

Meeting the expectations of those undergoing elective Caesarean sections during the pandemic

K Jackson, J Roberts, F Lanaghan
University of Glasgow & Queen Elizabeth University Hospital, Glasgow

Introduction & objective:

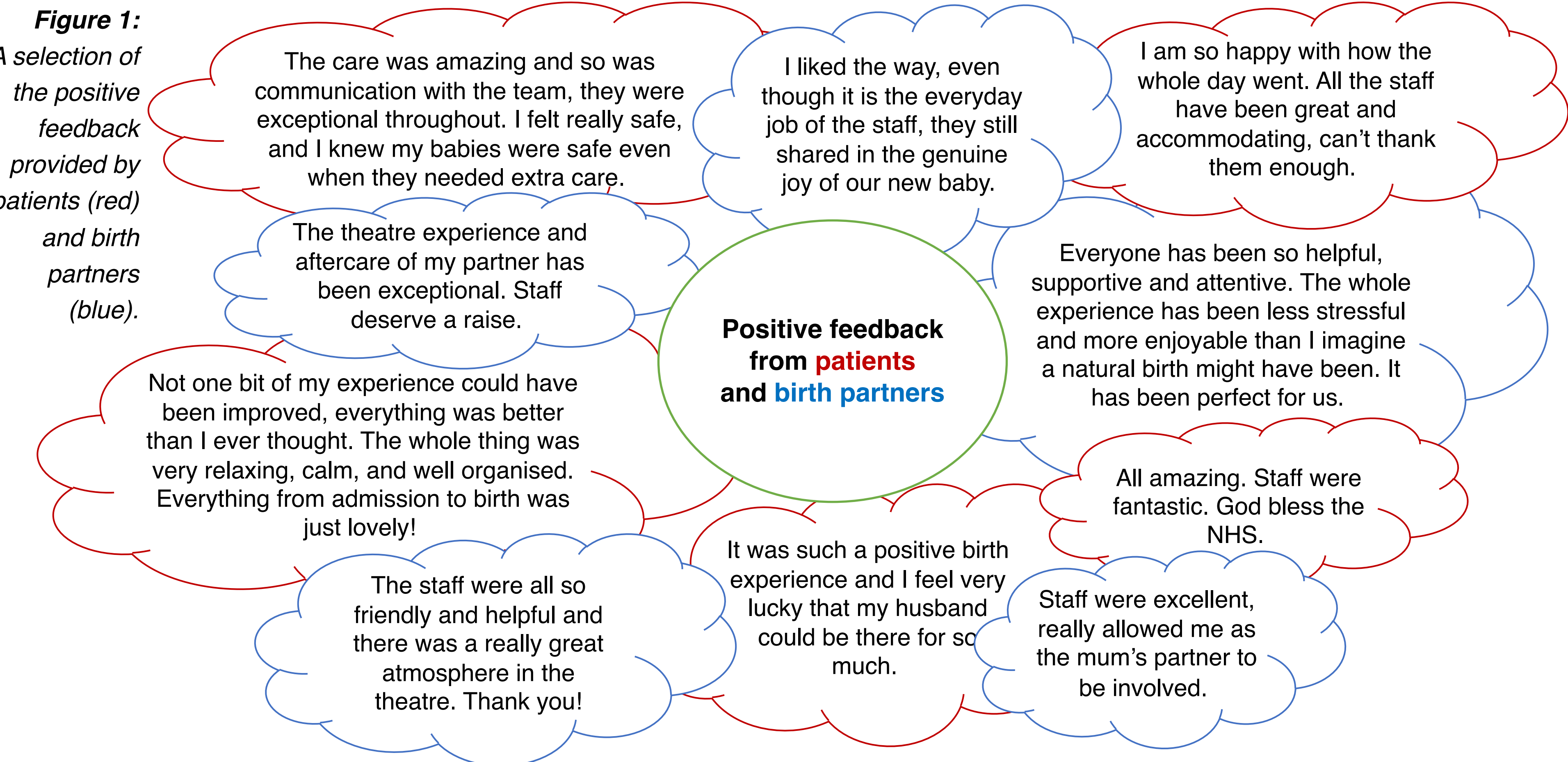
This comparative survey was designed to assess whether changes in procedure implemented at the Queen Elizabeth University Hospital, Glasgow (QEUH), during the pandemic have impacted the experience of elective Caesarean sections for patients and birth partners. From January to November 2021 there were 5436 births at the QEUH, 20% of which were elective Caesarean sections (total 1033).

Design:

Two questionnaires were produced: one for patients, one for birth partners. These included a scale for participants to record how strongly they agreed with statements addressing core expectations (included in figures 2 & 3). Statements from a 2018 patient satisfaction audit were repeated to allow comparison. Five free text questions were developed to encourage reflection on positive or negative aspects and address the impact of the pandemic.

Method:

Questionnaires were offered to all patients undergoing elective Caesarean sections over three weeks in October 2021. They were distributed to 30 pairs ahead of theatre. 38 responses were collected from 19 patients and birth partners post-delivery. Qualitative data was collated. Categorical variables were analysed by percentage allowing comparison with 2018 findings (13 patients and 12 birth partners responded to the statements in 2018). Free text responses were reviewed on an individual basis.



Results:

68% of respondents in 2021 agreed with every statement and the statements with which patients and birth partners most strongly agreed were regarding feeling treated with respect (97%); feeling safe (95%); feeling comfortable with staff communication (97%); and feeling supported (95%).

Notable improvement since 2018 was identified in respondents agreeing that their partners were supported (95% from 54%), that they were involved in decisions in theatre (79% from 46%), and that they were supported to make decisions regarding their baby (79% from 62%).

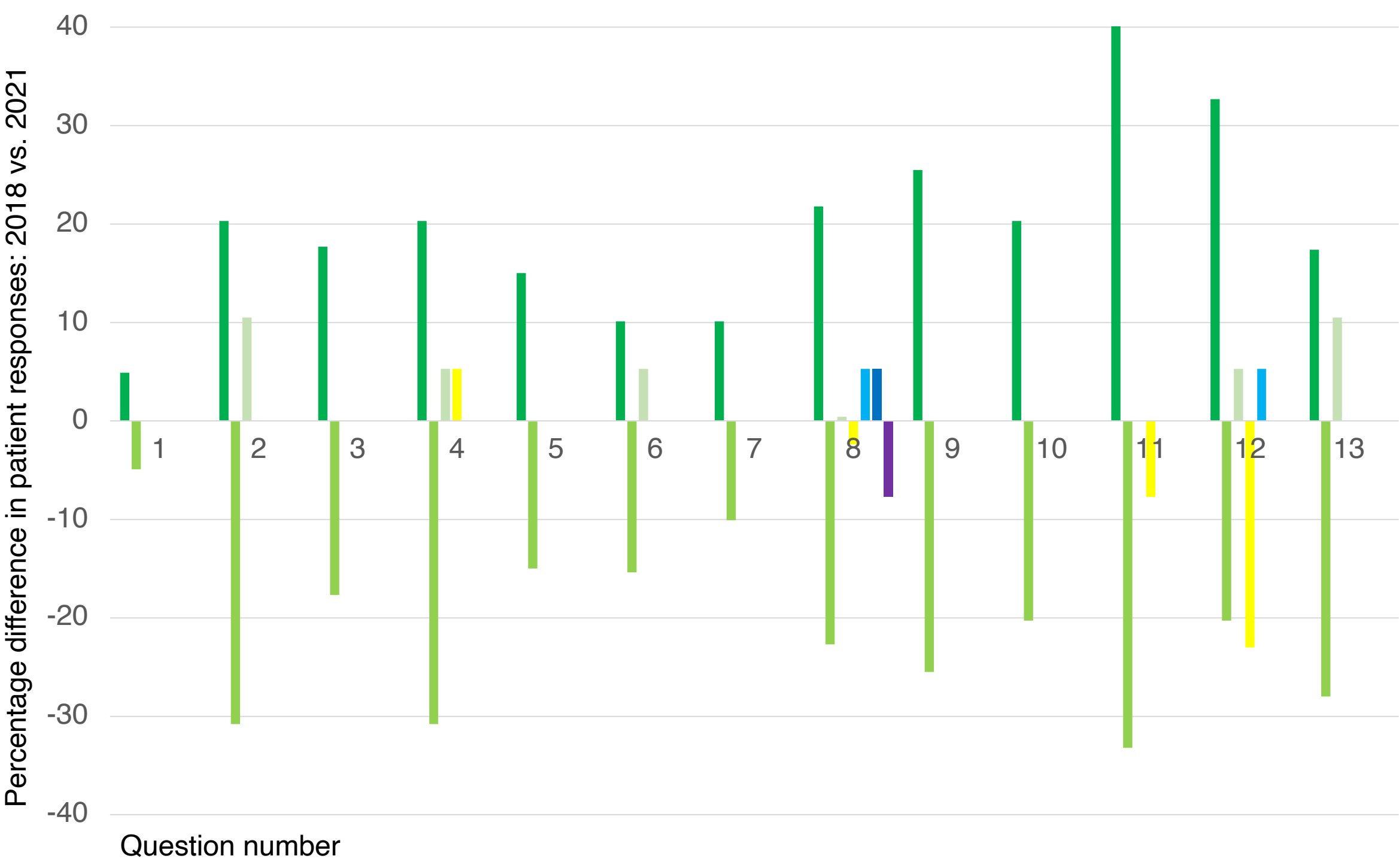
Figures 2 & 3 show the proportional percentage change in responses. The decrease in 'agree' with corresponding increase in 'strongly agree' in 27 of the 28 domains demonstrates that responses in 2021 were almost universally more positive than in 2018.

In 2021 the only statement to which a lower percentage responded with 'strongly agree' was birth partners to statement 7, which was '*I feel the information provided in advance prepared me well for what to expect on the day*'. Across both groups the lowest level of agreement was with this statement. However, in 2021 50% strongly agreed which was an improvement from 48% in 2018.

2021 respondents were asked '*Do you feel COVID precautions have had an impact on your experience of this elective section?*' Only 43% felt they had: 27% of these noted the impact was minimal; 40% of these explained they were only significant in limiting the time spent together prior to delivery. Due to the pandemic, partners can now only join patients once they reach recovery ahead of their section.

Of the 38 responses collected, 32 respondents expressed gratitude and offered positive comments in their free text boxes, some of which are included in figure 1. The six who did not left all free text boxes blank.

Percentage difference in patient responses from 2018 to 2021



Percentage difference in birth partner responses from 2018 to 2021

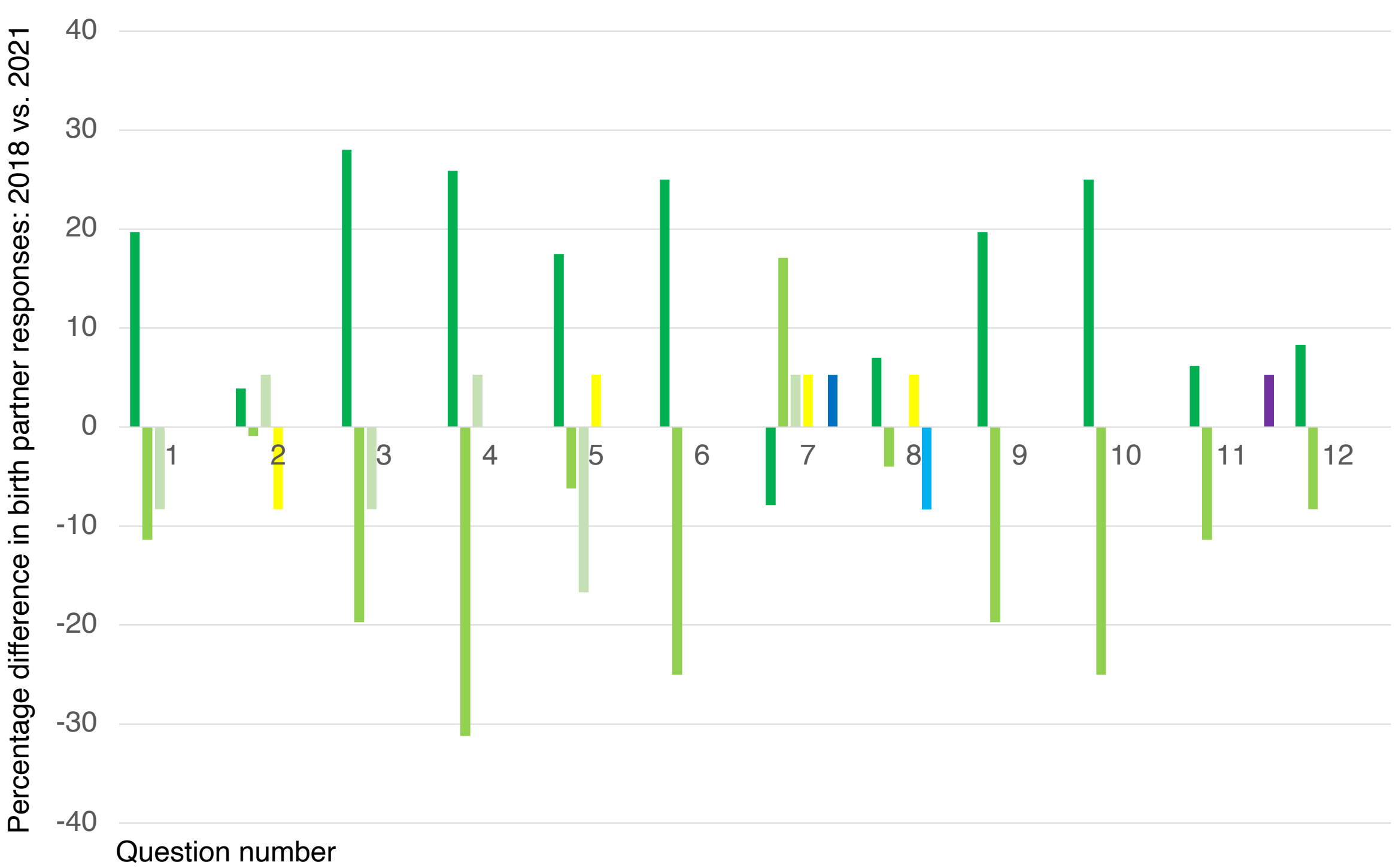


Figure 2: Birth partner responses to the following statements (2018 vs. 2021):

- Staff introduced themselves to me.
- Staff were readily available to talk with me on the day.
- The staff explained everything to me in a way I could understand.
- The care provided to me met my expectations.
- I felt well informed throughout the day.
- I felt treated with respect on the day.
- I felt safe at all times.
- I feel the information provided in advance prepared me well for what to expect on the day of my section.
- I felt comfortable with how staff communicated to me throughout the operation.
- I felt the level of noise in theatre was acceptable to me.
- I felt the staff were supportive of my partner.
- I felt involved in the decisions about my baby in theatre (e.g. who would hold them).
- I felt supported to make choices about my baby in recovery (e.g. feeding, skin-to-skin).

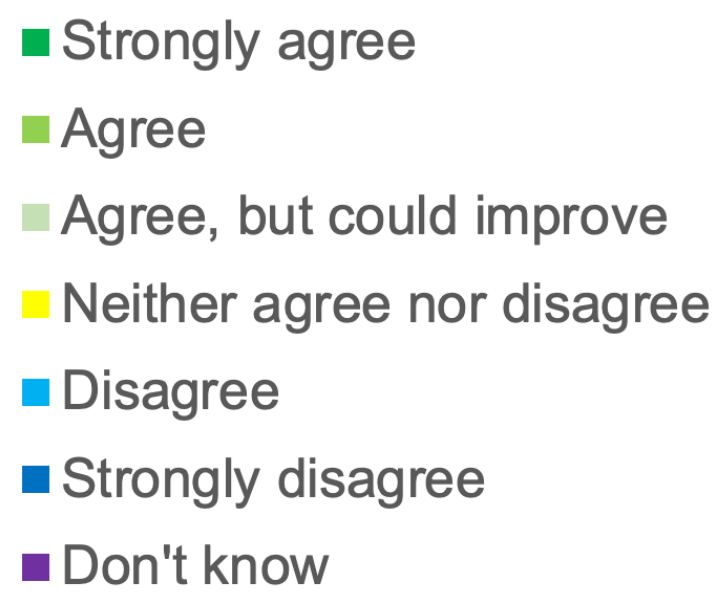
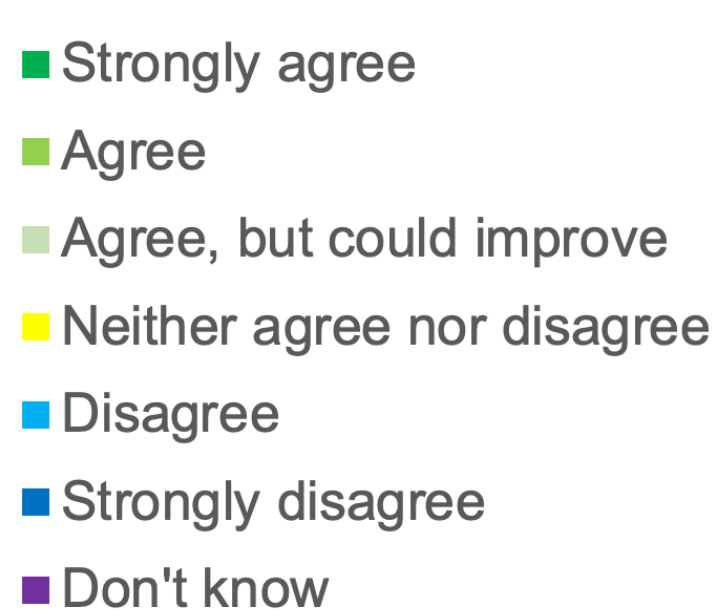


Figure 3: Birth partner responses to the following statements (2018 vs. 2021):

- Staff introduced themselves to me.
- Staff were readily available to talk with me on the day.
- The staff explained everything to me in a way I could understand.
- The care provided to my family member met my expectations
- I felt well informed throughout the day.
- I felt treated with respect.
- I feel the information provided in advance prepared me well for what to expect on the day of the section.
- The experience of getting changed and waiting to join my partner in theatre was what I had been expecting.
- I felt supported and made to feel comfortable by the staff in theatre during the operation.
- I felt the level of noise in theatre was acceptable to me.
- I feel the staff were supportive of my family member.
- I felt included in the care of my baby once they were delivered (e.g. seeing them during midwife checks, cutting the cord, holding them).



Conclusions:

The QEUH maternity department has achieved overall higher levels of satisfaction in 2021 than in 2018 despite changes in procedure driven by the COVID-19 pandemic. The greatest impact felt was the limitation on time that could be spent together prior to delivery. The area with most scope for improvement remains the provision of clear advance information and while satisfaction has increased improvement efforts have been hindered by the reduction in face-to-face appointments, which means patients do not receive paper information booklets (figure 4). The volume of positive feedback provided exceeded the expectations of this study, reflecting the positive impact of this team on patients and birth partners, and confirming that their expectations are being met.

Acknowledgements:

With thanks to Dr. Frances Lanaghan for sharing her 2018 data

Figure 4: The 'Enhanced Recovery after Elective Caesarean Section' booklet provided at patients' final antenatal appointment, provided by Greater Glasgow & Clyde health board.

