able to move around and choose most comfortable position 'most of the time' during labour Offered option of being in a bath during labour 'Definitely' had enough say about pain relief during labour and birth Had skin to skin contact with baby shortly after the birth
Postnatal hospital care	 'Completely' given enough information about how to care for myself after birth of baby 'Completely' given enough information about how to care for baby 'Always' had access to hospital food when needed Health professionals 'always' respected decisions about feeding baby Did not receive conflicting advice from health professionals about feeding baby Midwives helped establish breastfeeding
Follow-up care at home	 Had follow-up appointment with midwife or nurse within two weeks of arriving home Midwife or nurse asked how I was feeling emotionally during follow-up appointment Midwife or nurse 'always' listened to me during follow-up appointment 'Definitely' had enough time with midwife or nurse to ask questions or discuss concerns during follow-up appointment



Comparisons by patient characteristics

Among women who responded to the survey, 25% were aged 35+ years, 45% gave birth to their first baby, and 73% had a vaginal birth (Figure 3.3).

The maternity survey results were analysed to explore associations between these characteristics (age, parity and type of birth) and womens' responses.

The results showed age had little association with responses. However, there were important differences in experiences of care between women who had their first baby and those who had given birth before. Women who had their first baby responded less positively to 13 questions including those about their overall experience, communication and information, engagement and participation, coordination and continuity, and postnatal hospital care (Figure 3.4).

There were also differences in responses by type of birth. Women who had an emergency caesarean section responded less positively than those who had a vaginal birth to 22 questions. Women who had a planned caesarean section responded less positively than those who had a vaginal birth to eight questions.

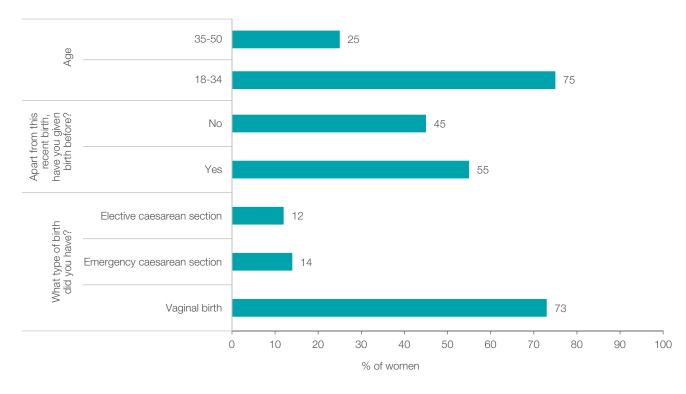


Figure 3.3 Characteristics of maternity patients, NSW public hospitals, 2015⁵

Note: Percentages may not sum to 100% due to rounding.

	(compare	-time moth ed with tho ren birth bo	se who		ean sectior ır (emerger d with vagir	icy)	labo	an section our (planne d with vagir	d)
Topic for report	Less positive	No difference	More positive	Less positive	No difference	More positive	Less positive	No difference	More positive
Overall experience	2	2		3	1		1	3	
Access and timeliness		4			4	•	2	2	
Communication and information	2	1	•	2	1			3	•
Respect and dignity		4		1	3			4	
Engagement and participation	2	1	•	2	1		1	2	•
Comprehensive and whole-person care	1	1		2	•			2	•
Coordination and continuity	2	2	•	2	2	•	•	4	•
Assistance and responsiveness	•	5	•	1	4	•	1	3	1
Cleanliness and hygiene	•	3	•	•	3	•	•	3	•
Confidence and trust		2		2				2	
Patient-reported outcomes		1	•	1	•	•	1	•	•
Antenatal visit		3			3			3	
Screening and prevention		3	3		6	•	1	5	•
Labour and birth	1	2	1	4	•	•	1	1	•
Postnatal hospital care	3	2	1	2	4	•	•	6	•
Follow-up care at home		4	•		4			4	•
Total	13	40	5	22	36	0	8	47	1

Figure 3.4 Summary of differences in question responses between subgroups of women, NSW, 2015

Comparisons by parity: First or subsequent births

Expectations, knowledge and perceptions about maternity care among women who are having their first baby, can vary markedly from those having their second or subsequent child.

While pregnancy symptoms do not show huge variations by parity, there are important differences in patient needs and expectations between women who are giving birth to their first or to subsequent babies.

For first pregnancies, labour is usually longer. Episiotomies and perineal tears are less likely with second babies – despite the fact that second babies tend to be larger than first babies. Women having their second babies are less likely to need drugs for pain relief; and breastfeeding is generally not as difficult, particularly if women have successfully breastfed their first baby.⁶

Responses to the 58 survey questions included in this report were analysed to investigate the extent to which parity was associated with womens' responses. There were five questions for which women who gave birth to their first baby responded more positively than women who had given birth before; and 13 questions to which they responded less positively (Figure 3.5).

Women who were in hospital to give birth to their first baby answered more positively when asked whether they received advice about alcohol consumption (91% for women who gave birth to their first baby and 84% for women who had given birth before), exposure to tobacco smoke (91% and 84%), and healthy weight gain during pregnancy (74% and 67%). A higher proportion said midwives worked with them to show a good position for breastfeeding (93% and 86%). Responses from women who were in hospital to have their first baby were however less positive about overall care – fewer would 'speak highly' of the hospital (76% and 81%); and fewer said postnatal hospital care was 'very good' (52% and 59%).

Other aspects of care that were rated less positively by women who had their first baby included the extent to which, during labour and birth, they felt involved in decisions (68% and 74%), and whether midwives and doctors 'always' explained things in an understandable way (83% and 88%).

Similarly, after the birth of their baby, a smaller proportion of women who gave birth to their first baby said professionals were 'always' kind and caring, (70% and 78%); that doctors and midwives 'always' explained things in an understandable way (70% and 77%), and that they were 'completely' given enough information about how to care for themselves and their baby before leaving hospital (54% and 70%).

A large proportion said they received conflicting information from health professionals after their baby's birth (42% and 24%); including how to feed their baby (41% and 24%); and were less likely to say they 'definitely' felt involved in decisions about leaving hospital after the birth (62% and 68%).

Figure 3.5 Questions for which there were significantly different responses between women who were first time mothers and those who had given birth before, NSW, 2015

		0	10	20	30	40	50	60	70	80	90	10
Aspect of care	Question	Res	pons	es								
	Overall, hospital care after baby was born was 'very good'						*					
Overall experience	Would 'speak highly' of maternity experience at the hospital to friends and family									*		
Communication and	Midwives or doctors 'always' explained things in an understandable way during labour and birth									*		
nformation	Health professionals 'always' explained things in an understandable way after birth of baby								*			
Engagement and	'Definitely' involved in decisions during labour and birth								•			
participation	'Definitely' involved in decisions about discharge from hospital							*				
Comprehensive and whole-person care	Health professionals were 'always' kind and caring after birth of baby								*			
Coordination and	Did not receive conflicting information from health professionals after birth of baby							*				
continuity	'Completely' given enough information about caring for myself and baby before leaving hospital						*)				
	Health professionals advised about risks of consuming alcohol while pregnant										*	
Screening and prevention	Health professionals advised about risks of exposure to tobacco smoke while pregnant										*	
	Health professionals discussed importance of healthy weight gain during antenatal check-ups											
Labour and birth	Able to move around and choose most comfortable position 'most of the time' during labour							*				
	Offered option of being in a bath during labour							*				
	'Completely' given enough information about how to care for baby						*					
Postnatal hospital	Health professionals 'always' respected decisions about feeding baby									* ∎		
care	Did not receive conflicting advice from health professionals about feeding baby							*				
	Midwives helped establish breastfeeding										*	

Note: Responses regarding smoking cessation programs exclude women who said they did not smoke.

Comparisons by type of birth: Vaginal or caesarean section

Among respondents to the 2015 survey, 73% had a vaginal birth, and 26% had a caesarean section (12% elective and 14% emergency). Distribution of types of birth differed across LHDs (Figure 3.6).

For 22 of the 58 survey questions included in this report, responses from women who had a vaginal birth were most positive. Care during labour and birth was rated 'very good' by 77% of those who had a vaginal birth; 71% who had an elective caesarean section; and 63% who had an emergency caesarean section.

When asked whether they would 'speak highly' of their hospital experience, a higher proportion of women who had a vaginal birth said they would do so (vaginal 80%; elective caesarean 78%; emergency caesarean 72%). A higher proportion also said they did not receive conflicting information during labour and birth (vaginal 83%; elective caesarean 81%; emergency caesarean 71%); or after the birth (vaginal 70%; elective caesarean 66%; emergency caesarean 57%).

Other aspects of care rated more positively by women who had a vaginal birth included whether they were:

- 'Definitely' involved in decisions during labour and birth (vaginal 74%; elective caesarean 67%; emergency caesarean 60%)
- 'Always' able to get assistance when needed during labour and birth (vaginal 83%; elective caesarean 76%; emergency caesarean 72%).

A lower proportion of women who had an emergency caesarean section said:

- Doctors and midwives 'definitely' did everything they could to help manage pain during labour and birth (vaginal 76%; elective caesarean 87%; emergency caesarean 70%)
- · They 'always' had confidence and trust in midwives or doctors during labour and birth (vaginal 85%; elective caesarean 90%; emergency caesarean 76%).

Figure 3.6 Respondents to the survey, by type of birth, NSW LHDs, 2015

	VaginalCaesarean seMissing	ction after la	abour (emerg	iency)		th vacuur before lat		ion/forceps ctive))		
Central Coast			7	2%				6%	14%	8%	
South Western Sydney			65%				119	%	11%	12%	
Mid North Coast			65%				6%	15%	6	14%	
Nepean Blue Mountains			63%				8%	149	6	15%	
Northern Sydney			63%				159	%	14%	9%	5
Southern NSW			63%			10%			5%	12%	
Western NSW			63%			10%			5%	13%	
NSW			62%			119			4%	12%	
Hunter New England			61%			11%			6%	11%	
Northern NSW			60%			9		12%		18%	
South Eastern Sydney			60%				14%	12	2%	14%	
Western Sydney			59%				13%	15	5%	13%	
Murrumbidgee			58%			1	2%	169	%	13%	
Illawarra Shoalhaven			58%			1	2%	169	%	13%	
Sydney			55%			16	%	16%		13%	
	0 10	20	30	40	50 % of wome	60	70	5	30	90	100

Source: NSW Patient Survey Program, Maternity Care Survey, January-December 2015.

Note: According to the Perinatal Data Collection, across all NSW hospitals in 2015, 67% of births were vaginal and 32% were by caesarean section (20% elective and 13% emergency).¹⁰

Figure 3.7 Questions for which there were significantly different responses between women who had a vaginal birth (reference group) and those who had an elective or emergency caesarean section, NSW, 2015

	0	10	20	30	40	50	60	70	80	90	1(
Aspect of care	Question	Resp	onses				÷				
Overall experience	Overall, hospital care during labour and birth was 'very good'						*		•		
overall experience	Would 'speak highly' of maternity experience at the hospital to friends and family							*			
Communication and nformation	Midwives or doctors 'always' explained things in an understandable way during labour and birth								*	• 🔺	
Respect and dignity	'Always' treated with respect and dignity during labour and birth								*		
ngagement and	'Definitely' involved in decisions during labour and birth						*)		
articipation	Birthing companion 'definitely' involved as much as they wanted to be during labour and birth							* _	*	•	
Comprehensive and	Midwives or doctors were 'always' kind and caring during labour and birth								*		
whole-person care	Health professionals were 'always' kind and caring after birth of baby							*▲			
Coordination and	Did not receive conflicting information from midwives or doctors during labour and birth							*			
ontinuity	Did not receive conflicting information from health professionals after birth of baby						*	^ •			
Assistance and	Midwives or doctors 'definitely' did everything to help manage pain during labour and birth									*	
esponsiveness	'Always' able to get assistance from midwives or doctors when needed during labour and birth							*	•		
Confidence nd trust	'Always' had confidence and trust in midwives or doctors during labour and birth								*		
	Able to move around and choose most comfortable position 'most of the time' during labour					*		•			
about and birth	Offered option of being in a bath during labour				*	•					
abour and birth	'Definitely' had enough say about pain relief during labour and birth						*	1			
	Had skin to skin contact with baby shortly after the birth							*		*	
ostnatal hospital	Health professionals 'always' respected decisions about feeding baby							*			
are	Did not receive conflicting advice from health professionals about feeding baby						*				

Note: Vaginal births include those that were unassisted and assisted (with vacuum extraction/forceps).

Comparisons outside NSW

Patient survey results from other healthcare systems can provide context and insight about the relative strengths and weaknesses of performance in NSW. Such context is provided by recent maternity surveys conducted in Queensland, England and Scotland.^(11,12,13) Across these surveys, 26 questions were similar enough to allow meaningful comparisons. Where results could be compared with two or more jurisdictions, NSW had the most positive response for six questions. These questions addressed overall care, access and timeliness, coordination and continuity, and communication and information. The greatest difference was seen in the question regarding whether the midwife or nurse 'always' listened during follow-up care after leaving the hospital (NSW 90%; England 77%; Scotland 79%) (Figure 3.8).

Figure 3.8 Experience of maternity care (comparable questions), NSW 2015, Queensland 2014–2015*, England 2015** and Scotland 2015[±]

	 NSW 2015 results NHS England 2015 results Quint Activity 	een	Islan	d 20 ⁻	4–1	5 resu	lts	NH	IS Sc	otlanc	d 2015	resu	ilts
			0	10	20	30	40	50	60	70	80	90	100
	Question		Res	pons	es								
are	Overall rating of antenatal care								4				
Antenatal care	Health professionals explain things in an understandable way										•		
Ante	Health professionals asked about feelings											•	
	Overall rating of care									4			
	Able to move around and choose most comfortable position									•			
	Midwives or doctors explained things in an understandable way										•		
	Midwives or doctors introduced themselves										•		
birth	Treated with respect and dignity											•	
Labour and birth	Had enough say about pain relief									•		•	
Labo	Involved in decisions												
	Birthing companion involved as much as they wanted to be										•		
	Had skin to skin contact with baby shortly after birth												
	Midwives or doctors did everything reasonable to help manage pain								•				
	Had confidence and trust in midwives or doctors											•	
		C) -	0	20	30	40	50	60	70	80	90	100
							% (of wor	men				

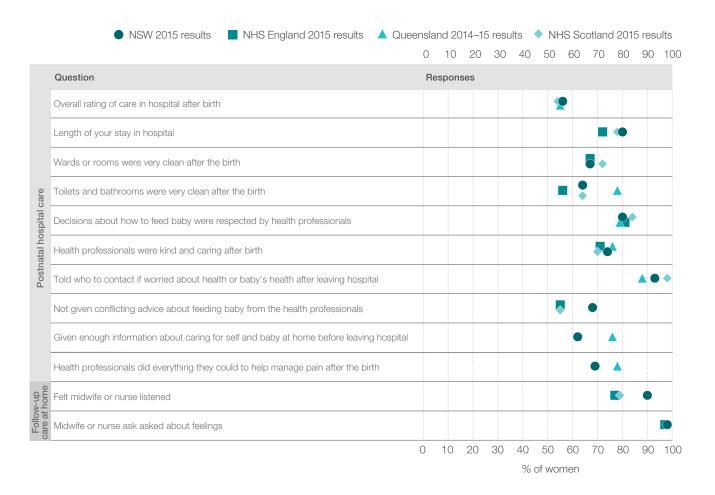
*Queensland Health Maternity Patient Experience Survey 2014–2015: In total, 4,977 participants, giving an overall response rate of 63%. ** NHS Maternity Services Survey 2015: In total, 20,631 participants, giving an overall response rate of 41.2%. ± 2015 Scottish Maternity Care Survey: In total 2,036 participants, giving an overall response rate of 41%.

NSW was outperformed by at least two jurisdictions for four questions. These addressed communication and information, the physical environment and engagement and participation. The greatest difference was seen in the question about whether during labour, women were able to move around and choose the most comfortable position (NSW 69%; Queensland 84%; England 70%; Scotland 73%) (Figure 3.8).

Comparing different surveys

Only questions with identical, or very similar, wording were included in this comparison.

Results in different jurisdictions can be influenced by sampling criteria, patient case mix, survey methodology and healthcare system context and therefore comparisons should be interpreted with care (see Appendix 4).



Appendices

Appendix 1: Hospitals in the survey

Sampled hospitals, service level, number of women, respondents, response rates and proportion of patients who received their antenatal care at the hospital where they gave birth

Local health district	Hospital name	Hospital service level*	Number of women who gave birth in 2015*	Number of respondents	Response rate	% of women who received antenatal care at delivery hospital
Central Coast	Gosford Hospital	5	2,750	93	31%	68%
Contral Coust	Wyong Hospital	2	144	60	45%	92%
	Central Coast total	<u> </u>	2,894	153	35%	0270
Far West	Broken Hill Base Hospital	3	216	21	33%	#
	Far West total		216	21	33%	
Hunter New England	Armidale and New England Hospital	3	414	72	36%	56%
	Gunnedah District Hospital	3	161	31	35%	13%
	Inverell District Hospital	3	224	41	25%	5%
	John Hunter Hospital	6	3,841	113	38%	61%
	Maitland Hospital	5	1,511	102	35%	64%
	Manning Base Hospital	4	699	87	33%	27%
	Moree District Hospital	3	181	45	31%	29%
	Muswellbrook District Hospital	3	201	56	35%	26%
	Narrabri District Hospital	3	121	27	29%	#
	Singleton District Hospital	2	161	50	36%	# 14%
	Tamworth Base Hospital	4	1,007	80	29%	57%
		4	8,521		33%	J1 /0
Illawarra Shoalhaven	Hunter New England total	3	884	704 91	33%	34%
illawarra Shuaillaven	Shoalhaven District Memorial Hospital Wollongong Hospital	5	2.417	91	32%	54% 55%
	Illawarra Shoalhaven total	0		187		00%
Mid North Coost		E	3,301	-	32%	700/
Mid North Coast	Coffs Harbour Base Hospital	5	1,040	91	33%	70%
	Kempsey Hospital	3	256	52	28%	57%
	Port Macquarie Base Hospital	5	787	91	34%	91%
	Mid North Coast total		2,083	234	32%	0.10/
Murrumbidgee	Deniliquin Health Service	3	120	33	35%	61%
	Griffith Base Hospital	4	483	89	35%	52%
	Tumut Health Service	3	71	17	34%	#
	Wagga Wagga Base Hospital	5	847	86	33%	50%
	Young Health Service	3	135	42	39%	27%
	Murrumbidgee total		1,656	267	35%	
Nepean Blue Mountains	Blue Mountains District Anzac Memorial Hospital	3	253	98	51%	83%
	Lithgow Health Service	3	221	62	36%	11%
	Nepean Hospital	6	3,817	83	28%	74%
	Nepean Blue Mountains total		4,291	243	36%	
Northern NSW	Grafton Base Hospital	4	402	67	29%	41%
	Lismore Base Hospital	5	1,092	107	39%	50%
	Murwillumbah District Hospital	3	87	34	41%	73%
	The Tweed Hospital	5	1,321	108	39%	36%
	Northern NSW total		2,902	316	36%	

Local health district	Hospital name	Hospital service level*	Number of women who gave birth in 2015*	Number of respondents	Response rate	% of women who received antenatal care at deliverv hospital
Northern Sydney	Hornsby and Ku-Ring-Gai Hospital	4	1,136	143	50%	91%
	Manly District Hospital	4	961	139	50%	90%
	Mona Vale and District Hospital	4	670	118	45%	86%
	Royal North Shore Hospital	6	2,609	151	50%	69%
	Ryde Hospital	2	124	68	59%	96%
	Northern Sydney total		5,500	619	50%	
South Eastern Sydney	Royal Hospital for Women	6	3,989	123	41%	56%
	St George Hospital	5	2,468	94	31%	73%
	Sutherland Hospital	4	1,285	120	42%	64%
	South Eastern Sydney total		7,742	337	38%	
South Western Sydney	Bankstown/Lidcombe Hospital	4	2,216	52	17%	74%
	Bowral and District Hospital	3	381	102	44%	70%
	Campbelltown Hospital	4	3,034	102	34%	58%
	Fairfield Hospital	4	1,658	82	28%	72%
	Liverpool Hospital	6	3,400	87	29%	70%
	South Western Sydney total		10,689	425	30%	
Southern NSW	South East Regional Hospital	3	218	75	41%	69%
	Cooma Health Service	3	159	49	40%	11%
	Goulburn Base Hospital	4	304	80	39%	62%
	Moruya District Hospital	3	291	57	28%	77%
	Queanbeyan Health Service	3	415	109	45%	54%
	Southern NSW total		1,387	370	39%	
Sydney	Canterbury Hospital	4	1,706	80	28%	68%
	Royal Prince Alfred Hospital	6	4,825	125	42%	56%
	Sydney total		6,531	205	35%	
Western NSW	Bathurst Base Hospital	3	513	107	42%	18%
	Cowra District Hospital	3	132	35	33%	31%
	Dubbo Base Hospital	5	1,146	78	27%	29%
	Forbes District Hospital	3	168	28	33%	#
	Mudgee District Hospital	3	244	52	39%	25%
	Orange Health Service	4	994	44	31%	51%
	Parkes District Hospital	3	120	28	29%	#
	Western NSW total		3,317	372	34%	
Western Sydney	Auburn Hospital	4	1,305	78	27%	78%
	Blacktown Hospital	5	3,049	104	35%	84%
	Westmead Hospital	6	5,455	104	33%	67%
	Western Sydney total		9,809	286	32%	
NSW	NSW		70,839	4,739	36%	

* Source: NSW Perinatal Data Collection (SAPHaRI), Centre for Epidemiology and Evidence, NSW Ministry of Health (BHI analysis).

Data suppressed for results that are based on fewer than 30 respondents.

Note: Service levels: Level 1: Postnatal only. Level 2: Normal risk delivery only. As Level 1, plus able to cope with sudden unexpected complications until transfer. (No caesarean section deliveries are reported by hospital for level 1 and 2 hospitals). Level 3: As Level 2, plus may deliver selected moderate risk pregnancies in consultations. Level 4: As Level 3, plus care for mothers and babies at moderate risk. Level 5: As Level 4, plus may deliver selected high risk pregnancies and has Level 4 neonatal service and midwifery on site. Level 6: Care of normal, moderate and high risk deliveries. Obstetric and Anaesthetic Registrar on site 24 hours (hospitals with more than 3,000 births per year).

Appendix 2: Variation in antenatal care providers

While this edition of *Patient Perspectives* focuses on women who gave birth in a NSW public hospital, models of care differ across the state and antenatal services are provided by a variety of health professionals.

Among survey respondents, 61% said they received most of their antenatal care from public hospital midwives, 11% from public hospital obstetricians and 16% from GPs. Proportions varied across LHDs. For example, among women who gave birth in a public hospital in Western NSW, 29% said they received most of their antenatal care from public hospital midwives while in Central Coast, 86% of women said they received most of their antenatal care from public hospital midwives (Figure A2a). Proportions varied more markedly across hospitals. The proportion of women who said they received most of their antenatal care from public hospital midwives ranged from 2% in Inverell to 99% in Ryde (Figure A2b).

It is notable that hospitals that performed well across the survey such as Ryde and Wyong (see Appendix 3), have a model of care with most of the antenatal care delivered by midwives.

Figure A2a Main provider of antenatal care among survey respondents, by LHD, 2015

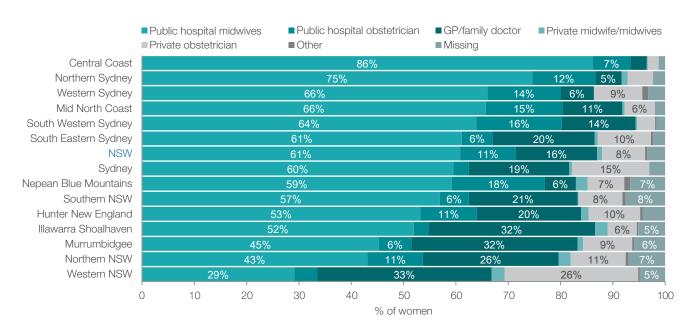


Figure A2b Main provider of antenatal care among survey respondents, by hospital, 2015

	 Public hospital mid Private obstetrician 		Public ho Other	ospital ol	bstetrician	■ GF ■ Mis	/family doctor	Priv	ate midwife	∍/midwive
Ryde					99%		0			
Wyong					93%					
Blue Mountains					92%					
Gosford				86					89	
Manly				849					9%	
Mona Vale				82%					7%	8%
Moruya)					070
Murwillumbah				<u>81%</u> 79%					14%	60/
									9%	6%
Hornsby				79%					11%	001
Blacktown				76%				12	2%	6%
Port Macquarie				75%					20%	
St George				4%					15%	
Campbelltown			7	3%				12%	9%	ó
Auburn			72	2%				9%	14%	5
Canterbury			67%				5%		26%	
Royal North Shore			66%				1	5%	9%	5%
John Hunter			64%				11%		4%	7%
Fairfield			62%				209		169	
Bowral			62 /0 61 %				13%	14		9%
Sutherland			51%						70	
							7%	20%	00/	7%
Deniliquin			61%				21%		6%	9%
Maitland			61%				13%	139		
Coffs Harbour			0%				14%	139		11%
Bankstown/Lidcombe		6	0%				20%		16%	
South East Regional		6	0%				11%	20	%	5%
Wollongong		6	0%					31%		
Nepean		6	0%				20%		7%	7%
Liverpool			9%				17%		17%	
Kempsey			9%				,.	37%		
Goulburn			3%				5%	22%	, 	11%
Royal Prince Alfred		55%					15%	2270	23%	1170
						6%		27		9%
Queanbeyan		54%				0%0	24	<i>7</i> 0	6%	9%
Westmead		53%				70/	18%		22%	
Royal Hospital Women		52%				7%	22%		169	%
Tamworth		47%				20%			23%	
Wagga Wagga		47%			6%		34%			9%
Lismore		47%			11		10%	28		
Orange		47%			9%	79	% 7%		28%	
Armidale		46%			119	6	26%		109	6
Griffith		45%			9%		22%		14%	7%
The Tweed	L	10%			14%		29%			9%
Young	37					41	%			15%
Grafton	36						48%			6%
Dubbo	32%	/0		11%			49%			070
Cowra				1170		400/	4370		110/	0.0/
	31%					46%	20/		11%	9%
Moree	29%		0.01				3%		100(9%
Shoalhaven	28%		8%			36%			16%	8%
Muswellbrook	27%				459	%			18	3%
Manning	26%				34%			26%		12%
Mudgee	21%					63%				8%
	13% 6%				63%				10%	8%
Cooma	12% 6%					73%				7%
Bathurst					71					8%
Bathurst										
Bathurst Singleton	10% 6%				75%	, 				10%
Bathurst Singleton Lithgow	10% 6% 10%				75% 61%				19%	10%
Bathurst Singleton	10% 6%				75% 61% 76%) 			19%	10% 15%

Note: Reporting of hospital results for questions related to antenatal care is restricted to women who received antenatal care at the same hospital where they gave birth.

Appendix 2: Variation in antenatal care providers continued

Comparing responses to questions about experiences of antenatal care according to the type of provider shows that women who received most of their antenatal care from public hospital obstetricians responded least positively to the majority of the questions. These data have not however, been adjusted for case mix. More complex cases are usually seen by obstetricians and this may have affected women's experiences of care (Figure A2c).

Figure A2c Questions regarding antenatal care, percentage of women who selected the most positive response option, by main provider of antenatal care, NSW, 2015



Note: Responses regarding smoking cessation programs exclude women who said they did not smoke.

Appendix 3: Hospital results overview

Reviewing hospital level results for all survey questions helps to identify hospitals with consistent patterns of performance. Responses from patients who visited Ryde and Wyong hospitals were more positive than the NSW result for 43 and 39 questions respectively. Responses from women who gave birth in Fairfield hospital were less positive than the NSW result for 20 questions.

Hospital result, relative to NSW:	Significantly lower	Significantly higher	Not significantly different	Data supressed (<30 responses)
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Aspect of care	Question	NSW	Armidale	Auburn	Bankstown/Lidcombe	Bathurst	Blacktown	Blue Mountains	Bowral	Campbelltown	Canterbury	Coffs Harbour	Cooma	Cowra	Deniliquin	Dubbo	Fairfield	Gosford
	Overall, antenatal care was 'very good'	62	79	47	49		67	86	70	53	47	56					52	67
Overall experience	Overall, hospital care during labour and birth was 'very good'	74	79	59	63	71	68	93	84	66	62	77	88	97	82	75	51	74
overall experience	Overall, hospital care after baby was born was 'very good'	56	67	46	44	59	45	83	69	43	46	71	76	91	67	55	49	61
	Would 'speak highly' of maternity experience at the hospital to friends and family	79	78	74	60	77	76	94	77	76	74	84	90	97	81	74	65	87
	Time spent travelling one way for antenatal care check-ups was 'under 30 mins'	81	77	83	89		89	85	63	85	94	74					86	87
Access and	Time spent between arriving at antenatal check-ups and leaving was 'under 30 mins'	23	54	19	14		24	37	18	14	15	10					16	28
timeliness	Time waited to be seen at antenatal check-ups was 'under 30 mins'	54	97	16	19		55	92	61	47	43	53					29	73
	Length of stay in hospital was 'about right'	80	86	76	71	83	81	82	84	75	86	84	88	91	91	88	85	83
	Health professionals providing antenatal care 'always' explained things in an understandable way	84	90	78	81		92	90	85	75	79	74					76	87
Communication and information	Midwives or doctors 'always' explained things in an understandable way during labour and birth	85	82	79	83	82	92	96	88	80	85	84	88	91	79	90	76	88
	Health professionals 'always' explained things in an understandable way after birth of baby	74	78	71	65	75	73	88	87	69	69	78	86	94	73	69	57	74
	Health professionals providing antenatal care were 'always' polite and courteous	89	85	81	86		96	96	84	78	89	85					81	93
Respect and dignity	Midwives or doctors 'always' introduced themselves during labour and birth	83	89	71	80	84	87	92	88	80	80	89	83			88	62	83
nespect and dignity	'Always' treated with respect and dignity during labour and birth	88	93	83	83	88	91	94	89	81	86	91	90	100	88	88	74	88
	'Always' given enough privacy in birth room or theatre	89	93	83	87	92	95	93	90	88	88	88	90	100	94	85	85	93
	'Definitely' involved in decisions during labour and birth	71	77	62	68	72	74	84	70	70	71	74	83	88	75	77	56	67
Engagement and participation	Birthing companion 'definitely' involved as much as they wanted to be during labour and birth	85	90	84	84	90	87	92	88	79	81	93	90	97	88	88	78	82
	'Definitely' involved in decisions about discharge from hospital	65	70	49	55	66	72	74	79	50	63	71	75	97	81	76	64	67
Comprehensive and	Midwives or doctors were 'always' kind and caring during labour and birth	85	89	78	81	82	88	96	87	75	83	90	90	100	91	88	70	78
whole-person care	Health professionals were 'always' kind and caring after birth of baby	74	75	59	65	77	70	90	76	74	63	80	88	97	82	74	68	75
	Did not receive conflicting information from midwives or doctors during labour and birth	81	80	62	67	82	84	94	84	79	84	81	92	97	79	87	59	81
Coordination and	Did not receive conflicting information from health professionals after birth of baby	68	74	68	65	71	81	77	65	63	65	64	78	89	78	77	49	70
continuity	'Completely' given enough information about caring for myself and baby before leaving hospital	62	57	54	70	62	65	78	67	53	61	63	74	83	72	65	63	70
	Told who to contact if worried about my or baby's health after discharge	93	90	86	88	97	86	95	92	85	92	97	96	94	100	89	89	96
	Health professionals 'completely' discussed worries or fears during antenatal check-ups	60		42			68	70	53	51		66					50	67
	Midwives or doctors 'definitely' did everything to help manage pain during labour and birth	76	77	71	67	78	76	92	85	62	77	86	76	97	85	79	63	83
Assistance and responsiveness	'Always' able to get assistance from midwives or doctors when needed during labour and birth	80	82	71	81	75	81	96	83	71	74	82	80	89	82	82	61	86
	Midwife or doctor 'completely' discussed worries or fears during labour and birth	60	62	64		56	70	76	58	60	74	56				65	56	61
	'Always' able to get assistance or advice from health professionals when needed after birth of baby	66	62	54	67	72	58	86	75	58	64	69	77	85	81	71	57	69
	Wards or rooms used after birth of baby were 'very clean'	67	75	69	56	83	54	93	73	74	39	87	86	86	94	49	48	68
Cleanliness and hygiene	Toilets and bathrooms used after birth of baby were 'very clean'	64	79	76	52	83	47	94	68	66	39	86	80	85	94	41	47	53
	'Always' saw health professionals clean their hands	67	68	72	58	69	58	68	76	62	75	65	88	80	85	62	62	63
Confidence	'Always' had confidence and trust in health professionals providing antenatal care	81	87	83	76		91	86	82	66	79	66					78	82
and trust	'Always' had confidence and trust in midwives or doctors during labour and birth	84	88	77	85	80	89	93	86	81	81	90	86	94	85	88	71	82
Patient-reported outcomes	Did not experience any complication or problem related to hospital care	78	82	86	85	86	75	74	83	75	81	85	82	80	76	82	85	71

For more information and results from the Maternity Care Survey, go to BHI's interactive data portal, Healthcare Observer: **bhi.nsw.gov.au/healthcare_observer**

Hospital result, relative to NSW: Significantly lower Significantly higher Not significantly different Data supressed (<30 responses)

Goulburn	Grafton	Griffith	Gunnedah	Homsby	Inverell	John Hunter	Kempsey	Lismore	Lithgow	Liverpool	Maitland	Manly	Manning	Mona Vale	Moree	Moruya	Mudgee	Murwillumbah	Muswellbrook	Nepean	Orange	Port Macquarie	Queanbeyan	Royal Hospital for Women	Royal North Shore	Royal Prince Alfred	Ryde	Shoalhaven	Singleton	South East Regional	St George	Sutherland	Tamworth	The Tweed	Wagga Wagga	Westmead	Wollongong	Wyong	Young
85		69		71		61		71		52	68	69		76		77				58		60	88	72	70	68	98	67		69	62	73	60	58	52	60	61	96	
81	73	78	90	76	80	78	90	74	85	65	75	79	74	82	93	84	92	94	89	74	82	68	91	83	80	81	99	78	88	75	71	83	63	79	67	76	75	97	90
76	55	69	73	67	78	58	76	67	66	49	60	64	52	69	76	65	86	85	84	51	66	51	81	65	61	51	99	54	74	66	53	64	31	70	52	55	50	90	71
86	76	82	84	88	93	75	85	84	87	66	77	88	69	87	87	84	94	94	95	80	81	70	94	89	91	83	99	80	98	73	71	86	58	85	77	80	76	95	90
75		71		80		68		61		79	81	90		94		82				85		80	69	79	70	74	97	77		61	89	89	79	82	62	90	86	69	
46		27		20		17		10		16	17	22		22		41				14		18	34	21	13	19	11	30		55	21	32	21	13	14	16	27	9	
69		78		74		51		53		33	63	81		81		95				34		42	97	66	49	46	98	70		98	70	80	60	26	33	43	56	100	
88	88	90	84	75	93	73	78	79	92	75	86	86	82	82	91	89	90	94	89	73	82	81	89	81	87	87	91	79	84	76	71	71	83	82	72	79	76	78	95
85		80		94		79		86		78	84	87		91		91				80		82	97	88	93	81	100	87		86	91	92	74	74	69	88	78	98	
85	78	89	87	87	78	83	87	85	90	82	88	87	83	88	87	81	94	94	88	88	84	87	91	85	89	88	99	78	94	84	86	91	80	84	78	88	85	100	90
83	67	80	87	84	85	75	79	77	82	67	78	78	70	79	87	81	85	91	89	72	82	64	87	76	83	74	99	71	83	76	74	76	71	79	72	81	64	100	83
85		82		97		89		88		83	95	91		93		88				86		88	97	90	91	91	100	87		90	88	89	88	82	78	87	86	100	
85	78	80		89	89	83	86	85	90	80	83	92	85	91	90	90	94	90	92	83	93	82	94	87	85	90	98	80	98	84	76	84	89	87	85	86	80	96	95
87	87	88	87	90	93	86	90	89	90	86	87	90	89	91	96	93	98	94	96	90	88	87	94	93	89	87	100	89	98	89	87	89	85	86	92	88	87	98	95
81	91	92	84	92	90	88	85	91	92	91	84	86	89	91	93	89	94	91	96	89	86	84	95	89	91	89	100	82	96	82	94	96	85	82	83	96	86	97	93
68	70	74	60	71	59	74	75	71	67	65	78	66	70	78	89	77	87	88	85	77	79	63	81	69	73	71	97	66	84	70	67	79	73	70	59	74	71	97	80
91	92	89	80	92	95	88	88	89	92	79	85	87	82	90	98	91	94	94	96	83	88	83	90	89	91	85	96	83	90	86	83	93	80	92	76	86	84	98	88
77	79	78	74	59	73	69	87	75	79	58	82	61	69	72	89	79	88	82	86	59	75	64	90	65	70	66	85	60	94	76	58	56	66	79	63	66	57	80	86
89	90	92	94	86	88	88	87	93	90	80	86	90	85	93	91	88	94	97	95	87	91	78	90	92	86	84	100	81	96	88	89	85	84	85	81	91	89	98	93
85	78	83	81	81	90	73	87	81	81	63	75	77	72	81	87	89	92	91	96	86	80	67	86	82	72	64	97	66	82	81	71	77	68	78	76	79	71	97	81
78	82	80	87	89	88	77	81	89	90	71	81	85	80	84	84	82	92	97	93	86	93	81	85	86	85	83	97	83	92	76	83	84	78	81	86	80	84	98	90
68	70	66	71	70	88	65	67	67	84	69	74	67	68	71	71	70	75	91	86	71	70	66	67	63	63	49	82	66	67	64	74	68	60	77	74	76	67	88	80
80	65	67	67	62	73	69	70	62	68	63	65	54	54	61	80	62	83	76	87	63	62	56	73	56	60	55	86	53	74	70	58	67	49	71	47	57	60	88	81
95	97	91		93	100	96	94	91	98	87	97	95	89	95	98	96	98	91	100	96	95	87	98	94	96	90	100	94	96	100	95	97	92	90	92	92	97	97	100
_		_	_	70	_	62	_		_	50	63	65	_	67	_				_	54		53	73	72	73	55	97	_	_	_	65	55	_	_	_	58	67		
71	75	78	77	74	85	80	79	78	85	69	81	81	73	75	89	84	83	97	82	80	93	75	83	80	78	83	97	75	86	73	73	78	72	74	67	80	75	93	69
82	77	83	84	81	80	81	90	79	89	67	79	88	82	88	82	80	88	91	89	81	91	80	92	86	81	85	100	80	92	75	80	86	75	83	76	88	80	98	88
70	53	64		55		57		60	74	48	51	61	55	68						68	80	53	64	53	69	63		41		48	51	66	50	48	48	67	62		
79	65	77	67	79	80	63	78	67	77	55	67	71	58	77	71	79	76	91	94	68	70	56	86	73	68	59	96	67	73	72	57	77	54	69	60	73	61	92	83
79	75	60	81	73	83	69	84	83	90	55	70	55	64	81	73	81	88	88	96	59	89	66	95	72	91	63	97	90	84	51	53	80	59	85	42	72	76	93	90
85	80	62	77	73	78	54	90	82	82	54	68	53	62	84	76	82	75	88	89	54	91	69	95	58	90	67	96	89	73	56	48	82	49	83	36	72	73	90	90
83	67	75	58	68	73	72	82	73	79	66	70	53	66	71	71	67	69	74	86	67	80	53	77	70	70	58	75	54	76	69	56	64	69	62	53	78	82	83	83
88		78	_	85	_	71	_	75	_	72	83	78		80		82		_	_	78	_	69	84	78	87	88	100	80		76	88	84	74	68	79	85	78	96	
88	82	90	94	89	100	81	87	85	90	77	83	88	80	88	89	88	94	94	95	87	93	82	91	86	89	88	99	88	96	83	87	84	76	79	83	88	82	97	93
83	69	76	84	78	88	71	85	76	85	78	77	76	80	79	82	79	87	79	91	69	68	74	73	85	74	76	84	79	82	80	80	82	76	82	70	75	83	83	81

Appendix 3: Hospital results overview continued

Hospital result, relative to NSW: Significantly lower Significantly higher Not significantly different Data supressed (<30 responses)

Aspect of care	Question	NSW	Armidale	Aubum	Bankstown/Lidcombe	Bathurst	Blacktown	Blue Mountains	Bowral	Campbelltown	Canterbury	Coffs Harbour	Cooma	Cowra	Deniliquin	Dubbo	Fairfield	Gosford
	'Less than 14 weeks' pregnant at first antenatal care appointment	40	38	18	22	65	24	28	36	29	24	28	64	56	24	48	39	22
Antenatal visits	Provided with a personal antenatal card (e.g. a Yellow Card)	97	92	100	100		99	100	100	100	98	88					98	98
	Health professionals updated personal antenatal card at every check-up	96	83	95	100		100	99	100	93	100	67					100	84
	Health professionals advised about risks of consuming alcohol while pregnant	87	92	90	71		86	99	85	75	90	78					84	93
	Health professionals advised about risks of exposure to tobacco smoke while pregnant	87	95	90	77		86	99	83	77	88	81					81	92
Screening and	Told about programs to stop smoking during antenatal check-ups	46																
prevention	Health professionals discussed importance of healthy weight gain during antenatal check-ups	71	69	88	79		87	63	79	65	78	54					65	62
	Health professionals asked how I was feeling emotionally during pregnancy	91	92	79	92		96	96	96	83	91	85					87	95
	Shown or given information about safe sleeping for baby	95	97	83	94	92	93	99	97	95	96	94	94	94	94	88	94	99
	Able to move around and choose most comfortable position 'most of the time' during labour	69	68	52	58	87	67	87	64	64	64	74	75			80	49	79
Labour	Offered option of being in a bath during labour	52	67	54	35	82	46	80	50	42	38	78	37			65	12	45
and birth	'Definitely' had enough say about pain relief during labour and birth	68	69	59	61	72	75	87	74	57	67	73	67	83	67	77	46	65
	Had skin to skin contact with baby shortly after the birth	96	98	90	93	99	96	98	88	94	97	98	98	87		93	99	91
	'Completely' given enough information about how to care for myself after birth of baby	51	44	51	45	52	50	72	52	42	49	47	60	83	57	64	44	50
	'Completely' given enough information about how to care for baby	52	51	47	50	49	53	70	51	45	58	57	64	83		52	56	43
Postnatal	'Always' had access to hospital food when needed	56	44	58	44	67	51	82	64	40	49	71	72	71	71	51	58	55
hospital care	Health professionals 'always' respected decisions about feeding baby	80	88	78	73	84	80	90	84	84	68	81	84	94	82	77	73	89
	Did not receive conflicting advice from health professionals about feeding baby	68	71	71	61	74	78	83	70	71	68	58	76	77	77	71	53	78
	Midwives helped establish breastfeeding	90	83	84	89	89	81	94	87	82	94	96	93			85	84	90
	Had follow-up appointment with midwife or nurse within two weeks of arriving home	95	89	91	90	96	95	100	97	97	96	93	100	97	100	92	93	100
Follow-up care	Midwife or nurse asked how I was feeling emotionally during follow-up appointment	98	100	93	98	99	96	98	100	98	99	99	100	100	97	99	90	98
at home	Midwife or nurse 'always' listened to me during follow-up appointment	90	91	81	100	93	92	86	94	89	95	91	96	100	85	93	91	91
	'Definitely' had enough time to ask questions or discuss concerns during follow-up appointment	90	97	74	96	94	92	92	93	90	87	91	98	97	85	92	85	92

Note: Responses regarding smoking cessation programs exclude women who said they did not smoke.

Goulbum	Grafton	Griffith	Gunnedah	Homsby	Inverell	John Hunter	Kempsey	Lismore	Lithgow	Liverpool	Maitland	Manly	Manning	Mona Vale	Moree	Moruya	Mudgee	Murwillumbah	Muswellbrook	Nepean	Orange	Port Macquarie	Queanbeyan	Royal Hospital for Women	Royal North Shore	Royal Prince Alfred	Ryde	Shoalhaven	Singleton	South East Regional	St George	Sutherland	Tamworth	The Tweed	Wagga Wagga	Westmead	Wollongong	Wyong	Young
31	43	29		24	89	30	46	32	63	51	29	23	39	23	52	27	55	47	42	51	39	42	26	54	46	53	50	39	43	43	45	47	40	29	56	55	55	27	60
100		91		100		85		100		100	46	100		100		100				100		100	95	99	99	97	100	100		98	98	100	100	100	98	99	98	98	
98		69		98		96		98		93		99		97		98				100		98	98	98	95	97	100	97		90	91	91	95	89	100	99	98	98	
96		97		96		84		92		84	90	88		87		91				87		88	87	95	94	90	97			87	91	93	89	81	84	86	93	96	
96		95		92		90		90		84	92	86		83		88				89		90	88	85	94	86	95			88	92	94	89	74	85	88	90	98	
89		58		55		68		81		79	77	50		60		67				73		63	65	68	53	62	88			63	68	70	61	50	56	88	71	92	
98		90		97		94		96		88	97	97		99		95				84		93	98	94	93	97	100	87		96	94	93	98	84	90	94	94	100	
93	97	99	90	95	100	93	98	96	98	98	99	89	89	93	100	98	96	100	100	95	93	92	97	97	97	100	98	91	98	97	97	96	97	92	94	98	90	100	100
65	75	79		79		73	80	73	76	43	72	72	71	88	85	82	91		87	61	91	79	87	72	70	76	100	80	89	80	64	70	64	66	72	59	72	97	82
57	78	56		78		56	74	55	86	49	48	57	33	66	71	84	73		71	31		51	89	50	70	68	100	82	6	4	39	70	32	69	24	67	48	100	55
68	67	68	61	67	63	75	75	74	73	64	63	63	57	69	89	66	79	85	75	71	82	75	81	74	76	72	96	69	72	64	61	67	63	71	58	76	72	92	62
94	100	94	93	98	86	99	98	98	98	91	98	98	92	97	100	100	100	100	100	95	94	93	98	96	99	99	100	95	100	96	96	94	91	100	97	94	93	100	90
68	55	53	50	58	65	51	66	54	60	52	55	44	37	55	74	55	65	90	67	54	58	44	59	58	56	44	93	45	48	45	46	56	39	59	43	53	42	83	59
74	57	64		62	61	49	76	58	62	47	49	44	41	62	77	63	81		75	58	49	48	68	54	56	47	89	32	53	64	52	57	44	59	36	58	48	79	
63	63	57		66	85	64	51	61	49	53	54	72	67	83	64	68	78	77	82	45	68	57	69	55	66	52	86	48	67	54	55	69	45	68	41	49	49	84	73
86	77	80	81	85	85	80	78	84	94	69	85	92	76	82	87	84	94	94	89	82	83	84	84	86	85	80	97	83	82	82	71	85	72	84	75	79	76	97	88
67	64	69	73	74	75	65	66	71	76	63	73	67	65	63	73	75	76	91	81	76	64	72	69	63	66	60	89	63	67	69	67	67	54	72	68	67	69	91	77
99	92	90		96	91	89	98	95	93	84	92	93	77	95	90	96	96	97	96	88	90	87	98	92	92	90	98	91	85	93	94	94	83	81	94	97	89	98	93
97	94	99	97	99	95	96	94	96	94	88	100	99	99	97	96	100	98	97	98	96	98	91	94	89	99	90	100	100	88	97	100	100	97	91	96	95	99	100	100
99	98	100		100	100	99	96	97	100	96	100	98	96	99	98	98	98	97	98	97	100	95	100	94	99	100	100	98	100	97	99	100	96	95	100	99	97	100	100
96	79	95	67	90	90	91	87	86	98	84	94	87	85	93	95	89	88	97	96	94	91	87	90	86	89	88	100	95	89	85	92	93	82	88	87	92	89	97	95
97	87	97	73	92	95	91	88	85	97	81	90	84	93	91	93	93	96	97	93	91	95	90	93	86	91	89	99	92	89	93	94	90	88	90	87	92	88	97	98

Hospital result, relative to NSW: Significantly lower Significantly higher Not significantly different Data supressed (<30 responses)

Appendix 4: Experiences of maternity care (selected results), comparator surveys

Experiences of maternity care (selected results), NSW Maternity Care Survey 2015, Queensland Health Maternity Patient Experience Survey 2014–15, UK NHS Survey of women's experiences of maternity care 2015 and Scottish Maternity Care survey 2015

	NSW Aspect of care	NSW 2015/Rating scale (points)	Most positive responses (%)	NHS England 2015/Rating scale (points)	Most positive responses (%)
Ø	Overall experience	Overall, how would you rate the antenatal care you received during your pregnancy? (5)	62		
Antenatal care	Communication and information	Did the health professionals providing your antenatal care explain things in a way you could understand? (3)	84	Were you spoken to in a way you could understand (4)	89
A	Comprehensive and whole-person care	Did the health professionals ask you how you were feeling emotionally during your pregnancy? (3)	91	During your antenatal check-ups, did a midwife ask you how you were feeling emotionally? (4)	57
	Overall experience	Overall, how would you rate the care you received in the hospital during your labour and birth? (5)	74		
	Physical environment and comfort	During your labour, were you able to move around and choose the position that made you most comfortable? (4)	69	During your labour, were you able to move around and choose the position that made you most comfortable? (4)	70
	Communication and information	During your labour and birth, did the midwives or doctors explain things in a way you could understand? (3)	85	Thinking about your care during labour and birth, were you spoken to in a way you could understand? (4)	89
	Respect and dignity	Did the midwives or doctors who you did not already know, introduce themselves to you during your labour and birth? (5)	83	Did the staff caring for you introduce themselves? (4)	84
	Respect and dignity	Did you feel you were treated with respect and dignity during your labour and birth? (3)	88	Thinking about your care during labour and birth, were you treated with dignity and respect? (4)	87
nd birth	Engagement and participation	Did you have enough say about your pain relief during your labour and birth? (3)	68		
Labour and birth	Engagement and participation	Were you involved, as much as you wanted to be, in decisions during your labour and birth? (4)	71	Thinking about your care during labour and birth, were you involved enough in decisions about your care? (5)	75
	Engagement and participation	During your labour and birth, was your birthing companion (e.g. your partner, the baby's father, doula or family member) involved as much as they wanted to be? (5)	85	If your partner or someone else close to you was involved in your care during labour and birth, were they able to be involved as much as they wanted to be? (5)	95
	Assistance and responsiveness	Do you think the midwives or doctors did everything reasonable to help you manage your pain during your labour and birth? (3)	76		
	Comprehensive and whole-person care	Did you have skin to skin contact with your baby (that means that your baby was naked, and placed directly on your chest or tummy) shortly after the birth? (5)	96	Did you have skin to skin contact (baby naked, directly on your chest or tummy) with your baby shortly after the birth? (5)	90
	Confidence and trust	Did you have confidence and trust in the midwives or doctors taking care of you during your labour and birth? (3)	84	Did you have confidence and trust in the staff caring for you during labour and birth? (4)	80

	NSW Aspect of care	Queensland 2014–15/Rating scale (points)	Most positive responses (%)	NHS Scotland 2015/Rating scale (points)	Most positive responses (%)
	Overall experience	Overall, how would you rate the care you received during your pregnancy? (6)	57	Overall, how would you rate your antenatal care? (5)	61
Antenatal care	Communication and information			Thinking about your antenatal care, were you spoken to in way that you could understand? (4)	91
A	Comprehensive and whole-person care				
	Overall experience	Overall, how would you rate the care you received during your (labour and) birth? (6)	72	Overall, how would you rate the care you received during labour and birth? (5)	74
	Physical environment and comfort	During your labour, were you able to move around and choose the position that made you most comfortable? (4)	84	During your labour, were you able to move around and choose the position that made you most comfortable? (4)	73
	Communication and information	Thinking about your care during your (labour and) birth, [how often] did a midwife or doctor caring for you explain things in a way you could understand (5)	72	Thinking about your care during labour and birth, were you spoken to in a way you could understand? (4)	90
	Respect and dignity			Did the staff caring for you introduce themselves? (4)	83
	Respect and dignity			Thinking about your care during labour and birth, were you treated with respect and dignity? (4)	89
nd birth	Engagement and participation	During your (labour and) birth, did you get the pain relief or comfort measures you wanted? (3)	87		
Labour and birth	Engagement and participation	Were you involved, as much as you wanted to be, in decisions about your care and treatment during your (labour and) birth? (4)	81	Thinking about your care during labour and birth, were you involved enough in decisions about your care? (5)	77
	Engagement and participation	[Was your partner/birth companion] able to be involved as much as you wanted? (3)	90	If your partner or someone else close to you was involved in your care during labour and birth, were they able to be involved as much as they wanted? (5)	95
	Assistance and responsiveness			Did you feel that you had enough help to enable you to cope with your pain during labour? (4)	59
	Comprehensive and whole-person care			Did you have skin to skin contact with your baby shortly after birth? (5)	92
	Confidence and trust	Did you have confidence and trust in the midwives caring for you during your (labour and) birth? (86%); in the doctors (85%) (3/4)	86 /85	Did you have confidence and trust in the staff caring for you during your labour and birth? (4)	83

Appendix 4: Experiences of maternity care (selected results), comparator surveys continued

	NSW Aspect of care	NSW 2015/Rating scale (points)	Most positive responses (%)	NHS England 2015/Rating scale (points)	Most positive responses (%)
	Overall experience	Overall, how would you rate the care you received in the hospital after your baby was born? (5)	56		
	Access and timeliness	Looking back, do you feel that the length of your stay in hospital was? (3)	80	Looking back, do you feel that the length of your stay in hospital after the birth was? (4)	72
	Physical environment and comfort	How clean were the wards or rooms you stayed in after the birth of your baby? (4)	67	Thinking about your stay in hospital, how clean was the hospital room or ward you were in? (5)	67
	Physical environment and comfort	How clean were the toilets and bathrooms you used after the birth of your baby? (4)	64	Thinking about your stay in hospital, how clean were the toilets and bathrooms you used? (5)	56
ll care	Respect and dignity	Were your decisions about how you wanted to feed your baby respected by the health professionals? (4)	80	Were your decisions about how you wanted to feed your baby respected by midwives? (4)	81
Postnatal hospital care	Comprehensive and whole-person care	After the birth of your baby, were the health professionals taking care of you kind and caring (3)	74	Thinking about the care you received in hospital after the birth of your baby, were you treated with kindness and understanding? (3)	71
ũ.	Coordination and continuity	Did hospital staff tell you who to contact if you were worried about your health or your baby's health after you left hospital? (3)	93		
	Coordination and continuity	Did you ever receive conflicting advice about feeding your baby from the health professionals? (3)	68	Did you feel that midwives and other health professionals gave you consistent advice abut feeding your baby? (4)	55
	Coordination and continuity	Before leaving hospital, were you given enough information about caring for yourself and your baby at home? (4)	62		
	Assistance and responsiveness	Do you think the health professionals did everything they could to help you manage your pain after the birth of your baby? (3)	69		
Follow-up care at home	Communication and information	In general, did you feel that the midwife or nurse listened to you? (3)	90	Did you feel that the midwife or midwives that saw you always listened to you? (4)	77
Follow- at h	Comprehensive and whole-person care	During a follow-up appointment, did a midwife or nurse ask you how you were feeling emotionally? (3)	98	Did a midwife or health visitor ask you how you were feeling emotionally? (4)	97

	NSW Aspect of care	Queensland 2014–15/Rating scale (points)	Most positive responses (%)	NHS Scotland 2015/Rating scale (points)	Most positive responses (%)
	Overall experience	Overall, how would you rate the care you received in hospital after your birth? (5)	55	Overall, how would you rate the care you received in hospital after the birth? (5)	54
	Access and timeliness		·	Looking back, do you feel that the length of your stay in hospital after the birth was (4)	78
	Physical environment and comfort			Thinking about your stay in hospital, how clean was the hospital room or ward you were in? (5)	72
	Physical environment and comfort	How clean were the toilets and bathrooms you used while in hospital? (5)	78	Thinking about your stay in hospital, how clean were the toilets and bathrooms you used? (6)	64
l care	Respect and dignity	Did you feel your midwives were supportive of your choice of feeding method? (4)	79	Were your decisions about how you wanted to feed your baby respected by staff? (4)	84
Postnatal hospital care	Comprehensive and whole-person care	Were you treated with kindness and understanding? (3)	76	Thinking about the care you received in hospital after the birth of your baby, were you treated with kindness and understanding? (4)	70
ũ	Coordination and continuity	Were you given a contact number of a healthcare professional you could contact if you were worried? (2)	88	When you were at home after the birth of your baby, did you have a telephone number for a midwife or midwifery team that you could contact? (3)	98
	Coordination and continuity			Did you feel that midwives and other health professionals gave you consistent advice about feeding your baby? (6)	55
	Coordination and continuity	Thinking about when you left hospital, were you given enough information about how to manage your care at home? (4)	76		
	Assistance and responsiveness	Do you think the hospital staff did everything they could to help manage your pain? (3)	78		
up care ome	Communication and information			Did you feel that the midwife or midwives that you saw always listened to you? (4)	79
Follow-up care at home	Comprehensive and whole-person care				

Appendix 5: Questions used in the analyses

	V	included in denominator × not i	nciuded in denominator	response category used in measure
	Original question	Reported measure	Response options in questi	onnaire
Overall experience	Overall, how would you rate the antenatal care you received during your pregnancy?	Overall, antenatal care was 'very good'	 ✓ Very good ✓ Good ✓ Neither good nor poor 	✓ Poor ✓ Very poor
	Overall, how would you rate the care you received in the hospital during your labour and birth?	Overall, hospital care during labour and birth was 'very good'	 ✓ Very good ✓ Good ✓ Neither good nor poor 	✓ Poor ✓ Very poor
	Overall, how would you rate the care you received in the hospital after your baby was born?	Overall, hospital care after baby was born was 'very good'	 ✓ Very good ✓ Good ✓ Neither good nor poor 	✓ Poor ✓ Very poor
	If friends and family asked about your maternity experience at the hospital where you gave birth, how would you respond?	Would 'speak highly' of maternity experience at the hospital to friends and family	 ✓ I would speak highly of the hospital ✓ I would neither speak highly nor be critical 	 I would be critical of the hospital
Access and timeliness	How long did you usually have to travel (one way) for antenatal care check-ups during your pregnancy?	Time spent travelling one way for antenatal care check-ups was 'under 30 mins'	 ✓ Under 30 minutes ✓ 30 to 59 minutes ✓ 1 hour to under 2 hours 	 ✓ 2 hours to under 3 hours ✓ 3 hours or more × Don't know/can't remember
	How long did you usually spend at your antenatal check-ups between the time you arrived and when you left?	Time spent between arriving at antenatal check-ups and leaving was 'under 30 mins'	 ✓ Under 30 minutes ✓ 30 to 59 minutes ✓ 1 hour to under 2 hours 	 2 hours to under 3 hours 3 hours or more Don't know/can't remember
	How much of this time did you usually spend waiting to be seen? [at antenatal check-ups]	Time waited to be seen at antenatal check-ups was 'under 30 mins'	 ✓ Under 30 minutes ✓ 30 to 59 minutes ✓ 1 hour to under 2 hours 	 2 hours to under 3 hours 3 hours or more Don't know/can't remember
	Looking back, do you feel that the length of your stay in hospital was?	Length of stay in hospital was 'about right'	✓ About right✓ Too long	✓ Too short
and	Did the health professionals providing your antenatal care explain things in a way you could understand?	Health professionals providing antenatal care 'always' explained things in an understandable way	✓ Yes, always✓ Yes, sometimes	√ No
Communication and information	During your labour and birth, did the midwives or doctors explain things in a way you could understand?	Midwives or doctors 'always' explained things in an understandable way during labour and birth	✓ Yes, always✓ Yes, sometimes	✓ No
ii Comi	After the birth of your baby, did the health professionals explain things in a way you could understand?	Health professionals 'always' explained things in an understandable way after birth of baby	✓ Yes, always✓ Yes, sometimes	✓ No
Respect and dignity	Did the midwives or doctors who you did not already know, introduce themselves to you during your labour and birth?	Midwives or doctors 'always' introduced themselves during labour and birth	 ✓ Yes, always ✓ Yes, sometimes ✓ No 	 I already knew all the staff who cared for me Don't know/can't remember
	Did you feel you were treated with respect and dignity during your labour and birth?	'Always' treated with respect and dignity during labour and birth	✓ Yes, always✓ Yes, sometimes	√ No
	Were you given enough privacy in the birth room or theatre?	'Always' given enough privacy in birth room or theatre	✓ Yes, always✓ Yes, sometimes	✓ No
	Were the health professionals providing your antenatal care polite and courteous?	Health professionals providing antenatal care were 'always' polite and courteous	✓ Yes, always✓ Yes, sometimes	√ No

✓ included in denominator × not included in denominator

response category used in measure

	\checkmark	included in denominator × not	included in denominator	response category used in measure
	Original question	Reported measure	Response options in que	stionnaire
Engagement and participation	Were you involved, as much as you wanted to be, in decisions during your labour and birth?	'Definitely' involved in decisions during labour and birth	✓ Yes, definitely✓ Yes, to some extent	 No, I did not feel involved I did not want or need to be involved
	During your labour and birth, was your birthing companion (e.g. your partner, the baby's father, doula or family member) involved as much as they wanted to be?	Birthing companion 'definitely' involved as much as they wanted to be during labour and birth	 ✓ Yes, definitely ✓ Yes, to some extent ✓ No 	 × Not applicable to my situation ✓ Don't know/can't remember
	Did you feel involved in decisions about your discharge from hospital?	'Definitely' involved in decisions about discharge from hospital	✓ Yes, definitely ✓ Yes, to some extent ✓ No, I did not feel involve	 I did not want or need to be involved
Comprehensive and whole-person care	Were the midwives or doctors kind and caring towards you? [during labour and birth]	Midwives or doctors were 'always' kind and caring during labour and birth	✓ Yes, always✓ Yes, sometimes	✓ No
	After the birth of your baby, were the health professionals taking care of you kind and caring?	Health professionals were 'always' kind and caring after birth of baby	✓ Yes, always✓ Yes, sometimes	✓ No
Coordination and continuity	Did midwives or doctors ever give you conflicting information during your labour and birth?	Did not receive conflicting information from midwives or doctors during labour and birth	√ Yes	✓ No
	After the birth of your baby, did you ever receive conflicting information from health professionals about how to care for yourself or your baby?	Did not receive conflicting information from health professionals after birth of baby	√ Yes	V No
	Before leaving hospital, were you given enough information about caring for yourself and your baby at home?	'Completely' given enough information about caring for myself and baby before leaving hospital	✓ Yes, completely✓ Yes, to some extent	✓ No× I did not need this information
	Did hospital staff tell you who to contact if you were worried about your health or your baby's health after you left hospital?	Told who to contact if worried about my or baby's health after discharge	✓ Yes ✓ No	× Don't know/can't remember
Assistance and responsiveness	Did the health professionals discuss your worries or fears with you? [at antenatal check-ups]	Health professionals 'completely' discussed worries or fears during antenatal check-ups	✓ Yes, completely✓ Yes, to some extent	√ No
	Do you think the midwives or doctors did everything reasonable to help you manage your pain during your labour and birth?	Midwives or doctors 'definitely' did everything to help manage pain during labour and birth	✓ Yes, definitely✓ Yes, to some extent	√ No
	Were you able to get assistance from midwives or doctors when you needed it? [during labour and birth]	'Always' able to get assistance from midwives or doctors when needed during labour and birth	✓ Yes, always✓ Yes, sometimes	 ✓ No × I did not need assistance
	Did a midwife or doctor discuss your worries or fears with you? [during labour and birth]	Midwife or doctor 'completely' discussed worries or fears during labour and birth	✓ Yes, completely✓ Yes, to some extent	√ No
	After the birth of your baby, were you able to get assistance or advice from health professionals when you needed it?	'Always' able to get assistance or advice from health professionals when needed after birth of baby	✓ Yes, always✓ Yes, sometimes	 ✓ No × I did not need assistance or advice

Appendix 5: Questions used in the analyses continued

	\checkmark	included in denominator × not	included in denominator	response category used in measure
	Original question	Reported measure	Response options in ques	tionnaire
Cleanliness and hygiene	How clean were the wards or rooms you stayed in after the birth of your baby?	Wards or rooms used after birth of baby were 'very clean'	✓ Very clean✓ Fairly clean	✓ Not very clean✓ Not at all clean
	How clean were the toilets and bathrooms you used after the birth of your baby?	Toilets and bathrooms used after birth of baby were 'very clean'	✓ Very clean✓ Fairly clean	✓ Not very clean✓ Not at all clean
	Did you see the health professionals wash their hands, or use hand gel to clean their hands, before touching you or your baby?	'Always' saw health professionals clean their hands	✓ Yes, always✓ Yes, sometimes	 ✓ No, I did not see this ✓ Can't remember
Confidence and trust	Did you have confidence and trust in the health professionals providing your antenatal care?	'Always' had confidence and trust in health professionals providing antenatal care	✓ Yes, always✓ Yes, sometimes	√ No
	Did you have confidence and trust in the midwives or doctors taking care of you during your labour and birth?	'Always' had confidence and trust in midwives or doctors during labour and birth	✓ Yes, always✓ Yes, sometimes	✓ No
Patient-reported outcomes	During your hospital stay or soon afterwards, did you experience any of the following complications or problems?**	Did not experience any complication or problem related to hospital care	 An infection Excessive bleeding/ haemorrhage A negative reaction to medication Complications as a result of an operation or surgical procedure 	 Complications as a result of tests, X-rays or scans A blood clot in the leg/DVT A fall Any other complication or problem ✓ None of these
Antenatal visit	How many weeks pregnant were you when you had your first appointment for antenatal care?	'Less than 14 weeks' pregnant at first antenatal care appointment	 ✓ Less than 14 weeks pregnant ✓ 14-19 weeks pregnant ✓ 20-28 weeks pregnant 	 ✓ More than 28 weeks pregnant ✓ I didn't receive antenatal care × Don't know/can't remember
	Were you provided with a personal antenatal card (e.g. a Yellow Card), where information about your antenatal check-ups was recorded?	Provided with a personal antenatal card (e.g. a Yellow Card)	✓ Yes	 ✓ No × Don't know/can't remember
	Did the health professionals update your personal antenatal card at every check-up?	'Health professionals updated personal antenatal card at every check-up	✓ Yes	✓ No× Don't know/can't remember
	Did the health professionals give you advice about the risks of consuming alcohol while pregnant?	Health professionals advised about risks of consuming alcohol while pregnant	✓ Yes	✓ No× Don't know/can't remember
	Did the health professionals give you advice about the risks of exposure to tobacco smoke while pregnant?	Health professionals advised about risks of exposure to tobacco smoke while pregnant	✓ Yes	✓ No× Don't know/can't remember
Screening and prevention	Were you told about programs you could join or take part in to stop smoking? [at antenatal check-ups]	Told about programs to stop smoking during antenatal check-ups	 Not applicable, I don't smoke ✓ Yes 	✓ No ✓ Don't know/can't remember
	Did the health professionals discuss the importance of healthy weight gain with you? [at antenatal check-ups]	Health professionals discussed importance of healthy weight gain during antenatal check-ups	✓ Yes	✓ No× Don't know/can't remember
	Did the health professionals ask you how you were feeling emotionally during your pregnancy?	Health professionals asked how I was feeling emotionally during pregnancy	✓ Yes	✓ No× Don't know/can't remember
	At any point during your pregnancy or after the birth, were you shown or given information about safe sleeping for your baby?	Shown or given information about safe sleeping for baby	 Yes, written information Yes, verbal information Yes, the midwives or doctors showed me hov to put my baby to sleep 	 ✓ No, I was not given this information × Not applicable to my situation

				esponse category used in measure
	Original question	Reported measure	Response options in question	nnaire
Labour and birth	During your labour, were you able to move around and choose the position that made you most comfortable?	Able to move around and choose most comfortable position 'most of the time' during labour	✓ Yes, most of the time✓ Yes, sometimes	 ✓ No × Not applicable to my situation
	Were you offered the option of being in a bath during labour?	Offered option of being in a bath during labour	✓ Yes ✓ No	 Not applicable to my situation Don't know/can't remember
	Did you have enough say about your pain relief during your labour and birth?	'Definitely' had enough say about pain relief during labour and birth	✓ Yes, definitely✓ Yes, to some extent	√ No
	Did you have skin to skin contact with your baby (that means that your baby was naked, and placed directly on your chest or tummy) shortly after the birth?	Had skin to skin contact with baby shortly after the birth	 Yes No, but this was not possible for medical reasons 	 × No, I did not want skin to skin contact with my baby ✓ No, for other reasons × Not applicable to my situation
Ð	After the birth, did the health professionals give you enough information about how to care for yourself (e.g. how to go to the toilet, how to sit and lie down)?	'Completely' given enough information about how to care for myself after birth of baby	 ✓ Yes, completely ✓ Yes, to some extent 	 ✓ No × Not applicable to my situation
	After the birth, did the health professionals give you enough information about how to care for your baby (e.g. how to hold your baby, how to put a nappy on your baby)?	'Completely' given enough information about how to care for baby	 ✓ Yes, completely ✓ Yes, to some extent 	 ✓ No × Not applicable to my situation
iospital c	Did the hospital provide access to food when you needed it?	'Always' had access to hospital food when needed	✓ Yes, always✓ Yes, sometimes	 ✓ No × Don't know/can't remember
Postnatal hospital care	Were your decisions about how you wanted to feed your baby respected by the health professionals?	Health professionals 'always' respected decisions about feeding baby	✓ Yes, always✓ Yes, sometimes	 ✓ No × Not applicable to my situation
	Did you ever receive conflicting advice about feeding your baby from the health professionals?	Did not receive conflicting advice from health professionals about feeding baby	√ Yes	 ✓ No ✓ Not applicable to my situation
	Did midwives in the hospital work with you to show you a good position for breastfeeding your baby?	Midwives helped establish breastfeeding	✓ Yes	 ✓ No × Not applicable to my situation
Follow-up care at home	In the first two weeks after arriving home, did you have a follow-up appointment with a midwife or nurse?*	Had follow-up appointment with midwife or nurse within two weeks of arriving home	 ✓ Yes, with a midwife at home ✓ Yes, with a nurse at home 	 ✓ Yes, with a midwife or nurse at a clinic ✓ No
	During a follow-up appointment, did a midwife or nurse ask you how you were feeling emotionally?	Midwife or nurse asked how I was feeling emotionally during follow- up appointment	✓ Yes	✓ No× Don't know/can't remember
	In general, did you feel that the midwife or nurse listened to you? [at follow- up appointment]	Midwife or nurse 'always' listened to me during follow-up appointment	✓ Yes, always✓ Yes, sometimes	✓ No
	In general, did you have enough time with the midwife or nurse to ask questions or discuss any concerns? [at follow-up appointment]	'Definitely' had enough time with midwife or nurse to ask questions or discuss concerns during follow- up appointment	✓ Yes, definitely✓ Yes, to some extent	✓ No

 \checkmark included in denominator \times not included in denominator

* Missing responses were included in the denominator.

** Multiple response options could be selected for this question. Missing responses were included together with 'None of these' under 'None reported'.

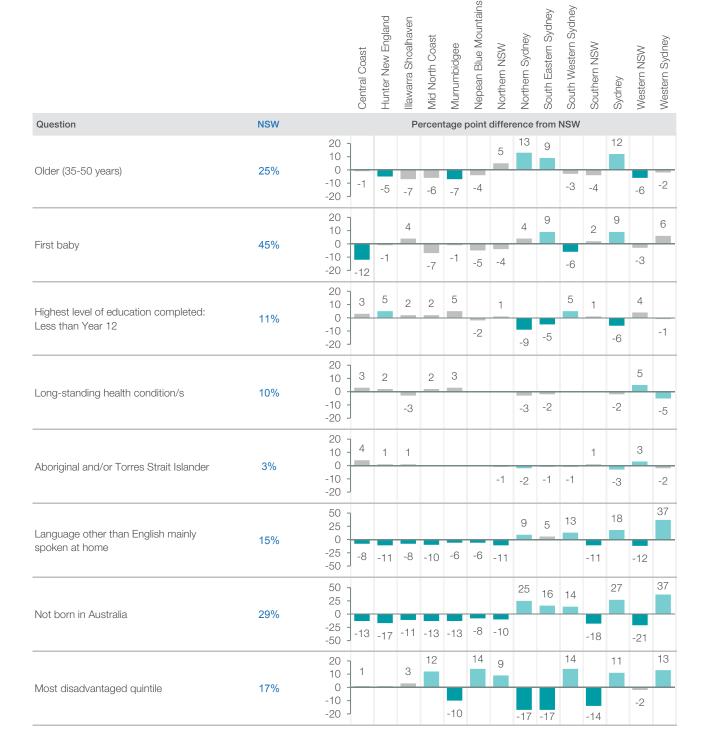
response category used in measure

Appendix 6: Socio-demographic profiles

LHD populations differ in terms of social, economic and health characteristics. The maternity patient population is generally in good health, however socio-demographic characteristics vary across LHDs. For example, 25% of NSW respondents were aged 35+ years, however this ranged from 18% in Illawarra Shoalhaven and Murrumbidgee to 38% in Northern Sydney.

In three LHDs – South Western Sydney, Sydney and Western Sydney – many respondents said they mainly speak a language other than English at

Figure A6a Self-reported socio-demographic characteristics of survey respondents, NSW, 2015

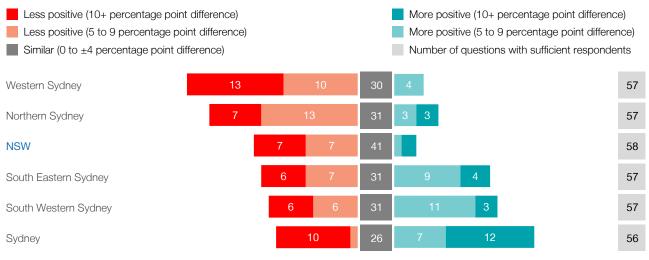


home; were not born in Australia; and are in the most disadvantaged socioeconomic quintile (Figure A6a).

For LHDs with sufficient numbers of respondents in relevant socio-demographic groups, results were stratified according to those characteristics (Figure A6b). For example, in Western Sydney there were 13 questions to which women who speak a language other than English answered less positively than English speakers by at least 10 percentage points; and for a further 10 questions the difference was between five and nine percentage points. For four questions they answered more positively by between five and nine percentage points.

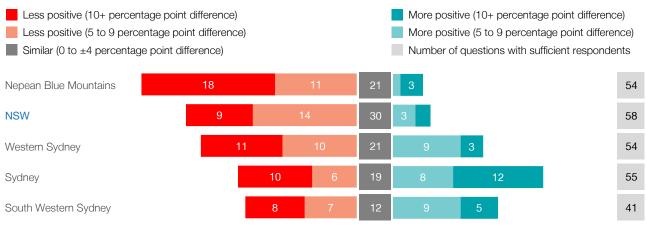
Figure A6b Percentage point differences (in top category responses) between sociodemographic groups, select LHDs, 2015

Compared to women who said they mainly speak English at home, women who mainly speak another language were:





Compared to women from the least disadvantaged quintile areas, women from the most disadvantaged quintile areas were:



Number of questions

Note: Results for other LHDs suppressed (<30 responses).

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The Bureau of Health Information (BHI) is the main source of information for the people of NSW about the performance of their public healthcare system. A NSW board-governed organisation, BHI is led by Chairperson Professor Carol Pollock and Chief Executive Jean-Frédéric Lévesque MD, PhD.

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About the Bureau of Health Information

The Bureau of Health Information (BHI) is a boardgoverned organisation that provides independent information about the performance of the NSW public healthcare system.

BHI was established in 2009 to provide systemwide support through transparent reporting.

BHI supports the accountability of the healthcare system by providing regular and detailed information to the community, government and healthcare professionals. This in turn supports quality improvement by highlighting how well the healthcare system is functioning and where there are opportunities to improve.

BHI also manages the NSW Patient Survey Program, gathering information from patients about their experiences in public hospitals and other healthcare facilities. BHI publishes a range of reports and tools that provide relevant, accurate and impartial information about how the health system is measuring up in terms of:

- Accessibility healthcare when and where needed
- Appropriateness the right healthcare, the right way
- Effectiveness making a difference for patients
- Efficiency value for money
- Equity health for all, healthcare that's fair
- Sustainability caring for the future

BHI's work relies on the efforts of a wide range of healthcare, data and policy experts. All of our assessment efforts leverage the work of hospital coders, analysts, technicians and healthcare providers who gather, codify and report data. Our public reporting of performance information is enabled and enhanced by the infrastructure, expertise and stewardship provided by colleagues from NSW Health and its pillar organisations.

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