

Maternity Matters

What does a great service look like?

Additional Locality Analysis
August 2016

**your
voice
counts**

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Introduction

In autumn 2015 HWC was commissioned by NHS Cumbria Clinical Commissioning Group (CCG) and NHS North Lancashire CCG to gather the public's views regarding their experiences of maternity services in Cumbria and North Lancashire. A report was published in February 2016. A copy of the full Maternity Matters report can be found on the Healthwatch Cumbria website www.healthwatchcumbria.co.uk/wp-content/uploads/HW-Maternity-Matters-FINAL.pdf.

Following on from the Maternity Matters report that was published, the Royal College of Obstetricians and Gynaecologists (RCOG) Implementation Group requested for the local analysis.

This additional brief requested that specific questions be analysed at locality and in some cases sub locality level. This would show the differences in current behaviour, choices and views between the different districts of Cumbria.

The themes that have been further analysed for this report are:

- Locality and sub locality views on travel
- Locality views on location
- Locality and sub locality analysis of choices
- Locality and sub locality analysis on continuity of care/ relationships
- Locality analysis of respondents comments on professional relationships
- Postcode analysis
- Age analysis of travel by locality
- Tablecloths analysis

Notes

The responses provided have been used as they were intended, to answer a particular question, and not to forecast what this may mean. That would be asking a different question to the one which was originally asked.

A direct comparison cannot be made of respondent's views on travel times between the same district for questions 19, 21 and 27. The response rate for each question was different.

It is not possible to obtain sub locality information. Using a map of Cumbria with the postcode areas labelled on it these postcodes were used to determine sub locality areas (see Appendix 1). The sub locality areas analysed are: South and North Copeland and East, West and CA7 Allerdale. The CA7 postcodes lie within both East and West Allerdale and it is not possible to differentiate.

For the sub district analysis the percentages for each sub district are a percentage out of the whole sub locality.

The free text analysis was interpreted by more than one individual; therefore there may be differences in how the information is presented depending on how it has been interpreted.

Respondents were asked to state their postcodes so locality analysis has used this geographic footprint for understanding deprivation. There is no link between postcode and deprivation. However, where possible, postcodes have been linked to a Lower Super Output Area (LSOA) and that has been related to an Index of Multiple Deprivation (IMD) decile.

Analysis

What do respondents in different localities think of travel times?

‘What do you think is a reasonable travel time to access antenatal care?’ (Question 19)

Figure 1. shows 806 responses across all of Cumbria and from each district on what respondents consider is a reasonable travel time to access antenatal care.

	All Cumbria and N. Lancashire	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	North Lancashire
Less than 20 minutes	507 62.90%	128 67%	43 62%	238 70%	19 41%	27 53%	36 59%	14 33%
20-40 minutes	266 33.00%	57 30%	20 29%	95 28%	24 52%	21 41%	23 38%	23 55%
40 minutes-1 hour	17 2.11%	3 2%	3 4%	1 0.29%	3 7%	1 2%	2 3%	4 10%
1 hour-1 hour 20 minutes	6 0.74%	0	2 3%	4 1%	0	0	0	1 2%
1 hour 20 minutes-1 hour 40 minutes	5 0.62%	1 0.50%	0	2 0.50%	0	1 2%	0	0
1 hour 40 minutes-2 hours+	5 0.62%	1 0.50%	1 1%	2 0.50%	0	1 2%	0	0

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward for them to total circa 100%

Comments:

- 507 respondents (62.90%) across all Cumbria and North Lancashire felt that less than 20 minutes was a reasonable time to travel to access antenatal care.
- In Allerdale, Carlisle, Copeland, Furness and South Lakeland 472 (most) respondents thought that less than 20 minutes was a reasonable time to travel to access antenatal care.
- In Eden most respondents (52%) felt that travelling 20-40 minutes was a reasonable travel time to access antenatal care.
- In North Lancashire most respondents (55%) felt that travelling 20-40 minutes was a reasonable travel time to access antenatal care.

Figure 2. shows the views of respondents in South and North Copeland and East, West and CA7 postcodes of Allerdale about what they think is a reasonable time to travel to access antenatal care.

	South Copeland	North Copeland	West Allerdale	East Allerdale	CA7 Allerdale
Less than 20 minutes	60 18%	171 51%	118 62%	4 2%	5 3%
20-40 minutes	39 12%	54 16%	48 25%	6 3%	3 2%
40 minutes-1 hour	0	1 0.30%	2 1%	0	1 0.50%
1 hour-1 hour 20 minutes	0	4 1%	0%	0	0
1 hour 20 minutes-1 hour 40 minutes	0	2 0.60%	1 0.50%	0	0
1 hour 40 minutes-2 hours+	2 0.60%	0	1 0.50%	0	0

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward. For the sub district percentages for Copeland and Allerdale to total circa 100% add together the percentage totals for the whole sub locality.

Comments:

- In South Copeland 18% of respondents and in North Copeland 51% of respondents thought travelling less than 20 minutes was reasonable travel time to access antenatal care. This was the highest number of responses for both sub districts.
- In West Allerdale 62% of respondents and in the CA7 postcode district of Allerdale 3% of respondents thought travelling less than 20 minutes was a reasonable travel time to access antenatal care. This was the highest number of responses for both sub districts.
- In East Allerdale the highest number of responses (3%) thought that 20-40 minutes was a reasonable time to travel to access antenatal care.

*‘What do you think is a reasonable time to travel to where the baby will be born?’
(Question 21)*

Figure 3. shows 810 responses across all of Cumbria and from each district on what respondents consider is a reasonable travel time to where the baby would be born.

	All Cumbria and N. Lancashire	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	North Lancashire
Less than 20 minutes	469 57.90%	109 58%	29 43%	231 67%	16 34%	35 65%	31 52%	16 37%
20-40 minutes	299 36.91%	74 39%	32 47%	102 30%	24 51%	17 31%	25 42%	22 51%
40 minutes- 1 hour	31 3.83%	4 2%	5 7%	6 2%	6 13%	2 4%	4 7%	4 9%
1 hour-1 hour 20 minutes	7 0.86%	1 0.5%	2 3%	2 0.5%	1 2%	0	0	1 2%
1 hour 20 minutes- 1 hour 40 minutes	2 0.25%	0	0	2 0.5%	0	0	0	0
1 hour 40 minutes- 2 hours+	2 0.25%	1 0.5%	0	0	0	0	0	0

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward for them to total circa 100%

Comments:

- 469 respondents (58%) across all of Cumbria and North Lancashire felt that less than 20 minutes was a reasonable time to travel to where the baby would be born.
- Most responses from Allerdale, Copeland, Furness and South Lakeland thought that less than 20 minutes was a reasonable time to travel to where the baby would be born.
 - In Allerdale this was 58% of responses.
 - In Copeland this was 67% of responses.
 - In Furness this was 65% of responses.
 - In South Lakeland this was 52% of responses.
- The majority of those in Carlisle, Eden and North Lancashire responded that travelling 20-40 minutes was a reasonable time to travel to where the baby would be born.
 - In Eden this was 51% of responses.
 - In Carlisle this was 47% of responses.
 - In North Lancashire this was 51% of responses.

Figure 4. shows what respondents in South and North Copeland and East, West and CA7 postcodes of Allerdale think is a reasonable time to travel to where the baby would be born.

	South Copeland	North Copeland	West Allerdale	East Allerdale	CA7 Allerdale
Less than 20 minutes	49 15%	175 52%	105 56%	2 1%	1 0.50%
20-40 minutes	47 14%	53 16%	56 30%	3 2%	15 8%
40 minutes-1 hour	5 1%	1 0.20%	4 2%	0	0%
1 hour-1 hour 20 minutes	0	2 0.50%	0	1 0.50%	0%
1 hour 20 minutes-1 hour 40 minutes	1 0.20%	1 0.20%	0	0	0%
1 hour 40 minutes-2 hours+	0	0	1 0.50%	0	0%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward. For the sub district percentages for Copeland and Allerdale to total circa 100% add together the percentage totals for the whole sub locality.

Comments:

- In South Copeland 15% of respondents and in North Copeland 52% responded that travelling less than 20 minutes was what most respondents thought was a reasonable travel time to where the baby would be born.
- In West Allerdale 56% of respondents thought travelling less than 20 minutes was a reasonable travel time to where the baby would be born.
- In East Allerdale 2% of responses and for CA7 postcodes of Allerdale 8% of responses stated that 20-40 minutes was what they would consider as a reasonable time to travel to where the baby would be born.

How long would you/your partner/family member be prepared to travel now to give birth where there are midwives, maternity doctors, consultants and a special care baby unit? (Question 27)

Figure 5. shows 767 responses across all of Cumbria and from each district on what respondents would be prepared to travel now to give birth.

	All Cumbria and N. Lancashire	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	North Lancashire
Less than 20 minutes	378 51.08%	86 49%	22 36%	210 66%	5 13%	27 53%	17 31%	10 26%
20-40 minutes	296 40%	79 45%	29 48%	97 31%	21 54%	18 35%	29 54%	21 55%
40 minutes-1 hour	51 6.89%	9 5%	6 10%	8 3%	12 31%	5 10%	7 13%	4 11%
1 hour-1 hour 20 minutes	8 1.08%	0	4 7%	1 0.3%	0	0	0	3 8%
1 hour 20 minutes-1 hour 40 minutes	3 0.41%	1 0.50%	0	1 0.3%	1 3%	0	0	0
1 hour 40 minutes-2 hours+	4 0.54%	1 0.50%	0	1 0.3%	0	1 2%	1 2%	0

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward for them to total 100%

Comments:

- 51% of respondents across all of Cumbria and North Lancashire stated that they would be prepared to travel 20 minutes or less to give birth now.
- Respondents who stated that they would be prepared to travel 20 minutes or less to give birth now were from the following districts:
 - In Allerdale this was 49% of responses.
 - In Copeland this was 66% of responses.
 - In Furness this was 53% of responses.
- The majority of responses that stated respondents would be prepared to travel 20-40 minutes to give birth now were from the following districts:
 - In Carlisle this was 48% of responses.
 - In Eden this was 54% of responses.
 - In South Lakeland this was 54% of responses.
 - In North Lancashire this was 55% of responses.

Figure 6. shows what respondents in North and South Copeland and East, West and CA7 postcodes of Allerdale would be prepared to travel to give birth now.

	South Copeland	North Copeland	West Allerdale	East Allerdale	CA7 Allerdale
Less than 20 minutes	46 15%	160 51%	84 48%	0	1 0.60%
20-40 minutes	43 14%	50 16%	62 35%	3 2%	14 8%
40 minutes-1 hour	7 2%	1 0.30%	7 4%	1 0.60%	1 0.60%
1 hour-1 hour 20 minutes	0	0	0	0	0%
1 hour 20 minutes-1 hour 40 minutes	0	1 0.30%	0	1 0.60%	0%
1 hour 40 minutes-2 hours+	0	1 0.30%	1 0.6%	0	0%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward. For the sub district percentages for Copeland and Allerdale to total circa 100% add together the percentage totals for the whole sub locality.

Comments:

- 15% of respondents from South Copeland and 51% of respondents from North Copeland would only be prepared to travel 20 minutes or less to give birth now.
- In West Allerdale 48% of responses stated that they would be prepared to travel 20 minutes or less to give now.
- In East Allerdale 2% of respondents and 8% of those in the CA7 postcode area of Allerdale would be prepared to travel 20-40 minutes to give birth now.

Summary of birth travel times

A direct comparison of questions 21 and 27 is not possible as both questions had different responses rates and it cannot be determined if respondents answered both questions; therefore their views before and after on birth travel times are unknown. However, the information below gives an idea of changes in views.

- 64% of respondents across Allerdale, Copeland and Furness think 20 minutes or less is a reasonable time to travel to the place of birth. 59% of respondents in these districts stated that they would only be prepared to travel 20 minutes or less to give birth now.
- Similarly for those in Eden 51% of respondents answered that they thought 20-40 minutes was a reasonable time to travel to give birth and 54% said they would be prepared to travel 20-40 minutes to give birth now.
- 47% of respondents in Carlisle stated they travel 20-40 minutes to the place of birth and 48% said they would be prepared to travel 20-40 minutes now to give birth.
- 52% of respondents in South Lakeland stated they would travel less than 20 minutes to the place where the baby would be born; 54% of respondents would be prepared to travel 20-40 minutes now to give birth.
- In North Lancashire 51% of respondents stated that they would consider travel of 20-40 minutes as reasonable to the place of birth. 55% of respondents stated that now they would be prepared to travel 20-40 minutes to where they would give birth.

What are respondent's views by locality about where they want their baby to be born?

Ideally, where did you/do you want the baby to be born? (Question 20)

Figure 7. shows where 803 respondents wanted their baby to be born for Cumbria and for each district.

	All Cumbria and North Lancashire	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	North Lancashire
In a hospital unit with midwives and doctors (called an Obstetric Unit)	556 69.24%	147 78%	54 81%	262 77%	11 24%	40 75%	17 28%	22 52%
In a unit with midwives, next to or alongside a hospital unit with doctors and consultants (Alongside Midwifery Unit)	163 20.30%	32 17%	8 12%	60 18%	16 35%	10 19%	25 41%	11 26%
In a unit with midwives only (Freestanding Midwifery unit)	42 5.23%	0	3 4%	4 1%	15 33%	1 2%	15 25%	4 10%
At home with a community midwife	42 5.23%	9 5%	2 3%	15 4%	4 9%	2 4%	4 7%	5 12%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward for them to total 100%

Comments:

- Overall 69% of respondents, across all districts, wanted their baby to be born in a hospital unit with midwives and doctors.
- In Allerdale, Carlisle, Copeland and Furness most respondents said they wanted their baby born in a hospital unit. This was:
 - 78% of responses for Allerdale
 - 81% of responses for Carlisle
 - 77% of responses for Copeland
 - 75% of responses for Furness
- In Eden 35% of respondents wanted their baby born in a unit with midwives, by a hospital unit with doctors and consultants.

- In South Lakeland most indicated (41%) that they would have preferred their baby being born in a unit with midwives alongside a hospital unit.
- In North Lancashire 52% stated that they wanted their baby born in an obstetric unit.
- Respondents were not asked how well they thought maternity led units would be received and so it cannot be speculated what peoples responses to this question would be.

Figure 8. shows sub districts responses on where respondents wanted their baby to be born.

	South Copeland	North Copeland	West Allerdale	East Allerdale	CA7 Allerdale
In a hospital unit with midwives and doctors (called an Obstetric Unit)	75 23%	180 54%	131 70%	5 3%	10 5%
In a unit with midwives, next to or alongside a hospital unit with doctors and consultants (Alongside Midwifery Unit)	19 6%	39 12%	27 14%	1 0.50%	4 2%
In a unit with midwives only (Freestanding Midwifery unit)	0	4 1%	0	0	0
At home with a community midwife	7 2%	8 2%	7 4%	0	2 1%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward. For the sub district percentages for Copeland and Allerdale to total circa 100% add together the percentage totals for the whole sub locality.

Comments:

- 23% of responses from South Copeland and 54% of responses from North Copeland expressed that they wanted their baby in an Obstetric Unit
- In West Allerdale 70% of respondents, 3% of respondents in East Allerdale and 5% of respondents in CA7 Allerdale stated that they wanted their baby born in an obstetric Unit

Please tell us where you wanted the baby to be born, and where the baby was actually born? (Question 26)

Figure 9. shows for all Cumbria and the districts where 738 respondents wanted their baby to be born and where the baby was actually born.

	All Cumbria and North Lancashire	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	North Lancashire
CIC	82 11.19%	19 11%	53 90%	1 0.32%	9 24%	0	0	0
CIC	99 13.71%	23 13%	56 93%	1 0.32%	19 53%	0	0	0
WCH	459 62.62%	148 84%	0	304 96%	0	1 2%	2 4%	1 3%
WCH	456 63.16%	147 85%	1 2%	300 96%	0	1 2%	2 4%	1 3%
PBC	18 2.46%	2 1%	2 3%	1 0.32%	13 34%	0	0	0
PBC	6 0.83%	1 0.5%	1 2%	0	3 8%	0	1 2%	0
FGH	55 7.50%	0	0	2 0.63%	0	46 88%	7 13%	0
FGH	67 9.28%	0	0	5 2%	1 3%	47 90%	12 24%	1 3%
HC	52 7.09%	0	1 2%	0	10 26%	1 2%	32 60%	8 23%
HC	22 3.05%	0	0	0	4 11%	0	15 29%	3 9%
RLI	35 4.77%	0	1 2%	0	3 8%	0	9 17%	22 63%
RLI	54 7.48%	0	0	0	8 22%	1 2%	19 37%	26 76%
Home	32 4.37%	7 4%	2 3%	8 3%	3 8%	4 8%	3 6%	4 11%
Home	18 2.49%	2 1%	2 3%	5 2%	1 3%	3 6%	2 4%	3 9%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward for them to total 100%

The figures in **bold** show 'Where did you want your baby born' and the other figures show 'Where was your baby born'.

Comments:

It is difficult to compare where respondents wanted their baby to be born against where the baby was actually born because not all respondents responded to both parts of the question. It is not possible to make direct comparisons.

- In Allerdale:
 - 84% of respondents stated that they wanted their baby to be born at West Cumberland hospital.

- 85% of respondents had their baby at West Cumberland hospital.
- 11% of respondents expressed that they wanted their baby to be born at the Cumberland Infirmary.
- 13% of respondents answered that they actually had their baby at Cumberland Infirmary.
- In Carlisle:
 - 90% of respondents wanted their baby to be born at Cumberland Infirmary.
 - 93% responded that their baby was born at the Cumberland Infirmary.
- In Copeland:
 - 96% of respondents indicated that they wanted their babies to be born at West Cumberland hospital.
 - Of those who responded to the second part of the question 96% said their baby was born at West Cumberland Hospital.
- In Eden:
 - 34% of respondents stated a preference for their babies to be born at Penrith birth centre.
 - Of the responses to the second part of the question 8% of responses indicated that this was actually where their babies were born.
 - 26% of responses stated they wanted their baby to be born at Helme Chase
 - From those who responded to the second part of the question 11% of babies were actually born at Helme Chase
 - From the available responses to the second part of the question most babies were actually born in the Cumberland Infirmary or the Royal Lancaster Infirmary.
- In Furness:
 - 88% stated that they wanted their babies to be born at Furness General Hospital.
 - 90% of respondents actually had their baby born at Furness General Hospital.
- In South Lakeland:
 - 60% of respondents expressed that they wanted their baby to be born at Helme Chase.
 - Of those who provided a response to the second part of the question responses show that 29% of babies were born at Helme Chase
 - Of those who responded most (37%) actually had their baby at the Royal Lancaster Infirmary.
- In North Lancashire:
 - 63% of respondents wanted their baby to be born at the royal Lancaster Infirmary.
 - 23% wanted their babies born at Helme Chase.
 - 76% of babies were actually born at the Royal Lancaster Infirmary
 - 9% of babies were actually born at Helme Chase

Overall Comments

- General trend, as expected, is that most people want their babies to be born at their local hospital with few respondents expressing that they want a home birth.
- It is hard to compare people's wishes of where they want the baby to be born against where their baby was actually born as the question parts had different response rates. It is not possible to know if respondents answered both parts so it can't be determined if where they wanted their baby to be born was where the baby was actually born.

What is current behaviour by locality on visiting the hospital/birth centre for checks?

Did you visit the hospital/birth centre for checks in early labour? (Question 25)

Figure 10. shows 740 responses for Cumbria and each district on whether respondent stated that they visited the hospital/birth centre for checks in early labour.

	All Cumbria and North Lancashire	Allerdale	Carlisle	Copeland	Eden	Furness	South Lakeland	North Lancashire
Yes	133 17.97%	29 16%	10 16%	63 20%	5 14%	11 21%	9 16%	5 14%
No	329 44.46%	84 47%	22 36%	129 41%	22 59%	23 44%	28 51%	19 51%
Yes (free text)	278 37.57%	64 36%	29 48%	124 39%	10 27%	18 35%	18 33%	13 35%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward for them to total 100%

Comments:

- Of those who answered 'yes' 18% of responses across all Cumbria and North Lancashire indicate that respondents do visit the hospital/birth centre for checks in early labour.
- 45% across All Cumbria and North Lancashire responded 'no'
- 38% responses answered the free text 'if yes, how many times' question

Figure 11. shows sub district responses to Question 25.

	South Copeland	North Copeland	West Allerdale	East Allerdale	CA7 Allerdale
Yes	15 5%	45 15%	28 16%	0	0
No	41 13%	86 28%	73 41%	3 2%	8 5%
Yes (free text)	40 13%	81 26%	53 30%	3 2%	8 5%

Understanding the numbers and percentages- for each column the numbers and percentages are to be read downward. For the sub district percentages for Copeland and Allerdale to total circa 100% add together the percentage totals for the whole sub locality.

Comments:

- More responded to the 'yes free text' than the 'yes' select box. So combining these together generally more do visit the hospital/birth centre for checks than not
- A high number are saying that they did not visit the hospital/birth centre for checks in early labour.

What are respondent's choices throughout the whole journey?

Did you feel involved in choices and decisions? (Question 22)

As there were six responses to choose from and ten topics, the three most important topics were analysed at locality level to give a better understanding as to whether respondents in different districts felt involved in decisions and choices.

Figures 12 through to 18, shows respondents views for each district as to whether they felt involved in the choices and decisions made about: the birth plan, where to give birth and what kind of birth to have. *Understanding the numbers and percentages- for each column the numbers and percentages are to be read across for them to total 100%.*

Figure 12. Shows responses in Allerdale.

Allerdale	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	118(64%)	38(21%)	11(6%)	6(3%)	3(2%)	8(4%)
Where to give birth	138(76%)	20(11%)	8(4%)	6(3%)	7(4%)	2(1%)
What kind of birth to have	105(57%)	54(29%)	7(4%)	3(2%)	8(4%)	7(4%)

Figure 13. Shows responses in Carlisle.

Carlisle	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	10(15%)	36(55%)	7(11%)	2(3%)	4(6%)	7(11%)
Where to give birth	50(76%)	6(9%)	5(8%)	2(3%)	2(3%)	1(2%)
What kind of birth to have	32(49%)	20(31%)	3(5%)	2(3%)	3(5%)	5(8%)

Figure 14. Shows responses in Copeland.

Copeland	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	250(76%)	57(17%)	12(4%)	0	2(0.6%)	10(3%)
Where to give birth	293(88%)	20(6%)	4(1%)	4(1%)	3(0.9%)	8(2%)
What kind of birth to have	220(67%)	72(22%)	15(5%)	7(2%)	4(1%)	12(4%)

Figure 15. shows responses in Eden.

Eden	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	26(57%)	9(20%)	3(7%)	0	2(4%)	6(13%)
Where to give birth	26(55%)	15(32%)	1(2%)	0	2(4%)	3(6%)
What kind of birth to have	27(59%)	13(28%)	4(9%)	0	0	2(4%)

Figure 16. Shows responses in Furness.

Furness	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	32(60%)	9(17%)	3(6%)	2(4%)	4(8%)	3(6%)
Where to give birth	40(77%)	2(4%)	2(4%)	4(8%)	3(6%)	1(2%)
What kind of birth to have	32(62%)	6(12%)	5(10%)	3(6%)	5(10%)	1(2%)

Figure 17. Shows responses in South Lakeland.

South Lakeland	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	41(67%)	11(18%)	5(8%)	1(2%)	0	3(5%)
Where to give birth	37(61%)	19(31%)	4(7%)	0	0	1(2%)
What kind of birth to have	33(54%)	18(30%)	4(7%)	3(5%)	0	3(5%)

Figure 18. Shows responses in North Lancashire.

North Lancashire	Yes- I was involved in the choices and decisions and it was followed through	I was involved but due to circumstances it was not possible at the time	I was involved but I felt I was not listened to	No I was not involved but I was content with that	No I was not involved in the choices and decisions	I'm not sure/not applicable to me
Birth plan	24(57%)	7(17%)	3(7%)	2(5%)	1(2%)	5(12%)
Where to give birth	27(63%)	9(21%)	2(5%)	2(5%)	1(2%)	2(5%)
What kind of birth to have	19(44%)	14(33%)	3(7%)	3(7%)	1(2%)	3(7%)

Overall Comments:

- From the responses from each district the findings suggest that respondents are involved in the choices and decisions about the birth plan, where to give birth and what kind of birth to have and that these are followed through. Or that those respondents were involved but due to circumstances at the time it was not possible at the time to follow these through.

Did you feel that the birth plan and preferences were listened to? (Question 30)

The following is the locality and, for Allerdale and Copeland, sub locality analysis of Question 30. It is a free text question:

Allerdale

There were:

- 295 respondents from Allerdale
- 126 did not respond and left this question blank
- 110 responded 'yes'
- 20 responded 'no'
- 39 responses were ambiguous

Themes:

- For those who responded 'yes' the main theme was support for midwives and their professional judgement/advice
- For those who responded 'no' this was due to respondents having to have an emergency C-section and feeling that things happened beyond their control
- One respondent stated she was not offered a birth plan
- One respondent stated they were not listened to.
- CA12 response analysis:
 - Respondents all had birth plans and one responded saying it was "great"
- CA13 response analysis:
 - Emergency C-sections overtook any plans/being listened to in order to deliver the baby safely
 - One respondent stated that birth plans were not mentioned to her at the antenatal stage
 - From the interpretation it seemed that respondents felt that midwives led the process
- CA14 response analysis:
 - Birth plans were in place and for those where it was not followed this was due to having to have emergency C-sections
 - Good support for midwives
- CA15 responses analysis:
 - Birth plans were in place and respondents felt listened to
 - Any change of plan was due to respondents having to have emergency C-sections
- CA7 response analysis:
 - For most respondents they said that birth plans were not in place and changes to those birth plans that were in place was due to respondents having to have emergency C-sections.
 - One respondent said that their birth plan was not read.

Carlisle

There were:

- 107 respondents from Carlisle
- 47 did not respond
- 34 responded 'yes'
- 15 responded 'no'
- 11 responses were ambiguous

Of the 15 who felt that the birth plan and their preferences were not listened to, 10 of these responded that this was due to having emergency C-sections meaning plans were not followed.

Copeland

There were:

- 521 respondents from Copeland
- There were 300 responses to this question
- 221 respondents left this question blank and did not respond
- 89 responses from South Lakeland
- 203 responses from North Copeland
- 8 responses did not provide postcode sub locality information

Of the respondents who replied 'yes' to this question and provided a response, some replied 'yes' even if circumstances meant the birth plan could not be followed.

Of the ambiguous responses:

- 1 respondent was still pregnant
- 1 felt they were listened to but "to an extent"
- 3 went into premature labour, birth plan wasn't formulated
- 16 respondents said that they did not have a birth plan

North Copeland

- 132 respondents stated that their birth plan and preferences were listened to
- 8 respondents stated that their birth plan and preferences were not listened to.
Responses varied from:
 - "no"
 - "not at all"
 - "not looked after"
 - "2nd labour I wanted to be active but the midwife had me on every monitor possible and I couldn't move"
 - "no partner wasn't allowed to stay postnatally or when I was an antenatal patient"
- 30 commented that due to complications or the birth happening too fast the birth plan and preferences changed
- 2 commented that they wanted a water birth however there wasn't a birthing pool available at the time of birth as there was only one and at the time it was already occupied
- 13 stated that they did not have a birth plan
- 9 ambiguous comments. Examples:
 - "eventually"

- “yes and no”
 - “didn’t really apply to me”
- 5 commented “n/a”

South Copeland

- 62 responses stated the birth plan and preferences were listened to
- 6 respondents felt that the birth plan and their preferences were not listened to
- 2 respondents stated that they would have preferred a water birth however there were no facilities available for this to happen at the time
- 2 respondents stated they did not have a birth plan
- 4 respondents gave ambiguous comments. Examples;
 - “to an extent”
 - “generally”
- 11 respondents stated that due to complications or the birth happening too fast, the birth plan and preferences were not implemented.

Eden

There were:

- 64 respondents from Eden
- 32 left this question blank and did not provide a response
- 1 did not have a birth plan
- 1 respondent had a negative experience (ignored)
- 8 respondents had a birth plan but due to delivery complications and emergencies these could not be followed. From the interpretation of the responses this appeared to have been acceptable to the respondents due to their situation.
 - For example
 - 1 respondent commented that “Everything was listened to and decisions made for the best at all times”
 - 1 respondent commented “Yes, as much as they could be”
- Many responses were simply ‘yes’

Furness

There were:

- 73 respondents from Furness
- 23 did not respond and left this question blank
- 27 responded ‘yes’
- 6 responded ‘no’
- 17 responses were ambiguous

Themes:

- In circumstances where the birth plan would not or could not have been followed mums felt it best to leave plans to the professionals due to them having to have emergency C-sections.

South Lakeland

There were:

- 89 respondents from South Lakeland
- 52 responses to this question
- 37 did not respond and left this question blank
- 38 responded 'yes'
- 9 responded 'no'
- 5 were 'ambiguous'

Key issues noted were:

- Of those that responded positively they did not generally go on to give a more detailed response. Of those who elaborated on their 'yes' answer, respondents said that due to circumstances some changes did happen.
- Of those who responded 'no' one respondent said that "they had their own agenda between themselves. My wishes are just something to laugh at".
- Other respondents, who said that their birth plan and preferences were not listened to, said this was due to lack of equipment rather than their preferences being ignored.
- Ambiguous responses related to "I don't believe in birth plans", "to an extent" and "reasonably".

North Lancashire

There were:

- 69 respondents from North Lancashire
- 37 responses to this question
- 32 did not respond and left this question blank
- 17 responded "yes"
- 1 responded "n/a"
- 2 responded "no"
- 2 responded that they didn't have a birth plan
- 8 responded that due to circumstances their birth plan and preferences could not be followed
- 4 ambiguous responses
 - "to some degree"
 - "not totally"
 - "first birth-yes. Second birth-no"
 - "first time no, second pregnancy I made sure they were listened to"
- 1 responded that it was "irrelevant-elective section"

Was there anything that could have been done differently to improve the experience during labour, birth and the hours immediately after delivery? (Question 31)

The following is the locality and, for Allerdale and Copeland, sub locality analysis of Question 31; it is a free text question:

Allerdale

There were:

- 295 respondents from Allerdale
- 156 (53%) responses to this question
- 139 did not respond and left this question blank
- 75 responded 'no'

In East Allerdale:

- 1 respondent said "nothing"
- 1 respondent said they would have liked for their husband to have been allowed to stay overnight
- 1 respondent would have liked more support during labour
- 1 respondent commented that they would have liked for post delivery staff to have had a considerate and helpful attitude.

In the CA7 postcode area of Allerdale some of the comments were:

- 6 respondents commented "no" there was not anything that could have improved the experience
- 1 respondent would have liked for their partner to have been able to stay overnight
- 1 respondent commented that during their long labour there should have been more comfortable facilities for the husband
- 1 respondent felt rushed
- A few mentioned the care they received

In West Allerdale:

- 67 commented 'no'.

There were a number of respondents commenting 'yes' that there were improvements to be made.

- "yes a lot"
- "yeah, just look at my crap birth"
- "yes. If only they would listen to the mother giving birth and let her follow her instinct on how to push her baby out... A completely horrific experience...I still have horrific nightmares about my experience".
- One respondent said "remove (female) from Carlisle maternity services; rude, ignorant, obnoxious and generally poor attitude".
- Number of responses commented that they would have liked for the father to be able to stay overnight.
- There were a number of comments made about medical professionals and care received by them and communication between mothers and medical professionals.
- Timing was also mentioned by respondents. This is in relation to being moved too soon after birth and feeling rushed.

Carlisle

There were:

- 107 respondents from Carlisle
- 56 did not respond to this question
- 2 responded 'yes'
- 22 responded 'no'
- 27 responses were 'ambiguous'

Main themes to emerge were:

- Improve communication about the process
- Discharge and welfare of the baby
- Need to listen to mums before, during and after birth

Copeland

There were:

- 521 respondents from Copeland
- 268 responses to this question
- 253 left this question blank and did not provide a response
- 80 responses from South Copeland
- 182 responses from North Copeland
- 5 responses were "N/A" with 1 respondent saying they were still pregnant

South Copeland

- 41 commented "no"

Main themes to emerge:

- More support/contact from staff in the hours immediately after birth
- Greater numbers of staff
- Lack of space/ not enough bed space
- Partners being allowed to stay
- Communication
- Feeling listened to

North Copeland

- 113 commented that they had no comments or responded there was nothing and they were happy with the care they received

Main themes to emerge:

- partner being allowed to stay overnight after the birth
- more staff
- Cleanliness- For the room to be cleaned after birth
- Greater support/contact from staff in the hours immediately after the birth
- Communication
- Being listened to

Eden

There were:

- 64 respondents from Eden
- 31 did not respond to this question
- 15 positive responses
- 18 negative responses

Of the negative responses the main theme that emerged was that of communication. Many respondents would have liked more explanation as to what was happening and why. They would also have liked more reassurance. Some respondents commented on the immediate post-birth period and the fact that it was sometimes several hours before they saw a midwife again once they had given birth. A number of respondents would have liked more time on the ward to come to terms with the birth, instead they felt rushed into discharge.

Furness

There were:

- 73 respondents from Furness
- 42 (57%) responses to this question
- 31 did not provide a response and left this question blank
- 16 responses said 'nothing' or 'no'
- 2 responses said "everything fine" and 1 response was "all fine"
- 1 respondent said that "doctors and midwives fantastic and could not fault them"

All of the comments were about the hours immediately after delivery. There was a variety of different comments made.

3 respondents stated that they would have liked it if the father was allowed to stay overnight.

Respondents stated that they were left alone immediately after birth and rarely checked on. 1 respondent also said that they would have liked more support with breastfeeding.

1 respondent commented that they would have liked the birth room to be cleaned after delivery and 1 respondent stated that they would have liked more support to shower after the birth.

South Lakeland

There were:

- 89 respondents from South Lakeland
- 44 responses to this question
- 45 not respond to this question
- 18 said that there was nothing that could have been done to improve the experience
- 26 commented about their experiences

There were no recurrent themes that emerged.

However treatment in the hours immediately after delivery provoked a variety of opinions. Responses were:

- Facilities being unacceptable

- Questions on the level of care they received while on the ward
- 7 respondents mentioned that they wished their partner/husband could have been present at the birth/ allowed to stay overnight after the birth

North Lancashire

There were:

- 69 respondents from North Lancashire
- 35 responded to this question
- 34 did not respond and left this question blank
- 13 responded that there was nothing that could have been done to improve the experience
- 19 commented that there were things that could have been done to improve their experience. Key themes:
 - Husbands/partners being allowed to stay overnight
 - More support
 - Staff attitude
 - Being listened to

What are respondent's views in different localities on continuity of care/relationships?

What worked well in your relationships with medical professionals during the course of the pregnancy? E.g. midwives, doctors, consultants (question 12.)

Allerdale

There were:

- 295 respondents from Allerdale.
- 118 did not respond to this question.
- 5 responses from East Allerdale
- 155 responses from West Allerdale
- 15 responses from CA7

East Allerdale

- 4 positive responses. Positive responses were about staff. Comments about staff:
 - helpful
 - approachable
 - "very nice"
- 1 negative response- "Not much"

West Allerdale

- 155 responses
- Key positive themes:
 - Locality
 - Consistency
 - Communication
 - Information
 - Knowledge
- Key positive words mentioned: excellent, good, brilliant, helpful
- 1 negative response "failed me as a patient"
- 1 respondent commented on a lack of communication from the midwife
- 2 comments mentioned feeling sorry for staff as they seemed overstretched.
- Cockermouth and Maryport were mentioned for its staff being "excellent" and "very good".

CA7 Allerdale

- 15 responses-14 positive and 1 ambiguous
- Staff were mentioned very positively particularly midwives
- Key themes:
 - Consistency
 - Friendly
 - Understanding
 - Informative
- Examples:
 - "excellent"
 - "They were all so friendly"
 - "very practical and reassuring"
 - "very understanding"

Wigton was mentioned as being excellent.

Carlisle

There were:

- 107 respondents from Carlisle
- 45 did not respond to this question.

Most positive responses were about:

- Good relationships with midwives.
 - Several appreciated the continuity of care they received by having the same midwives.
- Key words around the importance of this relationship were: caring, supportive, informative and professional

A number of positive responses focused on respondent's treatment and praise was bestowed on doctors, consultants and sonographers.

One negative response was the respondents belief that antenatal classes were "...brief, always running late, didactic in nature and without options".

The other negative response was about the transfer of patient notes between the hospital and the health visitor after the baby's birth leaving the respondent to re-explain their condition.

Copeland

There were:

- 521 respondents from Copeland
- 201 left this question blank and did not provide a response
- There were 315 positive responses
- 4 ambivalent responses

Of those who provided their postcode there were:

- 94 responses from South Copeland
- 216 responses from North Copeland

North Copeland

- Key themes were:
 - Locality
 - Continuity of care
 - Informed
 - Overall everything/everyone worked well
 - Communication
- Main words describing care received said it was: Fantastic, brilliant, very good, caring.

The ambivalent responses were:

- 'Most midwives are fantastic. Most consultants are ok. Some lack person centred approach, as do many of the Registrars and SHOs employed. Not to mention locums.'
- One respondent commented that having the midwives available at the GP surgery and at the hospital was very helpful, knowing the midwives were aware of the

respondent's preferences for the birth. This respondent also commented that having the maternity service locally meant that their husband could attend. The respondent also commented that complications in early pregnancy meant travelling to Carlisle, which was made more traumatic by having to travel a great distance and come to unfamiliar surroundings and staff.

- "Majority of midwives were well informed & empathetic"
- "...apart from one midwife saying she didn't want me there, the others were amazing".

South Copeland

- All medical professionals were mentioned very positively, in particular midwives.
- Key themes were:
 - Continuity and consistency
 - Helpful
 - Informative
 - communication
 - respondents were very positive about the care they received
 - medical professionals worked well

Eden

There were:

- 64 respondents from Eden
- 19 did not respond and left this question blank
- 45 positive responses
- 0 negative responses

All of those who responded were positive about the support they received from midwives, some included comments about facilities 'Friendly and supportive midwives at Penrith - just shame limited facilities'. Many superlatives and positive qualities mentioned throughout; fantastic, excellent, approachable, available, understanding, sympathetic, supportive, caring and professional.

A key theme appears to be consistency and the relationship subsequently developed leading to confidence.

Furness

There were:

- 73 respondents from Furness
- 23 did not respond to this question
- 47 positive responses
- No negative responses
- 3 ambiguous responses.

The main positive comments made towards midwives. Additionally where other medical professionals were mentioned, the responses were positive.

The key words that emerged were fantastic, good, communication, continuity, excellent, and trust. Another key theme that emerged was about local availability.

South Lakeland

There were:

- 89 respondents from South Lakeland
- There were 52 positive responses
- 2 negative responses.

Of the positive responses, almost all mention midwives; the relationship respondents had with midwives was very important.

The main positive themes to emerge were: supportive, informative, and re-assuring. There were occasional superlatives such as wonderful and amazing.

Of great importance to respondents was the free flow of information, having questions answered and their queries explained to them.

One negative response was: “Most midwives are kind and professional and are genuinely dedicated to the woman's wishes. However, from working in Barrow and Lancaster hospitals, I have come across a small minority of midwives who do not contribute positively to the pregnant and labouring woman's experience. The consultants I have met are on the whole (there are a couple of exceptions) not as open or as understanding to the woman's wishes as the midwives.”

Another negative response to what worked well was “Nothing really, this is why I'm passionate about making change”.

North Lancashire

There were:

- 69 respondents from North Lancashire
- 40 responded to this question
- 29 did not respond and left this question blank
- 39 responded positively and 1 responded “not much”
- Midwives were mentioned most and in a positive light.
- Key themes were on quality of care and staff, informative, communication, helpful. Key words: “wonderful”, “excellent”, “caring”.

What did not work well in your relationships with medical professionals during the course of the pregnancy? E.g. midwives, doctors and consultants (Question 13.)

Allerdale

There were:

- 295 respondents from Allerdale
- 142 did not respond and left this question blank
- 153 responded
- 282 responses from West Allerdale
 - 134 provided no response
 - 148 commented
- 13 responses from East Allerdale
 - 8 did not respond
 - 5 commented

West Allerdale

- 54 comments stated “nothing” or “n/a” or “all good”
- Of the other 94 comments the most recurrent theme was under staffing. Examples: “lack of midwives”, “no continuity of care” and an overall feeling of staff being stressed.
- Another theme was poor staff attitude. Some respondents perceived this as a product of stress and time constraints related to staffing issues. Others were unhappy with the lack of information they had been given and believed their wishes were not acted upon

East Allerdale

- Comments included:
 - bad information from GP and consultants
 - seeing a different registrar each time
 - long journey to Carlisle was cited as stressful

Carlisle

There were:

- 107 respondents from Carlisle
- 56 did not respond to this question
- 2 responses were positive
- 1 response was negative
- 51 responses were ambiguous

Main themes to emerge were:

- Unreliable
- Inconsistency in care
- Poor relationships with midwives
- Poor communication between doctors, consultants and the mum
- Overworked and inexperienced staff

Copeland

There were:

- 521 respondents from Copeland
- 242 responses to question 13
- 279 did not answer and left this question blank
- 74 responses were from South Copeland
- 162 responses from North Copeland

North Copeland

The main themes/key issues that emerged were:

- Travel
- Availability of services and risk of having to travel if unavailable
- Staff attitude
- Communication
- Continuity/consistency of care
- Staff shortages
- Busy
- Wait times

There were 76 comments that stated there was “nothing” or “n/a” or “everything worked well”.

South Copeland

The main themes/key issues that emerged were:

- Communication
- Continuity/ consistency of care
- Staff shortages- lack of midwives and lack of availability of consultants
- Staff attitude
- Lack of knowledge and conflicting information

There were 33 comments that stated there was “no issues” or “nothing” or “n/a”.

There was 1 ambivalent comment; it stated that there was a problem with the hospital rather than with the maternity services.

Eden

There were:

- 64 respondents from Eden
- 35 (55%) responded to this question
- 29 did not respond to this question
- 11 comments on what did work well
- 24 comments on what didn't work so well

Of the 24 comments on what did not work well main themes that emerged were:

- Communication either with the mother herself or inter-professional and inter-hospital
- 1 respondent commented that following a transfer there were no notes so she had to start explaining everything
- Timing of admission was raised. Admission on a Sunday meant a lack of doctors and consultants available
 - This then highlighted another theme that respondents had to be transferred as there was insufficient staff to cover the birthing facility.
- Staff attitude was mentioned several times.
 - “Midwife during labour did not speak to us”
 - A comment from one respondent said that the midwife was very unpleasant towards her.
 - One respondent said that the midwife made it clear that she was unhappy at having to accompany the mother and baby to Carlisle from Penrith despite the mother having had a traumatic birth and the baby being in shock.

Furness

There were:

- 73 respondents from Furness
- 36 did not provide a response
- 37 responses

Most used terms were “no consistency” and “lack of communication”

Some respondents felt they were treated by staff that did not have the necessary knowledge to help them, such as student doctors, or that felt they knew more about their pregnancy than the doctor.

Consistency of information was questioned as the doctors and midwives appeared to be telling people different things. Lack of communication between these teams was also raised on a number of occasions as having been an issue.

South Lakeland

There were:

- 89 respondents from South Lakeland
- 36 did not respond
- 53 responses to this question
- 10 respondents said that their relationships with medical professionals went well and that nothing did not work well.

Key themes to emerge were:

- Continuity of care
 - Not seeing the same midwife or consultant each time led to respondents saying this caused them to feel stressed and feeling they were being given inconsistent information.
- Support
 - Lack of support and information about breastfeeding was another theme mentioned that did not work well.

North Lancashire

There were:

- 69 respondents from North Lancashire
- 37 responded to this question
- 32 did not respond and left this question blank
- 7 responded that there was “nothing”, “no issues” , “no concerns”
- 1 responded “n/a”

Key themes:

- Continuity of care
- Advice
- support
- Communication
- Staff attitude
- Wait times

‘Is it important or not for you to be supported by the same small team of midwives throughout the pregnancy?’ (Question14.)

Figure 19. Shows respondents answers by district to Q14.

District	Not at all	Slightly important	Moderately important	Very important	Extremely important
Allerdale	4(2%)	6(3%)	20(11%)	61(33%)	96(51%)
Carlisle	2(3%)	4(6%)	5(7%)	26(38%)	31(46%)
Copeland	2(0.5%)	9(3%)	44(13%)	136(40%)	148(44%)
Eden	0(0%)	1(2%)	4(9%)	15(32%)	27(57%)
Furness	2(4%)	2(4%)	5(9%)	21(40%)	23(43%)
North Lancashire	1(2%)	2(5%)	9(21%)	15(35%)	16(37%)
South Lakeland	1(2%)	1(2%)	3(5%)	29(48%)	26(43%)

Understanding the numbers and percentages- for each district the numbers and percentages are to be read across for them to total 100%

Comments:

- In Allerdale, Carlisle, Copeland, Eden, Furness and North Lancashire most (341 respondents overall) answered ‘Extremely Important’ in response to the above question.
- In South Lakeland 29 respondents (most responses) answered ‘Very important’ to this question.
- Responses highlight that across all districts 670 respondents think it is extremely/very important to be supported throughout their pregnancies by the same small team of midwives. This is out of 797 respondents who had given their locality and answered the question.

It could be concluded from this that continuity of care/ relationships is highly important to respondents.

What were respondent's comments on professional relationships?

During all stages of the pregnancy did you feel the healthcare professionals worked well together or not? (Question 36)

Allerdale

There were:

- 295 respondents from Allerdale
- 135 did not respond and left this question blank
- 284 responses to this question
- 121 positive responses
- 28 negative responses
- 13 responses from East Allerdale
- 138 responses from West Allerdale
- 23 responses from CA7 Allerdale

East Allerdale:

- 13 responses
- 2 negative responses
- 9 did not respond
- Positive responses: "yes" and "well"
- Negative responses: "No, not really. Accept(except) the birth unit in hospital" and "Nobody knew about my anti-C bodies until I told them, not sure they would have monitored me unless I had told them."

West Allerdale:

- 138 responses
- 23 positive responses
- 2 negative responses
- 113 did not respond and left this question blank
- Positive responses:
 - "They seem to have good working relationships and there was excellent communication between them."
 - "On the whole, everything seemed to work fine."
- Negative responses:
 - "Felt like each of the professional teams work separate."
 - "I'm not sure how well they communicated with each other. I had to go over my own personal history numerous times."

CA7 Allerdale

- 9 positive responses
- 6 negative responses
- 8 did not respond and left this question blank
- Positive responses were just: "yes" or "well" with no detail included.
- Negative responses were about communication.
 - "I didn't feel that there was much communication between the different teams - the community midwives, hospital midwives and then health visitors"

all felt like completely different services rather than a continuation of the same thing. Within each team though everyone worked well together.”

- “there is a split between midwives and the hospital staff”

Carlisle

There were:

- 107 respondents from Carlisle
- 50 did not respond to this question
- 26 responses were ‘yes’
- 12 responses were ‘no’
- 19 responses were ‘ambiguous’

Main themes to emerge:

- Communication needs to improve with mothers
- Conflicting communication regarding discharge from hospital
- More joined up working between community midwives and hospital staff
- GP’s don’t communicate well with each other
- Clearer distinction between midwives and health professionals
- Medical notes missing

Copeland

There were:

- 521 respondents from Copeland
- 296 responses to this question
- 225 did not respond and left this question blank
- 87 responses from South Copeland
- 201 responses from North Copeland

South Copeland

- 68 responses stated “yes”
- 4 commented negatively stating that healthcare professionals did not work well together
- 1 respondent stated that there was “good communication between the community midwives and the hospital”
- 12 ambiguous comments. Examples:
 - “worked reasonably well together”
 - “most of them, yes”
 - “it seemed to work ok”
 - “through pregnancy and labour yes. Aftercare no...”
- 1 responded “not sure”

North Copeland

- 168 responded positively stating that healthcare professionals did work well together
- 4 responded stating that they thought the healthcare professionals did not work well together
- 1 responded “n/a still pregnant”
- 25 ambiguous comments

- “relatively well”
- “Mostly”
- “not always”
- “sometimes yes sometimes no”

Of the ambiguous comments the majority of the comments were on communication:

- “better communication between community and hospital needed”
- “I feel the communication could have been improved between the wards and community staff”
- “yes, but the management don’t”
- “yes but communication between them could have been better”
- “there needed to be more consultants listening to the midwives”

Eden

There were:

- 64 respondents from Eden
- 27 left this question blank and did not respond
- 28 positive responses
- 9 negative responses
- Many answers were ‘yes’

The main negative theme that emerged was that of communication. The work of the midwives was recognised as good with problems arising from necessary communication with and between doctors and consultants. In one instance a patient had to be transferred and it was not possible to access her notes which caused concern and frustration.

1 respondent commented on the lack of continuity between consultants.

Furness

There were:

- 72 responses
- 38 positive responses
- 12 negative responses
- 22 did not respond and left this question blank
- Positive comments: “All worked well together”, “Excellent Communication”, “Yeah, both midwives and consultant done brilliant.”
- Negative comments: “There is a split between midwives and the hospital staff”, “No, I feel that no one has communicated with each other.” “Mostly, could have been much better communicated between RVI and West Cumberland Hospital consultant/Community Midwives.”

South Lakeland

There were:

- 89 respondents from South Lakeland
- 50 responses to this question
- 39 did not respond
- 30 responded with just ‘yes’
- 6 responded with ‘no’

- 14 elaborated on their response

Key themes to emerge:

- 7 responses mentioned communication. This was in relation to poor communication between professionals.
- Some responses expressed that professionals worked well together “sometimes” and “not always”.
- Some mentioned specific areas/teams where they felt problems lay. For example, “Mostly ...apart from physio referral” or “yes until post-natal”

North Lancashire

There were:

- 69 respondents were from North Lancashire
- 34 responded to this question
- 35 did not respond and left this question blank
- 14 responded “yes”
- 3 responded “no”
- 17 ambiguous responses

Positive responses:

- Mostly “yes” responses
- 5 positive responses expanded on the “yes”. Comments:
 - “...midwife was very responsive”
 - “yes communication seemed to be good and thorough”
 - “yes. The referrals to consultants were usually smooth”

Negative responses:

- “no”
- “not at all”
- “consultant to consultant communication was poor.”

Ambiguous responses:

- “50/50”
- “at times they did, other times not”
- “mostly yes”
- “the only problem I found was that I was incorrectly diagnosed twice during my early pregnancy”
- “yes. However, I had suffered two miscarriages prior to the birth of my baby and after the first one, I was encouraged to sign up for antenatal classes and children centre groups...I then lost the baby, but got initiations on two occasions...”

Postcode analysis of areas of deprivation

This analysis was requested so it could be understood which of the areas experiencing high deprivation in Cumbria were engaged in the study.

In asking for assistance from the Cumbria Intelligence Observatory¹, it was explained that deprivation data is not available at postcode level yet, where possible, they assisted by assigning the postcodes to a Lower Super Output Area (LSOA) and subsequent Index of Multiple Deprivation decile (IMD) that relates to each LSOA. Of the 1182 respondents who provided their postcode information 261 postcodes could not be matched. This was likely because they are invalid; out of the county; or possibly new postcodes.

The Index of Multiple Deprivation Decile (IMD)² scale combines information from seven categories using the following weights to produce an overall relative measure of deprivation for small areas. For example, a ranking of 1 indicates an area that is most deprived to 32, 844 which is an area that is least deprived. The small area the IMD describes is the LSOA (LSOA). The weighted categories are:

- Income (22.5%)
- Employment (22.5%)
- Education, skills and training (13.5%)
- Health and disability (13.5%)
- Crime (9.3%)
- Barriers to housing and services (9.3%)
- Living environment (9.3%)

In Cumbria there are 29 LSOAs that rank within 10% of the most deprived LSOAs in the country. These are in Allerdale, Carlisle, Copeland and Furness with Furness central being the most deprived LSOA.

As Figure 20 shows below the maternity survey did receive responses from the 29 LSOAs that there are in Cumbria. However there were only 65 postcodes with an IMD decile of 1 identified and there could be more postcodes within these LSOAs that have an IMD of 1.

There are 11 LSOAs in Furness that rank within the 10% most deprived in the country however there were only 3 postcodes that were identified as being from Furness. All of the postcodes mentioned in Figure 20 do not come from the central ward which is the most deprived LSOA.

¹ Cumbria Intelligence Observatory, 'The Indices of deprivation (ID) & Index of Multiple Deprivation (IMD) September 2015

²The English Indices of Deprivation 2015-Frequently Asked Questions (FAQs)

Figure 20. Postcodes in Cumbria with LSOA, district and IMD information

LSOA	District	Postcode	Index of Multiple Deprivation (IMD) Decile (where 1 is most deprived 10% of LSOAs nationally)
E01019095	Allerdale	CA15 7QS	1
E01019097	Allerdale	CA15 8HB	1
E01019097	Allerdale	CA15 8LP	1
E01019097	Allerdale	CA15 8HG CA15 8HG	1
E01019111	Allerdale	CA14 5ER CA14 5ER	1
E01019111	Allerdale	CA14 3TQ	1
E01019112	Allerdale	CA14 5JT	1
E01019112	Allerdale	CA14 5EG	1
E01019112	Allerdale	CA14 5HA	1
E01019112	Allerdale	CA14 5LH	1
E01019112	Allerdale	CA14 5LR	1
E01019112	Allerdale	CA14 5LQ	1
E01019112	Allerdale	CA14 5HE	1
E01019112	Allerdale	CA14 5JQ	1
E01019113	Allerdale	CA14 3TT	1
E01019113	Allerdale	CA14 3RN	1
E01019121	Allerdale	CA14 2SB	1
E01019121	Allerdale	CA14 2EB	1
E01019122	Allerdale	CA14 1AQ	1
E01019122	Allerdale	CA14 1AB	1
E01019122	Allerdale	CA14 1AU	1
E01019122	Allerdale	CA14 1BU	1
E01019122	Allerdale	CA14 1JL	1
E01019122	Allerdale	CA14 1BU	1
E01019193	Carlisle	CA2 7DP	1
E01019193	Carlisle	CA2 7GX	1
E01019197	Carlisle	CA1 2WG	1
E01019197	Carlisle	CA1 2RN	1
E01019245	Carlisle	CA1 3AX	1
E01019263	Copeland	CA25 5EP CA25 5EP	1
E01019263	Copeland	CA25 5DL	1
E01019263	Copeland	CA25 5EX	1
E01019263	Copeland	CA25 5DQ	1
E01019267	Copeland	CA25 5LQ	1
E01019267	Copeland	CA25 5ND	1
E01019267	Copeland	CA25 5NP	1
E01019277	Copeland	CA26 3SH	1
E01019277	Copeland	CA26 3SD	1
E01019277	Copeland	CA25 3AT	1

E01019277	Copeland	CA26 3QW	1
E01019277	Copeland	CA26 3SB	1
E01019277	Copeland	CA26 3SE	1
E01019280	Copeland	CA28 7PQ CA28 7PQ	1
E01019280	Copeland	CA28 7AX CA28 7AX	1
E01019295	Copeland	CA28 9SU	1
E01019295	Copeland	CA28 9SJ CA28 9SJ	1
E01019295	Copeland	CA28 9TN	1
E01019295	Copeland	CA29 9JY CA28 9JY	1
E01019295	Copeland	CA28 9JQ	1
E01019301	Copeland	CA28 9HE	1
E01019301	Copeland	CA28 9LF CA28 9LF	1
E01019301	Copeland	CA28 9LH CA28 9LH	1
E01019301	Copeland	CA28 9PB	1
E01019156	Furness	LA14 1SL	1
E01019158	Furness	LA14 1NH	1
E01019158	Furness	LA14 5TH	1

Reading the table- the table is to be read across

Source: Cumbria Intelligence Observatory, 'The Indices of deprivation (ID) & Index of Multiple Deprivation (IMD) September 2015

Age analysis

An analysis by age was done to understand what different age groups think of travel times. The age groups were:

- Under 18
- 18-24
- 25-30
- 31-35
- 36-40
- 41-45
- 46-50
- 51-55

The question further analysed: ‘What do you think is a reasonable travel time to access antenatal care?’ (Question19.)

Figure 21. Shows by district what different age groups in **Allerdale** thought of travel times to access antenatal care.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	1	0	0	0	0	0
18-24	6	2	0	0	0	0
25-30	31	12	1	0	0	0
31-35	42	20	1	0	1	0
36-40	25	15	0	0	0	1
41-45	14	3	0	0	0	0
46-50	3	1	1	0	0	0
51-55	2	0	0	0	0	0
55+	2	4	0	0	0	0

Figure 22. Shows by district what different age groups in **Carlisle** thought of travel times to access antenatal care.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	2	0	0	0	0	0
25-30	10	4	1	1	0	0
31-35	21	8	1	0	0	0
36-40	5	5	0	0	0	0
41-45	2	2	1	1	0	1
46-50	2	0	0	0	0	0
51-55	1	1	0	0	0	0
55+	0	0	0	0	0	0

Figure 23. Shows by district what different age groups in **Copeland** thought of travel times to access antenatal care.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	8	6	0	1	1	0
25-30	57	19	0	1	0	1
31-35	85	28	1	0	1	0
36-40	41	16	0	0	0	1
41-45	24	10	0	1	0	0
46-50	6	3	0	0	0	0
51-55	3	4	0	0	0	0
55+	13	9	0	1	0	0

Figure 24. Shows by district what different age groups in **Eden** thought of travel times to access antenatal care.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	0	2	0	0	0	0
25-30	5	3	1	0	0	0
31-35	3	12	1	0	0	0
36-40	7	4	0	0	0	0
41-45	2	2	0	0	0	0
46-50	2	0	0	0	0	0
51-55	0	0	1	0	0	0
55+	0	1	0	0	0	0

Figure 25. Shows by district what different age groups in **Furness** thought of travel times to access antenatal care.

Age			Travel time					
			Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes-1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18			0	0	0	0	0	0
18-24			2	2	0	0	0	0
25-30			11	6	1	0	0	0
31-35			9	9	0	0	1	1
36-40			5	3	0	0	0	0
41-45	0	1	0	0	0		0	
46-50	0	0	0	0	0		0	
51-55	0	0	0	0	0		0	
55+	0	0	0	0	0		0	

Figure 26. Shows by district what different age groups in **South Lakeland** thought of travel times to access antenatal care.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	4	1	0	0	0	0
25-30	11	4	0	0	0	0
31-35	13	8	1	0	0	0
36-40	4	5	1	0	0	0
41-45	4	4	0	0	0	0
46-50	0	0	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	1	0	0	0	0

Figure 27. Shows by district what different age groups in **North Lancashire** thought of travel times to access antenatal care.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	0	1	0	0	0	0
25-30	3	5	1	0	1	0
31-35	5	8	2	0	0	0
36-40	6	4	1	0	0	0
41-45	0	2	0	0	0	0
46-50	0	1	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	2	0	0	0	0

Comments:

- The response rate was not very high for any of the districts
- The findings show that less than 20 minutes and 20-40 minutes are the most commonly chosen response.
- Regardless of age respondents would only consider travel up to 40 minutes as reasonable to access antenatal care

‘What do you think is a reasonable time to travel to where the baby will be born?’
(Question 21)

Figure 28. Shows by district what different age groups in **Allerdale** thought of travel times to the where the baby will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	1	0	0	0	0	0
18-24	5	3	0	0	0	0
25-30	30	14	0	1	0	0
31-35	36	27	2	0	0	0
36-40	19	20	0	0	0	1
41-45	12	5	0	0	0	0
46-50	2	2	1	0	0	0
51-55	2	0	0	0	0	0
55+	2	3	1	0	0	0

Figure 29. Shows by district what different age groups in **Carlisle** thought of travel times to where the baby will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	1	0	0	1	0	0
25-30	8	5	3	0	0	0
31-35	16	12	1	0	0	0
36-40	2	8	0	0	0	0
41-45	1	4	1	1	0	0
46-50	1	1	0	0	0	0
51-55	0	2	0	0	0	0
55+	0	0	0	0	0	0

Figure 30. Shows by district what different age groups in **Copeland** thought of travel times to where will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	11	5	0	0	0	0
25-30	56	15	5	1	0	0
31-35	77	34	1	1	1	0
36-40	39	19	0	0	0	0
41-45	21	13	0	0	1	0
46-50	6	3	0	0	0	0
51-55	5	3	0	0	0	0
55+	15	10	0	0	0	0

Figure 31. Shows by district what different age groups in **Eden** thought of travel times to where the baby will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	1	1	0	0	0	0
25-30	4	4	2	0	0	0
31-35	6	9	1	0	0	0
36-40	2	7	2	0	0	0
41-45	2	2	0	0	0	0
46-50	1	1	0	0	0	0
51-55	0	0	1	0	0	0
55+	0	0	0	1	0	0

Figure 32. Shows by district what different age groups in **Furness** thought of travel times to where the baby will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	3	2	0	0	0	0
25-30	12	5	1	0	0	0
31-35	15	7	0	0	0	0
36-40	5	2	1	0	0	0
41-45	0	1	0	0	0	0
46-50	0	0	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	0	0	0	0	0

Figure 33. Shows by district what different age groups in **South Lakeland** thought of travel times to where the baby will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	2	2	0	0	0	0
25-30	7	7	1	0	0	0
31-35	15	7	0	0	0	0
36-40	4	4	2	0	0	0
41-45	3	4	1	0	0	0
46-50	0	0	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	1	0	0	0	0

Figure 34. Shows by district what different age groups in **North Lancashire** thought of travel times to where the baby will be born.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	1	0	0	0	0	0
25-30	5	5	0	0	0	0
31-35	6	8	2	0	0	0
36-40	3	6	1	1	0	0
41-45	1	1	0	0	0	0
46-50	0	1	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	1	1	0	0	0

Comments:

- Response rate for each district for each category was low
- Again most responses fall into either less than 20 minutes or 20-40 minutes for each age category.
- Most consider that travelling more than 40 minutes is unreasonable and only consider travel less than 40 minutes to where the baby will be born

How long would you/your partner/family member be prepared to travel now to give birth where there are midwives, maternity doctors, consultants and a special care baby unit? (Question 27)

Figure 35. Shows by district what different age groups in **Allerdale** are prepared to travel to give birth now

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	1
18-24	5	2	0	0	0	0
25-30	26	12	1	0	1	0
31-35	29	27	6	0	0	0
36-40	14	23	1	0	0	0
41-45	8	7	0	0	0	0
46-50	1	4	0	0	0	0
51-55	1	1	0	0	0	0
55+	2	3	1	0	0	0

Figure 36. Shows by district what different age groups in **Carlisle** are prepared to travel now to give birth.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	0	0	0	1	0	0
25-30	7	5	2	1	0	0
31-35	13	11	1	0	0	0
36-40	1	6	2	0	0	0
41-45		4	1	2	0	0
46-50	1	1	0	0	0	0
51-55	0	2	0	0	0	0
55+	0	0	0	0	0	0

Figure 37. Shows by district what different age groups in **Copeland** are prepared to travel to give birth now

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	10	4	0	0	0	0
25-30	50	17	5	0	0	0
31-35	75	30	2	1	0	0
36-40	32	18	0	0	0	1
41-45	22	9	0	0	1	0
46-50	5	4	0	0	0	0
51-55	4	3	0	0	0	0
55+	11	12	1	0	0	0

Figure 38. Shows by district what different age groups in **Eden** are prepared to travel to give birth now

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	1	0	0	0	0	0
25-30	0	6	2	0	0	0
31-35	1	8	3	0	0	0
36-40	2	4	3	0	1	0
41-45	0	2	2	0	0	0
46-50	1	1	0	0	0	0
51-55	0	0	1	0	0	0
55+	0	0	0	0	0	0

Figure 39. Shows by district what different age groups in **Furness** are prepared to travel to give birth now.

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	1	3	0	0	0	1
25-30	8	7	2	0	0	0
31-35	14	4	2	0	0	0
36-40	4	3	1	0	0	0
41-45	0	1	0	0	0	0
46-50	0	0	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	0	0	0	0	0

Figure 40. Shows by district what different age groups in **South Lakeland** are prepared to travel now to give birth

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	1	3	0	0	0	0
25-30	4	6	3	0	0	0
31-35	7	11	2	0	0	1
36-40	3	4	1	0	0	0
41-45	2	5	1	0	0	0
46-50	0	0	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	0	0	0	0	0

Figure 41. Shows by district what different age groups in **North Lancashire** are prepared to travel now to give birth

Age	Travel time					
	Less than 20 minutes	20-40 minutes	40 minutes-1 hour	1 hour-1 hour 20 minutes	1 hour 20 minutes- 1 hour 40 minutes	1 hour 40 minutes-2 hours+
Under 18	0	0	0	0	0	0
18-24	0	0	0	1	0	0
25-30	3	5	1	0	0	0
31-35	2	8	2	1	0	0
36-40	5	4	1	1	0	0
41-45	0	2	0	0	0	0
46-50	0	1	0	0	0	0
51-55	0	0	0	0	0	0
55+	0	1	0	0	0	0

Comments:

- Response rate for each age category and each district was low
- Findings show that most responses fall into either less than 20 minutes or 20-40 minutes
- Even after giving birth respondents still consider that travelling less than 40 minutes is reasonable to where the baby would be born

Summary

The full report that was published in February 2016 provided a very clear picture of the key criteria that women and their families said was important to deliver a great maternity service. This more detailed analysis has helped to demonstrate where there is variance from locality to locality. This information could be helpful when shaping more detailed delivery at a locality level.

References

Cumbria Intelligence Observatory, 'The Indices of deprivation (ID) & Index of Multiple Deprivation (IMD) September 2015

<http://www.cumbriaobservatory.org.uk/elibrary/Content/Internet/536/675/1766/1775/422771749.pdf>

Healthwatch Cumbria Maternity Matters Report

<http://healthwatchcumbria.co.uk/wp-content/uploads/HW-Maternity-Matters-FINAL.pdf>

The English Indices of Deprivation 2015-Frequently Asked Questions (FAQs)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/467901/English_Indices_of_Deprivation_2015_-_Frequently_Asked_Questions.pdf

Appendix 1

The map below was used to find out the sub locality information by grouping the postcodes of Allerdale into East and West and Copeland into North and South. The lines drawn show the divisions for the localities.



Postcodes in East Allerdale

CA12

Postcodes in West Allerdale

CA15 CA14 CA13

CA7 on its own as cannot differentiate from area part of the postcode if it is West or East

Postcodes in North Copeland

CA28 CA26 CA24 CA25 CA23 CA27 CA13 CA14 CA15

Postcodes in South Copeland

CA18 CA19 CA21 CA22