

Parents and Carers of Children Under 5 Survey Report

March 2016



Parents and Carers of Children Under 5: Survey Report

Introduction

Healthwatch Worcestershire has been asking about the experiences of parents and carers of children under 5 across Worcestershire. We particularly wanted to find out about experiences of care, support and advice during pregnancy and birth, following birth and in early years. We also wanted to hear about experiences of accessing health care and advice for younger children.

Why have we carried out this work?

Locally

HWW identified engagement with parents and carers of children as a business priority following issues raised and feedback received from members of the public and through our wider engagement. More focussed engagement carried out as part of our engagement contract with Young Solutions over the last 18 months has identified areas for us to investigate further through our survey.

The survey has also been carried out to enable us to represent the views and experiences of local parents during the current process of redesigning prevention services for 0-19 year olds: Starting Well.

In addition we wanted to capture experiences of maternity services in Worcestershire to feed into work around the Future of Acute Hospital Services in Worcestershire.

Nationally

Feedback from this survey was used to form a response to the National Maternity Review, which published its recommendations in March. We will use this and additional feedback gained to look at how the recommendations need to be implemented locally.

In 2015 the Future in Mind report emphasised the importance of maternal and perinatal mental health and good early years health services and support, in preventing mental health and behavioural issues in children. This is something that will need to be considered as part of Worcestershire's Transformation Plan for Children and Young People's Mental Health and Wellbeing.

Methodology

We collected 428 survey responses from parents and carers through face to face engagement and online.

199 responses were gathered through face to face engagement. This mainly comprised visiting Children's Centres and baby and toddler groups in Wyre Forest, Redditch, Worcester City, Malvern Hills and Pershore. This included a particular focus on centres in identified areas of highest need.

58 of these responses were gathered through engagement work with people from BAME communities, by Age UK on behalf of Healthwatch Worcestershire.

229 surveys were completed on line. In addition to HWW publicity through our networks and in the local press, the survey was also shared via social media by Children's Centres, Worcester Mums and Parents Voice.

Of the 428 responses - 265 respondents had a child under 18 months and therefore answered the questions on pregnancy, birth and support, advice and information following the birth of their baby.

Of the respondents who answered the question about where in Worcestershire they lived: 40% were from Worcester, 15% from Kidderminster, 13% from Malvern, 13% from Redditch and 8% from Pershore. This reflects the focus on engagement in these areas and promotion by Children's Centres in Worcester City on social media. The remaining 11% of responses were from people living in Bromsgrove, Stourport, Bewdley, Droitwich, Upton on Severn and Evesham.

Results - Pregnancy and Birth

Pregnancy

Nearly all of the parents (87%) with a child under 18 months told us they had received enough information and advice during pregnancy. In addition, most parents (76%) also felt that they had enough information, advice and choice about giving birth.

Community midwives were rated as the most useful source of information and advice amongst health professionals, followed by GPs and then the hospital.

The most popular sources of information about pregnancy were the internet, book and magazines and family and friends.

There were similar attendance rates for different types of antenatal classes: Children's Centre (33%), Private classes e.g. NCT (28%) and other midwife led antenatal classes (20%). Feedback about how good the classes were was also similar:

	Good	OK	Poor
Private classes. E.g. NCT	69%	23%	8%
Children’s Centre classes	67%	21%	12%
Other Midwife led classes	62%	21%	18%

Additional feedback we received about Children’s Centre antenatal classes included - not being aware of classes, not being able to attend classes as they were during the day, not providing the opportunities to meet up afterwards and limited availability of classes in some areas.

Additional feedback from those who had attended NTC classes suggested that they had provided a good opportunity to meet a group of other parents and continue to meet following the classes.

Birth

Most women had given birth in a hospital in Worcestershire: Worcestershire Royal (72%) and Alexandra Hospital (16%). 5% had given birth at home and 7% had given birth at a hospital outside Worcestershire.

Ratings given to care received in a hospital in Worcestershire:

- Good - 69%
- OK - 23%
- Poor - 8%

67 people made additional comments about positive experiences of care.

These included praise for midwives and excellent levels of care received, especially when in labour and during delivery. There was also positive feedback about the support and environment offered at the new Meadows birthing centre at the Worcestershire Royal.

48 people made additional comments about aspects of care they were unhappy with.

A small number of these were due to medical decisions or missed diagnoses of medical complications. The majority of comments were relating to perceptions of understaffing on the wards. Many said that they felt they did not receive the care and support they needed when on a post-natal ward. Some said that they were left alone for long periods. Specific comments include feeling ‘abandoned’ and ‘forgotten’. Two comments related to feeling that they had not received support

they needed with breast feeding, as the staff who provided this support did not work at the weekends.

Comments relating to perceived staff shortages at the Worcestershire Royal were made by those who gave birth before and a few after, the transfer of maternity care from the Alexandra Hospital to the Worcestershire Royal. We also received a number of additional comments from mothers who had given birth at the Alexandra Hospital and received good care, who were concerned about their perceived impact of the transfer of services to Worcester.

Community Midwives

Feedback was mainly very positive about the support given by Community Midwives.

Ratings of care given by Community Midwives:

- Good - 74%
- OK - 22%
- Poor - 4%

The majority of additional comments received praised the care they received and many commented on an individual midwife. Comments from those who were not happy with the support they received were mainly about lack of continuity of care due to not seeing the same midwife.

Summary - Pregnancy and Birth

Most people were happy with the information and advice they received during pregnancy and the care they received from their Community Midwives. While many people told us they were happy with the care they received in hospital, we also received a number of comments about understaffing and poor post-natal care.

Issues identified include, ensuring that:

- All parents receive information about antenatal classes. Classes are at times to accommodate working parents and where possible more opportunities are given to encourage and develop peer support amongst expectant parents.
- There are sufficient staff available in hospital across the whole week to provide care and support, including breast feeding support, to new mothers following delivery.
- There is continuity of support from Community Midwives.

Results - Support, Advice and Information in Early Parenting

Health Visitors

Birth / new born visit and 6-8 week check

Parents who had babies under 18 months told us about the care, support and information they received from their Health Visitor at these visits:

- Good - 70%
- OK - 25%
- Poor - 5%

We received many comments saying that their particular Health Visitor had been very good and that they felt reassured by the visit and support. Although we were also given some feedback about visits feeling rushed, feeling as if the visit is an assessment and therefore important not to say the wrong thing and some comments saying that they felt the Health Visitor was judgemental and therefore would not feel able to phone them for advice.

Whilst most rated information and advice about feeding and weight gain as good or ok, feedback about breast feeding support and sleep patterns was more varied.

Developmental Review at 9 / 12 months

92% of parents said they were happy with the outcome of the check.

However this seems to be mainly as they were given reassurance that all was ok. We received a number of comments about people not liking the forms that have to be filled in; not receiving any information about the outcome of the check and feeling anxious about their child's development as a result of the check. We also received feedback through our engagement with BAME groups that some did not understand what the check was about or the outcome, but were told that everything was ok.

Developmental Review at 2 years

85% of parents said they were happy with the outcome of this check.

Again this was mainly due to being given reassurances about their child's development. Many said this felt like a tick box exercise and that they were not given the outcome of the check. Again some criticised the forms used and said that

more attention was paid to forms than the child. Although others said that being able to complete the forms in advance meant they were less worried that their child would not respond appropriately on the day.

Accessing Health Visitors

We received a number of comments about it being difficult to contact Health Visitors to ask for advice and having fewer opportunities to see a Health Visitor to discuss things once the child becomes a toddler. Especially for working parents who cannot attend sessions at Children's Centres / health centres. Those who were able to attend clinic sessions said that they can sometimes feel pressured or rushed when asking questions if it is busy and there is a queue to see the Health Visitor. Some people said that it would be helpful to have ways such as telephoning, to be able to contact their Health Visitor to ask for advice.

Through our engagement and survey many parents told us about the difficulties of early days of parenting and the need for support and advice, especially for first time parents. This was something that was generally experienced, suggesting that they would feel that all parents would need a service and support provided by a Health Visitor.

Breast Feeding Support

In addition to a varied response about how good information and advice about breastfeeding support was, access to additional breastfeeding support was the most common issue mentioned when asked what additional information or advice parents would have liked about pregnancy, birth and post-natal care.

Post Natal Depression

Only 44% of those we spoke to said that they felt they were given good information and advice about anxiety and post-natal depression by their Health Visitor.

A number of people told us that they suffered from post-natal depression, but that this was not identified up by their Health Visitor. We also received a number of comments that the questions they were asked around depression and anxiety were not enough to truly assess the situation and it felt like a tick box exercise. We also received a couple of comments from women saying that they suffered from depression and were given tablets, but would have preferred to be given alternative support.

Research¹ suggests that mental health problems affect up to 20% of women during the perinatal period. Only 40% of cases of perinatal depression are detected and diagnosed and of these, only 60% receive any treatment. Perinatal mental health has been found to have a huge adverse effect on the long term health and wellbeing of both the mother and the child.

Therefore it is essential that good information and advice about anxiety and depression is given to parents during pregnancy and following birth, in accordance with NICE Guideline CG192 - Antenatal and postnatal mental health: *‘Provide culturally relevant information on mental health problems in pregnancy and the postnatal period to the woman and, if she agrees, her partner, family or carer. Ensure that the woman understands that mental health problems are not uncommon during these periods and instil hope about treatment’*. There also needs to be an effective way of assessing if someone is experiencing anxiety and depression.

Information, advice and support

For parents and carers with young babies

Our findings suggest that the most common source of information support and advice in the early stages of parenting is friends, social networks and families. These were rated as being the most helpful.

Although the internet and social media was commonly used as a source of information and advice, people did not rate this as being as good as post-natal support groups or attending Children’s Centres. This suggests that although many parents may look on line for information, they value face to face interaction and opportunities to discuss things. Our engagement with BAME groups suggests that use of the internet may not be as common amongst these groups.

When asked which websites they used for information and advice on early parenting Facebook (63%) and Mums Net (61%) were the most popular, followed by Worcester Mums (41%) and then the NCT (35%). Only 15% said they used the WCC Early Help website.

Our engagement carried out with parents in more rural areas of Worcestershire suggests that they are less aware of services and activities run by Children’s Centres.

¹ The Cost of Perinatal Mental Health Problems: Bauer, Parsonage, Knapp, Lemmi and Adelaja (2014), Centre for Mental Health.

Child development and parenting

We asked parents and carers about the different sources of information and advice they used about child development and parenting and how helpful they had found them.

Source of information / advice Listed from most to least used	Percentage of parents / carers who used source of information / advice	Rating (by those who had accessed this source of information / advice)		
		Good	OK	Poor
Health Visitors	98%	56%	36%	8%
Family / Friends	95%	71%	26%	3%
Internet / Social Media	84%	57%	40%	3%
GP Practice	84%	42%	37%	21%
Children's Centre / Early Help	74%	68%	27%	5%
Toddler Groups	65%	54%	38%	8%
Pre-school / Nursery	60%	71%	26%	3%
Paediatrician	23%	62%	26%	12%
Family Support Worker	12%	71%	12%	17%
Voluntary Organisation	11%	81%	6%	13%
Social Worker	8%	46%	12%	42%

Those sources of information and advice that were most highly rated were more individual, face to face opportunities, such as family and friends, pre-school / nursery, voluntary organisations and Children's Centres / Early Help.

Although Health Visitors and GPs were reported as sources of information and advice used by most parents, they were not given such high ratings. This may relate to previous comments that some parents found it difficult to access Health Visitors as and when issues arise.

Internet / social media was also a common source of information and advice, but as with results for parents of new born babies, it was not always rated highly.

Although only 8% of the parents had received information and advice from a Social Worker, they were given the lowest ratings overall, with 42% rating this as poor.

Summary - Support, Advice and Information in Early Parenting

Most parents and carers are happy with the support they have received from their Health Visitor. In particular they were happy with the outcome of developmental reviews. Many people felt reassured and found their advice and support valuable in the early days of parenting following the birth of their child.

Parents and carers access information and advice from a number of sources. Family and friends are highly valued as a source of information, especially in the early days of parenting. As were other face to face sources of information and advice. However, services need to consider a variety of approaches to ensure that information reaches different groups and communities across the County.

Issues identified include ensuring that:

- New parents feel that new born visits by the Health Visitor are to provide them with support and do not feel that they are being judged or assessed
- New parents have access to breast feeding advice and support at home, including at weekends
- Sufficient checks are in place and information given to identify signs of perinatal mental health concerns and that women receive appropriate support
- All parents and carers are able to access Health Visitors for advice and support as issues arise, including parents who work and may not be able to attend drop in sessions, for example by phone.
- Sufficient face-to-face opportunities to gain support, information and advice are available and communicated to all.
- Clear information is given to parents and carers about the process and outcome of developmental reviews.

Results - Accessing Health Care and Advice

Going to the Doctors

How easy is it to access an appointment at your GPs when your children are ill?

- Good - 65%
- OK - 21%
- Poor - 14%

Many people commented that they were able to get appointments on the same day if their children were ill and that their surgery was especially good at accommodating children.

However comments show that this varies between different surgeries and some people said that it was difficult to get appointments on the same day, as you had to ring early in the morning and the line was usually engaged. Others said that they felt that they had to justify the need for an appointment to the receptionist.

How happy are you with the care and advice you receive from the GP when your children are ill?

- Good - 69%
- OK - 23%
- Poor - 8%

We received 43 additional comments about the quality of care. 17 of these were positive, praising the care given by GPs.

26 comments reported negative experiences, including:

- Not given the correct diagnosis
- Not given correct treatment
- Did not feel their concerns were taken seriously
- Did not feel GP had specific understanding of children / babies
- Previous experience would lead them to take baby to A&E rather than GP if they were seriously ill again

111 Service

53% of people told us that they had used the 111 service.

How would you rate your experience of the 111 service?

- Good - 71%
- OK - 19%
- Poor - 10%

We received 59 additional comments about the quality of the service they had received from 111.

35 comments were positive and included:

- Being happy with the advice and referrals
- Providing reassurance
- Quick response, in some situations with an ambulance arriving very quickly

24 comments were about negative experiences or areas for improvement:

- Process and questions asked being long winded
- Being over cautious and therefore causing unnecessary worry and in some cases trips to out of hours doctor or hospital that were not necessary
- Having to follow a script meaning they are not always using common sense judgement and can be impersonal

Summary - Accessing Health Care and Advice

Most parents and carers felt that they were able to access health care for their children when they needed to and that they were happy with the care and advice given. About half of the parents we spoke to had contacted 111. Many parents found that the 111 service was helpful in providing advice and that, in some situations, it had ensured children had received timely medical treatment.

Issues identified include ensuring that:

- Where possible alternative methods of booking GP appointments are made available, to avoid difficulties getting through via phone, and patients are aware of alternative methods.
- Parents feel their concerns about their children's health are taken seriously by both GPs and practice reception staff
- Information is given to all parents, so they are aware of 111 service
- Parents contacting 111 feel reassured that advice given regarding their children is individualised and given by those with the relevant medical knowledge and expertise.

Engagement with Black, Asian and Minority Ethnic Communities

Our engagement with BAME communities suggests that experiences of the care they have received in hospital and from GPs, Community Midwives and Health Visitors is similar, and in some cases rated higher than responses in general.

Particular issues raised included not understanding the process and outcome of developmental checks due to language barriers. Concerns about language development were raised by a few people. Parents from BAME communities were also less likely to use the internet as a source of information and access antenatal and postnatal support groups.

Through other engagement we have carried out with BAME communities we have been told that for some communities, such as the Gypsy Roma Traveller community, it is important that health care, is delivered by same gender medical professionals. Therefore this is something that services should be aware of and ask about individual preferences where possible.

Recommendations

Following this survey and in light of changes and service development locally and nationally including, in Worcestershire:

- Delivery of the Starting Well 0-19 Prevention Service
- Implementation of Worcestershire's Transformation Plan for Children and Young People's Mental Health and Emotional Wellbeing
- Delivery of hospital maternity services, in particular during planning changes as part of the Future of Acute Hospital Services in Worcestershire and as part of the consultation on these changes.

Healthwatch Worcestershire feel that the following recommendations should be considered by commissioners and providers, to improve services.

Pregnancy and Birth

1. All parents receive information about antenatal classes. Classes are at times to accommodate working parents and where possible more opportunities are given to encourage and develop peer support amongst expectant parents.
2. There are sufficient staff available in hospital across the whole week to provide care and support, including breast feeding support, to new mothers following delivery.
3. There is continuity of support from Community Midwives.

Support, Information and Advice in Early Parenting

1. New parents feel that new born visits by the Health Visitor are to provide them with support and do not feel that they are being judged or assessed.
2. New parents have access to breast feeding advice and support at home, including at weekends.
3. Sufficient checks are in place and information given to identify signs of perinatal mental health concerns and that women receive appropriate support

4. All parents and carers are able to access Health Visitors for advice and support as issues arise, including parents who work and may not be able to attend drop in sessions, for example by phone.
5. Sufficient face-to-face opportunities to gain support, information and advice are available and communicated to all.
6. Clear information is given to parents and carers about the process and outcome of developmental reviews.

Accessing Health Care and Advice

1. Alternative methods of booking GP appointments are made available and communicated to patients.
2. Parents feel their concerns about their children's health are taken seriously by both GPs and practice reception staff.
3. Information is given to all parents, so they are aware of 111 service.
4. Parents contacting 111 feel reassured that advice given regarding their children is individualised and given by those with the relevant medical knowledge and expertise.

Black, Asian and Minority Ethnic Communities

1. Clear information is available, including about developmental checks, in a variety of formats that is accessible to BAME communities.