

PARENT SATISFACTION SURVEY 2007

INTRODUCTION

The National Neonatal Audit Programme recommends that Neonatal Units carry out a regular survey of the parents whose babies were cared for in the neonatal unit. The network Research, Development and Audit (RD&A) Group proposed that a survey of the parental experiences of the service be carried out among all the neonatal units within the Staffordshire, Shropshire and Black Country Newborn Network (SSBCNN) from the 1st April to the 31st May 2007. The questionnaire used for the survey was originally developed by the West Midlands Neonatal Forum, and had subsequently been used by the Central Newborn Network (CNN). The CNN questionnaire was amended slightly by the SSBCNN RD&A group and approval of this version (Appendix 1) was obtained by BLISS the premature baby charity who had also approved the original version.

AIM

The RD&A Group wanted to know the strengths and areas for further improvements in the service provided by neonatal units in the Network for domains that are not captured by the MANNERS data collection system.

OBJECTIVES

- To explore the 'experiential' aspect of quality
- To gain a parent's perspective on their experience on the neonatal unit and provide a measure of 'satisfaction' levels
- To evaluate outcomes and compare responses between neonatal units and networks
- To raise awareness within neonatal units of parents experiences and needs
- To highlight good practice and make recommendations to improve support for parents and improve their experience on the neonatal units in Network

METHOD

Parents whose baby(s) were being discharged during April and May 2007 from the six neonatal units in the network were provided with the questionnaire a couple of days prior to the intended discharge date with instructions for where to return the completed questionnaire (either sealed boxes on the neonatal unit or stamped addressed envelopes direct to the newborn network office). Parents were reassured about the anonymity and confidentiality of their answers. At the end of the audit period all the returned completed questionnaires were sent to the Newborn Network office for collation and data input.

RESULTS

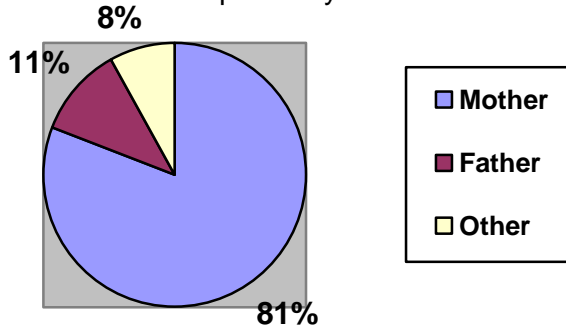
As the overall number of responses is low the overall results for the network are given in the main body of the report. For a break down of the results per unit see appendix 2. For a full list of qualitative statements for each unit please see appendix 3.

Number, Age and Gender of Respondents

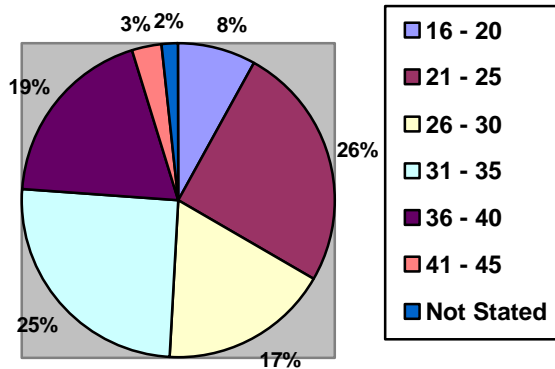
From the 1 April – 31 May 2007 287 babies were discharged from the neonatal units in the network, there were 20 sets of twins discharged and one baby was discharged twice, therefore 266 families should have received the parent experience questionnaire to complete during the time frame of the survey. The survey questionnaire was completed by 63 parents (range 3 – 18 respondents per neonatal unit) giving a 24 % response rate.



81% of responses were completed by the mother.

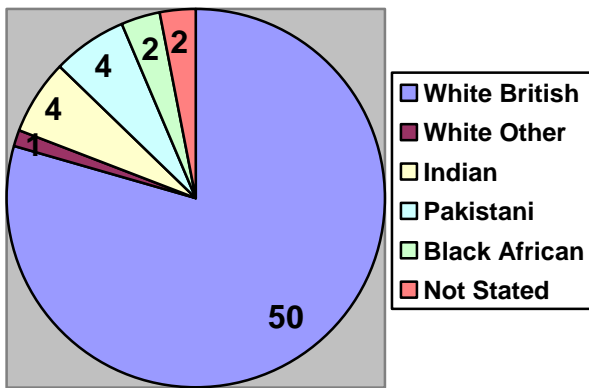


The majority of respondents were between the ages of 21 and 35 (68%).



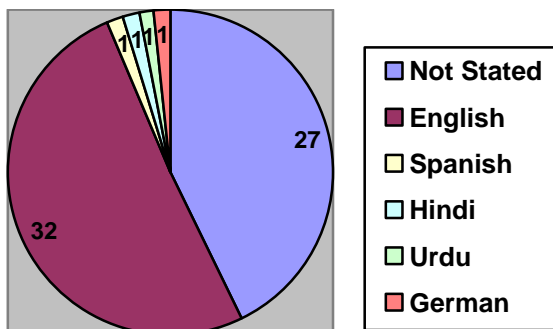
Ethnic origin

The majority of the respondents described themselves as White British (79%). This may reflect the demographic make up of the respondents or may be influenced by the fact that the survey questionnaire was only available in an English language version thus potentially restricting the ability of parents unable to read English to self complete the questionnaire.



First language

Respondents were asked what their first language was. 27 did not respond to this question. The majority who responded to the question stated English (89%) however individual respondents stated the following as being their first language: Spanish, Hindi, Urdu and German.



Likert Scores – Unit Averages

The majority of the questions listed a number of statements with an accompanying five point Likert Scale to indicate the level of agreement. In order to process the data relating to these questions numerically, each response was attributed to a number as follows:

Strongly disagree -2	Disagree -1	Neither agree or disagree 0	Agree 1	Strongly agree 2
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This enabled the response to each question to be calculated and an average Likert score identified for each unit and the Network as a whole. The responses were generally very positive across the Network with all the average Likert scores on the positive side of the continuum where zero is the middle score. This illustrates the majority of respondents indicated that they either 'agreed' or 'strongly agreed' with the statements given. This challenges the suggestion that five point Likert Scale results in overuse of the third point and illustrates that in spite of the fact that a genuine mid-point response was offered to the respondents, it was not overly used. The average Likert scores are illustrated in table 1.

Table 1 Experiences on the Neonatal Unit - Average Likert Scores for each unit

	Unit 1	Unit 2	Unit 3	Unit 4	Unit 5	Unit 6	Network Total	Network Average
Respondents	6	15	6	15	18	3	63	N/A
Q1- I was encouraged to touch, cuddle and care for my baby	1.2	1.6	2.0	1.7	1.7	1.7	9.9	1.7
Q2 - I felt fully supported in my choice of feeding for my baby	0.8	1.6	1.7	1.6	1.4	1.3	8.4	1.4
Q3 - I felt well prepared to take my baby home	1.0	1.6	1.2	1.2	1.7	1.3	8.0	1.3
Q7 - All the staff who handled my baby always washed their hands	1.5	1.6	1.8	1.8	1.7	1.0	9.4	1.6
Q8 - My baby's visitors and I were always asked to wash their hands	0.3	1.3	1.3	1.9	1.4	0.7	6.9	1.2
Q9 - All the staff that cared for my baby introduced themselves to me	1.0	1.5	1.7	1.5	1.3	1.0	8.0	1.3
Q10 - I was encouraged to ask questions about my baby's care	1.5	1.5	1.5	1.7	1.4	0.7	8.3	1.4
Q11 - When any member of staff spoke to me about my baby's care it was easy to understand	1.2	1.6	1.8	1.6	1.5	1.3	9.0	1.5
Q12 -When staff discussed my baby with me, or each other, they did so in private	1.7	1.2	1.7	1.5	1.1	1.0	8.2	1.4
Q13 -The written information that I received about my baby's care was helpful	1.0	1.6	1.5	1.5	1.3	1.0	7.9	1.3
Q14 - The written information that I received about my baby's care was clear and easy to understand	1.0	1.7	1.5	1.5	1.3	1.0	8.0	1.3
Q15 - The nurses always had sufficient time to provide good care for my baby	1.0	1.5	1.5	0.9	1.7	-0.7	5.9	1.0
Q16 - The nurses always had sufficient time to provide the necessary support I required on the neonatal unit	1.5	1.5	1.5	1.9	1.6	-0.7	7.3	1.2
Q18 - I was happy with the visiting arrangements on the NNU	1.5	1.7	1.7	1.6	1.3	1.0	8.8	1.5
Q19 - I felt that security on the neonatal unit kept my baby safe from strangers	1.8	1.6	1.8	1.8	1.7	1.0	9.8	1.6
Highest								
Lowest								

Likert Scale Score -2 Strongly disagree, -1 Agree, 0 Neither agree or disagree, 1 Agree, 2 Strongly Agree

Observations

The Likert averages vary between units ranging from -0.7 to 2.0. SSBCNN average scores range from 1.00 to 1.6 with the mid range score at 1.4. The highest and lowest average Likert scores for each question have been highlighted in the table, as have the highest and lowest Network average scores. This clearly illustrates the dispersal of the upper and lower scores across the Network units. The pattern illustrates that unit 3 consistently received more positive feedback than other units. Units 1 and 6 received the majority of scores at the lower end of the continuum which are shared between them.

The dispersal of the highest and lowest scores illustrates that there is a consistent difference in parent's response to the questions between the units and a clear difference between the highest and lowest scoring units. If parents had responded in a similar way in each of the units, a more random pattern of highest and lowest scores would be expected.

It is acknowledged that by identifying the highest and lowest score for each question there is a risk of this being perceived as identifying a winner and a loser. This is not the intention of this exercise and it is important to remember that all the scores were in the upper half of the continuum with the exception of questions 15 and 16 regarding nursing time. What it does illustrate however is that there is a gap between the unit receiving a higher average Likert score and those receiving the lower scores. The aim should be to identify actions to reduce that gap and increase the average Network score.

It is also understood that comparisons between units are limited by a number of factors which may have influenced the range of responses received. These include the size and layout of the unit, the staffing levels in each unit, the varying response rates and the mood, expectations and perceptions of the respondents. These factors should be born in mind when considering the results in table 2. However comparisons between units providing the same level of care does illustrate some clear differences in response to certain questions.

The Likert scores serve as a guide to areas where each unit is doing well and also illustrates areas requiring attention. In addition to the information summarised in table 1, charts comparing the individual unit range of responses are included in the more detailed Network results for each question below. This enables each unit to see where some respondents disagreed or strongly disagreed with the statements.

The Network averages illustrate where the Network as a whole is doing well and where there is room for improvement. The highest and lowest ranked Network responses are discussed at the beginning of the following section which then goes on to explore the rest of the Network results in more detail.

Highest ranked response across the network

The highest ranked response across the network was to Q7 & 19. They received an average Likert score of 1.6 each.

Q7 - All the staff who handled my baby always washed their hands

Of the respondents 95% indicated that they 'strongly agreed or agreed' with the statement. No-one disagreed with the statement and one person did not respond.

Q19 - I felt that security on the neonatal unit kept my baby safe from strangers

Of the respondents, 98% indicated that they 'strongly agreed or agreed' with the statement. One respondent neither agreed nor disagreed with the statement (Unit 2).

Lowest ranked response across the network

The lowest ranked response across the network was to Q15 - The nurses always had sufficient time to provide good care for my baby. This received an average Likert score of 1.0.

This proved to be the lowest ranked response across the Network Likert average of 1.0. Despite 84% of respondents indicating that they either 'strongly agreed or agreed' and only 8% of respondents strongly disagreeing or disagreeing with the statement the network average was brought down by Unit 6's responses where 2 out of the 3 respondents either strongly disagreed or disagreed with the statement.

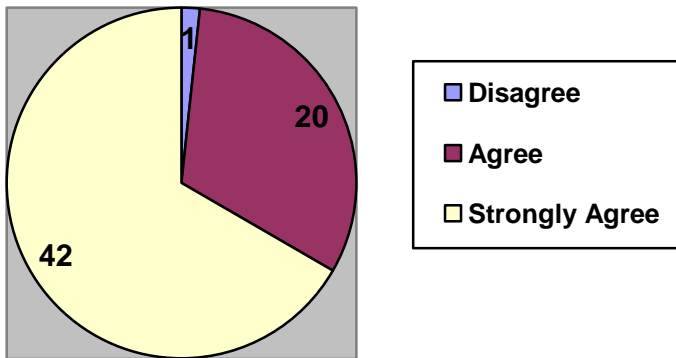
Observations

Parental Support (Q1, Q2, Q3)

Q1 “I was encouraged to touch, cuddle & care for my baby”

Network Average Likert Score 1.7

Of the respondents, 98% indicated that they ‘strongly agreed or agreed’ with the statement. One respondent from Unit 1 disagreed with the statement .

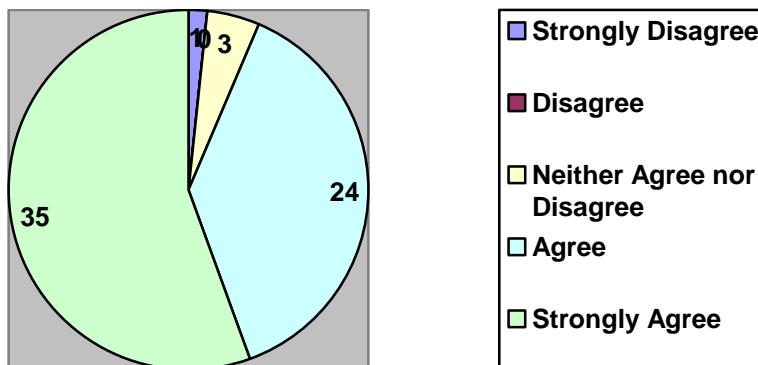


Q2 “I felt fully supported in my choice of feeding for my baby”

Network Average Likert Score 1.4

In response to Q2, the majority of respondents (94%) either strongly agreed or agreed with the statement. There was one respondent who strongly disagreed (Unit 1). There was also a qualitative comment received from Unit 4:

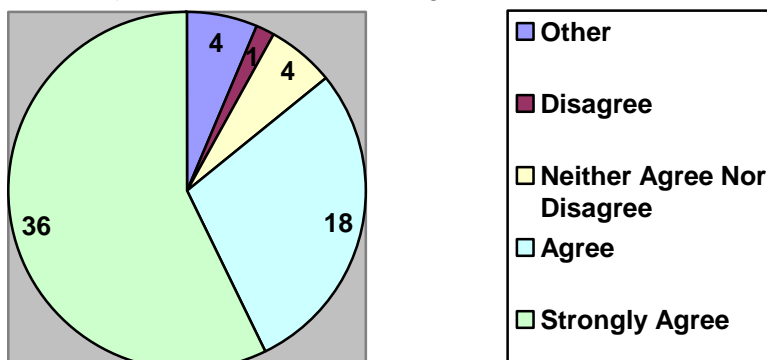
“I felt fully supported by the nurses when I made the decision to breastfeed, but I was not given any advice after making the decision to breastfeed. I realised that if I had stuck at it that I would not be feeding her enough milk for her to grow at an average rate, therefore it would have helped if I had been told the advantages and disadvantages fully. I fully understand and agree with the fact that I was fully supported in my decision to breastfeed and overall the staff in charge of looking after my baby were just amazing/outstanding.”



Q3 “I felt well prepared to take my baby home”

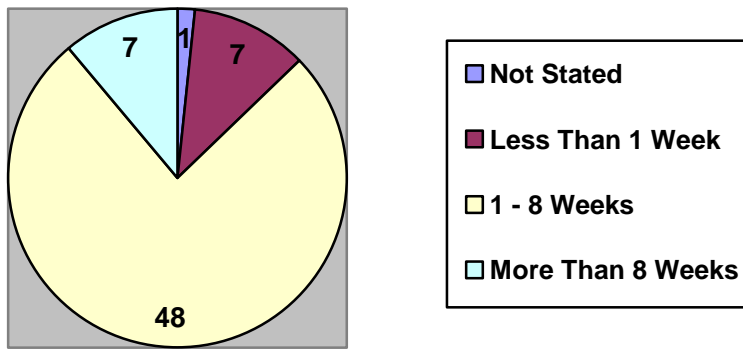
Network Average Likert Score 1.3

In response to Q3, the majority of respondents (86%) either strongly agreed or agreed with the statement. One respondent from Unit 1 disagreed with the statement.



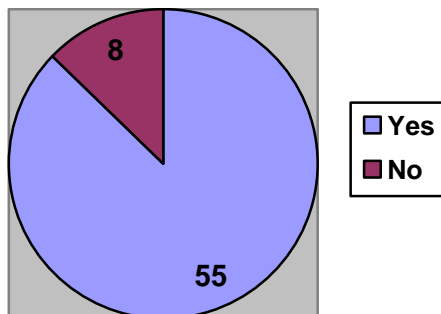
Q4 Length of Stay

The majority of respondent's (76%) babies' length of stay on the unit was between 1-8 weeks with 11% of respondent's for the two other categories and 1 respondent (2%) who did not answer the question. The length of stay on each unit is given in the chart below.



Q5 Transfer of Baby to Another Hospital

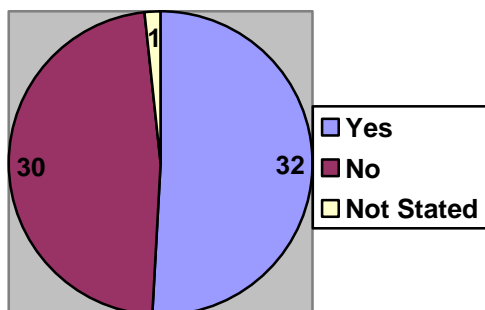
Thirteen percent of babies in 5 out of the 6 neonatal units were moved to another hospital as part of their care.



The hospitals involved were split evenly with 3 from within the network (Stoke, Wolverhampton, Dudley) and 3 outside of the network (Liverpool Women's Hospital, Birmingham Women's Hospital, Birmingham Children's Hospital).

Q6 Assistance with Breathing

Just over half of the babies required assistance with their breathing (51%)



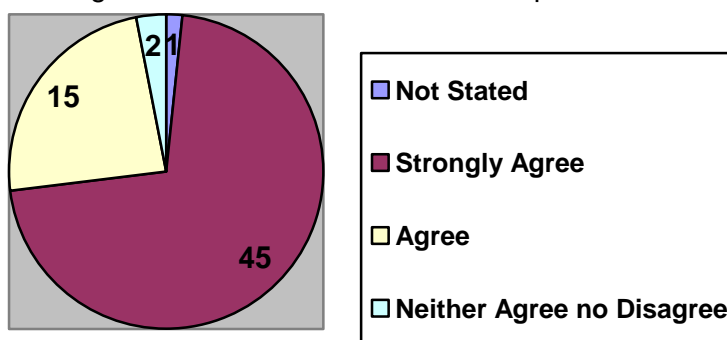
Of the 32 babies who required assistance with their breathing 19 were identified as receiving ventilation and 19 were identified as receiving oxygen in another way. N.B. Some respondents indicated that their baby had received both ventilation and Oxygen in another way.

Q7 & Q8 Hand Washing

Q7 "All the staff who handled my baby always washed their hands".

Network Average Likert Score 1.6

Of the respondents 95% indicated that they 'strongly agreed or agreed' with the statement. No-one disagreed with the statement and one person did not respond.

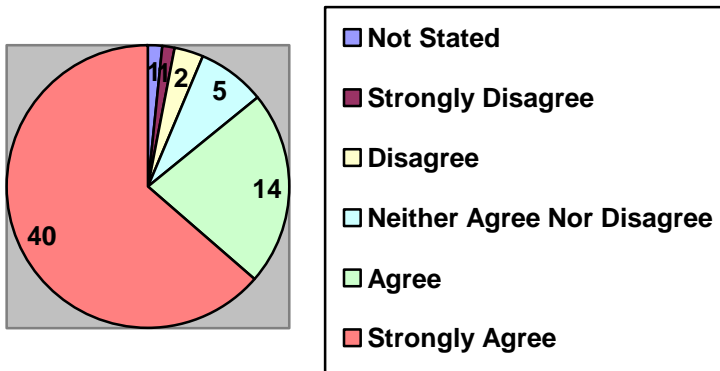


Q8 “My baby's visitors and I were always asked to wash our hands”

Network Average Likert Score

1.2

Over three quarters of the respondents (79%) either strongly agreed or agreed with this statement. One respondent from unit 5 strongly disagreed with this statement and two respondents, one each from Units 3 & 6 disagreed with this statement.



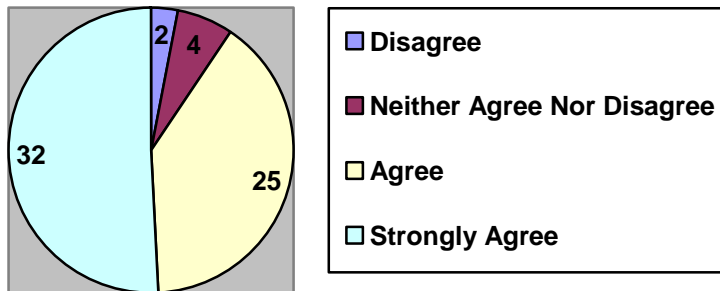
Q9 – Q14 Communication and Information

Q9 “All the staff that cared for my baby introduced themselves to me”

Network Average Likert Score

1.3

90% of respondents either strongly agreed or agreed with this statement. Two respondents, one each from units 2 & 5 disagreed with this statement.

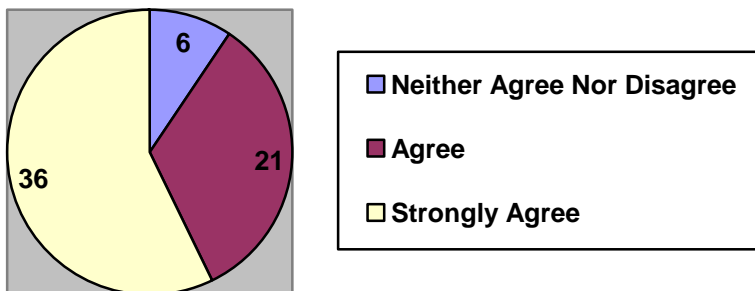


Q10 “I was encouraged to ask questions about my baby's care”

Network Average Likert Score

1.4

90% of respondents either strongly agreed or agreed with this statement. No-one disagreed with it.

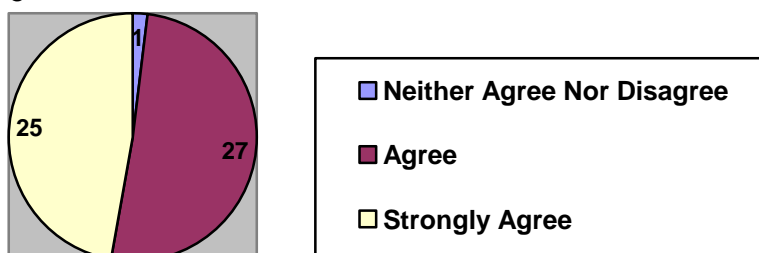


Q11 “When any member of staff spoke to me about my baby's care it was easy to understand”

Network Average Likert Score

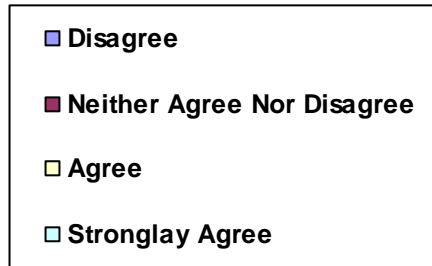
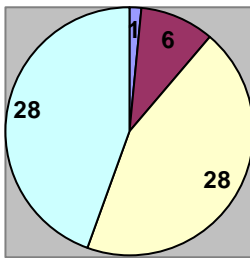
1.5

Almost every-one (98%) either strongly agreed or agreed with this statement and no-one disagreed with it.



Q12 “When staff discussed my baby with me, or each other, they did so in private so that other people could not over hear” **Network Average Likert Score 1.4**

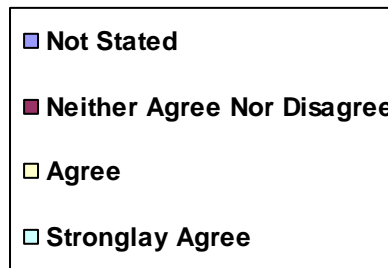
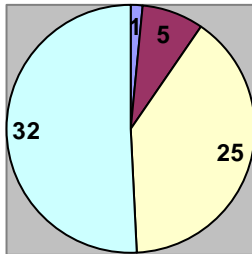
The majority of respondents (89%) either strongly agreed or agreed with this statement. One respondent from unit 5 disagreed with it.



Q13 “The written information that I received, about my baby's care was helpful”

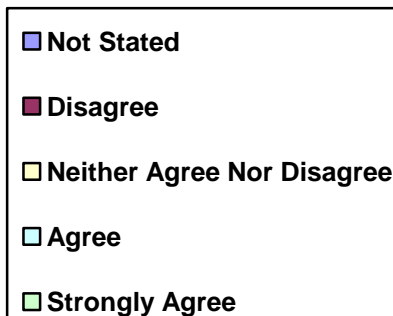
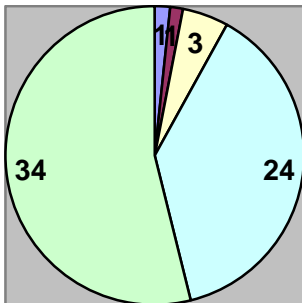
Network Average Likert Score 1.3

More than four fifths of respondents (82%) either strongly agreed or agreed with this statement. One respondent from unit 1 disagreed with it.



Q14 “The written information that I received, about my baby's care was clear and easy to understand “ **Network Average Likert Score 1.3**

The majority of respondents either strongly agreed or agreed with this statement. One respondent from unit 1 disagreed with it.

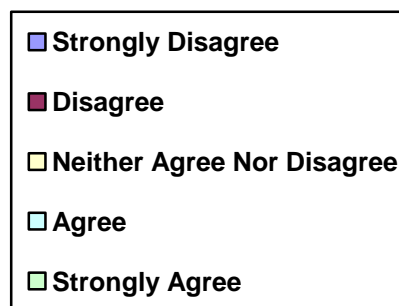
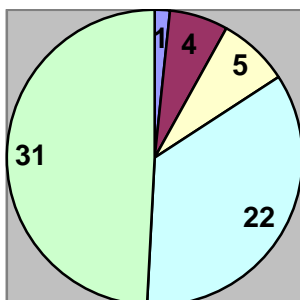


Q15 & Q 16 Staffing availability

Q15 “The nurses always had sufficient time to provide good care for my baby”

Network Average Likert Score 1.0

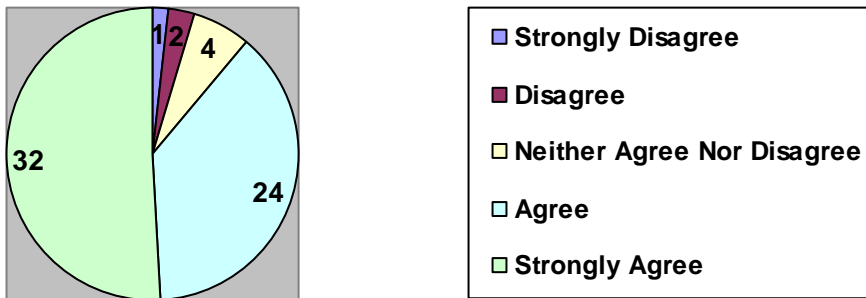
The majority of respondents (84%) either strongly agreed or agreed with this statement, however four respondents disagreed (one each from units 1 & 6 and 2 from unit 4) and one respondent from unit 6 strongly disagreed with it.



Q 16 “The nurses always had sufficient time to provide the necessary support I required on the neonatal unit”

Network Average Likert Score 1.2

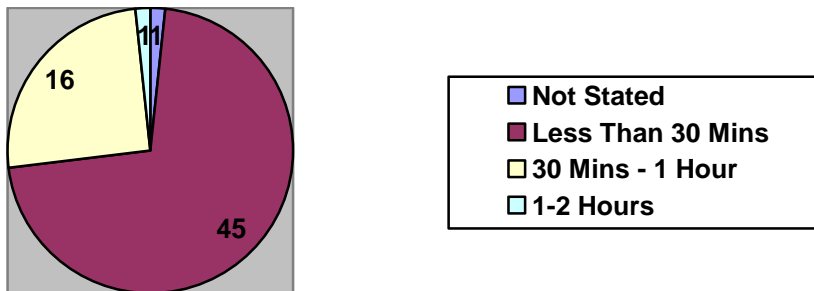
The majority of respondents (89%) either strongly agreed or agreed with this statement, two respondents one each from units 4 & 6 disagreed and one respondent from unit 6 strongly disagreed with it.



Q17 – Q 20 Access and Facilities

Q17 How long does it usually take you to travel to this neonatal unit from home?

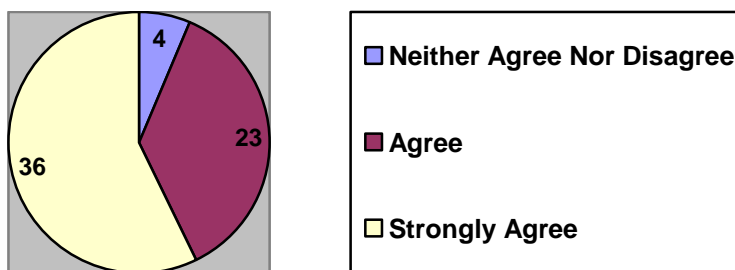
Over two thirds of respondents (71%) travelled less than 30 minutes with a further quarter of respondents (25%) travelling between 30 minutes and one hour. One respondent from unit 2 identified travelling more than 2 hours.



Q18 “I was happy with the visiting arrangements on the NNU”

Network Average Likert Score 1.5

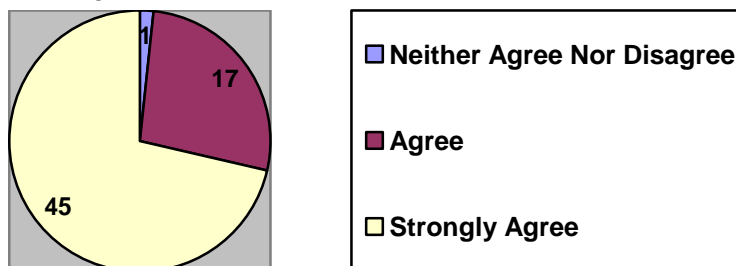
94% of respondents either strongly agreed or agreed with this statement and no-one disagreed with it.



Q19 “I felt the security on the neonatal unit kept my baby safe from strangers”

Network Average Likert Score 1.6

Of the respondents, 98% indicated that they ‘strongly agreed or agreed’ with the statement and no-one disagreed with it.



Q20 - What did you think of the facilities available for the following?

Question 20 asked for an opinion on nine different facilities available and asked for them to be ranked as: Very Poor, Poor, Average, Good, Very good. Once again the average Likert Scores were calculated for each unit and the Network as a whole.

Table 2 Average Likert Score

	Unit 1	Unit 2	Unit 3	Unit 4	Unit 5	Unit 6	Network Total	Network Average
Respondents	6	15	6	15	18	3	63	N/A
Breastfeeding	0.3	1.4	1.5	0.7	1.0	1.0	5.9	0.98
Telephone	0.3	1.0	1.7	0.2	0.4	1.0	4.6	0.77
Getting food & drink	0.8	0.6	1.5	0.1	0.3	0.7	4	0.66
Quiet place to sit	1.2	0.9	1.5	0.9	0.9	0.3	5.7	0.95
Overnight stay	1.0	1.1	1.5	0.9	1.1	0.7	6.3	1.05
Car parking	0.3	0	1.0	-0.7	0.06	0.3	0.96	0.16
Play area for children	0	0.5	1.3	-0.5	-0.1	0.3	1.5	0.25
Secure storage	1	0.6	1.5	-0.5	0.3	-0.3	2.6	0.43
Hand washing	1.8	1.7	1.8	1.9	1.9	2.0	11.1	1.85
Highest								
Lowest								
Below Average Score								

Likert Scale Scores: -2 Very Poor -1 Poor 0 Average 1 Good 2 Very Good

Whilst the Network average Likert scores were all above average, scores for some facilities in some units were below average. These scores clearly indicate that there are practical improvements to be made to improve facilities for parents. In addition the dispersal of the scores clearly highlight that Unit 4 is consistently at the lower end of the continuum receiving the lowest average scores in all but four of the categories and unit 3 is consistently higher in all but two of the categories. The results may be influenced by the physical limitations of the unit which could limit the opportunity to make practical improvements. However it is suggested that each unit could review their facilities in the light of these results and develop an action plan for making improvements.

A number of the qualitative comments received reflect the scores given – See appendix 2:

Conclusions

The survey provided a useful insight into the experiences of parents during their baby’s stay on the neonatal units within the SSBCNN. The results provide a measure of satisfaction with the service received and an indication of the ‘experiential’ aspect of quality. They illustrate that the SSBCNN units are considered positively by the parents who responded and that some units are thought of more highly than others. Some facilities on the neonatal units and/or within the Trusts e.g. car parking, play area for children and secure storage, were considered to be below average illustrating room for practical improvements to be made.

There is scope for improving communication, the consistency of advice given and the provision and clarity of written information.

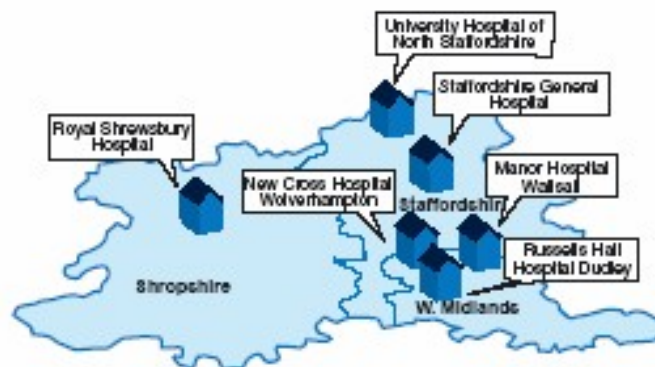
Recommendations

- Units should reflect on the content of this report and develop an action plan to address areas for improving the experience of parents whilst their baby is on the neonatal unit.
- The network should discuss and agree how to improve the reliability of the findings of future parent experience surveys and agree the frequency of future surveys in order to monitor progress against action plans made following each report.

Appendix 1



Your Experiences on the Neonatal Unit



Dear Parent/Guardian

We would be very grateful if you would complete the following questionnaire. Your opinion is important to us and by finding out how you feel about your experiences on the unit we can make things better for parents and babies in the future. Your responses are anonymous and will be treated in the strictest confidence. Your participation is entirely voluntary. If you do not wish to participate in the survey, or answer any of the questions you do not have to do so, and you do not need to give us a reason. If you need help to complete the questionnaire please ask.

Please tick the box that applies.

Person filling in this questionnaire?

- Mother
- Father
- Other
- Please state.....

Age (years)

- | | | | |
|----------|--------------------------|-------------|--------------------------|
| Under 16 | <input type="checkbox"/> | 41 – 45 | <input type="checkbox"/> |
| 16 – 20 | <input type="checkbox"/> | 46 – 50 | <input type="checkbox"/> |
| 21 – 25 | <input type="checkbox"/> | 51 – 55 | <input type="checkbox"/> |
| 26 – 30 | <input type="checkbox"/> | 56 – 60 | <input type="checkbox"/> |
| 31 – 35 | <input type="checkbox"/> | 61 and over | <input type="checkbox"/> |
| 36 – 40 | <input type="checkbox"/> | | |

Ethnic Origin

I would describe my race or ethnic origin as:

White

- British
- Irish
- Other White

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Other Asian

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Other Mixed

Black or Black British

- Black Caribbean
- Black African
- Other Black

Chinese or Other Ethnic Group

- Chinese
- Other

What is your First language?

PARENTAL SUPPORT

1 I was encouraged to touch, cuddle and care for my baby.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

2 I felt fully supported in my choice of feeding for my baby.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

3 I felt well prepared to take my baby home

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

CARE OF THE BABY

4 How long was your baby on this neonatal unit?

- Less than 1 week
- 1 week to 8 weeks
- More than 8 weeks

5 Was your baby moved to another hospital as part of their care? Yes No

If yes, which hospital? _____

6 Did your baby require assistance with his/her breathing? Yes No

If yes,

- On a ventilator
- Oxygen in another way
- No assistance needed

7 All the staff who handled my baby always washed their hands.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

8 My baby's visitors and I were always asked to wash our hands.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

COMMUNICATION AND INFORMATION

9 All the staff that cared for my baby introduced themselves to me.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

10 I was encouraged to ask questions about my baby's care.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

11 When any member of staff spoke to me about my baby's care it was easy to understand.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

12 When staff discussed my baby with me, or each other, they did so in private so that other people could not over hear.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

13 The written information that I received, about my baby's care was helpful.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

14 The written information that I received, about my baby's care was clear and easy to understand.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

STAFFING AVAILABILITY

15 The nurses always had sufficient time to provide good care for my baby

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

16 The nurses always had sufficient time to provide the necessary support I required on the neonatal unit

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

ACCESS AND FACILITIES

17 How long does it usually take you to travel to this neonatal unit from home?

- Less than 30 minutes
- 30 minutes to 1 hour
- 1 to 2 hours
- More than 2 hours

18 I was happy with the visiting arrangements on the NNU.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

19 I felt the security on the neonatal unit kept my baby safe from strangers.

Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree

20 What did you think about the facilities available for the following?

	Very poor	Poor	Average	Good	Very good
Breastfeeding	1	2	3	4	5
Telephone	1	2	3	4	5
Getting food & drink	1	2	3	4	5
Quiet place to sit	1	2	3	4	5
Overnight stay	1	2	3	4	5
Car parking	1	2	3	4	5
Play area for children	1	2	3	4	5
Secure storage	1	2	3	4	5
Hand-washing	1	2	3	4	5

21 Do you have any suggestions for improvements to the neonatal unit?

If you would like to talk to someone about the care your baby received please ask to speak to the nurse in charge or any member of staff you feel comfortable with. They will be able to help and advise you.

If you would like to talk about your baby's care with an independent person from outside the neonatal unit please contact the Patient Advice and Liaison Service (PALS).

Thank you for your help, please return to a member of staff or place in the comments/suggestions box on the Neonatal Unit.

Produced by the Staffordshire, Shropshire and Black Country Newborn Net based on a survey by the West Midlands Neonatal Forum.

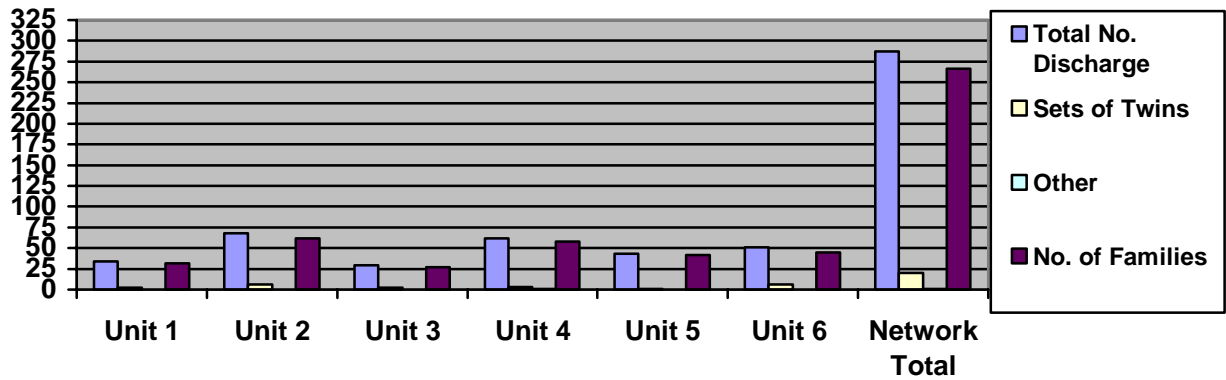
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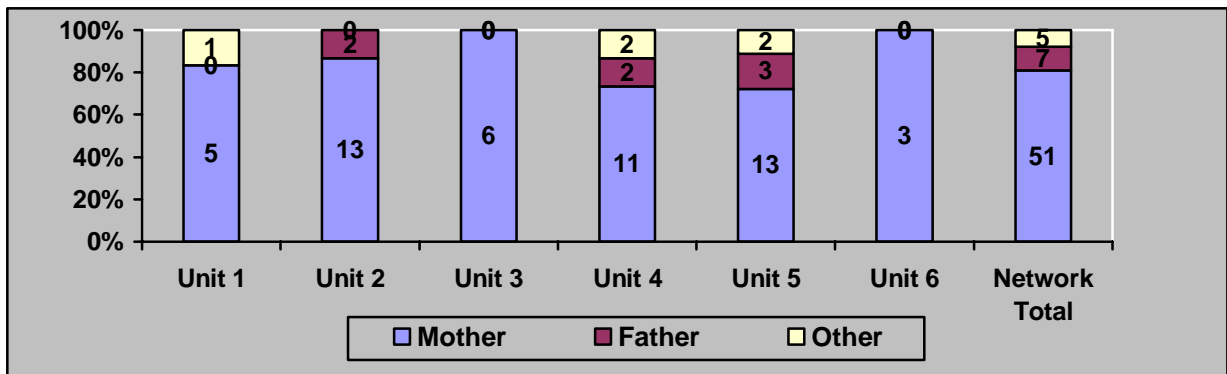
Appendix 2

Breakdown of Results per Unit

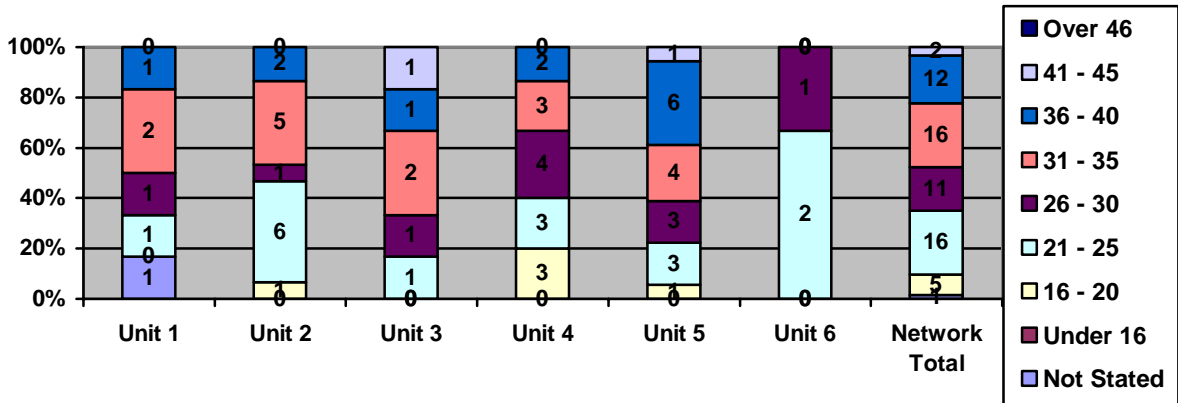
Number of Respondents



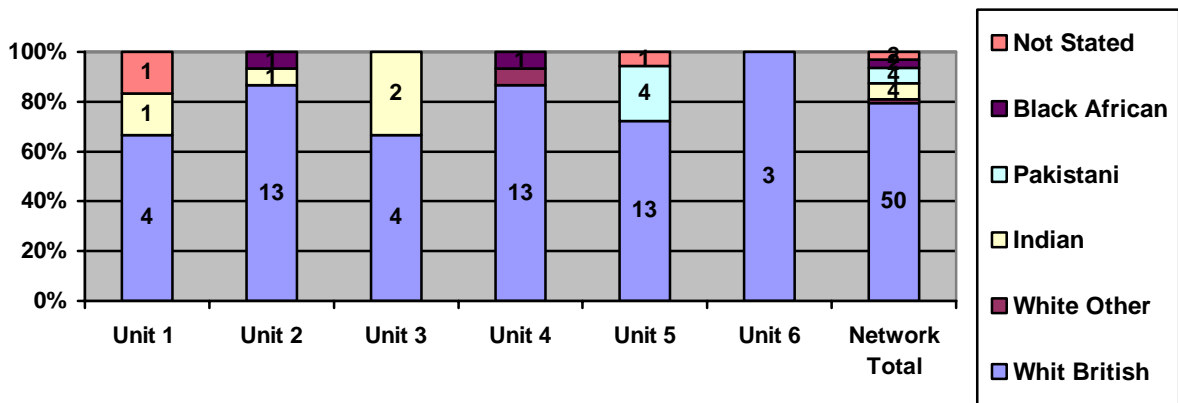
Gender of Respondents



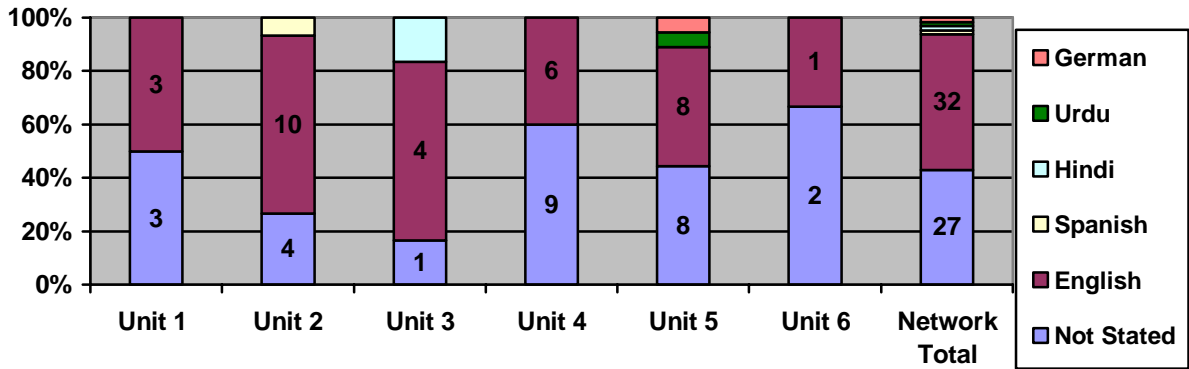
Age of Respondents



Ethnic Origin

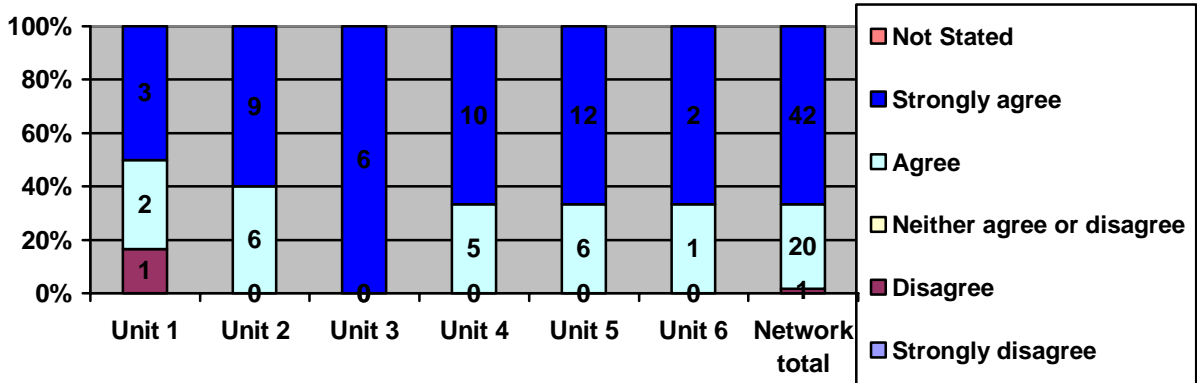


Language

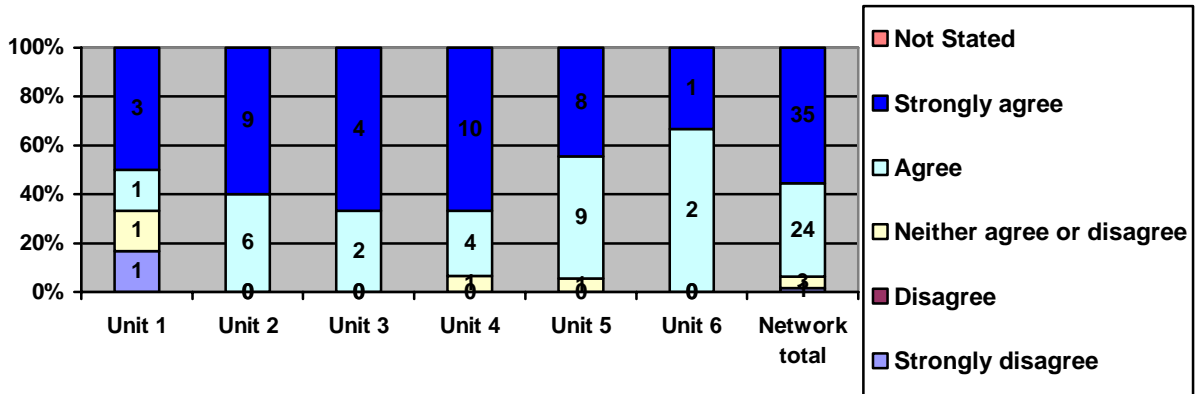


Parental Support (Q1, Q2, Q3)

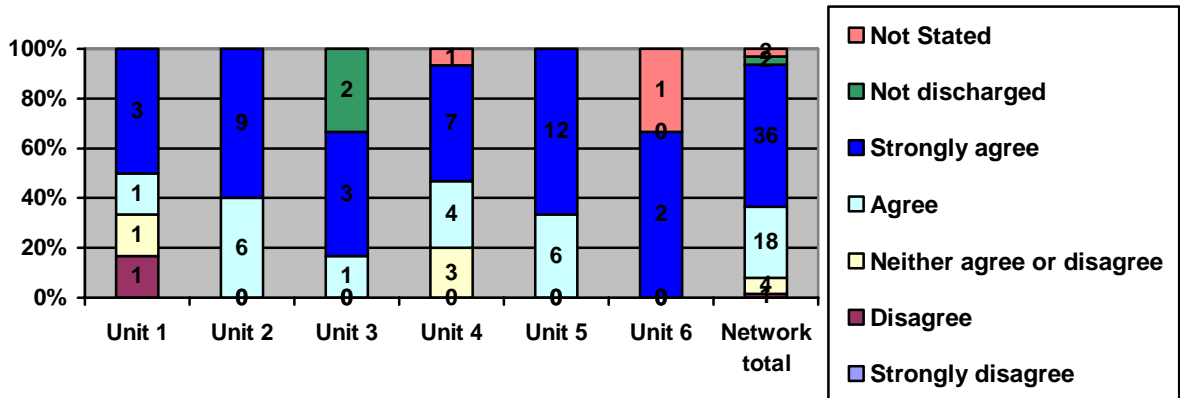
Q1 "I was encouraged to touch, cuddle & care for my baby"



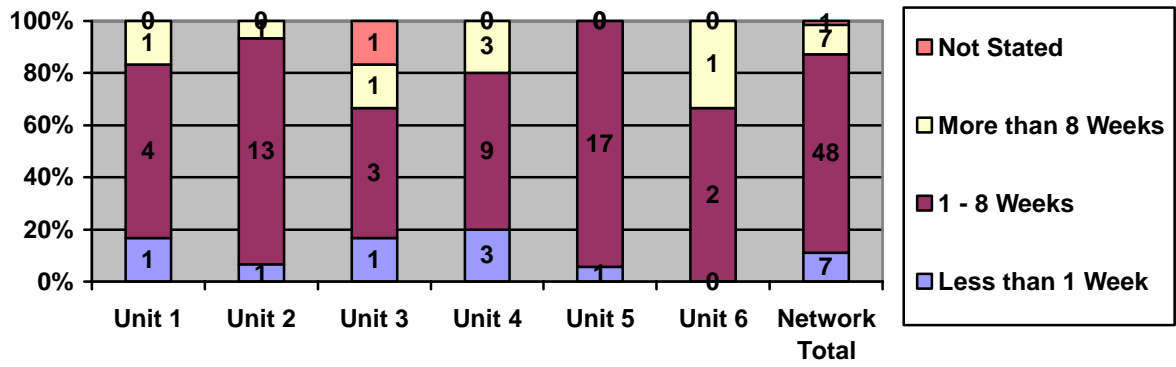
Q2 "I felt fully supported in my choice of feeding for my baby"



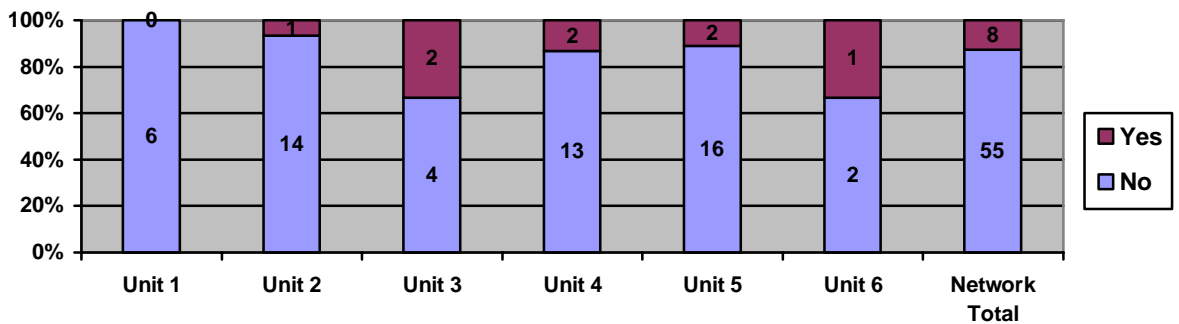
Q3 "I felt well prepared to take my baby home"



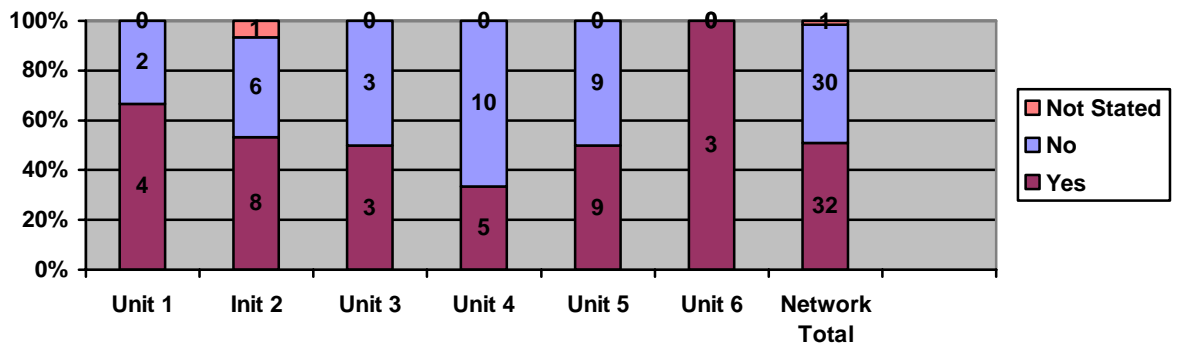
Q4 Length of Stay



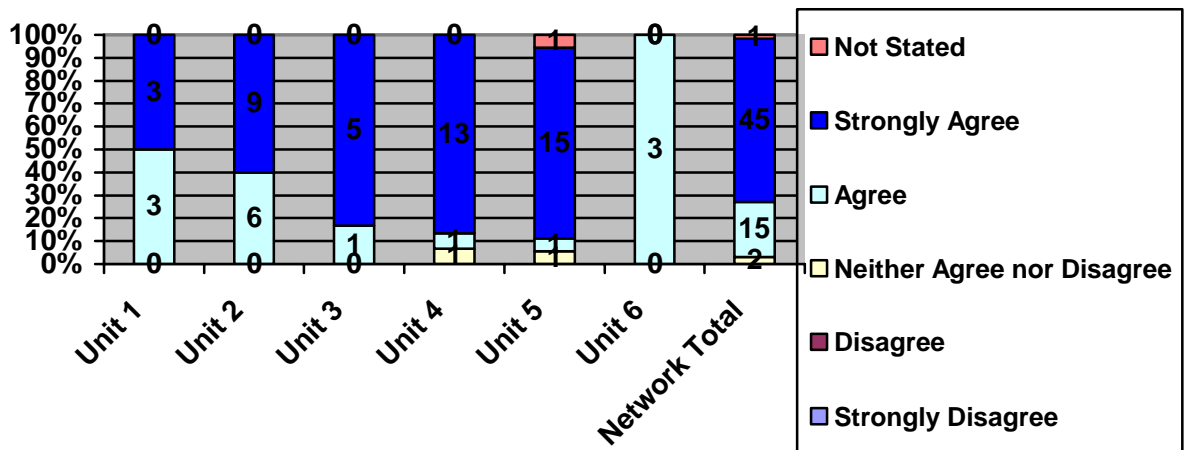
Q5 Transfer of Baby to Another Hospital



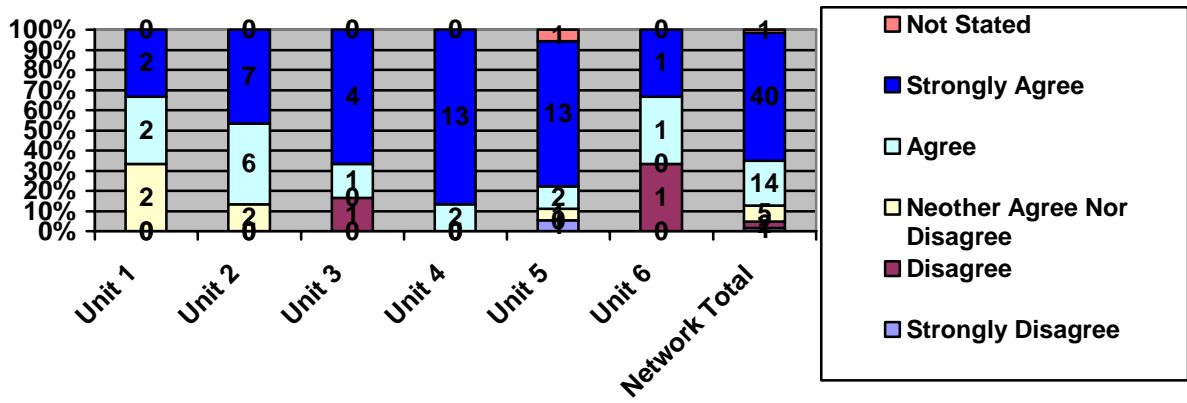
Q6 Assistance with Breathing



Q7 "All the staff who handled my baby always washed their hands".

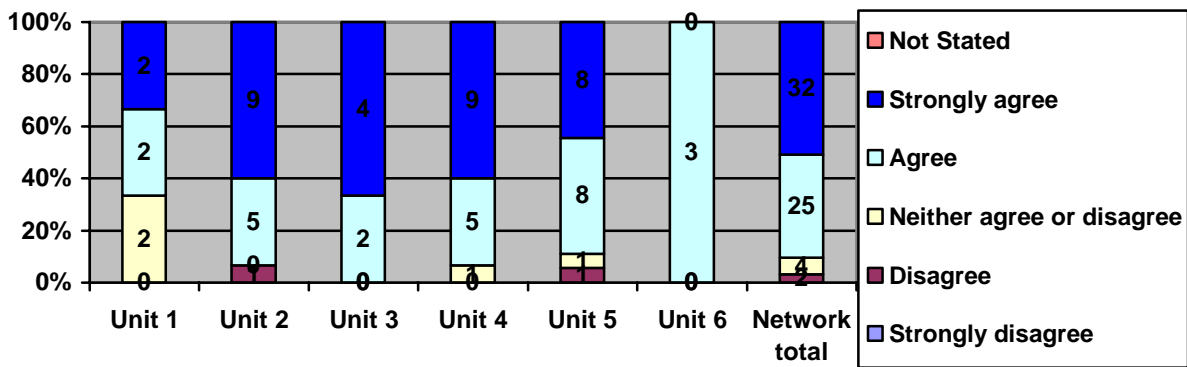


Q8 “My baby's visitors and I were always asked to wash our hands”

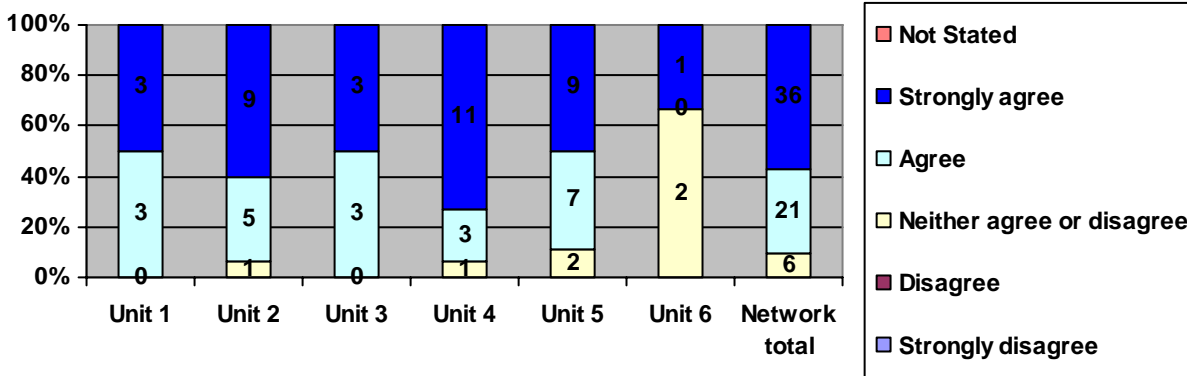


Q9 – Q14 Communication and Information

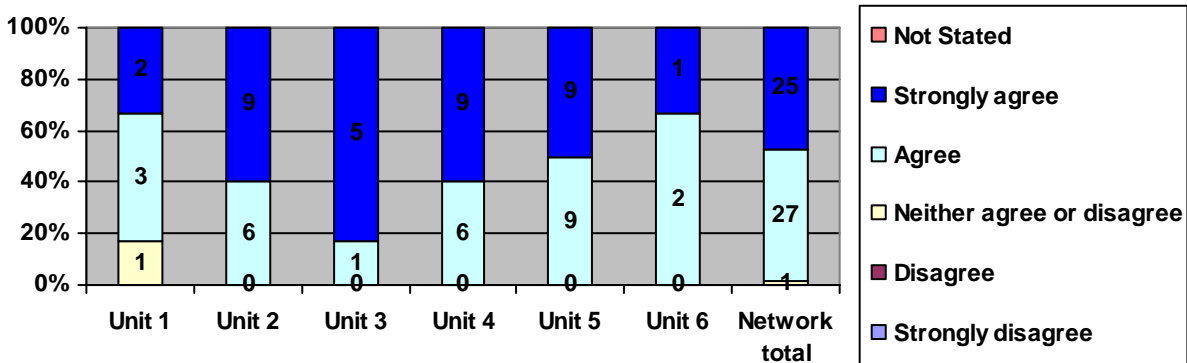
Q9 “All the staff that cared for my baby introduced themselves to me”



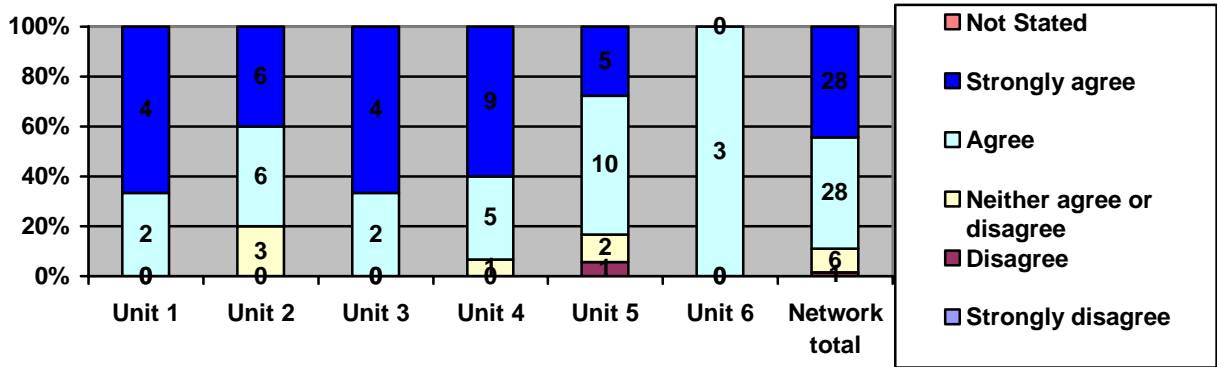
Q10 “I was encouraged to ask questions about my baby's care”



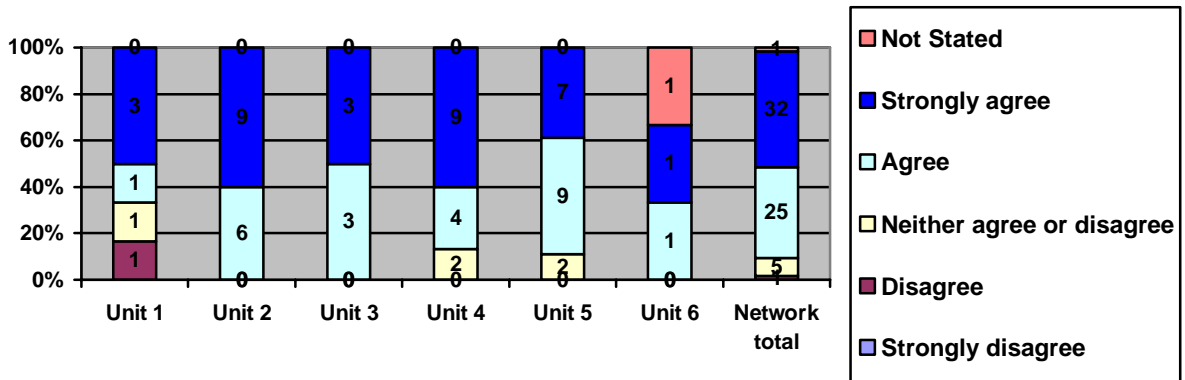
Q11 “When any member of staff spoke to me about my baby's care it was easy to understand”



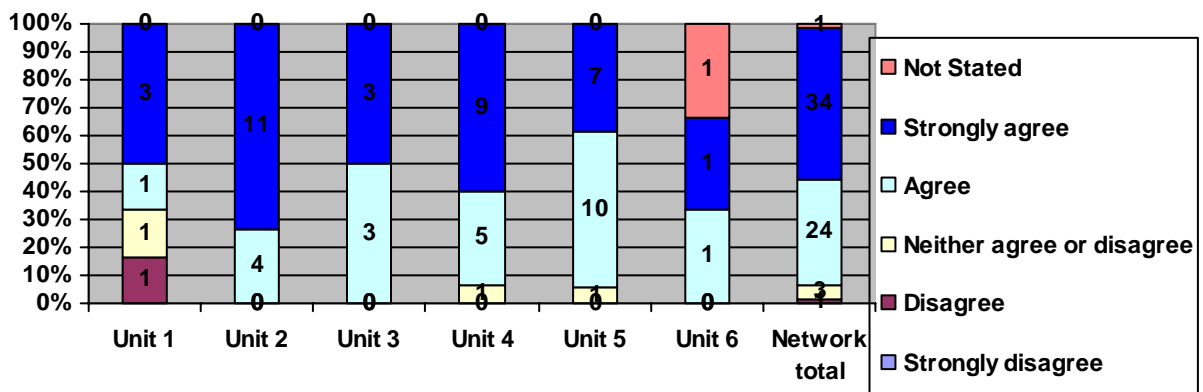
Q12 “When staff discussed my baby with me, or each other, they did so in private so that other people could not over hear”



Q13 “The written information that I received, about my baby’s care was helpful”

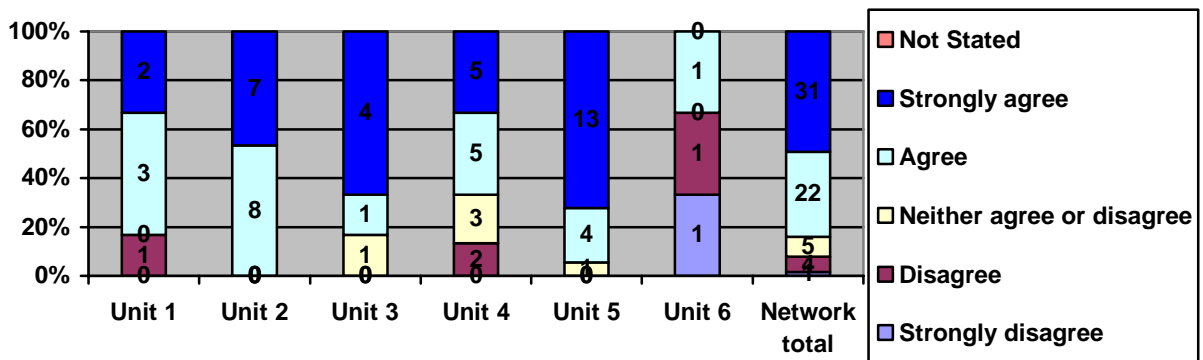


Q14 “The written information that I received, about my baby’s care was clear and easy to understand “

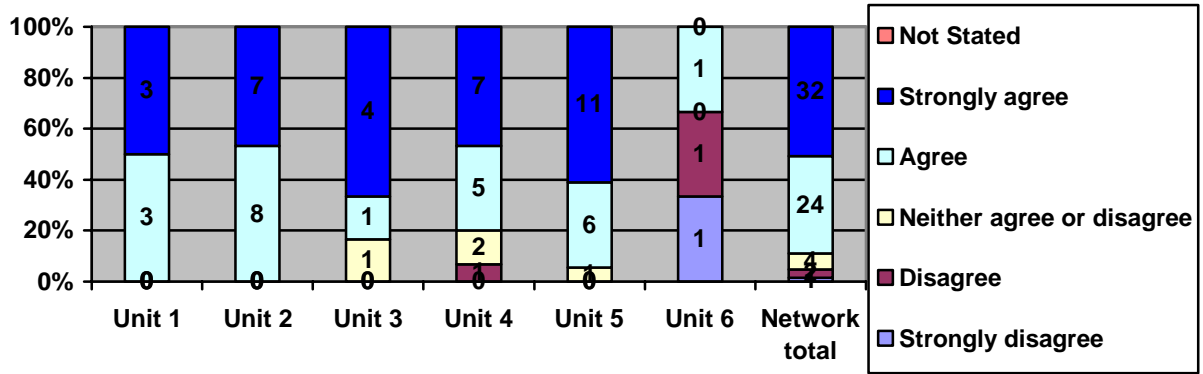


Q15 & Q 16 Staffing availability

Q15 “The nurses always had sufficient time to provide good care for my baby”

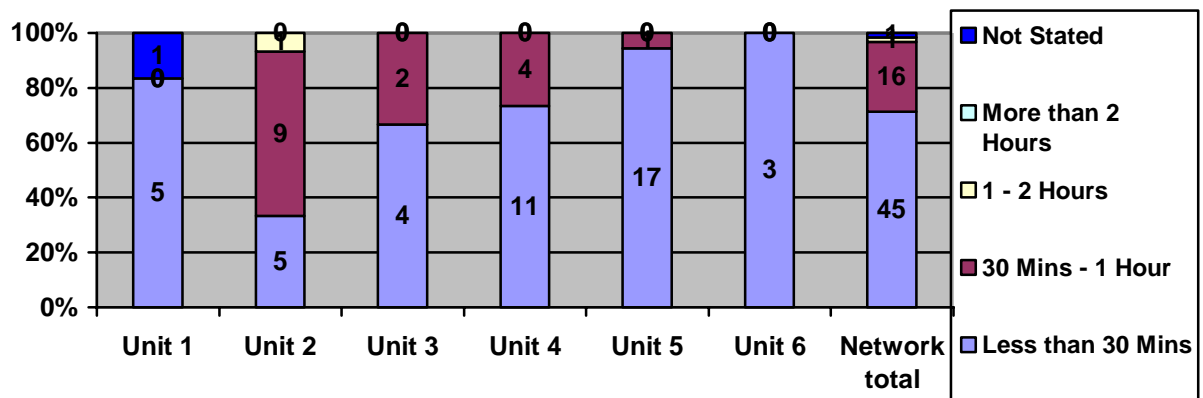


Q 16 “The nurses always had sufficient time to provide the necessary support I required on the neonatal unit”

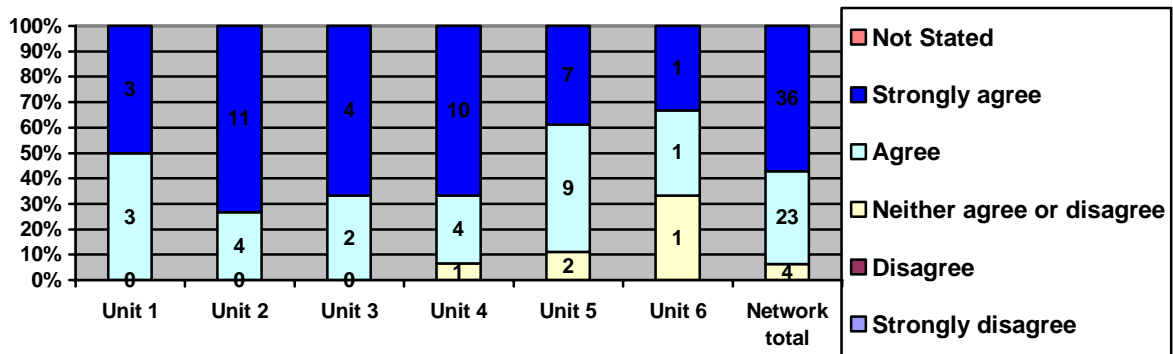


Q17 – Q 20 Access and Facilities

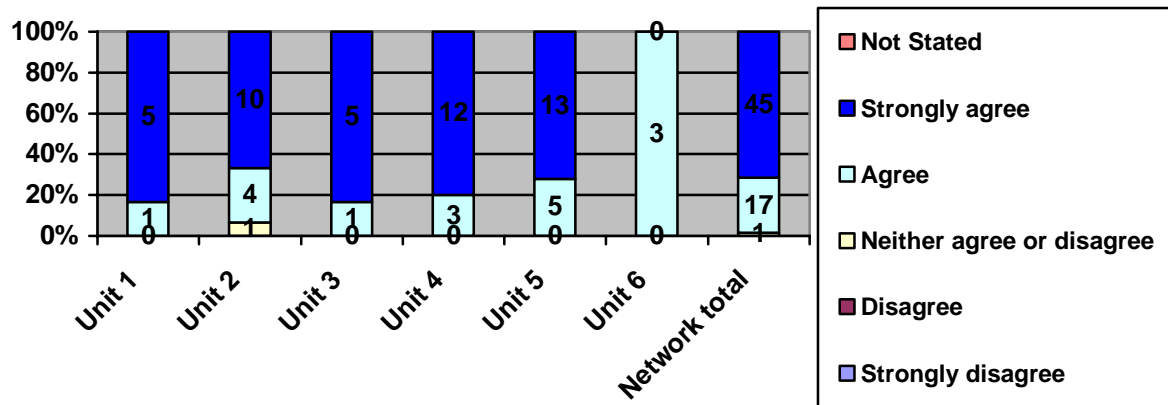
Q17 How long does it usually take you to travel to this neonatal unit from home?



Q18 “I was happy with the visiting arrangements on the NNU”



Q19 “I felt the security on the neonatal unit kept my baby safe from strangers”



Appendix 3

Question 21 – Do you have any suggestions for improvements to the neonatal unit?

UNIT 1

No, the staff were wonderful and the care my babies received was excellent.

No

A play area indoor/outdoor close by on site. A leaflet telling parents that they can get a weekly parking ticket for £10.

No resuscitation training was offered until baby was brought home. Visiting in the evening should be changed as handover cuts out visiting for grandparents.

UNIT 2

No

A coffee room for mummies and daddys on the ward would be nice, so we don't have to buzz in as often and we could all meet and chat and help each other with problems with our baby and put there mind at rest if your baby has been through the same.

Possible expansion to accommodate more cots. Possibly family room. Bigger childrens play area.

UNIT 3

None

Hand wash to be available prior to entering the unit, there is only hand wash once inside the unit.

UNIT 4

Instead of using screens it would be better to have dividing curtains in the rooms with the railing on the ceiling. This is particularly helpful when another baby has visitors and you need privacy with your child, it would also improve confidentiality when discussing medical issues with staff. It would also be safer as people are less likely to trip over curtains than screens.

Breastfeeding: I felt fully supported by the nurses when I made the decision to breastfeed, but I was not given any advice after making the decision to breastfeed. I realised that if I had stuck at it that I would not be feeding her enough milk for her to grow at an average rate, therefore it would have helped if I had been told the advantages and disadvantages fully. I fully understand and agree with the fact that I was fully supported in my decision to breastfeed and overall the staff in charge of looking after my baby were just amazing/outstanding.

New and updated pulse oximeter alarms for preterm babies with louder and different sounding alarms for highs and lows. The alarms should be hooked up to a central computer at the nurses station.

UNIT 5

Water fountain for visitors (especially moms). Toilet facilities for visitors (especially moms).

A cooler environment.

No, quite fine. Thank you.

With regard to visiting, not all grandparents are able to visit, therefore in this situation it would be nice that their visiting rights could perhaps be placed into aunts and uncles.

No

Toilet facilities for parents. Toaster and TV that works! Water cooler for all to drink as need to drink 6-8 glasses per day. It would have been useful to have had one person ideally to co-ordinate management and care of patient as a lot of different staff sometimes proved overwhelming with variations in advice and care with feeding, positioning, etc. In order to promote continuity of care and crystal clear and standardised pathways of care for example, a named nurse identifiable to me. I would like to acknowledge the excellence in care delivery to the babies and hope this is in the units philosophy, of which I would liked to have shared.

UNIT 6

More nurses.