

Collated responses to open-ended questions in the Health Committee Maternal Health Survey

In 2022, the London Assembly Health Committee carried out an investigation into maternal health and care in London. Given the significant impact of the pandemic on Londoners using maternity services, the Committee wanted to hear from those who have used services since March 2020.

From July to October 2022, the Health Committee asked people who had used maternity services since March 2020 to tell us about their experiences and suggest improvements to maternity services in London. The survey asked about different stages of pregnancy and how they felt the pandemic impacted their experience. Respondents were asked before each set of questions whether they wanted to see questions relating to aspects of each stage of pregnancy. The survey included a set of open-ended questions, and the responses to these questions are collated in this document. Information has been redacted where it could be used to identify respondents or specific hospitals.

The Committee received 140 responses from Londoners with experience of pregnancy and from their partners, friends and families. The Committee would like to thank all those who shared their experiences of services during the pandemic period, and made suggestions for improvements. All of these accounts have been read and drawn upon in developing the Committee's report 'Maternal Health and Care in London', which was published on 14 April 2023 and can be found on the [Health Committee's webpage](#).

If you would like to tell us more about your experience of maternity services during antenatal care, please use the space below:
All appointments apart from the scans were done over the telephone. My partner was not allowed to come to the scans. The midwives weren't trained or had the awareness of how the stress of the pandemic could have had an impact on my pregnancy and did not ask me targeted questions to understand my mental health state. I believed, due to lack of experience, that the stress and anxiety I experienced throughout my pregnancy was normal but this later severely contributed to my post partum depression.
All of my check-ups/appointments were administered by the same health care professional. We built a rapport and she provided great advice, care and support during a very anxious and difficult time for me. I am extremely grateful and satisfied with the service provided.
Antenatal care was good. Hard when having to do things alone during the pandemic
Appointments in the hospital went smoothly, but midwife care and communication has been really poor throughout both my pregnancies. For my current pregnancy I had to self refer to the hospital and didn't ever get a reply until chasing months later, so had late appointments and scans.
Appointments was cancelled. A lot I had to be on my own and I suffer with mental health so this was a very difficult time. Compared to what my sister received when they was pregnant before Covid to what I received was really disappointing and I feel there should Have been more involvement and support given what we was going through.
As a first pregnancy I felt the amount of scans and midwife appointments could be more at the start. However I understand it can be difficult and so many shortages and high demand. I was pleased with all my midwife appointments and scans I just felt I needed more scans so I had to book privately and it wasn't as good as going to the hospital and discussing things with a sonographer there. However when I did have to be referred for extra scan due to low growth I was very pleased at how quick that happened

At first there was a lot of change with who was going to be my community midwife. Poor communication about whether the appointment would be online/face to face. My partner wasn't allowed to any appointments or scans apart from the very last one, which made me very anxious. And whether this is pandemic related or not, I felt the information given to me before birth was poor and assumed that everyone has a straightforward vaginal birth. Diana Ockendan has covered this mentality in her report, although it didn't look at London.
Compared with my first pregnancy, I had no continuity in care this time around. In that i saw different midwives most visits
Continuity of care from the home birth team, in my own home with my partner present, was excellent.
Could have been more contact even via phone/email as it covid time so understand face to face was harder
Delivery was planned by c section, staff were very friendly, professional and made the whole process easy
Difficult decisions were needed to be made alone as husband not allowed in the consultation. First midwife appointments only on the phone.
Due to Covid I had very minimal contact with midwives. I was left alone through most of my pregnancy healthcare wise
During the pandemic my antenatal care was extremely disappointing. I never saw the same midwife twice, I was sent to the hospital (during a global pandemic) for my appointments which was so anxiety inducing and many of my planned appointments were cancelled or virtual.
Everyone was lovely, friendly and helpful
Excellent service - because I was able to pay for private ante natal care. Under the care of an excellent doctor at [hospital name redacted for publication] (with regular checks & scans at the [hospital name redacted for publication])
From March 2020, I received minimal support from midwives.
Generally, I found them to be good and very thorough. If anything, I bit too overbearing in places, such as being sent for tests I didn't feel I needed and being given the same advice too many times (which sometimes felt like being pressured).
Good in circumstances of covid. My daughter had a brain condition so we had lots of extra appointments and scans.
Good services but it is really a shame that there is no 3rd trimester scan. My baby was in breach position and because of that, the midwife's did not notice it before the very end of the pregnancy
Had the same MW at doctors surgery throughout my appts, which was positive. I went into labour after being induced. I laboured without a midwife for 18hours at the [hospital name redacted for publication]. When I was finally assessed I had almost birthed my daughter without any pain relief. I was made to wait for 3hours for a birthing suite by which time I had an increased temperature and baby was not happy in the birth canal. I asked to birth on all fours but MW refused and made me birth in stirrups causing a 3b tear. The whole experience was incredibly traumatic and subsequently meant that my daughter and I spent 5 days in hospital for suspected sepsis and high CRP markers.
[hospital name redacted for publication] A doctor thought I was on delivery in the month 7 when I was not and almost make me to have the baby
I am 45 years old and have had excellent care from [hospital name redacted for publication] ante natal services
I felt all the midwives were very caring however to many appointments in 2020 were telephone based I feel this affected my care. More face to face appointments would have been beneficial.

I felt ignored, isolated and very uncared for. I was told my baby's head was large and during delivery of the head, his body might get stuck. I was told that I have big a baby so I should just get on with it. I have a overactive thyroid and also a "geriatric mother" so needed to attend hospital more than others. It was always a depressing event for me.
I found it mixed. At times it was brilliant with really dedicated midwives and doctors going above and beyond, but at other times I was made to feel like an inconvenience and ignored.
I had absolutely no continuity of care. I went to [hospital name redacted for publication] because it is by far my closest hospital but because I live in Westminster not Lambeth I was allocated to a team where you don't meet the same midwife twice. This wasn't made clear to me when I chose [hospital name redacted for publication] and I only discovered that this isn't the norm st [hospital name redacted for publication] by talking to a friend, by which time I was towards the end of my second pregnancy
I had gestational diabetes during my pregnancy and had to attend fortnightly apts. All the staff I met with were kind and courteous, I also had to have many scans and the staff were always very good.
I had gestational diabetes so required consultant led care and extra appointments. I did not see the same midwife once during my entire pregnancy and I had 3 different consultants. There was no continuity of care and I felt like I was having to constantly explain my situation over and over again. I also felt patronised with my diabetes care as I was constantly told 'don't eat sugar, exercise, watch your carb intake' when I was a healthy 23 year old who regularly ran and exercised before getting pregnant and in the first few months of pregnancy. I also ate a very healthy diet without any refined sugar even before I had gestational diabetes. The dieticians were very patronising in how they spoke to me and gave me a meal plan that was less healthy than what I was already eating.
I had preterm labour at 18 weeks and was discharged from hospital without being told I would leak milk, how long the pain would last, that I'd have contraction like cramps, how long I would bleed for and I was not prescribed pain killers. I was discharged with absolutely no information for post care other than bereavement care.
I had regular antenatal appointments during 2021-22. There was very little consistency in midwives and I rarely saw the same person twice but all my checks etc were completed and I was given extra monitoring as my baby was small which was handled well and was reassuring. Some of my urine samples were lost and I had to make extra trips to hospital to submit further samples which was frustrating but had no impact on my care. One midwife was so busy she asked me to help her find my test results in a huge pile of paperwork she had received which meant I saw other women's personal information.
I had to have a drip for antibiotics midwives forgot to administer so had to stay in missing my sons 16th birthday. The ward was freezing as there was a hole in the roof in December 2020
I had two stillbirths due to extreme prematurity, the first in Mar 20 and the second in Oct 20. I then delivered a surviving child in Sep 21. Prior to this I had fairly bog standard miscarriages. Care was appalling where it was even provided at all (I was frequently denied access to doctors), and was at its worst in Oct 20. I hold the NHS morally responsible for the preventable death of both of my sons, but especially so in Oct 20. We were thrown to the wolves to figure it out ourselves.
I have been pregnant twice since March 2020. The first resulted in a miscarriage in May 2020. The second resulted in a healthy baby born in June 2021. My experiences of antenatal care at [hospital name redacted for publication] in London during my pregnancies were mixed. The chief positive experience was the exemplary care by my antenatal midwife during my second pregnancy, who was assigned to me in view of my medical history of perinatal anxiety and depression. However, as soon as my baby was born, and despite the traumatic circumstances surrounding the birth, my antenatal midwife was no longer permitted to care for me (though she still went out of her way to provide me with support when the care provided by the postnatal ward was severely substandard). This policy underscored a serious

<p>lack of continuity of care at the critical juncture of the birth. I also experienced a lack of continuity of care in the antenatal service in the month or two leading up to my delivery. I saw several doctors in my third trimester to obtain advice on the modes of delivery, given that I had previously had a caesarean section. I never saw the same doctor twice. I was also given poor advice by various junior doctors who did not advise me on specific risks relevant to my circumstances and were unable to advise me on specific concerns that I asked about. This meant that a decision for a planned elective caesarean section at 39 weeks (which I would have made if I had received the proper advice in a timely fashion) instead became an urgent elective caesarean section just before 40 weeks.</p>
<p>I kept seeing different midwives who'd forgotten me and didn't feel listened to properly. I did get referred to a specialist once as I was high risk and he was absolutely brilliant but my local midwives and the clinic were really poor</p>
<p>I never saw the same midwife for any appointment. They tried to push me into not requesting an epidural but I knew this was my right.</p>
<p>I received caseloading care, and saw two midwives for my antenatal care. All but one appointment from the same midwife and then one from the second. Both these midwives were then present at my home birth. There was the possibility of not being able to have a homebirth due to staffing problems, this caused a great deal of anxiety. I found I had to increase my anxiety medication. I considered that I might freebirth if the homebirth service was suspended. This would never have been my choice, I believe strongly that midwives should be present for labour and birth care. However I also believe it is inappropriate to birth in hospital if the only indication is staffing.</p>
<p>I saw a different midwife for each appointment but other than that the care was good.</p>
<p>I saw several different midwives but they were all kind and supportive. However my appointment always felt rushed, they had an attitude of "you've done this before, you know what you're doing" and it turned out they missed a serious problem when my baby stopped growing. Plus when I had a problem with my back that required physio the referral took ages and then all they could offer me was a phone appointment.</p>
<p>I was admitted as an inpatient on antenatal for 3 weeks and the restrictions on visiting obviously made things more stressful and difficult but the actual care I received was excellent.</p>
<p>I was considered a 'geriatric' mum so had more frequent check ups, even during covid but staff were always friendly and helped to make me feel at ease</p>
<p>I was diagnosed with gestational diabetes at 20weeks, it was picked up on my 20w scan however when I checked my 9w screening results notes it said I was high risk for diabetes and should be given a glucose tolerance test if symptomatic ,I was never told this and despite complaining about feeling unwell nothing was done until they saw at the 20w scan that my babies tummy was a bit big</p>
<p>I was initially with one trust. I had a miscarriage so attended the EDU in my local area. I was asked openly at the reception why I was here. The receptionist was very cold. Made no eye contact. I had to say in front of other women that I believed I was having a miscarriage. I fell pregnant again quite quickly - at my 12 week appt they forgot to take some of my bloods</p>
<p>I was not taken seriously as a 'young' mum I was constantly told what I should have even if it wasn't what I wanted. This was by some health care professionals mu midwife was lovely extremely patient and understanding.</p>
<p>I was part of the [hospital name redacted for publication]. There was no continuity of care and I rarely saw the same midwife twice. This wasn't explained to me at any point and I only discovered towards the end of my second pregnancy that I would have had a very different experience at Chelsea and Westminster with local midwives who would provide continuity of care, including postnatal care. I was well looked after medically but the medical environment can't be seen in a vacuum to the relationships that you build with midwives.</p>

I was pregnant with twins during covid and I felt I had a great support.
I was treated like cattle. If you watch the childbirth scene in the money python movie 'the meaning of life' it was exactly like that. Dismissive, not even any pretence of caring, and mean.
I was under the care of a continuity care team of midwives, so my experience was very positive and certainly different to those women who do not have that continuity of care
I was under the care of the [hospital name redacted for publication for publication] which meant I had continuity of care and my midwife team were outstanding. However there was a lot of discussion about how I didn't have as many choices for my birth as home births were being declined and the birthing centre closed down for a portion of the year. It didn't affect me due to an elective c section but I still felt worried about what my experience would be like
I was with the [hospital name redacted for publication for publication] homebirth team and it was fantastic being able to have appointments in my own home and having a dedicated midwife.
I wasn't warned how sensitive my condition was.
I wish one midwife would follow me for the whole duration of the antenatal care. It is much better to build trust for such a unique experience. Also, antenatal classes were not resumed on site, meanwhile all nation covid restrictions were removed. We could not visit the place before etc.
In the lead up to the first Covid-19 lockdown (March 23rd) and therefore the birth of my second child (March 22nd) obviously there was mounting anxiety and a fear of the unknown. I was able to contact my team and speak to a midwife about potentially changing my birth plan due to the pandemic. I felt listened to and supported in this instance. Throughout the pregnancy before that, so pre-Covid, I had good care from the services I ended up in contact with, including a brief hospital stay for an unknown virus in February 2020.
Individual kindness from midwives doesn't make up for the restrictions imposed and the bullying to follow rules by managers and lawyers that take away our right to birth how we like.
It was good, but not excellent. Staff looked very grumpy and would give single answers. As first time mum I was very nervous I did not know where to sit and what to do, and they never cared about the first time mums never explained on what we need to do when we first come in e.g urine samples and where to sit to be called.. I was upset that my husband could not sit with me in the waiting area.. had to wait outside till we was seen. The sonographers were lovely they explained each and every process to a first time mum, they respected our culture too and I felt more secure inside then outside in the waiting area.
It was great to have a local midwife and to see the same person every appointment. It meant we built rapport. They were very helpful. I also got a referral to the consultant midwife who gave me excellent information and advice. Some of the ultrasound staff at Lewisham were unhelpful however
Kind and friendly staff despite pandemic circumstances
Lack of contact. Lack of appointments. Lack of scans. I am able to compare to a 2017 pre pandemic pregnancy.
Lack of staff Staff seem disinterested and make mistakes
Local care with midwife in [hospital name redacted for publication for publication].
Midwife appointments were done over the phone up to a certain point which i disagree with. I didn't see the same midwife continuously so there was no continuity in care
Midwives and doctors were all very helpful and reassuring
My 2 daughters in law were pregnant during lock down. One (M) gave birth in April 2021. The other (N) in July 2021. M had a straightforward experience. N had a difficult time. She had previously suffered 3 miscarriages. At one point she was seen by a doctor who had

actually treated her during a miscarriage who didn't even acknowledge her and wasn't very supportive about N's anxieties for her 4th pregnancy.
My experience of antenatal care was largely good - staff were nice. However, in the Trust I was in you don't get a scan at 36 weeks. My baby was breech and this wasn't realised until I was in labour. I would also say that seems like friends who were pregnant at other London Trusts had many more touch points with maternity services, felt like I had far fewer appointments
My experience with NHS has been below average but my experience with the private maternity services has been satisfactory.
My first experience with a different trust was horrendous and then I change trust and my whole experience was fantastic
My first pregnancy was during 2020 lockdown. I felt v lucky that compared to others I had continuity of care and saw the same midwife through out - albeit had to travel much further to see her. However, due to confusion between the hospital and community midwife team on which appts were being seen in person and online, I went nearly 11 weeks without any midwife contact from 20 weeks. In my second pregnancy, I have been seen far more regularly.
My husband was not allowed in any one of appointments and I was very anxious at the appointments due to a miscarriage in the past. Also when I was in labour he had to wait in the car park until I was ready to push. Until then I was all on my own.
My midwife appointments started one week before the first UK lockdown in March 2020. I moved back in with my parents (in another part of the UK) and my midwife in London was flexible, helped me get maternity care when I was out of London and then quickly got me back into her service when I returned to London in July 2020. She ensured I had as many f2f appointments as possible, and kept in touch over the phone.
My midwife during my pregnancy was amazing!
My partner was not allowed in any appointments. Midwives just didn't seem to care about you as individuals and I felt a lot of my concerns were dismissed.
No antenatal groups, every time a different nursery/ midwife, impersonal
No continuity No support
No continuity of care, saw a different midwife every time. Continually raised issues around my anxieties with regards to restrictions, no one seemed bothered.
Nurses were caring and always happy to help although they work under really stressful pressure due to staff shortage but they always gave their best Well done
On my first appointment my midwife asked me a volley of questions, I could barely get a word in. When I finally got a chance to say something, I asked if I may ask a few questions myself. She says, I'm sorry we don't have so much time. I've already spent an hour with you. Every subsequent appointment, I had a different midwife, who hadn't read my notes, hadn't acted to my request from the previous appointment and as my frustration with them grew, sounded more and more patronising.
Once diagnosed with gestational diabetes, care was excellent and I saw the same midwife and felt really comfortable. Before diagnosis I didn't see the same person twice and felt far less well looked after.
Partner not allowed to appointments but was allowed to most scans. The covid rules kept changing during my pregnancy so sometimes he was allowed to scans and other times not. He couldn't attend any regular appointments and this was particularly upsetting towards the end when decisions about the birth needed to be made and I needed the support of my partner
Pretty Good. Antenatal care lacking of scans that could have detected earlier that the baby was in breech. Good response from the team from when it's been detected with fast reaction.
Procedures during delivery completed without consent

Quality of care by midwives was the same as with my first child who was born in 2017. Only difference was my husband could not attend the scans. I did not have any face-to-face GP check-ups however whereas with my first child they were part of the routine appointments.
Registering for antenatal care was slightly more difficult because gp surgeries were only taking information at the door. They didn't even mention their own midwife service which would have been on my doorstep, however the antenatal care I received at my nearest hospital [hospital name redacted for publication for publication] was very good and they referred me to that quickly. I don't know why they weren't mentioning the community midwives, but guess that maybe the pandemic was making it harder for them to offer the midwifery service.
Regular appointments and efficient services
Rushed and rather impersonal. Did not like having to attend by myself due to pandemic restrictions
Rushed, low staff
Services were generally good and had prompt and regular check ups except there was one less scan, the growth scan at 35 weeks. Had to attend everything including the scans alone which was daunting and unnecessary given that the Covid risk was the same really as you would probably be attending with your partner who you already live with.
Some appointments were online which does not offer any reassurance to an expecting mother.
Staff were very polite, caring and there was no long waiting time.
Telephone appointments, lack of support, being told I was high risk without proper follow up.
The antenatal care at [hospital name redacted for publication for publication] was good. The postnatal care was horrific!
The antenatal care I had was very tailored around supposed 'risk' and I felt that I was being told the information to make their lives easier rather than being provided with enough information to make my own informed choices i.e. place of birth.
The midwives I saw were all great, however I did feel the pandemic meant face to face contact was limited.
The midwives were all lovely that I saw but there was little continuity of care with me seeing maybe 4 different midwives at my antenatal appointments (even though broadly same date and time throughout). Also a shame that my husband couldn't attend many appointments with me.
The pandemic started while I was pregnant it was very scary and no one knew what to do. My appointments stopped and become phone calls. I didn't feel supported or like I know my antenatal team to reach out with concerns.
There was a delay in getting my initial booking appointment because of how busy [hospital name redacted for publication for publication] was after Easter holidays. I was also not seen for all of my antenatal appointments listed in my book even though I was eventually overdue. I assume that they were trying to save appointments. During the appointments, the midwives never took the time to address my specific concerns over the pregnancy and dismissed them. I felt laughed at. They also used my notes when seeing a different person by accident. When I came in with reduced foetal movements after my due date and was advised that I can opt for an induction, a bed never came available for me to have this. I waited for 3 days until I went into labour naturally. Even then, we waited in triage for another 24 hours for an induction until they moved me to the labour ward. By that point no induction was needed. Only then the midwife noticed that I was not progressing with labour because the baby's head was too low. I simple push of the head fixed this. This makes me question how much quicker my labour would have been if we were seen properly sooner. After labour, we were left by ourselves in the labour room for an entire shift. When we were, finally, moved to the recovery room, we were not able to leave to go home because the midwife said that there

was no one available to discharge. This added another 8 hours of delay. I feel like lack of staff at all stages of my pregnancy and then delivery played the major part in making my experience a negative one with maternity services in London.
Thoughtful and responsive midwife, rapid access to obstetric services when requested
Until April 2020 I was under the care of the crocus home birth team in [hospital name redacted for publication]. This was excellent- continuity of care with most care home-based.
Very variable between midwives. No continuity.
Was told I would need to see a consultant during pregnancy went to one appointment to ask to be referred back to the midwife as no issues. Long waiting times past my appointment time. Some appointments I had to attend alone due to my husband not being allowed.
We had the same midwife for both pregnancies and births thanks to the continuity of care team in [hospital name redacted for publication]
When I the midwives did my blood test they lost them then. They also gave bad advice on what to do when I had an infection.

If you would like to tell us more about your experience of maternity services during labour and birth, please use the space below:
1. I was left alone for 3 hours contracting (husband not allowed in). Staff dismissive. 2. During labour my baby's heart rate was dropping significantly (with the crash team being called in 5 times) - each time they argued over me about the best course of action. My midwife was young and inexperienced - she cried when they told her off in front of me. She repeatedly didn't notice the heart rate dropping and not coming up - we had to point it out to her. She also didn't notice that my epidural tube had come out and again we had to point it out. I could tell something wasn't right but no one asked me at any point what I wanted to do. 3. Finally the shift changed and I was taken for an emergency section. My baby had its chord wrapped round it's neck 3.5 times. I feel as though I am lucky he survived and the negligence shown by the team put him and me in danger.
A lot of waiting for staff. Scheduled induction took 5 days due to lack of staff and started naturally after waiting. In hospital, more waiting for staff to become available.
Absolutely horrific is the only way to sum this up. Left for 6 hours to labour alone in a room, this has left me with PTSD which I have received counselling for and severe anxiety. The rules which meant partners couldn't be with the birthing person have been profound and long lasting. I had to drag myself to the outside of the hospital to see my husband but ultimately after 6 hours of contractions on my own, I had a panic attack and my husband was allowed in. After our baby was born and sent to intensive care, he was told to leave the hospital and I was left shaking in a bed at 2 o'clock in the morning. Not having support and someone to hold my hand in that moment will haunt me forever. The maternity restrictions during the pandemic were solely designed to keep covid out at all costs. That cost has been women's mental health, confidence, happiness and so much more. And we're not over it! It's been 2 years and many of us are still living with the trauma of it all
Although it was very distressing that I gave birth without my partner or a birth partner present as we had nobody to look after our son (very few people had been isolating thanks to mixed messaging from the government, and we were terrified of bringing Covid into the house with a newborn and toddler) and I had no visitors throughout my five-day stay, and it was a very scary time generally, my care from the hospital team at [hospital name redacted for publication] was excellent. The staff really tried their hardest to comfort me and get me home as quickly as possible.

Apart from one midwife, the team has been absolutely amazing. After 2 days of induction I have had to have an emergency C-section and the staff during delivery couldn't have been more caring and loving.
As per earlier comment, professionalism and service were good
As this was my 3rd pregnancy I was in extreme pain as my baby sat quite low in my belly. During birth I expressed my concern as I was unable to sit in an upright position. As one of the nurses was helping, the other had told her to stop assisting me as I needed to do the work myself.
At my 38 week check I was told I had preeclampsia and needed to be induced prior to this my blood pressure was high at every check up but I was told it was nothing to worry about. I told them I didn't want to be induced unless they were certain, and they told me I could have a blood test but the results would take 24 hours. I was happy to be admitted and wait. It felt like I was being a nuisance for them and as though they wanted me just done and out of the way. During that stay 3 midwives came to start the induction despite us agreeing that we'd wait until the blood results. There seemed to be no effective communication between them. I was eventually induced on a Tuesday evening, but because there were no delivery rooms or midwives available- no one could break my waters until Thursday night and I didn't give birth till the Friday morning. I was kept waiting in active labour for that long. During my labour the anaesthetist put the needle for the epidural in me twice as the first attempt went wrong. This has caused me lasting pain ever since. As I haemorrhaged and became an emergency after giving birth, and due to the pre-eclampsia- I was kept in hospital for 2 weeks. It was a nightmare 2 weeks of constant failures in handing over between shifts, being given the wrong medication, being told I'd be discharged and waiting all day for this to happen and then to be told by the new shift supervisor that she knew nothing about my discharge and won't let me go home- it was a constant conveyor belt of poor management. My labour experience has left me with PTSD that I am currently in therapy for.
Brilliant, I had a home birth so could stay clear if a hospital setting.
Continuity of care from named midwife at home.
C-sec delivery. Partner or family not allowed to visit or help during the first 2 painful days. Discharged third day whilst my baby in NNU. Was admitted back into hospital with infection within 5 days having told them I don't feel well enough to go home.
Failed epidural - ignored by staff and told it had worked when I knew it hadn't (still had all feeling, could walk fine). Ended up giving birth without pain relief Husband couldn't be with me for induction. Failed water breaking led to very long labour time/induction that didn't move forward. Nurse that finally broke my waters caught my vagina with the hook. Rude midwife who ignored wishing for birth setting (turning on bright lights, questioning decisions, ignoring requests for pain relief/told her epidural hadn't worked)
Fantastic elective c section at [hospital name redacted for publication]
Felt very impersonal and rushed, numerous members of staff throughout, with differing demeanours. After the birth was left in mixed ward with little help.
Good things: midwife care while in labour once I was in private room. Poor things: getting admitted to hospital. Having to have a internal examination to decide if I could be admitted (degree of pain not considered a factor). Trying to get into maternity ward (by myself due to covid restrictions) - very slow response. During birth - mistakes made by doctors. Lack of information given to me and my partner.
Got me to a triage bed quickly but did not believe me when I said it would be a quick labour. I was Made to walk to the birthing room while fully dilated! However the birthing team were EXCELLENT and I couldn't fault them.
Great experience despite the fact that a woman giving birth and feeling the pain of giving birth having to do a pcr Covid test DURING labour. Absolutely out of order.
Had a c section and the care at [hospital name redacted for publication] was great

I appreciate it was a difficult time - my husband wasn't allowed in with me whilst I was induced but he was there once my waters had been broken. When my baby became distressed the staff were incredible and my emergency c-section was handled quickly and professionally
I birthed my baby at home as planned. Both first and second midwife were known to me and had provided my antenatal care. They are exceptionally skilled and I feel enormously lucky to have had their care.
I came to the hospital with abdominal pain and reduced fetal movement. I was experiencing contractions. They checked the baby was not distressed and following this checked how dilated I was. They asked me to go home as I was 2 cm dilated. Following the vaginal exam I started feeling intense contractions. This was my third time giving birth. The midwives laughed at me and said if I was feeling this much pain now imagine how I would be in active labour. I felt humiliated. I could barely walk as they made me leave and used the handrails and literally pulled myself to the entrance of the hospital where my husband was waiting. I was in screaming pain all the way home from the hospital. As soon as we came back home (15 mins drive from the hospital) I felt the need to push. We called an ambulance and within half an hour, my baby was born. I received no apology. They told me the nurses were overworked due to covid and I accepted that and decided not to make too much of a fuss. But when I think back to how humiliated they made me feel it makes me angry to think about.
I do want more doctors and midwives to be more polite and accommodative to the needs of pregnant ladies.
I felt like I had no control. Wasn't allowed my husband with me for my induction, i laboured alone for 8 hours, no one with me, I ended up with sepsis. I ended up needing an emergency c-section, at which point my husband was allowed to come in. He was then swiftly asked to leave afterwards. To this day I'm so traumatised by the lack of support or empathy I was shown. It was an awful experience one that would of been made invariably better if I'd had the right support.
I gave birth at a birthing center I couldn't have asked for more supportive and attentive midwives they made me feel at ease.
I gave birth on [date redacted for publication] and it was clear that they were severely understaffed. I was induced and my husband was unable to stay with me. I progressed very quickly and was in huge amounts of pain, I asked repeatedly for someone to assist with the tens machine I brought myself and no one came. I was given paracetamol but I was in so much pain at that stage that I vomited it up immediately (I could see full tablets but wasn't allowed more for fear of overdose, I couldn't have gas and air because of the vomiting and couldn't have anything else as had progressed too far). I was screaming for help as I could feel the head coming but I kept on being told that I was still in early labour (I was being continuously monitored and the machine wasn't picking up my contractions). As my husband was there I had no one to advocate for me and felt completely abandoned, ignored and dismissed by the midwives. Eventually the consultant heard my screaming and cries for help and said we should examine her to take out pessary if necessary. I was fully dilated and the baby arrived about 30mins later (my husband arrived about 20mins before our baby arrived). I didn't feel like my notes were followed with regards to birthing the placenta and I was not helped to establish breastfeeding (told by the midwife my nipples were too flat to breastfeed)
I gave birth to my first child in August 2020. I was induced alone and told that once I was in active labour my partner could join me. The labour ward was so busy that I was in active labour for 4 hours on an antenatal ward before I was united with him. The antenatal ward was also very busy and I was left on my own for much of this time. This was largely due to covid restrictions and whilst I understand why it happened at the time it must never happen again- this was wholly unacceptable. I was treated very well on the labour ward where the midwives

<p>and doctors were all nice and good and I felt safe. I then went onto a postnatal ward with a no visitors policy. This was horrendous and punitive. I struggled to look after my newborn baby whilst recovering from a long labour and emergency c-section. The ward was overstretched and I had to advocate for my most basic needs to be met, which often didn't happen at night. It was horrible to be separated from my partner at this point and for him to be separated from his baby. My baby had an obvious tongue tie but we were given no information about how this could impact feeding. I was discharged home 36 hours after the birth and told that my body would be able to provide all the milk my baby needed. When I got home the usual midwife visit the day after I got back from hospital was cancelled because of covid. My baby lost 15% of her body weight and became quite dehydrated because my milk didn't come through until day 5 and I thought I was breastfeeding successfully. I fought to get hold of the community midwives (I hadn't been given their number by the hospital) who came quickly and sent us straight to A&E where we were readmitted to the postnatal ward. This was horrendous after my experience on the postnatal ward before and it was horrible to be separated from my partner again, who found it difficult being separated from his baby. This should never be allowed to happen again. My next baby was born in March 2022. I came into the MAU because I was unwell and I initially had to fight hard to be seen after being put in a side room. Once I had been seen I was well cared for but I attended hospital very ill and with abdominal pains and I was left on my own for 45 minutes, terrified and in pain. On the labour ward I was again well cared for and felt medically safe and in the hands of nice and good practitioners. I had a c-section and part way through the operation I started to feel too much so I had a GA. My recovery on the postnatal ward was completely different because my partner could be there and due to my illness I was seen to be an infection risk and given a side room, rather than being put in a bay on a communal room. This was a much better experience, primarily because I had the physical and emotional support of my partner. After we were discharged home I was under the care of community midwives, who were very pleasant and easy to get hold of. My baby was very lethargic and (unbeknownst at the time) was going into liver failure. We spoke to the community midwives about the lethargy and were told it should be ok. A week after getting home the results of the heelprick screening test showed the liver difficulties and we were called by a consultant at the metabolic unit at the Evelina and told to go to A&E. When we got to hospital my baby was extremely unwell and she spent 4 weeks in hospital, narrowly avoiding the need for a liver transplant. I don't know if in hindsight the community midwives should have been quicker to send us to hospital. What my baby had was an exceptionally rare liver condition, although it presented similarly to a couple of rare metabolic disorders in the first 10 days of her life. I am not a midwife so I don't know if this was clinically ok but I wonder if they should have been quicker to send us to A&E.</p>
<p>I gave birth to twins and was kindly allocated a side room, and offered additional support with the babies i.e. changing nappies and feeding (I had an elective c-section)</p>
<p>I had a C section and because of pandemic nobody from outside was allowed. Nurses they were busy one looked me a bit strange when I asked her something she did not know I could not move due to the anaesthesia. So I have avoided ask things to nurses when I was back on my feet.</p>
<p>I had a high risk pregnancy and was referred to the labour ward. As I was overdue, I had to be induced. My labour lasted 3 days and due to sepsis I had an emergency c-section. My daughter also had sepsis and not being able to have any support from visitors (/my partner) and having to get up from bed to feed my intubated baby without midwife support, was horrible. Some midwives were compassionate but others were extremely harsh and rude, offering no emotional support during this traumatic experience. I was never asked how I felt and suffered with PTSD and post partum depression.</p>
<p>I had a planned c section it was fine</p>

I had a planned c-section. Felt well looked after although was devastated when my partner had to leave 2hrs after birth. I did not see him again for 5 days.
I had a planned C-Section. It was my third C-Section, I was first in to theatre as I have a latex allergy, the staff were amazing, everything went according to plan there were no complications at all.
I had an elective Caesarean section. The hospital [hospital name redacted for publication] doesn't seem to have a regular team scheduled for elective caesareans, and instead has to slot the sections around labour ward activity and emergencies. I have experience working in hospitals in the West Midlands - I have never encountered this approach to elective lists before. It has the potential to be really dangerous if there are labour ward emergencies which can't be done in a timely manner because an elective caesarean patient is in theatre, or a patient who needs an elective caesarean is delayed repeatedly until they eventually have to have an out of hours emergency when they present labouring. Ensuring full funding of an elective and emergency theatre team really should be a basic.
I had an emergency c section of not for the quick action the hospital took my son may not have made it.
I had an extremely traumatic birth where we nearly lost our baby. I felt that the team did the best that they could have done given the situation. What was poor was their treatment of my partner - they didn't let him come with me for the birth as it was too much of an emergency, they just left him in a waiting room not knowing if he would ever see me again or if the baby would survive. Our baby did survive, thankfully, but while I was still unconscious in theatre they didn't give the baby to my partner. This means we were all separated for the birth and hours after, which had a detrimental affect on our mental health. When we asked why they didn't give the baby to my partner they said it was because of COVID.
I had to be induced as my waters broke but no contractions, I was looked after by different midwife's while in Labour and I felt everything was explained and a lot of precautions taken. Even during Labour my midwife had to press the alert bell and the amount of doctors and midwives that attended where almost double figures and I got alot of encouragement. I felt my experience up to birth had been brilliant. The antenatal midwife's in [hospital name redacted for publication] were fantastic.
I had to give birth alone which was unplanned and my husband had to wait in the corridor. I was in very active late stages of labour and was left to wait in the waiting room with nobody else waiting. It meant that my baby was born while being checked over by the nurse. I felt like I was ignored and not listened to when in extreme pain. Having my husband to advocate for me when I could barely speak would have been a lot better as I feel I would have been attended to quicker. I still feel disappointed that he was not able to see the birth of our second child.
I opted for a homebirth and was successful in having one
I received good safe care but quite impersonal
I wanted a VBac and the midwives helped me to achieve this
I was a 'low-risk' mother and I had originally wanted to attempt a home birth to promote physiological birth and to avoid unnecessary medical intervention. However, when I went into labour at 41+6 (instead of being unnecessarily induced the day before) there was no staffing for homebirth so I went in, to be told the birth centre was shut, then I got put onto labour ward. Luckily I had stayed at home for quite a few hours so I was well into labour when I got there. Everything went well, however, I felt robbed of choice as I really wanted to give birth in a midwife-led setting as I researched that it leads to lower medical intervention and higher satisfaction rates. I feel that I didn't get this as when I got to the hospital as my only choice was the labour ward where you can hear the screaming and the emergency buzzers which does not help the physiological process and ultimately made me feel very anxious whereas I was calm and more in control before.

I was able to deliver in the birth centre, as requested and planned. I gravitated towards a nurse who had briefly entered the room and she stayed by my side throughout the rest of my labour. It was an act of kindness and support that shows the genuine care of this member of staff.

I was brought in to be induced at 40 weeks. I was glad because baby was very heavy. The maternity ward invited me in early! I was over the moon. My husband and I sorted out other children out and rushed to the hospital. The midwife we met was lovely and put us in a room. When her shift finished I was wheeled out of the room by another midwife who told me there was an emergency patient going in that room. I was not happy and had to stop her midway to find out why she was moving me. This new midwife was setting me back up in the shared ward and asked how many children I had, I said 4, she responded "wow, what is it, you like the pain" I was very embarrassed and as a black woman myself speaking with the midwife who was also black, I felt degraded and cheap. I was glad when I was told to go to another area. The Midwife who was just about to finish her shift was delightful, she explained how what would happen in that area and then introduced me to the new midwife on shift. This midwife behaviour was short and very dismissive but I felt I couldn't do anything about that so I kept quiet and watched. My pessary was causing me to have multiple contractions which I knew was not right but wasn't sure what was happening. I asked my husband to call the midwife. She very abruptly told my husband that I should wait she's talking to the doctor. My husband was very cross but came back to our cubicle. The midwife came to my cubicle approximately 10 minutes later stuck her head in and she "Yes, can I help" I explained that something was happening and that I was worried, to which she responded "What do you want me to do?" So I stopped and looked at her (whilst having contractions) and said that she needs to check my baby or something. She went away and came back to turn the machine back on. There was less than two inches of the report came out of the machine and she looked at it roped it off the machine and dashed out of the cubicle. I thought my baby was struggling or worse. I looked at my husband and started to weep. He was too scared to respond to the situation we found ourselves. The midwife came back into the cubicle and I asked what was happening. She said that the pessary was over stimulating the cervix and causing contractions. She asked to examine me to see if the pessary was ok. I agreed. The midwife then removed the pessary and then put it back into me. She went out of the cubicle. She came back into the cubicle and told me that she needed to remove the pessary. She entered me and could not find the pessary. So I was having painful contractions and the midwife's entire hand inside me panicking because she could not find where she put the pessary. It was found under the back of my cervix. I cried. I felt violated and I felt uncared for. The doctor arrived and she was fantastic. she explained very clearly what had happened and why I had been having the contractions. A different midwife came in (one I didn't even know was there) to put a cannula in my hand. She was very friendly in front of the doctor, she entered the cannula into the back of my hand the vein collapsed she went on to blame my vein and that it was fine and my vein just fell. I was in so much pain it was such an awful experience. The doctor seemed a little cross but was always professional. the doctor told her to "take it out and I will do it". I was administered a drug to stop the contractions which it did but also made me shaky and anxious. When things settled the rude midwife, who was nicer towards me, told me that she was come back in 30 minutes to break my waters. I woke up 3 hours later at 3am to find no maternity staff snoring ladies in their cubicles and the doors shut to room. I walked around but I couldn't see the midwife anywhere. I was woken up at 6am by the rude midwife and introduced to midwife who was going to break my waters. This young midwife was friendly but was physically tired. My husband asked if she wanted him to wear a face mask, she simply said she didn't care. The on suite in the birthing room was very smelly. This was indicated to the midwife and she responded with "oh, I'll let them know". The young midwife explained the process of breaking my waters and gave a demonstration. She was informative and explained things thoroughly. She broke my waters and the new shift

midwives came into the room. Two very lively energetic young ladies. I'm so glad they took over as they realised that baby started to get stressed baby's heart rate kept dropping and didn't know why so they pressed the emergency button. The same doctor from earlier came into the birthing room and asked to examine means found that the baby's cord had prolapse. It became an emergency C section for me. I was petrified, my husband was totally inconsolable and I just wanted to hear my baby cry. The emergency team were amazing! The young midwives were fantastic and I heard my baby cry, which was a relief for us. Some of the emergency team came in after the operation to apologise for things that could have gone better and explain what actually happened during the operation. I was so very grateful to them for saving my baby.
I was diagnosed with diabetes and pre eclampsia in my last trimester and the care I received was amazing. I was monitored very closely.
I was fortunate to be able to pay for private birth care - under the care of a fantastic doctor at [hospital name redacted for publication]. I am very pleased I did not have to use the NHS labour ward.
I was in hospital throughout labour with a dedicated midwife at all times. They were calm and reassuring and it was a positive experience
I was induced in 2020 due to having been diagnosed with pre eclampsia I feel I was symptomatic for a while before but didn't have face to face appointments the process was fine and had all care, unfortunately I experienced a haemorrhage post party and required surgery I honestly can't thank the team enough they saved my life. I did have post partum hypertension and required a re admission I wasn't as happy with the care this time. I also really missed not having my child being able to visit. In 2021 labour was fine I was looked after well and all precautions taken so that I didn't haemorrhage again. I did have a tear would have preferred an episiotomy as I had with previous 2 bits.
I was left on the antenatal ward with no pain relief despite being in a lot of pain and begging for an epidural because I wasn't sufficiently dilated (even though I discovered later that shouldn't have been a criteria for pain relief). They missed a crucial flag in my notes with concerns about the baby's size, so didn't monitor me properly and didn't spot the baby was going in to distress. The handover between shifts meant things were dropped and my daughter was born, not breathing, about 2 minutes after I got to labour ward
I was patronised right from the word go and treated like I was stupid. As soon as the baby came out everyone started packing up their stuff and saying Right let's go
I was pressured into an induction at 37 weeks due to SGA when I requested a c section over induction as I was concerned about my baby becoming distressed during induction. The induction itself was painful and invasive and upsetting. My baby did become distressed and I ended up with an emergency c section which could have been avoided if I was listened to. The consultant doctor who was overseeing my birth did not listen to the midwife who kept telling her that my baby's heart rate was not recovering after contractions
I wasn't 'allowed' to birth in the birth center but apart from that. My care during labour was incredible due to out midwife
I went to [hospital name redacted for publication] to have my baby and the service was amazing despite it being lockdown (April 2020)
Inexperienced midwives, several of whom have no business in healthcare. Several advised me not to get the covid vaccine in my one successful pregnancy - not because I was pregnant, but because of conspiracy theories they'd read. These people are still employed. I was also recommended mindfulness by these so-called midwives when I was 5cm dilated at 21w. I was denied an epidural during both of my 21w births despite asking for it. I was also an inpatient for a few weeks on the antenatal ward at a time. It was bad to the point we frequently had no running water / toilets / showers - this is not an exaggeration. I witnessed first hand an experience of a midwife being openly racist to a black patient.

It was a very short experience with a homebirth as labour was very fast and they didnt expect to have to be with us so soon following first contractions. A midwife without any kit made it to us 15 mins before baby arrived. But midwife was great and sprung into action and we had a great delivery. we did have to wait over an hour in the bathtub waiting for all the other kit to be able to cut the cord and relocate. but the stitches on the sofa and the settling in after that was great. very positive experience.
Labour was good A program caesarean
Local midwife from [hospital name redacted for publication].
M - should have been a normal delivery. Waters broke, went to hospital on Sunday. Went back in labour on Monday. Was told needed pain relief and a drip on Monday was not admitted to the labour ward for 24 hours. Was told it was normal for a first baby and he was just slow. Wasn't examined properly for 24 hours due to shortage of mid-wives. When it finally happened it turned out he was an obstructed delivery and he was born after an emergency C Section on Wed morning. He was healthy thank heavens but it could have been another Oswestry type case.
Midwives lost focus as it was a long labour. Took a long time to be induced. Left with severe neck and back pain possibly due to epidurals.
My baby turned blue a hour after being born, I had to alert the midwife to the fact he had turned blue despite her being in the room with us
My baby was born [date redacted for publication] and the midwives who delivered her were absolutely amazing. They made me feel safe and supported and respected all of my birth preferences. I have nothing but admiration and thanks for them and the subsequent midwives who cared for us in the birth centre at the [hospital name redacted for publication], particularly as I know they were facing acute staffing challenges. The birth centre was a fantastic environment for labour and I'm sure both the staff and the space enabled me to have to have the natural water birth I wanted. I however I didn't have a positive experience in the triage process. It was difficult and stressful to be separated from my husband in the assessment unit, and I had not been told that this would happen by anyone beforehand. I could understand the need for restrictions in the current climate, however I think it is important that women are prepared for this. I was then told I needed to sit down for 30mins of CTG monitoring, before I was examined. I stated that I would not be able to sit down for this amount of time and asked whether I could stand or whether there was another position I could be in as I was too much pain. The midwife refused these requests and I was left alone for the 30 mins, in a brightly lit room and with no pain relief offered- all of which could have slowed down my labour. Once I was examined I was 8cm dilated, and presumably had the examination happened first other options would have been given. The midwife also told me that the birth centre was closed, which wasn't the case and we had spoken to a midwife on duty at the birth centre earlier that day. Being told it was closed was stressful and scary. I didn't feel that I was given adequate information about my options during triage and because I was alone it was difficult for me to ask the questions I wanted to, as speaking through the contractions was very hard at this point. I feel that clear information about what is happening and an opportunity to ask questions and have preferences respected is needed during the assessment process, particularly when birth partners are not present due to covid restrictions. overall I had such a positive birth experience and am so grateful for the amazing work of the maternity services I experienced , but I feel that the changes could be made to the triage process to better support women.
My baby was breach, but my waters broke and I had to go in for a planned emergency C-section. I had to wait 12 hours (went in at 3 am, C-section at 4.00 pm), in labour before they could attend to me. There were significant staff shortages and only one team on the floor. The c-section itself was amazing. I will never forget how kind my midwife was during the procedure and how competent and reassuring the doctors were.

My baby was delivered via caesarean section. I had been urgently admitted to hospital for monitoring overnight in anticipation of surgery in the morning, due to a potential change in foetal movements. I was instructed to fast from the evening of my admission to prepare for the imminent surgery - however, because of various delays due to the labour ward being busy the following day, my caesarean section only proceeded at 7pm - by this time I had been fasting for almost 24 hours despite being heavily pregnant. Around half an hour before I was taken to theatre, I was "consented" by a registrar who said she would be doing my caesarean section procedure. This was highly concerning given how long I had been fasting and the extremely short amount of time I was given to process the serious risks of the operation before I was taken to theatre. It was the first time I had been given any detailed advice on the risks of a caesarean section during this pregnancy. Subsequently, it was a consultant obstetrician and resident - both of whom I had never seen before - who carried out the caesarean section procedure. I never saw the registrar who spoke with me earlier again. No explanation was provided to me at the time regarding the change in staff. Two days after the procedure, I had to undergo another surgery to investigate ongoing internal bleeding. It transpired that there were three blood vessels that had not been closed from the caesarean section, as well as internal injuries such as bruising. I had 1.5L of blood pooling inside of me which had to be evacuated and I received 2L of blood transfusion. My postnatal recovery was significantly more stressful and prolonged due to these traumatic events. The additional surgery (effectively a third caesarean section) and heightened risks for future pregnancies due to internal scarring and "sticky" organs has also significantly impacted my prospects for having more children.
My husband was able to be with me throughout the active stages of labour and stay with me until I was discharged later that evening
My labour was an unplanned home birth so I did not access maternity care. The paramedics who attended immediately post birth were incredible and if asked to rank them I would do so very highly but not sure if this is relevant to your survey.
My notes wasn't read at all and there was a lot about my mental health. I have bipolar disorder and no one was aware of anything. I had an emergency c section and my partner had to leave half hour after. I was being told I could go Home after being given an injection I would need again 24 hours later so they knew I couldn't go home and was really dis stressing. I would struggle to get around and nurses would stand by reception desk it was one of the worst Experiences and really effected my Mental health for a couple of months after
My obstetrician was incredible. He provided gold standard care
Oh my god. Was only one midwife she did helped me with the birth, did the paperwork and she had to clean the room too. I was heavily bleeding and my husband helped her, she was so grateful for help, she came to check out both me and the baby the other day before she finished her shift
On my way in, I was screaming in pain and also crying as I my husband carried my dead baby beside me and a nurse, assuming it was just normal labour mocked my screaming as I passed her. Further, I found it unacceptable that I had a nurse roughly pressing on my stomach whilst I was delivering the placenta.
One midwife was excellent but the midwife on shift when I gave birth after developing sepsis was atrocious. Did not take my initial alert of feeling unwell seriously enough and by the time she alerted doctors I was taken in immediately for emergency C-section.
One of the midwives who was with us was excellent, however the second one didn't seem to concentrate as much which we believe led to a distressing situation during my labour. We were also in a room with no heating and it was snowing outside, so that was very uncomfortable
Overall my experience was good.
Procedures completed without consent left by midwife during hard part of labour

Really good experience (planned c section) but not enough breastfeeding support
Team discovered that baby was breech during labour. COVID restrictions meant I found that out by myself. Partner then allowed in and I was taken to theatre for emergency section. Without pain relief before they put in the anaesthetic for the c section for a long time - was told to chew on something to pretend was gas and air. Complications during the section meant I was in theatre for a long time after delivery, didn't really know what was happening, couldn't hold baby.
The baby was already crowning when I arrived at the hospital so I didn't really experience the services while in labour
the care received for the birth was fine once I was able to get a bed in the labour ward. I had a horrible experience in the days before with the midwife led birth centre to eventually arrive in the hospital and wait half a day before space was available on the labour ward.
The hospital staff were good especially the labour team
The hospital was going through the pandemic so the overkill on unhelpful security, maternity receptionists etc were terrible but the actual team that delivered the baby were fantastic and saved his life
The hospital was very busy without enough midwives, therefore none urgent care was delayed. There was no joined up care, care requirements was considered on its own without considering previous care / patient history and experience
The midwife team at the hospital were accommodating and pragmatic with my husband and once I had been triaged and admitted to begin process of induction (which ended up being an emergency c-section) he was allowed to stay with me.
The midwife was rushing off her shift and put a cannula in my arm incorrectly and starting pumping syntocin into my arm instead of to my baby. After 8 hours, my child had stopped moving and his heart beat had accelerated resulting in an immediate c section. Complete negligence. Very lucky that he was okay.
The midwives at the hospital were superb and I felt fully supported.
The team at the hospital were great but it was scary when things went wrong and I was on my own. Not the fault of hospital, it was the restrictions
There was no care provided for home birth. Only emergency services who do not have the skills and who cause harm.
They sent me too quick home after birth
They wanted to send me home on arrival but insisted to stay My child was born within 45min from then Another woman on that day was send home and her husband delivered her baby on the phone with the paramedics in her own bathtub I wouldn't want that to happen to anyone!
This was one of the times when a brilliant consultant made me feel like I was in safe hands and supported, while doing an emergency C-section and saving my sons life. I will be forever grateful to her. But, at the same time a more junior doctor lectured a midwife in a mocking way. Which I found concerning. It didn't seem to be a supportive and kind place to work.
This was only as a result of my tireless advocating on my own behalf to my MP and the chief exec of the hospital trust to ensure my husband is was able to accompany me to the birth during the pandemic.
Top midwives team, lot of empathy and support. Doctors were showing less empathy and too stressful.
Tricky to answer the question because the issue with care was during labour, not birth. Once midwives were present it was amazing, very good. The issue is the supply of midwives. We arrived in the night and there seemed not quite enough staff: my birth partner and I were "parked" with no encouragement other than each other until the day shift were about to arrive. Then they checked me and I was fully dilated, midwives joined us and baby came

quickly and it was an ideal birth experience but, he could have come even sooner! I was ready to push sooner. Women are experiencing more pain from labour while they wait and it is hard to keep confidence when it's your first time.
uncertainty and conflict of communication about the rules for mums and partners to be covid tested or not. Rules for masks just before labour and after were set but not followed nor meaningful. Amazing staff though. Truly,
Understaffed, many staff short on patience, options not explained thoroughly to me, high amounts of pain during exams to check progression, lack of understanding from midwives about this
Very friendly nurses and caring like your own
Very good service
Very supportive and competent midwife team at QCCH
Was during covid and my partner couldn't stay with me and we wasn't told that NICU was open 24/7 so he went home without us whilst I was separated from my newborn
Was left alone for hours, when my waters broke I bled too much and there wasn't a nurse around. Begged for pain relief but they were afraid of given it to me due to a medical condition. Was asked to push when I wasn't ready which made my daughters heartbeat drop to dangerous levels and I was rushed to an emergency c section. I was told they would have to cut and I would probably feel everything because there wasn't enough time for the epidural to kick in. Was put on general anaesthetic and missed my daughter's birth moment.
Was on my own up until active Labour I was frightened and didn't feel listened too.
Was supposed to have a scheduled c section. after my first birth ended in an emergency one. went into early labour, was ignored and left on the ward until it was so late it was another emergency one was performed.
We had a great service in the Labour ward, staff there were very calm and understanding even thou they were very busy. Only thing we found was rude that the nurse matron kept telling mums and dad off for going out for walks and kept shouting we are short staffed and I will not open the door.. we was out on a walk just around the hospital. We met a couple who was standing outside for 2 hrs before they were let in
When I came in with reduced foetal movements after my due date and was advised that I can opt for an induction, a bed never came available for me to have this. I waited for 3 days until I went into labour naturally. Even then, we waited in triage for another 24 hours for an induction until they moved me to the labour ward. By that point no induction was needed. Only then the midwife noticed that I was not progressing with labour because the baby's head was too low. I simple push of the head fixed this. This makes me question how much quicker my labour would have been if we were seen properly sooner. After labour, we were left by ourselves in the labour room for an entire day. There was no one to really help me with breastfeeding feeding there, which was beyond stressful as the baby didn't eat properly for the first 8 hours. Post delivery, we were in the labour ward for two shift changes. The first midwife I managed to call spent a couple of minutes each time showing me how to get my boy to latch. However, when I called a midwife again from another shift to help me with a position that would not hurt me, I was told that breastfeeding will hurt implying that I should just get on with it. This was the start of a very traumatic breastfeeding journey for me. And, no, breastfeeding should not hurt. When we were, finally, moved to the recovery room, we were not able to leave to go home because the midwife said that there was no one available to discharge. This added another 8 hours of delay. I feel like lack of staff at all stages of my pregnancy and then delivery played the major part in making my experience a negative one with maternity services in London.
When I was induced, the midwife who was on shift on the antenatal ward that night was very overstretched, I think she was the only one working and she seemed extremely stressed and flustered. She didn't seem to keep track of what painkillers I had been given very well but she

seemed so busy and overstretched that I don't blame her. There should have been at least one other person on shift with her that night. I had to wait hours after my waters had broken to go on the labour ward despite having group b strep and requiring antibiotics. I was begging for an epidural as my contractions were too close together, only a minute or so apart and I had back labour as baby was facing the wrong way. Once on the labour ward I had a spinal block and epidural, the anaesthetist was amazing. The midwives and doctors I had on the labour ward were amazing and made my experience giving birth incredible. I felt very comfortable around them and they explained everything to me thoroughly. I felt well cared for and I liked that they were all female. I ended up having an assisted birth with a suction cup and episiotomy as baby was facing the wrong way. As I had group b strep during pregnancy, I was given antibiotics during labour, however, I wasn't given the correct antibiotics and my baby caught group b strep. He had to go into hospital for tests and was administered strong antibiotics. I know I wasn't given the correct antibiotics as the report for the swab I had during pregnancy said the bacteria was sensitive to penicillin and cefalexin, I am allergic to penicillin so should have been given cefalexin but was given clarithromycin during labour which the bacteria was not said to be sensitive to in the report. I didn't realise this until after I had given birth. If I could pick up on this then why didn't a doctor or consultant?

Would have been good to have my husband with me at all stages once going into the labour ward. Instead he was waiting outside until they allowed him in. He was not allowed to stay for long period after birth so having to deal with all of this was difficult. Mentally and physically.

If you would like to tell us more about your experience of maternity services after the pregnancy, please use the space below:

2020 baby - only one follow up Visit a few days after discharge from hospital. No health visitor visits whatsoever. No checking of my C-section wound after initial midwife visit. I was on my own, single parent, no local support.

Absolutely horrendous and traumatic. I said many times I wanted to breastfeed, the breastfeeding support was close to non existent. Baby ended up with jaundice on day 2 and I was told I had to give formula as I was making him dehydrated even though I expressed I didn't want to give formula and I was only given the option to pump 2 days after this. There was also nowhere to wash the pump properly. A very obvious tongue tie was missed which would have caused the jaundice and then I had to wait 6 weeks for an appointment to get his tongue tie snipped. Various nurses, doctors, midwives etc would enter my room every 20 minutes round the clock so I couldn't get any rest and then when they'd ask me if I slept and I said no they would tell me to go to sleep and stop holding my baby. The one time I tried to get some sleep finally a woman came in very loudly to hand me a single digestive biscuit and commented that my baby was very small. Only a few hours after the c section a doctor came to see me and tried pressuring me into birth control. I declined as I had a bad experience previously and also felt it was better discussed with my GP, she continued to pressure me and I had to really stand my ground bearing in mind I'd just had a very traumatic operation and she didn't ask me if I felt okay or talk to me about what had happened and any care for after the c section. When I had to give formula it was being kept in the fridge in the staff room and when I rang the bell and asked someone to get it for me she had a go at me and said 'can't you get it yourself?!' Barely any of the various people that enter your room have any idea what you've just gone through in terms of birth so just expected me to stand up even though I'd just had a c section. This same woman snatched my baby off of me and said I was burping him wrong (new mum) and aggressively started smacking the baby on the back. Lots of the staff were rude and I spent a lot of my time on the postnatal ward crying my eyes out. My husband was only allowed to visit 12pm-6pm which meant that when my baby was born at 1am he had to leave straight away even though I had no use of my legs and a newborn baby

to take care of! There were 3 midwives out of dozens that I saw that were actually nice and compassionate and helpful.
Absolutely zero follow up
After a rough start To breastfeeding I felt coerced to give formula to my hours old baby. I feel that was unnecessary and uncalled for
After such great care from the antenatal midwives I was taken to postnatal ward and I really felt I couldn't stay there too long. My catheter was left in and I had no idea how to empty and when I asked about it I was told to do it myself. I didn't mind doing it myself but I have never had one before so I didn't know what to do, I had to ask them to treat me like I am dumb as I didn't know what to do. I found the night shift midwives where more abrupt and impatient. The daytime midwives where ok, they were trying their best but I did not feel happy being there and I was able to leave 24 hours after being in the post natal ward. I am slight annoyed as I was told I could stay another night if I wanted but I wasn't happy after the treatment from the night before and they said it was ok to leave. They then wanted my bed right away and my partner couldn't make it for another 2 hours so I had to wait in another room. After going home I was back the next evening in hospital as my newborn developed jaundice. Another thing that annoyed me was the pressure to only breastfeed and if I was prepared with back up formula I could have avoided a trip to the hospital on my baby's 2nd day. It is pretty traumatic seeing your newborn have blood taken. As I was staying with my in-laws I had to go to [hospital name redacted for publication] hospital A&E where they found jaundice and arranged for an appointment after few hours the next morning and some formula to take with me as I couldn't buy any at 2am. The midwives at [hospital name redacted for publication] post natal ward where so amazing, and we're patient with me when I found it difficult to see them take blood for test. They too seemed very busy and we were waiting a long time for things but every midwife that passed by would check on us and would go see if our results where back. Luckily we didn't have to stay overnight and we could keep coming back daily for a few days just to get checked but I honestly would not have minded staying overnight at that hospital. Also the midwives and eventually health visitors that visited at the house have also been fantastic. Also a mention of daytime midwives at St Tomas and doc and nurses that were performing newborn checks, they were busy but they were good at explaining things and being thorough only good part from being at the postnatal ward
Almost from the minute I had given birth I feel my care suffered. Very little one to one support and information given. Partner unable to stay overnight meaning left largely by myself (very little midwife care) for many hours very soon after giving birth which affected my mental health and ability to rest following a 45 hour labour. Very little breastfeeding support given and encouraged to give formula instead of being supported to collect colostrum. I could hear many other women struggling and pressing the button for help but midwives not coming or taking hours to come. Most of my requests for help were not answered. The entire experience on the postnatal ward was so isolating and unsupported I never want to go onto a postnatal ward ever again. One of the worst experiences of my life.
Although I could not see my midwife face to face she was very good doing it by zoom bearing in mind my baby had no concerns. Had my baby had any health issues and I was not able to get a face to face I would have been very depressed. Also it took me 7 months to get booked in for my baby's bcg injection. Which I had to follow up and chase. So having a new born in lock down with no contact with family who would support me it was very difficult. I would say I was borderline of going into postnatal depression
An hour or so post birth I was taken to recovery ward, around midday. Did not see another medical professional until evening. Night shift midwife rude and unhelpful to a stressed out mum. Breakfast situation at [hospital name redacted for publication] was dire (leave my baby in room to go out for a cold buffet, during Covid times?!)

As it was my second child there was less support which was actually fine. Though I am still waiting for a debrief of my birth because some anomalies were found on my womb.
Bad care received on postnatal ward, mental health concerns not taken seriously, not enough support for a mum who wasn't allowed anyone to stay
Brief interactions with maternity services after birth. Staff friendly and supportive, very little discussion about my mental health despite pandemic circumstances when this should have been much higher on agenda
Checks afterwards were acceptable and luckily my baby didn't have any issues after being born
Despite it being right at the beginning of the pandemic, when no restrictions were in place, we received no support, despite asking for help with breastfeeding
Dirty hot maternity ward at [hospital name redacted for publication] with almost no breastfeeding support
Discharged to GP. GP was impossible to access and incompetent. Misdiagnosed mastitis at 3 weeks postpartum which turned into sepsis. I was lucky to survive.
Due to errors at the hospital with my daughter's jaundice she nearly ended up needing a blood transfusion. A formal complaint was made and an apology received. My midwifery team were fantastic and could not have asked for a better team.
Due to the preeclampsia my blood pressure was a constant concern and after being discharged I was told I needed to immediately return to the antenatal ward if it reached above a certain reading. Each time I returned it felt as though I hadn't been instructed to do this and was made to feel like I was being a burden on them. I was having to sit in a hallway with my newborn feeling unwell and my husband not allowed in to be with me. They wouldn't even let her buggy in so I was carrying her the whole time which was difficult because of how unwell I felt.
Explained previously. No after care info and there was absolutely no follow up to see how I was doing. When I called to ask if a huge lump in my stomach was normal, the nurse on the other end acted annoyed, as though I was bothering her. I also had the bereavement nurse act annoyed at my call when I called to ask about the post mortem. I did complain about this formally.
First 24hr after birth, felt fairly forgotten about. Not really told what was happening, mixed advice about my baby's breathing, whether it was an issue or not, (grunting). Not enough staff but those that were around we're excellent. My 6-8 week check was totally rubbish. I have diastase recti but was told I was fine.
Good care overall.
Had to return and be admitted to HDU. Not enough nurses or doctors.
Hardly any contact and just assumption all be ok - thought be more checking done and check ups - didn't check babies weight in visit either just relied on my records but other than that very friendly and polite and helpful when did she her
I became very poorly as did my baby after numerous attempts at telling the midwives I was sick they would take my oral temperature which was fine then telling me to just drink water i was showing them i was passing massive blood clots i was left even my partner saying I was sick they did not listen they kept telling me to drink water and just gave me paracetamol. I was in hospital for four days before the midwives that helped me give birth took over someone's lunch break the moment they saw me they knew I was sick my body temperature was taken and it was at 39 and had been this whole time I found out I had sepsis and my iron had dropped so much is was dangerous they tried to give me iron shots but they did nothing because of how late they left it I ended up having to have a double blood transfusion. It all could have been avoided if they had just listened to me. My health visitor that came to do a house visit was extremely disrespectful to me. She asked about my partner how long we had been together his age etc she assumed I was the same age as him then later on in the

conversation asked how old I was because she needed it for her notes I told her I am 21 and then she proceeded to say how young I was and that I should of used protection and why wasn't I using protection this is while I am holding my new born son she then continued to question as to why I brought ready made formula and it was lazy of me to do so I was solely breastfeeding and I brought it for the hospital incase I wasn't producing enough or if my son wouldn't latch. She then went upstairs to look at my sons sleeping arrangements essentially said the cot was too big for him went downstairs and left. This is one of many many incidents.
I couldn't breastfeed so the nurse rolled her eyes, walked over to me, grabbed my book and squeezed it hard (uninvited, mind) until something came out and then said There you go, and then walked off
I didn't get any visits and when I did, it was someone training so they were clueless and missed appointments and I felt completely neglected. I had no support from midwives apart from once on the phone and there were no local groups to go to
I didn't have a proper follow up appointment, just a nurse saying my scar looked horrible when it didn't. Wasn't even seen at the 6week appointment.
I didn't receive any care after I left the hospital. When I attended a 6 week check up with my baby weeks after, we were seen by trainee doctors, one of them didn't even know how to hold the baby, and they just checked the baby, not me.
I don't how much covid became a justification for infrequent contact from health visitor but have to say the breastfeeding team were responsive which was great
I had 1 home visit from a health visitor. I could not get any face-to-face appointment with a GP to check that I was healing ok despite having some concerns. Health visitors offered a few initial check-ups in a clinic for my baby however which was good, but after that there were no services offered to weigh my baby and no drop-in clinics. My baby had significant feeding difficulties when he moved onto solid food and my baby's growth slowed a lot over a 6 month period but there was no support available.
I had a lovely time on the postnatal ward, lovely midwives and was out the next day - I could tell the staff were stretched very thin however, they made the effort to do breastfeeding support and support me throughout my stay.
I had no input no care despite being in the hospital visiting my baby in NICU I had complications recovering from birth physically and mentally No one was providing any care
I had post natal anxiety and was referred to the perinatal mental health team who were incredible!
I have already explained this in my answer to the antenatal question (sorry!)
I received almost no maternity services from about 1 hour after the birth of my daughter. She was born by c-section
I received longer support than most as I was hospitalised with an infection a week after giving birth, and the midwives in icu and during the day on the ward were great. The evening teams were generally rude and uninterested. My partner was allowed with me 24/7 in icu and 8-8 on the ward, which was ok. The midwives that visited me at home were different each time and most were friendly and supportive.
I spent a week on a postnatal ward in early June 2020. It seemed to be very understaffed and many staff members seemed to be burnt out, some to the point of being extremely rude to patients. I was transferred to the ward with my newborn a few hours after a dramatic emergency C-section, having spent several days in labour - I felt exhausted and very weak and was worried that I would not be able to safely look after my baby without at least some support. I expressed this to the nurse who had transferred me and she said in a callous tone that this ward encouraged women to be independent and then left. My baby was transferred to NICU shortly after this and I was very distressed about this and was not permitted to go with him because of COVID regulations. The next day I was told that this was an error and I

<p>should have been permitted to go. After my baby was transferred to NICU I did not have access to water and no one answered the buzzer for several hours. I also witnessed staff members being very rude to other patients, for example shouting at a woman who had shuffled to an equipment station to collect a new hospital gown that she was wasting resources. The woman then turned around to reveal that the gown she was wearing was covered in blood. A big gap was any provision for postnatal mothers on the NICU or SCBU. I was unwell myself, requiring a wheelchair and having an infection that meant I had to return to my own ward for antibiotics several times a day, but was given little support with this and it was difficult to transfer between wards. I could not access food or drink while there and found it very difficult to leave to get some without support, which was rarely available. I became dehydrated on the second day and developed a UTI, making it more difficult to visit. There was a rule that only one parent per day was permitted to visit their baby in NICU/ SCBU. This meant that I eventually had to choose between my son having me, his mother, there for a very short time each day or my fit and healthy partner there supporting him for a much longer period. In the end I felt that I had no choice but to ask my partner to go in my place each day, which was very, very upsetting - if I saw my son even briefly then my partner would not be permitted to visit that day, so my baby would be left without visitors for most of that day. This contributed to my subsequent severe postnatal depression and anxiety. The staff in the SCBU also seemed very stressed in general. Some staff members in all wards did still manage to be kind and compassionate despite their obvious stress.</p>
<p>I think the NHS forgets that we've just given birth. My c section scar got infected and none was even willing to take a look. I had mastitis at the same time. I ended up in private healthcare because of the pain. We could barely afford it at the time, but I felt like I had no other choice. I spoke to my gp, midwife and health visitor and they couldn't decide whose responsibility I was. None of them wanted to see me.</p>
<p>I was able to see a pelvic floor physio on a zoom appointment before birth as I had leaking issues. The issues continued after birth and I had to wait 9month for another phone appointment 2 weeks later I finally had a face to face appointment where we found the issue I had to wait so long after the referral as I was not pregnant anymore...</p>
<p>I was forgotten about and had to chase the midwifery team to come and see my baby once I had been discharged from hospital.</p>
<p>I was in hospital for a few days after birth for a number of reasons but mainly as I couldn't establish breastfeeding and they wouldn't let me go until I could show I could feed the baby. I eventually started her on formula as it was so difficult being in hospital with baby alone (husband could only come in visiting hours). There was some breastfeeding assistance but she was stretched very thin so only spent c. 15mins a day with me. I had a bit of extra assistance (one appointment) as I struggled to get the baby to latch and couldn't breastfeed. I paid privately to get a lactation consultant.</p>
<p>I was put on a ward in front of a toilet, which wasn't great but they said they were full. The cleaners and kitchen staff were loud and rude. I was told to go and collect my food, which was outrageous. The midwives didn't explain how to use their service so my baby sat in his poo for far longer than I would have left my child ordinarily. I had never had a c section before and the pain was unbelievable for me. I asked one midwife to change my babies bum and she used the cotton and wiped his poo up onto his penis. When I challenged her, she told me that she didn't and became cross. I had a really lovely midwife who was able to move my bed to the window and administered painkillers. she was so nice to me.</p>
<p>I wasn't happy with my aftercare. The community midwives made me to go to apts at the local hospital, it's not ideal situation when recovering from major surgery to have to travel 15 minutes by car there and 15 minutes home. Sometimes I would be made to wait up to 45 minutes to see the midwife again not ideal when recovering from thus type of major surgery.</p>
<p>Initial post care was good by midwife and doctor but I have never met a health visitor and I only had one unhelpful phone conversation at 3 weeks</p>

Kind midwives postnatally, but quite varying experience
Local care in [hospital name redacted for publication]
Loved that my regular antenatal midwife made sure she could do one of the home visits after birth
Midwife and health visitor appointments were virtual while 60,000 people were allowed into Wembley Stadium. Absolutely despicable. No breastfeeding support so felt I had to give up which really impacted my mental health and just a total lack of support / empathy from any health visitors I came across. Horrific.
Midwife care was incredible and thorough. HV visited once and in still awaiting a referral she wanted to get us a year on. I'm pretty sure she's forgotten !
Midwife services at the hospital were clearly v stretched - all the staff were v caring and did their best, but you feel guilty for adding to the workload. Limited visiting hours during covid was exceptionally difficult - I had a very challenging time establishing feeding which was having considerable impact on my mental health. I still find it hard to think back and process how hard I found it not having my partner there with me overnight to support me through some incredibly low and challenging times.
Midwife visits following birth were great. Very supportive. Didn't sign us off until both they and us were happy to be signed off. We had a tongue tie and weight gain struggle and it was mostly very supportive. With only one feeding specialist being very poor and stressful and down right wrong in her assumptions. Dissatisfied with the 3 tongue tie assessments and not willing to cut it until week 9 of struggle and being forced into it. Feeding was a million times better following the cut.
Midwife's and lactation consultants were available. They rushed to discharge me post natal.
Mostly good. I felt pressured to leave hospital sooner than I felt ready.
My daughter required additional scans. For 5 days it felt midwives were disempowered to help me or secure my discharge. We kept having to wait for a consultant. Then it turned out the required scan was only done once a week by a visiting consultant. It is of my view that we could have had this scan as an outpatient. Waste of resources (bed etc) but also left me and my baby alone without her Dad in hospital for 5 days due to covid rules. We can never get that time back.
My family felt completely abandoned. We received minimal follow-up care - my daughter was not even seen on video for her developmental review and I was not checked in on at all. I appreciate we were right at the start of the pandemic and therefore everyone was figuring out how to carry on in new and scary circumstances but I feel we fell through the cracks. I am extremely thankful that with her being my second baby, at least I felt confident with feeding and had a good general idea of whether to be worried about her weight etc, I dread to think what it would have been like as a brand new parent. But even so, we had a very difficult time and I was not OK. I found it extremely difficult that postnatal services and baby groups etc seemed to be the very last things to open up. It felt especially pronounced during her first year, when we could have had two guys in the flat fitting a washing machine but nobody bothered to check that my baby daughter was OK via a screen, never mind in person. We had one call from a health visitor in the days after I brought her home, in which I was asked if I was OK - I told them I was not OK but that I was having to park dealing with it. She kind of laughed awkwardly. Nobody recommended any course of action. Nobody gave me numbers for support services. Nobody made a note and checked in later. Nobody asked me again. I feel aggrieved on my daughter's behalf, even though she was fine and healthy. What if she hadn't been? What about the kids with problems? The kids in abusive or neglectful homes? I want to cry thinking about it.
My health visitor team have been great
My husband was only allowed to stay for 1 hour after the birth. My son was taken away for tests straight after for 30mins and I breastfed as soon as he was returned. This meant my

<p>husband got no time to spend with our new baby. My baby and I both had infections and required IV antibiotics meaning we had to stay in hospital for 5 days and my husband was not allowed to visit. I also had a positive covid test meaning I was put in to isolation with my baby. Having just had a c-section, I was left to care for my baby by myself with no rest and little care. Staff were hesitant to come in to my room, food was put on the floor outside my room where I had to bend down collect it. There was no water available in the room and it often took hours for anyone to respond when I pressed the buzzer. Overnight the porters would be the ones to respond and would tap on the window and shout "WHAT DO YOU WANT". I tested negative for covid 3 days in a row but had to fight to be allowed home where I could receive much needed help and support. The whole experience was not only traumatic for me but meant my husband was unable to bond with his baby for the first week of its life.</p>
<p>My husband wasn't allowed into the maternity ward with me, as a middle class articulate woman I was still able to advocate for myself. But in one of the adjoining curtained areas I heard staff lecturing a woman who did not have English as her first language. As she was on her own and vulnerable I would have hoped for more kindness. But she was often greeted with irritation.</p>
<p>My midwife came to our house for every appointment which was appreciated, and very much needed, as a first time mum</p>
<p>My postnatal care was absolutely appalling. My husband asked to leave less than 1 hour after the birth. This was after 14 weeks of lockdown, this was not proportionate to the risk of COVID at that time. I was then left on a postnatal ward, unable to get to my son, unable to move, no staff around to help. I was covered in vomit and blood, I couldn't shower without support. I struggled with feeding but just decided I had to formula feed to get discharged so I got the support I needed. No visitors at all allowed. I now have PTSD after becoming a mum and forced alone after giving birth.</p>
<p>My routine PN care was provided by my caseload midwives, again by the same two who provided my antenatal and intrapartum care. When I developed severe mastitis and ?sepsis on day twelve, they were easily accessible and signposted appropriately to inpatient services via labour ward triage. I was admitted to the PN ward with my baby and stayed for 3 nights. The staff there were kind, but spread thinly. Clinical knowledge of how to manage severe mastitis was inadequate among both midwives and medics.</p>
<p>No aftercare Left on own Ended up with mental health issues which continue till date</p>
<p>No one enquired about my state of mind or how I felt, and I never received a physical 6 week post-labour check, even though I had undergone a c-section.</p>
<p>One midwife visit at home. The rest trips to hospital having had c-sec plus idney transplant person having to travel to hospitals in the pandemic. Who was responsible for my babies and my routine check up was a battle between health care visitor and the GP. None wanted to take responsibility.</p>
<p>Post natal care for mother non existent. Medication not given on time. No caring or help with infe ction.[hospital name redacted for publication] dreadful.</p>
<p>Post natal care in hospital I found the midwives to be more opinionated, forceful at times. They lacked the "bedside manner" of prenatal midwives and often lacked empathy and emotional support at a very difficult time</p>
<p>Post natal ward was staffed by support workers who did not care at all. The midwives were lovely and helpful.</p>
<p>Postnatal care: no one responded when I rang the bell wanting help to pick up my baby after the emergency section. Finally when someone did respond they were rude and dismissive. I was promised pain relief and when it didn't come and I asked for it my husband heard the midwife laughing about me with the other midwives and then she came and told me that 'other women had had much more traumatic births' than mine and I shouldn't need any more painkillers. This was less than 24 hours after my emergency section. There was also no warm</p>

running water on my ward so I couldn't clean myself properly. 2. Home visits by midwives after birth (I had two). I had to ask them to take my bandage off at the second visit and she was surprised no one had taken it off or spoken to me about it before. They were also dismissive and unhelpful with breastfeeding.
Postnatal ward was very uncomfortable
Shared postnatal rooms are pretty poor standard. Good follow-up by midwives at home and then health visitors, but stopped too early w/o notice and difficult to get back in touch.
Shocking, there was no help with breastfeeding or with anything. It was very traumatic!
Since discharge from hospital I went into care to a local team and after the first few home visits no one cared to check on me or the twins
Some visits at home took place for both babies. When the midwives arrived they were helpful and knowledgeable. However as both M and N were recovering from the major surgery of C sections it is obvious that the service is very stretched and that the support is minimal compared with the service 30 years ago when my sons were born. We are in SW London and both babies were born at [hospital name redacted for publication]
Still going to therapy 2 years later to process the trauma of how inhumanly I've been treated. Forcing dads to leave is a decision which made a very hard time into hell for women (and midwives)
The midwives that visited us were with us for a very short time and always seemed desperate to leave. They didn't answer our questions properly and gave very generic advice on breastfeeding even though I told them that I was struggling with pain.
The midwives who visited me at home after I gave birth were also so kind and caring. They were the ones who picked up that my baby had an infection when the GP had said he was fine. If they hadn't picked up on this my baby could have become far more unwell. I was discharged from the midwives at 10 days postpartum but I wish it wasn't so soon after birth as the 6 week check up is no longer done for the mum by the GP, only for the baby, so I had loads of questions regarding postpartum but I didn't know who to ask. Naturally, GPs don't have as much knowledge after birth/postpartum as midwives so I felt either dismissed or like I was getting very general advice. I think it is terrible that the 6 week postpartum check is no longer carried out, I had to have an episiotomy and I had some incontinence after giving birth and felt like I needed more support but the GP said it was normal to be in pain 4 months postpartum and didn't offer any further advice. I organised a birth reflection for myself and the midwife was so helpful, she offered me a lot of advice regarding postpartum, breastfeeding and incontinence. She went through my entire birth notes and answered 6 months worth of questions in 1 hour. I also wanted help with breastfeeding but when I searched on the NHS website, it said there were no services available in my area. I looked into seeing a lactation consultant privately but it was £180 for one session and I couldn't afford it. I am now under the care of perinatal mental health as mental health issues I had in the past returned postpartum and I was really struggling. The therapist I see is amazing but it took over 3 months from my referral to see a therapist.
The neonatal staff who looked after my daughter - both at [hospital name redacted for publication] - were amazing. But the maternity care was pretty awful. I had to demand a side room on the post natal ward so my husband could stay when our baby had just been transferred to the NICU, as covid restrictions meant he was about to be kicked out. They took ages to discharge me so I could follow her to St Mary's. And when we finally got home the follow up care in the community was basically non-existent due to covid. Even though one of the main problems was her size, she wasn't weighed by anyone after the midwife did the 5 day check, and we've never seen a health visitor at all.
The post natal experience still makes me upset and I am completing this because I want people to understand how upsetting a lack of compassion is. The midwife who looked after me immediately after birth was lovely and I felt cared for. The post natal ward was awful. At

less than 24 hours after c section I was told that I wasn't doing well enough on breast feeding and baby was given a bottle of formula. I kept asking for support but every person told me something different. On midwife was told to stop helping me with feeding and get back to her real job. I was in for 3 days and I was frequently left with buzzer out of reach, people would disappear with drugs charts so I wouldn't get pain relief on time. My disposable pants rubbed on my c section stitches and the wound was leaking, I was left for hours in pool of blood. All this without having partner or family by side. I didn't complain at the time because we were all meant to be hailing the NHS as heroes, but it is very upsetting thinking about it. The staff would also moan about patients when they went to the toilet. No one ever came and told me what happened during section, I would just get whicked off to things like a scan to see if they had damaged my bladder and had to piece together everything myself. However, none of this compares to what followed. I had a fever from not long after I was discharged. Midwife told me it was probably hormones. GP said it was probably a UTI and gave me antibiotics (of course wouldn't see me because of COVID). I did not get better. Phoned maternity services who refused to see me because I had a fever. Sent me to A&E where I spent several hours. Was told I had sepsis and would need admitting but another doctor said that wasn't the case and that I could go home with antibiotics and to come to an outpatient appoint a couple of days later. I went back, by myself as per the rules, and spent 12 hours sat in a chair on an IV antibiotics drip, without my 3 week old baby. I was eventually admitted as I had an abscess in my womb. It later turned out it was placenta that hadn't been removed in the section that got infected. I was allowed to have baby with me and was put in the post natal ward again. But I wasn't well enough to look after her by myself - again no visitors to help me - so I reluctantly sent her home to her dad on the day when I had the procedure to remove the infected products. I didn't see my baby for 2 days because of COVID rules and this led to me believing my child doesn't need me. I still get upset about this. Obviously all this also had knock on consequences on breast feeding that I still feel guilty about. Like I didn't try hard enough, even though I was so poorly. I know I should be hugely grateful that I am alive and my daughter is alive. I think I just want someone to hear that the rules also meant moms didn't see their babies - not just that people were labouring alone. That was nothing compared to not being able to see your baby.

The postnatal care I received in [hospital name redacted for publication] was not only severely deficient but also demonstrated an alarming lack of empathy, kindness and regard for vulnerable patients. Following my caesarean section operation, I had no family support in the postnatal recovery ward. The policy was that no partners were permitted on the ward overnight, even immediately after a caesarean section. In our case, because my husband was caring for our then 2 year old son, we were told that under no circumstances were children permitted in the ward even during visiting hours in the daytime. We migrated to London from Australia in August 2019 with no family or close friends in the UK. The COVID-19 pandemic saw Australia's borders closed and Australian citizens were not permitted to travel abroad for most of 2020-2021. I had been advised by midwives during my pregnancy that even in the situation of a caesarean section, new mothers would generally be discharged within a day or so from the postnatal ward. In light of this advice and given our circumstances of limited support, my husband and I had decided in advance that I would seek the assistance of postnatal staff on the ward for the short time before my expected discharge. However, within 12-18 hours after the surgery, I was experiencing severe breakthrough pain from my caesarean section wound and also feeling dizzy and close to fainting when I attempted to stand up. Despite repeatedly ringing the buzzer to try to alert midwives, I was left crying in pain on my own for over an hour at various times because of delays in bringing me my pain relief medication. When I raised concerns about being close to fainting and feeling painfully bloated, these were not acted on by staff. Only after 24-36 hours following my caesarean section did doctors on the ward rounds notice ongoing bleeding from my surgical wound. 48 hours following my caesarean section I was returned to theatre for an urgent investigative

<p>laparotomy under general anesthesia. When I awoke from surgery, I was in excruciating pain. It seemed like I could feel every raw wound from the surgery. I yelled for pain relief but was left waiting several minutes while the medical team asked one another who had the morphine. As soon as I was administered a dose of morphine, I was wheeled out of theatre to the recovery ward without anyone waiting to see if the pain relief was sufficient. Within minutes I had to ask again for an increased dose of pain relief which then took more time as the midwife had to find the anesthetist to sign off on the medication. Upon entering the recovery ward, I could hear the sounds of a baby screaming. Before going into surgery, I had asked several staff members about options for my husband to care for our baby or for the baby to be discharged. I was told repeatedly that he could not come onto the ward if he also had care of our two year old son. I was also told that the baby could only be discharged together with the mother. I was so concerned about the care of my baby that I spoke with my husband about potentially withdrawing consent for my operation. However, we eventually agreed for our baby to be cared for by the hospital staff after we were given assurances by a doctor and midwives that our baby would be looked after by a dedicated staff member at all times and would be taken to the doctor's staff room where someone would be present at all times. When I came out of the operating theatre, a woman in the adjoining bay wanted to apologise to me because she had tried to comfort my baby who had been left screaming in the recovery ward. It transpired that while I was unconscious during the 2.5 hour operation, my baby had been passed between midwives and then left unattended in the recovery ward for 20-25 minutes. My baby was left in a distressed state in an open ward among members of the public in several adjoining bays who could access her. This was an egregious breach of the hospital's duty of care for a two day old infant that they had insisted on assuming whilst I was under general anesthesia and whilst her father was not permitted to care for her whether inside or outside of the hospital grounds.</p>
There was the Covid restrictions but I received calls, email from midwife
There were very limited appointments after birth and I felt they were rushed and not particularly caring.
They were non existent
This was fine as I was at home except that there was no way of having the Rnegative jab at home ðŸ
This was NHS after care. Impossible to see a midwife at home (after c-section with 3rd child). Impossible to contact anyone to get help - only one general phone number is advertised for the area covered by St Thomas' after care, and it is usually unmanned. I didn't get the crucial heel prick test or any checks. Eventually I found & paid for a private midwife to do these things.
thorough follow up for my C section and for my baby. I wish I was not sent too far from home for some checks for baby and wounded mother. Like in France, all woman should benefit from several, on site physio appointments (not just leaflets) for the pelvic floor reeducation.
Very good care for my baby but not enough for me. I had not been properly check at the 2nd month mandatory mum and baby visit which had led to issue with my episiotomy scars. Once again minimalist process from NHS lead to major errors
Very limited aftercare was provided. My small for gestation daughter has rarely been weighed and any help such as with breastfeeding I have sought out from volunteer organisations such as la Leche league as there are no accessible feeding cafes etc for me.
Very poor mental health support, no one seemed to know anything about available help. In the end I only got help 10 months later after my GP made the referral that the midwives should have made when the baby was born. In the end I was diagnosed with PTSD. Additionally, some of the midwives I saw in hospital and post-birth made me feel like a failure for having a c-section, even though without it my baby would have died. There was a lot of focus from them about how I should have another baby so that I could 'try again' for a

vaginal birth. It made me lose trust in them because it felt like their priority was a baby coming out of my vagina rather than me and my baby being healthy.
Very poor service and traumatic
Very tight space in ward. Visiting hours very limited. Bathroom was cold and outdated and they had a bath? Who was going to use a bath postpartum?
Visited for 5 minutes, and were desperate to leave rather than answer any questions helpfully

If you would like to tell us more about how the pandemic impacted your experience of maternity services, please use the space below:

1. Husband not allowed to come in when I was initially on labour ward (I had meconium in my waters and was contracting but because they were in the middle of a shift hand over I was left for 3 hours alone without my husband or anyone else looking after me). 2. I had to wear a mask during my emergency section (even though this wasn't the official guidance at the time) 3. My husband had to leave 1 hour after my son was born - I was traumatised and had experienced a horrible birth but was left alone with a baby on an understaffed ward with overworked and unpleasant midwives. 4. Husband had to abide by covid visiting hours so the rest of the time I was caring for my baby without much help from staff. I begged for them to discharge me and probably left hospital sooner than I should have but I couldn't bear it any longer.
After leaving the hospital no follow up was completed. I desperately needed breastfeeding support, there was none available. No HV came to visit; I had to give up feeding. I've had to have therapy for PTSD and now having another child I will have a planned C-section in order to have my husband with me at all times. It was an atrocious experience one where I was not listened to at any single juncture.
Also once I was diagnosed with gestational diabetes at 20w o never saw a midwife, I only had app with the diabetes nurse
Anxiety about whether birth partner would be allowed, not having partner allowed to scan appts
As per previous answer, I didn't have contact with a midwife during what was my first pregnancy for 11 weeks from 20 weeks. This was due to a miscommunication between hospital and community midwife team as to which teams were now doing which appointments. I was fortunate that it was a relatively straightforward and healthy pregnancy, but had there been anything untoward going on, I would not have been seen or checked. I didn't hear my baby's heartbeat from 20 weeks until nearly 31 weeks.
At scan appointments, my partner was required to wait outside of the building. At my first scan I waited for over an hour and a half. I have extreme anxiety around scanning, but was required to wait alone due to covid restrictions on partners in waiting rooms. This was very distressing.
Attending scans alone, spending many hours alone in hospital at such a difficult time was stressful, lonely and scary.
Being alone in hospital. Lack of help and services made things very traumatic
conflicts of communication for testing for myself or partner while no covid restriction was in place nation wide. I tested positive just after I came back home from hospital and had to delay important C section/newborn health check whilst there was no need or guidance to isolate anymore. I like that no visits were allowed. New family are in an precious, intimate setting.
Couldn't have anyone on appointments & only one person in labour day, no visitors - missed out on face to face appointments and contact during preg and after because of covid
Covid tests at inappropriate times, no face to face appointments, use of masks when breathing is already hard when heavily pregnant.

COVID-related rules and restrictions meaning that it was difficult to visit my baby in NICU and SCBU and I had no support while there (presumably it is usually expected that other relatives will support postnatal mothers who require extra support in these settings?) Understaffing and lack of support on postnatal wards apparently made worse by pandemic and total lack of visitors (I spent a week there) In labour, my partner not being permitted until a certain stage, requiring vaginal observations to ascertain - degrading and very stressful Having to attend scans alone - thankfully in my case all was well each time but it was still stressful to be alone..
Dad not able to support with appointments and stay after birth
Despite I would have wanted for my husband to be present at every appointment, I have to say that he was allowed in to the key scans.
Everything was basically the same as it was for my previous pregnancies the only was my husband wasn't always allowed to attend appts and scans and also the having to wear a mask rule was horrendous. The mask rule during the C-Section was the worse part.
Fewer services. Staff seem overstretched. Restrictions on labour ward were a major concern for me in late stages of pregnancy.
First pregnancy, nothing to benchmark against
Hard one to answer... maybe both positive and negative. Negatives include partner not allowed to come to all scans (just 1) and having to pay privately for initial scan. Plus not allowed at hospital appointments. Positively because it pushed me to consider a homebirth which was just amazing. Being able to have appointments at home including my partner was invaluable. And I wouldn't have made it to a hospital in time so really glad we had planned the homebirth.
Having to attend certain appointments alone was upsetting
Having to show negative covid test before being allowed into maternity ward when in active labour was quite stressful. Lots of uncertainty about what support I could have during birth until the last minute.
Husband not able to be by my side throughout antenatal, birth and postnatal experience.
Husband not allowed at 20 week scan or growth check scan. Husband not allowed at induction. Husband had to leave us after the birth when I was taken down to maternity ward - which we had not been pre-warned about. We were completely blindsided by this and just a few hours after giving birth this was a very emotional hit for me. I then did not see him until he was allowed to collect me (outside the hospital) the next day. It was hard not having him on the ward at all. The midwives were amazing and supported me as much as they could but obviously didn't have too much time to do so. I know for a lot of other women and families this time was much much harder than it was for me, but it was still tough for me
Husband not allowed to attend any antenatal appointments, having to wear masks constantly while pregnant. No visitors allowed after birth. Covid tests while pregnant
Husband not present for most of my labour. Couldn't advocate for me in labour which I think is where a lot of the issues happened
I do not believe this had anything to do with COVID-19 but all to do with race.
I feel like I missed out on lots of things that would have made this special time much easier and enjoyable
I feel that women and babies were not valued enough to make their well-being a priority. This will have a life long effect on my relationship with my son. I've been denied a peaceful bonding time with him and that will always leave scars
I felt that some of the doctors and midwives were not adequately trained or qualified to give the advice they gave. This may have been because of COVID and sickness during that time
I had no face to face antenatal classes as a first time mother I felt this was an important factor missing in my care

I just spent my entire pregnancy anxious about giving birth alone. It was terrible for my mental health. And in the end I did give birth alone, but for a totally different reason (the scale of emergency being so high). Because I did have to give birth alone, those appointments and scans became even more important. I wish so much that I'd been able to have my partner there with me.
I ultimately feel that I was safe but I think covid stripped away a hugely important support for me during labour and on the postnatal ward after the birth of my first baby in August 2020. Maternity services were also overstretched at the time and Apart from on the labour ward I didn't have anywhere near enough support from the professionals and this was compounded by not being able to be supported by my partner. I have detailed this in my answer to the antenatal services question (sorry!) but partners should not be excluded again. They are not visitors, they are essential supports- both emotional and physical- to women in labour and after labour. After birth the stripped down community midwife visits meant that my baby fell through the cracks with feeding and I don't feel I was given proper support with this either. Before I gave birth I was concerned that all of the medical literature seemed to acknowledge that women who are properly supported emotionally in labour have better labours and better births with fewer interventions, yet the covid policies meant that women would be very unsupported in labour. It didn't seem to be that anyone had balanced this medical risk against the other medical risk of covid and infection control.
I was lucky and my partner could attend most scans. But my midwife clinic [hospital name redacted for publication] made us STAND outside waiting for appointments.
I was lucky enough to give birth after COVID and the lifting of restrictions
I was lucky enough to give birth when the restrictions were being lifted. But the birthing center being constantly closed was extremely stressful I was extremely lucky the day I went into labour it was open only that one day during the whole week. When I was at the delivery suit after giving birth my partner had to leave to go back to work due to staying longer than anticipated I was left alone without any support extremely sick with also a sick baby and they would not let anyone come and replace my partner. While I was sick I was constantly getting tested for covid even though it definitely wasn't covid!
I wasn't allowed anyone to stay over the night after my baby was born and despite having a normal delivery a first time mom needs help for her mental stability
I would have liked my partner to be there at more appointments, on the night my baby was born.
In hospital for 5 days with a newborn without my partner to help. I'd had a c-section. Midwives were too busy to assist. It was awful. Everyone in the ward was in the same boat. We did our best to help each other.
It was a disaster compared to my 2017 pregnancy.
It was very hard to attend appointments alone. Particularly going into triage alone with reduced feral movement. Without my partner there I felt lonely and anxious.
It wasn't the best, from a selfish point of view I would of like my mum and partner with me during this time but only one so my mum stayed with me. But at the same time it perfectly understandable to have these rules and I am glad they were in place, it was just unfortunate myself and others during this time probably didn't get to have the full experience
It went from worse to even worse. It allowed the hospital to operate a "no husband no witness" policy - next time I will be recording all conversations
Lack of staff was apparent throughout my pregnancy and delivery. My partner was also not able to come with me to all of my appointments. In the delivery rooms, there were seating for partners
Left alone in maternity ward nobody was allowed to enter

Little to no care at all. Left on my own with my baby in a room following the birth of my daughter, who was born by c-section. I was discharged after less than 24 hours but was desperate to go home as I was receiving no support in hospital
Most things that happened during my delivery wouldn't have happened if my partner was with me, because he would have fought me for me to have proper care.
My baby had to go into NICU and my partner couldn't stay with either of us and I couldn't have my parents to visit which was upsetting.
My husband could not be part of our scans
My husband couldn't be part of any appointments. I was nervous and it was his journey too and he missed out.
My husband couldn't stay during the night
My husband had to wait in the car, as my waters broke. Then when he came in and was asking questions about what happened, the consultant was very agitated having to explain what happened.
My partner could not stay for the night with me and the baby when we need him the most
My partner couldn't come to my antenatal appointments and when birth planning I could only have 1 person with me.
My partner only allowed to attend scans, had to wait outside the hospital until our allocated time. Limits on visitors once given birth was fine as only there one day but when I was rehospitalised was difficult as it also put a lot of pressure on my partner when we were trying to adjust to having a newborn.
My partner was not allowed to be present except for the final delivery stages and could not be present in the later scans .
My partner was unable to attend any of the appointments and I had to attend alone. It was scary and upsetting
N suffered a miscarriage during the May 2020 lock down. She was bleeding heavily and losing the baby. They drive to [hospital name redacted for publication] and my son had to sit in the car park while N was treated. Traumatic
NHS staff took the back seat to used/using phone consultation service to avoid clinic visits. Some diagnosis required face and face consultation for me and by baby.
No concrete advice on the vaccine in pregnancy. No clear path for who to contact post birth et .
No specific impact
No staff Partners from same household made to wait outside in corridor for some appointments
No support from my partner at appointments
Not having a partner during antenatal visits, not having visitors after giving birth while in hospital for a week due to sepsis to both myself and baby, GPs being so overwhelmed with cases that they don't ask mothers how they are or give them a physical check to make sure they are recovering well.
Not having partners allowed at scans was a bad decision I feel as it was unnecessary and unfortunately the guidance changed after I had given birth. Also not having partners allowed in the waiting room at labour stage was another bad decision given that you already live with your partner and they are allowed in the birthing suite with you anyway. It meant I ended up giving birth alone and my husband was called in to see me afterwards and then I was given a room.
Only thing was partners could not attend appointments with me But I was not upset taking the pandemic we were going through
Other patients refusing to wear masks in the hospital was stressful and worrying.
Partner unable to come to scans and appointments. Partner unable to take me into hospital to be admitted. Partner made to leave very quickly after birth. Lack of midwife visits at

home. Made to attend clinic by myself (with baby) the day after returning home. I needed more support.
Partners and children couldn't visit or come to the ward after baby was born.
Please see above responses regarding face to face appointments and triage.
Please see previous answers - the negative impact is ONLY in relation to the postnatal care after we returned home.
Pregnant women were treated badly. Partners & other children excluded for no good reason - sensible precautions could have been taken rather than a blanket policy of non admittance.
Restrictions on partner attendance at appointments and visiting hours.
Restrictions on partners attending antenatal appointments were difficult, but the main thing was the post-natal community care, which has been basically non existent. Despite having a very traumatic birth and my daughter being transferred to the NICu at [hospital name redacted for publication], we've had no follow up from midwives/health customs at all, and our GP seemed to have no idea what was going on whenever we did see him. The join ups between services have been terrible and no one will actually come and see you for any sort of support:follow up
Restrictions prevented support from my husband and doula, both of whom I wanted quite badly. Also I found nurses and midwives avoided spending more than bare minimum time with me during and after birth
Services were not offered or not in person. Having to attend appointments alone even when difficult decisions needed to be made
Staff seemed stressed and under pressure. Partner had to leave after 30'mins and was left on a ward unable to move as I had had an epidural and baby crying next to me.
The antenatal classes weren't being run by the hospital even though there was no longer a lockdown. Therefore, the only option was private antenatal classes that cost hundreds of pounds and we couldn't afford. I would have really liked to attend some form of classes as I felt a little clueless going into motherhood. Aside from this, everything else seemed to run smoothly. I had to have a covid test before giving birth but I was fine with this and it wasn't an inconvenience. I caught covid during pregnancy and the care giving whilst I had it was excellent. They had a dedicated covid midwife who answered all my questions, was very compassionate and checked on me regularly. I was pretty poorly with covid and obviously worried for my baby, I really appreciated the support and reassurance she gave me.
The appointments being over the phone, dad can't come in the scan
The only real impact was restricted visits post natally in hospital but I did not mind this.
The pandemic had serious impacts on my maternity experiences in [hospital name redacted for publication]: - In May 2020, I found out that my baby had no heartbeat from the 12 week scan at the hospital. My husband was not permitted to attend the scan with me because this was during the initial lockdown in the UK. I had to ring him to tell him the news and then I had to walk to a different building / ward to see a doctor on my own for further medical advice. My husband came into the waiting area briefly to see me and try to comfort me, but he was immediately asked by staff to leave. - When my baby was born in June 2021, the pandemic restrictions had been relaxed but the hospital's COVID-19 policies were still in place. This meant my husband was unable to visit me in the postnatal ward in the evenings/nights or even during the day while he was also caring for our two year old son. We tried explaining to the matron that we were isolated due to the pandemic as our family could not travel from Australia to support us and we did not have a strong friends network given we arrived in London only 6 months before the pandemic began. However, we were afforded no sympathy or flexibility for our difficult circumstances. Due to this inflexible application of the hospital's policy, I had no one with me for support when my pain medication was delayed on many occasions by hospital staff and I was left in severe pain repeatedly. I was also forced

to leave my baby in the care of hospital staff who neglected her while I was in surgery under general anaesthesia for 2.5 hours.
The restrictions left me totally isolated, no support from my partner, labouring alone for hours and left to look after a new born baby while I was waiting for a blood transfusion. Midwives were too busy to help. I couldn't get a drink or have a shower after giving birth as no one had time to help me and my husband wasn't allowed in to see me. Absolutely awful and something I will never forget
There were not many restrictions, besides some testing. My mother couldn't visit which was harder on my husband who had to then stay with me the whole 2-3 days instead.
Think some of the rules went too far, but also exceptions were made for some patients who were most vocal instead of in most need.
Treated like a unit of infection. Restrictions were absurd and disproportionate and they knew it
Understaffed services, staff under pressure, having to be induced on antenatal ward alone, husband only allowed to be with me in visiting hours, I was there for 5 days with a failed induction alone, partner only allowed to stay for one hour after C-section, I was traumatised, exhausted and alone with a new baby as a first time mum, with a baby I couldn't pick up. It was terrifying and lonely. I was discharged less than 24hrs after emergency C-section. I was not allowed my husband in recovery to hear the information I was given, I was too tired to take this in myself so I left with no confidence in my ability to care for myself after surgery and remember the instructions.
Visiting was restricted from something like 10-8, apparently due to covid. I was grateful for the prolonged 'visiting' afforded to the father of my child, but can't really see why the hours from 10-8 had any bearing on covid transmission. It was quite strictly enforced to the degree that my husband wasn't allowed to come back after 8 to help me off the ward, so I left 24 hours post caesarean hobbling down the corridor with baby and bags alone. Bizarre but could have been much worse.

If you would like to tell us more about your experience, please use the space below:
Because my friend is a midwife I had done a lot of research and had a lot of conversations with her about my options which I wasn't getting from my antenatal midwives. I felt that because I was informed and I had made informed choices based on evidence staff were annoyed because I had picked something other than what they had wanted me to, such as wanting a homebirth, so I'm not sure if its discrimination or dismissal.
Being young and pregnant I was not taken seriously I was having a meeting with a psychiatrists, perinatal and a midwife about my birthing plan I made three birthing plans based off of the most ideal to worst case scenario. I stated that I did not want an epidural that I know my own pain threshold and I know I do not want one I was told that I would need one that it should be on my birthing plan because I am going to need it that I won't be able to give birth without it and that I could be in labour for hours even days they kept on saying I am going to need it I refused and said if I want it during the time then I will but currently it is not on my plan and I intend as of now to stick to that. They also said that I should consider giving birth in the delivery suit and not the birthing center as this is my first child a lot could go wrong and labour could be long I refused again. I was then later told that I was released from those services due to refusing help all because I knew what I wanted and stood up for myself.
Even though I am from an ethnic minority and speak English as a second language I was treated with redirect at all times
Generally I feel services are not adequate in areas with high levels of BAME people. I work at [hospital name redacted for publication] and have heard about racism and experienced it

<p>myself. It feels like staff and patient safety comes second to finances because it's mainly lead by middle class white managers who don't care or understand the population that come to the hospital.</p>
<p>I am a white middle class woman. I didn't experience discrimination. But why would I. The question should have asked whether I witnessed it, and I did. As I explained in response to previous questions. When English was a second language people were treated as an inconvenience and confusion ensued.</p>
<p>I am of Chinese ethnicity, although I am an Australian citizen and English is my native language. During my admission for approximately one week in [hospital name redacted for publication] for the birth of my baby in June 2021, I repeatedly experienced condescending and dismissive attitudes from staff. On some occasions, if I responded sternly and advocated for my position in an articulate manner, their attitude and demeanour would soften. However, this was not always possible given I was often in a vulnerable state, whether being in severe pain or exhausted from caring for a baby immediately after major abdominal surgery. Having experienced over racism and micro-aggressions for much of my life, I have no doubt that these condescending and dismissive attitudes I experienced from hospital staff was initially on account of my ethnicity; this was all the more apparent given the change in attitudes once it was clear that I speak native English and can advocate for myself.</p>
<p>I decided not to have the card vaccine through pregnancy and one midwife during antenatal wasn't very supportive of my decision</p>
<p>I didn't feel discriminated against but I am a white British women and English is my first language.</p>
<p>I don't think I was a victim of discrimination</p>
<p>I feel like my race changed how I was treated by midwives. My other (white) friends who used the same hospital for treated differently.</p>
<p>I feel my daughter was assumed to be severely disabled due to her having a brain condition spotted in scans from 20weeks. In reality we are very grateful that she is thriving at 18months with no developmental delays whatsoever.</p>
<p>I felt ignored and when I told the nurse I was in extreme pain I was left to wait for an unacceptable time. Perhaps my race played a part of it but there was a lack of empathy I feel which is surprising given that the main priority of the nursing staff should be care and attention.</p>
<p>I felt that because I don't fit into a minority risk category, any fears I had about my pregnancy were simply dismissed.</p>
<p>I have a severe hearing loss and I need to lip read often, everyone wearing a mask really hindered me as I was constantly asking for them to lower their mask and the majority of the time staff were not happy to do it. I also wear a mask myself that states I have hearing loss and need to lip read, even when I pointed to my mask to make staff aware it was sometimes a problem. The worst times were the security staff that would make me wait outside until they got permission from somebody inside as I refused to change my mask as I wear it to show my disability. I felt I was being discriminated every time I attended an apt. It wasn't until they had the same security guard on the door that the situation improved. Everyone needs to learn that not all disabilities are visible</p>
<p>I have had 5 children, I have never felt so disregard or devalued during my last pregnancy. I felt like I was discriminated because I am a black woman. I can see how the rate of black mother's during childbirth is disproportionate to other races. I felt like even some of the black midwives showed signs of discrimination and disrespect.</p>
<p>I think if I was white my husband would of been allowed to stay with me for longer as was the experience of my other friends. Being allowed less than 1 hour was not the same experience as other mums I knew. He feels he was discriminated because he was black. I feel I wasn't listened to about my sepsis because I was black.</p>

I think treatment was unfair but I wasn't discriminated against - was rubbish for a lot of people!
I was a first time mum at 22 and some midwives implied I didn't know what I was doing because of my age
I was discriminated against on my belief system (Article 14 Unchr) I'm treated less favourably due to my wish to birth simply without unnecessary interventions That is seen by managers as a risk that they want to reduce instead of work together in partnership with me as a consumer
I was frowned upon due to accessing private maternity services. I found out that Private clinics were allowing partners to scans when the NHS refused to do so. It was apparent that if you could afford to have a private scan you could have the support of a partner or loved one. What a terrible divide.
I was treated like dirt the whole time.
I wasn't taken seriously when describing the pain I was feeling. Not just contractions etc but before when I was describing the pain of having an IV - all my veins had collapsed from severe dehydration as I was sick so much during labour. This added quite a bit of stress and multiple nurses and phlebotomists weren't able to help until a senior nurse came. I felt like the pain to get this sorted wasn't taken seriously
Local midwife services.
Lots of maternity service were not available/closed in the pandemic. Example dental care.
My waters broke or were broken during a swab and from then on I had doctors trying to persuade me to have a termination, even though I wanted to do conservative management. The next day, I had 3 doctors come in to the room and ask me if I understood what was happening and even when I told them I did understand, they proceeded to slowly explain to me what had happened as though I was a child or had a learning difficulty.
N is of Korean heritage but brought up and educated in Kingston. She was spoken to differently when my son was with her at appointments to when she was alone
Please see previous answer regarding labour experience.
Postpartum - I think GP dismissed me because I am female and a first time mother. I wasn't listened to or taken seriously despite the fact that I was severely ill.
The 2 births out of 3 we're negative experiences for me which I believe was due to my race. Unfortunately there are not enough BAME midwife's and I was seen to by Caucasian midwife's on each occasion.
The night staff in the postnatal ward were extremely unprofessional; however this was not discrimination as all patients were treated badly.
The nurses were kind ,polite as always. I have 4 babies and the score for all supervision and care is A++.
The restrictions for maternity services were discriminatory
They denied me access to care, this led to me losing a child for the second time. What more is there to add?
This could be just because of how I was feeling but as soon as I was put in the post natal ward I felt possibly because of my age (37) I wasn't a first time mum so I should know what I am doing. If I asked for anything I felt like such an inconvenience, or they were rolling their eyes at me. Again it could just be hormones but regardless that's just how I felt and I didn't enjoys being there
To an extent. I was in a private room in the birth centre as I was in the birth pool. Initially, it was just myself and the midwife. I was playing Jamaican gospel music, as It provided me with comfort and support (for religious reasons and it provided a sense of cultural familiarity in a setting where I felt alone - my birth partner was not present at the time due to COVID restrictions). The midwife sighed and stated that she did not like the music and asked that she turns it off. However, as previously explained, a Caribbean nurse entered the room and

provided me with a great sense of support (holding my hand, speaking words of encouragement, advising me on how to embrace the contractions, etc.), remained throughout the remainder of the labour and provided a sense of balance which resulted in a good experience overall.

Unwanted comments and treatment from staff

When I was having some pain during my third trimester, I walked into the triage. Once satisfied that the baby was fine I declined a medical procedure. The senior doctor in charge made some hurtful, disrespectful comments and was being a bully. I hope the doctors understand how sensitive pregnant women can be especially those who have dealt with infertility

How do you think maternity services in London can improve?

- Better working conditions for staff. Work on midwife retention so that existing staff members are less stressed, hopefully less burnt out and so kinder to patients - Improve postnatal wards. I, and many other women I have spoken to, would describe them as "hell" - Please stop turning women away in labour who "are not dilated enough" - particularly in London many women will have travelled in a taxi or even on public transport and have nowhere to go nearby. One solution for this could be a doula-led earlier labour area - I think this has been trailed by some hospitals

1. Continuity of care. I did not see the same midwife once and had 3 different consultants, only seeing one consultant twice. This meant I didn't get to build any relationships with midwives which I think would have improved my antenatal and birth experience 2. Antenatal ward. The antenatal ward where I was induced was far too understaffed which I think was dangerous as the times I was given painkillers wasn't kept track of and I had to wait a long time for antibiotics after my waters broke. The poor midwife was very stressed and needed support. 3. Group B strep. The wrong antibiotics being given could have had very serious consequences for my baby. It is well known that group b strep is dangerous so this should have been triple checked. 4. More support postpartum. There should be far more support postpartum than what is offered. It seems far too soon to be discharged 10 days postpartum, especially after an assisted delivery. I also really struggled with feeling low (baby blues) and having the midwives over for the two home visits really helped. The 6 week check must take place, especially if you have had an episiotomy/tear or assisted delivery! There also should be more support with breastfeeding as breastfeeding rates are so low in the uk. I only had the option of going private which I couldn't afford. Additionally, GPs don't seem to have enough knowledge to support women postpartum as they are not specialised in this area. It takes far longer than 10 days or 6 weeks to recover from giving birth.

A 3rd trimester scan is important!

A lot depends on the midwife you have, overall [hospital name redacted for publication] is a good 3rd

Actually continuity of care. Seeing the same midwife. Using informed consent - not just telling women what to do. Seeing women at home as well as in clinics. Better breastfeeding support postnatally.

Aftercare staff need a shake up. Women should be visited more at home after delivery not made to go far and attend appointments. Women should be under the care of midwives more than 10 days when they had had a C-Section.

Allow partners to be involved in pregnancy appointments and allow +1 visitor if a new mother is hospitalised following birth. Review staff who work night shifts.

Appropriate levels of staff would allow mothers to get adequate support before, during and after labour. The midwives seem exhausted and rushed off their feet. There is so much that they can do when they are pushed to their limits.

As ever, please invest far more money so hospitals can train and recruit more midwives. They do an incredible job looking after us all - but they cannot do it all and they are too stretched.
Attention to detail when inserting cannulas into arms. I got cellulitis from that. Having a good bedside manner can make all the difference when a woman has been through a traumatic labour/birth.
Better join up between services, listening to mums and their partners, but mostly they just desperately need more staff and more money. We were very lucky our baby wasn't seriously injured/didn't die, but others will not be so fortunate. I won't have any more children not because I don't want them, but because I can't risk London maternity services again.
Better postnatal care
Better provision of homebirth services, with dedicated team in each hospital
Better staffing. If we go into covid restrictions again then allow partners to stay with us
Better support post birth
Better trained and compassionate staff. I'm sure there are lots of good nurses but the care is very inconsistent it seems and I've heard of lots of disparaging and experiences from friends when it comes to maternity services and the after care.
Better training for post natal teams. Women are often at their most vulnerable at this time and more compassion and less opinions would be great
Better triage between health visitor, midwife and doctors. Same midwife throughout the pregnancy. I saw 6 different midwives.
Birth partners allowed at all scans and all stages of labour, birth and postpartum Longer midwife care postpartum - GPs lack the specialist knowledge and skill Better 6 week postpartum check for mums More staff in hospital and home births. Staff ratios are dangerously low
Breastfeeding should be encouraged and formula feeding if required should only be done using cups. No bottles should be used as these create confusion. Doctors and midwives should also aim to be more polite and understanding
By centring the family at the heart of services rather than the services being placed ahead of services. This WILL require greater investment in staff, both numbers and training.
by Digitalisation, i.e. introducing one frontend and backend solution (app), so the pregnant be able to track, communicate with doctors, be notified about pre and post natal care (e.g. child vaccination)
By ensuring there is more diversity in the workplace.
By listening to the clients concerns more and looking properly at the clients notes
Clearer outline of maternity services available le post birth. I think postnatal support is lacking and unclear.
Communicate better through each stage of labour and to birthing partners. Include birthing partners in decisions.
Ensuring parents respect the night rest needed for all whilst in the post-natal bay. There should be rules/ a firm chat from staff to partners and mums regarding use of phones, videocall with no headphones etc and general loud behaviour at night in the bay. Staying about 24 h in the hospital when all is good for a C section is too short. The mother can NOT take care of her baby in these conditions, let alone go home and deal with heavy post surgery wounds. We should be sent home after a minimum of 48 h even if all is good.
Ensuring the mother receives all packs and is free to ask any questions or concerns she may have.
Even more midwives led. Increase single-bed recovery rooms. Allow partner to stay overnight in decent conditions (a bed to avoid sleeping on the floor) Provide food to both the mother and the partner.

From my experience looking at theatre team availability for emergencies and elective procedures should be looked at urgently. A hospital doing 3-4 elective sections a day needs a full second theatre team every day.
Full continuity of care More home visits
Funding and training of additional staff
Funding! And stop focusing on reducing the number of sections - I am sure that this put me and my baby in danger. Also more focus on postnatal care - mine at Lewisham was appalling.
get more experienced trained staff
Greater collegiality, fostering an environment of support and learning where all people are respected whether that is the junior midwife, or the mother.
Greater Kindness Listening Engagement with individuals and the community Management need to get to the coal face and work with their staff who are trying to give good care but often not allowed Provide skilled birth practitioners for all home birth including For twin babies For breech babies And their families Increase staff training in breech Eg. Molly O'Brien and Beech without borders.com provide this training
Greater postnatal support (mental and emotional).
Healthcare professionals need more compassion and to listen to what patients want
I do think staffing levels are a concern. It would be great to have what the homebirth team could offer across the board including a dedicated midwife to your case. More support with feeding and tongue tie after birth could be so much better. We got such different advice from each person and it was very stressful.
I feel there is such a big difference in treatment towards mothers between antenatal ward and postnatal ward. there is such a focus on post natal depression that I feel I am not surprised some women suffer from depression soon after as it really is depressing at some postnatal wards. You feel neglected, stupid for asking any questions, exhausted from labour, no one to help or show you how to do things and you end up feeling useless and depressed but you have a newborn to now look after so you just have to figure it out yourself as there is no help available. I also understand in a perfect world there would be more midwives and not overworked but I do hope for some change
I had excellent care so can not think of anything
I hadn't used the services before the pandemic but I imagine they were better before with more face to face appointments.
I honestly don't think they could of done anything worse in our situation, so that's a good starting point for improvements. The worst thing for me, was being torn apart as a family when I needed that support more than ever. My husband lost precious paternity leave, whilst he was not allowed to be with me or his newborn son. I felt like a failure from the beginning as I couldn't reach my son or feed him responsively because I couldn't move. Services need to put the needs of women before the needs of staff or infection control.
I hope that my experience was particular to a very specific time in the pandemic and that the issues I described wouldn't be a problem now, given we're two and a half years into it.
I recognise that there are resource constraints (staff as well as beds), but after delivery there seemed to be premature talk about discharging me even tho' I was a first time mum and had had twins! I think a little more consideration rather than the mindset of churning people out.
I think having more than just a helpline post partum for one month as it doesn't help if you need assessing as you still need to attend a and e.
I think that there needs to be more aftercare in hospitals and that this would lead to less problems after giving birth, particularly when it comes to breastfeeding
I think there is a culture where you are just meant to be so happy you didn't die and your baby didn't die that you cant possibly complain to the hospital because others aren't so lucky. It would be good if that could change

I think there is massive disparity across the capital. I received amazing care and saw the same midwife during my pregnancy and birth, but this isn't the same in many other boroughs
I understand that there is a huge staffing crisis for maternity services nationally so it seems hard to implement any proper changes without addressing this. Ensuring that covid policies are never repeated would help. Providing continuity of antenatal care would help and being honest with women about whether this is being offered.
I unfortunately that they are extremely understaffed and overworked. But I feel like there was no care or passion from the workers I had negative experiences with. The midwives that helped me give birth were so passionate about what they were doing and the ones I had experienced on the ward genuinely treated me like I was a burden on them I felt uncomfortable. More investigations need to be done and people higher up need to be taking a closer look at how staff are treating patients.
If the pregnant women can have some scans
I'm a mother of 5 I didn't feel listened too. I felt that as they are the professional my feelings weren't taken into account.
Improved postnatal care - allow partners to stay overnight as there are not enough midwives to support. Improved breastfeeding support.
Increased staffing, increased training (basic midwifery skills refreshers), better EDI training, universal training from Birth Rights organisation (particularly for obstetricians)
Involving the other parent early on - they are on this journey too. Could they attend all appointments, or make it the norm for them to do so?
It can't until there is more representative management across the board at hospitals. You can have a black director of midwifery's but if the whole chief nurse structure is made up of close to retirement age white women it will make no difference.
It's such a broken system! too hard for me to just answer something meaningful here
Less people inexperienced
Listen to individual needs of mums and dads! Mothers rely immensely on their partners for mental health support.
Listen to pregnant women more, more continuity of care.
Listen to women! More, regular, check ins - it was a lonely time to be pregnant / with a newborn Better staffed post-labour wards
make everyone pay for maternity services
Midwives should be passionate about all forms of birth and not just vaginal birth. Government needs to sort out the staffing levels - it is frightening for pregnant people to hear about the lack of safe care.
More breastfeeding support in hospital
More care. More communication. Sensible & proportionate restrictions if required.
More continuity of midwives in the pregnancy clinics.
More continuity teams. I knew that at each appointment I would see one of five or six midwives. I often saw my named midwife and I also had one of the team of midwives attend my homebirth.
More midwives and better trained support staff on post natal wards. I was appalled by the standard of patient care on post natal ward
More midwives and more training given to midwives about how to deal with patients. It may be just another day at work for them but for us it is the biggest day of our lives. I feel if someone had taken the time to show me kindness and ask if I had any questions about my traumatic birth, my mental health may not have suffered so badly
More midwives on labour ward, more breastfeeding support, reduce tongue tie waiting list time
More midwives. Better post natal care

More money and more staff so they feel supported and can provide a better experience - listen to the people on the ground on how they can make improvements
More NHS staff to be able give time and care to pregnant women during and after. GP to be given more responsibility in maternity care.
More nurses to ease the pressure on the staff
More staff, esp on weekend so people like me aren't just left
More staffing and not labelling women with potential risk but rather waiting for something to arise. I had no choice in regards to my birthplace, I wanted a homebirth, no staff. okay birth centre, shut no staff. the only place I didn't want, labour ward. This does not aide the physiological labour as all this stress and lack of control effects the hormones of labour and then you get into labour ward in a sterile uncomfortable room which also doesn't help the labour hormones - had I not stayed at home until 7cm I don't know if I would have progressed so well especially as a first-time mum in this environment.
My experience of NHS maternity services in London was beyond appalling and far below any expectations could be had for a first-world, supposedly leading medical system. I would recommend NHS maternity services to absolutely no one. The system's problems are profound and alarming. Some basic areas of improvement are: - There needs to be actual continuity of care such that patients' holistic wellbeing and medical needs are properly assessed by medical staff who know them, rather than being given cursory, generalised advice in rushed appointments. - Under no circumstances should hospitals be assuming a duty of care for infants unless they are actually in a position to provide a safe environment with proper care appropriate for newborns. - The standard of medical advice provided by junior doctors needs to be seriously improved. I attended several appointments with junior doctors who could do no more than read off basic pamphlets or two-page information documents they found online during the consultation. They demonstrated a profound lack of awareness of critical issues that might be relevant for a patient and were instead only prepared to cite standard lines regarding general risks etc. - The staffing structure for the postnatal ward is seriously dysfunctional. Midwives were allocated to far too many patients and were therefore always rushed or busy when called. Basic aspects of care such as providing routine pain medication following surgery were neglected because midwives were too busy. It was unclear why such simple tasks could not be assigned to other staff in order to free up midwives to provide other aspects of much-needed care and to avoid pain medication constantly being delayed.
N/A they are perfect.
Need more staff and better training on how to treat patients as people with feelings. How to be efficient and caring.
Offer more midwife appointments.
Overall it was good some improvements could be made but overall had a good experience and have heard others in other areas having bad experiences so I am thankful it wasn't bad just could have been better that's all
Patients need to be listened to. If staff are tired, they shouldn't be allowed to work. Staff need to hold their colleagues accountable when they see them doing or saying something wrong. They should treat patients equally. They need to show compassion.
Personally, I think it should be made much clearer that it is a woman's right to opt for a c-section and it should not just be assumed she will have a natural birth. (My first child was a natural birth and it was the wrong decision for me). I also believe women should be given more information and be less judged or pressured into what they chose to do or not to do during pregnancy. For example, I was honest about having the odd glass of wine and because of this treated like I had a drinking problem (which I clearly don't).
Post care for sure
Probably booking less appointments per day to avoid long waiting times.

Quicker and easier referrals to early pregnancy units when things go wrong. Actual maternity services are great. When experiencing a miscarriage, the lack of join-up between my GP, Maternity Unit and A&E was harrowing when I felt at my lowest and just needed compassion and an easy referral route. I know lots of people who have had similar experiences.
Return to local care with midwifery service in [hospital name redacted for publication].
Sack the midwives who are members of ARM or who have refused the covid vaccine. Let women see real doctors if they choose to. Ensure women who want pain relief or ELCS get it....in line with the actual guidelines. Allow women to have a partner with them to all appointments to take notes so staff are held to account and trust can be established
Security
Sort out after care. Properly fund it, but also make it easier to contact a midwife/anyone who can help during the days after birth. That should not cost a lot of money to do and I suspect the absence of a proper contact number/email address has been done for staff convenience (to avoid fielding calls) rather than with worried/desperate new mothers in mind.
That hospitals and doctors to share information better and have better places and resources for midwives.
The disconnect between hospital and community care needs to be addressed. I had complications during pregnancy that required medication. The hospital sent a letter to my gp who then sat on it and didn't provide speedy prescription. Surely there is a better way of doing things
The government needs to provide more funding to the NHS as a whole, and prioritise midwives. Include women, including those from vulnerable and minoritised communities, in decision-making bodies so as to ensure their needs are prioritised.
The impact of workforce issues and under-staffing has clearly affected service users, so this is a key area to address. While there are many large hospitals in London, there are few standalone midwife-led units open so choice of setting is restricted: home birth services should be maintained too, as many women have felt more comfortable away from a hospital especially during the Covid outbreak. Enabling partners to be with women in labour and postnatally is essential, in particular when postnatal wards are understaffed, which is a widespread situation. Although continuity-of-carer models of practice are not always possible, care can be improved by clinicians reading notes and being aware of history. Women are often faced with difficult decisions in late pregnancy about induction, mode of birth etc, and they must be supported and given time to reflect before consent is given for an intervention. Finally, reducing the inequity of outcomes for women living in deprived areas is absolutely crucial. Food & fuel costs are due to be catastrophic for some families; London is an expensive place to live: signposting women on lower-incomes to sources of help and treating them with respect is part of a caring and functioning service.
The NUS needs more staff, and all pregnant women should see a obstetrician at least once, specially if they are high risk.
The quality of service should always have an experienced midwife. One that understands the needs and care of a woman of any race, giving birth
There needs to be a proper review of the impact of the night staff who are generally of a lower standard then the daytime staff. The CQC refuses to do an unannounced visit.
There needs to be better continuity of care and better communication. The midwives' handovers between shifts were poor. They weren't reading my charts and would ask me when I was last given medication and I would repeatedly have to tell them I was an asthmatic and not allowed one of the blood pressure medications they were administering. On the one day I was preoccupied and didn't remind them- they administered the wrong one and I took it, which caused a lot of upset and anxiety.
They need more support and funding. More incentives for new staff.
Treat people like humans not cattle

We need lots more midwives and drop in clinics with health visitors etc and they should have a manageable and consistent caseload. I do not believe the negatives in my experience is due to staff not wanting to help but just having too much to do.
We need more midwives and increased training for those midwives.
Yes absolutely. More staff on wards to reduce pressure on maternity staff especially antenatal ward, more awareness of psychological impact of being on a ward alone