

## CORPORATE OFFICE

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9(2)(a)

### RE Official information request CDHB 10472

I refer to your email dated 5 November 2020, requesting the following information under the Official Information Act from Canterbury DHB. Specifically:

**For the most recent year data is available:**

- 1. how many women gave birth at Christchurch Women's Hospital because there were concerns for her safety? Can you provide a breakdown of those women by age and ethnicity?**

Between /September 2019 and October 2020 there were 277 women who gave birth at Christchurch Women's Hospital because there were concerns at some point in her pregnancy for her safety. Please refer to **Table two** (below) for details. **Please note:** We are declining to provide information where numbers are 5 or smaller pursuant to section 9(2)(a) of the Official Information Act to protect the privacy of individuals. We have also aggregated the age bands under the same section of the Act for this question and in our response to question 2.

- 2. how many women booked to give birth at Christchurch Women's Hospital were supported with a safety plan for their birth as part of the Integrated Safety Response? Can you provide a breakdown of those women by age and ethnicity?**

Between November 2019 and November 2020 there were 16 women where it was an Oranga Tamariki plan that the parents were unsafe to discharge home with their baby at the time of birth. For this group of babies, they often went into the care of family and sometimes ministry caregivers (essentially an 'uplift').

For the remainder of the women who had a referral due to concerns about safety there is a social work, Whanau ora/ Oranga Tamariki plan alongside working with the woman and her caregiver to ensure both mum and baby are safe to return home or stay with other family on discharge from hospital, often with protection orders etc in place.

These women identified as: NZ Maori, NZ European/Pakeha and Pacific heritage/ethnicity and were in the following age bands (refer to **Table one** (below):

**Table one: \***

Age group	Number
20-25	6
26-30	5
31-40	5

**\*Note:** We are declining to break this information down any further pursuant to section 9(2)(a) of the Official Information Act i.e. “...to protect individual privacy”.

It is important to note that Women who are seeing a social worker are only required to deliver at Christchurch Women’s Hospital for social reasons in the following circumstances:

- When there has been physical violence towards the woman in her pregnancy
- When the woman is being transported from Prison
- When there is significant mental health concerns and a Mothers and Babies plan advising so
- When there has been maternal drug use
- When the partner has previous concerning convictions such as a sexual offence.
- When there are significant care and protection concerns and baby is not remaining in the care of the parents and/or they need 24/7 supervision when baby is born.

Women are required to deliver at Christchurch Womens Hospital (CWH) in these circumstances to ensure safety for the woman herself, baby, the staff and other patients, and access to appropriate supports if required. In cases of family violence or where there are concerning convictions relating to the partner, it allows the partner to still be able to be part of the birth of their child while minimising risk for everyone else involved. This includes supporting prisoners to attend the birth of their child where possible. It also means that if a Woman is in a situation where she doesn’t want a particular person or persons to attend the birth for safety concerns, then we can support her with this and safely manage it.

In cases where there is a maternal mental health concern plan of care we have psychiatric support available in our hospital who work closely with mental health services. In cases where maternal drug use has been a concern, there is a much higher risk that baby will require further medical intervention when born and may require a period of monitoring after birth by the neonatal team usually in the neonatal unit.

We understand what a precious time it is when a baby is born and try to accommodate and respect the wishes of the woman and her whanau wherever possible. Unfortunately, in the above circumstances it means that women may not be able to be with their baby the whole time but we all try to accommodate as best we can for these babies who need extra monitoring and/ or their mothers who need additional oversight. The hospital these women birth at needs to have the additional supports that are not available at primary units.

If the woman is contactable then the reasons why they are required to deliver at Christchurch Women’s Hospital is discussed with them and the social work team, their LMC and the midwives/ medical team at Womens will work with them to plan what other supports they need to try and make the birth experience as positive as possible. They are often able to have longer stays at Christchurch Women’s Hospital due to the monitoring and allowed to have appropriate support people stay with them wherever possible.

**3. how many times were security called to respond to a perceived/real threat of violence to a woman at Christchurch Women's Hospital before/during/after giving birth there?**

The Canterbury DHB have identified 14 incidents involving security at Christchurch Women's Hospital between November 2019 and November 2020.

- Partner aggressive to staff
- Partner aggressive to patient
- Patient aggressive to staff
- Patient aggressive to partner
- Domestic violence / other risk identified, and pre-planned security staff present
- Baby uplift - security staff present

I trust this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz); or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely



Ralph La Salle  
**Acting Executive Director**  
**Planning, Funding & Decision Support**

Table two: September 2019 – October 2020

		Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20
Age Range	15-24	6	10	8	14	<5	9	6	10	10	8	10	<5	8	6
	25-29	11	13	<5	<5	<5	9	<5	5	13	<5	<5	6	<5	6
	30-34	<5	9	5	8	-	<5	6	<5	9	<5	-	6	<5	0
	35-45	<5	<5	<5	<5	<5	<5	<5	<5	<5	-	<5	<5	<5	<5
Agency Contact	ISR	12	28	12	21	10	23	12	18	27	8	13	15	14	10
	OT	13	22	12	13	3	13	11	13	17	5	6	9	10	5
	MH	<5	<5	0	0	<5	5	6	<5	0	6	0	0	<5	<5
Birthing Location	Chch Women's	21	35	17	20	11	19	16	20	25	13	13	15	15	13
	Other	<5	0	0	8	0	<5	0	0	8	0	0	<5	<5	0
Uplift	Yes	0	0	0	0	0	0	<5	<5	<5	0	0	0	<5	0
	No	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ethnicity	NZ European	13	22	10	14	6	10	10	10	18	6	6	7	11	5
	NZ Maori	8	10	5	10	<5	10	6	5	9	<5	5	5	<5	7
	Pacific	<5	<5	0	0	<5	<5	0	0	0	<5	<5	<5	<5	0
	Other	0	0	0	<5	0	<5	0	<5	<5	<5	<5	<5	<5	<5

\*ISR = Integrated Safety Response

\*OT = Oranga Tamariki

\*MH = Mental Health

**Please note: We are declining to provide information where numbers are 5 or smaller pursuant to section 9(2)(a) of the Official Information Act to protect the privacy of individuals.**