







Maternity Care Survey 2018

Technical Report





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1. Introduction and Background

This report provides information on the technical aspects of the 2018 Maternity Care Survey, including development, implementation, analysis and reporting.

The Maternity Care Survey is one of a suite of national surveys which are part of the Scottish Care Experience Survey Programme. The surveys aim to provide local and national information on the quality of health and care services from the perspective of those using them. They allow local health and care providers to compare with other areas of Scotland and to track progress in improving the experiences of people using their services. Information about the other national care experience surveys is available at www.gov.scot/Topics/Statistics/Browse/Health/careexperience.

The survey programme supports the three quality ambitions of the '2020 Vision' - Safe, Effective, Person-centred - by providing a basis for the measurement of quality as experienced by service users across Scotland. In particular the surveys support the person-centred quality ambition which is focused on ensuring that care is responsive to people's individual preferences, needs and values.

In 2015, a review of Maternity & Neonatal Services in Scotland was announced. Its aim was to ensure every mother and baby continues to get the best possible care from Scotland's health service, giving all children the best start in life. This review examined choice, quality and safety of maternity and neonatal services, in consultation with the workforce, NHS Boards and service users.

Following on from this in 2017, 'Best Start - a Five-Year Forward Plan for Maternity and Neonatal Care in Scotland ² was published. The results from the 2018 Maternity Care Survey will provide baseline data for NHS Boards and hospitals, helping to inform progress of the implementation of Best Start's recommendations.

The Maternity Care Survey asks people across Scotland about their experience of maternity care services, from antenatal through to postnatal care. The survey is run by the Scotlish Government, with support from National Records of Scotland. The 2018 survey is the third iteration of the Maternity Care Survey, with the first iteration run in 2013 and the second in 2015.

National results, as well as local level results by NHS Board and hospital, were published on 26 March 2019. Links to all published results are available at www.gov.scot/MaternitySurvey.

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¹ www.gov.scot/Topics/Health/Policy/2020-Vision

² www.gov.scot/publications/best-start-five-year-forward-plan-maternity-neonatal-care-scotland-9781786527646/

2. Survey Development

The survey questionnaire for the 2013 and 2015 Maternity Care Surveys were largely based on the Maternity Services Survey carried out by the Care Quality Commission in England³. The content of the questionnaire was reviewed ahead of the 2018 survey to ensure continued relevance of survey questions and to incorporate wider changes to health policy, such as the introduction of questions around person-centred behaviours. Details of the changes made to the questionnaire are detailed in Tables 1 to 3.

The survey materials were also reviewed ahead of the 2018 survey to improve engagement with respondents and to ensure compliance with General Data Protection Regulations, in line with changes made to other surveys in the programme. This included improving the information provided to survey recipients in the covering letter and also introducing a privacy notice for the survey.

The survey was administered by post but sampled individuals were able to complete the survey by post, online or via a telephone helpline in a wide range of languages. The survey packs consisted of the following:

- **Initial Mailout:** A survey letter encouraging respondents to complete the survey online and an information leaflet including details of the survey helpline in a range of languages.
- **First Reminder:** A survey letter, a paper questionnaire, a freepost return envelope and an information leaflet including details of the survey helpline in a range of languages.
- Second Reminder: A survey letter, a paper questionnaire, a freepost return envelope and an information leaflet including details of the survey helpline in a range of languages.

Copies of all of the survey materials, including the privacy notice, can be found at www.gov.scot/MaternitySurvey.

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³ www.cqc.org.uk/publications/surveys/mate<u>rnity-services-survey-2017</u>

Table 1: New questions for the 2018 survey

Quest. No.	Topic	Question Text	Reason
7a-g	Zo ~ Antenatal	During your pregnancy, were you given enough information by health professionals on each of the following?	Some aspects were covered previously but types of information expanded to be
ra-g	Care	Sub-questions a to g cover various areas that women may require support or information on during antenatal care.	consistent with those covered in postnatal care questions.
8	Antenatal Care	Were you given the 'Ready, Steady, Baby' book or a link to the website?	Included following cognitive testing suggested this had been important source of information.
10a-h	Antenatal Care	Thinking about all the care you received during your pregnancy, how much do you agree or disagree with the following statements? Statements relate to various person-centred behaviours, some	To gather data on experiences of person-centred care behaviours ⁴ . Consistent with questions used in other Patient Experience surveys.
		of which were included previously.	r daent Expensive carreyer
25	Labour & Birth	During the birth, were you cared for by the same midwife / midwife team as during your pregnancy?	Included to inform Best Start evaluation.
26a-h	Labour & Birth	Thinking about your care during labour and birth, how much would you agree or disagree with the following statements about your experience? Statements relate to various person-centred behaviours.	To gather data on experiences of person-centred care behaviours ⁴ . Consistent with questions used in other Patient Experience surveys.
33	Care in hospital	When you left hospital or the midwife-led unit, did you know who to contact if you needed any further advice or support?	To gauge level of ongoing continuity of care once women have left hospital following giving birth.
34a-i	Care in hospital	Thinking about the care you received in hospital after the birth of your baby, how much do you agree or disagree with the following statements?	To gather data on experiences of person-centred care behaviours ⁴ . Consistent with questions used in other Patient Experience surveys.
		Statements relate to various person-centred behaviours.	i ducit Experience surveys.

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⁴ www.healthcareimprovementscotland.org/our_work/person-centred_care/person-centred_programme.aspx

Quest. No.	Topic	Question Text	Reason
37 to 46	Neonatal Care	A range of questions similar to those on hospital care but with a specific focus on neonatal care.	To expand evidence base around experiences of neonatal care services.
48	Feeding your baby	Did you experience any difficulties or challenges feeding your baby in this way?	Included following cognitive testing suggested this had been something which impacted on women's maternity experience.
52	Postnatal Care	Do you feel you had enough advice and support to care for your baby after the birth?	Included following cognitive testing suggested this had been something which impacted on women's maternity experience.
57a-f	Postnatal Care	After the birth of your baby, were you given enough information and support by health professionals on each of the following? Sub-questions a to f cover various areas that women may require information or support on during postnatal care.	Some aspects were covered previously but types of information expanded to include some areas which cognitive testing suggested had an impact on women's maternity experience.
59a-g	Postnatal Care	Thinking about the care you received at home and in the community after the birth, how much do you agree or disagree with the following statements? Statements relate to various person-centred behaviours.	To gather data on experiences of person-centred care behaviours ⁴ . Consistent with questions used in other Patient Experience surveys.
65a-c	About you	In general, how would you rate your physical health: before pregnancy; during pregnancy; now?	To expand data collected on self-reported health throughout the maternity journey to allow analysis on whether this impacts on experience.
66a-c	About you	In general, how would you rate your emotional / mental health: before pregnancy; during pregnancy; now?	To expand data collected on self-reported health throughout the maternity journey to allow analysis on whether this impacts on experience.
67	About you	Demographic question on existing long-term conditions of the respondent.	Included to allow further analysis on exploring differences in experiences for different groups to be done.

Table 2: Questions that were changed in the 2018 survey

2015 Q. No.	2018 Q. No.	Topic	Question Text	Reason
5	B15	Antenatal Care	Were you told who to contact if you needed any further advice or support during your pregnancy?	Focus changed from specifically having a phone number to being told who to contact.
56	F17	Postnatal Care	Did a health professional tell you that you would need to arrange a postnatal check-up of your own health?	Broadened to health professional as women may not specifically get this information from a midwife.
62	G1	About you	What is your age group?	Previously asked respondents to write their age – updated as previous level of detail not required.

Table 3: Questions that were removed for the 2018 survey

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2015 Q. No.	Topic	Question Text	Reason
B1	Antenatal Care	Who was the first health professional you saw when you thought you were pregnant?	Data has limited use, removed in order to prioritise questions of more value or relevance.
B2	Antenatal Care	Roughly how many weeks pregnant were you when you first saw this health professional?	Data has limited use, removed in order to prioritise questions of more value or relevance.
B5	Antenatal Care	Before your baby was born, did you plan to have a home birth?	Data has limited use, removed in order to prioritise questions of more value or relevance.
B8	Antenatal Care	Which of the following health professionals did you see for your antenatal check-ups?	Data has limited use, removed in order to prioritise questions of more value or relevance.
B10	Antenatal Care	Did you have a named midwife?	Duplication of Q3 which asks whether they saw the same midwife every time.
B14	Antenatal Care	During your pregnancy, did you have a discussion with a health visitor?	Removed as results from 2015 suggested that a large proportion of women felt this was not something they needed / wanted.
C18	Labour & Birth	Did you have confidence and trust in the staff caring for you during your labour and birth?	Removed to allow room for questions on more specific personcentred behaviours that would generate confidence / trust

2015 Q. No.	Topic	Question Text	Reason
D2	Hospital care	Looking back, do you feel the length of your stay in hospital was	Removed because results from previous surveys provided limited useful insight
D6	Hospital care	Thinking about your stay in hospital, how clean was the hospital room or ward you were in?	Removed because results from previous surveys indicate that experiences are highly positive with little room for improvement
D7	Hospital care	Thinking about your stay in hospital, how clean were the toilets and bathrooms you used?	Removed because results from previous surveys indicate that experiences are highly positive with little room for improvement
E1	Feeding your baby	During your pregnancy, did midwives provide relevant info about feeding your baby?	Replaced by Q7e which places an emphasis on providing information on the options for feeding.
E3	Feeding your baby	Did you ever try to breastfeed your baby (even if it was only once)?	Data has limited use, removed to allow space for Q48 which asks about experiencing difficulties with feeding.
F1	Postnatal Care	When you were at home after the birth of your baby, did you have a telephone number for a midwife that you could contact?	Removed because results from previous surveys indicate that almost all women had a telephone number, but also recognising that other methods of contact may have been available
F3	Postnatal Care	Since your baby's birth have you been visited at home or by a midwife?	Data has limited use, removed to allow questions on experience of person-centred behaviours.
F4	Postnatal Care	Since your baby's birth have you seen a midwife at a clinic?	Data has limited use, removed to allow questions on experience of person-centred behaviours.
F5	Postnatal Care	Was it convenient to see a midwife at a clinic?	Removed as not relevant once F4 removed.
F7	Postnatal Care	If you saw a midwife for your care at home or in a clinic, did you see the same one every time?	Removed in favour of Q54 as data on continuity of care between antenatal and postnatal care more valuable.
F8	Postnatal Care	Did you see your named midwife at home or in a clinic after birth?	Removed as not relevant once B10 removed.
F9	Postnatal Care	How many times in total did you see a midwife after you went home?	Data has limited use, removed to allow questions on experience of person-centred behaviours.

2015 Q. No.	Topic	Question Text	Reason
F10	Postnatal Care	Would you have liked to see a midwife	Removed as superseded by Q59f which asks whether staff spent enough time with them
F13	Postnatal Care	Did you have confidence & trust in the midwives you saw after going home?	Positive experiences of person- centred behaviours are generally correlated to confidence and trust. Question has been removed in favour of questions on specific person-centred behaviours.
F21	Postnatal Care	Were you given information or offered advice from a health professional about contraception?	Removed because results from previous surveys provided limited useful insight
G2	About you	Have you had a previous pregnancy?	No longer required
G4	About you	How would you rate your health in general?	Removed as superseded by Qs 65 & 66
G5	About you	Do you have a physical or mental health condition or illness lasting or expected to last 12 months or more?	Removed as superseded by Q67 which is consistent with other patient experience surveys
G6	About you	Does your condition or illness reduce your ability to carry out day-to-day activities?	Removed as not relevant once G5 removed.
G7	About you	What religion, religious denomination of body do you belong to?	No longer required
G8	About you	Which of the following best describes how you think of yourself?	No longer required
G10	About you	In which NHS Board did all or most of your antenatal care take place?	No longer required – NHS Board of Residence at the time of birth taken from administrative data is used as a proxy for this data
G11 & G12	About you	Questions on permission to link survey results to information held about hospital stay and consent to be considered as a participant in future research.	These questions were removed as part of the information governance review of this survey. Information about how data will be used was provided to respondents in a privacy notice.

3. Sample Design

A review into the sampling methodology was carried out in advance of the 2018 survey. Full details of the review, including the final sampling methodology used for the 2018 survey, are provided in the Sampling Review Paper which can be found at www2.gov.scot/Resource/0054/00541965.pdf.

Statisticians in Scottish Government calculated the sample sizes for each strata to ensure results could be provided at NHS Board and hospital level where possible. This information was then passed to NRS who generated the sampling frame from the Birth Registration Records and drew a sample.

Women eligible to be included in the sampling frame were those who had given birth between 1 February and 31 March 2018, who were aged 17 or over at that date and who were resident in Scotland. Women who had either lost a baby or had died were removed from the sampling frame. Women who had given birth to more than one baby were only eligible for sampling once.

The sample size calculated for each strata was based on the minimum number of responses that would be required to achieve an estimate that has a 95% confidence interval with width +/- seven percentage points, sampled from a finite population. The sample size was adjusted upwards to allow for assumed non-response based on response rates for the 2015 survey. For strata where the calculated required sample size is greater than the number of eligible women, all women were sampled.

A total of 7,782 women were included in the sampling frame and a total of 5,165 women were sampled to take part.

Access to Individuals' Names & Addresses

Approval was given by the Public Benefit and Privacy Panel (PBPP)⁵ to use Birth Registration Records to identify a survey sample and approach individuals. A copy of the approval letter is available at www2.gov.scot/Resource/0053/00535552.pdf.

Data transfers containing individuals' names and addresses were done securely and were limited to the variables required to mail the survey pack to the individual. All data was accessed, managed and stored in accordance with the data confidentiality protocols described in the privacy notice for the survey⁶.

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⁵ www.informationgovernance.scot.nhs.uk/pbpphsc/

⁶ www.gov.scot/MaternitvSurvevPrivacvNotice

4. Fieldwork

The Scottish Government contracted Quality Health Ltd to administer the survey. Quality Health Ltd has in-depth experience of health surveys, and has provided support for other care experience surveys in Scotland and elsewhere in the UK.

Respondents had the option to complete the survey by post, online, via a telephone helpline in a wide range of languages or via text phone. The helpline was also available to handle questions or complaints about the survey.

Mail-outs

The fieldwork began on 23 May 2018 with the mailout of the initial survey packs. A first reminder was sent to those who had not responded to the initial survey pack on 13 June 2018, and a second reminder was sent to those who had still not responded on 11 July 2018. The survey closed on 31 August 2018.

Survey Helpline Calls

During the fieldwork a telephone helpline answered queries from sampled individuals. A total of 8 people called the helpline, this is in line with the number of helpline calls received for previous Maternity Care surveys.

People who were recently deceased

Women included in the 2018 survey were sampled on 14 May 2018. The sampling, questionnaire printing and mail-out process extended from this date through to the final mailing date of 11 July 2018. This meant that women or babies may have died between the sample date and mail out dates. As with all Care Experience surveys, every possible effort was made to avoid questionnaires being sent to family members of those who have died.

To minimise the risk of questionnaires being sent to deceased women, or women whose baby had died, NRS cross-checked the death register on the morning of each mailout and notified Quality Health Ltd of any individuals who should be removed from the mailout. This ensured that the most up to date information was used which greatly reduced the possibility of questionnaires being sent to addresses of deceased women or babies. A total of four records included in the initial sample were flagged as deceased and removed prior to mailout.

Any death which occurs in Scotland must be registered within eight days of the date of death. This means that there can be a delay between the actual date of death and the date that it is registered and updated on the NRS database. This delay can mean it is extremely difficult to prevent all questionnaires being sent to addresses where a mother or baby has died. There were no reports of any questionnaires being sent to mothers who had died, or whose baby had died.

5. Data Entry and Fieldwork Quality Control

Data Capture

Online responses were captured automatically and telephone completions were captured by the helpline team. Paper responses were logged and scanned on a daily basis by staff at Quality Health Ltd. A verification process was then carried out for each batch scanned and a number of integrity checks were undertaken to ensure the scanning process had worked correctly and all data had been captured as expected.

Data from online questionnaires and telephone completions are automatically stored alongside the data from the paper questionnaires, and held separately from the names and addresses of people who were sampled for the survey.

For a short time during survey fieldwork, an error with the online survey led to responses to the first four questions not being saved for 15 individuals. Their responses to all other questions were saved and have been included in the analysis.

Verification and Upload Process

Once captured, all data are checked in house by Quality Health Ltd according to preset verification rules, by staff who have been given training and detailed instructions about the survey. The data entry system ensured that only valid answer codes for each question could be entered and that the correct data appeared in each field. Other checks included ensuring that numeric data was in the correct format and that fields were not truncated in error. Once the survey responses were transferred to SG statisticians, further validation checks were run on the data to ensure data integrity was maintained.

Secure Disposal

Names and addresses of people who were selected for the survey were stored securely by Quality Health Ltd until the end of the fieldwork period, at which point they were destroyed.

Once processed, all returned questionnaires were immediately stored by Quality Health Ltd in labelled containers and archived in a secure room on-site until they reach their agreed destruction date, when a certificate of destruction will be provided.

Free Text Comments

The survey asked respondents if there was anything else that they would like to tell us about their experiences of various aspects of their maternity care. Around 1,400 respondents left at least one comment. Analysis of these comments will be carried out and reported **separately** from the national results.

Disclosive details that could be used to identify people – such as names, addresses, medical conditions – were suppressed when the comments were entered by staff at Quality Health Ltd. Quality checks were undertaken on records to ensure that the instructions for suppressing disclosive details were followed.

6. Survey Response

Overview

The response rate for the survey is the number of forms returned as a percentage of the number of women in the sample once those considered ineligible have been removed. Ineligible women were those who had died between being sampled and receiving any of the survey letters or had moved address.

Of the 5,165 women sampled, 5,064 were considered eligible. A total of 2,049 surveys were returned completed, giving an **overall response rate of 40 per cent**. This is similar to the 2015 survey which had a response rate of 41 per cent.

This section describes the differences in response rates by a range of variables. Please note that the total number sampled in Tables 4 to 7 **only excludes** those who had died, rather than all ineligible women, and so these figures will not sum to the total number of eligible women sampled used in the Scotland denominator.

Response Rates by NHS Board of Residence

Looking at NHS Boards with more than 50 respondents, response rates by **NHS Board of Residence** ranged from 34 per cent in NHS Greater Glasgow & Clyde to 47 per cent in NHS Borders and NHS Grampian (Table 4).

Table 4: Response rate by NHS Board of Residence

NHS Board of Treatment	Total number sampled	Number of Responses	Response rate (%)
NHS Ayrshire & Arran	387	149	39
NHS Borders	144	67	47
NHS Dumfries & Galloway	192	68	35
NHS Fife	371	147	40
NHS Forth Valley	317	124	39
NHS Grampian	510	241	47
NHS Greater Glasgow & Clyde	1,054	361	34
NHS Highland	354	149	42
NHS Lanarkshire	672	238	35
NHS Lothian	708	293	41
NHS Orkney	*	*	62
NHS Shetland	*	*	78
NHS Tayside	391	175	45
NHS Western Isles	*	*	38

Note: The total number sampled and number of responses have been suppressed, '*', for NHS Boards with less than 50 respondents.

Response Rate by Deprivation

Respondents were assigned to a deprivation quintile based on their postcode using the 2016 Scottish Index of Multiple Deprivation (SIMD)⁷. There is a clear decrease in response rates as deprivation increases, with 54 per cent of those in the least deprived quintile responding compared to only 24 per cent of those in the most deprived quintile (Table 5). This is consistent with patterns of response seen in other patient experience surveys.

Table 5: Response rate by deprivation quintile

SIMD Quintile	Total number sampled	Number of Responses	Response rate (%)
1 (Most deprived)	1,231	290	24
2	1,143	381	33
3	960	438	46
4	1,005	500	50
5 (Least deprived)	822	440	54

Response Rate by Urban / Rural Location

Respondents were assigned to an Urban / Rural category based on their postcode using the Scottish Government's 2013/14 six-fold Urban / Rural classification⁸. Responses were higher for those in more rural areas compared to urban areas. Response rates ranged from 50 and 49 per cent for remote and accessible rural respondents respectively, to 36 and 37 per cent for respondents living in large and other urban areas respectively (Table 6).

Table 6: Response rate by urban / rural location

Urban / Rural Category	Total number sampled	Number of Responses	Response rate (%)
Large urban areas	1,537	550	36
Other urban areas	1,935	719	37
Accessible small towns	486	202	42
Remote small towns	175	68	39
Accessible rural	748	369	49
Remote rural	280	141	50

⁷ www.gov.scot/Topics/Statistics/SIMD

⁸ www.gov.scot/Topics/Statistics/About/Methodology/UrbanRuralClassification

Response Rate by Age Group

The response rate was notably lower for the youngest age group, with only 22 per cent of those aged under 25 responding. This compares to response rates of 40 and 52 per cent for those aged between 25 and 34, and aged 35 or over respectively (Table 7).

Table 7: Response rate by age group

Age Group	Total number sampled	Number of Responses	Response rate (%)
Under 25	920	202	22
25 to 34	3,084	1,234	40
35 and over	1,157	598	52

Note: The number of responses is women's self-reported age as provided in Q62. Fifteen women chose not to respond to this question and so have not been included in this analysis.

Method of Response

Of the 2,049 respondents, just over half responded by post and just under half completed the survey online (Table 8). There was only one telephone completion.

In previous surveys, over 90 per cent of responses were by post. This change in response mode is due to a change in the mailout methodology – the initial survey pack only provided details on how to complete the survey online or via the helpline, and no longer included a paper questionnaire. This has resulted in a notable increase in the number of online responses, to almost equal with postal completions.

Table 8: Response by method

Method	No. of questionnaires completed	Questionnaires completed (%)
Online	1,008	49%
Post	1,040	51%
Telephone helpline	1	0%
Language line	0	0%
Total	2,049	100%

7. Analysis and Reporting

The survey data collected and coded by Quality Health Ltd were securely transferred to the Scottish Government, where the information was analysed using the statistical software package SAS Enterprise Guide version 7.1.

Number of Responses Analysed

The number of responses that have been analysed for each question is often lower than the total number of survey responses received. This is because not all of the questionnaires that were returned could be included in the calculation of results for every individual question. In each case this was for one of the following reasons:

- The specific question did not apply to the respondent and so they did not answer it. For example if they had a home birth and therefore did not answer questions about their experience of care in hospital after the birth.
- The respondent did not answer the question for another reason (e.g. refused).
 People were advised that if they did not want to answer a specific question they should leave it blank.
- The respondent answered that they did not know or could not remember the answer to a particular question.
- Responses may be removed following validation checks, for example if a
 respondent selected an invalid combination of responses. Improved validation
 checks were introduced for this survey to ensure consistency between online
 and paper responses.

The number of responses that have been analysed nationally for each of the positive / negative questions are shown in Annex A.

Weighting

When conducting a survey, it is important to have a representative sample of the population you are interested in. Applying weighting methods reduces potential bias by making the results more representative of the population.

Survey weights are numbers associated with the responses that specify the influence the various observations should have in the analysis. The final survey weight associated with a particular response can be thought of as a measure of the number of population units represented by that response.

Results at all levels of reporting are weighted. A review of the weighting methodology was undertaken in advance of the 2018 survey, leading to some changes in the weights applied. Full details of the review and the methodology applied for the 2018 survey are available in the Weighting Review Paper which can be found at www2.gov.scot/Resource/0054/00545079.pdf.

Backdating of Previous Surveys

Due to the change to the weighting methodology applied to this survey, figures from the 2013 and 2015 survey have been backdated where appropriate to ensure comparisons over time are available. Reports specifically relating to the 2013 and 2015 surveys **will not** be updated to include the backdated figures.

As part of the backdating process, the improved validation checks applied to the 2018 survey have been applied to the 2013 and 2015 survey responses. The total number of responses for analysis may therefore differ to those previously published.

Percentage Positive and Negative

Per cent or percentage positive is frequently used in reporting results from this survey. This means the percentage of people who answered in a positive way. Annex A details which answers have been classed as positive and negative for each question.

Percentage positive is mainly used to allow easier comparison, particularly where responses are on a scale where there may be multiple responses being classed as positive or negative. There is also a belief that differences between answers on scales with five or more points may be subjective. For example there may be little or no difference between a person who "strongly agrees" and one who "agrees" with a statement. In fact some people may never strongly agree or strongly disagree with any statements.

As described in Section 3 of this report, these results are based on a sample of patients and are therefore affected by sampling error. The effect of this sampling error is relatively small for the national estimates. However, when comparisons have been made in the analysis of the survey results, the effects of sampling error have been taken into account by the use of confidence intervals and tests for statistical significance. Only differences that are statistically significant are reported as differences within the analysis. All significance testing is carried out at the 5% level.

Quality Assurance of the National Report

A small group of Scottish Government analysts were sent a draft version of the national report for quality assurance. Feedback included suggestions on ways in which to report data as well as comments about the context for the survey. These were taken into account in finalising the national report.

Revisions to previous publications

A copy of our revisions policy is available at: www.gov.scot/Resource/0052/00522934.pdf

8. Outputs from the Survey

This section provides details of the outputs from the 2018 Maternity Care Survey that were published alongside the national report.

Local Level Results

Ahead of the 2018 survey, a review of how responses are allocated to NHS Boards was undertaken. A paper summarising the review and the new approach applied to the 2018 results is available at www2.gov.scot/Resource/0054/00545080.pdf.

The **local level results** for the survey – NHS Board and hospital – are available via an interactive dashboard which can be accessed at www.gov.scot/MaternitySurvey.

The dashboard will include the following information:

- Per cent Positive Results: Results for all the per cent positive style
 questions in the survey (as listed in Annex A) for an area selected by the user.
 Statistical comparisons to the Scotland figure and results from previous
 surveys are also provided where appropriate.
- Information Questions: Results for all information questions, i.e. those questions that are not classed as per cent positive, for an area selected by the user. No statistical comparisons have been carried out on these questions.
- Response Rates & Demographics: Displays the response rate and demographic information for an area selected by the user.

More detailed notes on how to navigate and interpret the dashboards are provided within the dashboard itself.

Excel files containing results at local level are also available on the Scottish Government website at www.gov.scot/MaternitySurvey.

Infographics

Infographics looking at specific aspects of care across the maternity journey have been produced and are available on the Scottish Government website at www.gov.scot/MaternitySurvey.

Annex A: Per cent Positive and Negative Responses

Table A1 shows how responses to per cent positive question have been classed and how many respondents there were **nationally** for each question.

Table A1: Number of respondents and response codes for per cent positive style questions

Question Number	Topic	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
3	Antenatal Care	If you saw a midwife for your antenatal check-ups, did you see the same one every time?	1, 2	-	3	4, 5, 6	1,999
4	Antenatal Care	During your antenatal check-ups, were you given enough time to ask questions or discuss your pregnancy?	1	2	3	4	2,023
6	Antenatal Care	During your pregnancy, if you contacted a midwife or midwifery team, were you given the help you needed?	1	2	3, 4	5, 6	1,773
7a	Antenatal Care	Enough information on physical changes during pregnancy	1	2	3	4, 5	1,808
7b	Antenatal Care	Enough information on emotional changes that may occur, such as low mood & anxiety	1	2	3	4, 5	1,830
7c	Antenatal Care	Enough information on choices about where to give birth	1	2	3	4, 5	1,778
7d	Antenatal Care	Enough information on pain relief options for labour and birth	1	2	3	4, 5	1,849
7e	Antenatal Care	Enough information on options for feeding your baby	1	2	3	4, 5	1,861

Question Number	Topic	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
7f	Antenatal Care	Enough information on local support groups	1	2	3	4, 5	1,756
7g	Antenatal Care	Enough information on benefits and financial support	1	2	3	4, 5	1,360
8	Antenatal Care	Were you given the Ready, Steady, Baby book or a link to the website?	1	-	2, 3	4, 5, 6	1,970
10a	Antenatal Care	I was listened to	1, 2	3	4, 5	-	2,035
10b	Antenatal Care	My personal circumstances were taken into account	1, 2	3	4, 5	-	2,024
10c	Antenatal Care	I was treated with kindness and understanding	1, 2	3	4, 5	-	2,036
10d	Antenatal Care	I understood the information and explanations I was given	1, 2	3	4, 5	-	2,039
10e	Antenatal Care	I was involved in decisions about my care as much as possible	1, 2	3	4, 5	-	2,033
10f	Antenatal Care	I was given the opportunity to involve the people that matter to me	1, 2	3	4, 5	-	2,030
10g	Antenatal Care	Staff provided help when I needed it	1, 2	3	4, 5	-	2,035
10h	Antenatal Care	Staff worked well together to organise my care	1, 2	3	4, 5	-	2,030

Question Number	Topic	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
11	Antenatal Care	Overall, how would you rate your antenatal care?	1, 2	3	4, 5	-	2,029
13	Labour & Birth	At the very start of labour, did you feel that you were given appropriate advice and support when you contacted a midwife or the hospital?	1	-	2	3, 4	1,439
14	Labour & Birth	During your labour, were you able to move around and choose the position that made you most comfortable?	1	2	3	4, 5	1,342
15	Labour & Birth	Did you feel that you had enough help to enable you to cope with your pain during labour?	1, 2	-	3	4	1,527
19	Labour & Birth	If you raised a concern during labour and birth, did you feel that it was taken seriously?	1	-	2	3	984
20	Labour & Birth	When you called / asked for assistance during labour and birth, did you receive it within a reasonable time?	1	2	3	4, 5	1,503
24	Labour & Birth	Did the staff caring for you introduce themselves?	1	2	3	4	1,995
26a	Labour & Birth	I was listened to	1, 2	3	4, 5	-	2,033
26b	Labour & Birth	I was treated with kindness and understanding	1, 2	3	4, 5	-	2,030
26c	Labour & Birth	I was treated with respect and dignity	1, 2	3	4, 5	-	2,026

Question Number	Topic	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
26d	Labour & Birth	I was given the information and explanations I needed	1, 2	3	4, 5	-	2,032
26e	Labour & Birth	I was given the opportunity to involve the people that matter to me	1, 2	3	4, 5	-	2,032
26f	Labour & Birth	I was involved in decisions about my care as much as possible	1, 2	3	4, 5	-	2,031
26g	Labour & Birth	Staff provided help when I needed it	1, 2	3	4, 5	-	2,031
26h	Labour & Birth	Staff worked well together to organise my care	1, 2	3	4, 5	-	2,035
28	Labour & Birth	Overall, how would you rate the care you received during your labour and birth?	1, 2	3	4, 5	-	2,038
34a	Postnatal Care - Hosp.	I was listened to	1, 2	3	4, 5	-	1,990
34b	Postnatal Care - Hosp.	I was treated with dignity and respect	1, 2	3	4, 5	-	1,994
34c	Postnatal Care - Hosp.	I was treated with kindness and understanding	1, 2	3	4, 5	-	1,987
34d	Postnatal Care - Hosp.	I was given the information and explanations I needed	1, 2	3	4, 5	-	1,994
34e	Postnatal Care - Hosp.	I was given the opportunity to involve the people that matter to me	1, 2	3	4, 5	-	1,989

Question Number	Topic	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
34f	Postnatal Care - Hosp.	I was involved in my baby's care as much as possible	1, 2	3	4, 5	-	1,990
34g	Postnatal Care - Hosp.	Staff provided help when I needed it	1, 2	3	4, 5	-	1,990
34h	Postnatal Care - Hosp.	Staff spent enough time with me	1, 2	3	4, 5	-	1,994
34i	Postnatal Care - Hosp.	Staff worked well together to organise our care	1, 2	3	4, 5	-	1,990
35	Postnatal Care - Hosp.	Overall, how would you rate the care you received in hospital or a midwife-led unit after the birth of your baby?	1, 2	3	4, 5	-	1,999
42a	Neonatal Care	My personal circumstances were taken into account	1, 2	3	4, 5	-	252
42b	Neonatal Care	I was treated with kindness and understanding	1, 2	3	4, 5	-	250
42c	Neonatal Care	I was given the information and explanations I needed	1, 2	3	4, 5	-	251
42d	Neonatal Care	I was involved in my baby's care as much as possible	1, 2	3	4, 5	-	251
42e	Neonatal Care	Staff provided help when I needed it	1, 2	3	4, 5	-	251
42f	Neonatal Care	Staff worked well together to organise my baby's care	1, 2	3	4, 5	-	252

Question Number	Topic	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
43	Neonatal Care	When you called or asked for assistance whilst your baby was in neonatal care, did you receive it within a reasonable time?	1	2	3	4, 5	239
45	Neonatal Care	Overall, how would you rate the care your baby received in the neonatal unit?	1, 2	3	4, 5	-	254
49	Feeding your baby	Were your decisions about how you wanted to feed your baby respected by staff?	1	2	3	4	2,030
50	Feeding your baby	Did you feel that midwives and other health professionals gave you consistent advice about feeding your baby?	1	2	3	4, 5, 6	1,823
51	Feeding your baby	Did you feel that midwives and other health professionals gave you active support and encouragement about feeding your baby?	1	2	3	4, 5	1,911
52	Postnatal Care - Home	Do you feel you had enough advice & support to care for your baby after the birth?	1	2	3	4, 5	1,983
55	Postnatal Care - Home	If you contacted a midwife or midwifery team were you given the help you needed?	1	2	3, 4	5, 6	1,469
57a	Postnatal Care - Home	Enough information and support on your physical recovery after birth	1	2	3	4, 5	2,008
57b	Postnatal Care - Home	Enough information and support on emotional changes you might experience after the birth	1	2	3	4, 5	1,982
57c	Postnatal Care - Home	Enough information and support on your baby's health & progress	1	2	3	4, 5	2,017

Question Number	Торіс	Question Text	Positive values	Neutral values	Negative values	Excluded values	Number of responses analysed
57d	Postnatal Care - Home	Enough information and support on options for feeding your baby	1	2	3	4, 5	1,880
57e	Postnatal Care - Home	Enough information and support on local support groups	1	2	3	4, 5	1,863
57f	Postnatal Care - Home	Enough information and support on benefits & financial support	1	2	3	4, 5	1,399
59a	Postnatal Care - Home	I was listened to	1, 2	3	4, 5	-	2,016
59b	Postnatal Care - Home	My personal circumstances were taken into account	1, 2	3	4, 5	-	2,008
59c	Postnatal Care - Home	I was treated with kindness and understanding	1, 2	3	4, 5	-	2,014
59d	Postnatal Care - Home	I understood the information and explanations I was given	1, 2	3	4, 5	-	2,015
59e	Postnatal Care - Home	Staff provided help when I needed it	1, 2	3	4, 5	-	2,011
59f	Postnatal Care - Home	Staff spent enough time with me	1, 2	3	4, 5	-	2,014
59g	Postnatal Care - Home	Staff worked well together to organise our care	1, 2	3	4, 5	-	2,013
60	Postnatal Care - Home	Overall, how would you rate the care you received at home after the birth?	1, 2	3	4, 5	-	2,027

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