

Submission
No 915

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

As an employee of NSW Health, I have always defended the public health system and had always intended to birth through the public health system. I had heard both positive and negative experiences from others who have birthed at [redacted] but remained committed to my decision. The idea of being part of the midwives group practice program was extremely appealing and seemed to align with many of my values and hopes for the birthing experience. MGP, for the most part, was great. It was unfortunate that there were changes happening at the time I was part of MGP and that I didn't get to meet my midwife until late in the process. However, I know others who have had different experiences.

I'd like to acknowledge [redacted] and the work she did with me. [redacted] always gave me all the time I needed during our appointments and she answered all of my questions and gave me any reassurance that I needed. [redacted] is compassionate, warm and approachable and I felt extremely supported by her. I would also like to mention the other midwives in MGP who supported me in the earlier appointments. They were also supportive, helpful and kind and I would have gladly worked with any of them.

Despite this, my birth experience was extremely traumatic, and my entire birthing experience at [redacted] was atrocious. I spent a great deal of time researching and educating myself about labour and birth, pain relief options, the time after the birth and breast feeding. Unfortunately, almost all of my hopes and desires for these stages did not come to fruition. I have outlined below the occasions at which I felt my experience could have been avoided altogether or at least improved.

The Birth:

- Considering I was part of the MGP, there were an awful lot of people who were involved in my labour/birth process - an excessive amount of health professionals were involved in my care and were present at the birth of my child.
- I underwent numerous vaginal examinations, performed by numerous different people in a short amount of time.
- During one of these VE's one of the doctors called the other staff members over and pointed the light at my vagina to show everyone my baby's head because you could see a thick head of hair. During this time I was 8 cm dilated, lying on my back, having had multiple examinations already and did not have any pain relief.
- There was some concern about the baby and a fetal lactate sample was taken. Thirty minutes later another sample was taken and a decision was made that baby was too distressed and needed to come out as soon as possible. The decision was made that I needed an emergency C-section as I would not be able to deliver baby vaginally in enough time.
- After this decision was made, my baby wasn't born for another 80 minutes.
- The doctor who decided I needed an emergency C-section did not appear again.
- I was prepped for theatre. During this time I was placed on a bed ready to be transported. The bed was squeezed into the birthing suite and my

husband and midwife were unable to access me as there was not enough room. I was left alone on my side, transitioning, without any pain relief for a long time before leaving the birthing suite. I believe I was 10cm when I arrived in theatre.

- The anaesthetist informed me that he would administer a spinal block and outlined the risks. I signed my consent. However, this was never administered. No other pain relief was provided or offered.
- When I arrived in theatre we did not immediately enter the operating theatre but stopped in the bay next door. During this time, another VE was completed and the doctor decided that the baby could be born vaginally and informed me that I would be pushing the baby out instead.
- Fortunately, some staff advocated that it was not appropriate for this to happen in the waiting bay but to move me into the operating theatre. It had been suggested that the process begin while in this space.
- My husband had been taken to prep for surgery and was unaware of the changes that had occurred. He was whisked into this waiting bay and was overwhelmed by what was occurring and the amount of staff who were present in such a small space and that the emergency C-section was no longer occurring.
- The Cytocin drip had been ceased in preparation for surgery, my contractions had slowed significantly, I was lying on my back, legs in stirrups, shaking uncontrollably as my body was in shock, with no pain relief and was told that I needed to push the baby out, surrounded by more people than needed to be present and watching.
- The vacuum was used to assist with bringing baby down.
- I was told that I was having an episiotomy.
- I did not get to have skin to skin, and neither did my husband, as baby was taken away and wrapped in a blanket.
- There was no delayed cord clamping.
- The doctor who was stitching me up after the birth placed her fingers in my anus without notice (to check for tearing) and then informed me they had forgotten I hadn't had a spinal block after I startled at the feeling.

I understand that certain decisions were made because of the concern for the baby and her level of distress and at the time, I did not oppose these decisions because I was concerned for the welfare of my child. However, the events that unfolded after this decision had been made did not align with the decision.

The way in which I delivered my baby was completely barbaric and left me considerably traumatised. This meant that I spent the first weeks / months of motherhood trying to process this experience and heal from it while taking on a new role as a mother for the first time.

The Maternity Ward:

On the first evening, the afternoon and night shift midwives were absolutely beautiful. They were gentle and kind and compassionate and took good care of my baby and I, but that's where it stops.

- I received pain relief in an adhoc manner.
- My baby didn't latch and I was not offered any support with this.
- I was told to start pumping, which I did.

- I was given unhelpful information about how and when to feed my baby.
- There were shifts where the midwives would introduce themselves at the beginning of handover and we wouldn't see them again for the rest of the shift, or just when they gave me paracetamol.
- I was told I could get ice packs for my perineum myself from the communal freezer in the kitchen.
- As we were awaiting discharge I was informed that the team were extremely concerned about my baby as I had not been feeding her enough:
 - I was never shown how to feed her.
 - I noticed a midwife syringe feed some of the colostrum I had brought with me so continued to feed her this way.
 - I was told I would have to wait to get a nipple shield when my milk came in.
 - It was assumed that there was a problem with my nipples.
 - I was pumping and hand expressing for every feed and then syringe feeding.
 - I was never told how much to feed or how often.
 - I had to continually request more syringes.
 - I asked how often I should feed her and was given misinformation.
- I had been pumping and expressing so much that I had a supply of excess colostrum that I would have gladly fed to my baby if I had been assisted with this.
- I had not been given any support or assistance with helping baby to feed from the breast.
- Prior to this, no concerns had been raised. When I expressed my utter shock and disbelief and that I had not been informed about these concerns, the midwife responded by saying – “I know who was on last night and I find that very hard to believe.”
- An assumption was made that I would be bottle-feeding on discharge and I was referred to the lactation consultant.
- The special care nurse was called to check my baby for jaundice and to check her blood sugar levels.
- We then sat in our room for the remainder of the day with no further support or information while we waited for the lactation consultant.
- The midwife who was arranging our discharge gave her afternoon handover outside our room. She spoke extremely loudly and recounted the situation and her thoughts on the matter, suggesting that I had been neglectful and had lied about the situation. My husband and I could hear everything and were, again, left feeling hurt and unsupported.
- At 3:50pm we were seen by the LC. We were informed, by her, several times, that she finishes work at 4pm.
- We were given a very speedy education session on how to feed baby with a syringe and feed line through a nipple shield which I had never seen or used before and then we were left to go home.
- We were allowed to borrow a breast pump for two days and there was no follow up plan for after this.

- I was left to try and feed my baby like this during the early days of cluster feeding and bonding time. Needless to say, it was utterly traumatic and difficult.
- I was given the wrong size shield and my baby couldn't latch onto that either. My nipples were cracked and bleeding and I was informed to rest them and bottle-feed EBM over the weekend.
- The MGP team helped to book me another appointment with the lactation consultant the following Monday. I was desperate for help.
- During this appointment with a different LC my baby was not assessed or looked at. The LC did not observe a feed or an attempt to latch baby on the breast. We were given a different sized shield and told to keep practicing.
- I was told that 'the damage has already been done' when I expressed concern about introducing the bottle, despite me only having done this under the instruction of the LC.
- I was discharged from hospital with no real sustainable means of feeding my baby. As a result, she lost a significant amount of weight. We found out at 3 weeks that she had a substantial tongue-tie, which was impacting her ability to latch and feed, which had not been picked up prior to discharge.

I attended breast-feeding information sessions prior to giving birth. I had also been expressing colostrum in the lead up to the birth and brought it with me to the hospital. It had been my desire to breastfeed and I was committed to doing this. As a first time mother, I did not fully comprehend how dire the situation was as I was simply following the instructions / suggestions provided by the health professionals. I cannot comprehend why we were neglected and not provided with support during those early hours / days.

I have felt that the team at _____ completely failed my baby and I and we are still working hard to undo the damage that was done in those first few days. As a fellow _____ employee, I would hope that no client / patient / consumer will ever have an experience like this during their treatment at _____.