

Submission
No 749

INQUIRY INTO BIRTH TRAUMA

Name: Mr George Canney

Date Received: 10 August 2023

Partially
Confidential

I have worked in the NSW child protection area for the last 15 years I am now retired. I am the paternal Grandfather of the child.

In August 2018 one of my 4 sons and his wife were having their first child in the Hospital. Unfortunately, their experience of giving birth was very traumatic. This was due to a very unprofessional attitude and manner of care given by some of the midwives and Doctor who attended the birth.

I was asked to attend the hospital by my son and daughter in law 2 days after the birth as they were both traumatized and wanted to take their baby and go home to a safe supportive environment.

I can now only give an account of what I witnessed personally in the pursuit of just being able to leave the hospital and arrange support for the mother and child thereafter. Below are notes from that event. Perhaps this will give some idea of how things can go very wrong especially after a traumatic unsupported birth experience.

The complaint that I made (with the permission of my daughter in law and son) was to
MINISTRY OF HEALTH NSW. Please see below:

24/8/2018

SPOKE WITH: AND HEALTH phone (Asked for relevant area and person)

SPOKE WITH: CHILD AND HEALTH MATERNITY BRANCH (asked to speak with person in charge).

Received a call back from MINISTRY OF HEALTH NSW.

I explained what had happened with paediatrician and discharge regarding threat to withhold post-natal home visit services. Only reason given 10% reduction of birth weight with a (9lb baby).

Also, general attitude from midwives regarding comments like 'wants a home birth in hospital' etc.

I gave the following account to

Contemporaneous: NOTES FROM MIDWIFE CHECKING BABY BEFORE DISCHARGE.

- Parents informed staff that they wished to discharge from the hospital in the afternoon 2.28 pm so Mother could rest, relax more, establish breast feeding and not be given so much different advice regarding establishing feeding for the baby. Staff finally agreed to take blood tests from and weigh the baby before discharge.
- Also, staff informed us that the paediatrician would have to check the baby and give the ok for the baby was clear to leave the hospital.
- Blood test was done and baby was weighed (paternal Grandparents were both present in the lounge area while this was done). The midwife stating after checking the weight several times that the baby was now according to her calculations 9% under her birth weight.
- Midwife then said that the baby and mother should stay in the unit until the baby gains more weight.

- Maternal g/m said "yes but she is a big 9lb baby" and they feel uncomfortable in the hospital environment due to the lack of support they have received.

Several times in the mid to late afternoon parents asked staff to please give a time when the paediatrician would be available to see and check the baby. Response from staff was that the paediatrician could come at any time as they are busy in the paediatric ward.

- My son asked me if he and his wife had the right to take the baby home from hospital. I replied yes you do as long as there is no substantial medical reason to keep the baby at the hospital.
- Parents waited for hours then said we are going to go home at 6pm.
- Staff then organised the paediatrician to come in the next 15 minutes.

NOTES FROM PEADIATRIC MEETING WHICH TOOK PLACE IN THE PRIVATE ROOM. (Approximate time 5.30 pm)

Present: Paediatrician DrPaternal Grandparents, parents and baby.

Please note: During this 10-12 minute meeting at no time did Dr.... look at or offer to check the baby.

- Dr stood at the end of the mother's bed and informed us who she was.
- Dr said that she had been briefed by the maternity staff and informed that the baby's weight was 10% less than her birth weight.
- Dr..... went on to say that when this is the case the mother and baby should remain in the ward until breastfeeding and milk to the baby is established and the baby had gained more weight.

We offered as rationale for wanting to return to the home environment the following:

- Baby's birth weight was a large 9lbs.
- The reading of the baby's weight is according to the recent weighing just on the 9% under birth weight.
- The mother is a very private person who has gone through what was a traumatic birth and is finding it difficult to relax with so many different staff members coming and going and offering different opinions of how to establish breast feeding. This is in fact impeding the establishment of breastfeeding and therefore the baby's weight.

Dr responded:

- I am worried that the baby will lose more weight when she goes home as staff will not be there to check that everything is progressing.

P/gf said:

- My wife has breastfed successfully our 4 children and has organised a month off her work (she is a Psychologist) she will be staying with the parents at their home the whole time to support them and the baby.

Dr responded:

- It can be very dangerous for the baby if she loses further weight.
- This in fact happened with my first baby because I went home too early and thought everything would be fine. But my baby after some days soon became dehydrated and I had to return to the hospital with the baby and I don't want this to happen to you.

P/gf said:

- "I believe that having not only my wife supporting them but also the hospital offers a home visiting service by the midwife and they would be able to check on the baby's progress".

Dr..... responded looking directly at the mother:

- "I am advising that you and the baby stay in the hospital so if you decide to self-discharge without my permission then you will not receive the hospital outreach home visits". (Mother became visibly very upset as observed by her crying and with a very distressed look on her face).

Father, m/gm and m/gf all commented that this is a form of punishment for the parents deciding they would prefer to return home with their baby.

P/gf said:

- "So they do have the right to leave the hospital with their child"

Dr said:

- "Yes they do but I am advising they stay"

P/gf said:

- "I would really like you to reconsider offering the home visit outreach as this is what they were told would happen and would allow you to still monitor your concerns with the baby".

Drsaid:

- "No I cannot offer the service as you will be self-discharging from the hospital and this is hospital policy".

Mother, father, p/gm and p/gf all commented words to the effect:

- This is really a punishment directed at the parents.

P/gf said:

- It is in fact negligent to withhold a service designed to monitor and support a newborn and her mother especially as you have raised concerns regarding the baby's weight.
- "If this is policy it should be changed"

Dr Said:

- "It is the policy of the hospital".

Father then said that we are leaving to go home. I supported my daughter in law and son to leave the hospital with their new baby. They were extremely distressed. We arrived at their home to a safe nurturing environment. Over days Breast feeding was established and the baby did well and gained weight.

End of notes:

was very disappointed in the hospitals attitude, comments and threat to withhold services.

said:

- "There is no policy or procedure that allows refusal of care to a new born and her mother self-discharge or not".
- In fact, if there are concerns more planning and support should be offered.
- Advised to contact the complains section of Local Health District Patient Advocate Service
ph: can give verbal or written complaints or both.
- stated that perhaps the local hospital has some protocol in this area. I then noted and she agreed that no protocol has the authority to override 'GOVERNMENT POLICY AND PROCEEDURE'.

Most importantly requested that when my daughter in law is well and strong enough to please phone her direct number so she can discuss and apologise for the service you received and did not receive. said she was very sorry your experience was not a positive one as you should have received. Again, she said to please give her a call.

End of account:

I can now tell you that over the next 4 years to the present day the post traumatic harm that was caused to my daughter in law, son and the paternal Grand mother from this hospital birth has been devastating to their (especially the parents) personal well-being and relationship.

In my previous work I have counselled women who have suffered obstetric violence in the Hospital and it has an extremely negative outcome on their physical and mental long term health.

Birth should be a positive experience! Other countries like Canada, New Zealand and some European countries use continuity of care as a basic service with options of home birth support to ensure positive outcomes.

I suggest we go to our neighbour New Zealand and repeat what is working the best for mothers and baby's.

Many thanks George Canney