

## Inquest into the death of Baby M

Baby M died a few hours after birth at the Gladstone Base Hospital on 11 February 2016. Baby M was born in poorly condition with sepsis and suffered an injury when a nurse fell whilst carrying to her to another birthing suite.

Coroner David O'Connell delivered his findings of inquest on 21 September 2018.

The departments named in this response will provide implementation updates until the recommendation is delivered. Further information relating the implementation of recommendations can be obtained from the responsible minister named in the response.

### Recommendation 1

Resuscitation tables never use an adapter, and that proprietary brand resuscitation masks only be used on that brand's resuscitation table.

Response and action: implementation of the recommendation is under consideration.

Responsible agency: Queensland Health.

On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:

Queensland Health is considering the coroner's recommendation as it relates to current and future resuscitation medical equipment supplies. A working group comprised of clinicians from Queensland neonatal services advisory group was established to assess potential implementation issues for hospital and health services.

Queensland Health is currently progressing new tender arrangements for infant and maternity care equipment, this includes resuscitation tables and specific resuscitation equipment. The tender specifications will clearly stipulate that offers for resuscitation tables must be accompanied by offers to supply fully compatible accessories and consumables without the use of an adaptor. The Strategic Procurement Branch will coordinate and manage the request for offer process and evaluate tender submissions for the supply of resuscitation tables.

The working group will identify issues and develop advice on the use of adapters in hospital and health services.

### Recommendation 2

A bassinet and trolley be available in each birthing suite, and the baby is only to be transported from a room by the use of a bassinet and trolley.

Response and action: implementation of the recommendation is in progress.

Responsible agency: Queensland Health.

On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:

Queensland Health established a working group comprised of clinicians from Queensland neonatal services advisory group to determine an appropriate response to the recommendation.

Queensland Health will develop and distribute a communique to all hospital and health services recommending safe transporting practices of neonates.

### Recommendation 3

Expectant mothers be informed about the incidence and issues relating to group B streptococcal disease, and encouraged to have screening conducted, if they choose.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:

Queensland Health developed and published in 2015 the *Queensland clinical guideline on early onset group B streptococcal disease* (EOGBSD) and parent information on group B streptococcus (GBS) in pregnancy. All hospital and health services were notified at the time of publication.

The Queensland clinical guideline supports the coroner's recommendation to inform pregnant women about GBS and EOGBSD as evidenced by the following recommendations contained within the guideline (Section 1.3 clinical standards):

- discuss EOGBSD and intrapartum antibiotic prophylaxis (IAP) with women during the antenatal period in a manner that supports informed decision making
- document the discussion and decisions about IAP in the healthcare records (including handheld pregnancy health record)
- confirm decision prior to any healthcare intervention as per routine practice
- routinely provide written information about GBS and EOGBSD to women during the antenatal period—refer to Queensland clinical guidelines parent information about EOGBSD.

The Queensland clinical guideline parent information on GBS provides information about the transmission of GBS, the incidence in Queensland, the approach recommended in Queensland (risk factor approach) and prevention strategies.

The parent information and clinical guideline are freely available to download and/or print from the Queensland Clinical Guidelines [website](#).

The minister recognises that the risk factor approach for the management of EOGBSD (as opposed to the universal screening approach) was endorsed as the preferred recommendation for women in Queensland after extensive review of the evidence and statewide consultation:

- Increased compliance to a single approach is likely to achieve a greater reduction in the incidence of EOGBSD than either using both approaches together or changing the approach. Therefore, the risk factor approach should continue to be preferentially recommended to women in Queensland.
- Recent evidence supports the effectiveness of the risk factor approach in Queensland (Chen J, et al. 2018. *Early-onset group B streptococcal disease in a risk factor-based prevention setting: A 15-year population-based study*, ANZJOG;1–8. DOI: 10.1111/ajo.12891).
- The guideline recognises that screening may be preferred by some women and supports informed choice, stating 'If requested, GBS screening at 35–37 weeks gestation may be appropriate for individual women—offer information about the implications of the GBS screening test'.