

Statement of: **Mother Q**

Form MG11(T)

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was then admitted and not allowed to leave the hospital until **Child Q** was delivered at 31 weeks due to a placenta abruption. It had been intended that **Child Q** would be delivered at 34 weeks; however the placenta abruption changed this.

When I went down to surgery which was for a seventh time, I was told at this point that it was only a small bleed; however I then had a heavy bleed which turned into an emergency situation where I had wires and drips all over me in my arms and neck. I had asked for **Father Q** to attend due to the situation. I was put under general anaesthetic in order to have the procedure.

I recall that when I woke up from the anaesthetic, I had to wait for 12 hours before I could go and see **Child Q** and was reliant on other people to help me. I was told that **Child Q** was on a ventilator to help his breathing. During the pregnancy, I was given steroids in order to mature his lungs due to his prematurity. After his birth **Child Q** contracted possible sepsis and was placed under a jaundice lamp in Room One on the Neonatal Unit at the Countess of Chester Hospital. Room One is for the most ill babies and is the highest dependency room in the unit.

Child Q had wires into his belly button, a feeding tube, an oxygen mask / tube directly into his airway and a cannula in his hand.

I remember that I was taken to the Neonatal Unit of the hospital at around 4pm that day which was very difficult for me **I&S**. Once there I didn't get to hold him, but was able to put my hands through the side of the incubator. When I talked to him, he opened his eyes for the first time.

On day 3 after his birth, **Child Q** was taken off the oxygen and moved to room 2. He was breathing on his own with no aid from a ventilator. He still had a feeding tube and jaundice light. At the end of that day, we were told that he had a chest infection and would have to go back onto oxygen and back into room one. I was really upset at this point and far too upset to go down to see him; therefore **Father Q** went down to the unit.

We were not told of any issue with **Child Q** and **Father Q** was told that **Child Q** had a chest infection. The staff told **Father Q** that their main priority was to treat **Child Q** and at no point did they say that they were saving **Child Q**'s life or that he had had a collapse. I think that they played everything down to protect the parents and prevent panic, but I feel that this was not fair to us as we needed to know what was happening

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to our child. When you are at the hospital, nothing is in your control - you don't have your baby there to feed. You're reliant on them, you pump breast milk and then provide it to the staff for them to feed the baby.

When **Child Q** was about 1 week of age, we were told that he had a bowel infection known as NEC. As part of the treatment, they had to drain his stomach because the contents were infected, he was given three types of antibiotics and x-rays. He was then sent to Alder Hey Hospital to be seen by the surgeons as it was possible that part of his bowel might have needed to have been removed. Luckily this did not happen and **Child Q** was treated by antibiotics. He was not allowed milk or feeds, had cannula in his feet and both hands so that he was getting enough fluids into his body. **Child Q** did not have any milk for over a week and we had to wait until his stomach contents were clear in colour until he could feed again.

After the infection, we were told that they would need to carry out a brain scan on **Child Q** within 24 hours, this did not happen and I chased this when 48 hours had passed. He then had a scan which showed that there had been a small bleed on his brain, but they told us that there was nothing to worry about so we took their word for this as I thought that this was routine for premature babies and that they were being thorough with **Child Q**'s treatment. Now when I look back, I think that they were concerned about the collapse which at that time we were not aware of and only found out later during the Police investigation.

In terms of staff members, I don't remember any names of the staff who were working on the day and night shifts. When we went up to the unit, staff would introduce themselves and say that they would be looking after **Child Q** for that particular shift.

The night time nurse, I recognised her face when her picture was in the press and she would have done the night time feeds, she didn't stand out as either good or bad and I don't recall talking with her either. I do remember that I did see her several times during the 5 weeks that **Child Q** was there. I think that this nurse did both night and day shifts also.

There was also an older nurse who was snappy with me and we did have an argument and when I asked her something she was not patient. I found it frustrating that I was having to ask someone else to feed my baby. They needed to be more patient with me and understand that I was frustrated.

In terms of the way the unit worked, in Room 1 – there would be more than one nurse and have a designated baby or two to look after.

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