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RESULTS OF THE QUESTIONNAIRE COMPLETED BY MOTHERS AT THE MULBERRY CENTRE.

Introduction.

A total of eleven mothers completed the questionnaire during my four visits to the coffee mornings. The babies were aged between one week and three months old. The participants were very welcoming and supplied the information willingly and in a very relaxed atmosphere.

How well were the mothers supported during their pregnancies?

- The general consensus was that the support was very varied but informative when available.
- Shortage of midwives caused delays to some mothers in having their telephone calls returned if returned at all.
- One mother reported not seeing her midwife prior to delivery. She assumed it was because it was her second confinement. Very different to the care she received in Cornwall with her first baby.
- Only one mother reported attending parenting classes.
- Three mothers attended anti-natal classes.

How well were the mothers supported after the birth?

- On average the midwife only called once after the birth. Not one mother received a visit on the first day after delivery. They had to rely on the phone if they had concerns.
- Their calls often took time to be answered.

- A young mother was discharged home following a forceps delivery with her first baby. Husband was serving abroad; Mother lives in Spain and didn't arrive until day three.
- Midwife didn't visit until second day leaving her feeling very vulnerable. This was the only visit she received. She would have liked further visits as she had difficulties establishing feeding.
- In contrast a mother who was in hospital for six days following a C section was visited on the second and third day of discharge. Midwife was easily contactable by phone. She spoke highly of the care she received.
- All first time mothers agreed they would have liked additional visits from the midwife.
- Only one mother received a visit prior to delivery.
- One mother didn't receive any visit at home following the birth of her second baby.

How many visits received from the health visitor after giving birth?

- The majority of visits from the health visitor were carried out six weeks following the birth for blood tests etc...
- None of the mothers interviewed could name their health visitor or give a telephone number.
- The C section mother received two visits after the birth as did the mother following her forceps delivery.
- None of the mothers reported being able to build a relationship with their health visitor.
- Contacting the health visitor was very much hit and miss. With delays often experienced in calls being returned.
- Two mothers reported that they had received no response at all and questioned that apart from the surgery who was there to help them.
- Only one mother reported feeling really well supported by both her midwife and health visitor. She had met her health visitor prior to her delivery.

What worked well and why?

- This question received a negative response from the majority of mothers; only the C section mother felt really well supported throughout her confinement and delivery. She was very complimentary about the Princess Ann Unit.

What didn't work and why?

- The shortage of midwives could make contact very difficult.
- Blood tests no longer available at the surgery.
- Non driving mothers found it very time consuming and expensive, especially when travelling with children, when using public transport.
- Two mothers would like to be able to pay the surgery for this service.
- Busy baby clinics with mothers being discouraged from attending weekly.
- Too reliant on lists and questionnaires rather than contact.
- The questionnaire at six weeks on mental health. When a mother raised the question in a group of eight people a very animated discussion took place. They didn't like the way some of the questions were phrased.
- One mother actually owned up to lying as she was frightened that she would be found inadequate as a mother.
- Two further mothers said they ignored the form as it was intrusive.
- Only one mother would have liked the questionnaire available when her first child was born as her then partner had violent tendencies.
- They asked why this couldn't be carried out at the clinic or surgery with the health visitor so they could discuss any problems they might have.

Conclusion.

- The mothers I met during my visits were a positive group and very uncomplaining. It was evident that they drew support from the experienced mothers and welcomed their advice and friendship.
- It was strongly felt that first time mothers should be given much more support and instruction than they are currently receiving. It has to be remembered that these mothers are often a long way away from their families and friends and the support they could provide.
- They would like a named midwife for the army base who was easy to contact by phone and with whom they could establish a relationship.
- More contact from the health visitor than currently receiving.
- I felt concern over the mental health questionnaire as I didn't speak to one mother who felt comfortable with it.
- Several mothers asked why they had to give so much information to the receptionist when ringing for an appointment that often they didn't want to share intimate details with them.

- The mothers old and new that I met and talked with didn't once make any reference to being army wives and expecting any preferential treatment as they were often coping alone.

This was a pleasurable experience on my behalf and I was made to feel very welcome. Several mothers asked me to thank the surgery for arranging my visits, showing that they did care for their wellbeing.

From a practice point of view the partners found the above report very interesting and would like to thank our PPG representative Mrs Lawson for taking time out of her busy schedule meeting with the new mums and pulling this report together **and most importantly a very big thank you to all the new mums** who agreed to speak with Mrs Lawson and for having taken time out of their already busy day to complete the questionnaires.

We then raised the report within our locality CCG meeting in April 2013. As a follow on from that meeting the report was sent "to the Director of Children & families" with a view to feeding the comments back to the appropriate teams.

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