

TRANSCRIPTION

cpsi Canadian Patient Safety Institute
iscp Institut canadien pour la sécurité des patients
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[0:00:10] March 13th, 2006, I got one of those phone calls that no parent wants to get. It was the police. They said there had been an accident at the Halifax armories. My son was a reservist with the Princess Louise Fusiliers, was 18 years old. His name is Brad Howell. And they said there'd been an accident at the armories and I should come to the hospital. But I thought he must mean a car accident because Brad should have been on his way home. So I called out to my other kids that there had been an accident and Brad was in the hospital and I was going in and I give them a call or I'd let them know as soon as I had any information.

[0:00:50] So I got to the hospital and there were police everywhere and military people, and they just started walking me to the family room. And I just remember thinking, "Please, not the family room. This can't be happening." And I was waiting and a nurse finally came in and I asked her, "How was my son? I want to see my son." And she said, "Hasn't anybody told you?" Told me what? She said he'd been crushed between a forklift and a truck. She said she had no word on his condition and a doctor would be in to see me shortly. And then I saw the priest. And I thought, "Oh, my God, not the priest." And I just knew.

[0:01:49] A few days later, I got a call from the hospital to come in. They had something to tell me. So I went in and they said that when they had rushed Brad into surgery to try to save his life, but when they started to do the autopsy, they discovered that instead of putting the breathing tube into his lungs, it had accidentally been put into his stomach. So any hope he had of survival was taken away.

[0:02:33] They said that his injuries were severe. They thought that maybe he wouldn't have made it. But we never got the chance to find out.

[0:02:45] I felt almost forgotten. I mean, after the initial disclosure, I almost hoped they were like, "Phew, we got that out of the way." I think they were very courageous during the disclosure. They didn't hold anything back. But there wasn't an offer of follow-up or referrals or even, "Here's some bereavement groups if at some point you're ready for that." The military offered, because he was a reservist, they offered a little bit more support. They would send people around every so often. We would get a phone call from the padre, you know, checking in, which was nice, because we were in a place – we hadn't lived in Nova Scotia long. We didn't know very many people. But the hospital itself, there really wasn't any further – they leave you a phone number and say, "Well, we'll call if you have

questions,” but you don't have the strength for that and you don't have the energy. To do anything seems to take – when you're grieving the death of a child, everything takes such monumental energy. And it's really hard to find it. People talk about one day at a time, but it's more like one breath at a time.

[0:04:21] So that was the story of my one son, which led to the story of my other son, who we had just a number of losses in a row. My dad had died just before Brad, and we had a move that took us away from lifetime family and friends. He had a learning disability, so school was always kind of a place of misery for him. At the time, he was 14. He tried to kill himself. And we went through a year of what could only be described as an oxymoron of mental health system.

[0:05:01] He overdosed and I took him to the hospital and they admitted him, but they really kind of didn't do anything. It was more like a babysitting facility. And they made an urgent referral to outpatient mental health. The referral was misdirected. There was great delays in getting treatment because of tracking down referrals that went to the wrong place and people that said they sent them in fax machines that were out of paper. And when I phoned to say, where was this urgent referral? The lady said, “Well, we don't have it here.” So then I phoned the emergency department who said they had sent it and they said, “Well, we sent it.” So then I phoned the other lady and she said, “Well, I didn't say they didn't send it; I said we didn't get it.”

[0:05:47] “Please help us.” And it was just a system that didn't listen and didn't hear. You're already going through so much and you're trying to chase down these referrals and you're trying to, you know. And he would do things. Like, it was wintertime and he'd go off in the woods behind our house and say, “You're going to have two dead sons.” You know, it was just terrible. All the medication on the house, the knives, ropes, anything, I locked in the trunk of my car and slept with the keys. I took a leave from work and then I took a different job with lower pay but better hours so that I was home when he got off the bus and made sure he got on the bus in the morning to school. He was getting into fights at school. He was getting involved with drugs and alcohol, and he was just going down this slope. And I couldn't get anybody to see that a lot of what he was doing was like, it was grief, it was acting out. But they seem to be more interested in how they could meet their needs as a system than how they could meet our needs as a patient and a family. And we were desperate.

[0:06:55] You know, he would make some more attempts. And then ultimately, we went back to – you know, we were still being followed up by mental health. And the psychiatrist said, “Well, I think we can discharge him from mental health care, because, you know, it doesn't seem any serious threat of self-harm.” I couldn't believe it. I just wondered what constitutes a serious threat. What is it going to take? And I don't know if you can imagine the desperation and the vigilance of being that mother.

[0:07:29] Throughout all of this, I still have two other sons with their own gifts and challenges, as all kids do. And I was a single parent for all of my sons for many years.

[0:07:41] So it was almost a year to the day, at this point, he took another overdose that was ultimately almost fatal. He was in fulminant liver failure. He denied that he had taken any drugs or medication. He denied any kind of overdose. It was just a sixth sense. And it was just the lucky accident of finding him in time that separates me from many others that weren't so fortunate.

[0:08:12] The ambulance took him to the adult hospital because they weren't sure how old he was. You know, it was a big kerfuffle. And instead of taking him to the IWK, which was the children's hospital, he was admitted and they had a team there assess him, a psychiatric team assessed him once he was out of the woods and was doing better. And they were extremely helpful, gave us some good direction. And we were able to find some meaningful help through them, which was very helpful.

[00:08:52] And I wrote the IWK Hospital and I asked for a review of his care. And they did do that. And I got an apology. They said there was some very serious, serious gaps in his care, in his follow-up. They said that they had done a thorough review of his chart and his care and his pathway through the youth mental health system or the pediatric mental health system, and that there were so many gaps and misses and opportunities missed where perhaps we could have escaped that hell sooner. You know, perhaps we wouldn't have ended up in a situation where he almost needs a liver transplant. Perhaps he would have been able to be successful and finish school instead of spending his time back and forth in hospital.

[0:09:46] Well, it does give me great joy every day to see how well he's done and that you can heal and that you can come out of the other side when you get the right kind of help.

[0:09:59] I really hope that what people take away from our story or hearing about our experiences is to ask people what they need. "How can I serve you today? How can I meet your needs today?" Don't tell me what I need. Don't dictate what my pathway will be. Join me and ask me what it looks like from my view and how you can help on that on that path. I hope that's what people will remember.

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