

Submission  
No 787

## INQUIRY INTO BIRTH TRAUMA

**Name:** Ms Ellouise Davis

**Date Received:** 8 August 2023

---

Partially  
Confidential

This is the letter of complaint I wrote 3 months after giving birth and receiving none of the promised follow up or debrief. I waited another 4 months for any response.

Good morning,

I would like to lodge a formal complaint about my treatment and lack of follow up during my admission 2/12/2020-10/12/2020, when I gave birth to my daughter on 05/12/2020.

My complaint concerns treatment of me and my partner primarily by two nursing staff and two doctors but may involve others that I did not or do not recall seeing.

Throughout my admission I had most contact with JMO Dr [redacted] (aka Dr [redacted] I believe). My issue is with how Dr [redacted] spoke to me and my partner and her behaviour and course of (in)action after multiple failed inductions, which I believe ultimately nearly cost me my life.

On 3/12 after an unsuccessful cervadil induction, Dr [redacted] and RN [redacted] attempted to put the "Foley's" balloon in place. The way this was managed was rough, unprofessional and unhygienic. It is my opinion that it was this failed procedure that led to the infection that put mine and my baby's life in danger. Dr [redacted] and RN [redacted] each 'took turns' multiple times at trying to get the balloon in, using multiple speculums without disinfecting in between. There was no regard for my dignity, my comfort or for hygiene. They were rough, unhygienic and never sought assistance from more senior medical staff when it became clear that the procedure was not going to plan. I cried out in pain multiple times and asked them to stop, which they eventually did but not after 45 minutes of trying.

After the unsuccessful cervadil induction and unsuccessful and traumatic attempt at using the "Foley's" method, Dr [redacted] suggested that I go home and return in 3 days time. I became very upset and begged for access to a caesarean birth. I was over a week past my due date, extremely uncomfortable and had been contracting for almost 2 days at this stage. I had tried 2 induction methods and was physically exhausted and becoming mentally and emotionally distressed to a point that I have never been before. I begged Dr [redacted] to help me, I wept and I wailed with the pain and frustration I was experiencing and I made it clear that I did not want to go home... that I wanted a caesarean birth.

I let her know that it was my body and my baby and that it should be my choice. On seeing my distress, Dr [redacted] simply said I did not "meet criteria" for access to a caesarian birth, at which time I left the room sobbing uncontrollably and Dr [redacted] commented to my partner that I was being "irrational". It was at this point that I no longer felt that my treating team held my best interests as a priority. It is at this stage or earlier that I should have been seen by a Senior MO. It is clear to me that Dr [redacted] did not have the experience or personal skills to manage this situation and I should have been seen by a more experienced clinician. I firmly believe it is her and RN [redacted] actions in trying to use the "Foley's" method and then Dr [redacted] inaction at this point which ultimately put my life in danger.

The compromise was to try a third induction method which I agreed to so I wouldn't become home but which was also unsuccessful and involved multiple further cervical examinations which could also have been the cause of my subsequent infection.

Throughout the rest of the admission, Dr [redacted] continued to present as cold and uncaring, even commenting to me during the eventual caesarean delivery that she "was doing all the work" in delivering my baby, despite knowing full well that I had tried for 3 days to have my baby delivered.

Once my condition was unstable and I was transferred to ICU she offered my partner no consolation, no information and no comfort... simply commenting 'Rough day?' when she happened to see my partner in the hallway, rather than seeking him out to keep him informed. Her reluctant apology once I was stable was obviously difficult for her, again lacking in the personal skills necessary for her role. I hope she receives additional training in this area.

As above, I am unhappy with RN [redacted] role in my care and her uncaring manner. As well as her part in the rough and unhygienic attempt at the "Foley's", I was shocked when she suggested that I change my own sheets at almost 42 weeks pregnant and after I had been lying in them for 3 days and they had been soiled with blood after a rough and clumsy cannula insertion by one of the new Doctors. After I asked her a 3rd time help me, she reluctantly agreed but still insisted that I help make the bed. I felt embarrassed and insulted by her behaviour at a time that I was already feeling vulnerable and unwell.

Eventually on 5/12 I was granted access to a caesarean birth. An hour before I was to go into surgery I became extremely unwell with an infection that came over very quickly and very strongly, causing a high fever and vomiting and caused both me and my baby to become distressed and tachycardic. I dread to think what would have happened had I gone home, as suggested by Dr [redacted] and fallen ill like this at home.

After the caesarean, I was taken to the recovery room where there were issues with my blood loss. While I was there a nurse that I believe was CNS [redacted] who had been nattering on over me to her colleagues about her weekend plans and semi-vegan eating habits, but may have been RN [redacted] moved me roughly, causing me pain and when I protested said to me gruffly "We have to check if you're going to bleed out or not." This was rude, wholly inappropriate and caused me immense distress which added to my already unstable clinical presentation. I asked her why she would talk to me like that, I started crying and vomiting and this caused great discomfort to my fresh caesarean wound and further added to my bleeding. I still have nightmares about this statement and can not believe that a member of staff would talk to someone like this when they are in such a dangerous and vulnerable situation. Her cruel and reckless words will stay with me forever and I want her to know that, in hope that she never talks to a patient like that again.

There were huge complications that saw me having to be attached to a ventilator, my organs shutting down, my breathing tubes accidentally pulled out while I was being transferred to [redacted] ICU and losing over 2.5L of blood. It was rough and terrifying. Meantime, my partner was given little to no information or consolation instead overhearing nursing staff talking

about me and how 'it didn't look good'. He was told to go home at 2am while I lay in ICU and our new baby lay in the NICU... he was told 'there is no bed for you' and told 'this has never happened before'. He was not kept informed, he was not comforted and was left to wander the dark hallways trying to find ICU with no directions or assistance. I don't know if it's the

Midwives, hospital nursing staff or attending Doctors that should have been helping but someone should have... he was left alone and thought I was going to die.

Lastly, I am so disappointed by Dr [redacted] We were offered a formal debrief on 04/01/2021 which we greatly appreciated. Dr [redacted] gave us an hour of his time in which he acknowledged the trauma and failings of my admission. He stated that there were 6 things that concerned him and undertook to follow up with the multiple teams involved and meet with us again in 2-3 weeks with a written account of what had happened and the follow up he had undertaken. It is now 3 months since that initial meeting... I have left 2 phone messages and heard nothing back. I did not expect the degree of follow up that Dr [redacted] offered but felt so validated and pleasantly surprised at the extent of what he offered to do, only to hear nothing back.

I am a hospital Social Worker in a very high acuity and stressful setting and came in with much understanding of how stretched resources are and how this can impact on manners and patient care but I never imagined I might actually die. I have requested and reviewed my notes and they offer no comfort. I came in with no health complications except for my age (39) and high BMI but came close to death. I am traumatised about the possibility of ever giving birth again and even question my ability to continue to work in a health system that treats people this way. I am certain that there are other grounds for complaint in the clinical practice of my admission but do not have the depth of knowledge in this area to know what they are. All I can tell you is that me and my partner deserved better.

I hope that we will hear back this time.

Thank you,

Ellouise Davis