

**Management of fetal distress by midwife
(01HDC10714, 27 June 2003)**

Independent midwife ~ Charge midwife ~ Public hospital ~ Non-progression of labour ~ Response to fetal distress ~ Transfer of responsibility ~ Workload ~ Rights 4(1), 4(2), 4(5)

The parents of a baby born with severe neurological damage complained that an independent midwife and the charge midwife at a public hospital:

- 1 did not recognise signs that the woman's labour appeared not to be progressing, or that the unborn baby was in fetal distress;
- 2 were uncertain as to who had primary responsibility for the care of the woman and her unborn baby during labour; and
- 3 did not obtain assistance from other available providers or ensure that the urgency of the situation was communicated to those providers.

The Commissioner held that the independent midwife did not breach Right 4(1) because she recognised the developing fetal distress and that the labour was not progressing as expected; but breached Rights 4(2) and 4(5) because she failed to effectively communicate her concerns to other providers and seek assistance. The midwife should have been more insistent about the need for a medical review, and should have requested that the charge midwife call one of the senior obstetric staff from the clinics when it became apparent that the registrar would be delayed.

The charge midwife did not breach Right 4(1) because the independent midwife did not effectively communicate her concerns, so it was unreasonable to expect the charge midwife to recognise, on the basis of one fetal heart deceleration and a request for medical review, that the independent midwife did in fact have serious concerns about the woman's labour. She did not breach Rights 4(2) and 4(5), because her failure to seek assistance from other available providers was reasonable in the circumstances.

The Commissioner commented on the uncertainty that can arise where an independent midwife calls for assistance in a hospital setting but the parties are not clear about their respective responsibilities. The independent midwife has primary responsibility for her client unless and until she transfers that responsibility. There were insufficient experienced medical staff on duty at the hospital to ensure safe management of patients.