

Survey of Mothers giving birth in 2016 regarding Maternity Services in East Sussex

■ Your Postcode Area

■ Date of Birth of child

■ Gender of child

■ Was this the first, second, third or other child of mother?

■ Where born? (✓please tick as appropriate)

☐ at home ☐ in transit ☐ in ambulance ☐ at hospital / birthing centre,

If hospital or birthing centre which of the following:

☐ Hastings ☐ Eastbourne ☐ Crowborough ☐ Pembury ☐ Haywards Heath

☐ Brighton ☐ Redhill ☐ Other

If Other, where was it?

■ Did you wish to give birth at a location with obstetricians on site?

☐ Yes ☐ No

■ Were you transferred during labour?

☐ Yes ☐ No

If Yes, from where to where?

■ Did you require obstetric intervention during birth? ☐ Yes ☐ No

If Yes, was this for an: ☐ Epidural ☐ C-section ☐ Other

■ Did you have an appointment with an obstetrician before birth?

☐ Yes ☐ No

If Yes, where was it?

■ **How do you rate the pre-natal services you received?**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Poor

■ **How do you rate the birthing service you received?**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Poor

■ **How do you rate post-natal services you received?**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Poor

■ **If you were to have another child would you -**

Wish to give birth at a location with obstetricians on site:

☐ Yes ☐ No

Choose to give birth at Eastbourne District General Hospital if a full obstetric service were available?

☐ Yes ☐ No

■ **Are there any comments you would like to make about the maternity services offered to you?**

☐ Yes ☐ No

Please use this space for your comments.

Thank you for completing this survey.

Please send back in the Freepost envelope provided.