

Question on Notice

No. 69

Asked on 14 February 2024

MR R KATTER ASKED MINISTER FOR HEALTH, MENTAL HEALTH AND AMBULANCE SERVICES AND MINISTER FOR WOMEN (HON S FENTIMAN)—

QUESTION

Will the Minister (a) advise how many babies aged 20 weeks or more were born alive after a termination procedure in Queensland hospitals each year between 2015 and 2023 (presented annually) and (b) provide details as to the current protocols in place to care for a baby born in these circumstances?

ANSWER

The table below shows the total number of live births following a termination of pregnancy in Queensland, for 20 weeks gestation or more, with these resulting in an outcome of neonatal death for the calendar years 2015 to 2022:

Termination of pregnancy resulting in live births (with neonatal death outcome) for 20 weeks gestation or more for admitted patients, Queensland

Calendar Year	Termination with livebirth outcome
2015	26
2016	26
2017	29
2018	17
2019	42
2020	35
2021	31
2022	36
2023	not available

In response to part (b), live birth describes a baby where there are signs of life after the birth of the baby is completed, regardless of gestation or birthweight. Signs of life may include beating of the heart, pulsation of the umbilical cord, breath efforts, definite movement of the voluntary muscles, any other evidence of life (as defined in the *Public Health Act 2005*).

The presence of 'signs of life' does not equate to survivability or viability. Initiation of life sustaining interventions at a non-viable gestation is not recommended, as it is not considered to be in the best interests of the child and constitutes futile intervention.

I am advised that decisions about the care appropriate to the individual clinical circumstances are made by the registered health professionals providing clinical care to the woman/family and the baby at the time of the live birth.

The decision as to what care to provide, is informed by a comprehensive assessment of the individual circumstances, including review of the clinical history (e.g. diagnosis of a life-limiting condition in the baby), the best interests of the baby, and the use of expert clinical judgement. The Queensland Clinical Guideline *Termination of Pregnancy* provides best practice guidance for termination of pregnancy care, including in the uncommon event that a baby is born with signs of life.